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

LOK SABHA
UNSTARRED QUESTION NO. 5027
TO BE ANSWERED ON 1ST APRIL, 2022

LAST MILE DELIVERY OF HEALTHCARE SERVICES

5027. MS. LOCKET CHATTERJEE:

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

(a) whether the Government is contemplating to ensure last mile delivery of various health related services across the country;
(b) if so, the details thereof;
(c) whether the Government is prepared to handle any upcoming COVID-19 wave in the country without compromising daily economical activities; and
(d) if so, the details thereof?

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

(a) & (b): “Public Health and Hospitals” is a State subject, hence, the primary responsibility of providing healthcare services to the people of the country lies with the State Governments. However, Ministry of Health and Family Welfare, Government of India provides technical and financial support to the States/UTs to strengthen the public healthcare facilities reach to the last mile. Support is provided to States/UTs under the National Health Mission (NHM) for universal access to equitable, affordable & quality health care services to all citizens of the country based on the requirements posed by States/UTs in their Programme Implementation Plans (PIPs).

Regarding last mile delivery of various health services across the country, the Government of India has launched Ayushman Bharat Yojana in 2018 which has two components namely, Ayushman Bharat-Health and Wellness Centres (AB-HWCs) and Pradhan Mantri Jan ArogyaYojana (PMJAY). Under Ayushman Bharat- Health & Wellness Centres, all the existing sub centres and primary healthcare centres are upgraded and strengthened as Health and Wellness Centres (HWCs). These centres are envisioned to provide the 12 packages of Comprehensive Primary Health Care (CPHC)
including services for maternal and child health, services to address communicable and non-communicable diseases and services for elderly and palliative care, bringing healthcare closer to the homes of people with an expanded range of services to address needs of the entire population in their area, expanding access, universality, and equity close to the community. AB-HWCs also provisioned to provide free essential medicines and diagnostic services, teleconsultation, and health promotion including wellness activities like Yoga. Under Pradhan Mantri Jan Arogya Yojana (PMJAY), a health assurance scheme, Government of India provides a health cover of Rs. 5.00 lakhs per family per year for secondary and tertiary care hospitalization to cover 10.74 crores poor and vulnerable families (approximately 50 crore beneficiaries).

The Mobile Medical Units (MMU) are supported under NHM to increase the access in remote, difficult, and hard to reach areas. States have the flexibility to deploy more numbers of ambulance and MMUs in hilly, tribal, and remotest areas to provide better coverage of outreach services. Further, to ensure the quality of health services in public health facilities, Indian Public Health Standards guidelines are in place.

(c) & (d): COVID-19 pandemic has highlighted unprecedented healthcare demand, requirements and challenges in India, particularly in terms of health infrastructure and laboratory capacity. The schemes namely, India COVID-19 Emergency Response and Health Systems Preparedness Package (ECRP-I), India COVID-19 Emergency Response and Health Systems Preparedness Package-Phase-II (ECRP-II), XV Finance Commission Grants (XV-FC) and PM Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) has been lunched to manage and deal most efficiently the future similar pandemics in the country without compromising daily economical activities. Details are given at Annexure.
Annexure

Details of the Initiatives for any upcoming Covid-19 Wave in the Country

COVID-19 pandemic has highlighted unprecedented healthcare demand, requirements and challenges in every country globally including India. GOI has taken several initiatives to handle any upcoming wave in the country without compromising daily economical activities. Some of the key initiatives are placed below:

1. **ECRP Phase-I** has a Central Sector Component, in which the main activities which includes strengthening of existing health facilities, the support was expanded to establish critical care oxygen supported beds at identified Dedicated COVID Health Centre (DCHC) and Dedicated COVID Hospital (DCH) and also isolation beds at COVID Care Centre including expanding network of diagnostic laboratories & testing capacity and also procurement of essential equipment’s for management of COVID 19. A guideline in this regard was also shared with the states to expedite the process of creating a robust emergency response system.

2. **Under India Covid 19 Emergency Response and Health Systems Preparedness Package-Phase-II (ECRP-II)**, in rural, peri-urban/small towns and tribal areas, Government is supporting the health Infrastructure which includes establishment of dedicated Paediatric care units in all the Districts; Paediatric Centre of excellence; support for augmentation of Additional Beds by provision of Prefab Units of varying capacity closer to the people (SHC, PHC and CHC level); Augmentation of 20,000 ICU beds in public healthcare facilities in the states including 20% paediatric ICU beds; Support for establishing and operating 50-bedded and 100-bedded Field Hospitals; Strengthening the referral transport system by augmentation of existing fleet of ambulances and Support for Liquid Medical Oxygen (LMO) tank and Medical Gas Pipeline System (MGPS) in the public healthcare facilities @ at least one LMO facility per district.

3. **XV-Finance Commission Health Grants through Local Government** announced as part of Union Budget 2021-22, for strengthening the healthcare system at primary healthcare level. The Grants recommends support for diagnostic infrastructure in Sub Health Centres (SHC), Primary Health Centres (PHC) and Urban Health and Wellness Centres (U-HWC), support for converting SHC and PHC to HWCs; Construction of Building-less SHCs, PHCs, CHCs, U-HWCs and polyclinics.

4. Under **PM-ABHIM**, support is provided to fill critical gaps in public health infrastructure especially in critical care facilities and primary care in both urban and rural areas. The support is provided for infrastructure development for 17788 SHCs to HWCs in seven High Focus States and three NE states; infrastructure support for 11024 Urban HWCs; 3382 Block Public Health Units (BPHUs); 602 Critical Care Hospital Blocks; and one Integrated Public Health Labs in each district.