https://blog.mygov.in/summary-of-ideas-posted-in-response-to-health-system-in-india-bridging-the-gap-between-current-performance-and-potential/

Citizen’s response to “Health System in India: Bridging the Gap between Current Performance and Potential”

26 May 2015



Thank you for your valuable comments on “Health System in India: Bridging the Gap between Current Performance and Potential”. There is a consensus for maximizing gains through strengthening the pillars of health systems. We have aggregated 347 comments received up to 7th May, 2015 into nine discussion themes, that will be launched shortly. You may view your contributions below.

Analysis of the content has revealed that 96% of the comments addressed strengthening the pillars of health systems as tabulated in Table 1.  Ten comments addressed individual diseases/conditions and were prioritized by participants. These are summarized in Box 1.

**Table 1. Thematic Analysis of Comments (in order of popularity)**

|  |  |  |
| --- | --- | --- |
| **S. No.** | **Themes** | **No. of Comments** |
| 1. | Human Resources for Health | 87 |
| 2. | Service Delivery (i) Access, Continuum and Organization of Care (ii) Tertiary and Emergency Care (iii) Quality of Care (iv) Community Participation and Clients’ Rights | Total = 56 34 11 6 5 |
| 3. | Public Health | 53 |
| 4. | Regulation of Drugs, Food and Medical Practice | 46 |
| 5. | Stewardship and Governance | 45 |
| 6. | Increasing Financial Resources | 45 |
| 7. | Health Information Systems | 33 |
| 8. | Availability of Drugs, Vaccines and Other Consumables | 17 |
| 9. | Using Available Financial Resources  as a Tool for Efficiency | 4 |

*\*42 comments were not related to the discussion*

**Box 1. Content relating to individual disease based strategies for bridging the gap between current performance and potential**

1. Disease specific hospitals must be set up instead of multi-specialty hospitals.
2. There should be newborn screening for birth defects.
3. There should be access to affordable care for persons with disability arising due to accidents or genetic conditions.
4. There should be comprehensive strategies to address mental health problems.
5. There should be increased awareness about organ donation coupled with its facilitation by health professionals.

**Summary of content under the pillars of health systems strengthening:**

1. **Human resources for health (HRH)**

**Perceived problems:**

* 1. There is a lack of human resources for health, especially in rural areas. This may be attributed to factors such as the lack of services for family members of the health service providers and lack of suitable residential facilities for service providers; contractual employments at low salaries and high work-load. ([Shrikant Tekade](https://mygov.in/comment/5229241/" \l "comment-5229241), [Dr B B Nagargoje](https://mygov.in/comment/5188741/" \l "comment-5188741), [parvinder Singh Chauhan](https://mygov.in/comment/5024261/" \l "comment-5024261), [Poornananda Acharya](https://mygov.in/comment/5022841/" \l "comment-5022841), [Kapil Dev Singh](https://mygov.in/comment/5023141/" \l "comment-5023141))
  2. There is a high level of absenteeism of doctors in public health facilities, especially in rural and tribal areas. ([Chitransh Nagwanshi](https://mygov.in/comment/5039641/" \l "comment-5039641) ,  [Zulkharnine Sultana](https://mygov.in/comment/5034441/" \l "comment-5034441))
  3. There is a lack of utilization of available HRH qualified in alternate systems of medicine, with a strong bias against practitioners of these systems of medicine as compared to allopathy. ([Shrikant Tekade](https://mygov.in/comment/5229241/" \l "comment-5229241), [Saketh Ram Thrigulla](https://mygov.in/comment/5242661/" \l "comment-5242661), [Dr Jaideep Kumar](https://mygov.in/comment/5189681/" \l "comment-5189681), [Yashwant Mehta](https://mygov.in/comment/5056101/" \l "comment-5056101)). Also for example, ayurvedic doctors are barred from performing various procedures like dilatation and curettage, Incision and drainage, excision, and different contraceptive methods like insertion of IUCD (Intra uterine contraceptive devices) for therapeutic and diagnostic purposes ([Dr Jaideep Kumar](https://mygov.in/comment/5189921/" \l "comment-5189921)).
  4. There is a lack of regulation of medical and para-medical education with respect to cost of education, number of seats and quality standards. ([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5012041/#comment-5012041), [G. Bansal](https://mygov.in/comment/5114421/#comment-5114421), Praveen ([a](https://mygov.in/comment/5033121/#comment-5033121), [b](https://mygov.in/comment/5033381/#comment-5033381), [c](https://mygov.in/comment/5093401/#comment-5093401)), [Anand Verma](https://mygov.in/comment/5055421/" \l "comment-5055421), [Rakesh Sood](https://mygov.in/comment/5055601/#comment-5055601))
  5. There are certain fake institutions which provide degree/diploma similar to BAMS ([Dr Jaideep Kumar](https://mygov.in/comment/5189761/" \l "comment-5189761)).

