

Shri Mallikarjun Vidyavardhak Sangh's

Smt. Rajeshweari Karpurmath Memorial (RKM) Ayurveda Medical College, Hospital & P.G. Research Centre, Vijayapur.

SWASTHYA PRASHASANA – HEALTH ADMINISTRATION

Presented by:

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Points to be covered;

- Health administration at central including AYUSH.
- State level.
- District level.
- Village levels.

Health system in India

- India is the union of 29 states and 7 union territories.
- Under the constitution of India, the states are independent relating to the delivery of health care to the people.
- Therefore, each state has developed its own system of health care delivery, independent of the Central Government.

- The Central responsibility consists;
- 1. Policy making
- 2. Planning
- 3. Assisting
- 4. Evaluating and
- 5. Coordinating the work of the State Health Ministries.

Objectives:

- 1. Health care services should cover every part of the Country.
- 2. No state should lag behind for want of these services.
- The health system in India has 3 main links i.e.
- I. Central
- II. State
- III. local or peripheral

1. At the centre

- Official "organs" at national level consists of;
- 1) The Ministry of Health and Family Welfare.
- 2) The Directorate General of Health Services.
- The Central Council of Health and Family Welfare.

1. Union Ministry of Health & Family Welfare Organization

Headed by → Cabinet Minister

Minister of State

Deputy Health Minister.

Department

Department of Health Executive head - secretary

Assisted by Joint secretaries

Deputy secretaries

Administrative staff

Department of family welfare Secretary to GOI

Assisted by Additional secretaries & commissioner

Joint secretary

Functions:

Union list	Concurrent list
International health relations and administration of port quarantine	Prevention of extension of communicable diseases from one unit to another.
Administration of central institutes	Prevention of adulteration of foodstuffs
Promotion of research through research centers	Control of drugs and poisons
Regulation and development of medical, pharmaceutical, dental and nursing standards	Vital statistics
Establishment and maintenance of drug standards	Labor welfare
Coordination with states and with other	Ports other than major

Economic and social planning

Population control and family planning

ministries for promotion of health

Immigration and emigration

statistical data

and oil fields

Census and collection and publication of other

Regulation of labor in the working of mines

2. Directorate General of Health Services:

Organization:

- DGHS Director General of Health Services is the principal adviser to the union government in both medical and public health matters.
- DGHS assisted by Additional DGHS Team of deputies – Large administrative Staff.
- 3 units of Directorate:
- 1. Medical care and Hospitals.
- 2. Public Health.
- 3. General Administration.

Functions: General and Specific

1. General:

- Surveys, planning, coordination, programming and appraisal of all health matters in the country.
- 2. Specific:
- International health relations and quarantine.
- Control of drug standards.
- Medical store depots.
- Post graduate training.
- Medical education.
- Medical research.
- Central government health scheme.
- National health programmes.
- Central health education bureau.
- Health intelligence.
- National medical library.

3. Central Council of Health:

Organization:

- Acts as connection between Central and States.
- Union Health Minister is the Chairman.
- State Health Ministers are the Members.

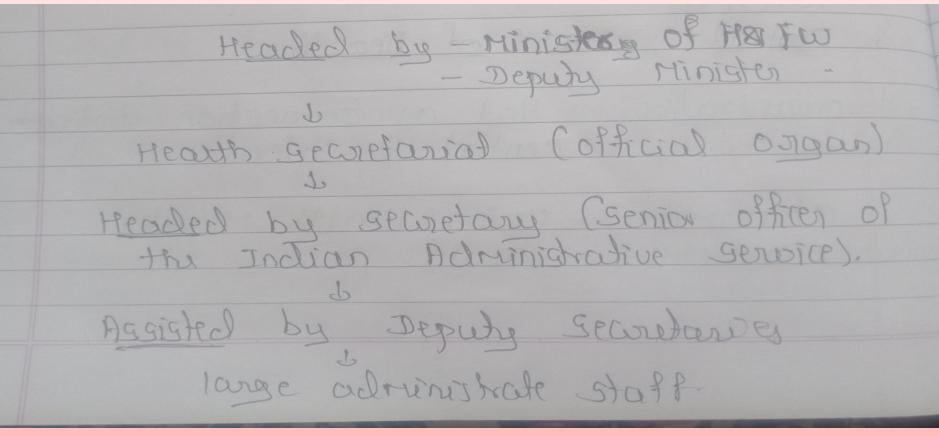
Functions:

- 1. To consider and recommend broad outlines of policy with respect to matters of health.
- 2. To make proposals for legislation in the fields of medical and public health matters.
- 3. To make recommendations to Central Government, regarding distribution of available grants in aids for health purpose and to review periodically.
- 4. To establish organizations for promoting and maintaining cooperation between Central and State Administrations.

2. At the state level:

- Started in 1919.
- Government of India Act, 1935 gave further autonomy to the states.
- Health subjects were divided into 3 groups federal, concurrent and state.
- The state list which become the responsibility of the state included;
- 1. Provision of medical care.
- 2. Preventive health services.
- 3. Pilgrimages within the state.
- At present there are 29 states in India with their own administration.
- Management sector of all the states comprises :
- I. State ministry of health.
- II. State health directorate.

