



SENATE OF PAKISTAN

Report No.3 of 2020

REPORT OF THE
STANDING COMMITTEE ON NATIONAL HEALTH SERVICES,
REGULATIONS AND COORDINATION

**Point of public importance raised in the House by Senator Muhammad
Ali Khan Saif regarding “Implementation of the concepts of virtual
hospitals” on 10th June, 2020**

PRESENTED BY
SENATOR KHUSHBAKHT SHUJAT
Chairperson SSC on National Health Services, Regulations and Coordination

SENATE SECRETARIAT

REPORT OF THE SENATE STANDING COMMITTEE ON NATIONAL HEALTH SERVICES, REGULATIONS AND COORDINATION

I, Chairperson of the Senate Standing Committee on National Health Services, Regulations and Coordination have the honor to present the report, on behalf of the Committee on Point of public importance raised in the House by Senator Muhammad Ali Khan Saif regarding "Implementation of the concepts of virtual hospitals" on 10th June, 2020.

2. The matter was referred to the Senate Standing Committee on National Health Services, Regulations and Coordination for consideration and report to the House.

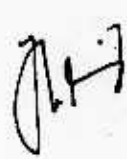
3. The composition of the Committee is as under:-

1. Senator Khushbakht Shujat	Chairperson
2. Senator Ayesha Raza Farooq	Member
3. Senator Bahramand Khan Tangi	Member
4. Senator Dilawar Khan	Member
5. Senator Dr. Asad Ashraf	Member
6. Senator Dr. Ashok Kumar	Member
7. Senator Sikandar Mandhro	Member
8. Senator Dr. Ghous Muhammad Khan Niazi	Member
9. Senator Liaqat Khan Tarakai	Member
10. Senator Prof. Dr. Mehr Taj Roghani	Member
11. Senator Sana Jamali	Member
12. Senator Sardar Muhammad Shafiq Tareen	Member
13. Senator Syed Muhammad Ali Shah Jamot	Member
14. Minister for National Health Services, Regulations & Coordination	Ex-Officio Member

4. The Standing Committee considered the issue in its meeting held on 6th August, 2020.

The Committee disposed of the matter and decided to submit the report to the House. The meeting was attended by the following members, namely:-

1. Senator Khushbakht Shujat	Chairperson
2. Senator Dr. Asad Ashraf	Member
3. Senator Dr. Ghous Muhammad Khan Niazi	Member
4. Senator Sana Jamali	Member
5. Senator Sardar Muhammad Shafiq Tareen	Member



SUMMARY

The virtual hospital concept is a rapidly advancing off-shoot of technology. Technology has made its presence felt in almost all branches of the health care system, resulting in miraculous changes. Pakistan is no exception to it. The COVID-19 caused an emergency in the country and the pandemic necessitated the birth of virtual hospitals. The term virtual may not be the best selection of word since it sounds like it is not real while the care that it provides is very real. The point is that the clinicians can be located anywhere across the globe. In the developed world, it is the practice in vogue and around 65% of US Hospitals connect patients and practioners remotely. Its core value is about two things - access and efficiency and they need to work together. The concept of virtual hospital has broken the traditional ways and old habits. The traditional ways and old habits represent obstacles on the path of realization. The virtual hospitals vindicated the fact that patient does not always need to be in the same room with doctor to receive the treatment. However, there are situations that require seeing the patient in the flesh. Although science based, triage is a kind of art and at times doctors need patient in front of them using all five senses to collect crucial information. In the case of virtual hospitals, the most important thing is the proper triage. After proper triage the patients are grouped as low or high risk patients. Assessment of patient's disease from pathological results is a key note in this respect. The blood test and imagining results are reviewed minutely to ensure that all results have been properly synchronized to reach proper diagnosis.

It was briefed that low risk patients were followed up on day seven and fourteen day basis and high risk patients on daily basis for the first five days and then on alternate days until day 14. The consultation was made from home being widely acceptable best practice. However more complex consultations and assessments were done through Attend Anywhere Telemedicine Service.

The Government has taken different steps to provide virtual health care services for COVID-19 in the country. It was presented as follows:

- (i) **Yaran e Watan** – The Pakistani Diaspora Initiative has launched to augment and supplement the Government's response to this global pandemic. It will leverage



both innovative and traditional solutions for precaution, prevention, and treatment to mitigate the spread of COVID-19 within the country.

- (ii) **Telemedicine-Inform and Counsel** – Respond with scientific information to people's concerns about COVID-19, its clinical features, and to guide them to appropriate services and counseling for patients and their family members.
- (iii) **Triage:** Online consultations to differentiate those that need at-home-care from those who require necessary hospital care and prevent people from gathering at hospitals and clinics.
- (iv) On 11th May- MNHSRC and Digital Pakistan has launched a COVID-19 Tele health portal, to connect volunteer doctors to Pakistani citizens who may be experiencing symptoms or need guidance from professional healthcare providers. Citizens experiencing any signs of infection can be seen through the Whatsapp helpline. It can also be, automatically, connected to a doctor through this tele-health platform. Hundreds of volunteer doctors from Pakistan and outside Pakistan have already been recruited.
- (v) Tele health established in primary & secondary level facilities to reduce unnecessary hospital attendance, so far 238 are successful tele-doctors calls.
- (vi) Tele Health Clinics at various sites where Ministry of NHR&C has supported the projects of establishing Telemedicine clinics in BHU (Gokina) of ICT Islamabad.
- (vii) Sehat Kahani another example of providing eHealth care through engaging female doctor to patients in remote areas.
- (viii) Ministry of Information Technology through- Health Net Telemedicine Project for Rural / Remote Areas in Sindh (Jinnah Post-Graduate Medical College, Karachi), and in Punjab (Mayo Hospital, Lahore, Holy Family Hospital, Rawalpindi) has worked on projects with the objective to provide health information to the people living in rural/remote areas of Pakistan, cost effective means for seeking consultation, advice and treatment from specialist doctors based in big urban center hospitals, at their desktops through Tele-Diagnosis/ Consultation and tele-Treatment. Each of these above-mentioned projects were designed as one major Hub Hospital linking with four hospitals in rural and remote areas.
- (ix) In current COVID-19 pandemic, different tertiary care hospitals and primary and secondary level health facilities on government advice established telemedicine departments to provide timely and continuous support to the outdoor patients where dedicated staff including specialized doctors, IT Personnel and support staff will be available, for the assistance of patients via internet using Skype, WhatsApp and Landline. These include SZABMU PIMS Islamabad. KEMU Lahore, Liaquat National Hospital Karachi and RHC Tarlai etc.

The Committee was briefed that the concept of virtual hospitals will definitely change the future health care in Pakistan in post-COVID-19 recovery period. It will be helpful in many ways in terms of quicker access, better efficiency and greater involvement of specialists with comparatively lesser time spent on individual patient. The virtual hospitals are not just about technology rather that how it is applied. The Committee observed that resources are there but they require an overarching involvement of everyone: doctors, patients and institutions.



The Committee observed that:

The future does not lie simply in virtualization of an old model. Technology is a tool and it all comes down to the question of what problems are being solved with it. The Committee also emphasized on enhancement of virtual hospitals in accordance with the best practices of the world so that the people of remote regions can seek benefit from not only the medical specialists residing in big cities but also that critical patients can seek advice from Pakistani diaspora working in medical profession all over the world.


(Javaid Iqbal)
Secretary Committee


(Senator Khushbakht Shujat)
Chairperson Committee