Best Practices 1

1. Title of the practice: Health Security plan for Rural People (Purnabramhayogini Tyagmurti Prayagakka Karad Arogya Suraksha Yojana)

2. Objectives:

- I. To provide essential health services to rural population around Latur
- II. To provide essential health services free of cost
- III. To provide family health card to everyone to ensure health security to every individual of family
- IV. To develop and enhance the mutual healthy relationship between people and health institute
- V. To provide easy access to all needy people for getting free health services

3. The context:

Latur comes under draught prone zone. The majority families are having farming as occupation and are socio-economically deprived. The cost of the health services is increasing and it is beyond their affordability. It affects their health and financial status. Simultaneously people don't receive all the services under one roof so people need to give more time and money for "shopping of treatment" at different places. To help such needy people, our institute decided to launch this scheme in November 2018 which will provide comprehensive health services free of cost under one roof within less time.

The name of the scheme is: **Purnabramhayogini Tyagmurti Prayagakka Karad Arogya Suraksha Yojana**

4. The Practice:

It was decided to cover all villages surrounding Latur and to reach every family in these villages. At first list of all the families is taken from the local authorities. Medical social workers and other paramedical workers are trained about the scheme, data collection and how to do social interactions. Near about 35 medical social workers were trained. All of them visited allotted villages and reached all families. During visits they informed about the scheme to family members and motivated them to get registered under scheme. Families were registered after their consent. Near about 195 villages were surveyed and 66095 families enrolled under the scheme. To have continuous communication mobile numbers of every family head were taken and unique phone number of the institute shared with every family head. Data of all family members entered centrally in a specially designed App.

Every registered family member have access to free OPD services, free IPD services, free investigations, free food and free essential medicines. A special desk is made at registration counter for these families. Special officer is appointed for dealing with any queries of the family members.

It was observed that few people who are old, poor, disabled were not able to reach to hospital to avail services. For such needy beneficiaries institute arranged free transport services. With the help of voluntary health workers, list of such people prepared and weekly once vehicle arranged to bring such patients to hospital and sent back to their home free of cost through transport system arranged by college.

Our hospital had different speciality and superspeciality departments and with trained health persons, with all modern equipments developed uniqueness of providing "Comprehensive Care" under a single roof and also termed as "One Stop Solution for the health of family " free of cost. It also helped in training the students for treating illness/condition by community and family based approach. It has also helped in providing a single roof to all the types of treatments to the patients. The patients availed all the types of the treatment from a single institute which helped them in the proper communication. The concept of treating everyone under one roof also helped in the reduction of the health problems of the community.

5. Evidence of Success:

We received a huge and satisfactory response from the community. We reached around 195 villages of three talukas (Latur renapur and Ausa) and near about 66905 families registered under this scheme. Total beneficiaries under this scheme were around 350000 individuals.

Surveillance work was completed in five months and services started after two months of surveillance activity i.e. from 1/1/2019. During the year 2019 around families and individuals benefitted. Cost of these availed benefits is approximately......

6. Problems Encountered and Resources Required

Initially few people were not interested about the scheme. But due to continuous reinforcement we succeeded to cover maximum number of families. As number of registered families increased there was persuasions from people itself for registration.

We faced scarcity of manpower and funds for this activity however somehow we managed it but in future we need more manpower, more financial support to run this activity on a larger scale.

Best Practices 2

1. Title of the practice: PurnBraamhayogini Tyagmurti Prayagakka Karad Free Delivery Scheme.

2. Objectives:

To provide essential and emergeny intranatal services to population around Latur.

To provide these services free of cost

3. The context:

The majority families depending for their income on farming only. As Latur is drought prone and socioeconomically deprived, and total dependency on farming make rural families more vulnerable. The cost of the health services is increasing day by day and it is beyond their affordability. It indirectly affects their health and financial status. Vulnerable groups to be affected badly are always women and children. Maternal health issues are most of the time physiological but if not cared properly it affects health and sometimes life of both mother and child. Maternal health services are very essential to secure health of mother and child. In Latur district antenatal services are widespread throughout the district but there are very few centres available for providing free comprehensive intranatal services. In Latur city only two Government hospitals providing free intranatal services and are overburdened. Considering all these issues, our institute decided to provide free intranatal services to all women coming to hospital. It includes free essential and emergency intranatal obstetric care, free medicines and surgical, free hospital stay and free neonatal services along with free immunisation services. Mothers don't receive these all the services under one roof at other places so family need to give more time and money for "shopping of treatment" at different places. To help such needy families our institute decided to launch this scheme in 2015 which will provide free comprehensive intranatal services free of cost under one roof.

The name of the scheme is: PurnBraamhayogini Tyagmurti prayagakka karad free delivery services

4. The Practice:

It was decided to cover population of Latur city and particularly of surrounding all villages and to reach every pregnant women in these villages. With this aim intensive advertisement of scheme was done in and around Latur city. All efforts taken to reach to every registered pregnant women. At first list of all registered pregnant women is taken from the local authorities. Medical social workers and other

paramedical workers tried to reach every pregnant women to give her information about this scheme with the help of local health workers of government public health system. Near about 10 medical social workers and paramedical staff were trained. All of them visited villages and tried to reach every registered pregnant women. During visits they informed about the scheme to family members and motivated them to get registered under scheme. To have emergency communication unique phone number of the institute shared with every family head and in social media. For transportation existing ambulance services of public health system were utilised which was free of cost and readily available only on a phone call.

Every pregnant women coming for delivery have access to free IPD services, free investigations, free food and free essential medicines. A special staff is made available at labour room for effective communication.

Our hospital had teaching departments of OBGY, Paediatric and Anesthesia with trained health persons, with all modern equipments developed uniqueness of providing Comprehensive intranatal Care under a single roof and also termed as "One Stop Solution for the health of mother and child" free of cost. It also helped in training the students for providing essential and emergency obstetric care.

5. Evidence of Success:

We received satisfactory response from the community. We reached around 100 villages around Latur. This scheme was started in May 2015 and upto today intranatal services provided to almost 4000 women. Out of 4000 women, 2100 women underwent LSCS which indicates that emergency and needy tertiary obstetric care was provided at our hospital. The cost of the services provided till date is approximately (considering Rs 25000 per LSCS and Rs 12000 for normal delivery) 75 million Rupees.

6. Problems Encountered and Resources Required

Although we tried to reach every pregnant women, the number of beneficiaries were less. We need to promote pregnant women to avail benefits of this scheme. For this if local government authorities and mass media help us, many women will be benefitted from the scheme.

As number of beneficiaries go on increasing we may need financial and logistic support to provide these services. We are well equipped with infrastructure and manpower however we need support in logistics, surgicals, medicines and in advertisement of the scheme.