



Ministry of Health & Family Welfare  
Government of India



# National Health Mission

A Report on

Monitoring of Important Components of the Programme Implementation Plan  
under National Health Mission

Lakhimpur Kheri District of Uttar Pradesh, India



Submitted by

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**- Dr. William Joe, Dr. Saroj Kumar & Mr. Rahul Kumar**

## Acronyms and Abbreviations

AFHS	Adolescent Friendly Health Clinic
ANC	Ante Natal Care
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
AYUSH	Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homeopathy
BCC	Behaviour change communication
BCG	Bacillus Calmette Guerin
BEmOC	Basic Emergency Obstetric Care
BPL	Below Poverty Line
BSU	Blood Storage Unit
CHC	Community Health Centre
CMO	Chief Medical Officer
DEIC	District Early Intervention Centre
DH	District Hospital
DHQ	District Health Quarter
DOTS	Directly Treatment Strategy
DPMU	District Programme Management Unit
DPT	Diphtheria Pertussis Tetanus
DWH	District Women Hospital
EmOC	Emergency Obstetric Care
F-IMNCI	Facility based Integrated Management of Neonatal and Childhood Illness
FRU	First Referral Unit
HBNC	Home Based New Born Care
HIV	Human Immunodeficiency Virus
HMIS	Health Management Information System
HWC	Health & Wellness Centre
ICDS	Integrated Child Development Services
IEC	Information Education & Communication
IFA	Iron & Folic Acid
IMEP	Infection Management and Environment Plan
IPD	Indoor-Patients Department
IPHS	Indian Public Health Standards
IUCD	Intra Uterine Contraceptive Device
JSSK	Janani Shishu Suraksha Karyakaram
JSY	Janani Suraksha Yojana
KMC	Kangaroo Mother Care

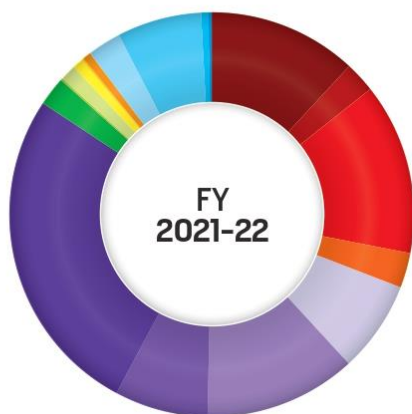
LaQshya	Labour room Quality improvement initiative
LHV	Lady Health Visitor
LSAS	Life Saving Anaesthesia Skill
MCH	Maternal and Child Health
MCTS	Mother and Child Tracking System
MOIC	Medical Officer In-Charge
NBCC	New Born Care Corner
NBSU	New Born Special Unit
NGO	Non-Government Organization
NHM	National Health Mission
NLEP	National Leprosy Eradication Programme
NPCB	National Programme for Control of Blindness
NPCC	National Program Coordination Committee
NRC	National Rehabilitation Centre
NRHM	National Rural Health Mission
NSSK	Navjat Shishu Surksha Karyakram
NSV	Non-Scalpel Vasectomy
NUHM	National Urban Health Mission
NVBDCP	National Vector Borne Disease Control Programme
NVHCP	National Viral Hepatitis Control Programme
OBG	Obstetrics Gynaecologist
OCP	Oral Contraceptive Pill
OPV	Oral Polio Vaccine
ORS	Oral Rehydration Solution
PFMS	Public Financial Management System
PHC	Primary Health Centre
PIP	Programme Implementation Plan
PPIUCD	Post-Partum Intra-uterine Contraceptive Device
RKS	Rogi Kalyan Samiti
RNTCP	Revised National Tuberculosis Control Programme
RTI	Reproductive Tract Infection
SBA	Skilled Birth Attendant
SNCU	Special Newborn Care Unit
STI	Sexually Transmitted Infection
U5MR	Under 5 Mortality Rate
VHND	Village Health and Nutrition Day



# NHM-PIP MONITORING LAKHIMPUR KHERI DISTRICT HIGHLIGHTS



## Budget Share in Total Approval, Uttar Pradesh



Service Delivery - Facility Based	11.9%
Service Delivery - Community Based	2.5%
Community Interventions	13.7%
Untied Fund	2.8%
Infrastructure	7.3%
Procurement	12.2%
Referral Transport	7.5%
Human Resources	26.5%
Training and Capacity Building	2.3%
Reviews, Research, Surveys and Surveillance	0.2%
IEC/BCC	1.3%
Printing	0.9%
Quality Assurance	0.2%
Drug Warehousing and Logistics	0.7%
PPP	2.7%
Programme Management	6.8%
IT Initiatives for strengthening Service Delivery	0.6%
Innovations (if any)	0.3%

INR **10702.2 cr**  
PIP Budget (Proposed)

INR **9621.8 cr**  
ROP Budget (Approvals)  
(**89.9%** of the PIP budget)  
excluding Infrastructure maintenance and  
Immunization kind grants

## Key MCH Indicators, Lakhimpur Kheri District



**82.8%**  
Institutional  
Births



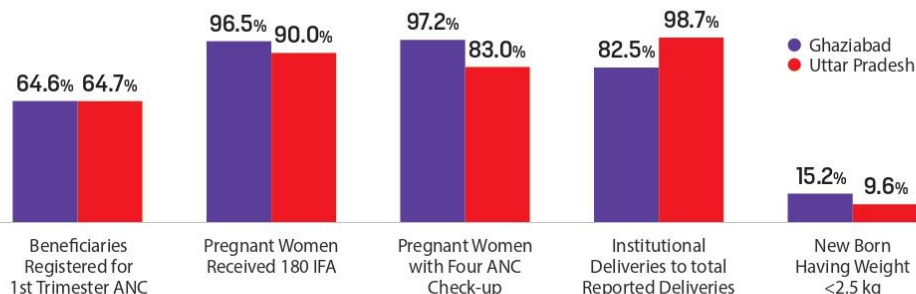
**69.5%**  
Full Immunization  
Coverage



**48.0%**  
Mother who had  
Four ANC Visits

Source: NFHS 2019-21

## Key HMIS Indicators, Lakhimpur Kheri District



Lakhimpur Kheri district has improved in coverage of 1st trimester ANC visit which is near to state figure. IFA consumption among pregnant women was 96.5% in Kheri district which is higher than the state in 2021-22. However, 82.5% institutional deliveries were conducted in the district which is lower utilization of public facilities by women than state figure (98.7%) during 2021-22. New born having less than 2.5 kg. weight was 15.2% in the district. .... Source: Estimate based on HMIS Data (Lakhimpur Kheri District) FY 2021-22

## Executive Summary

The Ministry of Health and Family Welfare (MoHFW), Government of India has assigned Population Research Centre (PRC) the task of quality monitoring of essential components of National Health Mission (NHM) State Programme Implementation Plan (PIP 2022-23). This report of Population Research Centre, Institute of Economic Growth, Delhi (PRC-IEG) presents the key findings from the concurrent monitoring of essential components of under NHM in Lakhimpur Kheri district Uttar Pradesh. The report provides information on coverage of services, constraints in service delivery and utilization of health services by the population in the catchment area. The report is prepared on the basis of visits to the following public health facilities in Kheri: District Women Hospital, Community Health Centre, Palia and Phardhan, Primary Health Centre-HWC, Kala Aam and Gauri Phanta and Sub-Centre, Dhuskiya. Meetings were held with the Chief Medical Officer (CMO) and the NHM Nodal Officials (ACMO and RCH Nodal Officer). Interactions were also held with various programme officers and the Medical Officer in-Charge (MOIC) of the selected health facilities, health care providers (ANM, ASHAs etc.) to understand the strengths and weakness of the facilities in service provisioning. HMIS data was verified for the District Hospital Ranking data validation purposes.

### Key Findings

- Lakhimpur Kheri has two DH, 58 PHCs, 582 SCs and four Urban-PHCs functional. 197 sub-centres were functioning in rented building. The District Women Hospital (DWH) has high burden for delivery care with on an average 500-600 deliveries being conducted per month including C-section.
- SNCU is functioning with 10 beds (including in-born and out-born ward). Six-unit Kangaroo Mother Care (KMC) were available for breastfeeding after birth and staff nurses have received FBNC training.
- A total of 30 RBSK teams were sanctioned in 15 blocks and are currently working in the district. Of these, the composition of only nine RBSK teams were complete with full members team whereas 21 teams were without dedicated full HR capacity in the blocks.
- District has no ICU unit. The critical newborns were referred to Queen Mary Hospital and King George Medical University in Lucknow. DEIC proposed at district hospital is under progress.
- Three posts of Block Programme Manager (BPM) were vacant in Ramia Behar, Pasgawan and Nighasan in the blocks since last three years. One post of Block Account Manager (BAM) was vacant in Ramia Behar block for three years in Lakhimpur Kheri district.

- District Community Process Manager (DCPM) post was vacant in the district since last four years, which affects the community level activities in the district.
- Weekly Iron & Folic Acid Supplementation (WIFS) is being implemented in schools and AWCs. Seven blocks were covered under Peer Education programme which covered 395 villages. For that, 1452 Peer educators are selected and 681 AFHC meeting held in the district.
- 23 Tuberculosis Units and 40 Designated Microscopy Centres are functioning in the district. While one Drug Resistant TB centre was also operational and 17 CBNAAT sites were available for screening of sputum.
- Under RNTCP programme, post for TB Health Visitor (TBHV) and Senior Treatment Supervisor (STS) are a part of the Tuberculosis Unit at block level, which affects the programme and result of treatment and laboratory examinations are accurately and promptly recorded in the quarterly report.
- Under the National TB Elimination Programme (NTEP), total 502 TB patients are notified from public sector and 2039 notified patients from the private sector in 2021-22. The district has achieved 87% and 85% treatment success rate in public and private sector, respectively.
- Mobile Medical Unit (MMU) is functional in the district. Three MMU vehicles are on the road with five teams in the field. In a month, 24 trips were completed by MMU that covered 12 villages. Average of 1440 OPD have been conducted in the field per month.
- Lakhimpur Kheri reported a total of 39 maternal deaths (9 at DH, 28 at CHCs and 7 at PHCs). No child deaths were reported in the district in 2021-22. Total 38 Maternal Death Review (MDR) have been conducted in the district in 2020-21 and 2021-22.
- District has planned for two new blood banks in Gola and Palia block in coming year and currently, one blood bank is functioning at district male hospital in Kheri district.
- Under the quality assurance programme, so far none of the facilities have qualified under the NQAS and LaQshya programmes in the district. However, one CHC and three PHCs have been certified under Kayakalp scheme in 2021-22.
- A total of 375 patients were examined and 97 have deafness problem at the district male hospital, out of these, 30 patients were referred to higher facility for hearing aids fitted under National Programme for Prevention and Control of Deafness during 2021-22.
- Under National Tobacco Control programme, 70 schools / colleges are covered for awareness activities, 32958 people were counseled for Tobacco. Pledge for No Tobacco use was given on 15<sup>th</sup> August, on 2<sup>nd</sup> October 2021 and 26<sup>th</sup> January 2022.

## Chapter-1 Introduction

### 1.1. Background

The Ministry of Health and Family Welfare (MoHFW), Government of India has assigned Population Research Centre (PRC) the task of quality monitoring of essential components of National Health Mission (NHM) State Programme Implementation Plan (PIP 2022-23). Considering PIP as a priority activity, Population Research Centre, Institute of Economic Growth, Delhi (PRC-IEG) would identify critical concerns in implementation of NHM activities and also evolve suitable quality parameters to monitor the listed components.

This report presents the key findings from the concurrent monitoring of essential components of under NHM in Kheri district. The overall objective is to monitor the functioning of National Health Mission in Kheri. Especially, the report aims to provide information on coverage of services, constraints in service delivery and utilization of health services by the population.

The report also provides insights on the status of utilization of health care services under NHM by the population in facility catchment areas. The report is expected to help NHM programme officials and health policymakers to comprehend the status of service delivery in Kheri and assess the gaps and challenges for further improvements in service delivery.

The specific objectives of the study are as follows.

- To monitor the status and adequacy of physical infrastructure of selected DH, CHC, PHC and SC equivalent facilities in Kheri district.
- To assess the availability of human resources and specialists along with their training status.
- To review service delivery status of institutional deliveries, antenatal care, post-natal care, immunization, and family planning services in the district.
- To understand the performance of incentive schemes such as JSSK and JSY of NHM.
- To review bio-medical waste management and infection control practices; community processes and activities related to ASHAs; functioning of disease control programme etc.
- To understand the budgetary allocations and utilization on various components including untied funds at selected health facilities through Rogi Kalyan Samiti (RKS).

The report is prepared on the basis of field observations and visits to the following public health facilities in Kheri: District Women Hospital, Community Health Centre, Palia and Phardhan Primary Health Centre, Kala Aam and Gauri Phanta and Sub-Centre, Dhuskiya. Structured

checklist was used to collect information on human resources, infrastructure, funds utilization, training, health care services including drugs and equipment's, family planning, disease control programmes and other programmes under the umbrella of NHM including the National Urban Health Mission (NUMH) activities. Meetings were held with the Chief Medical Officer (CMO) and the NHM Nodal Officials. Interactions were also held with the Medical Officer In-Charge (MOIC) of the selected facilities, health care providers (ANM, ASHAs etc.) and other supporting staff to understand the strengths and weakness of the facilities in service provisioning. Review of relevant programmatic data and information available from the NHM nodal officials were also conducted. Health Management Information System (HMIS) data was verified for the District Hospital Ranking data validation purposes. Specific observations regarding the status of service provisioning are also monitoring and evaluation of field visit and the key components of NHM are included.

**Table 1:** List of institutions and facilities visited in Kheri district, Uttar Pradesh

<b>Institution and facilities</b>	<b>Contact Person</b>
Chief Medical Officer	Dr. A. K. Tripathi
Additional CMO & RCH Nodal Officer	Dr. Ashwani kumar
Chief Medical Superintendent (District Women Hospital)	Dr. Jyoti Mehrotra
Medical Officer In-Charge, CHC Palia	Dr. Bharat Singh
Medical Officer In-Charge, CHC Phardhan	Dr. Amit Bajpai
Medical Officer In-Charge, PHC Kala Aam	Dr. Nadeem gupta
Medical Officer In-Charge, PHC Gauri Phanta	Dr. Abbas Husain Rizvi
District Programme Manager, Kheri	Mr. Anil Yadav
Block Programme Manager, Palia	Mr. Pankaj Asthana
Block Programme Manager, Phardhan	Mr. Ravindra Awasthi
ANM, Sub-Centre, Dhuskiya	Kranti Tharu
Hospital Manager, DWH Kheri	Ms. Shipra Verma
Nurse Mentor, Labour room, DWH, Kheri	Ms. Pragya Misra

## 1.2. Demographic Profile

Lakhimpur Kheri district lies within the Terai at the base of Himalayas. The district is bounded on the north by Mohan river which separate it from Nepal, east from Bahraich, in the south by Sitapur and Hardoi and the west by Pilibhit and Shahjahanpur. Kheri district covers a total area of 7680 square kilometer and has a population of 40.21 lakh (Census of India 2011) residing across 15 development blocks of the district. There are 995 Gram Panchayats and 1794 revenue villages. The Census of India (2011) provides the following highlights for the district. It may be noted that the Kheri district ranks 14<sup>th</sup> in terms of population in the state of Uttar Pradesh. The percentage share of urban population in the district is 11.5% whereas the urban population in Uttar Pradesh is 22.3%. The district ranks 38<sup>th</sup> in terms of sex ratio (894) which is lower than the state average of 912 females per 1000 males. The literacy rate of the district is 60.5% as

compared to 67.7% of Uttar Pradesh which ranked 61<sup>st</sup> across the districts in state. Decadal growth rate of the district is 25.4% which is higher than the state average of 20.2%. Kheri district has population density 524 persons per sq.km, which is lower than the state average 829 persons per sq. km.

