



A Field Monitoring Report of the Key Components of the National Health Mission ,

DADRA & NAGAR HAVELI



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OVERVIEW

INTRODUCTION

The Ministry of Health and Family Welfare (MoHFW), Government of India has assigned Population Research Centre (PRC) the task of field monitoring of essential components of National Health Mission (NHM) State Programme Implementation Plan for the year 2024-25. This report of Population Research Centre, Institute of Economic Growth, PRC- IEG Delhi presents the key findings from the field monitoring of essential components under NHM in The Dadra & Nagar Haveli. The report is prepared on the basis of visits to the following public health care facilities visited by the PRC-IEG Team: Prof. Suresh Sharma and Dr. Kiran Sharma.

Facilities Visited:

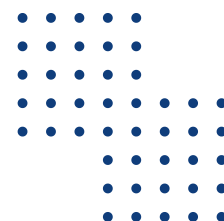
1. Namu Hospital, Dadra & Nagar Haveli
2. PHC Dadra
3. PHC Naroli
4. PHC Kilvani
5. PHC Dapada
6. UAAM- Demani
7. AAM- Athal
8. AAM- Dhapsa
9. AAM- Silli-1
10. AAM- Karad
11. AAM- Kudacha

A Meeting was held with the Medical Superintendent, State Programme Manager, District Programme Manager, Nodal officers, Senior Specialist Doctors, Medical Officer In-Charge (MOIC), Medical Officers (MOs), and other supporting staff. Interactions were conducted to understand the strengths and weakness of the facilities in service provisioning

The Dadra and Nagar Haveli has taken important steps in improving its healthcare system in recent years. One of the most notable developments is the upgradation of Shree Vinoba Bhave Civil Hospital into a full-fledged medical college and teaching hospital, now known as NAMO Medical College and Hospital. This transformation marks a major milestone for the district, bringing in not just better infrastructure, but also opportunities for specialist care, academic training, and improved health service delivery.

NAMO Hospital, along with its medical college, is now the main tertiary care centre for the district. It serves a dual purpose — providing advanced treatment to patients while also acting as a teaching ground for future doctors. The availability of faculty doctors, medical equipment, and a larger team of health workers has strengthened referral services and specialist consultations within the district.

Alongside this, many Primary Health Centres (PHCs) and Ayushman Arogya Mandirs (AAMs) have also seen improvements in basic infrastructure, medicine availability, and cleanliness. However, there are still some critical areas that need focused attention — especially related to staff shortage, training gaps, outreach to tribal and migratory populations, and adolescent health issues.



KEY CHALLENGES & OBSERVATIONS

Limited Reach Among Tribal and Migratory Populations

A significant part of the population is tribal or migratory, leading to challenges in awareness, regular follow-up, and treatment adherence.

Many patients leave the area mid-treatment, especially for TB or NCDs, disrupting care and affecting outcomes. Among tribal women, institutional deliveries and ANC registration are still low due to cultural beliefs and limited awareness.

High Teenage Pregnancies Linked to Live-in Relationships

- An alarming trend observed across multiple facilities is the rise in teenage pregnancies, especially among young girls in live-in relationships.
- These pregnancies are often unplanned, hidden from families, and come to light only during later stages, posing serious risks to both mother and child. Lack of awareness about contraception and family planning among adolescents is a major contributing factor.

Sickle Cell Anaemia – A Major Health Burden

- Sickle cell anaemia is highly prevalent in the district, especially among tribal populations.
- While screening is being done at many centres, follow-up care, counselling, and community awareness are still inadequate.
- There is an urgent need to strengthen management protocols and provide consistent support to affected families.

Gaps in Service Delivery

- Some essential services like cervical cancer screening are yet to be initiated at many centres.
- Free diet under JSSK, availability of antidotes, and referral linkage with higher centres are not streamlined.
- Outreach services are often disrupted when staff are engaged in OPD duties, highlighting the need for better staff distribution and support.

Training and Capacity Building

- Staff across almost all facilities reported that they haven't received training in key areas such as family planning, adolescent health, or the 12 service delivery packages under Ayushman Bharat.
- Quality of previous trainings is also a concern, with limited hands-on exposure and lack of regular updates.

Digital Health Record Management

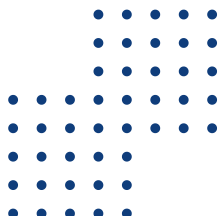
- One of the most commendable practices in Dadra and Nagar Haveli is the implementation of a paperless record-keeping system. The Union Territory has developed its own digital platform known as the DDDPHMP (Dadra and Nagar Haveli, Daman & Diu Public Health Management Portal).
- All hospital records and health-related data are entered into this portal on a daily basis, ensuring real-time updates and streamlined management of public health information.

CHALLENGES AT FACILITIES

NAMO HOSPITAL

The facility was earlier functioning as a District Hospital and has been upgraded to a Medical College just one month ago. While the transition has brought significant improvements, several challenges remain:

Most services are managed by medical college faculty or contractual staff. This affects the availability of services, especially during emergencies and non-working hours.



DADRA & NAGAR HAVELI



- Although the hospital is well-equipped and offers a wide range of services, delays in the procurement of supplies and equipment affect the efficiency and timeliness of healthcare delivery.
- The hospital is currently dependent on the faculty of the linked medical college. As academic responsibilities increase, sustaining this support for hospital services may become difficult in the long run.



PRIMARY HEALTH CENTRES (PHCs)

While routine healthcare is being provided, each facility faces distinct challenges, with several common gaps in infrastructure, staffing, and community outreach.

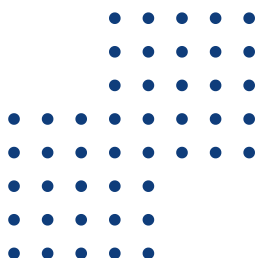
- PHC Dadra, recently upgraded from a CHC, is still in the process of transition. Patient load has increased, but the facility lacks additional staff, proper funding, and essential infrastructure. Key services like diet under JSSK, power backup, and emergency antidotes are missing. Most staff have not received recent training, and institutional deliveries remain low due to the community's preference for the nearby District Hospital.
- PHC Naroli caters to a high number of migratory patients, which disrupts treatment continuity. Infrastructure remains basic, and outreach to tribal sub-centres like Lohari is affected by poor road connectivity and geographic barriers.
- PHC Kilvani benefits from linkage with a medical college through the RHTC, enabling regular specialist visits and improved supervision. Despite this support, tribal populations in remote areas remain hard to reach, and low participation in antenatal services has contributed to higher preterm birth rates.

- PHC Dapada is functioning well in terms of routine services and cleanliness. However, weak internet connectivity hinders referrals and teleconsultations.
- Shortage of MPWs affects field-level activities like immunization and follow-ups, and staff have not received recent skill-based training. Diagnostic facilities are also limited.



AYUSHMAN AROGYA MANDIR- SUB HEALTH CENTRES (AAM- SHCs)

- The six Ayushman Arogya Mandirs – Athaal, Dhapsa, Silli, Demani, Kudacha, and Karad – are providing basic health services like OPD care, medicines, and diagnostic tests.
- Most centres are clean and functioning well. However, some common issues were found. None of the centres have power backup, which affects services during electricity cuts.
- Poor internet connection also creates problems with teleconsultation and online reporting.
- Community Health Officers (CHOs) face challenges due to staff shortages and lack of staff accommodation.
- In areas with migratory or tribal populations, follow-up and community health work become difficult.
- Specific concerns include teenage pregnancies in Silli with delayed antenatal care, and lack of proper tools for cervical cancer screening in Karad
- Some services, like screening, have not yet started in Demani.



COMMUNITY REPORTED CHALLENGES REGARDING AAM-SERVICES

Limited Availability of Medicines

- Currently, only basic medications are available at the facility.
- Community members expressed the need for medicines related to chronic and serious conditions such as Asthma and Kidney diseases, especially as a significant portion of the population is prone to Non-Communicable Diseases (NCDs).

Inadequate Diagnostic Services

- Not all essential tests are available at the facility.
- People have to travel to distant centers for advanced diagnostics, which becomes burdensome, especially for the elderly and chronically ill.

Lack of Round-the-Clock Medical Support

- A major concern shared by the community is the unavailability of a doctor during night hours.
- In case of emergencies, especially involving young children or elderly family members, patients are forced to travel long distances.
- The demand for a 24x7 doctor at the facility was strongly emphasized by the beneficiaries.

RECOMMENDATIONS

- Fill vacant positions of doctors, staff nurses, and MPWs at all health facilities. CHOs should not be burdened with both OPD and field work — proper staff support is needed.
- Trainings should be given on family planning, adolescent health, sickle cell anaemia, and the 12 service delivery packages. Trainings should be hands-on and explained in simple language.
- Start counselling and awareness programs to reduce teenage pregnancies. Provide age-appropriate sex education and information on contraception at schools and in communities.
- After screening, ensure regular follow-up, counselling, and treatment support.
- Increase awareness about sickle cell disease, especially in tribal areas.
- Support ASHAs and MPWs to reach remote villages and tribal areas. Create a tracking system for migrant patients who often leave treatment midway.
- Start cervical cancer screening, free diet under JSSK, and ensure supply of essential medicines wherever missing. Strengthen the referral system to ensure timely transfer of serious patients to higher centres.

CHECKLISTS SUBMITTED

1. Namo Hospital, Dadra & Nagar Haveli
2. PHC Dadra
3. PHC Naroli
4. PHC Kilvani
5. PHC Dapada
6. UAAM- Demani
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Field Monitoring Format -District Hospital (DH)

Date of Visit: 02/ 04/ 2025

GENERAL INFORMATION	
Name of facility visited	NAMO HOSPITAL
Facility Type	<input checked="" type="checkbox"/> DH/ <input type="checkbox"/> SDH
FRU	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Next Referral Point	Facility: Hariya Hospital , Vapi Distance: 16 km

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
1. OPD Timing	8:00 AM – 8:00 PM	As reported/Hospital Citizen Charter Board
2. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: The infrastructure was mind-blowing. Everything from space, cleanliness, and hygiene to maintenance is top-notch.	Observation
	<input checked="" type="checkbox"/> 24*7 running water facility <input checked="" type="checkbox"/> Facility is elderly and differently abled friendly (ramps at entry, wheel chair etc.) <input checked="" type="checkbox"/> Clean functional toilets available (separate for Male and female) <input checked="" type="checkbox"/> Drinking water facility available <input checked="" type="checkbox"/> OPD waiting area has sufficient sitting arrangement	Observation

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
	<input checked="" type="checkbox"/> ASHA rest room is available <input checked="" type="checkbox"/> Drug storeroom with rack is available Power backup: <input checked="" type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital Last major renovation done in (Year):_RECENTLY MODIFIED INTO NEW BUILDING_____	
3. Number of functional in-patient beds	IPD Beds: 650 No of ICU Beds available: 76	As reported/Hospital Citizen Charter Board
4. List of Services available	<ul style="list-style-type: none"> • Medicine • O& G • Paediatrics • General Surgery • Anaesthesiology • Ophthalmology • Dental • Imaging (X-Ray & USG) • CT Scan • IPD • OPD • Emergency 	As reported/Hospital Citizen Charter Board

A. PHYSICAL INFRASTRUCTURE				
Indicator	Response			Means of verification
<ul style="list-style-type: none"> Specialized services available in addition to General OPD, ANC, Delivery, PNC, Immunization, FP, Laboratory services 	Sl.	Service	Y/N	As reported/Hospital Charter
	1	Medicine	Y	Board
	2	O&G	Y	
	3	Pediatric	Y	
	4	General Surgery	Y	
	5	Anesthesiology	Y	
	6	Ophthalmology	Y	
	7	Dental	Y	
	8	Imaging Services (X – ray)	Y	
	9	Imaging Services (USG)	Y	
	10	District Early Intervention Centre (DEIC)	Y	
	11	Nutritional Rehabilitation Centre (NRC)	N	
	12	SNCU/ Mother and Newborn Care Unit (MNCU)	Y	
	13	Comprehensive Lactation Management Centre (CLMC) / Lactation Management Unit (LMU)	Y	
	14	Neonatal Intensive Care Unit (NICU)	Y	
	15	Pediatric Intensive Care Unit (PICU)	Y	
	16	Labour Room Complex	Y	
	17	ICU	Y	
	18	Dialysis Unit	Y	
	19	Emergency Care	Y	
	20	Burn Unit	Y	
21	Teaching block (medical, nursing, paramedical)	Y		

A. PHYSICAL INFRASTRUCTURE					
Indicator	Response			Means of verification	
	22	Skill Lab	Y		
5. Emergency	General emergency: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facilities available for: 1. Triage: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 2. Resuscitation: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 3. Stabilization: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			As reported/Hospital Citizen Charter Board	
6. Tele-medicine/Consultation services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average number of teleconsultation per day for the last month (Data source: Teleconsultation register/ e-Sanjeevani Portal) If the facility is also functioning as 'Hub' to any of the AAM (SHC/PHC/UPHC/UAAM): <input type="checkbox"/> Yes/ <input type="checkbox"/> No			Tele-medicine records register/ e-sanjeevani portal	
7. Operation Theatre available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, Tick the relevant <input checked="" type="checkbox"/> Single general OT <input checked="" type="checkbox"/> Elective OT-Major (General) <input checked="" type="checkbox"/> Elective OT-Major (Ortho) <input checked="" type="checkbox"/> Obstetrics & Gynecology OT <input checked="" type="checkbox"/> Ophthalmology/ENT OT <input checked="" type="checkbox"/> Emergency OT			Observation Ensure signage and protocol displays	
8. Availability of functional Blood Bank	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No <ul style="list-style-type: none"> • If yes, number of units of blood currently available: <u>50</u> • No. of blood transfusions done in last month: <u>6</u> 			Blood Bank records Register	

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
9. Whether blood is issued free, or user-fee is being charged	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Blood Bank records Register
10. Biomedical waste management practices	Sharp pit: <input type="checkbox"/> Deep Burial pit: <input type="checkbox"/> Incinerator: <input type="checkbox"/> Using Common Bio Medical Treatment plant: <input type="checkbox"/> Managed through outsourced agency <input checked="" type="checkbox"/> Other System, if any: (Specify)	Observation
11. IT Services	<ul style="list-style-type: none"> Desktop/ Laptop available: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Internet connectivity: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Quality/strength of internet connection: ___EXCELLENT___	As reported

B. Human Resources		Means of verification- As reported				
12. Details of HR available in the facility (Sanctioned and In-place)	HR	Regular		Contractual		
		Sanctioned	Available	Sanctioned	Available	
	MO (MBBS)	30	6	0	10	
	Specialists	Medicine	6	0	0	0
		Ob-Gyn	3	0	0	0
		Pediatrician	1	0	0	1
		Anesthetist	4	0	0	0
		Surgeon	5	0	0	4

	Ophthalmologist	1	0	0	0
	Orthopedic	0	0	0	0
	Radiologist	0	0	0	0
	Pathologist	1	0	0	0
	Others	4	0	0	0
	Dentist	1	0	0	3
	Staff Nurses/ GNMs	66	63	0	40
	LTs	3	3	0	6
	Pharmacist	5	5	0	2
	Dental Technician/ Hygienist	1	0	0	1
	Hospital/ Facility Manager	0	0	0	1
	EmOC trained doctor	-	-	-	-
	LSAS trained doctor	-	-	-	-
	Others	-	-	-	-

C. Quality & Patient Safety Initiatives		Means of verification
13. Kayakalp	Initiated: YES <ul style="list-style-type: none"> Facility score:97 Award received: YES 	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	<ul style="list-style-type: none"> Assessment done: YES Internal/State Facility score:90 Certification Status: 	NQAS assessment report Verify certificate if awarded
15. LaQshya	<ul style="list-style-type: none"> Labour Room: <ul style="list-style-type: none"> ✓ LaQshya Certified – ✓ <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No ✓ If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No 	LaQshya Assessment Report – check score

	<ul style="list-style-type: none"> • Operation Theatre: <ul style="list-style-type: none"> ✓ LaQshya Certified – ✓ <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No ✓ If No, Assessment Done - <ul style="list-style-type: none"> <input type="checkbox"/> Yes/ <input type="checkbox"/> No 	Verify certificate if awarded					
D. DRUGS & DIAGNOSTICS							
16. Availability of list of essential medicines (EML)/ drugs (EDL)	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No						
https://nhm.gov.in/images/pdf/guidelines/iphs/iphs-revised-guidlines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf	<ul style="list-style-type: none"> • If yes, total number of drugs in EDL __ 630 __ • EDL displayed in OPD Area: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • No. of drugs available on the day of visit (out of the EDL) __ 612 __ 	Verify EDL Displayed					
17. Implementation of DVDMS or similar supply chain management system	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one _____	Observation, Check software					
18. Shortage of 5 priority drugs from EDL in last 30 days, if any	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>1</td></tr> <tr><td>2</td></tr> <tr><td>3</td></tr> <tr><td>4</td></tr> <tr><td>5</td></tr> </table> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;">NO SHORTAGE</div>	1	2	3	4	5	As reported, check DVDMS, E-aushadhi, etc.
1							
2							
3							
4							
5							
19. Availability of Essential Consumables:	<input checked="" type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage In last 6 months how many times there was shortage __NIL__	As reported Stock/Indent register					
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported					

