Four report of Dr. Asmat Jan, Programme Manager, Dr. Younis Mushtaq, Associate Programme Manager, SHS, NRHM & Dr Rajender Singh, District Monitor Central Kashmir.

In compliance to order No. 95 JK/ NHM of 2014 dated 21-05-2014, the team visited various health institutions of District Ganderbal w.e.f 2<sup>nd</sup>- 4<sup>th</sup> June 2014. Institution wise observations of the team are as under:

## **District Hospital Ganderbal:**

- The hospital is functioning in old hospital building and has adequate IEC material on various schemes under NRHM displayed in and around the compound.
- JSSK is implemented in the hospital and free services as envisaged under the scheme are provided to the beneficiaries.
- Labour room is well maintained, has fully equipped Newborn Care Corner and all the essential drugs other than Inj. Magnesium Sulphate were available.
- AFHC Clinic (previously known as ARSH) is non functional as both the Counsellor as well as Data Entry Operator are not in position since last 3 months.

### • RBSK:

DEIC is being setup in New Hospital Building, however stop gap arrangement has been setup in old hospital building were referrals from Mobile Health Teams(MHTs) are being managed. Dental Section has been strengthened and all the referrals from MHTs for managing dental conditions are being taken care of. Post of DEIC Manager & Paediatrician under RBSK is vacant.

Registers & formats for screenings of Children by Mobile Health Teams were available, however the registers for schools were not separately printed by the District Health Society.

Tendering of vehicles for RBSK MHTs have not been done in effective manner, as per the contract every month the vehicles are being changed by the contractor causing difficulty in making the drivers accountable. RBSK Kits for MHTs have been distributed to the teams.

• JSY: Payment to beneficiaries as well as ASHAs are being made through e transfer.





- MCTS registers and cold chain was maintained.
- ANC cases referred from subcentres were carrying notebooks instead of MCP cards, no MCP cards were provided to them in the subcentres.

### PHC Kachan:

- The PHC is designated functional delivery point, however only two deliveries have taken place in the institution since April 2014. The facility has fully equipped labour room with electronic labour table yet the services are underutilized
- MBBS doctor under NRHM has been attached at District Hospital Ganderbal since last six months.
- AYUSH doctors have been put on night duties to manage the patients.
- JSSK is implemented and local diet to beneficiaries is being provided through ASHA.
- Record pertaining to NRHM was not available as the concerned Sr. Assistant namely Zareena Akhter was on leave.
- MCTS registers and cold chain was maintained.
- Adequate IEC material was available.
- Panchkarma Unit was non functional.

### PHC Tulmulla:

- PHC is a designated 24X7 PHC, yet no delivery has been conducted in the institution since last one year.
- MBBS Doctor under NRHM, Dr. Sadaf has been attached at DH Ganderbal since 28-05-2014.
- Dr Nargis Nazir (MO ISM under NRHM) is on unauthorized leave since 1<sup>st</sup> March 2014, yet no action has been initiated against the doctor.
- JSY & JSSK funds have not been provided to the institution.
- Cash books have not been certified/ signed by the concurrent auditor
- Separate RKS audit have not been conducted till date.
- MCTS registers and cold chain was maintained.

### PHC Lar:

• PHC is a functional delivery point and around 13 deliveries are taking place in the institution.



- Labour Room is mismanaged and dirty, neonatal resuscitation kit was not available in NBCC.
- Labour room drug tray was not available, medicine were kept in cupboard.
- Power backup is not available.
- RBSK: Both the MHTs were found in the PHC compiling the work done, as
  per their statement they have been asked to attend OPD on Wednesdays &
  Saturdays by the BMO. Most of the equipments in RBSK MHT Kit were
  found packed and unused. Vehicles hired under RBSK were found in PHC
  compound and no log book was maintained.
- JSSK: Anemic pregnant lady was admit at the time of visit and was being given Iron Sucrose Injection, on interaction she admitted that no out of pocket expenditure has been incurred during her stay in the hospital.
- BMO along with BPMU unit had gone to attend the meeting at CMO's office so the record could not be seen by the team.

### **CMO Office Ganderbal:**

- The team attended the meeting of CMO, Medical Superintendent & BMO's and briefed the participants about the findings of the visit, it was ensured by CMO that corrective measures shall be taken on the observations.
- It was pointed out in the meeting that the HBNC Kits have been received by the district but is short of Weighing Scale and thermometer hence could not be distributed to the ASHA's.
- It was found during field visit that head wise funds are being released from district headquarters as a result of which in some of the heads no funds have been released and in other cases where the funds are already available more funds have been released resulting in non judicious allocation & utilization of funds.
- Districtlevel Committee for procurement of Drugs & Consumables under JSSK is not in place.
- Vacant Positions of Pharmacists & ANMs for MHTs have not filled till date in the district.
- Post of DPM is vacant since last 2 months and the post has not been advertised till date.