**Suggestions:**

* 1. Effective human resource management policy and principles must be in place, with a culture of professionalism, accountability and fairness. ([AJAY GUPTA](https://mygov.in/comment/5207261/#comment-5207261), [ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701), [Banuru Muralidhara Prasad](https://mygov.in/comment/5193141/" \l "comment-5193141), [Jacob John](https://mygov.in/comment/5210561/#comment-5210561), [Haresh Patel](https://mygov.in/comment/5222961/" \l "comment-5222961), [Ashish Mahajan](https://mygov.in/comment/5129741/#comment-5129741))
  2. The deficit of doctors must be fulfilled to provide a suitable doctor to patient ratio, especially in rural areas. ([Ashok Kumar](https://mygov.in/comment/5198421/#comment-5198421), [Gita Bisla](https://mygov.in/comment/5246621/#comment-5246621), [krishna poddar](https://mygov.in/comment/5049701/" \l "comment-5049701), [Praveen](https://mygov.in/comment/5028861/#comment-5028861), [SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5012001/#comment-5012001), [Manoj Goel](https://mygov.in/comment/5184881/" \l "comment-5184881), [Harsh Patel](https://mygov.in/comment/5029741/#comment-5029741), [Yaman Agrawal](https://mygov.in/comment/5026301/" \l "comment-5026301))
  3. Expansion of medical college seats is required ([Praveen](https://mygov.in/comment/5148081/#comment-5148081) , [Awanish Kumar](https://mygov.in/comment/5092301/" \l "comment-5092301)); All States must be encouraged to set up a medical college and hospital at every district, possibly in PPP mode.([Praveen](https://mygov.in/comment/5033881/#comment-5033881)) Alternatively, evening classes may be started in existing medical colleges to increase the number of students graduating each year. ([Ajesh K Agrawal](https://mygov.in/comment/5039581/" \l "comment-5039581)) More investments must be made in setting up government medical colleges than private colleges. (AJAY GUPTA ([a](https://mygov.in/comment/5209121/#comment-5209121), [b](https://mygov.in/comment/5207341/#comment-5207341))
  4. Fresh medical graduates, post-graduates and existing Doctors should be incentivized to practice in public health facilities and in rural areas. ([Dr B B Nagargoje](https://mygov.in/comment/5188741/" \l "comment-5188741), [Poornananda Acharya](https://mygov.in/comment/5022841/" \l "comment-5022841), [Vineet Kini](https://mygov.in/comment/5024721/" \l "comment-5024721)) Measures suggested include:
     1. Improve the availability of essential facilities (ex: education for children) to enable doctors to practice in rural areas.( [G. Bansal](https://mygov.in/comment/5114421/#comment-5114421), [Shrikant Tekade](https://mygov.in/comment/5229241/" \l "comment-5229241), [Kapil Dev Singh](https://mygov.in/comment/5023141/" \l "comment-5023141))
     2. Provide an incentive for every year served in a difficult area. ([Vikash Bagri](https://mygov.in/comment/5123161/" \l "comment-5123161))
     3. Rotation of postings may be undertaken so that those posted at districts are also posted at the periphery and district postings may be used as an incentive. ([G. Bansal](https://mygov.in/comment/5114421/#comment-5114421))
     4. MBBS and post graduate degree courses can be administered free of cost to students with a legal provision for compulsory rural service for 10 years. ([Anil Kumar](https://mygov.in/comment/5069461/#comment-5069461))
     5. Regulatory measures:It should be made compulsory for medical students to serve in rural areas to obtain a degree/fresh graduates to serve in rural areas ([Subha Satapathy](https://mygov.in/comment/5121421/" \l "comment-5121421), [Himanshumurari Rai](https://mygov.in/comment/5048881/" \l "comment-5048881), [Bhola](https://mygov.in/comment/5031821/" \l "comment-5031821),[VishnuKumarMeena](https://mygov.in/comment/5055081/#comment-5055081)); mandatory for those studying in government medical colleges to serve in rural areas or alternatively, to compensate the government ([Anil Kumar](https://mygov.in/comment/5069461/#comment-5069461),  limiting admission to post-graduation to those with minimum years of rural practice ([Venugopala Prasad](https://mygov.in/comment/5190881/" \l "comment-5190881)); prescribing two years of service to post-graduates before conferring the degree at station of choice ([AJAY GUPTA](https://mygov.in/comment/5237301/#comment-5237301))
     6. Internship period may be increased to two years with a regular salary paid in the second year for rural service; all graduates should have a rural internship ([Rathin Patel](https://mygov.in/comment/5030041/" \l "comment-5030041), [Burzes Batliwalla](https://mygov.in/comment/5213981/" \l "comment-5213981))
     7. Encourage all private doctors to serve in a rural PHC at least once fortnightly. ([ADITYA KUMAR PATHAK](https://mygov.in/comment/5132001/#comment-5132001))
     8. The pay-scale of government doctors needs to be improved so as to prevent them from turning to private practice. ([Ashish Mahajan](https://mygov.in/comment/5129741/#comment-5129741), [Harsh Patel](https://mygov.in/comment/5029741/#comment-5029741))
     9. There should be a strict policy for transfers. The State may be divided into regions and all doctors would be required to serve in each region for a given number of years. ([Vikash Bagri](https://mygov.in/comment/5123161/" \l "comment-5123161))
  5. Utilize the services of doctors qualified in AYUSH to increase the potential of available human resources. Suggested measures include: bridge courses, exam conducted by MCI for certification of AYUSH doctors to provide services, internship period under MBBS doctors prior to engaging in allopathic service delivery, defining the level of integration of these services with allopathic services. ([Pranav bhardwaj](https://mygov.in/comment/5231421/#comment-5231421), [Saketh Ram Thrigulla](https://mygov.in/comment/5242661/" \l "comment-5242661), [Kamal Sethi](https://mygov.in/comment/5190261/#comment-5190261), [vinay bhatt](https://mygov.in/comment/5198481/" \l "comment-5198481),[chandravikas rathore](https://mygov.in/comment/5082661/#comment-5082661), [Vijay Ganbote](https://mygov.in/comment/5046561/#comment-5046561), [Sumit Mehta](https://mygov.in/comment/5032601/" \l "comment-5032601), [Sachin Gupta](https://mygov.in/comment/5061901/" \l "comment-5061901), [Vineet Kini](https://mygov.in/comment/5024721/" \l "comment-5024721), [Dr Jaideep Kumar](https://mygov.in/comment/5189821/" \l "comment-5189821))
  6. Integrate the vast network of informal health providers in the health workforce through development of a suitable engagement plan/Utilize the services of highly-trained non-physician health providers for the provision of services.([ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701), [Saurabh Kunal](https://mygov.in/comment/5092541/" \l "comment-5092541), [Nachiket Mor](https://mygov.in/comment/5061761/" \l "comment-5061761))
  7. There should be a diploma course to develop medical practitioners who can serve as a first line of care in rural areas ([Venugopala Prasad](https://mygov.in/comment/5190761/" \l "comment-5190761)).
  8. There is a need to increase availability of nurses and allied health professionals through establishment of a separate regulatory authority to ensure standards in education for the allied health professionals.([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5012081/#comment-5012081))
  9. Nursing and pharmacy colleges should tie up with large hospitals in the same and adjoining areas so students may receive training and subsequently contribute to service delivery at the health facilities in the area. (AMIT MEENA ([A](https://mygov.in/comment/5204101/#comment-5204101), [B](https://mygov.in/comment/5204121/#comment-5204121))
  10. Number of doctors trained in Family Medicine should be increased in comparison to other specialties. ([Venugopala Prasad](https://mygov.in/comment/5190881/" \l "comment-5190881))
  11. Doctors providing preventive, curative and administrative services must be efficiently segregated so as to ensure competence at the given task. Administrative posts should not be occupied by highly qualified specialist doctors since this prevents them from utilizing their training appropriately.  ([AJAY GUPTA](https://mygov.in/comment/5208581/#comment-5208581))
  12. The Indian medical curriculum should incorporate PHC management training module to ensure capacity building in this area. Alternatively, it is suggested to utilize manpower trained in administration and management within public health facilities to improve the functioning of these facilities. ([Shailesh and Aman](https://mygov.in/comment/5163701/" \l "comment-5163701), [Yaman Agrawal](https://mygov.in/comment/5026301/" \l "comment-5026301), [arun arya](https://mygov.in/comment/5230881/" \l "comment-5230881))
  13. Reasons for the indifference, impatience of doctors towards patients, unwillingness to give sufficient time to each patient during consultation, must be evaluated and addressed. They could be trained to manage stress effectively, especially those working on government hospitals, wherein patient loads are high. ([Himanshumurari Rai](https://mygov.in/comment/5048881/" \l "comment-5048881), [Maheswari Reddy](https://mygov.in/comment/5126801/" \l "comment-5126801), [Amiya Behera](https://mygov.in/comment/5088041/#comment-5088041), [HP JALAN](https://mygov.in/comment/5056801/#comment-5056801), [prabhat sharma](https://mygov.in/comment/5018821/" \l "comment-5018821))
  14. Teaching standards in medical colleges require to be improved. ([HP JALAN](https://mygov.in/comment/5056781/#comment-5056781), [Harsh Patel](https://mygov.in/comment/5029741/#comment-5029741))
  15. Regulation of medical education in terms of fee and system of donations in private medical college must be in place. Social audit may also be used to address retention of post-graduation seats in medical colleges. ([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5012041/#comment-5012041), [G. Bansal](https://mygov.in/comment/5114421/#comment-5114421), [AJAY GUPTA](https://mygov.in/comment/5209121/#comment-5209121), [Praveen](https://mygov.in/comment/5033881/#comment-5033881))
  16. Legal notices should be issued to fake institutions providing degrees ([Dr Jaideep Kumar](https://mygov.in/comment/5189761/" \l "comment-5189761)).
  17. There should be reservation of seats for rural students in Medical colleges whose parents live in villages so that after studying there would be interest to stay close to village and work in those areas ([KEERTI BHUSAN PRADHAN](https://mygov.in/comment/5186961/#comment-5186961)).
  18. Provide opportunities for grass-root workers to be promoted to top level posts instead of direct recruitment to top posts so that experience of working at the grass root level is effectively utilized. ([AJAY GUPTA](https://mygov.in/comment/5209541/#comment-5209541))
  19. There should be transparency in recruitments and promotions that ensure meritorious students are placed without any corrupt influences. Measures suggested include a central portal to advertise vacancies. ([Shailesh and Aman](https://mygov.in/comment/5163701/" \l "comment-5163701),[Banuru Muralidhara Prasad](https://mygov.in/comment/5193141/#comment-5193141), [AJAY GUPTA](https://mygov.in/comment/5207421/#comment-5207421))
  20. Measures to curb absenteeism must be put in place, for example an account of attendance should be maintained and penalties may be imposed when a certain percentage of days absent have been crossed.  ([Poornananda Acharya](https://mygov.in/comment/5022841/" \l "comment-5022841),[Vikash Bagri](https://mygov.in/comment/5123161/#comment-5123161))
  21. Skill up-gradation of health workers must be carried out regularly and effectively to increase productivity.

