

**Summer Training at
Institute of Health Management Research
Jaipur**

**Assessment of Chief Minister's Free Drug
Distribution Scheme**

**By
Divik Dave**

**Under the guidance of
Dr. Nutan P. Jain**

**Post Graduate Diploma in Pharmaceutical Management
2011-2013**



**Institute of Health Management Research,
Jaipur
2012**

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MANAGEMENT RESEARCH**

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Certificate

This is to certify that Mr. Divik Dave has undergone summer training in Institute of Health Management Research from 16 April to 16th June, 2012

The candidate carried out all the studies related to summer training himself. His approach to the studies has been sincere, scientific, and analytical. This summer training in partial fulfillment of the course requirement is recommended for the award of Post Graduate Diploma in Pharmaceutical Management.

I wish him success in all future endeavors.



Dr. P. R. Sodani

(Dean Academics & Student Affairs)



Dr. Nutan P. Jain

(Professor)

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To Whom So Ever It May Concern

This is to certify that **Mr. Divik Dave**, 2nd year student of Post Graduate Diploma in Pharmaceutical Management from IIHMR, Jaipur has successfully completed 2 months Summer Internship on "**Assessment of Chief Minister's Free Drug Distribution Scheme (Government of Rajasthan)**" under the guidance of **Dr. N. K. Gurbani** and **Mr. Abhishek Dadhich**.

During the period of training from 16th April, 2012 to 10th June, 2012, Divik Dave was found to be sincere, dedicated & committed.

We wish him the very best in all his future endeavours.

For Institute of Health Management Research, Jaipur

Dr. N. K. Gurbani

Associate Dean



ACKNOWLEDGEMENT

I would like to express our heartfelt thanks to IIHMR, Jaipur for giving an opportunity to undergo summer training in their prestigious organization.

We hereby, also take the opportunity to thank the project coordinators Dr. N. K. Gurbani, Dr. Anoop Khanna, and Mr. Abhishek Dadhich for their inspiring guidance and supervision.

I would also like to thank Mr. Mohommad Sharif (Research Officers) for his guidance and clarification on every aspect of our summer training project work.

I would like to express mine sincere gratitude to my mentors Dr. Nutan P. Jain (Professor IIHMR,Jaipur) for her valuable time and support.

Family and friends deserve special thanks for rendering their support at each stage of our project.

Divik Dave
PGDPM-03

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PREFACE

Honorable Chief Minister of Rajasthan in 2011-2012 Budget announced the creation of Medical Services Corp. under which the Government of Rajasthan has launched a scheme called Chief Minister's Free Drug Distribution Scheme (CMFDDS) on 2nd October 2011 for providing free drugs to all people at the government health facilities and hospitals at all levels in order to enhance access and availability of medicines to the people irrespective of their BPL or APL status, for which state government has set up 13,874 distribution centers across the state to distribute the generic medicines. Sub-Centers, PHCs, CHCs, district hospitals and medical college hospital at all levels of the drugs individually have been started, along with the counters at the main hospital premises.

The CMFDD scheme have taken off very well and being implemented as per the guidelines. The implementation of the scheme is in early stages. The Government of Rajasthan has planned to undertake a rapid assessment of the implementation process, resource availability and utilization, barriers and bottlenecks in implementation, and overall perceptions of the beneficiaries. Preliminary results have shown that there is an improvement in availability, accessibility and utilization of health care services to people, specifically mothers and children in the state. IIHMR has been approached by the GOR with assistance of UNICEF to undertake a rapid assessment CMFDD schemes to understand process of implementation and identify related issues to ensure an effective implementation of the schemes in the state.

I was assigned as the zonal coordinator for this project and travel some states of Rajasthan for the assessment of the scheme.

The following report contains a brief introduction about the scheme, its implementation, to what extent the scheme is successful and the assessment of the scheme.

ABBREVIATIONS

GOR- Government of Rajasthan

CMFDDS- Chief Minister Free Drug Distribution Scheme

PMO- Primary research officer

CM&HO- Chief Medical and Health Officer

UNICEF- United Nations International Children's Emergency Fund

DDC- Drug Distribution Center

DDW- Drug Distribution Warehouse

CAGR- Compound Annual Growth Rate

RMSC- Rajasthan Medical Service Corporation

DH- District Hospital

CHC- Community Health Center

PHC- Primary Health Center

INTRODUCTION

“Healthy civil society and the nation's human assets”, means when the person become sick its working capacity is reduced and the entire nation’s overall development gets impacted. To increase the health benefits of mankind government provides medical/health facilities in terms of public interest.

Rajasthan State of India is largest in terms of area, with some geographical and cultural specificity. The scarceness of resources and the difficult environmental conditions of the citizens of the state to provide proper medical facilities is a challenging task. Which to complete the Medical and Health Department determined that the State and national health policy goal for all citizens," acceptable level of good health is committed to achieve.

Communicable, non-communicable and other common and serious diseases prevention, control and elimination of the curative, preventive and promotional measures, as is providing ongoing services. State Tuberculosis, malaria, blindness, AIDS, etc. for disease control and eradication of leprosy by the Department of National programs are being conducted.

Improved access to quality medicines at an affordable cost is a critical issue in health care as a large category of human population is trying to survive in this rising economy. The poor is getting poorer and some of the above poverty line people have stepped into below poverty line by paying huge bills of the health facilities and medicines. To remove this effect the government of Rajasthan started a scheme known as CM-FDDS under which they will provide all the essential medicines free of cost to the all the people.

