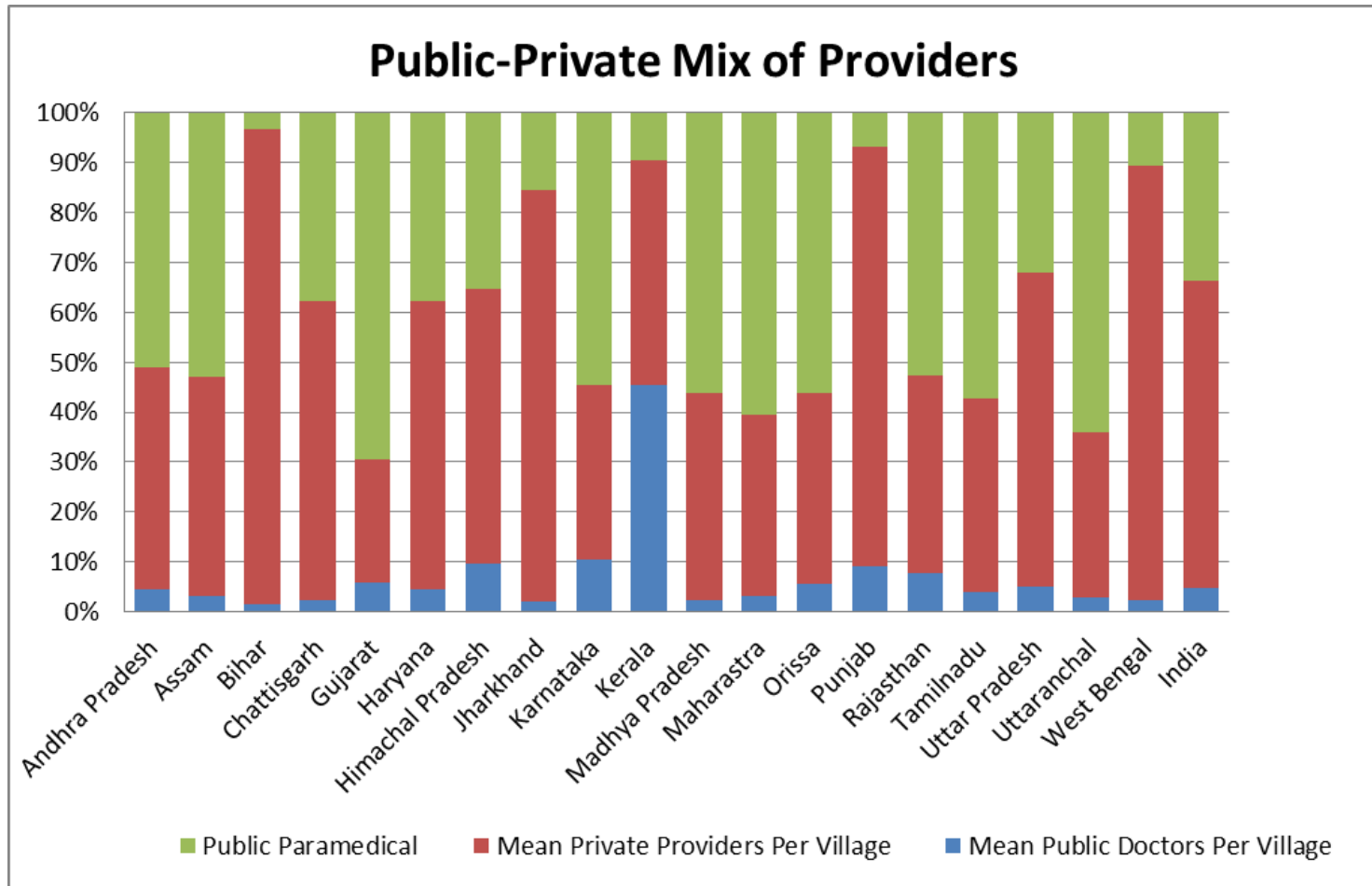


Reality Check

- 70%-80% care is in the private sector. Can government really replace this? Do we really have the money? In any case this is a long drawn out process – with problems of financial management/ utilization etc that will need resolution
- Assuming government can in fact find “some” money what would it mean for government to replace the private sector?

Who Provides



Reality Check: Preference for private unqualified providers...

