

**Government of West Bengal
Department of Health and Family Welfare
MS Branch, PPP Cell
Swasthya Bhavan, GN-29, Sector-V,
Salt Lake City, Kolkata – 700091**

No. HF/PPP/247/2008/68

Dated: 13th February, 2012

**From: OSD and EO Deputy Secretary,
MS Branch**

**To: Chief Medical Officer of Health, All Districts
and
Deputy CMOH-I, All Districts**

**Subject: Proceedings of the State Level Consultative Meet on Public Private
Partnership held at Swasthya Bhavan on 3rd December 2011**

Sir,

With reference to the above subject, please find enclosed the proceedings (Decision Taken Note) from the Principal Secretary, Department of Health and Family Welfare for your perusal.

Yours faithfully,


[OSD and EO Deputy Secretary]

Enclosed: As Above

Public Private Partnership – State level Consultative Meet on 3rd December, 2011

Venue: Swasthya Bhavan Auditorium, Department of Health & Family Welfare

Participants: List Enclosed

Issue: An interactive meet with the Private Sector Partners and the District and State level government officials on Diagnostic Pathological Labs established in the BPHCs & RHs.

Decision taken:

- Overall, PPP is state wide mandate and private partners are welcome. In the coming days they are sure to increase in number in the state.
- To ensure viable business opportunity Private Partner(PP), all the Medical Officers would have to refer all diagnostic cases to PP appointed under their jurisdiction.
- The concerned hospital/facility would provide adequate space, water etc as provided in the Scheme. If no such place exists then space would have to be created/built close to the main hospital building for easy access by the patients. Infrastructure related issues to be attended and solved at the district level by CMOH on priority basis.
- The Private Partner would apply for the electric meter from WBSEB directly after procuring NOC from the hospital authority. Rent/user-charge for the same should be borne by the PP. The government partner is required to provide electric connection nearest to the room/space allotted to PP.
- The concerned hospital/facility would give the possession certificate to PP.
- All mandatory tests for pregnant mothers & neonates/infants would be referred to the facilities run by PP and payment Would be made out of JSSK fund by the Hospital authority irrespective of the APL/BPL status of the patients.
- In future, RSBY smart-cards may be treated as a major identity marker for the BPL.
- The district health authorities were asked to gear up RSBY related initiatives to provide insurance coverage to the BPL population.
- A calendar would have to be fixed for quarterly review meetings with Private Partners at district level and half-yearly review at the state headquarters.
- Proper signage, notices, sign boards showing rates for different tests (as done in Bankura Sammilani Medical College & Hospital) were insisted upon for awareness and help of the patient parties.
- Note on PPP has to be circulated in the Rogi Kalyan Samitis (and their Chairmen) for opinion building, advocacy and awareness generation.
- Formal instruction regarding referral norms would have to be reiterated.

Finally proposals were sought from the districts for initiating PPP for diagnostic facilities/CT Scan 24x7 at PHCs, Sub-Divisional Hospitals and District Hospitals. For the purpose the Deputy CMOHs present were asked to submit reports on facilities that have provision (space related) and potential for such establishments. Private Partners in these areas would be sought through open bidding.


Principal Secretary