

**Report of Dr. Mohd. Shafi Koka, State Nodal Officer, NHM J&K and Dr. Arshad Nazir, Assistant Programme Manager, Maternal Health; SHS, NHM J&K regarding visit to District Budgam w.e.f. 9<sup>th</sup> – 12<sup>th</sup> April, 2016.**

As per the directions of Mission Director, NHM J&K vide order No: 15 of 2016 dated 05/04/2016, a surprise visit was conducted to look into the complaint registered by the residents of Magam through Mr. Bashir Ahmad Mir S/O Ghulam Ahmad Mir R/O Village Agri Kalan, Block Magam, District Budgam regarding misappropriation of JSSK funds by Block Medical Officer Magam and visit to other health institutions of the district.

Detailed observations are as follows:-

**1. CHC Magam:**

The Team paid a surprise visit to CHC Magam on **9<sup>th</sup> April, 2016** and had a meeting with Block Medical Officer, Magam wherein BMO was apprised about the purpose of visit who assured of full cooperation to the visiting team. Both the officials of Block Programme Management Unit i.e.; BMEO & BAM were not present in the CHC on that day. BMEO had gone to district HQ for attending training on HMIS/ MCTS while BAM was on leave due to some medical emergency. As a result books of accounts could not be checked. Block Medical Officer was requested to call the BAM & BMEO to the CHC on next working day i.e; 11<sup>th</sup> April, 2016 so that all the physical & financial records of NHM are checked and verified.

Team visited Labour Room and other areas of the facility. CHC has been shifted to new building after September 2014 floods in which the old hospital building got damaged. Staff Nurse incharge of Labour Room & JSSK was on night off and had kept all the physical record related to JSSK under her lock.

Records of Delivery Register, LR register, OT register were checked by the team and matched with case sheets of delivery patients and HMIS reports. Record keeping was found poor and overwritings were made in the delivery register at many places which raised doubt. In this regard, few beneficiaries were called telephonically on the spot for verification of services received at hospital under JSSK. All the beneficiaries confirmed that they have delivered in the CHC Magam and received all the benefits under JSSK & JSY as well.

Labour room at CHC Magam is well equipped with LR protocols displayed in it. But emergency drug kit was not available and expired medicine viz. Inj. Labergin (Methergin) having batch no. ELMI-002 with expiry date 03/2016 was found in drug tray inside Labour room, which was viewed seriously by the visiting team and matter was brought into the notice of BMO. Practice of filling in partographs is also not being done.

OT is also established and C-Sections are conducted on regular basis.

Team tried to meet the complainant namely Bashir Ahmad Mir S/O Ghulam Ahmad Mir R/O Agri Kalan, Magam, but could not find him and requested Block Medical Officer to call Sarpanch of the said village to the CHC on 11<sup>th</sup> April, 2016 so that credentials of complainant are verified. Team also interacted with various people visiting CHC from local areas and found them satisfied with the attitude & working of concerned BMO.

Team again visited CHC Magam on 11<sup>th</sup> April, 2016 and had a meeting with Sarpanch of the said village along with one local leader. Sarpanch of the village denied about the existence of complainant hailing from his village.

On the same day physical & financial records of JSSK were checked and it was found that:

1. Physical reports vary between delivery register, HMIS & JSSK physical report.
2. It was observed that deliveries of block Magam who deliver at JVC Bemina or LD Hospital are being shown as deliveries of CHC Magam under HMIS which was bought into the notice of BMO Magam. Since HMIS is a facility based reporting system and only those services/ work done is to uploaded on HMIS which have been provided/ achieved at the facility.

By following present practice, there is duplication of data by CHC Magam as the same is being uploaded by JVC and LD Hospital as well.

Financial records were complete with proper codal formalities and the financial records were matching with actual achievements of the facility. However, diet under JSSK is not provided as per the local demands of patients. Under JSSK milk, bread & eggs are provided to the beneficiaries as diet, which is in contravention to the diet advised by the Gynaecologist.

ASHA Greh is also established and ASHAs are paid due incentives on regular basis.

## **2. CHC Chadoora:**

Team visited CHC Chadoora on 12<sup>th</sup> April, 2016.

### **Infrastructure & Equipments:**

- CHC Chadoora is working as an FRU. New building of CHC is under construction.
- MCH area is currently functioning in separate building along with OT established in it. Labour room protocols are well displayed. NBCC is also established in the labour room.
- Blood Bank is also established at the CHC and is functional. One Medical Officer & One Lab Technician is trained in functioning of Blood Bank.

(i) **NBSU** has two radiant warmers and one phototherapy unit and is maintained well but underutilized.

(ii) **JSSK:**

Procurement of drugs is as per approved rates. List of medicines available under JSSK is displayed in the facility. Under diet, hot meals are not provided. Bread, eggs & milk is provided to beneficiaries under JSSK, which again is not advised by the Gynaecologist.

The rate contract for diet has not been approved for the FY 2015-16 & 2016-17 and diet is purchased on the rate contract approved for FY 2014-15.

Diet Register/ Drug Register and Referral Transport register was maintained but needs improvement and was brought into the notice of dealing assistant and BMO.

(iii) **JSY:** Payment is given to beneficiaries through DBT & A/C payee cheque only. List of JSY beneficiaries is not being displayed in the hospital and there was no pending liability under JSY.

(iv) **Immunization:** Cold chain is well maintained. There are two ILRs and one DF available as cold chain equipment. Sufficient quantity of vaccine was available in the CHC. Vaccines were stored as per the guidelines.

IEC material about various NHM components was displayed in the hospital premises including JSY & JSSK, Immunization schedule, Save Girl Child, etc.

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