

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



Purva Bhalla and Bindiya Kumari
Prof. Suresh Sharma

Population Research Centre
Institute of Economic Growth
University of Delhi Enclave
North Campus, Delhi-110007

January, 2025

Introduction

The Ministry of Health and Family Welfare (MoHFW), Government of India has assigned Population Research Centre (PRC) the task of field monitoring of essential components of National Health Mission (NHM) State Programme Implementation Plan for the year 2024-25. This report of Population Research Centre, Institute of Economic Growth, PRC-IEG Delhi presents the key findings from the field monitoring of essential components under NHM in Yanam district of Pondicherry.

The report is prepared on the basis of visits to the following public health care facilities visited by the PRC-IEG Team: Ms Purva Bhalla and Ms. Bindiya Kumari. The facilities which team visited are District Hospital, Yanam, UPHC Guoriammeta, HWC Dariyalathippa, HWC Farammeta, HWC Mettakuru, HWC Savithrinagar and HWC Kanakalapeta. Meetings were held with the Chief District Medical Officer (CDMO) and the nodal programme officers, the Medical Officer-in-Charge (MOIC), facility (MOs, ANMs, etc.) and community level health care providers (ASHAs, Anganwadi workers etc.) and other supporting staff. Interactions were conducted to understand the strengths and weakness of the facilities in service provisioning.

KEY OBSERVATION: DISTRICT

Facility HR and Infrastructure: A significant challenge in the district is the shortage of anesthetic supplies, which are not consistently available. This has serious implications for surgical and emergency procedures, potentially affecting patient care and outcomes. A major gap was observed in record-keeping at District Hospitals (DH), where a separate record for hospital-related data is not maintained, and infrastructure data is not updated on a monthly basis. The workload distribution is also uneven, with a single Lady Health Visitor (LHV) managing records for the entire district, posing challenges in efficiency and accuracy. The sanctioned post for a Lab Technician (LT) at Urban Primary Health Centers (UPHCs) remains vacant, leading to gaps in diagnostic services.

AAM Services: Health and Wellness Centers (HWCs) are yet to be fully converted into Ayushman Arogya Mandirs (AAMs), limiting their potential to enhance primary healthcare services. the Community Health Officer (CHO) concept has not been introduced, affecting the efficiency of service delivery.

NCD Screening & Implementation of National Health Programme: A critical issue in the district is the inadequate maintenance of records related to Non-Communicable Diseases (NCDs). This gap in documentation can hinder patient monitoring and treatment follow-ups. However, Tuberculosis (TB) patient management is well-organized, with proper line-listing and record-keeping in place. ASHA workers play a proactive role in monitoring suspected cases and ensuring that neighbors of TB patients are screened for symptoms.

Drugs and Diagnostics: Overall medicine supply in the district is well-maintained, some facilities are experiencing a shortage of Iron and Folic Acid (IFA) tablets, which are essential for maternal and child health programs. Drug and Vaccine Distribution Management System (DVDMS) operations at sub-centers are managed by Auxiliary Nurse Midwives (ANMs), increasing their workload. The absence of a Lab Technician (LT) in UPHCs further limits access to diagnostic services.

Delivery Care Services: The district has not implemented a structured Quality Care Programme across its healthcare facilities, which has significant implications for maternal and neonatal health services. The lack of a well-functioning referral system further exacerbates these challenges, making patient tracking and transitions between healthcare facilities more difficult.

Untied Funds Utilization: Financial constraints and documentation challenges were noted, particularly in the utilization of untied funds. There is a lack of awareness and proper documentation regarding fund allocation and expenditure. ASHAs receive a fixed salary of ₹7,000 from the state and ₹3,000 from the district, a system that has been in place since August.

Data Portal and Reporting: A major gap in data management was observed at District Hospitals (DH), where infrastructure data is not updated on a monthly basis, and no separate records for hospital-related data are maintained. There is no structured system in place to track referral cases, making it difficult to ensure continuity of care for patients transitioning across healthcare facilities.

Teleconsultation: There is currently no mention of a structured teleconsultation service in the district.

Quality Program: A significant gap was observed in the implementation of a Quality Care Programme across healthcare facilities. This lack of structured quality assurance measures may affect patient outcomes, particularly in critical and emergency care scenarios.

Family Planning Services: Family planning services in the district have seen positive trends, with an increased acceptance of injectable contraceptives like Shaya. The average family size in the district appears to be small, with most families having one or two children.

Information, Education, and Communication (IEC) Activities: Efforts have been made to enhance Information, Education, and Communication (IEC) activities by providing materials in the local language. This approach has improved outreach and comprehension among community members.

KEY OBSERVATION: FACILITY

District Hospital, Yanam: District Hospital, Yanam struggles with manpower shortages, a non-functional CT scan for three years, and a lack of triage in emergency care. It has 80 in-patient beds, accessible amenities, and full power backup but lacks an ASHA restroom, ICU, NICU, and a functional blood bank. While OPD, IPD, maternity, physiotherapy, and surgeries are available, dialysis services are absent. IT infrastructure is strong, and waste management is outsourced. With a Kayakalp score of 60, NQAS and LaQshya certifications are pending. Delivery services are active, with 42 normal deliveries and 40 C-sections last month. Staffing gaps and infrastructure issues hinder efficiency.

Urban Primary Health Centre, Guoriammeta: The facility has essential infrastructure but lacks in-patient beds, power backup, a lab, and IEC materials. There is a limited staff with no AYUSH doctors, dentists, or lab technicians, and IPHS 2022 guidelines are not followed. While staff are trained in maternal and child health, they lack training in trauma, emergency, and palliative care. Screening for breast and cervical cancers and mental health services are absent. Severe medicine shortages and minimal diagnostic capabilities further impact service delivery.

Health and Wellness Centre, Dariyalathippa: It operates in a deteriorating 25-year-old building with leakage issues and no drinking water. Service delivery is further impacted by the absence of key staff, including a CHO and a sweeper. IEC materials lack a local language version, UAAM conversion is pending, and ASHA smartphones are non-functional. While funds are adequate, IT issues persist with the RCH portal.

Health and Wellness Centre, Farampeta: It faces major gaps in infrastructure, staffing, and service delivery. It lacks branding, power backup, a pharmacy, a lab, and elderly-friendly facilities. IEC materials and health awareness tools like TV/LED are missing. The facility lacks essential staff, including a CHO, staff nurse, and security personnel. Training in mental health, elderly care, and emergency services is inadequate. The facility offers maternal and communicable disease care but lacks cancer screenings and emergency services. Medicine and diagnostics are severely limited, with only 35 of 105 essential drugs and 2 of 14 tests available. Teleconsultation remains underutilized, governance is weak, and the Jan Arogya Samiti is not in place. The only wellness activity conducted is regular yoga sessions.



District Hospital, Yanam



UPHC Guoriammeta



HWC, Mettakuru



HWC, Farampeta



HWC, Kanakalapeta



HWC, Savithrinagar



HWC, Dariyalathippa

Health and Wellness Centre, Kanakalapeta: The facility has basic infrastructure but lacks a lab, day-care beds, functional toilets, and elderly-friendly features. Water, electricity, and waste management are inconsistent. Key staff, including a CHO, staff nurse, and security personnel, are missing, with only three ASHAs and two ANMs available. While RMNCHA and communicable disease care are provided, mental health and emergency services are absent. Medicine and diagnostics are inadequate, with only 35 of 105 essential drugs and 2 of 14 tests are available. Teleconsultation is underutilized. Governance is weak, with no Jan Arogya Samiti. Reporting is managed through various online platforms, and financial disbursements are timely

Health and Wellness Centre, Mettakuru: The facility lacks a government-owned building, boundary wall, toilets, power backup, and access to safe drinking water. Key staff positions remain vacant, and essential medicines and diagnostics are inadequate. Emergency, mental health, and cancer screening services are absent. Teleconsultation is underutilized, governance is weak, and grievance redressal mechanisms are missing.

Health and Wellness Centre, Savathrinagar: HWC faces infrastructure gaps, lacking day-care beds, power backup, safe drinking water, and waste disposal. Critical staff shortages persist, with no CHO, staff nurse, or male MPW. Training in mental health and elderly care is absent, and cancer screenings are unavailable. Medicine and diagnostic shortages limit services, with only basic tests offered. Teleconsultation is underutilized, and governance lacks grievance redressal, referral details, and a citizen charter.

KEY RECOMMENDATIONS

- **Infrastructure Improvement:** Enhance facilities with power backup, functional toilets, safe water, and elderly-friendly features. Establish ICUs, NICUs, dialysis units, and blood banks. Renovate buildings and improve waste management.
- **Strengthening Human Resources:** Fill key staffing gaps by recruiting CHOs, nurses, lab technicians, and support staff. Deploy AYUSH doctors, dentists, and mental health professionals per IPHS 2022 guidelines. Ensure adequate sanitation, security, and maintenance personnel.
- **Enhancing Medical Services:** Expand diagnostic services with in-house labs and sample transport facilities. Ensure availability of all essential medicines. Introduce emergency, trauma, palliative care, and cancer screening services for comprehensive healthcare.
- **Digital & Teleconsultation Optimization:** Enhance IT infrastructure for efficient teleconsultation and digital reporting, ensure functional ASHA smartphones with regular teleconsultation usage, and resolve technical issues in the RCH portal and other reporting platforms.
- **Strengthening Governance & Accountability:** Constitute Jan Arogya Samiti and ensure regular meetings. Display IEC materials, grievance redressal mechanisms, and referral transport details. Enhance financial planning for optimal fund utilization.
- **Capacity Building & Training:** Provide comprehensive training in emergency care, mental health, and elderly care. Conduct regular refresher courses for ANMs, ASHAs, and other healthcare workers.
- **Community Engagement & Wellness Programs:** Organize awareness campaigns on RMNCHA, communicable diseases, and preventive care. Expand wellness activities beyond yoga, including lifestyle and nutrition counseling. Promote citizen participation in healthcare governance.

