# Monitoring and Evaluation of Programme Implementation Plan, 2018-19 Wardha District, Maharashtra

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# Monitoring and Evaluation of Programme Implementation Plan, 2018-19: Wardha 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 Wardha District was carried during the period of Feburary25 to March2, 2019. The District Health Office, SDH Arvi, RH Pulgaon, PHC Sahur and SC Dhadi were visited for the study. In addition, there are two Medical College in the district viz: Shavagram and Jawaharlal Nehru medical college. Team comprised of two officials from PRC side and DPM Officer accompanied the PRC and quality Co-ordinator, IPHS Coordinator available during the visit. This report discusses in detail the implementation of PIP in Wardha district as observed during the field visit for monitoring. The key findings are given below:

#### **Key Conclusions and Recommendations**

- Under NRHM, 640 posts of different discipline are sanctioned of which 521 are filled and 119 are vacant for the district. Total 1083 regular positions of different discipline are sanctioned and 1804 are filled and 279 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.
- Under JSSK, the pregnant women in Wardha district receive benefits like free registration, check-up, treatment and delivery including caesarean section and blood transfusion. Infants 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 residence. They also receive free diet during their stay in the hospital.
- During the reference period, 14438 pregnant women delivered at various public institutions i.e. 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 PFMS and is given by direct transfer to the beneficiary bank account 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. In connection with payment of JSY, it is told to the team that beneficiaries are facing problems in getting JSY payment as it is paid by PFMS.

- Nutrition Rehabilitation Centre is established at the District Hospital with reserved 10 beds. One position of Medical Officer is sanctioned and filled, four positions of Staff Nurse are sanctioned and all are filled, and one position of dieticians is sanctioned and filled. Basic Infrastructure is available.
- Rashtriya Bal Swasthya Karyakram is monitored by District. District Nodal Officer for RBSK is appointed. It is being implemented in all the 18 blocks of the district. Total 17 teams are working under the programme.
- Display of appropriate IEC material related to MCH, JSY, JSSK, FP, etc., are seen at SDH Arvi, CHC pulgaon, PHC sahur and SC Dhadi. Working hours of the facility, EDL, important phone numbers, clinical protocols etc. are prominently displayed at all the above three facilities.
- District has established linkages to fill service delivery gap. One Mobile Medical Unit is run by Matru Seva sangh. There is good impact of the services in periphery.
- In the district, most of the ASHAs receive on an average the incentive amount of Rs. 3585/- and highest monthly incentive paid to ASHA is Rs. 7009/-.
- Official physical verification of 5 percent of beneficiaries of JSY is done on regular basis.
- Screening of Non-Communicable diseases are available in the District.
- > SDH arvi is 50 bedded however, due to high no. of inpatients floor beds are used. In addition, the current staff available are inadequate to provide the health services.

#### 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 conditionality's and the road map 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 Wardha District of Maharashtra for the period of Feburary25 to March2, 2019.

As directed by MOHFW, the monitoring and evaluation of PIP 2018-19 for Wardha District was carried during the period February 25 to March2, 2019. 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 Feburary25 to March2, 2019 to obtain information on implementation of PIP in the district. The DH, 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 Wardha district as observed by the PRC team during the field visit.

#### 3. District Profile and Key health and service delivery indicators

Wardha district is located along the western side of the Wardha-Vainganga valley in Maharashtra. The existing Wardha district was part of Nagpur district till 1862. It was separated for convenient administrative purposes, and Kawatha near Pulgaon was the district headquarter. In the year 1866, the district headquarters was shifted to Palakwadi village. Wardha District has three divisions and eight Talukas. The district is covered with the Satpura mountain range in the north whereas the western side is occupied by the valley of the Purna River. The plain plateau of the Nagpur district is on the eastern side, whereas the Wardha River flows from the boundaries of the north, west and south. The maximum temperature in the district reaches 46 degree Celsius whereas the minimum temperatures hit around 9.4 degree Celsius. The district is primarily agricultural, and among the major crops grown here are soyabean, cotton, jowar, wheat, pulses, groundnut, chana etc.

