

मुख्यालय/HEADQUARTER कर्मचारी राज्य बीमा निगम (श्रम एवं रोजगार मंत्रालय भारत सरकार) EMPLOYEES' STATE INSURANCE CORPORATION (Ministry of Labour & Employment, Govt. of India)



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Date: 24-06-2024

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No. U-16012/160/2023 Med-II/III (e-300133)

To,

All Principal
Secretary /
Additional Chief
Secretary / Secretary
Health and family

Secretary / Secretary
Health and family
Welfare Department,
State Government
(North East States)

The Medical
Commissioner /
Insurance
Commissioner
(North East Zone)

ESI Corporation

All **DIMS**ESI Scheme
State Government
(North East States)

The **Regional Director**ESI Corporation
Regional Offices
Assam, West Bengal

Subject: Expansion of ESIC Medical Services and Infrastructures in North East Region and Sikkim - reg.

Madam/Sir,

The ESI Corporation it its 193rd Meeting held on 10.02.2024 has approved the expansion of ESIC Medical Services and Infrasructure in North East Region and Sikkim as follows:

1. Two Doctor Dispensary:

The ESI Corporation during its 155th meeting held on 18.01.2012 has approved the relaxation of norms for North East State & other hilly areas of the country for establishing of 'one doctor' dispensary with a minimum IP population of 1000 and '100 bedded hospitals' with minimum 15000 IP population. Further, the ESI Corporation in its 167th meeting held on 18.12.2015 had approved in-principle for upgradation of ESI dispensaries into 30 bedded ESI hospital. However, the Corporation in its 181stmeeting held on 13.02.2020 has mandated that 'one doctor' dispensary will be discontinued as 'one doctor' dispensary has not been able to cater to the primary care medical needs of the IPs and beneficiaries.

In view of the low population density of the Northeast States including Sikkim, the minimum requirement of 2000 IPs for establishing two doctor dispensaries, and minimum requirement of 15000 IPs in the catchment area will not be feasible. The existing norms for setting up of one doctor dispensary in North East States is 1000 IPs whereas in the ESI Corporation in its 181^{st} meeting held on 13.02.2020 has given approval for discontinuation of ESIC norms for setting up of one doctor dispensary and decided that no dispensary should have less than two doctors except DCBOs. In North East, the criteria for setting up of two doctor dispensary with 2000 IPs is not feasible due to sparse population, hence till date majority of the dispensaries are setup as one doctor dispensary.

Hence, it is proposed that all one doctor dispensary may be upgraded to two doctor dispensary with same minimum criteria of 1000 IPs. This will also enable the dispensary to be designated as hub dispensary which can provide medical facilities to surrounding areas within reasonable commuting time (including medical services through mobile van). In areas where

there are no alternative, primary care services may be provided through IMP and tie-up arrangement with PMJAY empaneled private hospitals. The posting of the second doctor may be done on requirement basis after assessing the consolidated requirement of the surrounding districts (Spoke districts). Further, the data of patient foot fall in the existing dispensaries should first be examined and options of mobile van dispensary, telemedicine and mIMP may be explored before implementation of the proposal.

2. Relaxation of Norms for Catchment Area (Medical Infrastructure):

It is seen that the IP population in North Eastern States is very sparse and the IP population in the Northeast Districts are much below even the approved norms. The catchment area may be increased or kept fluid in order to enable clubbing of 2-3 or more districts in one catchment area, wherever the time taken for commuting to the Dispensary (HUB) from the adjoining district (SPOKE) is upto 3 hours/upto 100 kms. In such an arrangement, it may also be required that one of the doctors from the HUB dispensary would need to visit the other adjoining districts (SPOKE) at regular intervals and provide mobile medical services where the medical infrastructure is poor. This requires to be supplemented by other alternative tie-up where available.

In view of above, Medical Commissioner & Insurance Commissioner (Zonal Office - North East Zone), All DIMS (North East Zone), Regional Directors are requested to initiate action accordingly.

This issues with the approval of Competent Authority.

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Regards,

(Dr. Manoj Kumar)

OSD, Medical Services