I. State Ministry of Health:



 Responsibilities are – formulating policies and monitoring the implementation of these policies and programmes.

II. State health directorate:

- Headed by Director of Health Services he is the chief technical adviser to the state government on all matters relating to Medicine and Public Health.
- Assisted by Deputies and Assistants.
- They are again of two types Regional and Functional.
- Regional deputies: inspect all the branches of public health within their jurisdiction.
- Functional deputies : are usually specialists in particular branches like MCH, family planning etc.

Functions:

- 1. Organization and direction of all health activities.
- 2. Inspect the medical colleges.
- 3. Implementation of health plan.
- 4. Health services and training of staff.

3. At the district level:

- The district is under the administration of Collector.
- Within each District again, there are 6 types of administrative areas.
- 1. Sub divisions.
- 2. Tahsils.
- 3. Community Development Blocks.
- 4. Municipalities and Corporations.
- 5. Villages and
- 6. Panchayats.
- There are 707 districts in India as per 2016 records.
- There is no "average" district i.e. the districts vary widely in area and population.

- Administrator Administrative - Population covered block - Two or more subdivisions - Assistant Sub divisions collector. - Tehsildar Tehsils (Taluka) - 200-600 villages - Block develop-- Approximately 100 Community ment officer. villages 80,000 to development 1,20,000 population block - Chairman or - Population ranges from Municipalities president 10,000 to 2 lakh

Corporations - Populations above 2 lakhs - Mayors

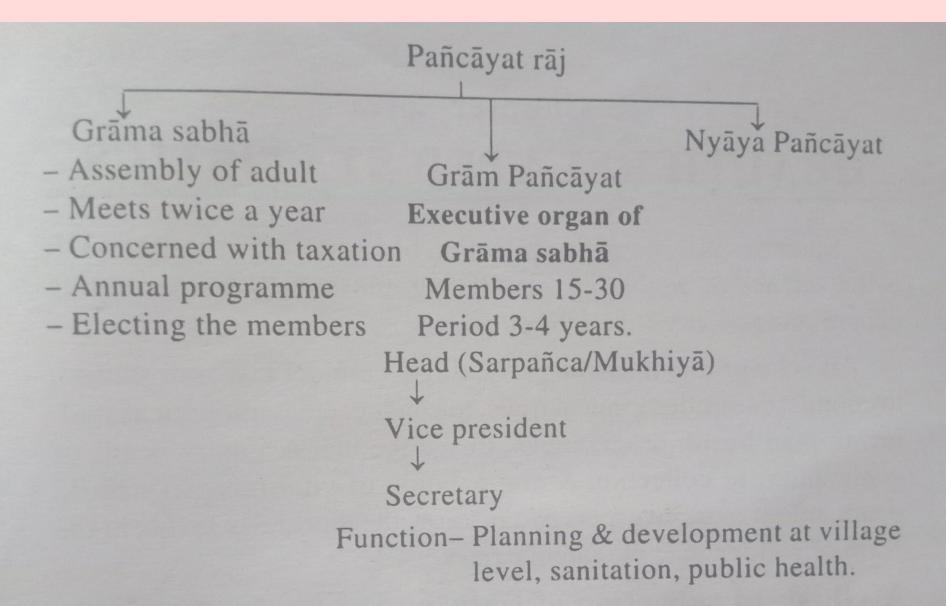
- Councilors, Commissioner, Secretary, Engineer and Health Officers will also be present.
- District will be having CMOs chief medical officer with 3 deputy CMOs (Civil Surgeon, DHO and DFWO) – each covers 1/3rd of district.

Panchayt raj

- It is a three tier structure of rural local self government in India. Linking the village to the district.
- 1. Panchayat at the village level.
- 2. Panchayat samithi at the block level.
- 3. Zila parishad at the district level.

1. At village level – Panchayat:

• 5000 – 15000 population is covered.



2. At block level: Panchayat samithi

- Population of about 80,000 to 1,20,000 is covered.
- Panchayat samithi or janapada panchayat is the functioning body.
- BDO is the ex-officio secretary, Sarpanchas of village panchayats, MLAs, MPs residing in the area, representatives etc together with BDO take part actively in planning and development of villages.

3. At district level: Zila parishad

- Zila parishad / Zila panchayat is the functioning body.
- Members include the heads of Panchayat samitis, MLAs and MPs of the district, representatives of women, SC, ST etc and Collector is non voting member.

AYUSH

- Old acceptance in the communities in India.
- Form the first line of treatment in case of common ailments in most of the places.
- Ayurveda is the most ancient medical system with an impressive record of safety and efficacy.
- Mainstreaming AYUSH to strengthen the public health system at all levels.
- AYUSH facilities had been co-located with 208 DHs, 910 CHCs and 3883 PHCs in the country.

Thank you