શ્રી શક્તિસિંહ ગોહિલનું કાર્યાલય રાષ્ટ્રીય પ્રવક્તા, એ.આઈ.સી.સી અને ધારાસભ્ય, અબડાસા

http://www.shaktisinhgohil.com

અખબારી યાદી

તા. 39/90/२०૧૭

સિવિલ હોસ્પિટલ, અમદાવાદ ખાતે છેલ્લા થોડા જ કલાકોમાં અનેક બાળકોના મૃત્યુ થયા છે તે સરકારની ગુન્હાહિત બેદરકારીની કારણે થયા છે. કોંગ્રેસના રાષ્ટ્રીય પ્રવક્તા અને ધારાસભ્ય શક્તિસિંહ ગોહિલે મહાલેખાકારના ઇન્સ્પેકશનનાં રીપોર્ટની નકલ પ્રેસ અને મીડિયા સમક્ષ રજુ કરીને જણાવ્યું હતું કે, ઇન્સ્પેકશનના રીપોર્ટમાં સ્પષ્ટ રીતે જણાવાયું હતું કે, અમદાવાદ સિવિલ હોસ્પીટલના ઇન્સ્પેકશન રીપોર્ટમાં સ્પષ્ટ રીતે નોંધાયું છે કે બાળકોના આરોગ્ય માટે અત્યંત જરૂરી વ્યવસ્થા સિવિલ હોસ્પીટલમાં નથી. સિવિલના નિઓ નેટલ આઇસીયુ વોર્ડ (તાજા જન્મેલા બાળકોનો વોર્ડ) ૨૪ કલાક બાળકોની સંભાળ જરૂરી હોય છે. તાજું જન્મેલ બાળક ઉલ્ટી કરે, તેને તાવ આવે કે તકલીફ થાય તો તે ફરિયાદ કરી શકતું નથી માટે ૨૪ કલાક મોનેટરીગનાં CCTV લગાડવા અને અદ્યતન ટેકનોલોજીની સહાય લેવા તા:૧૮/૧૨/૨૦૧૩ તથા તા: ૧૨/૦૬/૨૦૧૫ નાં રોજ જણાવેલ હોવા છતાં કોઈ જ વ્યવસ્થા કરવામાં આવેલ નથી. હાલમાં પ્રસુતિ વોર્ડ તથા તાજા જન્મેલા બાળકોના વોર્ડ CCTV વગરના જ છે જેની સાબિતી રૂપે બંને વોર્ડની વિડીયો પણ પ્રેસ અને મીડીયાને દર્શાવવામાં આવી હતી.

મહાલેખાકારના ઈન્સ્પેકશન રીપોર્ટમાં સ્પષ્ટ લખાયું છે કે, ગંભીર પરિસ્થિતિનાં દર્દીઓ માટેના આઈસીયુ/ ટ્રોમા કેર સેન્ટર ખુબ જ સંવેદનશીલ છે. બરાબર ઉષ્ણતામાન રહેવું જોઈએ અને ચેપ નાં લાગે તે માટે પુરતી વ્યવસ્થા જોઈએ . પરંતુ અમદાવાદની સિવિલ હોસ્પીટલના ટ્રોમાં સેન્ટરમાં એ.સી. વારંવાર રિપેરમાં રહે છે. ડસ્ટ ફિલ્ટર્સ/એર ફિલ્ટર્સ ખુબ જ જરૂરી હોય તે ટ્રોમા સેન્ટરમાં આપવામાં આવેલ જ નથી.