**Table 2:** Key demographic indicators for Kheri, Uttar Pradesh and India, 2011

Indicators	Lakhimpur Kheri	Uttar Pradesh	India
Population (Census 2011)	40.21 lakhs	19.98 (in crore)	1.21 (in crore)
Male	21,23,187	104,480,510	62,37,24,248
Female	18,98,056	95,331,831	58,64,69,174
Decadal growth rate in % (Census 2011)	25.38	20.2	17.6
Literacy rate (%)	60.5	67.7	73.0
Male literacy rate (%)	69.5	77.3	80.9
Female literacy rate (%)	50.4	57.2	64.6
Urban population (%)	11.5	22.3	31.6
Schedule caste (%)	26.4	20.7	16.6
Sex ratio (per 1000 male)	894	912	943
Child sex ratio (0-6 years)	921	899	914
Density (persons sq. Km.)	524	829	382
Area (in Sq. Km.)	7680	240928	3,287,240

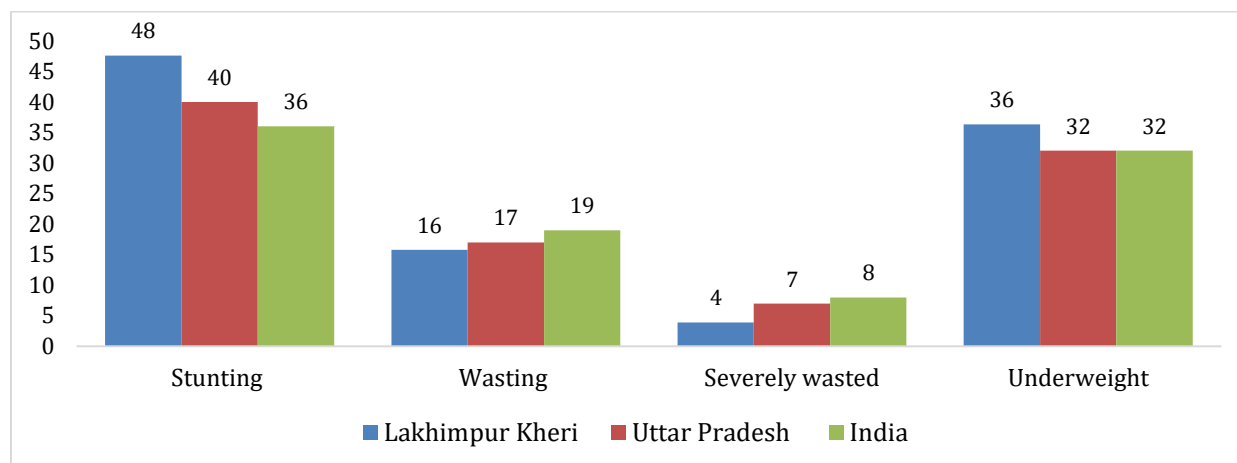
Source: Census of India, 2011

### 1.3. Maternal and Child Health

As per NFHS 2019-21, 53.9% mothers had antenatal check up in the first trimester and 48% had undertaken at least four ANC visits in Kheri district. IFA consumption for 100 days or more was reported at 12% during pregnancy and 7.8% mother consumed IFA 180 days or more during their pregnancy. A total of 82.8% births took place in institutional facilities with 68.0% births happening across public health facilities. Of the total births, 81.2% births were assisted by a skilled birth attendant whereas 14.2% births were through caesarean section (public sector 6.7% and private sector 65.8%). About 60.5% mothers received postnatal care from doctor or other skilled health personnel. The average out of pocket expenditure per delivery in public health facility was Rs. 2126. About 69.5% children aged 12-23 months are fully immunized (BCG, measles, and 3 doses each of polio and DPT). The coverage of 3 doses of polio is 69.5% and the coverage of 3 doses of Hepatitis B vaccine is 75.2%. The district has low prevalence of diarrhea (3.7%) among children. In 2019-21, there was no information available about children receiving oral rehydration solution (ORS) and Zinc. In Kheri district, 30.9% women in the age group 15-49 years have a low body mass index (BMI <18.5 kg/m<sup>2</sup>). In addition, 16.4% women are overweight or obese (BMI > 25.0 kg/m<sup>2</sup>). Anemia is noted as a major concern among women in Kheri. A total of 53.0% women age groups 15-49 years are anemic. The anemia prevalence among non-pregnant women is 52.8%. However, 56.1% pregnant women age groups 15-49

years are anaemic in Kheri district. The prevalence of high blood sugar among women is 4.0% and hypertension (slightly above normal with systolic 140-159 mm of Hg and/or diastolic 90-99 mm of Hg) is 12.8% among those 15 years and above.

**Figure 1:** Prevalence of under-nutrition among children (0-5 year) in Kheri, NFHS-5



Source: District Fact Sheet Kheri district, NFHS-5, 2019-21

### 1.4. Family Planning Services

As per NFHS-5 (2019-21), in Kheri, 57.5% women are literate and 28.7% women have 10 or more years of schooling. Further, 19.7% of women aged 20-24 years were married before the age of 18 years. Nearly, four percent (4%) women age 15-19 years were already mother or pregnant at the time of the survey in Kheri district. The use of any modern method of contraception was 54.9% with female sterilization having 20.8% coverage and 11.2% reported using of condoms. Use of IUD/PPIUD (1.5%) and pills (1.4%) is also very low. Male sterilization is negligible at 0.0%. Overall, the total unmet need for family planning was 16.1% including a 6.1% unmet need for spacing.

### 1.5. HMIS Services Delivery Indicators

In Lakhimpur district, 64.6% of the ANC registrations occurred in the first trimester which is same to the state average. Pregnant women receiving 4 or more ANC registration was 97.2% in Kheri which is higher proportion of IFA coverage from state (83%). The coverage of 180 IFA tablets among pregnant women is more than 100% in the district and state proportion (90.5%) during 2021-22. About more than 100% pregnant women received 360 calcium tablets in district whereas it is 83% at the state level. In the district, about 82.5% births are institutional deliveries to total reported deliveries in the district. The C-section births were accounting for only 1.3% to the total institutional births conducted in the district as a whole which is lower than state average (9.4%). Also, 72.6% of women received 1st post-partum check-up after delivery in

the district which is higher than state (66%) average. The HMIS data shows that 96.5% of the newborn are breastfed within the first hour of birth in Kheri. About 15.2% of the newborn were categorized as low birth weight baby (weight below 2.5 kg). A total of 91217 children (9-11 months) have been immunized in the district. About 71% of children were discharged with target weight gain from the NRC in the district which is higher than the state figure (67%) during 2021-22. Male sterilization is less than one (0.3%) which is lower than the state level (1.1%). Female sterilization is dominant method of family planning in the district. Data shows that female sterilization was 99% in the district as well as state level.

**Table 3:** Status of key maternal and child health indicators, Kheri district, Uttar Pradesh

HMIS indicators	Lakhimpur Kheri	Uttar Pradesh
<b>1. Maternal Health</b>		
% of beneficiaries registered for 1st trimester to total ANC registration	64.6	64.7
% of pregnant women with 4 or more ANC checkups	97.2	83.0
% of pregnant women given 180 IFA to total ANC registrations	105.1	90.5
% Pregnant women given 360 Calcium tablets	115.8	82.6
<b>a) Institutional and Home Deliveries</b>		
% of home deliveries to total deliveries	17.4	8.9
% of SBA attended home deliveries to total home deliveries	1.9	13.1
% of institutional deliveries to total reported deliveries	82.5	98.7
% of institutional deliveries to total ANC registrations	45.1	54.0
% of C-Section deliveries to total institutional deliveries	1.3	9.4
% of women received 1st post-partum checkup after delivery	72.6	66.1
<b>2. Newborn and Child Health</b>		
% of newborn weighted to total live birth	98.5	91.7
% of newborn breast fed within 1 hour of birth to total live birth	96.5	90.0
% of newborns having weight less than 2.5 kg to total live birth	15.2	9.6
% of children admitted in NRC	208	9070
% of children discharged with target weight gain from NRC	70.6	67.3
Number of children (9-11 months) fully immunized	91217	4419723
<b>3. Family Planning</b>		
% of male sterilization to total sterilization	0.3	1.1
% of female sterilization to total sterilization	99.6	98.9
% of IUCD insertion to total institutional deliveries	51.0	40.9
Total Sterilization conducted	6688	259718
<b>4. Mortality Indicators</b>		
Maternal death	31	3345
Child (1-5 years) death	59	1473
Infant (1-12 months) death	183	10130
Still Birth	684	33936

Source: HMIS data, 2021-22

## Chapter-2 NHM Budget and Finance

### 2.1 State Resource Envelope and District Allocation

For the financial year (FY) 2021-22, against a resource envelope of Rs. 7366.43 Crore (calculated assuming state share of 40%), Uttar Pradesh received administrative approval for an amount of Rs.9621.79 Crore.

**Table 4:** Breakup of resource envelope, NHM FY 2021-22, Uttar Pradesh

S.No.	Particulars	Amount (GoI Share)	Percent (GOI Share)	State share
<b>1</b>	<b>RCH Flexible Pool (including RI, IPPI, NIDDCP)</b>	<b>891.04</b>	20.2%	
1(i)	RCH Flexible Pool (including RI, IPPI, NIDDCP) Cash Grant Support	643.24		
1(ii)	RCH Flexible Pool (Kind Grant Support under Immunization) as per FY 2019-20	247.8		
<b>2</b>	<b>Health System Strengthening (HSS) under NRHM</b>	<b>2237.78</b>	50.6%	
2(i)	Other Health system Strengthening covered under NRHM	1837.85		
2(ii)	Comprehensive Primary Health Care under HSS	258.44		
2(iii)	Additional ASHA Benefit Package including support to ASHA facilitators	141.49		
	<b>Total NRHM-RCH Flexible Pool</b>	<b>3128.82</b>		
<b>3</b>	<b>NUHM Flexible Pool</b>	<b>103.48</b>	2.3%	
3(i)	Other Health System Strengthening covered under NUHM	76.69		
3(ii)	Ayushman Bharat-Health & Wellness Centres under NUHM	26.79		2946.57
<b>4</b>	<b>NDCP Flexible Pool (NTEP, NVHCP, NVBDCP, NLEP, IDSP)</b>	<b>207.47</b>	4.7%	
4(i)	NVBDCP (Cash & Kind)	29.6		
4(ii)	NTEP (Cash & Kind)	135.17		
4(iii)	NVHCP (Cash & Kind)	30.14		
4(iv)	NLEP	4.20		
4(v)	IDSP	6.25		
4(vi)	National Rabies Control Programme (NRCP)	1.95		
4(vii)	Programme for Prevention and Control of Leptospirosis (PPCL)	0.16		
<b>5</b>	<b>NCD Flexible Pool (NPCB, NMHP, NPHCE, NTCP, NPCDCS, NPCCHH, PMNDP)</b>	<b>102.15</b>	2.3%	
<b>6</b>	<b>Infrastructure Maintenance (including Direction and Administration)</b>	<b>877.93</b>	19.9%	
	<b>Total Resource Envelope</b>	<b>4419.86</b>	<b>100%</b>	<b>2946.57</b>
	Grand Total Resource Envelope (Central Allocation + State Share)	7366.43	-	

Source: Record of Proceedings (NHM Uttar Pradesh 2021-22), MoHFW

The total support from Government of India is Rs. 4419.86 Crore whereas the state share of 40% works out to be Rs. 2946.57 Crore. The resource envelope for FY 2021-22 consists of union government's support of Rs. 2998.19 Crore for flexible pool allocation including cash and kind, Rs.543.74 Crore for incentive pool based on last year's performance and Rs. 877.93 Crore for infrastructure maintenance. The breakup of the total resource envelope shows that Rs. 891.04 Crore is allocated for RCH Flexible Pool (including Routine Immunization (RI), Intensified Pulse Polio Immunization (IPPI), National Iodine Deficiency Disorders Control Programme (NIDDCP), Rs. 2237.78 Crore is allocated for Health System Strengthening (HSS) under NHM. Thus, the GOI contribution toward total NRHM-RCH Flexible Pool works out to be Rs. 3128.82 Crore. The GOI contribution toward NUHM Flexible Pool, National Disease Control Programme (NDCP) Flexible Pool and Non-Communicable Disease (NCD) Flexible Pool is Rs. 103.48 Crore, Rs. 207.47 Crore and Rs. 102.15 Crore, respectively. Within NDCP Flexible Pool, bulk of the resources is allocated for NTEP activities.

## 2.2 District Health Action Plan

Table 5 shows the budget utilization of major pools under NHM programme in Kheri district. A total of 173.53 crore were allocated under NRHM-RCH pool, only 47.72 crore have been utilized during 2021-22, which is about 28% utilization of the total allocated budget in the district. Major expenditure done on NRHM-RCH, NUHM and communicable disease pools. It was noticed that budget have been allocated under ECRP-II (3.98 crore), Non-NHM (7.66 crore) and 15<sup>th</sup> FCG (1.72 crore) in the district but no expenditure was used for work under these heads in 2021-22.

