



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



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OVERVIEW

INTRODUCTION

The Ministry of Health and Family Welfare (MoHFW), Government of India has assigned Population Research Centre (PRC) the task of field monitoring of essential components of National Health Mission (NHM) State Programme Implementation Plan for the year 2024-25. This report of Population Research Centre, Institute of Economic Growth, PRC- IEG Delhi presents the key findings from the field monitoring of essential components under NHM in Lakshadweep. The report is prepared on the basis of visits to the following public health care facilities visited by the PRC-IEG Team: Prof. Suresh Sharma and Dr. Kiran Sharma. Given the challenging geographical distribution of islands, It takes time to travel from one island to another. Sometimes an entire day and, in some cases, even 2-3 days. Travel between islands is primarily by ship, which is not available daily, and overall connectivity between islands is quite challenging. The Directorate of Health Secretariat mentioned that covering all the islands would take at least a month. Due to the transportation crisis, we managed to cover a total of seven facilities. The facilities which team visited are:

1. Rajiv Gandhi Hospital, Agatti,
2. Indra Gandhi Hospital, Kavaratti,
3. CHC Amini,
4. CHC Kadmat,
5. UPHC Agatti,
6. AAM- SHC(Ayurveda),
7. AAM-SHC (Homoeopathy).

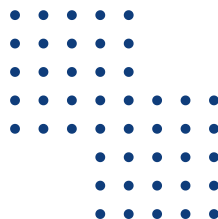
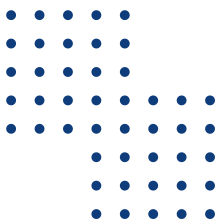
Meetings were held with the Directorate of Health Secretariat, Medical Superintendent, State Programme Manager, District Programme Manager, RCH Officer, Senior Specialist Doctors, Medical Officer In-Charge (MOIC), Medical Officers (MOs), and other supporting staff. Interactions were conducted to understand the strengths and weakness of the facilities in service provisioning

Lakshadweep is the smallest Union Territory of India, comprising 36 islands, of which only 11 are inhabited. The region faces significant healthcare challenges due to its remote location, lack of connectivity, and limited availability of medical resources. Although there have been recent improvements in healthcare infrastructure, the geographical isolation and restricted transport facilities continue to pose serious difficulties in accessing quality healthcare services.

Further advancements in healthcare are being planned, but the shortage of human resources, especially specialist doctors, remains a significant challenge. Due to this, the quality of healthcare services remains limited, as many critical medical procedures and treatments cannot be provided at local facilities.

Each inhabited island in Lakshadweep has one healthcare facility, totaling 11 across the territory.

1. **Kavaratti - District Hospital**
2. **Agatti - Speciality Hospital**
3. **Chetlat- PHC**
4. **Kiltan- PHC**
5. **Kadmat- CHC**
6. **Amini- CHC**
7. **Andrott- CHC**
8. **Kalpeni- PHC**
9. **Minicoy- CHC**
10. **Bitra- FAC**
11. **Bngaram- FAC**



Among these, Kavaratti has the highest population, while Bangaram has the lowest. Over the time, many healthcare facilities have been upgraded, with PHCs being converted into CHCs and CHCs being upgraded into district hospitals. Further improvements are underway, including preparations for the implementation of 12 Expanded Package Services.

KEY CHALLENGES

Geographical and Transportation Constraints

- Traveling between islands is extremely difficult and time-consuming, taking at least 1-2 days or even longer in some cases.
- The mode of transport is ships which operates only on specific days and at fixed timings, making movement highly restricted and inconvenient for medical emergencies.
- Emergency patient transfers rely on either ships, which are slow, or helicopters, which are expensive and unaffordable by the people.

Limited Healthcare Infrastructure and Services

- Although efforts have been made to upgrade healthcare facilities, many centers still lack essential medical equipment and resources.
- The absence of specialist doctors in CHCs limits the availability of advanced medical services.
- CHCs are unable to conduct critical procedures like C-sections due to the unavailability of anesthetists, forcing patients to be referred to Kavaratti's Indira Gandhi Hospital (IGH), leading to overburdening.

Shortage of Skilled Medical Professionals

- Retaining specialist doctors in Lakshadweep is a major challenge, as most specialists leave within 1-2 months due to the isolated and difficult working conditions.
- There is a lack of proper training programs for healthcare staff and management, affecting service quality.

Referral and Connectivity Issues

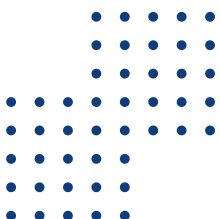
- Due to the vast sea-based geographical distribution, referring patients from one island to another is a major challenge.
- Emergency medical evacuations are expensive, slow, and unreliable, further complicating critical care situations.
- The limited connectivity between islands makes it difficult to ensure timely medical attention.

CHALLENGES AT FACILITIES

DISTRICT HOSPITALS

Lakshadweep's healthcare system relies heavily on Indira Gandhi Hospital (IGH), Kavaratti, and Rajiv Gandhi Hospital (RGH), Agatti. While IGH serves as the district's primary referral center, RGH functions as a key secondary care facility. Both hospitals face critical challenges that impact healthcare delivery and patient outcomes.

- Both hospitals struggle with a severe lack of specialist doctors, leading to frequent referrals to mainland hospitals.
- Emergency referrals to Kochi are hampered by limited transport options and delays in medical evacuations.
- Lack of a functional blood storage unit at RGH further complicates emergency and surgical care.
- Diagnostic limitations at RGH, including non-functional lab equipment and long repair times for digital X-rays, hinder timely medical interventions.
- Both hospitals face delays in procurement and maintenance of medical supplies, impacting service efficiency.
- RGH experiences an acute shortage of essential drugs, further restricting patient care.



- At RGH, OT services are restricted, and dialysis operates under a PPP model, affecting accessibility and affordability.
- RGH does not receive NHM funding, leading to financial uncertainty and delays in resource allocation.
- Infrastructure maintenance remains inadequate in both hospitals, affecting service efficiency and equipment longevity.



COMMUNITY HEALTH CENTRES (CHCs)

- CHC Amini has only a Gynecologist and Pediatrician, but lacks an Anesthetist and Physician, limiting critical care and surgical procedures.
- CHC Kadmat has no specialist doctors and is managed by only 1-2 General Duty Medical Officers (GDMOs), which is insufficient for handling serious medical cases.
- CHC Amini cannot perform C-sections or major surgeries due to the absence of an Anesthetist. Patients requiring surgical interventions must be referred to other islands, causing delays in critical care.
- CHC Kadmat provides only basic outpatient (OPD) and inpatient (IPD) services with no facility for surgeries or advanced emergency management, limiting treatment options.
- Both facilities frequently experience shortages of essential medicines and medical equipment, disrupting patient treatment.
- Procurement delays further exacerbate these shortages, leaving the facilities without necessary supplies for extended periods.
- Due to its coastal location, high moisture levels accelerate the degradation of medical equipment and medicines, reducing their lifespan to just 2-3 months.
- Poor network connectivity restricts telemedicine consultations, reducing access to remote specialist advice, which is crucial for handling complex cases locally.



Urban Primary Healthcare Centre (UPHC), Agatti

The Urban Primary Health Centre (UPHC), Agatti, is structurally separate but functionally dependent on Rajiv Gandhi Hospital (RGH), Agatti. While it has its own building, all major healthcare services, including staff, lab, and pharmacy, are provided by RGH. Currently, the only service operational at the UPHC is immunization, limiting its role in comprehensive primary healthcare delivery.



Ayushman Arogya Mandir- Sub Health Centres (AAM-SHC), Amini

Ayurveda (AYUSH)

Amini SHC (Ayurveda) operates as an Ayushman Arogya Mandir, focusing exclusively on Ayurvedic OPD services. The facility is linked to CHC Amini, The monthly OPD load ranges from 400-500 patients, indicating a steady demand for Ayurvedic treatment. The facility is well-stocked with Ayurvedic medicines, but diagnostic services are limited to blood pressure (BP) and blood sugar testing.

Homoeopathy (AYUSH)

Amini SHC (Homoeopathy) operates as an Ayushman Arogya Mandir – Homeopathy Centre, functioning under CHC Amini. The monthly OPD load ranges from 250-300 patients, indicating a moderate demand for homeopathic treatment. The facility is well-stocked with homeopathic dilutions and mother tinctures, but lacks patents (pre-formulated homeopathic medicines). The only diagnostic service available is blood sugar testing, while all other medical services are provided at CHC Amini.



RECOMMENDATIONS

- Provide better salaries, housing, and attractive incentive packages to encourage specialists to work on the islands. Implement short-term mandatory postings for specialists after course completion to ensure availability.
- Increase helicopter services for urgent cases, strengthen referral management, and set up a dedicated fund to support emergency patient transfers. Ensure minimal charges for helicopter referrals so that cost does not become a barrier for patients.
- Keep backup diagnostic machines, speed up repairs, and set up a local medicine storage unit to avoid shortages.
- Hire anesthetists and key specialists so that essential surgeries like C-sections can be done locally. Use visiting surgeon programs and telemedicine for better specialist support.
- Ensure UPHCs and CHCs offer OPD, maternal health, and chronic disease care independently so patients do not have to rely only on district hospitals.
- Push for NHM funding for all facilities to ensure steady financial support. Plan regular maintenance of buildings and equipment.
- Improve procurement planning for medicines and use moisture-resistant storage to prevent damage due to the coastal climate.
- Plan for Long-Term Healthcare Needs: Develop strategies to improve staffing, expand telemedicine, and form partnerships to make healthcare services more effective.

