

**Monitoring and Evaluation of Programme Implementation Plan, 2018-19
Nanded District, Maharashtra**

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Monitoring and Evaluation of Programme Implementation Plan, 2018-19: Nanded District, Maharashtra

1. Executive Summary

As directed by the Ministry of Health and Family Welfare (MOHFW), the monitoring and evaluation of the PIP 2018-19 of Nanded District were carried during the period of June 18 to 23, 2018. The District Health Office, Women's Hospital, SDH Mukhed, RH Biloli, PHC Aradhpur and SC Loni KH were visited for the study. As there is a Medical College in the district, District Hospital does not exist. The District Hospital is recently sanctioned for the district. PRC team visited Nanded during 18-23 June 2018. The team comprised of two officials from PRC side and Monitoring and Evaluation Officer of the district. The M&E officer accompanied the PRC team at some places ADHO, JSSK Co-ordinator, and IPHS Coordinator was available during the visit. This report discusses in detail the implementation of PIP in Nanded district as observed during the field visit for monitoring. The key findings are given below:

Key Conclusions and Recommendations

- Under NRHM, 1011 posts of different discipline are sanctioned of which 953 are filled and 58 are vacant for the district as a whole. Total 1854 regular positions of different discipline are sanctioned and 1502 are filled and 352 positions are vacant.
- AYUSH is integrated and mainstreamed with the system. Awareness about AYUSH is also good in the district. AYUSH OPD is quite remarkable as compared to regular OPD. As all the departments of AYUSH are functioning well in the district. Adequate medicine is being supplied for all AYUSH facilities. Total 32 positions are sanctioned for AYUSH and all are filled.
- Under JSSK, the pregnant women in Nanded district receive benefits like free registration, check-up, treatment and delivery including caesarean section and blood transfusion. Neonates receive free registration, check-up and treatment within 0-365 days of birth. Free transportation facility to mother and neonates are available from their residence to hospital, hospital to hospital and hospital to the residence. They also receive free diet during their stay in the hospital.
- During the reference period April to June 2018, 8196 pregnant women delivered at various public institutions i.e. Women's Hospital, Sub District Hospitals, Community Health Centres and Primary Health Centres under free and zero expenses delivery of JSSK. All of them were

provided with free diet for 3 days in case of normal deliveries and 7 days for C-Section delivery.

- JSY guidelines are followed for making payments. Full payment (in one instalment) of JSY is paid through Account transfer and is given to the beneficiary at the time of discharge or within seven days of discharge. In connection with the payment of JSY, it is told to the team that beneficiaries are facing problems in getting JSY payment as it is paid by Account transfer of national bank. To get the benefit, they have to open an account with minimum balance of Rs.500/- and most of the time there are no national banks in the villages, in that case, they have to travel to the Block place with recently delivered women; which is really inconvenient and even if somebody open an account in the bank they will get only after maintaining of minimum balance in the account. If we consider the travelling cost from village to Block place and return home for two persons it will be more than the amount they are going to get under JSY. The gravity of this problem is high among tribals. These may be some of the causes for low performance in JSY benefit.
- Nutrition Rehabilitation Centre is established at the District Woman Hospital with 10 beds. One position of Medical Officer is sanctioned and filled, One Nutrition officer is sanctioned and filled 4 GNM sanctioned and two positions filled two vacant. Basic Infrastructure is there.
- SNCU is located in women hospital. It was recently inaugurated on February 23, 2014. 20 post is sanctioned and all the post are filled.
- Rashtriya Bal Swasthya Karyakram is monitored by District Hospital. District Nodal Officer for RBSK is appointed. It is being implemented in all the 14 blocks of the district. Total 45 teams are working under the programme.
- ARSH clinics (MAITRI) are established at Women's hospital in the District, SDH Mukhed, SDH Degloor, and SDH Gokunda and at Government Medical College. One counsellor is appointed on contractual basis under NRHM and trained in ARSH programme. One Male Medical Officer and one Female Medical Officer are given the additional responsibility of ARSH. In all the SDHs, the existing staffs are given additional responsibility. The clinic provides health information, counselling and testing to persons aged between 10-19 years.
- Segregation of biomedical waste is being done at all the facilities visited.
- Display of appropriate IEC material related to MCH, JSY, JSSK, FP, etc., are seen at WH Nanded, SDH Mukhed CHC Biloli, PHC Aradhapur, and SC Loni. EDL, important phone numbers, clinical protocols etc. are prominently displayed at all the above facilities.

The district has established linkages to fill service delivery gap. One Mobile Medical Unit is covered 45 villages in 4 Blocks. There is a good impact of the services in the periphery. In the district, most of the ASHAs receive on an average incentive amount of Rs. 2500/- and the highest incentive of Rs. 9000/ was provided during the reference period.

2. Introduction

In keeping with the goals of the National Rural Health Mission, the Programme Implementation Plan (PIP) 2018-19 has been designed and submitted to the MOHFW, New Delhi by all the states and the Union territories of the country. The PIPs categorically specify the mutually agreed upon goals and targets expected to be achieved by a state or a UT while adhering to the key conditionalities and the roadmap given for PIP. In order to assess the implementation and progress of PIP, the MOHFW, New Delhi has assigned the task of evaluation and quality monitoring of the important components of PIPs to various PRCs. PRC, Pune was assigned the evaluation study of the PIP of Maharashtra for each month of 2018-19. The present report deals with the findings of the monitoring and evaluation of PIP conducted in Nanded District of Maharashtra for the reference period April to June 2018.

As directed by MOHFW, the monitoring and evaluation of PIP 2018-19 for Nanded District were carried during the period 18-23 June 2018. In order to carry out quality monitoring and evaluation of important components of PIP, various types of check-list developed by the Ministry were used. The check-list for District and Facilities were aimed at gathering data pertaining to the actual implementation of PIP at the district and facility level.