<ul style="list-style-type: none"> In-house tests 	<p>Timing: 24*7</p> <p>Total number of tests available against Essential Diagnostic tests list for DH <u>67</u></p> <p>(Take the list of tests available at DH)</p>	<p>Obtain the complete list of diagnostic tests performed in-house</p>
<ul style="list-style-type: none"> Outsourced/ PPP 	<p>Timing:</p> <p>Total number of tests provided by PPP provider : <u>0</u></p> <p>Take the list of tests available from PPP Provider agency</p>	<p>Obtain the complete list of diagnostic tests outsourced to PPP provider agency</p>
<p>21. X-ray services is available</p>	<p><input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>If Yes, type & nos. of functional X-ray machine is available in the hospital:</p> <p>Is the X-ray machine AERB certified:</p> <p><input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No</p>	<p>Observation</p>
<p>22. CT scan services available</p>	<p><input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>If yes: <input checked="" type="checkbox"/>In-house/ <input type="checkbox"/>PPP</p> <p>Out of Pocket expenditures associated with CT Scan services (if any, approx. amount per scan):</p>	<p>Observation</p> <p>Patient interviews</p>
<p>23. Whether diagnostic services (lab, X-ray, USG etc.) are free for all</p>	<p><input type="checkbox"/>Free for BPL</p> <p><input type="checkbox"/>Free for elderly</p>	<p>As reported</p>

	<input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	
24. Availability of Testing kits/ Rapid Diagnostic Kits	<input checked="" type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage	As reported
E. KEY NATIONAL HEALTH PROGRAMMES		
25. Implementation of PM-National Dialysis programme	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	Observation
	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP Total number of tests performed: - _____ 11,797 _____	Observation, Records
<ul style="list-style-type: none"> Whether the services are free for all 	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Observation, Records
<ul style="list-style-type: none"> Number of patients provided dialysis service 	<input type="radio"/> Previous year _____ 11525 _____ <input type="radio"/> Current FY _____ 2939 _____ <i>*Calculate the approximate no. of patients provided dialysis per day</i>	Records
26. If there is any shortage of major instruments/ equipment (Refer to Annexure 10 in the link for list of equipment- https://nhm.gov.in/images/pdf/guidelines/iphs/iphs-revised-guidelines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf)	NIL	As reported

<p>27. Average downtime of equipment (days)</p> <p>Details of equipment are nonfunctional for more than 7 days</p>		As reported
<p>28. Availability of delivery services</p>	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported
<ul style="list-style-type: none"> If the facility is designated as FRU, whether C-sections are performed 	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Number of normal deliveries performed in last month: <u> 147 </u> No. of C-sections performed in last month: <u> 184 </u>	Verify C-section records from Maternity OT registers
<ul style="list-style-type: none"> Comment on the condition of: 	Labour room: The labour room was LaQshya certified, and everything from space, hygiene, cleanliness, and equipment to overall management was first-class. All the equipment was up-to-date. OT: The Operation Theatre (OT) is also LaQshya certified and very well-managed. The cleanliness was of the highest standard, and overall, it was exceptionally well-organized. Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation
<p>29. Status of JSY payments</p>	Payment is up to date: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Average delay in payment to beneficiaries:	Verify from JSY status report

	<p>(Average for how many days/benefeciary)</p> <p>Payment done till:</p> <p>Current month <input type="checkbox"/></p> <p>Last month <input type="checkbox"/></p> <p>Last 3 Months <input type="checkbox"/></p> <p>Last 6 Months <input type="checkbox"/></p> <p>Reasons for delay:</p>	
30. Availability of JSSK entitlements	<p><input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/>Free delivery services (Normal delivery/ C-section)</p> <p><input checked="" type="checkbox"/>Free diet</p> <p><input checked="" type="checkbox"/>Free drugs and consumables</p> <p><input checked="" type="checkbox"/>Free diagnostics</p> <p><input checked="" type="checkbox"/>Free blood services</p> <p><input checked="" type="checkbox"/>Free referral transport (home to facility)</p> <p><input checked="" type="checkbox"/> Free referral transport (drop back from facility to home)</p> <p><input checked="" type="checkbox"/>No user charges</p>	As reported/As Displayed in Maternity Ward
31. PMSMA services provided on 9 th of every month	<p><input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>If yes, how many high risks pregnancies are identified on 9th for previous month :9</p> <p>If No, reasons thereof:</p>	PMSMA Register/High Risk Pregnancy Register, Staff review

32. Line listing of high-risk pregnancies	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Verify Register availability
33. Practice related to Respectful Maternity Care	<input checked="" type="checkbox"/> Privacy maintained during examination ensured <input checked="" type="checkbox"/> Birth attendant allowed in Labour room <input checked="" type="checkbox"/> Obtaining Informed consent of the mother/ custodian <input checked="" type="checkbox"/> Safe care environment maintained	Observation, Patient review
34. Whether facility have registers for entering births and deaths	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Birth Register, Death Records
35. Number of Maternal Death reported in the facility	Previous year: 1 Current year: 0	Maternal Deaths Records/Review
36. Number of Child Death reported in the facility	Previous year:0 Current year:0	Maternal Deaths Records/Review
37. If Comprehensive Abortion Care (CAC) services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	CAC register
38. Availability of vaccines and hub cutter	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation Staff review
39. Number of newborns immunized with birth dose at the facility in last 3 months	1189	Immunisation Register
40. Number of Newborns breastfed within one hour of birth during last month.	298	Verify BF records
41. Status of functionality of DEIC	<input checked="" type="checkbox"/> Fully functional with all staff in place <input type="checkbox"/> Functional with few vacancies (approx. 20%-30%)	Observation

	<input type="checkbox"/> Functional with more than 50% vacancies <input type="checkbox"/> Not functional/ All posts vacant	
42. Number of sterilizations performed in last one month	65	FP Sterilizations register Verify if fixed days of sterilization exist
43. Availability of trained provider for IUCD/ PPIUCD	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported, Verify training received
44. Who counsels on FP services?	Counsellor <input checked="" type="checkbox"/> Staff Nurse <input type="checkbox"/> Medical Officer <input checked="" type="checkbox"/> Others (Specify)_____	As reported
45. Please comment on utilization of other FP services including FP Commodities- Condoms, OCPs, Antra etc.	Acceptance for Antara and OCPs are more	As reported/observe FP registers/records if available
46. FPLMIS has been implemented	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Check software
47. Availability of functional Adolescent Friendly Health Clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, who provides counselling to adolescents: _____ COUNSELORS _____ Separate male and female counselors available: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation, check AFHC register

48. Whether facility has functional NCD clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If No, is there any fixed day or days in a week for NCD care at the facility? _____ days (Mention number of days)		Check NCD register	
49. Are service providers trained in cancer services?	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		As reported	
50. Number of individuals screened for the following in last 6 months:		Screened	Confirmed	NCD Register
a. Hypertension		7845	313	
b. Diabetes		9032	432	
c. Oral Cancer		154	25	
d. Breast Cancer		98	12	
e. Cervical Cancer		890	450	
51. Whether reporting weekly data in P, S and L form under IDSP	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		Verify from IDSP reporting records	
52. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		As reported, Observation	
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____14.04%____		DBT/Nikshay Report	
	<ul style="list-style-type: none"> • If anti-TB drugs available at the facility: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • If yes, are there any patients currently taking anti-TB drugs from the facility: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 		DBT/Nikshay Report	
	<ul style="list-style-type: none"> • Availability of CBNAAT/ TruNat: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 		DBT/Nikshay Report	

	<ul style="list-style-type: none"> Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months <u>0.89%</u> 										
	<ul style="list-style-type: none"> Are all TB patients tested for HIV? <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Are all TB patients tested for Diabetes Mellitus: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	DBT/Nikshay Report									
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months:	DBT/Nikshay Report									
F. RECORDS, FINANCE, OTHERS											
53. Maintenance of records on	<ul style="list-style-type: none"> TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No TB Notification Registers: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Malaria cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Palliative cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Cases related to Dengue and Chikungunya: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Leprosy cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	Respective records									
54. How much fund was received and utilized by the facility under NHM?	<p>Fund Received last year: No Record</p> <p>Fund utilized last year: -</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="3">Fund in prev. FY</th> </tr> <tr> <th>Received</th> <th>Utilized</th> <th>% Utilization</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </tbody> </table>	Fund in prev. FY			Received	Utilized	% Utilization	-	-	-	Facility FMR
Fund in prev. FY											
Received	Utilized	% Utilization									
-	-	-									
Since this hospital was newly established just two months ago, the Medical Superintendent (MS) currently does not have any previous records maintained.	List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:	RKS Register									

	Reasons for underutilization of fund (if any)	Staff review
55. Status of data entry in (match with physical records)	<ul style="list-style-type: none"> • HMIS: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • IHIP: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • HWC Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • Nikshay Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated 	Check respective portals at the facility wrt last entries
56. Frequency of RKS meeting (check and obtain minutes of last meeting held)	Once in a Three Months	RKS Register
57. Availability of ambulance services in the area	<input checked="" type="checkbox"/> Own ambulance available <input type="checkbox"/> DH/ SDH has contracted out ambulance services <input type="checkbox"/> Ambulances services with Centralized call center <input type="checkbox"/> Government ambulance services are not available	As reported
	Comment (if any):	
<ul style="list-style-type: none"> • How many cases were referred here in the last month? 	Number: 56 Types of cases referred in: Accidental, Poisoning, Trauma , Blood Transfusion, High Risk Deliveries	Referral-in register

<ul style="list-style-type: none"> How many cases were referred out last month? 	<p>Number: 3</p> <p>Types of cases referred out: High risk pregnancies, Trauma Cases Required Super Speciality Treatment.</p>	<p>Out-referral register</p>

Remarks & Observations

- Previously known as *Sri Vinoba Bhave Civil Hospital*, the facility has recently (March 2025) been linked with *NAMO Medical Education and Research Institute (NAMO MERI)*.
- Following this merger, it has been rebranded as NAMO Hospital and upgraded into a teaching hospital associated with a newly established medical college.
- The hospital was inaugurated as a medical college just one month ago.
- All specialist services are currently being managed by doctors from the medical college.
- During lecture hours, Resident Medical Officers (RMOs) handle routine and emergency services.
- Morning Outpatient Department (OPD) services are also conducted by medical college faculty.
- The hospital infrastructure is newly constructed, with a state-of-the-art building and modern design.
- Hygiene, cleanliness, maintenance, and overall management are of exceptional (5-star) quality.
- Equipped with modern and up-to-date medical equipment.
- Full range of diagnostic services is available.
- No shortage of medicines reported.

Key Challenges

1. Human Resource Shortage:
 - Critical lack of specialist doctors.
 - Current HR is very limited, affecting round-the-clock availability.
 - Dependence on outsourced and contractual specialists.
2. Procurement Delays:
 - Despite the vast range of services, slow procurement processes affect timely service delivery.
3. Sustainability Concerns:
 - Heavy reliance on college faculty may not be sustainable in the long run, especially once academic responsibilities increase.

Field Monitoring Format- Ayushman Arogya Mandir-Primary Health Centre/ Urban Primary Health Centre (AAM -PHC/ AAM-UPHC)

Urban /Rural: RURAL

Date of Visit: 02/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Dadra
4. Name of Facility	Primary Health Centre
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	3154837441
7. No. of days in a week facility is operational	6 days
8. OPD Timings	8:00 AM -1: 00 PM 3: 00 PM -5:00 PM
9. Month & Year of operationalization of AAM	Sep 2024
10. Details of co-location, if any <i>(If any co-located SHC)</i>	
11. Accessible from nearest road head (Yes/No)	YES
12. Next Referral Facility Name	NAMO Hospital
13. Distance of next referral facility (in Km)	8 Kms
14. If UPHC functions as a Polyclinic (Yes/No)	-
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
1. Number of Villages/Wards	4
2. No. of Households	2384
3. Total catchment Population	26000
4. Population who are 30 years of age and above	-

B. Physical Infrastructure

Infrastructure Status and details		Availability		
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
2.	If there is no government-owned Building, specify building type	S.no	Building	√ Mark
		A	Other Govt.	
		B	Panchayat Bhawan	
		C	Urban Local Body	
		D	Rented etc	
3.	Is the facility functional 24 x 7?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4.	Availability of IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5.	If yes, Number of functional IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
7.	External branding as per CPHC guidelines (Colour & Logo)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8.	OPD room	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Examination table with privacy curtains/screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
9.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
10.	Availability of furniture:	Table	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Chairs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Almirah/Shelf	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
11.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
12.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
13.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15.	Availability of Running Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
16.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
17.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18.	Power back up	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
19.	Safe drinking Water for staff and patients	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
20.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
21.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
22.	Colour coded waste bins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
23.	Bio-medical waste disposal mechanism in place	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
24.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, Eye, oral care, cancers etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
No	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1.	Medical Officer (MBBS)	1	1	1	1	0
2.	AYUSH MO*	1	0	0	1	1
3.	Dentist*	1	0	0	0	0
4.	Staff Nurse	2	0	0	0	4
5.	Pharmacist	1	1	1	0	0
6.	Laboratory Technician	1	1	1	1	1
7.	ANM/MPW (F)#	1	1	1	0	4
8.	MPW (M)	1	0	0	0	0
9.	Lady Health Visitor	1	0	0	0	0
10.	Dresser	1	1	1	0	0
11.	Accountant	1	0	0	0	0
12.	Data entry operator	1	0	0	0	0
13.	Sanitation staff	1			4	4
14.	ASHA (Population Norms -1 ASHA per 1000 population in Rural & 2000-2500 population in urban areas)	-	-	-	-	28
15.	ASHA Facilitator (If any, only for Rural areas)	-	-	-	-	-
16.	Others (Specify)					
17.	Whether all essential HRH available as per IPHS 2022					

*Desirable

For PHC sub centre-Co-located

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (MBBS) (Y/N)	Staff Nurse (Y/N)	MPW (F) / (M) (Y/N)	ASHA (Y/N)
Maternal Health (ANC/PNC Care)	YES	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES	YES
Family Planning	YES	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES	YES
NCD	YES	YES	YES	YES
Others (Specify)	YES	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Y/N)	Trained in ENT care (Y/N)	Trained in oral care (Y/N)	Trained in MNS (Y/N)	Trained in Elderly & Palliative Care (Y/N)	Trained in Trauma & Emergency care (Y/N)
MO (MBBS)	YES	YES	YES	NO	YES	YES
Staff Nurse	YES	YES	YES	NO	YES	YES
ANM/ MPW-F	YES	YES	YES	NO	YES	NO
MPW- M	YES	YES	YES	NO	YES	NO
ASHA	YES	YES	YES	NO	YES	NO

E.1 Availability of Services	
Reproductive Maternal and Child Health	<input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services
Communicable diseases	<input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB <input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses
Non-Communicable Diseases	Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix <input checked="" type="checkbox"/> Screening and management of mental health ailments

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Elderly and Palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Availability of Essential medicines					
1	<p>Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL)</p> <p><i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i></p> <p style="text-align: right;"><i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i></p>				
2	<p>Total number of medicines available at AAM-PHC/UPHC</p> <p style="text-align: center;">145</p>				
3	<p>Availability of medicines for priority conditions</p> <p><input checked="" type="checkbox"/> Tuberculosis</p> <p><input checked="" type="checkbox"/> Diabetes</p> <p><input checked="" type="checkbox"/> Hypertension</p> <p><input checked="" type="checkbox"/> Fever</p>				
4	<p>Medicine categories with shortfall/stockouts on the day of assessment</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Oral Contraceptives</td> <td style="width: 50%;"><input type="checkbox"/> Anti-tuberculosis</td> </tr> <tr> <td><input type="checkbox"/> Analgesics / NSAIDs)</td> <td><input type="checkbox"/> Anti-fungal</td> </tr> </table>	<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis	<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal
<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis				
<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal				

		<input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycaemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
5	What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
6	What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In house lab <input type="checkbox"/> Outsource (Hub/PPP mode) <input type="checkbox"/> Hybrid Model
2	Number of diagnostic tests at AAM-PHC/UPHC as per State Essential Diagnostic list	(Total number of diagnostic tests at AAM-PHC/UPHC as per National Essential Diagnostic list-63)
3	Number of tests available at AAM-PHC/UPHC	52

4	Number of tests Provided through In House Mode	52
5	Number of tests Provided through Hub & Spoke (Public Health System)	Rests
6	Number of tests Provided through Hub & Spoke- PPP Model	
7	Availability of X-ray services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Availability of Sample transportation mechanism	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10	Average downtime of equipment	
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	

G.2 Diagnostic Tests Available		
1.	Haemoglobin	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Human chorionic gonadotropin (HCG) (Urine test for pregnancy) – Rapid card test (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	Urine test for PH, specific gravity, leucocyte esterase glucose, bilirubin, urobilinogen, ketone, haemoglobin, protein, nitrite – Multipara meter Urine Strip (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	Urine Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	24 – hours urinary protein	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Stool for ova and cyst	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Dengue – Rapid card test for NSI antigen and IgM and IgG antibodies	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8.	MP Slide method	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Malaria Rapid test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	RPR/VDRL test for syphilis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	HIV (Antibodies to HIV 1&2) – Rapid card test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Hepatitis B surface antigen test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Sputum for AFB # - Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Typhoid test (IgM)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Blood Sugar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	HCV Antibody Test (Anti HCV)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.	Bleeding time and clotting time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Visual Inspection Acetic Acid (VIA)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	rK3 for Kala Azar (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
20.	Filariasis (endemic areas only)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
21.	Japanese encephalitis (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
22.	Test for iodine in salt (used for food) – Iodine in salt testing kit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Infrastructure: Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Teleconsultation services (PHC/CHCs/DH/MCH)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Teleconsultation platforms	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common conditions for teleconsultation	Cold , Cough, Fever, Headache, Bodyache, Joint Pain
Total teleconsultations in the last 01 month	20-25

I. Wellness Activities	
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

J. Governance

Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic JAS meetings in the last 6 months	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Minutes of meeting maintained	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic VHND sessions undertaken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

K. Reporting

Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Specify others, if any:	

L. Finance

Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	AAM-PHC Team (Salary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	AAM-PHC Team (Team Based Incentives)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	Fund Source	Timely disbursement	
	Untied	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Other Sources	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Fund utilization	Funds received	Expenditure	% Expenditure
	NHM Fund/untied funds utilized during last year: (Amount in Rs.)	(Amount in Rs.)	