**Table 5:** Budget utilisation of NRHM-RCH flexi-pool, FY-2021-22 (Rs. in Crore)

Description	Budget Released	Budget utilized	Utilization (%)
NRHM-RCH	135.60	43.71	32.3
Communicable Disease	16.26	3.15	19.4
NCD	6.42	0.21	3.3
NUHM	1.89	0.65	34.2
ECRP - II	3.98	0.00	0.0
Non NHM	7.66	0.00	0.0
XV-FCG	1.72	0.00	0.0
Total	173.53	47.72	27.5

Source: Source: FMR Sheet, Lakhimpur Kheri district, 2021-22

**Table 6** Budget expenditure about NRHM-RCH pool (Rs. in crore) in Kheri district, 2021-22

Description (NRHM-RCH Pool)	Budget Released	Budget utilized	% Utilization
CP	56.45	13.35	23.7
MH	28.14	13.64	48.5
CH	8.70	1.67	19.2
CD-IDSP	6.60	2.76	41.8
RBSK	5.45	2.77	50.7
RI	4.81	2.37	49.2
FP	4.45	1.36	30.6
IMEP	3.20	0.76	23.8
NCD-NPCDCS	2.48	1.00	40.4
AYUSH	2.34	0.99	42.2
HR	2.24	0.88	39.5
IEC	1.96	0.12	6.1
RKSK	1.73	0.30	17.3
CD-NVBDCP	1.56	0.41	26.5
MIS	1.12	0.26	23.3
ME	0.68	0.06	8.8
NCD-NMHP	0.50	0.17	33.9
Blood Cell	0.49	0.09	17.7
CD-RNTCP	0.49	0.11	22.6
QA	0.42	0.14	33.2
CD-NLEP	0.41	0.32	79.1
Nursing	0.36	0.00	0.0
NCD-NPHCE	0.34	0.06	16.8
NCD-NPPCD	0.18	0.00	1.5
NCD-NPCB	0.13	0.03	20.2
NCD-NPPC	0.11	0.05	44.6
Procurement	0.09	0.03	33.7
FD	0.06	0.00	8.3
NCD-NOHP	0.05	0.00	6.4
NCD-NIDDCP	0.03	0.00	0.0
NCD-NTCP	0.03	0.00	0.0
PM	0.00	0.00	0.0
CD-NRCP	0.00	0.00	0.0
<b>Total</b>	<b>135.60</b>	<b>43.71</b>	<b>32.2</b>

Source: FMR Sheet, Lakhimpur Kheri district, 2021-22

Under NRHM-RCH pool, district has allocated of Rs. 135.60 crore and utilized of Rs. 43.12 crore which is 32% utilization of the total budget. Most of the expenditure incurred under national leprosy eradication programme which is 79% fund has been used in 2021-22, followed by RBSK (51%), Routine Immunization (49%) and maternal health (48%) programmes. On the other hand, some of the programmes such as; RKSK (6%), National Oral health programme (6.4%),

IEC (6.1%), Monitoring and evaluation (8.8%) and blood cell (17.7%) were low utilization noted in the district.

**Table 7:** Budget utilization (in lakhs) of Communicable and Non-communicable programmes

Description	Budget allocated	Expenditure	Utilization (%)
<b>Communicable Disease (CD) Pool</b>			
CD-IDSP	24.34	6.59	27.1
CD-NLEP	192.44	3.23	1.7
CD-NRCP	11.43	0.00	0.0
CD-NVBDCP	309.96	2.50	0.8
CD-NVHCP	1.33	0.00	0.0
CD-RNTCP	1084.36	302.66	27.9
ME-NVBDCP	1.98	0.00	0.0
<b>Total</b>	<b>1625.84</b>	<b>314.98</b>	<b>19.4</b>
<b>Non-Communicable Disease (NCD) Pool</b>			
NCD-NMHP	16.89	2.21	13.1
NCD-NPCB	226.25	0.00	0.0
NCD-NPCDCS	361.80	14.77	4.1
NCD-NPHCE	4.42	0.00	0.0
NCD-NTCP	29.29	4.39	15.0
NCD-NPPCD	1.00	0.00	0.0
NCD-NPCCHH	2.65	0.00	0.0
<b>Total</b>	<b>642.28</b>	<b>21.37</b>	<b>3.3</b>
<b>National Urban Health Mission (NUHM) Pool</b>			
CD-NVBDCP	6.63	0.00	0.0
NUHM	182.75	64.67	35.4
<b>Total</b>	<b>189.39</b>	<b>64.67</b>	<b>34.2</b>
<b>Emergency Covid Response Package (ECRP II)</b>			
CD-ECRP	397.61	0.00	0.0
<b>Fifteenth Finance Commission Grant (XV-FCG)</b>			
XV-FCG	765.60	0.00	0.0
<b>NON-NHM Pool (ASHA)</b>			
CP (ASHA-Rural and ASHA Sangini)	171.72	0.00	0.0
NUHM (Urban ASHA)	0.41	0.00	0.0
<b>Total</b>	<b>172.13</b>	<b>0.00</b>	<b>0.0</b>

Source: FMR Sheet, Lakhimpur Kheri district, 2021-22

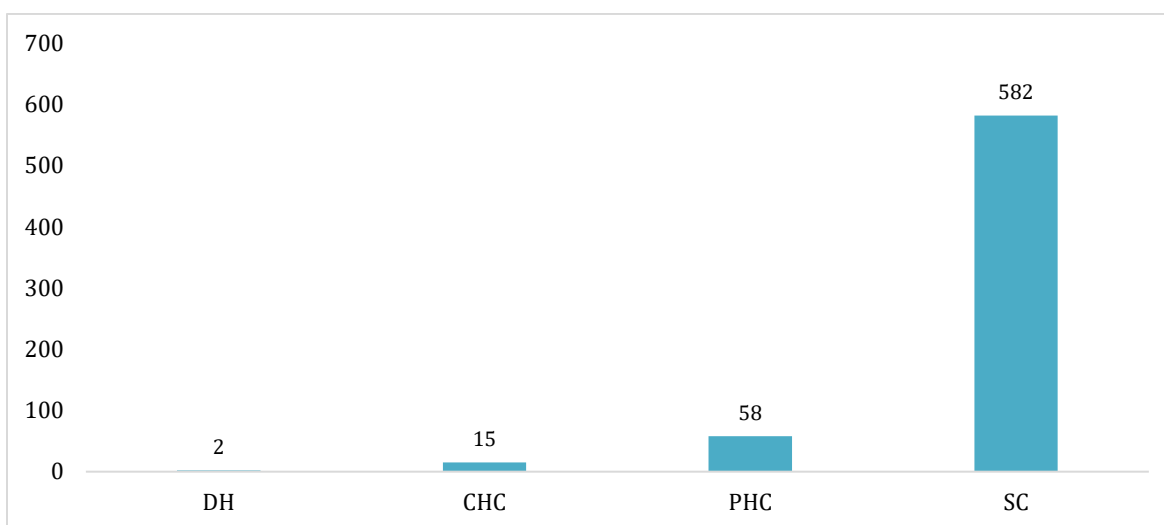
Under the XV-FCG, district has allocated of Rs. 765.60 lakhs for conversion of rural sub-centre and PHCs into health and wellness centre but there is no utilization of fund noticed in 2021-22. On the other hand, no fund was utilized under emergency COVID response package (ECRP-II) against Rs. 397.61 lakhs received by district.

## Chapter-3 Public Health Planning and Implementation

### 3.1 Status of Infrastructure and Service Delivery

Two district hospital (separate for Male and Female) are functioning in the district, 15 Community Health Centers (CHC), 58 Primary Health Centers (PHC) and 582 Sub-Centers (SC) were functioning in the district, as reported by HMIS Facility Master Report 2022.

**Figure 2:** Number of health facilities available in Kheri district, 2022



Source: Facility Master Report, Kheri district, HMIS, 2022

However, according to the district monitoring checklist, Kheri district has two District Hospital (Male and Female), 15 Community Health Centre (CHC), 58 Primary Health Centers (PHC) and 582 Sub-Centers. The District Women hospital is the only facility conducting more than 50 deliveries per month. Four Urban Primary Health Centre were available in the district. One District Early Intervention Centre (DEIC) was proposed in the district. One Nutritional Rehabilitation Centers and Special Newborn Care Unit (SNCU) was functioning at DWH Kheri for providing child health care services.

A total of 342 sub-centers are planned as Health and Wellness Center but so far 220 sub-centers have been converted into HWCs in 2022. However, 51 primary health centers have been converted into HWC-PHC in the district and no Urban-PHC has been converted into HWC. One blood bank is functioning at district hospital (Male) in Lakhimpur Kheri district and one blood storage unit is available. District was functioning with 40 Designated Microscopy Center (DMC) which was provided screening and medicine to the TB patient in the district including public and private facility. District was running with 23 Tuberculosis Unit with 17 CBNAAT machines were functioning in the district. One drug resistant TB centres were functioning. NCD clinic is

functional at district hospital and at 17 CHCs. Three CHCs have separate NCD MOs available in these blocks. Comprehensive Abortion Care (CAC) services were available in district women hospital for 1<sup>st</sup> and 2<sup>nd</sup> trimester under the PC-PNDT act.

**Table 8:** Operational health facilities in Kheri district, 2021-22

Facility Details	Planned/Operational
1. District Hospitals	2/2
1a) No. of DH conducting > 50 deliveries /month	1
1b) No. of DH conducting C-section	1
2. Community Health Centres (CHC)	16/15
2a) No. of CHCs / MH conducting > 20 deliveries /month	15
3. Primary Health Centres (PHC)	58
3a) No. of 24X7 PHCs conducting > 10 deliveries /month	2
4. Sub Centres (SC)	582
4a) No. of SCs conducting >3 deliveries/month	6
5. Special New-born Care Units (SNCU)	1
6. Nutritional Rehabilitation Centres (NRC)	1
7. District Early intervention Centre (DEIC)	1/0
8. First Referral Units (FRU)	6/4
9. Blood Bank	3/1
10. Blood Storage Unit (BSU)	3/1
11. No. of PHC converted to HWC	51
12. No. of U-PHC converted to HWC	0
13. Number of Sub Centre converted in to HWC	342/220
14. Designated Microscopy Centre (DMC)	40
15. Tuberculosis Units (TUs)	23
16. CBNAAT/ TruNat Sites	17
17. Drug Resistant TB Centres	1/1
18. Functional NCD Clinic at DH	1/1
19. Functional NCD Clinic at CHCs / MH	17/17
20. Institutions with ultrasound facilities (Public + Private)	1 pub./1 priv
21. Of these, how many are registered under PCPNDT act	0

Source: District Checklist, NHM PIP Monitoring, 2022

### 3.2 Human Resource for Health

The status of human resources in Lakhimpur Kheri district suggests shortage of MO (MBBS) and specialized doctors in the district. No post of Gynaecologist and Paediatrician was sanctioned and placed in the district. It show that 110 posts filled against 206 posts were sanctioned for MO (MBBS) which is 53% of post vacant in the district. Similarly, 50% post of Surgeon was vacant. There was huge shortage of Radiologist post in the district. It was shown that more than 60% of this post lying vacant. Only one post of Radiologist filled against 16 posts were sanctioned in the

district and 11% post of Anaesthetists were vacant, which show that two posted against 18 Radiologist posts were sanctioned. On the other hand, 187 staff nurse posts were vacant against 228 posts were sanctioned, in result, 82% SNs posts were vacant in the district. Two posts for lab technician were shortfall against 42 posts sanctioned in the district. However, 125 pharmacists were working against 133 posts sanctioned in the district in 2021-22. A total of 12 dental MOs were posted against 15 posts were sanctioned. In the district, 133 posts have been sanctioned for Pharmacist against this, 125 posts were filled. A total of 191 Community Health Officer were posted at HWC centres in the district which is equal to the sanctioned post.

**Table 9:** Availability of human resources in Kheri district

Human Resources (Regular+ NHM+ other sources)	Sanctioned	In-place	vacancy (%)
MO (MBBS)	206	110	53
OB&GY	0	0	0
Pediatrician	0	0	0
Anesthetists	18	2	11
Surgeon	2	1	50
Radiologists	16	1	62
Another specialist	0	0	0
ANMs	925	759	82
MPW (Male)	0	0	0
Staff Nurse	228	187	82
Lab technician	42	40	95
Pharmacists (Allopathic)	133	125	93
Radiographer/ X-ray technician	15	7	46
Dental /Mo	15	12	80
CHO/ MLHP	191	191	100
Dental technician	0	0	0
Dental hygienist	16	12	75
CSSD technician	0	0	0
OT technician	0	2	0
AYUSH MO	0	45	0
AYUSH pharmacist	0	0	0
<b>Total</b>	<b>1807</b>	<b>1494</b>	<b>82</b>

Source: District Checklist, NHM PIP Monitoring, 2022

### 3.3 Ayushman Bharat Programme

The Ayushman Bharat-Health and Wellness Centres (AC-HWC) was launched in 2018 under the Ayushman Bharat Programme to develop a more comprehensive range of services for all age groups. AB-HWCs provide free essential medicines and diagnostic services. To ensure delivery of Comprehensive Primary Health Care (CPHC) services, existing sub-centres are being converted into Health and Wellness Centre. The Health and Wellness Centre provides expanded range of services such as pregnancy, childhood and adolescent services, family planning, care of

ENT problems, oral health care, elderly services, emergency and mental health services. Apart from that major focus is on the screening, prevention, control and management of Non-Communicable Disease (NCD) in the community.

**Table 10:** Implementation of Comprehensive Primary Health Care (CPHC), Kheri district

Indicators	Planned	Completed
1. Number of individuals enumerated	NA	125887
2. Number of CBAC forms filled	62727	62727
3. Number of HWCs started NCD screening		
3.1 SHC- HWC	191	191
3.2 PHC- HWC	58	58
3.3 UPHC - HWC	NA	NA
4. Number of individuals screened for:	Screened	Diagnosed
4.1 Hypertension	535765	21850
4.2 Diabetes	535765	16878
4.3 Oral Cancer	267054	NA
4.4 Breast Cancer	267054	NA
4.5 Cervical Cancer	170	32
5. Number of HWCs providing Tele-consultation services	191	191
6. HWCs organizing wellness activities	191	191
7. Universal health screening conducted		Yes
<b>NCDs</b>	<b>Screened</b>	<b>Diagnosed</b>
7.1 Hypertension	535765	21850
7.2 Diabetes	535765	16878
7.3 Oral cancer	267054	0
7.4 Brast cancer	267054	0
7.5 Cervical cancer	170	32
8. If conducted, what is the target population		NA
8.2. No. of CBAC form filled till date		62727
9. If grievance redressal mechanism in place		Yes
10. If Mera-Aaspatal has been implemented		Yes

Source: District Checklist, NHM PIP Monitoring, 2022

The information regarding the comprehensive primary health centre in the district 2021-22 is ascertained. A total of 125887 individuals are enumerated through survey but only 62727 CBAC forms are filled. In the district, 191 SHC-HWC started NCD screening and 58 PHC-HWC provided NCD services. Under NCD screening, a total of 535765, 535765, 267054 and 170 cases are screened for hypertension, diabetes, oral cancer and cervical cancer, respectively. Out of screened patients, a total of 21850, 16878 and 32 cases were diagnosed for hypertension, diabetes and cervical cancer respectively.

## Chapter-4 NHM Programmes and Interventions

### 4.1 RMNCH+A Services

The Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) strategy is built upon the continuum of care concept and aim to improve health infrastructure, referral transport and supply chain management.