#### **LOCATION OF WARDHA DISTRICT**

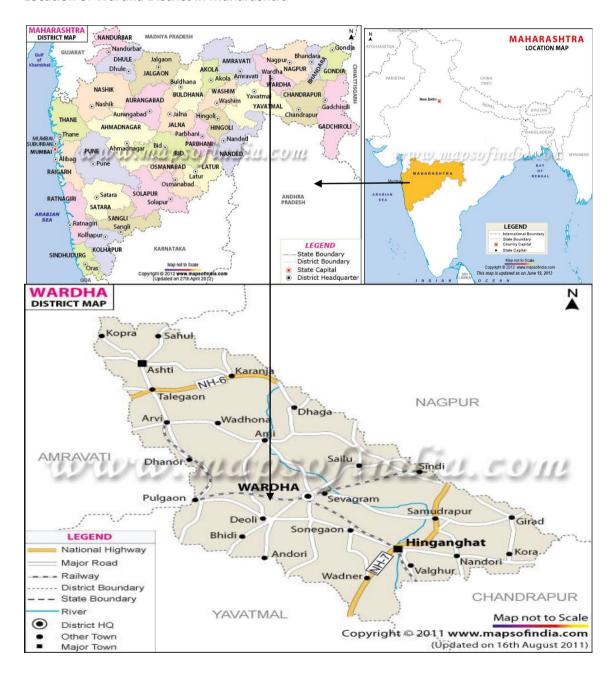
Wardha district is located on the north-eastern side of the state of Maharashtra. The district formed part of the Nagpur district till 1962. Subsequently it was made into a separate district. Wardha district lies between 20 degrees 18 minutes north and 21 degrees 21 minutes north latitudes and 78 degrees 4 minutes east to 79 degrees 15 minutes east longitudes. It is bounded on the west and north by the Amravati district on the south by Yavatmal district, on the south east by the Chandrapur district and on the east by Nagpur district. The boundaries with the Amravati and Yavatmal districts are identified

by the Wardha River. Wardha district is a part of the Nagpur Revenue division along with Bhandara district, Gadchiroli district, Chandrapur and Nagpur districts.

#### **DEMOGRAPHY OF WARDHA DISTRICT**

As per the 2011 Census, the population of Wardha district is 1300774. The male population is 668385 whereas the female population is 632389. From the total population, 32.54 percent population is of the urban area and 73.46 are of the rural area. The density of the population is 206 persons per square kilometre. The ratio of men to women is 935 women for 1000 men. The population of Schedule Caste is 14.04 and Schedule Tribes is 15.6 of the total population.

#### Location of Wardha District in Maharashtra



## Key Demographic Indicators: Maharashtra and Wardha District (2019)

Sr. No.	Items	Maharashtra	Wardha
1	No. of Blocks	355	08
2	No. of Villages	43,663	1387
3	Population (2011)	11,23,72,972	1300774
4	Population - Males (2011)	5,83,61,397	668385
5	Population - Females (2011)	5,40,11,575	632389
6	Literacy Rate (2011)	82.91	86.99
7	Literacy Rate - Males (2011)	89.82	91.92
8	Literacy Rate - Females (2011)	75.48	81.81
9	Sex Ratio (2011)	925	946
10	Child Sex Ratio (2011)	883	919
11	Density of Population (2011)	365	206
12	Percent Urban (2011)	45.23	32.54
13	Percent SC Population (2011)	11.8	14.04
14	Percent ST Population (2011)	9.4	15.66

Source: census 2011

# 4. Key Health and Service Delivery Indicators (DLHS- 3 and 4): Wardha District

Sr. No.	Indicators from DLHS-3 & DLHS-4	DLHS-3	DLHS-4
1	Mothers registered in the first trimester (%)	70.2	56.4
2	Mothers who had at least three ANC visits (%)	77.9	71.8
3	Mothers who got at least one TT injection (%)	93.8	93.2
4	Institutional births (%)	81.4	96.1
5	Home deliveries assisted by SBA (%)	1.9	2.2
6	Children fully immunised (%)	94.5	82.7
7	Children breastfed within one hour of birth (%)	68.4	60.8
8	Percent of women using modern FP methods	78.1	75.6
9	Total Unmet Need for FP (%)	6.2	13.0
10	Unmet need for spacing (%)	3.7	8.2
11	Unmet need for limiting (%)	2.5	4.8

Source: DLHS-3&4

# Number and type of government health facilities in Wardha district

Name of the facility	Number	No. of Beds
District Hospital	1	200
Sub District Hospital – Arvi	1	50
Sub District Hospital – Hinghat	1	100
Rural Hospitals	8	30 each
Primary Health Centres	27	6 each
Sub Centres	181	
AYUSH facilities (Ayurvedic)	11	1
Dispensary (Other)	20	1

