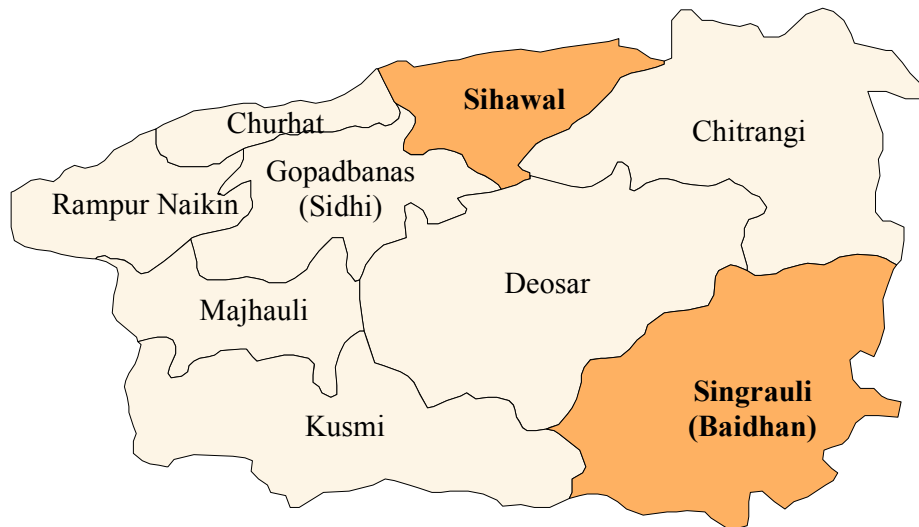


# Rapid Appraisal of National Rural Health Mission

District: Sidhi  
(Madhya Pradesh)



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July 2009

(Prof. Santosh Shukla)  
Director  
PRC, Sagar

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## Chapter 1

### Introduction and State Profile

#### 1. Background for the Rapid Appraisal of NRHM

The Government of India, with the objective of meeting the basic requirement of Health for all, has launched the National Rural Health Mission (NRHM) in April 2005 to carry out necessary architectural correction in the basic health care delivery system. The Mission aims at provision of comprehensive and integrated primary healthcare to the people, especially to the rural poor, women and children. It adopts a synergic approach by relating Health to determinants of good health viz nutrition, sanitation, hygiene and safe drinking water. It also aims at mainstreaming the Indian systems of medicine to facilitate health care.

The Plan of Action includes increasing public expenditure on health, reducing regional imbalance in health infrastructure, pooling resources, integration of organizational structures, optimization of health manpower, decentralization and district management of health programmes, community participation and ownership of assets, induction of management and financial personnel into district health system, and operationalising Community Health Centres, Primary Health Centres and Sub Centres into functional hospitals meeting Indian Public Health Standards.

The Mission lists a set of core strategies to meet its goals like decentralized village and district level health planning and management, appointment of female Accredited Social Health Activists (ASHAs) to facilitate access to health services. The Mission attempts a major shift in the governance of public health by giving leadership to Panchayati Raj Institutions in matters related to health at district and sub-district levels. Another key strategy of the Mission is decentralization of programmes for district level management of health. Under the scheme, all existing societies for health and family welfare programmes, Reproductive and Child Health and National Programmes for TB, Malaria, Blindness, Filariasis, Kala Azar, Iodine Deficiency and Integrated Disease Surveillance, shall integrate into a unified District Health Mission. Funding for all these programmes will be

eventually funnelled into the District Health Mission, which will be empowered to formulate integrated health plan of the district. One of the core strategies of the Mission is to empower local governments to manage, control and be accountable for public health services at various levels. The Village Health and Sanitation Committee, the Standing Committee of the Gram Panchayat, will provide oversight of Mission's all activities at the village level and be responsible for developing the Village Health Plan with the support of the ANM, ASHA, Anganwadi Worker and Self-Help Groups. Block level Panchayat Samitis will co-ordinate the work of the Gram Panchayats in their jurisdiction and will serve as link to the District Health Mission, which will be led by Zilla Parishad and will control, guide and manage all public health institutions in the district. States will be encouraged to devolve greater powers and funds to Panchayati Raj Institutions.

### **Rapid Appraisal of NRHM**

In light of the above background and also the fact as the Mission is now in its fourth year of existence, the Ministry of Health and Family Welfare, Government of India has undertaken this Rapid Appraisal of the Mission at the state, district and local level through its 18 Population Research Centres (PRC) in 20 states of India. Given the very wide scope of the Mission and diverse nature of its activities, the PRC study on rapid appraisal is restricted to selected core components that directly address the health and family welfare needs of the people. It is therefore this rapid appraisal is restricted to the following four core components of the Mission:

- (A) Utilization of Untied Funds at SC, PHC and CHCs
- (B) Janani Suraksha Yojana (JSY)
- (C) Facility up-gradation under the NRHM
- (D) Assessment of health and family welfare situation at the village level

## **2. Objectives of the Rapid Appraisal of NRHM**

### *(A) Utilization of Untied Funds*

NRHM has drawn a plan of action at all levels of healthcare to build up sustainable healthcare delivery system, where all citizens have access to affordable and appropriate

quality healthcare. To achieve its goals, NRHM in its strategies, set up a platform for involving the Panchayati Raj Institutions (PRIs) in primary health programmes and infrastructure. The Mission also envisages the following roles for PRIs: (i) States are required to commit for devolution of funds, functionaries and programmes for health to PRIs; (ii) At grassroots level, Village Health and Sanitation Committee (VHSC) has been formed to decentralize the planning and monitoring of various programmes; and (iii) For strengthening the health centres, all the health facilities are provided with Untied Funds. Untied Funds can be used only for the common good and not for the individual needs, except in the case of referral and transport in emergency situations. Each Sub Centre will have an Untied Fund @ Rs.10,000 per annum. Like wise, each PHC and CHC is provided with Untied Funds of Rs. 25,000 and Rs.50,000 respectively for local health action. At Sub Centre level, the fund will be deposited in a joint account of the ANM and the woman Sarpanch or the woman member of Panchayat, but the account will be operated by ANM in consultation with Village Health and Sanitation Committee and Multipurpose Health Workers. At the PHC and CHC level, Untied Funds will be kept in the bank account of the concerned Rogi Kalyan Samiti (RKS)/Hospital Management Committee. The funds will be spent and monitored by RKS. This rapid appraisal study attempts to analyze the utilization of Untied Funds at Sub Centre and PHC level. It will also help to know how actively PRIs/RKS are involved with the utilization of Untied Funds in right perspective. The specific objectives of the rapid appraisal under the utilisation of Untied Funds are:

1. To examine the utilization of Untied Funds under different activities at Sub Centre, PHC and CHC level.
2. To highlight the problems faced by CHC and PHC In-charge and ANMs in receiving and utilization of funds.
3. To seek the opinions of CHC and PHC In-charge and ANMs regarding the sufficiency of funds.
4. To study the role of Village Health Committee particularly at Sub Centre level and Rogi Kalyan Samiti in the utilization of funds at CHC and PHC level.

*(B) Janani Suraksha Yojana (JSY)*

Janani Suraksha Yojana (JSY), an integral component for safe motherhood under NRHM, was launched in 2005 with the objective of reducing maternal and neo-natal mortality. The scheme aims to promote institutional deliveries amongst poor pregnant women in all the states and Union Territories (UTs) of the country with special focus on low performing states (LPS). It is a 100 percent centrally sponsored scheme and links cash assistance with delivery and post-delivery care. In availing institutional delivery services, the client is usually escorted, would be requiring transport to reach the institution and in case of complications, referral services would be required. The scheme has considered all these elements and has made provision for transport including referral and escort and at the same time invested in improving public health institutions and services through the Reproductive and Child Health (RCH) Programme interventions. This apart, states have been given flexibility to evolve public-private partnership (PPP) mechanism and accredit private health institutions for providing institutional delivery services. The special dispensation for Low Performing States (LPS) in both rural and urban areas has been made and linked to the ASHA intervention. The LPS are those that have low institutional delivery rates and include Uttar Pradesh, Uttaranchal, Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh, Assam, Rajasthan, Orissa, and Jammu and Kashmir. In the remaining states and UTs, categorized as High Performing States (HPS), similar provisions have been made wherein Anganwadi worker or traditional birth attendant or ASHA like activist could be engaged and associated with the JSY scheme. The JSY focuses on:

- (a) Maternal care through micro-planning of birth
- (b) Cash assistance to all eligible mothers for delivery care
- (c) Cash assistance for referral transport
- (d) Cash assistance to institutions for hiring specialists for Caesarean Section or for the management of Obstetric complications
- (e) Cash benefit to ASHA for facilitating institutional delivery

The specific objectives of the rapid appraisal under the JSY are:

1. To assess the role of ANM/ASHA in providing services to the beneficiaries of the JSY

2. To seek the opinions of ANMs/ASHAs regarding the sufficiency of funds and timely disbursement of funds.
3. To study the role of other health officials in the implementation of the scheme at district
4. To review engagement of private sector including accreditation and compensation
5. To highlight the problems faced by beneficiaries in receiving the services/funds
6. Analyze nature and scope of IEC interventions for raising awareness of JSY.

*(C) Facility Upgradation under NRHM*

For meeting the health needs of the rural masses, one of the key strategies of the NRHM is to strengthen all the health facilities by upgrading them with necessary infrastructure according to the type of facility (CHC, PHC, SC etc). The main aim is to strengthen hospital care for rural areas, provide specialized care to the community and also to improve the standard of quality of care in order to enhance the level of patient satisfaction. Thus, the rapid appraisal examines as to what extent the SC, PHCs and CHCs have been upgraded under NRHM. The objectives of the study under this component are:

1. To assess the availability and adequacy of infrastructure, furniture, equipment medicines/drugs and vehicle in the upgraded sub centres, PHCs and CHCs.
2. To examine the availability of manpower - medical and paramedical.
3. To assess the type of services and availability of facilities.
4. To assess the clients perception regarding quality of services through exit interviews.

