

DETAILED BRIEF OF NPHCE

Background:

The unprecedented increase in human longevity in 20th century has resulted in the phenomenon of population ageing all over the world. The population over the age of 60 years has more than tripled in last 50 years in India. As per the census 2011, the number of elderly people (60+ years) was 103.83million and is projected to increase to 133.32 million (2021), 178.59 million (2031), 236.01 million (2041) and 300.96 million (2051).

The National Sample Surveys - NSSO 42nd round (1986-87), 52nd round (1995-96), 60th round (Jan-June 2004) have addressed elderly health and social issues. Overall findings reveal

- The burden of morbidity in old age is enormous.
- Non-communicable diseases (life style related and degenerative) are extremely common in older people irrespective of socio- economic status.
- Disabilities are very frequent which affect the functionality in old age compromising the ability to pursue the activities of daily living.

According to NSSO-52nd round (1995-96), the prevalence of diseases among elderly people is as under;

- 75.68% of the elderly people have one or the other disease.
- 53.63% of the morbid have one chronic disease.
- 20.83% have two chronic diseases and
- 3.01 % have three chronic diseases

The disability profile among the elderly people is as follow;

- 40% have one or the other disabilities
- 38.39% disabled have one disability
- 15.44% have two disabilities and
- 5.88% have three disabilities.

National Programme for Health Care of the Elderly (NPHCE):

The Ministry of Health & Family Welfare had launched the “National Programme for the Health Care of Elderly” (NPHCE) during 2010-11 to address various health related problems of elderly people. The National Programme for the Health Care for the Elderly (NPHCE) is an articulation of the International and national commitments of the Government as envisaged under the UN Convention on the Rights of Persons with Disabilities (UNCRPD), National Policy on Older Persons (NPOP) adopted by the Government of India in 1999 & Section 20 of “The Maintenance and Welfare of Parents and Senior Citizens Act, 2007” dealing with provisions for medical care of Senior Citizen. The programme is State oriented and basic thrust of the programme is to provide dedicated health care facilities to the senior citizens (>60 year of age) at various level of primary, secondary and tertiary health care.

Objectives:

- To provide accessible, affordable, and high-quality long-term, comprehensive and dedicated care services to an Ageing population;
- Creating a new "architecture" for Ageing; to build a framework to create an enabling environment for "a Society for all Ages";
- To promote the concept of *Active and Healthy Ageing*;
- Convergence with National Rural Health Mission, AYUSH and other line departments like Ministry of Social Justice and Empowerment.

Components of the Program:

- **National Health Mission (NHM) Component:** Primary & Secondary care service delivery through District Hospitals (DH), Community Health Centres (CHC), Primary Health Centres (PHC), Sub-Centre/Health & Wellness Centres.
- **Tertiary Component:** Renamed as '**RashtriyaVaristh Jan Swasthya Yojana**' in 2016-17. These services are being provided through Regional Geriatric Centres (RGCs) located at 19 Medical colleges in 18 states of India and two National Centres of Aging (NCAs) one in AIIMS, Ansari Nagar, New Delhi and another in Madras Medical College, Chennai.
- **Research: A Longitudinal Ageing Study in India (LASI) project:-**The LASI is a nationally representative survey of older persons in India is being undertaken through International Institute of Population Sciences (IIPS), Mumbai. LASI wave-1 survey (2017-18) covers all 30 states and 6 Union Territories of India with a panel sample size of 72,250 older adults aged 45 years including 31464 people above 60 years of age and above and their spouses regardless of age. LASI collects data on four major subject domains:
 1. Health: Disease Burden & Risk Factors (Reported and Measured)
 2. Health Care and Health Care Financing
 3. Social: Family, Social Network and Social Welfare Programmes for the Elderly
 4. Economic: Income, Wealth, Expenditure, Employment, Retirement and Pension

The first wave of LASI has been completed and the final report of LASI wave-I released by Hon'ble Union Health Minister on 6th January 2021.

Longitudinal Ageing Study in India- LASI Wave-1 Report along with India & States/UTs Fact Sheets – Web Link- <https://www.iipsindia.ac.in/content/lasi-publications>

Program Strategies:

- Community based primary health care approach including domiciliary visits by trained health care workers.
- Dedicated services at PHC/CHC level including provision of machinery, equipment, training, additional human resources (CHC), IEC, etc.
- Dedicated facilities at District Hospital with 10 bedded wards, additional human resources, machinery & equipment, consumables & drugs, training and IEC.
- Strengthening of Regional Geriatric Centers to provide dedicated tertiary level medical facilities for the Elderly, introducing PG courses in Geriatric Medicine, and in-service training of health personnel at all levels.

