

Institute of Health Systems

Director's Report

Second annual general body meeting (1994-95), 24th December, 1995

Ladies and Gentlemen,

I extend a hearty welcome to all members to this second annual general body meeting of our Institute. From July 30th, 1993, the Institute temporarily shifted to this private accommodation in Adarshnagar. Though we have joined the State's Professional Councils such as the Medical Council, Nursing Council, Pharmacy Council and Dental Council in the construction of an office complex, it would take some more time for this accommodation to materialise.

The core grant which was provided to the Institute by the Ford Foundation came to an end on 30th June 1994. Since the Foundation has decided to support only N.G.Os in Maharashtra and Gujarat it was not possible to renew this grant. At the same time the facilities acquired with the core grant has been maintained and moderately developed during the current year.

Completed and Ongoing Projects:

A. Training for non formal health workers in Bhadrachalam I.T.D.A:

We have adopted an approach of continuous research and development for formulating appropriate modules and conducting training programmes for different levels of Health personnel. In tune with this approach a rapid assessment of the local morbidity pattern, and skill gaps of health workers was done by a faculty team. This was followed by listing of topics for coverage and collection of literature on each topic. The write up on each topic was first discussed by a faculty group and then released to external experts for critical appreciation. This feed back was used to refine the course material. Training programme was then organised with IHS faculty, local faculty and some guest faculty. The course was also evaluated and the feed back, used to refine the course material for necessary training.

B. Assessing the need for and designing an accreditation system: A case study in AP: (International Health Policy Program).

The following were the main objectives of this study:

1. to study the feasibility of building up and maintaining a database of health institutions in the private sector.
2. to assess the demand for accreditation services by studying the views and attitudes of the consumers and providers.
3. to develop locally relevant product and process standards for private health institutions by applying various consensus building methods.
4. to apply Policy Delphi method for arriving the contents of an accreditation policy.

This project is funded by health policy network (HELPONET) project of the International Health Policy Programme. Four of our faculty members had attended a training workshop organised under this project at the Indian Institute of Management Ahmedabad (I.I.M.A) from August 29th to September 3rd 1994. A faculty member from the Centre for Enquiry into Health and Allied Themes (CEHAT), Bombay had spent one month with the Institute as a consultant in preparing a policy document on accreditation in the Indian context. Though we had sent the second six monthly report and the final research proposal

for our project, due to some perceptual differences, IHHP decided to discontinue support to the Institute in December 1995. Only a part of the expenditure due to IHS on account of this project was reimbursed. Though this created some hardships to the Institute we could recover from it and carry on our activities.

C. Andhra Pradesh Health Institutions Database:

(Ford Foundation - IHPP)

The public sector part of this database was supported by the Ford Foundation and its unique private sector component was supported by I.H.P.P. Validation of data on private hospitals and nursing homes using the mailed questionnaire was completed during the year and next level of validation by fieldwork was carried out for few districts. Currently there are 3271 of private and voluntary hospitals and nursing homes on APHIDB totalling to a bed strength of 47971. Considerable amount of programming was done in Fox Pro to readily cater to the requests from queries.

D. Medflor - India: An Ethnobotanical Database:

(Girijan Co-operative Corporation - Kovel Foundation)

The Institute has set up a computerised database of Medicinal Flora called Medflor - India with the following objectives:

1. To systematically collect all available ethnobotanical information, mainly the usage of medicinal plants by different ethnic groups of Andhra Pradesh;
2. To systematically code available literature and to develop a computerised database of collected ethnobotanical information;
3. To provide search and query services to researchers, research institutions, public health workers about medicinal plants in Andhra Pradesh;

The support from G.C.C. to this project got over during the year. However a bridge fund was offered by the Kovel Foundation, Visakhapatnam to carry on the activities during the rest of the period.

Currently the Medflor India Database contains entries of 338 unique usage of 600 plants. A media coverage was organised for this database which was carried in Newspapers published from Bombay, Ahmedabad and Bangalore. In response to these we got several queries enquiring about the services offered by this database.

E. Government Health Expenditure Database:

Government expenditure for AP on health and related services has been collected upto the detailed head level. To analyse this data a package called "Government expenditure analyst" has been developed which can analyse data upto the sub head level. This package is compatible for taking in data for other states also. With some additional programming it will be able to handle the data up to the detailed head and for other sectors also.

Publications and Seminar Papers:

The following are the publications and seminar papers from the Institute during 1994-95.

1. Prasanta Mahapatra, Government expenditure in health in Andhra Pradesh: Has it been Appropriate? IHS Working Paper.
2. Prasanta Mahapatra and S Sailaja, Assessment of demand for accreditation services in Hyderabad: A pilot study, IHS Working Paper.
3. Alex George, Health status of Andhra Pradesh in comparison with Tamil Nadu, paper presented at the workshop on health status of AP at CESS, Hyderabad, 2 -3 Jan.1994.

4. D.Raghuramulu and D.M Shah, Medflor India - An Ethnobotanical Database of Andhra Pradesh, Paper presented at the Fourth International Congress on Etnnobiology held at the National Botanical Research Institute ,17-21 Nov.1994 Lucknow.

Faculty Attachments:

During 1994-95 some of our faculty were attached to the Administrative Staff College of India (ASCI) for various duration on projects related to their background. We thank the Social services division of ASCI for offering this facility.

Database and Computer Services:

1. Since the Prime Minister had evinced an interest in the medicinal plants of the Nallamalai hills, the Department of forests A.P. had collected this information from the Medflor India database.
2. Administrative Staff College of India had utilised the AP health institutions database for their Beneficiary social assessment project.
3. The personnel in our computer services group had offered their programming skills and conducted training programmes in computer operations to certain Government Departments / Corporations.

Projects in the offing

A. Demand and Satisfaction of the Mauritius Health System

(Harvard School of Public Health)

As part of a larger study on cost effectiveness of the health system of Mauritius taken up by the Harvard School of Public Health (HSPH). The Institute of Health Systems conducted a study on the Demand and Satisfaction of the Mauritius Health System. This part of the study was planned and executed by the Institute of Health Systems. The fieldwork for this study was scheduled for June-July 1995 based on Susan Scrimshaw's rapid appraisal methods. The Institute carried out an exit survey of systematically selected In patients and Out patients along with Focus Group discussions in household groups and with members of Local Health Committees (LHC) who are closely related to the functioning of the peripheral health delivery institutions in Mauritius.

B. Hospital Autonomy: A Case Study of APVVP

(Harvard School of Public Health)

The Andhra Pradesh Vaidya Vidhana Parishad (APVVP) was constituted in 1987 as an autonomous Commissionerate of all Secondary level hospitals in the State of A.P. This is the first Commissionerate of this nature set up by any state in India. The purpose of setting up such an autonomous Commissionerate was to give special attention to the curative health needs as distinct from primary and tertiary care by making use of the autonomy granted to it. This experiment has caught the attention of the World Bank and also various other states in India. As part of an international project on Hospital autonomy of the Harvard School of Public Health the Institute is conducting a case study of APVVP. In this connection Dr. Peter Berman renowned health economist from HSPH visited the Institute in October 1994.

I would now request you to consider this report and give your valuable suggestions for the development of the Institute. I and my colleagues at the institute would strive to translate your suggestions into action.

Date: 24 December, 1995

Dr. Alex George, Director