

New Health Policy

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The Government has formulated National Health Policy, 2017 in the light of the changes that have taken place in the country's health sector scenario since the formulation of National Health Policy, 2002. A statement showing the major changes in the National Health Policy, 2017 which were not specifically indicated/addressed in the previous National Health Policy 2002, is given below:

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§ The National Health Policy, 2017 marks an important change from the existing selective to comprehensive primary health care package which includes geriatric health care, palliative care and rehabilitative care services. The policy envisages providing the larger package of comprehensive primary health care through the 'Health and Wellness Centers'.

§ The National Health Policy, 2017 policy advocates extensive deployment of digital tools for improving the efficiency and outcome of the healthcare system. The policy aims at an integrated health information system which serves the needs of all stake-holders and improves efficiency, transparency, and citizen experience. Policy recognizes the integral role of technology (eHealth, mHealth, Cloud, Internet of things, wearables, etc) in the healthcare delivery, and the establishment of a National Digital Health Authority (NDHA) to regulate, develop and deploy digital health across the continuum of care.

§ The National Health Policy, 2017 has supported an integrated approach where screening for the most prevalent NCDs with secondary prevention would make a significant impact on reduction of morbidity and preventable mortality. The Policy has recommended for ensuring emphasis on medication and access for select chronic illness on a 'round the year' basis. Policy has further advocated for providing focus on screening of oral, breast and cervical cancer and for Chronic Obstructive Pulmonary Disease (COPD) in addition to hypertension and diabetes. The policy recognizes the growing need for palliative and rehabilitative care for all geriatric illnesses and advocates the continuity of care across all levels.

§ The policy recognizes the critical need of meeting the growing demand of tissue and organ transplant in the country and encourages widespread public awareness to promote voluntary donations.

§ The National Health Policy, 2017 recommends allocating 2/3rd or more of resources to primary care.

§ The National Health Policy, 2017 envisages setting up of an empowered medical tribunal for speedy resolution to address disputes/complaints regarding standards of care, prices of services, negligence and unfair practices.

§ The National Health Policy, 2017 ensures progressively incremental Assurance based Approach.

§ The National Health Policy, 2017 seeks to eliminate risks of inappropriate care by maintaining adequate standards of diagnosis and treatment, through Standard Regulatory Framework.

§ The National Health Policy, 2017 focuses on mainstreaming and integration of AYUSH into healthcare delivery through colocation, cross referrals, and integration with primary healthcare protocol.

§ The National Health Policy, 2017 recommends for universal access to progressively wide array of drugs and diagnostics.

§ The National Health Policy, 2017 envisages focus on special health needs to tribal and socially vulnerable population groups and recommends situation specific measures in provisioning and delivery of services.

§ The National Health Policy, 2017 proposes free drugs, free diagnostics and free emergency care services in all public hospitals.

§ The National Health Policy, 2017 supports setting up of National Allied Professional Council to regulate and streamline all allied health professionals and ensure quality standards.

§ The National Health Policy, 2017 supports efforts to improve occupational health through inter-sectoral collaboration.

The Minister of State (Health and Family Welfare), Smt Anupriya Patel stated this in a written reply in the Rajya Sabha here today.

MV/LK

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