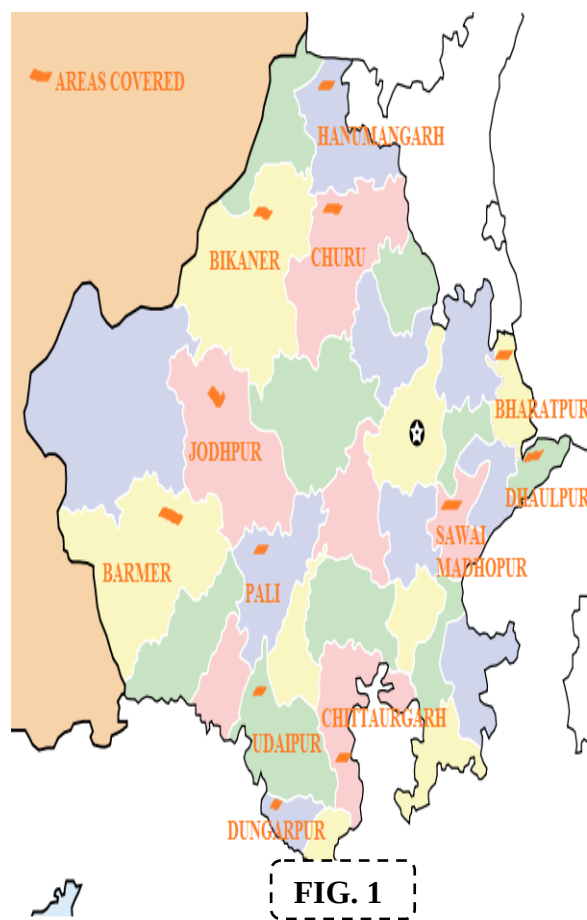
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OVERVIEW OF RAJASTHAN

Country	India
Established	1 November 1956
Capital	Jaipur
Largest city	Jaipur
Districts	33 total

Governor	Ms. Margaret Alva
Chief Minister	Mr. Ashok Gehlot
Legislature	Unicameral (200 seats)
Parliamentary constituency	25
High-Court	Rajasthan High Court

Total Area	342,239 km2 (132,139 sq mi)
Total Population	68,621,012
Rank	8th
Population Density	200/km2 (520/sq mi)
Time zone	IST (UTC+05:30)
ISO 3166 code	IN-RJ
HDI	0.637 (medium)
HDI rank	21st (2005)
Literacy	68% (20th)
Official languages	Hindi
Website	rajasthan.gov.in



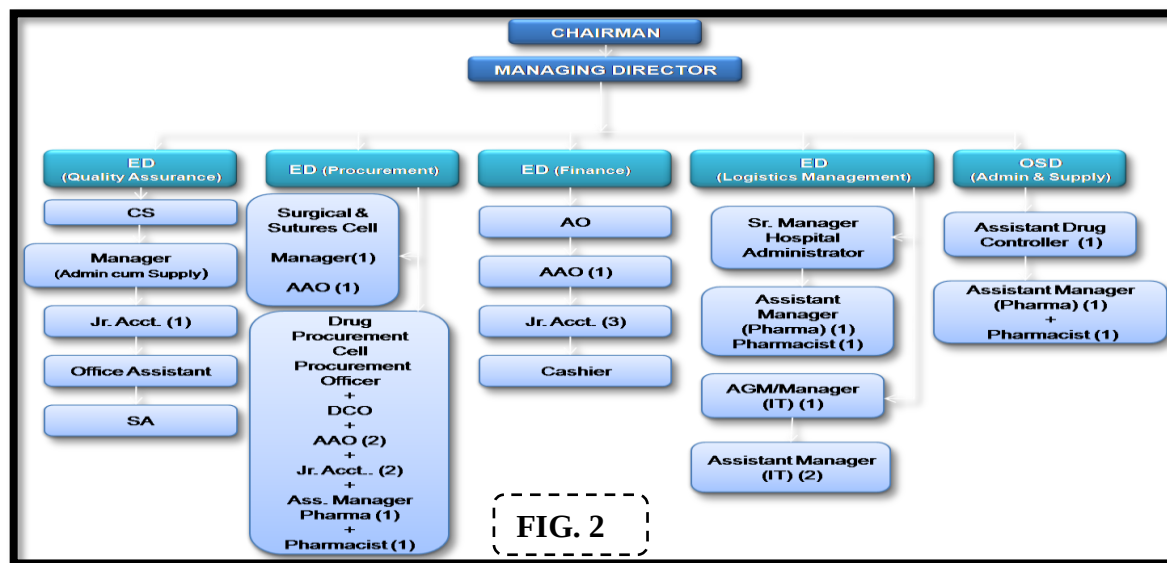
ABOUT SUMMER PLACEMENT

Summer training is an integral part of our Post Graduate Diploma in Pharmaceutical Management program. It provides an opportunity to the student to get practical exposure. We did our summer training at IIHMR, Jaipur on project entitled as- “Assessment of Chief Minister’s Free Drug Distribution scheme”. The training was a learning experience as ours was a market research study.

RAJASTHAN MEDICAL SERVICES CORPORATION

"Rajasthan Medical Services Corporation Limited" (RMSC) has been established under Company’s Act, 1956. The Corporation will be the public enterprises and be owned by Government of Rajasthan. The primary objectives of corporation is to efficiently govern the Free drug Distribution Scheme started by Ashok Gehlot.

ORGANOGRAM OF RMSC



ABOUT THE SCHEME

Honorable Chief Minister of Rajasthan in 2011-2012 Budget announced the creation of Medical Services Corp. under which the Government of Rajasthan has launched a scheme called Chief Minister's Free Drug Distribution Scheme (CMFDDS) on 2nd October 2011 for providing free drugs to all people at the government health facilities and hospitals at all levels in order to enhance access and availability of medicines to the people irrespective of their BPL or APL status

ABOUT THE ORGANIZATION WHERE SUMMER PLACEMENT WAS DONE: IIHMR, JAIPUR

Institute of Health Management Research, was founded in 1984. Over the years the institute has created a niche for itself in providing quality education in Health & Hospital management over the years and Pharmaceuticals & Rural management over the past three years.

IIHMR has made phenomenal contributions to both research and education in the area of management of health services achieving a pride of place in health management, planning and research at the national and international levels.

The Institute has consolidated its focus on research in health policy and programs. Being a WHO Collaborating Centre and recognized as an Institute of Excellence by the Ministry of Health and Family Welfare, Government of India.