CHECKLISTS SUBMITTED

1. Rajiv Gandhi Hospital, Agatti
2. Indira Gandhi Hospital, Kavaratti
3. Community Health Centre, Amini
4. Community Health Centre, Kadmat
5. Urban Primary Health Centre, Agatti
6. AAM-SHC, Ayurveda, Amini
7. AAM-SHC, Homoeopathy, Amini

Field Monitoring Format -District Hospital (DH)

Date of Visit:

GENERAL INFORMATION	
Name of facility visited	Indra Gandhi Hospital, Kavaratti
Facility Type	<input checked="" type="checkbox"/> DH/ <input type="checkbox"/> SDH
FRU	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Next Referral Point	Facility: Rajiv Gandhi Hospital Distance: 54 Km

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
1. OPD Timing	8: 30 AM – 1:00 PM 2:00 PM- 5:00 PM	As reported/Hospital Citizen Charter Board
2. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: well-developed and spacious infrastructure, providing a comfortable environment for patients and staff. Cleanliness and hygiene were well-maintained throughout the facility, ensuring a safe and hygienic atmosphere. The available space is sufficient to accommodate patients, medical equipment, and essential services efficiently.	Observation
	<input checked="" type="checkbox"/> 24*7 running water facility <input checked="" type="checkbox"/> Facility is elderly and differently abled friendly (ramps at entry, wheel chair etc.) <input checked="" type="checkbox"/> Clean functional toilets available (separate for Male and female) <input checked="" type="checkbox"/> Drinking water facility available <input checked="" type="checkbox"/> OPD waiting area has sufficient sitting arrangement	Observation

A. PHYSICAL INFRASTRUCTURE				
Indicator	Response			Means of verification
	<input type="checkbox"/> ASHA rest room is available <input checked="" type="checkbox"/> Drug storeroom with rack is available Power backup: <input checked="" type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital Last major renovation done in (Year): 8- 9 Years back			
3. Number of functional in-patient beds	IPD: 50 No of ICU Beds available: 3			As reported/Hospital Citizen Charter Board
4. List of Services available	<ul style="list-style-type: none"> • 24*7 Emergency services • IPD Services • OPD Services • Dental • Paediatric • ENT • Ophthalmology 			As reported/Hospital 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	Y	
	2	O&G	Y	
	3	Pediatric	Y	
	4	General Surgery	Y	
	5	Anesthesiology	Y	
	6	Ophthalmology	Y	
	7	Dental	Y	

A. PHYSICAL INFRASTRUCTURE				
Indicator	Response			Means of verification
	8	Imaging Services (X – ray)	Y	
	9	Imaging Services (USG)	Y	
	10	District Early Intervention Centre (DEIC)	N	
	11	Nutritional Rehabilitation Centre (NRC)	N	
	12	SNCU/ Mother and Newborn Care Unit (MNCU)	Y	
	13	Comprehensive Lactation Management Centre (CLMC) / Lactation Management Unit (LMU)	Y	
	14	Neonatal Intensive Care Unit (NICU)	Y	
	15	Pediatric Intensive Care Unit (PICU)	Y	
	16	Labour Room Complex	Y	
	17	ICU	Y	
	18	Dialysis Unit	Y	
	19	Emergency Care	Y	
	20	Burn Unit	N	
	21	Teaching block (medical, nursing, paramedical)	Y	
	22	Skill Lab	N	
5. Emergency	General emergency: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facilities available for: 1. Triage: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 2. Resuscitation: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 3. Stabilization: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			As reported/Hospital Citizen Charter Board
6. Tele-medicine/Consultation services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average number of teleconsultation per day for the last month (Data source: Teleconsultation register/ e-Sanjeevani Portal)			Tele-medicine records register/ e-sanjeevani portal

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
	If the facility is also functioning as 'Hub' to any of the AAM (SHC/PHC/UPHC/UAAM): <input type="checkbox"/> Yes/ <input type="checkbox"/> No	
7. Operation Theatre available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, Tick the relevant <input checked="" type="checkbox"/> Single general OT <input type="checkbox"/> Elective OT-Major (General) <input type="checkbox"/> Elective OT-Major (Ortho) <input checked="" type="checkbox"/> Obstetrics & Gynecology OT <input checked="" type="checkbox"/> Ophthalmology/ENT OT <input type="checkbox"/> Emergency OT	Observation Ensure signage and protocol displays
8. Availability of functional Blood Bank	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No <ul style="list-style-type: none"> • If yes, number of units of blood currently available: _____ • No. of blood transfusions done in last month: _____ 	Blood Bank records Register
9. Whether blood is issued free, or user-fee is being charged	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Blood Bank records Register
10. Biomedical waste management practices	Sharp pit: <input type="checkbox"/> Deep Burial pit: <input type="checkbox"/> Incinerator: <input type="checkbox"/> Using Common Bio Medical Treatment plant: <input type="checkbox"/> Managed through outsourced agency <input checked="" type="checkbox"/> Other System, if any: (Specify)	Observation

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
11. IT Services	<ul style="list-style-type: none"> Desktop/ Laptop available: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Internet connectivity: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Quality/strength of internet connection: <u>Average</u> 	As reported

B. Human Resources		Means of verification- As reported				
12. Details of HR available in the facility (Sanctioned and In-place)	HR	Regular		Contractual		
		Sanctioned	Available	Sanctioned	Available	
	MO (MBBS)					
	Specialists	Medicine	1	1	0	0
		Ob-Gyn	1	1	1	1
		Pediatrician	0	0	1	1
		Anesthetist	0	0	5	2
		Surgeon	1	1	0	0
		Ophthalmologist	1	1	0	0
		Orthopedic	1	1	0	0
		Radiologist	0	0	1	1
		Pathologist	0	0	1	1
		Others	-	-	-	-
	Dentist	0	0	1	1	
	Staff Nurses/ GNMs	9	9	21	21	
	LTs	3	3	5	5	
	Pharmacist	2	2	2	2	
	Dental Technician/ Hygienist	1	1	1	10	

	Hospital/ Facility Manager				
	EmOC trained doctor	0	0	0	0
	LSAS trained doctor	0	0	0	0
	Others	-	-	-	-

C. Quality & Patient Safety Initiatives		Means of verification
13. Kayakalp	Initiated: YES <ul style="list-style-type: none"> Facility score:74 Award received:NIL 	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	<ul style="list-style-type: none"> Assessment done: NO Internal/State Facility score:- Certification Status: 	NQAS assessment report Verify certificate if awarded
15. LaQshya	<ul style="list-style-type: none"> Labour Room: <ul style="list-style-type: none"> ✓ LaQshya Certified – ✓ <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No ✓ If No, Assessment Done - <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No Operation Theatre: <ul style="list-style-type: none"> ✓ LaQshya Certified – ✓ <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No ✓ If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No 	LaQshya Assessment Report – check score Verify certificate if awarded
D. DRUGS & DIAGNOSTICS		
16. Availability of list of essential medicines (EML)/ drugs (EDL)	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	
https://nhm.gov.in/images/pdf/guidelines/iphs/iphs-revised-guidlines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf	<ul style="list-style-type: none"> If yes, total number of drugs in EDL _____176_____ EDL displayed in OPD Area: <input type="checkbox"/>Yes/ <input checked="" type="checkbox"/>No No. of drugs available on the day of visit (out of the EDL) :170 	Verify EDL Displayed

17. Implementation of DVDMS or similar supply chain management system	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one _____	Observation, Check software						
18. Shortage of 5 priority drugs from EDL in last 30 days, if any	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td style="width: 30px; height: 20px;">1</td><td rowspan="5" style="text-align: center; vertical-align: middle;">No shortage.</td></tr> <tr><td style="width: 30px; height: 20px;">2</td></tr> <tr><td style="width: 30px; height: 20px;">3</td></tr> <tr><td style="width: 30px; height: 20px;">4</td></tr> <tr><td style="width: 30px; height: 20px;">5</td></tr> </table>	1	No shortage.	2	3	4	5	As reported, check DVDMS, E-aushadhi, etc.
1	No shortage.							
2								
3								
4								
5								
19. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input checked="" type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage In last 6 months how many times there was shortage: One time	As reported Stock/Indent register						
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported						
<ul style="list-style-type: none"> • In-house tests 	Timing: 24*7 Total number of tests available against Essential Diagnostic tests list for DH : 34 (Take the list of tests available at DH)	Obtain the complete list of diagnostic tests performed in-house						
<ul style="list-style-type: none"> • Outsourced/ PPP 	Timing: Total number of tests provided by PPP provider : _____ Take the list of tests available from PPP Provider agency	Obtain the complete list of diagnostic tests outsourced to PPP provider agency						

	Total number of tests performed: <u>No Record</u>	
<ul style="list-style-type: none"> Whether the services are free for all 	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Observation, Records
<ul style="list-style-type: none"> Number of patients provided dialysis service 	○ Previous year: 3 ○ Current FY: 1 <i>*Calculate the approximate no. of patients provided dialysis per day</i>	Records
26. If there is any shortage of major instruments/ equipment (Refer to Annexure 10 in the link for list of equipment- https://nhm.gov.in/images/pdf/guidelines/iphs/iphs-revised-guidelines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf)		As reported
27. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days		As reported
28. Availability of delivery services	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported
<ul style="list-style-type: none"> If the facility is designated as FRU, whether C-sections are performed 	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Number of normal deliveries performed in last month: <u>15</u> No. of C-sections performed in last month: <u>14</u>	Verify C-section records from Maternity OT registers

<ul style="list-style-type: none"> • Comment on the condition of: 	<p>Labour room: The labour room was well-maintained and clean. All the necessary equipment was available, but the washrooms were slightly unclean.</p> <p>OT: The OT was also well-maintained and well-equipped. Proper cleanliness and hygiene provisions were there.</p> <p>Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	Observation
29. Status of JSY payments	<p>Payment is up to date: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No</p> <p>Average delay in payment to beneficiaries:</p> <p>(Average for how many days/benefeciary)</p> <p>Payment done till:</p> <p>Current month <input type="checkbox"/></p> <p>Last month <input type="checkbox"/></p> <p>Last 3 Months <input checked="" type="checkbox"/></p> <p>Last 6 Months <input type="checkbox"/></p> <p>Reasons for delay:</p>	Verify from JSY status report
30. Availability of JSSK entitlements	<p><input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p> <p><input checked="" type="checkbox"/> Free diet</p> <p><input checked="" type="checkbox"/> Free drugs and consumables</p>	As reported/As Displayed in Maternity Ward

	<input checked="" type="checkbox"/> Free diagnostics <input checked="" type="checkbox"/> Free blood services <input checked="" type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input checked="" type="checkbox"/> No user charges	
31. PMSMA services provided on 9 th of every month	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, how many high risks pregnancies are identified on 9 th for previous month : 05 If No, reasons thereof:	PMSMA Register/High Risk Pregnancy Register, Staff review
32. Line listing of high-risk pregnancies	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Verify Register availability
33. Practice related to Respectful Maternity Care	<input checked="" type="checkbox"/> Privacy maintained during examination ensured <input checked="" type="checkbox"/> Birth attendant allowed in Labour room <input checked="" type="checkbox"/> Obtaining Informed consent of the mother/ custodian <input checked="" type="checkbox"/> Safe care environment maintained	Observation, Patient review
34. Whether facility have registers for entering births and deaths	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Birth Register, Death Records
35. Number of Maternal Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records/Review
36. Number of Child Death reported in the facility	Previous year: 0 Current year:0	Maternal Deaths

		Records/R review
37. If Comprehensive Abortion Care (CAC) services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	CAC register
38. Availability of vaccines and hub cutter	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation Staff review
39. Number of newborns immunized with birth dose at the facility in last 3 months	84	Immunisation Register
40. Number of Newborns breastfed within one hour of birth during last month.	28	Verify BF records
41. Status of functionality of DEIC	<input checked="" type="checkbox"/> Fully functional with all staff in place <input type="checkbox"/> Functional with few vacancies (approx. 20%-30%) <input type="checkbox"/> Functional with more than 50% vacancies <input type="checkbox"/> Not functional/ All posts vacant	Observation
42. Number of sterilizations performed in last one month	2	FP Sterilizations register Verify if fixed days of sterilization exist
43. Availability of trained provider for IUCD/ PPIUCD	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported, Verify training received
44. Who counsels on FP services?	Counsellor <input type="checkbox"/> Staff Nurse <input checked="" type="checkbox"/> Medical Officer <input checked="" type="checkbox"/> Others (Specify)_____	As reported

