## Report regarding visit of West Bengal Human Rights Commission to Medical College and Hospital, Kolkata on 12<sup>th</sup> October, 2023.

On 12<sup>th</sup> October, 2023, the West Bengal Human Rights Commission led by Justice Shri Jyotirmay Bhattacharya, Chairperson, Justice Madhumati Mitra, Member visited and inspected Medical College and Hospital, Kolkata.

2. During the said visit, Prof.(Dr.) Anjan Adhikary, other medical officers, nursing staff had interaction with the Chairman and Member of the Commission. During the course of said interaction the Commission was informed by the hospital authorities that many patients from different parts of our country as well as from neighbouring countries come to the hospital for their treatment. As a result, a large number of patients are being treated every day either in O.P.D. or as indoor patients.

3. From the data supplied to the Commission by the said Medical College and Hospital Authorities it appears that from January, 2023 to September 2023, considerable number of patients from outside West Bengal visited the hospital for their treatment. Out of which sufficient number of patients from foreign country got medical treatment in the Medical College and Hospital. The Commission was

informed by the Hospital authorities that many patients with various ailments from Bihar, Jharkhand, Uttar Pradesh and Haryana etc. are being treated in Kolkata Medical College and Hospital. From the interaction with the Hospital authorities it came out that various medical devices including single use device, such as syringes, catheters etc. and implantable device i.e. pacemakers, hip prothesis and various costly medicines are required to be supplied to the patients. To diagnose their diseases properly ultrasound and C.T. Scan are required to be done. During the course of discussion it was specifically mentioned that the patients from outside West Bengal (i.e. the foreigners and neighbouring States ) are being treated free of cost like other patients of West Bengal though they neither reside in West Bengal nor stay in West Bengal in connection with their service. According to them a considerable portion of budgetary allocation is being spent on the treatment of foreigners and / or the persons who come from outside West Bengal. Budgetary allocation is made for the medical benefit / treatment of the people of West Bengal. Unexpected expenditure on such allocation for the treatment of foreigners and the people of outside West Bengal may prevent the people of West Bengal from getting adequate and proper medical facilities in need. An anxious thought is required to be given over the issue and a mechanism requires to be implemented so that the  $_{\rm fb}$  expenditure incurred on the patients outside from West Bengal may be recovered so that entire budgetary allocation may be spent on the patients of West Bengal. A solution to this problem may be worked out by providing treatment facilities to the foreigners and patients from outside West Bengal, on payment basis to recover actual costs of treatment from them.

During discussion, the Commission was informed by the 4. Hospital Authorities that they were facing problem due to inadequate number of medical faculties, medical officers, nursing staff, Gr.D Staff, Scavengers, sweepers etc. The number of existing medical officer, nursing staff, Gr.D staff etc. are not at all sufficient to deal with as well as to take proper care of large number of outdoor and indoor patients. From the discussion it came out that the logistic support is also not adequate. The Commission was informed that modern technologies like PET CT Scan, Robotic Surgery etc. are required to be introduced immediately for rendering better treatment to the patients and in this regard the hospital authorities have already taken up the matter with the higher authority for administrative approval and financial sanction. The Commission was also informed by the hospital authorities that there are 13 number of specialized labs for hospital and adequate fund is required to procure reagents to run those specialized labs smoothly and properly. It is suggested that all such facilities including staff strength should be extended to the Hospital to cater health services  $\mathfrak{h}$ 

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to the actual number of indoor patients admitted in the Hospital and the actual number of outdoor patients who are being treated daily in the outdoor and not by taking note of the sanctioned bed accommodation.

5. From the data supplied by the hospital authorities it appears that at present there are 10 Blocks, namely, M.C.H., Casualty Block, Paediatric Medicine (mother and child hub), David Hare Block, Ezra, Shyamacharan Building, Green Building, Eden Hospital, Super Speciality Block, SNCU in born, SNCU out born.

6. On query Commission was informed about the diet facility for indoor patients. The amount of money as sanctioned for providing diet for per day for per patient is very low and not at all satisfactory. For diabetic patient sanctioned amount is Rs.57.57 for per day per patient. Rs.78.38 is provided for mentally challenged indoor patient for per day per patient. Considering the present market price, the amount as provided for two meals, one tiffin per patient per day appears to be very meager and the amount requires to be increased immediately. It should be at least Rs.200/- per day per patient.

