

Capacity Building and Training Workshop

Identifying Elements of Business Responsibility in Private Healthcare in India

Hyderabad, February 07-08, 2013

Organised by: CUTS International in association with Andhra Pradesh Private Hospital and Nursing Home Association (APNA)

Background

Consumer Unity & Trust Society (CUTS) is implementing a project entitled, 'Exploring the Interplay between Business Regulation and Corporate Conduct' in four states of India including Himachal Pradesh, Gujarat, West Bengal and Andhra Pradesh. The preliminary findings of the project in the four states suggest that there is huge gap in the understanding and practice of responsible behaviour among private healthcare institutions when analysed from the perspectives of their behaviour in the market place, workplace, communities and the environment.

As part of its capacity building initiative, CUTS in partnership with Andhra Pradesh Private Hospital and Nursing Home's Association (APNA) organised a two-day workshop at Hyderabad, Andhra Pradesh on February 07-08, 2013 with private hospital managers from various states (including but not restricted to the four BRCC states) in order to understand their perspectives and make an effort to develop a rough roadmap for promoting responsible private healthcare at the state level. The key questions CUTS wanted to find answers together with these practitioners was, '*Who should do What and How*'?

Objective of the Workshop

The main objective of the workshop was to promote better understanding of business responsibility among stakeholders from private healthcare. The workshop was intended to be a technical assistance activity and a forum for exchange of practices prevailing in the private healthcare industry. More than 20 participants from six different states participated in the workshop.

Scope of the Training Workshop

The training workshop broadly covered the following issues:

- Fundamental difference between Corporate Social Responsibility (CSR) and Business Responsibility
- National Voluntary Guidelines (NVGs) and its operationalisation in the sector

- Good practices and current approaches to quality improvement by private hospitals
- Quality of the practice of Biomedical Waste Management prevalent among hospitals
- Way forward for promoting Business Responsibility in private healthcare sector

PROCEEDINGS

Day 1

Inaugural Session

Dr R S Saluja, State President, APNA welcomed all the participants and briefly introduced APNA to the audience. Further, he mentioned about the good work CUTS is doing and how he has been associated with the organisation in this project. He attended the national level meeting held in New Delhi in 2012 where multiple stakeholders deliberated on the key issues of business responsibility in private healthcare and pharmaceutical sectors.

Rijit Sengupta, CUTS in his opening remarks introduced CUTS and the purpose of the training workshop. He mentioned that the focus of the workshop will be specifically on the two crucial determinant of responsible business conduct which includes the consumer interface of the private healthcare sector and the environmental aspects including Biomedical Waste Management practices. He stressed on the need for such sensitising programmes and urged participants to extract maximum benefit out of the workshop.

Dr S Chakravarthy (IAS, retd) and Member, CUTS International Advisory Board, delivered the keynote address. The private sector has been the main engine of growth for the Indian economy, and has contributed significantly to other sectors. It is in the interest of the private sector to complement the Indian government's efforts towards including every section of the society in its development path. However, of late it has been seen that the private entities across sectors have flagrantly breached social expectations which has raised question on their responsibilities towards the society and on the sanctity regulatory institution for evolving good corporate conduct in the country. Further, he opined that it is opportune that CUTS has initiated this discussion through which business can be more relevant and responsible in the present Indian society.

Vikash Batham, CUTS presented a brief overview of the BRCC project. In his presentation he highlighted that the thrust of the project is to assess the extent to which the policy and regulatory environment in the country can facilitate good corporate conduct in certain key sectors in India. The project aims to encourage responsible corporate conduct and building optimal regulatory framework through focused, informed and continuous discourse among government, business and stakeholders. Private healthcare and pharmaceutical sectors were chosen to understand this interplay between business regulation and corporate conduct.

Session I: An Overview of Business Responsibility in India

Rijit Sengupta provided a brief overview of business responsibility in India. He took the group through the history of CSR in India and its various coined definition in the literature. He highlighted various policies and measures and government's thinking on the subject

which received a boost when the Prime Minister announced his ten point social charter on inclusive growth in 2007 where the need was highlighted for taking a more comprehensive view of CSR in India.

Sengupta briefly informed the development of NVGs by the Ministry of Corporate Affairs on Social, Environmental and Economic Responsibilities of Business. In his session, he stressed upon thinking on CSR which has undergone considerable metamorphosis, since early times. *Business Responsibility* is now being considered as one of the most appropriate (and comprehensive) delivery mechanisms for businesses to meet their societal expectations.

Lastly, the role which government and stakeholders need to play to propagate the uptake of business responsibilities was discussed.