45. Please comment on utilization of other FP services including FP Commodities- Condoms, OCPs, Antra etc.	Acceptance for condoms and OCPs are more.	As reported/observe FP registers/records if available		
46. FPLMIS has been implemented	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Check software		
47. Availability of functional Adolescent Friendly Health Clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, who provides counselling to adolescents: <u>Medical officer</u> Separate male and female counselors available: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	Observation, check AFHC register		
48. Whether facility has functional NCD clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If No, is there any fixed day or days in a week for NCD care at the facility? _____ days (Mention number of days)	Check NCD register		
49. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	As reported		
50. Number of individuals screened for the following in last 6 months:		Screened	Confirmed	NCD Register
	a. Hypertension	Record Mismanaged.		
	b. Diabetes			
	c. Oral Cancer			
	d. Breast Cancer			
e. Cervical Cancer				
51. Whether reporting weekly data in P, S and L form under IDSP	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Verify from IDSP reporting records		

52. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported, Observation
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average): 3%	DBT/Nikshay Report
	<ul style="list-style-type: none"> If anti-TB drugs available at the facility: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No If yes, are there any patients currently taking anti-TB drugs from the facility: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	DBT/Nikshay Report
	<ul style="list-style-type: none"> Availability of CBNAAT/ TruNat: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months <u>100%</u> 	DBT/Nikshay Report
	<ul style="list-style-type: none"> Are all TB patients tested for HIV?<input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Are all TB patients tested for Diabetes Mellitus: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	DBT/Nikshay Report
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months:	DBT/Nikshay Report
F. RECORDS, FINANCE, OTHERS		
53. Maintenance of records on	<ul style="list-style-type: none"> TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No TB Notification Registers: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Malaria cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Palliative cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Cases related to Dengue and Chikungunya: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Leprosy cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	Respective records
54. How much fund was received and utilized by the facility under NHM?	Fund Received last year: Fund utilized last year: <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 5px auto;">Fund in prev. FY</div>	Facility FMR

	<table border="1"> <thead> <tr> <th>Received</th> <th>Utilized</th> <th>% Utilization</th> </tr> </thead> <tbody> <tr> <td>5 L</td> <td>3.75L</td> <td>75%</td> </tr> </tbody> </table>	Received	Utilized	% Utilization	5 L	3.75L	75%	
	Received	Utilized	% Utilization					
	5 L	3.75L	75%					
List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:	RKS Register							
Reasons for underutilization of fund (if any)	Staff review							
55. Status of data entry in (match with physical records)	<ul style="list-style-type: none"> • HMIS: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • IHIP: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • HWC Portal: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • Nikshay Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated 	Check respective portals at the facility wrt last entries						
56. Frequency of RKS meeting (check and obtain minutes of last meeting held)	Once in a six months.	RKS Register						
57. Availability of ambulance services in the area	<input checked="" type="checkbox"/> Own ambulance available <input type="checkbox"/> DH/ SDH has contracted out ambulance services <input type="checkbox"/> Ambulances services with Centralized call center	As reported						

	<input type="checkbox"/> Government ambulance services are not available	
	Comment (if any):	
<ul style="list-style-type: none"> How many cases were referred here in the last month? 	Number: 7 Types of cases referred in: Accidental/ Deliveries (High Risk)	Referral-in register
<ul style="list-style-type: none"> How many cases were referred out last month? 	Number: 12 Types of cases referred out:	Out-referral register

Remarks & Observations

- The hospital struggles with specialist doctor shortages as specialists join but fail to retain due to the geographical remoteness of the island.
- Many specialists leave within a few months, making it difficult to ensure continuous and specialized medical services.
- Patient referral is a major challenge as Lakshadweep lacks advanced healthcare infrastructure to manage critical cases.
- The next referral hospital is in Kochi (Government Medical College, Kerala), which is far from the island, making emergency transfers logistically complex.
- There are only two referral transport options:
- The hospital is well-equipped, but due to the lack of specialists, healthcare services do not operate smoothly despite having necessary resources.

Field Monitoring Format -District Hospital (DH)

Date of Visit:17/02/2025

GENERAL INFORMATION	
Name of facility visited	Rajiv Gandhi Hospital
Facility Type	<input checked="" type="checkbox"/> DH/ <input type="checkbox"/> SDH
FRU	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
Next Referral Point	Facility: Indra Gandhi Hospital, Kavaratti Distance: 54 Kms

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
1. OPD Timing	8: 00 AM- 1 :00 PM 2: 00 PM- 5:00 PM	As reported/Hospital Citizen Charter Board
2. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: The hospital has a well-developed and spacious infrastructure, providing a comfortable environment for patients and staff. Cleanliness and hygiene were well-maintained throughout the facility, ensuring a safe and hygienic atmosphere. The available space is sufficient to accommodate patients, medical equipment, and essential services efficiently.	Observation
	<input checked="" type="checkbox"/> 24*7 running water facility <input checked="" type="checkbox"/> Facility is elderly and differently abled friendly (ramps at entry, wheel chair etc.) <input checked="" type="checkbox"/> Clean functional toilets available (separate for Male and female) <input checked="" type="checkbox"/> Drinking water facility available	Observation

A. PHYSICAL INFRASTRUCTURE				
Indicator	Response			Means of verification
	<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 Power backup: <input checked="" type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital Last major renovation done in (Year): _____			
3. Number of functional in-patient beds	IPD Beds: 50 No of ICU Beds available: 6			As reported/Hospital Citizen Charter Board
4. List of Services available	<ul style="list-style-type: none"> • 24*7 Emergency Services • OPD Services • IPD Services • Obs & Gynae • Paediatrics • Ophthalmic • Anaesthesiology • Imaging Services 			As reported/Hospital 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	N	
	2	O&G	Y	
	3	Pediatric	Y	
	4	General Surgery	Y	
	5	Anesthesiology	Y	
	6	Ophthalmology	N	
	7	Dental	Y	
	8	Imaging Services (X – ray)	Y	

A. PHYSICAL INFRASTRUCTURE					
Indicator	Response			Means of verification	
	9	Imaging Services (USG)	Y		
	10	District Early Intervention Centre (DEIC)	N		
	11	Nutritional Rehabilitation Centre (NRC)	N		
	12	SNCU/ Mother and Newborn Care Unit (MNCU)	Y		
	13	Comprehensive Lactation Management Centre (CLMC) / Lactation Management Unit (LMU)	Y		
	14	Neonatal Intensive Care Unit (NICU)	Y		
	15	Pediatric Intensive Care Unit (PICU)	Y		
	16	Labour Room Complex	Y		
	17	ICU	Y		
	18	Dialysis Unit	Y		
	19	Emergency Care	Y		
	20	Burn Unit	N		
	21	Teaching block (medical, nursing, paramedical)	N		
	22	Skill Lab	Y		
5. Emergency	General emergency: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facilities available for: 1. Triage: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 2. Resuscitation: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 3. Stabilization: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			As reported/Hospital Citizen Charter Board	
6. Tele-medicine/Consultation services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average number of teleconsultation per day for the last month (Data source: Teleconsultation register/ e-Sanjeevani Portal)			Tele-medicine records register/ e-sanjeevani portal	

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
	If the facility is also functioning as 'Hub' to any of the AAM (SHC/PHC/UPHC/UAAM): <input type="checkbox"/> Yes/ <input type="checkbox"/> No	
7. Operation Theatre available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, Tick the relevant <input type="checkbox"/> Single general OT <input checked="" type="checkbox"/> Elective OT-Major (General) <input checked="" type="checkbox"/> Elective OT-Major (Ortho) <input checked="" type="checkbox"/> Obstetrics & Gynecology OT <input checked="" type="checkbox"/> Ophthalmology/ENT OT <input type="checkbox"/> Emergency OT	Observation Ensure signage and protocol displays
8. Availability of functional Blood Bank	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No <ul style="list-style-type: none"> If yes, number of units of blood currently available: _____ No. of blood transfusions done in last month: _____ 	Blood Bank records Register
9. Whether blood is issued free, or user-fee is being charged	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Blood Bank records Register
10. Biomedical waste management practices	Sharp pit: <input type="checkbox"/> Deep Burial pit: <input type="checkbox"/> Incinerator: <input type="checkbox"/> Using Common Bio Medical Treatment plant: <input type="checkbox"/> Managed through outsourced agency <input checked="" type="checkbox"/> Other System, if any: (Specify)	Observation
11. IT Services	<ul style="list-style-type: none"> Desktop/ Laptop available: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 	As reported

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
	<ul style="list-style-type: none"> Internet connectivity: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No Quality/strength of internet connection: Average	

B. Human Resources		Means of verification- As reported				
12. Details of HR available in the facility (Sanctioned and In-place)	HR	Regular		Contractual		
		Sanctioned	Available	Sanctioned	Available	
	MO (MBBS)	5	3	7	2	
	Specialists	Medicine	1	0	0	0
		Ob-Gyn	0	0	1	1
		Pediatrician	0	0	1	1
		Anesthetist	0	0	1	1
		Surgeon	0	0	1	1
		Ophthalmologist	0	0	1	0
		Orthopedic	0	0	1	0
		Radiologist	0	0	1	1
		Pathologist	0	0	0	0
		Others				
	Dentist	0	0	1	1	
	Staff Nurses/ GNMs	0	0	23	23	
	LTs	2	2	1	1	
Pharmacist	1	1	2	2		
Dental Technician/ Hygienist	0	0	1	1		

	Hospital/ Facility Manager	0	0	0	0
	EmOC trained doctor	0	0	0	0
	LSAS trained doctor	1	0	0	0
	Others				

C. Quality & Patient Safety Initiatives		Means of verification
13. Kayakalp PARTIALLY	Initiated: YES <ul style="list-style-type: none"> Facility score: Award received: 	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	<ul style="list-style-type: none"> Assessment done: NO Internal/State Facility score: Certification Status: 	NQAS assessment report Verify certificate if awarded
15. LaQshya	<ul style="list-style-type: none"> Labour Room: <ul style="list-style-type: none"> ✓ LaQshya Certified – ✓ <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No ✓ If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No Operation Theatre: <ul style="list-style-type: none"> ✓ LaQshya Certified – ✓ <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No ✓ If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No 	LaQshya Assessment Report – check score Verify certificate if awarded
D. DRUGS & DIAGNOSTICS		
16. Availability of list of essential medicines (EML)/ drugs (EDL)	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	
https://nhm.gov.in/images/pdf/guidelines/iphs/iphs-revised-guidelines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf	<ul style="list-style-type: none"> If yes, total number of drugs in EDL : 232 EDL displayed in OPD Area: <input type="checkbox"/>Yes/ <input checked="" type="checkbox"/>No No. of drugs available on the day of visit (out of the EDL) _____ 197 _____ 	Verify EDL Displayed

