



ई.एस.आई. समाचार ESI Samachar

NEWS JOURNAL OF ESI CORPORATION

December, 2019

Promoting the Spirit of Sports



New Initiatives launched

- Medical Care in newly implemented areas : Partnership with PMJAY
- ESI benefits at reduced rates of contribution
- Optimal utilisation of Health Infrastructure
- Modified IMP and Modified EUD Schemes



December, 2019

Patrons:

Raj Kumar, IAS
Director General

Sandhya Shukla, IA & AS
Financial Commissioner

P.B. Mani
Addl. Commissioner (PR)

Editor:
Pranava Kumar
Deputy Director (PR)

Assistant Editor:
Pramod Kumar Singh

Production & Circulation

Mukesh Kumar
Archana Kishore
Gyan Shekhar
Lata Shah
Nishant Singh
Rakesh Sharma
Sumit

Editorial & Circulation office:

Employees' State Insurance Corporation
Room no.226, Panchdeeeep Bhawan,
C.I.G. Marg, New Delhi
Tel: 011-23218789,23231835
E-mail: pranava.kumar@esic.nic.in

Printed and Published by:

Public Relations Branch, ESIC Hqrs. Office
on behalf of Director General
Employees' State Insurance Corporation
New Delhi-110002 INDIA
Websites:www.esic.nic.in, www.esic.in
www.esichospitals.gov.in

ESI Samachar is a quarterly news journal of ESI Corporation published with the sole objective of enhancing public awareness about the multi-faced social security program administered by the Corporation. The content of the journal is for awareness only and cannot be referred as a valid document for any purpose, official or legal. Reader's views and opinions for any improvement are welcome. For a free copy please write to our circulation office.

Designed & Printed by:
Goldmine Advertising Limited
Tel : 011-23247276
Email: delhi@goldminelt.com

Editorial



The Editorial Board wishes all a happy reading of ESI Samachar, December, 2019 issue.

The cover of the Samachar depicts the photograph of Arujuna Award presented to Shri Pramod Bhagat, an international level para-shuttler and employee of ESIC by the Hon'ble President of India.

An interview of Director General given to Mail Today on the sidelines of the 5th Edition of Health Care Summit is covered in verbatim. Other articles / write-ups featured are Inaugural/ foundation laying ceremony of Hospitals,

Standing Committee Meetings, 178th meeting of ESIC, report on Senior Officers' Meeting (SOM), various functions organised by Headquarters / Regional/ Sub-Regional Offices, write-up on selected ESI Hospitals and Regional Offices etc. Above all, ESIC is remembering Babu by publishing excerpts of the discussion held in a Workshop on "Gandhian thought and Social Security". Besides these, new initiatives/achievements of ESIC, medical and general articles are also featured.

The PR Division of Hqrs. is constantly striving to bridge the information gap with the Stakeholders of ESIC by providing relevant information in the Samachar and the endeavour of Editorial Board is to make it more informative by covering write-ups from across all ESIC Establishments. Your suggestion and feedback is also invited for improving the content to make the Samachar more informative and pleasant for reading.

Pranava Kumar
Editor

Contents

S.N.	Contents	Page No.
1	Director General's Message	1
2	178 th Meeting of ESIC	2
3	Standing Committee Meeting of ESIC	3-4
4	Three day conference at ESIC Headquarters.	5-9
5	Senior Officers' Meeting (SOM)	10-11
6	Path Breaking Initiatives	12-13
7	Foundation Stone Laying and Inauguration	14-15
8	Agreement signed with SBI for payments to ESIC Beneficiaries	15
9	3 rd Graduation Ceremony (2013 & 2014 batch)	16
10	Inauguration of IVF & Fertility Centre at ESIC PGIMSR College & Hospital, New Delhi	17
11	ESIC - Vision to achieve Universal Social Security Goals by 2030	18-19
12	Region in Focus - Odisha	20-21
13	Gandhian thought and Social Security	22-23
14	Hospitals in Focus	24-28
15	Case summary - ESIC Medical College, K.K. Nagar, Chennai	29-30
16	"Swachhata hi Sewa" Campaign	31
17	Hindi Divas and Rajbhasha	32-34
18	National Workshop on CPGRAMS / ESI Scheme Implementation	35
19	Constitution Day / Vigilance Awareness Week	36
20	Experience of an ex-ESICian / Appreciation letter	37
21	News in brief	38-41
22	Salient Achievement 2018-2019 / ESIC at a glance 2018-2019	42
23	Conferences	43-44

Director General's Message

ESIC is marching ahead with the motto of providing quality and hassle free service to the insured persons and their family members. Now, ESI Scheme has been made more financially affordable to the employees and employers by reducing monthly contribution of the employer from 4.75 % to 3.25 % and employee from 1.75 % to 0.75 % to ESI Scheme with effect from 01.07.2019. This move has benefitted 3.6 crore ESI Insured Persons and 12.85 lakh employers. I assure all stakeholders that with the reduction in monthly contribution there will be no reduction in the benefits being provided under ESI Scheme. Besides financial relief to the Insured Persons, it will also improve the viability of the establishments. I am sure that the reduction of contribution in ESI Scheme will attract more and more organized sector workers to the fold of ESIC.




As a part of boosting the health care infrastructure in Telangana, Hon'ble Union Minister of State (Independent Charge) for Labour & Employment laid foundation stone of new OPD Block and dedicated ESIC Medical College & Hospital, Sanathnagar, Hyderabad to the nation on 21.08.2019. On 30.10.2019, Hon'ble Union Minister of State (Independent Charge) for Labour & Employment inaugurated the ESIC Hospital at Rudrapur in Uttarakhand. For making ease of payment, ESIC has signed a MoA with State Bank of India for providing e-payment services directly to the bank account of the ESIC beneficiaries and payees without any manual intervention as an integrated and automated process. As a part of improving medical care, various decisions have been taken which includes providing of cashless treatment up to a limit of ₹ 5 lakh per annum under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (PMJAY) to the IPs of newly implemented 102 designated districts ; setting-up of 100 bedded Hospital at Srinagar (J&K U.T.) and 30 bedded Hospital at Leh (U.T.) ; extending medical care services to non-IPs through underutilized ESIC Hospitals and DCBOs; strengthening of m-IMP and M-EUD Schemes; opening of DCBOs in every district of the country etc. For further improving the service delivery mechanism, deliberations were held on various points in the 126th Standing Committee Meeting of ESIC held on 04.10.2019.

As per vision 2022, all efforts are being made to cover all districts of the country under ESI Scheme. With effect from 01.09.2019, the ESI Act has come into force in new Districts / areas of Bihar, West Bengal, Tamil Nadu, Assam, Punjab and Nagaland. This will further increase the employee and employer base under ESI Scheme and we have to take all measures to implement ESI Scheme in letter and spirit in the new areas.

ESIC is promoting the spirit of sports and in this direction, 135 meritorious sports persons were recruited during 2016. ESIC is proud of Shri Pramod Bhagat, a para-shuttler and employee of ESIC posted in ESIC Regional Office, Bhubaneswar who was conferred Arjuna Award this year. I congratulate Shri Pramod Bhagat for this and also for winning Gold Medal in various international tournaments.

Let us all rededicate ourselves for working tirelessly to take ESIC to new heights of progress and earn the trust of the stakeholders, especially the employers and employees.


Raj Kumar, I.A.S.
Director General, ESIC



178th Meeting of ESIC

The 178th meeting of ESIC was held on 13.09.2019 under the Chairmanship of Shri Santosh Kumar Gangwar, Hon'ble Minister of State for Labour & Employment (Independent Charge), Government of India. In the meeting, some very important decisions were taken for improving the service delivery mechanism under ESI Scheme.

The other dignitaries participated in the meeting were Dr. Harak Singh Rawat, Hon'ble Minister for Forests & Wild Life, Environment & Solid Waste Disposal, Labour, Employment, Training, AYUSH, AYUSH Education, Govt. of Uttarakhand, Shri Heeralal Samariya, IAS, Secretary, Labour & Employment, Govt. of India, Shri Ram Kripal Yadav, Hon'ble MP, Ms. Dola Sen, Hon'ble MP, Shri John Barla, Hon'ble MP, Shri Raj Kumar, IAS, Director General, ESIC, Ms. Anuradha Prasad, Addl. Secretary, Labour & Employment, Govt. of India, Ms. Sandhya Shukla, Financial Commissioner, ESIC, Ms. Vibha Bhalla, Joint Secretary, Labour & Employment, Govt. of India and representatives of Employees and Employers and Hon'ble ESI Corporation Members, representatives of State Governments and ESIC.

Some of the important decisions taken in the meeting:

i) Insured Persons of ESIC from newly implemented area to get treatment under Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (PMJAY).

During last couple of years, the coverage and penetration of the ESI scheme has increased immensely. ESI Corporation has undertaken a massive exercise through multi-faceted approach for making provision of comprehensive medical care services either through State Government or directly by ESIC or through tie-up hospitals. In the meeting, approval has been accorded to provide cashless Secondary and Tertiary medical care services under Ayushman Bharat package rates to entitled ESI Beneficiaries in newly implemented area of 102 designated Districts through PMJAY empanelled hospitals in States where PMJAY has been adopted by the State Governments. Further, to avoid any hassle in smooth implementation of this initiative, ESI Beneficiaries will be dealt through PMJAY logistics/IT facilities for registration, billing etc. as is done for PMJAY beneficiaries, up to a maximum limit of ₹ 5 lakhs worth of medical expenditure, beyond which individual case will be channelled to ESIC for seeking approval for further expenditure on ESI Beneficiary. Similarly, PMJAY beneficiaries may get in-house medical treatment services as per Ayushman Bharat approved packages from underutilized ESI Hospitals while NHA will make payment to ESIC directly. Further, various State Government running ESIS Medical Scheme, shall also be requested to enrol ESIC Hospitals under Ayushman Bharat Scheme for providing medical services to PMJAY Beneficiaries, similar to ESIC Hospitals.

ii) ESIC to set-up 100 bedded Hospital at Srinagar (J&K U.T.) and 30 bedded Hospital at Leh (U.T.).

In principle approval was accorded for setting up of 100 bedded Hospital at Srinagar and 30 bedded Hospital at Leh.

iii) Opening up of Medical Services at underutilized Dispensary-cum-Branch Office (DCBO) to Non-IPs.

In principle decision was taken to open ESIC's underutilized Dispensary-cum-Branch Office (DCBO) pan-India to Non-IPs on nominal user charges basis on the same line of opening its underutilized hospitals.

iv) ESIC Hospitals at Sarojani Nagar (Lucknow) & Jajmau (Kanpur) opened for non-Insured Persons:

ESIC had earlier taken decision to allow Non-Insured Persons to avail medical services from its underutilized ESIC Hospitals, and thereafter ESIC Hospitals at Alwar (Rajasthan), Bihta (Bihar), Gulbarga (Karnataka), Bareilly and Varanasi (Uttar Pradesh) were opened for Non-Insured Persons as well. Now Non-Insured Persons can avail the medical services at a nominal charge of ₹ 10/- for consultation and at the rate of 25% of CHGS package rates for IPD at ESIC Hospitals situated at Sarojini Nagar (Lucknow) and Jajmau (Kanpur) Uttar Pradesh.

v) Cash reward of ₹ 5.00 Lakh announced by Hon'ble Minister of State (Independent Charge) for Labour & Employment, Govt. of India to Arjuna Awardee, ace para-shuttler Shri Pramod Bhagat, employee of ESIC.

In the meeting, the Hon'ble Minister announced a cash reward of ₹ 5.00 Lakh for ace para-shuttler Shri Pramod Bhagat. Shri Bhagat is an ESIC employee posted in Odisha region.

The report of Sub-Committee earlier formed to decide the methodology for enhancements in PDB/DB Rates was also accepted during the meeting. Besides above, around 40 other agenda/reporting items pertaining to improvement in services/benefits to Insured Persons and their beneficiaries and other administrative matters were deliberated upon and approved during the meeting.



Hon'ble LEM & Chairman, ESIC addressing the 178th Meeting of ESIC

Standing Committee Meeting of ESIC

215th Meeting held on 13.06.2019

The meeting chaired by Secretary, Ministry of Labour & Employment, Govt. of India and Chairman, Standing Committee of ESIC, Director General, ESIC, and officers from Ministry of Labour & Employment, Govt. of India, representatives of various state governments and senior officers of ESIC.

Director General, ESIC welcomed Chairman, ESIC Standing Committee and Secretary, Labour and Employment, Government of India and all other participants in the meeting. DG, ESIC apprised the Committee Members that the meeting has been mainly held for the purpose of approving unaudited Annual Account of ESIC for the year 2018-19. DG also informed that there are about 11 Agenda items and 17 Reporting Items for discussion in the meeting.



DG, ESIC welcoming the members of Standing Committee

The following decisions were taken in the meeting:

- The minutes of the 214th meeting of the Standing Committee was confirmed in the meeting.
- The Action Taken Report of the recommendation/decisions of the last meeting of the Standing Committee held on 29.03.2019 were accepted by the members of the Standing Committee.
- Financial Commissioner made a presentation on the salient features of Unaudited Annual Accounts of ESIC for the year 2018-19. During the discussion, Shri V.Radhakrishnan, Member pointed out that when ESIC has Model Hospitals, even then most of the patients are referred to tie-up hospitals because of non-availability of all necessary medical facilities. To this point, Chairman said that when ESIC has well equipped Hospitals in terms of manpower and equipment, then referral expenditure should be brought down. Shri Sanjay Bhatia, Member raised concern on increase in TDS amount pending with banks for refund. Financial Commissioner informed that TDS was deducted previously by few banks in spite of clear information that is not liable for deduction of TDS on income and further stated that the matter is being pursued with the banks and ESIC has received refund in some cases. After deliberations, the Standing Committee approved the unaudited Annual Accounts as duly recommended by the Budget & Accounts

Sub-Committee for submitting to C&AG.

- After deliberations, the Committee approved the proposal for integration with SBI for online system oriented e-payment facility for payment to beneficiaries, third parties and all other payees.
- The Committee approved the proposal as contained in the memoranda for obtaining Legal Entity Identifier (LEI) Code.
- The Committee approved the Agenda Item for floating tender for hiring more than one Portfolio Managers.
- The Committee approved the proposal for foreign training policy for ESIC Group 'A' Officers.
- The Committee approved the proposal for award of work to CPWD in respect of construction of 100 bedded ESI Hospital, Bahadurgarh, Haryana.

In addition to the above, 3 Supplementary Agenda and 17 Reporting Items were also discussed in detail. The Chairman thanked all the members for the active participation and discussions on all the issues. The meeting ended with vote of thanks to the Chair.

216th Meeting held on 04.10. 2019

Shri Heeralal Samariya, Secretary, Ministry of Labour & Employment, Govt. of India and Chairman, Standing Committee of ESIC chaired the 216th Standing Committee Meeting of ESIC on 04.10.2019 at Shram Shakti Bhawan, New Delhi. Many topics related to improvements in the service delivery mechanism of ESIC were deliberated upon and discussed during the Meeting.

The following points were discussed and approved:

- Confirmed the Minutes of the 215th meeting of Standing Committee held on 13.06.2019.
- After detailed deliberations and discussions by the Members, the Action Taken Report on the recommendations/ decisions of the Standing Committee Meeting of ESIC held on 13.06. 2019 was accepted by the members of Standing Committee.
- The Committee approved the proposal for construction of ESIC Dispensary, RDD Office (NZ) , SRO & Sub Store at Chalapuram, Kozhikode, Kerala.
- The Committee approved the construction of 30 bedded (expandable to 100 beds) ESI Hospital at Kala Amb, Himachal Pradesh.



DG, ESIC addressing the participants



- The proposal for special repair work for old ESI Hospital building, Vishakhapatnam was approved.
- Chairman of Standing Committee directed to take approval from Ministry of Labour & Employment to provide 2000 sq.m. of land in the ESIC Hospital campus at Vapi for construction of the office of EPFO.
- Regarding the Agenda Item on status report on ESI Hospital at Pandu Nagar, Kanpur and approval to allow remaining renovation work to be executed through NBCC based on original contract rates (DSR 2007) with escalation, Director General ESIC apprised the Committee that the scope of work has been curtailed earlier and now only renovation work is required to fully operationlise the hospital. Chairman, Standing Committee directed to ensure same day payment to sub-contractor whenever amount is paid to NBCC by ESIC and undertaking from NBCC should be taken in this regard. With the above condition, the Committee approved the proposal.
- With the directions given by the Chairman, Standing Committee, the Committee approved the proposal for construction of staff quarters at ESIC Nagar, DN Nagar, Andheri, Mumbai – regarding approval of assigning A & E work to M/s. UPRNN Ltd.
- After deliberations by Shri K.V. Shekhar Raju, Member, the

Committee approved the proposal for going ahead with setting up of a new 100 bedded ESI Hospital at Kakinada, Andhra Pradesh, as previously approved “ In Principle” by ESIC and construction after demolition of existing ESI Hospital building at Rajamahendravaram, Andhra Pradesh.

- The Committee approved the proposal for dispensing of medicine to OPD / Indoor patients visiting ESIC Hospitals from hospital’s pharmacy itself.
- Regarding “revision in investment policy of ESIC” , after deliberations, Chairman directed to examine the agenda item by Additional Secreretary & F.A., MoLE (IFD) and resubmit the matter for consideration of the Standing Committee.
- The Committee approved the proposal of Agenda Item of waiver of tuition fee in respect of MD. Ghufuran Ahmad, S/o Late Gulam Mustafa with instruction to frame policy for such type of cases arising in future.

In addition to the above, discussion and deliberations on 7 Supplementary Agenda-I items, 1 Supplementary Agenda-II item, 15 Reporting Item, 5 Supplementary Reporting Item – I and 1 Supplementary Reporting Item-II were also held. Discussions were also held on Reporting Item No. SC-2, Reporting Item No.9, Supplementary Reporting Item No.1 & 4. The meeting ended with a vote of thanks to the Chair.



Snapshots of the Meeting in Progress

Three day conference of Principal Secretaries/ Regional Directors/ Medical Superintendents/ State Medical Officers / Engineering Officers held from 19th to 21st June, 2019 at ESIC Headquarters.

At the opening of conference, the Insurance Commissioner welcomed Director General, ESIC and all other participants and briefed about the issues to be discussed in the meeting and invited Director General to address the members.



Director General in his address said that ESIC has the entire team of the RD Offices to solve the state level issues related to medical services, repair & maintenance of the buildings and ARM issues. He stated that rate of contribution has been reduced and the stakeholders are happy with this move and it may affect the revenue for a short while, but in the long run it will attract more IPs. D.G. said that as ESIC is now paying 100% as per ceiling on Medical Expenditure to the State Governments, they should improve the quality of ESI medical services as the quality of services provided to the IPs is very important and asked the State representatives to give special emphasis to this point. He instructed the officers to properly maintain the record of supply of drugs and dressings and also to identify the list of equipments which are not available and those equipments should be bought from GEM and in case of unavailability, the same may be intimated to Hqrs. Office for guidance. DG also asked the State level Officers to work on tie up with Jan Aushadi Centre for supply of drugs as 80% of all drugs are easily available in Jan Aushadi Centers at discounted price and opined that as the drug procurement process is time consuming, we have to be innovative. D.G. pointed out that there is lack of dispensary services in some states and we have to follow norms of opening new dispensary for at least 2000 IP. As opening and running of a new dispensary is costly, private doctors may be involved for providing primary services to the IPs.

After the welcome address, Director General invited the State Government representatives to discuss their issues.

Telangana

During the discussion, DIMS, Telangana informed that 17 dispensaries, 4 hospitals and 2 diagnostic centers are running in their region and they face acute shortage of staff, mainly doctors, Jr. Assistants, pharmacists, class IV staff and said that

State Govt. is not able to recruit the staff. DIMS said that the bed occupancy of Nacharam Hospital is 66% and that of RC Puram is 72%. She further informed that the secondary care reimbursement bills of ₹15 crores and Medical reimbursement bills of ₹40 crores are pending with them. To this, D.G. asked her to clear these bills. DIMS requested to give a onetime relaxation and pay the pending bills from the On-Account Payment to which MC said that it is not possible. On this point DG explained that reimbursement of the IPs is the liability of the State Govt. and ESIC is paying the money in advance to the State Govt. and as such, reimbursement of IPs bills has to be done at State Govt. level and not by the ESIC. During the discussion, it also came to the notice that per IP expenditure



on drugs and dressing in Telangana region is ₹700. DG informed that ₹400 is spent on drugs and dressing in ESIC directly run 47 hospitals and 45 dispensaries and instructed all RDs to analyse the drug expenditure in states and communicate to Hqrs. Office.