Mission

IIHMR is an institution dedicated to the improvement in standards of health through better management of health care and related programs. It seeks to accomplish this through management research, training, consultation and institutional networking in a national and global perspective

OBJECTIVES OF THE STUDY

- To assess awareness of CMFDDS among general masses and service providers.
- To study the perception of service providers and general masses regarding CMFDDS.
- To identify gaps in CMFDDS implementation.

WORK DESIGN

Week	Work Assigned	Learning
Week 1	Orientation	On very first day of training Dr. Nirmal Gurbani gave a brief introduction about the project and how it to conduct the study.
Week 1	About the project	We learned how the project started and what were the challenges and difficulties the project is facing.
Week 1	About the scheme	The scheme was launched in State of Rajasthan on 2/11/11 and has worked very well in providing the Free Essential medicines to all people. The scheme worked very well and the Government of Rajasthan wanted a quick assessment of the scheme.
Week 1	Data collection methods	The data was collected through questioner asked face to face with Doctors, PMO, pharmacists and patients
Week 2	Conducting interview Service Provider	The service providers were the PMO's , they gave us an overview on how they implemented the scheme and their perception regarding the scheme.
Week 3	Conducting interview	We heard the Doctor's perception regarding the scheme and discussed their views on the scheme and also the patient psychology.
Week 4	Conducting interview	We Conducted the Pharmacist interview and discuss their views regarding the scheme and what are the difficulties they are facing after the launching of the scheme.
Week 5	Conducting interview	We took the interview of the Store in-charge of the Ware House how they got affected after launching of the scheme and what storage problems are they facing.
Week 6	Conducting interview	Then finally the patients perception, how is he felling about the scheme is he happy or not.
Week 7	Assessment of data	The data was entered in the SPSS and M.S.-Excel and the assessment was done.
Week 8	Assessment of data	The findings were made by analyzing the graphs and the result was interpreted that the patients and service providers are aware of the scheme and satisfied and there is an increment in the no. of patients in hospital after the launching of scheme.

METHODOLOGY

Research Design: Descriptive study (as given by IIHMR)

Sampling: Convenience sampling

Sample size:

Types of respondents	Estimated number of respondents			
Medical Suprintendent of medical colleges	Udaipur 1	Jodhpur 1	Bikaner 1	Bharatpur 1
PMOs of DHs	Chittorgarh: 1 Dungarpur: 1	Barmer:1 Pali: 1	Hanumangarh: 1 Churu: 1	S.Madhopur:1 Dhaulpur: 1
Speciality wise doctors	18	18	18	12
Exit interviews of patients	50	50	50	20