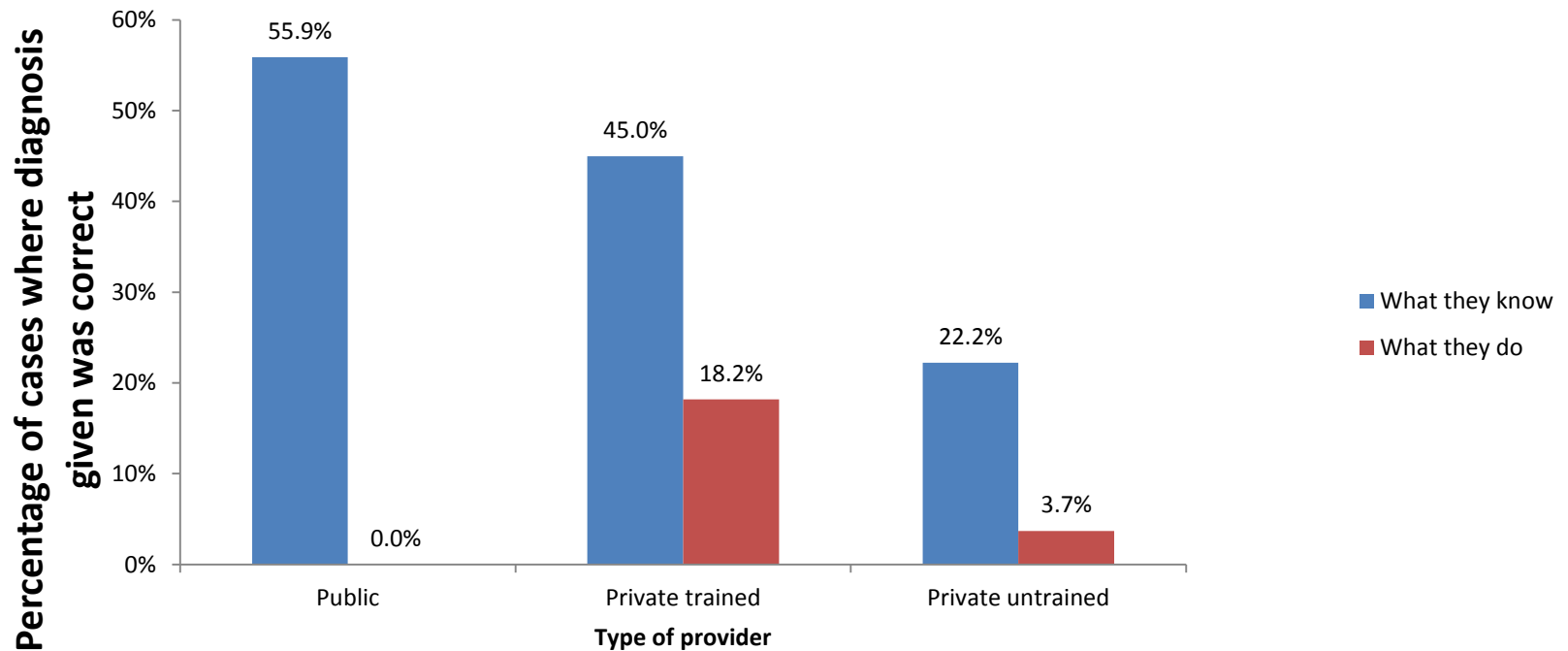
- In practice, people use a mix of providers. 8 out of every 100 visits is to a public provider. Unqualified private providers account for 70 out of 100 visits
- Av doctor in a rural PHC sees patients for 40 min per day. Busiest PHC is busy for about 2 hours a day
- Pub practice is often used as a referral service for private practice
- The real world today, is a PPP!
- Lets not get locked in what we know and consider what the complex reality looks like and how best might we want to address quality of care issues within this reality

Reality Check – what government clinics can provide

- High vacancies, high absenteeism
- Low effort: Rural MP average time spent 3.6 min per patient, 1/3rd essential questions asked and examinations completed, 1/3rd articulated a diagnosis (Delhi marginally better)
- Inaccurate, harmful treatment: Correct treatment protocol was followed 52 percent of the time in public practice (but improves to 66% in his/her private practice) while unnecessary or harmful treatment was prescribed 82 percent of the time.

Reality check – pvt is marginally better

What providers know, what providers do? Madhya Pradesh



The incentive problem