*(D) Assessment of Health and Family Welfare Situation at the Village Level*

It has been envisaged under NRHM that indicators of health depend as much on drinking water, nutrition, sanitation, female literacy, women's empowerment as they do on functional health facilities. NRHM seeks to adopt a convergent approach for interventions under the umbrella of the district plan which seeks to integrate all the related initiatives at the village, block and district level. Wherever village committees have been effectively constituted for drinking water, sanitation, ICDS etc., NHRM attempts to move towards

one common Village Health Committee covering all these activities. Panchayati Raj Institutions are being fully involved in this convergent approach so that the gains of integrated action can be reflected in district plans. Under NRHM, household surveys through ASHA, AWW will target availability of drinking water, firewood, livelihood, sanitation and other issues in order to allow a framework for effective convergent action in the Village Health Plans. Hence, one of the important objectives of the rapid appraisal is to:

1. Assess the health and family welfare situation in the village in terms of availability of drinking water, sanitation, functional health facilities, quality of services provided, nutritional status, women's empowerment, maternal and child health, disease prevalence etc.

### **3. Methodology and Study Design**

The rapid appraisal covers all tiers of the public health care delivery system right from the village level up to the state level. For the sake of objectivity, the rapid appraisal exercise is organised broadly in terms of policy formulation, programming and implementation for each of the four components of the Mission listed above.

At the state level, the rapid appraisal exercise focuses primarily on policy formulation with respect to the above listed four components. At the district and community health centre level, the rapid appraisal exercise primarily focuses on programming necessary to translate policy into specific action while at the primary health centre, sub-health centre and village levels, the rapid appraisal exercise concentrates on the implementation aspects. A mix of quantitative and qualitative tools is used for the rapid appraisal. At the village level, a household survey is carried out to assess the health and family welfare situation as well as to assess the use of public health facilities by the community at large. At the institution level, the rapid appraisal is based on review and analysis of the available records of public health institutions and in-depth interviews with the policy makers, programme managers and service providers at different tiers.

Each of these Schedules is further divided into a number of separate Blocks capturing information on specific areas of interest. Information for one Schedule has been gathered

from a number of different individuals. In every Block, indication about the corresponding respondent / source of information is given.

**Table 1: The sampling design provided by the Ministry for the selection of health facilities / households / respondents for the rapid appraisal of NRHM**

| Sr. | Level of Study              | Total Numbers per district | Selection Criteria  | Alternate criteria                                       |
|-----|-----------------------------|----------------------------|---|--|
| 1.  | District Hospital           | 1                          | In States where the Male and Female DH are separate, schedule to be filled for both   | SDH or District HQ Hospital                              |
| 2.  | CHC                         | 2                          | One CHC to be the farthest from the district HQ<br>If the first CHC selected is an FRU then the second CHC could be any CHC; else the second CHC should preferably be an FRU, if available  | In case no CHC is available, the largest Block/Addl. PHC |
| 3.  | PHC                         | 4                          | 2 PHCs for each CHC<br>PHC to be vertically under selected CHC<br>Preferably one 24x7, if available   |  |
| 4.  | SC                          | 12                         | 3 SCs for each PHC<br>All to be vertically under selected PHC<br>One SC to be farthest from PHC   |  |
| 5.  | Household                   | 1200                       | 2 villages to be selected from catchment area of SC. (if there is one village under the selected Sub Centre, the same will be covered)<br>One village to be where Sub-centre is located; and second village that is farthest from the Sub-Centre<br>50 households per village to be randomly selected (total 100 households per SC) |  |
| 6.  | ASHA                        |                            | All ASHAs in the selected village to be selected for canvassing ASHA Schedule.  |  |
| 7.  | Gram Panchayats             |                            | Gram Panchayat (GP) Schedule to be canvassed to the member of GP (including Sarpanch) representing the selected village   |  |
| 8.  | Patients for Exit Interview |                            | Exit interview be canvassed for 5-10 IPD and OPD Patients at each of the facility including District Hospital, CHC and PHC.   |  |

**Table 2: Schedules canvassed for the study and survey period Schedule Survey Period**

| Schedule   | Survey Period            |
|--|--------------------------|
| Schedule (S) : State Schedule                            | July, 2009               |
| Schedule (D) : District Schedule Part A                  | January - February, 2009 |
| Schedule (D) : District Schedule Part B                  | January - February, 2009 |
| Schedule (C) : Community Health Centre Schedule          | January, 2009            |
| Schedule (P) : Primary Health Centre Schedule            | January, 2009            |
| Schedule (N) : Sub Centre /ANM Schedule                  | January, 2009            |
| Schedule (A) : ASHA Schedule                             | January, 2009            |
| Schedule (G) : Gram Panchayat Schedule                   | January, 2009            |
| Schedule (H) : Household Schedule                        | January, 2009            |
| Schedule (EI) : Exit Interview Schedule for IPD Patients | January - February, 2009 |
| Schedule (EI) : Exit Interview Schedule for OPD Patients | January - February, 2009 |

Health Facilities and the Villages Covered for the Study in Sidhi District District Hospital, Sidhi was covered for the study. Two CHCs, 4 PHCs, 12 Sub Centres and 24 villages were covered in the district as per the sampling design mentioned in Table 1. The facilities and the villages covered in the district are given below in Table 3.

**Table 3: List of selected District Hospital, CHCs, PHCs, SCs and Villages for the survey in Sidhi District as per the sample design**

| Block           | PHC      | Sub-Centre   | Village   |                  |                         |
|-----------------|----------|--------------|-----------|------------------|-------------------------|
| CHC,<br>Baidhan | Mada     | 1. Rajmilan  | Rajmilan  | Kubri*           | Kulhuie*,<br>Pratappur* |
|                 |          | 2. Karsualal | Karsualal | Khairahi*        |                         |
|                 |          | 3. Makrohar  | Makrohar  | Sarjharai*       | Simariya*               |
|                 | Khutar   | 1. Tiyara    | Tiyara    | Pipra*           | Siddhi kalan*           |
|                 |          | 2. Jarha     | Jarha     | Situl Khurd*     | Badi Situl*             |
|                 |          | 3. Bihara    | Bihara    | Pipra Jhanpi*    |                         |
| CHC,<br>Sihawal | Aamiliya | 1. Rajgarh   | Rajgarh   | Pamariya*        |                         |
|                 |          | 2. Hinoti    | Hinoti    | Lilwar*          |                         |
|                 |          | 3. Baghor    | Baghor    | Byoharkhand<br>* |                         |
|                 | Amarpur  | 1. Khori     | Khori     | Modika*          | Hatwa*                  |
|                 |          | 2. Sarada    | Sarada    | Jingajhar*       | Patehara Kothar*        |
|                 |          | 3. Sapahi    | Sapahi    | Kusiyari*        | Bhitari*                |

*Village names with (\*) denotes Remote village under designated sub-centre. In case of small SC village, additional adjoining village is also covered to complete 50 household in sub-centre village.*

For household survey, two villages were selected from each selected Sub Centre area. Thus, 32 villages were selected for the household survey. Fifty households were selected from each of the selected village category i.e. sub-centre village and remote village(s) by following the systematic circular random sampling procedure. For selecting the households, the total number of households in a village was divided by 50 to find out the selection interval. After that, the first household situated at the north-west corner of the village was randomly selected and subsequently every  $r^{\text{th}}$  household was selected moving in an 'anti-clock wise' direction till 50 households were selected. In some villages, household list prepared by the panchayat formed the sample frame for selection of households since households were very scattered. In villages like Tiyara, Rajmilan, Bihara team had to move nearly 10-12 kms. to cover the whole village.

#### 4. Field Work

To carry out the study in the district, 22 experienced ad hoc male and female investigators were recruited. These selected investigators have earlier worked for the DLHS-3 in Madhya Pradesh and some of them have also worked in PRC projects in the past and were familiar with the household survey methods. Keeping into the vastness of the study, a selected group of investigators were also trained for interviewing ASHA, Gram panchayat and collection of secondary data at various facilities. A thirteen days training programme was organised at PRC, Sagar. After successful completion of training, investigators were selected for survey work based on their performance and ability to comprehend with the tasks assigned. The fieldwork for the household survey was carried out during January - February 2009. These 22 investigators were divided into 2 teams. For each team one field co-ordinator and two field-supervisors were selected amongst them. Whole field work was monitored by one PRC staff. Director, PRC also visited the fields in each block to supervise the activity and particularly discussed various issues with district level officials. All the household interviews and exit interviews were carried out by the investigators and the Facility, Gram Panchayat and ASHA questionnaires were administered by the PRC staff. During the entire duration of the fieldwork, PRC staff were with the field teams and continuously monitored the fieldwork. It took 23 days to complete the field work in Sidhi district in all aspects.

## 5. Chapter Scheme

The present chapter provides (a) the background for the rapid appraisal of NRHM, (b) methodology and sampling design for the study, and (c) the state level status of health infrastructure, formation of RKS, performance under the JSY, and financial mechanism including transfer of Untied Funds based on the State Schedule. The Chapter two has three parts. The Part-I presents the current status of NRHM interventions (health infrastructure, facilities available for delivery, human resources, RKS, JSY and financial mechanisms) in Sidhi district. The Part-II provides the infrastructural facilities and human resources available in the district hospital. The Part-III presents the key findings of the study. The third and fourth chapters presents the information on: framework and structure related issues; infrastructure status; human resources; availability of services, diagnostic facilities, equipments and drugs; and service outcome statistics for the selected CHCs and PHCs in the district.

The fifth chapter presents the findings based on the Sub-Centre/ANM schedule. Specifically it presents the information on population coverage, human resources, infrastructure status, availability of equipments and drugs, skills and practices of ANM, record maintenance, functioning of JSY scheme, and utilization of Untied grants. The sixth chapter presents the following information about the Gram Panchayat: population, households and villages covered; IEC activities; functioning of VHSC, involvement in ASHA programme and JSY scheme; and awareness about NRHM at Gram Panchayat level. The seventh chapter explains the status of the ASHA scheduled canvassed in the district. Chapter eight presents findings of the household survey. The findings are presented for background characteristics of the household, amenities available to the household, awareness of ASHA programme and JSY Scheme, and feedback from the household about the kind of services availed from a public health facility, quality of care provided and level of satisfaction from the services provided. Chapter 10 presents the findings of the exit interview of the IPD and OPD patients about the quality of services received in the district hospital, CHC and PHC.

## 6. Status of NRHM interventions at the State Level (based on the State Schedule)

This section presents the information based on the State Schedule collected from the State NRHM Mission Unit. The information is presented for the state level status of health infrastructure, formation of RKS, performance under the JSY, and financial mechanism including transfer of Untied Funds.