CHECKLISTS

Field Monitoring Format -District Hospital (DH)

Date of Visit: 23/01/2025

GENERAL INFORMATION	
Name of facility visited	Government General Hospital, Yanam
Facility Type	DH
FRU	Yes
Accessible from nearest road head	Yes
Next Referral Point	Facility: Kakinada Government Hospital Distance: 30km

A. PHYSICAL INFRASTRUCTURE				
Indicator	Response			Means of verification
OPD Timing	8:00am to 12:00pm			As reported/Hospital Citizen Charter Board
Condition of infrastructure/ building	Comments:			Observation
Please comment on the condition and tick the appropriate box	<input checked="" type="checkbox"/> 24*7 running water facility <input checked="" type="checkbox"/> Facility is elderly and differently abled friendly (ramps at entry, wheel chair etc.) <input checked="" type="checkbox"/> Clean functional toilets available (separate for Male and female) <input checked="" type="checkbox"/> Drinking water facility available <input checked="" type="checkbox"/> OPD waiting area has sufficient sitting arrangement <input checked="" type="checkbox"/> ASHA rest room is available <input checked="" type="checkbox"/> Drug storeroom with rack is available Power backup: <input checked="" type="checkbox"/> Complete Hospital/ <input type="checkbox"/> Part of the hospital Last major renovation done in (Year): No			Observation
Number of functional in-patient beds	80 No of ICU Beds available: <u>Ready to Open Soon</u>			As reported/Hospital Citizen Charter Board
List of Services available	1. OPD 2. IPD 3. Casualty 4. Lab 5. Delivery 6. PNC 7. Family Planning 8. Physiotherapy 9. Operation Theatre 10. Immunization			As reported/Hospital Citizen Charter Board
Specialized services available in addition to General OPD, ANC, Delivery, PNC, Immunization, FP, Laboratory services	Sl.	Service	Y/N	As reported/Hospital Citizen Charter Board
	1	Medicine	Yes	
	2	O&G	Yes	
	3	Pediatric	Yes	
	4	General Surgery	Yes	
	5	Anesthesiology	Yes	

A. PHYSICAL INFRASTRUCTURE				
Indicator	Response			Means of verification
	6	Ophthalmology	Yes	
	7	Dental	Yes	
	8	Imaging Services (X – ray)	Yes	
	9	Imaging Services (USG)	Yes	
	10	District Early Intervention Centre (DEIC)	No	
	11	Nutritional Rehabilitation Centre (NRC)	No	
	12	SNCU/ Mother and Newborn Care Unit (MNCU)	No	
	13	Comprehensive Lactation Management Centre (CLMC) / Lactation Management Unit (LMU)	No	
	14	Neonatal Intensive Care Unit (NICU)	No	
	15	Pediatric Intensive Care Unit (PICU)	No	
	16	Labour Room Complex	No	
	17	ICU	No	
	18	Dialysis Unit	No	
	19	Emergency Care	Yes	
	20	Burn Unit	Yes	
	21	Teaching block (medical, nursing, paramedical)	No	In Medical College
	22	Skill Lab	Yes	
Emergency	General emergency: Yes Facilities available for: 1. Triage: No 2. Resuscitation: Yes 3. Stabilization: Yes			As reported/Hospital Citizen Charter Board
Tele-medicine/Consultation services available	Yes If yes, average number of teleconsultation per day for the last month (Data source: Teleconsultation register/ e-Sanjeevani Portal) <u>2</u> recently started If the facility is also functioning as 'Hub' to any of the AAM (SHC/PHC/UPHC/UAAM): No			Tele-medicine records register/ e-sanjeevani portal
Operation Theatre available	Yes If yes, Tick the relevant <input checked="" type="checkbox"/> Single general OT <input checked="" type="checkbox"/> Elective OT-Major (General) <input checked="" type="checkbox"/> Elective OT-Major (Ortho) <input checked="" type="checkbox"/> Obstetrics & Gynecology OT <input checked="" type="checkbox"/> Ophthalmology/ENT OT <input checked="" type="checkbox"/> Emergency OT			Observation Ensure signage and protocol displays
Availability of functional Blood Bank	No • If yes, number of units of blood currently available: • No. of blood transfusions done in last month:			Blood Bank records Register
Whether blood is issued free, or user-fee is being charged (Not functional)	Free for BPL Free for elderly Free for JSSK beneficiaries Free for all			Blood Bank records Register

A. PHYSICAL INFRASTRUCTURE		
Indicator	Response	Means of verification
Biomedical waste management practices	Sharp pit: <input type="checkbox"/> Deep Burial pit: <input type="checkbox"/> Incinerator: <input type="checkbox"/> Using Common Bio Medical Treatment plant: <input type="checkbox"/> <input checked="" type="checkbox"/> Managed through outsourced agency – EVB technologist Other System, if any: (Specify)	Observation
IT Services	<ul style="list-style-type: none"> Desktop/ Laptop available: Yes Internet connectivity: Yes Quality/strength of internet connection: <u>Good</u>	As reported

B. Human Resources		Means of verification- As reported				
Details of HR available in the facility (Sanctioned and In-place)	HR	Regular		Contractual		
		*Sanctioned	*Available	Sanctioned	Available	
	MO (MBBS)	20	14	2	-	
	Specialists	Medicine	1	0	1	0
		Ob-Gyn	1	0	1	1
		Pediatrician	1	0	1	0
		Anesthetist	1	0	1	0
		Surgeon	1	0	1	1
		Ophthalmologist	1	0	0	0
		Orthopedic	1	0	1	1
		Radiologist	1	0	1	1
		Pathologist	0	0	0	0
		Others (TB specialist)	1	0	1	1
	Dentist	1	1	-	-	
	Staff Nurses/ GNMs	62	62	4	1	
	LTs	3	1	4	4	
	Pharmacist	5	2	1	1	
	Dental Technician/ Hygienist	1	0	-	-	
	Hospital/ Facility Manager	-	-	-	-	
	EmOC trained doctor	-	-	-	-	
	LSAS trained doctor	-	-	-	-	
	Others	-	-	-	-	

C. Quality & Patient Safety Initiatives		Means of verification
13. Kayakalp	Initiated: Internal Assessment 60	Kayakalp Assessment report

	<ul style="list-style-type: none"> Facility score: Award received: 	Verify certificate if awarded
14. NQAS (Not Initiated)	<ul style="list-style-type: none"> Assessment done: N/A Internal/State Facility score: Certification Status: 	NQAS assessment report Verify certificate if awarded
15. LaQshya (Not Initiated)	<ul style="list-style-type: none"> Labour Room: LaQshya Certified – No If No, Assessment Done – No Operation Theatre: LaQshya Certified - No If No, Assessment Done - No 	LaQshya Assessment Report – check score Verify certificate if awarded
D. DRUGS & DIAGNOSTICS		
16. Availability of list of essential medicines (EML)/ drugs (EDL) https://nhm.gov.in/images/pdf/guidelines/iphs/ips-revised-guidelines-2022/01-SDH_DH_IPHS_Guidelines-2022.pdf	Yes <ul style="list-style-type: none">If yes, total number of drugs in EDL- 258EDL displayed in OPD Area: YesNo. of drugs available on the day of visit (out of the EDL) 258	Verify EDL Displayed
17. Implementation of DVDMS or similar supply chain management system	Yes If other, which one_____	Observation, Check software
18. Shortage of 5 priority drugs from EDL in last 30 days, if any	No Shortage	As reported, check DVDMS, E-aushadhi, etc.
19. Availability of Essential Consumables:	<input checked="" type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage In last 6 months how many times there was shortage: No	As reported Stock/Indent register
20. Availability of essential diagnostics	<input checked="" type="checkbox"/> In-house <input type="checkbox"/> Outsourced/ PPP <input type="checkbox"/> Both/ Mixed	As reported
<ul style="list-style-type: none">In-house tests	Timing: 8:00 am to 2:00 pm Total number of tests available against Essential Diagnostic tests list for DH: 34. (Take the list of tests available at DH)	Obtain the complete list of diagnostic tests performed in-house