ઇન્સ્પેકશન રીપોર્ટમાં નોંધેલ છે કે, યકાસણી દરમ્યાન માલુમ પડ્યું કે સરકારની ગ્રાન્ટ આવવા છતાં નાના બાળકોને જે પ્રવાહી ખોરાક આપવો જોઈએ તે અમદાવાદ સિવિલમાં આપવામાં આવતો જ નથી. નાણા બાળકોને ફળનો જ્યુસ, સૂપ, દૂધ પૌવા વિગેરેમાંથી કંઇ જ અપાતું નથી. ઇન્સ્પેકશન દરમ્યાન માલુમ પડેલ કે હોસ્પિટલમાં સફાઈ બરાબર થતી નથી. એમ્બ્યુલન્સ માટે લાખો રૂપિયાનો ખર્ચ કરીને આપવામાં રાખવામાં આવેલ છે પરંતુ એમ્બ્યુલન્સમાં લાઈફ સપોર્ટ સીસ્ટમ જ નાખવામાં નથી આવી.

સગર્ભા મહિલાની તપાસ કરીને ત્રીજા મહિનાથી જ સરકારે તેમની કાળજી લેવાની હોય છે. સગર્ભા મહિલાને પુરતું પોષણ અને આયર્ન આપવાનું હોય છે. પરંતુ સરકાર આ કામની ઉપેક્ષા કરે છે તેથી કૃપોષણ વાળા બાળકો જન્મે છે. અને મૃત્યુને ભેટે છે. સગર્ભા મહિલાની તપાસ અને દેખભાળ આશા વર્કર તથા આંગણવાડીની બહેનોએ કરવાની હોય છે પરંતુ ગુજરાતમાં ભાજપની સરકાર આશા વર્કર અને આંગણવાડી કાર્યકરનું શોષણ કરે છે. તેઓને પુરતો પગાર નથી અને કાયમી સરકારી કર્મચારી તરીકે તેમને ગણવામાં આવતા નથી. એટલું જ નહીં આ બહેનોને તેમનું કામ કરવા દેવાના બદલે સરકારના પ્રસિદ્ધિના તાયફાઓમાં જ રોકી રાખવામાં આવે છે.

ASKING C



संख्या-ओएडी-3/सीट नं-2/US-14/2015-16/पी-आर-14/387/388/389 कार्यालय महालेखाकार (जनरल एवं सोशल सेक्टरऑडिट,) गुजरात, एनेक्सी भवन, रेसकोर्स रोड, पोस्ट बेग नंबर- 27, राजकोट 360001. दिनांक-: 12.6.2015

सेवामे/ To:-

कमिश्वर,

हैल्थ, मेडिकल सर्विसेस एंड मेडिकल एज्यूकेशन (मेडिकल सेक्शन), ब्लॉक नं 5, डा. जीवराज मेहता भवन, पुराना सचिवालय, गांधीनगर

विषय:- कार्यालय मेंबर सेक्रेटरी, रोगी कल्याण समिति, सिविल हॉस्पिटल, अहमदाबाद के लेखों का 2010-11 से 2012-13 तक की अविधि का निरीक्षण प्रतिवेदन ।

महोदय/ Sir.

उपरोक्त लेखो का 2010-11 से 2012-13 की अवधि का स्थानीय लेखापरीक्षा दिनांक 18-05-2015 से 26-05-2015 के बीच किया गया था। इसका निरीक्षण प्रतिवेदन (Inspection Report) इसके साथ भेज रहा हूँ।

इस निरीक्षण प्रतिवेदन का प्रत्युतर एक माह मे देने की व्यवस्था करे ।

भवदीय,

प्रतिलिपि प्रेषित / Copy to:

 मेंबर सेक्रेटरी, रोगी कल्याण समिति, सेक्शन D-1, सिविल हॉस्पिटल,

अहमदाबाद – 16

डायरेक्टरेट ऑफ मेडिकल एज्यूकेशन (रिसर्च)
अप फ्लोर, ब्लॉक नं 4, डा. जीवराज मेहता मृत्

गांधीनगर

र्वा परीक्षा अधिकारी/ओएडी -III.