1. **Service Delivery**

* 1. **Access, Continuum and Organization of Care  
     Perceived problems:**
     1. Rural areas require the establishment and running of functional health care facilities. ([Chandra shekhar](https://mygov.in/comment/5032221/#comment-5032221))
     2. Existing public sector health facilities are not equipped to provide services to the population for lack of resources. Services are therefore unavailable to the poor. ([maninderjit singh](https://mygov.in/comment/5010881/" \l "comment-5010881), [Harsh Patel](https://mygov.in/comment/5029741/#comment-5029741), [Chandra shekhar](https://mygov.in/comment/5032221/#comment-5032221), [shailendra singh](https://mygov.in/comment/5036481/" \l "comment-5036481),[krishna poddar](https://mygov.in/comment/5049701/#comment-5049701), [hemant mathur](https://mygov.in/comment/5050241/" \l "comment-5050241), [manoj kumar swain](https://mygov.in/comment/5120061/" \l "comment-5120061), [kakarla sundar ganesh](https://mygov.in/comment/5215381/" \l "comment-5215381), [manjit](https://mygov.in/comment/5099781/" \l "comment-5099781), [parvinder Singh Chauhan](https://mygov.in/comment/5024261/" \l "comment-5024261))
     3. Available public health facilities do not have capacity for the large number of patients seeking health care services. ([Hitesh Bansal](https://mygov.in/comment/5006481/#comment-5006481), [Arvind Singh](https://mygov.in/comment/5167181/#comment-5167181), [MANISH PANDEY](https://mygov.in/comment/5246841/#comment-5246841))

**Suggestions:**

* + 1. A well- established network of health facilities from village to higher levels must be set up, as per geographical and population density norms, with adequate resources of infrastructure, human resources and drugs and equipment, providing appropriate levels of health services (primary, secondary and tertiary). ([rajeev kumar](https://mygov.in/comment/5007741/" \l "comment-5007741), [Bhola](https://mygov.in/comment/5031821/" \l "comment-5031821), [Bharat Sanyal](https://mygov.in/comment/5049541/#comment-5049541),[ASHMA RANI](https://mygov.in/comment/5129921/#comment-5129921), [rajesh kumar sethi](https://mygov.in/comment/5153561/" \l "comment-5153561), [Preetha Premjith](https://mygov.in/comment/5238161/" \l "comment-5238161), [arun arya](https://mygov.in/comment/5230881/" \l "comment-5230881), [Awanish Kumar](https://mygov.in/comment/5092301/" \l "comment-5092301), [malaya parida](https://mygov.in/comment/5088861/" \l "comment-5088861))
    2. The capacity of existing health facilities requires to be expanded to accommodate the large number of patients and reduce waiting times. ([Hitesh Bansal](https://mygov.in/comment/5006481/#comment-5006481))
    3. The basic unit of health services, i.e. primary health centres and anganwadi centres must be strengthened first in order to develop a strong health care system. ([AMIT MEENA](https://mygov.in/comment/5026021/#comment-5026021), [Saurabh Sinha](https://mygov.in/comment/5026021/" \l "comment-5026021))
    4. A strengthened grass-root healthcare delivery system must be established comprising the primary health centre with health professionals at different levels including para-clinical, clinical, nurses and physicians  who would be responsible for health outcomes of the population and serve as the first point of contact for the community ([ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701))
    5. There should be efficient links for referral (with a compulsory referral slip to tertiary health facilities) from strengthened primary and secondary health facilities to tertiary health facilities to avoid duplication and crowding-out of these facilities. ([Ajay Bhargava](https://mygov.in/comment/5052581/#comment-5052581), [G. Bansal](https://mygov.in/comment/5114421/#comment-5114421))
    6. Strengthened networks of primary health care must be integrated with secondary and tertiary care facilities with efficient gate-keeping mechanisms to prevent under-use of primary care and over-use of tertiary care, leading to duplication and crowding out of these facilities.  ([Ajay Bhargava](https://mygov.in/comment/5052581/#comment-5052581), [Nachiket Mor](https://mygov.in/comment/5061761/" \l "comment-5061761), [ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701))
    7. A suggested method of involving private sector in the provision of universal health coverage is through the organization of private sector health facilities into similar provider networks (primary, secondary and tertiary)  which must be a pre-requisite for empanelment in such as system. Cost of care for patients is therefore at the level of the network and would similarly prevent irrational and excessive care and promote primary care and disease prevention. ([Nachiket Mor](https://mygov.in/comment/5061761/" \l "comment-5061761))
    8. A rail-enabled mobile medical unit should be set up for providing health services to rural areas at the railway stations. These may be established for every district and may visit each rural station once in three months. The unit may be linked to the tertiary level hospital of the district for overall management of the service and referral of patients when required. Such as service would be of use in calamity struck regions as well. ([Nagendrasena Manyam](https://mygov.in/comment/5054761/" \l "comment-5054761))
    9. Dispensaries operated on the campuses by educational institutions should be open to the public to increase availability and access to services (such as the banks and post-offices on the premises)( [chandravikas rathore](https://mygov.in/comment/5082621/" \l "comment-5082621))