-	-		
<p>Is untied fund being spent on following activities?</p>	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Status of JSY Payments</p>	<p>Payment done till (month/ year) : YES</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>		
<p>Availability of JSSK entitlements</p>	<p><input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>		

	<p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/>Free delivery services (Normal delivery/ C-section)</p> <p><input type="checkbox"/>Free diet</p> <p><input checked="" type="checkbox"/>Free drugs and consumables</p> <p><input checked="" type="checkbox"/>Free diagnostics</p> <p><input checked="" type="checkbox"/>Free blood services</p> <p><input checked="" type="checkbox"/>Free referral transport (home to facility)</p> <p><input checked="" type="checkbox"/>Free referral transport (drop back from facility to home)</p> <p><input checked="" type="checkbox"/>No user charges</p>
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M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	10,171
2	No. of PW registered for ANC	116
3	No. of PW received 4 or more ANC check-ups	114
4	Total number of institutional deliveries	74
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	23
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	82
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	90
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	-
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	-
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	-
11	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	204
	No. of TB patients diagnosed out of the presumptive patients referred	2
	No. of TB patients taking treatment in the AAM	29

12	% of target population administered CBAC		99%	
	% of target population with score below 4		59%	
	% of target population with score 4 and above		41%	
Community Based Screening for NCDs				
13	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	11435	843	843
	Diabetes	11435	222	222
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	11435	0	0
	Breast Cancer*	4678	0	0
	Cervical Cancer*	4677	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4	Is the facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	93.4
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials

		<input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance
O. IPHS Compliance		
1	Date of assessment using ODK tool kit	-
2	Facility aggregate score using ODK Took kit	-

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	YES		YES	
2	Laryngoscope	YES		YES	
3	Radiant Warmer	YES		YES	
4	Pulse Oximeter-Finger Tip	YES		YES	
5	Pulse Oximeter-Table Top	YES		YES	
6	Labor Bed	YES		YES	
7	Foetal Doppler	YES		YES	
8	Phototherapy Unit	YES		YES	
9	Shoulder Wheel	YES		YES	
10	Shoulder Pulley	YES		YES	
11	Shoulder Abduction Ladder	YES		YES	
12	Suction Machine	YES		YES	
13	Mobile Spotlight	YES		YES	
14	Manual Vacuum Aspirator	YES		YES	
15	Weighing Scale	YES		YES	
16	Baby Weighing Scale	YES		YES	
17	Infantometer	YES		YES	
18	Ophthalmoscope	YES		YES	
19	Fully Loaded Dental Chair Electrically Operated	YES		YES	
20	Dental Chair-Basic	YES		YES	
21	Oxygen Hood Neonatal	YES		YES	
22	ILR With Voltage Stabilizer-Small	YES		YES	
23	Deep Freezer-Small	YES		YES	
24	ILR With Voltage Stabilizer-Large	YES		YES	
25	Deep Freezer-Small-Large	YES		YES	
26	Vaccine Carrier with Ice Packs	YES		YES	
27	Cell Counter – 3 Part	YES		YES	
28	Semi-Automated Biochemistry Analyser	YES		YES	
29	Binocular Microscope	YES		YES	
30	HbA1C Analyser	YES		YES	
31	Turbidometer	YES		YES	
32	Glucometer	YES		YES	

S.No.	Equipment	Available	Not available	Functional	Non-Functional
33	Haemoglobinometer	YES		YES	
34	ESR Analyzer	YES		YES	
35	Electrolyte Analyzer	YES		YES	
36	Oxygen Cylinder- B Type	YES		YES	
37	BP Apparatus- Aneroid	YES		YES	
38	BP Apparatus-Digital	YES		YES	
39	Stethoscope	YES		YES	
40	Thermometer	YES		YES	
41	Examination Table	YES		YES	
42	Lower and Upper Extremity Cycle/ Basic Ergometer/ Static Cycle	YES		YES	
43	Exerciser Couch/Table	YES		YES	
44	Finger Exerciser Web	YES		YES	
45	Walking Aid for Training/ Reciprocal Walker	YES		YES	

Key Observations:

- The facility under review was formerly functioning as a Community Health Centre (CHC).
- It has been upgraded to a Primary Health Centre (PHC) around 3–4 months ago, as part of the state's effort to enhance rural healthcare delivery.
- Despite its official status as a PHC, operational changes and infrastructure development are still in transition.

Service Delivery and Reporting Systems

a. Reporting Mechanism:

- The facility is not integrated with the national DVDMS portal, which is used across India for drug and vaccine distribution management.
- Instead, the state uses a customized portal named "DDDPHMP", where all relevant health data is entered.
- For diseases like Tuberculosis (TB), patient records and reporting are done through central systems, ensuring national-level tracking.

b. Patient Load:

- Although newly upgraded, the facility is experiencing a significant increase in patient footfall.
- This rise in demand is not yet matched by an increase in resources, staff, or support systems.

Funding and Resource Constraints

- Funding has not yet been allocated to the facility as a PHC, which limits its capacity to scale services or procure required equipment and medicines.
- As a result, several entitlements and essential services remain unavailable.

Service Gaps and Infrastructure

a. Diet Services:

- Under the Janani Shishu Suraksha Karyakram (JSSK), beneficiaries are entitled to free diet during their stay.

- However, diet services are currently not provided at this facility, depriving eligible patients of their rightful entitlements.

b. Power Backup:

- The facility does not have any form of power backup, such as generators or inverters.
- This poses a serious risk during medical procedures, storage of temperature-sensitive medicines, and diagnostic tests.

Antidotes and Emergency Supplies:

- No antidotes for poisoning cases are available at the facility.
- This is a critical gap, especially in semi-rural or agrarian regions where such cases may be more frequent.

Human Resource Challenges

a. Staff Shortage:

- There is a notable shortage of medical officers (MOs) and other healthcare workers.
- The existing staff is overburdened due to the high patient load and lack of trained personnel.

b. Training Deficits:

- Training opportunities for staff are minimal.
- Most Medical Officers have not received training in Family Planning services for a long time.
- Moreover, it was reported that even when training is conducted, the quality is subpar, largely due to inadequate training delivery by unqualified trainers.

Obstetric Services

- The number of deliveries conducted at this PHC is very low.
- This is mainly due to the proximity of the District Hospital, which is preferred by the community for institutional deliveries due to its better infrastructure and availability of specialists.

Field Monitoring Format- Ayushman Arogya Mandir-Primary Health Centre/ Urban Primary Health Centre (AAM -PHC/ AAM-UPHC)

Urban /Rural: _____

Date of Visit: _____

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Naroli
4. Name of Facility	Primary Health Centre
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	6348672723
7. No. of days in a week facility is operational	6 Days
8. OPD Timings	8:00 AM – 1: 00 PM 3:00 PM -5 :00 PM
9. Month & Year of operationalization of AAM	April 2023
10. Details of co-location, if any <i>(If any co-located SHC)</i>	-
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	NAMO Hospital
13. Distance of next referral facility (in Km)	6 Kms
14. If UPHC functions as a Polyclinic (Yes/No)	-
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
1. Number of Villages/Wards	6
2. No. of Households	11307
3. Total catchment Population	35837
4. Population who are 30 years of age and above	16945

B. Physical Infrastructure

Infrastructure Status and details		Availability		
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
2.	If there is no government-owned Building, specify building type	S.no	Building	√ Mark
		A	Other Govt.	
		B	Panchayat Bhawan	
		C	Urban Local Body	
		D	Rented etc	
3.	Is the facility functional 24 x 7?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4.	Availability of IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5.	If yes, Number of functional IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
7.	External branding as per CPHC guidelines (Colour & Logo)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8.	OPD room	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Examination table with privacy curtains/screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
9.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
10.	Availability of furniture:	Table	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Chairs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Almirah/Shelf	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
11.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
12.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
13.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15.	Availability of Running Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
16.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
17.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18.	Power back up	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
19.	Safe drinking Water for staff and patients	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
20.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
21.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
22.	Colour coded waste bins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
23.	Bio-medical waste disposal mechanism in place	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
24.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, Eye, oral care, cancers etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
No	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1.	Medical Officer (MBBS)	1	1	1	1	0
2.	AYUSH MO*	1	1	0	1	1
3.	Dentist*	1	0	0	0	0
4.	Staff Nurse	2	2	1	1	1
5.	Pharmacist	1	1	1	0	0
6.	Laboratory Technician	1	0	0	1	1
7.	ANM/MPW (F)#	1	1	1	0	0
8.	MPW (M)	1	0	0	0	0
9.	Lady Health Visitor	1	0	0	0	0
10.	Dresser	1	0	0	0	0
11.	Accountant	1	0	0	0	0
12.	Data entry operator	1	0	0	0	0
13.	Sanitation staff	1	1	1	0	0
14.	ASHA (Population Norms -1 ASHA per 1000 population in Rural & 2000-2500 population in urban areas)				7	7
15.	ASHA Facilitator (If any, only for Rural areas)	-	-	-	-	-
16.	Others (Specify)	-	-	-	-	-
17.	Whether all essential HRH available as per IPHS 2022					

*Desirable

For PHC sub centre-Co-located

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (MBBS) (Y/N)	Staff Nurse (Y/N)	MPW (F) / (M) (Y/N)	ASHA (Y/N)
Maternal Health (ANC/PNC Care)	YES	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES	YES
Family Planning	YES	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES	YES
NCD	YES	YES	YES	YES
Others (Specify)	YES	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Y/N)	Trained in ENT care (Y/N)	Trained in oral care (Y/N)	Trained in MNS (Y/N)	Trained in Elderly & Palliative Care (Y/N)	Trained in Trauma & Emergency care (Y/N)
MO (MBBS)	YES	YES	YES	YES	YES	YES
Staff Nurse	YES	YES	YES	YES	YES	YES
ANM/ MPW-F	YES	YES	YES	YES	YES	YES
MPW- M	YES	YES	YES	YES	YES	NO
ASHA	YES	YES	YES	YES	YES	NO

E.1 Availability of Services	
Reproductive Maternal and Child Health	<input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services
Communicable diseases	<input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB <input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses
Non-Communicable Diseases	Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix <input checked="" type="checkbox"/> Screening and management of mental health ailments

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Elderly and Palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Availability of Essential medicines					
1	<p>Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL)</p> <p><i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i></p> <p><i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i></p>				
2	<p>Total number of medicines available at AAM-PHC/UPHC</p> <p style="text-align: center;">120</p>				
3	<p>Availability of medicines for priority conditions</p> <p><input checked="" type="checkbox"/> Tuberculosis</p> <p><input checked="" type="checkbox"/> Diabetes</p> <p><input checked="" type="checkbox"/> Hypertension</p> <p><input checked="" type="checkbox"/> Fever</p>				
4	<p>Medicine categories with shortfall/stockouts on the day of assessment</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Oral Contraceptives</td> <td style="width: 50%;"><input type="checkbox"/> Anti-tuberculosis</td> </tr> <tr> <td><input type="checkbox"/> Analgesics / NSAIDs)</td> <td><input type="checkbox"/> Anti-fungal</td> </tr> </table>	<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis	<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal
<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis				
<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal				

		<input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycaemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
5	What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
6	What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In house lab <input type="checkbox"/> Outsource (Hub/PPP mode) <input type="checkbox"/> Hybrid Model
2	Number of diagnostic tests at AAM-PHC/UPHC as per State Essential Diagnostic list	(Total number of diagnostic tests at AAM-PHC/UPHC as per National Essential Diagnostic list-63)
3	Number of tests available at AAM-PHC/UPHC	36

4	Number of tests Provided through In House Mode	36
5	Number of tests Provided through Hub & Spoke (Public Health System)	27
6	Number of tests Provided through Hub & Spoke- PPP Model	
7	Availability of X-ray services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8	Availability of Sample transportation mechanism	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10	Average downtime of equipment	-
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	-

G.2 Diagnostic Tests Available		
1.	Haemoglobin	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Human chorionic gonadotropin (HCG) (Urine test for pregnancy) – Rapid card test (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	Urine test for PH, specific gravity, leucocyte esterase glucose, bilirubin, urobilinogen, ketone, haemoglobin, protein, nitrite – Multipara meter Urine Strip (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	Urine Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	24 – hours urinary protein	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Stool for ova and cyst	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Dengue – Rapid card test for NSI antigen and IgM and IgG antibodies	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	MP Slide method	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Malaria Rapid test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	RPR/VDRL test for syphilis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	HIV (Antibodies to HIV 1&2) – Rapid card test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Hepatitis B surface antigen test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Sputum for AFB # - Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Typhoid test (IgM)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Blood Sugar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	HCV Antibody Test (Anti HCV)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17.	Bleeding time and clotting time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Visual Inspection Acetic Acid (VIA)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19.	rK3 for Kala Azar (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
20.	Filariasis (endemic areas only)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
21.	Japanese encephalitis (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
22.	Test for iodine in salt (used for food) – Iodine in salt testing kit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Infrastructure: Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Teleconsultation services (PHC/CHCs/DH/MCH)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Teleconsultation platforms	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common conditions for teleconsultation	
Total teleconsultations in the last 01 month	25-30

I. Wellness Activities	
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

J. Governance

Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic JAS meetings in the last 6 months	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Minutes of meeting maintained	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic VHND sessions undertaken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

K. Reporting

Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

L. Finance

Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	AAM-PHC Team (Salary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	AAM-PHC Team (Team Based Incentives)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	Fund Source	Timely disbursement	
	Untied	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Other Sources	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Fund utilization	Funds received	Expenditure	% Expenditure
	NHM Fund/untied funds utilized during last year: (Amount in Rs.)	(Amount in Rs.)	

	1,75,000/-	1,75,000/-	100%
Is untied fund being spent on following activities?	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
Status of JSY Payments	<p>Payment done till (month/ year) : Monthly</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>		
Availability of JSSK entitlements	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		

	<p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/>Free delivery services (Normal delivery/ C-section)</p> <p><input type="checkbox"/>Free diet</p> <p><input checked="" type="checkbox"/>Free drugs and consumables</p> <p><input checked="" type="checkbox"/>Free diagnostics</p> <p><input checked="" type="checkbox"/>Free blood services</p> <p><input checked="" type="checkbox"/>Free referral transport (home to facility)</p> <p><input checked="" type="checkbox"/>Free referral transport (drop back from facility to home)</p> <p><input checked="" type="checkbox"/>No user charges</p>
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M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	11147
2	No. of PW registered for ANC	103
3	No. of PW received 4 or more ANC check-ups	63
4	Total number of institutional deliveries	47
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	29
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	73
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	66
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	34
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	18
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	37
11	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	298
	No. of TB patients diagnosed out of the presumptive patients referred	0
	No. of TB patients taking treatment in the AAM	9

12	% of target population administered CBAC		16690	
	% of target population with score below 4		15746	
	% of target population with score 4 and above		944	
Community Based Screening for NCDs				
13	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	5399	133	541
	Diabetes	5399	103	473
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	5399	1	4
	Breast Cancer*	4950	0	0
	Cervical Cancer*	4754	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is the facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	89.3%
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials

		<input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance
O. IPHS Compliance		
1	Date of assessment using ODK tool kit	25 MAY 2024
2	Facility aggregate score using ODK Took kit	49%

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	YES		YES	
2	Laryngoscope	YES		YES	
3	Radiant Warmer	YES		YES	
4	Pulse Oximeter-Finger Tip	YES		YES	
5	Pulse Oximeter-Table Top	YES		YES	
6	Labor Bed	YES		YES	
7	Foetal Doppler	YES		YES	
8	Phototherapy Unit	YES		YES	
9	Shoulder Wheel	YES		YES	
10	Shoulder Pulley	YES		YES	
11	Shoulder Abduction Ladder	YES		YES	
12	Suction Machine	YES		YES	
13	Mobile Spotlight	YES		YES	
14	Manual Vacuum Aspirator	YES		YES	
15	Weighing Scale	YES		YES	
16	Baby Weighing Scale	YES		YES	
17	Infantometer	YES		YES	
18	Ophthalmoscope	YES		YES	
19	Fully Loaded Dental Chair Electrically Operated	YES		YES	
20	Dental Chair-Basic	YES		YES	
21	Oxygen Hood Neonatal	YES		YES	
22	ILR With Voltage Stabilizer-Small	YES		YES	
23	Deep Freezer-Small	YES		YES	
24	ILR With Voltage Stabilizer-Large	YES		YES	
25	Deep Freezer-Small-Large	YES		YES	
26	Vaccine Carrier with Ice Packs	YES		YES	

S.No.	Equipment	Available	Not available	Functional	Non-Functional
27	Cell Counter – 3 Part	YES		YES	
28	Semi-Automated Biochemistry Analyser	YES		YES	
29	Binocular Microscope	YES		YES	
30	HbA1C Analyser	YES		YES	
31	Turbidometer	YES		YES	
32	Glucometer	YES		YES	
33	Haemoglobinometer	YES		YES	
34	ESR Analyzer	YES		YES	
35	Electrolyte Analyzer	YES		YES	
36	Oxygen Cylinder- B Type	YES		YES	
37	BP Apparatus- Aneroid	YES		YES	
38	BP Apparatus-Digital	YES		YES	
39	Stethoscope	YES		YES	
40	Thermometer	YES		YES	
41	Examination Table	YES		YES	
42	Lower and Upper Extremity Cycle/ Basic Ergometer/ Static Cycle	YES		YES	
43	Exerciser Couch/Table	YES		YES	
44	Finger Exerciser Web	YES		YES	
45	Walking Aid for Training/ Reciprocal Walker	YES		YES	

Key Observations

Migratory Population

- A large number of patients coming to PHC Naroli belong to migratory groups.
- This often leads to difficulty in patient follow-up, especially in cases where treatment needs monitoring over time. Some patients with serious health conditions leave the area before completing treatment.