# Wardha District: Key Service Utilization Parameters (April 2018 to January 2019)

Service Utilization Parameter	DH	SDH Arvi	CHC Pulgaon	PHC Sahur	SC Dhadi
Service Stillzation Farameter		7.1.4.1	i diguon	Sanai	Dilaai
OPD	383156	69683	77976	18769	
IPD	71957	6900	5895	362	
Expected number of pregnancies (reported)	00	913	602	364	47
MCTS entry on percentage of women registered in	00	580	382		00
the first trimester					
No. of pregnant women given IFA	1515	1203	464	244	45
Total deliveries conducted	2625	1159	289	76	00
Number of Deliveries conducted at home					1
No. of assisted deliveries( Ventouse/Forceps)	00	10	00	00	
No. of C-Section conducted	736	316	3	00	
No. of obstetric complications managed	819	11	14	4	
No. of neonates initiated breastfeeding within 1 hr	2605	1159	289	74	1
No. of children screened for defects at birth under RBSK		00	2	00	00
RTI/STI Treated	2915	238	358	00	
No. of admissions in NBSUs/SNCU	734	257	106	00	
In-born	488	174	103	00	
Out-born Out-born	246	83	3	00	
No. of children admitted with SAM	115	00	00	00	
No. of sick children referred		30	43	5	00
No. of pregnant women referred	1615	52	254	20	00
ANC1 Registration (reported)	1150	645	448	209	26
ANC 3 Coverage		65	455	189	06
ANC 4 Coverage	1570	00	461	168	00
No. of IUCD Insertions	628	282	192	50	12
No. of Tubectomy	290	442	162	72	
No. of Vasectomy	00	3	00	00	
No. of Minilap	00	442	00	00	
No. of children fully immunized	1051	434	491	211	20
Measles coverage	1051	434	491	211	20
No. of children given ORS + Zinc	00	00	28	00	00
No. of children given Vitamin A	3554	1578	481	200	44
No. of women accepted post-partum FP services	2454	114	90	00	
No. of MTPs conducted in first trimester	94	43	14	7	
No. of MTPs conducted in second trimester	24	00	00	00	
Number of Adolescents attending ARSH clinic			1726	00	
Maternal deaths, if any	1	1	00	00	00
Still births, if any	32	18	2	2	00
Neonatal deaths, if any		6	00	00	00
Infant deaths, if any	39	1	00	00	
Number of VHNDs attended					26
Number of VHNSC meeting attended					9
Service delivery data submitted for MCTS updation					00

#### 5. Health Infrastructure

Wardha is having two NGOs Medical College one is Sevagram and other is Datta Meghe, one district hospital. There are two SDHs in Wardha district: at Hanganghat (100 beds) and Arvi (50 beds), there are eight Rural Hospitals in the district and all of them are with 30 beds and located in Government buildings. The district has 27 Primary Health Centres and all are functioning from government buildings. The district has 181 Sub Centres all SC are located in government buildings.

AYUSH facility is co-located at 11 facilities in the district and Ayurveda, Homeopathy and Unani are the most popular medicines in the district. District has established linkages to fill service delivery gap. One Mobile Medical Unit is run by Matru Seva Samiti. There is good impact of the services in periphery.

#### 6. Human Resources and Training

In the district a total of 1083 regular positions of different discipline are sanctioned and 804 are filled and 279 positions are vacant. Under NRHM, 640 posts of different discipline are sanctioned of which 521 are filled and 119 are vacant for the district as a whole.

At the District Hospital 19 Class- I Medical officer are sanctioned of which only 6 are filled. Out of the sanctioned 30 class- II Medical officer's posts,26 are filled. In class- III cadre out of214 sanctioned posts 138 are filled. In class –IV Cadre 151 of sanctioned position 125 are filled.

#### Regular Staff under District Health Officer (DHO) in Wardha District

Sr. No.	Name of Post	Sanctioned Post	Filled up Post	Vacant Post
1	District Health Officer	1	1	0
2	Additional District Health Officer Cl-I	1	0	1
3	District RCH Officer Cl-I	1	1	0
4	Administrative Officer CI-II	1	0	1
5	District commination officer	1	0	1
6	Taluka Health Officer Group A	8	7	1
7	MO Group A	56	35	21
8	MO B	33	26	7
9	Exaction officer au Arvada	3	1	2
10	Statistical Officer	1	0	1
11	Statistical supervisor	1	1	0
12	Statistical investigator	1	1	0
13	Section Officer	1	0	1
14	Office Superintendent	3	3	0
15	Health supervisor	19	10	9
16	Assistant Account officer	1	1	0
17	Jr accountant	1	0	1
18	Steno typist	1	1	0
19	Clark	5	4	1

20	Lepracy Technician	8	8	0
21	Health Worker (Male)	127	73	54
22	Health Assistant( male )	44	40	4
23	Health Worker (Female)	273	152	121
24	Health Assistant (Female)	27	25	2
25	Pharmacists	49	43	6
26	Public health nurse	2	2	0
27	Laboratory Technician	27	0	27
28	Dai	4	4	0
29	Attendant	183	178	5
30	Jr assistant	41	38	3
31	Pun	128	118	10
32	Cold Technician	1	1	0
33	Driver	30	30	0
	Total	1083	804	279

