

THE HINDU BusinessLine

THE BL INTERVIEW

We're working with the govt in areas it needs help: Nathealth President

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Sushobhan Dasgupta, Managing Director, Johnson & Johnson Medical India and President, Nathealth.

'We are focusing on training and skilling of physicians, nurses, assistants and technicians'

A couple of years ago, Healthcare Federation of India (Nathealth) signed an MoU with Nasscom to deliver remote healthcare services across the country.

And since the Federation's inception three years ago, Nathealth reports beefing up its objectives across a range of pillars. According to Sushobhan Dasgupta, Managing Director, Johnson & Johnson Medical India and President, Nathealth, the Federation is committed to the 'Make in India' movement and has focused keenly on skill development to bridge the talent gap in healthcare. In a conversation with *BusinessLine*, Dasgupta addressed the need for building the industry's image through Nathealth while also elaborating on J&J Medical India's involvement with communities and government. Edited excerpts:

If the idea is to replicate the impact that Nasscom has had in India, what exactly has Nathealth set out to achieve?

Nathealth was formed to provide a credible voice to healthcare in India along with working towards accessibility and affordability of healthcare across every segment of the country. We're focusing on four-five pillars, which include ethics and image building. So, whether it is bridging those trust deficits between the government and private

healthcare providers or talking about the good things that are happening in the industry, Nathealth will drive that. We've also tied up with the Indian Medical Association and are working on a Code of Ethics that will encompass every player in the sector.

How much of Nathealth's mandate is taken up by skilling for the healthcare sector?

The current reality is that there are only 0.6 doctors and one nurse available for a population of a 1,000. We're working towards an MoU with the Healthcare Sector Skill Council (HSSC), which is part of the National Skill Development Corporation, to help them take their skilling agenda forward. HSSC is developing curriculums, platforms and accreditations, while Nathealth's governing councils will take on training and skilling of physicians, nurses, assistants and technicians. I definitely want us to train 60,000 clinicians a year.

Outside the scope of Nathealth, how is Johnson & Johnson in India working with the government?

We work with the government where it needs help. Diabetes, cardiovascular and lung diseases are all areas of opportunity, where the government already has a focus. We've partnered with the Public Healthcare Federation of India.

In gestational diabetes, we've built a module for obstetricians, gynaecologists and general practitioners to understand the issue and test for it in pregnant women. We've trained 2,500 doctors on that and there's a lot of progress there. Our work with the Governments of Delhi, Haryana and Himachal Pradesh involves training adolescent girls on feminine hygiene. There are several other things we could do. 'Make in India' is an opportunity for us too.

What's happening on 'Make in India'? Is it a focus area for Nathealth too?

As far as Johnson and Johnson's Medical Devices business goes, 30 per cent of the manufacturing happens in India. We've got plants in Mulund, Aurangabad and Baddi. Across Aurangabad and Baddi, we employ close to 700 people.

The \$100 million we've invested in Telangana will cater to our consumer business, but potentially it can serve the medical devices business too. As Nathealth, we're already looking at how we can work with government to enable policies that will make 'Make in India' more attractive, raise domestic consumption and be able to generate more employment.

How's the partnership with Nasscom playing out?

The Nathealth-Nasscom Joint Council is involved in identifying areas where we can create IT infrastructure, enable digitisation of health records and deliver remote healthcare services.

What opportunity do you see for private healthcare players in rural India?

In rural areas, we work through our company Johnson and Johnson Hospital Supplies, currently catering to 18,000-20,000 nursing homes across Tier-2 and Tier-3 towns.

You could consider them semi-urban or rural. But is that enough? No, the real opportunity lies in primary and secondary healthcare centres. The government is focusing on producing tertiary care (AIIMS-like institutions) but there's a big gap in the primary and secondary care segment. Nathealth has scope here as well for member companies to get together and develop infrastructure for rural India.

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