



Research Paper

Improving Healthcare Outcomes: The Case of Chennur Primary Health Centre

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Abstract

This research article examines the healthcare outcomes at Chennur Primary Health Centre (PHC) in the YSR Kadapa district, Andhra Pradesh, India. It aims to evaluate the impact of the PHC on the local population's health, analyse the challenges faced in delivering healthcare services, and suggest potential improvements. The study employs a mixed-methods approach, incorporating quantitative data from patient records and qualitative data from interviews with healthcare staff and community members. The findings highlight the PHC's significant role in improving health outcomes but also reveal areas needing enhancement, such as resource allocation, staff training, and community engagement.

Key words: Primary Health Centre (PHC), Healthcare Outcomes, Rural Health, Resource Allocation, Community Engagement, Non-Communicable Diseases (NCDs)

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I. Introduction

Primary Health Centres (PHCs) are the cornerstone of rural healthcare in India, providing accessible, affordable, and comprehensive healthcare services to underserved populations. These centres are pivotal in bridging the gap between urban and rural healthcare access, ensuring that essential medical services reach the most remote areas. Chennur PHC, situated in the YSR Kadapa district of Andhra Pradesh, serves as a vital healthcare facility for a population of approximately 36,825 people across 80 villages. The PHC not only offers primary care services but also plays a critical role in preventive healthcare, maternal and child health, and the management of chronic diseases.

This study aims to assess the effectiveness of the Chennur Village PHC in improving healthcare outcomes, identify existing challenges, and propose strategies for improvement. By examining the current infrastructure, resource allocation, and the range of services provided, this research seeks to highlight the strengths and weaknesses of the PHC. The ultimate goal is to provide insights that can help enhance the quality of healthcare delivery in Chennur Village and similar rural settings across India.

II. Methodology

This research utilizes a mixed-methods approach, combining quantitative analysis of health records and qualitative interviews with healthcare providers and community members. Data were collected over six months, from July to December 2023. Quantitative data included patient demographics, disease prevalence, treatment outcomes, and service utilization rates. Qualitative data were gathered through semi-structured interviews with medical officers, nurses, and patients to gain insights into their experiences and perceptions of the healthcare services provided.

Table 1: Study area and sample of the study

S. No	District	Primary Health Centre	Patients	Doctor	Nurse	Total
1.	YSR KADAPA	Chennur	50	1	2	53

Source: Author's Own Compilation

Profile of the Study Area

Table 2: Chennur Primary Health Centre Profile

S.No	Description	Details
1.	Population under the PHC	36825
2.	Villages under the PHC	80
3.	Sub-centres under the PHC	09
4.	Location of Sub –Centres	1. Chennur-1 2. Chennur-2 3. Chennur-3 4. Bayanapalli 5. Upparapalli 6. Ramanapalli 7. Mullapalli 8. BSpalli 9. Sivalpalli
5.	Present staff working in the PHC	14
6.	Bed capacity of the PHC	10
7.	Average attendance of the Patients per Day	80

Source: Primary data

The Chennur Primary Health Centre (PHC) is a pivotal institution in the local healthcare infrastructure, serving a significant population and a vast geographic area. This report provides a detailed profile of the Chennur PHC, highlighting its population coverage, geographic scope, sub-centres, staffing, bed capacity, and daily patient turnover.

Population Coverage

The Chennur PHC serves a population of 36,825 people in 80 villages. This extensive reach underscores the importance of the PHC in delivering healthcare services to a large and diverse group of residents. The substantial population coverage necessitates a robust infrastructure and efficient service delivery mechanisms to meet the healthcare needs effectively.

Sub-centres

Under the Chennur PHC, there are nine sub-centres strategically located to extend healthcare services to various regions. The sub-centres are:

- Chennur-1
- Chennur-2
- Chennur-3
- Bayanapalli
- Upparapalli
- Ramanapalli
- Mullapalli
- BSpalli
- Sivalpalli

These sub-centres facilitate the decentralization of healthcare services, ensuring that medical attention is available closer to the residents' homes, thus enhancing accessibility and convenience.