Madhya Pradesh with a population of 60.3 million in 2001 is the sixth most populous state of India. As per 2001 census, 26.5 percent of the total population of the state was living in urban areas and the remaining is rural. There were 45 districts in the Madhya Pradesh in 2001 and it has since been increased to 50 in the year 2009. The rural population is residing in its 52,117 villages. Twenty percent of Madhya Pradesh's population belonged to scheduled castes and fifteen percent belonged to schedule tribes as per 2001 census. Health Infrastructure (as on June 30, 2008) in Madhya Pradesh has been poorly networked under the health care services delivery system. The state has a total of 8,659 SCs, 1,155 PHCs, 333 CHCs, 56 Civil Hospitals and 50 district hospitals to implement its public health programme at various levels. NRHM is implemented through these health facilities. Out of the 1,155 PHCs, 267 (23 percent) are designated as 24\*7 or BEmOC PHCs.

At the state level, information regarding infrastructure, RKS, performance under JSY and financial mechanism are sought and information on these aspect is awaited.

## Chapter 2

### District Profile and Key Findings of the Study

#### 1. District Schedule – Part A

Population: As per 2001 census, the total population of the Sidhi district was 1.83 million and constitutes three percent of the population of the state. Out of these, 1.57 million (86 percent) were residing in rural areas and 0.26 million (14 percent) were residing in urban areas. Out of the total population of the district, 11.9 percent belong to Scheduled Caste and 30 percent belong to Scheduled Tribe. The district has not worked out any estimates of population as on March 2008. The state also has not provide any district level estimate for the current year. It is observed that most of the health service related targets for the health staffs are set on the census based population figures and arithmetic increments assumed by the state. The district programme management unit (DPMU) did not have any idea about the projected population of the district or population estimates for the intercensal period.

Infrastructure: The Sidhi district has limited health infrastructure in public or private for general health care or maternal and child health care. The district has a total of 287 SCs, 41 PHCs, 10 CHCs, 1 District Hospital to implement the public health programme at various levels. Apart from these, 72 AYUSH facilities in the form of dispensaries and hospitals for Ayurvedic and Homeopathic treatment located at different level. As per the district health action plan only 4 PHCs (10 percent) are designated as 24x7 PHCs. The district hospital is the only designated FRU for the district. There are no details available about the infrastructure upgradation in the district at various level. Some of the existing infrastructure at district hospital and CHCs has been provided with additional facilities like Operation Theater, additional wards, Nutrition and Rehabilitation Centres (NRC) etc. District hospital has started its own blood-bank only in the month of December 2008. There were no details available with the DPMU regarding the IPHS survey in the district and as such none of health facility has been upgraded as per the IPHS standards in the district. The district has 20 private health care centres; 13 of them are private hospitals with 30 or more beds and remaining are nursing homes with less than 30 beds.

Human Resources: It is observed that district has very limited human resources availability. Out of the total posts sanctioned for medical officer only 11 (30 percent) are filled. Details about the contractual in-position is not available with the DPMU. However, among para-medical staffs, out of the 92 posts sanctioned for staff nurse, 68 (74 percent) are in position and with majority of them as regular recruits. Out of 389 sanctioned posts of ANM, 294 are in-position including 36 contractual recruitments.

Rogi Kalyan Samitis: The RKS is constituted in all the functioning health facilities (DH, CHC, & PHC) of the district and all of them are registered. This indicates the district's initiatives and commitment towards the implementation of the NRHM.

PPP initiatives: The district has yet to initiate strategies under PPP for providing health care services. It is observed that district also has a number of PSUs with their own health care centres, particularly in Biadhan block. Although, the state government has envisaged PPP for providing better institutional delivery facility under Janani Sahayogi Yojana by accrediting private nursing homes, there is no such institution exist in the district so far.

Performance under the JSY: At first instance, there is no clear guideline for implementation of JSY under NRHM in the state. The only criteria is, institutional delivery for providing JSY benefit in the form of cash incentive to the pregnant women. It is because of this lacuna, that detailed information about the registered JSY women is not available at any level. To assess the performance of the JSY by caste and APL/BPL categories in public and private health facilities, the required data are not maintained by the District Programme Management Unit (DPMU) as per the District Schedule format given by the Ministry. The DPMU provided with the total institutional delivery figure and has no information regarding the break-up as per the schedule.

Financial Mechanisms: The post of district accounts manager is lying vacant in the DPMU. There is no information provided regarding the financial mechanism. The district programme manager however, provided that district has prepared District Health Action Plan (DHAP) for the current year i.e. 2008-09 and it has been approved by the district society. Funds are being allocated to the districts through flexi pool funds, based on

previous year's expenditure and based on Annual Action Plan. The district receives the funds through electronic transfer from the state office.

## **2. District Schedule – Part B: District Hospital (DH), Sidhi**

Location of the Hospital: The district hospital of Sidhi is located centrally at district headquarter. It has residential areas nearby. It is just half kilometer away from the city bus stand and it takes about 15 minutes to reach the district hospital. By using the public transport, the DH, Sidhi can be reached in 45 minutes from the nearest CHC, Chruhat and 4 hours from the farthest CHC Baidhan. The DH has a total bed strength of 142 beds. The hospital has not obtained yet the necessary environmental clearance from the Pollution Control Board. All parts of the buildings of the DH are not disabled friendly as per the provisions of the Disability Act.

Physical Infrastructure: The DH has a registration counter, waiting space adjacent to each consultation and treatment room, doctors' duty room, treatment room, isolation room, blood bank/blood storage unit, ICU, examination and preparation room. Out of the thirteen essential services, most are not available or operational in the district hospital, Sidhi. The hospital has the following services: kitchen, Central Sterile and Supply Department and round the clock water supply. Hospital lacks most of the essential services such as Laundry, Medical and General store, water cooler and refrigerator, overhead water storage tank with pumping and boosting arrangements, provision for fire fighting, engineering services backup and proper drainage and sanitation system. The hospital disposes the bio-medical waste through burial. The bio-medical waste is not disposed as per the set norms after segregating the same in three different bins. There are 6 residential quarters for medical staff and 25 for paramedical staff and all these quarters are occupied. It has a medical records section and disease classification is being carried out as per protocols. The hospital has telephone, fax, computers and internet facilities.

Obstetrics and Gynaecology Section: The hospital has a separate ward for female patients with 20 beds. The bed occupancy rate of female wards is 132.8 percent. During the last three calendar months 2,546 OPD patients were attended in the section and 1756 deliveries were conducted. The hospital has no separate OT for Obstetrics and Gynaecology. The section also has facilities to provide services related obstetrics and gynaecology (caesarean

section deliveries, MTP, assisted/forceps delivery, abortion, ectopic pregnancy, retained placenta, eclampsia, PPH, sterilization, hysterectomy, suturing cervical tear and infertility treatment). The medical records section has no data available for each of the section as per the schedule, however, some of the data could be obtained by actually counting the numbers from the daily service registers which are available with the concerned section.

Surgical Section: The number of surgical OPD and IPD conducted in the section during the last three months prior to the survey was 674 and 739 respectively. Facilities for emergency surgical services and abdomen surgery are available in the section. However, the section does not have facilities to conduct pancreas surgery, spleen and portal hypertension surgery, breast surgery and leprosy reconstructive surgery.

Medical Section: The number of medical OPD and IPD attended by the Section during the last three months prior to the survey was 906 and 615 respectively. The medical section provides only limited services. Most of the services listed in the schedule are not available (dermatology and venerology, services under NLEP, pleural biopsy, bronchoscopy, lumbar puncture, pericardial tapping, skin scraping for fungus/AFB, bone marrow biopsy, endoscopic specialised procedures and psychiatric services) in the section.

Paediatric Section: During the year 2007-2008 the number of paediatric OPD attended in the section was 15,530 and number of IPD admitted was 3,928. The section has 30 designated beds for newborns. The number of neonates, other infants and children under five years admitted in the section during 2007-08 is 509, 1,093 and 1,782 respectively. The section has the services to manage asphyxia, malnourished children, neo natal sepsis, dehydration and diarrhoea cases and respiratory tract/pneumonia cases. The section has the essential equipments like cradle, incubator, radiant heat warmer, phototherapy unit, bag with mask, oxygen mask, suction machine and thermometer with working condition. The section has the essential drugs like ORS, Vitamin A solution and paediatric antibiotics.

Diagnostic Section: There is no information about the service statistics for this section available. Diagnostic section provides only X-ray and ECG services. The section has conducted 820 X-rays during last three months.

Clinical Pathology: The lab has provided 4,492 laboratory services to the patients during the last three months prior to the survey. Lab has facilities to provide haematology, urine analysis, stool analysis, semen analysis, sputum, sputum, histopathology, serology and biochemistry. It does not have facilities for Aspirated fluids (cell count cytology), split skin smear examination for leprosy, microbiology and physiology.

Human Resources: Out of the 48 sanctioned medical posts in the hospital only half of them (24) are appointed in regular position. The hospital has not recruited anyone in the contractual position among the medical staff. The shortage is huge in the category of General Duty Doctor – out of the 33 sanctioned posts only 17 are appointed. The sanctioned specialist's positions like medical specialist, surgery specialist, anaesthetist, ophthalmologist and orthopaedician are vacant in the hospital. However, among the paramedical staff, the situation is better with 84 percent (171 out of 203) of the sanctioned posts are filled-in. Among the other category of personnel (technicians and administrative staff), the hospital has almost filled up all the sanctioned positions.

Rogi Kalyan Samiti: The hospital has a registered RKS. The hospital exempts the SC, ST and BPL patients for the user charges. To avail the exemption, patients have to produce the BPL Ration Card. Through the user fees the RKS generates additional resources other than government grants. The user fees are retained within the hospital for the local use. The hospital has put up a display board showing number of members, number of meetings of RKS.

Overall, the hospital has better facilities in Obstetrics & Gynaecology and Paediatrics sections. Shortage of human resources coupled with lack of infrastructure a serious concern, since district hospital is the only tertiary care unit in the district. It is also noted that referral linkages with other specialty care is non-existent in the district.