Study area: Rajasthan

UDAIPUR ZONE study area and size

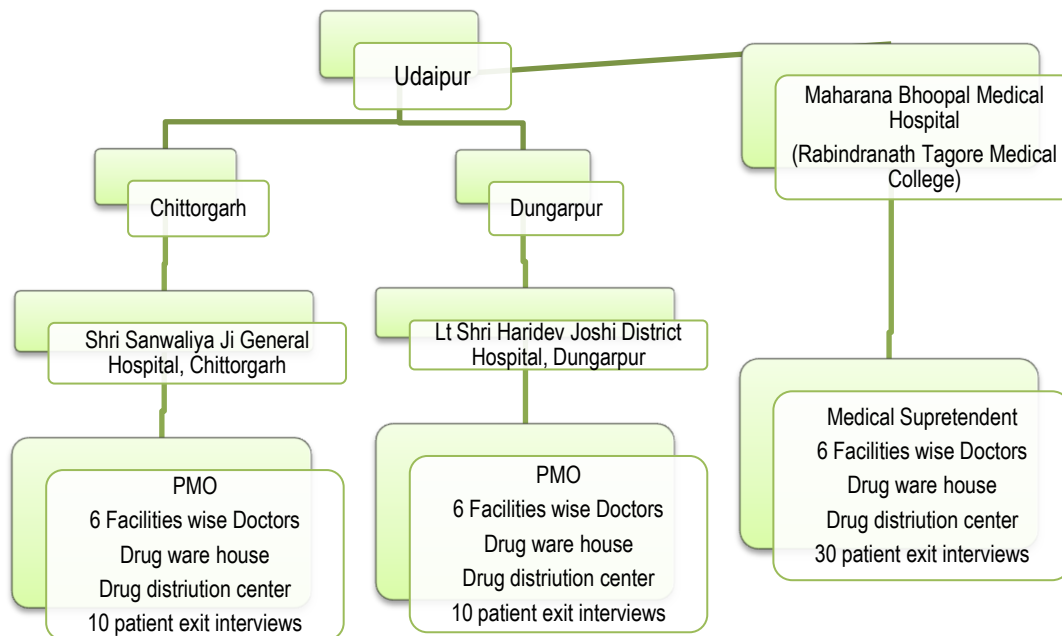


FIG. 3

JODHPUR ZONE study area and size

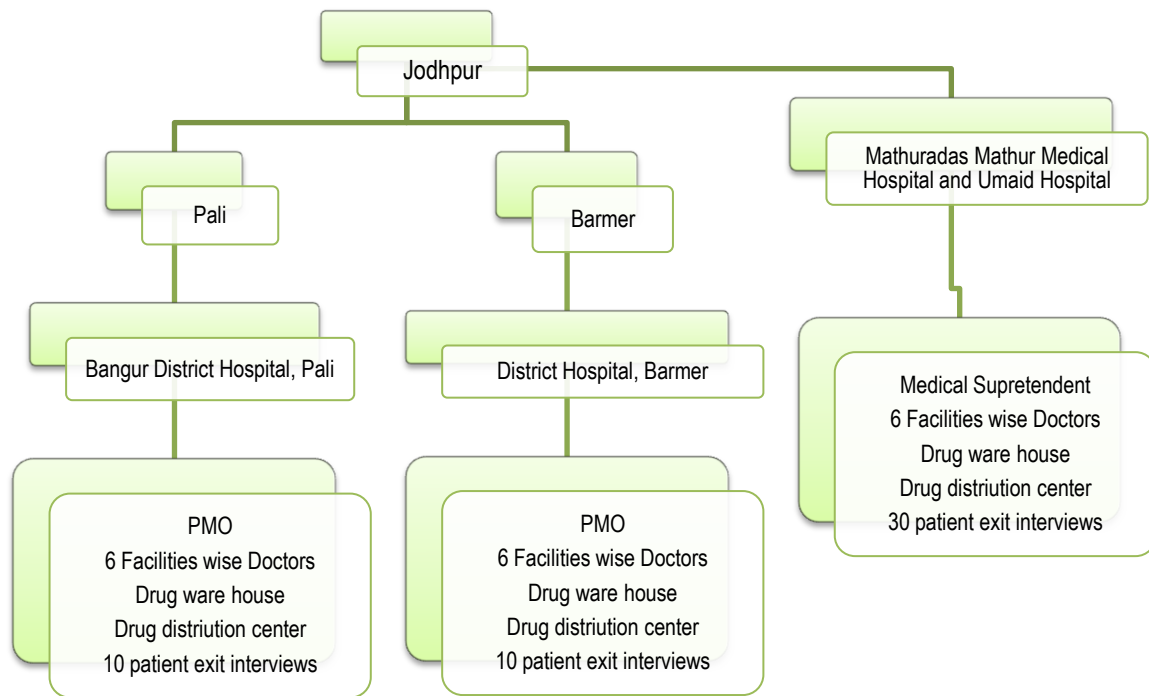


FIG. 4

BIKANER ZONE study area and size

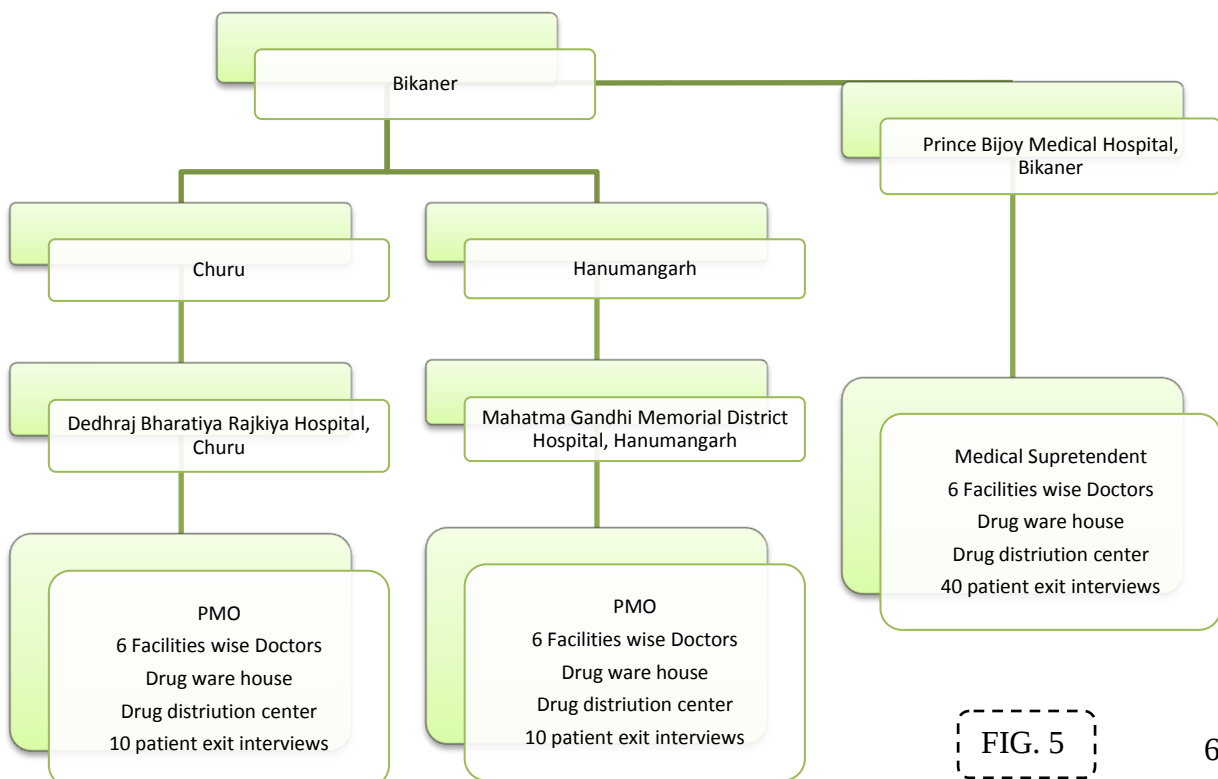


FIG. 5

BHARATPUR ZONE study area and size

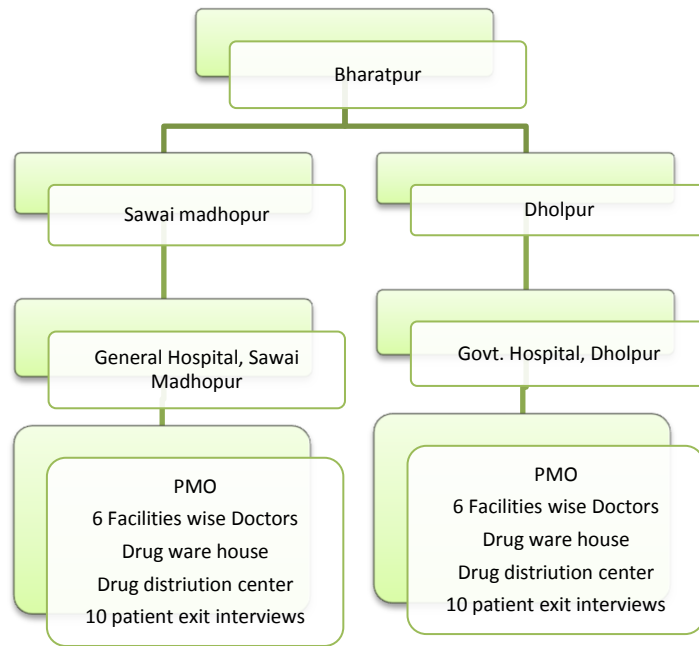
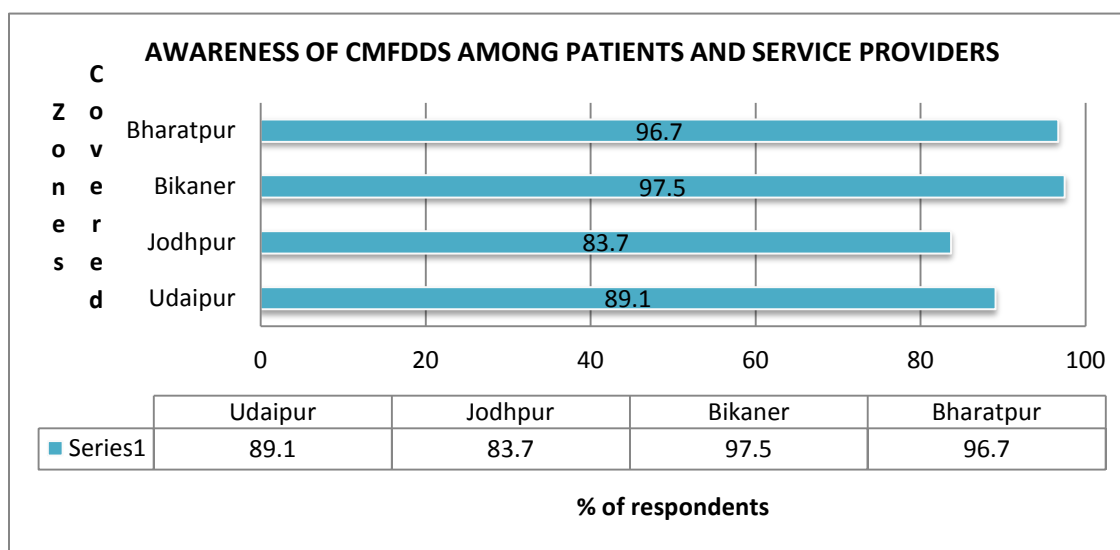