MC (SST) informed that there is huge pendency of Medical bills in all states. DG took it very seriously and directed that the bills must be cleared within 7 days. He also said that this expenditure is over and above state's ceiling limit and therefore it should be minimized. He also instructed the Officers that all the referral should be done through Dhanwantri Module only and all medical care & payment related work be done through UTI, ERP and Dhanwantri Modules. DG also enquired about the OT utilization in the hospitals, procurement of hardware in all the Hospitals, Dispensaries, Branch Offices and Regional Offices and instructed all the Regional Directors for hardware procurement for all the offices at the earliest. The condition of building of Sirpurkagaznagar Hospital was also discussed.

Kerala

DIMS, Kerala informed that there are 125 dispensaries and 9 hospitals in the state and that they are opening 12 new dispensaries in newly implemented area, but are not getting permission for 6 bedded dispensaries from Hqrs. Office. MC clarified that ESI is not giving permission for opening the



dispensary where total No. of IPs are less than the ESIC Norm and DIMS was advised to prepare a presentation on issues related to their state for the ensuing meeting of ESIC to be held in July, 2019.

It was also remarked that the expenditure on Kerala Scheme is more than the contribution income from state. DIMS also informed that there is shortage of Jr. Residents. She also informed that empanelled hospital bills are cleared up to March and SST bills of ₹ 20 crores are pending with RD Office.

Madhya Pradesh

Chief Engineer and Shri Arya, SE explained the position of all the dispensaries and hospitals in MP region to DG. DG asked CE and Shri Arya to look into the ARM and SRM issues and resolve it. It was also suggested to demolish the 50 bedded Hospital in Ujjain on the basis of the IIT Mumbai report. DG also advised the officers to enquire about the functioning of ESI Scheme and clearance of pending medical reimbursement bills and investigate the matter of pending bills. DG clarified that ESIC will pay the super-speciality bills only and Secondary care bills should be paid by the State Govt.



Karnataka

DIMS, Karnataka informed that there are 10 hospitals and 231 dispensaries in the region. DG enquired about the staff position, OPD attendance and use of Dhanwantri Module. RD, Karnataka said that they have done the procurement of Hardware. DIMS explained that while Hospitals are using Dhanwantri Module, the dispensaries are not using it. There are certain issues of pending secondary care bills of ₹50 crores with UTI and super speciality bills and on account payment. The renovation work for all the buildings are done. DG asked the officers to take immediate action and discuss about the Society with the authorities.

Odisha

During the discussion, DIMS stated that there are 41 dispensaries and informed that shortage of staff is to the extent of 40%. RD Odisha informed that for Renovation and SR work, estimates are prepared for all the buildings and tenders have been floated. RD also informed that computer procurement has been done but it is not put to proper use. D.G. asked to use the Dhanwantri Module. DIMS was informed that Angul Hospital is ready and State Govt. should take over

the hospital and make arrangements for sanction of staff from State Govt. DIMS informed that SST bills, secondary care bills and Medical bills are pending. DG asked State Govt. to clear the bills. DIMS also informed that State Govt. is not interested in forming Society.

Maharashtra

Many members showed their inability to start ICUs and HDUs due to shortage of Manpower. The Medical Commissioner also directed the members to engage Nursing and para- medical staff on out sourcing basis. It was informed that on account payment of Maharashtra State is not pending and secondary care and medical reimbursement is also cleared. The Executive Engineer informed that repair of building of ESIH Thane is in progress. The issue of fire services was also discussed and it was informed that in Andheri Hospital where the incident of fire took place, the repair work is in progress. MS Andheri stated that Minor OT has been started at the temporary location Borivali but main OT is not in operation. In next week, X-ray facilities will be completed and the connection of Gas Pipe line will also be completed. MS ESIH Kolhapur stated that the Hospital is not functioning properly due to shortage of staff and stated that there is no DDO. Renovation work is also incomplete.

Gujarat

DIMS stated that there are 07 ESIS Hospitals and 103 ESI dispensaries in the State and AYUSH treatment facility is also available to the IPs at many locations. The issue of SST facilities and secondary care facilities in Vadodara Hospital was discussed. RD explained the status of SST facilities bills. MC asked the status of medical reimbursement and on account payment. RD Gujarat informed that Medical reimbursement cases are not pending.

DG directed to use 100% Dhanwantri module for all work and directed to take Broad Band connection for optimum use of Panchdeep software. The status of drugs supply was explained by MS and stated that there is no shortage of drugs and local Purchase is kept to the minimum. The MC advised MS to use Dhanwatri for drugs dispensation too. The RD stated that Hardware has been issued at some places. RD raised the issue of new implementation area like Kuchchh and DG directed him to send the proposal for new area notification.



Rajasthan

Secretary, Labour & Employment stated that there are 04 ESI Hospitals and 74 ESI Dispensaries in Rajasthan and informed the status of Bed occupancy, IPD and OPD Services in Kota, Pali and Bhilwara and also about the shortage of staff. He also informed that there is no pendency of reimbursement of bills and ESI Scheme has been extended in entire state. He also stated that DCBO could be set up in ESI Hospitals for which the Corporation has already given approval. DG stressed to use Dhanwantri Module of Project Panchdeep.

Punjab

RD explained that there are 6 ESI Hospitals and 31 Dispensaries and adequate Para-medical staff and doctors are available. He informed that repair and maintenance work is going on and the CPWD Nodal officer has been consulted for remaining work. Opening of New dispensary in Mohali was also discussed and the state Government was advised to send the proposal. MC suggested to improve the Model Hospital and directed MS to send proposal. It was also discussed to clear the Pendency of Medical Reimbursement Bills within one week. RD explained that on account payment for year 2016-2017 and 2017-18 is settled and that for 2011-2012 and 2014-15 is under progress. RD explained that issue of Hardware and other computer related problems have been sorted out.

Goa

Labour Secretary, Goa stated that there are 2 ESI Hospitals 13 ESI dispensaries in the state and bed occupancy is around 30%. Manpower is less and recruitment of Nursing staff and para medical and pharmacist is going on and will be done in two or three weeks. Various issues relating to ESI Hospital, Margaon were discussed and some snags were pointed out. DG advised the state representative to take over the hospital conditionally with snag list. DG directed EE to examine the status of building. RD requested to provide drawing of the hospital. DG directed to make available the entire drawings. Hardware and computers have been distributed. DG advised that Dhanwantri module may be started and the availability of man power and doctors and Purchase of equipment and medicines be reviewed.

Jammu & Kashmir

Discussion was held on clearing of pending SST bills and medical reimbursement of bills at the earliest. It was informed that the daily OPD number is 150 and doctors are available and the bed occupancy is 100% and Dhanwantri Module is being used. 08 ESI dispensaries are running in rented buildings and there is one 50 bedded ESI Hospital. MC advised to send Audit Certificate to Headquarter office to release the pending funds and to use Dhanwantri Module for all work.

Himachal Pradesh

There are 02 ESI Hospitals at Parwanoo and Solan and 16 ESI Dispensaries in the state. It was directed to settle expeditiously the pending SST Bills and Medical Reimbursement bills. MC advised to send audit Certificate to Headquarter Office to release the fund pending with Headquarter Office.

Assam

During the discussion, it was informed that there are 26 Dispensaries, 1 Diagnostic Centre and 2 ESI Hospitals at Tinsukia and Belatola in the State and neither SST Bills nor medical reimbursement bills of IP are pending. Repair work at ESI Hospital Tinsukia is going on. RD stated that equipments are underutilized due to shortage of staff and Dhanwantri Module is also not in operation. DG advised to operationalize Dhanwantri Module in the State on priority basis.

Uttarakhand

The Principal Secretary informed that there are factories in non- implemented areas and survey should be conducted. The State Govt. has earlier allotted 5 acres of land for construction of hospital in Haridwar. However, State Govt. wants some land back from ESIC, which will hamper the construction work. Dhanwantri module is working in dispensary and some medical doctors and para medical staff are required for smooth functioning of the dispensary. Secondary care and tertiary care reimbursement bills are pending for payment and a number of complaints were received from tie up hospitals. The principal Secretary also informed that the reimbursement bills of ₹11.21 crores and secondary care bills of ₹ 1.45 Lakh are pending. MC advised to check the genuineness of these bills and release payment on priority and directed to send a status report on tertiary care bill to Hqrs. Office.



West Bengal

It was informed that an important issue regarding forming of Society is still pending and in this regard, a proposal along with necessary documents was sent to the State Govt. It was also informed that in Durgapur, some doctors and para medical staff, equipment and repair work is needed for smooth functioning of the hospital. In this hospital, Operation Theatre, OPD, medicines, referral, laboratory room etc. are available. Minor repair work is required on roof and it is being done by the ARM agency.

Uttar Pradesh

In view of shortage in almost all the cadres, it was directed to fill up vacant posts on contract or deputation basis and also to clear all pending reimbursement bills within a time bound manner. It was also informed that all ARM works by Agency



may be completed within the allotted time period. It was also directed to send a status report in respect of formation of Society to Headquarters Office.

Delhi

DG discussed the issue of permission for coverage of contract & casual employees of municipal bodies under section 1(5) of the ESI Act with the Additional Labour Secretary, Govt. of Delhi. The issue of pending amount of 1/8th share with the Government of Delhi was also discussed with the Additional Labour Secretary Government of Delhi.

Haryana

The principal Secretary, Haryana informed that Hospitals and Dispensaries need renovation. RD Haryana informed that SR work has been given to the CPWD. The issue of formation of Society was discussed and it was informed that willingness has not been shown by the state government. The issue of ESI Dispensary, Pinjore was discussed and it was informed that the structural audit was done and after receipt of the report of the Structural audit, the SR work has been given to the CPWD.



After the discussions on various States, the following Agenda Items were discussed:

Medical Services

- Director General enquired about the status of starting of ICU and HDUs in ESI Hospitals. Requirement of equipments for starting up of ICU and HDU was also discussed. Regarding the shortage of manpower and equipment the MSs were advised to contact Headquarter office.
- MC asked all RDs to procure dispensary kit through GEM for functional dispensaries. He also explained that there are 21 items in dispensary kit.
- The Medical Commissioner enquired about the cases being referred outside. In most of the hospitals, percentage of such cases was found to be very high. On enquiring about the normal deliveries and cesarean cases, it came to notice that the ratio of cesarean cases is very high and these cases are referred outside. DG was very surprised to know that and individually enquired the ratio of normal delivery and cesarean case in all the hospitals and usage of OT in ESI hospitals. In almost all the hospitals, number of in- house

operations performed in the entire speciality were very less as compared to the cases referred outside. DG took a serious note on it and said it is not acceptable and asked the MSs to take strict action against the specialists who avoid delivery or refer cesarean cases outside.

- DG asked about the drugs supplied in all the Hospitals and about the local purchases made by them. Most of the Medical Superintendents informed that local purchase of drugs worth more than Rupees one lakh per month is done by them. The drugs purchased through the local purchase are either not available in the CRC or are specialized drugs used in treatment of cancer or heart diseases. The Director General advised the MSs to discuss the issue with the Specialists and ask them to prescribe RC drugs preferably. It was also informed by some of the Medical Superintendents that the PSUs are not supplying the drugs and it was decided that report of non-supply be sent to Headquarter Office.
- DG stated that permission for broadband connection has been given to all the offices and they should now use ERP and Dhanwantri Modules for all the transactions. AC (P&A) gave the name of those hospitals which are not using ERP Modules and not making transaction through ERP modules. DG enquired individually from all the MSs present about the use of ERP and Dhanwantri Module. Most of the hospitals were not fully using these modules. DG gave instructions to MSs to make full use of the ERP & Dhanwantri Modules and asked the officers to take strict action against those who are not using these modules. All the MCs/RDs assured DG that within 10-15 days these modules will be made functional.
- AC (P&A) also informed that monthly action taken report in ERP was not received from many regions and hospitals. DG asked them to do it urgently.
- MC (SST) gave the detailed data regarding pendency of super-specialty bills in every region/hospital. He said that in almost all the States, huge number of super-specialty bills is pending. DG advised the Officers that bills submitted by tie up hospitals after more than a year are not fit for payment. Medical reimbursement is the responsibility of the State Govt. He asked the reason of huge pendency of bills from individual MSs. He asked the MSs to check at least 10% referrals regarding genuineness of secondary or tertiary care. He also strictly instructed to bring all tie up hospitals on UTI-ITSL.

ICT related matters

All the RDs and MSs were advised to review the requirement of IT hardware and procure required hardware at the earliest. AC (P&A) informed that in many Hospitals, Dhanwantri module is not functional. Dr. Abhimanyu Panda, DMC (ICT) explained that NICSI will no longer provide IT manpower. Henceforth IT Manager/Assistant be hired through GEM.



PMD

- Director General enquired about the status of tender and award of ARM work. It was informed by most of the Regional Directors that the process is in final stages.
- DG also took a very serious note on the vacant staff quarters. MSs discussed about the norms of staff quarters and that at some places, the staff quarters are not in a livable condition. DG replied the queries of the officers and said that non use of quarters causes loss to the Corporation and asked the officers to get those repaired and allot the quarters to staff member.
- It was directed that the lease deed/ ownership documents for all ESIC properties should be kept in Hqrs. office and one copy of it at respective RO/ SRO. If the property documents are not available, then the concerned Registrar of properties should be contacted to collect the copy of the relevant documents and send the same for safe custody in Hqrs. Office.

Status of DCBO

- AC (P&A) asked the officers about opening of Dispensary cum Branch Offices. He said that manpower is not a problem because in almost all the regions newly recruited SSOs have been placed. Further, recruitment process is nearing completion for Ministerial, Medical, Para-medical posts. He also informed that out of 8 regions, only 2 regions namely Andhra Pradesh & Karnataka have sent the action plan for opening of DCBO. AC (P&A) advised to send the report to Hqrs. office at the earliest. DG advised to examine the possibility of attaching these DCBOs with nearest Jan Aushadhi Centre.

Benefit & Revenue

- It was informed that a large number of accident reports are pending in each region/ sub- region. It was advised to the Regional Directors to direct the Branch Managers not to keep the accident reports pending at their level.
- It was also made clear to all the Regional Directors that under no circumstances benefit payment is to be made offline. The data of number of payments made offline was also shared with the Regional Directors.
- The revenue and revenue recovery position of different Regions was discussed and it was found satisfactory.
- DG also discussed that due to reduction in rate of contribution, there may be some temporary effect on revenue. He also asked the RDs to initiate survey as per Hqrs. advice from 01.07.2019. This would help in improving coverage of the Scheme.

Unified ESIC Website

- DD (PR) explained about the unified ESIC Website to the officers. He explained that every important information about the ESIC is available on the website of all the ROs/ SROs/ BOs/Hospitals/Dispensaries. He also requested the officers to upload every important information regarding

their office on this website. He also explained that only two information are not be filled by the field offices i.e. regarding tender and recruitment. DG asked the RDs to make sure that all the relevant information of their region is uploaded on their respective web pages. He said that IT Managers posted in RO/SRO/Hospitals be used for this work.

- DG also informed about the welcome kit. He explained that a booklet regarding ESIC facilities will be distributed to the new IPs and their dependants. It will help them in availing facilities under the scheme.

Swachh Bharat Abhiyan

- DG discussed about the Swachh Bharat plan and advised the Officers to make sure that their buildings are neat and clean. They should ensure that the roof top of the buildings is cleaned regularly. He also advised that strict action is to be taken against ARM agencies if work remains pending beyond a time limit.

APAR

- AC (P&A) discussed about the APAR on SPARROW. He asked the officers that the last date of self-appraisal is 30 June, 2019 after that no self-appraisal may be accepted. Officers raised their queries regarding APAR. DG asked AC (P&A) and Shri K.G. Suresh, Jt. Director (E-I) to reply the queries of the officers. DG asked field officers for timely submission of APAR.

Pending Audit Paras

- AC (F) discussed the matter of Audit Para and CAG Committee report. He said that reply of audit paras were not received on time from almost all the field units. FC was very serious on this and AC (F) advised the officers to send timely reply.

Vigilance

- AC (Vig.) discussed about the CVC report. He also pointed out that most of the field units have not sent the report on time and reports from many units are still pending. He requested for expediting the same.

After long deliberations and discussions of three days, the meeting came to an end with the vote of thanks to DG, FC, all senior officers and participants.





Senior Officers' Meeting (SOM)



Priyaranjan Sinha

Meeting of Senior Officers of ESIC is convened every Monday at ESIC Headquarters Office under the Chairmanship of Director General. Various issues are discussed in the meeting for taking prompt action. The details of important discussions held from January to April, 2019 were published in the last issue of ESI Samachar issued in June, 2019. An overview of important points on which detailed discussions has been held month wise from May to October, 2019 is given below.

Important issues discussed in various ESIC-SOMs during May, 2019

- Tie up with Ayushman Bharat in newly notified areas where ESI Scheme has been recently implemented and no ESI infrastructure is available for availing service, and setting up Jan Aushadhi Kendra/Amrit Pharmacy in ESI Hospitals to be taken up so as to minimize Local purchase.

Important issues discussed in various ESIC-SOMs during June, 2019

- To fix accountability in those case where the quarters are lying vacant and HRA is being paid. Vigilance check and verifying the genuineness of the certificate given by local Engineering staff that the quarters are uninhabitable to be undertaken.
- Exempted unit to file six monthly return. Filing of return to be made mandatory for exempted units.
- Maternity Benefit period has increased from 12 weeks to 26 weeks and therefore IW becomes ineligible for other benefits. Ineligibility for sickness Benefit due to MB to be taken care of by amending relevant rules. SST ineligibility to be also examined.
- Staff associated with OT work is posted in all Hospitals as per norms, however OTs are mostly dysfunctional. Such staff positions shall be kept in abeyance where OT is not functional.
- MC to ensure where Dhanwatari is not being used in toto, be reflected in APAR of respective MSs.
- Increase of FAR for Hqrs. Building so that PMD and all branches of Hqrs can be accommodated in main building.
- Welcome Kit to be sent to IP's addresses by post.
- Work/Service upto ₹ 50 lakh, as per Make In India principle, to be given to third parties as per Govt. policy.

Important issues discussed in various ESIC-SOMs during July, 2019

- Labour room should be made operational in all ESI Hospitals.
- Bank attachment by Recovery Officer in comparison to the provisions of Income Tax Act, where the approval of Additional Commissioner is required.
- The DB/PDB rate enhancement Committee to finalize report and submit an agenda to Corporation.
- Doctors are sanctioned as per bed strength in Hospital but actual posting should be on the basis of OPD/IPD in the Hospital as reflected in Dhanwantri Module.
- SST payment data RO/SRO wise has been culled from the system and they indicate more than ₹ 7 crore payment has

been made in 46 cases in SRO, Gurugram. More than 250 such high value SST payments have been pointed out & respective RO/SRO to verify their genuineness for which instructions already exist.

- Equipment maintenance to be given to UDC & this duty may be removed from Pharmacist duty. List of common duties of Pharmacist to be issued.
- MC to issue circular for no secondary referral after December, 2019 by all ESIC Hospitals.
- E-office to be implemented at the earliest. Dir(Gen.Br.) to study e-office implementation in the Ministry & also study the implementation of scanning work of old files.
- Implementation of NIC's PG module in ESIC.
- Power of DG under Rule 29 to be enhanced from ₹5 crore to ₹25 crore as per decision of Corporation.
- MoU with SBI for integration with ESIC ERP to avoid fraud.
- To examine inclusion of members from IP & Pensioners category in the HDC.
- A few cases of employers who have availed SST benefits in respect of their employee for values upto ₹15 Crore by filing supplementary contribution returns was pointed out. Dormant IP's have been revived for availing SST. Cases studied are with respect to NCR RO/SRO offices of ESIC. Allowing supplementary contribution payment returns as per Regulation 26 to be restricted as per clause (a) of the Regulation 26. Previously such cases were accepted subject to verification as per Regulation 27. Subject to verification of wage records. Fake employers to be blocked after due scrutiny. Team of officers to assess the vulnerability in revenue collection & report to be submitted. System is allowing filing of contribution at any date even after the date specified in Regulation 31 should be reviewed & stopped. Initiate criminal investigation in the case of fraud. Filing supplementary return after 42 days was allowed though not specifically mentioned in Act/Rules/Regulations. This process should only be as per law/Rules. For non-compliance, the employer bears the entire burden and not the employee.
- DG desired system audit of software of IT Panchdeep to check whether it complies with ESI Act, Rules, Regulations & instructions.
- The prohibition instruction on site visits by engineering staff of RO to be withdrawn. Regular update can now be obtained from Regional Officers.
- Sensitive posts & Branches have been identified and shall be issued for compliance this week by Vigilance.
- Policy for Pharmaceutical distribution needs to be reviewed and patients visiting Hospitals should be given medicine during each visit, as per need. Revised instruction to be issued in a week.

