Summer Training Programme at National Health Mission, Mumbai

MBA Hospital and Health Management
2015-2017

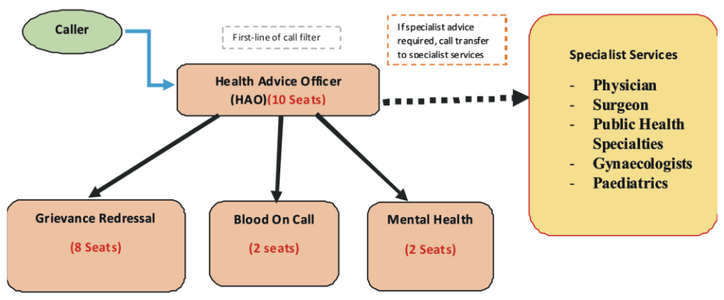
IIHMR UNIVERSITY

Utilization of Health Advice Call Centre 104 in Maharashtra

INTRODUCTION

The Health Advice Call Center of 22 functional seats has been in operation since 2012for the Maharashtra state at Chest Hospital,Aundh, Pune with an aim to provide 24x7 medical advices to health care provider for quick decision to provide smooth, effective and qualitative health care. The health advice is given to caller who will dial simply 3 digit toll free number "104" from landline or any mobile phone. The specialist's advice by Paediatrician, Gynaecologist, Surgeon, Physician and Public Health Specialists is provided 24x7 to the caller. To begin with, the call centre may be rendering advice to ANMs, ASHA worker, School Health personnel and Medical Officers of Primary Health Centre, Mobile Medical Unit, and Rural Hospital.

STRUCTURE



Performance of HACC 2011-2015

Year	ASHA	ANM	MO	Others	Blood on Calls Progressive	OG calls	Grievance calls	Mental Health Progressive	MCTS	HD	Total
2011-12	17112	8624	4790	0	0	0	0	0	0	0	30526
2012-13	74232	29615	13946	85053	0	20185	0	0	35441	510	258982
2013-14	91496	33638	13100	82154	2828	125647	82	0	12025	0	360970
2014-15	169633	51872	12717	121523	25357	341986	2664	0	0	0	726194
2015-16 (April 15-January 16)	120468	37320	8762	134373	23728	346293	5035	12225	0	0	688204
Total	**472941**	**161069**	**53315**	**423103**	**51913**	**834111**	**7781**	**12225**	**47466**	**510**	**2064876**

STATEMENT OF THE PROBLEM

There seems to be a significant gap in the overall compliance among ASHA's, ANM's, MO's and other health workers of Maharashtra towards the utilization of HACC 104 as evident through the call volume rates of past 5 years.

RESEARCH QUESTIONS

Q1. How effectively are the services of HACC 104 being supported and utilized?

Q2. What are various challenges and barriers for the success of HACC 104?

OBJECTIVES

1. To assess the attitudes and compliance among concerned stakeholders i.e. ANM's, ASHA's and other Healthcare providers for service delivery.

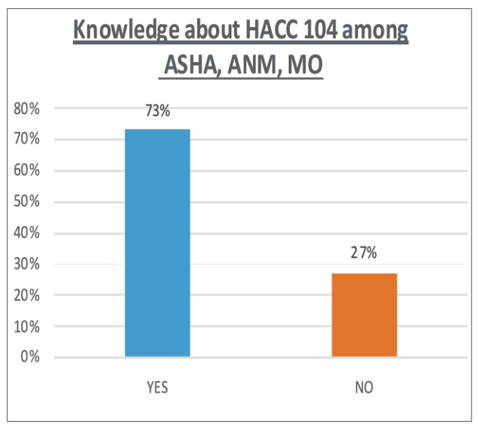
2. To analyze the response and the call volumes received from ASHAS's, ANM's, and others