# Contractual staff appointed under NRHM in Wardha District

Sr.	Name of Boot	Sanctioned	Filled up	Vacant
No.	Name of Post	Post	Post	Post
1	DPMU	2	2	0
2	IPHS Specialist	10	7	3
3	Program Assistant	3	3	0
4	MO	9	2	7
5	BPMU	8	7	1
6	ASHA	1	1	0
7	IDW	4	4	0
8	RBSK	68	61	7
9	AYUSH	19	18	1
10	Sickle Cell	7	6	1
11	Tele Medicine	18	17	1
12	IDSP	3	3	0
13	Nursing	11	10	1
14	ANM	135	131	4
15	LHV	13	12	1
16	Staff Nurse	57	54	3
17	Accountant	3	3	0
18	Data entry operator	2	2	0
19	DEIC	13	11	2
20	NRC	9	9	0
21	NTCP	2	1	1
22	NBSU/SNCU	112	46	66
23	NCD	4	1	3
24	TRAINING/DTT	2	2	0
25	RNTCP	16	14	2
26	Lab Technicians	20	19	1
27	OT Technicians	4	4	0

28	Pharmacist	7	6	1
29	Physiotherapist	12	11	1
30	NCD-NPHCE	5	1	4
31	Psychiatric	2	1	1
32	Dental Surgeon	8	5	3
33	Dental other staff	2	2	0
34	Counsellor	23	20	3
35	Social worker	21	21	0
36	Statistical investigator	5	4	1
	Total	640	521	119

# Training status of all cadres in the district Wardha

SI.No.	Type of Training	MO/SN/LHV/ANM/ MPW	TRG.LOAD	COMPLETED UP TO OCTOBER 2018
1	SAB	ANM/LHV/SN	16	22
2	BEmOC	MO	4	6
3	MTP	MO	2	1
4	RI	/MO/LHV/ANM/MP W	60	27
5	MINILAP	MO	00	5
6	NSSK	MO	15	6
7	NSSK	SN	15	18
8	NSSK STAFF	ANM,LHV	20	17
9	PPIUCD	MO	30	3
10	PPIUCD	SN/ANM	30	43
11	F-IMNCI	MO	00	1
12	FPLMIS	MS,MO,LHV,PO	00	136
13	RTI/STI	MO	0	2
14	RTI/STI	SN,LT,ANM,LHV	20	25
15	IMEP	MO/SN	30	00
16	ASHA INDUCTION	ASHA	1033	00
17	COUNSOLAR		00	32
18	IYCN	MO/ANM/LHV/SN	90	50

#### 7. Other Health System Inputs

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

#### 7.1 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.

#### 7.2 AYUSH Services

AYUSH services are co-located in various SDHs and RHs of the District. Ayurveda, Homeopathy and Unani services are available at SDH and RH, AYUSH OPD clinics are monitored separately. Total OPD of AYUSH services during April to January 2019 is 18566. Sufficient drugs are available for AYUSH OPD.

#### 7.3 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 come under JSSK, BPL and SCs/STs.

#### 8. Maternal Health

#### 8.1 ANC and PNC

As per HMIS data, ANC registration is 15451 from April 2018 to January 2019 of which 13398 women were registered in first trimester. Severely anaemic pregnant women reported in HMIS are 763, HB below 11 are 15281 and HB level below 7 are 763, Number of Hypertension cases reported during April 2018 to January 2019 is 194, Number of women received TT1 are 5451 and IFA tablets during April to January 2019 are 14633. Blood Sugar is 3606; Urine Sugar and Protein data is not available. The number of women who received post-natal services are reported as 13986.

#### 8.2 Institutional Deliveries

During April 2018 to January 2019, number of institutional deliveries conducted in the district is 14438, C-Section deliveries at public institutions and private institutions is 4703.

#### 8.3 Maternal Death Review

State /district task force is formed to conduct MDR the reports of which are published 20 maternal deaths was reported in the district during April 2018 to January 2019.

#### **Main Causes Deaths**

Sr.No.	Main Cause of Maternal Deaths	Numbers
1	Sepsis	4
2	Anaemia	3
3	Heart Disease	1
4	Hepatitis	1
5	Pulmonary Embolisum	2
6	Pulmonary Oedema	1
7	Renel Failure	1
8	ТВ	1
9	Thrombosis	1
10	Dengue	2
11	Eclamcia	2
12	Pneumonia	1
	TOTAL	20

#### **8.4 JSSK**

As per Government of Maharashtra Resolution dated 26<sup>th</sup> September 2011, JSSK has been launched from 7th October 2011 in all the districts of Maharashtra. Under JSSK, the pregnant women in Wardha 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 residence. They also receive free diet during their stay in the hospital.

During the reference period, 14438 pregnant women delivered at various public institutions i.e., 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 4201 women were provided with home to hospital free transport, 1670 women were provided hospital to hospital transport in referral services and 5083 women were provided drop back facility. Sick neonate 392 were provided home to institute and 316 sick neonate were Institute to Institute referral transport service provide and 934 neonates were provided drop back facility. Utilisation of the free transport for neonates is too low. There may be lack of awareness among people, or they may prefer to go to private facilities. Only 35.21 percent of women provided with drop back facility. It clearly shows that there is some

problem with service providers. Ideally all those women have delivered at public institutions may be provided with drop back facility.