**Table 11:** Status of NRC, RBSK and SNCU programmes in Kheri, 2021-22

Intervention / Activities	Indicator status	
<b>Nutrition Rehabilitation Centers (NRC)</b>	1 NRC at DWH	
Total admission (2021-22)	164	
Discharged	148	
Referral / medical transfer	2	
LAMA / Died	35	
<b>Admission</b>		
Bilateral pitting oedema	0	
MUAC<115 mm	89	
<-3SD WFH	163	
Diarrhea	53	
Fever / Nutritional related disorder	81/164	
<b>Referred by</b>		
Referred by Frontline worker	51	
By OPD / Pediatric ward	20	
RBSK with AWC	84	
Self	9	
<b>Rashtriya Bal Swasthya Karyakram</b>	Implemented	
Total No. of RBSK teams sanctioned	30	
No. of team with all HR in-place	9	
No. of vehicles (on the road) for RBSK teams	30	
Average no. of screened for defects at birth	74	
Average no. of children screened per day per team	31	
No. of blocks without dedicated teams	21	
<b>Special Newborn Care Unit (SNCU)</b>	Implemented	
Radiant warmer	10	
Kangaroo Mother Care (KMC) unit	6 units	
	<b>In-born</b>	<b>Out-born</b>
Admissions	326	261
Discharged	279	184
Defects at birth	06	02
Referral	13	16
LAMA	18	27
Died	18	35
<b>Home Based New-born Care (HBNC)</b>	<ul style="list-style-type: none"> <li>Total number of ASHA: 3621</li> <li>ASHAs with drug kits: 1321</li> <li>Total no. of ASHAs with HBNC Kits: 3010</li> </ul>	

Source: District Performa, NHM PIP Kheri district, 2022

National Rehabilitation Centre is functioning at DWH Lakhimpur Kheri district. Under NRC unit, a total of 164 malnourished children have been admitted at the district women hospital. Out of total admission, 51 children were referred by frontline workers (AWW, ASHAs and ANM), 20 from OPD / Pediatric ward, 84 by RBSK teams and nine by the parents of the child themselves. The major cause of admission was severe wasting (SAM, 163 newborns) followed by MUAC<115 mm and diarrhea cases during 2021-22. Total 148 children have been discharged, two were referred and 35 LAMA cases are noted from NRC units at district women hospital.

RBSK programme was functioning and 30 teams in 15 blocks sanctioned in the district. Each team of RBSK has 4 members and 2 teams available per block. Only nine teams are complete with HR and 21 have partial teams which is less than four members. RBSK team screened on an average 31 children per team. Special new born care units (SNCU) is functioning with 10 bedded unit in the district. Six KMC unit were available for exclusive breastfeeding after child birth. Total 10 radiant warmer were working in SNCU. Under the HBNC, a total of 3621 ASHAs are working in the district and 3010 ASHAs have received the HBNC kits and 1321 received drug kits.

#### **4.2 National Disease Control Programmes**

In the district, Integrated Disease Surveillance Programme (IDSP), National Vector Borne Disease Control Programme (NVBDCP), National Tuberculosis Elimination Programme (NTEP) and National Leprosy Elimination Programme (NLEP) programmes were operational. Rapid response team are being constituted under the Integrated Disease Surveillance Programme (IDSP). The team comprises of Nodal Officer Vector Borne Disease, District Malaria Officer (DMO), Epidemiologist, Pharmacist and Lab Technician. Under the NVBDCP, micro plan is available at district level. Annual blood examination rate was decreased from 1.34% in 2019-20 to 0.58% in 2021-22 in the district. In 2021-22, six outbreaks were investigated and 29% of private health facilities were reporting weekly data on IDSP portal.

Under National Tuberculosis Elimination Programme (NTEP), 74% of TB notification target have been achieved by the district. The target TB notification from public and private practitioners were reported in 2021-22. Under the programme, drugs for both drug sensitive and drug resistance TB were made available. Public sector notified a total number of 5021 of TB patients to local health authorities while private sector notified only 2039 patients. Of the total notified cases, treatment success rate was almost 87% in public and 85% in the private sector. Number of MDR-TB patients identified were 110 cases in public sector and no cases were reported by private sector in 2021-22. Under National Leprosy Eradication Programme, only 310 new cases were detected but none are diagnosed with Grade 2 Disabilities (G2D). The MCR footwear and self-care kits are available but there is no facility for reconstructive surgery.

**Table 12: IDSP, NVBDCP, NTEP and NLEP services, Kheri district 2021-22**

<b>National Disease Control Programmes</b>		<b>Observations</b>
<b>1</b>	<b>Implementation of Integrated Disease Surveillance Programme</b>	Yes
1.1	Rapid response team constituted and composition of the team	Yes, 09 members
1.2	No. of outbreaks investigated in previous and current year	6 (2021-22)
<b>2</b>	<b>Implementation of National Vector Borne Disease Control Programme (NVBDCP)</b>	Yes
2.1	Micro plan and macro plan available at district level	Yes
2.2	Annual Blood Examination Rate	
	2019-20	1.34%
	2020-21	0.51%
	2021-22	0.58%
2.3	Reason for increase/ decrease (trend of last 3 years to be seen)	Due to covid-19
2.4	Long Lasting Impregnated Bed nets (LLIN) distribution	NA
2.5	Indoor Residual Spray (IRS) for Malaria control	NA
2.4	Anti-larval methods	Drain water collection
2.5	Contingency plan for epidemic preparedness	Yes
2.6	No. of MDR rounds observed	13 in 2021-22
<b>3</b>	<b>Implementation of National Tuberculosis Elimination Programme</b>	Yes
3.1	Target TB notification achieved	Yes, 7060/9500 (74.3%)
3.2	Whether HIV Status of all TB patient is known	Yes
3.3	Whether drugs for both drug sensitive and drug resistance TB available	Yes
3.4	Eligible TB patients with UDST testing	5275/8116 (65%)
<b>3A</b>	<b>Patients notification from public sector</b>	
	No of patients notified	5021
	Treatment success rate	87%
	No. of MDR TB Patients	110
	Treatment initiation among MDR TB patients	110
<b>3B</b>	<b>Patients notification from private sector</b>	
	No of patients notified	2039
	Treatment success rate	85%
	No. of MDR TB Patients	0
	Treatment initiation among MDR TB patients	0
<b>3C</b>	Beneficiaries paid under Nikshay Poshan Yojana	Yes
<b>4</b>	<b>Implementation of National Leprosy Eradication Programme (NLEP)</b>	Yes
	No. of new cases detected	310
	No. of G2D cases	0
	MDT available without interruption	Yes
	MCR footwear and self-care kit available	Yes

Source: District Performa, NHM PIP Lakhimpur Kheri, 2022

### 4.3 Status of Newborn

In this section, information about status and outcome of new-born admitted in SNCU at DWH in Kheri during 2021-22. A total of 587 children were admitted in SNCU including in-born and out-born children. Out of total admission, 381 male and 206 female children were admitted in SNCU. Larger number of children are admitted under low birth weight and birth asphyxia. A total of 265 children were admitted due to birth weight less than 2500 gm. Most of the children stayed between 4 to 7 days whereas 198 children stayed for more than 7 days in SNCU. Total 485 children were admitted in SNCU for oxygen followed by antibiotic treatment (417) and photo therapies (132) in the SNCU. A total of 463 children have been discharged from SNCU and 53 children died in the hospital. 29 children were referred from the hospital and 45 have LAMA cases.

**Table 13:** Status of newborn received services in SNCU, Kheri district, 2021-22

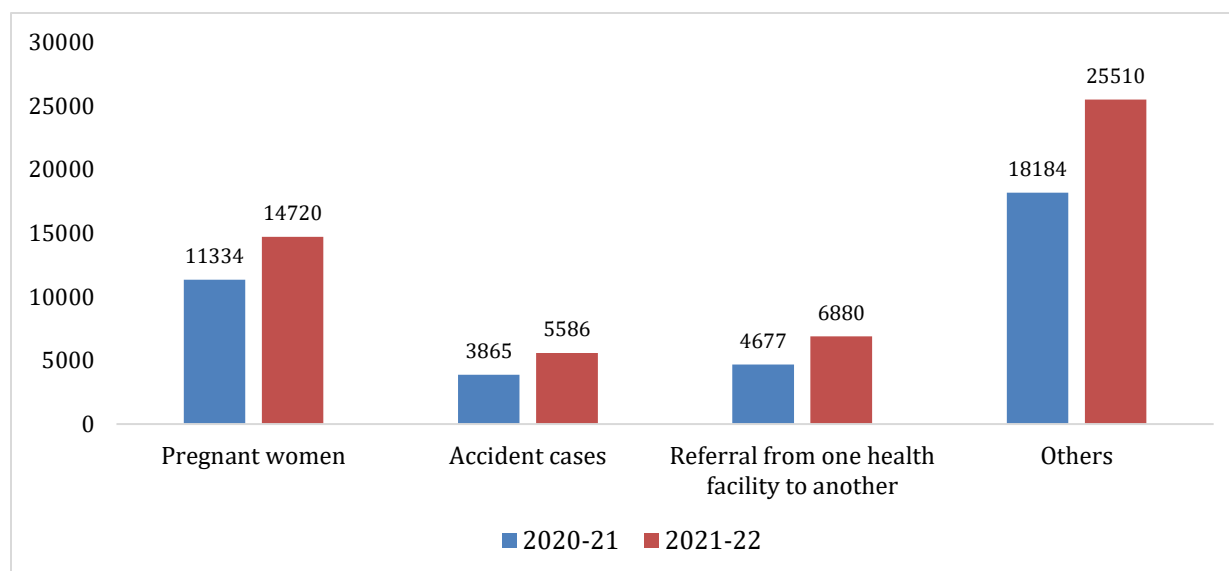
Indicators	2021-22		
	In-born	Out-born	Total
<b>1. Status of SNCU</b>			
Total admission in SNCU	326	261	587
Male	202	179	381
Female	124	82	206
<b>2.1 Birth weight at admission</b>			
>=2500 gm	154	111	265
1500-2499 gm	162	127	289
1000-1499 gm	10	22	32
<1000 gm	0	1	1
<b>2.2 Duration of stay</b>			
<1 day	10	31	41
1-3 days	67	59	126
4-7 days	145	80	225
>7 days	106	92	198
Average duration of stay	6.12	5.62	11.74
<b>2.3 No. of newborn received;</b>			
Phototherapy	73	59	132
Antibiotics	207	210	417
Oxygen	280	205	485
<b>2.4 Outcome</b>			
Discharge	279	184	463
Referred	13	16	29
LAMA	18	27	45
Died	18	35	53

Source: District Performa, NHM PIP Kheri, 2022

### 4.4 Status of Referral Transport

Emergency services is the primary responsibility to access the health facility by the patients. All the ambulances are GPS fitted. There are two operational agencies were providing the services. These agencies are; Medcare 365 and GVK-EMRI for ALS and NLS respectively. Below figure provides performance indicators of referral transport in Lakhimpur Kheri district. It was observed that number of pregnant women has been from 11334 in 2020-21 to 14720 pregnant women have received the ambulance service in 2021-22. Whereas, the number of accident cases were more in 2021-22 at 5586 cases and 3865 cases in 2020-21. Total number of referred cases were increased from 4677 in 2020-21 to 6880 cases in 2021-22 referred from one facility to another facilities. Others cases were reported higher in 2021-22 as compared with previous year.

**Figure 3:** Performance indicators of referral transport in Kheri district, 2020-22



### 4.5 Quality Assurance Programme

To reduce maternal and newborn mortality and to improve the quality of care during the delivery and immediate post-partum care and ensure timely referrals and follow-up, district women hospital was implemented LaQshya programme, about 59% scored for labour room and 74% for OT in 2021-22. Only district women hospital is implemented NQAS programme. The Kayakalp programme was launched by MoHFW on 15<sup>th</sup> May 2015, to promote the cleanliness, hygiene and infection control practices in public health care facilities. This programme covered six areas were; hospital upkeep, sanitation and hygiene, waste management, infection control, hospital support services and hygiene promotion. In the district, one Community Health Centre and three Primary Health Centres were certified for Kayakalp programme in 2021-22.

## 4.6 Community Process

The community processes involve the ASHAs and Village Health Sanitation and Nutrition Committees and related support structure. ASHAs play important role to create awareness and provide information to the community on nutrition, sanitation and hygiene practice, safe delivery, immunization and prevention of common diseases.

**Table 14:** Key indicators for ASHA and ASHA facilitators, Lakhimpur Kheri, 2022

Sl.no.	Key indicators	Number
<b>1</b>	<b>Status of ASHAs</b>	
1.1	ASHAs required as per population	175
1.2	Selected ASHAs	3621
1.3	No. of ASHAs covering more than 1500 (rural) population	348
1.4	Villages/ slum areas with no ASHA	2818
1.5	No. of ASHAs covering more than 3000 (urban) population	77
<b>2</b>	<b>Status of social benefit scheme for ASHAs and ASHA Facilitators</b>	
2.1	ASHAs enrolled for Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY)	1845
2.2	ASHA Facilitator enrolled for PMJJBY	145
2.3	ASHAs enrolled for Pradhan Mantri Suraksha Bima Yojana (PMSBY)	1599
2.4	ASHA facilitator enrolled for PMSBY	115
2.5	ASHAs enrolled for Pradhan Mantri Shram Yogi Maandhan Yojana (PMSYMY)	925
2.6	ASHA facilitator enrolled for PMSYMY	87
<b>3</b>	<b>Status of Mahila Arogya Samitis (MAS)</b>	
3.1	MAS Formed	9
3.2	MAS Trained	9
3.3	MAS account opened	9
<b>4</b>	<b>Status of Village Health Sanitation and Nutrition Committee (VHSNC)</b>	
4.1	VHSNC Formed	1467
4.2	VHSNC Trained	0
4.3	VHSNC account opened	1232

A total of 3621 ASHAs are working in the district whereas 175 more ASHAs are required as per the population norm whereby each ASHA can serve a population of 1000 in rural areas. The details of ASHAs and ASHA Facilitators enrolled under the Pradhan Mantri Suraksha Bima Yojana (Life Insurance) scheme in Kheri district as follows. A total of 1845 ASHAs were covered under the Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY) and 1599 ASHAs under the Pradhan Mantri Suraksha Bima Yojana (PMSBY) in district. Similarly, 145 ASHA Facilitator were covered under PMJJBY and 115 in PMSBY scheme. A total of nine Mahila Arogya Samiti (MAS) and 1467 VHSNC were formed and basic training to the members was provided.