Two officials from PRC, Pune visited the district during 18-23 June, 2018 to obtain information on the implementation of PIP in the district. The DHO Office, DPMU, Women's Hospital, one SDH, one CHC, one PHC and one SC were selected for the study. PRC team was accompanied by Monitoring & Evaluation Officer at some places. The team received cooperation from the district officials and all the staffs of the facilities visited. This report discusses in detail the implementation of PIP in Nanded district as observed by the PRC team during the field visit.

3. District Profile and Key health and service delivery indicators

Nanded is one of the districts of Marathwada regions of Maharashtra and has a predominantly agrarian economy. It comprises sixteen talukas viz. Mahur, Nanded, Hadgaon, Kinwat, Bhokar, Billoli, Degloor, Mukhed, Kandhar, Himayatnagar, Ardhapur, Mudkhed, Umri, Dharmabad, Naigaon and Loha. Majority of its population is engaged in agricultural activities. Very few industries exist in the district. The existing industries are agriculture based. Majority of its population lives in rural areas. The total literacy rate of Nanded district is 75.45% as compared to 82.34% of Maharashtra in 2011.

As per 2011 Census, the total population of the district is 3361292 with the male population of 1730075 and female population of 1631217. The district constitutes about 3 per cent of total population of the state. The district has a population density of 273 inhabitants per square kilometre (830 /sq mi). Its population growth rate over the decade 2001-2011 was 16.7%. The population by sex shows that males constitute about 51.47 percent and females constitute about 48.52 percent of the total population of the district. Nanded has a sex ratio of 937 females for every 1000 males.

The child sex ratio in the district is 910 female children per 1000 male children in 2011. In 2011 the sex wise Literacy rates show that it is 84.27 percent for males and 66.15 percent for females with a

gap of almost 12.61 percent between males and females. Female literacy is much lower than the state average of 75 percent.

Location of Nanded District in Maharashtra



Key Demographic Indicators: Maharashtra and Nanded District (2011)

Sr. No.	Items	Maharashtra	Nanded
1	No. of Blocks	355	16
2	No. of Villages	43,663	1645
3	Population (2011)	11,23,72,972	33, 61,292
4	Population - Males (2011)	5,83,61,397	17, 30,075
5	Population - Females (2011)	5,40,11,575	16, 31,217
6	Literacy Rate (2011)	82.91	75.45
7	Literacy Rate - Males (2011)	89.82	84.27
8	Literacy Rate - Females (2011)	75.48	66.15
9	Sex Ratio (2011)	925	943
10	Child Sex Ratio (2011)	883	910
11	Density of Population (2011)	365	273
12	Percent Urban (2011)	45.23	27.18
13	Percent SC Population (2011)	11.8	19.05
14	Percent ST Population (2011)	9.4	8.38

Source census of India 2011

4. Key Health and Service Delivery Indicators (DLHS-4): Maharashtra and Nanded District

Sr. No.	Indicators from DLHS-3	Maharashtra	Nanded
1	Mothers registered in the first trimester (%)	61.6	58.3
2	Mothers who had at least three ANC visits (%)	74.4	72.8
3	Mothers who got at least one TT injection (%)	88.7	79.5
4	Institutional births (%)	63.5	87.2
5	Home deliveries assisted by SBA (%)	5.7	11.6
6	Children fully immunised (%)	69.0	49.2
7	Children breastfed within one hour of birth (%)	52.5	67.9
8	Percent of women using modern FP methods	63.9	63.2
9	Total Unmet Need for FP (%)	13.6	22.8
10	Unmet need for spacing (%)	5.9	11.5
11	Unmet need for limiting (%)	7.7	11.3

Source: DLHS-4

Number and type of government health facilities in Nanded district

Name of the facility	Number	No. of Beds
Women Hospital	1	100
Sub District Hospital – Mukhed	1	100
Sub District Hospital – Deglur	1	50
Sub District Hospital – Hadgaon	1	50
Sub District Hospital - Gokunda	1	50
CHC Hospitals	12	30 each
Primary Health Centres	65	6 each
Sub Centres	377	
AYUSH facilities (Ayurveda)	7	1
AYUSH facilities (Homeopathy)	6	

Nanded District: Key Service Utilization Parameters (April 2018 to May 2018)

Service Utilization Parameter	Women's Hospital	SDH MUKHED	RH Biloli, (Block Mukhed)	PHC Aradhapur	SC Lonikh)
OPD	8373	15008	7536	2905	
IPD	537	2443	936	137	
Expected number of pregnancies (reported)		665	387	1329	162
MCTS entry on percentage of women registered in the first trimester	00	86	68	102	22
No. of pregnant women given IFA	106	115	66	198	53
Total deliveries conducted	220	224	86	78	01
Number of Deliveries conducted at home					00
No. of assisted deliveries(Ventouse/Forceps)	01	00	00		
No. of C-Section conducted	00	4	00		
No. of obstetric complications managed	19	30	9		
No. of neonates initiated breastfeeding within 1 hr	221	224	86	78	01
No. of children screened for defects at birth under RBSK	00	00	00	00	00
RTI/STI Treated	63	28	00	10	
No. of admissions in NBSUs/SNCU	52	34	27	00	
In-born	26	32	27	00	
Out-born	26	2	00	00	
No. of children admitted with SAM	10	00	00	00	
No. of sick children referred	11	17	8	00	00
No. of pregnant women referred	20	88	29	40	6
ANC1 Registration (reported)	27	115	68	198	31
ANC 3 Coverage	50	86	51	210	27
ANC 4 Coverage	106	80	81	48	00
No. of IUCD Insertions	29	00	14	12	4
No. of Tubectomy	00	1	00	00	
No. of Vasectomy	00	00	1	00	
No. of Minilap	00	1	00	00	
No. of children fully immunized	136	93	51	144	18
Measles coverage	136	93	51	144	18
No. of children given ORS + Zinc	365	156	300	40	7
No. of children given Vitamin A	00	00	154	144	41
No. of women accepted post-partum FP services	220	00	25	00	
No. of MTPs conducted in first trimester	3	00	2	00	
No. of MTPs conducted in second trimester	00	00	00	00	
Number of Adolescents attending ARSH clinic	00	00	368	0	
Maternal deaths, if any	00	00	00		00
Still births, if any	00	00	00	1	00
Neonatal deaths, if any	00	00	00	00	00
Infant deaths, if any	00	00	00		
Number of VHNDs attended					13
Number of VHNSC meeting attended					1
Service delivery data submitted for MCTS updation					00

