

STRENGTHENING OF THE NON COMMUNICABLE DISEASE SCREENING & FOLLOW UP IN URBAN AREAS

Need /Rationale:

The common types of NCDs of Public Health importance are Hypertension, Diabetes, Heart attacks, Stroke, Cancers, Chronic Kidney Disease and Chronic Respiratory Diseases (such as Chronic Obstructive Pulmonary Disease and Asthma). In Tamil Nadu, the epidemiological transition has also led to a shift in burden from the Communicable Diseases to the Non-Communicable Diseases

In addition, the adverse impact of the pandemic was particularly felt in the area of NCDs as the pandemic resulted in the disruption of treatment, increased mortality and morbidity in patients with comorbidities like Hypertension and Diabetes. Tamil Nadu, which is at the forefront of the urbanization trend, requires closer policy attention to drive positive developmental outcomes.

Rapid urbanization is the factor for increasingly population in urban areas. Hence, to tackle poverty, improve Quality of life and to reduce OoPE for the urban poor target-based approach in providing Health Care Services is essential. The urban population bear a high risk for various NCDs including cancer due to unhealthy life styles arising from lack of physical activity and stressful environment etc.

It is therefore high time to strengthen the health system by developing the concept of comprehensive home-based health care services which views each household as a unit and the overall health of the family as the basic need to fulfill.

Hence , GoTN has launched, the “Makkalai Thedi Maruthuvam” scheme to address the increasing burden due to Non-Communicable Diseases by focusing on community-based interventions to improve compliance and control of the disease and was inaugurated

by the Hon'ble Chief Minister of Tamil Nadu's directives, the Department of Health and Family Welfare of the Government of Tamil Nadu.

The situation called for putting systems in place to reach Medicines for Hypertension and Diabetes patients at their doorsteps and paved the way for envisaging a **'Comprehensive Home-based Health Care Services'** as a sustainable model for future initiatives with a special focus in the Urban areas of TN through WHV with a separate monitoring cell in NUHM .

Description of the Model - Makkalai Thedi Maruthuvam (MTM) which literally means "Reaching out Health services to people"

MTM - Core activities

Home-Based Healthcare services

- I. Screening and follow up for Non-Communicable Diseases
- II. Home Delivery of HT/DM drugs to Hypertension and Diabetes patients aged 45 years & above and to patients with restricted mobility. Annexure I - Home-based Drug delivery Workflow of Women Health Volunteers
- III. Palliative Care Services
- IV. Physiotherapy Services
- V. CAPD services
- VI. Referral for Essential Services, identification of children with congenital problems or any other health needs in the family which needs to be informed and followed up.

Institution-based MTM services:

The existing NCD services provided at Urban Public Health Facilities in the State are brought under the umbrella of MTM for strengthening the referral and follow-up services. Palliative care, Physiotherapy, and CAPD services at Institutions are provided under the

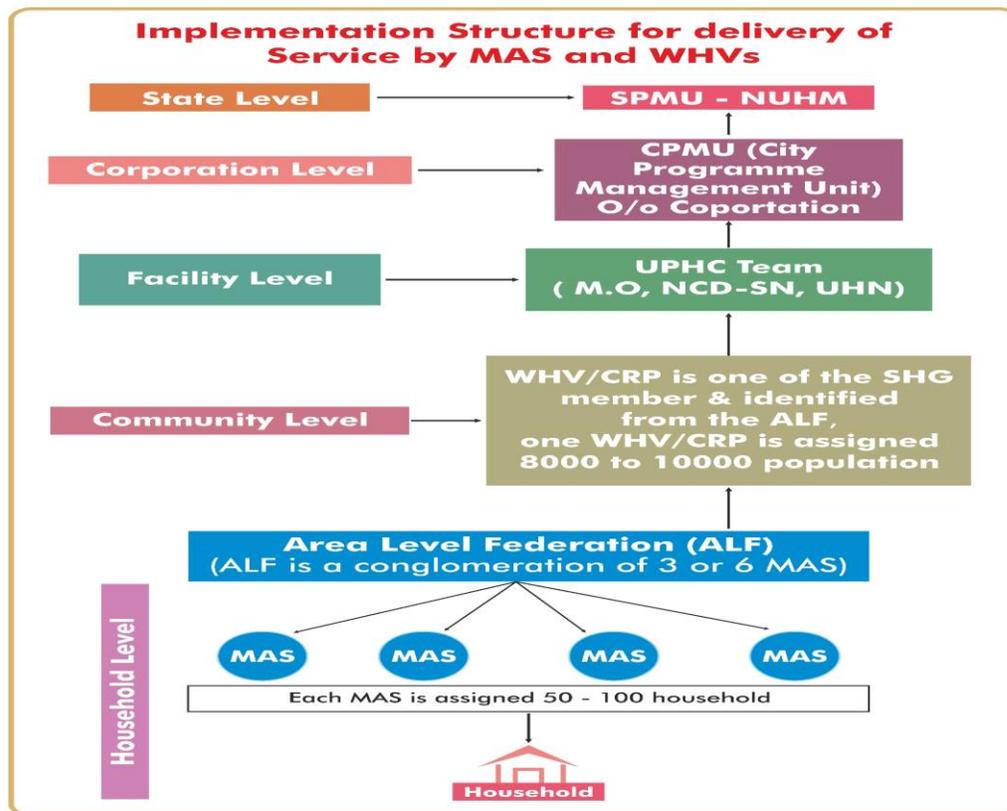
MTM scheme and the Patients eligible for Home-based MTM services are referred to respective PHC.