### PHC Wussan:

- PHC is a designated 24X7 PHC and on an average 7 to 10 deliveries are taking place in the institution.
- Labour room is well maintained and has fully equipped NBCC.
- Radiant warmer was placed in a separate room which was made to be shifted in labour room by the team and the staff was sensitized about the importance of NBCC in labour room.
- ILR was kept in Labour room and the staff was asked to shift the ILR in immunization section.
- JSSK is implemented.
- Records along with bills vouchers were maintained.
- Cash books have not been certified/ signed by the concurrent auditor.
- Separate RKS audit have not been conducted till date.

### CHC Kangan:

- Being Trauma hospital, no signage boards were displayed outside the hospital/main road.
- CHC is conducting approximately 40 deliveries per month.
- Maternity wing is in old building, Cleanliness was not maintained in the labour room and no water supply was available.
- Newborn Stabilization Unit is in separate wing adjacent to operation theatre.
   9 LSCS had been conducted in the month of May 2014. Four radiant warmers are available however the incharge Staff Nurse is not trained in F-IMNCI.
- Record was maintained.
- JSY Payments to beneficiaries as well as ASHA's is being made through e transfer.
- JSSK is implemented however one of the patients had purchased medicine from the market even though the drugs were available in the hospital. Staff was asked to sensitise the beneficiaries about the scheme so that in future such cases must be avoided.
- MCTS registers & Cold chain was maintained.



KBSK team of Block Kangan were conducting screening of Children in Anganwadi centres of Wussan area and surprise visit was made by the team to the Anganwadi Centre. Since morning the team had visited 3 Anganwadi Centres. The team was in proper uniform had all the logistics available and were screening the children in the Centre as per the guidelines of the scheme.

### PHC Gund:

- PHC is a functional delivery point and is conducting more than 25 deliveries per month.
- Labour room is maintained and is equipped with NBCC along with resuscitation kit.
- JSSK is implemented and entitlements as per the scheme are bing provided to beneficiaries. Old JSSK IEC was displayed in the institution, the Staff was asked to replace the same.
- JSY payments to beneficiaries are being made through Account Payee Cheques.
- MCP cards were not available in the immunization section; old immunization cards were being used. MCTS register and cold chain was maintained.
- All the staff under NRHM is inposition.

Another RBSK MHT of block Kangan was intercepted at 5:00 pm on 3<sup>rd</sup> June near PHC Gund. The MHT was coming back from Boys Middle School Nilgrath and the team was in proper uniform and had proper logistics and formats. Their record was checked and team was satisfied with their work.

### PHC Wakura:

- PHC is conducting around 5 deliveries per month.
- Labour room is well maintained & clean. Drug tray was maintained and all the essential drugs were available.
- Radiant warmer has been kept in a separate room, Incharge Medical Officer was asked to place the radiant warmer in the labour room for its effective utilization.



- JSSK is implemented and entitlements as per the scheme are bing provided to beneficiaries.
- Purchase of drugs & consumables under JSSK is being made on quotation basis as no district level purchase committee is in place.
- Payments for referral transport under JSSK are being made to ambulance drivers.
- JSY payments to beneficiaries are being made through e transfer.
- MCTS register & cold chain is maintained.
- AYUSH OPD was closed as the doctor has been placed on night duties and was on Night Off.
- Expenditure of Rs 19000/- had been incurred on purchase of equipments without approval of RKS committee.

### PHC Batwina:

- PHC is housed in double story building, but no provision of labour room has been kept in the building.
- Only OPD, Immunization & Family Planning services are being provided in the PHC.
- The institution was run by one AYUSH doctor & one Staff Nurse at the time of visit.
- Record pertaining to NRHM was not available as the concerned official was on leave.

### Sub Centre Zazna:

- No board of Subcentre was displayed on the building.
- No deliveries are being conducted in the centre.
- Only one BHW was present in the centre, FMPHW under NRHM was on field visit for conducting population survey as per the statement of BHW.
- Vitamin A & ORS was available in the subcentre.
- IFA syrup & Zinc tablets were not available.
- MCP cards were not available in the subcentre.



# Sub Centre Kurhama:

- The subcentre is housed in a newly constructed Govt. Building.
- No deliveries are being conducted in the centre.
- No board of Subcentre was displayed on the building.
- Only one FMPHW under NRHM present in the building.
- Vitamin A & ORS was available in the subcentre.
- IFA syrup & Zinc tablets were not available.
- MCP cards were not available in the subcentre.
- The subcentre has no Electric & Water Supply.

Submitted for your kind perusal.

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