5. Health Infrastructure

Nanded is having Government Medical College, therefore no district hospital exists. But 100 bedded Women's Hospital is functioning. However, due to the paucity of space, it is functioning as 45 bedded and it is functioning in a government building, which is newly constructed. Many of the departments are not functioning as there is a severe problem of space. Construction work is in progress. Once it will over it will function in full strength. There are four SDHs in Nanded district: at Mukhed (100 bedded), Deglur (50 bedded), Hadgaon (50 bedded) and Gokunda (50 bedded). There are twelve Rural Hospitals in the district and all of them are with 30 beds. All of them are located in Government buildings. The district has 65 Primary Health Centres which is 57 are functioning from government buildings. The district has 377 Sub Centres.

AYUSH facility is co-located and is available at seven facilities in the district and Ayurveda, Homeopathy and Unani are the most popular medicines and Yoga is not available in the district. The district has established linkages to fill service delivery gap. One Mobile Medical Unit is running under SHATAYUSHI FOUNDATION In 45 villages of 4 blocks. There is a good impact of the services in the periphery.

6. Human Resources

In the district, a total 1854 regular positions of different discipline are sanctioned of which 1500 are filled and 354 positions (19.1 percent) are vacant. Under NRHM, 1110 posts of different discipline are sanctioned of which 1044 are filled and 66 are vacant (5.9 percent) for the district as a whole.

There is a Government Medical college in the district. Hence, District hospital is sanctioned, Civil Surgeon, RMO outreach, Office Superintendent and clerical staff to assist overall monitoring of SDH and RH. Civil Surgeon is the administrative head of these facilities. There are four SDH and thirteen RH in the district.

The sanctioned position of Nursing cadre is 692 out of which 481 positions are filled on regular basis (30.5 percent) are vacant. In Class-III cadre, 182 various positions are sanctioned for SDH and RH i.e., Ophthalmic Assistant, Pharmacist, Audiologist, Laboratory Technician, Accountant cum Data Entry Operator, Dental Technician, X-Ray Technician. Out of 145 sanctioned positions, 37 positions are filled.

Regular Staff under District Health Officer (DHO) in Nanded District

Sr. No.	Name of Post	Sanctioned Post	Filled up Post	Vacant Post
1	District Health Officer	1	1	0
2	Asst. Director Leprosy CI-I	1	1	0
3	Additional District Health Officer CI-I	1	1	0-
4	Asst. District Health Officer CI-I	1	0	1
5	District RCH Officer CI-I	1	0	1
6	District Tuberculosis Officer CI-I	1	0	1
7	Administrative Officer CI-II	1	0	1
8	District Malaria Officer CI-II	1	0	1
9	Taluka Health Officer Group A	16	15	1
10	MO Group A	162	155	7
11	Epidemiology MO	1	1	0
12	Statistical Officer	1	1	0
13	Section Officer	1	1	0
14	Office Superintendent	1	1	0
15	Accounts Assistant	1	1	0
16	Jr. Accountant	1	1	0
17	Sr. Assistant	1	1	0
18	Sr. Assistant Accounts	1	1	0
19	Junior Assistant	0	0	0
20	Stenographer	1	1	0
21	Extension Officer (Stat.)	1	1	0
22	Extension Officer (Ayurved.)	1	1	0
23	Public Health Nurse	1	1	0
24	Attendant	7	7	0
25	Dresser	0	0	0
26	Health Worker (Male)	287	211	76
27	Health Assistant	130	130	0
28	Health Worker (Female)	626	416	210
29	Health Assistant (Female)	65	65	0
30	Pharmacists	92	83	9
31	Health Supervisor	0	0	0
32	Leprosy Technician	46	22	24
33	Laboratory Technician	26	23	3
34	Sweeper	377	360	17
	Total	1854	1502	352

Contractual staff appointed under NRHM in Nanded District 2018-19

Sr. No.	Name of Post	Sanctioned Post	Filled up Post	Vacant Post
1	DPMU	5	5	0
2	M&E	4	4	0
3	IPHS	99	87	12
4	Non iphs	4	1	3
5	FMG	5	5	0
6	Blood bank	9	9	0
7	ASHA	91	85	6
8	EMS	1	1	0
9	RBSK	83	79	4
10	DEIC	1	1	0
11	AYUSH	32	32	0
12	Sickle Cell	14	14	0
13	IWD	5	5	0
14	BPMU	32	29	3
15	Procurement	2	2	0
16	INFRASTRUCTURE HUMAN RESOURCES	360	360	00
17	Urban RCH	28	27	1
18	RKSK	19	17	2
19	Tele Medicine	3	3	0
20	PCPNDT	1	1	0
21	Quality Assurance	3	2	1
22	NOHP	3	3	0
23	NURSING SCHOOL	10	10	0
24	NPCB	3	3	0
25	SNCU	20	20	0
26	NBSU	16	16	0
27	NRC	9	7	2
28	DTT	4	4	0
29	NCD	60	54	6
30	NCD (NTCP)	3	3	0
31	NCD(NPHCE)	7	7	0
32	IDSP	4	3	1
33	RNTCP	32	32	0
34	NLEP	15	7	8
35	NHUM	17	8	9
36	FLUOROSIS	1	1	0
37	DAKSHTA	1	1	0
38	IMMUNIZATION	5	5	0
	TOTAL	1101	953	58

