

**STUDY ON CHALLENGES IN
IMPLEMENTATION AND FUNCTIONING
OF SWASTHYA ATM IN MADH
YA PRADESH**

**Presented by:
Rajeshwari Yadav
0639**

INTRODUCTION

- Health ATM covers 3 important health related components for beneficiaries.
- It's a comprehensive process which provide diagnostic, consultation and medicines all services at a single place and free of cost.
- It reduces the out of pocket expenditure, travelling time and reduces the time taken to avail each of the services
- specialist from urban cities are available to rural population.



medango		DOCTOR QUEUE		WISH	
Consultation Report					
This Month		This Week		Total	
100		57		23	
Dr. Che					
		Mantasha			
		1366821729			
		Female			
		25.7 Yrs			

Major stakeholders

- Physicians, beneficiaries, administrators, provider company, government (support) and GNM are the major stakeholders.
- Doctors and GNMs are in direct contact with the beneficiaries
- However, a large chunk of financial investment is done by provider company. Provider encounters numerous challenges while implementing it

LIMITATIONS OF THE STUDY

- ▶ This study focuses only on GNM's and provider company's perspective.
- ▶ WISH teleconsultation project is a pilot project, so there are only 10 units.
- ▶ Few challenges from beneficiaries perspective are included to better understand the reason leading to less footfall.

RATIONALE

- ▶ Despite teleconsultation being capable of doing wonders it still hasn't been so popular, it's rate of growth is slow.
- ▶ And there are various cases when they couldn't perform in the expected way. Various stakeholders are involved in this circle of service delivery.
- ▶ This study is aimed to find out the challenges which a provider company and GNM face.
- ▶ From arranging doctors till providing quality care to patient a lot must be taken care of. The purpose is to find out the reasons and steps they take to increase the footfall of patient and smooth functioning of teleconsultations.

RESEARCH QUESTION

- What are the challenges in implementation and functioning of health ATM from provider company's and GNM perspective?

RESEARCH OBJECTIVE

- ▶ To study the challenges in implementation of Swasthya ATM among health care providers in Madhya Pradesh?
- ▶ To study the challenges in functioning of Swasthya ATM among health care providers in Madhya Pradesh?
- ▶ To suggest steps if any, that can increase the footfall of patients?

METHODOLOGY

► STUDY DESIGN

Qualitative (Exploratory) study

► Sample size

1. 10 facilities where swasthya ATM are established were included in the sample. Centres are located in Jabalpur, Vidisha and Bhopal district of Madhya Pradesh.
2. WISH MP Scale team which consists of 7 members who had been looking after all the centres from the initiation of the project.

► METHODS AND TOOLS OF DATA COLLECTION

Semi structured questionnaire was used for face to face interviews and focus group discussion. Primary data was collected by face to face interviews.

USAID

सिटीरुडम



medongo



WISH



आराम से खोलिए



मध्यप्रदेश सरकार और
WISH की साझा पहल



OBSERVATIONS AND RESULTS

Challenges faced by Providers

- ▶ **Technical snag related to software and hardware.**

SOFTWARE -System update, bug, virus all hampers the teleconsultation process.

HARDWARE- snags like fault in medicine vending machine, printing issue, faulty readings of diagnostic test etc demands urgent attention.

- ▶ **Internet issue including recurrent loss of signals and slow internet speed.**

With every loss of signal, the consultation failure takes place

- ▶ **Any brake in electricity** can shut the centre any time.

Without electricity nothing can happen. “ *islie humne invertors ka provision kia*”.

► **Absenteeism among GNM's**

GNM facilitates the whole consultation process. In case when she is absent, no consultation takes place.

► **Waiting time for consultation.**

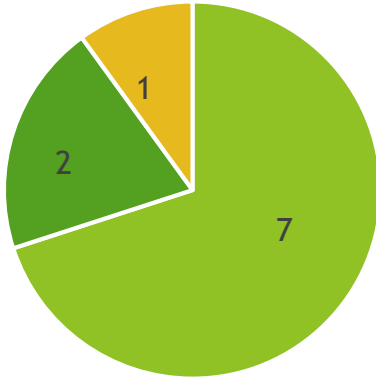
If doctor is busy providing consultation at the other centre, then a long waiting period is observed by other patient



Spreading awareness about teleconsultation
in community.

CHALLENGES BY GNM

Fluctuations in Internet Connectivity



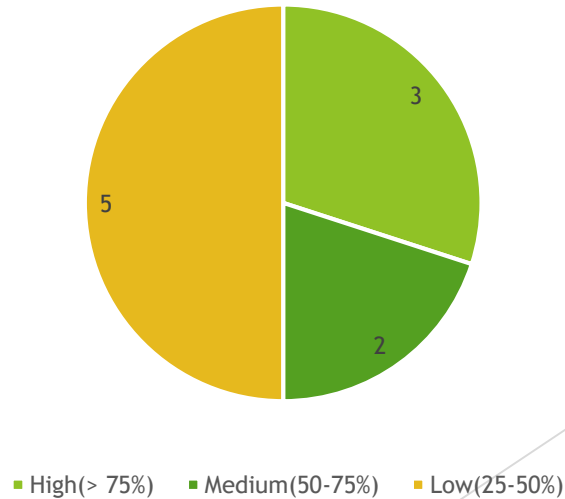
■ High(> 75%) ■ Medium(50-75%) ■ Low(25-50%)

“Sabse bada problem internet hai agar server down ho jaye to sab band ho jata hai. Phir wo buffer hota rehta hai”