## Chapter-5 Health Facilities Monitoring Assessment

### 5.1 District Women Hospital (DWH), Lakhimpur Kheri

- District women hospital is functioning with 50 bedded hospital. The C-section services are available. The building of the hospital is about 120-year-old and should be reviewed for repairs and maintenance. Average normal delivery about 500-600 and 5-6 C-section deliveries per month were reported at DWH Kheri.
- There is separate 200 bedded MCH wing in Oel which is about 14 km. away from the Kheri district. Male hospital services were shifted in MCH wing but no MCH services are initiated yet in the facility.
- District women hospital has suggested to merge them with the MCH wing which provides better services with existing doctors. The major problem was lack of space in the DWH and during rainy season most the services are disrupted.
- Posts for Radiologist and Pathologist were vacant in women hospital against the sanctioned one post of each. Four Gyneacologist and one each of Paedestrian and Anesthetist were posted at district women hospital.
- It provides services like; OPD, delivery care services, IPD, family planning, emergency & LSCS, Anesthesiology, USG, SNCU and Immunization at DWH Kheri.
- SNCU is functioning with 10 bedded ward and 2 phototherapies. Total 587 new born children were admitted in SNCU, 29 referred from the hospital and 43 were died in the hospital during 2021-22.
- Blood bank is functional in Male hospital and the services were provided free of charge for JSSK beneficiaries. OT service is available for C-section and other emergency services are being provided by district male hospital.
- There is no ICU facility available in district hospital and any complication regarding childbirth and mothers were referred to the King George Medical Hospital (KGMU) and Queen Merry Hospital in Lucknow.
- Shortage of Boyle's apparatus, microscope and radiant warmer are some of the major factors responsible for high OOPE and poor maternal health indicators in the district.
- Kayakalp programme is implemented at district women hospital and DWH has received 74.1% score in 2021-22. NQAS programme has been implemented and state level assessment completed with 60.6% score.

- LaQshya programme is implemented to provide respectful delivery care services to the mother during stay in the hospital. DWH has received 58.8% score for labour room and 74.5% for OT under this programme in 2021-22.
- Major diagnostic and laboratory services like X-ray and CT scan are not available in district women hospital. These services were available in male hospital. USG service was available at women hospital.
- Adolescent Friendly Health Clinic is functioning at district women hospital and counsellor provide counselling services to the female. Total 2221 adolescent females have received counselling services in last six months.
- Tele-consultation / medicine service is not yet initiated in the district women hospital. Weekly data entry of P and L form is not reported on IHIP portal under IDSP programme by the district women hospital.
- 21 cases are referred from district to higher level of facility for complication with pregnancy and severe anemia in September 2022.

**Table 15:** Services available at District Women Hospital, Kheri

List of services	Yes/No
Medicine	N
O&G	Y
Paediatrician	Y
General Surgery	N
Anaesthesiology	Y
Ophthalmology	N
Dental	N
Imaging Services (X – ray)	N
Imaging Services (USG)	Y
District Early Intervention Centre (DEIC)	Y
Nutritional Rehabilitation Centre (NRC)	Y
SNCU/ Mother and New-born Care Unit (MNCU)	Y
Comprehensive Lactation Management Centre / Lactation Management Unit (LMU)	N
Neonatal Intensive Care Unit (NICU)	N
Paediatric Intensive Care Unit (PICU)	N
Labour Room Complex	Y
Incentive Care Unit (ICU)	N
Dialysis Unit	N
Emergency Care	Y
Burn Unit	N
Teaching block (medical, nursing, paramedical)	N
Skill Lab	Y

Source: District Checklist, NHM PIP Monitoring, 2022

**Table 16:** Status of infrastructure at District women hospital (DWH), Kheri 2022

<b>Infrastructure indicators</b>	<b>Yes/No</b>
24*7 running water facility	Y
Clean functional toilets available (separate for Male and female)	Y
Drinking water facility available	Y
OPD waiting area has sufficient sitting arrangement	Y
Facility is geriatric and disability friendly (ramps etc.)	Y
ASHA rest room is available	N
Drug storeroom with rack is available	Y
Power backup (Complete Hospital / Part of the hospital)	Y
Availability of delivery services	Y
If facility is designated as FRU, whether C-section are performed	Y
PMSMA services provided on 9 <sup>th</sup> of every month	Y

Source: District Checklist, NHM PIP Monitoring, 2022-23

**Table 17:** Emergency services available at DWH at Kheri, 2022

<b>Emergency services</b>	<b>Yes/No</b>	<b>Key information</b>
General emergency	N	Available at Male hospital
Facility available for-Triage	N	
Facility available for-Resuscitation	N	
Facility available for-Stabilization	N	
<b>OT services available</b>	Y	
If Yes, types of OT services available	Y	
If yes, Single general OT	N	
Elective OT-Major (General)	N	
Elective OT-Major (Ortho)	N	
Obstetrics & Gynaecology OT	Y	
Ophthalmology / ENT OT	N	Available at District Male Hospital
Emergency OT	N	
<b>Other services</b>		
Availability of functional blood bank	N	Available at District Male Hospital
Whether blood is issued free or user fee charged	Y	Free for BPL, Elderly and JSSK
Biomedical waste management practices	Y	Spectrum Based Solution PVT. Limited
Line listing of high-risk pregnancies	Y	
Whether facility have register for entering births and deaths	Y	
Comprehensive abortion care (CAC) available	Y	
Availability of vaccine and hub cutter	Y	

Source: District Checklist, NHM PIP Monitoring, 2022-23

**Figure 4:** Pictures of visited DWH, CHC Palia and Phardhan Kheri, 2022



## 5.2 Community Health Centre, Phardhan

- CHC Phardhan provides services like; Medicine, normal delivery services including C-section, general surgery, Dental, ANC, PNC, pregnancy check-up, family planning and basic lab tests.

The hospital is functioning with 20 bedded facility. Facility has no FRU point only normal delivery care facility was available.

- Two MO (MBBS) on contractual and one each of dentist and lab technician were posted at the facility. No specialist posts were filled up despite having sanctioned one each post of Medicine, Gyneacologist, Paedestrian and Anesthetist.
- CHC Phardhan provides services like; Medicine, normal delivery services including C-section, general surgery, Dental, ANC, PNC, pregnancy check-up, family planning, NBSU and basic lab tests.
- JSY and JSSK services are available at the facility for beneficiaries who stay for 48 hours after delivery. During this period, they receive free diet, drugs, diagnostics and free referral transport.
- 21 new cases were detected by field worker in last one year under the leprosy eradication programme. The community surveillance is being conducted once in a month in villages.
- Availability of trained provider for IUCD/PPIUCD counsellor was noted at CHC. Family planning counselling was given by Staff Nurses. Total 32 female have undergone sterilisation whereas only one male sterilisation was performed in September 2022.
- CHC Phardhan has a Designated Microscopy Centre (DMC) for screening of TB patients through CBNAAT/TruNat machine.
- PMSMA services is being provided to pregnant women on 9<sup>th</sup> of every month at the facility. The line listing of high-risk pregnancy cases was identified and maintained by the ANM and ASHAs.
- CHC Phardhan has implemented Kayakalp programme and received 78% scored in 2021-22. CHC has not initiated LaQshya and NQAS programme. Tele-consultation service was not available.
- The facility has four ambulances to provide free emergency and delivery services to the patients.
- Essential Drug List (EDL) is available and displayed in OPD areas at the facility. A total of 134 drugs are available against 157 drugs listed in EDL, on the day of visit. DVDMS system is implemented by the facility for supply chain management.
- The facility maintained the records of TB treatment card, TB notification registers, Malaria cases, dengue, Chikungunya and leprosy cases.

### 5.3 Community Health Centre, Palia

- A total of 30 beds are functional at the facility. Community Health Centre Palia provides ANC, PNC, pregnancy check-up, labour room services, family planning, basic lab tests and health counselling, Ayurvedic dispensary and dental services.
- Specialised services like medicine, Gynaecologist, Paediatric, Anaesthesiology and Ophthalmology available at the CHC Palia.
- The facility provides adolescent friendly health clinic-based counselling to adolescents through a Medical Officer. However, no separate male and female counsellors are available.
- There was shortage of certain drugs such as Metformin, Glimepiride, Tramadol tablets, Amoxicillin 250mg and Cefixime 200 mg tablets. However, it was reported that there was sufficient supply of essential consumables.
- Essential diagnostics is available both in-house and PPP mode at the facility. Lab tests facility was providing in house and digital X-ray and CT scan services available on PPP mode through Star Imagine and Path Lab Private Ltd.
- CHC Palia have a total of 274 ASHAs as against 324 required number of ASHAs as per the population norm.
- Special New Born Care Unit is functioning with 8 beds and all the beds were occupied. A total of 303 in-born and 261 out-born children were admitted during 2021-22. SNCU have three Pediatricians, seven staff nurses and one data entry operator.
- Blood storage unit is functioning at the facility and four units of blood were available at the time of the visit. Total four blood transfusions were done in July 2022. Blood is issued free for JSSK beneficiaries.
- Shortage of equipment like digital blood pressure, oxygen concentrators and glucometer were noted during visit. Total funds received under RKS by the facility was Rs. 273108 and the expenditure made was Rs. 268041. Utilization of 98.1% of the funds.
- PMSMA services is being provided to pregnant women on 9th of every month at the facility. A total of 671 women received ANC check-up, out of these, 40 women were identified as high-risk pregnancies cases during June and July 2022.
- CHC Palia is the Designated Microscopy Centre (DMC) for screening of TB patients. Out of total OPD conducted in last six month, average 1.5% of patients were tested for TB. Total 29% patients tested through CBNAAT/TruNat for drug resistance in the last six months.

**Table 18:** Availability of specialized services at CHC Palia and Phardhan

<b>Services</b>	<b>CHC-Palia</b>	<b>CHC-Phardhan</b>
Medicine	Yes	Yes
Obstetrics & Gynecologist	Yes	No
Paediatrician	No	No
General Surgery	Yes	Yes
Anaesthesiology	No	No
Ophthalmology	No	No
Dental	No	Yes
Imaging Services (X – ray)	Yes	No
Imaging Services (USG)	No	No
New-born Stabilization Unit	Yes	Yes
Tele-medicine/Consultation services available	Yes	No
Operation theatre	Yes	Yes
Availability of functional blood storage unit	Yes	No

Source: Community Health Centre Checklist, NHM PIP Monitoring, 2022-23

**Table 19:** Emergency, OT, TB programme and other services at CHC Palia and Phardhan, 2022

<b>Emergency and OT services</b>	<b>CHC-Palia</b>	<b>CHC-Phardhan</b>
General emergency	Yes	Yes
Facility available for-Triage	Yes	No
Facility available for-Resuscitation	Yes	No
Facility available for-Stabilization	Yes	No
OT services available	Yes	Yes
If Yes, major OT available	Yes	No
Minor OT available	Yes	Yes
<b>Drugs and Diagnostic</b>		
Availability of list of essential medicines (EML)/ drugs	Yes	Yes
DVDMS or similar supply chain management system	Yes	Yes
Availability of essential diagnostics	Yes	Yes
X-ray services is available	Yes	No
Is the X-ray machine AERB certified	Yes	No
<b>Maintenance of records</b>		
Maintenance of records on TB cases	Yes	Yes
TB notification registers	Yes	Yes
Maintenance of records on Malaria cases	Yes	Yes
Maintenance of records on Palliative cases	Yes	Yes
Maintenance of records on Dengue and Chikungunya	Yes	Yes
Maintenance of records on Leprosy cases	Yes	Yes
<b>Other services</b>		
Line listing of high-risk pregnancies	Yes	Yes
Facility have register for entering births and deaths	Yes	Yes
Comprehensive abortion care (CAC) service available	No	No
Availability of trained provider for IUCD / PPIUCD	Yes	Yes
FP-LMIS has been implemented	Yes	Yes
Availability of Adolescent Friendly Health Clinic (AFHC)	No	Yes
Whether facility has fixed day for NCD clinic	No	Yes
Reporting of weekly data in P, S and L form under IDSP	Yes	Yes
Are service provider trained in cancer services?	Yes	No

#### 5.4 Primary Health Centre, Gauri Phanta

- Primary Health Centre Gauri Phanta is situated near to road side. The referral point is CHC Palia which is 32 km from the PHC.
- The facility has four functional beds but it is not as per the IPHS norms. Lack of basic facilities like; clean drinking water facility, OPD waiting area for OPD patients and ramps for elderly people were observed during visit.
- The facility provides OPD, ANC, routine immunization, COVID-19 vaccination services to the patients. Only four beds are available at the PHC.
- Basic lab tests like; Malaria, HIV, Syphilis, Hemoglobin, blood sugar and pregnancy check-up are available at PHC.
- It is observed that facility has low OPD patients per month and average 20-25 OPD patients visit per day. There is no lab technician available at facility which affects the OPD numbers.
- Tele-medicine or consultation services is not available at the facility. IT facilities like desktop and functional tablets has not been provided to the facility. Smart phone has been given to the ASHAs and ANMs.
- Drugs and Vaccine Distribution Management System (DVDMS) is not implemented by the facility. A total of 83 drugs are available during facility visit instead of 99 drugs were listed in EDL in 2021-22.
- Village Health, Sanitation and Nutrition Day (VHSND) is conducted on routine basis by ANMs, ASHAs and AWC.
- There is no X-ray service available at the facility. All the patients for the same were referred to the CHC Palia or to the District Hospital.
- Line listing of high-risk pregnancy is maintained by the ASHAs. Facility was not designated as Microscopy centre.
- Facility is functioning with only one medical officer (MBBS), one ANM and one pharmacist posted at the PHC to provide their services. No staff nurse was posted against one sanctioned post.
- The facility has vaccines and hub cutter and ANMs/Nurses are aware about the open vial policy. ASHAs were not reporting weekly data of P and L form under the IDSP programme.
- PHC Gauri Phanta provide day care services and no provision of stay overnight. The facility has not initiated the Kayakalp and NQAS programme.

## 5.5 Primary Health Centre, Kala Aam

- PHC Kala Aam is accessible from the road and the next referral point is district hospital which is 12 km. away from facility and 16 km. from CHC Phardhan. The facility is furnished with all the basic amenities such as drinking water facility, OPD waiting area, drug store room with rack, power backup and branding.
- PHC is functional with 4 beds and the services available are OPD, normal delivery care, family planning, routine immunization and basic lab tests available for the patients.
- Essential Drug List (EDL) is available but not properly displayed in OPD area at the facility. A total of 99 drugs listed in the EDL. Out of EDL drugs, only 38 drugs are available on the day of visit.
- PHC Kala Aam provides only ANC and OPD services and huge shortage of manpower was noted during the visit.
- Only one MO (MBBS) is available with one staff nurse and pharmacist provide their services. Only limited tests like Malaria, Typhoid, HIV and Blood sugar etc. were conducted at facility.
- There is no provision of X-ray machine in the facility. There was no NCD screening facility available at PHC.
- Tele-medicine or consultation service is being provided by the facility. ANMs have provided tablets and smart phones are given to all ASHAs.
- Facility is functioning without lab technician, which is the constraint to provide expand range of test for community. It is leads to increase the cost of expenditure and increase travel time of the patients.
- The facility has trained provider for IUCD/PPIUCD services. Family planning counselling was provided by the staff nurse. FP-LMIS has been implemented for supply of the drugs.
- The total number of in-house tests performed in 2021-22 were 1024. Shortage of sufficient number of Hypertension and Diabetes medicines in last seven days, reported by the facility.
- The PHC has also initiated for Kayakalp with the assessment score 72.3% in 2021-22 and received commendation, 2nd Award in the assessment that year.
- Medical Officer undertakes visits mostly to monitor the VHND sessions. On the other hand, no vehicle is provided to the MO at PHC Kala Aam to facilitate monitoring visits.
- Facility does not report weekly data of P and L form under IDSP programme. Wellness activities are performed by the facility.