Important issues discussed in various ESIC-SOMs during August, 2019

- 2018-2019 SST settled bills was studied. It was informed that of all deductions made in respect of tie up bills presented to ESIC for payment, the BPA accounted for 83% deduction, L-1 for 15% deduction and L-2 for 1.5% deduction. Maximum time taken is at L-1. Time taken between L-1 & L-2 to be also studied. Either L-1 & L-2 can be scrapped altogether to further



reduce time for clearance and utilize manpower properly or only L-2 stage can be scrapped.

- On Payment of contribution, an analysis on employers' payment of contribution was presented. Less than 1% of complying employers are paying after 42 days of end of (contribution period) C.P. in respect of certain Regions/Sub Regions. Of all registered employees, 50% of employers are paying and the other 50% are defaulters. Filing of RC or its supplementary to be blocked after 42 days of end of C.P.
- An incident of an attendant to an IP's mother was not allowed was brought to notice and was asked to pay ₹ 300/- to another attached attendant at Joka Hospital. DG said this is a bad practice and needs to be ended immediately. ESIC doesn't have system of an agency for attendants. Instruction shall be issued to end this practise.
- ESM is not being engaged for hiring of security agency through DGR agency. The para-military retired is not included in ESM. Only 10% civilian are allowed but actual number is high. Moreover, different wage is being paid at some location which cannot be done. Age limit of 55 years is not being followed. Any agency giving more than 10% civilian security guard, the contract should be scrapped and agency blacklisted & informed to DGR. If more women personnel are to be engaged, they can be taken through Housekeeping Agency.
- A data analytics team to be created at ESIC Hqrs. to analyse the ICT data for proper decision making.
- PG qualified doctors are posted to casualty and are thoroughly underutilized, a policy for optimum utilization of their services to be issued.
- A rotation of Doctors deployed for medical helpline & its availability round the clock at Basaidarapur Hospital to be ensured, just as in the case of general Helpline of ESIC.
- One to one VC to be conducted from Hqrs. with concerned field offices for Revenue, Benefit, SST and Medical issues, once a month, for which one day of week to be given to each of above four Divisions.
- SR policy needs to be factored in the policy for IMO post and also the 60:40 ratio for IMO & SR being followed. An amendment to RR of specialist which allows lateral entry of PG qualified IMO's in the specialist cadre to be framed.
- Constitution of a takeover team from Hqrs. for under construction projects, which shall evaluate readiness of takeover at each location and on the basis of its recommendation only, the local engineering unit should takeover. The team should consist of one Doctor, one engineer from PMD and one officer of Admin side. PMD Hqrs. should also issue a basic checklist for takeover from construction agency.
- In order to motivate hospital staff, training through NTA and enhance their etiquette and courtesy on public handling with patients visiting Hospitals to be provided.
- E-Office pilot to be started in this month at Hqrs./Sanathnagar and subsequently implemented in all ESIC offices.

Important issues discussed in various ESIC-SOMs during September, 2019

- To curb Centralised A.C. issues in ESIC Hospitals, PMD to appraise engineering staff to manage centralised A.C. with ARM

agency properly & keep them briefed about its functioning and condensation issues. Due to excessive condensation, the moisture leads to fungus, which leads to closure of OT's in Hospital. A&E consultant should be asked to redesign our air conditioning requirement. A manual of maintenance is to be made by A&E consultant for each of the respective project & provided to the location for proper management. A&E consultant should also arrange to train our engineering staff while hospital should enter into annual maintenance contract with OEM in a timely manner after following due process.

- Opening of DCBO for other beneficiaries, other than IP's in areas where IP population is low, can be provided OPD services to non-IPs on payment of ₹10/- for getting consultancy only. DCBO in each district will work as one stop solution for the IPs problems in the district like single window. Opening of DCBO's to be prioritised and aligned with Vision-2022 objectives. Section 73A only allows to open "underutilized Hospitals" for other beneficiaries. An amendment to be brought to Section 73A to allow underutilized Dispensaries to be opened for other beneficiaries only for OPD consultation. In section 73B, the word Dispensary to be added.
- Maintenance Manual for Hospital for proper functioning of ARM agency to be used for all locations of ESIC Hospitals. Responsibility should lie with MS for proper upkeep of Hospital, non-maintenance of which is affecting, service delivery. Engineer(s) posted to the location needs to be assigned the task of daily visit to each part and ensure proper maintenance of the hospital on daily basis. Maintenance manual to be finalized and issued.
- Stoppage of Secondary referral w.e.f. 01.10.2019 in all NCR ESIC Hospitals to be done. Equipment procurement to be expedited and all Hospitals to be provided required equipment. This policy of stoppage of Secondary referrals to be extended to all India from January, 2020.

Important issues discussed in various ESIC-SOMs during October, 2019

- Processing of accident cases is not being done online. All accident case processing be done online & decision on each death case reported to ESIC should be entirely system generated. Necessary instruction to be issued.
- Citizens Charter need to be regularly updated & hard copy be made available to all and to display it properly in all Hospitals, RO/SRO & Branch offices.
- Highest paying employer and longest contributing IP in the District need to be made member of Local Committee. Local Committee at each district level be fixed to include five highest paying employer & five longest contributing IP's in its Local Committee. Until the revamping of Local Committee composition by way of amendment in the Regulation, such employer/employee be invited in the Suvridha Samagam.
- Reasonability of rate of rentals for DCBO should be ascertained through local CPWD. If certified as reasonable, RO/SRO can engage rented premises for DCBO. Else the matter may be referred to Hqrs. DCBO be also opened in all ESIC Hospitals which will take care of opening of DCBO in 150 odd districts of the country.

Courtesy
Deputy Director (P&D) , ESIC Hqrs.

Path breaking initiatives for better health care service and hassle free services

1) Optimal utilisation of Health Infrastructure

ESIC in its 175th and 176th meeting held on 18.09.2019 and 05.12.2019 decided to allow Non- Insured Persons to avail medical services from underutilized ESIC Hospitals by paying user charges of ₹10/- per OPD consultation and paying 25% of CGHS package rates applicable for availing IPD facility. An ESIC Hospital having bed occupancy rate of less than 60% is considered as underutilised.

To begin with, the Scheme has been implemented in underutilized ESIC Hospitals at Alwar (Rajasthan), Bihta (Bihar), Gulbarga (Karnataka), Sarojini Nagar, Lucknow and Jajmau Kanpur, Bareilly and Varanasi (Uttar Pradesh).

Other features

- Under the Scheme, the facilities can be used on payment of user charges after being registered under ESIC manually till the online software is in place.
- A separate account will be kept for the user charges collected in respect of the service provided to various categories under the Scheme. The user charges so collected shall form part of the ESI fund.
- Director General is authorized to review the administrative arrangement and user charges and other aspects of the Scheme periodically and make appropriate changes in the administrative arrangements and user charges with a view to implement the Scheme effectively and efficiently.
- Each Hospital will have a separate counter for registration and collection of user charges relating to Non-Insured Persons. Wherever required, separate OPD timings will be specified for Non-Insured Persons so that the services to the ESI beneficiaries are not affected.
- This OPD services has also been opened for Non-IPs in underutilised DCBOs.

2) Modified Insurance Medical Practitioners (m-IMP) and Modified Employer Utilization Dispensaries (M-EUD) Schemes

ESI Scheme is being implemented in newer areas, and in view of non-existence of ESI dispensaries at these locations, private doctors as Insurance Medical Practitioner (IMP) and through Employer's Utilisation Dispensary (EUD) are required to be engaged for providing primary medical care services till ESI Dispensary comes up in the area. In order to make IMP



and EUD scheme more attractive, approval was accorded for implementing Modified IMP Scheme and Modified EUD Scheme. Subsequent to in-principle approval of Modified-IMP Scheme, Ministry of Labour and Employment implemented the Schemes at various locations as a pilot project for six months with the condition that a revised policy for modified IMP

Scheme be proposed and brought before the ESI Corporation, based on experience gained in implementing the modified IMP project.

As an outcome of the review meeting held on 24.05.2019 with the Senior Officers of ESIC under the Chairmanship of Secretary (L&E), location wise functioning of M-IMP and M-EUD was assessed on various parameters including number of Insured Persons registered, patient actually shown, availability of lab services, empanelment of Chemist and satisfaction level of ESIC beneficiaries etc. As per data, services of modified IMPs and Modified EUDs have been found satisfactory at most of the locations across various states where currently ESIC does not have its own primary care medical services enabling the ESI beneficiaries to avail primary care medical services. In view of it, M-IMP and M-EUD schemes will be implemented in newer areas in phased manner.

3) Medical care in newly Implemented Areas: Partnership with PMJAY – Aysushman Bharat

Government of India, under the ambit of Ayushman Bharat has launched Pradhan Mantri Jan Arogya Yojna (PMJAY) for deprived Indian families and identified occupational categories of urban workers' families as per the latest Socio Economic Caste Census (SECC) data so as to reduce the financial burden on poor and vulnerable groups arising out of catastrophic hospital episodes and ensure their access to quality health services.

Under this Scheme, such beneficiaries are being provided an annual cashless family medical cover of ₹ 05 lakh for all secondary and most of the tertiary care medical treatment services through empanelled network of Private/Government Hospitals. For this, tie up arrangement with private/government Hospital is already in place for around 1350 medical packages covering common surgery, medical and day care treatments including medicines, diagnostics, transport, and pre & post-hospitalization expenses. Considering the overall quantum of services associated with these package rates, these package rates are broadly comparable to the CGHS package rates followed by ESIC.



ESIC and PMJAY

In a meeting held on 26.04.2019 in Prime Minister's Office, certain decisions were taken regarding various reform measures to be taken in ESIC wherein it was decided that ESIC and National Health Authority (NHA) may work out modalities for effective utilization of resources available with both the agencies.

Subsequently, a MoU has been signed between ESIC & NHA to provide medical care services to the Insured Persons and their dependants in newly implemented areas.

Salient features

- ESIC in collaboration with Pradhan Mantri Jan Arogya Yojana (PMJAY) to provide Secondary and Tertiary medical care services to entitled ESI Beneficiaries in newly implemented area of 102 designated Districts through PMJAY empanelled hospitals in States where PMJAY has been adopted by the State Governments.
- Prevailing Ayushman Bharat package rates to be applicable while calculating reimbursement of such treatment services, by ESI Corporation.
- For seeking required secondary or Tertiary medical treatment services, ESI beneficiaries of these districts will report to the existing system of source State for Pre-authorisation and will be accordingly routed to empanelled PMJAY/Ayushman Bharat Hospital.
- For hassle free and smooth implementation of this initiative, ESI Beneficiaries will be dealt through PMJAY logistics / IT facilities for registration, billing etc. as is done for PMJAY beneficiaries, up to a maximum limit of ₹ 5 lakhs worth of medical expenditure, beyond which individual case will be channelled to ESIC for seeking approval for further expenditure on ESI Beneficiary.
- Regional Director of respective State to make payment to PMJAY authorities against the bill raised against the medical Treatment provided to ESIC beneficiaries of the selected districts.
- Similarly, PMJAY beneficiaries may get cashless in house secondary and tertiary services from underutilised ESI Hospitals up to a limit of ₹ 5.00 lakh.

4) Availability of ESI benefits at reduced rates of contribution

In a historical decision taken by the Government of India, the monthly contribution to ESI Scheme by the employers and employees has been reduced with effect from 01.07.2019. The monthly contribution has been reduced from 6.5 % to 4% for employers and from 1.75 % to 0.75 % to the employees, thus bringing financial relief to the employees

and employers and also make a turnaround in the viability of the establishments. With this, there will be no reduction in the benefits being offered under ESI Scheme. The reduction in monthly contribution has benefitted more than 3.6 crore ESI Insured Persons and 12.85 lakh employers coming under the ambit of ESI Scheme. It is expected that the reduction in monthly contribution will attract more and more workers to the fold of ESIC.

5) Health Passbook

In order to provide hassle free service to the Insured Persons and their beneficiaries and also to maintain health records, Health Passbook has been introduced. The Health Passbook with Unique Health ID, QR Code and photograph of IPs and family members serves as a tool for beneficiary identification, recording of medicines prescribed & clinical findings. Separate Health Passbook is being issued to IPs and their family members by the Employer / ESIC Branch Offices.

6) Local Committee & Suvidha Samagam

With a view to empower the stakeholders at the grass root level, Local Committee has been formed and Suvidha Samagam is held at regular intervals. The Local Committee provides recommendations on common issues faced by IPs and employers in their area. Suvidha Samagam which acts as one-stop-solution to resolve problems related to ESI Scheme is organised by ROs/SROs/Hospitals on 2nd Wednesday and Branch offices on 2nd Friday of every month. Another important feature is that 5 highest contribution paying employers and 5 longest contributing IPs of the respective jurisdiction will be permanent invitees to Suvidha Samagam.

7) ESIC 'Chinta Se Mukti' Mobile App

In order to empower the Insured Persons with ease of getting information, ESIC has launched ESIC 'Chinta Se Mukti' Mobile App. The Mobile App available on UMANG platform of Govt. of India enables IPs to check ESI Contribution history, personal profile, claim status, entitlement to ESI Benefits. The App also provides facility for lodging ESIC related grievances. Knowledge Bank on health topics and audio-visuals on benefits of ESI Scheme are also available on the App.

8) ESIC Office in every district – strengthening service delivery under ESI Scheme

The Dispensary–cum–Branch office (DCBO) is being opened in every district of the country in a phased manner. Under this, the dispensary and branch office function under a common roof and outpatient services and cash benefit payments are made there. The DCBO acts as a centre point for referrals for secondary care, reimbursement of IPs bills, and payment of bills of empanelled chemist / diagnostic centre and provide help desk services to the IPs / employers.



ESIC Medical College & Hospital, Sanathnagar, Hyderabad (Telangana) dedicated to the nation and foundation stone laid for new OPD Block

Shri Santosh Kumar Gangwar, Hon'ble Minister of State (Independent Charge) for Labour & Employment, Govt. of India laid the foundation stone of New OPD Block and dedicated ESIC Medical College & Hospital, Sanathnagar, Hyderabad to the nation on 21st August, 2019. Shri G. Kishan Reddy, Hon'ble Minister of State for Home Affairs, Govt. of India graced the occasion as Chief Guest. The other dignitaries to grace the occasion were Shri Chamakura Malla Reddy, Hon'ble Minister for Labour & Employment, Factories, Women & Child Welfare & Skill Development, Govt. of Telangana, Shri Bandaru Dattatreya, Former Hon'ble Union Minister of State (Independent Charge) for Labour & Employment, Shri Heeralal Samariya, Secretary, Labour & Employment, Govt. of India, Shri Raj Kumar, Director General, ESIC and Ms. Kolanu Lakshmi Reddy, Hon'ble Corporator, Sanathnagar Ward, Greater Hyderabad Municipal Corporation.

Addressing the gathering, Shri Santosh Kumar Gangwar, Hon'ble Minister of State (Independent Charge) for Labour & Employment, Govt. of India said that the proposed new OPD Block will provide services viz., ENT, Ophthalmology, General Medicine, Audio & Speech therapy, Dermatology, Pulmonology etc. The Hon'ble Minister informed that the ESIC Medical College & Hospital, Sanathnagar has been constructed with a project cost of ₹534 Crores and the college has an annual intake of 100 seats for MBBS, out of which 50% seats are reserved for wards of Insured Persons covered under ESI Act. The Hon'ble Minister said that the 150 bedded Super Specialty & 470 bedded College Hospital is equipped with state-of-the-art equipments like Modular Operation Theatres (MOT), ICU, CT Scan, MRI Scan etc. and provides quality medical services. He also added that the bed capacity of hospital will be further

extended, if needed. During the event, an audio visual about New OPD Block and ESIC Medical College & Hospital, Sanathnagar was also screened.

The Hon'ble Minister also informed that Govt. of India has reduced the ESI contributions rates being paid by employees and employers covered under ESI Scheme from 6.5% to 4 % and now the employees share will be 0.75 % against the earlier 1.75% and the share of employer will be 3.25 % against the earlier 4.75 % which will benefit 3.6 crore employees and 12.85 lakhs employers. The Hon'ble Minister also mentioned the decisions taken by that ESIC like opening of underutilized ESIC Hospitals for Non-IPs with nominal charges of ₹10/- for OPD Consultation, at 25% of CGHS package rates for IPD and medicines on actual rate, Starting of Atal Bimit Vyakti Kalyan Yojana, recruitment drive for the post of para-medical staff to meet the shortage of staff in ESIC Hospitals etc. He also informed the crowd about the Pradhan Manti - Shram Yogi Man Dhan Yojna (PM-SYM) started by Govt. of India for workers of unorganised sector.

Shri G. Kishan Reddy, Hon'ble Minister of State for Home Affairs, Govt. of India and Shri Chamakura Malla Reddy, Hon'ble Minister for Labour & Employment, Factories, Women & Child Welfare & Skill Development, Govt. of Telangana, also addressed the gathering and thanked Hon'ble Minister Shri Santosh Kumar Gangwar for dedicating the ESIC Medical College & Hospital, Sanathnagar and also for laying the foundation stone for new OPD Block. Shri Chamakura Malla Reddy also appreciated the efforts being made by Central Govt. towards providing better medical facilities to the worker population.



Inauguration of 100 Bedded ESIC Hospital at Rudrapur (Uttarakhand)

Shri Santosh Kumar Gangwar, Hon'ble Minister of State (Independent Charge) for Labour & Employment, Govt. of India inaugurated the 100 bedded ESIC Hospital at Rudrapur (Uttarakhand) on 30th October, 2019.

The other dignitaries who graced the occasion were Dr. Harak Singh Rawat, Hon'ble Minister for Forests & Wild Life,



Environment & Solid Waste Disposal, Labour, Employment, Training, AYUSH, AYUSH Education, Govt. of Uttarakhand, Shri Rampal Singh, Hon'ble Mayor, Municipal Corporation, Rudrapur, Shri Rajesh Shukla, Hon'ble Member of Legislative Assembly, other dignitaries & officers of Govt. of India, ESIC and Govt. of Uttarakhand.

Addressing the gathering, Shri Santosh Kumar Gangwar, Hon'ble Union Minister of State (Independent Charge) for Labour & Employment said that the 100 bedded ESIC Hospital at Rudrapur has been constructed in a plot area of 5 acres along with 32 staff quarters with an approx. cost of ₹97.72 crore. To begin with the OPD services are being provided. However, in due course, the 100 bedded ESIC Hospital shall be equipped



with state-of-the-art facilities like operation theatre, casualty block, radiology, orthopedic clinic, psychiatric clinic, general medicine and many more facilities for the Insured Persons and their dependants. This Hospital would be exclusively run for the benefit of insured persons and their family members covered under ESI Scheme.

He further informed about the steps taken by Central Govt. to promote ease of doing business by amalgamating 38 Labour Laws into 4 Labour Codes. He also informed the crowd about the Pradhan Manti - Shram Yogi Man Dhan Yojna (PM-SYM) started by Govt. of India for workers of unorganised sector.

Dr. Harak Singh Rawat, Hon'ble Minister for Forests & Wild Life, Environment & Solid Waste Disposal, Labour, Employment, Training, AYUSH, AYUSH Education, Govt. of Uttarakhand, Shri Rampal Singh, Hon'ble Mayor, Municipal Corporation, Rudrapur and Shri Rajesh Shukla, Hon'ble Member of Legislative Assembly also addressed the gathering and thanked Hon'ble Minister Shri Santosh Kumar Gangwar for inaugurating the ESIC Hospital, Rudrapur.

Agreement signed with SBI for Payments to ESIC Beneficiaries on Real Time Basis

ESIC has signed a Memorandum of Agreement on 03.09.2019 with State Bank of India in accordance with which, the SBI would provide e-payment services directly to the bank accounts of all ESIC beneficiaries and payees without any manual intervention as an integrated and automated process. The SBI would provide e-payment integration with the Enterprise Resource Planning (ERP) processes of ESIC through its Cash Management Product (CMP) e-payment technology platform.

The e-payment integration would affect statutory benefit payments to ESIC beneficiaries as well as other payees on real time basis, reducing time lags and delays and at the same time, help to eliminate mistakes and errors caused by repetitive and manual data entries. The new system will

benefit all stakeholders of ESIC. The agreement was signed in the presence of Shri Rajkumar, DG, ESIC and Shri Sunil Wadhwa, DGM, SBI.





3rd Graduation Ceremony of ESIC Dental College & Hospital, Delhi (2013 & 2014 batch)

The 3rd Graduation Ceremony of ESIC Dental College & Hospital, Rohini, Delhi was organized at Siri Fort Auditorium, New Delhi on 13.11.2019. Shri Santosh Kumar Gangwar, Hon'ble Minister of State (Independent Charge) for Labour & Employment, Govt. of India was the Chief Guest of the function.