### 3. Comments and Observations

Remarks by CMHO: District Sidhi is facing shortage of manpower in most developmental and public institutions. Even for contractual recruitment, candidates are not available. There is also lack of infrastructure in the district. The NRHM programme suffer mostly because of lack of involvement and cooperation from all the health functionary. Political

interference in every day matters is also a reason and it is difficult to get work done. The monitoring of the implementation of NRHM is some what improved and many initiatives in the family welfare programmes have been taken recently, but to sustain these efforts strong institutional reforms is needed. Implementation of NRHM need to be given under the control of health department at first.

Remarks by DPM: It is very much necessary to enhance the infrastructure in the district. Lack of qualified persons is foremost reason for the shortage of manpower in the district. There is high attrition rate among contractual recruits, particularly specialists and para-medical. This issue needs to be addressed by enhancing remuneration, providing residential facilities at periphery and linking it with performance based rewards. There is a lack of administrative officials who can monitor performance of the various health programmes. The DPMU needs to have more autonomy in day-to-day functioning. The state health unit should work cohesively with the DPMU in budgeting the activities, to avoid delay in necessary approval. Mostly, budget is provided to us only in later part of the year and it is expected to complete all the activities and utilization of budget.

Remarks by the Civil Surgeon: Hospital has shortage of manpower in the general as well as specialist medical category and among paramedical staff. More decision making power should be given to the hospital authorities to implement the NRHM schemes. More publicity is needed for the NRHM programmes.

Remarks/suggestions for the improvement of services by the observer: The District Programme Management Unit (DPMU) is functioning from a small one room office. DPMU should be provided with a larger office for the efficient functioning. There is need to initiate public private hospitals accredited for JSY don't submit the report about the JSY cases handled by them to the DPMU. Some of the ANMs reported that they don't know the names of the private accredited hospitals in their area. A better coordination between DPMU and District Health Office is necessary to implement the NRHM schemes more effectively. The duly filled-in District Schedule is given in Appendix-1

## Chapter 3

### Community Health Centres

#### 1. Coverage

As per the study design, the two CHCs selected for the study are CHC Sihawal and CHC Baidhan (Farthest). In Sidhi no CHC is designated as FRU. Baidhan is also a municipality and serving a population of 5,02,002 and Sihawal serving for a population of 2,21,757. Baidhan is 125 kilometers away from the District Hospital and Sihawal is 60 kilometers away. Farthest PHC from Sihawal is 50 kilometers away and from Baidhan, farthest PHC is 65 kilometers away. Both the hospitals are functioning on 24x7 basis.

#### 2. Availability of Infrastructure

Infrastructure wise both the CHCs are in poor condition. CHC Sihawal has 10 beds and CHC Baidhan has 50 beds altogether. There is no distinction as male and female beds. Both are functioning from own government building. Both the CHCs are having regular electricity supply, generator, telephone, computer, internet, running vehicle/ambulance and laboratory. CHC Diagnostic and investigative facilities like ECG, X-Ray, OT, labour room is available in both the CHCs. CHC, Baidhan uses OT for gynaecological purposes. There is no separate areas for septic and aseptic deliveries and new born care centre. CHC, Baidhan has facilities like counter near hospital entrance for contraceptives, ORS packets, vitamin A, separate public toilet for male and female, suggestion / complaint box, waiting room for patients, whereas Sihawal has none of these facilities. It is observed that CHC, Baidhan has most of the common facilities for patients then the CHC, Sihawal. In both the CHCs, open drainage system prevails. In Baidhan, waste disposal is given to a private agency. In Sihawal, waste material is disposed off by throwing them in open near the hospital premises. As per our observation, the cleanliness of OPD, compound/premises and rooms/wards not met with the minimum cleanliness in both the CHCs. Both the hospitals are maintaining the names of JSY beneficiaries in record.

#### 3. Human Resources

CHC Sihawal has 6 sanctioned posts of medical staff. Out of 6, only two medical officers are working in regular position, no other sanctioned medical staffs are in-position. Among

paramedical staffs, 15 posts are sanctioned. Out of 15, eleven posts are in-position, including 4 contractual paramedical staffs. The CHC has an LHV, BEE, Lab. Technician, Ophthalmic Assistant and Ambulance Driver as regular staffs and three ANMs and Statistical Assistant are working on contractual basis. CHC Biadhan has 25 sanctioned posts in medical cadre and 159 posts in paramedical cadre. It has nine regular and two contractual recruits in clinical/medical cadre. Baidhan has specialists like physician, Surgeon, Paediatrician and Anaesthetist. It has no Gynaecologist and any medical officer trained in Gynaecology. There is no public health nurse in CHC, Baidhan. Out of 13 sanctioned posts of general duty doctors, only five are in-position. In paramedical cadre, most of the posts are in-position. There are 66 paramedical in-position in Baidhan. Out of these, 50 are regular and 11 are contractual. In both the hospitals, the availability of paramedical and support staff is better than in medical staff category.

#### 4. Status of Specific Interventions

IPHS facility survey has been done in Baidhan only. None of the CHC receive grant electronically from the district. RKS is registered in both the CHCs and their display boards show the composition of the RKS with the names of the members. However, RKS is generating resources through user fees in both the CHCs. The money is retained with the CHC and used for the CHC. However, in both the CHCs, there is no feedback mechanism in place for grievances redressed by RKS. There is no public charter displayed and no standard treatment guidelines and protocols are available in both the the CHCs.

#### 5. Availability of Facilities, Drugs and Services

Residential Facility: Residential facility of staff (Medical and Paramedical) is available in both the places. CHC, Baidhan has 3 quarters for doctors 6 for paramedical and all are occupied. CHC, Sihawal has only one quarter for doctor and 8 for paramedical, all are occupied. It is observed that residential facility for the Doctors and other staff is not adequate and proper.

Laboratory Facilities: Both the CHC have limited testing facilities in their laboratory. CHC, Baidhan provides testing services for haemoglobin, urine RE, blood sugar, blood smear examination for malaria parasite, rapid test for pregnancy. Sihawal has only testing

facility for malaria parasite. In both the places, laboratory has no facility for blood grouping, blood smear, bleeding and clotting time, RPR test for syphilis and rapid test for HIV. In both the CHCs record maintenance for laboratory services is not proper. No data has been obtained for the laboratory services for last three months. From records, CHC Sihawal reported that 184 slides have been tested for malaria parasite during three months prior to the survey.

Equipments and Drugs: In both the CHCs most (60 percent) of the listed equipments are not available. In CHC, Sihawal ECG machine, oxygen cylinder, hydraulic operation table, phototherapy unit and MVA syringes are available and are in working condition. In Baidhan, ECG machine, vertical sterilizer, oxygen cylinder, hydraulic operation table, phototherapy unit and baby incubator is available and found in working condition. Out of the 25 listed drugs, none of the drugs are reported out of stock or irregular supply in both the CHCs.

Specific Services: Both the CHCs provide only primary care facility. Out of the 24 specific services listed, CHC Sihawal has 10 services and and CHC Baidhan has 13 services. In Sihawal, non the the specialists services are available. However, 24 hours emergency service is reportedly available in both the CHCs. There is no blood storage facility available in both the places.

## **6. Status of Performance during 2007-2008**

Operation Theater: The performance of the OT shows that CHC Sihawal is more as compared to Baidhan. The record maintenance in both the CHCs is not found proper. CHC, Sihawal reported that all the family planning operations and minor procedures like stitching, bandaging, fracture treatment is done in OT. All these procedures are reported as OT performance. Biadhan has performed only 42 surgical cases. It is informed by the BMO that during 2007-08 OT was not operational due to poor condition of OT room and lack of proper equipments. Reason for low usage of OT in both the CHCs are non-availability of doctors, lack of equipments.

Labour Room: In both the CHCs the labour rooms are in use and deliveries are being conducted. The number of deliveries conducted during 2007-2008 in Sihawal and Baidhan is 1468 and 1384 respectively. In both the CHCs all the deliveries are considered as JSY case as per the norms. In Sihawal 599 (41 percent) out of 1468 deliveries were carried out during night time. In Baidhan, 420 (30.3 percent) of all the deliveries were conducted during night time between 8 p.m. and 8 a.m. In CHC, Sihawal it is found that post-delivery stay is only one day and in some cases, it is few hours. Mostly, over night stay is avoided due to limited staff at the CHC.

## 7. Service Outcome

The service outcome statistics was collected from the CHCs for last three months. Table C14 presents the 'average monthly figure' based on the data collected for the last three months. The caste wise figures are also maintained by the hospitals for all the indicators. As seen from table, for CHC Sihawal, most of the services are not reported since they are not being provided at the CHC. Crucial services like ANC registration, ANC checkup as per the RCH schedule, routine immunization services and referral services are not being provided at CHC. CHC Sihawal caters only delivery and indoor and OPD patients to some extent. Average OPD attendance at the CHC is very low at 42 patients. There is no separate record about the patients referred from periphery to the CHC and also for the children. As the CHC Baidhan is located in predominantly urban area and has more beds, the figure for service has reflected this. In almost all the indicators, the average monthly figures of Baidhan are impressive. There were 2564 deliveries in the CHC during three months prior to the survey. There were 1041 indoor patients admitted to the hospital during same period. Since there is no proper registration system for out-patients the proper data is not maintained about the OPD services in the Baidhan. Bed occupancy rate is also not reported as there is no proper admission records and in-patients days.

## 8. Remarks and Suggestions

*CHC-Sibawal:*

Remarks by BMO:

1. We need clear guidelines to spend the NRHM grants. The guidelines given currently are vague and not very clear. There are no administrative powers to the BMO and no drawing and disbursing power for the BMOs. For petty requirements, we have to approach SDM, which is not available at times when needed.
2. There are problems related to the building of CHC, lack of facility, insufficient arrangements in OT and Wards, irregular electricity supply, insufficient power backup for essential services like OT, Cold Chain equipments etc.
3. Funds are not sufficient and they are not sent on time. However, we are maintaining minimum services through untied funds provided for the CHC.
4. There is lack of supervision as all the supervisory staff positions are vacant. Concerned medical officer are not visiting in their respective sub-centres for supervision.
5. For JSY, we are unable to cater the every pregnancy effectively. Nearly 50 percent of the registered ANCs are being catered under JSY. This is mostly because of lack of delivery facilities at PHC. Though we have designated Amiliya, Amarpur and Nakjhar as 24x7 PHCs for delivery services.
6. Untied fund is mainly used for payments of electricity and telephone bills, laundry services, purchase of kerosene for sterilizer (which is a big amount), payments of wages to the sweeper and minor repair work. Last year we have also used this grant to purchase printer, fax and inverter which are essential for the office purpose. It is difficult to get necessary approval in the RKS for utilization of untied grant. As per the guidelines, any purchase from the untied grant can be made only after the proper approval from the core committee of RKS comprising of some concerned technical

persons. SDM who is chairman of the committee is seldom available for meeting. Some times electricity bill are not paid on time due to non-availability of SDM.