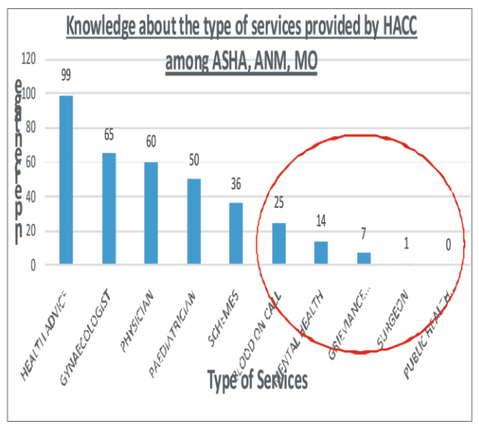
3.Understand the overall challenges faced in utilizing this service in rural areas.

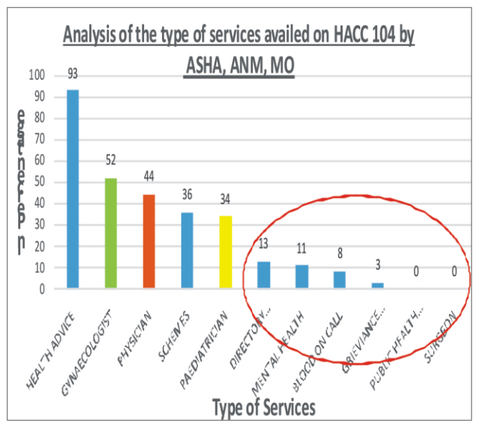
REASEARCH METHODOLOGY

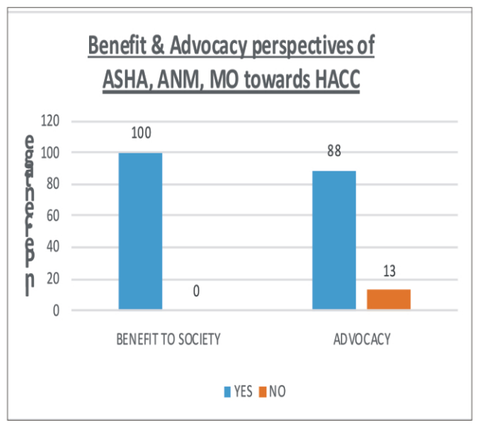
This was a Cross-sectional Descriptive study that was conducted in the State of Maharashtra through telephonic interviews from NHM Head Office, Mumbai.The study subjects included the frontline health workers i.e. ASHA's, ANM's and MO's belonging to various districts of Maharashtra.The sample was drawn from a fully comprehensive and exhaustive list comprising of **57,245** ASHA's, **18,194** ANM's and **5,006** MO's.A Non-Probability type of convenient sampling was followed due to time constraints for selecting the number of respondents and thereby, a sample size of **120** was finalized. Further, a break-up of individual cadres was calculated based on the overall strength of members in that particular cadre. A Probability type of Systematic Random Sampling was carried out to select the desired sample of **90** ASHA's, **25** ANM's and **5** MO's.This study was a questionnaire-based survey. A well-structured questionnaire prepared in the regional language (Marathi) was used as a data collection tool through telephonic interviews.