Training status of all cadres in the district up to May 2018-2019

Sl.No.	Type of Training	MO	ANM	LHV	SN	HA	MPW	ASHA
1	SAB	0	9	0	0	0	0	0
2	BEmOC	4	0	0	0	0	0	0
3	F-IMNCI	0	0	0	2	0	0	0
4	IMEP	0	10	0	0	0	0	0
5	PPIUCD	0	12	0	0	0	0	0
6	RI MO	6	0	0	0	0	0	0
7	RTI/STI	8	0	0	0	0	0	0
8	IYCN Trg. 3 days	0	19	0	0	0	0	0
9	NSSK Trg.	0	6	0	0	0	0	0

7. Other Health System Inputs

Following services are available at various health facilities of the Nanded district: Surgery (major and minor), Medicine, Obstetrics and Gynaecology, FP services, Cardiology, Emergency, Trauma Care, Ophthalmology, ENT, Ancillary Services of Blood Bank, Radiology, Pathology, Mild In-patient management, C-section deliveries, OPD Medicines and OPD Gynaecology.

Availability of drugs and diagnostics and equipment

The lists of essential drugs (EDL) are formulated and are available in all types of facilities. Supplies are allocated to various facilities depending upon the case load and demand. Computerised Drug Inventory System is in place.

AYUSH Services

AYUSH services are co-located in various SDHs and RHs of the District. Ayurveda, Homeopathy and Unani services are available at four SDHs namely Mukhed, Hadgaon, Degloor, Gokunda and in eight RHs namely Umari, Loha, Khandar, Naigaon, Biloli, Bhokar, Dharmabad and Mahur. AYUSH OPD clinics are monitored separately. Total OPD of AYUSH services during April to May 2018 is 24559 and IPD is 330. Adequate medicine is being supplied for all AYUSH facilities. Total 21 positions are sanctioned for AYUSH and 21 are filled.

Sr.No.	Department	OPD	IPD
1	Ayurveda	7910	73
2	Panchkarma	376	48
3	homeopathic	6933	70
4	Unani	8211	90
5	Illaj Bid Tajbid	799	49
	Total	24229	330

User Fees

At various facilities, user fee is charged for only for few services i.e. registration Rs. 5/-, X-Ray-Rs. 30/-All services are free for patients under JSSK, BPL and SCs/STs.

8. Maternal Health

8.1 ANC and PNC

As per HMIS data, the number of ANC registration is 10400 from April 2018 to May 2018. Of which 8608 women were registered in the first trimester. Severely anaemic pregnant women reported in HMIS are 359, HB below 11 is 9002 and HB level below 7 is 359. The number of Hypertension cases reported during April to May 2018 is 91. The number of women received TT Booster is 3988 and 9408 women received IFA tablets during April to May 2018. The number of tests conducted for Blood Sugar, Urine Sugar and Protein 1439.

8.2 Institutional Deliveries

During April to May 2018, the number of institutional deliveries conducted in the district is 8196 including C-Section deliveries at public institutions. C-Section deliveries are 471.

8.3 Maternal Death Review

During the period April to May 2018, maternal deaths were not reported in the district. But MDR committee is there.

8.4 JSSK

As per Government of Maharashtra Resolution dated 26th September 2011, JSSK has been launched from 7th October 2011 in all the districts of Maharashtra. Under JSSK, the pregnant women in Nanded district receive benefits like free registration, check-up, treatment and delivery including caesarean section and blood transfusion. Neonates receive free registration, check-up and treatment within 0-365 (recently issued circular by state Govt.) days of birth. Free transportation facility to mother and neonates are available from their residence to hospital, hospital to hospital and hospital to the residence. They also receive free diet during their stay in the hospital.

During the reference period, 8196 pregnant women delivered at various public institutions i.e. Women's Hospital, Sub District Hospitals, Community Health Centres and Primary Health Centres under free and zero expenses delivery. All of them were provided with free diet for 3 days in case of normal deliveries and 7 days for C-Section delivery, free medicines and diagnostic tests. About 1673 women were provided with home to hospital free transport, 1869 women were provided hospital to hospital transport in referral services and 2036 women were provided drop back facility.

8.5 JSY

JSY guidelines are followed for making payments. Full payment (in one instalment) of JSY is paid through Account transfer and is given to the beneficiary at the time of discharge or within seven days of discharge. The district health officials strictly monitor JSY by randomly doing physical verification of JSY beneficiaries. At the district level, the Grievance Redressal Mechanism is activated as stipulated under JSY guidelines

In connection with the payment of JSY, it is told to the team that beneficiaries are facing problems in getting JSY payment as it is paid by DBT of the national bank. To get the benefit they have to open Bank Account with a minimum balance of Rs.500/- and most of the time there is no national bank in the villages, in that case, they have to travel to the block place with recently delivered women. Which is really inconvenient and even if somebody opens an account in the Bank, they will get only Rs.100-200/-. If the travelling cost is considered from village to Block place and return to home for two persons, it will be more than the amount they are going to get. This is also one of the causes of low JSY performance.

9. Child Health

9.1 ISNCU

SNCU is located in Women's Hospital. It was recently inaugurated on February 23, 2014. Total Admission is 52 of which inborn cases are 26 and outborn cases are 26. Total 20 sanctioned post are available and filled.

9.2 NRCs

Nutrition Rehabilitation Centre is established at the District Woman's Hospital with 10 beds. One position of Medical Officer is sanctioned and filled, two positions of Staff Nurse is sanctioned and filled, and one position of dieticians is sanctioned and filled. Basic infrastructure is available in the NRC.

9.3 Immunization

Immunisation is being done at all the facilities as per Government of India guidelines. All the newborns delivered at Women's Hospital get the birth dose of immunization (Polio and BCG) as per the immunisation programme guidelines.