- Information, Education & Communication (IEC) using mass media, folk media and other communication channels to reach out to the target community.
- Continuous monitoring and independent evaluation of the Programme and research in Geriatrics and implementation of NPHCE.

Expected Outcomes of NPHCE:

- Establishment of Department of Geriatric Medicine in selected 19 Medical Colleges Sanctioned as Regional Geriatric Centres (RGC) with a dedicated Geriatric OPD and 30-bedded Geriatric ward for management of specific diseases of the elderly, conducting trainings of health personnel in geriatric health care and pursuing research.
- Post-graduation in Geriatric Medicine (two seats) in each of the 19 Regional Geriatric Centres.
- District Geriatric Units with dedicated Geriatric OPD and 10-bedded Geriatric ward Rehabilitation/Physiotherapy Services in all District Hospitals.
- OPD Clinics/Rehabilitation units including domiciliary visits at CHC, PHC & HWC.
- Health & Wellness Centres/Sub-centres provided with equipment for community outreach services for Elderly.
- Training of Human Resources of Public Health Care System for provision of quality Geriatric Care.

Package of Services:

The program has two components for provision of geriatric health care services i.e: district & sub-district level component and tertiary level component. The package of services provided to elderly people at both levels is as given below.

Health Facility	Packages of services
Sub-centre	<ul style="list-style-type: none"> ▪ Health Education related to healthy ageing ▪ Domiciliary visits for attention and care to home bound / bedridden elderly persons and provide training to the family care providers in looking after the disabled elderly persons. ▪ Arrange for suitable callipers and supportive devices from the PHC to the elderly disabled persons to make them ambulatory. ▪ Linkage with other support groups and day care centres etc. Operational in the area
Primary Health Centre	<ul style="list-style-type: none"> ▪ Weekly geriatric clinic run by a trained Medical Officer ▪ Maintain record of the Elderly using standard format during their first visit ▪ Conducting a routine health assessment of the elderly persons based on simple clinical examination relating to eye, BP, blood sugar, etc. ▪ Provision of medicines and proper advice on chronic ailments ▪ Public awareness on promotional, preventive and rehabilitative aspects of geriatrics during health and village sanitation day/camps. ▪ Referral for diseases needing further investigation and treatment, to Community Health Centre or the District Hospital as per need.

Community Health Centre	<ul style="list-style-type: none"> ▪ First Referral Unit (FRU) for the Elderly from PHCs and below. ▪ Geriatric Clinic for the elderly persons twice a week. ▪ Rehabilitation Unit for physiotherapy and counselling ▪ Domiciliary visits by the rehabilitation worker for bed ridden elderly and counselling of the family members on their home-based care. ▪ Health promotion and Prevention ▪ Referral of difficult cases to District Hospital/higher health care facility
District Hospital	<ul style="list-style-type: none"> ▪ Geriatric Clinic for regular dedicated OPD services to the Elderly. ▪ Facilities for laboratory investigations for diagnosis and provision of medicines for geriatric medical and health problems ▪ Ten-bedded Geriatric Ward for in-patient care of the Elderly ▪ Existing specialities like General Medicine; Orthopaedics, Ophthalmology; ENT services etc. will provide services needed by elderly patients. ▪ Provide services for the elderly patients referred by the CHCs/PHCs etc ▪ Conducting camps for Geriatric Services in PHCs/CHCs and other sites ▪ Referral services for severe cases to tertiary level hospitals
Regional Geriatric Centre	<ul style="list-style-type: none"> ▪ Geriatric Clinic (Specialized OPD for the Elderly) ▪ 30-bedded Geriatric Ward for in-patient care and dedicated beds for the elderly patients in the various specialties viz. Surgery, Orthopedics, Psychiatry, Urology, Ophthalmology, Neurology etc. ▪ Laboratory investigation required for elderly with a special sample collection centre in the OPD block. ▪ Tertiary health care to the cases referred from medical colleges, district hospitals and below
National Center for Ageing	<ul style="list-style-type: none"> ▪ High level tertiary care with multidisciplinary clinical services involving medical and surgical disciplines. ▪ OPD care in various clinical disciplines. Special clinics like memory clinic, fall and syncope clinic, frail elderly clinic, aids and appliances clinic, implants and cosmetic clinic. ▪ Day care centre for : Investigations, rehabilitation, respite care, dementia care ,continence care ▪ In patient care for: Intensive care, acute rehabilitation, diagnostic and therapeutic services, long term rehabilitation service. Human resources development in all sub-specialties of Geriatric Medicine ▪ Developing evidence based treatment protocols for Geriatric diseases prevalent in the country. ▪ Special focus on care for 75+ aged population

Progress in implementation of Programme:

Expansion of primary & secondary Geriatric care services to all districts : In the 11th plan period 100 districts had been sanctioned for NPHCE services while in the 12th plan period 421 districts were sanctioned to provide dedicated geriatric OPD, IPD, Physiotherapy and lab services. With the remaining 114 districts sanctioned in 2019-20, all 713 districts have been sanctioned for geriatric primary & secondary care services of OPD, IPD, Physiotherapy and laboratory services.