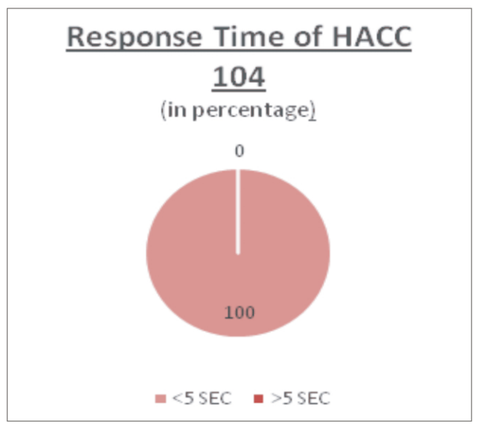
FINDINGS

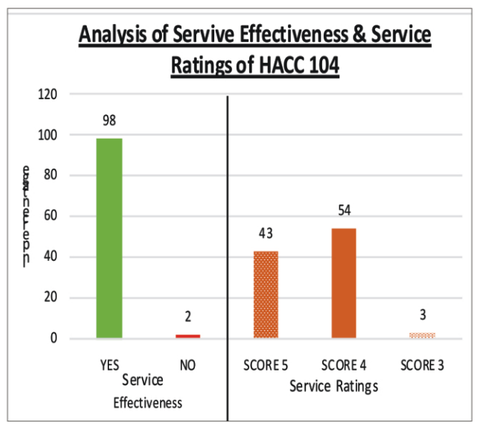


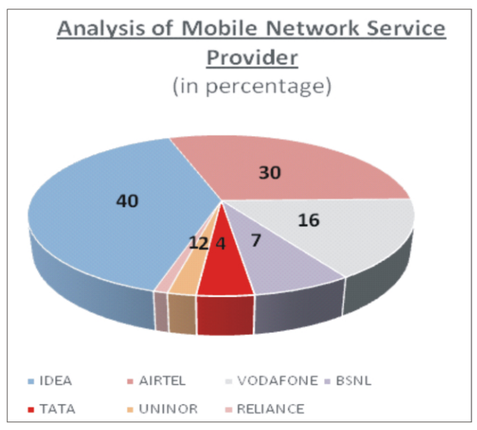


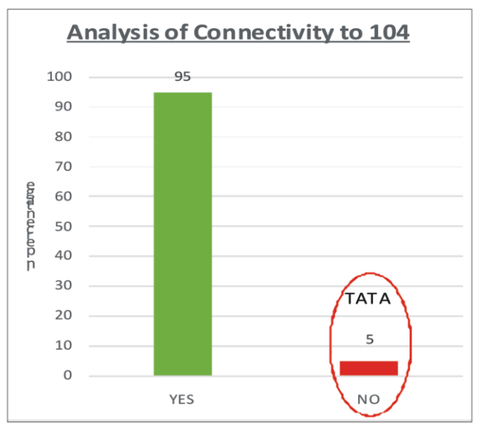


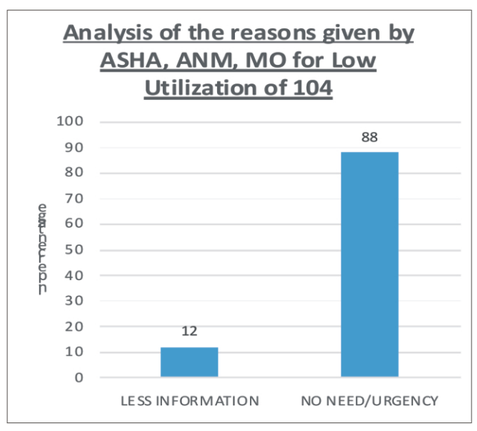


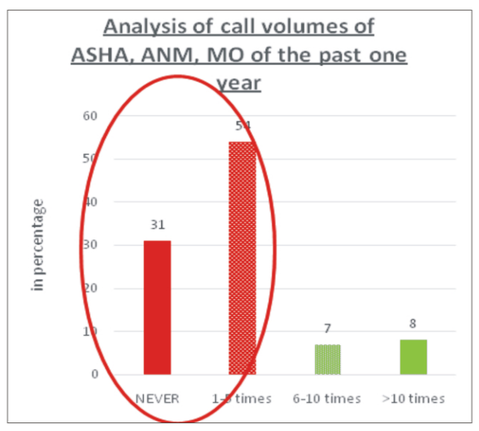


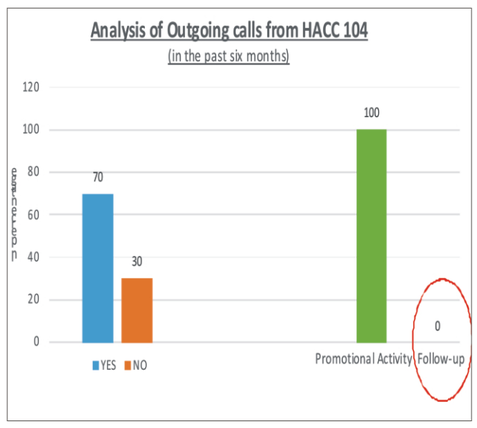


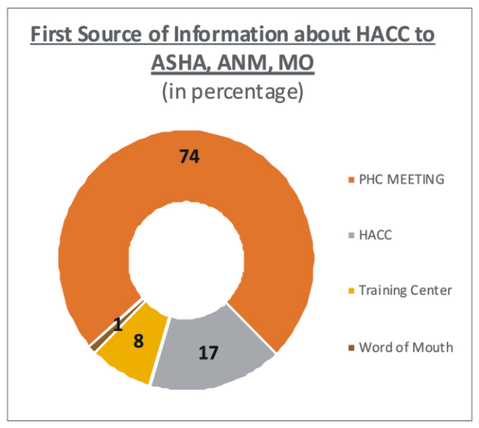












RECOMMENDATIONS

- There is a growing need for IEC activities in general that needs to be developed and propagated to establish 104 on extensive basis throughout the State.
- Prior importance should be given to spread more information and awareness about services that are lesser known to health workers such as Blood on Call, Mental Health, Grievance Handling, Surgeon and Public Health Specialist.
- To distribute the over-exhaustive nature of calls related to Maternal and Child Health more evenly and efficiently, there should be an increase in the no of seats dedicated to services provided by Gynaecologist, Paediatrician and Physician instead of just 'one' per shift, as these services are most enormously availed on 104.
- A legal framework can be appointed and co-structured with the mental health unit to provide legal advice and support in cases of complaints regarding domestic violence, physical abuse, etc.
- With 85% of health workers using Idea, Vodafone and Airtel mobile network services, maximum efforts should be ensured to strengthen and maintain their connectivity to 104. Also, connectivity issue of Tata users to 104 should be looked into and resolved appropriately.
- It becomes extremely important to view and consider the "monthly meetings of ASHA workers with their Supervisors at PHC's" as such potential events where IEC activities should be aggressively targeted since a vast majority i.e. 74% of health workers come to know about 104 from these sources.