9.4 Rashtriya Bal Swasthya Karyakram (RBSK)

Rashtriya Bal Swasthya Karyakram is monitored by DPMU. District Nodal Person for RBSK is appointed. It is being implemented in all the 14 Blocks of the district and municipal corporation area of Nanded, viz., Nanded, Ardhapur, Mukhed, Bhokar, Hadgaon, Himayatnagar, Kinwat, Mahur, Loha, Kandhar, Degloor, Biloli, Naigaon, and Umri. Child Health Screening and Early Intervention Centre at the district level are established. Total 45 teams are working under the programme. Each team consists of one male and one female Medical Officer, one ANM and one Pharmacist. Plans for the visits are prepared and sent to the respective authorities by the RBSK teams. Children were identified with some problem were referred to higher facilities. The total number of SAM /MAM detected was reported as "zero".

10. Family Planning Services

Family planning services are being provided in all major facilities of the District. During the reference period April to May 2018, 879 female Sterilisation and One NSVs were performed. IEC materials are available in the district. During the ANC clinic, counselling sessions are being conducted by the ANM. PPIUCD services are available in the district. IUCD type 380 is available in the district.

11. ARSH

ARSH clinics (MAITRI) are established at Women's Hospital, SDH Mukhed, SDH Degloor, SDH Gokunda and at Medical College. One counsellor is appointed on contractual basis under NRHM and trained in ARSH programme. One Male Medical Officer and one Female Medical Officer are given the additional responsibility of ARSH. At all SDHs, existing staff is given additional responsibility. The clinic provides health information, counselling and testing to persons aged between 10-19 years.

12. Quality in Health Services

12.1 Infection Control: Health staffs are following the protocols. Fumigation of Operation Theatre is being done on regular basis. The autoclave is being used on regular basis for disinfection of the instruments.

12.2 Biomedical Waste Management: Segregation of biomedical waste and its management is outsourced at only WH Nanded and in other visited facilities deep burial pit mechanism is used for Biomedical waste management.

12.3 IEC: Display of appropriate IEC material related to MCH, JSY, JSSK, FP, etc., are seen at Women's Hospital, SDH Mukhed. Working hours of the facility, EDL, important phone numbers, clinical protocols etc. are prominently displayed at all the above facilities.

13. Referral Transport and MMUs

The number of ambulances of different types available in the district is 102 and 108. For the ambulance services, a Call Centre is established at the Central level at Pune. Performance monitoring is carried out on regular basis. During the reference period April 2018 – May 2018, the following services were provided: Home to the hospital (1673), inter-hospital (1869), and drop back to home (2036).

14. Community processes

14.1 ASHA

Total number of ASHAs required in the district is 1523 and total positions filled are 1513, Training for ASHAs in Module-6&7 is completed for 1423 ASHAs. ORS and Zinc are supplied to all ASHAs. FP methods (condoms) are given to all ASHAs, most of the ASHAs receive on an average the incentive amount of Rs. 2500/- and highest monthly incentive paid to ASHA is Rs. 9000/-.

15. Disease Control programmes

15.1 National Malaria control programme

The number of slides prepared during the reference period is 42762, of which one is positive. Rapid Diagnostic kits are not available since past two months.

15.2 Revised National Tuberculosis Programme (RNTCP)

The number of sputum test conducted during the reference period is 2748 of which the number of positive cases is 201. DOT medicines are available at all the facilities. All contractual 32 positions are filled.

15.3 National Leprosy Eradication Programme (NLEP)

The number of new cases detected is 32 and 263 and are under treatment.

16. Non Communicable Diseases

There is a facility set up in District for the screening of Non-Communicable Diseases. It is available at Medical CHC and SDH. The total number of persons attended NCD clinic is 2210 during the reference period out of which 70 persons are Male and 2140 are Female.

17. Good Practices and Innovations

For effective implementation of JSSK, there are instructions from DHO to all the facilities. Also if there is any shortage for POL from NRHM funds, then funds are being made available from regular grants.

Dialysis unit is available in the woman hospital Nanded. 149 patients utilised the dialysis unit service during the reference period out of which 67 patients are HD cycle. Total staff available in the unit are 8.

18. HMIS and MCTS

There are dedicated staffs for HMIS and MCTS. Additional responsibilities are given to the regular staff in addition to their regular duties. M&E is responsible for reporting the data for the district. Quality of HMIS data is fair although there are some concerns about the quality of data. Data is being uploaded in time. Data validation checks are applied at the district level.

19. PIP Expenditure:

Up to May 2018 of the total PIP fund 5.06 per cent are utilized.

Sr.No	Activities	Sanctioned Budget	Exp.	%
A	RCH	1304.22	73.11	5.61
B	NRHM	4734.82	228.42	4.82
C	R.I.	187.43	11.64	6.21
Total		6413.90	324.81	5.06

(Rs. In Lacs)

20. Observations from the Health Facilities Visited by the PRC Team

20.1 Human Resource at WH Nanded

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
1	MO CI-I	5	2	3
2	MO CI-II	12	10	2
3	Superintendent	1	0	1
4	Administrative officer	1	0	1
5	Asst. Matron	1	0	1
6	Staff Nurse	5	5	0
7	Parisevika	20	20	0
8	Child parisavika	8	1	7
9	X-Ray Technician CI-III	2	2	0
10	Pharmacist	3	3	0
11	Lab Technician	2	2	0
13	Diete tion	1	1	0
14	ECG TEC	1	1	0
15	Blood bank tec	2	1	1
16	Store keeper	1	0	1
17	Sr. Clerk	1	1	0
18	Jr. Clerk	2	2	0
19	OPD clerk	2	2	0
20	OPD Attendant	1	1	0
21	Lab. Attendant	3	3	0
22	Blood bank asst	1	0	1
23	Dresser	1	1	0
24	OT Attendant	1	0	1
25	Cajolety boy	3	2	1
26	Peon	2	2	0
27	Ward Boy	10	10	0
	Total	92	72	20
NRHM				
1	Mo	3	3	0
2	ANM/SN	4	3	1
3	Dietitians	1	1	0
4	Dialyses Tec.	3	3	0
5	Cock	1	0	1
6	Sweeper	2	0	2
	Total	14	10	4

Women's Hospital: Nanded

- Although even after the construction of the New building which has been ongoing since past 3 to 4 years they are yet to shift to the new building. Only NRC unit is functioning in the new building.
- Operation Theatre is not in working condition as it is functioning in an old building wherein the slab are broken. OT was closed during the reference period.