While addressing the gathering, Hon'ble Minister wished all the graduating students a bright future and congratulated them for their achievement. He said that all graduates should perform their duties in the welfare of the society keeping the professional commitment in mind and serve their best to the country. Hon'ble Minister during his speech also informed the gathering about the recent initiatives undertaken by ESIC viz. Partnership of ESIC with PMJAY – Ayushman Bharat to provide medical care to ESIC beneficiaries in 102 designated newly implemented districts. He further said that ESIC has relaxed the norms for opening of hospitals and now 30 bedded hospitals will be built where 20000 IPs are present. He also informed about ESIC – Chinta se Mukti mobile app and availability of Helpdesk for Stakeholders.

The other dignitaries to grace the occasion were Shri Raj Kumar, IAS, Director General, Ms. Sandhya Shukla IA & AS, Financial Commissioner, Dr. R.K.Kataria, Medical Commissioner, Dr. P.L. Chaudhari, Medical Commissioner (ME), and Dr. Vivek Handa, Deputy Medical Commissioner (Medical Education). Dr. Dharendra Srivastava, Dean, ESIC Dental College & Hospital, Rohini administered the pledge to the graduating students and emphasized on the importance of Access, Quality and Equity in

Medical Education.



ESIC Dental College, Rohini, Delhi under the genesis of Ministry of Labour and Employment, is only the 3rd Government Dental College in Delhi-NCR region. The Bachelor of Dental Surgery (BDS) course offered at this institute is in strict adherence to guidelines set by the Dental Council of India and is affiliated to the prestigious Guru Gobind Singh Indra Prastha (GGSIIP) University. With quality treatment and value based dental education imparted at ESIC Dental College; ESIC continues to deliver quality medical care.

Conference on improving medical services in ESI Hospitals

A Conference on improving medical services in ESI Hospitals was held in ESIC Medical College & Hospital in KK Nagar, Chennai on 6th November, 2019. A total of 96 delegates from various Heads of ESIC Hospitals and Medical Colleges all over the country attended the Conference with Director (DIMS) of State Govts.

Shri Raj Kumar, DG, ESIC delivered the inaugural address. He emphasized on giving the utmost care to the Beneficiaries of ESI Scheme. It was followed by a motivational speech by Swami Athmashradhanandha ji who spoke about the different facets of each individual and highlighted that each one should live without greediness.

The other Senior Officers present during the Conference were Ms. Sandhya Shukla, FC, Ms. Garima Bhagat, CVO and Dr. R K Kataria, MC.



Inauguration of IVF & Fertility Centre at ESIC PGIMSR College & Hospital, Basaidarapur, New Delhi

Shri Raj Kumar, IAS, Director General, ESIC, inaugurated IVF & Fertility Centre at ESIC PGIMSR & Hospital, Basaidarapur, New Delhi on 29th November, 2019.

Shri Raj Kumar congratulated the Institute for this noble achievement. While addressing, he further informed that ESIC has initiated various systematic reforms for delivering improved social security benefits and medical services to ESI beneficiaries as well as for expansion of the coverage in the country.

ESIC PGIMSR, Basaidarapur, New Delhi under the aegis of Ministry of Labour & Employment, is the first Institute to

provide IVF services to its beneficiaries in Delhi-NCR region. The centre strictly follows ICMR guidelines and will provide quality treatment and value based services to the IPs.

The other dignitaries to grace the occasion were Dr. R. K. Kataria, Medical Commissioner(MA), Dr. P. L. Chaudhari, Medical Commissioner(ME), Dr. Subhajeet Dey, Dean, ESIC PGIMSR College & Hospital, Basaidarapur, Dr. Deepak Kumar Sharma, Medical Superintendent, Dr. Sangeeta Gupta, H.O.D (Obstetrics and Gynaecology) and Dr. Leena Wadhwa, Incharge (IVF).





ESIC - Vision to achieve Universal Social Security goals by 2030

Mail Today organised the 5th Edition Health Care Summit at Hotel Leela Palace on 12.11.2019. ESIC also participated in the Health Care Summit. Shri Raj Kumar, Director General, ESIC gave a presentation on ESI Scheme, its vision and Mission, improvement and accessibility of quality healthcare, use of Technology and building trust with stakeholders of ESIC.

On the sidelines of the Summit, Ms. Priyanka Soni, Journalist of Mail Today interviewed DG, ESIC about the universalisation of Social Security and Vision of ESIC. The interview is reproduced below:

Q: You have got plenty of experience of governance and management of district and state level organisations. Please tell us about little bit about your experience and the learnings so far

A: That's how the journey of an IAS officer starts. You know we start right from districts, blocks and even villages, then come up to the state and finally in your career the high point is you come to the central government and then entire country is your canvas and whatever you do, your policies, your thinking, your actions affect the whole country.

Q: Sir, What is the vision of the brand ESIC and what are the steps and key initiatives, strategies that the organisation is taking to achieve them.

A: Our vision is basically to go in the direction of Universalisation of Social Security. Of course ESIC is limited to the working class and within the working class the numbers are staggering. You know there are almost 42 crore people who are in the workforce. Now out of that 42 crore, ESIC is supposed to look after the entire formal sector and formal sector is itself of the order of 10-12 Crore. Now out of that, our coverage is just 3 and half crore odd numbers. So we have lot of ground to



cover. So I'm sure, you know, looking forward by 2030 when we achieve our Universal Social Security goals, ESIC will have a major role to play in achieving that Goal.

Q: Sir, What are the challenges that you faced so far as a leader and how do you overcome it and how do you keep the morale of the team going

A: Social Security Per Se because you are dealing with people, you are providing them services and in particular, providing Medical services is real challenge because our country has got overall shortage of Medical Manpower. Then the Country is not uniformly blessed with availability of Health services, so that's another challenge. The third challenge is access itself, you know providing access and quality of Medical care.

So, Medical care is something you know which is purely State subject, but with the launch of Ayushman Bharat, as you have seen Central Government is also pushing in the direction of providing care and services to the people. So it is a reasonably complex subject where we have got a large country with limited Medical Manpower, large population and reaching out to all nook and corner, you can imagine how challenging it is.

Social Media @ESIC

For communicating with its stakeholders spread across the length and breadth of the country, ESIC uses the new mode of communication channels – Social media. ESIC has a strong presence now in Facebook (ESICHQ), Twitter (esichq) and YouTube (Employees' State Insurance Corporation). Latest events, initiatives launched, meeting, outstanding achievements of employees etc. are regularly posted on the Social media platforms. Feedbacks received through ESIC social media handles are reviewed periodically and corrective measures, wherever necessary are taken. Grievances raised by the stakeholders are well received and assessed and appropriate corrective actions are taken to redress them as soon as possible. Day by day, the number of persons accessing the social media handles of ESIC is increasing and it serves as a better medium for timely communication and extensive reach.



ESIC - The power behind ensuring Social Security

As a pioneer social security organisation, in its long journey of 67 years, ESIC has been providing social security cover to millions of organised sector workforce of the country. The vision of ESIC is to cover the entire country with ESI Scheme by the year 2022. To make the ESI Scheme more beneficial to the ESI Insured Persons and their family members, year after year, new initiatives are launched and all efforts are made to provide them better medical care besides providing a host of other benefits.

ESI Scheme

The Employees' State Insurance Corporation (ESIC) is a pioneer social security organisation providing comprehensive social security benefits like reasonable Medical Care and a range of Cash Benefits in times of need such as employment injury, sickness, death etc.

In the notified areas, ESI Act applies to establishments employing 10 or more persons whereas the Employees drawing wages up to ₹21,000 a month are entitled to health insurance cover and other benefits, under ESI Act.



ESI Scheme— At a Glance

12.11 lakh factories and establishments across the country, benefiting about 3.49 crores family unit of workers. Total beneficiary population of ESI Scheme stands over 13.56 crores. In partnership with State Governments, ESIC provides medical benefits to insured persons. ESIC has also set up its own model hospitals in all states.

For smooth administration of the Scheme, ESIC has set up 64 Regional/ Sub regional offices spread across the country. To disburse cash benefits, there are 793 Branch/Pay offices.



ESI Scheme: Medical Infrastructures

Total No. of ESI Hospitals	159
Hospitals run by ESI Corporation	49
Hospitals run by State Government	110
Total number of Dispensaries	1500
Total number of ISM unit	148
Total number of Hospital beds	21931
Total number of Doctors	7908
Total number of IMP clinics	980

Improving access and quality of Health Services

- ESIC has started setting up its own Dispensary cum Branch Office (DCBO) in each district. This will facilitate delivery of quality services while building trust with the stakeholders.
- ESIC has relaxed the norms for setting up of Hospitals. Now 30 bedded Hospitals to be built in the district if the number of IPs is 20,000.



ESIC: Mission

- Expanding coverage across the country
- Improving access and quality of Health Care Services
- Building trust with stakeholders



Expanding Coverage: District as a Unit

- Paradigm shift in approach to coverage from industrial centres to district wise.
- ESIC has started setting up its service delivery/ facilitation centres in all districts. This will be in addition to medical services provided by the State governments under ESI Scheme.





REGION IN FOCUS - ODISHA



L. Jamir

The ESI Scheme was first implemented in Odisha on 31st January, 1960 in 05 centres namely, Cuttack, Choudwar, Barang, Rajgangpur and Brajrjnagar in 3 districts covering only 2300 industrial workers. As on 31st March 2019, out of 30 districts the Scheme has been implemented in whole of 20 districts and in part of 04 districts.

Primary Medical Care is provided to the Insured Persons and their beneficiaries through 40 Dispensaries and 19 IMPs, Secondary Medical Care through 4 ESI Hospitals, 01 ESIC Model Hospital and 10 Tie-up Secondary Care Hospitals and Tertiary Care through 10 tie-up Super-specialty Hospitals, 4 Modern Diagnostic Centres.

Various Cash Benefits under the provisions of ESI Act are made available to the Insured Persons through 23 Branch Offices located across the State and 1 DCBO.

The Directorate of ESI Scheme under the control of Department of Labour and ESI, Government of Odisha is administering medical benefits through a network of 4 ESIS Hospitals and 41 Dispensaries. Further, one ESIC Model Hospital at Rourkela is providing medical care to the Insured Persons and their dependent family members in Western Odisha. ESIC, Odisha has tied up with 13 reputed Private Hospitals / Diagnostic Centres and 3 I MPs for providing Super Speciality treatment to the ESI beneficiaries in the State of Odisha.

There are two instances of Kidney Transplantation where the Insured Persons were given Benefit by ESIC, Odisha when they were in dire need of help for medical care. In the case of Shri Sanjan Kumar Behera, IP No. 4403033386, the total cost of ₹3,09,890/- and in the case of Shri Santosh Kumar Das, IP No. 4403502830, the total cost of ₹3,17,716/- was borne by ESIC, Odisha.



Shri Santosh Kumar Das

It is also worthwhile to mention that Shri Pramod Bhagat, an employee of ESIC, Odisha and an ace Para-Shuttler was awarded Arjuna Award by the Hon'ble President of India on 29.08.2019 in recognition of his continuous outstanding achievements in both national and international levels. ESIC also elevated Shri Bhagat to the Post of Social Security Officer and awarded Cash Prize of ₹5 lakhs.

Recent Meetings / conferences organised by ESIC Odisha

79th Regional Board Meeting

The 79th Meeting of the Regional Board, ESIC, Odisha Region was held on 26.07.2019 at the ESIC Regional Office, Odisha. Shri Susanta Singh, Hon'ble Minister of State (Independent Charge), Labour & ESI, Rural Development, Govt. of Odisha and Chairman of the Regional Board presided over the meeting. Shri Umakanta Tripathy, Special Secretary, Labour & ESI Department attended the meeting representing the Vice-Chairperson. Shri Niranjan Sahu, Labour Commissioner; Shri Ramesh Ch. Rout, Director, ESI Scheme also attended the meeting along with the Employers' and Employees' Representatives.



The Addl. Commissioner and Regional Director highlighted some of the initiatives / actions taken by ESIC during the last one year. He briefed about Atal Beemit Vyakti Kalyan Yojana (ABVKY), importance of DCBOs, issue of Health Passbooks to the Insured Persons and replacement of new IT hardware in the Branch Offices / Hospitals / Dispensaries. Various issues pertaining to improvement in medical facilities, availability of drugs / dressings / equipments etc. and posting of medical / paramedical staff were discussed in the Meeting.

Regional Labour Conference of State Labour Ministers & State Labour Secretaries - Eastern Region

The Regional Conference of State Labour Ministers & Principal Secretaries / Secretaries (Labour) of Eastern States was held on 22.10.2019 at Mayfair Convention Centre, Bhubaneswar. Labour Ministers and Senior Officials of six states, viz., Odisha, Chhattisgarh, Bihar, Jharkhand, West Bengal and Andaman & Nicobar Islands along with senior officials of Labour Ministry, Government of India participated in the Conference. The Conference was inaugurated by Shri Santosh Kumar Gangwar, Hon'ble Union Minister of State (Independent Charge) for Labour & Employment. The Conference was attended by Shri Susanta Singh, Hon'ble Minister, Labour & ESI, Govt. of Odisha; Shri Vijay Kumar Sinha, Hon'ble Minister of Labour

Resources, Bihar; Dr. Shiv Kumar Dahariya, Hon'ble Minister, Urban Administration & Labour, Chhatisgarh; Shri Heeralal Samariya, Secretary, Labour & Employment, Govt. of India; Ms. Anuradha Prasad, Addl. Secretary & DG (Employment), Labour & Employment, Govt. of India and Shri Raj Kumar, Director General, ESIC.



Addressing the Conference, Shri Santosh Kumar Gangwar, Hon'ble Union Minister of State (Independent Charge) for Labour and Employment said that 'Labour' falls under Concurrent list and Central and State Governments makes coordinated efforts for welfare of workers. Regional Conferences help in creating better coordination between Central and State Governments. Central Labour Laws are framed by Central Government but States implement them and bring changes in them keeping in view their special geographical and demographic situation after consultation with the centre. He said that any law can attain its goal by proper implementation and it is the State Governments which are implementing them on ground.



Shri Gangwar said that recently Government of India has taken many steps for the welfare of workforce of the country.

Shri Heeralal Samariya, Secretary, Labour, Government of India said that most of the State Governments have their own pension schemes. But PM-SYM is an independent and individual scheme. So this can be taken up in addition to other schemes of State Governments. He informed that ₹35,000 Crores collected as Cess is lying in different Banks. So the Building and other construction workers should be targeted and they should be given the benefit from this fund.



Shri Raj Kumar, D.G., ESIC while giving a power point presentation on the subject 'Effective coordination with State Government for Improving Service Delivery of ESIC', explained about various Provisions / Benefits under ESI Scheme. He presented the statistical data regarding number of beneficiaries, status of medical arrangement, State Societies and Regional Boards in respect of Odisha, Bihar, Chhatisgarh, West Bengal, Assam and Andaman & Nicobar Islands. He also presented the figures of expenditure on medical services incurred by the States and opined that the figures are not very impressive except in the case of West Bengal. He urged the State Governments to fully utilize the funds as per their entitlements so that ultimately the workers get their legitimate Benefits. He also informed that the condition of paying 1/8th part required to be paid by the State Governments has also been done away with the approval of the Hon'ble Union Labour Minister to reduce burden on the State Government budget.

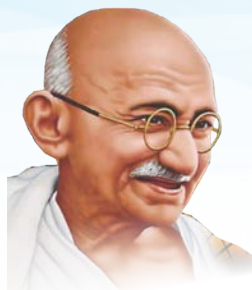
Courtesy
Addl. Commissioner & Regional Director
Regional Office, Odisha

Correction

The Editorial Board regrets that the name of Medical Superintendent of ESIC Super Speciality Hospital, Sanathnagar, Hyderabad has been wrongly mentioned as Dr. Balraj Bhandar in the June, 2019 issue of ESI Samachar under the article 'Hospital in Focus'. The correct name is Dr. K.K. Pal.



Gandhian Thought and Social Security



Gandhian Thought and Social Security

Mahatma Gandhi's thoughts, ideology and philosophy had, has and will always have great impact on India. A Workshop on "Gandhian Thought and Social Security" was organised by ESIC, Sub-Regional Office, Gurugram. The intention of

this workshop was to create awareness on this subject and explore the common grounds of Gandhian thought and Social security.

The participants in the workshop were **Shri D K Mishra**, the then Addl. Commissioner and RD, Haryana, **Shri Ratnesh Kumar Gautam**, Director In-Charge, SRO, Gurugram, **Shri Sidheshwar Prasad Shukla**, Asstt. Professor, Delhi University and Member, ESIC Regional Board, Delhi, **Shri Vinod K Shukla**, Senior Journalist, **Shri Murli Kumar**, Vice President, AITUC, Haryana State Committee, **Dr. Sanjeev Rai**, an educationist and Adjunct Professor, Tata Institute of Social Sciences and **Shri Masab Shamsi**, Head of Worker Assistance Centre for "Safe in India" Foundation, a nonprofit Organisation.

Excerpts of the discussion by each participant are given below:

Addressing the Workshop, **Shri D.K. Mishra**, said that as a luminary, saint and a pioneer revolutionary person, Mahatma Gandhi's ideas have influenced our country in all walks of life.

Shri Ratnesh Kumar Gautam while participating in the Workshop said that the basics of Mahatma Gandhi's thoughts are Truth and Non-violence. The other tenets of Gandhian Ideology are Trusteeship, Satyagraha, Swaraj, Swadesi, Sarvodaya (Upliftment of all), Self-Sufficiency (included in Khadi Promotion), dignity of Labour etc.



The famous ancient Sanskrit phrase "**Serve Bhavantu Sukhinah Serve Santu Nirmayah**", means that all should be happy, all should be disease free, all should be witness to auspicious events and nobody should be unhappy. **The basic of the whole Gandhian thought as well as of the concept of Social Security is welfare only.**

Since, Social Security is a welfare concept, the other aspects of the concept are universalism, compulsory in nature, contributory, defined benefits, wage related, inflation protected, Government as trustee, and so on and so forth. The main benefits under Social Security, that are to be given, as per International Labour Organisation (ILO), are Medical Care, Sickness Benefit, Old Age Benefit, Unemployment Benefit, Maternity Benefit, Family Benefit, Employment Injury Benefit, Invalidity Benefit and Survivors' Benefit.

No doubt, concepts like "Vaishudhaiv Kutumbkam" and "Serve Bhavantu Sukhinah Serve Santu Nirmayah" practiced by Mahatma Gandhi were very near to the concept of Social Security, as practiced today.

Do the idea of social security and the larger panorama of Gandhian thought meet somewhere? Yes, and it is being attempted to explore the common grounds between these two aspects. Many of the characteristics of the concept of Social Security are very much similar or one can say, present in Gandhian thought. It is certain that Gandhi ji has never spoken the words "Social Security" in direct terms. But many of his ideas and thoughts have affected the concept and practice of social security in India. The following points which either affect or are similar to the principles of Social Security:

1. Theory of trusteeship – While discussing commercial aspects of a future Indian constitutional system in the Second Round Table conference, Gandhiji said that the workers who were mostly the untouchables were living at the mercy of the so called higher classes and the States and said that in order to equalize conditions, the first act of the legislature should be to give these people grants of land, the cost of which should come from the moneyed class including from the Europeans.

2. Dignity of labour - Gandhiji always stressed upon the dignity of labour. It was so much so that he himself did all the manual jobs of his household including cleaning of his own toilets. This practice and thought brought a change in the lives of working class in India. The people earning their livelihood through manual labour were given their due dignity.

3. Self Sufficiency – Mahatma Gandhi stressed upon the self sufficiency at every level in the country, be it at the village level, at the community level, at the city level or at the district level. This idea strengthened the livelihood of the local artisans and craftsmen.

4. Swadeshi – Swadeshi was one of the ideals behind our freedom struggle. Gandhiji stressed on swadeshi so that our own small industries and local labourers would get strengthened. Behind swadeshi and self sufficiency, the idea of promotion of khadi was also inherent. Gandhiji gave the idea of strengthening the khadi movement in the country. He himself used charkha for this, so that with the help of that thread only the clothes could be made.

5. Concept of Ashram or commune – In the Tolstoy Ashram,



Gandhiji promoted the idea of working as per ones capability/ means and the rewards/take aways by the inhabitants of the Ashram was as per the need of the individual. This is similar to the Medical Care Benefit being provided by ESIC. In this scheme also, the contributor i.e. the Insured Person contributes as per his salary or income, but the medical care that is provided by ESIC is as per the requirement of the Insured Person and his family members.

Shri Sidheshwar Prasad Shukla said that Mahatma Gandhi has made impact not only on India but throughout the world. He said that Mahatma Gandhi is truly the father of nation and due to his concept of Sarvodaya or universal welfare, the concept of social security has to be universal. He wished that organizations like ESIC and EPFO should try to further their coverage to make the social security benefits universal in nature for the entire country.