* 1. **Tertiary and Emergency Care**

**Perceived problems**

* + 1. The condition of emergency wards in public hospitals is poor.( [Himanshumurari Rai](https://mygov.in/comment/5048721/" \l "comment-5048721))

**Suggestions:**

* + 1. Tertiary level hospitals (providing AIIMS- like services) must be available in all districts/States for access to tertiary care services. District hospitals must be strengthened for this purpose. Capacity and location of these facilities should be adequate as per population and geographical need. ([Sachin Gupta](https://mygov.in/comment/5061861/" \l "comment-5061861), [malaya parida](https://mygov.in/comment/5088861/" \l "comment-5088861), [AJAY GUPTA](https://mygov.in/comment/5208521/#comment-5208521), [hemant mathur](https://mygov.in/comment/5050241/" \l "comment-5050241), [Arvind Singh](https://mygov.in/comment/5167181/#comment-5167181), [AJAY GUPTA](https://mygov.in/comment/5237481/#comment-5237481))
    2. Capacities must be build to provide those tertiary level services in India that are currently unavailable. ([HP JALAN](https://mygov.in/comment/5124561/#comment-5124561))
    3. A policy for compulsory and immediate emergency care for victims of road accidents should be in place. ([AJAY GUPTA](https://mygov.in/comment/5208661/#comment-5208661))
    4. A two-wheeler mobile medical ambulance should be introduced equipped to provide emergency care to accident victims in busy cities until the patient is transferred to a hospital.
    5. Air ambulance facilities should be available in cities. Hospitals should be allowed to build helipads for such ambulances ([Nagendrasena Manyam](https://mygov.in/comment/5054761/" \l "comment-5054761))
    6. The need for doctors to wait for the police prior to providing emergency treatment to accident victims should be discontinued. Resident policemen could be placed in all hospitals to ensure expediting the process.( [HP JALAN](https://mygov.in/comment/5063541/#comment-5063541))

* 1. **Quality of Care**

**Perceived problems**

* + 1. Patients do not have the right to quality of care at public health facilities/Quality of care in public health facilities is the most important concern ([hemant mathur](https://mygov.in/comment/5050241/" \l "comment-5050241), [Sangeeta Tikyani](https://mygov.in/comment/5023201/" \l "comment-5023201))

**Suggestions:**

* + 1. There should be a measurable standard for quality of care that includes components of patient safety, comfort, satisfaction and clinical outcomes. This must be coupled with systems to motivate providers and ensure adherence to the standards (incentives, capacity building, technical support and institutional arrangements for measurement and certification. ([ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701))
    2. A ranking system should be developed for all health facilities and this information must be available in the public domain. ([HP JALAN](https://mygov.in/comment/5124761/#comment-5124761))

* 1. **Community Participation and Clients’ Rights**

**Suggestions:**

* + 1. Community based monitoring and planning of health services (CBMP) has been proven to improve the performance of the public health delivery system by promoting accountability, responsiveness of services and peoples’ participation. Experiences in Mahrashtra State since 2007 show improved performance by Primary Health Centres with CBMP in the areas of laboratory services, referral services, IPD, OPD and delivery services. ([Ashwini Devane](https://mygov.in/comment/5234221/" \l "comment-5234221))
    2. A grievance redressal cell must be established in all district hospitals to receive complains regarding public and private health facilities ([G. Bansal](https://mygov.in/comment/5114421/#comment-5114421))
    3. A register for complains must be available for complains/ suggestions which can be made available online as well for direct access of the Health ministry. ([Preetha Premjith](https://mygov.in/comment/5238161/" \l "comment-5238161))

1. **Public Health**

**Perceived problems**

* 1. The diseases in rural areas are mainly because of lack of cleanliness ([Saurabh Sinha](https://mygov.in/comment/5025621/" \l "comment-5025621)).