FIG. 6

Technique used for data collection: Face to face interview

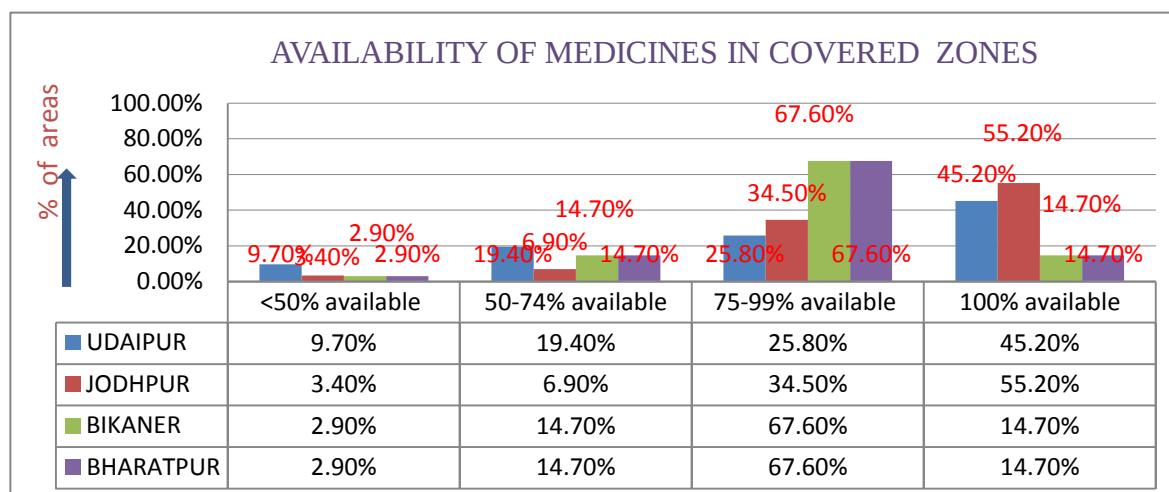
FINDINGS

Graph 1: Awareness of CMFDDS among patients and service providers



The graph shows that average of 91.75% of the total respondents of the four zones were aware of the CMFDDS

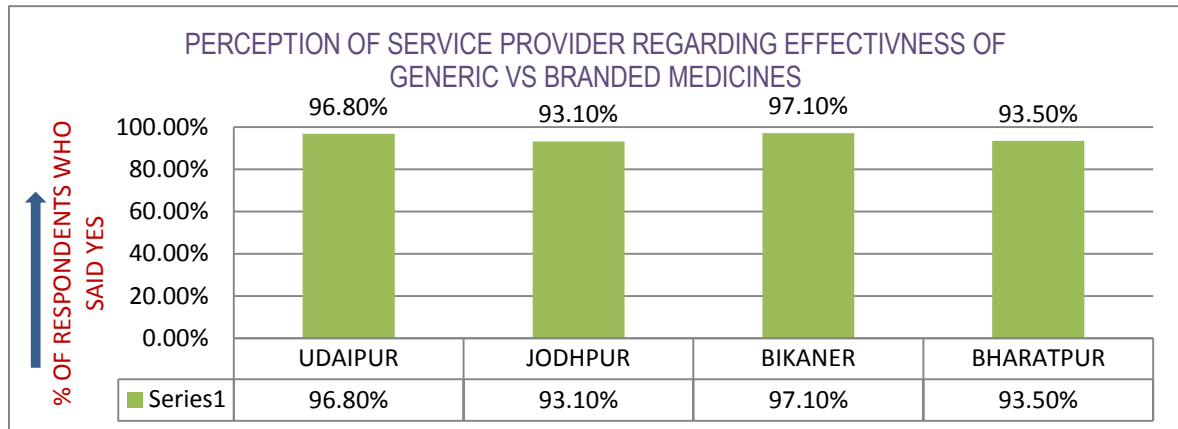
Graph 2: Availability of medicines in zones covered areas wise.