Infrastructure Needs

- While nearby PHCs in Dadra have seen good infrastructure improvements, PHC Naroli still needs to be strengthened.
- Basic services are functioning, but further upgrades would help improve the quality of care.

Tribal Area Access

- The sub-centres linked to this PHC cover areas with a majority tribal population (Lohari).
- Reaching these areas can be difficult due to geographic and logistical issues.
- Health workers sometimes face challenges in regular outreach and follow-up in these communities.

Field Monitoring Format- Ayushman Arogya Mandir-Primary Health Centre/ Urban Primary Health Centre (AAM -PHC/ AAM-UPHC)

Urban /Rural: Rural

Date of Visit: 02/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Kilvani
4. Name of Facility	Primary Health Centre
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	4437685359
7. No. of days in a week facility is operational	6 days
8. OPD Timings	8: 00 AM – 1: 00 PM 3: 00 PM – 5:00 PM
9. Month & Year of operationalization of AAM	2019 APRIL
10. Details of co-location, if any <i>(If any co-located SHC)</i>	
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	NAMO HOSPITAL
13. Distance of next referral facility (in Km)	12 Kms
14. If UPHC functions as a Polyclinic (Yes/No)	-
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
1. Number of Villages/Wards	6
2. No. of Households	7416
3. Total catchment Population	32234
4. Population who are 30 years of age and above	-

B. Physical Infrastructure

Infrastructure Status and details		Availability		
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
2.	If there is no government-owned Building, specify building type	S.no	Building	√ Mark
		A	Other Govt.	
		B	Panchayat Bhawan	
		C	Urban Local Body	
		D	Rented etc	
3.	Is the facility functional 24 x 7?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4.	Availability of IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5.	If yes, Number of functional IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
7.	External branding as per CPHC guidelines (Colour & Logo)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8.	OPD room	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Examination table with privacy curtains/screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
9.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
10.	Availability of furniture:	Table <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		Chairs <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		Almirah/Shelf <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
11.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
12.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
13.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15.	Availability of Running Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
16.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
17.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18.	Power back up	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
19.	Safe drinking Water for staff and patients	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
20.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
21.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
22.	Colour coded waste bins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
23.	Bio-medical waste disposal mechanism in place	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
24.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, Eye, oral care, cancers etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
No	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1.	Medical Officer (MBBS)	1	0	0	1	1
2.	AYUSH MO*	1	0	0	1	1
3.	Dentist*	1	0	0	0	0
4.	Staff Nurse	2	0	0	4	4
5.	Pharmacist	1	1	1	0	0
6.	Laboratory Technician	1	0	0	2	2
7.	ANM/MPW (F)#	1	1	1	9	9
8.	MPW (M)	1	1	1	4	4
9.	Lady Health Visitor	1	0	0	0	0
10.	Dresser	1	0	0	1	1
11.	Accountant	1	0	0	0	0
12.	Data entry operator	1	0	0	1	1
13.	Sanitation staff	1	0	0	13	13
14.	ASHA (Population Norms -1 ASHA per 1000 population in Rural & 2000-2500 population in urban areas)	-	-	-	30	30
15.	ASHA Facilitator (If any, only for Rural areas)	-	-	-	-	-
16.	Others (Specify)	-	-	-	-	-
17.	Whether all essential HRH available as per IPHS 2022	-				

*Desirable

For PHC sub centre-Co-located

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (MBBS) (Y/N)	Staff Nurse (Y/N)	MPW (F) / (M) (Y/N)	ASHA (Y/N)
Maternal Health (ANC/PNC Care)	YES	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES	YES
Family Planning	YES	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES	YES
NCD	YES	YES	YES	YES
Others (Specify)	YES	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Y/N)	Trained in ENT care (Y/N)	Trained in oral care (Y/N)	Trained in MNS (Y/N)	Trained in Elderly & Palliative Care (Y/N)	Trained in Trauma & Emergency care (Y/N)
MO (MBBS)	YES	YES	YES	YES	YES	YES
Staff Nurse	YES	YES	YES	YES	YES	YES
ANM/ MPW-F	YES	YES	YES	YES	YES	YES
MPW- M	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	YES

E.1 Availability of Services	
Reproductive Maternal and Child Health	<input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services
Communicable diseases	<input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB <input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses
Non-Communicable Diseases	Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix <input checked="" type="checkbox"/> Screening and management of mental health ailments

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Elderly and Palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Availability of Essential medicines					
1	<p>Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL)</p> <p><i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i></p> <p><i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i></p>				
2	<p>Total number of medicines available at AAM-PHC/UPHC</p> <p style="text-align: center;">162</p>				
3	<p>Availability of medicines for priority conditions</p> <p><input checked="" type="checkbox"/> Tuberculosis</p> <p><input checked="" type="checkbox"/> Diabetes</p> <p><input checked="" type="checkbox"/> Hypertension</p> <p><input checked="" type="checkbox"/> Fever</p>				
4	<p>Medicine categories with shortfall/stockouts on the day of assessment</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Oral Contraceptives</td> <td style="width: 50%;"><input type="checkbox"/> Anti-tuberculosis</td> </tr> <tr> <td><input type="checkbox"/> Analgesics / NSAIDs)</td> <td><input type="checkbox"/> Anti-fungal</td> </tr> </table>	<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis	<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal
<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis				
<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal				

		<input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycaemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
5	What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
6	What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In house lab <input type="checkbox"/> Outsource (Hub/PPP mode) <input type="checkbox"/> Hybrid Model
2	Number of diagnostic tests at AAM-PHC/UPHC as per State Essential Diagnostic list	(Total number of diagnostic tests at AAM-PHC/UPHC as per National Essential Diagnostic list-63)
3	Number of tests available at AAM-PHC/UPHC	35

4	Number of tests Provided through In House Mode	35
5	Number of tests Provided through Hub & Spoke (Public Health System)	31
6	Number of tests Provided through Hub & Spoke- PPP Model	
7	Availability of X-ray services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8	Availability of Sample transportation mechanism	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10	Average downtime of equipment	
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	

G.2 Diagnostic Tests Available		
1.	Haemoglobin	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Human chorionic gonadotropin (HCG) (Urine test for pregnancy) – Rapid card test (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	Urine test for PH, specific gravity, leucocyte esterase glucose, bilirubin, urobilinogen, ketone, haemoglobin, protein, nitrite – Multipara meter Urine Strip (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	Urine Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	24 – hours urinary protein	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Stool for ova and cyst	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Dengue – Rapid card test for NSI antigen and IgM and IgG antibodies	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	MP Slide method	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Malaria Rapid test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	RPR/VDRL test for syphilis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	HIV (Antibodies to HIV 1&2) – Rapid card test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Hepatitis B surface antigen test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Sputum for AFB # - Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Typhoid test (IgM)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Blood Sugar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	HCV Antibody Test (Anti HCV)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17.	Bleeding time and clotting time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Visual Inspection Acetic Acid (VIA)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	rK3 for Kala Azar (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
20.	Filariasis (endemic areas only)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
21.	Japanese encephalitis (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
22.	Test for iodine in salt (used for food) – Iodine in salt testing kit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop/COMPUTER <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Infrastructure: Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Teleconsultation services (PHC/CHCs/DH/MCH)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Teleconsultation platforms	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common conditions for teleconsultation	Cold Cough Fever Headache
Total teleconsultations in the last 01 month	15-20

I. Wellness Activities	
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

J. Governance

Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic JAS meetings in the last 6 months	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Minutes of meeting maintained	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic VHND sessions undertaken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

K. Reporting

Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

L. Finance

Renumeration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
OUTSOURCING STAFF SALARY DELAYED	AAM-PHC Team (Salary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	AAM-PHC Team (Team Based Incentives)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	Fund Source	Timely disbursement	
	Untied	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Other Sources	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Fund utilization			
NHM Fund/untied funds utilized during last year:	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure

PAYMENT THROUGH CHEQUES ONLY			
	1,75,000/-	1,52,000/-	86%
Is untied fund being spent on following activities?	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
Status of JSY Payments	<p>Payment done till (month/ year) : Monthly</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>		
Availability of JSSK entitlements	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		

	<p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/>Free delivery services (Normal delivery/ C-section)</p> <p><input type="checkbox"/>Free diet</p> <p><input checked="" type="checkbox"/>Free drugs and consumables</p> <p><input checked="" type="checkbox"/>Free diagnostics</p> <p><input checked="" type="checkbox"/>Free blood services</p> <p><input checked="" type="checkbox"/> Free referral transport (home to facility)</p> <p><input checked="" type="checkbox"/>Free referral transport (drop back from facility to home)</p> <p><input type="checkbox"/>No user charges</p>
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M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	3705
2	No. of PW registered for ANC	117
3	No. of PW received 4 or more ANC check-ups	71
4	Total number of institutional deliveries	91
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	13
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	105
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	143
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	52
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	2
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	2
11	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	1005
	No. of TB patients diagnosed out of the presumptive patients referred	645

	No. of TB patients taking treatment in the AAM	20		
12	% of target population administered CBAC	100%		
	% of target population with score below 4	98%		
	% of target population with score 4 and above	2%		
	Community Based Screening for NCDs			
13	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	12435	217	217
	Diabetes	124351	267	267
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	2435	0	4
	Breast Cancer*	6014	0	0
	Cervical Cancer*	513	0	1

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is the facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	94
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter

		<input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance
O. IPHS Compliance		
1	Date of assessment using ODK tool kit	29 MAY 2024
2	Facility aggregate score using ODK Took kit	57%

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	YES		YES	
2	Laryngoscope	YES		YES	
3	Radiant Warmer	YES		YES	
4	Pulse Oximeter-Finger Tip	YES		YES	
5	Pulse Oximeter-Table Top	YES		YES	
6	Labor Bed	YES		YES	
7	Foetal Doppler	YES		YES	
8	Phototherapy Unit	YES		YES	
9	Shoulder Wheel	YES		YES	
10	Shoulder Pulley	YES		YES	
11	Shoulder Abduction Ladder	YES		YES	
12	Suction Machine	YES		YES	
13	Mobile Spotlight	YES		YES	
14	Manual Vacuum Aspirator	YES		YES	
15	Weighing Scale	YES		YES	
16	Baby Weighing Scale	YES		YES	
17	Infantometer	YES		YES	
18	Ophthalmoscope	YES		YES	
19	Fully Loaded Dental Chair Electrically Operated	YES		YES	
20	Dental Chair-Basic	YES		YES	
21	Oxygen Hood Neonatal	YES		YES	
22	ILR With Voltage Stabilizer-Small	YES		YES	
23	Deep Freezer-Small	YES		YES	
24	ILR With Voltage Stabilizer-Large	YES		YES	
25	Deep Freezer-Small-Large	YES		YES	
26	Vaccine Carrier with Ice Packs	YES		YES	

S.No.	Equipment	Available	Not available	Functional	Non-Functional
27	Cell Counter – 3 Part	YES		YES	
28	Semi-Automated Biochemistry Analyser	YES		YES	
29	Binocular Microscope	YES		YES	
30	HbA1C Analyser	YES		YES	
31	Turbidometer	YES		YES	
32	Glucometer	YES		YES	
33	Haemoglobinometer	YES		YES	
34	ESR Analyzer	YES		YES	
35	Electrolyte Analyzer	YES		YES	
36	Oxygen Cylinder- B Type	YES		YES	
37	BP Apparatus- Aneroid	YES		YES	
38	BP Apparatus-Digital	YES		YES	
39	Stethoscope	YES		YES	
40	Thermometer	YES		YES	
41	Examination Table	YES		YES	
42	Lower and Upper Extremity Cycle/ Basic Ergometer/ Static Cycle	YES		YES	
43	Exerciser Couch/Table	YES		YES	
44	Finger Exerciser Web	YES		YES	
45	Walking Aid for Training/ Reciprocal Walker	YES		YES	

Key Observations

- This PHC is linked with the Rural Health Training Centre (RHTC) under a Medical College.
- It benefits from the support and supervision of medical faculty, contributing to better service quality and medical coverage.

Service Delivery & Specialist Support

- The facility has well-functioning services and infrastructure.
- Specialist doctors from the medical college visit the PHC as needed.
- Duty rotations are assigned to college doctors, ensuring quality care and continuous support to the PHC.

Tribal Community Coverage

- The PHC also serves tribal populations in nearby areas.
- Field teams often face challenges in reaching these locations due to difficult terrain and low accessibility.

Community Participation

- There is a noticeable lack of participation from the tribal communities in government health programs.
- Cultural beliefs and reluctance to engage with formal healthcare limit effective service delivery.
- This affects critical services like Antenatal Care (ANC), where many tribal women do not undergo regular check-ups.

Health Outcomes

- Due to low ANC coverage and limited awareness, the facility reports a higher incidence of preterm births in the tribal population.
- Healthcare staff find it challenging to build trust and encourage consistent health-seeking behavior in these areas.

Field Monitoring Format- Ayushman Arogya Mandir-Primary Health Centre/ Urban Primary Health Centre (AAM -PHC/ AAM-UPHC)

Urban /Rural: Rural

Date of Visit: 03/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Dapada
4. Name of Facility	Primary Health Centre
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	3414776769
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	8-5
9. Month & Year of operationalization of AAM	APRIL 2019
10. Details of co-location, if any <i>(If any co-located SHC)</i>	-
11. Accessible from nearest road head (Yes/No)	-
12. Next Referral Facility Name	SDH KHANVEL
13. Distance of next referral facility (in Km)	5 KMS
14. If UPHC functions as a Polyclinic (Yes/No)	-
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
1. Number of Villages/Wards	8
2. No. of Households	8143
3. Total catchment Population	28792
4. Population who are 30 years of age and above	12637

B. Physical Infrastructure	
Infrastructure Status and details	Availability

1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
2.	If there is no government-owned Building, specify building type	S.no	Building	√ Mark
		A	Other Govt.	
		B	Panchayat Bhawan	
		C	Urban Local Body	
		D	Rented etc	
3.	Is the facility functional 24 x 7?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4.	Availability of IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5.	If yes, Number of functional IPD Beds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
6.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
7.	External branding as per CPHC guidelines (Colour & Logo)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8.	OPD room Examination table with privacy curtains/screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
9.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
10.	Availability of furniture:	Table <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		Chairs <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		Almirah/Shelf <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
11.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
12.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
13.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15.	Availability of Running Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
16.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
17.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18.	Power back up	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
19.	Safe drinking Water for staff and patients	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
20.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
21.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
22.	Colour coded waste bins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
23.	Bio-medical waste disposal mechanism in place	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
24.	<i>Residential Quarters available for Staff If yes, Specify the staff for which quarters available</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

B.1 Information, Education & communication (IEC) material			
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, Eye, oral care, cancers etc)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

C. Human Resource Availability						
No	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1.	Medical Officer (MBBS)	1	0	0	1	1
2.	AYUSH MO*	1	0	0	1	1
3.	Dentist*	1	0	0	0	0
4.	Staff Nurse	2	0	0	3	3
5.	Pharmacist	1	1	1	0	0
6.	Laboratory Technician	1	0	0	1	1
7.	ANM/MPW (F)#	1	1	1	9	9
8.	MPW (M)	1	0	0	4	4
9.	Lady Health Visitor	1	0	0	0	0
10.	Dresser	1	0	0	0	0
11.	Accountant	1	0	0	0	0
12.	Data entry operator	1	0	0	1	1
13.	Sanitation staff	1	0	0	6	6
14.	ASHA (Population Norms -1 ASHA per 1000 population in Rural & 2000-2500 population in urban areas)	-	-	-	24	24
15.	ASHA Facilitator (If any, only for Rural areas)	-	-	-	-	-
16.	Others (Specify)	-	-	-	-	-
17.	Whether all essential HRH available as per IPHS 2022					

*Desirable

For PHC sub centre-Co-located

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (MBBS) (Y/N)	Staff Nurse (Y/N)	MPW (F) / (M) (Y/N)	ASHA (Y/N)
Maternal Health (ANC/PNC Care)	YES	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES	YES
Family Planning	YES	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES	YES
NCD	YES	YES	YES	YES
Others (Specify)	YES	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Y/N)	Trained in ENT care (Y/N)	Trained in oral care (Y/N)	Trained in MNS (Y/N)	Trained in Elderly & Palliative Care (Y/N)	Trained in Trauma & Emergency care (Y/N)
MO (MBBS)	YES	YES	YES	YES	YES	YES
Staff Nurse	YES	YES	YES	YES	YES	YES
ANM/ MPW-F	YES	YES	YES	YES	YES	YES
MPW- M	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	YES