• Outsourced/ PPP	Not Applicable	Obtain the complete list of diagnostic tests outsourced to PPP provider agency
21. X-ray services is available	Yes If Yes, type & nos. of functional X-ray machine is available in the hospital: 1 Is the X-ray machine AERB certified: Yes	Observation
22. CT scan services available	No If yes: Out of Pocket expenditures associated with CT Scan services (if any, approx. amount per scan): Yes, starting from 4500rs	Observation Patient interviews
23. Whether diagnostic services (lab, X-ray, USG etc.) are free for all	<input checked="" type="checkbox"/> Free for BPL <input checked="" type="checkbox"/> Free for elderly <input checked="" type="checkbox"/> Free for JSSK beneficiaries <input checked="" type="checkbox"/> Free for all	As reported
24. Availability of Testing kits/ Rapid Diagnostic Kits	<input checked="" type="checkbox"/> Sufficient Supply <input type="checkbox"/> Minimal Shortage <input type="checkbox"/> Acute shortage	As reported
E. KEY NATIONAL HEALTH PROGRAMMES		
25. Implementation of PM-National Dialysis programme	No <input type="checkbox"/> In-house <input checked="" type="checkbox"/> Outsourced/ PPP Total number of tests performed:	Observation Observation, Records
• Whether the services are free for all <u>(Not Applicable)</u>	Free for BPL <input type="checkbox"/> Free for elderly Free for JSSK beneficiaries <input type="checkbox"/> Free for all	Observation, Records
• Number of patients provided dialysis service <u>(Not Applicable)</u>	○ Previous year ○ Current FY <i>*Calculate the approximate no. of patients provided dialysis per day</i>	Records
26. If there is any shortage of major instruments/ equipment (Refer to Annexure 10 in the link for list of equipment- https://nhm.gov.in/images/pdf/guideline	CT Scan	As reported

s/iphs/iphs-revised-guidelines-2022/01-SDH DH IPHS Guidelines-2022.pdf)		
27. Average downtime of equipment (days) Details of equipment are nonfunctional for more than 7 days	CT Scan (not working for 3 years)	As reported
28. Availability of delivery services	Yes	As reported
<ul style="list-style-type: none"> If the facility is designated as FRU, whether C-sections are performed 	Yes Number of normal deliveries performed in last month: 42 No. of C-sections performed in last month: 40	Verify C-section records from Maternity OT registers
<ul style="list-style-type: none"> Comment on the condition of: 	Labour room: Good OT: Good Functional New-born care corner (functional radiant warmer with neo-natal ambu bag): Yes	Observation
29. Status of JSY payments	Payment is up to date: Yes Average delay in payment to beneficiaries: at times (Average for how many days/benefeciary) Payment done till: December Current month Yes Last month Yes Last 3 Months Yes Last 6 Months Yes Reasons for delay: ANM is not providing data on time	Verify from JSY status report
30. Availability of JSSK entitlements	Yes If yes, whether all entitlements being provided <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input checked="" type="checkbox"/> Free diet <input checked="" type="checkbox"/> Free drugs and consumables <input checked="" type="checkbox"/> Free diagnostics <input checked="" type="checkbox"/> Free blood services <input checked="" type="checkbox"/> Free referral transport (home to facility) <input checked="" type="checkbox"/> Free referral transport (drop back from facility to home) <input checked="" type="checkbox"/> No user charges 	As reported/As Displayed in Maternity Ward
31. PMSMA services provided on 9 th of every month	Yes If yes, how many high risks pregnancies are identified on 9 th for previous month: 31	PMSMA Register/High Risk Pregnancy Register,

	If No, reasons thereof:	Staff review
32. Line listing of high-risk pregnancies	Yes	Verify Register availability
33. Practice related to Respectful Maternity Care	<input checked="" type="checkbox"/> Privacy maintained during examination ensured <input type="checkbox"/> Birth attendant allowed in Labour room <input checked="" type="checkbox"/> Obtaining Informed consent of the mother/ custodian <input checked="" type="checkbox"/> Safe care environment maintained	Observation, Patient review
34. Whether facility have registers for entering births and deaths	Yes	Birth Register, Death Records
35. Number of Maternal Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records/Review
36. Number of Child Death reported in the facility	Previous year: 0 Current year: 0	Maternal Deaths Records/Review
37. If Comprehensive Abortion Care (CAC) services available	Yes	CAC register
38. Availability of vaccines and hub cutter	Yes Nurses/ ANM aware about open vial policy: Yes	Observation Staff review
39. Number of newborns immunized with birth dose at the facility in last 3 months	66	Immunisation Register
40. Number of Newborns breastfed within one hour of birth during last month.	66	Verify BF records
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 checked="" type="checkbox"/> Not functional/ All posts vacant	Observation
42. Number of sterilizations performed in last one month	9	FP Sterilizations register Verify if fixed days of sterilization exist
43. Availability of trained provider for IUCD/ PPIUCD	Yes	As reported, Verify

				training received
44. Who counsels on FP services?	<input checked="" type="checkbox"/> Counsellor Staff Nurse <input checked="" type="checkbox"/> Medical Officer Others (Specify): ANM, LHV			As reported
45. Please comment on utilization of other FP services including FP Commodities- Condoms, OCPs, Antra etc.	Shaya, Condoms			As reported/observe FP registers/records if available
46. FPLMIS has been implemented	Yes			Check software
47. Availability of functional Adolescent Friendly Health Clinic	Yes If yes, who provides counselling to adolescents: MO, ANM Separate male and female counselors available: No			Observation, check AFHC register
48. Whether facility has functional NCD clinic	No If No, is there any fixed day or days in a week for NCD care at the facility? 2 days (Mention number of days) Wednesday, Friday			Check NCD register
49. Are service providers trained in cancer services?	No			As reported
50. Number of individuals screened for the following in last 6 months:		Screened	Confirmed	NCD Register
	a. Hypertension	107 64	346	
	b. Diabetes	107 64	296	
	c. Oral Cancer	-	-	
	d. Breast Cancer	-	-	
	e. Cervical Cancer	-	-	
51. Whether reporting weekly data in P, S and L form under IDSP	Yes			Verify from IDSP reporting records
52. Status of TB elimination programme	Facility is designated as Designated Microscopy Centre (DMC): Yes			As reported, Observation
	If yes, percent of OPD whose samples were tested for TB (microscopy) in last 6 month (average) 54%			DBT/Nikshay Report
	<ul style="list-style-type: none"> If anti-TB drugs available at the facility: Yes 			DBT/Nikshay Report

	<ul style="list-style-type: none"> If yes, are there any patients currently taking anti-TB drugs from the facility: Yes 	
	<ul style="list-style-type: none"> Availability of TruNat: Yes Percent of patients tested through CBNAAT/TruNat for Drug resistance in the last 6 months: 100% 	DBT/Nikshay Report
	<ul style="list-style-type: none"> Are all TB patients tested for HIV? Yes Are all TB patients tested for Diabetes Mellitus: Yes 	DBT/Nikshay Report
	Percent of TB Patients for whom DBT installments have been initiated under Nikshay Poshan Yojana in the last 6 months: 96%	DBT/Nikshay Report
F. RECORDS, FINANCE, OTHERS		
53. Maintenance of records on	<ul style="list-style-type: none"> TB Treatment Card cases (both for drug sensitive and drug resistant cases): Yes TB Notification Registers: Yes Malaria cases: Yes Palliative cases: Yes Cases related to Dengue and Chikungunya: Yes Leprosy cases: Yes 	Respective records
54. How much fund was received and utilized by the facility under NHM?	Fund Received last year: 17781664	Facility FMR
	Fund utilized last year: 100%	
	Fund in prev. FY	
	ed	Utilized
	List out Items/ Activities whose expenditure is met out of the RKS/ Untied Fund regularly:	RKS Register
	Reasons for underutilization of fund (if any)	Staff review
55. Status of data entry in (match with physical records)	<ul style="list-style-type: none"> HMIS: Updated MCTS: Updated IHIP: Updated Portal: Updated Nikshay Portal: Updated 	Check respective portals at the facility wrt last entries
56. Frequency of RKS meeting (check and obtain minutes of last meeting held)	Every 9 th of the month	RKS Register
57. Availability of ambulance services in the area	<input checked="" type="checkbox"/> Own ambulance available	As reported

	<input type="checkbox"/> DH/ SDH has contracted out ambulance services <input type="checkbox"/> Ambulances services with Centralized call center <input type="checkbox"/> Government ambulance services are not available Comment (if any):	
<ul style="list-style-type: none"> How many cases were referred here in the last month? (No record maintained) 	Number: Types of cases referred in:	Referral-in register
<ul style="list-style-type: none"> How many cases were referred out last month? 	Number: 91 Types of cases referred out: Cardiac, High risk pregnancy, Head injury, CCF	Out-referral register

Key challenges observed in the facility and the root causes	
Challenge	Root causes
a) Lack of HR	No specialist available 24/7 in the facility and only available around the clock. Required of security guard
b) Equipment not working	CT scan equipment is not working from the last 3 years
c) Lack of Training	Training is required to the staff nurse for emergency services
d) Portal Issue	DVDMS for medicine supply creating server issue especially at the time of 9:30am to 1:00pm

Remarks & Observations (Write in Bullets within 100-300 words)

- The Government General District Hospital Yanam faces several challenges impacting its efficiency. There is a lack of manpower, with specialists not available 24/7, and the need for a security guard remains unmet. The CT scan equipment has been non-functional for three years, despite proper communication to higher authorities. Staff nurses require training in emergency services to enhance response capabilities. The DVDMS system for medicine supply encounters frequent server issues, particularly during peak hours between 9:30 AM and 1:00 PM, causing delays in service delivery.
- The District hospital operates its OPD from 8:00 AM to 12:00 PM, as per the Citizen Charter Board. The physical infrastructure includes 24x7 running water, elderly- and differently-abled-friendly facilities like ramps and wheelchairs, clean and functional toilets for both males and females, drinking water facilities, and sufficient seating in the OPD waiting area. An ASHA restroom is unavailable. The facility has a drug storeroom with racks and full power backup. There are 80 functional in-patient beds, with ICU beds ready to open soon. Available services include OPD, IPD, casualty, laboratory, delivery, PNC, family planning, physiotherapy, operation theatre, and immunization, along with specialties like medicine, O&G, pediatrics, general surgery, anesthesiology, ophthalmology, dental care, imaging services (X-ray and USG), and emergency care. Notably, facilities such as DEIC, NRC, SNCU, NICU, PICU, Labour Room Complex, and ICU are unavailable.

