Towards a National Health Service

Presentation to Prime Minister of India
on behalf of
National Advisory Council
2005, New Delhi
Interventions Proposed

**Current Structure**

- District
- CHCs (3100)
- PHCs (23000)
- Sub-Centre (137000)
- Village / Community

**Interventions Proposed**

- District Health Board
  - + District Health Fund
  - + Integrate all vertical programs
- 7000 New CHCs
  - + Funding only for services delivered
- Supply of drugs
  - + Improvement of facilities
  - + Strengthening programs
  - Multipurpose Health Workers (Fill all vacancies) + Drug supply
- 100 million household toilets
  - (50 million with government subsidy)
  - 1 million VHWs / UHWs + Training + Kits
Total Funding Requirement for Health Care Interventions

The above five recommendations are in line with the commitments made under the NCMP in health sector. As stated earlier, they are in addition to the ongoing programmes and the Tenth Plan commitments. The total costs (excluding capital costs for sanitation and referral hospitals) will be of the order of Rs. 7000 crore per annum – about 0.23% of GDP

- The total estimated financial outlay of these proposals is as follows:
  - Community Health Workers (Recurrent cost) Rs. 1550 crores/year
  - Strengthening Primary Health care (Recurrent cost) Rs. 2828 crores/year
  - National Sanitation Mission (Capital cost) Rs. 2500 crores/year
  - First Referral Hospitals (Capital cost) Rs. 1400 crores/year
  - Risk-pooling and Hospital care financing (Recurring cost) Rs. 2600 crores/year

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Total Rs. 10878 crores/year
National Health Mission – Issues to be Resolved

1. National or Rural?
2. Benchmarks and minimum standards of care and access all over India or in select states?
3. a. Community health volunteers (ASHA) – 1 million (one per habitat) or 2,50,000;
   b. Volunteers to be paid honorarium or not
4. PHC impediments – specifics
National Health Mission – Issues to be Resolved

5. First Referral Units at 1/100000 – how many to be built?
   7000 or 2000? and in how many years?

6. Household toilets – part of health mission or separate?

7. Hospital care costs and risk pooling
   – do we need more of the same
   or
   innovate?
8. District Health Board – its statutory status/role
9. Monitoring and accountability of PHCs and hospitals – What is the mechanism?
10. Budgeting implications for health interventions – current allocations adequate or do we need more (both Union and states), and if so where is the money?