7. Untied funds provided to ANMs are not being utilized properly. Mandatory joint account with Sarpanch or Panchayat Secretary is the major operational problem in utilization of untied grant at sub-centre level. Proper submission of utilization of grant is not being done by the ANMs. In our area, some of the ANMs also purchased items which are not necessary at all. At some places, even the sub-centre building is not available but the purchase of hardware, linen etc has been made.
8. Accountants posted at CHC level are properly trained in accounting and maintaining expenditure details. Accountant post at CHC is reserved for ST candidate. Since no eligible candidate is available posting has not been done and we have called accountant from PHC.
9. Infrastructure in our block is very poor. CHC building which was constructed in 1952 is in very poor condition now. We have x-ray facility but no radiographer is posted at CHC. Infrastructure as well as trained manpower is a major concern in our block. Out of the seven post in medical cadre, only two are in-position. No specialist is posted here at CHC. Although it is designated as 30 bedded CHC, we have no paramedical staff in place according to the setup. Skilled manpower staff nurse, compounder, pharmacists and dresser are nowhere available in the block. Contractual staff is also not available in the block as per the requirements. Fresher ANMs are posted directly at CHC. A newly trained ANM should be first posted at sub-centre and only after certain field experience she be posted at CHC.
10. There is no policy for promotion of Doctors at CHC.

Suggestions by BMO:

1. Sector medical officers should be given responsibility for monitoring the performance of ANMs and utilization of untied grant at sub-centre level. Instead of block medical officers, sector medical officers should be appointed. Since sector is smaller area which

can be monitored by sector level medical officer. These setups are well established in states like Rajasthan.

2. Sector medical officers at PHCs have no responsibility in any terms. They are not participating in family planning camps or even other campaign activities. Smaller units of programme implementation should be made at sector level by giving full responsibility to the medical officer at PHC. This will ensure their effective utilization of there services under NRHM. Monitoring of the prgrammes can be done in batter way if such arrangements are made.
3. While upgrading infrastructure, BMO should be involved in the process. Many times, sub-centre and PHCs are sanctioned in the block but BMOs are not informed about it. If construction delayed due to some or other reason, explanation is sought from BMO.

*CHC-Baidhan:*

Remarks by BMO:

1. There are frequent changes in guidelines on NRHM. Particularly, with regard to JSY, fund utilization and administrative procedures.
2. Since Baidhan (Singrauli) is formed as a new district recently, we get directives from two points; local administration and CMHO, Sidhi. Although, for the time being there are no changes in administrative setup for health programmes, but since district collector has taken over the charges, we have to follow his directives.
3. CHC, Baidhan is also upgraded as 200 beded district hospital and posts are created, but the overall infrastructure is not commensurate with the proposed district hospital setup.
4. Infrastructure, including OT, wards and basic amenities are lacking and no budget has been sanctioned for such requirements. Giving only manpower is not sufficient.

5. CHC, Baidhan is covering a large urban area, since it is mainly an industrial city, the slum population is growing very rapidly. We have no separate funds or programme to cater that population. We have to even take help from other PSU hospitals in this area for routine immunization programme and special health campaigns like pulse polio, filarial, malaria control etc.
6. This is a coal mining area and hence, respiratory diseases are more intense among the population. We have to make additional efforts for such health problems. Infact, under NRHM, there is little provision for urban poor.
7. In rural area also, we are facing shortage of manpower. In Baidhan block, about 30 percent of the sanctioned posts of paramedics are vacant, and we are not getting any person on contractual basis.

Suggestions by BMO:

1. There should be a continuity of guidelines under NRHM. Most of the instructions given from state level, are not clarified by the district. There should be some flexibility in utilization of funds under NRHM at BMO level.
2. Funds should be provided on time. A few months back we had no funds for JSY beneficiaries.
3. Infrastructure should be upgraded with a timeline so that funds are utilized and services can be streamlined
4. There should be an Human Resource (HR) policy for recruitment, promotion etc. at block level, since requirement vary from block to block.

Suggestion by Radiographer:

1. It is very difficult to work in a hazardous condition. We are constantly working under radioactive radiation environment. The present X-ray facility is not as per the guidelines and technical specifications. This need to be improved on priority.

Observation from PRC team:

1. There is lack of proper coordination among district and block level officials regarding the NRHM implementation.
2. Block level officials are not properly oriented about the NRHM and its core strategies. They are little awareness about the NRHM and its various goals.
3. There is a lack of understanding about NRHM among the health staffs.
4. Services under NRHM and other national health programmes are not efficient due to manpower shortage, lack of infrastructure and financial resources.
5. Rogi Kalyan Samiti has very little involvement in NRHM implementation at CHC level.
6. Meeting registers of RKS are not maintained properly. RKS meetings are held once a while and issues related to the infrastructure, manpower, financial problems are never discussed in the meetings of RKS at both the CHCs
7. It is observed that at both the CHCs, health staff is engaged in private practices and they seldom discuss any developmental issues for CHCs. There is a lack of cooperation among different cadre of health personnel.
8. It is suggested that, all the requisites under the NRHM, should be conveyed to the BMOs directly. There should be a monitoring cell under the DPMU to monitor the activities under the NRHM and it should also provide necessary support and training to the BMOs for implementation of NRHM.
9. Mechanism of performance reporting need to be strengthened and should be supported by field observation from BMO and DPMU.

## Community Health Centres (Based on CHCs covered)

**Table C1 : Coverage and Availability of Infrastructure**

| Coverage  | CHC 1 (Sihawal)    |                    | CHC 2 (Baidhan)    |                    |
|---|--------------------|--------------------|--------------------|--------------------|
| Population served by CHC  | 2,21,757           |                    | 5,02,002           |                    |
| Distance & Time Taken to travel to CHC in public transport / available mode from            | Distance (in Kms.) | Time (in Minutes.) | Distance (in Kms.) | Time (in Minutes.) |
| Nearest PHC in the coverage area  | 13                 | 20                 | 13                 | 60                 |
| Farthest PHC in the coverage area   | 50                 | 120                | 65                 | 300                |
| District Hospital   | 60                 | 180                | 125                | 240                |
| No. of Beds available   |                    |                    |                    |                    |
| Male  | -                  |                    | -                  |                    |
| Female  | 10                 |                    | -                  |                    |
| Availability of Infrastructure (Yes:1; No: 0)   | CHC 1 (Name)       |                    | CHC 2 (Name)       |                    |
| Status of Building  |                    |                    |                    |                    |
| Own government Building   | 1                  |                    | 1                  |                    |
| Rented premises   | 0                  |                    | 0                  |                    |
| Other Rent-free Building  | 0                  |                    | 0                  |                    |
| Electricity in all parts:   |                    |                    |                    |                    |
| No regular electricity supply   | 0                  |                    | 1                  |                    |
| Regular electricity supply in all parts   | 1                  |                    | 0                  |                    |
| 30 or more beds   | 0                  |                    | 1                  |                    |
| Generator   | 1                  |                    | 1                  |                    |
| Telephone   | 1                  |                    | 1                  |                    |
| Computer  | 1                  |                    | 1                  |                    |
| Internet  | 0                  |                    | 0                  |                    |
| Running Vehicle/Ambulance   | 1                  |                    | 1                  |                    |
| Laboratory  | 1                  |                    | 1                  |                    |
| Investigative facilities  |                    |                    |                    |                    |
| ECG   | 1                  |                    | 1                  |                    |
| X-Ray   | 1                  |                    | 1                  |                    |
| Ultrasound  | 0                  |                    | 0                  |                    |
| OT (Operation Theatre)  | 1                  |                    | 1                  |                    |
| OT used for Gynaecology   | 0                  |                    | 1                  |                    |
| Labour Room   | 1                  |                    | 1                  |                    |
| Separate areas for septic and aseptic deliveries  | 0                  |                    | 0                  |                    |
| New Born Care Corner  | 0                  |                    | 0                  |                    |
| Names of JSY beneficiaries maintained in record?  | 1                  |                    | 1                  |                    |
| Pharmacy for drug dispensing and drug storage   | 1                  |                    | 1                  |                    |
| Counter near entrance of CHC to obtain contraceptives, ORS packets, Vitamin A and medicines | 0                  |                    | 1                  |                    |

| Coverage  | CHC 1 (Sihawal) | CHC 2 (Baidhan) |
|---|-----------------|-----------------|
| Separate public utilities (toilets) for males and females                                   | 0               | 1               |
| Suggestion / complaint box  | 0               | 0               |
| OPD rooms / cubicles  | 1               | 1               |
| Waiting room for patients   | 0               | 0               |
| Does the waiting room have adequate sitting place   | -               | -               |
| Is drinking water available in the waiting area?  | 0               | 1               |
| Emergency Room / Casualty   | 0               | 0               |
| Separate wards for males and females  | 0               | 0               |
| <b>Sewerage</b>   |                 |                 |
| Type of sewerage system   |                 |                 |
| Soak pit  | 0               | 0               |
| Open drain  | 1               | 1               |
| Connected to Municipal Sewerage   | 0               | 0               |
| Other   | 0               | 0               |
| <b>Waste disposal</b>   |                 |                 |
| Buried in a pit   | 0               | 0               |
| Collected by an agency  | 0               | 1               |
| Incineration  | 0               | 0               |
| Thrown in open  | 1               | 0               |
| Status of Cleanliness of OPD reported good or fair  | 1               | 1               |
| Status of Cleanliness of Compound / Premises reported good or fair                          | 0               | 0               |
| Status of Cleanliness of Room/Wards reported good or fair                                   | 0               | 0               |
| Prominent display boards regarding service availability in local language                   | 1               | 1               |
| Names of JSY beneficiaries maintained in record?  | 1               | 1               |
| Pharmacy for drug dispensing and drug storage   | 1               | 1               |
| Counter near entrance of CHC to obtain contraceptives, ORS packets, Vitamin A and medicines | 0               | 1               |

