

**Office of Shaktisinh Gohil**  
**National Spokesperson, AICC & MLA, Abdasa**

<http://www.shaktisinhgohil.com>

**Press Note**

**Dt:- 31/10/2017**

National spokesperson of Congress Shaktisinh Gohil today said that death of infants in the Civil Hospital of Ahmedabad was due to criminal negligence of the government. Presenting before media relevant facts and figures from the report of CAG, he said that report has made it clear that civil hospital of Ahmedabad does not have basic facility for the health of children.

He said that 24 hour child care was needed in the Neo Natal ICU ward. A child cannot complaint his problems like fever and vomiting. In view of this through letters of 18/12/2013 and 12/06/2015 it was suggested that the ward must have high tech facility like 24 hour CCTV. But no such arrangements have been made. He showed the video of the labour ward and neo natal ward to the media in support of his claim.

In its report CAG has noted, he said, ICU and trauma care centre were very sensitive for the needs of serious patients. There should be right temperature and measures to ensure that infection does not spread. But the air conditioner of trauma centre is in repair most of the time and there are no dust /air filters which are very important.

He said that the inspection report has noted that though grant is available children are not provided fruit juice or any other type of liquid diet. It further notes that cleanliness is not maintained. It has ambulance but it does not have life support system. Government has to take care of pregnant woman from the third month. She is to be provided nutritional diet and iron. But government ignores this and as a result children become victim of malnutrition and die.

Gohil pointed out that the care of pregnant women is to be taken by Asha workers and Anganwadi workers. But BJP government in Gujarat is exploiting these workers. They are paid inadequate wages and are not regularized in their job. Instead of their main job they are engaged in publicity gimmicks of the government, he said.



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

सेवामे/ To:-

कमिश्नर,  
हेल्थ, मेडिकल सर्विसेस एंड मेडिकल एज्युकेशन (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 अवधि का निरीक्षण प्रतिवेदन ।

महोदय/ Sir.

उपरोक्त लेखों 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 प्रत्युत्तर एक माह में देने की व्यवस्था करे ।

भवदीय,

प्रतिलिपि प्रेषित / Copy to:

1. मेंबर सेक्रेटरी, रोगी कल्याण समिति,  
सेक्शन D-1, सिविल हॉस्पिटल,  
अहमदाबाद - 16

2. डायरेक्टर ऑफ मेडिकल एज्युकेशन (रिसर्च)  
3<sup>rd</sup> फ्लोर, ब्लॉक नं 4, डा. जीवराज मेहता भवन  
गांधीनगर

दीपक  
12/06/15  
लेखा परीक्षा अधिकारी/ओएडी -III.

दीपक  
12/06/15  
लेखा परीक्षा अधिकारी/ओएडी -III.

DKmishra  
12/06/15  
लेखा परीक्षा अधिकारी

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 4.80 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. Los; 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

*D. G. Mishra*  
निष्ठा परीक्षा अधिकारी

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 Hospital has one Trauma Care Center.

  
अनिल कुमार अधिकारी

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 check 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.

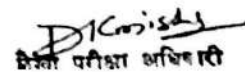
Further compliance is awaited

#### **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.

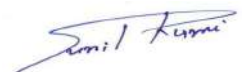
On being pointed out by audit, Medical Superintendent agreed to observation and replied that immediate action would be taken under intimation to audit.

Further compliance is awaited



To, The Editor,

Request to kindly publish this press note in your esteemed newspaper.



(Sunil Rami)  
Personal Assistant