

Health Sector Analysis of sample districts

Under DSSP all DGs were required to prepare ASPs highlighting the areas where budgetary support is required and activities to be under taken to achieve desired objectives. It is pertinent to mention that this was first time that DGs were asked to prepare their Annual Sector plan based on that allocated amount will be released. The effort made by DGs despite of having limited capacity is commendable. These ASPs are specific, targeted, attainable and simple as well.

There are certain activities in which almost every DG has demanded/allocated the amount is activities under EPI its cold chain maintenance, awareness campaign amongst masses and capacity building program of Health manpower. Since these activities is being sponsored by different donors Health Department is required to look in to the matter whether there is duplication of work or some thing which require further elaboration and commitment from sponsoring agencies. While going through different ASPs it is revealed that DGs are facing acute shortage of basic infrastructure like beds, tables, obstetric instruments, minor surgical equipments, catering needs of more than 50% population with such type of health facilities require further commitment from Provincial Government and its counterpart donor agencies.

The analysis of ASPs district wise is as under:

DADU

District Dadu is one of the backward district of Province. The condition of social services similar to other districts is not up to the mark as envisaged from Annual Sector Plan. Almost 42 health institutes are non functional. Basic facilities available to masses require complete revamping.⁵³ Units identified which have cold chain facility alongwith 02 vaccinators (07 Taluka).

In the Ist Year the amount allocated is on following activities:

- Strengthening of BHUs
- Strengthening of RHCs
- Strengthening of Taluka
- Routine Immunization
- Cold Chain Maintenance
- Hepatitis “B” prevent
- Strengthening of Human Resource
- Development
- Vehicle / Repair

Besides this, ASP prepared for next three years reflects strategy of DGs in other areas of activity as well .The plan is very comprehensive, specific, transparent however, require further refinement and focused approach.

KHAIRPUR

Objectives of proposed Health initiatives are very specific 07-point agenda activities are spread over (2004-06) period.

- Obstetrical care services at BHUs.(UNICEF)
- Upgradation of 03 RHCs to THQHS (8400000/24000000}
- Strengthening of BHUs (1436000/45904000)
- Extension of Hospital Building.
- Communities Involvement in Routine Immunization Services.
- Integration Mechanism for Reproductive Health Services.
- Most of the amount allocated is for rehabilitation of basic health units, prevention of Hepatitis “ B”.

There is major emphasis on rehabilitation work to improve condition of health centers.

THATTA

Construction of new BHUs is not allowed under Government of Sindh policy as mentioned in the ASP plan though rationale is provided (Page-9). More over, if DG still consider that this facility is very much required than appropriate permission may be taken from relevant authorities.

In this plan certain duplication is being observed because quite reasonable amount is demanded for activities being under taken through EPI and Malaria Control Programme.

This Plan requires revision to make it more rational and specific.

HYDERABAD

This year DG Hyderabad has allocated an amount of Rs 85,594,250/ (47.7%)out of total outlay of Rs. 179,270,800/ i.e. 100% over three years. The major amount is allocated for the strengthening of BHUs, RHCs and THQHS.

GHOTKI

Headquarter Hospital 1, THO 2, RHC 04, BHU 29, Shaikh Hamdan Hospital Khairpur Mahar 01, Government Dispensary 09, Maternity Home 01, Experimental Dispensary 09.

Total Budgetary request is amounting **235,794,675.00.**

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SUKKUR

Whereas, the ASP is all about the annual planning for the district however, component budgeting has not been specified that what specific activity is required from that particular project. Moreover, construction of hostels blocks etc is not permissible under DSSP that also need further revision.

303421790 (1st Year)

551034790 is expected from DSS

Pakistan's first ever 'telemedicine' project launched

KARACHI, 1 APRIL: The first-ever telemedicine project in the history of Pakistan was launched here on Thursday, which was inaugurated by Governor Sindh Dr Ishratul Ibad Khan. The project launched by Engro Chemical Pakistan Ltd will link the Gambat Institute of Medical Sciences and Civil Hospital, Shikarpur with the Jinnah Post Graduate Medical Center, Karachi in the first phase.

The project scope extends from transmission of electronic medical data, radiological and digital images, heart images, heart sounds and ECG to live real-time interactive videoconferencing sessions between the patients at the remote health centers and consultants at the specialist hospitals.

The project is a model public-private partnership between Engro Chemical, the Government of Sindh, Pakistan Telecommunication Co Ltd, Telemedicine Association of Pakistan and Narayanaheart Foundation, Bangalore, India.

The Governor Sindh in his speech praised the of launching of this innovative technology in Pakistan, adding that it would benefit the population of remote areas a lot, which have limited access to medical facilities.

He directed provincial health department to set up telemedicine unit in each district headquarters' hospital of the province.

Ibad, while commending the Engro Chemical for introducing this new technology, said as you have come up with this new innovation, now it is on part of government to pursue it and expand it in far-off areas of the province.

He assured all possible help to the company in its future projects and said that provincial government would be backing the initiatives aimed at providing medical facilities to the people, as it is focusing much on healthcare system.

Ibad said that Sindh has taken the lead as new technology has been launched here first and hoped that it would also be initiated in other provinces also. He called for maximum utilisation of potential of medical professionals, saying that current level of utilisation is below the one which country possesses.

Engro Chemical Pakistan Ltd President, Asad Umar in his address

said that concept is based on delivery of health care services by medical professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of diseases where distance between the patient and specialist is a critical factor.

"The company expects the project will provide the poor patients in rural communities quality treatment at their doorsteps, and will reduce the expense and influx of patients at the already overburdened urban health centers, he maintained.

PTCL President Junaid Khan on the occasion said co-operation in the project by the PTCL is due to its social obligations as huge disparity exists between urban and rural areas of country as far as medical facilities are concerned.

Dr Zakiuddin Ahmed, General Secretary Telemedicine Association, said that telemedicine technology is not replacement of conventional health delivery system but to supplement it for the larger benefit of people in far-flung areas of the country.

On the occasion, Dr Devi Shetty from Bangalore, India and Hospital administrators from Shikarpur Hospital delivered their messages through live video-conferencing.

Later, Dr Rasheed Jooma of Jinnah Postgraduate Medical Center provided first-ever telemedicine consultation to a patient in Civil Hospital, Shikarpur.

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