## 5.6 Sub-Centre, Dhuskiya

- Sub-Centre Dhuskiya is located in Indo-Nepal border and sub-centre is located in the villageirt from the village with distance of 45-50 km. from the CHC Palia. Sub-centre was covered about 9030 population with one garm sabha.
- The condition of building is good and ANM quarter is available at the sub-centre. SC has facility of clean drinking water, drug store room, delivery table and solar system available for power back up. Most of the scheduled tribe population were living in the village.
- SC-HWC is functioning with one ANM and nine ASHAs. Average 8-9 deliveries per month have been conducted by SC. A total of 33 deliveries were conducted in 2022-23.
- Family planning basket is kept in a corner of the facility, which contained various methods like; Antara, Chhaya, easy pills and Mala-N etc.
- A total of 11 presumptive TB cases identified and referred for testing to the higher facility. Five patients were diagnosed and taken treatment under the SC, out of the presumptive cases in 2021-22.
- The sub-centre has BP instrument, Thermometer, Contraceptive and Glucometer at the facility and maintained the line listing of all pregnant women in their araes.
- Under family planning, Antara is the most referred method used by women, 11 beneficiaries were used this method.
- Village Health Sanitation & Nutrition Day was conducted at AWC as well as at SC. Total five VHSND have been conducted at SC in last six months.
- A total of 177 beneficiaries were identified under PM-JAY scheme. Out of total, 164 golden cards have been distributed and 15 beneficiaries got benefitted under this scheme during 2022-23.
- No Essential Drug List (EDL) is available and displayed in OPD areas at the facility. No anti-TB drugs are available on the day of visit.
- The sub-centre has maintained the record of TB cases (both cases drug sensitive and drug resistant), malaria, palliative, leprosy and dengue & chikungunya cases.
- SC was following the micro plan for immunization in the field. ASHAs followed up of SNCU and LBW discharged in their respective areas.

- Sub-centre has target of 90 pregnant and lactating mothers covered under the Pradhan Mantri Matru Vandana Yojana (PMMVY), against this target, 79 beneficiaries have been covered during January to September 2022.

**Table 20:** Status of SC-HWC health services and records, Kheri, 2022

Indicators	SC-Dhuskiya
<b>Infrastructure</b>	
Condition of building	Good
Clean drinking water facility available	Yes
Specified or separate space for yoga / welfare activities	Yes
Power backup with inverter	Yes
<b>Key services at SC</b>	
Availability of list of essential medicines (EML)/ drugs (EDL)	No
EDL/EML display in OPD area	No
Availability of anti-TB drugs at facility	No
Shortage of 5 priority drugs from EDL in last 30 days, if any	No
Availability of Testing kits/ Rapid Diagnostic Kits	Yes
Availability of delivery services	Yes
Tele-medicine / Consultation services available	No
Availability of vaccines and hub cutter	Yes
Availability of trained provider for IUCD / PPIUCD	Yes
Availability of Vaccine and hub cutter	Yes
Whether Universal screening of NCD has started	No
Whether reporting weekly data in S form under IDSP	Yes
Whether wellness activities are performed	No
Line listing of all pregnant women in the areas	Yes
Line listing of all eligible couple in the areas	Yes
<b>Availability of Equipment</b>	
BP instrument	Yes
Thermometer	Yes
Contraceptive	Yes
Glucometer	Yes
<b>Maintenance of Records</b>	
Maintenance of records on TB cases (drug sensitive/resistant cases)	Yes
Maintenance of records on Malaria cases	Yes
Maintenance of records on Palliative cases	No
Maintenance of records on Dengue and Chikungunya	No
Maintenance of records on Leprosy cases	Yes

Source: Sub-Centre Checklist, NHM PIP 2022-23

## Chapter-6: Conclusion and Recommendations

### 6.1 Conclusion

The report is based on monitoring visits to District Women Hospital Lakhimpur Kheri, Community Health Centre, Palia and Phardhan, Primary Health Centre-HWC, Kala Aam and Gauri Phanta, Sub-Centre, Dhuskiya. Meetings were held with the Chief Medical Officer (CMO) and the NHM Nodal Officials (ACMO and RCH Nodal Officer). Interactions were also held with the Medical Officer in-Charge (MOIC) of the selected health facilities, health care providers (ANM, ASHAs etc.) and visited VHND session in the district.

As per NFHS 2019-21, 53.9% mothers had antenatal check up in the first trimester and 48% had undertaken at least four ANC visits in Kheri district. A total of 82.8% births took place in institutional facilities with 68% births happening across public health facilities. Of the total births, 81.2% births were assisted by a skilled birth attendant whereas about 14.2% births were through caesarean section (public sector 6.7% and private sector 65.8%). The average out of pocket expenditure per delivery in public health facility was Rs. 2126. Anaemia among children age 6-59 months who are anaemic is 66.3% and 56.1% of pregnant women age 15-49 years who are anaemic in the district during 2019-21.

Two district hospital (Male and Female hospital) is fully operational in the district. The DWH is 50 bedded hospital. Average of 500 to 600 deliveries are conducted per month including C-section by DWH. District has 15 Community Health Centres (CHC) facilities, 58 Primary Health Centre (PHCs) and 582 Sub-Centres (SC). Of these, 197 SCs were functioning in rented buildings. Four Urban-PHC are functioning in the district. One Nutritional Rehabilitation Centre and Special Newborn Care Unit (SNCU) is functioning at DWH for providing newborn and child health services. District Early Intervention Centre (DEIC) is not functioning in the district. The four first referral units are also functioning in the district.

CHC Palia and Phardhan provides OPD, normal delivery, ANC, pregnancy check-up, family planning services and basic lab tests services. All the Primary Health Centre (PHC) are operational and provide general services like: OPD, immunization, ANC check-up and family planning services at the centre. A total of 342 sub-centres are planned to be converted into Health and Wellness Centre and so far, 220 sub-centres have been converted into HWC in 2022. However, 51 PHCs have also been converted into HWC. Blood bank facility is available in the district male hospital and three blood storage unit to be planned and currently, only one blood storage unit is functioning.

Under diseases control programme, the National Vector Borne Disease Control Programme (NVBDCP) is functioning in the district. Annual Blood Examination Rate (ABER) has decreased from 1.34% in 2019-20 to 0.58% in 2021-22 in the district. The National TB Elimination Programme (NTEP) was achieved 74.3% target TB notified patients. A total of 5021 TB patients notified from public sector and 2039 notified patients from the private sector in 2021-22. The district has achieved 87% and 85% treatment success rate in public and private sector, respectively. Under National Leprosy Eradication Programme, 310 new cases were detected and no Grade 2 disability patients were detected in 2021-22.

Integrated Disease Surveillance Programme (IDSP) is implemented in the district, rapid response team was constituted which contained of nine members team at district as well as block level. In district, about 29% of private health facilities were reporting weekly data of IDSP. Under IDSP, data is collected on epidemic prone disease on daily basis. The information is collected on three specified reporting formats namely; S (suspected cases), P (presumptive cases) and L (laboratory confirmed cases) form filled by portal operator/CHO which is provided by health workers, clinicians and laboratory staff respectively.

District has implemented Comprehensive Primary Health Care (CPHC) under the Ayushman Bharat scheme. A total of 58 PHC-HWC and 191 SC-HWC have started the NCD screening in the district. PMSMA programme was implemented in the district. One district hospital, 19 CHCs and 64 PHCs were conducted PMSMA round on every 9th day of month. Comprehensive Abortion Care (CAC) services were provided by district hospital only. Total 40 Designated Microscopy Centre (DMC) and 23 Tuberculosis Units were functioning in the district.

Under the RBSK programme, total 30 teams were sanctioned in the district. Of these, only nine RBSK teams are complete with full HR members and 21 teams were partially or without dedicated teams in the blocks. Average of 31 children have screened per day per team. District reported a total of 39 maternal deaths (9 at DWH, 28 at CHCs and 2 at PHCs) in 2021-22. No child deaths were reported in the district during the same year. A total of 38 Maternal Death Review (MDR) have been conducted in the district in 2021-22.

In the district, a total of 3621 ASHAs are working and 175 more ASHAs were required as per population norm. Total 348 ASHAs were covered more than 1500 (rural) population. Similarly, 77 ASHAs were covered more than 3000 population in urban areas. However, 2818 such villages where no ASHAs were posted during 2021-22. Three Mobile Medical Unit (MMU) were functioning in the district. About 1440 OPD conducted by per MMU in a month and 2 to 3% of OPD patients were tested for blood smears and RDT done for Malaria per MMU team. Out of total OPD, 1 to 2% of patients referred to the higher facilities.

## 6.2 Recommendations

- **Strengthen the FRU for delivery services in Public Health Facilities:** The level of C-section cases in the private sector is high. The public health facilities should strengthen availability of delivery services especially C-section facilities at CHCs which is far away from the district, to reduce the burden of high out of pocket expenditure on the poorer households using C-section facilities. This also includes strengthening of ultrasound imaging services and other basic tests at the public health facilities.
- **Need to Strengthen the Block Programme Management Unit in the District:** District has 15 blocks with all the functioning CHCs. Out of these, four blocks (Ramia Behar, Pasgawan and Nighasan) are functioning without block programme manager. The effect the programme implementation at the village level. These blocks were backward block in terms of health indicators which need more focused to improve and ensure the fulfilled the vacant post for better utilization of health services.
- **Improve the fund utilization by reviewing guidelines and norms for supporting expenditure as per the planned requirements.** The overall fund utilization under NHM is lower in the district. The guidelines should be consistent with the requirements at the district levels as the prices of services may vary considerably across the state. The factors such as transfer of bank accounts, frequent changes in guidelines including GEM bid, PFMS and FAMS codes as well as challenges related to Aadhar seeding etc should be resolved at the earliest. The financial planning should consider the above aspect to enhance utilization rates.
- **Need to focus on Quality Control Programmes in the District:** District has not initiated the LaQshya and NQAS programmes in the district. Only Kayakalp programme was implemented in one CHC and three PHCs in the district. It will be required to expand the programme in all CHCs as well as PHCs level which provides quality and hygiene facility at the hospital.
- **Complete the RBSK Team in the Blocks:** District was sanctioned 30 RBSK team in 15 blocks but currently, only nine teams have full HR members and 21 CHCs have either partially or no team in the blocks. District is very large in terms of aares in UP. Therefore, it is need to complete all the sanctioned teams for utilization of screening of children in school and AWCs.

## Annexure-I: DH Checklist



### District Hospital (DH)/ Sub-District Hospital (SDH) Level Checklist

Service Delivery:

Name of facility visited	
Facility Type	<input type="checkbox"/> DH/ <input type="checkbox"/> SDH
FRU	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Standalone/ Co-located	<input type="checkbox"/> Standalone/ <input type="checkbox"/> Co-located Co-located with (if applicable):
Accessible from nearest road head	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Date of Visit	
Next Referral Point	Facility: Distance:

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

Indicator	Remarks/ Observation						
1. OPD Timing							
2. Condition of infrastructure/ building  Please comment on the condition and tick the appropriate box	Comments:  <input type="checkbox"/> 24*7 running water facility <input type="checkbox"/> Facility is geriatric and disability friendly (ramps etc.) <input type="checkbox"/> Clean functional toilets available (separate for Male and female) <input type="checkbox"/> Drinking water facility available <input type="checkbox"/> OPD waiting area has sufficient sitting arrangement <input type="checkbox"/> ASHA rest room is available <input type="checkbox"/> Drug storeroom with rack is available  Power backup: <input type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital  Last major renovation done in (Year): _____						
3. Number of functional in-patient beds	_____  No of ICU Beds available:						
4. List of Services available							
<ul style="list-style-type: none"> <li>Specialized services available in addition to General OPD, ANC, Delivery, PNC,</li> </ul>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Sl.</th> <th style="width: 70%;">Service</th> <th style="width: 20%;">Y/N</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td>Medicine</td> <td></td> </tr> </tbody> </table>	Sl.	Service	Y/N	1	Medicine	
Sl.	Service	Y/N					
1	Medicine						

Indicator	Remarks/ Observation
Immunization, FP, Laboratory services	2 O&G 3 Pediatric 4 General Surgery 5 Anesthesiology 6 Ophthalmology 7 Dental 8 Imaging Services (X – ray) 9 Imaging Services (USG) 10 District Early Intervention Centre (DEIC) 11 Nutritional Rehabilitation Centre (NRC) 12 SNCU/ Mother and Newborn Care Unit (MNCU) 13 Comprehensive Lactation Management Centre (CLMC) / Lactation Management Unit (LMU) 14 Neonatal Intensive Care Unit (NICU) 15 Pediatric Intensive Care Unit (PICU) 16 Labour Room Complex 17 ICU 18 Dialysis Unit 19 Emergency Care 20 Burn Unit 21 Teaching block (medical, nursing, paramedical) 22 Skill Lab
5. Emergency	General emergency: or facilities available for: 1. Triage 2. Resuscitation 3. Stabilization
6. Tele-medicine/Consultation services available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average case per day _____
7. Operation Theatre available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, Single general OT: Elective OT-Major (General): Elective OT-Major (Ortho): Obstetrics & Gynecology OT: Ophthalmology/ENT OT: Emergency OT:
8. Availability of functional Blood Bank	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, number of units of blood currently available: _____ No. of blood transfusions done in last month: _____
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