This Graph shows the areas in which different percentage of medicine are available: 75 - 99% of drugs are available in 67% government hospitals of Bikaner and Bharatpur whereas 100% of drugs are available in 55% of Jodhpur and 45% of Udaipur government

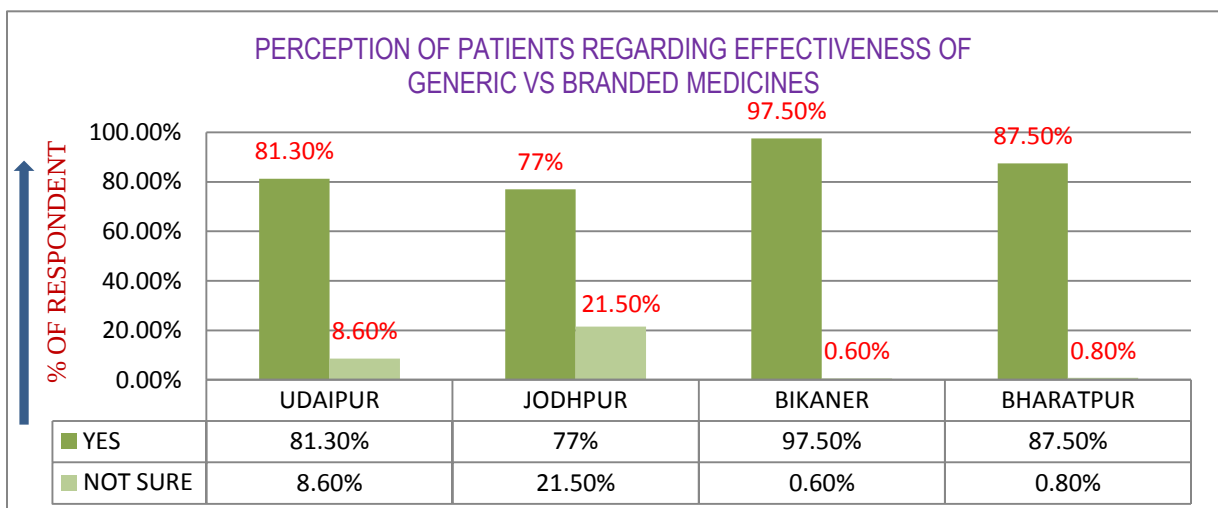
hospitals. This graph also shows that there are many areas of respective districts where less than 50% of drugs are available.

Graph 3: Perception of service providers regarding effectiveness of generic vs branded medicines



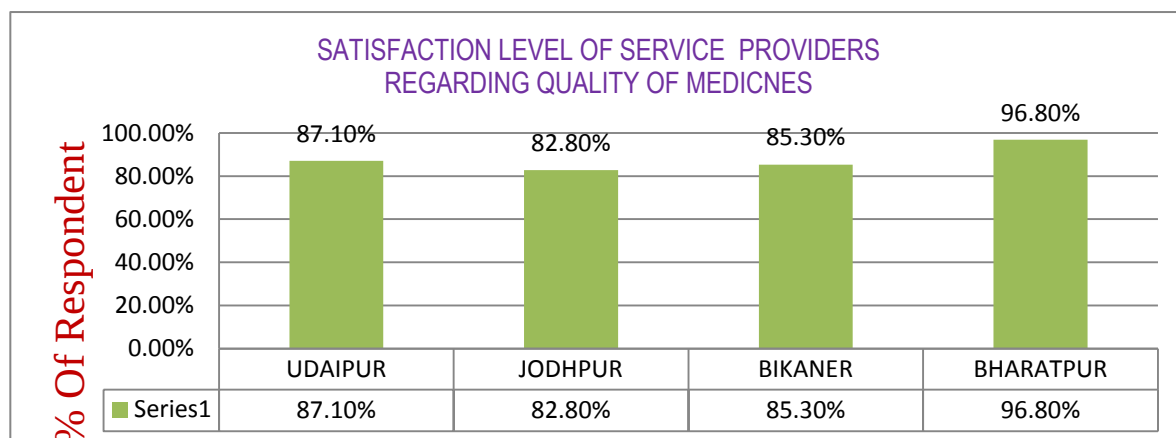
The graph shows the perception of service provider which includes PMO, CMHO, Doctors and Pharmacist regarding the effectiveness of generic verses branded medicines. More than 93% of doctors consider that generic medicines are equally effective as branded ones.

Graph 4: Perception of patients regarding effectiveness of generic vs branded medicines



The graph shows the perceptions of Patients regarding the effectiveness of generic verses branded medicines. More than 77% of patients consider that generic medicines are equally effective as branded ones