Table C2 : Position of Medical Staff and Paramedical Staff

| Type of Staff  | CHC 1 (Sihawal)    |                     |             |       | CHC 2 (Baidhan)    |                     |             |       |
|--|--------------------|---------------------|-------------|-------|--------------------|---------------------|-------------|-------|
|  | Numbers Sanctioned | Numbers in position |             |       | Numbers Sanctioned | Numbers in position |             |       |
|  |                    | Regular             | Contractual | Total |                    | Regular             | Contractual | Total |
| <b>Position of Medical Staff (clinical)</b>                |                    |                     |             |       |                    |                     |             |       |
| General Surgeon  | 1                  | 0                   | 0           | 0     | 2                  | 1                   | 0           | 1     |
| Physician  | 1                  | 0                   | 0           | 0     | 3                  | 2                   | 0           | 2     |
| Obstetrician / Gynaecologist                               | 1                  | 0                   | 0           | 0     | 2                  | 0                   | 0           | 0     |
| Medical Officer trained with short term obstetrics course) | 0                  | -                   | -           | -     | 0                  | -                   | -           | -     |
| Paediatrician  | 1                  | -                   | -           | -     | 2                  | 1                   | 0           | 1     |
| Anaesthetist   | 0                  | -                   | -           | -     | 1                  | 1                   | 0           | 1     |
| Medical Officer trained with short term Anesthesia course) | 0                  | -                   | -           | -     | 0                  | -                   | -           | -     |
| General Duty Medical Officer                               | 2                  | 2                   | 0           | 2     | 13                 | 3                   | 2           | 5     |
| Eye Surgeon  | 0                  | -                   | -           | -     | 1                  | 1                   | 0           | 1     |
| Public Health Nurse  | 0                  | -                   | -           | -     | 1                  | 0                   | 0           | 0     |
| <b>Position of Paramedical and Support Staff</b>           |                    |                     |             |       |                    |                     |             |       |
| Lady Health Visitor (LHV)                                  | 1                  | 1                   | 0           | 1     | 11                 | 2                   | 0           | 2     |
| Block Extension Educator (BEE)                             | 1                  | 1                   | 0           | 1     | 1                  | 1                   | 0           | 1     |
| ANM  | 3                  | 0                   | 3           | 3     | 60                 | 38                  | 7           | 45    |
| Staff Nurse  | 0                  | -                   | -           | -     | 55                 | 5                   | 1           | 6     |
| Dresser  | 2                  | 0                   | 0           | 0     | 2                  | 0                   | 0           | 0     |
| Pharmacist / Compounder                                    | 0                  | 0                   | 0           | 0     | 10                 | 4                   | 0           | 4     |
| Lab. Technician  | 2                  | 1                   | 0           | 1     | 8                  | 2                   | 2           | 4     |

| Type of Staff                               | CHC 1 (Sihawal)    |                     |             |       | CHC 2 (Baidhan)    |                     |             |       |
|---|--------------------|---------------------|-------------|-------|--------------------|---------------------|-------------|-------|
|   | Numbers Sanctioned | Numbers in position |             |       | Numbers Sanctioned | Numbers in position |             |       |
|   |                    | Regular             | Contractual | Total |                    | Regular             | Contractual | Total |
| Radiographer                                | 1                  | 0                   | 0           | 0     | 2                  | 1                   | 0           | 1     |
| Ophthalmic Assistant                        | 1                  | 1                   | 0           | 1     | 1                  | 1                   | 0           | 1     |
| Statistical Assistant / Data entry operator | 1                  | 0                   | 1           | 1     | 4                  | 0                   | 1           | 1     |
| OT attendant                                | 2                  | 0                   | 0           | 0     | 3                  | 0                   | 0           | 0     |
| Ambulance Driver                            | 1                  | 1                   | 0           | 1     | 2                  | 1                   | 0           | 1     |
| Registration Clerk                          | 0                  | 2                   | 0           | 2     | 0                  | -                   | -           | -     |

**Table C3: Availability of Specific Services in CHC**

| Availability of Specific Services(Yes: 1; No: 0) | CHC 1<br>(Sihawal) | CHC 2<br>(Baidhan) |
|--|--------------------|--------------------|
| Functioning on 24x7                              | 1                  | 1                  |
| Functioning as FRU                               | 0                  | 0                  |

**Table C4: Status of Specific Interventions**

| Status of Specific Interventions (Yes: 1; No: 0)            | CHC 1<br>(Sihawal) | CHC 2<br>(Baidhan) |
|---|--------------------|--------------------|
| IPHS Facility Survey done                                   | 0                  | 1                  |
| Funds being electronically transferred from District        | 0                  | 0                  |
| Registered Rogi Kalyan Samiti                               | 1                  | 1                  |
| RKS generating resources through user fees                  | 1                  | 1                  |
| Money generated by RKS being used                           | 1                  | 1                  |
| Display board showing no. of meetings & members of RKS      | 1                  | 1                  |
| Feedback mechanism in place for grievances redressed by RKS | 0                  | 0                  |
| Citizens Charter publically displayed                       | 0                  | 0                  |
| All Standard Treatment Guidelines and Protocols available   | 0                  | 0                  |

**Table C5: Status of Residential Facilities for Doctors and Other Staff**

| Residential Facilities (Yes: 1; No: 0)  | CHC 1<br>(Sihawal) | CHC 2<br>(Baidhan) |
|---|--------------------|--------------------|
| <b>For Doctors</b>  |                    |                    |
| Residential Facility for Doctors  | 1                  | 1                  |
| Non-Occupied Residential Quarters   | 0                  | 0                  |
| Reason for non-occupancy being poor condition / insecurity / lack of electricity and water supply | -                  | -                  |
| <b>For Other Staff</b>  |                    |                    |
| Residential Facility for Staff  | 1                  | 1                  |
| Non-Occupied Residential Quarters   | 0                  | 0                  |
| Reason for non-occupancy being poor condition / insecurity / Lack of electricity and water supply | -                  | -                  |

Table C6 : Availability of Laboratory Facilities

| Laboratory Testing   | (Yes: 1; No: 0)    |                    |
|--|--------------------|--------------------|
|  | CHC 1<br>(Sihawal) | CHC 2<br>(Baidhan) |
| <b>Type of Laboratory Testing</b>                          |                    |                    |
| Haemoglobin  | 0                  | 1                  |
| Urine RE   | 0                  | 1                  |
| Blood sugar  | 0                  | 1                  |
| Blood grouping   | 0                  | 0                  |
| Blood Smear  | 0                  | 0                  |
| Bleeding time, clotting time                               | 0                  | 0                  |
| Diagnosis of RTI/ STIs with wet mounting, grams stain etc. | 0                  | 0                  |
| Blood smear examination for malaria parasite               | 1                  | 0                  |
| Rapid test for Pregnancy                                   | 0                  | 1                  |
| RPR test for Syphilis                                      | 0                  | 0                  |
| Rapid test for HIV   | 0                  | 0                  |

Table C7 : Number of Lab. tests done in CHC in last 3 calendar months

| Type of tests done   | CHC 1 (Sihawal) | CHC 2 (Baidhan) |
|--|-----------------|-----------------|
| Haemoglobin  | -               | -               |
| Urine RE   | -               | -               |
| Blood sugar  | -               | -               |
| Blood grouping   | -               | -               |
| Blood Smear  | -               | -               |
| Bleeding time, clotting time                               | -               | -               |
| Diagnosis of RTI/ STIs with wet mounting, grams stain etc. | -               | -               |
| Blood smear examination for malaria parasite               | 184             | -               |
| Rapid test for Pregnancy                                   | 0               | -               |
| RPR test for Syphilis                                      | -               | -               |
| Rapid test for HIV   | -               | -               |

### Status of performance of OT

**Table C8: Number of surgeries performed during 2007-2008**

| Type of surgeries                                | Number of surgeries performed during 2007-2008 |                 |
|--|--|-----------------|
|  | CHC 1 (Sihawal)                                | CHC 2 (Baidhan) |
| Caesarean Sections                               | 0  | 0               |
| No. of C-section deliveries for JSY Card holders | 0  | 0               |
| Surgical cases                                   | 435  | 42              |
| Cataract   | 0  | 0               |
| Tubectomy  | 284  | 0               |
| Laposcopic Sterilisation                         | 435  | 0               |
| NSV  | 0  | 0               |
| Conventional Vasectomy                           | 0  | 0               |
| MTP  | 0  | 0               |
| Laprotomy  | 0  | 0               |

**Table C9 : Reasons for not conducting surgeries**  
(if OT available, but surgeries not conducted)

| Reasons for not conducting deliveries(Yes: 1; No: 0)           | CHC 1 (Sihawal) | CHC 2 (Baidhan) |
|--|-----------------|-----------------|
| Non availability of doctor/anaesthetist/staff                  | 1               | 1               |
| Lack of equipment/poor physical state of the operation theatre | 1               | 1               |
| No power supply in the OT                                      | 1               | 0               |
| Other  | 1               | 1               |

### Status of performance of Labour Room

**Table C10 : Status of performance of Labour Room during 2007-2008**

| Number of deliveries                          | Number of deliveries performed during 2007-2008 |                 |
|---|---|-----------------|
|   | CHC 1 (Sihawal)                                 | CHC 2 (Baidhan) |
| Total Institutional Deliveries                | 1468  | 1384            |
| Deliveries carried out from 8 pm to 8 am      | 599   | 420             |
| Institutional deliveries for JSY card holders | 1468  | 1384            |
| Number of neonates resuscitated               | 0   | 0               |

**Table C11 : Reasons for not conducting deliveries**  
(if Labour room available but deliveries not conducted)

| Reasons for not conducting deliveries (Yes: 1; No: 0) | CHC 1 (Sihawal) | CHC 2 (Baidhan) |
|---|-----------------|-----------------|
| Non availability of doctors/staff                     | -               | -               |
| Poor condition of the labour room                     | -               | -               |
| No power supply in the labour room                    | -               | -               |

