

Background

- * Rajasthan government introduced Bhamashah Swasthya Bima Yojana(BSBY) eyeing the marginalized sections of society for whom one major health problem can have devastating effects. These marginalized people mostly work in unorganized sector for such people this scheme is ray of hope.
- * BSBY is to provide free treatment to eligible peoples under the scheme through selected Government hospitals(CHC & above) and selected private hospitals.
- * Treatment is provided at pre determined rate in the form of packages and BSBY provides highest number of such packages in the country i.e. 1715.
- * Present study focuses on Swasthya Margadarshakas (SM) under BSBY who have pivotal role to play in implementation in scheme.

Objectives

- * To know the total number of SM Recruited in the selected hospitals.
- * To measure the knowledge of SM about the scheme and its different components.

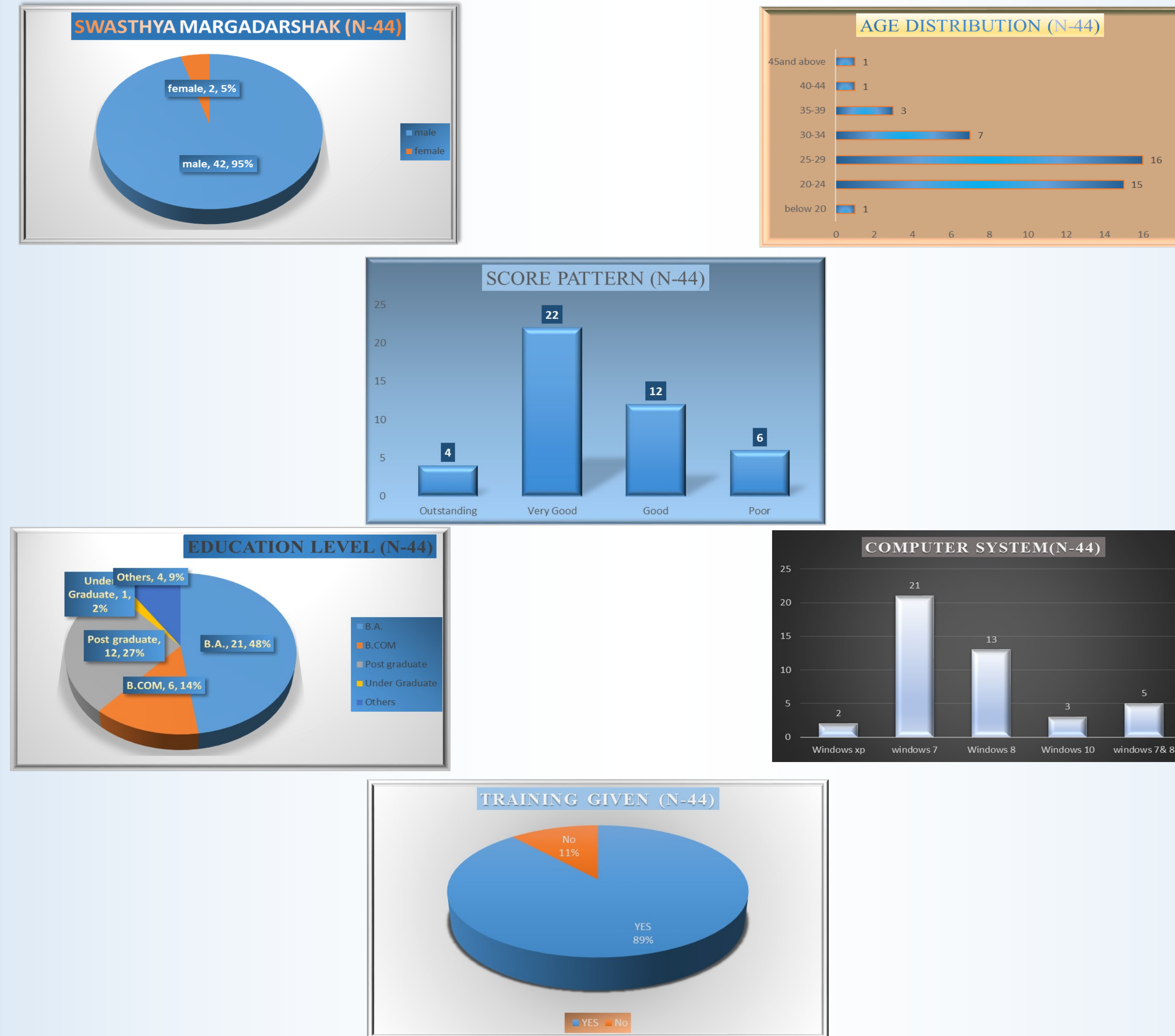
Rationale

- * SMs are generally a first point of contact between potential beneficiary of the scheme and hospital.
- * No data is available on number of SM recruited in hospitals whether its government or private.

Research Methodology

- * **Study Type**– Cross sectional descriptive.
- * **Study Method**– Mixed (Qualitative & Quantitative)
- * **Sample size**-
 - As the exact number of SM was not available, on the basis of guesses from the DPM (that 400-500 of SM should be working in Jaipur district), an attempt was made to collect 50 samples. Forty four responses was collected by visiting 29 health facilities purposively. Out of these 12 were Government and 17 were private facilities.
- * **Duration of Study**– 2 months
- * **Duration of Field visit**–15 days.
- * **Data Collection Tool**- semi-structured tools (In Hindi & English) was used for data collection. The tool was filled by respondents.
- * **Data Analysis**-
 - Microsoft Excel 2016 was used for data analysis.
 - In 19 questions, one right was response allotted 5 marks. Knowledge of the respondent was categorized in to following categories
 - 1) Above 80- Outstanding 3) Between 71-80 - Very Good
 - 2) Between 61-70 - Good 4) 60 And below - Poor.

Major Findings



- * All the surveyed SM gave details about type of work they perform, it mainly included following