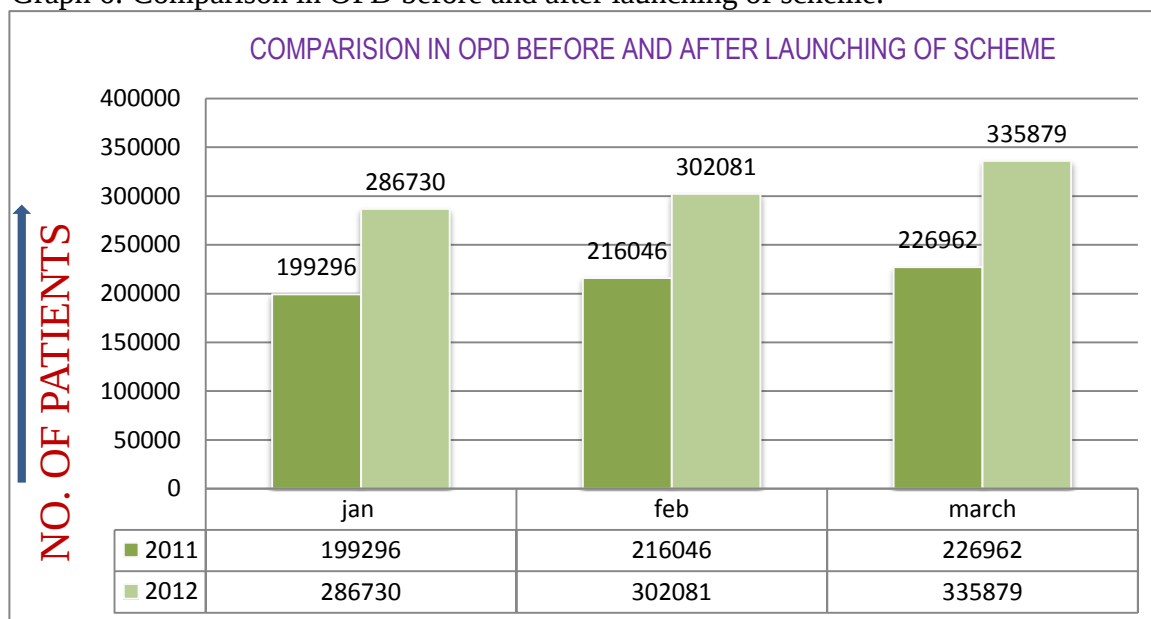
Graph 5: Satisfaction level of service providers regarding quality of medicines



The graph shows the satisfaction level of service providers regarding the quality of the medicines.

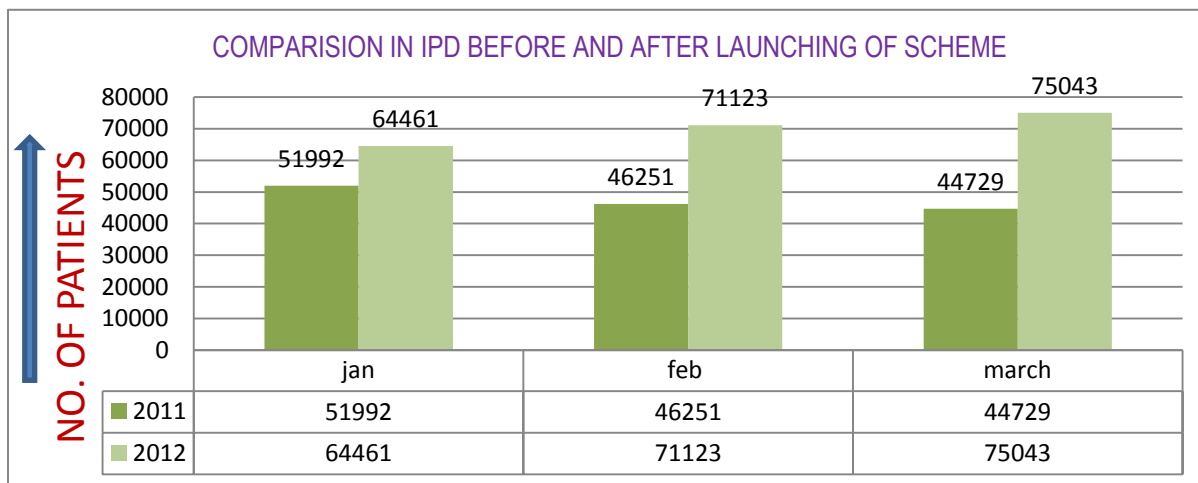
More than 82% of service providers were satisfied with the quality of medicines provided under the scheme.

Graph 6: Comparison in OPD before and after launching of scheme.



The data from the records was collected and compared. The graph shows the comparison between the number of patient in OPD before and after the launching of scheme (i.e. from Jan- Mar 2011 and Jan- Mar 2012). An increment of an average of 20% was observed in OPD patients after launching of scheme. This means that the scheme is running good and patients are getting benefit.

Graph 7: Comparison in IPD before and after launching of scheme



The data from the records was collected and compared. The graph shows the comparison between the number of patient in IPD before and after the launching of scheme (i.e. from Jan- Mar 2011 and Jan- Mar 2012). An increment of an average of 18% was observed in IPD patients after launching of scheme. This means that the scheme is running good and patients are getting benefit.

CONCLUSIONS

There was a positive response from most of the service providers and patients about the free drug distribution scheme. Analysis shows that

- About 92% of the total respondents were aware of the Chief Minister's free Drug Distribution Scheme.
- More than 75% of drugs were available in the government hospitals of the zones covered.
- About 93% of service providers considered that generic drugs provided under the scheme are effective as the branded ones.
- About 85% of patient considered that generic drugs provided under the scheme are effective as the branded ones.
- An increment of an average 20% in OPD patients was observed after the launching of the scheme.
- Similarly an increment of an average 18% in IPD patients was observed after the launching of the scheme.
- More than 82% of Service providers were satisfied with the quality of medicines provided under the scheme.

Besides this level of awareness, increment of patients, it was also observed that the work load of the hospital staff has increased because of the Scheme. The hospital stores had spacing problem and shortage of staff.

REFERENCES

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Annexure

Questionnaire 3. A

Interview of service provider and observation of health center

Name of district and code	
Type of the hospital (mark the right √)	
Medical college Hospital	District hospital
Name of the district hospital/ medical college	

Particulars of service provider

S. No.	Name of service provider	Post	Responsibility of the work

Availability of medicines

S. No.	Question	Answer	Code	Explanation
1.	Availability of medicines at the health center - How many types of drugs are provided..... - Availability against demand	100 % free :3 >75% free :2 >50% free :1 <50% free : 0		If no then go to question 2
2.	General time it take to provide the medicines	1 day : 3 2 day : 2 3 day : 1 4 day or more : 0		
3.	Available budget for medicines.... Spent amount.....	100 % free :3 >75% free :4 >50% free :1 <50% free : 0		
4.	Do you tell about the free medicine's	Yes : 1		

	availability to the patients or his/her relatives?	No : 2		
5.a	Do you consider that the free medicines are effective same as the market medicines?	Yes : 1 No : 2		
5.b	If no give the reason?			
6.	Please give the name of 10 most demanded drugs?			
7.	Please tell about the indent procedure?			
8.	Did you find any problem with supply chain?			
9.	Did you face problem like out of stock of the medicines within previous 6 months, if yes give details?			
S. No.	Name of the medicines	Time interval for which the drug was un available		
10	Did you find any problem about the quality of the medicines?	Yes : 1 No : 2		If no then go to question 11
10.b	If yes what type of problem did you find?			
11.	What are the opinions of patients about the quality of medicines?			
12.	Please give your suggestions for free drug distribution scheme to make it much better			