Table C12 : Status of availability of Equipments &amp; drugs

| Equipments available / working<br>(Yes:1; No: 0)       | CHC 1 (Sihawal)   |                         | CHC 2 (Baidhan)        |                         |
|--|---|-------------------------|------------------------|-------------------------|
|  | Available   | Working                 | Available              | Working                 |
| Boyles Apparatus                                       | 0   | -                       | 0                      | -                       |
| ECG Machine  | 1   | 1                       | 1                      | 1                       |
| Cardiac Monitor for OT                                 | 0   | -                       | 0                      | -                       |
| Defibrillator for OT                                   | 0   | -                       | 0                      | -                       |
| Ventilator for OT                                      | 0   | -                       | 0                      | -                       |
| Horizontal High Pressure Sterilizer                    | 0   | -                       | 0                      | -                       |
| Vertical High Pressure Sterilizer<br>2/3 drum capacity | 0   | -                       | 1                      | 1                       |
| OT Care Fumigation Apparatus                           | 0   | -                       | 0                      | -                       |
| Gloves & Dusting Machines                              | 0   | -                       | 0                      | -                       |
| Oxygen Cylinder  | 1   | 1                       | 1                      | 1                       |
| Hydraulic Operation Table                              | 1   | 0                       | 1                      | 1                       |
| Resuscitation trolley                                  | 0   | -                       | 0                      | -                       |
| Phototherapy unit                                      | 1   | 1                       | 0                      | -                       |
| MVA syringe  | 1   | 1                       | 1                      | 1                       |
| Baby incubator   | 0   | -                       | 1                      | 1                       |
| <b>Type of Drugs</b>                                   | <b>CHC reporting stock out or irregular supply of specific drugs in<br/>last 6 months (Yes: 1; No: 0)</b> |                         |                        |                         |
|  | <b>CHC 1 (Sihawal)</b>  |                         | <b>CHC 2 (Baidhan)</b> |                         |
|  | <b>Stock Out</b>  | <b>Irregular Supply</b> | <b>Stock Out</b>       | <b>Irregular Supply</b> |
| Iron Folic Acid (IFA)                                  | 0   | 0                       | 0                      | 0                       |
| Oral Pills (OPs)                                       | 0   | 0                       | 0                      | 0                       |
| IUD 380  | 0   | 0                       | 0                      | 0                       |
| ORS (Oral Rehydration Salts)                           | 0   | 0                       | 0                      | 0                       |
| ORS with Zinc adjunct as per<br>policy                 | 0   | 0                       | 0                      | 0                       |
| Vitamin A  | 0   | 0                       | 0                      | 0                       |
| Tab. Fluconazole                                       | 0   | 0                       | 0                      | 0                       |
| Tab. Metronidazole                                     | 0   | 0                       | 0                      | 0                       |
| Tab. Co-trimoxazole (Kid)                              | 0   | 0                       | 0                      | 0                       |
| Tab. Nefidipine  | 0   | 0                       | 0                      | 0                       |
| Inj. Oxytocin  | 0   | 0                       | 0                      | 0                       |
| Inj. Gentamycin  | 0   | 0                       | 0                      | 0                       |
| Inj. Magnesium Sulphate                                | 0   | 0                       | 0                      | 0                       |
| Tab. Misoprostal                                       | 0   | 0                       | 0                      | 0                       |
| Tab. Progesterone                                      | 0   | 0                       | 0                      | 0                       |
| Inj. Lignocaine Hydrochloride                          | 0   | 0                       | 0                      | 0                       |
| Inj. Pentazocine Lactate                               | 0   | 0                       | 0                      | 0                       |
| Inj. Adrenaline  | 0   | 0                       | 0                      | 0                       |
| Cap. Doxycycline                                       | 0   | 0                       | 0                      | 0                       |
| Silver Sulphadiazine oint.                             | 0   | 0                       | 0                      | 0                       |
| IV Fluids  | 0   | 0                       | 0                      | 0                       |
| Inj. Procaine Penicillin                               | 0   | 0                       | 0                      | 0                       |
| Inj. Atropine  | 0   | 0                       | 0                      | 0                       |
| Syp Amoxycyclin  | 0   | 0                       | 0                      | 0                       |
| IFA Syrup  | 0   | 0                       | 0                      | 0                       |

Table C13. Availability of Specific Services (Yes: 1; No: 0)

| Type of Service  | CHC 1<br>(Sihawal) | CHC 2<br>(Baidhan) |
|--|--------------------|--------------------|
| Medicine   | 0                  | 1                  |
| Surgery  | 0                  | 1                  |
| Obstetric & Gynae  | 0                  | 1                  |
| Pediatrics   | 0                  | 1                  |
| DOTS   | 1                  | 1                  |
| Cataract Surgery   | 0                  | 0                  |
| Leprosy diagnosis management and referral services                         | 1                  | 0                  |
| Emergency Services (24 Hrs)  | 1                  | 1                  |
| mobile medical unit  | 0                  | 0                  |
| separate neo-natal care unit   | 0                  | 0                  |
| emergency care for sick children   | 0                  | 0                  |
| Full Range of Family Planning Services including<br>Laprosopic ligation    | 1                  | 1                  |
| safe abortion services   | 0                  | 0                  |
| Treatment of STI/RTI   | 1                  | 0                  |
| Blood Storage facility   | 0                  | 0                  |
| Counseling Facility on HIV/AIDS/STD etc                                    | 0                  | 0                  |
| Voluntary Counselling and Testing Centre (VCTC)                            | 0                  | 0                  |
| AYUSH facility   | 0                  | 0                  |
| Primary management of wounds   | 1                  | 1                  |
| Primary management fracture  | 1                  | 1                  |
| Primary management of cases of poisoning/snake, insect<br>or scorpion bite | 1                  | 1                  |
| Primary management of dog bite   | 1                  | 1                  |
| Primary management of burns  | 0                  | 1                  |
| Management of RTI/STI  | 1                  | 1                  |

**Table C14 : Service Outcome (based on data for last three months)**  
(In case where SC/ST/Others breakup is not available, only 'Total' column may be given)

| Indicator   | Average monthly figure reported in CHC based on last three months |     |        |       |                 |      |        |       |
|---|---|-----|--------|-------|-----------------|------|--------|-------|
|   | CHC 1 (Sihawal)   |     |        |       | CHC 2 (Baidhan) |      |        |       |
|   | SC  | ST  | Others | Total | SC              | ST   | Others | Total |
| Total ANC Registration  | -   | -   | -      | -     | 706             | 1057 | 2719   | 4482  |
| Total JSY cases registered  | -   | -   | -      | -     | 275             | 249  | 760    | 1284  |
| Ist Trimester Registration  | -   | -   | -      | -     | 82              | 102  | 213    | 397   |
| ANC given 3 Checkups as per RCH Schedule                                      | -   | -   | -      | -     | 603             | 703  | 2378   | 3684  |
| Out of above, the no. of JSY beneficiaries                                    | -   | -   | -      | -     | 163             | 117  | 414    | 694   |
| ANC given TT (2 <sup>nd</sup> dose + Booster)                                 | -   | -   | -      | -     | 789             | 711  | 2851   | 4351  |
| Out of above, the no. of JSY beneficiaries                                    | -   | -   | -      | -     | 163             | 117  | 414    | 694   |
| ANC completed IFA Prophylaxis   | -   | -   | -      | -     | 845             | 806  | 2528   | 4179  |
| Out of above, the no. of JSY beneficiaries                                    | -   | -   | -      | -     | 163             | 117  | 414    | 694   |
| Number of pregnant women identified and attended with obstetric complications | 2   | 1   | 3      | 6     | 12              | 17   | 26     | 56    |
| Out of these, how many have been referred from PHC/SHC                        | -   | -   | -      | -     | 9               | 8    | 11     | 28    |
| Total Institutional Deliveries  | 58  | 85  | 306    | 449   | 312             | 316  | 1936   | 2564  |
| No. of JSY cases (out of total institutional deliveries)                      | 58  | 85  | 306    | 449   | 275             | 249  | 760    | 1284  |
| No. of infants given BCG  | 51  | 66  | 291    | 408   | 973             | 853  | 3298   | 5124  |
| No. of infants given DPT3   | -   | -   | -      | -     | 214             | 263  | 710    | 1177  |
| No. of infants given Measles  | -   | -   | -      | -     | 721             | 644  | 2531   | 3 896 |
| No. of infants given Vit. A-first dose  | -   | -   | -      | -     | 706             | 610  | 2351   | 3667  |
| Children given IFA Syp. (6-60 Months)   | -   | -   | -      | -     | 0               | 0    | 0      | 0     |
| IUD Inserted  | -   | -   | -      | -     | 118             | 93   | 189    | 400   |
| Total Indoor Patients   | 68  | 103 | 309    | 480   | 127             | 198  | 716    | 10 41 |
| No. of cases referred beyond CHC  | -   | -   | -      | -     | 4               | 8    | 17     | 29    |
| No. of Leprosy cases currently under treatment                                | 1   | 2   | 17     | 20    | 6               | 11   | 23     | 40    |
| No. of new TB cases enrolled for DOTS   | 12  | 14  | 28     | 54    | 26              | 21   | 184    | 231   |
| No. of cases given Blood Transfusion in last 3 months                         |   |     |        | -     |                 |      |        | -     |
| Bed occupancy rate in the last 12 months? (As on March 31, 2008)              |   |     |        | 92.0  |                 |      |        | -     |
| Average Daily OPD Attendance (Total)  |   |     |        | 42    |                 |      |        | -     |
| Average Daily OPD Attendance Male   |   |     |        | 17    |                 |      |        | -     |
| Average Daily OPD Attendance Female   |   |     |        | 25    |                 |      |        | -     |
| Average Daily OPD Attendance Children   |   |     |        | -     |                 |      |        | -     |
| Out of the total OPD attendance, specify the referred cases from PHC/ SHC     |   |     |        | -     |                 |      |        | -     |

## Chapter 4

### Primary Health Centres

As per the study design, two PHCs are selected under the each selected CHC. The selected PHCs are vertically under the CHCs. Under CHC Sihawal, the selected PHCs are Amiliya (24x7) and Amarpur. Under CHC Baidhan, the selected PHCs are Mada (24x7) and PHC Khutar. This chapter presents the information collected from these four PHCs.