- The Women's Hospital is having sanctioned bed strength of 100 beds. But it is functioning currently with 45 beds due to paucity of the space. Construction of new departments is going on.
- The health facility is easily accessible from the nearest road. Staff quarters are not available for any of the staff. WH has electricity with power back up with a generator of 82 KV, running 24*7 water supplies; toilets are there in the ward and clean. Overall cleanliness is maintained. Toilets in the OPD are clean.
- Nutritional Rehabilitation Centre with 10 beds is available in the district. NRC is functioning from this facility. Both the child and mother are getting the diet from the Centre. In addition to that, the mother is getting paid for loss of wages for the period of stay in the NRC.
- SNCU facility with 18 beds is available in the hospital.
- IEC materials are displayed in the Women's Hospital. Complain or suggestion box is available.
- Segregation of waste in colour coded bins is followed. A mechanism for biomedical waste management is in place and outsourced.
- All the essential equipment is available at the Women's Hospital. All operation theatre and laboratory related equipment are available. Essential drug list and essential consumable list are available in the drug store but it is not displayed in the OPD.
- Pertaining to lab tests, all listed tests are being done in the facility.
- Neither Blood bank nor blood storage unit is available in the hospital.
- All mothers have initiated breastfeeding within one hour of normal delivery. Zero doses of BCG, Hepatitis B and OPV are given. Counselling on IYCF is done. Counselling on Family Planning is being done. Mothers are asked to stay for 72 hours (as per the new norm) after a normal delivery.
- JSY payment is made at the time of discharge by NFT, on the production of necessary documents. Diet is being provided to the patients free of cost.
- There is a provision of management of high-risk pregnancies, sick neonates and infants. Staffs are trained for use of partograph. Vaccination is done properly.
- Hospital provides essential new born care.
- IMEP protocol information or posters are displayed.
- There is a committee for reviewing of MDR and IDR.
- All-important registers are available for maintenance of records. IEC material is displayed in the OPD as well in the wards. Information about JSY and JSSK is displayed. Citizens Charter is displayed. EDL, protocol posters, list of services available are not displayed.
- Immunization schedule is displayed in the OPD.
- Regular Fogging is being done by Municipal Corporation. Laundry/washing services are outsourced. Dietary services, drug storage facilities, equipment maintenance and repair mechanism are available.
- Grievance Redressal mechanism is available under the chairpersonship of Medical Superintendent.
- At Women's Hospital, Class-I Medical Officers 5 posts are sanctioned of which 2 is filled and 3 are vacant; 12 Class-II Medical Officers posts are sanctioned of which 10 are filled and 2 is vacant; 34 Nursing cadre positions are sanctioned and 29 positions are filled and 5 are

vacant; In Class-III & Class IV cadre, 43 positions are sanctioned of which 36 positions are filled and 7 are vacant.

20.2 Sub District Hospital: MUKHED

Human Resource at SDH Mukhed

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
1	MO CI-I	1	0	1
2	MO CI-II	13	12	1
3	MO CL -III	1	1	0
4	Superintendent	1	1	0
5	Administrative officer	1	0	1
6	Asst. Matron	1	0	1
7	Staff Nurse	5	3	2
8	Parisevika	27	27	0
9	X-Ray Technician CI-III	2	1	1
10	Pharmacist	3	3	0
11	Lab Technician	2	2	0
12	phycition	1	1	0
13	Diete tion	1	1	0
14	ECG TEC	1	1	0
15	Blood bank tec	2	1	1
16	Ophthalmic	1	1	0
17	Store keeper	1	1	0
18	Sr. Clerk	1	1	0
19	Jr. Clerk	2	2	0
20	OPD clerk	2	1	1
21	Driver	1	0	1
22	OPD Attendant	1	1	0
23	Lab. Attendant	3	3	0
24	Blood bank asst	1	1	0
25	Dresser	1	0	1
26	OT Attendant	2	1	1
27	Cajolety boy	3	3	0
28	Peon	2	2	0
29	Ward Boy	10	10	0
30	Sweeper	3	3	0
	Total	96	84	12
NRHM				
1	Mo	11	11	0
2	Pharmacist	4	4	0
	ANM	10	10	0
3	Dresser	1	1	0
4	Homeopathy MO	1	1	0
5	Ayurveda MO	1	1	0
6	Dentist	1	1	0
7	Sickle Cell Lab Tech.	1	1	0
9	Counsellor	1	1	0
	Driver	2	2	0
	Total	33	33	0

