WWW.VIIRJ.ORG



Home

About Us

Editorial Board

Authors Guidelines

Indexing of Journal

Submit Your Articles

Current Issue

Copyright Form

Special Issue

Archieves:

June 2012

Dec 2012 June 2013

Dec 2013

June 2014

Dec 2014 June 2015

Dec 2015

June 2016

Dec 2016 June 2017

Dec. 2019

March 2020

June 2020

Sept 2020

Dec 2020 March 2021

June 2021

Sept 2021

... Hirtatr.com

Visits 70 493 Pages 197 568 ISSN 2319-4979

Online & Open Access

VIDYABHARATI INTERNATIONAL INTERDISCIPUNARY RESEARCH JOURNAL

Peer Reviewed Journal

A JOURNAL OF

- SCIENCE
- ENGINEERING & TECHNOLOGY
- ARTS & HUMANITIES
- COMMERCE & MANAGEMENT

www.viirj.org

Web Designed by Dr. Navin Jambhekar

Vidyabharati International Interdisciplinary Research Journal

ISSN: 2319-4979

INDEXED IN: Web of Science Core Collection UGC

CARE LIST II

Aim & Scope

Vidyabharati International Interdisciplinary Research Journal is a Interdisciplinary Research Journal.

Topic Covered:

The subject areas include, but are not limit to the following fields:



A STUDY OF MANAGEMENT OF PRIMARY HEALTH CENTRES DURING POST-COVID DIGITAL TRANSFORMATIONS IN INDIA

S.J. Kasabe¹ and B.V. Patil²

¹Sundarrao More Arts, Commerce and Science College, Poladpur, Raigad, (MS)

²Matoshree Bayabai Shripatrao Kadam Kanya Mahavidyalaya, Kadegaon, Sangli (MS)

¹kasbesanjay@rediffmail.com, ²drbvpan@gmail.com

ABSTRACT

Globally, digital technologies are being used to support the public health response to COVID-19, including population surveillance cases. Detection, treatment services, and interference evaluation using mobility data and public communication. These quick responses are made possible by billions of mobile phones, large online databases, connected tools, relatively low-priced computing resources, and advances in machine learning and natural language processing. This review aims to capture the variety of technological innovations for the global public health response to COVID-19. connected devices, relatively low-cost computing resources, and advances in machine learning and natural language processing. This review aims to capture the breadth of digital innovations for the public health response to COVID-19 around the world, as well as their limitations and barriers to implementation, such as legal, ethical, and privacy barriers, in addition to organisational and labour force barriers. The future of public health is likely to be more digital, and we examine the need for international regulatory alignment, the evaluation and use of digital technologies to improve infection management and future COVID 19 and other communicable diseases preparedness. The papers should focus on digital transformation.

Keywords:- COVID-19; Primary Health Centres; Health Care Sector; Health Systems; Pandemics; Public Health; Digital Transformation in Healthcare

Introduction

Digital technologies playing an are increasingly important role in transforming India's healthcare sector. Everything is possible with the click of a button, from booking doctor's appointments to accessing medical reports and even getting consultations. Corona virus disease 2019 (COVID-19) is an infectious disease caused by the corona virus Severe Acute Respiratory Syndrome (SARS-CoV-2). Before the outbreak in Wuhan, China, in December 2019, this new virus and the disease it causes were unknown. COVID-19 is one of the most contagious diseases to have struck the United States in decades. As governments and public organisations scatter to contain the corona virus's spread, they need all the assistance they can get, including assistance from artificial intelligence (AI).

Over the last few decades, India has made significant strides in the delivery of healthcare in the country. It has been one of the largest sectors in terms of employment and revenue, and it is growing rapidly. In India, healthcare is primarily provided by either public or private providers. The primary goal of public healthcare is to provide primary healthcare

through community-level health programmes, with the goal of reducing mortality and morbidity caused by various communicable and non-communicable diseases. The private sector is primarily concentrated in tier I and II cities. When disparities and challenges to accessible. high-quality equitable, and healthcare are compared geographically, the disparities and challenges become clear. Over the years, the National Health Policies have served well in guiding the approach towards a more inclusive healthcare system in the country, with the goal of achieving Universal Health Coverage (UHC) in a graded manner.