Staffing

The PHC employs 14 staff members, including medical professionals and support staff. The presence of a dedicated and skilled workforce is critical for the effective functioning of the PHC. Adequate staffing levels ensure that the PHC can provide comprehensive healthcare services to the population it serves.

Bed Capacity

The Chennur PHC has a bed capacity of 10, allowing it to admit and treat patients requiring inpatient care. This capacity is vital for handling medical cases that necessitate longer observation and treatment, thereby enhancing the PHC's ability to manage a variety of health conditions.

Patient Turnover

The PHC caters to an average of 80 patients daily. This high patient turnover indicates the community's reliance on the PHC for their healthcare needs. It also reflects the PHC's capacity to manage a significant number of patients efficiently, ensuring timely and effective medical care.

III. Results

Table 3: Availability of Prescribed Medicines at Chennur Village Primary Health Centre

S.No	Primary Health Centre	YES	NO
1	Chennur	40 (80%)	10 (20%)

Source: Primary data

The assessment indicates that prescribed medicines are available at the Chennur Village PHC 80% of the time. However, there is a 20% shortfall where essential medicines are not available.

Table 4: Analysis of Referrals to Private Medical Shops: Chennur Village Primary Health Centre

S.No	Primary Health Centre	YES	NO
1	Chennur	05 (10%)	45 (90%)

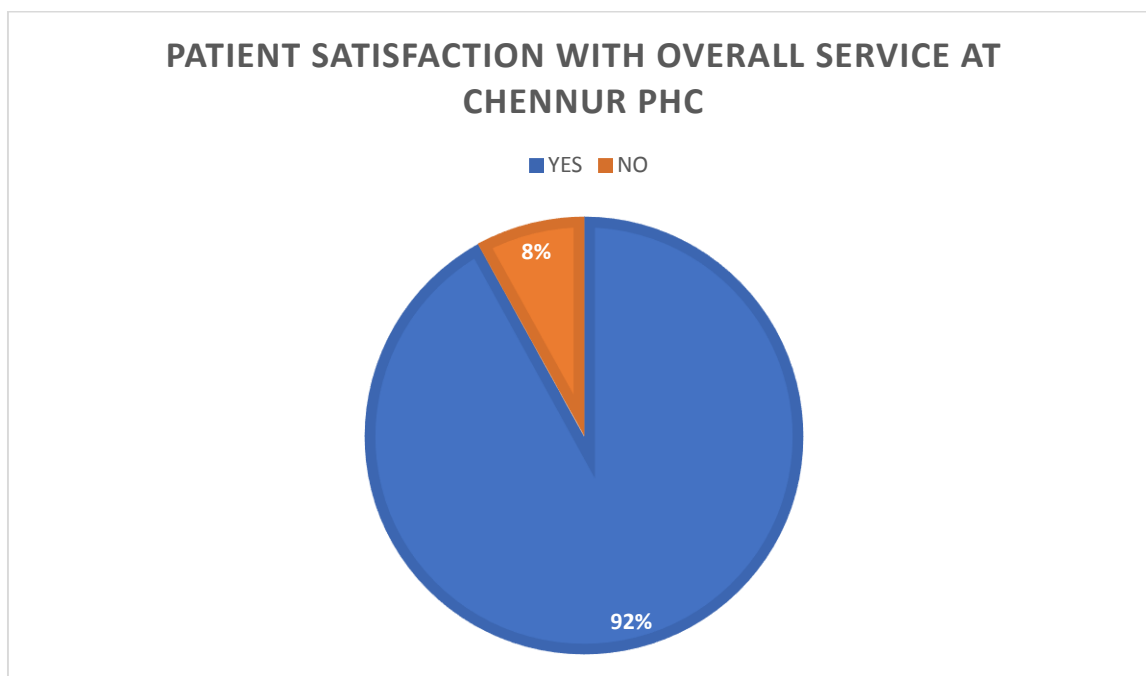
Source: Primary data

The data indicates that only 10% of the patients at the Chennur Village PHC are referred to private medical shops for their medications, while a significant majority of 90% of patients receive their medications directly from the PHC.