17. Implementation of DVDMS or similar supply chain management system	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one _____	Observation, Check software						
18. Shortage of 5 priority drugs from EDL in last 30 days, if any	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td style="width: 30px; height: 20px;">1</td><td rowspan="5" style="padding-left: 10px;">Mostly Antibiotics</td></tr> <tr><td style="width: 30px; height: 20px;">2</td></tr> <tr><td style="width: 30px; height: 20px;">3</td></tr> <tr><td style="width: 30px; height: 20px;">4</td></tr> <tr><td style="width: 30px; height: 20px;">5</td></tr> </table>	1	Mostly Antibiotics	2	3	4	5	As reported, check DVDMS, E-aushadhi, etc.
1	Mostly Antibiotics							
2								
3								
4								
5								
19. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input checked="" type="checkbox"/> Acute shortage In last 6 months how many times there was shortage_____4____	As reported Stock/Indent register						
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported						
<ul style="list-style-type: none"> • In-house tests 	Timing: 24*7 Total number of tests available against Essential Diagnostic tests list for DH _____40_____ (Take the list of tests available at DH)	Obtain the complete list of diagnostic tests performed in-house						
<ul style="list-style-type: none"> • Outsourced/ PPP 	Timing: Total number of tests provided by PPP provider : _____ Take the list of tests available from PPP Provider agency	Obtain the complete list of diagnostic tests outsourced to PPP provider agency						

<ul style="list-style-type: none"> Whether the services are free for all 	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input type="checkbox"/> Free for all	Observation, Records
<ul style="list-style-type: none"> Number of patients provided dialysis service 	<input type="radio"/> Previous year ___ 1 _____ <input type="radio"/> Current FY ___ 2 _____ <i>*Calculate the approximate no. of patients provided dialysis per day</i>	Records
26. If there is any shortage of major instruments/ equipment (Refer to Annexure 10 in the link for list of equipment- https://nhm.gov.in/images/pdf/guidelines/iphs/iphs-revised-guidelines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf)		As reported
27. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days	<ul style="list-style-type: none"> Suction machine ESR Analyser 	As reported
28. Availability of delivery services	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported
<ul style="list-style-type: none"> If the facility is designated as FRU, whether C-sections are performed 	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Number of normal deliveries performed in last month: ___ 4 ___ No. of C-sections performed in last month: ___ 8 ___	Verify C-section records from Maternity OT registers

<ul style="list-style-type: none"> • Comment on the condition of: 	<p>Labour room: Cleanliness in the labour room was not well-maintained. The washrooms were very dirty, and some equipment was outdated or non-functional.</p> <p>OT: The OT was neat and clean, with good hygiene maintenance. All the necessary equipment was available as per requirements.</p> <p>Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	<p>Observation</p>
<p>29. Status of JSY payments</p>	<p>Payment is up to date: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No</p> <p>Average delay in payment to beneficiaries:</p> <p>(Average for how many days/beneficiary)</p> <p>Payment done till:</p> <p>Current month <input type="checkbox"/></p> <p>Last month <input type="checkbox"/></p> <p>Last 3 Months <input checked="" type="checkbox"/></p> <p>Last 6 Months <input type="checkbox"/></p> <p>Reasons for delay:</p>	<p>Verify from JSY status report</p>
<p>30. Availability of JSSK entitlements</p>	<p><input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p> <p><input checked="" type="checkbox"/> Free diet</p> <p><input checked="" type="checkbox"/> Free drugs and consumables</p>	<p>As reported/As Displayed in Maternity Ward</p>

	<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	
31. PMSMA services provided on 9 th of every month	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, how many high risks pregnancies are identified on 9 th for previous month If No, reasons thereof:	PMSMA Register/High Risk Pregnancy Register, Staff review
32. Line listing of high-risk pregnancies	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Verify Register availability
33. Practice related to Respectful Maternity Care	<input checked="" type="checkbox"/> Privacy maintained during examination ensured <input checked="" type="checkbox"/> Birth attendant allowed in Labour room <input checked="" type="checkbox"/> Obtaining Informed consent of the mother/ custodian <input checked="" type="checkbox"/> Safe care environment maintained	Observation, Patient review
34. Whether facility have registers for entering births and deaths	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Birth Register, Death Records
35. Number of Maternal Death reported in the facility	Previous year: 0 Current year:0	Maternal Deaths Records/Review
36. Number of Child Death reported in the facility	Previous year: 0 Current year:1	Maternal Deaths Records/Review

37. If Comprehensive Abortion Care (CAC) services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	CAC register
38. Availability of vaccines and hub cutter	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation Staff review
39. Number of newborns immunized with birth dose at the facility in last 3 months	52	Immunisation Register
40. Number of Newborns breastfed within one hour of birth during last month.	12	Verify BF records
41. Status of functionality of DEIC	<input checked="" type="checkbox"/> Fully functional with all staff in place <input type="checkbox"/> Functional with few vacancies (approx. 20%-30%) <input type="checkbox"/> Functional with more than 50% vacancies <input type="checkbox"/> Not functional/ All posts vacant	Observation
42. Number of sterilizations performed in last one month	3	FP Sterilizations register Verify if fixed days of sterilization exist
43. Availability of trained provider for IUCD/ PPIUCD	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported, Verify training received
44. Who counsels on FP services? GYNAEC	Counsellor <input type="checkbox"/> Staff Nurse <input checked="" type="checkbox"/> Medical Officer <input checked="" type="checkbox"/> Others (Specify)_____	As reported

45. Please comment on utilization of other FP services including FP Commodities- Condoms, OCPs, Antra etc.	Acceptance for condoms and OCPs are more			As reported/observe FP registers/records if available
46. FPLMIS has been implemented	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No			Check software
47. Availability of functional Adolescent Friendly Health Clinic	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No If yes, who provides counselling to adolescents: _____ Separate male and female counselors available: <input type="checkbox"/> Yes/ <input type="checkbox"/> No			Observation, check AFHC register
48. Whether facility has functional NCD clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If No, is there any fixed day or days in a week for NCD care at the facility? _____ days (Mention number of days)			Check NCD register
49. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No			As reported
50. Number of individuals screened for the following in last 6 months:		Screened	Confirmed	NCD Register
	a. Hypertension			
	b. Diabetes			
	c. Oral Cancer			
	d. Breast Cancer			
	e. Cervical Cancer			
51. Whether reporting weekly data in P, S and L form under IDSP	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			Verify from IDSP

		reporting records
52. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported, Observation
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) : 1%	DBT/Nikshay Report
	<ul style="list-style-type: none"> • If anti-TB drugs available at the facility: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • If yes, are there any patients currently taking anti-TB drugs from the facility: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	DBT/Nikshay Report
	<ul style="list-style-type: none"> • Availability of CBNAAT/ TruNat: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months <u>50%</u> 	DBT/Nikshay Report
	<ul style="list-style-type: none"> • Are all TB patients tested for HIV?<input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • Are all TB patients tested for Diabetes Mellitus: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	DBT/Nikshay Report
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months:	DBT/Nikshay Report
F. RECORDS, FINANCE, OTHERS		
53. Maintenance of records on	<ul style="list-style-type: none"> • TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • TB Notification Registers: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • Malaria cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • Palliative cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • Cases related to Dengue and Chikungunya: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No • Leprosy cases: <input checked="" type="checkbox"/>Yes/ <input type="checkbox"/>No 	Respective records
54. How much fund was received and utilized by the facility under NHM?	Fund Received last year: 5 L Fund utilized last year: 4.35L	Facility FMR

	Fund in prev. FY			
	Received	Utilized	% Utilization	
	5 L	4.35L	87%	
	List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:			RKS Register
	Reasons for underutilization of fund (if any)			Staff review
55. Status of data entry in (match with physical records)	<ul style="list-style-type: none"> • HMIS: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • IHIP: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • HWC Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated • Nikshay Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated 			Check respective portals at the facility wrt last entries
56. Frequency of RKS meeting (check and obtain minutes of last meeting held)	ONCE IN A MONTH			RKS Register
57. Availability of ambulance services in the area	<input checked="" type="checkbox"/> Own ambulance available <input type="checkbox"/> DH/ SDH has contracted out ambulance services			As reported

	<input type="checkbox"/> Ambulances services with Centralized call center <input type="checkbox"/> Government ambulance services are not available	
	Comment (if any):	
<ul style="list-style-type: none"> How many cases were referred here in the last month? 	Number: 18 Types of cases referred in: Injury, High Risk Pregnancy, Delivery, Trauma	Referral-in register
<ul style="list-style-type: none"> How many cases were referred out last month? 	Number: 9 Types of cases referred out:	Out-referral register

Remarks & Observations

- There is an acute shortage of medical staff, especially specialist doctors.
- Obstetric emergencies cannot be managed due to the absence of a gynecologist, leading to the referral of primi patients even in potentially manageable conditions.
- X-ray services are digital, but when the machine breaks down, repairs take excessive time, disrupting patient care.
- Laboratory equipment is mostly non-functional, affecting diagnostic efficiency.
- No blood storage unit, posing a major challenge for emergency care, surgeries, and maternal health management.
- Acute shortage of medicines and medical equipment, including essential drugs listed under EDL (Essential Drug List).
- Delays in procurement of new equipment and repair of non-functional machines further strain the facility's capacity.
- OT services are limited, with only orthopedic surgeries functioning, restricting comprehensive surgical care.
- The dialysis unit operates under a PPP (Public-Private Partnership) model, which may impact affordability and accessibility.
- The facility does not receive NHM funding; instead, funds are allocated through separate health programs, leading to financial uncertainty and delays in resource allocation.
- Infrastructure maintenance is inadequate, further affecting service delivery and equipment longevity.

Field Monitoring Format -Community Health Centre (CHC)/ U-CHC

Urban/ Rural:

Date of Visit:15/02/2025

General Information	
Name of facility visited	Community Health Centre, Amini
Facility Type	<input checked="" type="checkbox"/> CHC <input type="checkbox"/> U-CHC
FRU	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Next Referral Point	Facility: IGH Kavaratti Distance:53 Km

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

A. INFRASTRUCTURE		Means of Verification
Indicator	INFRASTRUCTURE	
1. OPD Timing	As reported/Hospital Citizen Charter Board 8:00 AM- 1:00 PM 3:00 PM – 5 :00 PM	As reported/Hospital Citizen Charter Board
2. Whether the facility is functioning in PPP mode	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	Observation
3. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: The hospital has ample space and a well-maintained building. Hygiene and cleanliness are properly maintained, and the renovation was done recently.	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)	Observation

A. INFRASTRUCTURE				Means of Verification	
Indicator	INFRASTRUCTURE				
	<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 Power backup: <input checked="" type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital				
4. Number of functional in-patient beds	30			As reported/Hospital Citizen Charter Board	
5. List of Services available	<ul style="list-style-type: none"> • Emergency • IPD • OPD • Obs & Gynae • Paediatric • Ophthalmic • Pharmacy • Medicine 			As reported/Hospital 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	Y		
	2	O&G	Y		
	3	Pediatric	Y		
	4	General Surgery	N		
	5	Anesthesiology	Y		
	6	Ophthalmology	N		
	7	Dental	Y		
	8	Imaging Services (X-ray)	Y		

