



Minutes of the AHPI state chapter meeting held on 13th May 2020 at 3PM

Participants

Dr. Alex Thomas, President, AHPI
Dr. Girdhar Gyani, Director General, AHPI
Dr .V. C. Shanmuganandan, Advisor, AHPI
Dr. Voona Murali Krishna, President, Andhra Pradesh Chapter
Dr. C M Bhagat, President, Delhi NCR, Chapter
Dr. Sanjeev Singh, Secretary, Delhi NCR, Chapter
Dr. M. I Sahadulla, President, Kerala Chapter
Dr. Hajela, President, Madhya Pradesh Chapter
Dr. Rahul Khare, Secretary, Madhya Pradesh Chapter
Dr. Ashwini Jogade, Secretary, Maharashtra & Goa Chapter
Dr. Bharath Gadhavi, President, Gujarat Chapter
Mr. Jogesh Gambhir, President, Jharkhand Chapter
Dr. Vikas Swarnkar, President, Rajasthan chapter
Dr. Raju Sivasamy, Secretary, Tamil Nadu Chapter
Dr. Vishnu Reddy, Secretary, Telangana Chapter
Dr. Saumitra Bharadwaj, President, West Bengal Chapter
Ms. Nilanjana Mukherjee, Secretary, Odisha Chapter
Dr. Amandeep Kaur, President, North Zone Chapter
Mr. Joydas Gupta, Secretary, North zone Chapter
Dr. Palin, Convenor Northeast Chapter.
Dr. Hitesh Burman, Member, Northeast Chapter

Update from the states:

Andhra Pradesh: In AP the private hospitals are allowed to do emergency surgery only and elective surgery is still restrictive. The government has not given clear instruction to resume normal activities for all the specialties.

Out of 13 districts in the state, around 19 dedicated COVID hospitals in the state has been created as first category, 67 hospitals as 2nd category and the rest of the hospitals which is running Government schemes are kept as a standby. However there has been no discussion towards the financial aspects as yet to take over these hospitals.

Dr. Voona raised a issue that Hospitals are unnecessarily been taken over for a regular quarantine which is not required.

Delhi: For Quarantine purpose, hotels, vacant buildings and hospitals which are yet to start have been taken over. Private hospitals have started their operations with a steady flow of patients and surgeries are also being done. whereas some of the Nursing homes are scared of opening.

Dr. Bhagat mentioned that once the hospitals start functioning fully, the chances of hospitals being taken over as COVID treatment centre or quarantine centre will reduce.

Kerala: Things are stable in Kerala and the resumption of normal activities of hospitals have started across the state. The Government has the facility for surveillance and for admitting the people in the state. The private hospitals have come back to above 50% performance and also various elective procedures are being done. Only concern was that though the testing facility is there in the private, but no permission was given to the private to perform these tests.

Madhya Pradesh: Most of the hospitals are open and taking up non covid emergencies. Dr. Hajela suggested that the Government order which was passed in the month of March for elective surgeries should now be revised. Quarantine centres have been set up at hotels and medical college hostels, but some of these facilities are still not paid for their services and are on the verge of collapse.

North Zone: Quarantine centres are in hotels and hostels of various institutions. OPDs have started with the Government guidelines with 30-40% footfall. A unique situation was that the Government officials without the notice of the hospitals are visiting the hospitals premises and collecting data of the hospital. The Government is short of manpower and material resources like Ventilators and monitors. In spite of the assurance from the private that they will work with the Government, the private has been asked for the equipment details, which has already been shared. If the Government wants to convert the private hospital to covid centre there should be a proper MoU so that they can manage the running expense atleast.

North East: 2 Covid patients have recovered and Manipur is a green zone now. Online booking and consultation has started since 29th April. Biggest challenge is that about 20000 Manipuri's who were stranded in other parts of the country have returned to Manipur, which is causing a huge problem and the Government and the Private hospitals are working hand in hand in containing the disease. Institutional quarantine has been made mandatory for those coming from outside the state.

Orissa: Out of the 29 Covid hospitals in Orissa, 6 hospitals are run by private sector and 8 are Government building run by the private sector. In terms of financial relationship the Orissa Government has given a good rate of Rs 5000 for ICU & Rs 3000 for General Ward, Ventilator charges at Rs 1000 and Medicine and consumable as per actuals. They have also done capping for all the covid hospitals. As far as the functioning in the state is concerned, most of the private hospitals have started emergency surgeries and elective surgeries, but the small nursing homes are still closed because of the protocols of triaging and segregation. The average occupancy is about 35%. The Issue faced is the shortage of COVID testing kits which has become a problem in the state.

Jharkhand: 173 positive cases so far, out of which 79 have recovered and 2 have died. Only 2 private hospitals are running as Covid hospitals and all other is being taken care by the Government. Elective surgeries have started with compulsory RTPCR being done before surgery.

Rajasthan: Cases in Rajasthan have been increasing in the last 3 to 4 days. As per the hospitals are concerned smaller nursing homes are still closed and the private participation is in limited scale. Most of the hospital have deferred salaries for 2 to 3 months. Covid test is being done prior to all elective surgeries. Dr. Vikas requested that AHPI write to Finance Minister to include healthcare also in the bailout package of Rs 20 Lakh crore.

Telangana: In the state of Telangana only the Govt facility is being used for quarantine purpose. Though isolation facility is available in private hospitals the positive patients are being shifted to a Govt covid facility as per the government order. So far the private are not allowed to do any testing of patients

West Bengal: The Positive patients are given the offer to start quarantine at home. Lot of elective work is going on. 6 labs have been authenticated for testing in west Bengal which is a important development. Use of PPE is now being covered by the state run scheme Swasth Sathi, but there is no clarity from CGHS and ECHS on PPE which is a significant part of the bill. Dr. Soumitra narrated that in some cases ppe cost is more than the surgical cost itself.

Maharashtra: Concern which is being faced is the shortage of residents. It was requested that the residents can be retained and an extension order can be given by NBE. Dr Alex mentioned that if the hospitals in Mumbai feel that the residents need to be retained, ANBAI can recommend to NBE. Another issue was to how to go ahead with surgical patients as only symptomatic patients are being allowed swab test. There is also need to increase ICU beds. Dr. Ashwini also mentioned that the hospitals are staring at a crisis, as many of the nurses are going back to their home town and there needs to be a retention policy.

Gujarat: There was a requisition for hospital to treat COVID patients, but the charges offered were pathetic, so a representation was made to the govt wherein it was mentioned that routine schedule of charges has to be implemented plus the charges of the PPE. No MoU have been signed till the demands are met. Dr. Bharath suggested that a separate floor can be set up in the hospital for Covid cases, for which most of the members felt that it would disastrous.

Dr. Alex drew reference that there is a national directive in which AHPI was also involved, and that patients can not go to a non Covid hospital for treatment. He also felt that if the Govt takes over private hospitals they need to take over certain overheads and also should pay for unoccupied beds.

Tamilnadu: Positive cases have gone up and more testing is being done, but whereas ICU admission is less. Ventilators are being avoided and patients are treated through high frequency, high flow oxygen, which is working out very well.