**Suggestions:**

* 1. Health education and awareness programs and camps should be implemented ([Dr Arpan Shastri](https://mygov.in/comment/5006601/" \l "comment-5006601), [kuldeep singh shekhawat](https://mygov.in/comment/5027521/" \l "comment-5027521), [Neelesh Dave](https://mygov.in/comment/5052561/" \l "comment-5052561), [HP JALAN](https://mygov.in/comment/5056841/#comment-5056841), [Ashish Mahajan](https://mygov.in/comment/5129741/#comment-5129741), [Haresh Patel](https://mygov.in/comment/5222961/" \l "comment-5222961), [Prashanth Annadi](https://mygov.in/comment/5201201/" \l "comment-5201201), [Jay Chan](https://mygov.in/comment/5218001/#comment-5218001), [Kamal Sethi](https://mygov.in/comment/5190261/#comment-5190261), [Mahesh Pralhad Shelke](https://mygov.in/comment/5041361/#comment-5041361), [Preetha Premjith](https://mygov.in/comment/5238161/" \l "comment-5238161), [suriya krishna B S](https://mygov.in/comment/5228541/" \l "comment-5228541)). Health education should be a part of school curriculum ([Ganesan RP](https://mygov.in/comment/5024081/" \l "comment-5024081), [Sangeeta Chawla](https://mygov.in/comment/5131321/" \l "comment-5131321), [Mahesh Pralhad Shelke](https://mygov.in/comment/5041361/#comment-5041361). Knowledge on household natural remedies use should be included in school curriculum ([yashwant mehta](https://mygov.in/comment/5056121/" \l "comment-5056121)).
  2. There should be a focus on population control which will help in effective program implementation ([Dr Swapan Banerjee](https://mygov.in/comment/5015061/" \l "comment-5015061), [mahipal rawat](https://mygov.in/comment/5018141/" \l "comment-5018141), [bharati](https://mygov.in/comment/5020141/" \l "comment-5020141), [avanish sharma](https://mygov.in/comment/5021441/" \l "comment-5021441), [GANESH P R](https://mygov.in/comment/5078261/#comment-5078261), [YADVENDRA YADAV](https://mygov.in/comment/5074641/#comment-5074641), [Vishwamitra Manav](https://mygov.in/comment/5057081/" \l "comment-5057081)).
  3. There should be a focus on cleanliness and basic health amenities ([Saurabh Sinha](https://mygov.in/comment/5025821/" \l "comment-5025821), [kuldeep singh shekhawat](https://mygov.in/comment/5027521/" \l "comment-5027521), [Harsh Patel](https://mygov.in/comment/5029741/#comment-5029741), [Jay Chan](https://mygov.in/comment/5218001/#comment-5218001), [Manoj Goel](https://mygov.in/comment/5184881/" \l "comment-5184881), [manpreet](https://mygov.in/comment/5165881/" \l "comment-5165881), [suriya krishna B S](https://mygov.in/comment/5228541/" \l "comment-5228541))
  4. There should be a focus on exercise, proper nutrition and yoga ([kuldeep singh shekhawat](https://mygov.in/comment/5027521/" \l "comment-5027521), [Seema Singh](https://mygov.in/comment/5101001/" \l "comment-5101001), [Abhishek Raval](https://mygov.in/comment/5186041/#comment-5186041), [Manoj Goel](https://mygov.in/comment/5184881/" \l "comment-5184881), [rajesh kumar sethi](https://mygov.in/comment/5154021/" \l "comment-5154021)).
  5. There should be fortification of low cost food with nutrients ([Bharat Sanyal](https://mygov.in/comment/5049541/#comment-5049541)).
  6. There must be regular health check-ups for children in school ([Shri Mad Bhagwat Geeta Primary School](https://mygov.in/comment/5068281/#comment-5068281)).
  7. Universal Health Screening should come before Universal Health Coverage and a list of high risk population of each block should be available to the local Medical Officer to act upon ([Shailesh and Aman](https://mygov.in/comment/5163701/" \l "comment-5163701))
  8. There must be mass screening for tropical diseases ([neeta kumar](https://mygov.in/comment/5233841/" \l "comment-5233841)).
  9. The Municipal Corporations should provide bed nets at subsidized rates for prevention of mosquito-borne diseases ([Naresh Grover](https://mygov.in/comment/5035401/" \l "comment-5035401)).
  10. The strengths of alternate systems of medicine must be effectively utilized for health promotion and prevention of disease ([Rakesh Sood](https://mygov.in/comment/5055341/#comment-5055341)).
  11. Waste management technologies should be encouraged ([Jay Chan](https://mygov.in/comment/5218121/#comment-5218121)).
  12. The Carbon incentive for food energy, a performance based incentive mechanism, may simplify the global health governance efforts with the incentive being fixed for the environmental impact and for the reduced demand for the public health efforts ([Raghavendra Guru Srinivasan](https://mygov.in/comment/5187741/" \l "comment-5187741)).

1. **Health Information systems (HIS)**

**Perceived problems**

* 1. Existing telemedicine cannot scale up to entire rural India because of factors like connectivity and power issues, infrastructure, field implementation and cultural acceptability ([Saurabh Sinha](https://mygov.in/comment/5026641/" \l "comment-5026641)).
  2. The lack of this single data standard prohibits interoperability between the many evolving information systems in the country ([ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701)).

**Suggestions:**

* 1. Information Communication Technology (ICT) should be effectively used to bridge the gap between performance and potential ([Zulkharnine Sultana](https://mygov.in/comment/5034441/" \l "comment-5034441)).
  2. High speed broadband should be installed for use of these services in remote areas ([Ravinder Mandayam](https://mygov.in/comment/5242861/" \l "comment-5242861)).
  3. A first step toward a strong information system should be to develop one common data dictionary and strategies for compliance and integration across data sources. This will allow for triangulation of data and many aspects of governance, monitoring, decision making can be automated and guide more targeted audits ([ACCESS Health International](https://mygov.in/comment/5246701/#comment-5246701)).
  4. There should be an integrated Health Management Information System for an area providing data  such as:  characteristics of area (number of villages, number of health facilities, population), different programmes (NRHM, RNTCP etc), health informatics on disease outbreak, health survey, inventory management, human resources (available number and trainings undertaken) *(detailed formats provided by participant)*( [Anil Kumar](https://mygov.in/comment/5068841/#comment-5068841)).
  5. Aadhar number should be provided to every child and effectively used for various services using HIS. Suggested measures include:
     1. To create Electronic Health Records that will be beneficial for migrants to avail services ([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5012121/#comment-5012121),[Awanish Kumar](https://mygov.in/comment/5092301/#comment-5092301), [sangeeta upadhyay](https://mygov.in/comment/5154041/" \l "comment-5154041), [sachin garg](https://mygov.in/comment/5149061/" \l "comment-5149061))
     2. SMS alerts regarding vaccination, health camps should be sent to citizens ([Nagendrasena Manyam](https://mygov.in/comment/5054761/" \l "comment-5054761)).
     3. To provide health schemes to those who actually need them
  6. All records should be digitized in hospitals ([DatchanaMoorthy Ramu](https://mygov.in/comment/5052541/" \l "comment-5052541)).
  7. Hospitals should give a provision for obtaining online appointments ([Ashok Kumar](https://mygov.in/comment/5198421/#comment-5198421))
  8. E-Health records sharing should be with patients’ consent as to whether they want it to be shared with all health providers or by some specific providers. Alternatively, there may be a rule to maintain records via public hospitals only ([Bharat Parekh](https://mygov.in/comment/5046821/#comment-5046821)).
  9. Rural telemedicine can be made effective by connecting villages to town doctors. Suggested measures include low black and white video-conferencing through internet kiosks, developing multi-parameter diagnostics with neurosynaptic and field deployment experiments with healthcare domain partners. These facilities will help address the deficit in rural doctors as well ([Saurabh Sinha](https://mygov.in/comment/5026641/" \l "comment-5026641)).
  10. Telemedicine is being successfully used to tackle rural doctor shortage in Bangladesh. The mobile kunji, a novel job-aid tool, to improve frontline workers’ communication with households in selected regions of Bihar has shown its promise in improving efficiency and reach of these workers ([Gates Foundation](https://mygov.in/comment/5245601/#comment-5245601)).
  11. There should be use of internet and mobile technology to provide health related information in rural areas ([Saurabh Sinha](https://mygov.in/comment/5026021/" \l "comment-5026021)).
  12. There should be a National Database of blood donors, state and city wise ([Girish Parikh](https://mygov.in/comment/5054261/#comment-5054261)).
  13. An independent National e-Health Authority is the best tool to bridge the gap between performance and potential ([Zulkharnine Sultana](https://mygov.in/comment/5034441/" \l "comment-5034441), [Bharat Parekh](https://mygov.in/comment/5046821/#comment-5046821))