#### 8.5 JSY

JSY guidelines are followed for making payments. Full payment (in one instalment) of JSY is paid through PFMS 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 district level, the Grievance Redressal Mechanism is activated as stipulated under JSY guidelines. Official physical verification of 5 percent of beneficiaries of JSY is taking place in the district. During the reference period, 5035 beneficiary registered out of which 2350 received JSY benefit (46.7%).

#### 9. Child Health

#### **9.1 SNCU**

SNCU is available in District hospital wardha. The management of babies were provided through phototherapy, antibiotics and oxygen. The total number of admissions was 735 out of which 489 cases are inborn and 246 cases are out born. Out of this 629 cases are recovered, 54 cases are referred and 30 neonatal deaths was reported during the reference period.

#### **9.2 NRCs**

Nutrition Rehabilitation Centre is established in the District Hospital Wardha with necessary equipment and 10 beds are available in the centre. Trained manpower of M.O. and SNs is available. The average length of stay in NRC is less than 15 days. During the period April 2018 to January 2019, 103 admissions are reported in the NRC out of which 98 are discharged from NRC and 4 are transfer in the reference period.

#### 9.3 Immunization

During the period April 2018 to January 2019, 11516 children were fully vaccinated in the district; 15034 babies were provided with BCG doses; DPT/Penta 1, 2 and 3 are provided respectively to 17259, 16505, 16018 babies; DPT and OPV booster were provided respectively to 13963, and 13963 children above 16 months of age; polio 0, 1, 2 and 3 doses are provided respectively to 14068, 17307. 16466 and 16084 babies; and Measles 1 and 2 are provided respectively to 11374 and 10542 babies. During this period, number of children's who were fully immunized were 11516. Immunization sessions were planned 7990 and 7990 Immunization sessions were held.

#### 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 18 Blocks of the district and municipal corporation area of Wardha, Child Health Screening and Early Intervention Centre at district level is established. Total 17 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. Target for the screening of Anganwadi children (0 to 6 years) as 23028 and the cases identified with problems was 2125. Children were identified with some problem were referred to higher facilities.

#### 10. Family Planning Services

Family planning services are being provided in all the major facilities of the District. During April 2018 to January 2019, 4726 female Sterilisation and 75 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 DH Wardha SDH Hinganhat, SDH Arvi, and CHC pulgaon. Counsellor is appointed on contractual basis under NRHM and trained in ARSH programme. Male Medical Officer and Female Medical Officer are given additional responsibility of ARSH. At all SDHs, existing staff is given additional responsibility. The clinic provided health information, 544 counselling and testing to persons aged between 10-19 years during the reference period.

#### 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. Autoclave is being used on regular basis for disinfection of the instruments.
- 12.2 Biomedical Waste Management: Segregation of bio medical waste management is outsourced at all the visited facilities except SC dhadi which has a deep burial pit for Bio medical waste management.
- 12.3 **IEC**: Display of appropriate IEC material related to MCH, JSY, JSSK, FP, etc., are seen at, SDH Arvi, CHC pulgaon and PHC Sahur. 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

#### **MMUs**

The name of MMU operating in wardha district is Matru Seva Sangh. There is one MO, one SN, one Pharmacist, one DMLT and two drivers available in the MMU. There are two vehicles available in MMU, Vehicle goes in the villages and ETP are plan. Total OPD during the reference period was 21818 and ANC cases are 1607. The average running kilometre per day is 192 km. Budget approved for MMU is Rs.2296000 out of which the expenditure incurred is Rs.1928332 in the reference period.

#### **Referral Transport:**

Total number of vehicle used is 55, and all the vehicles are on the road. All vehicles are fitted with GPS system.

#### **14 ASHA**

Total number of ASHAs required in the district is 1033 and total positions filled are 1015. The number of ASHAs trained in Module-6 & 7 is 1015. ORS and Zinc is supplied to all the ASHAs. FP methods (condoms) are given to all ASHAs for distribution; in the district, most of the ASHAs receive on an average an incentive amount of Rs. 3585/- and highest monthly incentive paid to ASHA is Rs. 7009/-. Payment is deposited in the bank account.

#### 15. Disease Control programmes

#### 15.1 National Malaria control programme

Number of slides prepared during the reference period is 275003, out of which positive cases are 5. Rapid Diagnostic kits are available since past three months.

#### 15.2 Revised National Tuberculosis Programme (RNTCP)

The number of sputum test conducted during the reference period is 11777 of which number of positive cases are 587. DOT medicines are available at all the facilities. Out of the 16 contractual positions 14 are filled. Timely payment of salaries is made to RNTCP staff as well as to DOT providers.