E.1 Availability of Services	
Reproductive Maternal and Child Health	<input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services
Communicable diseases	<input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB <input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses
Non-Communicable Diseases	Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix <input checked="" type="checkbox"/> Screening and management of mental health ailments

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Elderly and Palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Availability of Essential medicines					
1	<p>Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL)</p> <p><i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i></p> <p><i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i></p>				
2	<p>Total number of medicines available at AAM-PHC/UPHC</p> <p style="text-align: center;">162</p>				
3	<p>Availability of medicines for priority conditions</p> <p><input checked="" type="checkbox"/> Tuberculosis</p> <p><input checked="" type="checkbox"/> Diabetes</p> <p><input checked="" type="checkbox"/> Hypertension</p> <p><input checked="" type="checkbox"/> Fever</p>				
4	<p>Medicine categories with shortfall/stockouts on the day of assessment</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Oral Contraceptives</td> <td style="width: 50%;"><input type="checkbox"/> Anti-tuberculosis</td> </tr> <tr> <td><input type="checkbox"/> Analgesics / NSAIDs)</td> <td><input type="checkbox"/> Anti-fungal</td> </tr> </table>	<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis	<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal
<input type="checkbox"/> Oral Contraceptives	<input type="checkbox"/> Anti-tuberculosis				
<input type="checkbox"/> Analgesics / NSAIDs)	<input type="checkbox"/> Anti-fungal				

		<input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycaemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
5	What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
6	What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In house lab <input type="checkbox"/> Outsource (Hub/PPP mode) <input type="checkbox"/> Hybrid Model
2	Number of diagnostic tests at AAM-PHC/UPHC as per State Essential Diagnostic list	(Total number of diagnostic tests at AAM-PHC/UPHC as per National Essential Diagnostic list-63)
3	Number of tests available at AAM-PHC/UPHC	31

4	Number of tests Provided through In House Mode	31
5	Number of tests Provided through Hub & Spoke (Public Health System)	Rests
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8	Availability of Sample transportation mechanism	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10	Average downtime of equipment	-
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	-

G.2 Diagnostic Tests Available		
1.	Haemoglobin	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	Human chorionic gonadotropin (HCG) (Urine test for pregnancy) – Rapid card test (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	Urine test for PH, specific gravity, leucocyte esterase glucose, bilirubin, urobilinogen, ketone, haemoglobin, protein, nitrite – Multipara meter Urine Strip (dipstick)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	Urine Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	24 – hours urinary protein	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Stool for ova and cyst	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Dengue – Rapid card test for NSI antigen and IgM and IgG antibodies	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	MP Slide method	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Malaria Rapid test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	RPR/VDRL test for syphilis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	HIV (Antibodies to HIV 1&2) – Rapid card test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Hepatitis B surface antigen test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Sputum for AFB # - Microscopy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Typhoid test (IgM)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Blood Sugar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	HCV Antibody Test (Anti HCV)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.	Bleeding time and clotting time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Visual Inspection Acetic Acid (VIA)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	rK3 for Kala Azar (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
20.	Filariasis (endemic areas only)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
21.	Japanese encephalitis (endemic areas only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
22.	Test for iodine in salt (used for food) – Iodine in salt testing kit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop/ COMPUTER <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Infrastructure: Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Teleconsultation services (PHC/CHCs/DH/MCH)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Teleconsultation platforms	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common conditions for teleconsultation	Cold, Cough, Fever, Arthritis
Total teleconsultations in the last 01 month	30

I. Wellness Activities	
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

J. Governance	
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Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic JAS meetings in the last 6 months	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Minutes of meeting maintained	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic VHND sessions undertaken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

K. Reporting

Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

L. Finance

Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	AAM-PHC Team (Salary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	AAM-PHC Team (Team Based Incentives)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	Fund Source	Timely disbursement	
	Untied	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Other Sources	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Fund utilization	Funds received	Expenditure	% Expenditure
	NHM Fund/untied funds utilized during last year: (Amount in Rs.)	(Amount in Rs.)	

	1,75,000/-	1,04,500/-	59%
Is untied fund being spent on following activities?	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
Status of JSY Payments	<p>Payment done till (month/ year) : Monthly</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>		
Availability of JSSK entitlements	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		

	<p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/>Free delivery services (Normal delivery/ C-section)</p> <p><input type="checkbox"/>Free diet</p> <p><input checked="" type="checkbox"/>Free drugs and consumables</p> <p><input checked="" type="checkbox"/>Free diagnostics</p> <p><input checked="" type="checkbox"/>Free blood services</p> <p><input checked="" type="checkbox"/> Free referral transport (home to facility)</p> <p><input checked="" type="checkbox"/>Free referral transport (drop back from facility to home)</p> <p><input checked="" type="checkbox"/>No user charges</p>
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M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	3938
2	No. of PW registered for ANC	91
3	No. of PW received 4 or more ANC check-ups	58
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	22
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	109
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	128
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	34
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	113
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	0
11	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	2139
	No. of TB patients diagnosed out of the presumptive patients referred	4
	No. of TB patients taking treatment in the AAM	16

12	% of target population administered CBAC		100%	
	% of target population with score below 4		96%	
	% of target population with score 4 and above		4%	
Community Based Screening for NCDs				
13	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	12420	446	446
	Diabetes	12420	353	353
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	12420	6	6
	Breast Cancer*	5952	1	1
	Cervical Cancer*	5952	1	1

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is the facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	85.7
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials

		<input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance
O. IPHS Compliance		
1	Date of assessment using ODK tool kit	29 MAY 2024
2	Facility aggregate score using ODK Took kit	54.21

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	YES		YES	
2	Laryngoscope	YES		YES	
3	Radiant Warmer	YES		YES	
4	Pulse Oximeter-Finger Tip	YES		YES	
5	Pulse Oximeter-Table Top	YES		YES	
6	Labor Bed	YES		YES	
7	Foetal Doppler	YES		YES	
8	Phototherapy Unit	YES		YES	
9	Shoulder Wheel	YES		YES	
10	Shoulder Pulley	YES		YES	
11	Shoulder Abduction Ladder	YES		YES	
12	Suction Machine	YES		YES	
13	Mobile Spotlight	YES		YES	
14	Manual Vacuum Aspirator	YES		YES	
15	Weighing Scale	YES		YES	
16	Baby Weighing Scale	YES		YES	
17	Infantometer	YES		YES	
18	Ophthalmoscope	YES		YES	
19	Fully Loaded Dental Chair Electrically Operated	YES		YES	
20	Dental Chair-Basic	YES		YES	
21	Oxygen Hood Neonatal	YES		YES	
22	ILR With Voltage Stabilizer-Small	YES		YES	
23	Deep Freezer-Small	YES		YES	
24	ILR With Voltage Stabilizer-Large	YES		YES	
25	Deep Freezer-Small-Large	YES		YES	
26	Vaccine Carrier with Ice Packs	YES		YES	
27	Cell Counter – 3 Part	YES		YES	

S.No.	Equipment	Available	Not available	Functional	Non-Functional
28	Semi-Automated Biochemistry Analyser	YES		YES	
29	Binocular Microscope	YES		YES	
30	HbA1C Analyser	YES		YES	
31	Turbidometer	YES		YES	
32	Glucometer	YES		YES	
33	Haemoglobinometer	YES		YES	
34	ESR Analyzer	YES		YES	
35	Electrolyte Analyzer	YES		YES	
36	Oxygen Cylinder- B Type	YES		YES	
37	BP Apparatus- Aneroid	YES		YES	
38	BP Apparatus-Digital	YES		YES	
39	Stethoscope	YES		YES	
40	Thermometer	YES		YES	
41	Examination Table	YES		YES	
42	Lower and Upper Extremity Cycle/ Basic Ergometer/ Static Cycle	YES		YES	
43	Exerciser Couch/Table	YES		YES	
44	Finger Exerciser Web	YES		YES	
45	Walking Aid for Training/ Reciprocal Walker	YES		YES	

Key Observations

- PHC Dapada is functioning well overall, with routine services being provided to the local population.
- The staff is cooperative, and the facility maintains a good level of cleanliness and basic service delivery.

Connectivity Issues

- The major challenge is poor internet connectivity.
- Due to this, the facility faces difficulty in contacting higher referral centers for patient consultations.
- Teleconsultation services are also affected, limiting access to specialist opinions for patients in need.

Human Resource Gaps

- There is a shortage of Multi-Purpose Workers (MPWs), which impacts outreach activities and field-based services.
- This becomes more evident during immunization drives, follow-up visits, and routine community health work.

Diagnostics and Testing

- As per government norms, not all required diagnostic tests are available at the facility.
- This restricts early diagnosis and management, especially in common outpatient conditions.

Training Needs

- No staff training has been conducted for a long time.
- Staff members have expressed the need and interest in receiving capacity-building training, especially to stay updated with new guidelines and improve service quality.

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit:

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Ward Name	DEMANI
4. Name of Facility	Urban Ayushman Arogya Mandir
5. Type of Facility	UAAM
6. NIN of the facility	3424723835
7. No. of days in a week the facility is operational	6 DAYS
8. OPD Timing	9: 00 AM – 1:00 PM
9. Month & Year of UAAM operationalization	MARCH 2025
10. Is the facility accessible from nearest road head? (Yes/No)	YES
11. Next Referral Facility	PHC DADRA
12. Distance of next referral facility (Km)	3KM

A.1 Demographic Details	
1. Number of Wards	3
2. No. of Households	9000
3. Total catchment Population	25000
4. Population who are 30 years of age and above	12000

B. Physical Infrastructure	
Infrastructure Status and details	Availability

1.	Availability of Govt owned building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	If there is no government-owned building, specify building type (<i>Other Govt./Urban Local Body/ Rented etc.</i>)	
3.	Availability of boundary wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	External branding as per CPHC guidelines (<i>colour, logo</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	OPD room Examination table with privacy curtain/ screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Day Care Beds available (<i>Norm – 2</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Availability of furniture Table Chairs Almirah/Rack	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Availability of Running Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	Power back up	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17.	Availability of Safe drinking Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Colour coded waste bins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
21.	Bio-medical waste disposal mechanism in place	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility (<i>even in local language</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (<i>related to service packages TB, FP, RMNCHA, NCD, Eye, oral care, etc</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display*	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

*Desirable amenities

C. Human Resource Availability						
S. N	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	Medical Officer (MBBS)	1	1	0	1	0
2	Staff Nurse	1	1	0	1	0
3	MPW (Male)	1	1	0	1	0
4	Sanitary Staff*	1	2	0	2	0
5	Security Staff**	1	0	0	0	0
6	ASHA (Population norm: 1 ASHA per 2000-2500 population)				26	

*Desirable **Can be Outsourced/Hired ***Attached with UPHC

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (MBBS) (Yes/No)	Staff Nurse (Yes/No)	MPW (M) (Yes/No)	ASHA (Yes/No)
Maternal Health (ANC/PNC Care)	NA	NA	NA	YES
Child Health (New Born Care/ HBNC/ HBYC)	NA	NA	NA	YES
Family Planning	NA	NA	NA	YES
Communicable Diseases (TB/Leprosy/Malaria/Dengue/Filariasis etc.)	NA	NA	NA	YES
NCD	NA	NA	NA	YES
Others (Specify)				

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/No)	Trained in ENT care (Yes/No)	Trained in oral care (Yes/No)	Trained in MNS (Yes/No)	Trained in Elderly & Palliative Care (Yes/No)	Trained in Trauma & Emergency care (Yes/No)
MO (MBBS)	NA	NA	NA	NA	NA	NA
Staff Nurse	NA	NA	NA	NA	NA	NA
MPW (F) / (M)	NA	NA	NA	NA	NA	NA
ASHA	YES	YES	YES	YES	YES	YES

E.1 Availability of Services	
Reproductive Maternal and Child Health	<input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services
Communicable diseases	<input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB <input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses
Non-Communicable Diseases	Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Elderly and Palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Availability of Essential medicines	
1	Number of medicines at UAAM as per State Essential Medicine List (EML) <i>Reference link for national EML:</i> https://nhsrcindia.org/sites/default/files/SHC-HWC%20%26%20UHC%20IPHS%202022%20Guidelines%20pdf.pdf <i>(Total medicines at UAAM as per national EML is 105)</i>

2	Total number of medicines available at the UAAM	83	
3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever	
4	Medicine categories with shortfall/stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-tuberculosis <input type="checkbox"/> Anti-fungal <input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycaemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
5	What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
6	What is the lead time for supply of drugs which are indented? (record in days)	<input type="checkbox"/> Less than 1 Week <input checked="" type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In-house lab <input type="checkbox"/> Outsource (Hub/PPP mode) <input type="checkbox"/> Hybrid Model
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	<i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	10
4	Number of tests Provided through In House Mode	10
5	Number of tests Provided through Hub & Spoke (Public Health System)	5
6	Number of tests Provided through Hub & Spoke- PPP Model	
7	Availability of X-ray services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8	Availability of Sample transportation mechanism	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10	Average downtime of equipment (days)	
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (government funded)
Infrastructure: Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop

	<input checked="" type="checkbox"/> Internet connectivity (government funded)
Teleconsultation services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input checked="" type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital <input type="checkbox"/> Other, specify:
Teleconsultation platforms used	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common conditions for teleconsultation	COUGH, COLD, FEVER, JOINT PAIN
Total teleconsultations in the last 01 month	30

I. Wellness Activities

Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

J. Governance

Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Periodic JAS meetings in the last 6 months (once a month)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Minutes of meetings maintained	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of functional MAS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

K. Reporting

Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others:	<input type="checkbox"/> Yes <input type="checkbox"/> No

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	UAAM Team (Team Based Incentives)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	Fund Source	Timely disbursement	Details
	Untied	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Other Sources	<input type="checkbox"/> Yes <input type="checkbox"/> No	
United Fund utilized during last year	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	1,00,000/-	92,000/-	92%

<p>Is untied fund being spent on following activities?</p>	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Status of JSY Payments</p>	<p>Payment done till: Monthly</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>
<p>Availability of JSSK entitlements</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, whether all entitlements being provided</p> <p><input type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p>

	<input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges
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M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1221
2	No. of PW registered for ANC	57
3	No. of PW received 4 or more ANC check-ups	57
4	Total number of institutional deliveries	15
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	05
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	26
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	31
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	10
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	-
8	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	1391
	No. of TB patients diagnosed out of the presumptive patients referred	4
	No. of TB patients taking treatment in the AAM	29
9	Community Based Screening for NCDs	
	% of target population administered CBAC	98.7%

	% of target population with score below 4		59%	
	% of target population with score 4 and above		41	
10	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	11435	843	843
	Diabetes	11435	222	222
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	11435	0	0
	Breast Cancer*	4675	0	0
	Cervical Cancer*	-	-	-

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4	Is the facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, Achievement under Kayakalp (Winner, recommendation) and score	88.1
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy

		<input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance

O. IPHS Compliance

1	Date of assessment using ODK tool kit	6 JUNE 2024
2	Facility aggregate score using ODK Took kit	73.15

Annexure- List of essential equipment

S.No	Equipment	Available	Not available	Functional	Non functional
1	BP apparatus- Digital / Sphygmomanometer	YES		YES	
2	BP apparatus- Aneroid / Sphygmomanometer	YES		YES	
3	Weighing machine Electronic	YES		YES	
4	Hemoglobinometer	YES		YES	
5	Glucometer	YES		YES	
6	Thermometer	YES		YES	
7	Baby weighing scale	YES		YES	
8	Stethoscope	YES		YES	
9	Near Vision chart	YES		YES	
10	Snellen vision chart	YES		YES	
11	Stadiometer	YES		YES	
12	Tuning fork	YES		YES	

Key Observations

Human Resources

- At present, only one Community Health Officer (CHO) and ASHA workers are posted at the facility.
- Medical Officer and Staff Nurse positions are vacant, affecting the scale and quality of service delivery.
- Although designated as a UAAM, full-scale services are not yet being provided.
- Cervical cancer screening has not begun yet; training was recently conducted, and the service is expected to start soon.

Infrastructure & Support Systems

- No power backup is available, which can disrupt electronic documentation and patient care during power cuts.
- No residential quarters are available for any staff, making daily travel a challenge.
- Internet connectivity is lacking, and staff currently use their personal data connections for official tasks such as reporting and teleconsultation.

Annexure VI

Field Monitoring Format - Community Level

Date of Visit	02/04/2025
Name of Village/ Slum visited	Demani
Details of nearest public health facility (from residence)	<i>Facility name: PHC DADRA</i> <i>Facility type:AAM- PHC</i> <i>Distance: 4 KMS</i>
Whether the AAM-SC/ AAM-UPHC/UAAM is in the same village/ slum area	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Accessible from nearest road	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No

Please remember that along with the checklist you have to list five key challenges observed in the community and explore the root causes during the discussion with the community members and document them.