7. In Kolkata Medical College and Hospital, as it appears from the data supplied to the Commission by the hospital authorities, various types of treatment are available and there are various departments for both O.P.D. and I.P.D. in the Medical College and Hospital, Kolkata for giving medical assistance and help to the patients.

8. It appears that many posts are lying vacant which causes great inconvenience to run the hospital smoothly. The Commission was informed that many Group B and C posts are lying vacant as on 01/10/2023. Out of 52 Pharmacists, only 40 Pharmacists are available. Out of 14 Facility Managers, 13 are lying vacant. Medical Technologies (RD) out of 46 only 24 are available. Out of 21 Medical Technologies (RT) only 14 are available. Out of 07 Linen Keeper at present there is none. At present the hospital authorities are running the hospital with much less staff than sanctioned strength. The number of outdoor patients and indoor patients are increasing day by day and as such sanctioned strength of Group B and C are required to be filled up immediately.

9. Number of security personnel in the Medical College and Hospital, Kolkata is 238. The Commission was told that there is no Critical Care Ambulance. One Critical Care Ambulance is required to be provided to the hospital authorities for movement of patient from one Department to the other within the Hospital compund. On query, the Commission was also informed that there is no dietitian in the hospital. Importance of dietitian in modern age and modern treatment cannot be ignored. The hospital authority should take up

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the matter with the higher authority for creation of the post of Dietitian.

10. During the course of discussion the Commission was informed that there are 03 C.C.U. located at Eden Building, SSB 2<sup>nd</sup> Floor, SSB 3<sup>rd</sup> Floor. It was told to the Commission that there is one ICCU in MCH Building. The Commission visited ICCU. At that time lunch / meal was being served to the patients. The quality and quantity of the meal did not appear to be satisfactory to the Commission. Quality and quantity of the food require to be improved immediately.

11. Commission was told there is one I.T.U situated at CTVS, DHB Building. There are three CCU located at Green Building, SSB 2<sup>nd</sup> Floor, SSB 3<sup>rd</sup> Floor. There is one ICCU situated at MCH Building. There are five HDU situated at Cardiology, S.HDU, CTVS, OBS HDU, SSB 4<sup>th</sup>. There are two PICU situated at (PICU I&II) MC Hub. There are two NICU situated at (NICU I & II) Eden Building and one SNCU situated at Eden Building.

12. The Department is helmed by Professor Dr. Jayanta Roy and has an Asstt. Professor, Dr. Arupratan Ghosh. A Senior Resident Medical Officer (SRMO) has also been engaged (on contractual basis). There is a post of occupational therapist in the Deptt. but the same has been lying vacant for long. <u>Treatment offered here</u> : Specially-abled patients, paralytic patients, patients of Autism, Cerebral Palsy and Late Speech and such others are treated here. The autistic patients also require psychiatric treatment.

<u>Equipments</u> : Medical equipments for diagnosis and treatment such as NCV, EMG and other modern apparatus are not found available in the department.

Other observations : The counter for renewal of cards of all categories of patients is located adjacent to the Physical Medicine and Rehabilitation Department and the entrance passage is common. Huge crowd (patients and relatives) gathers at the entrance passage for renewal of all categories patients' cards. Apparently, it gets very difficult for specially-abled patients to use the ramp or to enter the P.M. & R. Department steering through the huge gathering.

13. Medical College and Hospital has various Departments having both O.P.D. and I.P.D. There are total 37 departments having O.P.D. and I.P.D. Only Nephrology and Dentistry Departments have only O.P.D. Medical College and Hospital, Kolkata is providing Swastha Ingit and this facility is available to the patients. Experienced faculties and specialist doctors are rendering medical advice to the patient through Tele consultation and the said consultation time is

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from 10 a.m. to 5 p.m. on all working days. The Commission was apprised that so far approximately two crores thirty four lakhs patient of West Bengal have been benefitted from the project, namely, Swastha Ingit project. The Commission was also informed that about 100 doctors from different specialties of Medical College and Hospital are dedicatedly involved in this project along with experienced ITTU.