#### 15.3 National Leprosy Eradication Programme (NLEP)

Number of new cases detected is 317 and prevalence rate 1.91

#### 16. Non Communicable Diseases

There is NCD facility set up in District for screening of Non Communicable diseases. 1429 persons who attended NCD clinics are diabetes, 2656 are Hypertension cases and 26 cases are cancer.

#### 17. Good Practices and Innovations

In Wardha district one pilot project begun in Arvi SDH area. Under this project the main aim is to reduce maternal death. There are four PHCs in this block. However, for better utilization of resources all the deliveries are conducted in SDH as specialists are available in SDH Arvi round the corner.

#### **18. HMIS**

M&E is responsible for reporting of the data for the district. Quality of HMIS data is fair although there are some concerns in the quality of data. Data is being uploaded in time. Data validation checks are applied at district level.

#### 19 Observations from the Health Facilities Visited by the PRC Team

PRC team selected one DH, one each of SDH, CHC, PHC and SC to discuss with the DHO and CS of Wardha district.

#### 19.1 District Hospitals: Wardha

- The District Hospital is having sanctioned bed strength of 200 beds. It is functioning in a Government building and is in a good condition with some minor repairs.
- The health facility is easily accessible from the nearest road. Quarters are available for MOs (13) and are in good condition and for Staff nurses (48), However, SNs do not use quarters. Quarters are available for other categories (32). DH has electricity with express feeder, and generator. Running water is available 24\*7.
- Separate toilets are available in male and female wards and are clean. Toilets in the OPD are also clean.
- Overall cleanliness is there in the facility.
- Nutritional Rehabilitation Centre is available is in the hospital with 10 beds.
- Separate room for ARSH clinic is available.
- ➤ IEC materials are displayed in the District Hospital but still there is scope for display more IEC material. Complain or suggestion box is available.
- Segregation of waste in colour coded bins is followed. Mechanism for biomedical waste management is in place and outsourced and collected by agency on daily basis.
- All the essential equipment's are available at the District Hospital. All the equipment's related to operation theatre and laboratory is available. Essential drug list and essential consumable list are available displayed in the OPD.
- Ultrasound scanners are available at the facility.
- Pertaining to lab tests, all listed tests are being done in the facility.
- ▶ Blood bank is available in the hospital. On the day of PRC team visit 218 blood bag was available in blood bank.

- All mothers have initiated breastfeeding within one hour of normal delivery. Zero doses of BCG, Hepatitis B and OPV are provided. Counselling on Family Planning is also provided.
- Mothers are advised to stay for 72 hours (as per new norm) after normal delivery and seven days in C-Section deliveries. During the reference period 2625 deliveries were conducted at the facility of which are discharged within 72 hrs is zero.
- > JSY payment is made at the time of discharge. Diet is being provided to the patients free of cost.
- ➤ 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 displayed.
- During the reference period, 178 were provided transport facility from home to institute; about 48 women have provided transport facility institute to institute; 268 women were provided drop back facility to home. During the reference period, 28 sick neo nates were provided transport facility home to institute, 11 are provided transport facility institute to institute and 63 are provided transport facility institute to home.

#### Regular Staff under District Hospital (DH) in Wardha District

Sr.	Name of Post	Sanctioned	Filled up	Vacant
No.	Name of Fost	Post	Post	Post
1	Class I	19	6	13
2	Class II	30	26	4
3	Class III	214	138	76
4	Class IV	151	125	26
	Total	414	295	119

#### Contractual staff appointed under NRHM in DH Wardha District

Sr. No.	Name of Post	Sanctioned Post	Filled up Post	Vacant Post
1	OBG	2	1	1
2	Paediatrician	1	1	0
3	Other Specialist	4	3	1
4	МО	15	15	0
5	SN	13	13	0
6	ANM	3	3	0
7	LT	5	5	0
8	Pharmacist	6	6	0
9	LHV	1	1	0
10	Radiographer	1	1	0
11	RMNCHA	4	3	1
	Total	55	52	3

#### 19.2 Sub District Hospitals: Arvi

- Arvi Sub District Hospital is in Arvi Block and is about 60 kms. from district headquarters. On the day of PRC team visit to SDH, all staff was present on duty. Bed strength of the hospital is 50. hospital is located in government building. Building is in good condition. Quarters are available for MS, 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 main road. Functional New Born Sick Unit and Stabilization Unit are available. Neither Blood Bank not 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. 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 but not displayed in the OPD. Computerised inventory management is available. IFA tablets blue is not being supplied. Misoprostol and Mifepristone tablets are not available. Emergency contraceptives and sanitary napkins are not supplied to the facility. 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 breast feeding 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.
- > JSY payment is made at the time of discharge on submission of necessary documentation. Direct transfer in Account of JSY beneficiaries.
- 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 is available. Pantograph is used correctly.
- > Segregation of waste in colour coded bins is available. Bio waste management is outsourced. The facility is adhered 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 473 women have received home to facility pick up service; 81 women have received inter facility vehicle services; and 861 women have received drop back facility. During the reference period 94 sick infant have received home to facility pick up service. 42 sick infant have received inter facility services and 250 sick infant have received drop back services.
- 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.
  - Human Resource at SDH Arvi (Regular)