1. **Regulation of Drugs, Food and Medical Practice**

**Perceived problems**

* 1. Tie-ups between doctors and pharmaceutical companies makes treatment expensive due to over-investigation and over-prescription ([Prakash Tripathy](https://mygov.in/comment/5052061/%20-%20comment-5052061)).
  2. The sale of counterfeit drugs causes harm to patients ([Prakash Tripathy](https://mygov.in/comment/5052061/%20-%20comment-5052061)). Such counterfeit drugs and those banned in different countries are being sold in a number of medical shops in our country without any regulation ([bssrao](https://mygov.in/comment/5123941/%20-%20comment-5123941)).
  3. Unregulated rise in price of allopathic drugs leads to high levels of out of pocket expenditure for patients ([Aswin G](https://mygov.in/comment/5059281/%20-%20comment-5059281)).
  4. There is no regulation in the cost of services in the private health sector, for example:
     1. Surgeries in hospitals ([bssrao](https://mygov.in/comment/5123941/%20-%20comment-5123941))
     2. Diagnostic tests and investigations ([G Bansal-NACO](https://mygov.in/comment/5114421/%20-%20comment-5114421))
  5. There is no regulation on the malpractice done by Medical Officers in Govt. and Private setting ([G Bansal-NACO](https://mygov.in/comment/5114421/%20-%20comment-5114421)). For example, some government doctors shift to private practice and popularize private hospitals ([subhash mallick](https://mygov.in/comment/5227721/%20-%20comment-5227721)).
  6. Malpractices by doctors are observed such as:
     1. The doctors in the hospitals refer patients to their clinics ([Himanshumurari Rai](https://mygov.in/comment/5048721/%20-%20comment-5048721))
     2. The doctors ask patients for costly tests from their recommended pathology laboratories/ diagnostics ([Himanshumurari Rai](https://mygov.in/comment/5048721/%20-%20comment-5048721))
  7. No rate list of procedures and services provided in nursing homes and/or hospital is available to the public ([G Bansal-NACO](https://mygov.in/comment/5114421/%20-%20comment-5114421)).
  8. The doctors do not provide a diagnosis to patients ([Rajasekaran Chokalingam](https://mygov.in/comment/5158921/%20-%20comment-5158921)).
  9. There is no implementation of regulation that prevents liquor shops operating near schools which is detrimental to health behaviours among young populations ([mahipal rawat](https://mygov.in/comment/5017861/%20-%20comment-5017861)).
  10. Adulteration of foods remains a problem ([Mahendra Kumar](https://mygov.in/comment/5099221/%20-%20comment-5099221)).
  11. There is cartelization in tenders for health services through powerful suppliers ([Ajesh K Agrawal](https://mygov.in/comment/5039741/%20-%20comment-5039741)).

**Suggestions:**

* 1. The government must insist on drug prescriptions bearing only generic names ([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5012181/%20-%20comment-5012181)).
  2. The pharmaceutical companies need to be better monitored to lower cost of medicines ([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5062221/%20-%20comment-5062221)).
  3. With the increasing antibiotic resistance, there needs to be strict guidelines issued for prescriptions and dispensation of antibiotics ([SUCHITRA RAGHAVACHARI](https://mygov.in/comment/5062281/%20-%20comment-5062281), [Vikash Bagri](https://mygov.in/comment/5123161/%20-%20comment-5123161)).
  4. The medicines should be sold only through a bar code system. The bar code will have all the details of the medicine including its ‘MRP’ price and expiry date. This will avoid any human error while selling the medicine ([HP JALAN](https://mygov.in/comment/5063701/%20-%20comment-5063701),[polareddy srinivasareddy](https://mygov.in/comment/5066821/%20-%20comment-5066821)).
  5. The medicines should be supplied only based on prescriptions of clinic/hospitals, not over-the-counter. ([Sandip Das](https://mygov.in/comment/5067861/%20-%20comment-5067861)).
  6. Medicine distribution should only be made on required dose ([utkarsh totla](https://mygov.in/comment/5091421/%20-%20comment-5091421)).
  7. Regulation of cost of medicines, investigations and doctor consultation services is required to make them affordable ([Burzes Batliwalla](https://mygov.in/comment/5213981/%20-%20comment-5213981), [Vikash Bagri](https://mygov.in/comment/5123161/%20-%20comment-5123161), [sachin garg](https://mygov.in/comment/5149321/%20-%20comment-5149321), [Praveen\_27](https://mygov.in/comment/5028581/%20-%20comment-5028581), [krishna poddar](https://mygov.in/comment/5049721/%20-%20comment-5049721)). Cost of all services should be nominal in all government hospitals ([bharati\_1](https://mygov.in/comment/5020021/%20-%20comment-5020021)). Details of charges should be put up in all the corners of the hospitals and clinics, so no extra charges are taken from poor/needy by corrupt intermediaries/staff. ([bharati\_1](https://mygov.in/comment/5020021/%20-%20comment-5020021))
  8. All hospitals should be brought under a hospital board with yearly audit of medical practice ([Suchitra Raghavachari](https://mygov.in/comment/5012221/%20-%20comment-5012221)).
  9. There must be surprise inspections in hospitals ([bharati\_1](https://mygov.in/comment/5020061/%20-%20comment-5020061))
  10. There must be a provision where action can be taken against doctors who refer patients for unwanted investigations ([Praveen\_27](https://mygov.in/comment/5028581/%20-%20comment-5028581)).
  11. Every patient should be given receipt by the doctor for the fee taken ([Praveen\_27](https://mygov.in/comment/5028581/%20-%20comment-5028581)).
  12. There should be reservation for poor patients in private hospitals ([krishna poddar](https://mygov.in/comment/5049721/%20-%20comment-5049721)).
  13. All cases involving negligence by the MO should be investigated by a committee of retired senior medical doctors and a bureaucrat ruling out any conflict of interest. Time line has to be set up for completion of enquiry into the matter and on proven guilty, license of the medical officer to practice and the institution should be cancelled for a period depending on the severity of case (with a minimum of one year) ([G Bansal-NACO](https://mygov.in/comment/5114421/%20-%20comment-5114421)).
  14. Regulations under Nursing home act/ Clinical Establishments Act should be strictly implemented ([G Bansal-NACO](https://mygov.in/comment/5114421/%20-%20comment-5114421)).
      1. A policy on regulation of private sector must be put into place through consultations with relevant stakeholders. ([Jacob John\_2](https://mygov.in/comment/5210541/%20-%20comment-5210541)).
      2. There should be a policy for safeguarding medical professionals from unreasonable patient demands.  ([Dr B B Nagargoje](https://mygov.in/comment/5188761/%20-%20comment-5188761)).

