



Ministry of Health and Family Welfare
Government of India



A FIELD MONITORING REPORT OF THE KEY COMPONENTS
OF
NATIONAL HEALTH MISSION (NHM)
DIBRUGARH DISTRICT, ASSAM

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DIBRUGARH DISTRICT, ASSAM: INTRODUCTION

The Ministry of Health and Family Welfare (MoHFW), Government of India, has assigned the Population Research Centre (PRC) the responsibility of field monitoring of essential components of the National Health Mission (NHM) for the year 2024-25. This report from Population Research Centre, Institute of Economic Growth, Delhi, presents key findings from the field monitoring conducted in Dibrugarh district, Assam.

This report is based on visits to various public healthcare facilities by the PRC Delhi team, comprising Ms. Bindiya Kumari and Ms. Gurkawal Kaur. This report has been thoroughly reviewed by Prof. Suresh Sharma, Head of PRC, IEG Delhi. The key findings are based on, meeting with Chief District Medical Officer (CDMO) and District programme Manager, discussion with facility staff- Medical Officers-in-Charge (MOICs), Medical Officers (MOs), Community Health Officers (CHOs), Auxiliary Nurse Midwives (ANMs), and other supporting staff etc. Information was collected from various public healthcare facilities in the district, including CHC Tengakhat and CHC Jokai Model; PHC Barbaruah, PHC Kacharipathar, PHC Sissia Bokuloni, and Urban Primary Health Centre (UPHC) Dibrugarh; AAM SHC Bokpara, AAM SHC Gajalabasti, and AAM SHC Nawholia; and UAAM-SHC Chringchapor. These interactions aimed to evaluate the strengths and weaknesses of the facilities in terms of service delivery. Community Interactions were also done to understand the service provision at grassroot level.

KEY OBSERVATION OF THE DISTRICT

Human Resources: Chronic shortages of medical specialists are notably concerning across CHCs, with all such positions vacant in district. As the district does not have a District Hospital, CHCs could play a crucial role in easing the workload of medical colleges, but their capacity remains limited to handling essential service including normal deliveries. Shortage of MO in urban AAM-SHCs further impact service delivery in district.

Healthcare Infrastructure: Facilities in government building are functioning well with quality services. In contrast, facilities in rented buildings, like Chringchapor UAAM-SHC, face challenges in service utilization and patient mobilization. PHC Sissia Bokuloni, in donated land, struggles with space constraints, highlighting the need for infrastructure strengthening.

AAM Services: Almost all Sub Centers and PHCs have been converted into Ayushman Arogya Mandirs (AAM). However, the extended services under AAM were largely limited to basic care in most SHCs and PHCs due to training gap of healthcare staff. Addressing training gap is essential for strengthening service provision and ensuring the

effective delivery of expanded services under AAM.

NCD Services: NCD screening is operational across all healthcare tiers. At the primary level healthcare facilities screening for hypertension, diabetes, oral, and breast cancer is being actively conducted, with hypertension and diabetes being the most commonly detected condition. However, record keeping for NCD can be improved.

Drugs & Diagnostics: The supply of medicines across all visited facilities in the district was reported to be generally satisfactory relative to demand. While some medicines were temporarily out of stock at primary health facilities.

Delivery Care Services: Normal delivery services are well available at CHC and PHC levels in the district. However, due to a lack of specialists at the CHC level, C-sections are performed only at the medical college.

Fund Utilization: Delayed fund disbursement and late receipt of approved ROPs remain major obstacles to achieving physical targets, leading to inefficient fund utilization across all health tier in district. Funds are typically received across all

healthcare tiers in the first or second week of September.

Family Planning Services: Family planning services are well-implemented, with strong acceptance of the OCP pills, and PPIUCD.

Quality Programs: Quality programs such as Kayakalp and NQAS are implemented at the upper

health care tier in the district. However, it has been markedly lacking in quality care program implementation, particularly at AAM-SHC levels.

Teleconsultation: Teleconsultation services were functioning efficiently at some facilities; however, its utilization remains limited in others due to poor internet connectivity in others (AAM- SHCs)

FACILITY WISE OBSERVATIONS: DIBRUGARH DISTRICT

CHC Tengakhat, Kayakalp-certified, is a well-maintained 30-bedded healthcare facility. It provides 24×7 emergency and normal delivery care services. While the facility is well-maintained and equipped with infrastructure and equipment's, gaps in specialist availability remain a concern. Addressing manpower shortages is crucial for strengthening specialized services. Family planning services were well-implemented at this facility, with strong acceptance of female sterilization.

CHC Jokai Model is a non-FRU facility serving a scattered population, thus experiencing an extremely low OPD load per day. Further, patients often prefer seeking care directly at the nearby medical college instead of this facility. Challenges include facility location, delays in untied fund allocation leading to inefficient utilization, and security issues, all of which impact the facility's efficiency and service delivery.

Barbaruah PHC, Kayakalp certified, is well-equipped with essential services, trained personnel, and a consistent supply of medicines, ensuring efficient healthcare delivery. It has also expanded its services in eye care, ENT, oral health, and emergency and trauma care, with staff already trained for these specialties. However, challenges persist, including – shortages of doctors, lab technicians, nurses and delayed untied fund disbursement, which impact service delivery and fund utilization.

Kacharipathar Mini PHC, a Kayakalp certified facility, with properly adhere cleanliness, hygiene, and Bio medical waste management protocol. Expanded service training under AAM for eye, ENT, oral, and trauma care is yet to be conducted.

Delayed untied fund disbursement remains a concern. Medication Supply and Record keeping maintenance of service delivery indicator can be improved at this facility.

PHC Sissia Bokuloni running in a 50-year-old government building on donated tea garden land, facing space constraints, lack of privacy, and no proper waiting area. The name board is missing due to a thunderstorm. MO and Staff nurse/ ANM were not trained under the expanded AAM packages. For 24/7 delivery care, more doctors and pharmacy support are required. Medicine supply is adequate except for calcium, multivitamins, and pain relief. Teleconsultation services are functioning efficiently.

UPHC Dibrugarh handles a high OPD load with 24/7 delivery services. The facility is performing well in antenatal care, immunization, and NCD with active teleconsultation. The facility has a Panchkarma Therapy Room, mental health services, and AYUSH care, with a dedicated mental health counselor for patient support. This is Kayakalp-awarded facility, major challenges include a shortage of ANM, sanitation staff, and a data entry operator. Facility is unable to provide expanded services due to a lack of staff training.

AAM SHC Bokpara, is Kayakalp-certified facility and NQAS implementation is also initiated here. The CHO, ANM, and ASHAs demonstrated a strong understanding of the programs, ensuring effective implementation. Teleconsultation services are functioning efficiently. The facility is unable to provide expanded AAM services due to a lack of staff training. Challenges includes- limited physical

space, space crunch, delayed and insufficient funds, and a shortage of some rapid test kits.

Gajalabasti AAM-SHC rendering the comprehensive maternal, child and NCD services, however, it is unable to provide expanded services under AAM due to a lack of staff training. The facility reported delays in untied fund disbursement, affecting fund utilization efficiency. Teleconsultation services are not functioning efficiently due to internet connectivity. The facility is highly lacking in the quality care program implementation, which can be strengthened.

Nawholia AAM-SHC, unable to provide expanded 12 package of AAM services due to a lack of the staff training. Teleconsultation services are functioning effectively, primarily managing severe hypertension and HRP cases, however internet connectivity issue was reported. The facility

RECOMMENDATIONS

- ❖ **Strengthen Specialist Availability:** The district should prioritize recruitment of medical specialists at CHCs, such as at CHC Tengakhat, which is well equipped with necessary infrastructure and equipment's for conducting C-sections but lacks specialist availability. Ensuring adequate specialist availability will enhance specialized service delivery and reduce dependency on medical colleges.
- ❖ **Training on CPHC Packages:** All Medical Officers at PHCs, along with ANMs and CHOs, should receive training for expanded 12 services packages under AAM for comprehensive implementation.
- ❖ **Ensure Timely Fund Disbursement:** Streamline fund flow mechanisms to prevent delays and ensure timely utilization across all facilities. Timely release of the funds must be planned for the district.
- ❖ **Enhance Medication Supply:** Ensure consistent medicine availability, particularly at primary healthcare facilities in district.
- ❖ **Strengthen Teleconsultation Services:** While teleconsultation is functional in many facilities, connectivity issues were reported at AAM-

reported delays in untied fund disbursement. This facility underwent a Kayakalp external assessment in December 2024, but score was not informed to facility. Medicine shortages include anti-pyretics, gastrointestinal medications, antihypertensives, multivitamins, & dermatological creams.

Chringchaponi UAAM-SHC, functioning in rented building, faces challenges in community mobilization and service utilization, with an OPD load of just 3-4 patients per day due to the absence of a permanent Medical Officer (MO). Although an MO was posted earlier, served for short periods, later transferred to a higher-tier facility, reflecting a broader reluctance of doctors to serve at the SC level, particularly in rented setups. Establishing a government-owned facility could enhance stability and encourage doctors' long-term postings, ensuring better service delivery.

SHCs level facilities. Strengthening internet access and technical support is needed for efficient digital healthcare delivery.

- ❖ **Upgrade Infrastructure:** Since all UAAM-SHCs operate in rented buildings, which impacts patients' mobilization and service delivery. Replacing rented UAAM-SHCs with government-owned facilities would improve service stability, enhance community mobilization, and encourage long-term doctor postings for better healthcare access.
- ❖ **Ensure MO Postings in UAAM-SHCs:** All urban AAM-SHCs were functioning without an MO, leading to limited OPD and poor service utilization. District should take measures to ensure MO postings by offering incentives, mandatory service tenure, improving work conditions, and addressing reluctance to serve at SC-level facilities.
- ❖ **NQAS and Kayakalp Implementation:** The district has been markedly lacking in quality care program implementation, particularly at AAM-SHC levels. There is a wide scope of improvement with the execution of said program.

Field Visit Photographs



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Monitoring Checklist of Healthcare Facilities

COMMUNITY HEALTH CENTRE, TENGAKHAT

General Information	
Name of facility visited	Tengakhat
Facility Type	<input checked="" type="checkbox"/> CHC <input type="checkbox"/> U-CHC
FRU	No
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Next Referral Point	Facility: MC Assam Distance: 40km

A. INFRASTRUCTURE			Means of Verification
Indicator	INFRASTRUCTURE		
1. OPD Timing	8:30 am- 2:00 pm		Reported/ Citizen Charter Board
2. Whether facility is functioning in PPP mode	No		Observation
3. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: Good and well maintained but seepage issue		Observation
	<input checked="" type="checkbox"/> 24*7 running water facility <input checked="" type="checkbox"/> Facility is geriatric and disability friendly (ramps 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 <input checked="" type="checkbox"/> ASHA rest room is available <input checked="" type="checkbox"/> Drug storeroom with rack is available <input checked="" type="checkbox"/> Power backup: Complete Hospital		Observation
4. Number of functional in-patient beds	30		As reported/Citizen Charter Board
5. List of Services available	Yes		As reported/Citizen Charter Board
• Specialized services available in addition to General OPD, ANC, Delivery, PNC, Immunization, FP, Laboratory services	Sl.	Service	Y/N
	1	Medicine	No
	2	O&G	No
	3	Pediatric	No
	4	General Surgery	No
	5	Anesthesiology	No
	6	Ophthalmology	Yes
			As reported/Hospital Citizen Charter Board

A. INFRASTRUCTURE				Means of Verification
Indicator	INFRASTRUCTURE			
	7	Dental	No	
	8	Imaging Services (X – ray)	No	
	9	Imaging Services (USG)	Yes	
	10	Newborn Stabilization Unit	No	
<ul style="list-style-type: none"> If any of the specialists are available 24*7 	Yes available <input checked="" type="checkbox"/> Yes, available only on-call <input type="checkbox"/> Not available			As reported
<ul style="list-style-type: none"> If Yes, Mention the specialists available 24*7 	<input checked="" type="checkbox"/> Pediatrician <input checked="" type="checkbox"/> Ob-Gyn <input checked="" type="checkbox"/> Anesthetist			As reported
<ul style="list-style-type: none"> Emergency 	General emergency: Yes Facilities available for: 1. Triage: Yes 2. Resuscitation: Yes 3. Stabilization: Yes			Observation: Verify if triage area is marked
6. Tele-medicine/Consultation services available	Yes If yes, average number of teleconsultations per day for the last month.....45 If the facility is also functioning as ‘Hub’ to any of the AAM (SHC/PHC/UPHC/UAAM)Yes			Tele-medicine records register/ e-Sanjeevani Portal
7. Operation Theatre available	Yes If yes, <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Major OT <input checked="" type="checkbox"/> Minor OT 			Observation Ensure signage and protocol displays
8. Availability of functional Blood Storage Unit	Yes <ul style="list-style-type: none"> If yes, number of units of blood currently available: _____ No No. of blood transfusions done in last month: _____ No 			Blood Storage Unit records, Register
9. Whether blood is issued free, or user-fee is being charged	<input checked="" type="checkbox"/> <input type="checkbox"/> Free for BPL <input checked="" type="checkbox"/> <input type="checkbox"/> Free for elderly <input checked="" type="checkbox"/> <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all			Blood Storage Unit records, Register
10. Biomedical waste management practices	<input checked="" type="checkbox"/> Sharp pit: <input checked="" type="checkbox"/> Deep Burial pit:			Observation

A. INFRASTRUCTURE		Means of Verification
Indicator	INFRASTRUCTURE	
	Incinerator: Using Common Bio Medical Treatment plant: <input type="checkbox"/> <input checked="" type="checkbox"/> Managed through outsourced agency <input type="checkbox"/> Other System, if any: (Specify)	
11. IT Services infrastructure	<input checked="" type="checkbox"/> Desktop/ Laptop available <input checked="" type="checkbox"/> Internet connectivity Quality/strength of internet connection: _____ Good	As reported

B. Human Resources				As reported		
12. Details of HR available in the facility (Sanctioned and In-place)	HR		Regular		Contractual	
		Sanctioned	Available	Sanctioned	Available	
	MO (MBBS)	4	4	1	1	
	Aayush MO					
	Specialists					
	Medicine	-	-	-	-	
	Ob-Gyn	-	-	-	-	
	Pediatrician	-	-	-	-	
	Anesthetist	-	-	-	-	
	Dentist	-	-	1	-	
	SNs/ GNMs	6	9	-	2	
	LTs	2	1		1	
	Pharmacist	2	3			
	Dental Assistant/ Hygienist					
	Hospital/ Facility Manager					
	EmOC trained doctor					
	LSAS trained doctor					
	Ward boy	3	3			
	Ward girl	3	3		1	
	Grade IV	0	1			
	Contratual staff under HMC				15	