- Emergency services include resuscitation and stabilization, but triage is absent. Telemedicine services have recently started, averaging two consultations daily, but the facility is not functioning as a hub for AAM centers. The operation theatre is equipped with a single general OT, an elective major OT (general), and an O&G OT, but lacks an orthopedic or emergency OT. The hospital does not have a functional blood bank. Biomedical waste is managed by an outsourced agency, and IT services, including desktops, laptops, and good internet connectivity, are operational.
- The human resources section highlights gaps, such as shortages in specialists, with several sanctioned posts vacant. The facility employs 62 staff nurses, meeting the sanctioned requirement, and there is sufficient supply of drugs and essential consumables. Diagnostic services are in-house, with 34 tests available, including X-ray services, but no CT scan services. Patient diagnostic services are free for all, including BPL and JSSK beneficiaries. The hospital does not implement the PM-National Dialysis Programme.
- For quality initiatives, the facility has achieved a Kayakalp score of 60 through internal assessment, while NQAS and LaQshya certifications are yet to be initiated. Delivery services are available, including C-sections, with 42 normal deliveries and 40 C-sections performed last month. The labour room and operation theatre are in good condition, and a functional newborn care corner is equipped with a radiant warmer and neonatal ambu bag. However, a CT scan machine has been non-functional for three years, reflecting a need for maintenance and infrastructure upgrades. The hospital provides a range of essential services, it faces challenges such as infrastructure gaps, equipment downtime, and shortages in specialized staff.

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

Urban /Rural: Urban

Date of Visit: 25th January 2025

A. General Information	
1. State	Pondicherry
2. District Name	Yanam
3. Block/Taluka Name	Yanam
4. Name of Facility	UPHC Guoriampeta
5. Type of Facility	UPHC-AAM
6. NIN of the facility	4662847625
7. No. of days in a week facility is operational	6 days
8. OPD Timings	8:00am- 2:00pm
9. Month & Year of operationalization of AAM	-
10. Details of co-location, if any (If any co-located SHC)	Nearby Savithrinagar Sub Centre
11. Accessible from nearest road head (Yes/No)	Yes
12. Next Referral Facility Name	GGH Yanam
13. Distance of next referral facility (in Km)	12.5km
14. If UPHC functions as a Polyclinic (Yes/No)	No
15. If Yes, please take note of available specialist services at the Polyclinic	-

A.1 Demographic Details	
1. Number of Villages/Wards	No ward
2. No. of Households	570
3. Total catchment Population	2081
4. Population who are 30 years of age and above	1207

B. Physical Infrastructure			
Infrastructure Status and details		Availability	
1.	Availability of Govt owned Building	Yes	
2.	If there is no government-owned Building, specify building type	S.no	Building
		A	Other Govt.
		B	Panchayat Bhawan
		C	Urban Local Body
	D	Rented etc	
3.	Is the facility functional 24 x 7?	No	
4.	Availability of IPD Beds	No	
5.	If yes, Number of functional IPD Beds	No	
6.	Availability of boundary Wall	Yes	
7.	External branding as per CPHC guidelines (Colour & Logo)	Yes	
8.	OPD room	Yes	
	Examination table with privacy curtains/screen	Yes	
9.	Waiting area with sitting arrangements for patients/ attendants	Yes	
10.	Availability of furniture:		
	Table	Yes	
	Chairs	Yes	
	Almirah/Shelf	Yes	
11.	Laboratory	No	

12.	Pharmacy /Drug store	Yes
13.	Space/ room identified for Wellness activities including Yoga sessions	Yes
14.	Separate functional toilets for males and females	Yes
15.	Availability of Running Water	Yes
16.	Facilities for elderly and differently abled people (ramps at entry, wheel chairs etc.)	Yes
17.	Electricity connection	Yes
18.	Power back up	No
19.	Safe drinking Water for staff and patients	Yes
20.	Functional Handwashing corner (designated) with running water and soap	Yes
21.	Provision of BMW management	Yes
22.	Colour coded waste bins	Yes
23.	Bio-medical waste disposal mechanism in place	Yes
24.	Residential Quarters available for Staff If yes, Specify the staff for which quarters available	No

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

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

16.	Others (Specify)		-	-	-	-
17.	Whether all essential HRH available as per IPHS 2022					

*Desirable

For PHC sub centre-Co-located

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

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

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

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

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

F. Availability of Essential medicines		
1	Number of medicines at AAM-PHC/UPHC as per State Essential Medicines list (IPHS/AAM EDL) <i>(Link for list of essential medicines for reference- https://nhsrcindia.org/essential-medicines-list-hwc-shc-phc)</i>	172 <i>(Total number of medicines at AAM-PHC/UPHC as per National EML -172)</i>
2	Total number of medicines available at AAM-PHC/UPHC	29
3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever
4	Medicine categories with shortfall/stockouts on the day of assessment	Antidotes for poisoning Anti-filarial Anti-leprosy Anti-malarial
5	What is the indenting cycle that is followed at the facility?	As required
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at AAM-PHC/UPHC as per State Essential Diagnostic list	2 (Hb, RBS) (Total number of diagnostic tests at AAM-PHC/UPHC as per National Essential Diagnostic list-63)
3	Number of tests available at AAM-PHC/UPHC	Hb, RBS
4	Number of tests Provided through In House Mode	2
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No

10	Average downtime of equipment	Less than 1 week
11	Details of equipment which are non-functional for 7 Days (<i>List of equipment is provided as annexure for reference</i>)	-

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

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Desktop
Teleconsultation services (PHC/CHCs/DH/MCH)	Yes
Teleconsultation platforms	e-Sanjeevani.in
Teleconsultation schedule prepared and displayed	Yes
Common conditions for teleconsultation	General Medicine- fever, Orthopedic
Total teleconsultations in the last 01 month	2

I. Wellness Activities			
Wellness sessions being held periodically	Yes		
Availability of a trained instructor for wellness session	Yes		
Health Days are celebrated as per the Wellness Activity Calendar	Yes		
Health Days are celebrated as per the Wellness Activity Calendar	No		
J. Governance			
Constitution of Jan Arogya Samiti	No		
Periodic JAS meetings in the last 6 months	No		
Minutes of meeting maintained	No		
Periodic VHND sessions undertaken	No		
K. Reporting			
Online Platforms	Reporting		
<input type="checkbox"/> AAM Portal/App	Yes		
<input type="checkbox"/> National NCD Portal/App	Yes		
<input type="checkbox"/> IHIP	Yes		
<input type="checkbox"/> HMIS	Yes		
<input type="checkbox"/> FPLMIS	Yes		
<input type="checkbox"/> DVDMS	Yes		
<input type="checkbox"/> Nikshay	Yes		
Specify others, if any:	Yes		
L. Finance			
Renumeration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	AAM-PHC Team (Salary)	Yes	Yes
	AAM-PHC Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source		Timely disbursement
	Untied		Yes
	Other Sources		Yes
Fund utilization NHM Fund/untied funds utilized during last year:	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	No direct fund received, whatever indent they want they get directly from the state.		
Is untied fund being spent on following activities?	Regular payment of Bills: Yes If yes, specify; <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet Regular purchase: Yes <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment		
Status of JSY Payments	Payment done till (month/ year): December. Average Delay in Payment (days): No Reasons for delay, if any- No		

Availability of JSSK entitlements	No
	<p>If yes, whether all entitlements being provided</p> <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges

M. Service delivery Output Indicators (Data of previous quarter)				
1	Total number of outpatient department visits	1689		
2	No. of PW registered for ANC	10		
3	No. of PW received 4 or more ANC check-ups	4		
4	Total number of institutional deliveries	0		
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	2		
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	9		
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	7		
8	Number of cases referred from Sub centre AAM (From all sub-centre -AAM under PHC) to PHC AAM during last month	-		
9	Number of cases referred from PHC AAM to CHC or higher centre during last month	-		
10	Number of cases referred back from higher centre to PHC AAM for follow- up during last 3 months	-		
11	TB patients undergoing treatment			
	Indicators	Current year		
	No. of presumptive TB patients identified	-		
	No. of TB patients diagnosed out of the presumptive patients referred	-		
	No. of TB patients taking treatment in the AAM	-		
12	Community Based Screening for NCDs			
	% of target population administered CBAC	-		
	% of target population with score below 4	-		
	% of target population with score 4 and above	-		
13	NCDs (No. of individuals in Last 6 Months)	Screened	Treated	Follow-up
	Hypertension	272	4	-
	Diabetes	185	2	-
	NCDs (No. of individuals in Last 6 Months)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-

	Cervical Cancer*	-	-	-
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N. Implementation of NQAS Quality Assurance and Patient Safety		
1	Has there been an internal assessment for NQAS?	No
2	Is the facility certified at the State-level for NQAS?	No
3	Is the facility certified at the National level for NQAS?	No
4	Is the facility participating in Kayakalp?	No
5	If yes, achievement under Kayakalp (Winner, commendation) and score	No
6	Patient Rights	<input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services	<input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology <input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance
O. IPHS Compliance		
1	Date of assessment using ODK tool kit	2024
2	Facility aggregate score using ODK Took kit	-

Remarks & Observations

- General Information**

UPHC Guoriammeta, located in Yanam, Pondicherry, operates six days a week from 8:00 AM to 2:00 PM. It serves a catchment population of 2,081, with 1,207 individuals aged 30 and above. The nearest referral facility, GGH Yanam, is 12.5 km away. The facility does not function as a polyclinic and does not operate 24/7.

- Infrastructure & Amenities**

The UPHC is housed in a government-owned building with essential infrastructure, including a waiting area, examination rooms, separate functional toilets, ramps for differently-abled individuals, and a designated wellness space. However, it lacks inpatient beds, a power backup, and a laboratory. Essential services like pharmacy, running water, and biomedical waste management are in place, but IEC materials on grievance redressal, referral transport, and citizen charters are missing.

- Human Resources**

The facility has one medical officer (MBBS), two staff nurses, one pharmacist, and two ASHAs, but lacks specialists like AYUSH doctors, dentists, and laboratory technicians. Essential human resources are not fully available as per IPHS 2022 guidelines.