A. INFRASTRUCTURE			Means of Verification		
Indicator	INFRASTRUCTURE				
	9	Imaging Services (USG)	Y		
	10	Newborn Stabilization Unit	Y		
<ul style="list-style-type: none"> If any of the specialists are available 24*7 	<input type="checkbox"/> 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 GDMOs	<input type="checkbox"/> Medicine <input type="checkbox"/> Pediatrician <input checked="" type="checkbox"/> Ob-Gyn <input type="checkbox"/> Anesthetist <input type="checkbox"/> Others, specify:			As reported	
<ul style="list-style-type: none"> Emergency 	General emergency: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facilities available for: 1. Triage: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 2. Resuscitation: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 3. Stabilization: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			Observation: Verify if triage area is marked	
6. Tele-medicine/Consultation services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average number of teleconsultations per day for the last month If the facility is also functioning as 'Hub' to any of the AAM (SHC/PHC/UPHC/UAAM) <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			Tele-medicine records register/ e-Sanjeevani Portal	
7. Operation Theatre available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, Major OT <input checked="" type="checkbox"/> Minor OT <input checked="" type="checkbox"/>			Observation Ensure signage and protocol displays	

A. INFRASTRUCTURE		Means of Verification
Indicator	INFRASTRUCTURE	
8. Availability of functional Blood Storage Unit As required.	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No <ul style="list-style-type: none"> If yes, number of units of blood currently available: _____ No. of blood transfusions done in last month: _____ 	Blood Storage Unit records, Register
9. Whether blood is issued free, or user-fee is being charged	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Blood Storage Unit records, Register
10. Biomedical waste management practices Transport to KOCHI	Sharp pit: <input type="checkbox"/> Deep Burial pit: <input checked="" type="checkbox"/> Incinerator: <input checked="" type="checkbox"/> Using Common Bio Medical Treatment plant: <input type="checkbox"/> Managed through outsourced agency <input type="checkbox"/> Other System, if any: (Specify)	Observation
11. IT Services infrastructure	<ul style="list-style-type: none"> Desktop/ Laptop available: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Internet connectivity: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Quality/strength of internet connection: _____ AVG____	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	2	1	1
	Specialists	Medicine	0	0	1	1
		Ob-Gyn	0	0	1	1

	Pediatrician	0	0	1	1
	Anesthetist	0	0	1	1
	Dentist	1	0	1	1
	SNs/ GNMs	5	3	9	9
	LTs	2	2	2	2
	Pharmacist	2	1	2	2
	Dental Assistant/ Hygienist	1	0	1	1
	Hospital/ Facility Manager	0	0	0	0
	EmOC trained doctor	0	0	0	0
	LSAS trained doctor	0	0	0	0
	Others				

C. QUALITY PROGRAMMES		Means of verification
13. Kayakalp	Initiated: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facility score: Award received: Winner <input type="checkbox"/> Commendation <input type="checkbox"/>	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	Assessment done: NO Internal/State Facility score: Certification Status:	NQAS assessment report Verify certificate if awarded
15. LaQshya	Labour Room: LaQshya Certified - <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No Operation Theatre:	LaQshya Assessment Report – check score Verify certificate if awarded

	LaQshya Certified - <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No	
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D. DRUGS AND DIAGNOSTICS

16. Availability of list of essential medicines (EML)/ drugs (EDL)	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Verify EDL Displayed
	If yes, total number of drugs in EDL _____ 71 ____ EDL displayed in OPD Area: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No No. of drugs available on the day of visit (out of the EDL) ____ 176 ____	

17. Implementation of DVDMS or similar supply chain management system	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one _____	Observation, Check software
---	---	-----------------------------

18. Shortage of 5 priority drugs from EDL in last 30 days, if any	1	No shortage was There.	As reported, check DVDMS, E-aushadhi, etc.
	2		
	3		
	4		
	5		

19. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input checked="" type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage	As reported
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	In last 6 months, how many times there was a shortage_____	Stock/Indent register
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported;
<ul style="list-style-type: none"> In-house tests 	Timing: 24*7 Total number of tests available against Essential Diagnostic tests list for CHC _____	Obtain the complete list of diagnostic tests performed in-house
<ul style="list-style-type: none"> Outsourced/ PPP 	Timing: Total number of tests Provided by PPP Provider _____0_____	Obtain the complete list of diagnostic tests outsourced/done in PPP mode
21. X-ray services is available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, type & no. of functional X-ray machine is available in the hospital: Is the X-ray machine AERB certified: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation
22. Whether diagnostic services (lab, X-ray, USG etc.) are free for all	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	As reported

23. Availability of Testing kits/ Rapid Diagnostic Kits	<input type="checkbox"/> Sufficient Supply <input checked="" 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))		As reported
25. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days		As reported
E. KEY NATIONAL HEALTH PROGRAMMES		
26. Availability of delivery services	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported
<ul style="list-style-type: none"> If the facility is designated as FRU, whether C-sections are performed 	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No Number of normal deliveries performed in last month: ____0____ No. of C-sections performed in last month: ____1____	Verify C-section records from Maternity OT registers
<ul style="list-style-type: none"> Comment on condition of: 	Labour room: The labour room was well-maintained and clean, but the suction apparatus was not functional. OT: The OT had adequate space, but due to the unavailability of a surgeon and lack of surgeries, there was a shortage of equipment.	Observation

	Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	
27. Status of JSY payments	<p>Payment is up to date: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No</p> <p>Average delay: (Average for how many days/patients)</p> <p>Payment done till:</p> <p>Payment done till:</p> <p>Current month <input type="checkbox"/></p> <p>Last month <input type="checkbox"/></p> <p>Last 3 Months <input checked="" type="checkbox"/></p> <p>Last 6 Months <input type="checkbox"/></p> <p>Reasons for delay:</p>	Verify from JSY status report
28. Availability of JSSK entitlements	<p><input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p> <p><input checked="" type="checkbox"/> Free diet</p>	As reported/As Displayed in Maternity Ward

	<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	
29. PMSMA services provided on 9 th of every month	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, how many high risks pregnancies are identified on 9 th for previous month : 4 If No, reasons thereof:	PMSMA Register/High Risk Pregnancy Register, Staff review
30. Line listing of high-risk pregnancies	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	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	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Birth Register, Death Records
33. Number of Maternal Death reported in the facility	Previous year: 0	Maternal Deaths

	Current year: 0	Records/Review
34. Number of Child Death reported in the facility	Previous year: 0 Current year:0	Maternal Deaths Records/Review
35. If Comprehensive Abortion Care (CAC) services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	CAC register
36. Availability of vaccines and hub cutter	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation Staff review
37. Number of newborns immunized with birth dose at the facility in last 3 months	2	Immunisation Register
38. Newborns breastfed within one hour of birth during last month	2	Verify BF records
39. Number of sterilizations performed in last one month	0	FP Sterilizations register Verify if fixed days of sterilization exist
40. Availability of trained provider for IUCD/ PPIUCD	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported, Verify training received
41. Who counsels on FP services?	Counsellor <input checked="" type="checkbox"/> Staff Nurse <input checked="" type="checkbox"/> Medical Officer <input checked="" type="checkbox"/> Others (Specify)_____	As reported
42. Please comment on utilization of other FP services including Condoms, OCPs, Antra	Condoms and OCPs	Observation/ FP records and registers
43. FPLMIS has been implemented	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Check software

44. Availability of functional Adolescent Friendly Health Clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, who provides counselling to adolescents: _____ Separate male and female counselors available: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	Observation, check AFHC register																										
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? _____ days (Mention number of days)	Check NCD register																										
46. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No																											
47. Number of individuals screened for the following in last 6 months:	<table border="1"> <thead> <tr> <th data-bbox="837 1155 1083 1328">NCD</th> <th data-bbox="1083 1155 1161 1328">Screened</th> <th data-bbox="1161 1155 1257 1328">Confirmed</th> <th data-bbox="1257 1155 1401 1328">NCD Register</th> </tr> </thead> <tbody> <tr> <td data-bbox="837 1328 1083 1406">a. Hypertension</td> <td data-bbox="1083 1328 1161 1406">431</td> <td data-bbox="1161 1328 1257 1406">32</td> <td data-bbox="1257 1328 1401 1406"></td> </tr> <tr> <td data-bbox="837 1406 1083 1440">b. Diabetes</td> <td data-bbox="1083 1406 1161 1440">122</td> <td data-bbox="1161 1406 1257 1440">13</td> <td data-bbox="1257 1406 1401 1440"></td> </tr> <tr> <td data-bbox="837 1440 1083 1485">c. Oral Cancer</td> <td data-bbox="1083 1440 1161 1485">28</td> <td data-bbox="1161 1440 1257 1485">0</td> <td data-bbox="1257 1440 1401 1485"></td> </tr> <tr> <td data-bbox="837 1485 1083 1552">d. Breast Cancer</td> <td data-bbox="1083 1485 1161 1552">39</td> <td data-bbox="1161 1485 1257 1552">0</td> <td data-bbox="1257 1485 1401 1552"></td> </tr> <tr> <td data-bbox="837 1552 1083 1630">e. Cervical Cancer</td> <td data-bbox="1083 1552 1161 1630">20</td> <td data-bbox="1161 1552 1257 1630">0</td> <td data-bbox="1257 1552 1401 1630"></td> </tr> </tbody> </table>				NCD	Screened	Confirmed	NCD Register	a. Hypertension	431	32		b. Diabetes	122	13		c. Oral Cancer	28	0		d. Breast Cancer	39	0		e. Cervical Cancer	20	0	
NCD	Screened	Confirmed	NCD Register																									
a. Hypertension	431	32																										
b. Diabetes	122	13																										
c. Oral Cancer	28	0																										
d. Breast Cancer	39	0																										
e. Cervical Cancer	20	0																										
48. Whether reporting weekly data in P, S and L form under IDSP	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			Verify from IDSP reporting records																								
49. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			As reported, Observation																								

	<p>If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____1%__</p>	DBT/Nikshay Report
	<p>If anti-TB drugs available at the facility: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>If yes, are there any patients currently taking anti-TB drugs from the facility: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	DBT/Nikshay Report
	<p>Percent of patients tested through CBNAAT/ TruNat for Drug resistance in the last 6 months _____100%_____</p>	DBT/Nikshay Report
	<p>Is there a sample transport mechanism in place for:</p> <p>Investigations within public sector for TB testing? <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Investigations within public sector for other tests? <input type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Outsourced testing? <input type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	As reported
	<p>Are all TB patients tested for HIV? <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Are all TB patients tested for Diabetes Mellitus: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	DBT/Nikshay Report
	<p>Percent of TB Patients for whom DBT installments have been initiated under</p>	DBT/Nikshay Report

	Nikshay Poshan Yojana in the last 6 months: 100%	
50. Status on Leprosy eradication programme	<p>Nos. of new case detected by Field Worker in last 12 months: 0</p> <p>Out of those, how many are having Gr. II deformity:</p> <p>Frequency of Community Surveillance:</p>	Facility Register/Records for leprosy
F. RECORDS, FINANCE, OTHERS		
51. Maintenance of records on	<p>TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>TB Notification Registers: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Malaria cases: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Palliative cases: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Cases related to Dengue and Chikungunya: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Leprosy cases: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	Respective records
52. How much fund was received and utilized by the facility under NHM?	<p>Fund Received last year: No Record</p> <p>Fund utilized last year: No Record</p>	Facility FMR