ACCEPTABILITY BY THE STAFF

- ▶ *“wo government of india ki visits mein bhi humare bare mein nahi btate. Officer khud puche to bol dete hai ki haa wo bhi hota hai”*

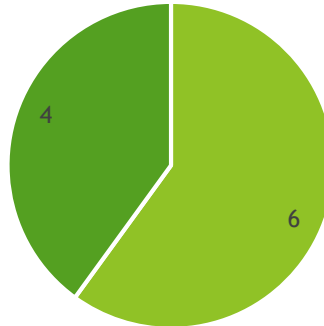
Sense of ownership among staff



LANGUAGE BARRIER

► *“Patients ko samjh nahi aati language to wo theek se apni problems bta nahi paate hai doctor ko. Jiski wajh se wo MO ko hi dikhate hain.”*

Language barrier faced by patient

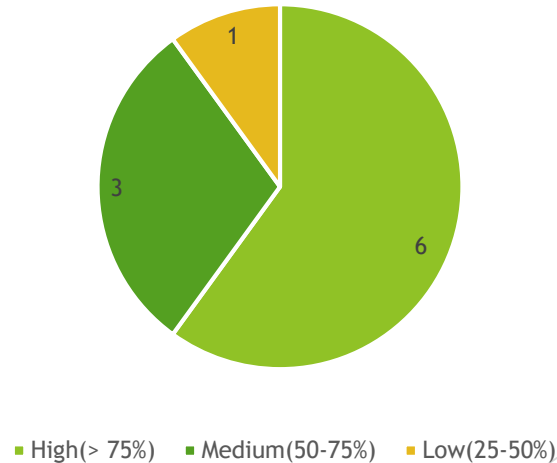


■ Yes ■ No

SOFTWARE SNAGS

- “Ma'am fail ho jata hai to sab double se karna padta hai, temperature b dobara lo, bp b dobara lo to time lag jata hai, phir wo log sochte hai ki time bhut lagta hai isme”

Software Glitches



BENEFICAIRY

WAITING TIME

Each consultation with optimum internet speed takes 15-18 minutes.

In cases where doctor is busy with other consultation, it increases largely

HAND OF THE DOCTOR

Patient misses the touch of the doctor which is necessary for their satisfaction

“doctor sahib bina dekhe, htah lagaye kaise ilaaj karege”

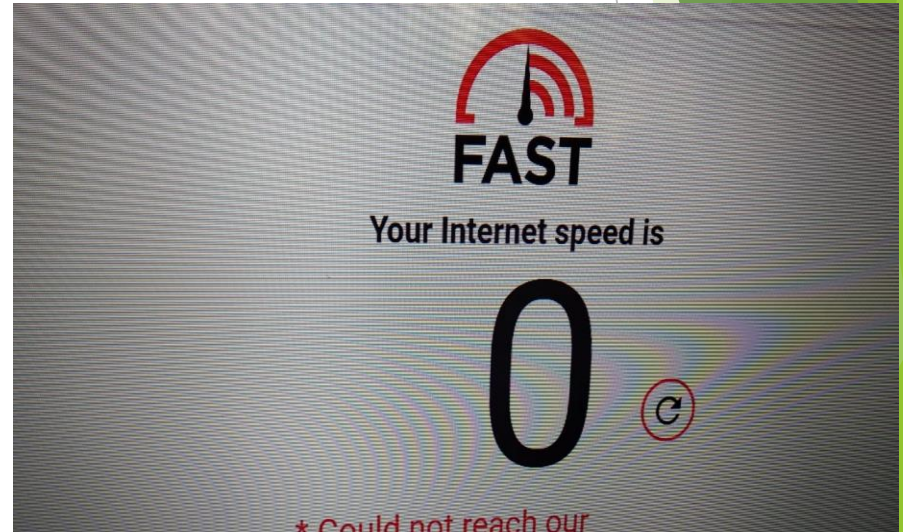
TRUST ON TECHNOLOGY

“ye TV se ilaj hume nahi bhaata”. People don't trust technology

RECOMMENDATIONS

► INTERNET

Better internet plans from good network provider will solve the issue.



Acceptance by the community

- ▶ Issue arised because of lack of trust in technology
- 1. Eduacting the community
- 2. Telling them about success stories
- 3. Nukad nataks
- 4. Taking the help of ASHA, ANM to spread the knowledge in the community

Absenteeism among GNMs

- ▶ Issue arised because the staff has not accepted them and innovative swasthya ATM
 1. Orientation of the staff towards Swasthya ATM
 2. Change in work culture of the facility
 3. DPM, CMHO should tell about the success stories of e-health

Lack of government support

- ▶ Issue arised because government due to lack of investment on their part
- 1. Include government by asking them to provide pool of doctors from MP, this will in turn resolve the language barrier
- 2. Government can provide Training to staff nurses to assist in teleconsultation so that even they add to the service.

RECOMMENDATION

- Awareness and promotion will attract patient to beneficiaries. Government should take the help of ASHA, ANM to spread the knowledge in the community.
- A high speed internet plan should be used.
- Government should provide pool of doctors from MP, then language barrier can be resolved.
- Doctors and facility staff should be motivated to highlight the services of teleconsultation, this will create a sense of ownership in the staff.
- Government should provide Training to staff nurses to assist in teleconsultation so that even they add to the service.

CONCLUSION

1. Technological snag that includes internet connectivity and electricity supply.
2. Acceptance by the community, health professionals, government and patients.
3. Lack of motivation among health professionals to take additional responsibilities for the community welfare is another important factor.
4. Lack of government support to promote teleconsultation
5. Absenteeism among GNMs.