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RESEARCH ARTICLE

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Success of Public Private Partnership in Delivery of Quality Healthcare

A case study of BVG India run 108 Emergency Ambulance Service in India

Prof. Krushna Vasantrao Kulkarni Assistant Professor, AES' Tuljaram Chaturchand College (Autonomous), Baramati-413102 Dist.-Pune, MS. India

Health of the people is the Wealth of Nation. And in a populous country like India, healthcare is a big problem. The public healthcare has been one of the foremost areas of concern in India since the first five year plan. Today, the Indian public healthcare system is amongst the largest public healthcare systems in the world. The public expenditure over public health has grown exponentially over the decades and so has the reach of public health care widened over the years. From the Sub Center and PHCs to institutes like AIMMS and PGI the structure of government machinery grown like a giant. But in spite of ambitious programmes like National Rural Health Mission, the delivery of quality health care services by public health system is always doubted. The public health care is always at the center of public ire due to the issues of poor quality of service, unhealthy hospitals, non-co-operative staff, absence of doctors and staff, negligence in operations, old procedures, medicines and equipment, high absenteeism, low quality in clinical care, low satisfaction levels etc. Due to the public outcry about the above issues and some pseudo social beliefs such as public health is for poor folks, people prefer to refrain from using the public health care. In such scenario the private health care is rising on the back of failure of public health care to provide affordable, quality and timely healthcare for the people. This meteoric rise of private sector has led to spiraling of cost of medicine and health, malpractices amongst private health care such as nexus between drug suppliers and doctors, spiraling medical inflation etc. This corruption of private health care is underlined through programmes like 'Satyameva Jayate'.

State of Public Healthcare

In India, there is Public Healthcare System which provides all sorts of treatments at rock bottom prices. It is highly affordable but people are skeptic about its timely delivery and quality of treatment. The ill publicity attached with the public healthcare is not without reason. For example, in Chhattisgarh 15 women died sterilization deaths in November, 2014. These are deaths due to medical negligence in Public Healthcare Facilities. In another incident on 13th August, 2017 as many as 72 children died in a hospital named BRD Medical College Hospital in Gorakhpur due to shortage of Oxygen. More shocking was news from Nashik Civil Hospital where it was reported that 55 infants died in Special Newborn Care Unit of the hospital in the August month alone. Armed with such ill publicity, even the lowest of the income group who were forced to opt for these services are deviated from the paths of Government Hospitals. In spite of ambitious programmes like National Rural Health Mission which is now National Health Mission having rural and urban components, government has failed to be a effective healthcare player in serious medical treatments. At best it can provide some sort of primary healthcare through Primary Health Centers in treatment of wounds, Immunization, Normal and Caesarean Deliveries and Anti Natal and Post Natal Care through programmes such as Janani Suraksha Yojna. But the rest of the stories of medical negligence, indifferent staff, shortage of doctors, shortage of medical supplies etc. are the subject matters for research projects, books and movies.

And the Private Healthcare

The private sector is spreading its wings on the failure of the public health care system. The inefficiency of the public health services is working as a boon for the private sector. But it just not end here, the practitioners in the private sector have converted the noble profession of medicine into a business. And like in any business, the medical practitioners, medical stores, pharmacy companies, instrument manufacturers have joined hands to loot the consumers who consider doctors as equal to God. But these gods have forgotten the Hippocratic Oath taken by them and they are resorting to all sorts of mal practices to drain out every rupee in the pocket of their customers.

The profit margins in the business of medicine are mind boggling which is evident from the lifestyle of private doctors for whom owning cars, making foreign trips, constructing large hospitals has not remained a distant dream.

The conversion of hospitals into 5 star facilities due to entry of corporate like Appolo, Max, Fortis is forcing the patients to undergo unnecessary treatments. Many voices from the profession themselves are giving way out to their feelings through books such as, 'Ethical Doctor' by Dr.Kamal Kumar Mahawar, 'Dissenting Diagnosis' by Dr. Arun Gadre and Dr. Abhay Shukla or 'Naked Surgeon' by Samer Nashef to name a few.

In the light of the above discussion, many new initiatives have already started which are Public Private Partnership projects. Maharashtra is a innovative step and it is also quick to adapt to the innovative projects of other states. Maharashtra has its own 102 Emergency Ambulance Service but though it was a good service but there were many problems associated with it. Hence, the Government of Maharashtra took a decision to engage the BVG India for this service. Present information is a case study of functionality of the service and its success story.

Maharashtra Emergency Medical Services (MEMS)



One area where government of Maharashtra has achieved great amount of success through the Public Private Partnership is in providing Emergency Medical Services. Generally, the 102 ambulances stationed at the PHCs, Rural Hospitals, Sub District Hospitals used to provide the services. I had visited the Bharat Vikas Group 108 Response Centre Headquarter located in Pune for collecting the information about the provisioning of Emergency services.