ISSN: 2319-4979

Objectives of the Study

- To study the digital transformation in primary health centres in post covid 19
- study of recent trends in digital transformation in health care in India;
- To study the government's initiative on the Indian health care digital transformation in India.

Research Methodology

The information in this paper is derived from secondary sources. For this research paper, secondary data was gathered from a variety of books, journals, newspapers, annual reports, study materials, and websites.

Limitations of the study

The study is limited to the post pandemic situation in India and recent developments in the health industry. The study is also limited to digital transformation in primary health centres in India.

Literature Review

Huber and Gärtner (2018) investigate the effects of Health Information Systems (HIS) on an operating room module in a medium-sized German hospital. They investigate the differences between autonomy and control in stressful surgical situations, as well as the impact of transparent management on accountability.

Mishra et al. (2019) developed a conceptual framework to comprehend the opportunities and challenges of digitalization for future Community Health Workers (CHWs4) in social services. Opportunities include easy peer-to-peer communication and decision-making, while weaknesses in digital health literacy must be addressed.

Seddon & Currie, (2017). The study identifies three country categories based on their multivariate statistical analysis of cross-country health data and ICT infrastructure: leaders, followers, and laggards.

Result and Discussion

The COVID-19 pandemic has shaken the foundations of India's healthcare system. The overall response to the pandemic saw both the private and public sectors working together. Private hospitals and labs saw a significant drop in revenue as a result of delayed medical tourism and elective procedures. To effectively manage the outbreak, the Indian government leveraged technology and developed a variety of applications at both the national and state levels.

Investing in the Indian Healthcare Sector

Despite initial hiccups, India's healthcare system was able to withstand the pandemic. India's various efforts in the manufacturing of medical equipment, disposables, drugs, and vaccines have established us as a global leader.

The healthcare industry appears to be a good place to put your money. The healthcare sector appears to be a promising investment opportunity. Shortfalls such as the required number of beds or access to advanced equipment highlighted during the pandemic highlight the need for a healthcare system that is "emergency-proof" Hospital chains and specialty centres are stepping forward to expand capacity, particularly in Tier II and III cities. Numerous hospital chains have begun to expand in these cities by establishing small clinics and partnering with local doctors.

Health Insurance Awareness

In recent years, there has been an increase in awareness of health insurance products, and more people are investing in health insurance with each passing year. The government's efforts to achieve universal health coverage under 'Health for All' and schemes such as Ayushman Bharat and the National Digital Health Mission have accelerated exponentially. Despite having been planned prior to the pandemic, the efforts to make healthcare more affordable and accessible to the general public provide opportunities for private players to expand their reach and presence.

Medical Tourism

Bangladesh had the highest number of medical FTAs (foreign tourist arrivals) in 2012, followed by the Maldives, Afghanistan, and Iraq. The healthcare sector in India is appealing to foreign patients due to the availability of high-quality services at lower costs than in Western Europe. Medical tourism is a major part of India's economic growth over the next five years. The Ministry of Health and Family Welfare launched the 'eSanjeevani' app, an incorporated web-based telemedicine solution, in August 2019. Its goal is to make healthcare more equitable by bridging the gap between urban and rural India. The eSanjeevan app will be available on all major mobile platforms, including Android and iOS.

The Government Initiatives.

By 2022, India's healthcare market is expected to be worth USD372 billion.. The government intends to increase healthcare spending to 2.5% of GDP (gross domestic product) by 2025. To

address the country's health crisis, the government has launched the NDHM (National Digital Health Mission). Telemedicine, health IDs, health records, e-pharmacy, and digidoctor services are major components of this mission. Scotland has announced a new era of digital and technological innovations and advancements that are expected to assist communities in meeting those requirements at a much faster pace.