Tertiary level activities of NPHCE: renamed as ‘RashtriyaVaristh Jan Swasthya Yojana’ in 2016-17. As on date, 19 Regional Geriatric Centres (RGCs) in selected Medical Colleges of 18 States, are sanctioned for tertiary care service delivery under NPHCE in the form of specialized OPD’s, 30 bedded wards in RGC including earmarking beds in various specialties like urology, orthopedics, ophthalmology etc, manpower development & research activities. Presently OPD services are being provided through 18 RGCs, inpatient services in 16 RGC’s, Physiotherapy in 14 centers & laboratory services in 13 centers.

Two National Centre for Ageing (NCA) has also been developed as centre of Excellence for Geriatric Care services. 200 bedded NCA at Madras Medical College, Chennai has been developed and operational for Covid ward and another NCA at AIIMS, New Delhi is in advance state of Construction. OPD services are expected to initiate by October 2021. A 250 Bedded Geriatric Care and Rehabilitation Centre is sanctioned at PGI Chandigarh.

Progress in Operationalization of the Programme activities 2020-21

(As per Progress Report- April to December, 2020)

S. No	Institutions	Sanctioned	Operational			
			OPD	Indoor wards	Physiotherapy services	Laboratory services
1	RGCs	19	18	16	14	13
2	District hospitals	718	584	507	445	539
3	CHCs	4869	3111	-	1131	2408
4	PHCs	18407	10180	-	-	-
5	SCs providing home based care & supportive appliances	90719	14201			

Daily Geriatric OPD services are being provided in 584 DH, 3111 CHCs and 10180 PHCs along with special OPDs in 18 RGCs. Inpatient services are being provided in 507 DH, along with 16 RGCs. Physiotherapy services are being provided in 445 DH, 1131 CHCs along with 14 RGCs. Laboratory services are being provided in 539 DHs, 2408 CHCs, along with 13 RGCs

Geriatric care service provision in 2019-20

(As per Annual Progress Report- April 2019- March 2020)

S.N.	Services	RGCs	Distt. Hospitals	CHCs	PHCs	SCs	Total
1	OPD care services	133545	7567744	7016670	9032922	2843211	2,65,94,092
2	In-door admissions	9992	688966	269286			9,68,244
3	Physiotherapy care	34637	754186	744964			15,33,787
4	Lab Tests	230749	4215883	2348922	2275600		90,71,154
5	No of Elderly Screened & given Health card		599908	719021	526754	273850	21,19,533

6	No of Elderly Provided Home care services		11157	92657	68674	68783	2,41,271
7	No of Elderly Provided supportive devices		4820	18006	7256	17502	47,584
8	Cases referred		32017	59202	65057	64119	2,20,395
9	Cases died in hospitals		17026	2156	384		19,566

Overall 265 lakhs elderly have been provided OPD, 9.68 lakhs Indoor admissions, 15.33 lakhs Rehabilitation and 90.71 lakhs Leb. services respectively by all the operational District Hospitals and below.

V. **Training Modules:** Three sets of Training modules for Medical Officers, Nurses and Community based workers to deliver Comprehensive Geriatric care has been developed. State level Training of Trainers of Medical Officers for Comprehensive Geriatric Care has been conducted at Chhattisgarh, Meghalaya, Haryana, Punjab Tamil Nadu & Maharashtra generating approx *236 States level Master Trainers and 85 National Master Trainers*: 27 for Medical Officer Module, 26 for Staff Nurses Module and 32 for module developed to train Community based workers.

VI. **NPHCE Website:** - An interactive and dynamic website cum MIS of the NPHCE program has been initiated through Center for Health Informatics (CHI) to provide comprehensive information along with data regarding Geriatric facilities and services available through-out the country. www.nphce.nhp.gov.in

VII. **IEC:** Audio/Video spots on different topics of elder care, print material-folder, posters etc. have been developed. The regional language version of IEC material is being developed. <https://nphce.nhp.gov.in/video-spot/>