HUMANRESOURCES -

Type of HR	Nos
WHV	2256
Staff Nurse	460
Palliative SN	78
Physiotherapist	78

PARTNERS INVOLVED IN IMPLEMENTATION:

1. Tamil Nadu Urban Livelihood Mission (TNULM) - Self Help Group network – Women Health Volunteers (WHVs)
2. Directorate of Public Health and Preventive Medicine (DPH&PM), implementing the Primary health care activities at field level.
3. Tamil Nadu Medical Services Corporation (TNMSC) - Procure and supply of all the Drugs and Equipment.
4. Tamil Nadu Health System Reform Program (TNHSRP)- Funding Agency for implementing the Program.



EVIDENCE OF EFFECTIVENESS:

Results of the Innovation :

- The diagnosis of new NCD cases have been increased by 21 % (before the launch of MTM scheme in August 2021 the number of NCD patient was 2,68,608 were as in 2022 new cases diagnosed was 3,49,991 in addition)
- As on 27.08.2022, patients were provided services for the first time **8,62,618** and **14,69,851** patients were provided repeat services under the Makkalai Thedi Maruthuvam scheme.
- Household drug delivery: Breaking the access barriers experienced during lockdown due to the Pandemic.

- Strengthen Community Participation in the NCD management: Communitization efforts like group counselling and patient support groups by WHVs in urban areas.
- Creation of a Cadre of Health Volunteers from the Community for NCDs by linkage with another Government department (public-public partnership) in urban areas.
- Women Empowerment — involving Women Health Volunteers from Self Help Groups (SHGs) in urban areas.

COST:

The cost towards the implementation of the “Makkalai Thedi Maruthuvam” scheme involves NCD drugs, CAPD bags, Glucometer, BP apparatus, Incentives for Women Health Volunteers (WHVs); Salary for MTM staff Nurse, Palliative Care Nurse, Physiotherapist, Hiring of vehicle (MTM branded) for mobility support, Drug boxes provided to the patients, Kit bags required for the field team and IEC. The cost is being met out from NHM funds and other sources.

Sl. No	Head	Total in Lakhs	Total	NUHM	TNHSRP (PROPOSED)	XV FC (IN CRORE)
1	Drugs	114.91	11491200		11491200	
2	Diagnostics and Consumables (Gluco Kit & BP apparatus)	76.00	7600320		7600320	
2.3	Transparent Drug Box with Sticker, Printing Cards, Paper Cover, Bag for WHV& Stickers for MTM branded vehicle	535.8	53580000		53580000	
3	Transportation Cost: MTM branded vehicle	280.8	28080000		28080000	
6.1	WHVs	1218.24	121824000			121824000

6.2	NPPC Staff Nurse	60.84	6084000		6084000	
6.3	Physiotherapist	163.8	16380000			16380000
7	MTM salary (NCD staff Nurse & Physiotherapist)	913.68	91368000	91368000		
	Total	3364.07	336407520	91368000	106835520	138204000

SUMMARY OF LESSONS AND CHALLENGES:

The lessons learned out of Covid – 19 pandemic has paved way for taking services to households and also brought to light the strengths in considering each household as the basic and potential unit for the Health care delivery system.

NCD control rate depends on treatment compliance of the patient and also lost to follow-up is a big challenge that is expected to be improved effectively by Home-based drug delivery and follows up services.

Palliation and Physiotherapy services are the major unmet needs, people have no proper access to such services which is being addressed by this scheme.

The challenges involve

- The referral linkages and integration between the field level team and the Public health Institution-based HR.
- Handling stakeholders from other departments involved in the implementation and functioning of the scheme
- Monitoring the quality of services provided under the scheme

POTENTIAL OF SCALE:

1. Delivery of drugs, providing Physiotherapy, Palliative care, CAPD services at doorstep can be beneficial in improving the continuum of health care which is a very useful service.
2. Other states can emulate this model by giving special focus in urban areas by involving other State Government departments like TNULM , Urban Local Bodies (Corporations / Municipalities) etc.,

CONCLUDING REMARKS

The State Government's flagship scheme namely "Makkalai Thedi Maruthuvam" (MTM) which is being implemented across the entire State in all the Municipalities and Corporations by engaging the services of the Women Health Volunteers (WHV) who are placed at the rate of 1 WHV for every 10,000 population, has helped reduce out-of-pocket expenditures. In a similar manner, it is recommended that other existing and upcoming health programme should also invariably be implemented in all Urban areas to help reduce high expenditures related to healthcare.

Annexure I

Services under MTM scheme

Drug distribution to the patient in GCC



Palliative care services in Coimbatore



Bags to CAPD patients in Madurai



Snapshot Services Provided by WHV and Staff Nurse