- Mukhed Sub District Hospital is in Mukhed Block and is about 80 km from district headquarter. On the day of PRC team visit to SDH, all staff was present on duty, In-charge Medical Superintendent. Bed strength of the hospital is 100. Hospital is located in the government building. The building is in good condition. Quarters are available for MOs, Staff Nurses and other category workers. Electricity is available with power back up of generator, running water is available 24*7. Separate toilets are there for male and female wards and labour room is clean. It is well accessible from the main road. Non Functional units are New Born Sick Unit and Stabilization Unit. Neither Blood Bank nor Blood storage unit is available at the facility. Nutritional Rehabilitation Centre is also not available but Child Treatment Centre is available at the facility. Separate room for ARSH clinic is available. A functional help desk is available in the facility. Waste management is outsourced. Suggestion and complaint book is available.
- All the essential equipment is available at SDH. Laboratory related equipment is available.
- Essential Drug List is available. Computerised inventory management is available. IFA tablets blue is not being supplied. Misoprostol and Mifepristone tablets are available. Emergency contraceptives and sanitary napkins are not supplied to the facility. The labelled emergency tray is available. Pertaining to lab tests, kits and chemicals are available. All lab tests are being done.
- All essential consumables are being supplied.
- All mothers have initiated breastfeeding within one hour of normal delivery. Routine immunisation is done at SDH. Zero doses of BCG, Hepatitis B and OPV are being given. Counselling on IYCF is done. Counselling on Family Planning is being done. Mothers are advised to stay for 72 hours after normal delivery.
- JSY payment is made at the time discharge or after seven days of discharge on the production of necessary documentation. Payment mode is direct to benafacarys Account .
- Diet is being provided to the patients free of cost.
- All high-risk pregnancy are Managed at the facility. All essential new-born and sick neonates care are available. Partograph is used correctly.
- Segregation of waste in colour coded bins is available. Bio-waste management is outsourced. The facility adheres to IMEP protocols.
- All-important registers are available for maintenance of records.
- Most of the IEC material is displayed.
- Registers for Untied Funds, AMG and RKS funds are maintained.
- Under JSSK, during the reference period, 3 women have received home to facility pick up service; 88 women have received inter-facility vehicle services, and 170 women have received drop back facility. Three children have received home to facility pick up service, 17 children have received inter-facility vehicle services and 4 children have received drop back facility.
- Approach roads have directions to the health facility. Citizen Charter, Timings, List of services, Essential Drug List, Protocol Posters JSSK entitlements are displayed at the facility.

Immunization Schedule, JSY entitlements and other related IEC materials are displayed in ANC and PNC Clinics.

- Regular fumigation is being done. Laundry/washing service is outsourced, dietary services, drug storage facilities, equipment maintenance and repair mechanism, Grievance Redressal mechanism are available in the facility.

20.3 Human Resource at RH Biloli

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
1	MS	1	0	1
2	MO	3	3	0
3	Asst. Superintendent	1	0	1
4	Parisevika	7	7	0
5	X-Ray Technician CI-III	1	1	0
6	Pharmacist	1	1	0
7	Lab Technician	1	1	0
8	Lab asst	1	0	1
9	Ophthalmic	1	1	0
10	Jr. Clerk	2	2	0
11	Driver	1	0	1
12	Ward boy	4	2	2
13	Peon	1	0	1
14	Sweeper	2	1	1
	Total	27	19	8
NRHM				
1	Mo	7	7	0
2	Pharmacist	3	3	0
	ANM	8	8	0
3	Dresser	1	1	0
6	Dentist	1	1	0
7	Lab Tech.	1	1	0
9	Counsellor	2	2	0
	Total	23	23	0

- Biloli CHC is an Ideal CHC. In the premises and internal part of the hospital are well maintained.
- Biloli CHC is in Biloli Block and is about 70 km from district headquarter. On the day of the PRC team visit to CHC, all staff was present on duty, In-charge Medical Superintendent. Bed strength of the hospital is 50. Hospital is located in a government building. The building is in good condition. Quarters are available for MOs, Staff Nurses and other category workers. Electricity is available with power back up of generator, running water is available 24*7. Separate toilets are there for male and female wards and labour room is clean. It is well accessible from the main road. Functional New Born Sick Unit and Blood storage unit is available at the facility. Child Treatment Centre is available at the facility. Suggestion and complaint book are available.
- All the essential equipment is available at CHC. Laboratory related equipment is available.

- Essential Drug List is available. Computerised inventory management is available. IFA tablets blue is not being supplied. Mifepristone tablets are not available for past one month. Emergency contraceptives and sanitary napkins are not supplied to the facility. The labelled emergency tray is available. Pertaining to lab tests, kits and chemicals are available. All lab tests are being done. All essential consumables are being supplied.
- All mothers have initiated breastfeeding within one hour of normal delivery. Routine immunisation is done at CHC. Zero doses of BCG, Hepatitis B and OPV are being given. Counselling on IYCF is done. Counselling on Family Planning is being done. Mothers are advised to stay for 72 hours after normal delivery.
- JSY payment is made at the time discharge or after seven days of discharge on the production of necessary documentation. Account Transfer is being given.
- Diet is being provided to the patients free of cost.
- All high-risk pregnancy is managed at the facility. All essential new-born and sick neonates care are available. Partograph is used correctly.
- Segregation of waste in colour coded bins is available.
- All-important registers are available for maintenance of records.
- Most of the IEC material is displayed.
- Registers for Untied Funds, AMG and RKS funds are maintained.
- Under JSSK, during the reference period, 10 women have received home to facility pick up service; 29 women have received inter-facility vehicle services, and 74 women have received drop back facility. Three children have received home to facility pick up service.
- Approach roads have directions to the health facility. Citizen Charter, Timings, List of services, Essential Drug List, Protocol Posters JSSK entitlements are displayed at the facility. Immunization Schedule, JSY entitlements and other related IEC materials are displayed in ANC and PNC Clinics.
- Regular fumigation is being done. Laundry/washing service is outsourced, dietary services, drug storage facilities, equipment maintenance and repair mechanism, Grievance Redressal mechanism are available in the facility.

20.4 The video of CHC Biloli is like a privet hospital. Infrastructure in outside and inside hospital is very good.



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20.5 Primary Health Centre: Aradhapur

- PHC Aradhapur is located about 25 KMs from the district headquarters. It covers 28 villages and caters to about 66327 of the population in the periphery. It is functioning in Government building and in good condition. Staff quarters are available, one each for MO, LHV, SN, HA and Pharmacist. Additional six beds are sanctioned to the facility and building is also constructed. PHC has electricity with power back up, running 24*7 water supplies and partially clean toilets separately for male and female wards are available. Labour Room is partially clean. New Born Care Corner is available. Separate wards for male and female are available. BioMedical Waste is being disposed of in a deep burial pit at the premises of the facility.