C. QUALITY PROGRAMMES	Means of
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		verification
13. Kayakalp	Initiated: Yes Facility score:70.71 Award received: Winner <input type="checkbox"/> <input checked="" type="checkbox"/> Commendation	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	Assessment done: NA (Traing gap) Internal/State Facility score: Certification Status:	NQAS assessment report Verify certificate if awarded
15. LaQshya	Labour Room: No LaQshya Certified If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No Operation Theatre: No LaQshya Certified If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No	LaQshya Assessment Report – check score Verify certificate if awarded
D. DRUGS AND DIAGNOSTICS		
16. Availability of list of essential medicines (EML)/ drugs (EDL)	Yes	Verify EDL
	If yes, total number of drugs in EDL ___240___ EDL displayed in OPD Area: Yes No. of drugs available on the day of visit (out of the EDL) _____	Displaye d
17. Implementation of DVDMS or similar supply chain management system (Training gap reported)	Yes	Observat ion, Check software

18. Shortage of 5 priority drugs from EDL in last 30 days, if any		As	
	1	No shortage	reported,
	2		check
	3		DVDMS
	4		, E-
	5		aushadhi, etc.
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 a shortage_____	As reported Stock/Inventory register	
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input checked="" type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported;	
<ul style="list-style-type: none"> In-house tests (24*7 emergency test available) 	Timing: 8:00 am- 1:00pm Total No. of tests available against Essential Diagnostic tests list for CHC _____39	Obtain the complete list of diagnostic tests performed in-house	
<ul style="list-style-type: none"> Outsourced/ PPP 	Yes, 8:00- 1:00 pm 49 types		
21. X-ray services is available	<input checked="" type="checkbox"/> Yes If Yes, type & no. of functional X-ray machine is available in the hospital: 1 Is the X-ray machine AERB certified: No	Observation	
22. Whether diagnostic services (lab, X-ray, USG etc.) are free for all	<input checked="" type="checkbox"/> Free for BPL <input checked="" type="checkbox"/> Free for elderly <input checked="" type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	As reported	

23. 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
24. If there is any shortage of major instruments/ equipment (Refer to Annexure 10 in the link for list of equipment – (https://nhsrindia.org/sites/default/files/CHC%20IPHS%202022%20Guidelines%20pdf.pdf))	NA	As reported
25. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days	One month	As reported
E. KEY NATIONAL HEALTH PROGRAMMES		
26. Availability of delivery services	<input checked="" type="checkbox"/> Yes	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 Number of normal deliveries performed in last month: _____42_____ No. of C-sections performed in last month: _____0_____ Last c-section in July 2024.	Verify C-section records from Maternity OT registers
<ul style="list-style-type: none"> Comment on condition of: 	Labour room: Good OT: Good Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): Yes	Observation
27. Status of JSY payments	Payment is up to date: Yes Average delay: (Average for how many days/patients)—2-3 weeks Payment done till: February Last 3 Months Reasons for delay:	Verify from JSY status report

	Documentation Gap	
28. Availability of JSSK entitlements	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> If yes, whether all entitlements being provided <input checked="" type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input checked="" type="checkbox"/> Free diet <input checked="" type="checkbox"/> Free drugs and consumables <input checked="" type="checkbox"/> Free diagnostics <input checked="" type="checkbox"/> Free blood services <input checked="" type="checkbox"/> Free referral transport (home to facility) <input checked="" type="checkbox"/> Free referral transport (drop back from facility to home) <input checked="" type="checkbox"/> No user charges	As reported/ As Displayed in Maternity Ward
29. PMSMA services provided on 9 th of every month	Yes If yes, how many high risks pregnancies are identified on 9 th for previous month ... 18 If No, reasons thereof:	PMSMA Register/ High Risk Pregnancy Register, Staff review
30. Line listing of high-risk pregnancies	Yes	Verify Register availability
31. 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
32. Whether facility have registers for entering births and deaths	Yes	Birth Register, Death Records
33. Number of Maternal Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records

34. Number of Child Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records
35. If Comprehensive Abortion Care (CAC) services available	Yes	CAC register
36. Availability of vaccines and hub cutter	Yes Nurses/ ANM aware about open vial policy: Yes	Observation Staff review
37. Number of newborns immunized with birth dose at the facility in last 3 months		Immunisation Register
38. Newborns breastfed within one hour of birth during last month		Verify BF records
39. Number of sterilizations performed in last one month	0	FP Sterilizations register
40. Availability of trained provider for IUCD/ PPIUCD	Yes	As reported, Verify training received
41. Who counsels on FP services?	<input checked="" type="checkbox"/> Counsellor <input checked="" type="checkbox"/> Staff Nurse <input checked="" type="checkbox"/> Medical Officer Others (Specify)_____	As reported
42. Please comment on utilization of other FP services including Condoms, OCPs, Antra	Good acceptance PPIUCD Pref. more Antra Prof. is also	Observation/ FP records and registers
43. FPLMIS has been implemented	Yes	Check software
44. Availability of functional Adolescent Friendly Health Clinic	Yes If yes, who provides counselling to adolescents: ___Counsellor___	Observation, check AFHC register

	Separate male and female counselors available: No			
45. 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? _____1_____ days (Mention number of days)- Tuesday	Check NCD register		
46. Are service providers trained in cancer services?	Yes			
47. Number of individuals screened for the following in last 6 months:	NCD	Screened	Confirmed	NCD Register
	a. Hypertension			
	b. Diabetes			
	c. Oral Cancer			
	d. Breast Cancer			
	e. Cervical Cancer			
48. Whether reporting weekly data in P, S and L form under IDSP	Yes		Verify from IDSP reporting records	
49. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): Yes		As reported, Observation	
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____4%		DBT/Ni kshay Report	
	If anti-TB drugs available at the facility: Yes If yes, are there any patients currently taking anti-TB drugs from the facility: Yes		DBT/Ni kshay Report	
	Percent of patients tested through CBNAAT/ TruNat for Drug		DBT/Ni kshay Report	

	resistance in the last 6 months _____	
	Is there a sample transport mechanism in place for: No Investigations within public sector for TB testing? Yes Investigations within public sector for other tests? Yes Outsourced testing? No	As reported
	Are all TB patients tested for HIV? Yes Are all TB patients tested for Diabetes Mellitus: Yes	DBT/Nikshay Report
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months: 98%	DBT/Nikshay Report
50. Status on Leprosy eradication programme	Nos. of new case detected by Field Worker in last 12 months: 35 Out of those, how many are having Gr. II deformity: -	Facility Register/Record for leprosy
F. RECORDS, FINANCE, OTHERS		
51. Maintenance of records on	<input checked="" type="checkbox"/> TB Treatment Card cases (both for drug sensitive and drug resistant cases) <input checked="" type="checkbox"/> TB Notification Registers <input checked="" type="checkbox"/> Malaria cases <input checked="" type="checkbox"/> Palliative cases <input checked="" type="checkbox"/> Cases related to Dengue and Chikungunya <input checked="" type="checkbox"/> Leprosy cases	Respective records
	Fund Received last year: Yes In September, month	

<p>52. How much fund was received and utilized by the facility under NHM?</p>	<p>Fund utilized last year: Yes</p> <table border="1" data-bbox="847 293 1243 421"> <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>5,00,000</td> <td>5,00,000</td> <td>100%</td> </tr> </tbody> </table> <p>List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:</p> <p>Contractual staff payment</p> <p>Desel for Generator</p> <p>Furniture repairing, Patient sitting chair</p> <p>Ambulance maintenance</p>	Fund in prev. FY			Received	Utilized	% Utilization	5,00,000	5,00,000	100%	<p>RKS Register</p>
Fund in prev. FY											
Received	Utilized	% Utilization									
5,00,000	5,00,000	100%									
<p>53. Status of data entry in (match with physical records)</p>	<p><input checked="" type="checkbox"/> HMIS: Updated</p> <p><input checked="" type="checkbox"/> MCTS: instead of this using ANMOL Portal</p> <p><input checked="" type="checkbox"/> IHIP: Updated</p> <p><input checked="" type="checkbox"/> HWC Portal: Updated</p> <p><input checked="" type="checkbox"/> Nikshay Portal: Updated</p>	<p>Check portals at facility wrt last entries</p>									
<p>54. Frequency of RKS meeting (check and obtain minutes of last meeting held)</p>	<p>Monthly one</p>	<p>RKS Register</p>									
<p>55. Availability of ambulance services in the area</p>	<p><input checked="" type="checkbox"/> CHC own ambulance available</p> <p><input type="checkbox"/> CHC has contracted out ambulance services</p> <p><input checked="" type="checkbox"/> Ambulances services with Centralized call centre</p> <p><input type="checkbox"/> Government ambulance services are not available</p>	<p>As reported</p>									
<p>• How many cases from sub centre/ PHC were referred to this CHC last month?</p>	<p>Number: 1 (No proper record)</p> <p>Types of cases referred in:</p>	<p>Referral-in register</p>									

<ul style="list-style-type: none"> How many cases from the CHC were referred to the MC last month? 	Number: 24 Types of cases referred out: Prolonged labour	Referral Out register
-------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------	-----------------------------

KEY OBSERVATION WITH CHALLENGES:

CHC Tengakhat is a functional 30 bedded healthcare facility accessible from the nearest road ahead. The facility has a well-maintained infrastructure with essential amenities such as running water, clean toilets, drinking water, adequate waiting area seating, and labour room was LaQshya certified. It has 30 bedded facility (FRU), with an average OPD load of 300-350 patients per day. The next referral point of this facility is Dibrugarh Medical College, which is 40 km away from here. Referral cases primarily involve gynecology. General OPD, ANC, deliveries, PNC, immunization, family planning, Mental health and Adolescent Friendly health clinic, Physiotherapy, and Dental surgeon services are available. Specialist services are reported to be unavailable, except for a psychiatrist. The facility has the proper infrastructure and equipment's, only having the gap of manpower, due to which unable to provide the specialized services. Normal delivery care and emergency care services were reported to be 24*7. Both in-house and outsourced diagnostic tests are available, and 24x7 emergency services are operational. Family planning services are well-implemented, with strong acceptance of female sterilization. It conducts an average of 350 female sterilization procedures annually. The facility is Kayakalp-certified with a score of 71% and a commendation award. Some IEC display boards, including laboratory services, EDL list requires updating. This facility was using DVDMS portal for Supply chain management system for indenting medication. Strengthening specialized services and addressing these gaps is essential for enhancing the quality of care, ensuring comprehensive service delivery.

COMMUNITY HEALTH CENTRE (CHC), JOKAI MODEL

General Information	
Name of facility visited	JOKAI MODEL
Facility Type	<input checked="" type="checkbox"/> CHC <input type="checkbox"/> U-CHC
FRU	<input checked="" type="checkbox"/> No (24*7)
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Next Referral Point	Facility: MC Dibrugarh Distance: 18 KM

A. INFRASTRUCTURE		Means of Verification		
Indicator	INFRASTRUCTURE			
1. OPD Timing	OPD: 8:30 am- 1:30 pm 24*7: Emergency services, Delivery care	Reported/ Citizen Charter Board		
2. Whether facility is functioning in PPP mode	No	Observation		
3. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: Good and well maintained	Observation		
	<input checked="" type="checkbox"/> 24*7 running water facility <input checked="" type="checkbox"/> Facility is geriatric and disability friendly (ramps 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 <input checked="" type="checkbox"/> ASHA rest room is available <input checked="" type="checkbox"/> Drug storeroom with rack is available <input checked="" type="checkbox"/> Power backup: Complete Hospital	Observation		
4. Number of functional in-patient beds	30	As reported/Citizen Charter Board		
5. List of Services available	Yes 40 per day OPD Load	As reported/Citizen Charter Board		
<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 Citizen Charter Board
	1	Medicine	No	
	2	O&G	No	
	3	Pediatric	Yes	
	4	General Surgery	No	
	5	Anesthesiology	No	
	6	Ophthalmology	No	
	7	Dental	No	
	8	Imaging Services (X – ray)	Yes	

A. INFRASTRUCTURE				Means of Verification
Indicator	INFRASTRUCTURE			
	9	Imaging Services (USG)	No	
	10	Newborn Stabilization Unit	Yes	
<ul style="list-style-type: none"> If any of the specialists are available 24*7 	<input type="checkbox"/> Yes, available only on-call No <input checked="" type="checkbox"/> Not available			As reported
<ul style="list-style-type: none"> If Yes, Mention the specialists available 24*7 	Emergency and delivery			As reported
<ul style="list-style-type: none"> Emergency 	General emergency: Yes Facilities available for: 1. Triage: Yes 2. Resuscitation: Yes 3. Stabilization: Yes			Observation: Verify if triage area is marked
6. Tele-medicine/Consultation services available	Yes (45-50 per month, and mostly general cases) If yes, average number of teleconsultations per day for the last month			Tele-medicine records register/ e-Sanjeevani Portal
7. Operation Theatre available	No If yes, <input checked="" type="checkbox"/> Major OT <input checked="" type="checkbox"/> Minor OT			Observation Ensure signage and protocol displays
8. Availability of functional Blood Storage Unit	No <ul style="list-style-type: none"> If yes, number of units of blood currently available: _____NA No. of blood transfusions done in last month: NA 			Blood Storage Unit records, Register
9. Whether blood is issued free, or user-fee is being charged	<input checked="" type="checkbox"/> <input type="checkbox"/> Free for BPL <input checked="" type="checkbox"/> <input type="checkbox"/> Free for elderly <input checked="" type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> <input type="checkbox"/> Free for all			Blood Storage Unit records, Register
10. Biomedical waste management practices	<input checked="" type="checkbox"/> Sharp pit: <input checked="" type="checkbox"/> Deep Burial pit: Incinerator: Using Common Bio Medical Treatment plant Managed through outsourced agency			Observation
11. IT Services infrastructure	<input checked="" type="checkbox"/> Desktop/ Laptop available <input checked="" type="checkbox"/> Internet connectivity			As reported

A. INFRASTRUCTURE		Means of Verification
Indicator	INFRASTRUCTURE	
	Quality/strength of internet connection: _____ Good	

A. Human Resources				As reported		
12. Details of HR available in the facility (Sanctioned and In-place)	HR	Regular		Contractual		
		Sanctioned	Available	Sanctioned	Available	
	MO (MBBS)	8	6	-	-	
	- Specialists	Medicine	-	-	--	
		Ob-Gyn				
		Pediatrician	2	2	-	-
		Anesthetist	-	-	-	-
	Dentist					
	SNs/ GNMs	6	5	-	-	
	LTs	1	1	1	1	
	Pharmacist	1	1	1	1	
	Dental Assistant/ Hygienist	-	-	-	-	
	Hospital/ Facility Manager	-	-	-	-	
	EmOC trained doctor	-	-	-	-	
	LSAS trained doctor	-	-	-	-	
	Others					
	Radiographer	1	1	-	-	
	Ward boy	2	2	-	-	
	Ward Girl	3	3	-	-	
	Housekeeping	-	-	-	5	

B. QUALITY PROGRAMMES		Means of verification
13. Kayakalp	Initiated: Yes Facility score: 70 Award received: <input checked="" type="checkbox"/> Commendation 2024	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	Assessment done: Yes, Internal assessment done Facility score: 29.6% Certification Status: No	NQAS assessment report Verify certificate if awarded