1. **Stewardship and Governance**

**problems**

* 1. Corruption hampers the enforcement of budget allocations. ([Maninderjit Singh](https://mygov.in/comment/5010881/%20-%20comment-5010881))
  2. There is lack of cooperation by various departments when public grievances are sent to them. ([Naresh Grover](https://mygov.in/comment/5020761/%20-%20comment-5020761))
  3. Lack of trust in healthcare providers plagues both the public and the private sectors ([Access Health International](https://mygov.in/comment/5246701/%20-%20comment-5246701)).
  4. The health services in India are suffering because of lack of management ([AJAY GUPTA](https://mygov.in/comment/5207021/%20-%20comment-5207021))
  5. There is corruption involved in the distribution of medicines ([Swati Choudhary](https://mygov.in/comment/5140021/%20-%20comment-5140021)). Government procured medicines are sold to the chemists. ([Kishan Sharma](https://mygov.in/comment/5224741/%20-%20comment-5224741))

**Suggestions:**

* 1. Governance and accountability mechanisms should be in place to minimize gap between performance and potential, illustratively:
     1. Social audits ([Vijay C S](https://mygov.in/comment/5243981/%20-%20comment-5243981), [RajDev Sharma](https://mygov.in/comment/5011261/%20-%20comment-5011261), [Access Health International](https://mygov.in/comment/5246701/%20-%20comment-5246701), [Sumit Deb](https://mygov.in/comment/5169841/%20-%20comment-5169841))
     2. Autonomy to public health facilities may be provided to increase accountability for outcomes. Turkey made reforms where primary care providers were made autonomous and held accountable for outcomes ([Access Health International](https://mygov.in/comment/5246701/%20-%20comment-5246701)).
     3. The state is responsible for assuring the provision of services provided and for monitoring these services. This separation between service delivery and accountability will ensure a professional focus for each. At the governance level, such a system would entail the creation of an autonomous unit that can provide stewardship, oversight, financing, and overall execution of the health system. This unit would be responsible for contracting with private and public providers and ensuring that these providers are regulated effectively. Governing units should also include representation from relevant ministries, independent technical experts, and the community. ([Access Health International](https://mygov.in/comment/5246701/%20-%20comment-5246701))
  2. There should be an end to corruption in all hospitals to improve medical facilities, so the citizens can also trust them ([Ashok Kumar](https://mygov.in/comment/5198421/%20-%20comment-5198421), [Atul kaushik](https://mygov.in/comment/5179781/%20-%20comment-5179781), [Swati Choudhary](https://mygov.in/comment/5140021/%20-%20comment-5140021)).
  3. Tighten the auditing of expenditure accounts which is likely to ensure catching pilferage of resources for personal gain by the administrative staff associated with all Central/State government funded hospitals ([Ravinder Mandayam](https://mygov.in/comment/5242521/%20-%20comment-5242521)).
  4. There should be strong administration that should cater needs of every patient at general hospital ([Ajay Gupta](https://mygov.in/comment/5208521/%20-%20comment-5208521)).
  5. There is a need for provision of basic amenities like clean drinking water. The water resources must be safeguarded from contamination by sewage. All cities and towns should have sewage treatment plant, preferably run by private with some incentive methods or under CSR ([Ganesan RP](https://mygov.in/comment/5024041/%20-%20comment-5024041), [Saurabh Sinha](https://mygov.in/comment/5025821/%20-%20comment-5025821), [Pavan Kumar Meeka](https://mygov.in/comment/5222881/%20-%20comment-5222881), [Jay Chan](https://mygov.in/comment/5218001/%20-%20comment-5218001)).
  6. There is an urgency to create public toilets ([Gopi Krishna G](https://mygov.in/comment/5027061/%20-%20comment-5027061)).
  7. Self help groups should be made at Anganwadis to create health awareness ([Jagdish Pathak](https://mygov.in/comment/5047441/%20-%20comment-5047441)).
  8. The quality of mid day meals should be improved ([Krishna poddar](https://mygov.in/comment/5049701/%20-%20comment-5049701)).
  9. Associated Ministries should work with the Ministry of Health to improve the condition of water and sanitation and address pollution ([Prakash Tripathy](https://mygov.in/comment/5052061/%20-%20comment-5052061)).
  10. Decentralized, state specific policies to improve health parameters as per local need should be adopted ([Murali Parneswaran](https://mygov.in/comment/5006381/%20-%20comment-5006381)).
  11. There should be increased focus on horizontal integration of programmes with a shift away from vertical planning and implementation of programmes. ([Access Health International](https://mygov.in/comment/5246701/%20-%20comment-5246701), [Bill and Melinda Gates Foundation](https://mygov.in/comment/5245601/%20-%20comment-5245601))

1. **Increasing Financial Resources**

**Perceived Problems:**

* 1. Every year a significant number of people die due to financial scarcity for health ([Bharat Agarwal](https://mygov.in/comment/5007441/%20-%20comment-5007441)).
  2. Existing health insurance schemes are limited in their use to the public. The insurance premiums are low just for sake of competition but the coverage is very limited. Hence there are no benefits to the Insured ([HP JALAN](https://mygov.in/comment/5063421/%20-%20comment-5063421)).

**Suggestions:**

* 1. Affordable health insurance should be provided to all the families especially in rural areas where the poverty levels are high and health facilities weak ([durgesh kumar](https://mygov.in/comment/5006581/%20-%20comment-5006581), [maninderjit singh](https://mygov.in/comment/5010881/%20-%20comment-5010881), [Neelesh Dave](https://mygov.in/comment/5052561/%20-%20comment-5052561), [Sandip Das](https://mygov.in/comment/5067861/%20-%20comment-5067861), [Prajwal Niranjan](https://mygov.in/comment/5108241/%20-%20comment-5108241), [Ashish Mahajan](https://mygov.in/comment/5129741/%20-%20comment-5129741), [dr basuraj](https://mygov.in/comment/5219861/%20-%20comment-5219861), [Rajiv Ranjan Srivastava](https://mygov.in/comment/5183901/%20-%20comment-5183901), [Pranav bhardwaj](https://mygov.in/comment/5231421/%20-%20comment-5231421)). There should be a low premium health insurance scheme ([GURPREET SINGH\_15](https://mygov.in/comment/5029781/%20-%20comment-5029781)).
  2. It would be better to increase the premium and also its coverage. The Health insurance has to be liberal in coverage ([HP Jalan](https://mygov.in/comment/5063421/%20-%20comment-5063421)).
  3. There is a need for a health savings account to decrease sudden out-of-pocket expenditure on health ([Bharat Agarwal](https://mygov.in/comment/5007441/%20-%20comment-5007441),[Aarthi Seth](https://mygov.in/comment/5071321/%20-%20comment-5071321), [Manoj Grover\_1](https://mygov.in/comment/5233221/%20-%20comment-5233221)).
  4. A nominal amount can be deducted from Jan Dhan account for health ([SHANMUGANATHAN B Balasubramaniam](https://mygov.in/comment/5007221/%20-%20comment-5007221)).
  5. Diversify and expand funding pools for prepaid health coverage, and target subsidies to the poor ([Access Health International](https://mygov.in/comment/5246701/%20-%20comment-5246701)).
  6. There should be co-payment for patients for treatment and services used ([Praneet Mehrotra](https://mygov.in/comment/5231781/%20-%20comment-5231781)).
  7. There should be ‘Sin’ tax on non-essential health items such as tobacco and alcohol to increase resources for health ([Praneet Mehrotra](https://mygov.in/comment/5231781/%20-%20comment-5231781)).
  8. The government should promote corporate social responsibility in various areas for increasing availability of resources. ([Utkarsh Totla](https://mygov.in/comment/5091221/%20-%20comment-5091221), [Subha Satapathy](https://mygov.in/comment/5121421/%20-%20comment-5121421), [Shailesh Kumar Sharma](https://mygov.in/comment/5163701/%20-%20comment-5163701), [Suchitra Raghavachari](https://mygov.in/comment/5012041/%20-%20comment-5012041)). We should organize health events from health organizations globally to increase resources ([Neelesh Dave](https://mygov.in/comment/5052561/%20-%20comment-5052561)). There should be a provision that each private hospital should contribute towards public health system and resources can be shared on a well defined line of action without financial commitments ([G K Sunil](https://mygov.in/comment/5017041/%20-%20comment-5017041)).
  9. Public-private partnership model should be implemented for establishment of hospitals and other needs in health sector ([Bhola](https://mygov.in/comment/5031821/%20-%20comment-5031821), [Rajeev Kumar](https://mygov.in/comment/5007741/%20-%20comment-5007741), [Vijay Kumar Tiwari](https://mygov.in/comment/5212301/%20-%20comment-5212301), [Manish Pandey](https://mygov.in/comment/5246841/%20-%20comment-5246841)).
  10. The government should organize educational camps to earn money ([Utkarsh Totla](https://mygov.in/comment/5091221/%20-%20comment-5091221)).