A viewpoint on the Union Budget 2021-22

The government has proposed an expenditure of INR 23,846 crore for health and well-being in the coming fiscal. This is a 137% increase over the previous year, with INR 35,000 crore set aside for the COVID-19 vaccine. In FY2021-22, the Ministry of Health and Family Welfare has been allocated INR 71,269 crore, a 10% increase. The government has announced a new allocation of INR36,577 crore for the National Health Mission and Ayushman Bharat - Pradhan Mantri. Jan Arogya Yojana This includes an increase of 27% in the Department of Health Research. The Ministry of AYUSH (AYUSH) has been allocated INR 2,970 crore, a 40% increase over the previous year (INR 2,122 crore) The allocation for the PMSSY is INR7,000 crore in FY2021-22, up from INR 6,020 crore compare to last year.

Primary Healthcare,

Over the next six years, nearly 64,180 crore will be invested in India's primary, secondary, and tertiary healthcare systems. The PM Atma Nirbhar Swasth Bharat Yojana is a new government initiative aimed at improving the quality of health care in India's urban areas. A portion of the budget will be allocated to the establishment of critical care hospital blocks in 602 districts and 12 central institutions.

Strengthening Primary Health Care

The pursuit of more equitable, comprehensive, and integrated models of health care was first inspired by the Declaration of Alma-Ata in 1978. The Declaration encouraged a focus on primary health care towards the progressive improvement of comprehensive health care for all, and gave priority to those most in need. Today, there is a national imperative to improve access to primary healthcare across

the world, which has been described as "a national imperative." A brief highlights the opportunities created by digital technologies in achieving the vision for primary health care. Alma-Ata was an initiative set up by the World Health Organization to improve access to primary and secondary health care across the world. Years later, countries around the world are coming together to reaffirm their aspirations and collective imperative to strengthen primary healthcare.

Digital Technologies

The Declaration of Alma-Ata was agreed four decades ago, but the adoption of new technologies in health services was complex, costly and limited. By 1990, new technologies, most notably the Internet, had begun to have a notable influence. These technologies have shown tremendous value for health as they advanced, became more integrated into all sectors, and became more popular in society. More than 120 countries by 2015 will use digital technologies to advance the Sustainable Development Goals, support universal health coverage and shape the future of primary health care. Digital health technologies are having a significant impact on how health services are delivered and health systems are managed. The impressive trend in national policies for digital health1 reflects the firm commitment to using digital technology to help people manage their health better.

Shaping the Future of Primary Health Care

The World Health Organization has identified the three pillars of primary health care primary care, essential public health functions, and multispectral policy and action. Digital technologies can be used to improve access, affordability, and quality of health care for people and communities. Many examples of digital technologies, outlined below, attest to their versatility, utility, and ubiquity in supporting these pillars in the context of health development.

Primary Care is of the Highest Quality and Primary Healthcare Functions

Digital technologies of all types have become key resources in primary care. Integrating clinical support tools and referral systems into primary health care can help coordinate care and ensure its continuity across services. Telemedicine, remote care and mobile health are already transforming primary care with home monitoring, medication adjustment, and 3-D printing. Technology can play an important role in patient safety by identifying risks and reducing harm in the primary care setting.

Multispectral Policy and Action

Digital tools are being used to boost health information systems at all tiers, from the local to the district, national, and even international. Hand-held ultrasound and pulse oximeters, for example, are examples of innovative digital technologies that can provide careful examination at the primary care level. Online technologies can also help with self-care and provide solutions to health problems.

Looking to the Future

The World Health Organization says digital health must be made a reality in primary health care. Harnessing digital technologies for health cross-sectoral collaboration, requires strategic commitment, and planning. Policymakers must suggest ways and capacity to recognise, assess, support, and monitor the promising integration of as demonstrated technologies into primary care and public health. There are social, economic and other barriers that affect a country's ability to take advantage of these opportunities.