- Training Centres for health workers (ASHA, ANM, MO) can be utilized as an active medium in imparting knowledge and information about HACC 104 and its services.
- The promotional activities being carried out in the form of outgoing calls should focus equally, if not more, on generating feedback from the users that have availed the services provided by 104. A detailed analysis of the feedback on weekly or monthly basis would not only help us to evaluate the effectiveness of 104, but also yield deep insights on the gaps and loopholes to be corrected to improve the overall utilization and efficiency of this service.
- The expenditure incurred on promotional activities of HACC in terms of outgoing calls can be cut down by targeting the Supervisors at various PHC's rather than individual ASHA's.
- To address the reasons given by health workers for low utilization of 104 (that they did not feel any need/urgency to call 104 as they get advice from their Supervisors and Medical Officers at PHC), the IEC/Promotional activities should shed light and make them realise about the three very important aspects of this service.
  1. 104 is a "Toll-free" number i.e. it is "free of cost".
  2. Specialist's on-board providing "expert advice".
  3. Response given in "less than 5 seconds"

  A social marketing strategy of this kind highlighting its quick, cost-free and effective nature will encourage utilization of 104 over other options.

REFERENCES

1.www.nrhm.**maharashtra**.gov.in/Health%20Advice%20Call%20Centre.pdf

2. https://negp.gov.in/pdfs/c19.pdf

3. Assembly note of National Health Mission, March 2016, State Health Society, Maharashtra

FIELD VISITS

1.104 & 108 Services Centre at Aundh, Pune

2.Rural Hospital at Igatpuri, Nashik

3.IEC Bureau, Pune

4.Family Welfare Bureau, Pune

5.Mental Hospital, Yerwada, Pune

6. Tuberculosis & Leprosy cell, Pune