Indicator	Remarks/ Observation																																																												
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10. Biomedical waste management practices	1. Sharp pit 2. Deep Burial pit 3. Incinerator 4. Using Common Bio Medical Treatment plant 5.																																																												
11. Details of HR available in the facility (Sanctioned and In-place)	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 15%;">HR</th> <th style="width: 15%;">San.</th> <th style="width: 15%;">Reg.</th> <th style="width: 15%;">Cont.</th> </tr> </thead> <tbody> <tr> <td>MO (MBBS)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Specialists</td> <td>                             Medicine                              ObGy                              Pediatrician                              Anesthetist                              Surgeon                              Ophthalmologist                              Orthopedic                              Radiologist                              Pathologist                              Others                         </td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Dentist</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Staff Nurses/ GNMs</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>LTs</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Pharmacist</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Dental Technician/ Hygienist</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Hospital/ Facility Manager</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>EmOC trained doctor</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>LSAS trained doctor</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Others</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		HR	San.	Reg.	Cont.	MO (MBBS)					Specialists	Medicine ObGy Pediatrician Anesthetist Surgeon Ophthalmologist Orthopedic Radiologist Pathologist Others					Dentist					Staff Nurses/ GNMs					LTs					Pharmacist					Dental Technician/ Hygienist					Hospital/ Facility Manager					EmOC trained doctor					LSAS trained doctor					Others			
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16. Availability of list of essential medicines (EML)/ drugs (EDL)	<input type="checkbox"/> Yes/ <input type="checkbox"/> No																																																												
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17. Implementation of DVDMS or similar supply chain management system	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one _____																																																												
18. Shortage of 5 priority drugs from EDL in last 30 days, if any	1																																																												
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Indicator	Remarks/ Observation
	3 4
19. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage  In last 6 months how, many times there was shortage_____
20. Availability of essential diagnostics	<input type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed
<ul style="list-style-type: none"> <li>In-house tests</li> </ul>	Timing: Total number of tests performed: _____ Details of tests performed:
<ul style="list-style-type: none"> <li>Outsourced/ PPP</li> </ul>	Timing: Total number of tests performed: _____ Details of tests performed:
21. X-ray services is available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, type & nos. of functional X-ray machine is available in the hospital:  Is the X-ray machine AERB certified: <input type="checkbox"/> Yes/ <input type="checkbox"/> No
22. CT scan services available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No  If yes: <input type="checkbox"/> In-house/ <input type="checkbox"/> PPP  Out of Pocket expenditures associated with CT Scan services (if any, approx. amount per scan): _____
23. 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 type="checkbox"/> Free for all
24. Availability of Testing kits/ Rapid Diagnostic Kits	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage
25. Implementation of PM-National Dialysis programme	<input type="checkbox"/> Yes/ <input type="checkbox"/> No <input type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP Total number of tests performed: _____
<ul style="list-style-type: none"> <li>Whether the services are free for all</li> </ul>	<input type="checkbox"/> Free for BPL <input type="checkbox"/> Free for elderly <input type="checkbox"/> Free for JSSK beneficiaries

Indicator	Remarks/ Observation
	<input type="checkbox"/> Free for all
<ul style="list-style-type: none"> <li>Number of patients provided dialysis service</li> </ul>	<ul style="list-style-type: none"> <li>Previous year _____</li> <li>Current FY _____</li> </ul> <p><i>*Calculate the approximate no. of patients provided dialysis per day</i></p>
26. If there is any shortage of major instruments/ equipment	
27. Average downtime of equipment. Details of equipment are nonfunctional for more than 7 days	
28. Availability of delivery services	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
<ul style="list-style-type: none"> <li>If the facility is designated as FRU, whether C-sections are performed</li> </ul>	<input type="checkbox"/> Yes/ <input type="checkbox"/> No  Number of normal deliveries performed in last month: _____ No. of C-sections performed in last month: _____
<ul style="list-style-type: none"> <li>Comment on the condition of:</li> </ul>	Labour room: OT:  Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input type="checkbox"/> Yes/ <input type="checkbox"/> No
29. Status of JSY payments	Payment is up to date: <input type="checkbox"/> Yes/ <input type="checkbox"/> No Average delay: Payment done till: Reasons for delay:
30. 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
31. PMSMA services provided on 9 <sup>th</sup> of every month	<input type="checkbox"/> Yes/ <input type="checkbox"/> No  If yes, how are high risks identified on 9 <sup>th</sup> ?  If No, reasons thereof:
32. Line listing of high-risk pregnancies	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
33. Practice related to Respectful Maternity Care	
34. Whether facility have registers for entering births and deaths	<input type="checkbox"/> Yes/ <input type="checkbox"/> No

Indicator	Remarks/ Observation		
35. Number of Maternal Death reported in the facility	Previous year: Current year:		
36. Number of Child Death reported in the facility	Previous year: Current year:		
37. If Comprehensive Abortion Care (CAC) services available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
38. Availability of vaccines and hub cutter	<input type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input type="checkbox"/> Yes/ <input type="checkbox"/> No		
39. Number of newborns immunized with birth dose at the facility in last 3 months			
40. Newborns breastfed within one hour of birth (observe if practiced and women are being counselled)			
41. Status of functionality of DEIC	<input 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		
42. Number of sterilizations performed in last one month			
43. Availability of trained provider for IUCD/ PPIUCD	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
44. Who counsels on FP services?			
45. Please comment on utilization of other FP services			
46. FPLMIS has been implemented	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
47. Availability of functional Adolescent Friendly Health Clinic	<input 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 type="checkbox"/> No		
48. Whether facility has fixed day NCD clinic	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, how many days in a week: _____ days		
49. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
50. Number of individuals screened for the following in last 6 months:		Screened	Confirmed
	a. Hypertension		
	b. Diabetes		
	c. Oral Cancer		
	d. Breast Cancer		
	e. Cervical Cancer		
51. Reporting weekly data in P, S and L form under IDSP	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
1. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input type="checkbox"/> Yes/ <input type="checkbox"/> No		
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____		
	If anti-TB drugs available at the facility: <input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, are there any patients currently taking anti-TB drugs from the facility: <input type="checkbox"/> Yes/ <input type="checkbox"/> No		

Indicator	Remarks/ Observation
	Availability of CBNAAT/ TruNat: <input type="checkbox"/> Yes/ <input type="checkbox"/> No Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months _____
	Are all TB patients tested for HIV? <input type="checkbox"/> Yes/ <input type="checkbox"/> No Are all TB patients tested for Diabetes Mellitus: <input type="checkbox"/> Yes/ <input type="checkbox"/> No
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months:
52. Maintenance of records on	<ul style="list-style-type: none"> <li>• TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• TB Notification Registers: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Malaria cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Palliative cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Cases related to Dengue and Chikungunya: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Leprosy cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
53. How much fund was received and utilized by the facility under NHM?	Fund Received last year: Fund utilized last year:
	Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:
	Reasons for underutilization of fund (if any)
54. Status of data entry in (match with physical records)	HMIS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated IHIP: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated HWC Portal: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated Nikshay Portal: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated
55. Frequency of RKS meeting (check and obtain minutes of last meeting held)	
2. Availability of ambulance services in the area	<input type="checkbox"/> Own ambulance available <input type="checkbox"/> DH/ SDH has contracted out ambulance services <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"> <li>• How many cases from referred to in last month?</li> </ul>	Number:  Types of cases referred in:
<ul style="list-style-type: none"> <li>• How many cases were referred out last month?</li> </ul>	Number:  Types of cases referred out:
<b>3. Key challenges observed in the facility and the root causes</b>	
Challenge	Root causes

Indicator	Remarks/ Observation
a)	
b)	
c)	
d)	

### Annexure-II: CHC Checklist



Ministry of Health & Family Welfare  
Government of India



#### Community Health Centre (CHC)/ U-CHC Level Checklist

Service Delivery:

Name of facility visited	
Facility Type	<input type="checkbox"/> CHC/ <input type="checkbox"/> U-CHC
FRU	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Standalone/ Co-located	<input type="checkbox"/> Standalone/ <input type="checkbox"/> Co-located Co-located with (if applicable):
Accessible from nearest road head	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Date of Visit	
Next Referral Point	Facility: Distance:

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

Indicator	Remarks/ Observation
4. OPD Timing	
5. Whether the facility is functioning in PPP mode	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
6. Condition of infrastructure/ building	Comments:
Please comment on the condition and tick the appropriate box	<input type="checkbox"/> 24*7 running water facility <input type="checkbox"/> Facility is geriatric and disability friendly (ramps etc.) <input type="checkbox"/> Clean functional toilets available (separate for Male and female) <input type="checkbox"/> Drinking water facility available <input type="checkbox"/> OPD waiting area has sufficient sitting arrangement <input type="checkbox"/> ASHA rest room is available <input type="checkbox"/> Drug storeroom with rack is available

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	Power backup: <input type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital																																	
7. Number of functional in-patient beds																																		
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20. Implementation of DVDMS or similar supply chain management system	<input type="checkbox"/> Yes/ <input type="checkbox"/> No  If other, which one_____																																																												
21. Shortage of 5 priority drugs from EDL in last 30 days, if any	1 2 3 4 5																																																												
22. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage In last 6 months how many times there was shortage_____																																																												
23. Availability of essential diagnostics	<input type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed																																																												

Indicator	Remarks/ Observation
<ul style="list-style-type: none"> <li>In-house tests</li> </ul>	Timing: Total number of tests performed: _____ Details of tests performed:
<ul style="list-style-type: none"> <li>Outsourced/ PPP</li> </ul>	Timing: Total number of tests performed: _____ Details of tests performed:
24. X-ray services is available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, type & nos. of functional X-ray machine is available in the hospital:  Is the X-ray machine AERB certified: <input type="checkbox"/> Yes/ <input type="checkbox"/> No
25. 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 type="checkbox"/> Free for all
26. Availability of Testing kits/ Rapid Diagnostic Kits	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage
27. If there is any shortage of major instruments/ equipment	
28. Average downtime of equipment. Details of equipment are nonfunctional for more than 7 days	
29. Availability of delivery services	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
<ul style="list-style-type: none"> <li>If the facility is designated as FRU, whether C-sections are performed</li> </ul>	<input type="checkbox"/> Yes/ <input type="checkbox"/> No Number of normal deliveries performed in last month: ____ No. of C-sections performed in last month: _____
<ul style="list-style-type: none"> <li>Comment on condition of:</li> </ul>	Labour room: OT: Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input type="checkbox"/> Yes/ <input type="checkbox"/> No
30. Status of JSY payments	Payment is up to date: <input type="checkbox"/> Yes/ <input type="checkbox"/> No Average delay: Payment done till: Reasons for delay:
31. 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)

Indicator	Remarks/ Observation		
	<input type="checkbox"/> No user charges		
32. PMSMA services provided on 9 <sup>th</sup> of every month	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, how are high risks identified on 9 <sup>th</sup> ? If No, reasons thereof:		
33. Line listing of high-risk pregnancies	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
34. Practice related to Respectful Maternity Care			
35. Whether facility have registers for entering births and deaths	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
36. Number of Maternal Death reported in the facility	Previous year: Current year:		
37. Number of Child Death reported in the facility	Previous year: Current year:		
38. If Comprehensive Abortion Care (CAC) services available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
39. Availability of vaccines and hub cutter	<input type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input type="checkbox"/> Yes/ <input type="checkbox"/> No		
40. Number of newborns immunized with birth dose at the facility in last 3 months			
41. Newborns breastfed within one hour of birth (observe if practiced and women are being counselled)			
42. Number of sterilizations performed in last one month			
43. Availability of trained provider for IUCD/ PPIUCD	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
44. Who counsels on FP services?			
45. Please comment on utilization of other FP services			
46. FPLMIS has been implemented	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
47. Availability of functional Adolescent Friendly Health Clinic	<input 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 type="checkbox"/> No		
48. Whether facility has fixed day NCD clinic	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, how many days in a week: _____ days		
49. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
50. Number of individuals screened for the following in last 6 months:		Screened	Confirmed
	a. Hypertension		
	b. Diabetes		
	c. Oral Cancer		
	d. Breast Cancer		
	e. Cervical Cancer		

Indicator	Remarks/ Observation
51. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
52. Whether reporting weekly data in P, S and L form under IDSP	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
53. Status of TB elimination programme	<p>Facility is designated as Designated Microscopy Centre (DMC):  <input type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____</p> <p>If anti-TB drugs available at the facility: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>If yes, are there any patients currently taking anti-TB drugs from the facility: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months _____</p> <p>Is there a sample transport mechanism in place for:</p> <ul style="list-style-type: none"> <li>• investigations within public sector for TB testing? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• investigations within public sector for other tests? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• outsourced testing? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul> <p>Are all TB patients tested for HIV? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>Are all TB patients tested for Diabetes Mellitus: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</p> <p>Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months:</p>
54. Status on Leprosy eradication programme	<p>Nos. of new case detected by Field Worker in last 12 months:</p> <p>Out of those, how many are having Gr. II deformity:</p> <p>Frequency of Community Surveillance:</p>
55. Maintenance of records on	<ul style="list-style-type: none"> <li>• TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• TB Notification Registers: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Malaria cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Palliative cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Cases related to Dengue and Chikungunya: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Leprosy cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
56. How much fund was received and utilized by the facility under NHM?	<p>Fund Received last year:</p> <p>Fund utilized last year:</p> <p>Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:</p> <p>Reasons for underutilization of fund (if any)</p>
57. Status of data entry in (match with physical records)	<p>HMIS: <input type="checkbox"/>Updated/ <input type="checkbox"/>Not updated</p> <p>MCTS: <input type="checkbox"/>Updated/ <input type="checkbox"/>Not updated</p> <p>IHIP: <input type="checkbox"/>Updated/ <input type="checkbox"/>Not updated</p> <p>HWC Portal: <input type="checkbox"/>Updated/ <input type="checkbox"/>Not updated</p> <p>Nikshay Portal: <input type="checkbox"/>Updated/ <input type="checkbox"/>Not updated</p>

Indicator	Remarks/ Observation
58. Frequency of RKS meeting (check and obtain minutes of last meeting held)	
59. Availability of ambulance services in the area	<input type="checkbox"/> CHC own ambulance available <input type="checkbox"/> CHC has contracted out ambulance services <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"> <li>How many cases from sub centre/ PHC were referred to this CHC last month?</li> </ul>	Number: Types of cases referred in:
<ul style="list-style-type: none"> <li>How many cases from the CHC were referred to the DH last month?</li> </ul>	Number: Types of cases referred out:
60. Key challenges observed in the facility and the root causes	
Challenge	Root causes
a)	
b)	
c)	
d)	

### Annexure-III: PHC Checklist



Ministry of Health & Family Welfare  
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#### Primary Health Centre (PHC/U-PHC) Level Checklist

Service Delivery:

Name of facility visited	
Facility Type	<input type="checkbox"/> PHC/ <input type="checkbox"/> U-PHC
Whether the facility has been converted to HWC	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Standalone/ Co-located	<input type="checkbox"/> Standalone/ <input type="checkbox"/> Co-located Co-located with (if applicable):
Accessible from nearest road head	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Date of Visit	
Next Referral Point	Facility:

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

Indicator	Remarks/ Observation																																												
A. OPD Timing																																													
a. For U-PHC, check if evening/morning OPD/Clinics being conducted	<input type="checkbox"/> Yes/ <input type="checkbox"/> No																																												
B. Whether the facility is functioning in PPP mode	<input type="checkbox"/> Yes/ <input type="checkbox"/> No																																												
C. Condition of infrastructure/ building	Comments:																																												
Please comment on the condition and tick the appropriate box	<input type="checkbox"/> 24*7 running water facility <input type="checkbox"/> Facility is geriatric and disability friendly (Ramps etc.) <input type="checkbox"/> Clean functional toilets available (separate for Male and female) <input type="checkbox"/> Drinking water facility available <input type="checkbox"/> OPD waiting area has sufficient sitting arrangement <input type="checkbox"/> ASHA rest room is available <input type="checkbox"/> Drug storeroom with rack is available <input type="checkbox"/> Power backup <input type="checkbox"/> Branding																																												
D. Number of functional in-patient beds																																													
E. List of Services available																																													
F. If 24*7 delivery services available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No																																												
G. Tele-medicine/Consultation services available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, average case per day_____																																												
H. Biomedical waste management practices	Sharp pit: Deep Burial pit: Other System, if any:																																												
I. Details of HR available in the facility (Sanctioned and In-place)	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 10%; text-align: center;">San.</th> <th style="width: 10%; text-align: center;">Reg.</th> <th style="width: 10%; text-align: center;">Cont.</th> </tr> </thead> <tbody> <tr> <td>HR</td> <td></td> <td></td> <td></td> </tr> <tr> <td>MO (MBBS)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>MO (AYUSH)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>SNs/ GNMs</td> <td></td> <td></td> <td></td> </tr> <tr> <td>ANM</td> <td></td> <td></td> <td></td> </tr> <tr> <td>LTs</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pharmacist</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Public Health Manager (NUHM)</td> <td></td> <td></td> <td></td> </tr> <tr> <td>LHV/PHN</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Others</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		San.	Reg.	Cont.	HR				MO (MBBS)				MO (AYUSH)				SNs/ GNMs				ANM				LTs				Pharmacist				Public Health Manager (NUHM)				LHV/PHN				Others			
	San.	Reg.	Cont.																																										
HR																																													
MO (MBBS)																																													
MO (AYUSH)																																													
SNs/ GNMs																																													
ANM																																													
LTs																																													
Pharmacist																																													
Public Health Manager (NUHM)																																													
LHV/PHN																																													
Others																																													
J. IT Services	<ul style="list-style-type: none"> <li>Desktop/ Laptop available: <input type="checkbox"/> Yes/ <input type="checkbox"/> No</li> </ul>																																												

Indicator	Remarks/ Observation
	<ul style="list-style-type: none"> <li>All ANMs have functional Tablets: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Smart phones given to all ASHAs: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Internet connectivity: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Quality/strength of internet connection: _____</li> </ul>
K. Kayakalp	Initiated: Facility score: Award received:
L. NQAS	Assessment done: Internal/State Facility score: Certification Status:
M. Availability of list of essential medicines (EML)/ drugs (EDL)	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, total number of drugs in EDL _____  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) _____
N. Implementation of DVDMS or similar supply chain management system	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If other, which one _____
O. Shortage of 5 priority drugs from EDL in last 30 days, if any	1 2 3 4 5
P. Drugs Available for Hypertension & Diabetic patients:	1 2 3
Q. Shortage of sufficient number of Hypertension & Diabetic in last 7 days	1 2 3
R. Availability of Essential Consumables:	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage In last 6 months how, many times there was shortage _____
S. Availability of essential diagnostics	<input type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed
<ul style="list-style-type: none"> <li>In-house tests</li> </ul>	Timing: Total number of tests performed: _____ Details of tests performed:
<ul style="list-style-type: none"> <li>Outsourced/ PPP</li> </ul>	Timing: Total number of tests performed: _____ Details of tests performed:
T. X-ray services is available	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, type & nos. of functional X-ray machine is available in the hospital: Is the X-ray machine AERB certified: <input type="checkbox"/> Yes/ <input type="checkbox"/> No

Indicator	Remarks/ Observation
U. Whether diagnostic services (lab, X-ray 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 type="checkbox"/> Free for all
V. Availability of Testing kits/ Rapid Diagnostic Kits	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage
W. If there is any shortage of major instruments/ equipment	
X. Average downtime of equipment. Details of equipment are nonfunctional for more than 7 days	
Y. Availability of delivery services	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
<ul style="list-style-type: none"> <li>If yes, details</li> </ul>	Comment on condition of labour room: Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): <input type="checkbox"/> Yes/ <input type="checkbox"/> No
Z. Status of JSY payments	Payment is up to date: <input type="checkbox"/> Yes/ <input type="checkbox"/> No Average delay: Payment done till: Reasons for delay:
AA. 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
BB. Line listing of high-risk pregnancies	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
CC. Number of normal deliveries in last three month	
DD. Availability of Daksh/ Dakshta trained/SBA trained MO/SN/ANM in Labour Room	<input type="checkbox"/> Yes <input type="checkbox"/> No
EE. Practice related to Respectful Maternity Care	
FF. Number of Maternal Death reported in the facility	Previous year: Current FY:
GG. Number of Child Death reported in the facility	Previous year: Current year:
HH. Availability of vaccines and hub cutter	<input type="checkbox"/> Yes/ <input type="checkbox"/> No Nurses/ ANM aware about open vial policy: <input type="checkbox"/> Yes/ <input type="checkbox"/> No

Indicator	Remarks/ Observation		
II. Number of newborns immunized with birth dose at the facility in last 3 months			
JJ. Newborns breastfed within one hour of birth (observe if practiced and women are being counselled)			
KK. Number of sterilizations performed in last one month			
LL. Availability of trained provider for IUCD/ PPIUCD	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
MM. Who counsels on FP services?			
NN. Please comment on utilization of other FP services			
OO. FPLMIS has been implemented	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
PP. Availability of functional Adolescent Friendly Health Clinic	<input 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 type="checkbox"/> No		
QQ. Whether facility has fixed day NCD clinic	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If Yes, how many days in a week: _____ days		
RR. Are service providers trained in cancer services?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
SS. Number of individuals screened for the following in last 6 months:		Screened	Confirmed
	a. Hypertension		
	b. Diabetes		
	c. Oral Cancer		
	d. Breast Cancer		
TT. Whether wellness activities are performed	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
	Frequency: _____		
UU. Whether reporting weekly data in P and L form under IDSP	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
VV. Distribution of Long lasting Insecticidal nets (LLIN) in high-risk areas	No. of LLIN distributed per household: <input type="checkbox"/> 1 per family/ <input type="checkbox"/> Others (Specify): _____		
WW. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): <input type="checkbox"/> Yes/ <input type="checkbox"/> No		
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) _____		
	If anti-TB drugs available at the facility: <input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, are there any patients currently taking anti-TB drugs from the facility: <input type="checkbox"/> Yes/ <input type="checkbox"/> No		
	Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months _____		
	Is there a sample transport mechanism in place for? <ul style="list-style-type: none"> <li>• investigations within public sector for TB testing? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• investigations within public sector for other tests? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>		

Indicator	Remarks/ Observation
	<ul style="list-style-type: none"> <li>outsourced testing? <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
	Are all TB patients tested for HIV? <input type="checkbox"/> Yes/ <input type="checkbox"/> No
	Are all TB patients tested for Diabetes Mellitus: <input type="checkbox"/> Yes/ <input type="checkbox"/> No
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months:
XX. Status on Leprosy eradication programme	Nos. of new case detected by Field Worker in last 12 months: Out of those, how many are having Gr. II deformity: Frequency of Community Surveillance:
YY. Maintenance of records on	<ul style="list-style-type: none"> <li>TB Treatment Card cases (both for drug sensitive and drug resistant cases): <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>TB Notification Registers: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Malaria cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Palliative cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Cases related to Dengue and Chikungunya: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Leprosy cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
ZZ. How much fund was received and utilized by the facility under NHM?	Fund Received last year:
	Fund utilized last year:
	Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:
	Reasons for underutilization of fund (if any)
AAA. Status of data entry in (match with physical records)	HMIS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated MCTS: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated IHIP: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated HWC Portal: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated Nikshay Portal: <input type="checkbox"/> Updated/ <input type="checkbox"/> Not updated
BBB. Frequency of RKS meeting (check and obtain minutes of last meeting held)	
CCC. Availability of ambulance services in the area	<input type="checkbox"/> PHC own ambulance available <input type="checkbox"/> PHC has contracted out ambulance services <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"> <li>How many cases from sub centre were referred to this PHC last month?</li> </ul>	Number:  Types of cases referred in:
<ul style="list-style-type: none"> <li>How many cases from the PHC were referred to the CHC last month?</li> </ul>	Number:  Types of cases referred out:
<b>DDD. Key challenges observed in the facility and the root causes</b>	
Challenge	Root causes
a)	
b)	
c)	
d)	

Indicator	Remarks/ Observation
e)	
<b>Only for U-PHC</b>	
EEE. Population enumeration initiated for slum population	<input type="checkbox"/> Not yet initiated <input type="checkbox"/> Initiated <input type="checkbox"/> Completed
FFF. Number of CBAC forms filled (NUHM)	
GGG. Is Specialist services provided at U-PHC?	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, specialist services are provided through: <input type="checkbox"/> Teleconsultation/ <input type="checkbox"/> Clinic Schedule: <input type="checkbox"/> Fixed/ <input type="checkbox"/> Rotational Type of specialist services available: <input type="checkbox"/> OBGY, <input type="checkbox"/> Pediatrics, <input type="checkbox"/> Medicine, <input type="checkbox"/> Dermatology, <input type="checkbox"/> Ophthalmology, Others:
HHH. UHNDs Conducted:	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, no. of UHND conducted per month:
III. Special Outreach camps conducted:	<input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, no. of UHND conducted during last quarter: Type of specialties provided during special outreach camps:

### Annexure-VI: HSC Checklist



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Indicator	Remarks/ Observation
	If yes, are there any patients currently taking anti-TB drugs from the SHC? <input type="checkbox"/> Yes/ <input type="checkbox"/> No
8. Shortage of 5 priority drugs from EDL in last 30 days, if any	1 2 3 4 5
9. Drugs Available for Hypertension & Diabetic patients:	1 2 3
10. Shortage of sufficient number of Hypertension & Diabetic in last 7 days	1 2 3
11. Are CHOs dispensing medicines for hypertension and diabetes at SHC-HWC	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
12. Availability of Testing kits/ Rapid Diagnostic Kits	<input type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage
13. Availability of:	<ul style="list-style-type: none"> <li>• BP instrument: <input type="checkbox"/>Yes/ <input type="checkbox"/>No. If yes, Type: _____</li> <li>• Thermometer: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Contraceptives: <input type="checkbox"/>Yes/ <input type="checkbox"/>No. If yes, Type: _____</li> <li>• Glucometer: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
14. Line listing of all Pregnant women in the area	<input type="checkbox"/> Yes/ <input type="checkbox"/> No  <ul style="list-style-type: none"> <li>• High risk women identified: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• MCP cards duly filled: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
15. Number of Maternal Death Review conducted	Previous year: Current year:
16. Number of Child Death Review conducted	Previous year: Current year:
17. Availability of vaccines and hub cutter	<input type="checkbox"/> Yes/ <input type="checkbox"/> No  <ul style="list-style-type: none"> <li>• Awareness of ANM on vaccine schedule: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>• Awareness about open vial policy: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
18. Availability of micro-plan for immunization	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
19. Follow up of:	SNCU discharge babies: <input type="checkbox"/> Yes/ <input type="checkbox"/> No LBW babies: <input type="checkbox"/> Yes/ <input type="checkbox"/> No
20. Line listing of all eligible couple in the area	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
21. Availability of trained provider for IUCD/ PPIUCD	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
22. Please comment on utilization of other FP services	
23. Number of individuals above 30 years of age in the HWC population	
24. Number of CBAC forms filled in last 6 months	

Indicator	Remarks/ Observation		
25. Report for number of individuals for whom CBAC form has been filled in last six months.	Score with below 4: 4 and above score:		
26. Whether universal screening of NCD has started	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
27. Number of individuals screened for the following in last 6 months:	Screened		Confirmed
	a. Hypertension		
	b. Diabetes		
	c. Oral Cancer		
	d. Breast Cancer		
e. Cervical Cancer			
28. Number of individuals who had initiated treatment for HTN, DM and others during last six months	Advised for Lifestyle management: Medicines for Hypertension: Medicines for Diabetes: Medicines for Others:		
29. Source of getting drugs/ medications for individual.  Number of individuals taking medication for HTN and DM during last six months from which source  Taking medication for HTN/DM	From SC-HWC: From Linked PHC: From other govt. facilities: (Specify) From pvt. Chemist shop:  (Average OOP/month)		
30. Status of use of:	<ul style="list-style-type: none"> <li>• Tele-consultation services</li> <li>• HWC App</li> </ul> Details:		
31. Whether wellness activities are performed	<input type="checkbox"/> Yes/ <input type="checkbox"/> No Frequency:		
32. Whether reporting weekly data in S form under IDSP	<input type="checkbox"/> Yes/ <input type="checkbox"/> No		
33. Status of Tuberculosis in the area:	Indicators	Last year	Current year
	Number of presumptive TB patients identified:		
	Number of presumptive TB patients referred for testing		
	Number of TB patients diagnosed out of the presumptive patients referred		
	Number of TB patients taking treatment under the Sub centre area		
34. ASHA Interaction	<ul style="list-style-type: none"> <li>• Status of availability of Functional HBNC Kits (weighing scale/ digital thermometer/ blanket or warm bag)</li> </ul>		
<ul style="list-style-type: none"> <li>• Status of availability of Drug Kits (Check for PCM/ Amoxicillin/ IFA/ ORS/ Zinc/ IFA Syrup/ Cotrimoxazole)</li> </ul>			

Indicator	Remarks/ Observation
<ul style="list-style-type: none"> <li>ASHA Incentives: Any Time lag /Delay in Payment after submission of voucher.                             <ul style="list-style-type: none"> <li>Average delay</li> </ul> </li> </ul>	
<ul style="list-style-type: none"> <li>ASHA is aware about provision of incentives under NTEP (Informant Incentives, Treatment Supporter Incentives) and Nikshay Poshan Yojana (₹500 per month incentive to the TB patient for the duration of treatment)</li> </ul>	
<p>35. Number of Village Health &amp; Sanitation days conducted in last 6 months</p>	
<p>36. Incentives:</p>	<ul style="list-style-type: none"> <li>Performance Incentives is disbursed to CHOs on monthly basis: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Team-based incentive being disbursed for all HWC staffs: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
<p>37. Frequency of VHSNC/ MAS meeting (check minutes of last meeting held)</p>	
<p>38. Whether CHOs and HWC staffs are involved in VHSNC/ MAS meeting</p>	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
<p>39. Maintenance of records on</p>	<ul style="list-style-type: none"> <li>TB cases: <input type="checkbox"/>drug sensitive/ <input type="checkbox"/>drug resistant cases/ <input type="checkbox"/>both</li> <li>Malaria cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Palliative cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Cases related to Dengue and Chikungunya: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> <li>Leprosy cases: <input type="checkbox"/>Yes/ <input type="checkbox"/>No</li> </ul>
<p>40. How much fund was received and utilized by the facility under NHM?</p>	Fund Received last year: Fund utilized last year:
	Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:
	Reasons for underutilization of fund (if any)
<p>41. Availability of ambulance services in the area</p>	
<ul style="list-style-type: none"> <li>How many cases from the Sub Centre were referred to PHC in last month?</li> </ul>	Number:  Types of cases referred out:
<p>42. Key challenges observed in the facility and the root causes</p>	
<p>Challenge</p>	<p>Root causes</p>
<p>a)</p>	
<p>b)</p>	
<p>c)</p>	
<p>d)</p>	