1. **Availability of Drugs, Vaccines and Other Consumables**

**Perceived Problems:**

* 1. There are no dispensaries in remote locations ([Maninderjit Singh](https://mygov.in/comment/5010881/%20-%20comment-5010881)).
  2. Many medicines not available in government stores as per Log Books ([Zulkharnine Sultana](https://mygov.in/comment/5034441/%20-%20comment-5034441)). The pharmacies in public hospitals do not have all medicines, requiring patients to purchase drugs at higher cost from private medical stores ([Himanshumurari Rai](https://mygov.in/comment/5048721/%20-%20comment-5048721)).

**Suggestions:**

* 1. Medical equipments/healthcare products should be locally manufactured to decrease expenditure on these devices. ([Suchitra Raghavachari](https://mygov.in/comment/5012261/%20-%20comment-5012261), [Archana R](https://mygov.in/comment/5023621/%20-%20comment-5023621)).
  2. There may be a provision for government medical shops for below poverty line population ([Ujjwal Khanna](https://mygov.in/comment/5025221/%20-%20comment-5025221)).
  3. There should be a provision to open medical shops providing generic medicines in rural areas [(Dr Navin Tiwari](https://mygov.in/comment/5035081/%20-%20comment-5035081)).
  4. There should be provision for increased production of medicines and health products ([Gita Bisla](https://mygov.in/comment/5246621/%20-%20comment-5246621), [Manoj Goel](https://mygov.in/comment/5184881/%20-%20comment-5184881)).

1. **Using Finance as a Tool for Increasing Efficiency**

**Suggestions:**

* 1. NITI Aayog can play a catalytic role in designing incentives that the central government can offer to the states to allocate more resources to health, through mechanisms such as matching contributions, incentivizing states to pursue health sector reforms and policies aimed at greater transparency, improved governance, and health system strengthening ([Bill and Melinda Gates Foundation](https://mygov.in/comment/5245601/%20-%20comment-5245601)).
  2. The center can also seek to maximize efficiencies of scale by focusing central resource spending on public goods in health that have cross-state value – such as disease surveillance, vector control, immunization – and also by financing essential commodities like vaccines, drugs, diagnostics etc. that might benefit from pooled procurement/rate negotiation ([Bill and Melinda Gates Foundation](https://mygov.in/comment/5245601/%20-%20comment-5245601)).
  3. The Government has set in motion the institutional changes necessary for implementing co-operative federalism, redesigning many of the centrally sponsored schemes. This presents an opportunity to direct central funds that can cater specifically to the needs of high priority districts ([Shailesh Kumar Sharma](https://mygov.in/comment/5163701/" \l "comment-5163701))

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**varun nadheria - 2 weeks ago**

**pradhan mantri ji,  
aaj jaise yog ka prachaar aur prasaar ho reha hai aur puri duniya main aur wo bahut aacha hai, par apne heath system ki ek vidambana hai jahan ek taraf billions rupees govt yog par kharch kar rahi wahi dusari taraf rajasthan main govt hospitals main dialysis machine nahi hai aur hajaaro log roj dialysis naa karwane ki wajah se mar rahe hai kyunki garib aadmi ke pass paisa nahi hai,ki wo private hospitals main dialysis karwa sake .**

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**vijay kumar - 2 weeks ago**

**Govt should review govt doctors service rules and give promotions and incentives on performance based use ICT and modern HRM policies use public health specialist in decision making positions. Block level national programme planning and implementation to address local issues ,minimise supervisory post in dist & state head quarters and increase the number of grass root basic workers with proper training and orientation.  
CME through MOOC affiliated to universities should be made compulsory for al**

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**AKHILESH RATHI - 2 weeks ago**

**Its my suggestion to the health minister and the govt that we should think about providing compulsory health insurance for all indian citizens.**

**I think those who can afford they can pay for themselves and for the lower middle class and poor people the govt should provide it.  
By making this the base of insurance will increase and cost of insurance will go down.**

**The insurance company will than offer better facilities and health sector will get more investors leading to great infrastructure**

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**Sharmela Sondhi - 2 weeks ago**

**Respiratory infections are the leading cause of illness and death in children. Research from Kyoto University School of Public Health concluded that simple water gargling is effective in preventing respiratory infections. According to the Mayo Clinic, for best results, dissolve half a teaspoon of salt in a full glass of warm water and gargle the solution for a few seconds before spitting it out. Gargling twice a day by children in schools can be used as a cost effective preventive strategy.**

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**swarup das - 3 weeks ago**

**R/sir,like stairs recently provided in some trains compartment if we can arrange medical chamber/cabin to attain any kind of(serious) patient equipped with all basic facilities and medicines providing runnig doctor and nurse on shifting basis,job will be generated, passenger may need to pay a little additional amount with ticket.**

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**Sandeep S Nadagouda - 3 weeks ago**

**Need to review the present education system.Graduate engrs are more tensed since job opportunities are lesser. Are medical and engg the only avenues..yes..parents think..that way..and they too are right..because opportunities for other skills are feeble and also the earnings.. I too am in dark.. To see will be the situation in next 5 yes.. Guide the people…**

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**Santterji - 3 weeks ago**

**At least one medical collage with a superspeciality hospital in each district can provide adequate treatment for our people.**

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**Santterji - 3 weeks ago**

**More medical collages needed to cover the Shortage of doctors.**

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