The Importance of Transitioning From Physical to Digital

- In the absence of a centralised system, service providers have conducted new diagnostic tests, resulting in isolated medical records that significantly increase citizens' burden.
- India has one doctor for every 11,000 people, which is far below the WHO standard of one doctor for every 1000 patients. The vast majority of rural Indians lack access to basic health care.

• Due to a lack of infrastructure, it is extremely difficult to retain doctors in villages, as they are afraid of becoming professionally isolated and obsolete. Poor villagers must travel to specialty hospitals in the city to receive treatment. Because government hospitals are already overcrowded with local patients, these villagers must wait their turn, increasing their overall costs.

ASHA is Transforming Rural Healthcare

ASHA is supported by a number of private institutions in addition to the government. The TATA Center, established in 2012 with generous support from the TATA Trusts, has launched a project focusing on NCH (Neonatal and Child Health), a core function of ASHA workers. The centre is developing a series of smart phone apps to assist ASHAs in screening children and infants for a variety of conditions and collecting basic epidemiological health data, such as the baby's height and weight. As a result of technological advancements, the way these ASHA employees perform their duties has changed. They can now track the health of pregnant women and infants digitally and schedule home visits.

Conclusion

Digital platforms have already created a plethora of new opportunities for shaping the future of primary health care and trying to ensure effective public health activities. They have catalysed a host of changes in education, policy and practice, as well as created new patterns of communication, empowerment and engagement. The government's recommitment to the objectives of primary health care and its values of inclusiveness and equity promises the future. with more changes in communications technology central to the vision and its realisation.. The digital transformation of Indian primary health centres has received a positive response and accepted the new technology for simplifying the activities of primary health centres in postcovid 19 pandemic.

References

1. Gopinathan P, Kaur J, Joshi S, Prasad VM, Pujari S, Panda P, et al. 2018; Self-reported

quit rates and quit attempts among Indian subscribers to a tobacco cessation scheme

- using mobile text messaging. BMJ Innovations. 4:147–54. doi: 10.1136/bmjinnov-2018-000285
- 2. Huber, C., and Gärtner, C. 2018, Digital transformations in the work of healthcare personnel: Autonomy, control, and accountability dynamics Management Review, 29 (2), pp. 139-161. See the Record on Scopus Google Scholar is a search engine that allows you to
- 3. J.J. W.L. Currie and J.M. Seddon 2017.A Narrative and Statistical Analysis of Healthcare Financing and the Digital Divide in the European Union Management and Information, 54 (8), pp. 1084-1096,
- 4. S.R. Mishra, C. Lygidakis, D. Neupane, B. Gyawali, J.P. Uwizihiwe, S.S. Virani, J.J. Miranda, 2019, A. Combating noncommunicable diseases in the digital age: Prospects and challenges for community health workers, a narrative review of the literature. Health Policy and Planning, 34 (1), pp. 55-66
- 5. Global Conference on Primary Health Care. Towards Health for All. Media centre. World Health Organization (http://www.who.int/mediacentre/events/20 18/global-conference-phc/en/, accessed 17 September 2018).

- 6. Global Observatory for eHealth. Directory of eHealth policies. World Health Organization. http://www.who.int/goe/policies/en/, accessed 17 September 2018).
- 7. Primary health care: International Conference Report on Primary Health Care, Alma-Ata, USSR, 6–12 September 1978/jointly sponsored by the World Health Organization and the United Nations Children's Fund. Geneva: World Health Organization; 1978. (http://www.who.int/publications/almaata_declaration_en.pdf, accessed 17 September 2018).
- 8. The greatest engineering achievements of the 20th century. The National Academy of Engineering.
 (http://www.greatachievements.org/?id=38 24, accessed 17 September 2018).
- 9. https://www.forbes.com/sites/jenniferhicks/2018/06/08/see-how-this-hospital-uses-artificial-intelligence-tofind-kidney-disease/# 7a31b3442e8f, accessed 21 September 2018).
- 10. https://www.researchgate.net publication 22007955...
- 11. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5682364/
- 12. https://en.wikipedia.org/wiki/Digital_health