Drug storage

S.No.	Observation points	Answer	Code	Explanation
1.A	Do you have separate room for drug storage	Yes : 1 No : 2		
1.B	If no where are you storing the drugs			
2.	Do have rack facility for medicines	Yes : 1 No : 2		
2.B	If no then what are the arrangements			
3	Are the cartons of the medicines at the floor	Yes : 1 No : 2		
4	Is the drug storage room clean	Yes : 1 No : 2		
5	Is there any type of the humidity or wet	Yes : 1 No : 2		
6	Is there any breakage in the room	Yes : 1 No : 2		
7	Are there any mouse or other animals	Yes : 1 No : 2		
8	There is the freeze for the medicines to be stored at low medicines	Yes : 1 No : 2		
9	If yes then is it on	Yes : 1 No : 2		
10	Facility for the storage of narcotic drugs	Yes : 1 No : 2		
11	Is there fire extinguisher	Yes : 1 No : 2		
12	Are the standard operation procedures provides	Yes : 1 No : 2		

Drug distribution counter

S. No.	Question	Answer	Code	Explanation
1.	Does the DDC has a board of ‘free drug distribution counter’ written in clear and large visible letters?			
2.	The list of available free drugs fixed on outside of DDC?			

Record maintaining

S. No.	Question	Answer	Code	Explanation
1.	Drug consumption record maintained daily			
2.	Stock register maintained daily			
3.	Passbook maintained regularly			
4.	Is the DDC computerized if yes then, do all the works computerized			

Questionnaire for the doctors (according to specialty)

Name of district and code	
Type of the hospital (mark the right √)	
Medical college Hospital	District hospital
Name of the district hospital/ medical college	

Particulars of the service provider

S. No.	Name of service provider	Post	Responsibility of the work

S. No.	Question	Answer	Code	Explanation
1.	Do you tell about the free medicine's availability to the patients or his/her relatives?	Yes : 1 No : 2		
2.A	Do you consider that the free medicines are effective same as the market medicines?	Yes : 1 No : 2		
2.B	If no give the reason?			
3.	Please give the name of 10 most demanded drugs?			
4.	Did you find any problem about the quality of the medicines	Yes : 1 No : 2		If no then go to question 6
5.	If yes what type of problem did you find?			
6.	What are the opinions of patients about the quality of medicines?			
7.	Please give your suggestions for free drug scheme to make it much better			

Questionnaire 4		Interview of patients and observation of prescription	
Name of district and code			
Type of the hospital (mark the right)			
Medical college Hospital		District hospital	
Name of the district hospital/ medical college			
Name of patient / respondent			
Age and sex of respondent		age in years male : 1 female : 2	
Cast and category of respondent			
Address of residence			

S. No.	Question	Answer	Code	Explanation
2. A	Are you aware of chief minister's free drug distribution scheme?	YES : 1 NO : 2		If no then go to question 2
1. B	If yes, from where did You get information	1. Television 2. Radio 3. News paper 4. Poster 5. Health workers 6. Pump lets 7. Friend 8. Family member 9. Hording/ banner 10. Other (specify)		
2.	Did the doctor give prescription in two copies?	Yes : 1 No : 2		
3.	Did you were told during drug distribution that how to use the medicine?	Yes : 1 No : 2		
4.	Did you were told that you will	Yes : 1		

	get all the medicines from free hospital?	No : 2		
5.	How much time it took to take medicines from free drug distribution counter?	Got it immediately :3 10 – 15 minute : 2 16 – 30 minute :3		
6.	How many medicines did you get for free of cost and how many from market for money - No. Of prescribed medicines - No. Of free medicine - No of medicines purchased from market	100 % free :3 >75% free :4 >50% free :1 <50% free : 0		
7.	For how many days medicines were prescribed and for how many days did you get from hospital - Medicines prescribed for.....days - Medicines got for.....days	100 % free :2 >50% free :1 <50% free : 0		

8. How much did you pay to purchase the drug from the market?

Cooperative life line / generic shop R.s.

Proprietor shop R.s.

Total R.s.

9. Do you consider that the free medicines are effective same as the market medicines?

10.a. Are you taking free medicines from the hospital?

10.b. If not then give the reason

11. What are the the suggestions you want to give for free drug distribution programme

INTERVIEW OF PHARMACIST

**FREE DRUG DISTRIBUTION COUNTER
FOR NO**

(√) FOR YES AND (X)

1	Particulars	Name of pharmacist	
		Mobile no. of pharmacist	
	Availability of drugs	No. Of available drugs at the drug distribution counter	
		Every day's average no. of the beneficiaries	
2.	Medical prescription	The stock of medicines is available for how many days	
		Does the doctor write the prescription in generic form	
		Does the doctor writes the prescription in two copies	
		Does the medical officer in-charge audit the prescription regularly	
3.	Equipment	Use of refrigerator for the low temperature drugs	
		Are the medicines arrange in the rack	
		Is inventory management occurring through computer	
4.	Display of I.E.C material	The board of name of scheme (white letters on blue background)	
		The closing and opening time of DDC	
		Name and mobile no. Of the officers for complaint	
		Publish of the medicines for the disease	
5.	Record maintaining	Recording of prescription with day and date	
		Entries in consumption register with day and date	
		Entries in stock register with day and date	
6.	Indent procedure		