15. LaQshya	Labour Room: <input checked="" type="checkbox"/> LaQshya Certified If No, Assessment Done – Training gap Operation Theatre: <input checked="" type="checkbox"/> LaQshya Certified If No, Assessment Done – No, Training gap	LaQshya Assessment Report – check score Verify certificate if awarded															
C. DRUGS AND DIAGNOSTICS																	
Availability of list of essential medicines (EML)/ drugs (EDL)	Yes If yes, total number of drugs in EDL ____272____ EDL displayed in OPD Area: Yes No. of drugs available on the day of visit (out of the EDL) ____264____	Verify EDL Displayed															
Implementation of DVDMS or similar supply chain management system (Training part done)	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation, Check software															
Shortage of 5 priority drugs from EDL in last 30 days, if any	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">1</td> <td style="width: 70%;">Iron folic acid tablet</td> <td style="width: 25%;"></td> </tr> <tr> <td style="text-align: center;">2</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">4</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">5</td> <td></td> <td></td> </tr> </table>	1	Iron folic acid tablet		2			3			4			5			As reported, check DVDMS, E-aushadhi, etc.
1	Iron folic acid tablet																
2																	
3																	
4																	
5																	
16. 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 a shortage ____no	As reported Stock/Indent register															
17. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input checked="" type="checkbox"/> Outsourced/ PPP <input checked="" type="checkbox"/> Both/ Mixed	As reported;															
• In-house tests	Timing: 8:30 am- 1:30pm	Obtain the complete list of diagnostic tests performed in-house															

	Total No. of tests available against Essential Diagnostic tests list for CHC _____32 inhouse 47- outsourced	
• Outsourced/ PPP	Yes, 3 TYPES	
18. X-ray services is available	Yes If Yes, type & no. of functional X-ray machine is available in the hospital: 1 Is the X-ray machine AERB certified: Yes	Observation
19. Whether diagnostic services (lab, X-ray, USG etc.) are free for all	<input checked="" type="checkbox"/> Free for BPL <input checked="" type="checkbox"/> Free for elderly <input checked="" type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all (For X-ray is only free for ANC)	As reported
20. 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
21. If there is any shortage of major instruments/ equipment (Refer to Annexure 10 in the link for list of equipment – (https://nhsrcindia.org/sites/default/files/CHC%20IPHS%202022%20Guidelines%20pdf.pdf)	Radiant Warmer is not functional in nbsu	As reported
22. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days	5 days AOB Compan	As reported
D. KEY NATIONAL HEALTH PROGRAMMES		
23. Availability of delivery services	<input checked="" type="checkbox"/> Yes	As reported
• If the facility is designated as FRU, whether C-sections are performed	No	Verify C-section records from

	<p>Number of normal deliveries performed in last month: _____0</p> <p>(April 2024- Feb 2025- total 17 delivery)</p> <p>No. of C-sections performed in last month: _____NA</p>	Maternity OT registers
<ul style="list-style-type: none"> • Comment on condition of: 	<p>Labour room: Satisfactory</p> <p>OT: - Only minor</p> <p>Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): Yes</p>	Observation
24. Status of JSY payments	<p>Payment is up to date: Yes</p> <p>Average delay: (Average for how many days/patients)—15-20</p> <p>Payment done till- December 2024</p> <p>Last 3 Months</p> <p>Reasons for delay: (Document issue)</p> <p>Account no. not available and Funding issue</p>	Verify from JSY status report
25. Availability of JSSK entitlements	<p><input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/> Free delivery services (Normal delivery)</p> <p><input checked="" type="checkbox"/> Free diet- Packed food</p> <p><input checked="" type="checkbox"/> Free drugs and consumables</p> <p><input checked="" type="checkbox"/> Free diagnostics</p> <p style="padding-left: 40px;"><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
26. PMSMA services provided on 9 th of every month	<p>Yes</p> <p>If yes, how many high risks pregnancies are identified on 9th for previous month ...0</p> <p>If No, reasons thereof:</p>	PMSMA Register/High Risk Pregnancy Register, Staff review

27. Line listing of high-risk pregnancies	No	Verify Register availability
28. 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
29. Whether facility have registers for entering births and deaths	Yes	Birth Register, Death Records
30. Number of Maternal Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records
31. Number of Child Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records
32. If Comprehensive Abortion Care (CAC) services available	Yes	CAC register
33. Availability of vaccines and hub cutter	Yes Nurses/ ANM aware about open vial policy: Yes	Observation Staff review
34. Number of newborns immunized with birth dose at the facility in last 3 months	6	Immunisation Register
35. Newborns breastfed within one hour of birth during last month	0 (No delivery)	Verify BF records
36. Number of sterilizations performed in last one month	NA	FP Sterilizations register
37. Availability of trained provider for IUCD/ PPIUCD	Yes	As reported, Verify training received
38. Who counsels on FP services?	<input checked="" type="checkbox"/> Counsellor <input checked="" type="checkbox"/> Staff Nurse <input checked="" type="checkbox"/> Medical Officer Others (Specify)_____	As reported

39. Please comment on utilization of other FP services including Condoms, OCPs, Antra	All are accepted but mainly go for OCP		Observation/ FP records and registers	
40. FPLMIS has been implemented	Yes		Check software	
41. Availability of functional Adolescent Friendly Health Clinic	Yes If yes, who provides counselling to adolescents: _____MO_ Counselor is here (Wednesday and Saturday) Separate male and female counselors available: No		Observation, check AFHC register	
42. 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? _____6___ days (Mention number of days)		Check NCD register	
43. Are service providers trained in cancer services?	Yes			
44. Number of individuals screened for the following in last 6 months:	NCD			
		Screened	Confirmed	NCD Register
	f. Hypertension	9461	241	
	g. Diabetes	9461	391	
	h. Oral Cancer	-	-	
i. Breast Cancer	-	-		
j. Cervical Cancer	-	-		
45. Whether reporting weekly data in P, S and L form under IDSP	Yes (P and L Form)		Verify from IDSP reporting records	
46. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): No		As reported, Observation	
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____3%		DBT/Nikshay Report	
	If anti-TB drugs available at the facility: Yes If yes, are there any patients currently taking anti-TB drugs from the facility: No		DBT/Nikshay Report	

49. How much fund was received and utilized by the facility under NHM?	Fund utilized last year: Yes										
	<table border="1"> <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>5.65</td> <td>5.65</td> <td>100%</td> </tr> </tbody> </table>	Fund in prev. FY			Received	Utilized	% Utilization	5.65	5.65	100%	
	Fund in prev. FY										
Received	Utilized	% Utilization									
5.65	5.65	100%									
List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly: Minor construction and Infra development Contractual staff payment from Untied fund	RKS Register										
Reasons for underutilization of fund (if any)	Staff review										
50. Status of data entry in (match with physical records)	<input checked="" type="checkbox"/> HMIS: Updated <input checked="" type="checkbox"/> MCTS: instead of this using ANMOL Portal <input checked="" type="checkbox"/> IHIP: Updated <input checked="" type="checkbox"/> HWC Portal: Updated <input checked="" type="checkbox"/> Nikshay Portal: Updated	Check portals at facility wrt last entries									
51. Frequency of RKS meeting (check and obtain minutes of last meeting held)	2-3 months	RKS Register									
52. Availability of ambulance services in the area	<input type="checkbox"/> CHC has contracted out ambulance services <input checked="" type="checkbox"/> CHC own ambulance available Ambulances services with Centralized call centre <input type="checkbox"/> Government ambulance services are not available	As reported									
	Comment (if any): CHC have one ambulance										
• How many cases from sub centre/ PHC were referred to this CHC last month?	Number: No Record maintenance Types of cases referred in: Mostly high risk cases ANC, Delivery care services	Referral-in register									
• How many cases from the CHC were referred to the DH/MC last month?	Number: 13 Types of cases referred OUT: TRAFFIC Accident cases, Melina, UNCONCIOUSNESS VOMITING	Referral Out register									

KEY OBSERVATION WITH CHALLENGES:

CHC Jokai Model is a 30-bedded, non-FRU health facility covering a population of 22,483, with a low OPD load of just 40 patients per day due to its scattered population. Further, it has a low OPD load as patients often prefer seeking care directly at the nearby medical college instead of this facility. It serves as a delivery point, with the nearest referral center, Dibrugarh Medical College, located 18 km away. The facility primarily refers out cases include of traffic accidents, melena, unconsciousness, and severe vomiting. While the infrastructure is well-maintained and clean, the washrooms require attention. Biomedical waste management follows standard protocols, and IT infrastructure, including desktops and internet connectivity, is in place. A dedicated ultrasound room exists but lacks a specialist or technician, and only a minor OT has been initiated under LaQshya. Security remains a concern as there is no night guard, posing risks for the largely female staff. Challenges include its remote location, delays in untied fund allocation leading to inefficient utilization, and security issues, all of which impact the facility's efficiency and service delivery.

Ayushman Arogya Mandir- AAM-PHC, BARBARUAH

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Block/Taluka Name	BARBARUAH
4. Name of Facility	BARBARUAH PHC
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	
7. No. of days in a week facility is operational	7days (24*7)
8. OPD Timings	8:30 am to 1:30 pm
9. Month & Year of operationalization of AAM	January 2024
10. Details of co-location, if any (If any co-located SHC)	-
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	Medical college Assam
13. Distance of next referral facility (in Km)	15 km
14. If UPHC functions as a Polyclinic (Yes/No)	No
15. If Yes, please take note of available specialist services at the Polyclinic	No

A.1 Demographic Details	
1. Number of Villages/Wards	-
2. No. of Households	-
3. Total catchment Population	-
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 250-300 Per day / OPD load	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">S.no</th> <th style="width: 60%;">Building</th> <th style="width: 30%;">√ Mark</th> </tr> </thead> <tbody> <tr> <td>A</td> <td>Other Govt.</td> <td></td> </tr> <tr> <td>B</td> <td>Panchayat Bhawan</td> <td></td> </tr> <tr> <td>C</td> <td>Urban Local Body</td> <td></td> </tr> <tr> <td>D</td> <td>Rented etc</td> <td></td> </tr> </tbody> </table>	S.no	Building	√ Mark	A	Other Govt.		B	Panchayat Bhawan		C	Urban Local Body		D	Rented etc		
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- 10 bedded	<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 Yes Chairs Yes Almirah/Shelf Yes
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>	Yes

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

C. Human Resource Availability						
No	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1.	Medical Officer (MBBS)	1		4		
2.	AYUSH MO*	1		0		
3.	Dentist*	1		0		
4.	Staff Nurse	2				6

5.	Pharmacist	1		1		
6.	Laboratory Technician	1		3		
7.	ANM/MPW (F)#	1		2		
8.	MPW (M)	1		33		
9.	Lady Health Visitor	1		3		
10.	Dresser	1				1
11.	Accountant	1				1
12.	Data entry operator	1				1
13.	Sanitation staff	1		1		
14.	ASHA				195(All Block) At centre 2	
15.	ASHA Facilitator (If any, only for Rural areas)					15
16.	Others (Specify)					
17.	Whether all essential HRH available as per IPHS 2022	About Sanctioned post , Staff is not aware, There is no any system, it should be				

*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)	-	-	-	-

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)	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	<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 <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	Yes	Yes	Yes
Basic ear, nose, throat (ENT) care services	Yes	Yes	Yes
Oral health care services	Yes	Yes	Yes
Elderly and Palliative care	Yes	Yes	Yes
Screening & management of mental health ailments	Yes	Yes	Yes
Emergency Medical Services	Yes	Yes	Yes

F. Availability of Essential medicines		
1	Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL) <i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i>	142 <i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i>
2	Total number of medicines available at AAM-PHC/UPHC	132
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	No shortage <input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input 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 checked="" type="checkbox"/> <input type="checkbox"/> Less than 1 Week 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	Yes	
8	DVDMS or any other software is being used for stock management	Yes	

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In house lab 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	47
4	Number of tests Provided through In House Mode	47
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	Yes
9	User fee charged for diagnostics	Yes
10	Average downtime of equipment	One week

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

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	<input checked="" type="checkbox"/> Tablet <input checked="" type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Infrastructure: Functionality	Tablet <input checked="" type="checkbox"/> Smartphone <input checked="" type="checkbox"/> <input type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Teleconsultation services (PHC/CHCs/DH/MCH)	Yes

Teleconsultation platforms	e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	No
Common conditions for teleconsultation	-
Total teleconsultations (last 1 month)	No record

I. Wellness Activities			
Wellness sessions being held periodically	Yes		
Availability of a trained instructor for wellness session	Yes		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
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	Yes		
<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	Yes		
<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	No, September Received, 2 nd installment in March	
	Other Sources	<input type="checkbox"/> Yes , User fund	

Fund utilization NHM Fund/untied funds utilized during last year:	Funds received (Amount in Rs.) 1, 75, 000	Expenditure (Amount in Rs.) 1,73, 254	% Expenditure 99%
Is untied fund being spent on following activities?	Yes Regular payment of Bills: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify; <input checked="" type="checkbox"/> <input type="checkbox"/> Electricity <input checked="" type="checkbox"/> <input type="checkbox"/> Drinking Water <input type="checkbox"/> Internet Regular purchase: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <input type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input type="checkbox"/> Equipment Payment of support/cleaning Staff: Yes		
Status of JSY Payments	Payment done till (month/ year) : February Average Delay in Payment (days): No Reasons for delay, if any		
Availability of JSSK entitlements	Yes If yes, whether all entitlements being provided <input checked="" type="checkbox"/> Free delivery services (Normal delivery) <input checked="" type="checkbox"/> Free diet (One Basket – One time diet, provided by state govt.) <input checked="" type="checkbox"/> Free drugs and consumables <input checked="" type="checkbox"/> Free diagnostics Free blood services Free referral transport (home to facility) <input checked="" type="checkbox"/> Free referral transport (drop back from facility to home) <input checked="" type="checkbox"/> No user charges		

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	
2	No. of PW registered for ANC	390
3	No. of PW received 4 or more ANC check-ups	147
4	Total number of institutional deliveries	50
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	112
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	578
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	461
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	11

10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	Nil																													
11	TB patients undergoing treatment <table border="1"> <thead> <tr> <th>Indicators</th> <th>Current year</th> </tr> </thead> <tbody> <tr> <td>No. of presumptive TB patients identified</td> <td>173</td> </tr> <tr> <td>No. of TB patients diagnosed out of the presumptive patients referred</td> <td></td> </tr> <tr> <td>No. of TB patients taking treatment in the AAM</td> <td>173</td> </tr> </tbody> </table>		Indicators	Current year	No. of presumptive TB patients identified	173	No. of TB patients diagnosed out of the presumptive patients referred		No. of TB patients taking treatment in the AAM	173																					
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N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	No
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, achievement under Kayakalp (Winner, commendation) and score	Yes (82%)
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	20/09/2024
2	Facility aggregate score using ODK Took kit	71.61

KEY OBSERVATION WITH CHALLENGES:

Barbaruah PHC provides essential healthcare services, namely OPD, IPD, maternal care, and communicable disease. On an average, the facility has an OPD load of 200-250 patients per day, during winter and rainy season OPD load is decreased. This facility holds its strength in Well-equipped biochemistry lab with specialized equipment like HBA1C and screening of NCDs at OPD level as well in camps. The next referral point of this facility is Assam Medical college, which is just (15 km away). This facility was Kayakalp awarded with 82% score. Proper updated IEC displays were missing at this facility. This facility has been converted in AAM, training part of expanded services related to eye, ENT, Oral and emergency and trauma has been done, and services regarding the same have available. The facility having the enough medication SS as per demand. With regards to fund, it was reported that facility has received late untied fund in the last year. Overall, the facility is well-equipped with essential services, trained personnel, and medicine availability, though gaps exist in untied fund, which disbursement reported in the month of September. A major challenge is the shortage of human resources, including doctors, lab technicians, nurses, clerical staff, and support personnel, despite the high OPD load. Additionally, the absence of a security officer remains a concern.

