

4.5.3 PRIVATE PRIMARY HEALTH CARE FACILITIES

A total of 512 private primary health facilities were surveyed, of which 277 were in the urban and 235 in rural areas. The results from these surveyed facilities are presented in *tables 4.5.3.1 to 4.5.3.3* below.

Table 4.5.3.1 Overall facilities and infrastructure available in private primary health care facilities (Percentage)

Facilities and infrastructure	Urban (n = 277)	Rural (n = 235)
Types of services provided		
Outpatient services	98.6	99.1
Inpatient services	69.7	68.1
Emergency services	64.6	55.3
Intensive Care Unit	41.2	34.5
Availability of any standard treatment guidelines followed for management of NCDs	60.3	50.2
Availability of counselling facilities for risk behaviour		
Tobacco cessation	22.4	20.0
Dietary modification	29.2	20.0
Physical activity	27.4	19.1
Alcohol cessation	21.7	17.0
Screening packages for NCDs as an outpatient service routinely		
Diabetes mellitus	78.7	71.1
Cardiovascular diseases	51.6	38.3
Hypercholesterolemia	51.6	36.2
Oral cancer	23.1	19.1
Cervical cancer	24.2	19.6
Breast cancer	24.9	19.1

Among the private primary health care facilities surveyed, 69.7% provided inpatient services in urban and 68.1% in rural areas. 50.2% and 60.3% of rural and urban facilities respectively, had availability of written standard treatment guidelines for management of NCDs. 78.7% of urban and 71.1% of rural facilities had screening packages for diabetes mellitus, less than one-fourth (urban and rural) facilities had screening packages for oral, cervical and breast cancer as an outpatient service. (*Table 4.5.3.1*)

Table 4.5.3.2 Service availability for management of NCDs in private primary health care facilities (Percentage)

Availability of services for management of NCDs	Urban (n = 277)		Rural (n = 235)	
	Inpatient services*	Outpatient services**	Inpatient services*	Outpatient services**
Diabetes mellitus	86.0	97.1	76.3	90.2
Hypertension	87.6	97.8	75.0	95.3
Cardiovascular problems	59.1	66.8	46.9	57.9
Stroke	58.5	57.8	45.6	49.4
COPD	77.2	80.5	70.6	69.8
Cancer	34.2	37.9	22.5	27.7

*among those facilities providing inpatient services; ** among those facilities providing outpatient services

The outpatient services available at private health care facilities (urban and rural) for hypertension (97.8% and 95.3%), diabetes (97.1% and 90.2%) and COPD (80.5% and 69.8%), respectively. The inpatient services available at (urban and rural) facilities for cardiovascular problems were (59.1% and 46.9%) and COPD (77.2% and 70.6%), respectively. (*Table 4.5.3.2*)

Table 4.5.3.3 Availability¹ of essential technologies and medicines for NCDs in private primary health care facilities (Percentage)

Essential technologies and medicines for NCDs	Technologies		Medicines		Both	
	Urban (n = 277)	Rural (n = 235)	Urban (n = 277)	Rural (n = 235)	Urban (n = 277)	Rural (n = 235)
As per WHO guidelines						
Diabetes mellitus ^{2,6}	87.4	79.6	62.1	57.0	59.6	51.9
Hypertension and Cardiovascular problems ^{3,7}	14.8	12.3	46.2	40.4	10.1	7.7
COPD ^{4,8}	90.3	87.2	59.9	52.8	57.0	51.5
All ^{5,9}	14.8	11.5	42.6	33.2	9.0	6.8
1	Availability of an item is defined as being available within the facility.					
2	At least one of each technology related to Diabetes are glucometer and glucostrips.					
3	At least one of each technology related to Hypertension and CVDs are BP apparatus, weighing scale, height scale/stadiometer, measuring tape, stethoscope, cholesterol meter, ECG machine and urine strips.					
4	At least one of each technology related to COPD are nebulizer and stethoscope.					
5	All technologies related to major NCDs are at least one of each weighing scale, height scale/stadiometer, measuring tape, stethoscope, BP apparatus, nebulizer, glucometer, cholesterol meter, ECG machine, glucostrips and urine strips.					
6	Available medicines for Diabetes are at least one oral hypoglycaemic agents and Insulin.					
7	Available medicines for Hypertension and CVDs are at least one aspirin, beta-blockers, long-acting calcium channel blockers, ACE inhibitors, statins and thiazide diuretics.					
8	Available medicines for COPD are at least one bronchodilator and a steroid inhalant.					
9	All the medicines to be available are at least of each aspirin, beta-blockers, long-acting calcium channel blockers, ACE inhibitors, statins and thiazide diuretics, oral hypoglycaemic agents, insulin, a bronchodilator and a steroid inhalant.					

The proportion of private health care facilities with essential technologies as per WHO for diabetes mellitus (urban 87.4% and rural 79.6%), hypertension and cardiovascular problems (urban 14.8% and rural 12.3%) and COPD (urban 90.3% and rural 87.2%).

The essential medicines for diabetes mellitus were available at 62.1% (urban) and 57.0% (rural), hypertension and cardiovascular problems 46.2% (urban) and 40.4% (rural) and COPD 59.9% (urban) and 52.8% (rural) facilities. In rural areas, 6.8% private health care facilities had all the essential medicines and technologies available as per WHO guidelines. (*Table 4.5.3.3*)