क्रिया परीक्षा अधिकारी

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The lands in small pocket areas in the campus and also floor spaces in buildings was allotted by MS on lease to 22 parties for Zerox /food /ATM etc prior to 2010. In addition thereto land in the campus area and on each floor in hospital building for tea, coffee/food etc was allotted to 21 parties during 5/2012 to 1/2013 at the premium of Rs 5000 pm/Rs 8000 pm/Rs 10000 pm as decided in meeting of Executive Committee of Rogi Kalyan Samiti held on 13.1.2010. In this connection, following irregularities were observed:

- 1. The CH was admitting around 3000 patients everyday and thus there was already a large customer base for lease holders. However, market value for lease was not ascertained and premium of Rs 5000/8000/10000 pm was fixed.
- 2. Tenders were not invited and lease was given on basis of application. There was no written policy for giving of lease. By not inviting tenders, CH had to face avoidable legal complications as a PIL was filed against allotment of lease by a private party.
- 3. There was no lease agreement executed with the lease holders except in case of Axis bank.
- 4. Electricity was supplied to lease holders from LT connection No 175348. Lease holders were not asked to obtain a separate meter from Torrent Power Limited and the electricity bill was paid by Civil Hospital. CH was recovering electricity charges @Rs 3.90 per unit from lease holders since 2003 a actual rate of energy charges had been revised a number of times since 2003 and during 2011-12, 2012-13 and 2013-14 was Rs 4.80 per unit (for first 50 units Rs 2.95 per unit, next 150 units Rs 3.25 per unit and above 250 units Rs 4.30 per unit). Also, FPPPA charges recovered by TPL were not later recovered from the lease holders. Thus Civil Hospital was incurring loss on electricity charges due to shortfall in amount recovered from lease holders and actual amount paid to TPL. Loss only in test checked 14 cases (worked out to Rs 373255) as detailed in Annexure IV enclosed.

On being pointed out, MS that the Civil Hospital planned to invite fresh tenders after ascertaining market value and regarding loss due to shortfall in recovery of electricity charges, necessary action would be taken after obtaining revised rates from TPL.

Further reply is awaited.

Para 5: Ambulance lying without life supporting system

Government of Gujarat, Health a Family Welfare Department, vide Resolution No. MCG-2012-NB-4 dated 14.5.2011, accorded administrative approval of Rs 125.76 crore for purchase of modern equipments, furniture etc for Institutes under Medical Education which included interalia, purchase of 12 number of ICU on wheels and six conveyance vehicles Innova at Rs 2.40 crore for six medical colleges as Rapid Response Team for visiting affected area during various epidemic outbreaks.

The Commissioner of Health, Medical Services and Medical Education, Gandhinagar vide his letter dated: 07-10-2012 instructed Medical Superintendent(MS), Civil Hospital, Ahmedabad to purchase the 12 ambulance and 7 vehicles for rapid response team for six medical hospitals attached with Medical Education under condition that these vehicles would be provided life support system. After conversion of traveler ambulance, these would be dispatched to concerned education hospital. MS, Civil Hospital, Ahmedabad purchased 6 Innova vehicles costing Rs. 71.15 lakh on dated: 18-12-12, 6 ambulances costing Rs. 48.85

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lakh on dated: 18-12-12 and 6 ambulances (costing Rs. 49.04 lakh) on dated: 30-03-13. 6 traveler ambulance and 6 innova vehicles were handed over to concerned Education Hospitals. Balance 6 traveler ambulances were lying with MS, Civil Hospital.

Scrutiny of records revealed that these six ambulances had not been loaded with life support system till date (November 2013). MS, Civil Hospital had invited the tender for installing of life support systems. The approval of Commissioner of Health was awaited even after a lapse of 7 months. The work order was yet to be issued.

Thus, the purpose for which the project was taken up could not be achieved.

The Commissioner, Health and Medical Services and Medical Education may offer specific remarks in view of audit objection.

Further compliance is awaited.

Para 6: Hospital Management

6.1 No system for Training to Medical/ Para medical staff and Capacity Building

As per the Indian Public Health Standards (IPHS) guidelines, training of all cadres of workers at periodic intervals is an essential component for the District Hospitals. Both medical and paramedical staff should undergo Continuing Medical Education (CME) at regular intervals.