Table 5: Analysis of Patient Satisfaction with Overall Service at Chennur Village Primary Health Centre

S.No	Primary Health Centre	YES	NO
1	Chennur	44 (92%)	06 (08%)

Source: Primary data



Source: Primary data

The data reveals that 92% of the respondents are satisfied with the overall services provided by the Chennur Village PHC, while 8% of the respondents expressed dissatisfaction.

1. Population and Service Utilization

The Chennur Village PHC caters to a population of 36,825 across 80 villages. On average, the PHC sees about 80 patients daily, offering services such as outpatient consultations, maternal and child healthcare, immunizations, and minor surgical procedures.

2. Health Outcomes

The analysis of patient records indicated a significant reduction in the incidence of communicable diseases, improved maternal and child health indicators, and increased immunization coverage. However, there were challenges related to the management of non-communicable diseases (NCDs), indicating a need for better screening and treatment protocols.

3. Infrastructure and Resources

The PHC is equipped with essential medical infrastructure, including a 10-bed inpatient facility, a laboratory, a pharmacy, and basic diagnostic tools. However, there are gaps in resource allocation, particularly in the availability of advanced diagnostic equipment and sufficient medical supplies.

4. Staff and Training

The PHC has a dedicated team comprising two medical officers, three staff nurses, one lab technician, one pharmacist, and support staff. Despite their commitment, the staff expressed the need for regular training programs to stay updated with the latest medical practices and protocols.

5. Community Perception and Engagement

Interviews with community members revealed a generally positive perception of the PHC's services. However, issues such as long waiting times, occasional medicine shortages, and limited health education initiatives were highlighted as areas for improvement.

IV. Discussion

The Chennur Village PHC plays a crucial role in providing primary healthcare services to a large rural population. The improvements in communicable disease management and maternal and child health outcomes underscore the PHC's positive impact. However, addressing non-communicable diseases, enhancing resource allocation, and providing continuous staff training are essential steps to further improve healthcare outcomes.

V. Recommendations

- **Enhanced Resource Allocation:** Ensure a steady supply of medical supplies and advanced diagnostic tools to improve service delivery.
- **Regular Training Programs:** Implement continuous professional development programs for healthcare staff to update their skills and knowledge.
- **Strengthening Community Engagement:** Increase health education initiatives and community outreach programs to raise awareness and encourage preventive health practices.
- **Improving Infrastructure:** Upgrade the existing infrastructure to accommodate the growing patient load and enhance patient comfort and safety.
- **Integrating Technology:** Leverage telemedicine and digital health tools to extend healthcare services to remote and underserved areas.

VI. Conclusion

The Chennur Village Primary Health Centre (PHC) has demonstrated commendable progress in enhancing healthcare outcomes and addressing community health needs. By identifying and tackling existing challenges, the PHC has paved the way for improved service delivery and better health outcomes among its rural population.

Through robust infrastructure development, including road connectivity, sanitation facilities, and adequate water supply, the PHC has laid a foundation for accessible and efficient healthcare services. The availability of essential medicines and reliable diagnostic facilities further strengthens its capacity to deliver comprehensive care to the community.

To sustain and build upon these achievements, continuous assessment and adaptation are crucial. Monitoring patient referrals to private medical shops and ensuring consistent availability of prescribed medicines are essential steps in enhancing patient satisfaction and trust in the PHC. Additionally, maintaining high standards in service delivery, including privacy in consultation rooms and a comfortable waiting hall, reinforces the PHC's commitment to patient-centric care.

Looking forward, ongoing engagement with community health initiatives and participation in public health programs will be instrumental in addressing emerging health challenges and promoting preventive healthcare practices. By integrating feedback from patients and stakeholders, the PHC can tailor its services to meet evolving healthcare needs effectively.

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