Gandhi was very close to nature. Everything which is natural to the people, very close to the people was always emphasized by Gandhi. Gandhi's theory of trusteeship means 'Social Security'. For Gandhi, nation is Social Security. There is no nation without Social Security. On Trusteeship Gandhi writes, it is the responsibility of the nation to give Social Security to backward class. It is different from the Marx. Marx says, it is the right to take Social Security. Gandhiji says it is the duty of the nation to give Social Security. Nelson Mandela says neither it is the right nor the duty of the nation; he says it is the abundant principle. Gandhiji says no Nation without Social Security.

Without ESI, it is issue of life and death for some people. For some people it is about their life, it is so important. Social Security is such a diverse phenomena that it cannot be done only through offices, it has to be done in field and more one is there in the field, the more Social Security will be provided to more members. We have to follow Gandhiji as far as Social Security in this country is concerned.

Shri Vinod K Shukla said that all social work undertaken and inspired by Mahatma Gandhi lead to social security of one or the other class.



उन्होंने आगे कहा कि गांधी जी का सामाजिक सुरक्षा का दायरा बहुत बड़ा है। जैसे पोस्ट रिटायरमेंट, पेंशन, हितलाभ देना लोगों को सामाजिक सुरक्षा दिलाना। महात्मा गांधी जी ने खादी की बात की, समाज सुधार की बात की, चरखे की बात की, ग्राम समाज एवं आत्मनिर्भरता की बात की। गांधी जी के चरखे से हमें स्वावलम्बी बनने की प्रेरणा मिलती है। गांधी जी ने सामाजिक सुरक्षा सुनिश्चित करने के लिए परम्परागत उद्योगों की

बात की।

उनके विचार में काफी नैतिक मुद्दे और आर्थिक मुद्दे भी थे, उनके विचारों के कारण एक भारत बना, तो उनके विचारों के कारण भारत एक भारत देश बना। उनके विचार व सुरक्षा के आधार बने। जैसे स्वदेशी अपनाओं, अस्पृश्यता हटाओ, स्वावलम्बन एवं सभी की उन्नति सामाजिक न्याय होना चाहिए। इसके फलस्वरूप ई.पी.एफ.ओ. एवं कर्मचारी राज्य बीमा निगम जो कि बीमांकित व्यक्तियों को मैडिकल हितलाभ, मृत्यु हितलाभ, बेराजगारी हितलाभ इत्यादि सामाजिक सुरक्षा प्रदान करने वाले संगठन अस्तित्व में आए।

Dr. Sanjeev Rai, said that the relevance of Mahatma Gandhi's thought in education, in social security, in corporate social responsibility and in all other fields will always be there.

अनुसार महात्मा गांधी का एक बहुत बड़ा कैनवेस है, जिससे हमें उनकी सादगी, उच्च विचारधारा एवं स्वावलम्बी होने का पता चलता है। यदि हम गांधी जी के विचारों को अपने जीवन में ढाल लेते हैं तो यह हमारा सामाजिक योगदान रहेगा।

श्री मुरली कुमार ने कहा कि मैं सन् 1979 में मजदूर बना और 1979 में ही कर्मचारी राज्य बीमा निगम का सदस्य बना। ईएसआई एक्ट की स्थापना सन् 1948 में की गई थी लेकिन इसके पीछे के मूल्य श्री गांधी जी के द्वारा दिए गए थे।

श्री मसब समसी ने कहा कि गांधी जी से हमें सच बोलना, श्रमदान करना सिखाया। उनसे हमें सामाजिक सुरक्षा के बारे में सीखना चाहिए।

श्री डी.पी. सिंह, उपनिदेशक ने कहा कि श्री महात्मा गांधी जी की एक विशेषता थी कि उन्होंने पहले किया और फिर उस अनुभव से सफलता कैसे मिले इस बारे में समाज को बताया। गांधी जी एक बड़े समाज सुधारक थे, एक सामाजिक कार्यकर्ता थे। सामाजिक सुरक्षा में हमने काफी कुछ प्राप्त किया है और अभी बहुत कुछ प्राप्त करना बाकी है।

श्री राजेंद्र यादव, सहायक निदेशक ने कहा कि कर्मचारी राज्य बीमा निगम में बहुत कम अंशदान लेने पर भी बीमांकित व्यक्ति को सामाजिक सुरक्षा देते हैं यह पूरे संसार की सबसे उच्च कोटि की स्कीम है जो कि महात्मा गांधी के विचारों से प्रेरित हैं।

निदेशक (प्रभारी), उप क्षेत्रीय कार्यालय, गुडगांव ने कार्यशाला में उप. संहार करते हुए कहा कि महात्मा गांधी जी ने भारत के लोगों को खादी के आन्दोलन से सेल्फ सफिशियंट बनाने की कोशिश की। जिसकी जितनी जरूरत है उसी के हिसाब से अपना अंशदान देगा, व्यक्ति का खाना-पीना, रहन-सहन सब का एक जैसा रहेगा। कर्मचारी राज्य बीमा निगम की मेडिकल स्कीम भी इसी तरह की है बीमांकित व्यक्ति की सैलरी का 4 प्रतिशत लिया जाता है और बीमांकित व्यक्ति और उनके परिवार को मेडिकल सुविधा पूर्ण रूप से दी जाती है। अंत में, **श्री सुनील कुमार यादव**, उप निदेशक ने सभी प्रतिभागियों को इस महत्वपूर्ण विषय पर चर्चा एवं प्रकाश डालने के लिए धन्यवाद ज्ञापित किया।





HOSPITAL IN FOCUS

ESIC Model Hospital, Bapunagar, Ahmedabad, Gujarat



Dr. Veena Kumari

ESIC Model hospital Bapunagar is situated in the heritage city of Ahmedabad in the State of Gujarat. Bapunagar named after Bapu which refers to Mahatma Gandhi, is an area having number of flour mills, Textile Mills and factories and basically a residential area of mill and factory workers. The location of this hospital

known as Model Hospital, Bapunagar,

General Hospital gives a huge advantage to Insured persons and families to attend and avail medical services at a nearest destination.

The Hospital, spread over an area of 35048 Sq.Meter was taken over by ESIC from the Government of Gujarat on 07/01/2006 and shifted into the newly constructed building in February 2011. Sanctioned as 300 beds but commissioned at 250 bedded hospital, the new building stands tall at 2 floors in OPD and administrative block with ward block in 5 floors. The Hospital building is well lit, well ventilated, has manicured lawns and beautiful garden. Hospital has adequate earmarked parking area for the ease of the movement of visiting beneficiaries. The Hospital caters to the medical need of 8.25 Lakh insured persons and staff and pensioner of ESIC Gujarat.

The Hospital is ISO 9000:2015 certified and ESIC 2.0 compliant, delivering standard secondary care services. Being a Model Hospital, MHB proudly shoulder the additional responsibility of patient referred from far off areas like Surat, Baroda, Ankleshwar, Jamnagar, Bapunagar, Rajkot in addition to 42 dispensaries and hospitals in and around Ahmedabad. The footfall of OPD patients is around 1600-1800 per day and in door patient is 175-200 per day with the bed occupancy varying from 68 to 80 % depending on seasons. The hospital is compliant with all statutory laws including ELORA, PNDT registration, Bio-Medical waste management, Fire Fighting Equipment etc. Solar Panel system has been installed on the rooftop for power generation and is functional since 1st October 2019 making the hospital Eco-friendly and self reliant in power. Security and safety in and around the hospital is managed 24 X 7 by security agency and through CCTV monitoring.

Patient/ Hospital Services:

Clean, hygienic environment, adequate seating arrangements, availability of potable drinking water, clean hygienic toilets including special toilets for differently abled greet the visiting patients at the Hospital.

May I Help Desk, Medical Social Guide assist and guide the patients. Queue Management System displays at registration and consultation rooms ease the flow of patient. Senior Citizens and pensioners are provided with separate counter

at registration as well as consultation. Hospital is working on Dhanvatri Module in all departments. Visiting patients are provided with OPD and indoor services in all specialties by dedicated team of Specialists, doctors and senior residents and nursing and paramedical staff. OPD services are provided 9 A.M. To 4 PM in Medicine, Surgery, Orthopedic, Paediatrics, Obs & Gynecology, Skin & VD, ENT, Eye, Psychiatric, Dental and AYUSH Departments. Hospital has a well equipped physiotherapy and Occupational Therapy Department with efficient therapists. The Department is famous with beneficiaries for the rehabilitation and supportive services provided.

Emergency services are provided 24 x 7 by 14 bedded casualty wing having an attendance 70-100 per day. The casualty is run by a dedicated team of Doctors, Nursing staff and Paramedical Staff. It has round the clock ambulance service. Diagnostic services are provided by a fully equipped state-of-the-art Laboratory and Radiology Departments functioning 24 x 7.

The Hospital provides AYUSH Services (Ayurveda, Homeopathy & Yoga) to beneficiaries along with therapies like Panchkarma & Ksharsutra. Well maintained Ayurvedic garden with approximately 50 medicinal plants bring calmness and freshness to the surroundings. The hospital is a proud participant in 8th WAC Arogya Expo 2018 organized by Government of Gujarat and set up a stall dedicated to various Ayurvedic Medicines.

The Hospital has a fully functional in-house Laundry, CSSD and Kitchen. All Indoor patients are provided with nutritional hygienic meal and customized diet under the guidance of a well qualified dietitian who also provides counselling to patients.

The hospital has 5 fully functional Operation Theater including 4 modular O.T. On an average 350 major and minor surgeries are conducted in a month. OTs are operational 24 x 7.

The Hospital is the only ESI Hospital in Gujarat providing joint replacement and arthroscopic surgeries. (10-12 surgeries per month).

Procurement of new set of computers, essential equipments have upgraded and strengthened the Departments in performing efficiently. The Hospital has a well stocked and robust pharmacy for procuring Medicines & Equipment and their Maintenance.

Hospital is a nodal center of Dots and ART in collaboration with Ahmedabad Municipal Corporation and also has an immunization center for vaccination. The hospital has a fully functional Dialysis Unit on PPP mode with CDC, has 10 dialysis machines and approximately 450 dialysis are done in a month. The beneficiaries' need in all SST is met through empanelment with reputed private Hospitals including organ Transplant like kidney, Liver and Bone Marrow. This has resulted in patients

coming from neighbouring states like Rajasthan to avail these facilities.

The Hospital has its own Antibiotic Policy in place. Various committees like Infection Control Committee, Death Review Committee, and Quality Control Committee meet regularly for periodic evaluation. Hospital has efficient ICC in place.

Hospital has a good Public Grievance Redressal System. Suggestion boxes are marked and easily noticeable. Feedback forms are also made available and Medical Social Guide and PG Officer are easily accessible for resolving grievance. Hospital provides weekly Jan Suraksha Mobile Van service to different areas of Ahmedabad.

Health check camps are conducted regularly in various factories and establishment as a considered effort to reach out to Insured Person for creating awareness about ESIC and its benefits and health issues. Health Talks and Exhibitions are conducted regularly in nearby schools.



The Hospital has an attached Nursing School with an intake of 20 students per year. Students of the schools have been among the GNF toppers.

New Initiatives:

- Hygienic canteen Service has been started for providing hygienic food to the visiting beneficiaries.
- Pensioners Adalat was conducted which saw attendance of nearly 60 pensioners and was well appreciated by them.
- 14 bedded ICU to be started by October-2019 end. This will help in increasing the number of high risk surgeries performed as well as decrease the referral load.
- Started services under Urology.
- Starting Audiometry.
- DNB accreditation.
- Capacity building: Regular behavior training of Doctors & Staff are organized for strengthening the manpower. Training on HIV and ICU was also conducted. Regular CME are conducted for upgradation of Doctors.

Important Extraordinary Cases:

- 1) Paediatric Department under HoD Dr. Chitra Prakashkar take initiative to do something extra and has diagnosed rare cases, ensuring early treatment and effective management.
 - (a) Divya Vaghela : Incontinentia pigmenti – (a very rare

X-linked dominant genetic disorder) involving skin, eyes , CNS, teeth etc was diagnosed with the help of the special genetic tests at Shri Ganga Ram Hospital, New Delhi. Patient was treated symptomatically and with Intravitreal injection & Laser for Eye (at higher center). Case Report has been sent for Index Journal Publication.

- (b) Vedant Luhaniya from Mehsana presented with undiagnosed hemolytic anemia and large spleno megal was sent for RBC Membrane Defect study at NIIH Wadia Hospital, Mumbai. Diagnosed as RBC Membrane Enzyme defect anemia, Patient was managed effectively with Splenectomy and supportive treatment.
- 2) ENT Department under HoD Dr. Sunil Borisa with Senior Resident Dr. Vaidik Chauhan have diagnosed and operated many rare cases successfully. These are published in various National and International journals. Few are mentioned below:
 - (a) Temporal Bone Osteoma(Incidence Rate 0.1 to 1% all benign tumours of skull)
 - (b) Nasolabial/ Dentigerous cyst (0.7% of all cyst in Head and Neck region)
 - (c) Torus Mandibularis.

Story of Human Interest:

1. Siddhi Sanghvi 21 years IP with Hodgkins lymphoma was advised Autologous Bone marrow transplant, was timely approved and referred to Empanelled Hospital -Apollo Amrishi Hospital . Bone Marrow transplant was successfully done. Patient is recovering and IP and family have expressed sincere gratitude to ESIC and are full of praise for ESIC.
2. Mr. Majirana, MTS was in pain , depression and absenting frequently from duties due to Bilateral AVN. Underwent Bilateral THR at the Hospital. He is a completely changed man now. There is a palpable transformation in his attitude towards self, life and duty. One could see him cheerfully performing his duties with responsibility. He feels his life has changed and is indebted to the organization.

ESIC Model Hospital Bapunagar celebrated special days with enthusiasm like Hindi Divas, International Yoga Day, International Women's Day, Independence Day, Republic Day etc. Hospital has also actively participated and carried out various initiatives like Swachhata Pakhwada, ESIC Fortnight, Swachhata hi Seva successfully. Team building and bonding is also facilitated by promoting celebration of various events and days like Doctors Day, Nursing Day, Pharmacist Day, Lab Technician Day, Radiographers Day, Mental Health Day etc.

The Hospital is committed to its mission of quality patient care and is proudly shouldering this responsibility with dedication.

Courtesy
Medical Superintendent
ESIC Model Hospital, Bapunagar



HOSPITAL IN FOCUS

ESIC Hospital, Naroda, Ahmadabad, Gujarat



Dr. Rajesh Jagad

The ESIC General Hospital Naroda is situated in a sprawling area of 27 acres of land. The built-up area of the hospital is 4.18 acres. This hospital was inaugurated by Shri Nawab Mehndi, the then Governor of Gujarat on 26th February, 1962 and the hospital was running as Chest Diseases Hospital under the state government. ESIC

took over the hospital on 01.04.2010

from the state government and named it as General Hospital Naroda. Initially, the hospital has 30 beds and the bed strength has been upgraded to 50 from 01.04.2017 onwards.

The hospital provides OPD and Indoor Services in General Medicine, General Surgery, Obstetrics and Gynaecology, ENT, Ophthalmology, Pathology, Orthopaedics, Diet Service, Homeopathy, Anaesthesia, Ayurvedic, Dermatology, Physiotherapy, Pharmacy, Pathology, and X-ray. The hospital also provides services like 24 hours security, house keeping, ambulance, May I Help You Desk and referral services for super speciality treatment etc.

After renovation, the Operation Theatre was inaugurated on 01.03.2019.

The hospital provides following services to the ESI Insured Persons and their dependants:

Laposcopic surgery MIPH, Urosurgery, Chemotherapy, TLH (first among all ESIC hospitals in Gujarat), Major Gastrosurgery, open surgery, ENT minor surgery, Orthopedics minor surgery and gynecoloty & Obstetrics. The hospital also planned TKR, THR and major orthopedics surgery from November, 2019 onwards. The Labour Room has also been started in the hospital.

The hospital also provides routine health checkup, ANC screening and identify high risk pregnancy and early intervention, general health chek-up in industrial premises, health education regarding maternal and child health component, communicable diseases, non-communicable diseases, infectious diseases, immunisation, occupational health diseases etc.



The hospital has introduced Que management system and CCTV surveillance and provides sufficient sitting arrangements for IPs an beneficiaries. Erection of solar panel for electricity is under process.

The hospital also conducts CMEs on different diseases and on latest medical topics. The hospital also orgained workshops on positive attitudinal and behavioural training among staff and doctors and on awareness program regarding plantation within the campus including ayurvedic and also arranged workshops on cleanliness.

Courtesy
Medical Superintendent
ESIC Hospital, Naroda, Ahemdabad





HOSPITAL IN FOCUS

कर्मचारी राज्य बीमा निगम अस्पताल, वापी, गुजरात



डॉ. अनिल कुमार सगर

कर्मचारी राज्य बीमा निगम अस्पताल, वापी पूर्व में 50 बिस्तरों वाला अस्पताल था, जिसे बढ़ाकर 100 बिस्तरों वाला कर दिया गया है। इस अस्पताल में औसतन 450-500 बीमित व्यक्तियों एवं आश्रित जनों को उच्चस्तरीय सेवाएं प्रदान कराने की पूरी कोशिश की जाती है।

इस अस्पताल में निम्नलिखित विभाग अपनी स्वास्थ्य सेवाएं प्रदान कर रहे हैं:

1. शिशु विभाग
2. प्रसूति एवं स्त्री रोग विभाग
3. मेडिसिन विभाग
4. अस्थि रोग विभाग
5. नेत्र रोग विभाग
6. दंत रोग

विभाग तथा 7. आयुर्वेद विभाग

अस्पताल में पैथोलॉजी, एक्स-रे, ईसीजी, आदि जैसी सुविधाएं बीमित तथा उनके आश्रितजनों को प्रदान की जाती हैं और आधुनिक सुविधाएं देने के लिए अस्पताल तीव्र गति से प्रगति की ओर अग्रसर है।

इस अस्पताल में प्रसूति तथा नेत्र शल्य चिकित्सा भी शुरू की गई है। **Secondary Care** के लिए अस्पताल में कार्य करना शुरू कर दिया गया है। जल्द ही यह सुविधा भी प्रदान होने लग जाएगी।

सौजन्य

चिकित्सा अधीक्षक,

क.रा.बी.निगम अस्पताल, वापी, गुजरात

New Beginnings for the Little Hearts

The Paediatric Department at ESIC Hospital Vapi recently underwent upgradation.

A regular Paediatric and neonatal intensive care specialist is available who along with the team of other specialists and residents render OPD and IPD services to the children till age group of 16 yrs. Paediatric complications including Dengue shock, enteric fever, sepsis, cellulites etc are treated in the hospital.

The outpatient services being provided include High risk follow up for newborn, screening for congenital hypothyroidism, growth and nutrition monitoring, adolescent health clinic, asthma clinic, neurology /epilepsy follow up clinic where children with cerebral palsy are also followed up and haematology clinic where children with thalassaemia and red cell aplasia etc are regularly followed up and timely referral services are available.

The Immunisation services are being provided once a week for all children. Children with acquired or congenital heart diseases, bronchial asthma and renal diseases are advised regarding special vaccines and being administered the same under the care of the paediatrician.

Equipments that have been recently procured include a neonatal warmer, 3 in 1 electronic weighing scale and examination bed.

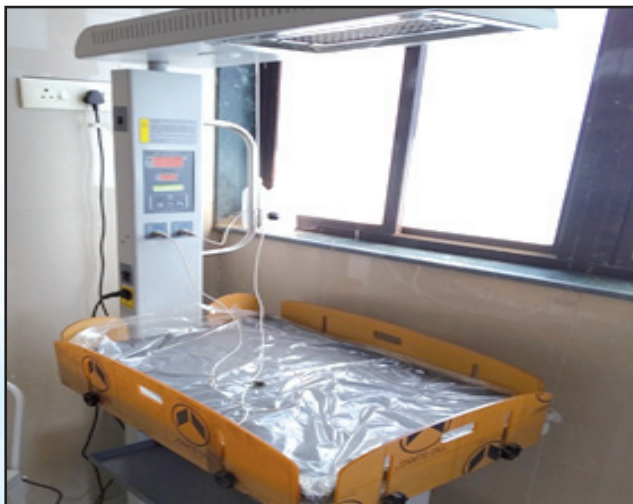
Special emphasis is given for treatment and prevention of malnutrition. And we counselling for the same is done in Paediatric OPD.

Courtesy

Dr. Deepa Shetty (Specialist Gr.II)

Dr. Paras Patel, PTCS

ESI Hospital, Vapi, Gujarat



Neonatal warmer, 3 in 1 electronic weighing scale and examination bed



HOSPITAL IN FOCUS

ESIC MODEL HOSPITAL, ROURKELA, ODISHA



Dr. Jayanti Behera

The hospital is located in a scenic ambience at the outskirts of 'Steel City', Rourkela on a land of 16,305 Sq.m. The main hospital building along with 52 numbers of staff quarters stand inside hospital complex occupying 3170 Sq. Meters. One sump well has been constructed with capacity of 50,000 litres of water storage in the campus and also loaded with water 24 hours and water is supplied to the hospital and all the staff quarters. A beautiful flower garden surrounds the hospital.

