



In conversation with Dr. Sanjiv Kumar

Details of the event: Public Taskforce for Accountable Healthcare (PTFAH) has conducted a webinar with the renowned personality Dr. Sanjiv Kumar. PTFAH believes healthcare should not be supplier-driven but demand-driven, based on care seekers' needs. The initiative intends to make healthcare accessible, affordable, accountable, and outcome-driven.

Hosted by: Public Taskforce for Accountable Healthcare, an initiative of the Health Parliament

Anchored by: Kritish Kushal and Smriti Lohia

Date: 13th January 2023

Time: 2:30 pm- 3:30 pm



Dr. Sanjiv Kumar currently chairs the Scientific Advisory Committee of the National Institute of Cancer Prevention and Research, Indian Council of Medical Research (ICMR). He has served as Executive Director at the National Health Systems Resource Centre, Ministry of Health and Family Welfare, Government of India. He has done MBBS and MD from AIIMS, New Delhi. He has 46 years of experience across 30 countries worldwide in the domain of healthcare. His experience includes working for UNICEF for 22 years in India, Iraq, Kenya, Uganda, Somalia, and Bangladesh. And he has also served as Regional Advisor for 22 countries in Central Asia, Central and Eastern Europe, and Baltic States. He has published more than 125 scientific papers, chapters in books and magazines on leadership, maternal child health, immunization, infant and young child feeding, non-communicable diseases, health policy, and public health management cadre.

Key Takeaways

- Africa's neighbor health system and social aspects of healthcare, which Dr. Sanjiv Kumar happened to experience during his tenure in countries like Kenya, Uganda, Somalia, and others. We are generally dependent on only doctors, but in Africa, caregivers are first physician assistants or nurses who can become clinical officers after three to four years of training in clinical medicine, surgery, and community health.
- Healthcare is not just about doctors alone; healthcare delivery is a team effort. It includes lab technicians, pharmacists, paramedical workers, and nurses. Everyone in the system is important in order to deliver quality healthcare.
- He emphasized on Public Health Cadre, which is working at PHCs, CHCs, and Block/District/State hospitals and Directories, performing both public health and primary health-related clinical functions.
- India focuses a lot on documentation instead of practical aspects of healthcare, so we need to strengthen our implementation responsibilities in healthcare to make it more stringent and outcome-driven.

- **Accountability:** Healthcare should be a human right because if it becomes a policy then it automatically becomes judicial.
- There are four key pillars in the healthcare system:
 1. *Human resources:* Enough doctors, nurses, and other allied healthcare workers are needed in the system
 2. *Skills:* Upskilling through technology is required in order to alleviate problems in healthcare
 3. *Supplies:* an adequate amount of resources are required for properly channelizing the flow of healthcare delivery.
 4. *Trust:* It's an essential factor for patients to believe in the system.
- Dr. Sanjiv talked about two components of the Pradhan Mantri Jan Arogya Yojana: Primary Healthcare and Health & Wellness Centre.
- **Improvement in the system:** Evaluation and review of healthcare institutes should be done regularly to continue improving healthcare outcomes.
- When any policy is to be made, policymakers should look at accountability and implementation framework. For example, National Health Policy 2017 had this provision that government should spend 2.5% of GDP on Healthcare to make the government more responsible towards the healthcare sector.

- Public Health Management Cadre guideline, which includes Specialist Cadre, Public Health Cadre, Health Management Cadre, and Teaching Cadre, should be rolled out in every state and union territory of the country.
- We need to have more PHCs and HWCs. But to have that, we need to first have more healthcare staff like doctors, nurses, nursing supervisors, multiple-purpose health workers, and others. We need a strong primary healthcare worker team so that most of the health problems can be detected at an early stage, they can be prevented, those who have risk factors could be followed at primary health centres only and those who return from hospitals, their compliance to treatment can be monitored. It is the grassroots-level functionaries who will monitor the patient. Every aspect of Primary Healthcare needs to be strengthened.
- We need coordination and collaboration between the private and public sectors. Then it comes to various departments at the state, district/sub-district level. The influence of the private sector is not just limited to private hospitals instead, it impacts medicines, equipment, supplies, and others.

- We have to start thinking about mental health more openly. India needs to have enough counselors, psychologists, and psychiatrists to address mental health problems. We should also emphasize having counselors at schools, especially as these days children are getting prone to more mental health issues like anxiety, depression, etc.
- The National Health Service (NHS) of England is one of the best healthcare models in the world. NHS promotes high-quality healthcare for all and supports its organizations to work in partnership to deliver better outcomes for our patients and communities.
- Accountability and responsibility at every level, from government, healthcare institutions, to patients, should be practiced to make healthcare more outcome-driven.

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