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	✓		✓	
2	Laryngoscope		✓		
3	Radiant Warmer	✓	-	✓	
4	Pulse Oximeter-Finger Tip	✓		✓	
5	Pulse Oximeter-Table Top		✓		
6	Labor Bed	✓	-	✓	
7	Foetal Doppler	✓	-	✓	
8	Phototherapy Unit	✓	-		
9	Shoulder Wheel		-		
10	Shoulder Pulley		-		

S.No.	Equipment	Available	Not available	Functional	Non-Functional
11	Shoulder Abduction Ladder		-		
12	Suction Machine	✓	-		
13	Mobile Spotlight	✓			
14	Manual Vacuum Aspirator	✓	-		
15	Weighing Scale	✓		✓	
16	Baby Weighing Scale	✓		✓	
17	Infantometer		-		
18	Ophthalmoscope		✓		
19	Fully Loaded Dental Chair Electrically Operated		-		
20	Dental Chair-Basic		-		
21	Oxygen Hood Neonatal	✓	-	✓	
22	ILR With Voltage Stabilizer-Small	✓	-	✓	
23	Deep Freezer-Small	✓	-	✓	
24	ILR With Voltage Stabilizer-Large	✓	-	✓	
25	Deep Freezer-Small-Large	✓			
26	Vaccine Carrier with Ice Packs	✓	-	✓	
27	Cell Counter – 3 Part		-		
28	Semi-Automated Biochemistry Analyser		-		
29	Binocular Microscope		-		
30	HbA1C Analyser		-		
31	Turbidometer		-		
32	Glucometer	✓		✓	
33	Haemoglobinometer				
34	ESR Analyzer		-		
35	Electrolyte Analyzer		-		
36	Oxygen Cylinder- B Type				
37	BP Apparatus- Aneroid				
38	BP Apparatus-Digital				
39	Stethoscope	✓		✓	
40	Thermometer	✓		✓	
41	Examination Table	✓		✓	
42	Lower and Upper Extremity Cycle/ Basic Ergometer/ Static Cycle				
43	Exerciser Couch/Table				
44	Finger Exerciser Web				
45	Walking Aid for Training/ Reciprocal Walker				

AYUSHMAN AROGYA MANDIR- AAM-PHC, KACHARIPATHAR

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Block/Taluka Name	TENGAKHAT
4. Name of Facility	Kacharipathar Mini-PHC
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	3138674464
7. No. of days in a week facility is operational	7 DAYS
8. OPD Timings	8:30 am to 2:00 pm
9. Month & Year of operationalization of AAM	2024
10. Details of co-location, if any (If any co-located SHC)	Yes
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	Tengakhat CHC
13. Distance of next referral facility (in Km)	12 KM
14. If UPHC functions as a Polyclinic (Yes/No)	NA
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
5. Number of Villages/Wards	52
6. No. of Households	19089
7. Total catchment Population	84552
8. Population who are 30 years of age and above	31284

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
		A	Other Govt.
		B	Panchayat Bhawan
		C	Urban Local Body
		D	Rented etc
3.	Is the facility functional 24 x 7? (Only For Delivery)	<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 (8)	<input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No
6.	Availability of boundary Wall (Partially)	<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 Yes
9.	Waiting area with sitting arrangements for patients/ attendants	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Availability of furniture:	Table Yes Chairs Yes Almirah/Shelf Yes
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	Yes
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.)	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>	Yes

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

C. Human Resource Availability						
No	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	Medical Officer (MBBS)	1	2	1	1	0
2.	AYUSH MO*	1				
3.	Dentist*	1				

4.	Staff Nurse	2	2	1		3
5.	Pharmacist	1	1	1		
6.	Laboratory Technician	1	1	1		
7.	ANM/MPW (F)#	1	1	1		
8.	MPW (M)	1				
9.	Lady Health Visitor	1				
10.	Dresser	1				
11.	Accountant	1			1	1
12.	Data entry operator	1				
13.	Sanitation staff	1				
14.	ASHA					
15.	ASHA Facilitator (If any, only for Rural areas)					
16.	Others (Specify)					
17.	Whether all essential HRH available as per IPHS 2022	(About Sanctioned post, staff was not aware)				

*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
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	No	Yes	Yes
NCD	Yes	Yes	Yes	Yes
Others (Specify)	-		No	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)	Elderly & Palliative Care (Y/N)	Trained in Trauma & Emergency care (Y/N)
MO (MBBS)	No	No	No	No	No	No
Staff Nurse	No	No	No	No	No	No
ANM/ MPW-F	No	No	No	No	No	No
MPW- M	No	No	No	No	No	No
ASHA	No	No	No	No	No	No
Training part on Expanded services was not done of staff						

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	<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 <input checked="" type="checkbox"/> Screening and management of mental health ailments (only counselling part done)

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	No	Yes	No
Basic ear, nose, throat (ENT) care services	No	Yes	No
Oral health care services	No	No	No
Elderly and Palliative care	No	Yes	No
Screening & management of mental health ailments	No	Yes	No
Emergency Medical Services	No	Yes	No
Only basic medicine available			

F. Availability of Essential medicines	
1	Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL) <i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i>
	125 <i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i>
2	Total number of medicines available at AAM-PHC/UPHC
	119
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	<table border="1"> <tr> <td> Oral Contraceptives Analgesics / NSAIDs) Anti-pyretic Anti-allergics Antidotes for poisoning Gastrointestinal meds <input checked="" type="checkbox"/> Anti-filarial Antibiotics Anti-leprosy </td> <td> Anti-tuberculosis Anti-fungal Anti-malarial Anti-hypertensive Oral hypoglycaemics <input checked="" type="checkbox"/> Hypolipidemic ORS <input checked="" type="checkbox"/> Multi-vitamins Dermatological (cream) </td> </tr> </table>	Oral Contraceptives Analgesics / NSAIDs) Anti-pyretic Anti-allergics Antidotes for poisoning Gastrointestinal meds <input checked="" type="checkbox"/> Anti-filarial Antibiotics Anti-leprosy	Anti-tuberculosis Anti-fungal Anti-malarial Anti-hypertensive Oral hypoglycaemics <input checked="" type="checkbox"/> Hypolipidemic ORS <input checked="" type="checkbox"/> Multi-vitamins Dermatological (cream)
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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 1-2 Weeks More than 2 Weeks		
7	Is buffer stock for drugs maintained?	Yes		
8	DVDMS or any other software is being used for stock management	Yes		

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input checked="" type="checkbox"/> In house lab <input checked="" 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	63 (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	59
4	Number of tests Provided through In House Mode	12
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No

8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment	Around 20 days
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	One week

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

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Tablet Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (No Government funded or other, specify- personel)
Infrastructure: Functionality	Tablet Smartphone <input checked="" type="checkbox"/> Laptop

	<input checked="" type="checkbox"/> Internet connectivity (Government funded or other, specify)
Teleconsultation services (PHC/CHCs/DH/MCH)	Yes (Training part not done of MO)
Teleconsultation platforms	e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input checked="" type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	No
Common conditions for teleconsultation	-
Total teleconsultation (last 01 month)	0

I. Wellness Activities			
Wellness sessions being held periodically	No		
Availability of a trained instructor for wellness session	No		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Nikshay	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Specify others, if any: RCH, ANMOL			
L. Finance			
Renumeration & 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)	NA	NA
Facility funds	Fund Source		Timely disbursement

	Untied	Yes
	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.) 1,61,093	Expenditure (Amount in Rs.) 1,61,093
	% Expenditure 100%	
	September month fund received- Ist disbursement	
Is untied fund being spent on following activities?	<p>Equipment repairing-</p> <p>Regular payment of Bills: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, specify;</p> <p>Mostly on Infrastructer, and pest control</p> <p><input type="checkbox"/> Electricity- Yes, repairing</p> <p><input type="checkbox"/> Drinking Water</p> <p><input checked="" type="checkbox"/> Internet</p> <p>Regular purchase: Yes</p> <p><input type="checkbox"/> Medicines- No</p> <p><input type="checkbox"/> Reagents/Consumables- yes</p> <p><input type="checkbox"/> Equipment- Yes</p> <p>Payment of support/cleaning Staff: No</p>	
Status of JSY Payments	<p>Payment done till (month/ year) : December 2025</p> <p>Average Delay in Payment (days): Two month approx.. and record not updated</p> <p>Reasons for delay, if any</p> <p>Documentation gap, No bank account of beneficiaries</p>	
Availability of JSSK entitlements (12 Delivery last month)	<p>Yes</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"/> No Free diet- (No Samahar)</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>	

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1786
2	No. of PW registered for ANC	-
3	No. of PW received 4 or more ANC check-ups	-
4	Total number of institutional deliveries	29
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	6

6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	- (SC collocated)	
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	- (SC collocated)	
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	14	
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	3+2 (Gynea, Surgery Dept., Burn case, HRP cases)	
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	470	
	No. of TB patients diagnosed out of the presumptive patients referred	2	
	No. of TB patients taking treatment in the AAM	0	
12	Community Based Screening for NCDs		
	% of target population administered CBAC	37%	
	% of target population with score below 4	54%	
	% of target population with score 4 and above	46%	
13	Community Based Screening for NCDs		
	NCDs (No. of individuals in Last 6 Months)	Screened	Treated
	Hypertension		
	Diabetes		
	NCDs (No. of individuals in Last 6 Months)	Screened	Referred
	Oral Cancer*		
	Breast Cancer*		
	Cervical Cancer*	-	-

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	No, Not initiated
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, achievement under Kayakalp (Winner, commendation) and score	72 (External assessment score)
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	No Assessment
2	Facility aggregate score using ODK Took kit	

KEY OBSERVATION WITH CHALLENGES:

Kacharipathar Mini- PHC is running in government building, with a 24/7 emergency and delivery service. On an average OPD load of 30-35 patients daily noted at this facility. The nearest referral point is Tenghakhath Model Hospital. This MPHIC is Kayakalp awarded facility with well-maintained infrastructure, however the major drawback was noted regarding the record maintenance. The record maintenance of the NCD were not found up-to the mark, during the visit. This facility provides reproductive, maternal, child health, communicable and non-communicable disease services, except cervical cancer screening. This facility has been converted in AAM, training part of expanded services related to eye, ENT, Oral and emergency and trauma has not been done, which needs to be addressed. Yoga activities are conducted monthly, and a patient feedback system is in place. Some medication shortage, and delayed in Untied Fund disbursement was reported a concern at this facility.

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	Yes		Yes	
2	Laryngoscope				
3	Radiant Warmer	Yes		Yes	One non-functional
4	Pulse Oximeter- Finger Tip	Yes		Yes	

S.No.	Equipment	Available	Not available	Functional	Non-Functional
5	Pulse Oximeter- Table Top				
6	Labor Bed	Yes		Yes	
7	Foetal Doppler				
8	Phototherapy Unit	Yes		Yes	
9	Shoulder Wheel				
10	Shoulder Pulley				
11	Shoulder Abduction Ladder				
12	Suction Machine	Yes		Yes	One non- functional
13	Mobile Spotlight	Yes		Yes	
14	Manual Vacuum Aspirator	Yes		Yes	
15	Weighing Scale	Yes		Yes	
16	Baby Weighing Scale	Yes		Yes	✓ (1)
17	Infantometer				
18	Ophthalmoscope				
19	Fully Loaded Dental Chair Electrically Operated				
20	Dental Chair-Basic				
21	Oxygen Hood Neonatal	Yes		Yes	
22	ILR With Voltage Stabilizer-Small				
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				
31	Turbidometer				
32	Glucometer	Yes		Yes	
33	Haemoglobinometer	Yes		Yes	
34	ESR Analyzer	Yes		Yes	
35	Electrolyte Analyzer				
36	Oxygen Cylinder- B Type	Yes		Yes	

S.No.	Equipment	Available	Not available	Functional	Non-Functional
37	BP Apparatus- Aneroid	Yes		Yes	
38	BP Apparatus- Digital	Yes		Yes	
39	Stethoscope	Yes		Yes	
40	Thermometer				
41	Examination Table	Yes		Yes	
42	Lower and Upper Extremity Cycle/ Basic Ergometer/ Static Cycle				
43	Exerciser Couch/Table				
44	Finger Exerciser Web				
45	Walking Aid for Training/ Reciprocal Walker				

Ayushman Arogya Mandir- AAM-PHC, SISSIA BOKULONI

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Block/Taluka Name	-
4. Name of Facility	Sissia Bokuloni PHC
5. Type of Facility	<input checked="" type="checkbox"/> PHC-AAM <input type="checkbox"/> UPHC-AAM
6. NIN of the facility	8771427336
7. No. of days in a week facility is operational	7 (24*7)
8. OPD Timings	8:30 am to 1:30 pm
9. Month & Year of operationalization of AAM	2024
10. Details of co-location, if any (If any co-located SHC)	Sissia Bokuloni
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	TENGAKHAT
13. Distance of next referral facility (in Km)	30KM
14. If UPHC functions as a Polyclinic (Yes/No)	No
15. If Yes, please take note of available specialist services at the Polyclinic	No

A.1 Demographic Details	
9. Number of Villages/Wards	60
10. No. of Households	15412
11. Total catchment Population	72220
12. Population who are 30 years of age and above	28880

B. Physical Infrastructure			
Infrastructure Status and details		Availability	
1.	Availability of Govt owned Building	Yes, but land donated by tea garden	
2.	If there is no government-owned Building, specify building type	S.no	Building
		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 NO
9.	Waiting area with sitting arrangements for patients/ attendants	No
10.	Availability of furniture:	Table Yes Chairs Yes Almirah/Shelf Yes
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.)	Yes
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	Yes
21.	Provision of BMW management	Yes
22.	Colour coded waste bins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
23.	Bio-medical waste disposal mechanism in place	Yes
24.	<i>Residential Quarters available for Staff If yes, Specify the staff for which quarters available</i>	Yes

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

3.	Dentist*	1				
4.	Staff Nurse	2			5	5
5.	Pharmacist	1	1	1		
6.	Laboratory Technician	1			1	1
7.	ANM/MPW (F)#	1			1	1
8.	MPW (M)	1	1	1	-	
9.	Lady Health Visitor	1				
10.	Dresser	1				
11.	Accountant	1			1	1
12.	Data entry operator	1				
13.	Sanitation staff	1				
14.	ASHA	-			66	66
15.	ASHA Facilitator (If any, only for Rural areas)				5	-
16.	Others (Specify)					
17.	Whether all essential HRH available as per IPHS 2022	Dresser through hospital committee				

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	No	YES	Yes
NCD	No	Yes	Yes	Yes
Others (Specify)	-	-	-	-

