

Why good home-care health system is needed in rural areas

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Last month my mother, who is 92 years of age, fell in the bathroom and broke her pelvic bone. I live in rural town of [Phaltan](#) in western Maharashtra and to get a simple X-ray done was a nightmare.

We called the local orthopedics hospital and they sent a ramshackle ambulance. How an old Maruti Omni van got permission to ply as an ambulance is anybody's guess. Even a healthy passenger would feel sick and his/her bones would be rattled in that ambulance while going over the pot-holed roads of Phaltan. Some of the worst roads in the country are in Maharashtra and especially in rural Maharashtra.

The driver of the ambulance also doubled up as the paramedic and his callous and non-empathetic attitude almost broke my mother's heel. He almost threw my mother on the stretcher! Most of the ambulances in rural places are like that with hardly any facility to help the patient. I had to use an old saree to tie my mother to the stretcher so that her broken pelvis did not shake very much.

At the hospital, after a good deal of arguing we got her X-ray done quite quickly. Otherwise it takes forever to get it done. Since, the pelvic bone was slightly fractured the doctor advised complete bed rest and told us to take her home. In pelvic fracture cases [there is no surgery needed but just plain bed](#) rest so that the broken bone heals by itself. That is also the reason why I did not take her to Pune for treatment.

We brought her home and were immediately confronted by the stark reality of who will take care of her nursing needs. We tried to locate nursing care in Phaltan but were unsuccessful. Even the hospitals do not provide that facility. The relatives of patients do that in most of the rural hospitals.

Finally after a great difficulty and searching we got a 24 hours help (who had almost no training as a nurse) from Pune. Even this help relieved our emotional and physical stress.

Searching the net and talking to my doctor friends, I have finally been able to convert my mother's room into a home health-care facility. This includes the adjustable hospital bed with air mattress and a specially fabricated small wheel-chair, which can navigate the narrow passages of the house and can go into the bathroom. I feel I could get all this done because of our resources and ability to spend time searching for solutions on the net. Most of the rural population does not have this luxury.

Another tragedy in rural areas is that no doctor wants to do a home visit. No matter how ill or old the patient is, they insist that he/she should be brought to the hospital or their clinic. I was able to get a person who was not an M.B.B.S. doctor, but could administer saline or do basic dressing for bed sores. That was a partial relief.

Secondly, I was greatly helped by my brother who is an orthopedic surgeon in Australia. He constantly advised us on the basic care and telemedicine by him helped us tremendously.

Very frequently I have seen that in rural and also in urban areas, the missing ingredient in patient care is good nursing facilities. Putting a patient in hospital (whether he or she is terminally ill or suffering from non-life-threatening ailments) means endless headache for relatives who have to stay in the hospital, look after the nursing care of the patient and run continuously to get medicines and medical supplies. Besides the hospitals charge exorbitant amounts for surgeries and for lots of unnecessary tests performed on the patient.

For poor people Government of India has mooted quite a number of good schemes which [provide hospitalization for below poverty line \(BPL\) patients](#) and takes care of their bills through insurance cover. Yet I have seen these schemes misused by doctors and hospitals where they admit the patients at the slightest pretext and charge them the full amount even for minor ailments. The money is then paid to the hospital by the insurance company.

Our medical care system in rural areas is therefore quite broken with very greedy doctors and hospitals who in collusion with insurance agents, fleece both the patients and the government.

I feel a hospice or home care health system might alleviate this problem greatly.

The home care system will rely on special agencies who will provide trained nurses (at nominal cost) for homes, simple equipment like small wheelchairs, beds, commodes, etc. and qualified doctors on duty who can respond through the internet, mobile phones, etc. to the queries from the nurses and under emergency conditions visit the homes. Presently there are no such agencies but they are urgently needed.

For terminally ill, a home care system which provides nursing care and basic equipment, will help the patient. He/She will be surrounded by family and nursing care given by trained nurses will help relieve the pain. This is especially needed when the patient also suffers from dementia – as is the case with my mother. Regular hospitals are not equipped to take care of such patients.

Financially this system will be much more economically viable than having a dedicated hospice facility. The financial arrangements on how Government can help organizations in facilitating such a system need to be worked out. A possible solution could be to provide **insurance coverage for such a homecare system.**

Also such a facility can provide home care for patients who are discharged from the hospitals. Too often the relatives and the family have to provide prolonged post-operative care-which they are ill equipped to do so. Such facility could be a boon for those patients.

In urban areas, better medical facilities including hospitals and good ambulances can provide timely care. In rural areas, in the absence of such facilities it is necessary to have home-care facility.

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