The hospital is a 50 bedded one. Initially it started with 10 beds. Now it functions with two wards – one for male, the other for female. In addition, 10 beds in Casualty for patients kept under observation.

The hospital was taken over by the Corporation from State Government, as a 'Model Hospital' in the year 2003 (w.e.f. 01.05.2003).

The ESIC Model Hospital is an ISO 9001-2015 certified and ESIC 2.0 compliant hospital. CCTVs are installed at strategic locations of the hospital and arrangement have been made for round the clock security through ex-military personnel.

In order to provide super speciality treatment and facilities not available with this hospital, tie-up arrangements have been made with renowned private /govt. medical institutions

A canteen is functioning inside the hospital to provide cooked food for the in-patients free of cost. It includes breakfast, lunch and dinner.

Administration

Medical Superintendent is the Administrative Head of the Hospital. He is assisted by one Dy. Medical Superintendent and 2 Administrative Officers including one Ass. Director (Fin.). The Hospital is a separate Account Unit of the ESI Corporation.

Departments of the hospital

The hospital is having departments in Anaesthesia, Dental, ENT, Eye, General Medicine, Pathology, Orthopaedics, Paediatrics, Pulmonary Medicine (TB & Chest), Radiology, Physiotherapy, Skin & General Surgery.

This Hospital is currently providing medical care to patients through OPD, Indoor and Casualty. 10 additional beds are provided in Casualty Department and emergency services are provided round the clock. A full time Ayurveda Medical Officer is posted in this Hospital. A part-time Yoga instructor has been engaged in this hospital to give necessary yogic advice to the patients.

Operation Theatre / Labour room

Surgeries both major and minor in the areas of Gen. Surgery, ENT and Orthopaedics are conducted in the OT of this hospital. Laparoscopic surgeries are also being done.

Indradhanush (VIBGYOR)

As per Hqrs. guidelines, bed sheets of wards are being changed every day as per VIBGYOR pattern. Bed sheets with different colours are used on different days of the week. Violet coloured bed sheet for Monday, Indigo for Tuesday, Blue for Wednesday, Green for Thursday, Yellow for Friday, Orange for Saturday and Red for Sunday.

Aadhar enabled biometric attendance (AEBAS) (Govt. of India Initiative)

In accordance with the instructions of Hqrs. Office, Aadhar Enabled Biometrics Attendance System (AEBAS) has been installed for staff and officers, contract workers and security personnel.

This Hospital is has constituted Internal complaints committee to redress grievance of working women. Similarly, Public Grievance Redressal System in PG Module (PG 2.0) is in place to address the grievances of ESI beneficiaries in particular.

Health check-up camps

Health Check-up Camps are being organized every month for insured persons and their family members at their work place at Rourkela Steel Plant, Rourkela and other work places.

On-line processing and scrutiny of tie-up hospital bills

At present, patients are being referred to Tie-up Hospitals on-line through UTI Module.

Queue management system

Queue Management System is in operation in this Hospital with effect from 05.09.2019 in pursuance to Hqrs. Office instructions.

Courtesy
Medical Superintendent
ESIC Model Hospital, Rourkela



Case summary – Baby of Kavitha (IP No. 51 – 22485892)

Neonatal Intensive Care Unit (NICU), Division of Neonatology, Department of Pediatrics ESIC Medical College & PGIMSR, K. K. Nagar, Chennai

Twenty third August 2018 was a memorable day for the NICU of ESIC MC & PGIMSR hospital, K.K. Nagar Chennai. It was the day B/o Kavitha, our tiniest superstar weighing merely 480 grams was affectionately welcomed into our NICU. Though our NICU is well equipped to handle high risk babies and we have had several babies weighing less than 1 kg previously, this baby was rather special as until then our smallest nursery graduate had weighed 650 grams at birth. A pre warmed open care system, a ventilator as stand by and a team of well-trained nurses and doctors were awaiting the arrival of this new inmate.

This little baby girl was born at about 7 months of gestation by emergency caesarean section to a 33-year-old mother on 23/8/18 at 12:45 PM. The emergency section was necessary as the mother had severe placental insufficiency rendering further continuation of the pregnancy dangerous to the baby. Due to marked intrauterine growth restriction the baby had a very low birth weight; she weighed only 480 grams. She cried well soon after birth but had fast and labored breathing. She was immediately shifted to the NICU and was started on non-invasive respiratory support.



Baby soon after birth in the NICU

Parenteral nutrition with IV fluids and proteins right was started on the first day to prevent further nutritional compromise of this already growth retarded baby. Though this NICU infection rates are very low, as a result of a very strict rational antibiotic policy, the team of staff nurses and doctors were extra careful in following all the sterile techniques while handling this baby and while preparing parenteral nutrition. Instructions were given regarding strict hand washing, minimal handling and a plastic sheet was spread over the bassinet to minimize evaporative losses. It was decided to minimize blood sampling as any prick would breach the skin, thus giving access to microbes and we knew that any significant infection would be fatal in such a small baby.

Her respiratory condition improved within 24 hours of life and she was off respiratory support. However, as expected she developed recurrent cessation of respiration namely, apnea of prematurity, on the second day of life, which was treated

successfully with intravenous caffeine citrate. Very minimal tube feeds of 1 ml of expressed breast milk every 4 hours was started, but she developed vomiting and abdominal distension hence trophic feeds had to be stopped and nutrition had to be maintained only with intravenous nutrients. Oral feeding continued to be a very challenging problem. Tube feeds were restarted at very minimal levels and very cautiously increased. Ultimately, full feeds were reached successfully only by 21 days of life.

The baby developed a gamut of complications – anemia of prematurity, osteopenia of prematurity, recurrent hypoglycemia and retinopathy of prematurity during her hospital stay. All these problems were carefully looked out for and treated appropriately.



Gradual progress in the clinical condition of the baby from birth to 8 months of age

The mother was taught to handle the baby and give expressed breast milk after breast feeds along with the warmth provided by skin to skin contact. This “kangaroo mother care” helps in establishing a good mother baby bonding which in turn ensures optimal lactation. The baby demonstrated a steady weight gain, had no further active problems and was discharged at 69 days of life with a weight of 1.2 kg, which is almost thrice her birth weight. At present she is 1 year old and weighs 6 kg. She is on regular follow up in our high risk new born follow up clinic and is developmentally and neurologically normal.

The successful outcome of this baby made us look back upon the factors that had protected her from an adverse outcome inspired of all the risk factors. Strict hand washing, minimal handling, very few skin breaches for blood sampling protected the baby from infection and excellent and dedicated nursing care contributed to a morbidity free survival. These are very low-cost measures that go a long way in saving extremely low birth weight babies!

The Division of Neonatology at ESIC Medical College & Hospital, K. K. Nagar, Chennai is headed by Dr. Shobhana Sivathanu, Professor and Head, Department of Pediatrics. She, along with a very dedicated and competent team, ensures very high-quality neonatal services for the babies of the IPs.



Reconstruction of Mandibular Defect - A Case Report

Abstract:

A 11 yr. old male child came to the OPD with a swelling in the cheek and was diagnosed of having a cyst in the mandible. Segmental resection of mandible was done and the defect was reconstructed with a free osteocutaneous fibula flap. Biopsy report revealed a locally aggressive giant cell granuloma.

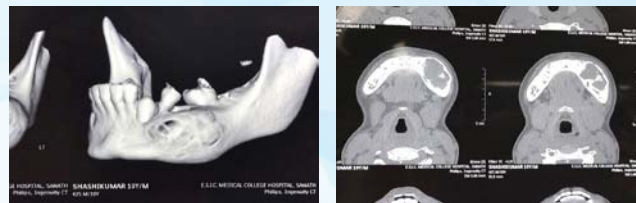
Case Study:

A 11 yr. old male child came to the OPD with a rapidly progressive swelling in the right cheek since 4 months, associated with pain. Radiological investigations revealed a cyst in the mandible with destruction of outer and inner cortices.

Biopsy revealed a central giant cell granuloma with no evidence of malignancy. But, owing to the rapid progression and destruction of both the cortices, segmental mandibulectomy was planned.

Intra operatively, segmental mandibulectomy was done leaving 5cm mandibular defect, which was bridged with free osteocutaneous fibula harvested from left leg, after harvesting fibula was fixed to mandible with 2mm titanium mini plates, facial vessels were dissected and microvascular anastomosis done, Skin paddle was used for post op monitoring.

Postoperative biopsy revealed a locally aggressive central giant cell granuloma, and child is being evaluated for parathyroid disorders. on 1 month follow-up, child is asymptomatic, free of pain.



Discussion:

Locally aggressive giant cell granuloma of mandible is a rare entity with few case reports in the literature and requires treatment with segmental resection of involved bone. Young individuals benefit with reconstruction with a vascularized bone graft which gives improved stability to the bone and minimal or no chances of resorption in the future and a better base for fixing dental implants.

Conclusion:

Reconstruction with osteocutaneous free fibula is the gold standard management for mandibular defects. A pediatric mandibular tumour reconstructed with a vascularized fibula in a recently established plastic surgery department of 8 months old is a challenging task and an achievement.

Courtesy

Dr Manikumari, Dr Subha, Dr Beena
Department of Plastic Surgery,
ESICMCH, Sanathnagar, Hyderabad.

Successful accomplishments of Dept. of Obstetrics & Gynecology

The Department of Obstetrics and Gynecology in ESIC Medical College, Sanathnagar is academically proactive. The Department of OBG has several accomplishments to its credit. One of the highlights of the achievements is the launch of Health Education Programme for Antenatal women. This programme is dedicated to the Border Security Forces of our country who continuously strive for our safety. The video was forwarded by our Dean, Dr. Srinivas and launched by Medical superintendent Dr.K.K.Pal.

On an average, per day 300 pregnant women attend the Antenatal OPD. In order to increase awareness among them, the medical collage has come up with the Health education programme that has educational videos on various aspects of periconceptional care, common symptoms, danger signs, care of the postnatal mother and breast feeding etc etc. These videos have been recorded in our department by our faculty with pictorial aids and educative talks. As the patients have to wait in the OPD, the videos are displayed in the waiting area so that they can empower themselves with the knowledge regarding prenatal and postnatal care during their waiting time for consultation.

For the benefit of inpatients, the department has strategically arranged posters depicting breast feeding, perinatal exercises,

nutritional advice. There are posters in the emergency ward for the health care professionals to guide with regard to waste disposal and management of life threatening emergencies such as antepartum and postpartum haemorrhage, antepartum eclampsia.

Courtesy

Dr. Hari Anupama, Prof. & HOD,
ESIC Medical College, Hyderabad



“Swachhata Hi Sewa” Campaign

Headquarters Office

“Swachhata Hi Sewa” campaign was observed at all establishments of ESIC from 19.09.2019 to 02.10.2019. During the campaign, special drive for cleanliness of premises, tree plantation for clean environment, creating awareness among Insured Persons/Beneficiaries/General Public/Officials was carried out.



ESIC Headquarters Office observed “Swachhata Hi Sewa” on 30.09.2019. All the employees wholeheartedly participated in the campaign. Shri Raj Kumar, Director General, Ms. Sandhya Shukla, Financial Commissioner, Ms. Garima Bhagat, CVO, Dr. R.K. Kataria, Medical Commissioner, Shri A.K. Sinha, Insurance Commissioner, Shri M.K. Sharma, Addl. Commissioner, Shri P.B. Mani, Addl. Commissioner, Shri Pranay Sinha, Director and other Officers and Staff carried out cleanliness drive in and around Hqrs. office premises.



Addressing the gathering on the occasion, Director General urged for change in behavior towards cleanliness and stop usages of plastic. Saplings were also planted in support of this campaign. Better hand wash techniques and segregation of wastes were also demonstrated by a team of medical professionals led by Dr. Pratima Dave.

ESIC Model Hospital, Chandigarh

ESIC Model Hospital Ramdarbar, Chandigarh celebrated 150th Birth Anniversary of Father of the Nation, Mahatma Gandhi on 2nd October, 2019 with great enthusiasm to spread Gandhi Ji's message of Non-Violence and cleanliness among the masses.

The programme started with the Gandhi Ji's famous Bhajan “Vaishnav Jan To Tene Kahiye Je Peed Parai Jane re” to pay tribute to him.

Many staff members recited poems and sang songs based upon Gandhi Ji's life. A quiz on the life of Gandhi Ji and Swachh Bharat Mission was also organized and the winners

were presented eco friendly (green Sapling) gift prepared by the gardener of the hospital, using waste plastic (empty) glucose bottles. An eco friendly gift (glass bottle) was also given to all participants of the programme. “A permanent wall of cleanliness” was developed and decorated in the premises of the hospital where all the posters, slogans, cloth bags, and other awareness material, prepared during the “Swachhata Hi Sewa Fortnight” were displayed in order to remind all staff members and the visitors to say no to Plastic and to keep the hospital clean. Winners of various competitions like slogan making, poster making, cloth bag making were also felicitated with plant saplings and a glass bottle to spread the message of green and clean environment and Say no to plastic.

क्षेत्रीय कार्यालय, जयपुर

श्री हीरालाल सामरिया, सचिव, श्रम एवं रोजगार मंत्रालय, भारत सरकार द्वारा क्षेत्रीय कार्यालय, जयपुर का निरीक्षण किया गया। दौरे के दौरान उन्होंने ईएसआईसी



अस्पताल, जयपुर में श्रीमती रीता लोधा को मैटरनिटी फायदे के अंतर्गत 1.22 लाख रुपए का चेक सौंपा। साथ ही ई एस आई सी द्वारा बीमितो को दिए जा रहे हितलाभ संबंधी पोस्टर का विमोचन किया एवं उचित दिशा निर्देश देकर कार्यालय के कर्मचारियों को स्वच्छता के लिए भी प्रोत्साहित किया।

ESIC Regional Office, Telangana

The Regional office and Branch offices participated in the Swachhata Hi Sewa campaign organised from 19.09.2019 to 02.10.2019. All employees actively participated in various activities organized on the occasion such as weeding out of old records, cleaning of tables, benches and windows and segregation of Dry and Wet Waste.

ESIC Sub-Regional Office, Ludhiana

The Sub Regional Office, Ludhiana along with all its subordinate offices observed Swachhata Hi Sewa campaign on the occasion of 150th Birth Anniversary of Mahatma Gandhi on 2nd October, 2019. On this occasion, various activities like plantation of saplings, cleanliness drive for improving the external and internal ambience of the ESIC buildings etc. were undertaken.



30वां अखिल भारतीय राजभाषा सम्मेलन

निगम के 30वें अखिल भारतीय राजभाषा सम्मेलन का आयोजन दिनांक 30-31 अगस्त, 2019 को इन्दौर में सम्पन्न हुआ। सम्मेलन की अध्यक्षता महानिदेशक श्री राजकुमार ने की। मुख्य अतिथि सुविख्यात कवि और वक्ता प्रो. राजीव शर्मा थे। इस अवसर पर मुख्यालय के श्री ए.के. सिन्हा, अपर आयुक्त श्री ए.के. त्रिपाठी, संयुक्त निदेशक (राजभाषा) श्री श्याम कुमार के साथ-साथ निगम के संपूर्ण देश में स्थित विभिन्न कार्यालयों में तैनात राजभाषा अधिकारियों, प्रभारी राजभाषा अधिकारियों तथा अनुवादकों द्वारा इस सम्मलेन में सहभागिता की गई।

क्षेत्रीय कार्यालय, इन्दौर के सहायक निदेशक (राजभाषा) श्री राकेश शर्मा ने अपने संबोधन में म.प्र. क्षेत्र के मालवा अंचल का भौगोलिक, धार्मिक, पौराणिक तथा ऐतिहासिक परिचय दिया। उन्होंने इस तथ्य को विशेष रूप से रेखांकित किया कि हिन्दी को राजभाषा बनाने की प्रथम आवाज मालवा क्षेत्र से ही बुलंद हुई थी। दो दिवसीय सम्मेलन में कर्मचारी राज्य बीमा निगम के देश के सभी प्रान्तों के कार्यालयों का हिन्दी राजभाषा प्रगति का

मूल्यांकन किया गया तथा असंगतियों, कठिनाईयों के निवारण पर विमर्श हुआ। सभी क्षेत्रों से आए प्रतिनिधियों ने पावर-प्वाइंट प्रजेन्टेशन के द्वारा अपने क्षेत्रों की राजभाषा संबंधी गतिविधियों की जानकारी दी।



हिंदी दिवस और राजभाषा समारोह के आयोजन

कर्मचारी राज्य बीमा निगम, मुख्यालय

कर्मचारी राज्य बीमा निगम, मुख्यालय में दिनांक 16.09.2019 को हिंदी दिवस समारोह का आयोजन हर्षोल्लास से किया गया। इस कार्यक्रम की अध्यक्षता श्री राज कुमार, महानिदेशक ने की और उन्होंने कार्यालय के दैनंदिन काम-काज में सरल हिंदी के अधिकाधिक प्रयोग पर बल देते हुए सभी के प्रति हिंदी दिवस की शुभकामनाएं व्यक्त कीं।



श्री ए.के. सिन्हा, बीमा आयुक्त ने इस अवसर पर माननीय गृह मंत्री, भारत सरकार के संदेश का वाचन किया तथा श्री श्याम कुमार, संयुक्त निदेशक (राजभाषा) ने हिंदी प्रगति रिपोर्ट 2018-19 प्रस्तुत की। समारोह में हिंदी पखवाड़े के दौरान आयोजित प्रतियोगिताओं के विजेताओं को सम्मानित किया गया। महानिदेशक महोदय ने हिंदी दिवस कार्यक्रम आयोजन को विशेषकर समूह गान को सराहा।

क्षेत्रीय कार्यालय, गोवा

कर्मचारी राज्य बीमा निगम, क्षेत्रीय कार्यालय गोवा में राजभाषा हिन्दी को लोकप्रिय बनाने के लिए माह सितंबर, 2019 में 04 हिन्दी प्रतियोगिताओं यथा निबंध प्रतियोगिता, राजभाषा ज्ञान प्रतियोगिता, टिप्पण एवं आलेखन प्रतियोगिता और वाक् प्रतियोगिता का आयोजन किया गया जिसमें क्षेत्रीय कार्यालय के अधिकारियों तथा कर्मचारियों ने बढ़-चढ़ कर हिस्सा लिया।

क्षेत्रीय कार्यालय गोवा में दिनांक 26.09.2019 को क्षेत्रीय निदेशक प्रभारी श्री नरेंद्र मोहन ओझा की अध्यक्षता में हिंदी दिवस समारोह बहुत ही उत्साह एवं हर्षोल्लास के साथ मनाया गया। समारोह में मुख्य अतिथि श्री सुब्रतो बनर्जी, प्रबंधक राजभाषा अधिकारी, बैंक ऑफ इंडिया, गोवा थे तथा क्षेत्रीय कार्यालय गोवा के अधिकारी एवं कर्मचारी उपस्थित थे।

क्षेत्रीय कार्यालय, गुवाहाटी

क.रा.बी. निगम, क्षेत्रीय कार्यालय, गुवाहाटी में दिनांक 01 से 15 सितम्बर, 2019 तक धूमधाम से राजभाषा पखवाड़ा तथा 16 सितम्बर, 2019 को हिन्दी दिवस समारोह का आयोजन किया गया। राजभाषा पखवाड़े के दौरान कार्यालय का पूरा वातावरण हिन्दीमय हो गया।

दिनांक 02.09.2019 को राजभाषा पखवाड़ा का उद्घाटन हर्षोल्लास से किया गया। पखवाड़े के दौरान चार प्रतियोगिताओं— हिन्दी वाक्/संभाषण प्रतियोगिता, हिन्दी टिप्पण—आलेखन प्रतियोगिता, हिन्दी निबंध प्रतियोगिता एवं राजभाषा प्रश्नोत्तरी प्रतियोगिता का आयोजन किया गया। इन सभी प्रतियोगिताओं में कार्यालय के बहुत सारे कर्मिकों ने उत्साहपूर्वक भाग लिया।



दिनांक 16.09.2019 को राजभाषा पखवाड़ा का समापन समारोह व हिन्दी दिवस समारोह का आयोजन हर्षोल्लास से किया गया। समारोह के दौरान असम की सांस्कृतिक परम्परा के अनुसार, सभी अतिथियों का स्वागत असम की सांस्कृतिक पहचान 'गामोछा' व अन्य उपहार देकर किया गया। समारोह