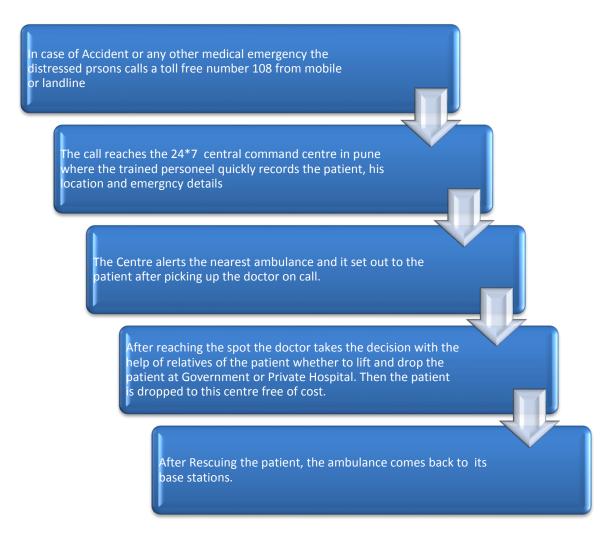
The BVG MEMS services were launched in 26th January 2014 in the state of Maharashtra before that the Maharashtra Government had its own fleet of vehicles which still operates under the call number 102. But that service had many limitations and it was not efficient enough and its fleet of vehicles had Hence. the government chose BVG Group founded Sh.HanumantGaikwad to provide the Emergency Ambulance support to the persons in distress by calling on 108. The group launched its services on 26th January 2014. This services is based on the model of American Emergency **Medical Service** for which the dial code is **911**. This services operates 24*7

and any person who is need of Ambulance and Emergency medical service has to simply dial 108. This step was aimed towards reducing the density of deaths in accidental situations to below 20%.

Scope of Service

The scope of the service is to provide a fleet of 937 Life Support Ambulances of which 233 ambulances would be Advanced Cardiac Life Support (ACLS) and 704 ambulances would be Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS).

The BVG Group has fulfilled this promise and it has commissioned these ambulance in the service. The author had own experience of calling to this number in an event of accident near Nimgon Ketki and getting the quickest response possible from the centre. It has established its headquarters which is fully functional and really provides fluent service and it has saved thousands of lives since its inception.



Smart art: Functioning of MEMS 108 Command Centre

The services of 108 are available even for private clinics and hospitals, especially in rural areas, where the availability of private ambulances is very low. The whole service is provided free of cost to the persons in distress who need emergency hospitalisation and pre hospitalisation support. All the costs related to the provisioning are borne by Government of Maharashtra.

This is a classic example of success of a Public Private Partnership. The Government of Maharashtra has succeeded in providing the emergency medical service to its citizens. The Group has proven true to its commitment and it is now considered as one of the most successful PPP intervention in health sector.

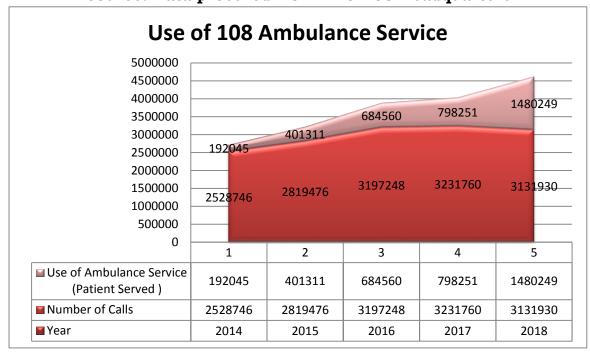
Progress in the Use of 108 MEMS Service

The data collected from the BVG Headquarters conclusively proves that this service has definitely taken off. The statistical information about the number of calls received and patients served is given in the table below

Use of Ambulance Number of Calls Year Service (Patient Served) 2014 2528746 192045 2015 2819476 401311 2016 3197248 684560 2017 3231760 798251 2018 3131930 1480249

Table: Use of 108 Ambulance Service

Source: Data procured from BVG 108 Headquarters



If we put this data in some other terms then we will find that there is clearly an up trend in the number of calls and proportion of these calls getting converted into provisioning of ambulance service. From just 7.59% calls getting converted into provision of service, now in 2018 this has gone up to 47.26%. Especially during 2017 to 2018 this rate has doubled from 24.7% to 47.26%. The service provider justified this due to increase in awareness and reach of the service. Another reason sited by some of the patients surveyed from PHC and SC was that they or their relatives had previous experience of use of service and they provided the feedback that the service was timely and hassle free.

Table: Calls Resulting in Provisioning of Ambulance Service

Year	Calls resulting in provisioning of service
2014	07.59%
2015	14.23%
2016	21.41%
2017	24.70%
2018	47.26%

Source: Authors own calculations from the Data received from BVG India Awards and Recognitions Received by BVG MEMS

This service has received many International and National Awards which include the prestigious **Scotch Award**. In February 2019 the Government of India and the World Health Organisation gave it the Best Practice in Digital **Health Initiative** award in GDHP held in New Delhi.

Conclusive Remarks:

- The success of this Private Intervention in delivery of Quality Healthcare have really underlined the fact that Private players can be successfully Replicating the model of Maharashtra many other states have taken the services of BVG in managing Emergency Health Services. In July 2016, the Government of Delhi too have assigned the service to BVG and in December 2017, the Government of Andhra Pradesh also took the services of BVG.
- > The researcher feels that such initiatives which run the state of art call centres and have highest degree of transparency should be replicated and the agency providing such service should be involved in more such initiatives.
- > There is need to involve private agencies with good track record to offer more services of public use with their help. Accordingly, the Government of

Maharashtra has accepted the proposal of the BVG Group for -Model project for Motor Bike Ambulance Project in Maharashtra (30 motor bikes) for Health Department and School Health Providers Project for the Tribal Development Department.

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