 - Admission and discharge of patient.
 - Arranging camp for BSBY.
 - Giving knowledge to people about scheme.
 - Answering query.
- * SMs were asked about MDP (Minimum document Protocol) and packages under it. Majority of SMs i.e.95% were unaware about MDP and packages in it.
- * Question was asked to respondent whether they are aware about GRC (Grievance redressal committee) under BSBY. Majority of SMs i.e.73% were unaware about the GRC.
- * All the SM surveyed were well aware about editing/modifying of previously booked package.
- * All the SM satisfactorily told their duties at the time of discharge of Patient.
- * Feedback form is available for the purpose of scheme in all the hospitals.
- * All the respondents told that they read the circulars/guidelines related to scheme regularly.
- * When asked to SM about problem faced by beneficiary in availing benefits of scheme. They told it as follows:
 - Late approval from NIAC(New India Assurance Company)
 - Non availability of some packages.
 - People are not properly aware about scheme.

Field visits



Recommendations

- 1.Recruitment of women as SM need to be improved as the number was very small.
- 2.Some mechanism should be developed to test computer proficiency of SM after training.
- 3.SM could be sensitized about problems of patient , some training in behavioral sciences might be useful.
- 4.Regular data from the private hospitals should be collected regarding number of SM they have recruited.

Conclusion

SM are considered as cog in the wheel in the BSBY Scheme. SM are the persons who constantly deal with the beneficiaries or potential beneficiaries, hence they need to be focus of, any major initiative to be introduced in BSBY.

Scheme is proving to be measure success from its initial results and it is evident from this study that SMs are working satisfactorily and they had important part to play in scheme's success.

Limitations

- 1.Limited time period under summer training acts as major impediment to undertake comprehensive research on the subject.
- 2.Purposive sampling is another limitation of this study.
- 3.As the SMs worked in shifts it was hard to visit the hospitals at different times.