- Training & Service Availability**

Staff members have received training in maternal and child health, communicable diseases, non-communicable diseases (NCDs), and expanded primary healthcare services like eye, ENT, and oral care. However, training in trauma, emergency, and palliative care is incomplete. The facility provides reproductive, maternal, and child health services and basic NCD screening but lacks screening for breast and cervical cancers, as well as mental health management.

- Pharmaceutical & Diagnostic Services**

Out of 172 essential medicines, only 29 are available, with shortages in antidotes, anti-filarial, anti-leprosy, and anti-malarial drugs. The facility maintains a buffer stock and uses digital software for inventory management. Diagnostic services are limited to hemoglobin and random blood sugar testing, far below the national essential diagnostic list of 63 tests.

Annexure- List of equipment

S.No.	Equipment	Available	Not available	Functional	Non-Functional
1	Ambu Bag	✓		✓	
2	Laryngoscope		-		
3	Radiant Warmer		-		
4	Pulse Oximeter-Finger Tip	✓		✓	
5	Pulse Oximeter-Table Top		-		
6	Labor Bed		-		
7	Foetal Doppler		-		
8	Phototherapy Unit		-		
9	Shoulder Wheel		-		
10	Shoulder Pulley		-		
11	Shoulder Abduction Ladder		-		
12	Suction Machine		-		
13	Mobile Spotlight	✓		✓	
14	Manual Vacuum Aspirator		-		

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

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit: 24th January, 2025

A. General Information	
1. State	Pondicherry
2. District Name	Yanam
3. Ward Name	Savithrinagar
4. Name of Facility	Savithrinagar HWC
5. Type of Facility	HWC-SC
6. NIN of the facility	1111814453
7. No. of days in a week the facility is operational	6 days
8. OPD Timing	8:00am to 12:00pm
9. Month & Year of UAAM operationalization	No converted into UAAM
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	Government Hospital Yanam
12. Distance of next referral facility (Km)	12 km

A.1 Demographic Details	
5. Number of Wards	No wards
6. No. of Households	1068
7. Total catchment Population	4767
8. Population who are 30 years of age and above	1874

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

15.	Electricity connection	Yes
16.	Power back up	No
17.	Availability of Safe drinking Water	No
18.	Functional Handwashing corner (designated) with running water and soap	Yes
19.	Provision of BMW management	Yes
20.	Colour coded waste bins	Yes
21.	Bio-medical waste disposal mechanism in place	No
22.	Residential Quarters available for Staff If yes, Specify the staff for which quarters available	No

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

*Desirable amenities

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

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

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

Others (Specify)	-	-	-	-
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D.2 Training details- Expanded CPHC packages						
Staff	Trained in Eye care (Yes/No)	Trained in ENT care (Yes/No)	Trained in oral care (Yes/No)	Trained in MNS (Yes/No)	Trained in Elderly & Palliative Care (Yes/No)	Trained in Trauma & Emergency care (Yes/No)
CHO	-	-	-	-	-	-
Staff Nurse	-	-	-	-	-	-
ANM	Yes	Yes	Yes	No	No	No
ASHA	Yes	Yes	Yes	No	No	No

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

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

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

2	Total number of medicines available at the UAAM	35
3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever
4	Medicine categories with shortfall/stockouts on the day of assessment	Antidotes for poisoning Anti-filarial Anti-leprosy Anti-malarial
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	2 (Hb, RBS) <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	2
4	Number of tests Provided through In House Mode	-
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	1 week
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	None

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Desktop
Teleconsultation services	Yes
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital

	<input checked="" type="checkbox"/> Other, specify: IGMC Puducherry
Teleconsultation platforms used	e-Sanjeevani.in
Teleconsultation schedule prepared and displayed	Yes
Common conditions for teleconsultation	General Medicine
Total teleconsultations in the last 01 month	One

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

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

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

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes	
	Other Sources	Yes	
United Fund utilized during last year (Fund received as per the requirement as there is no CHO appointment in the facility)	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	Rs 5000	Rs 5000	100% utilized
Is untied fund being spent on following activities?	Regular payment of Bills: Yes If yes, specify; <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet		

	<p>Regular purchase: Yes</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment <p>Payment of support/cleaning Staff: No</p>
Status of JSY Payments	<p>Payment done till: December</p> <p>Average Delay in Payment (days):</p> <p>Reasons for delay, if any</p>
Availability of JSSK entitlements (No deliveries taking place in UHWC)	<p>No</p> <p>If yes, whether all entitlements being provided</p> <ul style="list-style-type: none"> <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1300
2	No. of PW registered for ANC	19
3	No. of PW received 4 or more ANC check-ups	17
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	4
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	14
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	20
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	-
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	-
8	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	16
	No. of TB patients diagnosed out of the presumptive patients referred	-
	No. of TB patients taking treatment in the AAM	-
9	Community Based Screening for NCDs	
	% of target population administered CBAC	-
	% of target population with score below 4	-

		% of target population with score 4 and above		-
10	NCDs (No. of individuals in Last 6 Months)	Screened	Treated	Follow-up
	Hypertension	561	10	
	Diabetes	378	8	
	NCDs (No. of individuals in Last 6 Months)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-
	Cervical Cancer*	-	-	-

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

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

Remarks & Observations

- **Infrastructure Gaps:** Basic facilities such as boundary walls, an OPD room, and a pharmacy are available, but critical amenities like daycare beds, gender-specific toilets, power backup, and accessibility features are lacking. Safe drinking water is unavailable, and there is no proper biomedical waste disposal system.
- **Human Resource Shortages:** While the center has two ASHAs and ANMs each, there is a shortage of essential personnel, including a CHO, staff nurse, male MPW, security, and sanitary staff, affecting service efficiency.
- **Limited Training & Service Delivery:** ANMs and ASHAs are trained in Eye, ENT, and Oral care but lack training in mental health, elderly care, and emergency services. The facility provides maternal and child healthcare, communicable disease treatment, and NCD screenings, though critical screenings for breast and cervical cancer are absent. Essential drugs and diagnostics for expanded services are also insufficient.
- **Inadequate Medicine & Diagnostics:** Only 35 out of 105 essential medicines are available, with shortages in antidotes, anti-malarial, anti-filarial, and anti-leprosy drugs. Diagnostics are limited to Hb and RBS tests, with no X-ray, sample transportation, in-house lab, or PPP-model diagnostic services.
- **Underutilized IT & Teleconsultation:** The facility has internet access, a desktop, and teleconsultation services through e-Sanjeevani (IGMC Puducherry as the hub), but its usage remains minimal, with only one consultation in the past month.
- **Wellness & Governance Gaps:** Regular wellness activities are conducted, but essential informational resources such as IEC displays, grievance redressal mechanisms, referral transport details, and a citizen charter are missing.

Annexure- List of essential equipment

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

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit: 24th January, 2025

A. General Information	
1. State	Pondicherry
2. District Name	Yanam
3. Ward Name	Mettakuru
4. Name of Facility	Mettakuru HWC
5. Type of Facility	UHWC
6. NIN of the facility	1122262288
7. No. of days in a week the facility is operational	6 days
8. OPD Timing	8:00am to 12:00pm
9. Month & Year of UAAM operationalization	No converted into UAAM yet
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	Government Hospital Yanam
12. Distance of next referral facility (Km)	1 km

A.1 Demographic Details	
9. Number of Wards	No wards
10. No. of Households	1523
11. Total catchment Population	5583
12. Population who are 30 years of age and above	2346

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

15.	Electricity connection	Yes
16.	Power back up	No
17.	Availability of Safe drinking Water	No
18.	Functional Handwashing corner (designated) with running water and soap	No
19.	Provision of BMW management	Yes
20.	Colour coded waste bins	Yes
21.	Bio-medical waste disposal mechanism in place	Yes
22.	Residential Quarters available for Staff If yes, Specify the staff for which quarters available	No

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

*Desirable amenities

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

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

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

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

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

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

F. Availability of Essential medicines	
1	Number of medicines at UAAM as per State Essential Medicine List (EML) <i>Reference link for national EML:</i> https://nhsrcindia.org/sites/default/files/SHC-HWC%20%26%20UHC%20IPHS%202022%20Guidelines%20pdf.pdf
	105 (Total medicines at UAAM as per national EML is 105)
2	Total number of medicines available at the UAAM
	35

3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever
4	Medicine categories with shortfall/stockouts on the day of assessment	Antidotes for poisoning Anti-filarial Anti-leprosy Anti-malarial
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	2 (Hb, RBS) <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	2
4	Number of tests Provided through In House Mode	-
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	1 week
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	None

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Desktop
Teleconsultation services	Yes
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input checked="" type="checkbox"/> Medical College Hospital- Puducherry <input type="checkbox"/> Other, specify
Teleconsultation platforms used	e-Sanjeevani.in

Teleconsultation schedule prepared and displayed	Yes
Common conditions for teleconsultation	General Medicine
Total teleconsultations in the last 01 month	One

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

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

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

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes	Yes
	Other Sources	Yes	Yes
United Fund utilized during last year (Fund received as per the requirement as there is no CHO appointment in the facility)	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	Rs 5000	Rs 5000	100% utilised
	Is untied fund being spent on following activities?		
Regular payment of Bills: Yes			
If yes, specify;			
<input checked="" type="checkbox"/> Electricity			
<input checked="" type="checkbox"/> Drinking Water			
<input checked="" type="checkbox"/> Internet			
Regular purchase: Yes			