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)	Elderly & Palliative Care (Y/N)	Trained in Trauma & Emergency care (Y/N)
MO (MBBS)	No	No	No	No	No	No
Staff Nurse	No	No	No	No	No	No
ANM/ MPW-F	No	No	No	No	No	No
MPW- M	No	No	No	No	No	No
ASHA	No	No	No	No	No	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	<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 <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	No	No	No
Basic ear, nose, throat (ENT) care services	No	No	No
Oral health care services	No	No	No
Elderly and Palliative care	No	No	No
Screening & management of mental health ailments	No	No	No
Emergency Medical Services	Yes	Yes	Yes
Note: Under expanded package they are provided just basic healthcare services and for basic services facility have medicine			

F. Availability of Essential medicines		
1	Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL) <i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i>	125 <i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i>
2	Total number of medicines available at AAM-PHC/UPHC	112
3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension

		✓ Fever	
4	Medicine categories with shortfall/stockouts on the day of assessment	Oral Contraceptives Analgesics / NSAIDs) Anti-pyretic Anti-allergics Antidotes for poisoning Gastrointestinal meds Anti-filarial Antibiotics Anti-leprosy	anti-tuberculosis Anti-fungal Anti-malarial Anti-hypertensive Oral hypoglycaemics Hypolipidemic ORS <input checked="" type="checkbox"/> Multi-vitamins <input checked="" type="checkbox"/> Calcium Shortage 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 1-2 Weeks 1-3 More than 2 Weeks	
7	Is buffer stock for drugs maintained?	Yes	
8	DVDMS or any other software is being used for stock management	Yes	

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	19 (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	12 Rapid test
4	Number of tests Provided through In House Mode	12
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No

10	Average downtime of equipment	Less than one week
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	NO

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

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Tablet <input type="checkbox"/> Smartphone ✓ Computer ✓ Internet connectivity (Government funded -NO)
Infrastructure: Functionality	Tablet <input type="checkbox"/> Smartphone ✓ Desktop ✓ Internet connectivity- good
Teleconsultation services (PHC/CHCs/DH/MCH)	Yes
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	No
Common conditions for teleconsultation	-
Total teleconsultations in the last 01 month	0 (In jan-37)

I. Wellness Activities			
Wellness sessions being held periodically	Yes		
Availability of a trained instructor for wellness session	No		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
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 checked="" type="checkbox"/> Yes <input 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	Yes
	AAM-PHC Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source		Timely disbursement
	Untied		No
	Other Sources		Yes, Facility user fee
Fund utilization			
	Funds received	Expenditure	% Expenditure

NHM Fund/untied funds utilized during last year:	(Amount in Rs.) 85,000	(Amount in Rs.) 85,000	100%
Is untied fund being spent on following activities?	Exp. on Infrastructure development, White wash, BMW Repair Regular payment of Bills: No If yes, specify; <input type="checkbox"/> Electricity <input type="checkbox"/> Drinking Water <input type="checkbox"/> Internet Regular purchase: No <input type="checkbox"/> Medicines <input type="checkbox"/> Reagents/Consumables <input type="checkbox"/> Equipment Payment of support/cleaning Staff: No		
Status of JSY Payments	Payment done till (month/ year : January Average Delay in Payment (days): one month approx.. Reasons for delay, if any Documentation		
Availability of JSSK entitlements	Yes If yes, whether all entitlements being provided <input checked="" type="checkbox"/> Free delivery services (Normal delivery) <input checked="" type="checkbox"/> Free diet (Food Packet- By state) <input checked="" type="checkbox"/> Free drugs and consumables <input checked="" type="checkbox"/> Free diagnostics <input checked="" type="checkbox"/> Free blood services <input checked="" type="checkbox"/> Free referral transport (home to facility) <input checked="" type="checkbox"/> Free referral transport (drop back from facility to home) <input checked="" type="checkbox"/> No user charges		

M. Service delivery Output Indicators (Data of previous quarter):		
1	Total number of outpatient department visits	4500
2	No. of PW registered for ANC	125
3	No. of PW received 4 or more ANC check-ups	115
4	Total number of institutional deliveries	56
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	7
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	315
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	255

8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	8		
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	15		
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	20		
11	TB patients undergoing treatment			
	Indicators	Current year		
	No. of presumptive TB patients identified	4		
	No. of TB patients diagnosed out of the presumptive patients referred	4		
	No. of TB patients taking treatment in the AAM	4		
12	% of target population administered CBAC			
		Record not Available		
	% of target population with score below 4			
		-		
	% of target population with score 4 and above			
		-		
	Community Based Screening for NCDs			
13	NCDs (No. of individuals in <i>Last 6 Months</i>)	Screened	Treated	Follow-up
	Hypertension			
	Diabetes			
	NCDs (No. of individuals in <i>Last 6 Months</i>)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-
	Cervical Cancer*	-	-	-
	During visit Record not Found: NCD data record were missing			

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	No
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, achievement under Kayakalp and score	EXTERNAL SCORE 70% (2023)
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 (Just user charges 10 Rs) <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	Yes (6 th June 2024)
2	Facility aggregate score using ODK Took kit	Don't know

KEY OBSERVATION WITH CHALLENGES:

AAM-PHC Sissia Bokuloni PHC running in a government-owned building on donated tea garden land. facility is over 50 years old and faces significant space constraints. The lack of a proper waiting area and privacy poses challenges, especially for 24/7 delivery care services. The facility name board is missing due to a recent thunderstorm. It has essential infrastructure, including power backup, drinking water, functional toilets, and BMW management, though some IEC materials and grievance redressal information are missing. For 24/7 delivery care services, the facility requires more doctor and pharmacy. MO and Staff nurse/ ANM were not trained under the expanded AAM packages. A sufficient medicine supply is maintained as per demand except calcium, multivitamin and dyclo pain related. Teleconsultation services are currently provided at the facility.

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	Yes		Yes	
2	Laryngoscope	No			
3	Radiant Warmer	Yes		Yes	
4	Pulse Oximeter-Finger Tip	No			
5	Pulse Oximeter-Table Top				
6	Labor Bed	Yes		Yes	
7	Foetal Doppler				
8	Phototherapy Unit				
9	Shoulder Wheel				
10	Shoulder Pulley				

S.No.	Equipment	Available	Not available	Functional	Non-Functional
11	Shoulder Abduction Ladder				
12	Suction Machine	Yes		Yes	
13	Mobile Spotlight				
14	Manual Vacuum Aspirator	Yes		Yes	
15	Weighing Scale	Yes		Yes	
16	Baby Weighing Scale	Yes		Yes	
17	Infantometer	No			
18	Ophthalmoscope	No			
19	Fully Loaded Dental Chair Electrically Operated	No			
20	Dental Chair-Basic	No			
21	Oxygen Hood Neonatal	Yes		Yes	
22	ILR With Voltage Stabilizer-Small	Yes		Yes	
23	Deep Freezer-Small	No			
24	ILR With Voltage Stabilizer-Large	No			
25	Deep Freezer-Small-Large	No			
26	Vaccine Carrier with Ice Packs	Yes		Yes	
27	Cell Counter – 3 Part	-		-	
28	Semi-Automated Biochemistry Analyser	No			
29	Binocular Microscope	Yes		Yes	
30	HbA1C Analyser	Yes		Yes	
31	Turbidometer				
32	Glucometer	Yes		Yes	
33	Haemoglobinometer	Yes		Yes	
34	ESR Analyzer				
35	Electrolyte Analyzer				
36	Oxygen Cylinder- B Type	Yes		Yes	
37	BP Apparatus-Aneroid	Yes		Yes	Yes
38	BP Apparatus-Digital	Yes		Yes	
39	Stethoscope	Yes		Yes	
40	Thermometer	Yes		Yes	
41	Examination Table	Yes		Yes	
42		-		-	
43	Exerciser Couch/Table	--		--	
44	Finger Exerciser Web				
45	Walking Aid for Training/ Reciprocal Walker	No			

URBAN AYUSHMAN AROGYA MANDIR (UAAM-PHC), DIBRUGARH

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Ward Name	16
4. Block	Dibrugarh
5. Name of Facility	DIBRUGARH
6. Type of Facility	HWC-PHC (U)
7. NIN of the facility	1115318188
8. No. of days in a week the facility is operational	6 days
9. OPD Timing	8:00 am to 4:00pm
10. Month & Year of UAAM operationalization	December 2023
11. Is the facility accessible from nearest road head? (Yes/No)	Yes
12. Next Referral Facility	Assam Medical College
13. Distance of next referral facility (Km)	2.7 km

A.1 Demographic Details	
13. Number of Wards	22
14. No. of Households	35501
15. Total catchment Population	136934
16. Population who are 30 years of age and above	50666

B. Physical Infrastructure		
Infrastructure Status and details		Availability
25.	Availability of Govt owned building (Running in Donated building)	Yes
26.	If there is no government-owned building, specify building type (<i>Other Govt./Urban Local Body/ Rented etc.</i>)	
27.	24*7 (Delivery care and emergency)	Yes
28.	Availability of boundary wall	Yes
29.	External branding as per CPHC guidelines (<i>colour, logo</i>)	Yes
30.	OPD room	Yes
	Examination table with privacy curtain/ screen	Yes
31.	Day Care Beds available (<i>Norm – 2</i>)	Yes
32.	Waiting area with sitting arrangements for patients/ attendants	Yes
33.	Availability of furniture	Yes
	Table	Yes
	Chairs	Yes
	Almirah/Rack	Yes
34.	Laboratory	Yes

35.	Pharmacy /Drug store	Yes
36.	Space/ room identified for Wellness activities including Yoga sessions	Yes
37.	Separate functional toilets for males and females	No
38.	Availability of Running Water	Yes
39.	Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	Yes
40.	Electricity connection	Yes
41.	Power back up	Yes
42.	Availability of Safe drinking Water	Yes
43.	Functional Handwashing corner (designated) with running water and soap	Yes
44.	Provision of BMW management	Yes
45.	Colour coded waste bins	Yes
46.	Bio-medical waste disposal mechanism in place	Yes
47.	<i>Residential Quarters available for Staff If yes, Specify the staff for which quarters available</i>	No

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

*Desirable amenities

C. Human Resource Availability						
S. N	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	MO	1	1	1	2	2
	Aayush	1	1	1	-	-
2	Staff Nurse	1	3	3	-	-
3	MPW (Male)	1	-	-	-	-
	ANM		1	4	1	1
	LHV		-	2	-	-
	Dressor		1	1	-	-
	DEO	-	-	-	1	1
	Accountant	-	-	-	1	1
4	Sanitary Staff*	1	-	-	1	1

5	Security Staff**	1	-	-	-	-
	IV Grade	-	1	4	-	-
6	ASHA (Population norm: 1 ASHA per 2000-2500 population)				67 SANCTIONED- 66 available	

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

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (Yes/No)	Staff Nurse (Yes/No)	MPW (F)/ ANM (Yes/No) ANM	ASHA (Yes/No)
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 etc.)	Yes	Yes	Yes	Yes
NCD	Yes	Yes	Yes	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)
CHO/ MO	No	Yes	Yes	Yes	Yes	Yes
Staff Nurse	No	Yes	Yes	Yes	Yes	Yes
ANM	No	Yes	Yes	Yes	Yes	Yes
ASHA	No	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
	Screening and management of common NCDs (DM, HTN) <input checked="" type="checkbox"/> Screening of common cancers – Oral

Non-Communicable Diseases	<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	No	Yes	Yes
Basic ear, nose, throat (ENT) care services	No	Yes	Yes
Oral health care services	No	Yes	Yes
Elderly and Palliative care services	No	Yes	Yes
Screening & management of mental health ailments	Yes	Yes	Yes
Emergency Medical Services	Yes	Yes	Yes
Just basic services for ENT ,Oral, ...and basic drugs available for all			

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
	152 <i>(Total medicines at UAAM as per national EML is 105)</i>
2	Total number of medicines available at the UAAM
	107
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
	No shortage
5	What is the indenting cycle that is followed at the facility?
	As required
6	What is the lead time for supply of drugs which are indented? (record in days)
	Less than 1 Week
7	Is buffer stock for drugs maintained?
	Yes
8	DVDMS or any other software is being used for stock management
	Yes

G.1 Availability of Diagnostic Services	
1	Availability of diagnostic services:
	In-house lab and outsourced

2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	49 <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	42
4	Number of tests Provided through In House Mode	42
5	Number of tests Provided through Hub & Spoke (Public Health System)	No
6	Number of tests Provided through Hub & Spoke- PPP Model	7
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	Yes
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	1 week
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	

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

22.	Test for iodine in salt (used for food) – Iodine in salt testing kit	No
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H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Laptop
Teleconsultation services Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	Yes, This IS HUB (SO RECEIVED Call from lower tier) <input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital Other, specify: AAM-HSC
Teleconsultation platforms used	e-Sanjeevani OPD
Teleconsultation schedule prepared and displayed	Yes
Common conditions for teleconsultation	NCD,
Total teleconsultations in the last 01 month	36

I. Wellness Activities	
Wellness sessions being held periodically	Yes
Availability of a trained instructor for wellness session	Yes
Health Days are celebrated as per the Wellness Activity Calendar	Yes

J. Governance	
Constitution of Jan Arogya Samiti	Yes
Periodic JAS meetings in the last 6 months (once a month)	Yes
Minutes of meetings maintained	No
Availability of functional MAS	Yes

K. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/HWC App	Yes
<input type="checkbox"/> National NCD Portal/App	Yes
<input type="checkbox"/> IHIP	Yes
<input type="checkbox"/> HMIS	Yes

<input type="checkbox"/> FPLMIS	Yes
<input type="checkbox"/> DVDMS	Yes
<input type="checkbox"/> Nikshay	Yes
Specify others:	RCH, MCH

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	NA	NA
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes	June (1st Installment)
	Other Sources	Yes	User fund, 10 Rs.
United Fund utilized during last year (Fund received as per the requirement as there is no CHO appointment in the facility)	Funds received	Expenditure	% Expenditure
	(Amount in Rs.)	(Amount in Rs.)	
	Rs 1, 72, 000	Rs 1, 72, 000	100% utilized
Is untied fund being spent on following activities?	Regular payment of Bills: Yes If yes, specify; <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet Regular purchase: No <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment Repairing, Electrical, Payment of support/cleaning Staff: Yes		
Status of JSY Payments	Payment done till: Yes, Feb 2025		

	<p>Average Delay in Payment (days): 2 weeks</p> <p>Reasons for delay, if any.... Bank account not available</p>
<p>Availability of JSSK entitlements</p> <p><u>(No deliveries taking place in UHWC)</u></p>	<p>NA (No delivery point)</p> <p>If yes, whether all entitlements being provided</p> <p><input type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p> <p><input type="checkbox"/> Free diet</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Free drugs and consumables</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Free diagnostics</p> <p><input type="checkbox"/> Free blood services</p> <p><input type="checkbox"/> Free referral transport (home to facility)- provide Rs.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Free referral transport (drop back from facility to home)</p> <p><input type="checkbox"/> No user charges</p>

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	9208
2	No. of PW registered for ANC	366
3	No. of PW received 4 or more ANC check-ups	424
4	Total number of institutional deliveries	71
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	102
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	614
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	500
	Number of cases referred from SC AAM to PHC or Other higher facilities during last month	2
8	Number of cases referred from UPHC AAM to CHC or Other higher facilities during last month	20
9	Number of cases referred back to UPHC AAM from CHC or higher centre for follow-up during last 3 months	0
8	TB patients undergoing treatment	
	Indicators	Current year

	No. of presumptive TB patients identified	1566		
	No. of TB patients diagnosed out of the presumptive patients referred	6		
	No. of TB patients taking treatment in the AAM	6		
9	Community Based Screening for NCDs			
	% of target population administered CBAC	50320 (99%)		
	% of target population with score below 4	30373 (60%)		
	% of target population with score 4 and above	19947 (40%)		
10	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	4457	432	432
	Diabetes	2630	90	90
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	704	0	0
	Breast Cancer*	334	0	0
	Cervical Cancer*	334	0	0

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	Yes
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, Achievement under Kayakalp (Winner, recommendation) and score	Yes (81%)
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	30/05/2024
2	Facility aggregate score using ODK Took kit	57%

Key Observations

Urban-PHC, Dibrugarh serves a high OPD load, averaging 70-80 patients daily and rising to 120-150 on Tuesdays and Fridays. It provides 24/7 delivery services, though only Samahar packed food is offered due to the absence of an in-house kitchen. The facility has a well-established power backup system, conducts regular yoga sessions, and owns an ambulance. A JAS has been formed, and only basic services are provided under the expanded AAM package. The facility houses a Panchkarma Therapy Room, mental health services, and AYUSH care, with a dedicated mental health counselor for patient support. NCD camps and cancer screening are organized periodically, while teleconsultation services actively address hypertension, diabetes, and other non-communicable diseases. Strengths include antenatal care, mental health counseling, and strong immunization coverage. The facility has been recognized with a Kayakalp Award (82%) and performed well in the Swasthya Seva Utsav (81%). However, challenges persist, including a shortage of manpower—no permanent ANM, sanitation staff, or data entry operator—hindering immunization services. Additionally, the inability to provide expanded AAM services is attributed to a lack of staff training.