	Fund in prev. FY	
	Utilized	% Ut
	List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:	RKS Register
Reasons for underutilization of fund (if any)	Staff review	
53. Status of data entry in (match with physical records)	<p>HMIS: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated</p> <p>MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated</p> <p>IHIP: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated</p> <p>HWC Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated</p> <p>Nikshay Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated</p>	Check respective portals at the facility wrt last entries
54. Frequency of RKS meeting (check and obtain minutes of last meeting held)		RKS Register
55. Availability of ambulance services in the area	<input checked="" type="checkbox"/> CHC own ambulance available <input type="checkbox"/> CHC has contracted out ambulance services	As reported

	<input type="checkbox"/> Ambulances services with Centralized call centre <input type="checkbox"/> Government ambulance services are not available	
	Comment (if any):	
<ul style="list-style-type: none"> How many cases from sub centre/ PHC were referred to this CHC last month? 	Number: - 0 Types of cases referred in:	Referral-in register
<ul style="list-style-type: none"> How many cases from the CHC were referred to the DH last month? 	Number: 5 Types of cases referred out:	Referral Out register

Remarks & Observations

- The CHC has only a Gynecologist and Pediatrician, but lacks other essential specialists, particularly Anesthetists and Physicians.
- No round-the-clock (24x7) specialist services; in emergencies, doctors must be called on duty.
- Due to lack of critical care services, patients often need to travel to other islands for treatment.
- Due to the absence of an Anesthetist, C-sections and major surgeries cannot be performed at CHC Amini.
- Emergency cases requiring surgical intervention must be referred to another island, causing delays and increased risks for patients.
- Essential medicines and equipment frequently run out, causing difficulties in patient treatment and pharmacy availability.
- Logistics delays in procurement further worsen the situation, leaving the facility without critical supplies for extended periods.
- The high moisture content from the sea causes rapid damage to medical equipment and medicines.
- Most lab equipment and medicines have a lifespan of only 2-3 months, leading to frequent breakdowns and shortages.

Field Monitoring Format -Community Health Centre (CHC)/ U-CHC

Urban/ Rural:

Date of Visit: 15/02/2025

General Information	
Name of facility visited	Community Health Centre, Kadmat
Facility Type	<input checked="" type="checkbox"/> CHC <input type="checkbox"/> U-CHC
FRU	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Accessible from nearest road head	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Next Referral Point	Facility: IGH, Kavaratti Distance: 76 Km

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

A. INFRASTRUCTURE		Means of Verification
Indicator	INFRASTRUCTURE	
1. OPD Timing	As reported/Hospital Citizen Charter Board 8: 00 AM- 1: 00 PM 3:00 PM- 5:00 PM	As reported/Hospital Citizen Charter Board
2. Whether the facility is functioning in PPP mode	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation
3. Condition of infrastructure/ building Please comment on the condition and tick the appropriate box	Comments: The infrastructure was excellent and well-maintained, with no shortage of space. Cleanliness was very well maintained, and overall, everything was in great condition.	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	Observation

A. INFRASTRUCTURE				Means of Verification	
Indicator	INFRASTRUCTURE				
	<input type="checkbox"/> OPD waiting area has sufficient sitting arrangement <input type="checkbox"/> ASHA rest room is available <input checked="" type="checkbox"/> Drug storeroom with rack is available Power backup: <input checked="" type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital				
4. Number of functional in-patient beds	20			As reported/Hospital Citizen Charter Board	
5. List of Services available	Since there is an acute shortage of the Human Resources, So only IPD, OPD , Emergency services (rarely) and Imaging are provided.			As reported/Hospital 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	N		
	2	O&G	N		
	3	Pediatric	N		
	4	General Surgery	N		
	5	Anesthesiology	N		
	6	Ophthalmology	N		
	7	Dental	N		
	8	Imaging Services (X-ray)	Y		

A. INFRASTRUCTURE			Means of Verification
Indicator	INFRASTRUCTURE		
	9	Imaging Services (USG)	Y
	10	Newborn Stabilization Unit	Y
<ul style="list-style-type: none"> If any of the specialists are available 24*7 <p>Only MOs</p>	<input type="checkbox"/> Yes available <input 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 type="checkbox"/> Medicine <input type="checkbox"/> Pediatrician <input type="checkbox"/> Ob-Gyn <input type="checkbox"/> Anesthetist <input type="checkbox"/> Others, specify:		As reported
<ul style="list-style-type: none"> Emergency 	General emergency: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facilities available for: 1. Triage: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 2. Resuscitation: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No 3. Stabilization: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No		Observation: Verify if triage area is marked
6. Tele-medicine/Consultation services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average number of teleconsultations per day for the last month If the facility is also functioning as 'Hub' to any of the AAM (SHC/PHC/UPHC/UAAM) <input type="checkbox"/> Yes/ <input type="checkbox"/> No		Tele-medicine records register/ e-Sanjeevani Portal
7. Operation Theatre available	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No If yes, Major OT <input type="checkbox"/>		Observation Ensure signage and protocol displays

A. INFRASTRUCTURE		Means of Verification
Indicator	INFRASTRUCTURE	
	Minor OT <input checked="" type="checkbox"/>	
8. Availability of functional Blood Storage Unit In emergency cases only.	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No <ul style="list-style-type: none"> If yes, number of units of blood currently available: _____ No. of blood transfusions done in last month: _____ 	Blood Storage Unit records, Register
9. Whether blood is issued free, or user-fee is being charged	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	Blood Storage Unit records, Register
10. Biomedical waste management practices	Sharp pit: <input checked="" type="checkbox"/> Deep Burial pit: <input checked="" type="checkbox"/> Incinerator: <input type="checkbox"/> Using Common Bio Medical Treatment plant: <input type="checkbox"/> Managed through outsourced agency <input type="checkbox"/> Other System, if any: (Specify)	Observation
11. IT Services infrastructure	<ul style="list-style-type: none"> Desktop/ Laptop available: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Internet connectivity: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Quality/strength of internet connection: _____	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)		3	2	2	2
	Specialists	Medicine	0	0	0	0

	Ob-Gyn	0	0	0	0
	Pediatrician	0	0	0	0
	Anesthetist	0	0	0	0
	Dentist	0	0	1	1
	SNs/ GNMs	5	1	4	6
	LTs	1	1	1	1
	Pharmacist	2	1	2	2
	Dental Assistant/ Hygienist	1	1	0	0
	Hospital/ Facility Manager	0	0	0	0
	EmOC trained doctor	0	0	0	0
	LSAS trained doctor				
	Others				

C. QUALITY PROGRAMMES		Means of verification
13. Kayakalp	Initiated: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Facility score: 93 Award received: Winner <input type="checkbox"/> Commendation <input type="checkbox"/>	Kayakalp Assessment report Verify certificate if awarded
14. NQAS	Assessment done: NOInternal/State Facility score: Certification Status:	NQAS assessment report Verify certificate if awarded
15. LaQshya	Labour Room: LaQshya Certified - <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No Operation Theatre:	LaQshya Assessment Report – check score Verify certificate if awarded

	LaQshya Certified - <input type="checkbox"/> Yes/ <input type="checkbox"/> No If No, Assessment Done - <input type="checkbox"/> Yes/ <input type="checkbox"/> No	
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D. DRUGS AND DIAGNOSTICS

16. Availability of list of essential medicines (EML)/ drugs (EDL)	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Verify EDL Displayed	
	If yes, total number of drugs in EDL____195____ EDL displayed in OPD Area: <input type="checkbox"/> Yes/ <input type="checkbox"/> No No. of drugs available on the day of visit (out of the EDL) _____		
17. Implementation of DVDMS or similar supply chain management system	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one_____	Observation, Check software	
18. Shortage of 5 priority drugs from EDL in last 30 days, if any	1	Most of the time, There is an acute Shortage.	As reported, check DVDMS, E-aushadhi, etc.
	2		
	3		
	4		
	5		
19. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input checked="" type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage	As reported	

	In last 6 months, how many times there was a shortage_____	Stock/Indent register
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported;
<ul style="list-style-type: none"> In-house tests 	Timing: Total number of tests available against Essential Diagnostic tests list for CHC ___63___	Obtain the complete list of diagnostic tests performed in-house
<ul style="list-style-type: none"> Outsourced/ PPP 	Timing: Total number of tests Provided by PPP Provider ___0___	Obtain the complete list of diagnostic tests outsourced/done in PPP mode
21. X-ray services is available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, type & no. of functional X-ray machine is available in the hospital: Is the X-ray machine AERB certified: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation
22. Whether diagnostic services (lab, X-ray, USG etc.) are free for all	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	As reported

23. Availability of Testing kits/ Rapid Diagnostic Kits	<input type="checkbox"/> Sufficient Supply <input checked="" 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))		As reported
25. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days		As reported
E. KEY NATIONAL HEALTH PROGRAMMES		
26. Availability of delivery services	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	As reported
<ul style="list-style-type: none"> If the facility is designated as FRU, whether C-sections are performed 	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No Number of normal deliveries performed in last month: _____ 1 _____ No. of C-sections performed in last month: _____ 0 _____	Verify C-section records from Maternity OT registers
<ul style="list-style-type: none"> Comment on condition of: 	Labour room: Since deliveries rarely take place here, with an average of only 1-2 per month, the delivery room remains mostly closed, leading to poor cleanliness. Due to lack of use, some equipment had also become non-functional. OT: Non functional.	Observation

	<p>Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	
27. Status of JSY payments	<p>Payment is up to date: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No</p> <p>Average delay: (Average for how many days/patients)</p> <p>Payment done till: Payment done till: Current month <input type="checkbox"/> Last month <input type="checkbox"/> Last 3 Months <input checked="" type="checkbox"/> Last 6 Months <input type="checkbox"/></p> <p>Reasons for delay:</p>	Verify from JSY status report
28. Availability of JSSK entitlements	<p><input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>If yes, whether all entitlements being provided</p> <p><input checked="" type="checkbox"/> Free delivery services (Normal delivery/ C-section)</p> <p><input checked="" type="checkbox"/> Free diet</p>	As reported/As Displayed in Maternity Ward

	<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	
29. PMSMA services provided on 9 th of every month	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, how many high risks pregnancies are identified on 9 th for previous month : 7 If No, reasons thereof:	PMSMA Register/High Risk Pregnancy Register, Staff review
30. Line listing of high-risk pregnancies	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	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	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Birth Register, Death Records
33. Number of Maternal Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths

		Records/Review
34. Number of Child Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records/Review
35. If Comprehensive Abortion Care (CAC) services available	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	CAC register
36. Availability of vaccines and hub cutter	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Observation Staff review
37. Number of newborns immunized with birth dose at the facility in last 3 months	3	Immunisation Register
38. Newborns breastfed within one hour of birth during last month	1	Verify BF records
39. Number of sterilizations performed in last one month	0	FP Sterilizations register Verify if fixed days of sterilization exist
40. Availability of trained provider for IUCD/ PPIUCD	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	As reported, Verify training received
41. Who counsels on FP services?	Counsellor <input checked="" type="checkbox"/> Staff Nurse <input checked="" type="checkbox"/> Medical Officer <input checked="" type="checkbox"/> Others (Specify)_____	As reported
42. Please comment on utilization of other FP services including Condoms, OCPs, Antra	Acceptance for Condoms and OCPs are more.	Observation/ FP records and registers
43. FPLMIS has been implemented	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No	Check software