	<input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No
Status of JSY Payments	Payment done till: December Average Delay in Payment (days): No Reasons for delay, if any
Availability of JSSK entitlements (No deliveries taking place in UHWC)	No If yes, whether all entitlements being provided <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1493
2	No. of PW registered for ANC	7
3	No. of PW received 4 or more ANC check-ups	15
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	-
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	11
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	5
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	No records are maintained in the facility because only ASHA and ANM are there at the facility
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	
8	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	7
	No. of TB patients diagnosed out of the presumptive patients referred	4
	No. of TB patients taking treatment in the AAM	4
9	Community Based Screening for NCDs	
	% of target population administered CBAC	2379
	% of target population with score below 4	-
	% of target population with score 4 and above	-

10	NCDs (No. of individuals in Last 6 Months)	Screened	Treated	Follow-up
	Hypertension	570	4	4
Diabetes	388	1	1	
10	NCDs (No. of individuals in Last 6 Months)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-
	Cervical Cancer*	-	-	-

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

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

Remarks & Observations
<ul style="list-style-type: none"> Physical Infrastructure <p>The facility lacks a government-owned building, boundary wall, day-care beds, functional toilets, running water, and accessibility features for the elderly and differently-abled. Essential amenities such as a waiting area, furniture (tables and chairs), a pharmacy, and a wellness space are available. Waste management is limited, with only color-coded bins and a bio-medical waste disposal system in place. There is no power backup or provision for safe drinking water, further impacting the facility's operational efficiency.</p> Human Resource Availability <p>The facility has no sanctioned or available staff for key positions such as Community Health Officer (CHO), staff nurse, Male Multi-Purpose Worker (MPW), sanitary staff, or security personnel. Three Accredited Social Health Activists (ASHAs) and two Auxiliary Nurse Midwives (ANMs) are actively working at the facility.</p> Training & Service Availability <p>The ANMs and ASHAs at the facility are trained in maternal health, communicable diseases, family planning, and non-communicable diseases (NCDs). No staff members have received training in trauma, emergency care, or elderly and palliative care. The facility provides services related to maternal and child health, family planning, communicable diseases, and basic NCD management, but cancer screening services are absent.</p> Availability of Expanded Healthcare Services <p>The facility provides basic ophthalmic, ENT, oral, and elderly care services; however, it lacks essential diagnostic tools. There are no emergency medical or mental health services available.</p> Essential Medicines & Diagnostics <p>Only 35 out of the 105 essential medicines are available, with significant shortages in antidotes, anti-filarial, anti-leprosy, and anti-malarial drugs. Diagnostic services are limited to two tests- Hemoglobin (Hb) and Random Blood Sugar (RBS) with no in-house laboratory or sample transport system in place.</p> IT Equipment & Teleconsultation <p>Internet connectivity and teleconsultation services (e-Sanjeevani) with Puducherry Medical College Hospital are available; only one teleconsultation was conducted in the past month.</p> Governance & Reporting <p>Jan Arogya Samiti has not been constituted, and no periodic meetings have been held. There is no display of grievance redressal mechanisms, a citizen charter, or referral transport information.</p>

Annexure- List of essential equipment

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

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit: 24th January, 2025

A. General Information	
1. State	Pondicherry
2. District Name	Yanam
3. Ward Name	Kanakalapeta
4. Name of Facility	Kanakalapeta HWC
5. Type of Facility	HWC-SC
6. NIN of the facility	1883266387
7. No. of days in a week the facility is operational	6 days
8. OPD Timing	8:00am to 12:00pm
9. Month & Year of UAAM operationalization	No converted into UAAM
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	Government Hospital Yanam
12. Distance of next referral facility (Km)	1.5 km

A.1 Demographic Details	
1. Number of Wards	No wards
2. No. of Households	1266
3. Total catchment Population	4998
4. Population who are 30 years of age and above	2476

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

19.	Provision of BMW management	Yes
20.	Colour coded waste bins	Yes
21.	Bio-medical waste disposal mechanism in place	No
22.	<i>Residential Quarters available for Staff</i> <i>If yes, Specify the staff for which quarters available</i>	Yes

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

*Desirable amenities

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

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

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

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

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

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

F. Availability of Essential medicines	
1	Number of medicines at UAAM as per State Essential Medicine List (EML) <i>Reference link for national EML:</i> https://nhsrcindia.org/sites/default/files/SHC-HWC%20%26%20UHC%20IPHS%202022%20Guidelines%20pdf.pdf
	105 (Total medicines at UAAM as per national EML is 105)
2	Total number of medicines available at the UAAM
	35

3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever
4	Medicine categories with shortfall/stockouts on the day of assessment	Antidotes for poisoning Anti-filarial Anti-leprosy Anti-malarial
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	2 (Hb, RBS) <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	2
4	Number of tests Provided through In House Mode	-
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	1 week
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	None

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Desktop
Teleconsultation services	Yes
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input type="checkbox"/> Medical College Hospital <input checked="" type="checkbox"/> Other, specify: IGMC Puducherry
Teleconsultation platforms used	e-Sanjeevani.in
Teleconsultation schedule prepared and displayed	Yes

Common conditions for teleconsultation	General Medicine
Total teleconsultations in the last 01 month	One

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

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

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

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes	
	Other Sources	Yes	
United Fund utilized during last year (Fund received as per the requirement as there is no CHO appointment in the facility)	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	Rs 5000	Rs 5000	100% utilized
Is untied fund being spent on following activities?	Regular payment of Bills: Yes If yes, specify: <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet		

	<p>Regular purchase: Yes</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment <p>Payment of support/cleaning Staff: No</p>
Status of JSY Payments	<p>Payment done till: December</p> <p>Average Delay in Payment (days): no</p> <p>Reasons for delay, if any</p>
Availability of JSSK entitlements (No deliveries taking place in UHWC)	<p>No</p> <p>If yes, whether all entitlements being provided</p> <ul style="list-style-type: none"> <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	2300
2	No. of PW registered for ANC	7
3	No. of PW received 4 or more ANC check-ups	7
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	2
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	9
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	7
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	All ANC's are referred to GGH Yanam for ANC Checkup
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	-
8	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	12
	No. of TB patients diagnosed out of the presumptive patients referred	1
	No. of TB patients taking treatment in the AAM	1
9	Community Based Screening for NCDs	
	% of target population administered CBAC	-

	% of target population with score below 4		-	
	% of target population with score 4 and above		-	
10	NCDs (No. of individuals in Last 6 Months)	Screened	Treated	Follow-up
	Hypertension	1500	6	
	Diabetes	660	4	
	NCDs (No. of individuals in Last 6 Months)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-
	Cervical Cancer*	-	-	-

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

O. IPHS Compliance		
1	Date of assessment using ODK tool kit	2024
2	Facility aggregate score using ODK Tool kit	-

Remarks & Observations
<ul style="list-style-type: none"> Physical Infrastructure <p>The building is government-owned and has a boundary wall, ensuring security and compliance with CPHC guidelines for external branding. It includes an OPD room with a privacy curtain, a waiting area with seating, and essential furniture such as tables, chairs, and an almirah. While there is a pharmacy/drug store and space for wellness or yoga activities, the facility lacks a laboratory and the required two-day care beds. Separate functional toilets for males and females are not available, and accessibility features for the elderly or differently abled, such as ramps and wheelchairs, are also absent. The availability of running water and safe drinking water, as well as electricity and power backup, is uncertain. Biomedical waste management is only partially implemented, though residential quarters for staff are provided.</p> IEC (Information, Education & Communication) <p>The facility lacks proper signages and a displayed facility name. While there is partial availability of IEC materials covering areas such as TB, FP, RMNCHA, NCD, eye, and oral care, there was no IEC display for biomedical waste management, drinking water, sanitation, and hygiene display is present, but essential information such as the citizen charter, grievance redressal details, and referral transport with the nearest referral facility information is missing. There was no TV or LED screen in the waiting area for informational or entertainment purposes.</p> Human Resource Availability <p>The facility has one sanctioned and available Community Health Officer (CHO) in a regular position. However, essential staff such as a staff nurse, male multipurpose worker (MPW), and sanitary and security personnel are not available. The facility is supported by three ASHA workers and two Auxiliary Nurse Midwives (ANMs).</p> Training Details <p>The ANMs and ASHA workers have received training in RMNCHA and communicable/non-communicable diseases. They have undergone expanded CPHC training, covering areas such as eye care, ENT, and oral health.</p> Availability of Services <p>The facility provides services for reproductive, maternal, and child health, along with communicable diseases such as TB, malaria, and leprosy. Non-communicable disease services are partially available, with screening limited to oral cancer. Expanded healthcare packages include ophthalmic, ENT, oral, and elderly care services, while mental health and emergency care services are currently absent.</p> Essential Medicines <p>Out of the 105 medicines listed under UAAM (National List), only 35 are available at the facility. Essential medicines for priority conditions such as TB, diabetes, hypertension, and fever are stocked. There are shortages of antidotes, anti-filarial, anti-leprosy, and anti-malarial drugs. The indenting cycle for drug supply is conducted monthly, with a lead time of less than a week. A</p>

buffer stock is maintained, and the facility utilizes the Drug and Vaccine Distribution Management System (DVDMS) for inventory management.

- **Diagnostics**

The facility has an in-house laboratory; however, out of the 14 tests listed in the National Essential Diagnostics List (EDL), only two Hemoglobin (Hb) and Random Blood Sugar (RBS) are available. There is no provision for X-ray services or a sample transport mechanism.

- **IT & Teleconsultation**

The facility has internet access and a desktop available for use. It utilizes the e-Sanjeevani teleconsultation platform, with IGMC Puducherry serving as the hub. Teleconsultations are primarily conducted for general medicine cases, though only one teleconsultation was recorded in the past month.