Annexure- List of equipment

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

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

AYUSHMAN AROGYA MANDIR- SUB HEALTH CENTRE, BOKPARA

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Block/Taluka Name	BARBARUAH
4. Name of Facility	Bokpara
5. Type of Facility	AAM-SHC
6. NIN of the facility	7326344376
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	8:30 TO 1:30 PM
9. Month & Year of AAM operationalization	February 2024
10. Accessible from nearest road head (Yes/No)	Yes
11. Next Referral Facility	BARBARUAH
12. Distance of next referral facility (Km)	12km

A.1 Demographic Details	
1. Number of Villages	3
2. No. of Households	-
3. Total catchment Population	4525
4. Population who are 30 years of age and above	1900+

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned building	Yes
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	Yes
4.	External branding as per CPHC guidelines (<i>colour, logo</i>)	Yes
5.	OPD room	Yes
	Examination table with privacy curtain/ screen	Yes
6.	Day Care Beds available (<i>Norm – 2</i>)	Yes, 1 Bedded
7.	Waiting area with sitting arrangements for patients/ attendants	Yes
8.	Availability of furniture	
	Table	Yes
	Chairs	Yes
	Almirah/Rack	Yes
9.	Laboratory	Yes
10.	Pharmacy /Drug store	Yes
11.	Space/ room identified for Wellness activities including Yoga sessions	Yes
12.	Separate functional toilets for males and females	Yes
13.	Availability of Running Water	Yes

14.	Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	No
15.	Electricity connection	Yes
16.	Power back up	Yes
17.	Availability of Safe drinking Water	Yes
18.	Functional Handwashing corner (designated) with running water and soap	No
19.	Provision of BMW management	Yes
20.	Colour coded waste bins	Yes
21.	Bio-medical waste disposal mechanism in place	Yes
22.	<i>Residential Quarters available for Staff If yes, Specify the staff for which quarters available</i>	No

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

*Desirable amenities

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

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

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	CHO (Yes/No)	ANM (Yes/No)	MPW (M)/ ANM (Yes/No)	ASHA (Yes/No)
Maternal Health (ANC/PNC Care)	Yes	Yes	Yes	Yes

Child Health (<i>New Born Care/ HBNC/ HBYC</i>)	Yes	Yes	Yes	Yes
Family Planning	Yes	Yes	Yes	Yes
Communicable Diseases (<i>TB/Leprosy/Malaria/Dengue/Filariasis etc.</i>)	Yes	Yes	Yes	Yes
NCD	Yes	Yes	Yes	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)
CHO	No	No	No	No	No	No
ANM / MPW	No	No	No	No	No	No
ASHA	No	No	No	No	No	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

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	Yes	Yes	Yes
Basic ear, nose, throat (ENT) care services	Yes	Yes	Yes
Oral health care services	Yes	Yes	Yes
Elderly and Palliative care services	Yes	Yes	Yes

Screening & management of mental health ailments	Yes	Yes	Yes
Emergency Medical Services	Yes	Yes	Yes
Basic services available			

F. Availability of Essential medicines	
1	Number of medicines at AAM 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
	31 <i>(Total medicines at UAAM as per national EML is 105)</i>
2	Total number of medicines available at the AAM
	31
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
	Gastrointestinal Hypolipidemic Colostrol Multivitamin Dermatological
5	What is the indenting cycle that is followed at the facility?
	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)
	Less than 1 Week
7	Is buffer stock for drugs maintained?
	No
8	DVDMS or any other software is being used for stock management
	Yes

G.1 Availability of Diagnostic Services	
1	Availability of diagnostic services:
	In-house lab & outsourced
2	Number of diagnostic tests at AAM 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
	6
4	Number of tests Provided through In House Mode
5	Number of tests Provided through Hub & Spoke (Public Health System)
	-
6	Number of tests Provided through Hub & Spoke- PPP Model
	-
7	Availability of X-ray services
	No
8	Availability of Sputam transportation mechanism for TB
	Yes

	Availability of diagnostic testing aids/ equipment	RDK KITS Glucometer Haemoglobinometer Thermometer Sphygmomanometer
9	User fee charged for diagnostics	Yes
10	Average downtime of equipment (days)	10-15 days
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	No

H. Availability of IT Equipment & Teleconsultation services

Infrastructure: Availability	Yes, Internet connectivity (government funded-No) Yes, Desktop/ laptop
Infrastructure: Functionality	Internet connectivity (government funded-No) Desktop functional
Teleconsultation services	Yes
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input checked="" type="checkbox"/> PHC <input checked="" type="checkbox"/> CHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital <input checked="" type="checkbox"/> Other, specify... HUB Guhwati
Teleconsultation platforms used	e-Sanjeevani OPD
Teleconsultation schedule prepared and displayed	No
Common conditions for teleconsultation	Severe Hypertension, Diabetes
Total teleconsultations in the last 01 month	54

I. Wellness Activities

Wellness sessions being held periodically	Yes
Availability of a trained instructor for wellness session	Yes
Health Days are celebrated as per the Wellness Activity Calendar	Yes

J. Governance

Constitution of Jan Arogya Samiti	Yes
Periodic JAS meetings in the last 6 months (once a month)	Yes
Minutes of meetings maintained	Yes
Availability of functional MAS	No

K. Reporting

Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App/ HWC/ SSD	Yes
<input type="checkbox"/> National NCD Portal/App	Yes

<input type="checkbox"/> IHIP	Yes
<input type="checkbox"/> HMIS	Yes
<input type="checkbox"/> FPLMIS	Yes
<input type="checkbox"/> DVDMS	No
<input type="checkbox"/> Nikshay	Yes
Specify others: RCH/ Anmol, UVIN	Yes

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	No	September received
	Other Sources	No	-
United Fund utilized during last year This year fund details 2024-25, as CHO is new	Funds received	Expenditure	% Expenditure
	(Amount in Rs.)	(Amount in Rs.)	
	Rs 17000	Rs 17000	100% utilized
Is untied fund being spent on following activities?	<p>Regular payment of Bills: Yes</p> <p>If yes, specify;</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet <p>Regular purchase: Yes</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment <input checked="" type="checkbox"/> Furniture <p>Payment of support/cleaning Staff: No</p>		

	BMW – sharp pit expenditure untied fun, yoga haal
Status of JSY Payments	Payment done till: Not Applicable Average Delay in Payment (days): Reasons for delay, if any
Availability of JSSK entitlements (No deliveries taking place in UHWC)	NA If yes, whether all entitlements being provided <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <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

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	735
2	No. of PW registered for ANC	13
3	No. of PW received 4 or more ANC check-ups	
4	Total number of institutional deliveries	NA
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	3
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	6
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	7
8	Number of cases referred from AAM to PHC AAM /Polyclinic/Other higher facilities during last month	
9	Number of cases referred back to AAM from PHC 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	6
	No. of TB patients diagnosed out of the presumptive patients referred	6
	No. of TB patients taking treatment in the AAM	6
9	Community Based Screening for NCDs	

	<table border="1"> <tr> <td colspan="2">% of target population administered CBAC</td> <td></td> <td></td> </tr> <tr> <td colspan="2">% of target population with score below 4</td> <td></td> <td></td> </tr> <tr> <td colspan="2">% of target population with score 4 and above</td> <td></td> <td></td> </tr> </table>				% of target population administered CBAC				% of target population with score below 4				% of target population with score 4 and above			
% of target population administered CBAC																
% of target population with score below 4																
% of target population with score 4 and above																
10	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up												
	Hypertension	460	39													
	Diabetes	460	9													
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up												
	Oral Cancer*	12	2													
	Breast Cancer*	15	0													
	Cervical Cancer*	0	0													

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	Yes, 63%
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, Achievement under Kayakalp, score	76% Commendation
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 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	September 2024
2	Facility aggregate score using ODK Took kit	71%

Key Observations with challenges

The facility handles an average OPD load of 10-15 patients per day. The facility has equipped with a yoga room, separate male and female washrooms, and six diagnostic tests were conducted at the facility. The CHO, ANM, and ASHAs demonstrated a strong understanding of the programs, ensuring effective implementation. The facility is unable to provide expanded AAM services due to a lack of staff training. Teleconsultation services are functioning efficiently. Although a labor room was established in 2024, delivery services are not yet available. Biomedical waste management systems, including a sharp pit, deep burial, and waste storage, are in place, along with power backup through an inverter and a functional laptop for teleconsultation services. The facility is *Kayakalp*-certified and NQAS implementation is also initiated at this facility. However, it faces challenges such as limited physical space, space crunch, delayed and insufficient funds, and a shortage of some rapid test kits.

Annexure- List of essential equipment

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

AYUSHMAN AROGYA MANDIR- SUB HEALTH CENTRE, GAJALA BASTI

A. General Information	
13. State	Assam
14. District Name	Dibrugarh
15. Block/Taluka Name	TENGHEKHAT
16. Name of Facility	Gajala Basti
17. Type of Facility	AAM-HWC
18. NIN of the facility	3548675820
19. No. of days in a week facility is operational	6 DAYS
20. OPD Timings	8:00 TO 2:00 PM
21. Month & Year of AAM operationalization	
22. Accessible from nearest road head (Yes/No)	Yes
23. Next Referral Facility	PHC Kacharipathar
24. Distance of next referral facility (Km)	5 km

A.1 Demographic Details	
5. Number of Villages	4
6. No. of Households	1307
7. Total catchment Population	5558
8. Population who are 30 years of age and above	2058

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned building	Yes
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	Yes
4.	External branding as per CPHC guidelines (<i>colour, logo</i>)	Yes
5.	OPD room	Yes
	Examination table with privacy curtain/ screen	Yes
6.	Day Care Beds available (<i>Norm – 2</i>)	No
7.	Waiting area with sitting arrangements for patients/ attendants	Yes
8.	Availability of furniture	
	Table	Yes
	Chairs	Yes
	Almirah/Rack	Yes
9.	Laboratory	Yes
10.	Pharmacy /Drug store	Yes
11.	Space/ room identified for Wellness activities including Yoga sessions	Yes
12.	Separate functional toilets for males and females	Yes

13.	Availability of Running Water	Yes
14.	Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	Yes
15.	Electricity connection	Yes
16.	Power back up	Yes
17.	Availability of Safe drinking Water	Yes
18.	Functional Handwashing corner (designated) with running water and soap	Yes
19.	Provision of BMW management	Yes
20.	Colour coded waste bins	Yes
21.	Bio-medical waste disposal mechanism in place	No
22.	<i>Residential Quarters available for Staff If yes, Specify the staff for which quarters available</i>	No

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

*Desirable amenities

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

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

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

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 etc.)	Yes	Yes	Yes	Yes
NCD	Yes	Yes	Yes	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)
CHO	No	No	No	No	No	No
ANM	No	No	No	No	No	No
ASHA	No	No	No	No	No	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- Screening <input checked="" type="checkbox"/> Leprosy- only screening part <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

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	No	No	No
Basic ear, nose, throat (ENT) care services	No	No	No

Oral health care services	No	No	No
Elderly and Palliative care services	No	No	No
Screening & management of mental health ailments	No	No	No
Emergency Medical Services	No	No	No

F. Availability of Essential medicines		
1	Number of medicines at AAM as per State Essential Medicine List (EML) <i>Reference link for national EML:</i> https://nhsrcindia.org/sites/default/files/SHC-HWC%20%26%20UHWC%20IPHS%202022%20Guidelines%20pdf.pdf	33 (Total medicines at UAAM as per national EML is 105)
2	Total number of medicines available at the AAM	22
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	Gastrointestinal Meds Multivitamins Hypolipidemic Dermatological cream
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	No
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at AAM as per State Essential Diagnostic list	- (Total diagnostic tests at UAAM as per national EDL is 14)
3	Number of tests available at AAM	9
4	Number of tests Provided through In House Mode	9
5	Number of tests Provided through Hub & Spoke (Public Health System)	NA
6	Number of tests Provided through Hub & Spoke- PPP Model	NA
7	Availability of X-ray services	No

8	Availability of Sample transportation mechanism	Yes (TB)
	Availability of diagnostic testing aids/equipment	RDK KITS Glucometer Haemoglobinometer Thermometer Sphygmomanometer Urine dipstick
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	One week
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	No

H. Availability of IT Equipment & Teleconsultation services

Infrastructure: Availability	Internet connectivity (government funded- No) Laptop- Yes
Infrastructure: Functionality	Internet connectivity (government funded- No) Laptop Yes
Teleconsultation services Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	Yes PHC <input checked="" type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital Other, specify
Teleconsultation platforms used	e-Sanjeevani app
Teleconsultation schedule prepared and displayed	No
Common conditions for teleconsultation	Hypertension, Fever
Total teleconsultations in the last 01 month	2-3, Internet issue

I. Wellness Activities

Wellness sessions being held periodically	Yes
Availability of a trained instructor for wellness session	No
Health Days are celebrated as per the Wellness Activity Calendar	Yes

J. Governance

Constitution of Jan Arogya Samiti	Yes
Periodic JAS meetings in the last 6 months (once a month)	Yes
Minutes of meetings maintained	Yes
Availability of functional MAS	NA

K. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App/ HWC/ SSD	Yes
<input type="checkbox"/> National NCD Portal/App	Yes
<input type="checkbox"/> IHIP	Yes
<input type="checkbox"/> HMIS	Yes, PHC Level
<input type="checkbox"/> FPLMIS	Yes
<input type="checkbox"/> DVDMS	Yes
<input type="checkbox"/> Nikshay	Yes
Specify others: RCH/ Anmol, UVIN	Yes