में मुख्य अतिथि के रूप में श्री गोलोक चन्द्र डेका, व्याख्याता, हिन्दी विभाग, गुवाहाटी कॉलेज उपस्थित थे। विशिष्ट अतिथि के रूप में सुश्री आकांक्षा मिश्रा, प्राध्यापिका, हिन्दी शिक्षण योजना, गुवाहाटी भी आमंत्रित थीं।

क्षेत्रीय निदेशक ने अपने अध्यक्षीय संबोधन में कहा कि हिन्दी का प्रयोग आज सभी जगह बढ़ गया है। अब इसके बिना हमारा काम नहीं चल सकता। हमें हिन्दी को अब दिल से अपनाना ही होगा। हिन्दी में काम करना वास्तव में गर्व की बात है। हमें बिना किसी दबाव के अपना काम हिन्दी में करना चाहिए।

श्री गोलोक चन्द्र डेका ने कार्यालय में राजभाषा हिन्दी में अच्छे कार्य निष्पादन के लिए सभी कार्मिकों को बधाई दी और कहा कि हिन्दी आज एक अंतर्राष्ट्रीय संपर्क की भाषा बन गई है। दुनिया में आज ऐसा कोई क्षेत्र नहीं है जो हिन्दी से अछूता है। सुश्री आकांक्षा मिश्रा ने इस अवसर पर कहा कि हिन्दी दिवस को केवल एक दिन का उत्सव न मानकर हम सच्चे मन से हिन्दी को अपनाएं।

हिन्दी दिवस समारोह के दौरान कार्यालय के कार्मिकों ने सामूहिक रूप से "सर पे हिमालय का छत्र हो" गीत प्रस्तुत किया।

कार्यक्रम के अंतिम चरण में विभिन्न हिन्दी प्रतियोगिताओं के सभी 32 विजेताओं को नकद पुरस्कार, आकर्षक प्रमाण-पत्र व अन्य उपहार वितरित किए गए।

क्षेत्रीय कार्यालय, हैदराबाद

क्षेत्रीय कार्यालय, हैदराबाद में 01 सितंबर, 2019 से 15 सितंबर, 2019 तक राजभाषा पखवाड़ा समारोह आयोजित किया गया एवं दिनांक 16.09.2019 को हिन्दी दिवस समारोह आयोजित किया गया।



राजभाषा पखवाड़ा के लिए नगर राजभाषा कार्यान्वयन समिति (उपक्रम), हैदराबाद-सिकंदराबाद द्वारा अभिकल्पित बैनर भी प्रदर्शित किया गया। मुख्यालय, क.रा.बी. निगम द्वारा यथानिर्देशित विभिन्न हिन्दी प्रतियोगिताओं का आयोजन किया गया तथा प्रतियोगिता में विजेता प्रतिभागियों के लिए पुरस्कारों की घोषणा की गई।

क्षेत्रीय कार्यालय, कानपुर

क्षेत्रीय कार्यालय कानपुर में दिनांक 01 से 15 सितम्बर, 2019 तक राजभाषा पखवाड़ा तथा दिनांक 16 सितम्बर, 2019 को हिन्दी दिवस समारोह का आयोजन किया गया। राजभाषा पखवाड़े के दौरान आयोजित प्रतियोगिताओं का शुभारंभ दिनांक 03.09.2019 को हिन्दी निबंध प्रतियोगिता के साथ किया गया। पखवाड़े के दौरान हिन्दी टिप्पण व आलेखन प्रतियोगिता, हिन्दी वाक् प्रतियोगिता तथा राजभाषा ज्ञान प्रतियोगिता का आयोजन किया गया।

क्षेत्रीय कार्यालय के कर्मचारियों ने इन प्रतियोगिताओं में बड़ी संख्या में उत्साहपूर्वक भाग लिया।



दिनांक 16.09.2019 को आयोजित हिन्दी दिवस समारोह में कानपुर विद्या मंदिर स्नातकोत्तर महाविद्यालय की पूर्व प्राचार्य डा. आशा रानी राय मुख्य अतिथि के रूप में मंचासीन थीं। अपर आयुक्त श्री अनिल कुमार ने अपने स्वागत उद्बोधन में श्रोताओं को सम्बोधित करते हुए कहा कि हमें हिन्दी को राष्ट्रभाषा बनाने की दिशा में कार्य करना होगा, तभी वह सच्चे अर्थों में राजभाषा बन सकेगी। उन्होंने उपस्थित लोगों से आह्वान किया कि हम अपना संपूर्ण कार्य हिन्दी में करें तथा प्रत्येक दिन को हिन्दी दिवस के रूप में मनाएं।

मुख्य अतिथि महोदया ने अपने उद्बोधन में कहा कि भाषा अभिव्यक्ति का सशक्त माध्यम है। हिन्दी एक वैज्ञानिक भाषा है। हिन्दी में यह वैज्ञानिकता संस्कृत से ही आयी है क्योंकि हिन्दी संस्कृत के बहुत निकट है।

समारोह के दौरान विजेता कर्मचारियों को नकद पुरस्कार एवं प्रमाण पत्र प्रदान किए गए।

उप क्षेत्रीय कार्यालय, कोयम्बटूर

- मुख्यालय के निर्देशानुसार उप क्षेत्रीय कार्यालय, क.रा.बी.निगम, कोयम्बटूर में 1.09.2019 से 15.09.2019 तक हिंदी पखवाड़ा मनाया गया।
- पखवाड़े के दौरान हिंदी निबंध, राजभाषा ज्ञान प्रतियोगिता, हिंदी टिप्पण एवं हिंदी वाग्मिता प्रतियोगिताओं का आयोजन हिंदी भाषी और गैर-हिंदी भाषी कर्मचारियों के बीच अलग-अलग किया गया, जिनमें सभी कर्मचारियों ने बढ़-चढ़ कर भाग लिया।
- हिंदी पखवाड़ा समापन समारोह के दौरान प्रोफेसर एन. ललिता, विभागाध्यक्ष, हिंदी विभाग, आरवीएस आर्ट्स एंड साइंस कॉलेज, सुलुर, कोयम्बटूर मुख्य अतिथि के रूप में शामिल हुईं।



क्षेत्रीय कार्यालय, पुदुच्चेरी

क्षेत्रीय कार्यालय, क.रा.बी. निगम, पुदुच्चेरी में हर वर्ष की भांति 01 सितम्बर से 14 सितम्बर, 2019 तक राजभाषा पखवाड़ा मनाया गया। हिंदी पखवाड़ा के दौरान हिंदी प्रतियोगिताओं का आयोजन हिंदी भाषी एवं हिंदीतर भाषी के समूहों में अलग-अलग किया गया। मुख्यालय द्वारा निर्धारित सभी हिंदी प्रतियोगिताओं में अधिक से अधिक कर्मचारियों ने बढ़-चढ़ कर भाग लिया।

दिनांक 16.09.2019 को कार्यालय में हिंदी दिवस समापन समारोह का आयोजन किया गया। इस अवसर पर श्री देवराज, क्षेत्रीय भविष्य निधि आयुक्त (2), पुदुच्चेरी मुख्य अतिथि के रूप में तथा डॉ. एन. सेन्दिल कुमारन, सहायक प्राध्यापक, हिन्दी विभाग, आचार्य कला एवं विज्ञान महाविद्यालय विशेष अतिथि के रूप में उपस्थित हुए। राज्य चिकित्सा अधिकारी महोदय ने अपने संबोधन में राजभाषा हिंदी के प्रयोग की संवैधानिक एवं व्यावहारिक पक्ष पर प्रकाश डालते हुए अधिकारियों तथा कर्मचारियों को अपना अधिकाधिक राजकीय कार्य हिंदी में करने के लिए प्रोत्साहित किया।

मुख्य अतिथि महोदय ने हिंदी की व्यापकता, आवश्यकता एवं उपयोगिता आदि का उदाहरणपूर्वक वर्णन किया। विशेष अतिथि महोदय ने हिंदी की महत्ता पर प्रकाश डालते हुए इसके प्रयोग पर अधिकाधिक बल देने का आग्रह किया।

समारोह के दौरान कर्मचारियों ने विभिन्न सांस्कृतिक कार्यक्रम भी प्रस्तुत किए। समारोह का मुख्य आकर्षक “मौके पर एक आश्चर्य कार्यक्रम” था जो कि रा.भा. प्रभारी महोदय के द्वारा आयोजित किया गया था। हिंदी पखवाड़े के दौरान आयोजित सभी प्रतियोगिताओं में विजेता कर्मिकों को पुरस्कार, प्रशस्ति पत्र तथा प्रमाणपत्र वितरित किए गए।

उप क्षेत्रीय कार्यालय, गुरुग्राम

उप क्षेत्रीय कार्यालय, क.रा.बी. निगम, गुरुग्राम में 01 से 15 सितम्बर, 2019 तक राजभाषा पखवाड़ा मनाया गया तथा 16 सितम्बर, 2019 को हिंदी दिवस समारोह का आयोजन किया गया।



समारोह के दौरान सभी अधिकारियों एवं कर्मचारियों का आह्वान किया कि वे माननीय महानिदेशक महोदय के निर्देशों के अनुरूप राजभाषा हिंदी में अधिकाधिक कार्य करें। इस दौरान हिंदी से संबंधित विविध प्रतियोगिताओं जैसे निबंध प्रतियोगिता, प्रश्न पत्र के आधार पर टिप्पण-आलेखन प्रतियोगिता, वाक् प्रतियोगिता व राजभाषा ज्ञान प्रतियोगिता का आयोजन किया गया जिनमें अधिकारियों/कर्मचारियों ने उत्साहपूर्वक भाग लिया। प्रतियोगिताओं के विजेताओं को स्मृति चिह्न व प्रमाण पत्र देकर सम्मानित किया गया।

तत्पश्चात् श्रीमती रीता रानी, सहायक निदेशक ने उप क्षेत्रीय कार्यालय,

गुरुग्राम की 2018-19 की उपलब्धियों के बारे में अवगत कराते हुए बताया कि निगम में हिंदी के प्रयोग को प्रोत्साहन देने के लिए शील्ड प्रतियोगिता में यह कार्यालय ‘क’ क्षेत्र में द्वितीय स्थान पर रहा।

समारोह के दौरान अधिकारियों एवं कर्मचारियों ने हिंदी दिवस पर अपने-अपने विचार प्रस्तुत किए। निदेशक (प्रभारी) महोदय ने अपने विचार रखते हुए कहा कि हिंदी हमारी राजभाषा है तथा हमें इसका सम्मान करना चाहिए और कार्यालय में अधिक से अधिक कार्य हिंदी में ही करना चाहिए। उन्होंने कहा कि हिंदी विश्व में बाजार व व्यापार की दस मुख्य भाषाओं में से एक है। उन्होंने सभी से कार्यालय में अधिक से अधिक कार्य हिंदी में करने का अनुरोध किया।

क्षेत्रीय कार्यालय, चण्डीगढ़

मुख्यालय के निदेशानुसार राजभाषा के प्रचार व प्रसार के उद्देश्य से क्षेत्रीय कार्यालय, क.रा.बी.निगम, चण्डीगढ़ में 01.09.2019 से 15.09.2019 तक राजभाषा पखवाड़ा मनाया गया। राजभाषा पखवाड़े के दौरान विभिन्न हिंदी प्रतियोगिताओं जैसे हिंदी निबंध प्रतियोगिता, हिंदी टिप्पण व आलेखन प्रतियोगिता, राजभाषा ज्ञान प्रतियोगिता, हिंदी वाक् प्रतियोगिता का आयोजन किया गया जिनमें कार्यालय के अधिकारियों व कर्मचारियों ने उत्साहपूर्वक भाग लिया।

क्षेत्रीय कार्यालय, चण्डीगढ़ द्वारा 16.09.2019 को हिन्दी दिवस समारोह का आयोजन किया गया। समारोह में प्रोफेसर नीरू, हिंदी विभाग, ओपन लर्निंग यूनिवर्सिटी स्कूल, पंजाब विश्वविद्यालय समारोह में मुख्य अतिथि के रूप में उपस्थित हुई।

कर्मचारियों द्वारा इस अवसर पर एक आकर्षक सांस्कृतिक कार्यक्रम भी प्रस्तुत किया गया। हिन्दी प्रतियोगिताओं के पुरस्कार विजेताओं को क्षेत्रीय निदेशक महोदय तथा मुख्य अतिथि द्वारा सभी पुरस्कार विजेताओं को बधाई दी गई और पुरस्कार प्रदान किए गए। हिन्दी का अधिकाधिक प्रयोग करने पर अंतर्शाखायी राजभाषा चल शील्ड इस बार भी सामान्य शाखा को प्रदान की गई। तत्पश्चात् मुख्य अतिथि प्रोफेसर नीरू ने कहा कि कार्यालय को पूरे देश में राजभाषा कार्यान्वयन के क्षेत्र में पुरस्कार मिलना आप लोगों की हिंदी के प्रति निष्ठा को दर्शाता है और हमें क्षेत्रीय भाषाओं की अस्मिता एवं अस्तित्व को संरक्षण प्रदान करते हुए हिंदी का विकास करना है।

क्षेत्रीय निदेशक महोदय ने अपने संबोधन में कहा कि पंजाब क्षेत्र को श्रेष्ठतम कार्यान्वयन के लिए शील्ड मिलना गौरव की बात है। समारोह के दौरान सभी कर्मचारियों व अधिकारियों से अपना सम्पूर्ण कार्य हिन्दी में करने तथा राजभाषा संबंधी नियमों का अनुपालन सुनिश्चित करने का आग्रह किया गया।



National Workshop on Centralized Public Grievance Redress and Monitoring System (CPGRAMS)

ESIC under Ministry of Labour & Employment participated in the National Workshop on Centralized Public Grievance Redress and Monitoring System (CPGRAMS) Reforms on 05.11.2019 at Vigyan Bhawan, New Delhi.

Dr. Jitendra Singh, Hon'ble Union Minister of State (Independent Charge) for Development of North Eastern Region and Minister of State for Personnel, Public Grievances & Pensions and Department of Atomic Energy & Space visited the Exhibition put up by ESIC/Ministry of Labour & Employment and observed the mapping of Public Grievances and method of disposing of the same by ESIC/Ministry.



ESI Scheme implemented in new districts/ areas with effect from 01.09.2019

As per the notification dated 29.08.2019 of Government of India, ESI Act has come into force in the following districts/ areas of the country with effect from 01.09.2019

Bihar: Aurangabad, Araria, Arwal, Banka, East Champaran, Gopalganj, Jamui, Jehanabad, Kaimur, Khagaria, Kishanganj, Lakhisarai, Madhepura, Madhubani, Nawada, Purnia, Saharsa, Shekhpura, Sheohar, Siwan, Supaul, West Champaran.

West Bengal: All the areas of the district of Darjeeling

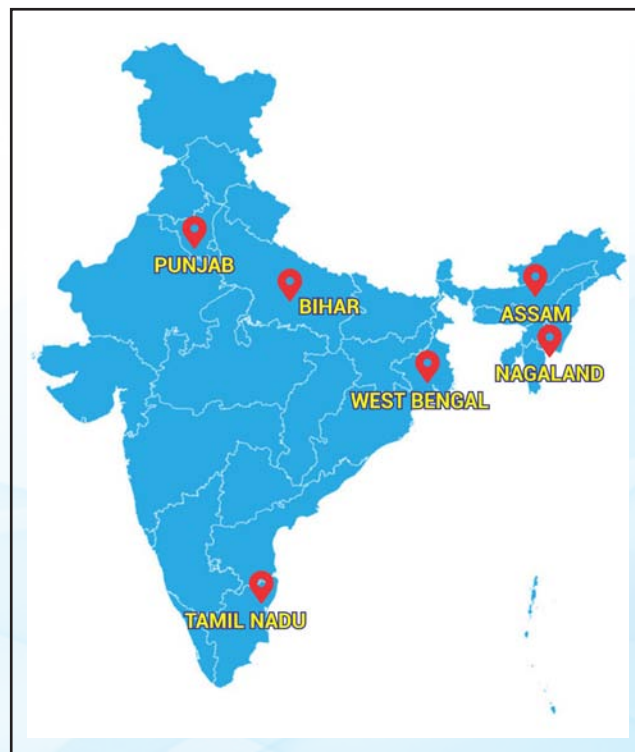
Tamil Nadu: Namakkal, Theni, Kanyakumari and Tiruppur district

Assam: Karbi Anglong District – All the areas falling under Bokajan Sub-Division.

Punjab: Whole district of Amritsar, Barnala, Bathinda, Faridkot, Fategarh Sahib, Jalandhar, Kapurthala, Ludhiana, Mansa, Moga, Muksar, Nawanshahr (Shahid Bhagat Singh Nagar), Pathankot, Patiala, Rupnagar, Sahibzada Ajit Sing Nagar (Mohali), Sangrur, and Tarantaran (Excluding the area which are already notified), District Headquarters area of Ferozpur

Nagaland: District Kohima (All the areas falling under Kohima Municipal Council)

With the above notification, the Inured Person and employer base of ESI Scheme will increase and ESIC is committed to cover the entire districts of the country by the year 2022.





ESIC Observes Constitution Day

To commemorate the ceremonious day of the adoption of the Constitution of India, ESIC observed the Constitution Day on 26.11. 2019. At ESIC Hqrs., Shri Raj Kumar, Director General read the Preamble of the Constitution which was repeated by all the ESIC Officers and Staff present at the function.



Vigilance Awareness Week observed by ESIC

ESIC observed 'Vigilance Awareness Week' from 28th October to 2nd November, 2019 in all its establishments including Headquarters Office. The theme of this year is: "Integrity-A way of life". At the Headquarters office, Shri Raj Kumar, Director General, ESIC administered the Integrity Pledge to ESIC staff and officers.

Quiz competition focussing on the vigilance related matters was organised in which many officials actively participated. A lecture series was organised in which Ms. Garima Bhagat, Chief Vigilance Officer, ESIC delivered a lecture on the topic "Integrity a way of Life" and Shri Shailendra Singh, Chief Technical Examiner, Central Vigilance Commission delivered a lecture on "Procurement issues".

Recent initiative taken by ESIC has also been featured in the compilation of best practices on "Preventive Vigilance Initiatives" released by CVC during the Vigilance Awareness Week. Various activities conducted by the field offices throughout the country during the Vigilance Awareness Week



have helped to create awareness among the ESIC employees and stakeholders about the need to be vigilant in all public dealings and to practice integrity as a way of life for the public good.

BY-PASSING CORONARY ARTERY BYPASS SURGERY



K. Mishra

I have retired from the services of the ESI Corporation in the year 2009 and I am Pensioners' Medical Scheme beneficiary.

In February 2018, I stated feeling some heaviness around the chest and palpitations. I had High Blood Pressure also. I went to ESIC Hospital, Rajaji Nagar, Bangalore for check up which has a very good tie-up arrangement with Jai

Deva Hospital where my Angiography was done. The report showed three multiple blockages ranging from 80-95%. I was advised to undergo bypass surgery. For the second opinion, I consulted at Naraina Hospital where also the bypass surgery was advised. While preparing for the bypass surgery one of the friends from ESIC only told me about the SAAOL Heart Centre where I underwent 35 sittings of EECp and 20 sittings of BCA. I also followed zero oil food and some mild exercises and walking as suggested by them. After two months of the treatment I underwent CT Coronary Angiography (also a non-invasive procedure) where I found that my blockages have come down to the range of 50-60% and some of them vanished completely. Now I am living normal life as it was 10 years ago.

EECP is a procedure called Enhanced External Counter Pulsations also called natural bypass therapy and BCA is a

process called Bio Chemical Angioplasty in which 20 doses of Intravenous Drips are administered.

Dr. Bimal Chhajer, MBBS, MD, Heart Care and Life Style Expert, Ex-consultant AIIMS through Hqrs. in Delhi and its branches all over India and also in some neighbouring countries is practicing this therapy. I have also come to know that one Sanjeevini Heart Centre near Nasik headed by Dr. Sanjeev V. Patil is also practicing this therapy (residential programme) as also some other Doctors are doing. This is widely practised in USA and other developed countries. The benefits of this therapy over the conventional bypass surgery/angioplasty surgery are:-

- 1) No invasion/surgery
- 2) Low cost: Approximately comes to about ₹1 lakhs to ₹1.5 lakhs.
- 3) No confinement to Bed: Only the patients have to visit the hospital as day care patient and can perform all usual activities.
- 4) Post-operative care and medication is common like zero oil meals/ mild exercised/walking and medication are common to conventional bypass surgery.

Based on my experience I wish that this procedure and treatment be introduced and adopted for our Insured Persons as well as serving and retired employees.