- **Wellness Activities**

The facility conducts periodic wellness sessions with an assigned instructor and actively celebrates designated health days.

- **Governance**

The facility does not have a Jan Arogya Samiti (JAS) or conduct its meetings. Additionally, there are no recorded minutes of meetings, and the Mahila Arogya Samiti (MAS) is not functional.

- **Reporting**

The facility utilizes various online platforms, including AAM, NCD, IHIP, HMIS, FPLMIS, DVDMS, and Nikshay, for healthcare management and data reporting.

- **Finance**

Timely salary and incentives disbursement are ensured at the facility. Facility funds, including untied and other sources, have been received and fully utilized.

Annexure- List of essential equipment

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

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit: 24th January, 2025

A. General Information	
1. State	Pondicherry
2. District Name	Yanam
3. Ward Name	Farampeta
4. Name of Facility	Farampeta HWC
5. Type of Facility	UHWC
6. NIN of the facility	3585816782
7. No. of days in a week the facility is operational	6 days
8. OPD Timing	8:00am to 12:00pm
9. Month & Year of UAAM operationalization	No converted into UAAM yet
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	Government Hospital Yanam
12. Distance of next referral facility (Km)	2 km

A.1 Demographic Details	
1. Number of Wards	No wards
2. No. of Households	818
3. Total catchment Population	3120
4. Population who are 30 years of age and above	1819

B. Physical Infrastructure	
Infrastructure Status and details	Availability
Availability of Govt owned building	Yes
If there is no government-owned building, specify building type (<i>Other Govt./Urban Local Body/ Rented etc.</i>)	
Availability of boundary wall	Yes
External branding as per CPHC guidelines (<i>colour, logo</i>)	No
OPD room	Yes
Examination table with privacy curtain/ screen	Yes
Day Care Beds available (<i>Norm – 2</i>)	No
Waiting area with sitting arrangements for patients/ attendants	Yes
Availability of furniture	Yes
Table	Yes
Chairs	Yes
Almirah/Rack	Yes
Laboratory	No
Pharmacy /Drug store	No
Space/ room identified for Wellness activities including Yoga sessions	Yes
Separate functional toilets for males and females	Yes
Availability of Running Water	Yes
Facilities for elderly and differently able people (ramps at entry, wheel chairs etc.)	No
Electricity connection	Yes
Power back up	No

Availability of Safe drinking Water	Yes
Functional Handwashing corner (designated) with running water and soap	Yes
Provision of BMW management	No
Colour coded waste bins	Yes
Bio-medical waste disposal mechanism in place	Yes
Residential Quarters available for Staff If yes, Specify the staff for which quarters available	No

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

*Desirable amenities

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

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

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

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

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

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

F. Availability of Essential medicines	
1	Number of medicines at UAAM as per State Essential Medicine List (EML) <i>Reference link for national EML:</i> https://nhsrcindia.org/sites/default/files/SHC-HWC%20%26%20UHC%20IPHS%202022%20Guidelines%20pdf.pdf
	105 (Total medicines at UAAM as per national EML is 105)
2	Total number of medicines available at the UAAM
	35

3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever
4	Medicine categories with shortfall/stockouts on the day of assessment	Antidotes for poisoning Anti-filarial Anti-leprosy Anti-malarial
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	2 (Hb, RBS) <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	2
4	Number of tests Provided through In House Mode	-
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	1 week
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	None

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Desktop
Teleconsultation services	Yes
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input checked="" type="checkbox"/> Medical College Hospital, Puducherry <input type="checkbox"/> Other, specify
Teleconsultation platforms used	e-Sanjeevani.in
Teleconsultation schedule prepared and displayed	Yes

Common conditions for teleconsultation	General Medicine
Total teleconsultations in the last 01 month	One

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

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

K. Reporting	
Online Platforms	Reporting
<input type="checkbox"/> AAM Portal/App	Yes
<input type="checkbox"/> National NCD Portal/App	Yes
<input type="checkbox"/> IHIP	Yes
<input type="checkbox"/> HMIS	Yes
<input type="checkbox"/> FPLMIS	Yes
<input type="checkbox"/> DVDMS	Yes
<input type="checkbox"/> Nikshay	Yes
Specify others:	-

L. Finance			
Renumeration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes	
	Other Sources	Yes	
United Fund utilized during last year (Fund received as per the requirement as there is no CHO appointment in the facility)	Funds received (Amount in Rs.)	Expenditure (Amount in Rs.)	% Expenditure
	Rs 5000	Rs 5000	100% utilised
Is untied fund being spent on following activities?	Regular payment of Bills: Yes If yes, specify; <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet Regular purchase: Yes		

	<input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment Payment of support/cleaning Staff: <input type="checkbox"/> Yes <input type="checkbox"/> No
Status of JSY Payments	Payment done till: December Average Delay in Payment (days): No Reasons for delay, if any
Availability of JSSK entitlements (No deliveries taking place in UHC)	No If yes, whether all entitlements being provided <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	1309
2	No. of PW registered for ANC	8
3	No. of PW received 4 or more ANC check-ups	9
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	5
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	7
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	3
8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month	-
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months	-
8	TB patients undergoing treatment	
	Indicators	Current year
	No. of presumptive TB patients identified	9
	No. of TB patients diagnosed out of the presumptive patients referred	2
	No. of TB patients taking treatment in the AAM	2
9	Community Based Screening for NCDs	
	% of target population administered CBAC	1502
	% of target population with score below 4	-

		% of target population with score 4 and above		-
10	NCDs (No. of individuals in Last 6 Months)	Screened	Treated	Follow-up
	Hypertension	305	3	
	Diabetes	60	3	
	NCDs (No. of individuals in Last 6 Months)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-
	Cervical Cancer*	-	-	-

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

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

Remarks & Observations

- **Physical Infrastructure**

The facility has a government-owned building with a boundary wall but lacks external branding per CPHC guidelines. It has an OPD room with an examination table and privacy screen, a waiting area with seating, and essential furniture (tables, chairs, racks). It lacks day-care beds, a laboratory, a pharmacy, and facilities for the elderly and differently-abled. While electricity and running water are available, there is no power backup. Safe drinking water and handwashing facilities are in place, but biomedical waste management provisions are lacking.

- **Information, Education & Communication (IEC)**

Signages and IEC materials on key health services such as maternal health, child health, and non-communicable diseases are displayed. IEC materials for eye and oral care, grievance redressal, and referral transport are missing. The facility lacks a TV/LED screen for health awareness content.

- **Human Resource Availability**

The facility has no CHO, staff nurse, MPW (male), sanitary or security staff. Three ASHAs and two ANMs are present as per population norms available at the facility.

- **Training Details**

ANMs and ASHAs have been trained in maternal health, child health, family planning, and communicable diseases. They have also received training in eye care, ENT care, and oral health but not in mental health, elderly care, or trauma and emergency care.

- **Service Availability**

The facility provides reproductive, maternal, child health, and communicable disease services, including vector-borne disease management and tuberculosis care. Screenings for oral, breast, and cervical cancer are unavailable. Some expanded service packages, such as ophthalmic, ENT, oral, and elderly care, are offered, but mental health and emergency services are absent.

- **Essential Medicines**

Out of 105 essential medicines listed in the national EML, only 35 are available. Drugs for tuberculosis, diabetes, hypertension, and fever are stocked, but there are shortages in antidotes, anti-filarial, anti-leprosy, and anti-malarial drugs. The indenting cycle is monthly, and buffer stock is maintained.

- **Diagnostic Services**

The facility has an in-house lab but offers only two diagnostic tests (Hb, RBS) out of the 14 recommended. No X-ray services or sample transportation mechanisms are available.

- **IT & Teleconsultation Services**

The facility has internet connectivity and desktops for teleconsultation via the e-Sanjeevani platform, connected to a medical college hospital. However, only one teleconsultation occurred in the last month.

- **Wellness Activities**

Regular wellness sessions and health day celebrations are conducted with trained instructors.

- **Governance**

There is no Jan Arogya Samiti (JAS), and no JAS meetings or records of governance activities exist.

- **Reporting**

The facility actively reports data on national health portals such as AAM, NCD, IHIP, HMIS, FPLMIS, DVDMS, and Nikshay.

- **Finance**

Salary and incentives for the UAAM team are disbursed on time. The untied fund of ₹5,000 was fully utilized for regular payments.

