CHAPTER - 17

OBJECTIVES

The planning for providing medical care for the rural areas through hospitals and dispensaries as mentioned above could not be based on or always adjusted to the local situation by actual objective study except in a few places like Singur-Hooghly and Saktigar-Burdwan. (Seal et al., 1955; 1958)

On the other hand, the collection of vital statistics is yet grossly defective for adequate and differential planning. Moreover, at no places the cost structure has been calculated and equated with the quality and quantity of service provided. Another deficiency in this regard is the absence of data on morbidity conditions that prevail in different areas of the state because the vital statistics recording is only on mortality and birth rates. But the morbidity conditions have lately assumed greater importance than the mortality conditions due to the conspicuous reduction of mortality in recent times. Besides, the mortality figures carry relative value without reliable ascertainment of the causes of death.

Even after the establishment of the hospitals in the rural areas by the West Bengal Government, the statistical report of their Health Department does not provide any information on morbidity conditions and hospital admissions in respect of individual Health Centres permitting
assessment of hospital services rendered by the respective centres. Another point of importance is the finding out of operational efficiency of the working of the various grades of hospitals namely, 50, 30, 20 and 10 and 4 bedded units and of the benefits actually derived from them by the local population. Further, the economics of medical care in relation to the hospital also need to be worked out from the financial aspect of Health Services in the state. These things have not been worked out although the institutions have been established for more than 15 years. Considering all these points, the present plan of study was proposed to fill up some of the existing short-comings in the planning and execution of medical care services in the rural areas of the State of West Bengal.

The objective of the present study was to obtain reliable information in respect of morbidity conditions and socioeconomic aspect of hospital admissions of the Rural Health Centre hospitals of West Bengal.

To fulfill the above objective it was decided to collect the information in respect of the following:

1. Description of the different hospital units in respect of site, building plan, (indoor, outdoor, staff quarters etc.), staffing pattern, budget, facilities, admissions and reporting.
2. Distribution of beds according to wards namely medical, surgical, obstetrics, emergency and infectious.

3. Prevalence and distribution of various types of sicknesses for which the people of the rural areas need and seek medical advice and admissions in the health centres hospitals.

4. Investigation of patients so admitted in respect of:
   (a) Nature and severity of diseases and their end results;
   (b) Bed-occupancy rate and duration of stay and treatment for different diseases;
   (c) The period of time elapsing in different cases between the attack and admission in the hospital and their effect upon the severity, duration and end result of treatment;
   (d) Socio-economic conditions of patients including their educational status and knowledge on the causation and prevention of disease

5. Number of cases referred or transferred to other big hospitals and reason thereof.

7. Collection of opinions of the local people about the working of the hospital and the benefit derived out of it.