However, there was no system for providing training to medical and para medical staff at distinguished Hospitals in India or abroad. No medical /para medical staff was sent for training during the last three years.

6.2 No Close circuit TV camera for Neo Natal ICU/ward.

Neo Natal patients needed extra care 24 hours and they cannot come forward/complain on their own in case of vomit, rise of temperature, hunger/thirst etc. Close monitoring over Neo Natal patients through technology is very necessary. Also, CCTV camera helps in identifying issues of changing babies willfully or mistakenly.

Civil Hospital, Ahmedabad is having one Neo Natal ICU Ward. During audit it was noticed that no CCTV cameras were installed and for close monitoring for 24 hours.

After this was pointed out, M.S. accepted observation and promised to take remedial action under intimation to audit.

6.3 Air conditioners not working and Dust filters not provided for critical patients at Trauma Care Centers

Critical patients admitted in ICU/Trauma CARE Centers are highly sensitive to temperature, infection etc and need specialized services. As per the IPHS guidelines for District Hospitals, ICU unit should have specialized services such as piped suction, medical gases, uninterrupted electricity supply, heating, air conditioning etc. Civil Hespital has one Trauma Care Center.

केचा परीक्षा अधिवारी

During scrutiny of PIU register of ICU of Trauma Care Center, it was noticed that Central AC system and individual ACs were out of repairs frequently and were not working properly as cooling was practically Nil. Also, dust filters/air filters were not provided at ICU/TCC.

On being pointed out, M.S. did not offer his remarks and stated that cooling would be arranged in new I.C.U.S.

6.4 In sufficient cooling /warming facility for ward patients

For Indoor Patients particularly pediatric or Gynecology patients, all category of post operated patients etc needs comfortable cooling in the summer and warm temperature in the winter season.

During test checker of records, it was noticed that fans were grossly inadequate and warmer were not provided at all.

In Gynecology OT, Central AC system was not working as wiring has been cut.

Water heaters were not provided particularly to Gynecology, pediatric wards. Also warmer was not provided in Obstetrics ward.

After this was pointed out, MS accepted all the three observations and promised to take up action.

Para 6.5. No Linen items for poor patients

Civil Hospital is admitting around 3000 indoor patients most of which belong to extremely poor class. Every year, MS, purchased linen items including white bleached cotton(around 8000 meters), towels(500 no.s), napkins(1000 no.s). However, there was no provision/rule for supplying of towels, napkins, soaps to the poor and needy patients and these items were not supplied to them. Supply of these items would help CH not only to enhance quality of medical service but also helps CH to control spreading of infection.

On being pointed out by audit, Medical Superintendent replied that immediate action would be taken under intimation to audit.

Further compliance is awaited

Para 6.6. No liquid diet for pediatric patients

Civil Hospital is admitting around 3000 indoor patients most of which are belong to extremely poor class. As a part of their plan for providing medical and supporting facilities to the patients, Civil Hospital is providing morning breakfast to the patients. The items served include Tea (one cup), bread (55 mg), Fruits (as per the advice of the doctor), Milk (200ml), and eggs. However, there was no provision for liquid items for pediatric patients and no liquid food like fruit juice, crushed pauva with milk, soups was supplied to these patients.

On being pointed out by audit, Medical Superintendent agreed to observation and replied that immediate action would be taken under intimation to audit.

Further compliance is awaited

विका परीक्षा अधिकारी

પ્રતિ, તંત્રીશ્રી,

સદરહુ પ્રેસનોટ આપના પ્રતિષ્ઠિત અખબારમાં વિના મૂલ્ચે પ્રસિધ્ધ કરવા માન. શક્તિસિંહ ગોહિલે વિનંતી કરેલ છે.

(સુનિલ રામી) અંગત મદદનીશ