14. During the course of interaction the Commission was informed that there is no provision for engagement of Aya by the patient party on payment to look after the indoor patient. Patient party is allowed to keep one person as attendant to look after the patient during his or her stay. There is no system of providing separate dress to the indoor patient. Without specific dress of patient it is difficult to identify the patient and person who stays at the hospital as attendant of the patient.

To maintain health and hygiene of the indoor patients, it is suggested that allowing family member and / or relatives and / or friends etc. of the patient in the ward as attendant to look after the patient should be avoided as far as practicable; rather practice of engagement of aya by Hospital authority to look after the Indoor Patients will help the Hospital authority to maintain hygiene in the b wards.

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15. Lab service of Cardiology Department and in the Central Laboratory should be improved to uplift the standard of treatment and to facilitate speedy and prompt treatment to the Indoor Patients. It is suggested that

(1) Side Lab Cardiology Department should be established by making available Point of Care testing kits for diagnosis of heart attacks, also semi-automated clinical chemistry analyzers, blood gas analyzers, ISE-based electrolyte analyzers therein.

(2) Apart from this, Central Laboratory should run large clinical chemistry auto analyzers 24x7. The turnaround time for emergency tests should be displayed digitally in the Central Lab for the benefit of the public.

16. In view of the above inspection, interaction with the Medical College and Hospital authorities as well as facilities available to the patient, the West Bengal Human Rights Commission make following recommendations :-

i. There is immediate need to fill up all the vacant posts for smooth and proper functioning of Medical College and Hospital;

Additional support staff should be provided on the basis of actual number of Indoor and Outdoor patients being treated in the Hospital and not on the basis of sanctioned bed strength of the Hospital;

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ii. There is also need for one Critical Care Ambulance for movement of critical patient;

iii. Commission is of the view that the present dietary rate is very meager. It should be increased to Rs.200/- for per patient per day;

iv. The hospital authorities should take up the matter with the higher authorities for creation of post of dietitian;

v. The present practice of allowing family member of the patient party to attend the patient in Ward or cabin requires to be discontinued, considering the health hazard which the patient may suffer due to various types of infections that may spread from the attending members of the patient party. Rather practice of engagement of aya by the Hospital authority to look after the Indoor patients may be re-introduced.

vi. Indoor patient be provided separate dress for proper identification and for hygiene purpose;

vii. There is need for prompt supply of required drug, equipment and medicines and also for adequate fund so that reagents may be procured to run the specialized labs. There is also need of mechanized clinic of the hospital;

viii. A Side Lab for Cardiology Department and the Central Laboratory should be improved to uplift the standard of treatment

and to facilitate speedy and prompt treatment to the both Indoor and Outdoor patients. It is suggested that :-

- A. One Side Lab for Cardiology Department should be established by making available point of care testing kits for diagnosis of heart attack, also semi-automated clinical chemistry analyzers, ISE based electrolyte analyzers therein;
- B. In addition thereto, Central Laboratory should run Large Clinical Chemistry auto analyzers 24 x 7. The turnaround time for emergency tests should be displaced digitally in the Central Lab for the Benefit of the Public.

ix. The vacant post of Occupational Therapist has to be filled up urgently and adequate number of Physiotherapists have to be deployed keeping in mind that the treatment using physical medicine and occupational therapy is getting ground day by day. The hospital authority informed that the card-renewal-counter will be shifted in an alternative place to ensure easy access of speciallyabled patients. The task of shifting the counter has to be completed within a reasonable period, preferably within 02 (two) months, to extend safe free unobstructed entry passage to the patients with physical impairments and disability to the P.M. & R. Department and to avail treatment to enhance and restore functional ability and guality of life. In 16. Joint Secretary, WBHRC is directed to send an authenticated copy of this report to Principal Secretary, Health and Family Welfare Department, Govt. of West Bengal with copy to Medical Superintendent cum Vice-Principal, Calcutta Medical College and Hospital for information and necessary action. Principal Secretary, Health and Family Welfare Department, Govt. of West Bengal is directed to submit action taken report within three months from the date of receipt of this report.

Madhumati Nita.

(Justice Madhumati Mitra ) Member 13/12/2023 Jesoninay Bhatlachary

( Justice Jyotirmay Bhattacharya ) Chairman 13/12/2023