

(Please do not write anything except the question number in this space)

कृपया इस स्थान में प्रश्न संख्या के अतिरिक्त कुछ न लिखें।

# UPSC

Answer Questions in NOT MORE THAN the Word Limit specified for each in the Parenthesis.  
Content of the Question is more important than length.  
( Specimen Answer Booklet - For Practice Purpose Only)

उम्मीदवारों को इस तारीख में नहीं लिखना चाहिए  
Candidates must not write on this margin

Ans

For facilitating expansive, efficient, and extended health administration services, 'health' comes under State List (Schedule 7) of Indian Constitution. However, during second wave of COVID-19 (April 2021):-

- Lack of medical oxygen supply to citizens and hospitals
- Reduced availability of essential medical equipments and medicines
- Overcrowding of hospital beds
- Fatalities due to all these might indicate need for an all India National Health Services, replicating its operational model like British National Health Services for centralised health facilities

Yet, "more than service facility, SERVICE DELIVERY is essential". Be it, centralised or decentralised.

Benefit of decentralised health services, were seen when some states could provided surplus of medical oxygen to states in need. Example: Chhattisgarh helped its neighbouring state Andhra Pradesh with medical oxygen once -

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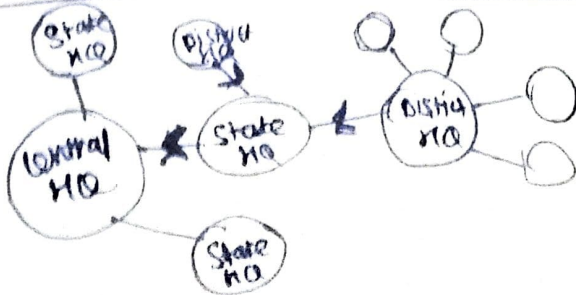
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Reason being, public procurement of goods including one needed by healthcare, is made by State government, under General Financial Rules, 2005. (Ministry of Finance, Department of Expenditure)

## MEANS TO MEET ENDS

Thereby, administrative reform of initiating All India National Health Services should rather increase centralised accountability and reporting; ~~and not~~ instead of being ~~centralised~~ structural reforms through 'shift of powers'

For this, computerised predictive models can be used, to bring symmetry in services. All done, as per the reporting mechanism with of Hub-and-Spoke model.



wherein State, continues to report Centre about these functioning. X