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	NA, CHO New so not initiated	NA
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes, But not timely	September
	Other Sources	No	-
United Fund utilized during last year	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	Rs 41,654	Rs 23, 654	% utilized

<p>Is untied fund being spent on following activities?</p>	<p>Regular payment of Bills: Yes</p> <p>If yes, specify;</p> <p><input checked="" type="checkbox"/> Electricity</p> <p><input checked="" type="checkbox"/> Drinking Water</p> <p><input checked="" type="checkbox"/> Internet</p> <p>Regular purchase: Yes</p> <p><input checked="" type="checkbox"/> Medicines</p> <p><input checked="" type="checkbox"/> Reagents/Consumables</p> <p><input checked="" type="checkbox"/> Equipment</p> <p><input checked="" type="checkbox"/> Furniture, White wash</p> <p>Payment of support/cleaning Staff: No</p>
<p>Status of JSY Payments</p>	<p>Payment done till: Not Applicable (From PHC level)</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>
<p>Availability of JSSK entitlements</p> <p><u>(No deliveries taking place in HWC)</u></p>	<p>NA</p> <p>If yes, whether all entitlements being provided</p> <p><input type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p> <p><input type="checkbox"/> Free diet</p> <p><input type="checkbox"/> Free drugs and consumables</p> <p><input type="checkbox"/> Free diagnostics</p> <p><input type="checkbox"/> Free blood services</p> <p><input type="checkbox"/> Free referral transport (home to facility)</p> <p><input type="checkbox"/> Free referral transport (drop back from facility to home)</p> <p><input type="checkbox"/> No user charges</p>

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	743
2	No. of PW registered for ANC	30
3	No. of PW received 4 or more ANC check-ups	20
4	Total number of institutional deliveries	NA
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	35
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	26

8	Number of cases referred from AAM to PHC AAM /Polyclinic/Other higher facilities during last month	12		
9	Number of cases referred back to AAM from PHC 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	3		
	No. of TB patients diagnosed out of the presumptive patients referred			
	No. of TB patients taking treatment in the AAM	5		
9	Community Based Screening for NCDs			
	% of target population administered CBAC	41%		
	% of target population with score below 4	10%		
	% of target population with score 4 and above	31%		
10		Screened	Treated	Follow-up
	Hypertension	344	22	18
	Diabetes	344	10	8
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	344	0	0
	Breast Cancer*	344	0	0
	Cervical Cancer*	-	-	-

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	No
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, Achievement under Kayakalp (Winner, recommendation) and score	No, But staff is not aware about this done by PHC level staff self

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	Don't know

KEY OBSERVATIONS

Gajalabasti AAM-SHC, provides essential services, including general OPDs, maternal and child health, NCD services, however, it is unable to provide expanded AAM services due to a lack of staff training. Training of ANM, MPW and ASHAs worker is required for enhancing service delivery. Strengthening staff training can enhance service delivery. Teleconsultation services are not functioning efficiently due to internet connectivity. Very less IEC display was observed at the facility. Lack of updated display of IEC material noticed at the facility. The facility reported delays in untied fund disbursement, affecting fund utilization efficiency. The facility is highly lacking in the quality care program implementation, which can be strengthen.

Annexure- List of essential equipment

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

AYUSHMAN AROGYA MANDIR- SUB HEALTH CENTRE, LAHOLIAL

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Block/Taluka Name	TENGAKHAT
4. Name of Facility	Nawholia AAM
5. Type of Facility	AAM-HWC
6. NIN of the facility	734182726
7. No. of days in a week facility is operational	6 DAYS
8. OPD Timings	8:30 TO 2:30 PM
9. Month & Year of AAM operationalization	December 2023
10. Accessible from nearest road head (Yes/No)	Yes
11. Next Referral Facility	Sessai Bokuloni
12. Distance of next referral facility (Km)	10km

A.1 Demographic Details	
9. Number of Villages	9
10. No. of Households	2578
11. Total catchment Population	12445
12. Population who are 30 years of age and above	5724

B. Physical Infrastructure		
Infrastructure Status and details		Availability
23.	Availability of Govt owned building	Yes
24.	If there is no government-owned building, specify building type (<i>Other Govt./Urban Local Body/ Rented etc.</i>)	
25.	Availability of boundary wall	Yes
26.	External branding as per CPHC guidelines (<i>colour, logo</i>)	Yes
27.	OPD room	Yes
	Examination table with privacy curtain/ screen	Yes
28.	Day Care Beds available (<i>Norm – 2</i>)	Yes
29.	Waiting area with sitting arrangements for patients/ attendants	Yes
30.	Availability of furniture	Yes
	Table	Yes
	Chairs	Yes
	Almirah/Rack	Yes
31.	Laboratory	Yes
32.	Pharmacy /Drug store	Yes

33.	Space/ room identified for Wellness activities including Yoga sessions	Yes
34.	Separate functional toilets for males and females	Yes
35.	Availability of Running Water	Yes
36.	Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	Yes
37.	Electricity connection	Yes
38.	Power back up	Yes
39.	Availability of Safe drinking Water	Yes
40.	Functional Handwashing corner (designated) with running water and soap	Yes
41.	Provision of BMW management	Yes
42.	Colour coded waste bins	Yes
43.	Bio-medical waste disposal mechanism in place	No
44.	<i>Residential Quarters available for Staff If yes, Specify the staff for which quarters available</i>	No

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

*Desirable amenities

C. Human Resource Availability						
S. N	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	CHO	1	-	0	1	1
2	Staff Nurse	1	2	1	1	1
3	MPW (Male)	1	1	-	-	-
4	Sanitary Staff*	1	-	-	-	1
5	Security Staff**	1	-	-	-	-
6	ASHA (Population norm: 1 ASHA per 2000-2500 population)				9 ASHA	

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

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases

Services	CHO (Yes/No)	ANM (Yes/No)	MPW (M) (Yes/No) ANM	ASHA (Yes/No)
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 etc.)	Yes	Yes	Yes	Yes
NCD	Yes	Yes	Yes	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)
CHO	No	No	No	No	No	No
ANM	No	No	No	No	No	No
ASHA	No	No	No	No	No	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 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

E.2 Availability of Expanded Packages of Services			
Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	No	No	No

Basic ear, nose, throat (ENT) care services	No	No	No
Oral health care services	No	No	No
Elderly and Palliative care services	No	No	No
Screening & management of mental health ailments	No	No	No
Emergency Medical Services	No	No	No

F. Availability of Essential medicines		
1	Number of medicines at AAM 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	34 (Total medicines at UAAM as per national EML is 105)
2	Total number of medicines available at the AAM	34
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	Anti-pyretic Gastrointestinal meds Anti hypertensive Multivitamins Dermatological cream
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at AAM as per State Essential Diagnostic list	8 <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	7
4	Number of tests Provided through In House Mode	7
5	Number of tests Provided through Hub & Spoke (Public Health System)	-

6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	Yes
	Availability of diagnostic testing aids/ equipment	Glucometer Haemoglobinometer Thermometer Sphygmomanometer Urine dipstick
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	10-15 days
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	Yes, see list of equipment table

H. Availability of IT Equipment & Teleconsultation services

Infrastructure: Availability	Internet connectivity (government funded- NO) Laptop Smartph. – ASHAs received , Functional reported
Infrastructure: Functionality	Internet connectivity issue reported (No-government funded) Laptop
Teleconsultation services Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	Yes <input checked="" type="checkbox"/> PHC <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital <input checked="" type="checkbox"/> Other, specify
Teleconsultation platforms used	e-Sanjeevani.OPD
Teleconsultation schedule prepared and displayed	Yes
Common conditions for teleconsultation	Severe ,Hypertension, HRP
Total teleconsultations in the last 01 month	20

I. Wellness Activities

Wellness sessions being held periodically	Yes
Availability of a trained instructor for wellness session	Yes
Health Days are celebrated as per the Wellness Activity Calendar	Yes

J. Governance

Constitution of Jan Arogya Samiti	Yes
Periodic JAS meetings in the last 6 months (once a month)	Yes

Minutes of meetings maintained	Yes
Availability of functional MAS	No

K. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App/ HWC/ SSD	Yes
<input type="checkbox"/> National NCD Portal/App	Yes
<input type="checkbox"/> IHIP	Yes
<input type="checkbox"/> HMIS	Yes
<input type="checkbox"/> FPLMIS	Yes
<input type="checkbox"/> DVDMS	Yes
<input type="checkbox"/> Nikshay	Yes
Specify others: RCH/ Anmol, UVIN	Yes

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	No , September received	
	Other Sources		
United Fund utilized during last year			
	Funds received	Expenditure	% Expenditure

	(Amount in Rs.)	(Amount in Rs.)	
	Rs 50,000	Rs 38,231	76% utilized
Is untied fund being spent on following activities?	<p>Regular payment of Bills: Yes</p> <p>If yes, specify;</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet <p>Regular purchase: Yes</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment <input checked="" type="checkbox"/> Furniture <p>Payment of support/cleaning Staff: Yes</p> <p>BMW, Boundry wall</p>		
Status of JSY Payments	<p>Payment done till: Not Applicable</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>		
Availability of JSSK entitlements <u>(No deliveries taking place in UHWC)</u>	<p>NA</p> <p>If yes, whether all entitlements being provided</p> <ul style="list-style-type: none"> <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <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 		

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	744
2	No. of PW registered for ANC	46
3	No. of PW received 4 or more ANC check-ups	43
4	Total number of institutional deliveries	NA

5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	26		
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	56		
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	47		
8	Number of cases referred from AAM to PHC AAM /Polyclinic/Other higher facilities during last month	42		
9	Number of cases referred back to AAM from PHC 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	5		
	No. of TB patients diagnosed out of the presumptive patients referred	2		
9	Community Based Screening for NCDs			
	% of target population administered CBAC	46%		
	% of target population with score below 4	-		
	% of target population with score 4 and above	-		
10	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	452	48	64
	Diabetes	452	36	58
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	452	5	64
	Breast Cancer*	160	0	58
	Cervical Cancer*	0	-	-

N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	No
2	Is the facility certified at the State-level for NQAS?	No

3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	Yes
5	If yes, Achievement under Kayakalp (Winner, recommendation) and score	External Score was not informed to facility, December 2024 assesment done and result
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	NO NA
2	Facility aggregate score using ODK Took kit	-

KEY OBSERVATIONS

Nawholia AAM-SHC, unable to provide expanded 12 package of AAM services due to a lack of the staff training. Teleconsultation services are functioning effectively, primarily managing severe hypertension and HRP cases, however internet connectivity issue was reported. On an average 230-240 monthly OPD load was reported at the facility. The facility underwent a

Kayakalp external assessment in December 2024, but the score was not communicated. There is a shortage of diagnostic strips (HB, RBS blood sugar), and essential equipment like a weighing machine and tuning fork is unavailable. Medicine shortages include anti-pyretics, gastrointestinal medications, antihypertensives, multivitamins, and dermatological creams. Additionally, the facility lacks an MPW. The facility reported delays in untied fund disbursement, which received late in September, affecting fund utilization efficiency.

Annexure- List of essential equipment

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

URBAN AYUSHMAN AROGYA MANDIR (UAAM-HWC), CHRINGCHAPORI

A. General Information	
1. State	Assam
2. District Name	Dibrugarh
3. Ward Name	6
4. Name of Facility	Chring chapori AAM
5. Type of Facility	UAAM-HWC-SC
6. NIN of the facility	1128362157
7. No. of days in a week the facility is operational	6 days
8. OPD Timing	9:00am to 2:00pm
9. Month & Year of UAAM operationalization	July 2024
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	UPHC Dibrugarh
12. Distance of next referral facility (Km)	3 km

A.1 Demographic Details	
17. Number of Wards	8 wards total Under this facility
18. No. of Households	-
19. Total catchment Population	51395
20. Population who are 30 years of age and above	19016

B. Physical Infrastructure		
Infrastructure Status and details		Availability
1.	Availability of Govt owned building (Running in Donated building)	No
2.	If there is no government-owned building, specify building type (<i>Other Govt./Urban Local Body/ Rented etc.</i>)	Rented
3.	24*7	No
4.	Availability of boundary wall	Yes
5.	External branding as per CPHC guidelines (<i>colour, logo</i>)	No
6.	OPD room	Yes
	Examination table with privacy curtain/ screen	Yes
7.	Day Care Beds available (<i>Norm – 2</i>)	Yes
8.	Waiting area with sitting arrangements for patients/ attendants	Yes
9.	Availability of furniture	Yes
	Table	Yes
	Chairs	Yes
	Almirah/Rack	Yes
10.	Laboratory	No
11.	Pharmacy /Drug store	Yes
12.	Space/ room identified for Wellness activities including Yoga sessions	No

13.	Separate functional toilets for males and females	No
14.	Availability of Running Water	Yes
15.	Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	Yes
16.	Electricity connection	Yes
17.	Power back up	No
18.	Availability of Safe drinking Water	Yes
19.	Functional Handwashing corner (designated) with running water and soap	Yes
20.	Provision of BMW management (Collection based)	Yes
21.	Colour coded waste bins	Yes
22.	Bio-medical waste disposal mechanism in place	No
23.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	No

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

*Desirable amenities

C. Human Resource Availability						
S. N	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	MO	1	-	-	1	0
2	Staff Nurse	1	-	-	1	1
3	MPW (Male)	1	-	-	0	0
	ANM		-	-	-	1 Community level)
4	Sanitary Staff*	1	-	-	2	0
5	Security Staff**	1	-	-	0	0
6	ASHA (Population norm: 1 ASHA per 2000-2500 population)				23	

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

D.1 Training Details- RMNCHA+ Communicable & Non- Communicable Diseases				
Services	MO (Yes/No)	GNM/ Staff nurse (Yes/No)	MPW (F)/ ANM (Yes/No) ANM	ASHA (Yes/No)
Maternal Health (ANC/PNC Care)	NA	Yes	Yes	Yes
Child Health (New Born Care/ HBNC/ HBYC)	NA	Yes	Yes	Yes
Family Planning	NA	Yes	Yes	Yes
Communicable Diseases (TB/Leprosy/Malaria/Dengue/Filariasis etc.)	NA	Yes	Yes	Yes
NCD	NA	Yes	Yes	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	NA	NA	NA	NA	NA	NA
GNM	Yes	Yes	Yes	Yes	Yes	Yes
ANM	No	No	No	No	No	No
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 (Screening) <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

E.2 Availability of Expanded Packages of Services

Service Packages	Services Available	Drugs available	Diagnostics & consumables available
Ophthalmic care services	No	Yes, Basic	No
Basic ear, nose, throat (ENT) care services	No	Yes	No
Oral health care services	No	No	No
Elderly and Palliative care services	No	No	No
Screening & management of mental health ailments	No	No	No
Emergency Medical Services	No	No	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	(Total medicines at UAAM as per national EML is 105)
2	Total number of medicines available at the UAAM	32
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	Anti- Tuberculosis Anti-malarial Anti- Leprosy Anti- Filaral
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	1-2 Week
7	Is buffer stock for drugs maintained?	No
8	DVDMS or any other software is being used for stock management	No