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
1	MO CI-I	1	1	0
2	MO CI-II	8	8	0
3	Asst. Superintendent	1	0	1
4	Asst. Matron	1	0	1
5	Staff Nurse	12	12	0
6	Parisevika	2	1	1
7	X-Ray Technician Cl-III	1	1	0
8	OPTH ASST	1	0	1
9	Pharmacist	3	1	2
10	Lab Technician	1	0	1
12	Sr. Clerk	1	1	0
13	Jr. Clerk	1	1	0
15	OPD Clark	1	1	0
16	Lab. Attendant	1	1	0
17	Dresser	1	0	1
18	OT Attendant	1	0	1
19	Peon	2	2	0
20	Ward Boy	5	5	0
	OPD Attendant	1	1	0
21	Sweeper	2	2	0
	Total	47	38	9
		MHM		
1	RBSK MO	4	4	0
2	AYUSH MO	2	2	0
3	MO Ayurveda	1	1	0
4	CIKCAL CALL TEQ	1	1	0
5	ANM	8	8	0
6	Pharmacist	1	1	0
7	DRIVER	5	4	0
	Total	22	22	00

#### 19.3 Rural Hospital: Pulgaon

- Pulgaon Rural Hospital is in Devali Block and is located 40 km from district headquarters. It is well accessible from main road. On the day of PRC team visit to RH, all the staffs were presenty. Medical Superintendent was present on the day of visit. It is a 30 bedded hospital and is functioning in a government building. Quarters are available for MS, MO, SNs and other categories. Electricity is available with power backup generator. 24\*7 running water is available. Separate toilets are there for male and female wards and toilet is attached to labour room and is clean. Wards, toilets, and bathrooms are maintained also clean. Functional New Born Care Corner and New Born Stabilization are available. Functional blood storage unit is not available. Waste management is done and is outsourced. Separate ARSH clinic is there. Suggestion and complaint book is available.
- Essential drug list is available displayed in the OPD. Computerised inventory management is available. All essential drugs are being supplied.

- Pregnancy testing kits, Urine albumin and sugar testing kit, OCPs, EC pills is available IUCDs 380 are supplied from the district drug store. IFA syrup with dispenser is available.
- ➤ All mothers have initiated breast feeding within one hour of normal delivery. Zero doses of BCG, Hep-B and OPV are being given on the day of immunisation day i.e. Counselling on IYCF is done. Counselling on family planning is being done. Mothers are advised to stay for 72 hours after delivery. JSY payment is made at the time of discharge, Diet is being provided to JSSK beneficiaries free of cost.
- ➤ High risk pregnancy are Managed at the facility. Partograph is used correctly. IUCD insertion is done properly. Segregation of waste is done in colour coded bins and IMEP protocols are followed. Bio waste management is done at facility and outsourced.
- All-important registers are available for maintenance of records. Registers for Untied Funds, AMG and RKS funds are maintained.
- ➤ All required IEC material is displayed in the facility.
- During the reference period, under JSSK 239 woman have received free home to institute transport, 254 women were provided free inter transport facility and 119 women were provided free transport facility from institute to home. Three sick infants have received free home to institute transport and 48 sick infants were provided free inter transport facility 40 were provided free transport facility from institute to home
- Approach roads have directions to the health facility. Citizen Charter, Timings, List of services, Protocol Posters JSSK entitlements are displayed in the facility. JSY entitlements and other related IEC materials are displayed in ANC/ PNC Clinics.
- Essential Drug List is available but not displayed in the OPD.
- Regular Fumigation is being done. Laundry/washing service is outsourced. Dietary services available for JSSK beneficiaries, drug storage facilities, equipment maintenance and repair mechanism, Grievance Redressal mechanism are available in the facility.

#### **Human Resource at CHC Pulgaon (Regular and NRHM)**

Sr. No.	Name of the post	Sanctioned	Filled	Vacant	
1	MS	1	0	1	
2	MO	4	3	1	
3	Asst. Superintendent	1	1	0	
4	Staff Nurse	7	7	0	
5	Jr clerk	2	2	0	
6	Pharmacist	2	2	0	
7	Lab Technician	1	1	0	
8	Dental Asst.	1	0	1	
9	TB Technician	1	1	0	
10	Driver	1	0	1	
11	Lab attendant	1	1	0	
12	Peon	1	1	0	
13	Ward Boy	4	3	1	
14	Ophthalmic	1	1	0	
	Sweeper	2	2	0	
	Total	30	25	5	
	NHM				
1	MO	8	5	3	
2	Pharmacist	3	2	1	