Courtesy
Addl. Commissioner (Retd.), ESIC


(The facts expressed in the article are personal in nature of Shri K. Mishra - Editorial Board)

Appreciation Letter

दिनांक १७/०६/२०१९

सेवा मे,

महानिदेशक, (डी. जी. सैल)
मुख्यालय, क. रा. बी. निगम,
पंचवीस भवन, सी. आई. जी मार्ग
हाईवे-११०००२




विषय :- शाखा कार्यालय फिलानजंज में कार्यरत कर्मचारी भारत भूषण नीटियावाल, मुख्य, लिथिक को रीटाइर्मेंटपूर्ण व्यवहार के बारे में।

महोदय,

आपके शाखा कार्यालय फिलानजंज में कार्यरत कर्मचारी भारत भूषण नीटियावाल, मुख्य लिथिक को दाता गेरे कास्ट को जिस मानवीय संशोधन व कुशल व्यवहार के साथ किया गया उससे परीक्षित होकर मैं यह पत्र आपको लिख रहा हूँ।

मे दिनांक १७/०६/२०१९ को अपना रिटायरमेंट के बाद u/s 61 के तहत रुपये १२०/- का ई. एस. आई. काई बनवाने के लिए शाखा कार्यालय में आया था। शुरू में तो मुझे यह लगा कि यहाँ हमें तरफ नगरपालिका परिवला शाखा कार्यालय में भी जाएगी या नहीं या मेरे ०८-०९ साल पहले के अनुभव के आधार पर ही हमारा काम किया जाएगा। लेकिन महोदय ने यहाँ आपके आयुर्व्यवस्थित रह गया मुझे आश्चर्यजनक वैधने से ई. एस. आई. विभाग में मेरे वा अन्य सहकर्मीको के ०८-०९ साल की अवधि में यह क्यों प्रतिष्ठानी हुई।

महोदय मेरे पत्र लिखने का मन्सरदा यह है। कि आपकी विभागे में इस तरह से अपने कार्य के प्रति संवेदनशील, कार्यकाराणा व कुशलव्यवहार कर्मचारी कार्य करते हैं। यह मेरे और मुख जैसे बीचालिय व्यक्तियों के लिए गर्व की बात है। मैं आपको ध्यान और भारा भूषण नीटियावाल, मुख्य लिथिक को उज्जवल भविष्य की कामना करता हूँ।

प्रणीत

(राजीव कुमार पाथक)

PR 601

PR 601

Date Recd:- 18/06/2019
JMD/Jr. Officer, N.M.C.
Nagpur, Madhya Pradesh
For Office Use Only
Ref No:- /-----
Mobile No.- 977789969322

निदेशालय (चिकित्सा) दिल्ली
कर्मचारी राज्य बीमा योजना
श्रम एवं रोजगार मंत्रालय, भारत सरकार
तिलक विहार औषधालय परिसर नई दिल्ली-110018

तल. नि. 011-28328839
E-mail: epso@11-dshs@nic.gov.in
Website: www.dishdshs.nic.in

Directorate (Medical) Delhi
Employees' State Insurance Scheme
(Ministry of Labour & Employment, Govt. of India)
Tilak Vihar, Dispensary Complex,
New Delhi-110 018.

प्र. सं. दीएम्प/16/52/28/17-पो. वि. (चि.) 257 दिनांक: 30-07-2019

सेवा में,

उप निदेशक(पी.आर.)
पी.आर.खाळा,
क.रा.बी. निगम, मुख्यालय,
पंचवीस भवन, सी.आई.जी. मार्ग,
नई दिल्ली-110002.

विषय: श्री राम अवतार बीमांक [REDACTED] के द्वारा साराहना पत्र के संबंध में।

महोदय,

सहर्ष सूचित किया जाता है कि बीमाकृत श्री राम अवतार बीमांक 1013576996 ने अपने पत्रांक ख्यु दिनांक 20-05-2019 द्वारा क.रा.बी.औषधालय, मयूर विहार के प्रभारी बीमा चिकित्सा अधिकारी, डॉ. सोना वेदी द्वारा समस्त्यों का लरित निष्पादन एवं स्टाफ के कार्य व व्यवहार कि साराहना की है।

उपरोक्त मेलिक पत्र आपके कार्यालय को सूचनाय प्रेषित किया जा रहा है।

भवदीय

संलग्नक :यूपीओर

30/07/2019
 (एच. एम. बीमासचिव)
 उप निदेशक (पो. वि.)

उपसमर्थित :खाळा / Health Related/सांख्यिक
 बतरी नं./Slack No. 362
 ति.निक/Date 14/08/19



News in Brief

ESIC Sub Regional Office, Coimbatore

International Yoga Day and Independence Day

The ESIC Sub Regional Office celebrated 5th International Day of Yoga, 2019 on 21st June, 2019 and 73rd Independence Day on 15th August, 2019 by hosting the National Flag by Deputy Director In-charge and conducting various programmes.

Dhanwantri Training, 2019

- Conducted quarterly refresher training of Dhanwantri module from 26th to 30th August, 2019
- Total number of 115 persons including Doctors, Staff Nurses, Pharmacists, Maternity Assistants, Lab Technicians, Hospital workers from ESI Hospitals and various ESI Dispensaries under the jurisdiction of SRO participated in the training session and were trained in different modules of Hospital Information System (HIS).



Surgical Camp on Cleft Lip, Palate Corrective Surgery by ESIC Medical College & Hospital, Gulbarga, Karnataka



ESIC Medical College & Hospital, Gulbarga in collaboration with Mission Smile successfully organised the 4th consecutive camp on cleft lip and cleft palate corrective surgeries to the children and young adults of the State between 21st to 24th September, 2019.

During the surgical camp, a total of 78 patients were screened and 57 successful surgeries were performed. The camp was attended by the doctors of ESIC Medical College along with

team of medical experts from the field of Plastic Surgery, Oral and Maxillofacial Surgery & Anesthesia across the globe.

ESIC Regional Office, Telangana Awareness Programmes on ESIC Scheme



The Regional Office Telangana conducted 10 Awareness Programmes at various Employers premises in the month of September, 2019. Pamphlets on ESI Scheme were distributed among the participants during the seminar for Employers & Employees. R.O Telangana regularly conducts Suvidha Samagam on every 2nd Wednesday of the month for on spot redressal of grievances.

Blood Donation Camp organized by ESIC Sub-Regional Office, Gurugram

To commemorate the birth anniversary of the great revolutionary Shri Bhagat Singh, the ESIC Sub-Regional Office Gurugram organised a blood donation camp at its premises in sector 34 near Hero Honda Chowk on 27.09.2019. The camp was organised in association with ESIC Hospital and Medical College, Faridabd.



Shri Ratnesh Kumar Gautam, Director (In-charge), ESIC SRO, Gurugram inaugurated the blood donation camp and volunteered to be the first donor of the camp. The officers and employees of the Sub-Regional Office and its Branch Offices voluntarily donated blood. All Officers and staff of the Sub-Regional Office, ESIC, Gurugram participated actively and gave all necessary support for the success of the camp. The nearby industrial units of SRO, ESIC, were also invited and some of the employees of these industrial units also donated blood. In total, about 75 units of blood donated by Officers and

Employees and employees of industrial units were collected by the ESIC Hospital and Medical College, Faridabad from this camp.

The Sub-Regional Office, ESIC, Gurugram provides ESIC services in four districts of Gurugram, Nuh, Mahendragarh and Rewari. There are about 16 lakh Insured Persons under the Sub-Regional Office and the benefits are being provided with an infrastructure of two hospitals, 22 dispensaries (at 13 locations) and four Branch Offices.

Workshop on Basic Life Support by ESIC Medical College & Hospital, Gulbarga

ESIC Medical College & Hospital, Gulbarga conducted a two day workshop on Basic Life Support on 14th and 15th October, 2019 to coincide with the World Anesthesia Day for the teaching faculties of the Medical College & Hospital. 31 participants from the Department of Anesthesiology were trained in the various aspects of Basic Life Support.



SRO Ludhiana organised Medical Health Camp and Awareness Programme on Benefits of ESI Scheme

Sub Regional Office, Ludhiana in coordination with ESIC Model Hospital, Ludhiana organizes Health checkup camps and various programmes on awareness of the ESI Scheme and benefits available under the ESI Act from time to time. One such Health checkup camp and Awareness Session was organized at M/s Udey Crafts on 16.10.2019 wherein more than 100 beneficiaries attended the camp. Shri P.K. Narula, Director I/c, SRO Ludhiana, Dr. (Mrs.) Madhu Gupta, Medical Superintendent, ESIC Model Hospital, Shri Satyawar Singh, Assistant Director, Shri S.Harban Singh, Employer and other dignitaries were present on the occasion.



Shri P.K. Narula, Director I/c and other officers briefed the gathering about the benefits available under the ESI Scheme and latest initiatives taken by ESIC for improving service delivery. The interactive session was appreciated by all present on the occasion particularly by the beneficiaries who took treatment from ESIC Model Hospital along with Super speciality treatment from Tie-up Hospitals. All IPs present were satisfied with the working of ESIC in the Sub Region.

National Ayurveda Day

ESIC observed "National Ayurveda Day" with fervour to commemorate "Dhanwantri Jayanti". Shri Raj Kumar, Director General felicitated Vadiya Shri Devendra Triguna, Member, ESIC on this occasion.

The achievers were given away awards for their remarkable contributions in the field of Aurvedic treatment.



Ms. Divya Adlakha wins prize money of 'Kaun Banega Crorepati'

Ms. Divya Adlakha, a National level Archer and an employee of ESIC posted at Head Quarters Office participated in the Kaun Banega Crorepati contest. She replied to the questions confidently using the life lines judiciously and won ₹25 lakh. By participating and winning a handsome amount, Ms. Divya proved her mettle in participating in competitions other than sports which is her favorite passion and profession. She also proved to be an inspiration to the women of the country.

ESIC is proud of Ms. Divya Adlakha and wishes her a bright future in the field of sports and other competitions





Shri Pramod Bhagat of ESIC conferred with Arjuna Award

Shri Pramod Bhagat, an ace Para-Shuttler player and an employee of ESIC posted at Regional Office, Bhubaneswar was presented the coveted Arjuna Award 2019 by Shri Ram Nath Kovind, Hon'ble President of India at a function on 29th August, 2019 at Rashtrapati Bhawan, New Delhi. Shri Pramod Bhagat was awarded Arjuna Award for his outstanding contribution and achievements in the field of Para Badminton game in the national and international arena. He has won Gold Medal (Single) in Asian Para Games 2018, Bronze Medal (Doubles) in Asian Para Games 2018, Bronze Medal (Single) in BWF Para World Championship 2017 and many more medals.

Shri Santosh Kumar Gangwar, Hon'ble Union Minister of State (Independent Charge) congratulated Shri Bhagat for bagging the coveted Arjuna Award and also for winning medals in various international competitions. Shri Gangwar announced a cash reward of ₹ 5.00 Lakh in recognition of his contribution and achievement in the field of sports.

ESIC congratulates Shri Pramod Bhagat for his outstanding achievement.



Shri Ram Nath Kovind, Hon'ble President of India presenting the prestigious Arjuna Award to Shri Pramod Bhagat, Para Shuttler and employee of ESIC on 29.08.2019

Kudos to Devika Nandana for bagging Silver Medal

Devaki Nandana, daughter of Shri D. Radha Krishna, Deputy Director, ESIC, SRO, Visakhapatnam, Andhra Pradesh brought laurels not only for herself, but also for ESIC family by bagging Silver Medal at the 33rd Under 9 Girls National Chess Championship held at Ahmedabad from 3rd to 11th August, 2019. It was a tough competition in which around 429 of boys and girls from all over India participated.

By achieving National silver champion, Devika Nandana, a class IV student will officially represent India in the events of under 10 girls' category of World Chess Championship 2020 to be held at Batumi, Georgia, World Chess Championship 2020 (Rapid and Blitz) to be held at Greece, Commonwealth Championship and Asian School Games Championship and Asian Championship, the venues of which is yet to be decided.

ESIC wishes Devika Nandana all the best in her future matches and hopes that one day she will make India proud.



क्षेत्रीय कार्यालय, देहरादून में खेलकूद प्रतियोगिता का आयोजन

क्षेत्रीय कार्यालय, देहरादून द्वारा देहरादून स्थित महाराणा प्रताप स्पोर्ट्स कॉलेज में दिनांक 25.11.2019 से 29.11.2019 तक 12वीं आंचलिक खेलकूद प्रतियोगिता का आयोजन किया गया। इसमें कर्मचारी राज्य बीमा निगम की दिल्ली, हरियाणा, पंजाब, हिमाचल प्रदेश, जम्मू-कश्मीर एवं उत्तराखंड राज्य की कुल 11 टीमों के लगभग 600 कर्मचारियों ने फुटबाल, क्रिकेट, वॉलीबॉल, बैडमिंटन, चेस, कैरम तथा टेबल टेनिस प्रतियोगिताओं में पुरुष तथा महिला खिलाड़ियों ने भाग लिया।

दिनांक 29.11.2019 को समापन समारोह के दौरान क्षेत्रीय निदेशक महोदय ने प्रतियोगिताओं के सभी विजेताओं/रनर अप टीमों को बधाई दी और प्रशस्ति-पत्र, शील्ड और मेडल देकर सम्मानित किया गया। उन्होंने इन प्रतियोगिताओं के सफल आयोजन के लिए विभिन्न प्रतिभागियों, कोच, रेफरी एवं सभी अधिकारियों/कर्मचारियों और निगम मुख्यालय एवं खेल आयोजन समिति का भी धन्यवाद किया।





Salient Achievement 2018-2019

(The Information reproduced below is as given in the Annual Report 2018-19 presented during the 179th Meeting of ESIC on 05.12.2019)

- The ESI Scheme was implemented in 27 complete districts and 13 districts Hqrs. area covering additional 2,79,259 employees.
- The number of Insured Persons covered under the ESI Scheme has increased to 3.49 crores. The number of beneficiaries covered under the Scheme has gone up to 13.56 crores.
- The number of employers has also gone upto 1211174 from 1033730 in the previous year.
- Revenue Recovery of ₹433.80 crore has been made during the year under report.
- Contribution Income has increased to ₹2,2279.14 crore.
- An expenditure of ₹8,721.39 crore was incurred on Medical Benefit, during the year.
- During the year under report, ESIC has disbursed ₹1,171.00 crore as benefits in Cash. Number of Cash Benefits payments has gone up to 38.23 lakhs.
- ESIC has approved proposal for upgradation of ESIC Hospital at Bibwewadi, Pune from 50 beds to 200 beds. It has further approved the proposal for Enhancement of Bed Strength of ESIC Model Hospital, Namkum, Ranchi from 75 to 200 bed. Also, the proposal for setting up of 100 bedded ESI Hospital at Bahadurgarh, Haryana has been approved.
- Atal Bimit Vyakti Kalyan Yojana (ABVKY) was introduced w.e.f. 01.07.2018. ABVKY is a welfare measure being implemented by the Employees' State Insurance Corporation. It offers cash compensation to insured persons when they are rendered unemployed. The scheme is implemented on pilot basis for a period of two years initially.
- ESIC has approved proposal for setting up of 266 Dispensary-cum-Branch Offices.
- Insured Person and their dependents are being provided with Health Passbooks. The Health Passbook having Unique Health ID, QR Code & Photographs of IP & their family members serves as a tool of beneficiary identification, recording clinical findings and consultation advice by ESI Doctors/IMPs.
- "ESIC-Chinta se Mukti" Mobile App has been made available on 'UMANG' platform. With this app, the Insured Persons can view their contribution history, personal profile, claim status and also their entitlement to benefits.
- ESI Corporation observed International Women's Day on 08.03.2019 at Hqrs. and at all of its Offices throughout India.

ESIC AT A GLANCE 2018-2019

PARTICULARS	As on		VARIATION During 2018-19
	31.03.2018	31.03.2019	
State/Union Territories covered	34	34	-
No. of Employees	31118680	31401920	283240
No. of Insured Persons/ Family Units	34331300	34967080	635780
No. of Insured Women	4542029	5120174	578145
Total No. of Beneficiaries	133205444	135672270	2466826
Total No. of Employers covered	1033730	1211174	177444
Branch Offices/Pay Offices	630/185	608/185	-22
Inspection Offices	341	341	-
ESI Hospitals	154	155	1
ESI Dispensaries/ISM units	1500/148	1500/148	-
Insurance Medical Officers	7908	7908	-
Insurance Medical Practitioners	980	980	-
EXPENDITURE (₹ In Crores)			
Expenditure on Cash Benefit Payments	642.84	1171.00	528.16
Expenditure on Medical Benefit	6867.73	8721.39	1853.66
Administrative Expenses	1031.06	1155.55	124.49
INCOME AND OUT-GO (₹ in Crores)			
Revenue Income	23480.37	27312.64	3832.27
Revenue Expenditure	9161.36	11085.32	1923.96

Conference of Principal Secretaries of States/ Regional Directors/ Sub-Regional Offices /Medical Superintendents/ State Medical Officers / Engineering Officers held during November, 2019

The Conference was held on 15th, 16th, 22nd and 23rd November, 2019. On 15.11.2019, the states participated in the Conference were Bihar, Jharkhand, Odisha, Maharashtra, Goa, Assam, Uttarakhand and Chattisgarh. On 16.11.2019, the States / UTs participated were Kerala, Karnataka, Tamil Nadu, Andhra Pradesh, Telangana and Union Territory of Puducherry. On 22.11.2019, the States/ UTs participated were U.T. of Jammu & Kashmir, Himachal Pradesh, Delhi, Haryana, Uttar Pradesh and Punjab and the States represented on 23.11.2019 were West Bengal, Gujarat, Rajasthan and Madhya Pradesh.

Detailed discussions on various points like Benefits, Establishments, Finance & Accounts. ICT, Medical Services, Project Management, Public Relations, Revenue and Vigilance were held during the conference.

A glimpse of the Conference

15.11.2019 : Bihar, Jharkhand, Odisha, Maharashtra, Goa, Assam, Uttarakhand and Chhatisgarh



16.11.2019 : Kerala, Karnataka, Tamil Nadu, Andhra Pradesh, Telangana and Puducherry





A glimpse of the Conference

22.11.2019 : Jammu & Kashmir, Himachal Pradesh, Delhi, Haryana, Uttar Pradesh and Punjab



23.11.2019 : West Bengal, Gujarat, Rajasthan and Madhya Pradesh



MAIL TODAY

Wednesday, November, 13, 2019, New Delhi

Our mission is to spread coverage across the country, improve access of health care services and build trust among stakeholders.

—RAJ KUMAR, Director General, Employees' State Insurance Corporation

By **Smitha Verma**

IN the concluding session of the Mail Today Health Care Summit, Raj Kumar, director general of the Employees' State Insurance Corporation (ESIC), talked about one of the oldest social security mechanisms of the country. The ESIC is a self-financing social security and health insurance scheme for workers. Sickness and disability among employees are just a few of the benefits covered under it.

"We have 12.11 lakh factories and establishments across the country, benefiting around 3.49 crore family units of workers. The total beneficiary population of ESI scheme stands at over 13.56 crore," said Kumar, while presenting the work done by the corporation in partnership with state governments. "For smooth administration of the scheme, we have set up 64 regional/ sub regional offices across the country. Currently, there are 159 ESI hospitals in all," he said.

The ESIC has also relaxed the norms for setting up of hospitals and is to build 30-bedded hospitals in districts if the number of insured persons is 20,000.

Elaborating upon how the body



Social security scheme that people can trust

is improving access and quality of health services, Kumar talked about the partnership with Pradhan Mantri Jan Arogya Yojna (PMJAY) wherein insured persons of designated 102 newly implemented districts will get cashless medical care through Ayushman Bharat empanelled hospitals. And, if need be, the ESIC will provide coverage beyond ₹5 lakh, he added.

The ESIC has successfully worked on the expansion of cashless primary care services through the public private partnership mode. "We've developed primary medical care through tie-ups with private doctors, clinics and locally empanelled chemists and diagnostic cen-

tres." The body also motivates employers to join hands with ESIC for setting up employers utilisation dispensaries. "We are also strengthening medical services by making state-of-the-art equipment available in ESI Hospitals for secondary and super speciality treatment," added Kumar.

The corporation is now working with state governments to set up ESI societies with 100 per cent financial backing of ESIC. They are leveraging ESIC's medical college graduates to make up for the shortfall in manpower. Technology is being deployed in health passbooks with unique health IDs. "We envision to reach 786 districts by 2022," he added.



Published by
Director General

कर्मचारी राज्य बीमा निगम
Employees' State Insurance Corporation
Panchdeep Bhawan, C.I.G Marg, New Delhi - 110002

Toll Free No. 1800-11-2526, Medical Helpline No. 1800-11-3839
Website: www.esic.nic.in, www.esic.in, www.esichospitals.gov.in

www.facebook.com/esichq [@esichq](https://twitter.com/esichq)

Compiled & Produced by
Public Relations Divn., ESIC