Annexure- List of essential equipment

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

Field Monitoring Format-Urban Ayushman Arogya Mandir (UAAM)

Date of Visit: 24th January, 2025

A. General Information	
1. State	Pondicherry
2. District Name	Yanam
3. Ward Name	Dariyalathippa
4. Name of Facility	Dariyalathippa HWC
5. Type of Facility	HWC
6. NIN of the facility	1883266387
7. No. of days in a week the facility is operational	6 days
8. OPD Timing	8:00am to 12:00pm
9. Month & Year of UAAM operationalization	No converted into UAAM
10. Is the facility accessible from nearest road head? (Yes/No)	Yes
11. Next Referral Facility	Government Hospital Yanam
12. Distance of next referral facility (Km)	7 km

A.1 Demographic Details	
1. Number of Wards	No wards
2. No. of Households	1195
3. Total catchment Population	4346
4. Population who are 30 years of age and above	2019

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

15.	Electricity connection	Yes
16.	Power back up	No
17.	Availability of Safe drinking Water	Yes
18.	Functional Handwashing corner (designated) with running water and soap	No
19.	Provision of BMW management	Yes
20.	Colour coded waste bins	Yes
21.	Bio-medical waste disposal mechanism in place	Yes
22.	Residential Quarters available for Staff If yes, Specify the staff for which quarters available	No

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

*Desirable amenities

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

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

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

Communicable Diseases (TB/Leprosy/Malaria/Dengue/Filariasis etc.)	-	-	Yes	Yes
NCD	-	-	Yes	Yes
Others (Specify)	-	-	-	-

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

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

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

F. Availability of Essential medicines		
1	Number of medicines at UAAM as per State Essential Medicine List (EML) <i>Reference link for national EML:</i> https://nhsrcindia.org/sites/default/files/SHC-HWC%20%26%20UHC%20IPHS%202022%20Guidelines%20pdf.pdf	105 <i>(Total medicines at UAAM as per national EML is 105)</i>
2	Total number of medicines available at the UAAM	35
3	Availability of medicines for priority conditions	<input checked="" type="checkbox"/> Tuberculosis <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Fever
4	Medicine categories with shortfall/stockouts on the day of assessment	Antidotes for poisoning Anti-filarial Anti-leprosy Anti-malarial
5	What is the indenting cycle that is followed at the facility?	Monthly
6	What is the lead time for supply of drugs which are indented? (record in days)	Less than 1 Week
7	Is buffer stock for drugs maintained?	Yes
8	DVDMS or any other software is being used for stock management	Yes

G.1 Availability of Diagnostic Services		
1	Availability of diagnostic services:	In-house lab
2	Number of diagnostic tests at UAAM as per State Essential Diagnostic list	2 (Hb, RBS) <i>(Total diagnostic tests at UAAM as per national EDL is 14)</i>
3	Number of tests available at UAAM	2
4	Number of tests Provided through In House Mode	-
5	Number of tests Provided through Hub & Spoke (Public Health System)	-
6	Number of tests Provided through Hub & Spoke- PPP Model	-
7	Availability of X-ray services	No
8	Availability of Sample transportation mechanism	No
9	User fee charged for diagnostics	No
10	Average downtime of equipment (days)	-
11	Details of equipment which are non-functional for 7 Days (List of equipment is provided as annexure)	None

H. Availability of IT Equipment & Teleconsultation services	
Infrastructure: Availability	Internet connectivity (government funded) Desktop
Infrastructure: Functionality	Internet connectivity (government funded) Desktop
Teleconsultation services	Yes
Specify Hub for teleconsultation: (UPHC-Polyclinic/ /DH/MCH/Other)	<input type="checkbox"/> UPHC - Polyclinic <input type="checkbox"/> DH <input checked="" type="checkbox"/> Medical College Hospital Other, specify: Puducherry
Teleconsultation platforms used	e-Sanjeevani.in
Teleconsultation schedule prepared and displayed	Yes
Common conditions for teleconsultation	General Medicine
Total teleconsultations in the last 01 month	One

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

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

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

L. Finance			
Remuneration & Incentives	Cadre	Timely disbursement	Complete disbursement as entitled
	UAAM Team (Salary)	Yes	Yes
	UAAM Team (Team Based Incentives)	Yes	Yes
Facility funds	Fund Source	Timely disbursement	Details
	Untied	Yes	

	Other Sources	Yes	
United Fund utilized during last year (Fund received as per the requirement as there is no CHO appointment in the facility)	Funds received (Amount in Rs.) Rs 5000	Expenditure (Amount in Rs.) Rs 5000	% Expenditure 100% utilized
Is untied fund being spent on following activities?	<p>Regular payment of Bills: Yes</p> <p>If yes, specify;</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Electricity <input checked="" type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Internet <p>Regular purchase: Yes</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicines <input checked="" type="checkbox"/> Reagents/Consumables <input checked="" type="checkbox"/> Equipment <p>Payment of support/cleaning Staff: No</p>		
Status of JSY Payments	<p>Payment done till: December</p> <p>Average Delay in Payment (days): No</p> <p>Reasons for delay, if any</p>		
Availability of JSSK entitlements (No deliveries taking place in UHWC)	<p>No</p> <p>If yes, whether all entitlements being provided</p> <ul style="list-style-type: none"> <input type="checkbox"/> Free delivery services (Normal delivery/ C-section) <input type="checkbox"/> Free diet <input type="checkbox"/> Free drugs and consumables <input type="checkbox"/> Free diagnostics <input type="checkbox"/> Free blood services <input type="checkbox"/> Free referral transport (home to facility) <input type="checkbox"/> Free referral transport (drop back from facility to home) <input type="checkbox"/> No user charges 		

M. Service delivery Output Indicators (Data of previous quarter)		
1	Total number of outpatient department visits	921
2	No. of PW registered for ANC	12
3	No. of PW received 4 or more ANC check-ups	12
4	Total number of institutional deliveries	0
5	Total no. of High-Risk Pregnancies received treatment against no. of high-Risk pregnancies identified	-
6	Total no. of children under 24 months of age who received the first dose of the Pentavalent vaccine	4
7	Total no. of children under 24 months of age who received the third dose of the Pentavalent vaccine	1

8	Number of cases referred from UAAM to UPHC AAM /Polyclinic/Other higher facilities during last month			-
9	Number of cases referred back to UAAM from UPHC AAM or higher centre for follow-up during last 3 months			-
8	TB patients undergoing treatment			
	Indicators			Current year
	No. of presumptive TB patients identified			9
	No. of TB patients diagnosed out of the presumptive patients referred			2
9	Community Based Screening for NCDs			
	% of target population administered CBAC			-
	% of target population with score below 4			-
	% of target population with score 4 and above			-
10	NCDs (No. of individuals in Last 6 Months)	Screened	Treated	Follow-up
	Hypertension	392	6	
	Diabetes	179	3	
	NCDs (No. of individuals in Last 6 Months)	Screened	Referred	Follow-up
	Oral Cancer*	-	-	-
	Breast Cancer*	-	-	-
	Cervical Cancer*	-	-	-

N. Implementation of NQAS Quality Assurance and Patient Safety	
1	Has there been an internal assessment for NQAS? No
2	Is the facility certified at the State-level for NQAS? No
3	Is the facility certified at the National level for NQAS? No
4	Is the facility participating in Kayakalp? No
5	If yes, Achievement under Kayakalp (Winner, recommendation) and score No
6	Patient Rights <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Display of citizen's charter <input checked="" type="checkbox"/> Display of IEC materials <input checked="" type="checkbox"/> Provision for ensuring privacy <input checked="" type="checkbox"/> Respectful Maternity Care being practiced <input checked="" type="checkbox"/> All services provided free of cost <input checked="" type="checkbox"/> Confidentiality assured for patient information
7	Support Services <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Maintenance and upkeep of facility ensured <input checked="" type="checkbox"/> Maintenance of clinical records <input checked="" type="checkbox"/> Data management using digital technology

		<input checked="" type="checkbox"/> Systematic inventory management (medicines/consumables)
8	Infection control	<input checked="" type="checkbox"/> Adherence to biomedical waste management <input checked="" type="checkbox"/> Adherence to SOPs for disinfection / sterilization of equipment <input checked="" type="checkbox"/> Adherence to SOPs for personal protection
9	Clinical care	<input checked="" type="checkbox"/> Adherence to SOPs for clinical management of conditions <input checked="" type="checkbox"/> Ensuring care continuity through bilateral referral mechanism
10	Quality Management Systems	<input checked="" type="checkbox"/> Provision for collecting patient feedback <input checked="" type="checkbox"/> Availability of Grievance Redressal Mechanisms <input checked="" type="checkbox"/> Periodic reviews undertaken for quality assurance

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

Remarks & Observations
<ul style="list-style-type: none"> Physical Infrastructure The healthcare facility operates in a government-owned building with external branding and signage. It has basic infrastructure, including an OPD room, a waiting area, furniture, a pharmacy, and a wellness activity space. However, several deficiencies exist, such as the absence of day-care beds, a laboratory, separate male and female toilets, running water, elderly-friendly facilities, power backup, and staff quarters. In terms of hygiene and waste management, the facility has a functional biomedical waste disposal system with color-coded bins but lacks a designated handwashing corner. Information, Education & Communication (IEC) Materials The facility has signages in place along with IEC materials on key health services and water sanitation posters. However, it lacks IEC displays for biomedical waste management, grievance redressal, referral transport, and the citizen charter. Human Resource Availability The facility has three Accredited Social Health Activists (ASHAs), and two Auxiliary Nurse Midwives (ANMs). The facility lacks in CHO, staff nurse, male Multi-Purpose Worker (MPW), sanitary staff, and security personnel. Training Details The ANMs and ASHAs are trained in maternal health, communicable diseases, family planning, and non-communicable diseases (NCDs). Availability of Services The facility provides services for maternal and child health, family planning, vector-borne diseases, tuberculosis, leprosy, common non-communicable diseases (NCDs), and oral cancer screening. There is no screening available for breast or cervical cancer. Expanded Service Packages

The facility offers services in ophthalmic care, ENT, oral health, and elderly care. The facility lacks in mental health services and emergency medical care.

- **Availability of Essential Medicines and Diagnostic Services**

The facility is stocked with 35 out of the 105 essential medicines. There are shortages of antidotes, anti-filarial, anti-leprosy, and anti-malarial drugs. The facility offers Hb and RBS tests but lacks an in-house laboratory, X-ray services, and a sample transport mechanism.

- **IT & Teleconsultation**

The facility provides e-Sanjeevani teleconsultation services in coordination with a medical college hospital; however, only one teleconsultation was conducted in the last month.

- **Wellness Activities, Governance, Reporting & Finance**

The facility actively conducts wellness sessions and celebrates health days. There is no Jan Arogya Samiti (JAS), and regular meetings or records are not maintained. Reporting is consistently done on various health portals, and the Untied fund has been fully utilized.

Annexure- List of essential equipment

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