3	ANM	6	6	00
4	Counsellor	3	3	0
5	Technician	2	2	0
6	Staff nurse	3	3	0
	TOTAL	25	21	4

#### 19.4 Primary Health Centre: Sahur

- ➤ PHC Sahur is in Asti Block and is located about 90 KMs from the district headquarters. It caters to 28 villages and covers about 23573 Of population in the periphery. It is functioning in Government building and is in good condition. Staff quarters are available for two MOs and 4 ANMs. PHC has electricity and power back up is available, running 24\*7 water supplies and clean toilets separately for male and female wards. Labour Room is clean. New Born Care Corner is available. Separate wards for male and female are available.
- All the essential equipment is available at PHC. Essential drug list is available but not displayed for public. Diagnostic tests are available at the facility for HB, CBC, Urine Albumin and Sugar, Blood Sugar, RPR, Malaria, TB, HIV and Sickle Cell. Maha Lab facility are available in the PHC.
- All mothers have initiated the breast feeding 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 48 hours after delivery. JSY payments are made at the time of discharge. The mode of payment is by JSY in Account payee PFMC. Free diet is being provided to the patients under JSSK.
- There is manpower to manage high risk pregnancies as they refer such cases to the higher facilities. Essential new born care is being given. Sick neonates are managed at the facility. Vaccines are administered correctly. Use of partograph. IUCD insertion is done correctly. Wastes are segregated in colour coded bins.
- > 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 52 women received home to institute transport; inter institute transport is provided to 20 women and 5 sick neonates; drop back facility from PHC to home was given to 63 women.

#### **Human Resources at PHC Sahur (Regular)**

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
1	Medical officer	2	1	1
2	HA	2	2	0
3	LHV	1	1	0

4	Pharmacist	1	1	0
5	Aplomistlogis	1	1	0
6	Lab Technician	1	0	1
7	ANM	1	1	0
8	Clark	1	1	0
9	Driver	1	0	1
10	Attendants	4	2	2
11	Swapper	1	1	0
12	PTA	1	1	0
	Total	17	12	5

#### Human Resources at PHC Sahur (contractual) in all SC and Aliphatic Dispensaries

Sr. No.	Name of the post	Sanctioned	Filled	Vacant
3	LHV	1	0	1
9	Driver	1	1	0
10	coordinator	1	1	0
11	Data entry operator	1	0	1
	Total	4	2	2

#### 19.5 Sub Centre: Dhadi

- > SC Dhadi is in Asti block of Wardha district. Sub Centre is under the catchment area of Sahur PHC is about 4 KMs from the PHC. This SC is catering for 4 villages and covering population of about 3031.
- ➤ Sub Centre is located in the main habitation and functioning in Government building. The ANM also stays in the same house. There is running water and electricity for 24\*7. Labour room is available. There is functional NBCC. 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 available. 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, but Oxytocin, Antibiotic, Magnesium Sulphate, Misoprostol tablets, are not available at the facility.
- Pregnancy test kit, OCPs, sanitary napkins and emergency contraceptives are available in the facility.
- ➤ All the essential Registers are maintained at the facility.
- ➤ Breast feeding 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 received by the ANM and records are maintained.
- Approach road is available but directions to the health facility is not available. 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 phone number, timings, immunisation schedule and JSY entitlement are displayed. Grievance redressal mechanism is in place.

> Only one regular ANM is available in SC and she stays in quarter. However, ANM is given additional responsibilities of the PHC under which this SC functions.

### 20. PIP Expenditure:

Up to January 2019 total PIP fund 50 per cent are utilized out of which the highest utilized in Community Interventions (92.7%) and lowest IT Initiatives for strengthening 10.8%).

Sr.No	Unit	Sanctioned Budget 2018-19	Exp.up to oct.2018	%
1	Service Delivery-Facility Based	240.32	114.49	47.66
2	Service Delivery-Community Based	120.62	92.05	76.32
3	Community Interventions	393.47	365.04	92.70
4	Untied Fund	204.76	136.42	66.62
5	Infrastructure	269.21	71.54	26.57
6	Procurement	105.55	62.43	59.15
7	Referral Transport	71.18	40.62	57.07
8	Service Delivery-Human Resource	815.48	660.16	80.95
9	Training & Capacity Building	24.32	10.35	42.39
10	Review, Research	5.03	2.25	44.73
11	IEC/BCC	40.51	12.24	30.22
12	Printing	9.96	7.48	75.22
13	Quality Assurance	77.21	38.43	49.77
14	Drug Warehousing	24.88	18.44	74.14
15	PPP	151.20	49.64	32.83
16	Programme Management	284.96	207.95	72.99
17	IT Initiatives for strengthening	1.20	0.13	10.83

(Rs. In Lacs)

#### 21. 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 Advise

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

#### National Rural Health Mission