Innovative Pro-Poor Service Delivery Model to Improve Quality and Access to Health Care Services across India



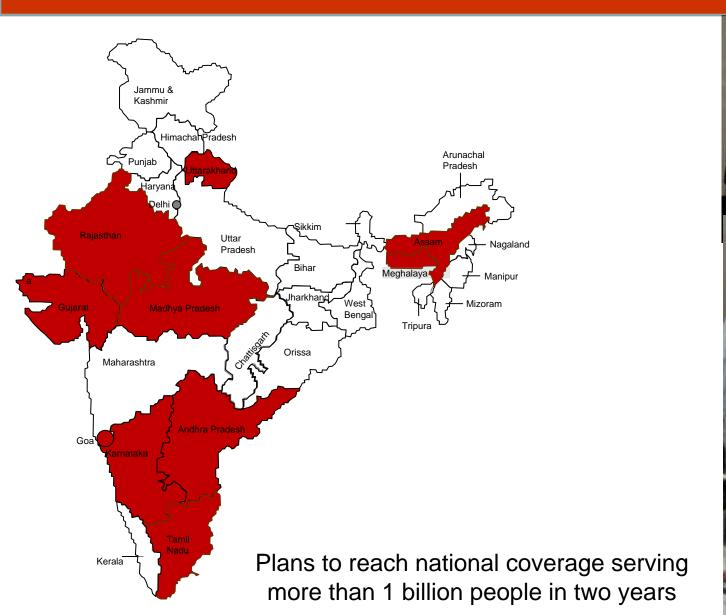
GVK Emergency Management and Research Institute

A Non-profit organization



Integrated Emergency Response Service addressing the challenge of poor access to emergency support

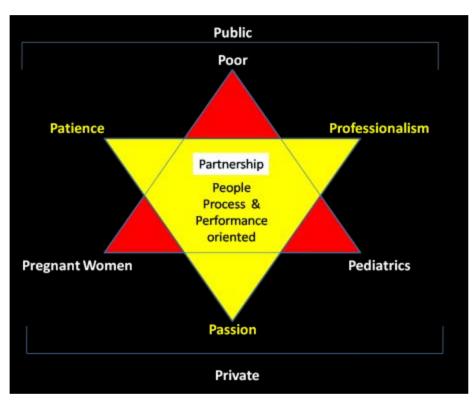
Launched on 15th Aug, '05 in Hyderabad and expanded to 9 other States





Successfully Implemented by GVK EMRI in PPP Framework

- 100% of Capital expenditure and Operational expenses by Government (Public)
- GVK EMRI provides and funds Leadership, Innovation (Infrastructure, Process), Collaborations, Research and Training, Knowledge transfer and Quality assurance
- Mahindra Satyam provides IT solutions as technology partner
- GVK EMRI manages and leverages government resources for better outcomes to serve poor









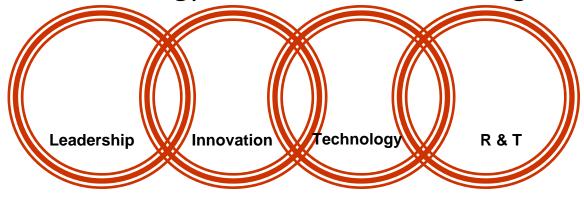
Situation

- 75,000 emergencies occur per day (30 M p.a.)
 - 80% are at the bottom of the pyramid
 - 80% deaths occur in hospitals in the first hour
- 4 M deaths p.a. (Cardiac, Road Accidents, Maternal, Suicidal attempts, Neonatal / Infant / Pediatric, Diabetic related, etc) due to absence of 4As:
 - Access to a universal toll-free number
 - Availability of Life Saving Ambulance to reach quickly nearest and appropriate health facility
 - Affectionate Care by trained paramedics (Compassion, Ability, Resourcefulness & Energy)
 - Affordability by every citizen independent of income, religion and community (mostly user fee services)



Programme Vision

- To respond to 30 million emergencies and save 1 million lives annually using innovative delivery model of emergency response services (for Medical, Police and Fire emergencies) under PPP (Public Private Partnership) structure that provides emergency and pre-hospital care free of charge to the patient through a mix of government and private funding
- To deliver services at global standards through Leadership,
 Innovation, Technology and Research & Training





Integrated Emergency Management Infrastructure of the Programme



Three digit toll-free number – Accessible from Land lines and mobile phones

Modern, spacious and open Emergency Response Centers

GIS / GPS to locate emergency victim / ambulance and information about health care facility locations and capacities

Designed and developed cost effective ambulances to provide quality care for Indian emergencies with facilities for rescuing and balancing patient care with public safety and patients relatives comfort