Human Resources at PHC Aradhapur

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
1	Medical officer	2	2	0
2	ANM	1	1	0
	GNM	2	2	0
3	LHV	2	2	0
4	Pharmacist	1	1	0
	Clark	1	1	0
5	Lab Technician	1	1	-
7	Driver	1	1	-
8	Class IV	5	3	2
9	Sweeper	1	1	0
10	Total	17	15	2

- All the essential equipment is available at PHC. Essential drug list is available. Diagnostic tests are available at the facility for HB, CBC, Urine Albumin and Sugar, Blood Sugar, RPR, Malaria, TB, HIV and Sickle Cell.
- All mothers have initiated the breastfeeding within one hour of normal delivery. Zero doses BCG, Hepatitis B and OPV are given. Counselling on IYCF is done. Counselling on family planning is being done. Mothers asked to stay for 72 hours after delivery but patients are reluctant to stay even for 24 hours. JSY payments are made at the time of discharge. The mode of payment is by JSY in Account. Regarding transfer of the amount to bank accounts for poor beneficiaries is very difficult as they are unable to open the bank account with “zero” balance account. Free diet is being provided to the patients under JSSK.
- As the MO was available at the time of the visit of the PRC team, the registers were available for the team for reference.
- IEC materials are displayed in the facility; citizen charter is displayed in the facility.
- Grievance redressal mechanism is in place.
- Protocol Posters and JSSK entitlements are displayed in the facility.
- Under JSSK 89 women have received home to institute transport; inter-institute transport is provided to 19 women; drop back facility from PHC to home was given to 12 women.
- Weaknesses: Staff quarters are available for all essential staff but are not in good condition. Most of the staff stay in campus. On the day of our visit to the facility, all staff, including MO was available. IEC materials are not displayed in the facility.

20.6 Sub Centre: Loni (kh)

- Loni (kh) Sub Centre is under the catchment area of Aradhapur PHC and is about 5 KMs from the PHC. This SC is catering to 7 villages and covers a population of about 8000. The Sub Centre is located in the main habitation. The ANM also stays in the same house. There is no running water and electricity for 24*7. Labour room is not working. There is no functional NBCC. No deep burial pit is available for biomedical waste management.
- All the essential equipment is available at SC. Essential drug list is available. IFA syrup with dispenser is not available since last one month. Diagnostic tests are available at the facility i.e. HB, Urine Albumin and Sugar.
- Following medicines are available at the facility: IFA tablets, Vit. Syrup, ORS packets, Zinc tablets Inj. Oxytocin, Antibiotic, drugs used for common ailments. and Inj. Magnesium Sulphate. Misoprostol tablets are not available at the facility.
- Pregnancy test kit is not available since last one month, OCPs and emergency contraceptives are available in the facility but there is no supply of sanitary napkins.
- All the essential Registers are maintained at the facility.
- Breastfeeding is initiated with within one hour of normal delivery. Counselling on IYCF is done. Counselling on Family Planning is being done.
- ANM is having knowledge and skills of quality parameters.
- Untied Funds and AMG are not received by the ANM and records are maintained.
- JSY payment is made to the beneficiaries as per the norms at the time of discharge.
- Approach road is having directions to the health facility. SBA protocol posters are displayed in the facility. Posters of JSSK entitlements, villages under the SC, VHND plans and Citizens Charter are displayed in the facility. Information related to the phone number, timings immunisation schedule and JSY entitlement are not displayed. Grievance redressal mechanism is not in place.

21. Annexure

List of Abbreviations

AEFI	Adverse Events Following immunization
AIDS	Acquired Immuno Deficiency Syndrome
AMG	Annual Maintenance Grant
ANM	Auxiliary Nurse Midwife
ARSH	Adolescent Reproductive and Sexual Health
ASHA	Accredited Social Health Activist
AWC	Anganwadi Centre
AYUSH	Ayurveda, Yoga & Naturopathy, Unani, Siddha & Homoeopathy
BPMU	Block Programme Management Unit
CHC	Community Health Centre
CTC	Child Treatment centre
DH	District Hospital
DMER	Director, Medical Education and Research
DMO	District Medical Officer
DM&HO	District Medical and Health Officer
DPMU	District Programme Management Unit
EmOC	Emergency Obstetric Care
FP	Family Planning
FRU	First Referral Units
HBNC	Home-based Newborn Care
HIV	Human Immunodeficiency Virus
ICTC	Integrated Counselling & Testing Centre
IEC	Information, Education and Communication
IFA	Iron Folic Acid
IMEP	Infection Management and Environment Plan
IMNCI	Integrated Management of Neonatal and Childhood Illness
IMR	Infant Mortality Rate
IPHS	Indian Public Health Standards
IUCD	Intra-uterine Contraceptive Device
JSS	Janani Shishu Suraksha Karyakram
JSY	Janani Suraksha Yojana
LBW	Low Birth Weight
LAMA	Left Against Medical Advice
LHV	Lady Health Visitor
MCT	Mother and Child Tracking System
MHS	Menstrual Hygiene Scheme
MIS	Management Information System
MMR	Maternal Mortality Ratio
MMU	Mobile Medical Unit
MHW	Multipurpose Health Worker
MO	Medical Officer
MTP	Medical termination of Pregnancy
MVA	Manual Vacuum Aspiration
NBCC	Newborn Care Corner
NBSU	Newborn Stabilisation Unit
NDCP	National Disease Control Programme
NGO	Non-Governmental Organisation
NICU	Neonatal Intensive Care Unit
NLEP	National Leprosy Elimination Programme
NPCB	National Programme for Control of Blindness
NRHM	National Rural Health Mission

