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Health Secretary chairs National Review of NHM

23 August 2017 | News

He stresses on strengthening peripheral Health Institutions, Innovations and new strategies



National Review of the National Health Mission was recently chaired by C K Mishra, Health Secretary.

The meeting was also attended by State Health Secretaries and NHM Mission Directors from States/UTs.

C K Mishra emphasised upon the need for innovative approaches to make the facilities at the peripheries work to avoid crowding of tertiary care facilities which impacts the quality of healthcare.

Reduction of MMR, IMR, improving immunization and uptake of family planning measures in selected States /UTs, roll out of recent initiatives such as, strengthening sub Centres as Health and Wellness Centres, screening for NCDs, progress in TB elimination, status of preparedness for swine flu, addressing HR challenges, DBT payments, digital payments, rare diseases etc. were some of the issues which were included in the agenda.

The Health Secretary asked the States/UTs to take a critical look at problem areas at all layers and resolve them through innovative approaches and new ideas.

He stated, “NHM provides unparalleled flexibilities to address healthcare challenges specific to State context and needs. While there has been considerable improvement as reflected in accelerated decline of MMR, U5MR, TFR and reversing the incidence of diseases such as TB, HIV, AIDS and Malaria, areas such as NCD prevention and control requires better response.”

“The disease burden on account of NCDs is increasing resulting in substantial economic loss for families and the nation as a whole, he said. He emphasised on strengthening health systems, particularly making SNCUs, FRUs and NBCCs functional with requisite HR and equipment backed by trained team for provisioning of quality services”, he also added.

States were urged to focus on labour room protocols for intra partum care, carry out 100% Maternal Death Audit for understanding cause of maternal death and monitoring of inborn and out born deaths of sick newborns separately.

He stressed, “Mission Indradhanush is not a programme but a campaign towards increasing immunisation coverage. The states must focus on strengthening routine immunization. There is gap in initiation of early breast feeding which needs to be actively bridged through interventions/programmes such Mothers’ Absolute Affection-MAA. Complementary feeding and its quality are also issues that States need to address.”

He also urged the State to utilise the NHM flexibilities to devise new strategies and sharpen existing strategies for last mile approach. He exhorted States to start measuring service delivery and monitoring performance based on a set of deliverables with clear allocation of responsibilities and roles for incentivising and fixing accountability. He urged States to co-opt the private sector as elimination of TB is not possible otherwise.

States/UTs actively participated by highlighting problem areas, challenges and providing suggestions thereby serving not only as a forum for inputs for the Health Ministry but also for cross learning across States/UTs.