Trained personnel for providing pre-hospital care

Key Components of the Programme

Detailed process building

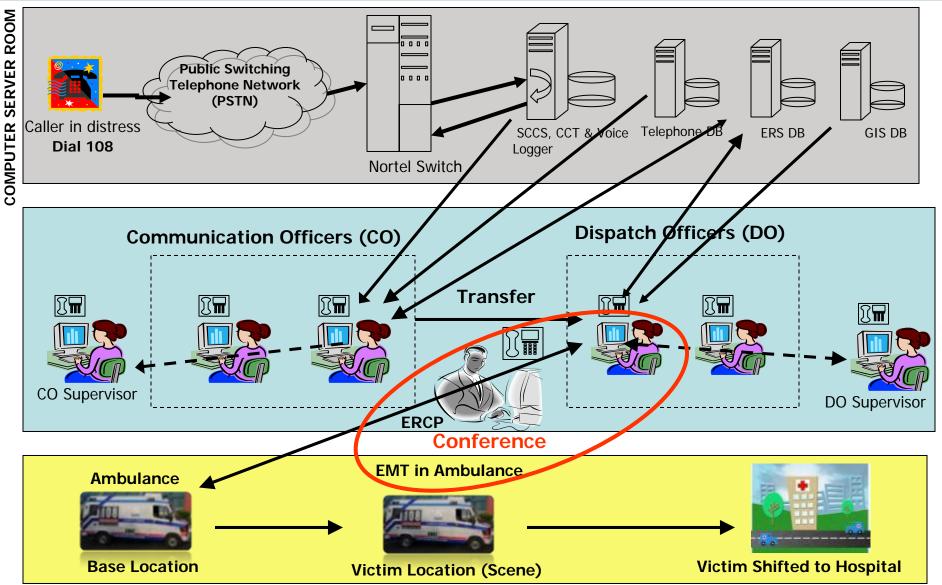
- Developed detailed process understanding and well defined responsibilities through out the organization
- Maintained all information related to emergency in Patient Care Records (PCRs)
- Patient information is shared with the hospital on arrival
- 48 hour follow up with the patients admitted to hospital



Key Components of the Programme ...

Innovative use of Technology





CCT: Communication Control Toolkit; SCCS: Symposium Call Centre Server; ERCP: Emergency Response Center Physician; EMT: Emergency Medical Technician

Key Components of the Programme

Quality pre-hospital care

- Emergency Medical Technician (EMT) in the ambulance is trained not only to provide pre-hospital care but also to handle emergency situations
- EMT gets support over phone from qualified medical practitioner called ERCP (Emergency Response Centre Physician) located at the ERC
- ERCPs are in the ERC round the clock to provide support to EMT and to people at emergency scene until ambulance arrives



Collaboration for transfer of Knowledge and Technology know-how, Best practices, Research & Training



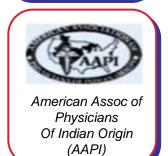




















Impact

Size	One Center for 40 M population
	 433 M population covered in 10 States (increased reach of health care in rural, hilly and tribal areas) –Rural area population: 277 M (64%); Tribal area population: 41 M (10%)
	 Trained 30,000 people (19,623 EMTs & Pilots and 9,290 Doctors and others)
	11,200 + emergencies handled per day (6.2 Million cumulative)
	2,710 Ambulances - 4.5 trips a day
	16,300 + GVK EMRI Associates
Speed	Went live in less than 4 months from signing MoU
	91% calls taken in first ring
	 < 15 minutes (urban) and < 25 minutes (rural) Ambulances reached
Type of Emergencies and Lives saved	 Pregnancy related - 31%, Vehicular Trauma – 18%, Acute Abdomen – 12% Cardiac – 4%, Respiratory – 4%, Suicidal – 3%, Animal Bites 3%
	300+ lives were saved per day (199,000 + till now) and 10,900 victims per day received timely, high-quality pre-hospital care
Costs	Cost per ambulance trip \$ 12 to \$15 USA
Qualitative Outcomes	A historic landmark in health care delivery system
	Built more trust in the health system as a whole
	 Increased institutional deliveries and reduced maternal mortalities by 20 – 25%
	A model for replication across the Country in any state



Impact - Doing More with Less for More















Impact - Doing More with Less for More











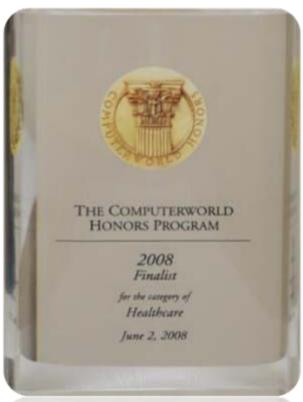




Award-winning GVK EMRI



Microsoft



Computer World



elndia 2008

Received prestigious awards from The Computer World, Microsoft, IT User – CNBC, 9-1-1 of USA, Ahmedabad Management Association, eIndia, CSI Nihilent and HEAL Foundation



To Conclude

 Reduction in poverty and increase in Quality of Life can be achieved by Caring, Valuing and Respecting Life with Humaneness, Humility and Commitment to serve people



 This Joy of Giving back to society increases Dopamine (Satisfaction), Oxytocin (Attachment) and Frontal Cortex Activity (Morals)





THANK YOU

Subodh Satyawadi

Chief Operating Officer, GVK EMRI

108 – Emergency Response Service, Gujarat

www.emri.in