Questions	Probes	Responses to be recorded here
Topic: Community's choice of provider		

<p>From whom do you or your family seek healthcare in the event of minor ailments? Reasons, thereof.</p> <p>What about for conditions needing routine-visits/ check-up? (ANC, Blood pressure, blood sugar, wound-dressing, etc.,) Reasons, thereof.</p>	<p>Healthcare provider probes: Self (home remedies), Informal / traditional healers, private practitioners, private hospitals, public/ government primary hospitals (AAM-SHC/ PHC/ UPHC/ UAAM), secondary/ tertiary public hospitals (CHC/SDH/ DH/ MCH), AYUSH practitioners.</p> <p>Reasons probes: Proximity, convenience, availability of staff, free of cost services, trust on the provider.</p>		√	Reason for the choice
		Self (home remedies)		<ul style="list-style-type: none"> • Proximity, • Convenience • Economical • Trust/Faith on the provider/ Practice ∴ YES
		Informal healers		
		private practitioners/ hospitals,		
		public/ government primary hospitals (AAM-SHC/ PHC/ UPHC/ UAAM),	YES	
		secondary/ tertiary public hospitals (CHC/SDH/ DH/ MCH)	YES	
		AYUSH practitioners.	YES	
		Self (home remedies)		

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Topic: Community's Awareness of AAM-SC/ PHC/ UPHC

Can you share your views on the AAM-SC/ PHC/ UPHC in your area?

How long has it been there?

What are the health services being provided there?

May use local terms as recognized by the community

Services may include: RMCHA+N services, communicable diseases, NCDs, elderly, palliative care, etc

Probes-less than 3 Months/ Less than 6 months/less than one yr./ Greater than one yr.)

Probes-RCH, NCD, Communicable diseases, expanded packages)

We are satisfied with the services provided at our centre. We receive our medicines on time, and our treatment is also done promptly. Everyone treats us very well.

- OPD
- Emergency
- Day care admit
- Eyecare services
- NCD
- Communicable diseases
- Elderly palliative care

Topic: Accessibility to primary healthcare services

How do you access the facility from your residence?	<i>Probes: Walk to the facility</i> <i>Use public transport</i> <i>Use personal transport</i>	By Walk and sometimes by our own vehicles.
What are the challenges you face in accessing this facility?	Barriers may include: <i>Terrain/ Geographical barriers, structural barriers within the facility or its premises; financial barriers, socio-cultural barriers...</i>	<ul style="list-style-type: none"> • <i>Geographical barriers: YES</i> • <i>structural barriers within the facility or its premises</i> • <i>financial barriers</i> • <i>socio-cultural barriers</i> • <i>Others, (please specify):.....</i>
Are the staff of the facility organizing outreach visits or camps in the community? If yes, can you share what you've observed during such camps/ visits?		Yes, the staff here regularly organize camps. They visit our homes and conduct testing. Whenever we share any health concerns with them, they either bring the required medicines during their next visit or guide us properly so we can collect them from the centre.

Topic: Availability of primary health care infrastructure and services

What are your opinions on the building in which the primary healthcare facility is functioning? What more needs to be added to	Probes - <i>Condition of the building</i> - <i>Maintenance</i> - <i>Dedicated space for waiting and examination</i> - <i>Adequate seating arrangement</i> - <i>Functional toilet</i> - <i>Potable and drinking water</i> - <i>Power supply</i>	Infrastructure and services	Response
		<i>Condition of the building</i>	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Neither good nor bad <input type="checkbox"/> Bad
		<i>Maintenance</i>	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Neither good nor bad <input type="checkbox"/> Bad

<p><i>improve the treatment-seeking experience in this place?</i></p>		<p><i>Dedicated space for waiting and examination</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
		<p><i>Adequate seating arrangement</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
		<p><i>Functional toilet</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
		<p><i>Potable/ drinking water</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
		<p><i>Power supply</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><i>When you visit the facility, are the staff available to provide services?</i></p> <p><i>Do you feel that the staff available are adequate at the facility?</i></p>	<p>Staff may include: Medical officers(AAM PHC/ UPHC/ UAAM),Community health officer (AAM-SHC), ANMs, Staff Nurses, Lab technicians, pharmacists, Multipurpose worker, health workers, any other.</p>	<p>YES, EVERYTIME WE VISIT, THE STAFF IS AVAILABLE EXCEPT AT NIGHT.</p> <p>Overall, the services are good, but it would be better if a doctor was available at night. In case of a medical emergency at night, we have to travel far to get treatment.</p>
<p><i>Is the facility providing all the medicines prescribed for your condition?</i></p> <p><i>If not, reasons thereof.</i></p>	<p>Probe</p> <p><i>If there had been instances of non-availability of medicines, what do you do?</i></p>	<p>We receive all the required medicines. There has never been a time when medicines were not available. Even if something is occasionally out of stock, it is made available within a day or two</p>

<p><i>Is the facility providing all the lab-tests/ diagnostic tests prescribed for your condition?</i></p> <p><i>If not, reasons thereof.</i></p>	<p>Probe</p> <p><i>If there had been instances of non-availability of lab/ diagnostic tests, what do you do?</i></p>	<p>Not all lab tests are available here. For certain advanced tests, we have to travel to distant facilities.</p>
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Topic: Acceptability of healthcare services

<p><i>Do you feel that the staff at the facility is capable to provide health care?</i></p>	<p>Probe: Adequate skills and knowledge</p>	<p>YES</p>
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<p><i>Do you feel that the primary healthcare facility uses <u>innovative</u> methods or technology for delivering healthcare?</i></p> <p><i>Do you find the current methods/ technology acceptable when administered on you or your family?</i></p>	<p>Innovative may include painless, time-saving or cost-saving methods or technology</p> <p>Alternate phrasing: Do you face any difficulty when the hospital staff use a method or device or instrument on you for diagnosis or treatment? <u>This may include social, psychological, physical or financial distress.</u></p>	<p>YES</p> <p>YES</p> <p>YES</p>
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<p><i>Are you mobilized to use any services that would cost you, due to which you tend to avoid those services?</i></p>		
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Topic: Unmet Needs

<p><i>According to you, what other services may be provided through the facilities to improve the health needs of the community?</i></p> <p><i>How are the community members currently meeting these unmet needs?</i></p> <p><i>Do they have to incur personal expenditure as a result?</i></p>		<p>We would like a doctor to be available here 24/7 to attend to emergency cases, as we currently have to travel far during night-time emergencies.</p> <p>We also wish that all lab tests, especially the ones not currently available here, could be provided at this facility so that we don't have to go elsewhere for testing.</p>
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Topic: Quality of Care provided through the primary healthcare facility

<p><i>What are your views on the quality of healthcare provided at the primary</i></p>	<p>Probes</p> <ul style="list-style-type: none"> - <i>Provider behaviour/ attitude</i> - <i>Waiting time</i> 	
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<p><i>healthcare facility?</i></p> <p><i>Do you feel that certain areas may be improved for enhancing the treatment-seeking experience?</i></p> <p><i>Do you feel that your health improves by using the services provided at the facility?</i></p>	<ul style="list-style-type: none"> - <i>Cleanliness of the premises</i> - <i>Provision for Grievance redressal and escalation</i> - <i>Practice of soliciting and implementing feedback</i> - <i>Right diagnosis</i> - <i>Accuracy of diagnostic tests done at the facility</i> - <i>Effectiveness of medicines dispensed at the facility</i> 	<p>The staff's behaviour is very good. Cleanliness is well maintained at the facility. We don't have to wait for long, and all the medicines are provided to us on time.</p>
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CHALLENGES

Limited Availability of Medicines

- Currently, only basic medications are available at the facility.
- Community members expressed the need for medicines related to chronic and serious conditions such as Asthma and Kidney diseases, especially as a significant portion of the population is prone to Non-Communicable Diseases (NCDs).

Inadequate Diagnostic Services

- Not all essential tests are available at the facility.
- People have to travel to distant centers for advanced diagnostics, which becomes burdensome, especially for the elderly and chronically ill.

Lack of Round-the-Clock Medical Support

- A major concern shared by the community is the unavailability of a doctor during night hours.
- In case of emergencies, especially involving young children or elderly family members, patients are forced to travel long distances.
- The demand for a 24x7 doctor at the facility was strongly emphasized by the beneficiaries.

Field Monitoring Format-Ayushman Arogya Mandir-Sub Health Centre (AAM-SHC)

Date of Visit: 03/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	SILLI-1
4. Name of Facility	AAM- SILLI
5. Type of Facility	Sub Health Centre
6. NIN of the facility	8857522687
7. No. of days in a week facility is operational	6 Days
8. OPD Timings	8:00 AM – 6:00 PM
9. Month & Year of AAM operationalization	APRIL 2019
10. Accessible from nearest road head (Yes/No)	YES
11. Next Referral Facility	PHC- KILVANI
12. Distance of next referral facility (Km)	3 KM

A.1 Demographic Details	
1. Number of Villages	9
2. No. of Households	1412
3. Total catchment Population	6241
4. Population who are 30 years of age and above	2640

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	If No Govt owned Building, specify building type (Other Govt. /Panchayat Bhawan/ Rented etc.)	
3.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	External branding as per CPHC guidelines (<i>colour and logo</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	OPD room Examination table with privacy curtain/ screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Availability of furniture: Table Chairs Almirah/Rack	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Availability of Running water in the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Power back up	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	Availability of Safe drinking Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Colour coded waste bins (<i>used for segregation of biomedical waste</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Bio-medical waste disposal mechanism in place (<i>Sharps pit and Deep burial pits for sharp /waste collection mechanism for disposal at higher facility</i>)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
21.	Residential Quarters available for Staff <i>If yes, Specify the staff for which quarters available</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> CHO <input checked="" type="checkbox"/> ANM

B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, NCD Eye, oral care, etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	CHO/MLHP	1	1	0	1	1
2	ANM/MPW-F	2	1	1	1	1
3	MPW-M		1	1	0	0
3	ASHA (Population Norms -1 ASHA per 1000 population)	-	-	-	6	6
4	Any other (If yes, specify)		-	-	-	-

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases			
Services	CHO (Yes/ No)	MPW (F) / (M) (Yes/ No)	ASHA (Yes/ No)
Maternal Health (ANC/PNC Care)	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES
Family Planning	YES	YES	YES

Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES
NCD	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/ No)	Trained in ENT care (Yes/ No)	Trained in oral care (Yes/ No)	Trained in MNS (Yes/ No)	Trained in Elderly & Palliative care (Yes/ No)	Trained in Trauma & Emergency care (Yes/ No)
CHO	YES	YES	YES	YES	YES	YES
ANM/ MPW (F)	YES	YES	YES	YES	YES	YES
MPW (M)	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	YES

E. Service Delivery	
Service provided	<p>Reproductive Maternal and Child Health</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services <p>Communicable diseases</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB

	<input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses Non-Communicable Diseases <input checked="" type="checkbox"/> Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix
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E.2 Availability of Expanded Packages of Services

Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Elderly and palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Essential medicines

Number of medicines at AAM-SHC as per State Essential Medicines list (Link for essential medicines for reference- https://nhsrindia.org/essential-medicines-list-hwc-shc-phc)	(Total medicines at AAM-SHC as per national EML is 105)
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Total number of medicines available at AAM-SHC	92	
Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever	
Medicine categories with shortfall/ stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-tuberculosis <input type="checkbox"/> Anti-fungal <input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
What is the lead time for supply of drugs which are indented? (record in days)	<input type="checkbox"/> Less than 1 Week <input checked="" type="checkbox"/> 1-2 Weeks	

	<input type="checkbox"/> More than 2 Weeks
Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
G. Essential diagnostics	
Number of diagnostics at AAM-SC as per State Essential Diagnostic list	(Total diagnostics at AAM-SC as per national EDLis 14)
Total number of diagnostic tests available at AAM-SC	12
Mode of diagnostic services	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> PPP <input type="checkbox"/> Hybrid
Arrangements for Sputum sample transport for TB	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of diagnostic testing aids/ equipment	<input checked="" type="checkbox"/> Rapid diagnostic testing kits <input checked="" type="checkbox"/> Sphygmomanometer <input checked="" type="checkbox"/> Glucometer <input checked="" type="checkbox"/> Haemoglobinometer <input checked="" type="checkbox"/> Thermometer <input checked="" type="checkbox"/> Urine dipstick <input checked="" type="checkbox"/> Vaginal speculum <input checked="" type="checkbox"/> Ortho-toluidine reagent <input checked="" type="checkbox"/> H ₂ S strip test kit
User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

H. Information Technology & Teleconsultation

Infrastructure (Availability)	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop/ COMPUTER <input checked="" type="checkbox"/> Internet connectivity (government funded or other, specify) PERSONAL
Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (government funded other, specify)
Arrangements for teleconsultation made	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Linked Hub for Teleconsultation	<input checked="" type="checkbox"/> PHC <input type="checkbox"/> CHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Any other, specify:
Platform utilized for teleconsultation	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Any other (Specify)
Whether teleconsultation schedule has been prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Common Conditions for which teleconsultation being done	
Total Teleconsultations in the last 01 month	30

I. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

J. Finance	
Renumeration & Incentives	
Timely disbursement of incentives to ASHAs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to CHOs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to AAM-SC team (other than CHO)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of performance-based incentives to CHO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of team-based incentives to AAM-SHC team	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	
Timely disbursement of untied funds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Fund flow through other sources	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Specify any other fund source:			
Fund utilization % NHM Fund utilized last year:	Funds received (Amt in Rs.)	Expenditure (Amt in Rs.)	% Expenditure
	50,000/-	45,000/-	90%
Is untied fund being spent on following activities		Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, specify <input type="checkbox"/> Electricity <input type="checkbox"/> Drinking Water <input type="checkbox"/> Internet Regular purchase: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify <input type="checkbox"/> Medicines <input type="checkbox"/> Reagents/Consumables <input type="checkbox"/> Equipment Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
K. Governance			
Community-based platforms Constitution of Jan Arogya Samiti Periodic JAS meetings in the last 6 months (Once a month) JAS meeting minutes available		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

VHSNC Meeting held and minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic VHND sessions undertaken (Sessions held against planned)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Involvement of CHO in community-based platforms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
L. Wellness Activities		
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Wellness sessions conducted in Last month	11	
ASHA Functionality		
Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Number of Village Health & Sanitation days conducted in last 6 months	12	
M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1188
2	No. of PW registered for ANC	18
3	No. of PW received 4 or more ANC check-ups	12
4	Total number of institutional deliveries	15
5	Total no. of High-Risk Pregnancies received treatment against no. of high-risk pregnancies identified	4
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	21
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	24
8	Number of cases referred from Sub centre AAM to PHC AAM during last 3 months	6
9	TB patients undergoing treatment	

	Indicators	Current year		
	No. of presumptive TB patients identified	112		
	No. of TB patients diagnosed out of the presumptive patients referred	4		
	No. of TB patients taking treatment in the AAM	2		
10	Community Based Screening for NCDs: % of target population administered CBAC: % of target population with score below 4: % of target population with score 4 and above:			99% 94% 5%
11	NCDs <i>(No. of individuals in last 6 Months)</i>	Screened	Referred	Followed-up
	Hypertension	2643	87	87
	Diabetes	2643	137	137
	Oral Cancer	2643	0	0
	Breast Cancer	1159	0	0
	Cervical Cancer	1159	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety

1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is Facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

5	If yes, achievement under Kayakalp (Winner, commendation) and score	93.4
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance

O. IPHS Compliance

1	Date of assessment using ODK tool kit	28 MAY 2024
2	Facility aggregate score using ODK Took kit	71

Appendix-List of equipment

S. No.	Equipment	Available	Not available	Functional	Not functional
1	BP apparatus- Digital/ Sphygmomanometer	YES		YES	
2	BP apparatus- Aneroid/ Sphygmomanometer	YES		YES	
3	Weighing machine Electronic	YES		YES	
4	Hemoglobinometer	YES		YES	
5	Glucometer	YES		YES	
6	Thermometer	YES		YES	
7	Baby weighing scale	YES		YES	
8	Stethoscope	YES		YES	
9	Near Vision chart	YES		YES	
10	Snellen vision chart	YES		YES	
11	Stadiometer	YES		YES	
12	Tuning fork	YES		YES	

Key Observations

Infrastructure & Maintenance

- The facility is in excellent condition, with proper cleanliness, hygiene, and overall maintenance.
- Basic services, medicines, and essential diagnostics are available as per norms.

Adolescent & Maternal Health Concerns

- The CHO reported a notable concern regarding teenage pregnancies in the area.
- Many adolescent girls are reportedly in live-in relationships, and due to social stigma or fear, they avoid early Antenatal Care (ANC) registration. As a result, pregnancy is often identified late, and complications arise by the time medical help is sought.
- This has led to high-risk pregnancies and avoidable maternal health issues.

Need for Staff Training

- There is a clear need for refresher training on the 12 Expanded Service Delivery Packages under Ayushman Arogya Mandir guidelines.
- The CHO expressed that staff have not received recent or comprehensive training, and capacity-building is essential for effective service delivery.