Session II: Introduction to NVG and its Operationalisation in Private Healthcare in India

Bimal Arora (GIZ, India) started his presentation by providing a brief historical and socio economic context of CSR. He discussed the evolution of NVGs which comes out as a holistic guidelines that take into account global practices but are ‘Indian’ in ethos.

Bimal introduced in details the structure of the guideline and explain each of the nine principles and core element of NVGs which has implication on responsible business conduct. He further suggested that for voluntary guidelines to be universally adopted, they must become a part of business DNA which includes adoption methods, reporting framework and indicators to enable firms to understand and perform as ‘Responsible Business’.

Session II: Improving Environmental Performance of Private Healthcare Entities (Focus on BMW)

Satish Sinha, (Toxics Link) started his presentation with introduction of its organisation Toxics Link and its mandate to work on environmental issues on waste management including electronic and municipal wastes across the country as one of the pioneer NGO. He highlighted on the history, definition and categories of bio-medical wastes. He stated that if BMW is not managed it creates persistent organic pollutants (POPs). Various regulations and acts were mentioned with respect to hazardous waste. He stressed upon the relation with patient safety and bio-medical waste management. Priority areas for patient safety were discussed.

He mentioned that rules and guidelines are available but its implementation is very poor. Lack of training or poor training, low priority and resource allocation are some of the major hurdles in its implementation. He further suggested that maintaining a pool of trainers at block or district level is required. It is also very crucial to include the course on efficient BMW management into curriculum of medical, nursing and paramedical colleges

Field Visit: Good Practices in Hospital Management – A Visit to Yashoda Hospital

As a part of the training workshop, a visit to a hospital that can make a good example for responsible business behaviour was envisaged for participants. The intent was to show

participants some exemplary practices in biomedical waste management and other facets of management of a hospital, such as ensuring patient care and efficiency of services, also provisions like assuring affordability for the economically disadvantaged sections of the society. Yashoda hospital in Hyderabad comes across as a paragon example in this context. It is a 600-bed hospital having more than 1500 staff. Participants who include senior doctors, hospital association and administrators enjoyed the visit thoroughly and witnessed the state of art facilities in terms of BMW and patient care. Everything in the hospital was well managed including labs, patient’s rooms, dustbins of different colours and operation theatres.

Day 2

Session III: Improving Consumer Interface of Private Healthcare Entities

Sana Contractor, CEHAT started her presentation with the growth of private healthcare sector and its characteristics in India. She explained why there is a dire need to regulate the sector to improve safety and quality and promote ethics and social justice. Her presentation also highlighted global experiences of regulating private healthcare sector by citing examples of UK, US, Canada and Australian healthcare system.

On the patient welfare issues in private healthcare the problem areas are irrational use of drugs, over prescription, unnecessary diagnostic, lack of standard treatment procedures, huge information asymmetry among consumers and healthcare providers and lack of grievance redressal mechanism. As a way forward, she suggested that there is need of a comprehensive umbrella act for the entire health sector in the form of a National Health Act. Developing a strategy for pooling financial resources deployed in health sector and redistribution based on existing resources and contracting in of private players but with proper accountability would also come handy.

She also shared a Draft National Charter of Patient Rights and called for a group exercise by dividing participants in three different groups and asked each group to what extent does this charter address the problem in private health sector.

Group Activity - Write-Shop on ‘Evolving Responsible Private Healthcare Sector in a State’-Who should do what?

This session was facilitated by Rijit Sengupta. The purpose of this exercise was for getting a perspective from practitioners in the private healthcare sector on the important question (**Who should do What and How?**) and how a responsible sector to be elevated to next level.

Participants were splited in to three sub groups. Each sub-group were given flash cards (of 5 different colours and shape) and a soft board with the following matrix inscribed on the soft board

	STAKEHOLDERS				
	State Government	State Level Regulators	Firms	Sectoral Associations	NGOs, Academicians
Desirable					

Actions					
Challenges					
Way Forward					

CUTS would anticipate that once such a blue-print for constructing a responsible private healthcare sector at the state-level is developed, the same would be shared with the four BRCC state governments (and other states, if there is interest) and relevant regulators for refinements, etc. This would therefore be an output that would feed directly into further state level advocacy and discussions related to pushing the agenda on responsible business practices in these two key sectors in the country.

Closing

Thanks were expressed by Rijit Sengupta and Dr. Saluja to the participants for attending the workshop and spending two days for deliberations. Dr. Saluja told that he was very pleased at the level of interaction and commitment to the task displayed by participants.