

# RESEARCH INSTITUTION JOINS EFFORTS TO BRING LAW ON RIGHT TO HEALTH

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

A Jaipur-based research institution has joined the efforts for bringing a “robust legislation” on right to health in Rajasthan with the emphasis on setting the standards for delivery of services, human resources and medical facilities. The 2021-22 State budget has made a provision for the law along with a new model of public health.

Chief Minister Ashok Gehlot had announced the implementation of the Rajasthan Model of Public Health, while presenting the State Budget on February 24, and said that it would include a Right to Health Bill as well as measures for preventive, primary and curative care as envisioned by the World Health Organisation (WHO).

The Mukhya Mantri Chiranjeevi Yojana will also be launched on May 1 as a universal health care scheme with an allocation of Rs. 3,500 crore in the upcoming financial year as part of measures to reinforce health infrastructure and ensure accessibility to all citizens.

The scheme stipulates cashless health services up to Rs. 5 lakh to every family in the State.

The Indian Institute of Health Management Research (IIHMR) has recommended setting of standards in accordance with the resources available in the State to match with the rights of patients as well as the service providers. The Indian Public Health Standards (IPHS), set by the Union government, have also been revised keeping in view the changing protocols of the existing programmes.

## ‘Dynamic process’

IIHMR president P.R. Sodani said here on Saturday that the quality of medical services could not be measured unless the standards were laid down as per the availability of resources at primary and tertiary levels. “It should be a dynamic process. The standards can further be enhanced when a satisfactory level of medical investigation, treatment and supply of drugs is achieved,” he said.

Dr. Sodani highlighted the aspect of ensuring high quality of public health services at a State-level consultation on the Right to Health Act here. He said the State government should first set the norms and later allow flexibility to suit the diverse needs of different regions.

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