44. Availability of functional Adolescent Friendly Health Clinic	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, who provides counselling to adolescents: _____ Separate male and female counselors available: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	Observation, check AFHC register		
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? _____ days (Mention number of days)	Check NCD register		
46. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No			
47. Number of individuals screened for the following in last 6 months:	NCD	Screened	Confirmed	NCD Register
	a. Hypertension	No proper record maintained.		
	b. Diabetes			
	c. Oral Cancer			
	d. Breast Cancer			
e. Cervical Cancer				
48. Whether reporting weekly data in P, S and L form under IDSP	<input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			Verify from IDSP reporting records
49. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No			As reported, Observation

	<p>If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____5%__</p>	<p>DBT/Nikshay Report</p>
	<p>If anti-TB drugs available at the facility: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>If yes, are there any patients currently taking anti-TB drugs from the facility: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	<p>DBT/Nikshay Report</p>
	<p>Percent of patients tested through CBNAAT/ TruNat for Drug resistance in the last 6 months _____30%_____</p>	<p>DBT/Nikshay Report</p>
	<p>Is there a sample transport mechanism in place for:</p> <p>Investigations within public sector for TB testing? <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Investigations within public sector for other tests? <input type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Outsourced testing? <input type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	<p>As reported</p>
	<p>Are all TB patients tested for HIV? <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Are all TB patients tested for Diabetes Mellitus: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	<p>DBT/Nikshay Report</p>
	<p>Percent of TB Patients for whom DBT installments have been initiated under</p>	<p>DBT/Nikshay Report</p>

	Nikshay Poshan Yojana in the last 6 months:	
50. Status on Leprosy eradication programme	<p>Nos. of new case detected by Field Worker in last 12 months: 0</p> <p>Out of those, how many are having Gr. II deformity:</p> <p>Frequency of Community Surveillance:</p>	Facility Register/Records for leprosy
F. RECORDS, FINANCE, OTHERS		
51. Maintenance of records on	<p>TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>TB Notification Registers: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Malaria cases: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Palliative cases: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Cases related to Dengue and Chikungunya: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p> <p>Leprosy cases: <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No</p>	Respective records
52. How much fund was received and utilized by the facility under NHM?	<p>Fund Received last year:</p> <p>They have no record.</p> <p>Fund utilized last year:</p>	Facility FMR

	Fund in prev. FY			
	Received	Utilized		% Utilization
	They have no record.			
	List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:		RKS Register	
	Reasons for underutilization of fund (if any)		Staff review	
53. Status of data entry in (match with physical records)	HMIS: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated IHIP: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated HWC Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated Nikshay Portal: <input checked="" type="checkbox"/> Updated/ <input type="checkbox"/> Not updated		Check respective portals at the facility wrt last entries	
54. Frequency of RKS meeting (check and obtain minutes of last meeting held)	Every Month		RKS Register	
55. Availability of ambulance services in the area	<input checked="" type="checkbox"/> CHC own ambulance available <input type="checkbox"/> CHC has contracted out ambulance services <input checked="" type="checkbox"/> Ambulances services with Centralized call centre		As reported	

	<input type="checkbox"/> Government ambulance services are not available	
	Comment (if any):	
<ul style="list-style-type: none"> How many cases from sub centre/ PHC were referred to this CHC last month? 	Number: 0 Types of cases referred in:	Referral-in register
<ul style="list-style-type: none"> How many cases from the CHC were referred to the DH last month? 	Number: 6s Types of cases referred out:	Referral Out register

Remarks & Observations

- Only basic OPD and IPD services are provided, and no major medical procedures or surgeries are performed.
- Lab tests and medicines are not consistently available, leading to delayed diagnosis and treatment.
- Emergency services are inadequate, as only minor cases can be managed locally.
- Patients requiring advanced care must be referred to Indira Gandhi Hospital, Kavaratti.
- Travel is only possible via sea, with ships running on alternate days at fixed timings.
- There is no dedicated emergency transport system, causing delays in critical patient transfers.

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

Urban /Rural:URBAN

Date of Visit: 17/02/2025

A. General Information	
1. State	LAKSHADWEEP
2. District Name	Agatti Island
3. Block/Taluka Name	Agatti Island
4. Name of Facility	Urban Primary Health Centre, Agatti
5. Type of Facility	<input type="checkbox"/> PHC-AAM <input checked="" type="checkbox"/> UPHC-AAM
6. NIN of the facility	5768908
7. No. of days in a week facility is operational	7 Days
8. OPD Timings	8:00 AM- 1:00 PM 3:00 PM- 5:00 PM
9. Month & Year of operationalization of AAM	April 2023
10. Details of co-location, if any <i>(If any co-located SHC)</i>	
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	Rajiv Gandhi Hospital, Agatti
13. Distance of next referral facility (in Km)	Attached to Rajiv Gandhi Hospital
14. If UPHC functions as a Polyclinic (Yes/No)	-
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
1. Number of Villages/Wards	Agatti island
2. No. of Households	1467
3. Total catchment Population	9406
4. Population who are 30 years of age and above	-

B. Physical Infrastructure

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

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

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

*Desirable

For PHC sub centre-Co-located

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

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

E.1 Availability of Services	
Reproductive Maternal and Child Health Since this facility is attached to the RGH so the services are managed there only.	<input type="checkbox"/> ANC/ PNC <input type="checkbox"/> Neonatal and infant healthcare services <input type="checkbox"/> Childhood and Adolescent healthcare services <input type="checkbox"/> Family planning, contraceptive and other reproductive healthcare services
Communicable diseases Since this facility is attached to the RGH so the services are managed there only.	<input type="checkbox"/> Vector-borne diseases (Malaria, Dengue, Filariasis, JE) <input type="checkbox"/> TB <input type="checkbox"/> Leprosy <input type="checkbox"/> Acute simple illnesses
	Screening and management of common NCDs (DM, HTN) <input type="checkbox"/> Screening of common cancers – Oral

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

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>	 <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	Managed through attached Rajiv Gandhi Hospital

3	Availability of medicines for priority conditions	<input type="checkbox"/> Tuberculosis <input type="checkbox"/> Diabetes <input type="checkbox"/> Hypertension <input type="checkbox"/> Fever	
4	Medicine categories with shortfall/stockouts on the day of assessment	<input type="checkbox"/> Oral Contraceptives <input type="checkbox"/> Analgesics / NSAIDs) <input type="checkbox"/> Anti-pyretic <input type="checkbox"/> Anti-allergics <input 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 type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> As required <input type="checkbox"/> Other (Specify)	
6	What is the lead time for supply of drugs which are indented? (record in days)	<input type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input type="checkbox"/> More than 2 Weeks	
7	Is buffer stock for drugs maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input type="checkbox"/> No	

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	<input type="checkbox"/> In house lab <input type="checkbox"/> Outsource (Hub/PPP mode) <input type="checkbox"/> Hybrid Model
2	Number of diagnostic tests at AAM-PHC/UPHC as per State Essential Diagnostic list	(Total number of diagnostic tests at AAM-PHC/UPHC as per National Essential Diagnostic list-63)
3	Number of tests available at AAM-PHC/UPHC	Managed through attached Rajiv Gandhi Hospital.
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	<input type="checkbox"/> Yes <input type="checkbox"/> No
8	Availability of Sample transportation mechanism	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	User fee charged for diagnostics	<input type="checkbox"/> Yes <input type="checkbox"/> No
10	Average downtime of equipment	
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	

G.2 Diagnostic Tests Available		
1.	Haemoglobin	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.	Human chorionic gonadotropin (HCG) (Urine test for pregnancy) – Rapid card test (dipstick)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	Urine test for PH, specific gravity, leucocyte esterase glucose, bilirubin, urobilinogen, ketone, haemoglobin, protein, nitrite – Multipara meter Urine Strip (dipstick)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4.	Urine Microscopy	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.	24 – hours urinary protein	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Stool for ova and cyst	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7.	Dengue – Rapid card test for NSI antigen and IgM and IgG antibodies	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8.	MP Slide method	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9.	Malaria Rapid test	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10.	RPR/VDRL test for syphilis	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	HIV (Antibodies to HIV 1&2) – Rapid card test	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
12.	Hepatitis B surface antigen test	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
13.	Sputum for AFB # - Microscopy	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14.	Typhoid test (IgM)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

15.	Blood Sugar	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
16.	HCV Antibody Test (Anti HCV)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
17.	Bleeding time and clotting time	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
18.	Visual Inspection Acetic Acid (VIA)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
19.	rK3 for Kala Azar (endemic areas only)	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
20.	Filariasis (endemic areas only)	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
21.	Japanese encephalitis (endemic areas only)	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
22.	Test for iodine in salt (used for food) – Iodine in salt testing kit	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

I. Wellness Activities			
Wellness sessions being held periodically	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
J. Governance			
Constitution of Jan Arogya Samiti	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Periodic JAS meetings in the last 6 months	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Minutes of meeting maintained	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Periodic VHND sessions undertaken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
K. Reporting			
Online Platforms	Reporting		
<input type="checkbox"/> AAM Portal/App	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> National NCD Portal/App	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> IHIP	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> HMIS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> FPLMIS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> DVDMS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Nikshay	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Specify others, if any:			
L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	AAM-PHC Team (Salary)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	AAM-PHC Team (Team Based Incentives)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Facility funds	Fund Source		Timely disbursement	
	Untied		<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Other Sources		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fund utilization NHM Fund/untied funds utilized during last year:				
	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure	
	Managed through attached Rajiv Gandhi Hospital			
Is untied fund being spent on following activities?	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
Status of JSY Payments	<p>Payment done till (month/ year)</p> <p>Average Delay in Payment (days):</p>			

	Reasons for delay, if any
Availability of JSSK entitlements	<input type="checkbox"/> Yes/ <input type="checkbox"/> No 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	All the services are provided by Attached Rajiv Gandhi Hospital, Agatti
2	No. of PW registered for ANC	
3	No. of PW received 4 or more ANC check-ups	
4	Total number of institutional deliveries	
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	

11	TB patients undergoing treatment				
	Indicators			Current year	
	No. of presumptive TB patients identified				
	No. of TB patients diagnosed out of the presumptive patients referred				
No. of TB patients taking treatment in the AAM					
12	% of target population administered CBAC				
	% of target population with score below 4				
	% of target population with score 4 and above				
Community Based Screening for NCDs					
13	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up	
	Hypertension	Done at Rajiv Gandhi Hospital			
	Diabetes				
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up	
	Oral Cancer*	Done at Rajiv Gandhi Hospital			
	Breast Cancer*				
	Cervical Cancer*				

N. Implementation of NQAS Quality Assurance and Patient Safety					
1	Has there been an internal assessment for NQAS?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
2	Is the facility certified at the State-level for NQAS?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
3	Is the facility certified at the National level for NQAS?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		

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

1	Date of assessment using ODK tool kit	-
2	Facility aggregate score using ODK Took kit	-

Remarks & Observations.