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	Refer to UPHC
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	(Total diagnostic tests at UAAM as per national EDL is 14)
3	Number of tests available at UAAM	2 (Only Sugar and HB test)

4	Number of tests Provided through In House Mode	
5	Number of tests Provided through Hub & Spoke (Public Health System)	No
6	Number of tests Provided through Hub & Spoke- PPP Model	No
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	2 weeks
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	No

H. Availability of IT Equipment & Teleconsultation services

Infrastructure: Availability	Internet connectivity (Personal Mobile and personal data use) Laptop/ Ph. – Not received
Infrastructure: Functionality	Internet connectivity – Personal data use Laptop- NA
Teleconsultation services Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	Yes <input checked="" type="checkbox"/> <input type="checkbox"/> UPHC - Polyclinic <input checked="" type="checkbox"/> <input type="checkbox"/> DH <input checked="" type="checkbox"/> <input type="checkbox"/> Medical College Hospital Other, specify:
Teleconsultation platforms used	e-Sanjeevani.in
Teleconsultation schedule prepared and displayed	No
Common conditions for teleconsultation	Hypertension
Total teleconsultations in the last 01 month	3

I. Wellness Activities

Wellness sessions being held periodically	Yes
Availability of a trained instructor for wellness session	Yes, twice in a month
Health Days are celebrated as per the Wellness Activity Calendar	Yes

J. Governance

Constitution of Jan Arogya Samiti	Yes
Periodic JAS meetings in the last 6 months (once a month)	Yes
Minutes of meetings maintained	Yes
Availability of functional MAS	Yes

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

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	NA	NA
Facility funds	Fund Source	Timely disbursement	Details
	Untied	No	Not received fund
	Other Sources	No	No
United Fund utilized during last year (Fund Not received,)	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
Is untied fund being spent on following activities?	Major on stationary, purchase inverter Regular payment of Bills: Yes If yes, specify; <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet Regular purchase: No		

	<input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment Payment of support/cleaning Staff: Yes
Status of JSY Payments	Payment done till: NA Average Delay in Payment (days): Reasons for delay, if any
Availability of JSSK entitlements	(No delivery point)- NA If yes, whether all entitlements being provided <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet Free drugs and consumables 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

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	270
2	No. of PW registered for ANC	156
3	No. of PW received 4 or more ANC check-ups	121
4	Total number of institutional deliveries	NA
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	32
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	182
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	138
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	122
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	0

8	TB patients undergoing treatment			
	Indicators			Current year
	No. of presumptive TB patients identified			0
	No. of TB patients diagnosed out of the presumptive patients referred			0
No. of TB patients taking treatment in the AAM			0	
9	Community Based Screening for NCDs			
	% of target population administered CBAC			19016
	% of target population with score below 4			14877
	% of target population with score 4 and above			4139
10	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	1032	210	210
	Diabetes	921	128	128
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	1953	0	0
	Breast Cancer*	0	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?	Yes
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	No
5	If yes, Achievement under Kayakalp (Winner, recommendation) and score	No
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	05/10/2024
2	Facility aggregate score using ODK Took kit	22.93%

KEY OBSERVATIONS

Chring chapori Urban AAM-SHC, functioning in rented building, which poses challenges in community mobilization. This facility appears to be non-functional, with an OPD load of just 3-4 patients per day due to the absence of a permanent Medical Officer (MO). Although an MO was posted earlier, served for two months, later transferred to a higher-tier facility, reflecting a broader reluctance of doctors to serve at the SC level, particularly in rented setups. Limited physical space further restricts infrastructure development, and key issues include the absence of proper branding, inadequate record maintenance, lack of referral system displays. Establishing a government-owned facility could enhance stability and encourage doctors' long-term postings, ensuring better service delivery.

Annexure- List of essential equipment

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

Field Monitoring Format- Community Level

Date of Visit	7/3/2025
Name of Village/ Slum visited	Ino. Bordubi Gaon ,Gajalbasti
Details of nearest public health facility (from residence)	<i>Facility name: Gojal basti AAM Facility type: AAM-SC Distance: 250m</i>
Whether the AAM-SC/ AAM-UPHC/UAAM is in the same village/ slum area	AAM-SC
Accessible from nearest road	Yes

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: <i>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.</i></p> <p>Reasons probes: Proximity, convenience, availability of staff, free of cost services, trust on the provider.</p>	<table border="1"> <tr> <td></td> <td>√</td> <td rowspan="7">Reason for the choice</td> </tr> <tr> <td>Self (home remedies)</td> <td>yes</td> </tr> <tr> <td>Informal healers</td> <td></td> </tr> <tr> <td>private practitioners/hospitals,</td> <td>yes</td> </tr> <tr> <td>public/government primary hospitals (AAM-SHC/ PHC/ UPHC/ UAAM),</td> <td>Yes</td> </tr> <tr> <td>secondary/tertiary public hospitals (CHC/SDH/ DH/ MCH)</td> <td></td> </tr> <tr> <td>AYUSH practitioners.</td> <td></td> </tr> <tr> <td>Self (home remedies)</td> <td></td> <td></td> </tr> </table> <p>People in the community were referred to government health facilities for their check-ups. However, many also visited the Gojalbasti-AAM facility for antenatal care (ANC) check-ups, non-communicable disease (NCD) screenings, and treatment for common illnesses such as coughs and colds.</p>		√	Reason for the choice	Self (home remedies)	yes	Informal healers		private practitioners/hospitals,	yes	public/government primary hospitals (AAM-SHC/ PHC/ UPHC/ UAAM),	Yes	secondary/tertiary public hospitals (CHC/SDH/ DH/ MCH)		AYUSH practitioners.		Self (home remedies)		
	√	Reason for the choice																		
Self (home remedies)	yes																			
Informal healers																				
private practitioners/hospitals,	yes																			
public/government primary hospitals (AAM-SHC/ PHC/ UPHC/ UAAM),	Yes																			
secondary/tertiary public hospitals (CHC/SDH/ DH/ MCH)																				
AYUSH practitioners.																				
Self (home remedies)																				
<p>Topic: Community's Awareness of AAM-SC/ PHC/ UPHC</p>																				
<p>Can you share your views on the AAM-SC/ PHC/ UPHC in your area?</p> <p>How long has it been there?</p>	<p>May use local terms as recognized by the community</p> <p>Services may include: <i>RMCHA+N services, communicable diseases, NCDs, elderly, palliative care, etc.</i></p>	<p>People in the community had been visiting AAM for around 10-11 years, were highly satisfied with the services provided. They were well-informed about the various services available at the facility, including non-communicable disease (NCD) screenings, antenatal care (ANC), and expanded package services. This awareness was largely due to the</p>																		

<p><i>What are the health services being provided there?</i></p>	<p><i>Probes-less than 3 Months/ Less than 6 months/less than one yr./ Greater than one yr.)</i></p> <p><i>Probes-RCH, NCD, Communicable diseases, expanded packages)</i></p>	<p>efforts of ASHAs, ANMs, and the CHO, who actively informed the community about these services.</p>	
<p>Topic: Accessibility to primary healthcare services</p>			
<p><i>How do you access the facility from your residence?</i></p>	<p><i>Probes: Walk to the facility</i> <i>Use public transport</i> <i>Use personal transport</i></p>	<p>People traveled to the facility using personal transport, while those living nearby walked to the facility on foot.</p>	
<p><i>What are the challenges you face in accessing this facility?</i></p>	<p><i>Barriers may include:</i> <i>Terrain/ Geographical barriers, structural barriers within the facility or its premises; financial barriers, socio-cultural barriers...</i></p>	<p>According to the community at current they do not face any challenge to access the health care facility</p>	
<p><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?</i></p>		<p>Yes, NCD camp for screening is organized by the staff in the facility</p>	
<p>Topic: Availability of primary health care infrastructure and services</p>			
<p><i>What are your opinions on the building in which the primary healthcare facility is functioning?</i></p>	<p><i>Probes</i> - <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></p>	<p>Infrastructure and services</p>	<p>Response</p>
		<p><i>Condition of the building</i></p>	<p><input checked="" type="checkbox"/> Good <input type="checkbox"/> Neither good nor bad <input type="checkbox"/> Bad</p>
		<p><i>Maintenance</i></p>	<p><input checked="" type="checkbox"/> Good <input type="checkbox"/> Neither good nor bad <input type="checkbox"/> Bad</p>

<p><i>What more needs to be added to improve the treatment-seeking experience in this place?</i></p>	<p>- Power supply</p>	<p><i>Dedicated space for waiting and examination</i></p>	<p>Yes proper space is there</p>
		<p><i>Adequate seating arrangement</i></p>	<p>Yes</p>
		<p><i>Functional toilet</i></p>	<p>Yes</p>
		<p><i>Potable/ drinking water</i></p>	<p>Yes</p>
		<p><i>Power supply</i></p>	<p>Yes</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>Beneficiaries were highly satisfied with the AAM Gojalbasti staff, Asha and CHO, as they were treated like family whenever they visited the facility, making them feel at home. The facility had adequate space, and during winter, many people living nearby would gather in the facility's garden, where they sat for hours and engaged in conversations with one another.</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>All the necessary medicines were available at the facility, and none of the community members reported any complaints or faced any difficulties in accessing them, if in any case medicine is not available they can get it by travelling 2.5 km far from this place</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>All the prescribed tests were available at the facility. For tests that could not be conducted there, people visited the CHC or nearest lab to get them done.</p>	
<p>Topic: Acceptability of healthcare services</p>			
<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, the staff had proper knowledge of the services provided at the facility.</p>	

<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><i>Are you mobilized to use any services that would cost you, due to which you tend to avoid those services?</i></p>	<p><i>Innovative may include painless, time-saving or cost-saving methods or technology</i></p> <p><i>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></i></p>	<p>Community members did not face any difficulties when the hospital staff used methods, devices, or instruments for diagnosis or treatment.</p>
<p>Topic: Appropriateness of primary healthcare services delivered through AAM</p>		
<p><i>What are the main healthcare concerns that exist or emerge in your community? In the event of its occurrence, is the AAM providing relevant</i></p>	<p><i>Probe: To name out the diseases/ healthcare emergencies frequented by the community members</i></p> <p><i>Probe: To share some insights</i></p>	<p>Hypertension is the most common health issues in the community. However, all medicines and tests were provided free of cost, and people did not have to spend any money on healthcare services.</p>

<p><i>healthcare services?</i> <i>Are those services economical in terms of time and money?</i></p>		
<p>Topic: Community's involvement / participation</p>		
<p><i>Can you share about any activity/initiative in which you or your family participate to improve your personal/collective health of the community?</i></p> <p><i>How is the local community helping the AAM to function better?</i></p> <p><i>Please mention the activity and your contribution</i></p>	<p>Probes</p> <p><i>Setting health-related priorities</i></p> <p><i>Engagement with the Community Health Workers (ASHA/ equivalent)</i></p> <p><i>Engagement with Community-based platforms - VHSNC/ JAS/ MAS</i></p>	<p>ASHAs were able to easily achieve their targets due to the high level of cooperation from the community. Everyone possessed an Aadhaar card, and some ABHA IDs were also being created.</p> <p>Additionally, people attended yoga sessions whenever conducted at the facility and participate actively in the screening camps conducted by the facility when informed by the staff, they cooperate with their extended hearty cooperation to the facility staff so as to function it smoothly and render to the public services in their welfare</p>
<p>Topic: Unmet Needs</p>		
<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>Proper counselling was provided to the community regarding family planning.</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>Usually, they travel to the nearest medical facility outside the community in the case of their needs being unmet either to a private healthcare care facility or the higher tier of the public health care facility</p>
<p>Topic: Quality of Care provided through the primary healthcare facility</p>		
<p><i>What are your views on the quality of healthcare provided at the primary 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>	<p>Probes</p> <ul style="list-style-type: none"> - <i>Provider behaviour/ attitude</i> - <i>Waiting time</i> - <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 community was satisfied with the services they received at the AAM Gojalbasti facility. The staff maintained a cordial attitude toward the community, making them feel welcome. Whenever people visited the facility, they found it clean, including all the toilets. All check-ups were conducted free of cost whenever they needed, and medicines and diagnostic services were also available at no charge.</p>

Summary:

- For routine check-ups, such as antenatal care (ANC), blood pressure monitoring, blood sugar testing, and wound dressing, many individuals preferred public or government primary healthcare facilities (AAM-SC) due-to the availability of staff and free-of-cost services.

- Within the community, most people were referred to government health facilities for regular check-ups. However, many also visited the AAM Gojalbasti facility for services like ANC check-ups, non-communicable disease (NCD) screenings, and treatment for common illnesses such as coughs and colds.
- People in the community had been visiting AAM for 10-11 years and were highly satisfied with the services provided. They were well-informed about the various services available at the facility, including non-communicable disease (NCD) screenings, antenatal care (ANC), and expanded package services. This awareness was largely due to the efforts of ASHAs, ANMs, and the CHO, who actively informed the community about these services.
- People travelled to the facility using personal vehicles, while those living nearby walked to the facility on foot. People did not face any challenges in accessing the facility. ASHAs and ANMs organized outreach campaigns in the community, with the participation of the CHO. During these outreach camps, services such as antenatal care (ANC) check-ups, non-communicable disease (NCD) screenings, family planning counselling, distribution of eligible couple coupons, and contraception were provided to the community.
- The primary healthcare facility operated in a well-maintained building that was in good condition. The facility had dedicated spaces for waiting and examination, ensuring a comfortable experience for patients. Additionally, it was equipped with adequate seating arrangements, functional toilets, potable drinking water, and a reliable power supply, all of which contributed to a positive treatment-seeking experience.
- Beneficiaries were highly satisfied with the AAM Gojalbasti staff, as they were treated like family whenever they visited the facility, making them feel at home. The facility had adequate space, and during winter, many people living nearby would gather in the facility's herbal garden, where they sat for hours and engaged in conversations with one another.
- All the necessary medicines were available at the facility mostly in very few cases they have to move outside to the community to get medicines or tests, and none of the community members reported any complaints or faced any difficulties in accessing them. All the prescribed tests were available at the facility. For tests that could not be conducted there, people visited the CHC or District Hospital (DH) to get them done.
- Yes, the staff had proper knowledge of the services provided at the facility. Community members did not face any difficulties when the hospital staff used methods, devices, or instruments for diagnosis or treatment.
- Hypertension is the most common health issues in the community. However, all medicines and tests were provided free of cost, and people did not have to spend any money on healthcare services.
- People in the community actively participated in, NCD camps, VHND sessions, and sanitation camps, with 80-90% participation in these initiatives. ASHAs were able to easily achieve their targets due to the high level of cooperation from the community.

Everyone possessed an Aadhaar card, and ABHA IDs were also being created. Additionally, people regularly attended yoga sessions at the facility.

- Proper counselling was provided to the community regarding family planning. The community was satisfied with the services they received at the AAM Gojalbasti facility. The staff maintained a cordial attitude toward the community, making them feel welcome. Whenever people visited the facility, they found it clean, including all the toilets. All check-ups were conducted free of cost, and medicines and diagnostic services were also available at no charge.