Field Monitoring Format-Ayushman Arogya Mandir-Sub Health Centre (AAM-SHC)

Date of Visit: 02/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Athal
4. Name of Facility	AAM SHC
5. Type of Facility	Sub Health Centre
6. NIN of the facility	5613625168
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	8:00 AM – 5:00 PM
9. Month & Year of AAM operationalization	2019- APRIL
10. Accessible from nearest road head (Yes/No)	YES
11. Next Referral Facility	PHC- NAROLI
12. Distance of next referral facility (Km)	7 KM

A.1 Demographic Details	
1. Number of Villages	2
2. No. of Households	4323
3. Total catchment Population	12143
4. Population who are 30 years of age and above	5459

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	If No Govt owned Building, specify building type (Other Govt. /Panchayat Bhawan/ Rented etc.)	
3.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	External branding as per CPHC guidelines (<i>colour and logo</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	OPD room Examination table with privacy curtain/ screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Availability of furniture: Table Chairs Almirah/Rack	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Availability of Running water in the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Power back up	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Availability of Safe drinking Water	<input type="checkbox"/> Yes <input type="checkbox"/> No
17.	Functional Handwashing corner (designated) with running water and soap	<input type="checkbox"/> Yes <input type="checkbox"/> No
18.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Colour coded waste bins (<i>used for segregation of biomedical waste</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Bio-medical waste disposal mechanism in place (<i>Sharps pit and Deep burial pits for sharp /waste collection mechanism for disposal at higher facility</i>)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
21.	Residential Quarters available for Staff <i>If yes, Specify the staff for which quarters available</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> CHO <input checked="" type="checkbox"/> ANM

B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, NCD Eye, oral care, etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	CHO/MLHP	1	1	0	1	1
2	ANM/MPW-F	2	0	0	3	3
3	MPW-M		1	1	0	0
3	ASHA (Population Norms -1 ASHA per 1000 population)	-	-	-	9	9
4	Any other (If yes, specify)		-	-	-	-

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases			
Services	CHO (Yes/ No)	MPW (F) / (M) (Yes/ No)	ASHA (Yes/ No)
Maternal Health (ANC/PNC Care)	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES
Family Planning	YES	YES	YES

Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES
NCD	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/ No)	Trained in ENT care (Yes/ No)	Trained in oral care (Yes/ No)	Trained in MNS (Yes/ No)	Trained in Elderly & Palliative care (Yes/ No)	Trained in Trauma & Emergency care (Yes/ No)
CHO	YES	YES	YES	YES	YES	YES
ANM/ MPW (F)	YES	YES	YES	YES	YES	YES
MPW (M)	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	YES

E. Service Delivery	
Service provided	<p>Reproductive Maternal and Child Health</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services <p>Communicable diseases</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input checked="" type="checkbox"/> TB

	<input checked="" type="checkbox"/> Leprosy <input checked="" type="checkbox"/> Acute simple illnesses Non-Communicable Diseases <input checked="" type="checkbox"/> Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral <input checked="" type="checkbox"/> Screening of common cancers – breast <input checked="" type="checkbox"/> Screening of common cancers – cervix
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E.2 Availability of Expanded Packages of Services

Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Basic ear, nose, throat (ENT) care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Oral health care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Elderly and palliative care services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Screening & management of mental health ailments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Emergency Medical Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

F. Essential medicines

Number of medicines at AAM-SHC as per State Essential Medicines list (Link for essential medicines for reference- https://nhsrindia.org/essential-medicines-list-hwc-shc-phc)	(Total medicines at AAM-SHC as per national EML is 105)
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Total number of medicines available at AAM-SHC	90	
Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever	
Medicine categories with shortfall/ stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input checked="" type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input checked="" type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-tuberculosis <input type="checkbox"/> Anti-fungal <input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks	

	<input type="checkbox"/> More than 2 Weeks
Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
G. Essential diagnostics	
Number of diagnostics at AAM-SC as per State Essential Diagnostic list	(Total diagnostics at AAM-SC as per national EDLis 14)
Total number of diagnostic tests available at AAM-SC	9
Mode of diagnostic services	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> PPP <input type="checkbox"/> Hybrid
Arrangements for Sputum sample transport for TB	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of diagnostic testing aids/ equipment	<input checked="" type="checkbox"/> Rapid diagnostic testing kits <input checked="" type="checkbox"/> Sphygmomanometer <input checked="" type="checkbox"/> Glucometer <input checked="" type="checkbox"/> Haemoglobinometer <input checked="" type="checkbox"/> Thermometer <input type="checkbox"/> Urine dipstick <input checked="" type="checkbox"/> Vaginal speculum <input checked="" type="checkbox"/> Ortho-toluidine reagent <input checked="" type="checkbox"/> H ₂ S strip test kit
User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

H. Information Technology & Teleconsultation

Infrastructure (Availability)	<input type="checkbox"/> Tablet <input checked="" type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input type="checkbox"/> Internet connectivity (government funded or other, specify)
Functionality	<input type="checkbox"/> Tablet <input checked="" type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input type="checkbox"/> Internet connectivity (government funded other, specify)
Arrangements for teleconsultation made	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Linked Hub for Teleconsultation	<input checked="" type="checkbox"/> PHC <input type="checkbox"/> CHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Any other, specify:
Platform utilized for teleconsultation	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Any other (Specify)
Whether teleconsultation schedule has been prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common Conditions for which teleconsultation being done	

Total Teleconsultations in the last 01 month	40
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I. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

J. Finance	
Renumeration & Incentives	
Timely disbursement of incentives to ASHAs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to CHOs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to AAM-SC team (other than CHO)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of performance-based incentives to CHO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of team-based incentives to AAM-SHC team	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Facility funds	
Timely disbursement of untied funds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Fund flow through other sources	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specify any other fund source:	

<p>Fund utilization</p> <p>% NHM Fund utilized last year:</p>	<p>Funds received (Amt in Rs.)</p>	<p>Expenditure (Amt in Rs.)</p>	<p>% Expenditure</p>
<p>Is untied fund being spent on following activities</p>	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
K. Governance			
<p>Community-based platforms</p> <p>Constitution of Jan Arogya Samiti</p> <p>Periodic JAS meetings in the last 6 months (Once a month)</p> <p>JAS meeting minutes available</p>		<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

VHSNC Meeting held and minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic VHND sessions undertaken (Sessions held against planned)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Involvement of CHO in community-based platforms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
L. Wellness Activities		
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Wellness sessions conducted in Last month	6	
ASHA Functionality		
Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Number of Village Health & Sanitation days conducted in last 6 months	54	
M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	984
2	No. of PW registered for ANC	57
3	No. of PW received 4 or more ANC check-ups	31
4	Total number of institutional deliveries	33
5	Total no. of High-Risk Pregnancies received treatment against no. of high-risk pregnancies identified	17
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	46
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	46
8	Number of cases referred from Sub centre AAM to PHC AAM during last 3 months	22
9	TB patients undergoing treatment	

	Indicators	Current year		
	No. of presumptive TB patients identified	40		
	No. of TB patients diagnosed out of the presumptive patients referred	1		
	No. of TB patients taking treatment in the AAM	5		
10	Community Based Screening for NCDs: % of target population administered CBAC: % of target population with score below 4: % of target population with score 4 and above:			100% 99% 1%
11	NCDs <i>(No. of individuals in last 6 Months)</i>	Screened	Referred	Followed-up
	Hypertension	5122	199	199
	Diabetes	5122	257	257
	Oral Cancer	5122	1	1
	Breast Cancer	4621	12	12
	Cervical Cancer	4621	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety

1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is Facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

5	If yes, achievement under Kayakalp (Winner, commendation) and score	88.5
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance

O. IPHS Compliance

1	Date of assessment using ODK tool kit	25 MAY 2024
2	Facility aggregate score using ODK Took kit	71.8

Appendix-List of equipment

S. No.	Equipment	Available	Not available	Functional	Not functional
1	BP apparatus- Digital/ Sphygmomanometer	YES		YES	
2	BP apparatus- Aneroid/ Sphygmomanometer	YES		YES	
3	Weighing machine Electronic	YES		YES	
4	Hemoglobinometer	YES		YES	
5	Glucometer	YES		YES	
6	Thermometer	YES		YES	
7	Baby weighing scale	YES		YES	
8	Stethoscope	YES		YES	
9	Near Vision chart	YES		YES	
10	Snellen vision chart	YES		YES	
11	Stadiometer	YES		YES	
12	Tuning fork	YES		YES	

Key Observations

Infrastructure & Cleanliness

- The facility was clean and well-kept, which left a positive impression.
- Medicines and diagnostic tests were available as per the prescribed norms and protocols.

Service Challenges Due to Migratory Population

- The Community Health Officer (CHO) highlighted that a high migratory population is a major barrier to consistent healthcare delivery.
- Many patients leave the area before follow-up can be done, causing breaks in treatment and monitoring.
- This also creates challenges in community-level screenings and continuity of care.

Power Backup

- The facility does not have any power backup system (e.g., inverter or generator).
- This affects service delivery during power outages, especially diagnostics or storage of temperature-sensitive items.

Residential Accommodation

- Residential quarters are available only for the ANM, not for the CHO.
- The CHO travels from a distant location, and lack of nearby accommodation leads to difficulty in daily commute and irregular working hours.

Field Monitoring Format-Ayushman Arogya Mandir-Sub Health Centre (AAM-SHC)

Date of Visit: 03/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra
3. Block/Taluka Name	Dadra & Nagar Haveli
4. Name of Facility	AAM- SHC
5. Type of Facility	Sub Health Centre
6. NIN of the facility	8734326427
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	9:00 AM – 1:00 PM 3:00 PM – 5:00 PM
9. Month & Year of AAM operationalization	2019 APRIL
10. Accessible from nearest road head (Yes/No)	YES
11. Next Referral Facility	NAMO HOSPITAL
12. Distance of next referral facility (Km)	7KMS

A.1 Demographic Details	
1. Number of Villages	10
2. No. of Households	2767
3. Total catchment Population	7801
4. Population who are 30 years of age and above	3453

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	If No Govt owned Building, specify building type (Other Govt. /Panchayat Bhawan/ Rented etc.)	
3.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	External branding as per CPHC guidelines (<i>colour and logo</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	OPD room Examination table with privacy curtain/ screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Availability of furniture: Table Chairs Almirah/Rack	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Availability of Running water in the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Power back up	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Availability of Safe drinking Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Colour coded waste bins (<i>used for segregation of biomedical waste</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Bio-medical waste disposal mechanism in place (<i>Sharps pit and Deep burial pits for sharp /waste collection mechanism for disposal at higher facility</i>)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

21.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> CHO <input type="checkbox"/> ANM
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B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, NCD Eye, oral care, etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	CHO/MLHP	1	0	0	1	1
2	ANM/MPW-F	2	1	0	1	1
3	MPW-M		1	1	0	0
3	ASHA <i>(Population Norms -1 ASHA per 1000 population)</i>	-	-	-	9	9
4	Any other (If yes, specify)		-	-	-	-

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases			
Services	CHO (Yes/ No)	MPW (F) / (M) (Yes/ No)	ASHA (Yes/ No)

Maternal Health (ANC/PNC Care)	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES
Family Planning	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES
NCD	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/ No)	Trained in ENT care (Yes/ No)	Trained in oral care (Yes/ No)	Trained in MNS (Yes/ No)	Trained in Elderly & Palliative care (Yes/ No)	Trained in Trauma & Emergency care (Yes/ No)
CHO	YES	YES	YES	YES	YES	YES
ANM/ MPW (F)	YES	YES	YES	YES	YES	YES
MPW (M)	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	YES

E. Service Delivery	
Service provided	<p>Reproductive Maternal and Child Health</p> <p><input checked="" type="checkbox"/> ANC/ PNC</p> <p><input checked="" type="checkbox"/> Neonatal and infant healthcare services</p> <p><input checked="" type="checkbox"/> Childhood and Adolescent healthcare services</p> <p><input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services</p> <p>Communicable diseases</p>

https://nhsrindia.org/essential-medicines-list-hwc-shc-phc)	(Total medicines at AAM-SHC as per national EML is 105)	
Total number of medicines available at AAM-SHC	110	
Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever	
Medicine categories with shortfall/ stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-tuberculosis <input type="checkbox"/> Anti-fungal <input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	

What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks
Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
G. Essential diagnostics	
Number of diagnostics at AAM-SC as per State Essential Diagnostic list	(Total diagnostics at AAM-SC as per national EDLis 14)
Total number of diagnostic tests available at AAM-SC	10
Mode of diagnostic services	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> PPP <input type="checkbox"/> Hybrid
Arrangements for Sputum sample transport for TB	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of diagnostic testing aids/ equipment	<input checked="" type="checkbox"/> Rapid diagnostic testing kits <input checked="" type="checkbox"/> Sphygmomanometer <input checked="" type="checkbox"/> Glucometer <input checked="" type="checkbox"/> Haemoglobinometer <input checked="" type="checkbox"/> Thermometer <input type="checkbox"/> Urine dipstick <input checked="" type="checkbox"/> Vaginal speculum <input checked="" type="checkbox"/> Ortho-toluidine reagent <input checked="" type="checkbox"/> H ₂ S strip test kit

User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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H. Information Technology & Teleconsultation	
Infrastructure (Availability)	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input type="checkbox"/> Internet connectivity (government funded or other, specify)
Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input type="checkbox"/> Internet connectivity (government funded other, specify)
Arrangements for teleconsultation made	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Linked Hub for Teleconsultation	<input checked="" type="checkbox"/> PHC <input type="checkbox"/> CHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Any other, specify:
Platform utilized for teleconsultation	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Any other (Specify)

Whether teleconsultation schedule has been prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common Conditions for which teleconsultation being done	Cold, Cough , Fever, Bodypain
Total Teleconsultations in the last 01 month	25

I. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

J. Finance	
Renumeration & Incentives	
Timely disbursement of incentives to ASHAs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to CHOs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to AAM-SC team (other than CHO)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of performance-based incentives to CHO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of team-based incentives to AAM-SHC team	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Facility funds	
Timely disbursement of untied funds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Fund flow through other sources	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Specify any other fund source:	

Fund utilization % NHM Fund utilized last year:	Funds received (Amt in Rs.)	Expenditure (Amt in Rs.)	% Expenditure
	50,000/-	41,000/-	82%

Is untied fund being spent on following activities	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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K. Governance

Community-based platforms	
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Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic JAS meetings in the last 6 months (Once a month)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
JAS meeting minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
VHSNC Meeting held and minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic VHND sessions undertaken (Sessions held against planned)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Involvement of CHO in community-based platforms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
L. Wellness Activities		
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Wellness sessions conducted in Last month	11	
ASHA Functionality		
Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Number of Village Health & Sanitation days conducted in last 6 months	12	
M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1109
2	No. of PW registered for ANC	48
3	No. of PW received 4 or more ANC check-ups	33
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-risk pregnancies identified	36
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	34

7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	50		
8	Number of cases referred from Sub centre AAM to PHC AAM during last 3 months	5		
9	TB patients undergoing treatment			
	Indicators	Current year		
	No. of presumptive TB patients identified	458		
	No. of TB patients diagnosed out of the presumptive patients referred	0		
	No. of TB patients taking treatment in the AAM	1		
10	Community Based Screening for NCDs: % of target population administered CBAC: % of target population with score below 4: % of target population with score 4 and above:	99% 98% 1%		
11	NCDs <i>(No. of individuals in last 6 Months)</i>	Screened	Referred	Followed-up
	Hypertension	1192	93	93
	Diabetes	1192	107	107
	Oral Cancer	1192	0	0
	Breast Cancer	652	0	0
	Cervical Cancer	652	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety

1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is Facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	86%
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance

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O. IPHS Compliance

O. IPHS Compliance		
1	Date of assessment using ODK tool kit	24 MAY 2024
2	Facility aggregate score using ODK Took kit	69.4

Appendix-List of equipment

S. No.	Equipment	Available	Not available	Functional	Not functional
1	BP apparatus- Digital/ Sphygmomanometer	YES		YES	
2	BP apparatus- Aneroid/ Sphygmomanometer	YES		YES	
3	Weighing machine Electronic	YES		YES	
4	Hemoglobinometer	YES		YES	
5	Glucometer	YES		YES	
6	Thermometer	YES		YES	
7	Baby weighing scale	YES		YES	
8	Stethoscope	YES		YES	
9	Near Vision chart	YES		YES	
10	Snellen vision chart	YES		YES	
11	Stadiometer	YES		YES	
12	Tuning fork	YES		YES	

Key Observations

- Teleconsultation services are not functional due to poor internet connectivity at the facility.
- This limits the scope for specialist consultations and timely medical advice, especially in remote or complex cases.
- The CHO reported that when medical instruments or essential items are out of stock, there is a significant delay in replenishment.
- This affects the smooth continuity of services, especially in diagnostics and screening.
- Currently, cervical cancer screening is being done symptomatically, based on verbal reports and basic examination. The VIA (Visual Inspection with Acetic Acid) test is not available, which is a standard, low-cost method for cervical cancer screening at the primary level. This creates a missed opportunity for early detection and preventive care.