- The UPHC functions primarily as an immunization center, with no other essential primary healthcare services being provided.
- This underutilization of infrastructure restricts access to basic outpatient care, maternal and child health services, and non-communicable disease (NCD) management for the community.
- The UPHC lacks dedicated staff, lab, and pharmacy, making it entirely dependent on RGH Agatti for healthcare service delivery.
- This affects service efficiency and accessibility, as patients must visit the district hospital even for basic health issues.
- While the UPHC has a separate building, it is not being used to its full potential for providing primary healthcare services.
- Lack of basic OPD (Outpatient Department) services forces patients to rely on RGH Agatti, increasing patient load at the hospital.

Ayushman Arogya Mandir-Sub Health Centre (AAM-SHC)

Date of Visit:15/02/2025

A. General Information	
1. State /UT	LAKSHADWEEP
2. District Name	AMINI ISLAND
3. Block/Taluka Name	AMINI ISLAND
4. Name of Facility	AAM- AYUSH FACILTY
5. Type of Facility	AYURVEDA
6. NIN of the facility	8765476
7. No. of days in a week facility is operational	6
8. OPD Timings	8: 00 AM -1:00 PM 3: 00 PM -5:00 PM
9. Month & Year of AAM operationalization	2023
10. Accessible from nearest road head (Yes/No)	Yes
11. Next Referral Facility	Government Hospital, Kavaratti
12. Distance of next referral facility (Km)	54 KM

A.1 Demographic Details	
1. Number of Villages	1
2. No. of Households	1493
3. Total catchment Population	9300
4. Population who are 30 years of age and above	5768

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

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

C. Human Resource Availability						
	Staff	Required as per IPHS-2022	Regular		Contractual	
			Sanctioned	Available	Sanctioned	Available
1	AYUSH MO	1	1	0	1	1
2	ANM/MPW-F	2	0	0	0	0
3	MPW-M		0	0	0	0
3	ASHA <i>(Population Norms -1 ASHA per 1000 population)</i>	-		0	0	0
4	Any other (If yes, specify)	This is the AYUSH Facility. So only AYUSH MO is available.				

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

	(Yes/ No)		
Maternal Health (ANC/PNC Care)	YES	NA	NA
Child Health (New Born Care/ HBNC/HBYC)	YES	NA	NA
Family Planning	YES	NA	NA
Communicable Diseases (TB/ Leprosy/ Malaria/ Dengue/ Filariasis)	YES	NA	NA
NCD	YES	NA	NA

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/ AYUSH MO	YES	YES	YES	YES	YES	YES
ANM/ MPW (F)	NA	NA	NA	NA	NA	NA
MPW (M)	NA	NA	NA	NA	NA	NA
ASHA	NA	NA	NA	NA	NA	NA

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

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

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

F. Essential medicines

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

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

	<input type="checkbox"/> Ortho-toluidine reagent <input type="checkbox"/> H ₂ S strip test kit
User fee charged for diagnostics	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

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

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

Facility funds Timely disbursement of untied funds Fund flow through other sources Specify any other fund source:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Fund utilization % NHM Fund utilized last year:		Funds received (Amt in Rs.)	Expenditure (Amt in Rs.) % Expenditure
		Managed through CHC Amini.	
Is untied fund being spent on following activities		Regular payment of Bills: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, specify <input type="checkbox"/> Electricity <input type="checkbox"/> Drinking Water <input type="checkbox"/> Internet Regular purchase: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, specify <input type="checkbox"/> Medicines <input type="checkbox"/> Reagents/Consumables <input type="checkbox"/> Equipment Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No	
K. Governance			
Community-based platforms			

Constitution of Jan Arogya Samiti	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic JAS meetings in the last 6 months (Once a month)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
JAS meeting minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
VHSNC Meeting held and minutes available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Periodic VHND sessions undertaken (Sessions held against planned)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Involvement of CHO/ AYUSH MO in community-based platforms	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
L. Wellness Activities		
Wellness sessions being held periodically	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Availability of a trained instructor for wellness session	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health Days are celebrated as per the Wellness Activity Calendar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Wellness sessions conducted in Last month	
ASHA Functionality		
Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial	
Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial	
Number of Village Health & Sanitation days conducted in last 6 months		
M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1385
2	No. of PW registered for ANC	Since this is the AYUSH facility so only OPD Services are provided.
3	No. of PW received 4 or more ANC check-ups	
4	Total number of institutional deliveries	
5	Total no. of High-Risk Pregnancies received treatment against no. of high-risk pregnancies identified	
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	

7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	Done through CHC Amini.		
8	Number of cases referred from Sub centre AAM to PHC AAM during last 3 months			
9	TB patients undergoing treatment			
	Indicators	Current year		
	No. of presumptive TB patients identified	Done through CHC Amini.		
	No. of TB patients diagnosed out of the presumptive patients referred			
	No. of TB patients taking treatment in the AAM			
10	Community Based Screening for NCDs: % of target population administered CBAC: % of target population with score below 4: % of target population with score 4 and above:			
11	NCDs <i>(No. of individuals in last 6 Months)</i>	Screened	Referred	Followed-up
	Hypertension	339		357
	Diabetes	169		327
	Oral Cancer	Done through CHC Amini.		
	Breast Cancer			
	Cervical Cancer			

N. Implementation of NQAS Quality Assurance and Patient Safety

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

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

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O. IPHS Compliance		
1	Date of assessment using ODK tool kit	-
2	Facility aggregate score using ODK Took kit	-

Appendix-List of equipment

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

Remarks & Observations

- Amini SHC (Ayurveda) operates as an Ayushman Arogya Mandir, focusing exclusively on Ayurvedic OPD services.
- The facility is linked to CHC Amini, which provides allopathic healthcare services. The monthly OPD load ranges from 400-500 patients, indicating a steady demand for Ayurvedic treatment.
- The facility is well-stocked with Ayurvedic medicines, but diagnostic services are limited to blood pressure (BP) and blood sugar testing.

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit: 15/02/2025

A. General Information	
1. State/UT	Lakshadweep
2. District Name	Amini Island
3. Ward Name	Amini Island
4. Name of Facility	AAM- AYUSH (Homoeopathy)
5. Type of Facility	AYUSH (Homoeopathy)
6. NIN of the facility	7659809
7. No. of days in a week the facility is operational	6 Days
8. OPD Timing	8:00 AM-1:00 PM 2:00 PM – 5:00 PM
9. Month & Year of UAAM operationalization	April 2023
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	CHC, Amini
12. Distance of next referral facility (Km)	1 Km

A.1 Demographic Details	
1. Number of Wards	1
2. No. of Households	1493
3. Total catchment Population	9300
4. Population who are 30 years of age and above	5768

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

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

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

*Desirable amenities

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

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

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

MPW (F) / (M)	NA	NA	NA	NA	NA	NA
ASHA	NA	NA	NA	NA	NA	NA

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

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

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

2	Total number of medicines available at the UAAM	400 (Homoeopathic Medicines)		
3	Availability of medicines for priority conditions	<input 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="0"> <tr> <td> <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 </td> <td> <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) </td> </tr> </table>	<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)
<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 type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> As required <input type="checkbox"/> Other (Specify)		
6	What is the lead time for supply of drugs which are indented? (record in days)	<input type="checkbox"/> Less than 1 Week <input type="checkbox"/> 1-2 Weeks <input checked="" type="checkbox"/> More than 2 Weeks		

7	Is buffer stock for drugs maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8	DVDMS or any other software is being used for stock management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

G.1 Availability of Diagnostic Services

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

H. Availability of IT Equipment & Teleconsultation services

Infrastructure: Availability	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone <input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (government funded)
Infrastructure: Functionality	<input type="checkbox"/> Tablet <input type="checkbox"/> Smartphone

	<input checked="" type="checkbox"/> Laptop <input checked="" type="checkbox"/> Internet connectivity (government funded)
Teleconsultation services Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital <input type="checkbox"/> Other, specify:
Teleconsultation platforms used	<input checked="" type="checkbox"/> e-Sanjeevani OPD <input type="checkbox"/> e-Sanjeevani.in <input type="checkbox"/> State specific app Specify, if any
Teleconsultation schedule prepared and displayed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Common conditions for teleconsultation	
Total teleconsultations in the last 01 month	21

I. Wellness Activities

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

J. Governance

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

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

L. Finance			
Remuneration & Incentives Done through CHC Amini.	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	UAAM Team (Team Based Incentives)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Facility funds Done through CHC Amini.	Fund Source	Timely disbursement	Details
	Untied	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Other Sources	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
United Fund utilized during last year			
	Funds received	Expenditure	% Expenditure

	(Amount in Rs.)	(Amount in Rs.)	
<p>Is untied fund being spent on following activities?</p>	<p>Managed through CHC Amini.</p>		
<p>Status of JSY Payments</p>	<p>Regular payment of Bills: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, specify;</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Drinking Water</p> <p><input type="checkbox"/> Internet</p> <p>Regular purchase: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Medicines</p> <p><input type="checkbox"/> Reagents/Consumables</p> <p><input type="checkbox"/> Equipment</p> <p>Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
	<p>Payment done till:</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>		

Availability of JSSK entitlements	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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
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M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1656
2	No. of PW registered for ANC	Since this is the AYUSH Facility so only AYUSH (Homoeopathic)OPD Services are provided.
3	No. of PW received 4 or more ANC check-ups	
4	Total number of institutional deliveries	
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	
8	TB patients undergoing treatment	
	Indicators	
	No. of presumptive TB patients identified	Done through CHC.
	No. of TB patients diagnosed out of the presumptive patients referred	

	No. of TB patients taking treatment in the AAM			
9	Community Based Screening for NCDs			
	% of target population administered CBAC			
	% of target population with score below 4			
	% of target population with score 4 and above			
10	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Treated	Follow-up
	Hypertension	Done through either CHC or AYUSH (Ayurveda) facility.		
	Diabetes			
	NCDs <i>(No. of individuals in Last 6 Months)</i>	Screened	Referred	Follow-up
	Oral Cancer*	Done through either CHC or AYUSH (Ayurveda) facility.		
	Breast Cancer*			
	Cervical Cancer*			

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

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

O. IPHS Compliance		
1	Date of assessment using ODK tool kit	-
2	Facility aggregate score using ODK Tool kit	-

Annexure- List of essential equipment

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

Remarks & Observations

- The UPHC functions primarily as an immunization center, with no other essential primary healthcare services being provided.
- This underutilization of infrastructure restricts access to basic outpatient care, maternal and child health services, and non-communicable disease (NCD) management for the community.
- The UPHC lacks dedicated staff, lab, and pharmacy, making it entirely dependent on RGH Agatti for healthcare service delivery.
- This affects service efficiency and accessibility, as patients must visit the district hospital even for basic health issues.
- While the UPHC has a separate building, it is not being used to its full potential for providing primary healthcare services.
- Lack of basic OPD (Outpatient Department) services forces patients to rely on RGH Agatti, increasing patient load at the hospital.