IMPROVING TELE-MEDICINE SERVICE IN KHUNTI

In a nutshell: eSanjeevani OPD, a model telemedicine to provide better access to health consultation services, free of cost, to every individual without any boundaries.

Nodal agency: District administration Khunti, Government of Jharkhand, in collaboration with TRI.

eSanjeevani OPD was implemented in Jharkhand as a model in telemedicine, to provide better access of health consultation services, free of cost to every individual without any boundaries. The e-Sanjeevani OPD model provides for direct interaction between doctors and patients. It was aimed at ensuring healthcare services for long distance and hard to reach patients with continuum of care.

The initiatives undertaken by Health System Transformation Fellows (HSTFs) -Khunti to ensure greater efficiency were:

- 1. Conducting a situational analysis to understand the current challenges in the utilization of the system. Visiting ground zero and conduct stakeholder analysis and estimate the requirements at State, district, block and community level, in coordination with all the stakeholders.
- 2. Engaging both State and non-State actors in an integrated response to prevent duplication of activities and over supply of services.
- 3. Conducting training of trainers (ToT) at district level Medical officers, STTs, BTTs, and CHO. A total of 85 healthcare workers were trained successfully.
- 4. Monitoring the implementation with officials at district, block level and community training CHOs, ANMs, Sahiya, Sahiya Sathis etc.
- 5. Ensure apt outreach and availability of IEC materials by working with community stakeholders for effective outreach and awareness.
- 6. Regular knowledge assessment of front-line healthcare workers, to understand the knowledge retention, and preparation of capacity building plan.
- 7. Monitoring and supportive supervision at district and community level with officials to ensure continuous improvement in utilization.
- 8. Facilitate review meetings with data point of targets vs achievement and laying out the future workplan.

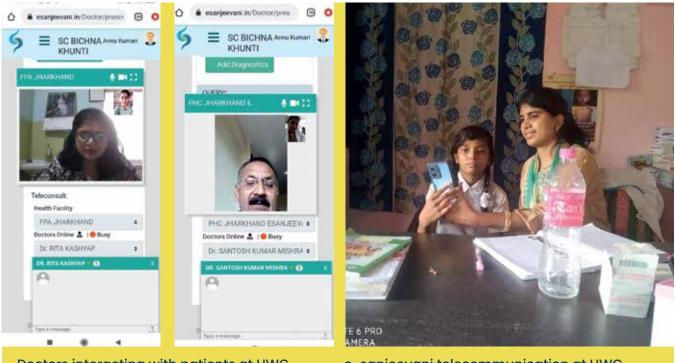
Impact

The implementation of eSanjeevani enabled timely, affordable as well as quality healthcare treatment without having to travel long distances from villages resulting in saving of time and money.

Challenges:

Although the project has been successful, there have been challenges during implementation:

- 1. The health workers were involved in multiple work: tele-consultation, vaccination and routine health work and reporting.
- 2. Availability of doctors was a concern in the initial phase of the project duration, which is improving now due to few initiatives at State and district level.
- 3. Multiple teleconsultation activities by non-State players running at parallel.
- 4. Network and other technical challenges keep popping and need immediate attention to keep the momentum going.



Doctors interacting with patients at HWC Bichana, Murhu Block, Khunti

e-sanjeevani telecommunication at HWC Torpa, Torpa Block, Khunti