Field Monitoring Format-Ayushman Arogya Mandir-Sub Health Centre (AAM-SHC)

Date of Visit: 03/04/ 2025

A. General Information	
1. State	The Dadar & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Kudacha
4. Name of Facility	AAM- SHC
5. Type of Facility	Sub Health Centre
6. NIN of the facility	6457487251
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	9: 00 AM – 1: 00 PM 3: 00 PM – 5:00 PM
9. Month & Year of AAM operationalization	APRIL 2019
10. Accessible from nearest road head (Yes/No)	YES
11. Next Referral Facility	PHC RAKHOLI
12. Distance of next referral facility (Km)	2 KM

A.1 Demographic Details	
1. Number of Villages	7
2. No. of Households	854
3. Total catchment Population	3271
4. Population who are 30 years of age and above	-

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	If No Govt owned Building, specify building type (Other Govt. /Panchayat Bhawan/ Rented etc.)	
3.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	External branding as per CPHC guidelines (<i>colour and logo</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	OPD room Examination table with privacy curtain/ screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Availability of furniture: Table Chairs Almirah/Rack	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Availability of Running water in the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Power back up	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Availability of Safe drinking Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Colour coded waste bins (<i>used for segregation of biomedical waste</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Bio-medical waste disposal mechanism in place (<i>Sharps pit and Deep burial pits for sharp /waste collection mechanism for disposal at higher facility</i>)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

21.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> CHO <input checked="" type="checkbox"/> ANM
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B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, NCD Eye, oral care, etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	CHO/MLHP	1	0	0	1	1
2	ANM/MPW-F	2	0	0	1	1
3	MPW-M		1	1	0	0
3	ASHA <i>(Population Norms -1 ASHA per 1000 population)</i>	-	-	-	3	3
4	Any other (If yes, specify)		-	-	-	-

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases			
Services	CHO (Yes/ No)	MPW (F) / (M) (Yes/ No)	ASHA (Yes/ No)

Maternal Health (ANC/PNC Care)	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES
Family Planning	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES
NCD	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/ No)	Trained in ENT care (Yes/ No)	Trained in oral care (Yes/ No)	Trained in MNS (Yes/ No)	Trained in Elderly & Palliative care (Yes/ No)	Trained in Trauma & Emergency care (Yes/ No)
CHO	YES	YES	YES	YES	YES	YES
ANM/ MPW (F)	YES	YES	YES	YES	YES	YES
MPW (M)	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	YES

E. Service Delivery	
Service provided	<p>Reproductive Maternal and Child Health</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services <p>Communicable diseases</p>

https://nhsrindia.org/essential-medicines-list-hwc-shc-phc)	(Total medicines at AAM-SHC as per national EML is 105)	
Total number of medicines available at AAM-SHC	92	
Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever	
Medicine categories with shortfall/ stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-tuberculosis <input type="checkbox"/> Anti-fungal <input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	

What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks
Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

G. Essential diagnostics

Number of diagnostics at AAM-SC as per State Essential Diagnostic list	(Total diagnostics at AAM-SC as per national EDLis 14)
Total number of diagnostic tests available at AAM-SC	6
Mode of diagnostic services	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> PPP <input type="checkbox"/> Hybrid
Arrangements for Sputum sample transport for TB	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of diagnostic testing aids/ equipment	<input checked="" type="checkbox"/> Rapid diagnostic testing kits <input checked="" type="checkbox"/> Sphygmomanometer <input checked="" type="checkbox"/> Glucometer <input checked="" type="checkbox"/> Haemoglobinometer <input checked="" type="checkbox"/> Thermometer <input checked="" type="checkbox"/> Urine dipstick <input checked="" type="checkbox"/> Vaginal speculum <input checked="" type="checkbox"/> Ortho-toluidine reagent <input type="checkbox"/> H ₂ S strip test kit

User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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H. Information Technology & Teleconsultation	
Infrastructure (Availability)	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop/ COMP <input type="checkbox"/> Internet connectivity (government funded or other, specify)
Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input type="checkbox"/> Internet connectivity (government funded other, specify)
Arrangements for teleconsultation made	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Linked Hub for Teleconsultation	<input checked="" type="checkbox"/> PHC <input type="checkbox"/> CHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Any other, specify:
Platform utilized for teleconsultation	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Any other (Specify)

Whether teleconsultation schedule has been prepared and displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Common Conditions for which teleconsultation being done	Fever, Cough, Cold, Headache, Arthritis
Total Teleconsultations in the last 01 month	30

I. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

J. Finance	
Renumeration & Incentives	
Timely disbursement of incentives to ASHAs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to CHOs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to AAM-SC team (other than CHO)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of performance-based incentives to CHO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of team-based incentives to AAM-SHC team	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Facility funds	
Timely disbursement of untied funds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Fund flow through other sources	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Specify any other fund source:	

Fund utilization	Funds received (Amt in Rs.)	Expenditure (Amt in Rs.)	% Expenditure
	50,000/-	30,000/-	60%
% NHM Fund utilized last year:			

Is untied fund being spent on following activities	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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K. Governance

Community-based platforms	
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Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic JAS meetings in the last 6 months (Once a month)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
JAS meeting minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
VHSNC Meeting held and minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic VHND sessions undertaken (Sessions held against planned)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Involvement of CHO in community-based platforms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
L. Wellness Activities		
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Wellness sessions conducted in Last month	16	
ASHA Functionality		
Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Number of Village Health & Sanitation days conducted in last 6 months		
M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1197
2	No. of PW registered for ANC	17
3	No. of PW received 4 or more ANC check-ups	3
4	Total number of institutional deliveries	6
5	Total no. of High-Risk Pregnancies received treatment against no. of high-risk pregnancies identified	5
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	121

7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	19		
8	Number of cases referred from Sub centre AAM to PHC AAM during last 3 months	5		
9	TB patients undergoing treatment			
	Indicators	Current year		
	No. of presumptive TB patients identified	206		
	No. of TB patients diagnosed out of the presumptive patients referred	0		
	No. of TB patients taking treatment in the AAM	0		
10	Community Based Screening for NCDs: % of target population administered CBAC: % of target population with score below 4: % of target population with score 4 and above:	99% 48% 51%		
11	NCDs <i>(No. of individuals in last 6 Months)</i>	Screened	Referred	Followed-up
	Hypertension	1455	6	64
	Diabetes	1455	9	74
	Oral Cancer	1455	0	0
	Breast Cancer	547	0	0
	Cervical Cancer	0	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety

1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is Facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	89.7
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance

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O. IPHS Compliance

O. IPHS Compliance		
1	Date of assessment using ODK tool kit	23 MAY 2024
2	Facility aggregate score using ODK Took kit	50%

Appendix-List of equipment

S. No.	Equipment	Available	Not available	Functional	Not functional
1	BP apparatus- Digital/ Sphygmomanometer	YES		YES	
2	BP apparatus- Aneroid/ Sphygmomanometer	YES		YES	
3	Weighing machine Electronic	YES		YES	
4	Hemoglobinometer	YES		YES	
5	Glucometer	YES		YES	
6	Thermometer	YES		YES	
7	Baby weighing scale	YES		YES	
8	Stethoscope	YES		YES	
9	Near Vision chart	YES		YES	
10	Snellen vision chart	YES		YES	
11	Stadiometer	YES		YES	
12	Tuning fork	YES		YES	

Key Observations

Infrastructure & Maintenance

- The facility was found to be well-maintained, clean, and functional.
- All routine services were operational and up to the mark.
- No power backup (inverter/generator) is available, which may disrupt service delivery during electricity outages.
- Staff quarters are available only for the ANM. The CHO does not have residential accommodation, which creates difficulty for long-distance daily travel.

Community Screening Challenges

- Healthcare staff face difficulty during community screening visits.
- Most of the population is employed and not available at home during the day, particularly men.
- A significant portion of the population is tribal, and they are often away during the day for agricultural work.
- As a result, community screening efforts are limited and less effective, leading to missed opportunities for early detection and preventive care.

Field Monitoring Format-Ayushman Arogya Mandir-Sub Health Centre (AAM-SHC)

Date of Visit: 02/04/2025

A. General Information	
1. State	The Dadra & Nagar Haveli
2. District Name	Dadra & Nagar Haveli
3. Block/Taluka Name	Dhapsa
4. Name of Facility	AAM- SHC
5. Type of Facility	Sub Health Centre
6. NIN of the facility	3533883249
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	9:00 AM – 11: 00 PM (After that field work till 5 PM)
9. Month & Year of AAM operationalization	2019 APRIL
10. Accessible from nearest road head (Yes/No)	YES
11. Next Referral Facility	PHC NAROLI
12. Distance of next referral facility (Km)	2 KM

A.1 Demographic Details	
1. Number of Villages	5
2. No. of Households	1378
3. Total catchment Population	4437
4. Population who are 30 years of age and above	1700

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned Building	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	If No Govt owned Building, specify building type (Other Govt. /Panchayat Bhawan/ Rented etc.)	
3.	Availability of boundary Wall	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	External branding as per CPHC guidelines (<i>colour and logo</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	OPD room Examination table with privacy curtain/ screen	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	Availability of furniture: Table Chairs Almirah/Rack	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	Laboratory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Pharmacy /Drug store	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Space/ room identified for Wellness activities including Yoga sessions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	Separate functional toilets for males and females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	Availability of Running water in the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	Electricity connection	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Power back up	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Availability of Safe drinking Water	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.	Functional Handwashing corner (designated) with running water and soap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	Provision of BMW management	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Colour coded waste bins (<i>used for segregation of biomedical waste</i>)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Bio-medical waste disposal mechanism in place (<i>Sharps pit and Deep burial pits for sharp /waste collection mechanism for disposal at higher facility</i>)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

21.	Residential Quarters available for Staff If yes, Specify the staff for which quarters available	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> CHO <input type="checkbox"/> ANM
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B.1 Information, Education & communication (IEC) material		
1	Display of signages and name of the facility	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2	Display of IEC material (related to service packages TB, FP, RMNCHA, NCD Eye, oral care, etc)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Display of IEC on water, sanitation & hygiene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	IEC/Poster on BMW displayed at the facility.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Installation of TV/ LED screen in the waiting area for IEC display	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6	Display of citizen charter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7	Information on grievance redressal displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	Information on referral transport displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Information on nearest referral facility displayed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

C. Human Resource Availability						
	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	CHO/MLHP	1	1	0	1	1
2	ANM/MPW-F	2	2	2	1	1
3	MPW-M		0	0	1	1
3	ASHA <i>(Population Norms -1 ASHA per 1000 population)</i>	-	-	-	7	7
4	Any other (If yes, specify)		-	-	-	-

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases			
Services	CHO (Yes/ No)	MPW (F) / (M) (Yes/ No)	ASHA (Yes/ No)

Maternal Health (ANC/PNC Care)	YES	YES	YES
Child Health (New Born Care/ HBNC/HBYC)	YES	YES	YES
Family Planning	YES	YES	YES
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	YES	YES
NCD	YES	YES	YES

D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/ No)	Trained in ENT care (Yes/ No)	Trained in oral care (Yes/ No)	Trained in MNS (Yes/ No)	Trained in Elderly & Palliative care (Yes/ No)	Trained in Trauma & Emergency care (Yes/ No)
CHO	YES	YES	YES	YES	YES	YES
ANM/ MPW (F)	YES	YES	YES	YES	YES	YES
MPW (M)	YES	YES	YES	YES	YES	YES
ASHA	YES	YES	YES	YES	YES	NO

E. Service Delivery	
Service provided	<p>Reproductive Maternal and Child Health</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> ANC/ PNC <input checked="" type="checkbox"/> Neonatal and infant healthcare services <input checked="" type="checkbox"/> Childhood and Adolescent healthcare services <input checked="" type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services <p>Communicable diseases</p>

https://nhsrindia.org/essential-medicines-list-hwc-shc-phc)	(Total medicines at AAM-SHC as per national EML is 105)	
Total number of medicines available at AAM-SHC	86	
Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever	
Medicine categories with shortfall/ stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input checked="" type="checkbox"/> Antidotes for poisoning <input type="checkbox"/> Gastrointestinal meds <input type="checkbox"/> Anti-filarial <input type="checkbox"/> Antibiotics <input type="checkbox"/> Anti-leprosy	<input type="checkbox"/> Anti-tuberculosis <input type="checkbox"/> Anti-fungal <input type="checkbox"/> Anti-malarial <input type="checkbox"/> Anti-hypertensive <input type="checkbox"/> Oral hypoglycemics <input type="checkbox"/> Hypolipidemic <input type="checkbox"/> ORS <input type="checkbox"/> Multi-vitamins <input type="checkbox"/> Dermatological (cream)
What is the indenting cycle that is followed at the facility?	<input type="checkbox"/> Fortnightly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	

What is the lead time for supply of drugs which are indented? (record in days)	<input checked="" type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks
Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
G. Essential diagnostics	
Number of diagnostics at AAM-SC as per State Essential Diagnostic list	(Total diagnostics at AAM-SC as per national EDLis 14)
Total number of diagnostic tests available at AAM-SC	9
Mode of diagnostic services	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> PPP <input type="checkbox"/> Hybrid
Arrangements for Sputum sample transport for TB	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Availability of diagnostic testing aids/ equipment	<input checked="" type="checkbox"/> Rapid diagnostic testing kits <input checked="" type="checkbox"/> Sphygmomanometer <input checked="" type="checkbox"/> Glucometer <input checked="" type="checkbox"/> Haemoglobinometer <input checked="" type="checkbox"/> Thermometer <input checked="" type="checkbox"/> Urine dipstick <input checked="" type="checkbox"/> Vaginal speculum <input checked="" type="checkbox"/> Ortho-toluidine reagent <input checked="" type="checkbox"/> H ₂ S strip test kit

User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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H. Information Technology & Teleconsultation	
Infrastructure (Availability)	<input type="checkbox"/> Tablet <input checked="" type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop/ COMPUTER <input type="checkbox"/> Internet connectivity (government funded or other, specify)
Functionality	<input type="checkbox"/> Tablet <input checked="" type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input type="checkbox"/> Internet connectivity (government funded other, specify)
Arrangements for teleconsultation made	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Linked Hub for Teleconsultation	<input checked="" type="checkbox"/> PHC <input type="checkbox"/> CHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Any other, specify:
Platform utilized for teleconsultation	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Any other (Specify)

Whether teleconsultation schedule has been prepared and displayed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Common Conditions for which teleconsultation being done	
Total Teleconsultations in the last 01 month	30

I. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> National NCD Portal/App	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IHIP	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> HMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FPLMIS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Specify others, if any:	

J. Finance	
Renumeration & Incentives	
Timely disbursement of incentives to ASHAs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to CHOs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Timely disbursement of renumeration to AAM-SC team (other than CHO)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of performance-based incentives to CHO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Disbursement of team-based incentives to AAM-SHC team	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Facility funds	
Timely disbursement of untied funds	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Fund flow through other sources	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Specify any other fund source:	

Fund utilization	Funds received	Expenditure	%
	(Amt in Rs.)	(Amt in Rs.)	Expenditure
% NHM Fund utilized last year:	50,000/-	50,000/-	100%

Is untied fund being spent on following activities	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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K. Governance

Community-based platforms	
Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Periodic JAS meetings in the last 6 months (Once a month)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
JAS meeting minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
VHSNC Meeting held and minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic VHND sessions undertaken (Sessions held against planned)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Involvement of CHO in community-based platforms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
L. Wellness Activities		
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Wellness sessions conducted in Last month8.....	
ASHA Functionality		
Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Number of Village Health & Sanitation days conducted in last 6 months	24	
M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	748
2	No. of PW registered for ANC	56
3	No. of PW received 4 or more ANC check-ups	38
4	Total number of institutional deliveries	24
5	Total no. of High-Risk Pregnancies received treatment against no. of high-risk pregnancies identified	11
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	37

7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	28		
8	Number of cases referred from Sub centre AAM to PHC AAM during last 3 months	11		
9	TB patients undergoing treatment			
	Indicators	Current year		
	No. of presumptive TB patients identified	68		
	No. of TB patients diagnosed out of the presumptive patients referred			
	No. of TB patients taking treatment in the AAM	3		
10	Community Based Screening for NCDs: % of target population administered CBAC: % of target population with score below 4: % of target population with score 4 and above:	98% 91% 7%		
11	NCDs <i>(No. of individuals in last 6 Months)</i>	Screened	Referred	Followed-up
	Hypertension	5070	348	348
	Diabetes	5070	251	251
	Oral Cancer	5070	1	1
	Breast Cancer	4754	0	0
	Cervical Cancer	4754	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety

1	Has there been an internal assessment for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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2	Is the facility certified at the State-level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3	Is the facility certified at the National level for NQAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4	Is Facility participating in Kayakalp?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	83.19
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms

		<input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance
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O. IPHS Compliance

O. IPHS Compliance		
1	Date of assessment using ODK tool kit	25 MAY 2024
2	Facility aggregate score using ODK Took kit	71.3

Appendix-List of equipment

S. No.	Equipment	Available	Not available	Functional	Not functional
1	BP apparatus- Digital/ Sphygmomanometer	YES		YES	
2	BP apparatus- Aneroid/ Sphygmomanometer	YES		YES	
3	Weighing machine Electronic	YES		YES	
4	Hemoglobinometer	YES		YES	
5	Glucometer	YES		YES	
6	Thermometer	YES		YES	
7	Baby weighing scale	YES		YES	
8	Stethoscope	YES		YES	
9	Near Vision chart	YES		YES	
10	Snellen vision chart	YES		YES	
11	Stadiometer	YES		YES	
12	Tuning fork	YES		YES	

Key Observations

Patient Load & Field Responsibility

- The CHO reported that the area under the facility is quite large, and patient inflow is consistently high.
- When the CHO and field staff (ANM, MPW) are out for community work, there is no one available to attend to OPD patients at the health centre. This leads to delays in patient care and sometimes patient dissatisfaction or complaints.
- The CHO faces a challenge in balancing OPD duties and field responsibilities. If the CHO stays at the centre for OPD, community outreach suffers, and vice versa.
- This affects community engagement, screenings, follow-ups, and health education activities.

Other Operational Challenges

- As previously observed, there is no power backup at the facility, and connectivity issues continue to affect teleconsultation and reporting.
- Human resource shortage adds to the workload burden on the limited available staff.