

9. HEALTH

9.1. Existing Situation

The provision of health services and related infrastructure in Mumbai are met through the MCGM, the State Government and public trusts and private organizations/institutions.

Addressing the health needs of Mumbai is a primary duty of the MCGM. The MCGM is perhaps the only Corporation in the Asian countries, which runs medical colleges and hospitals. The expertise of the medical staff in these institutions is unmatched in several areas of medical specialization. Figure below presents location of hospitals in Mumbai. The access to public health infrastructure is not equitable and is more heavily tilted towards Island city, which is disproportionate to the democratic pattern.



Health services are largely met through primary, secondary and tertiary systems of the Corporation. The existing system for health delivery administered through the Municipal Corporation is far exceeded in terms of demand is more popular and affordable, the private sector driven health services are targeted towards provision of tertiary health infrastructure. The access to health services for slums and poor population is largely met through the municipal efforts.

The municipal health infrastructure in Mumbai consists of 3 major hospitals each with a teaching institution and one dental hospital also with a teaching institution. Apart from this, 16 peripheral hospitals in suburbs and extended suburbs and 5 specialized hospitals for tuberculosis, leprosy, ENT, eye care and. Kasturba hospital for infectious diseases are provided and managed by MCGM. Around 21,200 out-patients are treated every day in hospitals and dispensaries of MCGM. There are 27 maternity homes, 162 municipal dispensaries and 56 outreach health posts and 112 IPP- V health posts including 5 PVOs, 24 Post Partum Centers (PPC) which provide door to door service of family welfare, immunization, and MCH. There are 57 government & non-government reporting centers. Private hospitals and PMPs also provide health care services.

As per recent data, the total bed capacity in the municipal hospitals is about 10600 which constitutes about 28 % of the total hospital beds 40,000 in the city, the rest being provided in government hospitals (23%) and private hospitals in Mumbai. As against norms for provision (WHO norm - 1/550 population per bed) the ratio for

•Total beds – approx.	40,000
•Govt.	- 22%
•MCGM	- 28%
•Private	- 50%
WHO Norms	- 1/550
Maharashtra	- 1/1200

Mumbai works out to about 1/3000. This suggests a huge gap in provision and access to health care.

Figure 7: Map Showing Location of MCGM's Health facilities



The existing health infrastructure of the city was planned between 1950 to 1980 to cater population of about 52 to 70 lakh while the facilities are currently used by about 13 million people. It is therefore essential to drastically increase and upgrade the health infrastructure and also prioritize the improvement of services at the primary level which will include a package of improvement of physical infrastructure trained staff and public private partnerships to ensure quality and responsibility of the services.

	P.Hosp.	Teaching Hospitals	Key performance indicators of municipal hospitals are summarized below. These suggest that there is substantial demand for services offered by the municipal hospitals. As the services offered are affordable, coupled with
Daily Average Occupancy	68%	76%	
OPD Att.-New and Old	32,96,268	3135353	
Admissions	1,59,504	159528	
Casualty Attendance	3,55,404	163348	
Surgeries-Major & Minor	1,12,272	118038	
Average Patient stay	4	7.23	

growing demand due to rise in population, suggests the urgent need for expansion of the existing municipal facilities.

The MCGM also administers national programs for health care. These include:

- a. NLEP, NMEP
- b. FW & MCH
- c. AIDS Control Program
- d. School Health Program

A little over a quarter of the revenue expenditure of the budget of MCGM is spent on public health, medical relief and education. The health services are provided in two ways. On one hand there are hospitals, dispensaries and maternity homes all over the city catering to the medical needs of the people, while on the other hand there are outreach services, which emphasize preventive care.

The concept of a Health post evolved as a result of the need to emphasize the family welfare program and provide outreach services for maternal and child health. The India Population Project funded by the World Bank was launched in 1988 with a view to improve the availability and quality of family welfare services by revamping the existing urban health care system. The main goal was to reduce growth rate by reducing birth rate and also to reduce infant mortality rate and maternal mortality. It includes the components of child immunization, pre and postnatal care of mothers, education and training. The participation of voluntary organizations and private medical practitioners is also encouraged under this project.

9.2. Key Issues and Strategy Options/Plans

Key Issues	Strategy Options / Plans
Inadequate capacity	Plan and implement new hospital projects Expand capacity of existing hospitals
Limited primary care centers	Review provisioning and bridge the gap with new centers.
Limited access to poor	Review and evolve a suitable framework for enhancing coverage through private hospitals