#### 1. Coverage and Facility

The number of SCs covered by these four PHCs varies from 6 to 19 and the population covered varies from 28,000 to 1,03,466. It is told by the Medical officer of PHC, Khutar that looking to its geographical coverage and population served by it, PHC Khutar is being proposed for CHC status. The distance from the nearest SCs in the coverage areas to these PHCs varies from 0 to 4 kilometres and distance from the farthest SCs varies from 9 to 25 kilometres.

Time taken to reach the PHCs from the nearest SCs varies from 0 to 30 minutes and from the farthest SCs it varies from 30 to 120 minutes. Medical officer of PHC Khutar, said that the PHC is at the corner of the coverage area and hence farthest sub-centre Tiyara is about 25 kilometer. MOs also pointed out that this area has no roads and connectivity to the sub-centre is very poor in this area. PHCs covered in Sihawal has got new building and having 6 beds in each PHC. In Baidhan, the two PHCs covered have their building under construction. New building of PHC Mada is completed but the MO informed that since the new building is isolated from the main village, it is not feasible to provide services from this new building. Presently, both the PHCs under CHC Baidhan has only 2 beds. Although, all the four PHCs are designated as 24x7 PHCs, only two PHCs, Amiliya and Mada have full time nursing staff for conducting deliveries. It is observed full range of basic obstetrics services is not available at any PHC. A doctor is available round the clock at PHC, Amiliya and Mada.

## 2. Infrastructure

All the four PHCs are functioning from a designated government building and have labour rooms and laboratory. Only two PHCs are maintaining the records containing the names of JSY beneficiaries. Only PHC, Amiliya, out of four PHCs put up a prominent display boards regarding service availability in local language. Pharmacy for drug dispensing and drug storage is not available in PHC Khutar. OPD rooms/cubicles, Piped water supply, Telephone facility is available in all the PHCs. Electricity supply is not regular at all the PHCs and only PHC Amiliya has standby facility (Inverter) available. Separate toilets for males and females are available in Amiliya and Amarpur PHCs. In none of these PHCs suggestion/complaint box is kept. Computer and Internet facility is also not available in any PHC. All the PHCs have open drain type of sewerage system for waste water disposal. All the PHCs, except Khutar, dispose their bio-medical waste by throwing them in open. None of the PHCs, have New Born Care Corner. As per our observation, the cleanliness of OPD, compound/premises and rooms/wards are not good in two PHCs (Amiliya and Khutar).

## 3. Staff Position

In none of the PHCs all the sanctioned positions are filled in. In PHC Amarpur, out of two sanctioned posts of Medical Officer only one is filled-in. In remaining three PHCs one post of medical officer is sanctioned and filled-in. A lab. Assistant is sanctioned and in position in all the PHCs except PHC Khutar. Lab. Technician at CHC Baidhan also provides services at Khutar. Post of ANM is sanctioned at PHC Amiliya only. Two ANMs are posted at PHC, Mada however, no ANM post is sanctioned at this PHC. It is observed that all the PHCs staffing pattern is not clearly known to the medical officers. In all the PHCs, staffs are positioned as per their convenience. At PHC Mada, nine staffs are working against the 5 sanctioned posts. None of PHCs have sanctioned positions of Nurses, Block Health Education and Information Officer, and Statistical Assistant. An AYUSH doctor is available at PHC Mada and Khutar both in Baidhan block. As far as the status of training of personnel at PHC is concerned, it is found that at none of the PHCs any staff has undergone any training on Pre Service IMNCI (Integrated Management of Neonatal and Child Infections), safe abortion method and Skill birth attendant training

during 2007. However, staffs at PHCs mentioned that they are willing to participate in these training. Medical Officer of PHC Khutar has got training on newborn care during 2007. A fifteen days duration training held at District Hospital, Sidhi, covered the topic on New Born Care, was an in-built curricula of NRHM-RCH training for MOs.

#### 4. Availability and Performance of Labour Room

All the four PHCs have labour rooms and all of them use the labour rooms for delivery. During 2007-2008, all the four PHCs together conducted 2745 institutional deliveries. PHC, Amiliya has conducted 1387 deliveries which is highest among all the PHCs. Amarapur PHC has conducted only 244 deliveries during 2007-08, lowest among all PHCs. Proportion of night time (8 pm to 8 am) deliveries is highest (45 percent) in Amiliya, whereas no delivery was conducted at PHC Mada during night. All the institutional deliveries are treated as JSY delivery. In Madhya Pradesh, there is no provision of separate JSY card for a registered pregnancy, since all the pregnancies come under the benefit of JSY scheme. To provide JSY benefits, the immunization card is considered as the proof of ANC registration and other immunization services.

#### 5. Laboratory Services and Performance

Availability of Services: The blood smear examination for malaria parasite is the only common laboratory test available at all the PHCs. PHC, Amiliya and Amarapur has facility for five out of eleven test listed. PHC Khutar has facility for blood smear for malaria and rapid pregnancy test. None of the PHC have the testing facility for Blood Grouping, Bleeding and Clotting Time, diagnosis for RTI/STI, RPR Test for Syphilis and Rapid test for HIV. Lab. Technicians at Amiliya, Amarapur and Khutar insisted that more facilities should be provided so that many of the listed tests could be done at the PHCs. It is also observed that at all the places laboratory was well maintained and records were kept properly.

Performance of Laboratory: The information on number of tests done in PHCs during last three months prior to the survey shows that, Amiliya is the only place where utilization of

laboratory services is better than other PHCs. PHC Amarpur, despite having facility for equal number of test, has poor outcome performance.

## 6. Status of Specific Interventions

IPHS facility survey has not been done in any PHC. As per the norms (have 1 MO and 3 or more ANMs/Staff Nurses round the clock), none of the PHCs are found functioning on 24x7 basis. However, round the clock delivery facility is available at three PHCs. AYUSH doctors are providing services in two PHCs. All the four PHCs have registered RKS. However, none of the PHCs displayed constitution of RKS and list of its members, citizen charter and range of available services. Only two PHCs have RKS generating resources through user fees. There is no feedback mechanism in place in any RKS for grievances redressal. All standard treatment guidelines and protocols are available only with PHC Amiliya.

## 7. Availability of Specific Services, Equipments and Drugs

Specific Service: All the four PHCs have the specific services for primary management of wounds and management of burns. Two PHCs are having services for minor surgery, management of poison / insect bite. AYUSH services are available in two PHCs. It is surprising to note that services like management of malnourished children, fracture, neonatal asphyxia and MTP services are not available in any of the four PHCs.

Equipments: Out of 23 equipments for which the information collected from the PHCs, Amiliya is having 19 equipments and majority are in working condition. Amarpur has only 7 equipments out of the listed ones. The equipments which are not available in any of the PHCs are Cradle, Auto Analyser, Wheel Chair, Laryngoscope, The equipments which are available in only one PHC are Oxygen Cylinder, Oxygen Mask and Autoclave. The equipments which are available with the PHCs are mostly in working condition. However, it is observed that most of these equipments are laying unused in store of the PHC, due to lack of trained persons in the PHC.

Drugs: The status of availability of drugs in last six months shows that the PHC Amiliya under CHC Sihawal did not face stock out or irregular supply. However, the remaining three PHCs faced either the stock out or irregular supply of some of the listed items. PHC Amarpur, had stock out of IUDs, Magnesium Sulphate, Fluconazole etc. as well as irregular supply. The two PHCs under CHC Baidhan has reported, out of stock of 3 -5 items. It is interesting to mention that items such as partographs are never supplied to any PHCs. It is instructed not to administer Inj. Oxytocin, however, its supply is being made to the PHCs. Medical Officers perceived that PHCs should be given instructions time-to-time regarding drug availability and supply chain should be maintained.

## 8. Service Outcome

The service outcome statistics was collected from the PHCs for last three months prior to the survey. Table P12 presents the 'average monthly figure' based on the data collected for the last three months. The caste wise break-up is also not maintained in PHCs for some indicators. It is observed that monthly reporting of PHCs performance is not being done in the revised integrated proforma under NRHM. PHC Amiliya and Amarpur, both under CHC Sihawal did not report its service outcomes in any form. The staffs repeatedly contacted for the information. Even BMO Sihawal could not assure the availability of information from these two centres. Two PHCs in Baidhan, have some information about the services for last three months. Total OPD in Mada for the reference period is 1710 (Average 19 OPD per day). In Khutar there is no record of OPD patients. ANC services which are lacking in both the PHCs have no records available for the services provided. A compounder at PHC Khutar also in-charge of OPD. There are no records available for OPD of AYUSH, which are available only in these two places. Total number of institutional deliveries at Mada and Khutar are 236 and 217 respectively. About 43 percent of all the deliveries belong to SC/ST categories at Mada.

## 9. Status of Record Maintenance

None of the PHCs have all the nine registers for reporting purpose. PHC, Amiliya has only Birth and Death Register and Meeting Register. PHC, Mada has only Meeting register. PHC Khutar maintained most of the registers, except Post natal care and Untied

Fund Register. It is observed that most of the services provided at PHCs are listed in single register which is also not maintained properly. Individual staffs maintain their own records and keep it with them. This particular habit is prevailing among contractual staffs. Reporting for the PHCs is not done separately. The sector supervisor reports the collective service outcomes for the sub-centres only and this report is sent to the BMO as PHC report in the form No. 7.

## 10. Remarks and Suggestions

### *PHCs under CHC Sibawal*

None of the medical officers were available when team reached to the PHC. The MOs were informed well before the arrival of PRC team in the district. Even after repeated calls from PRC team the duo medical officers did not turned up to discuss any thing regarding NRHM implementation. At PHC Amiliya information provided mostly by the contractual staff and rest of the information is obtained by observation. The PHC is constructed on a disputed land, and the matter is pending in the court. At PHC Amarpur, there is no electricity connection and running water facility. The pharmacist informed that required money for connection has already been deposited to the MPSEB office. At both the places, staff was not available to provide necessary information. PRC team had to visit PHCs 3-4 times to complete facility survey.

### *PHCs under CHC Baidhan*

Remarks by MOs: 'This PHC is running from a sub-centre building since its establishment. Under NRHM we have to provide minimum set of MCH services, we have started on with the help of contractual staffs. We have no permanent staffs here. This is somewhat, naxal infested area and nobody is ready to come to this PHC. The new PHC building is constructed far away from the main village, therefore, it is useless. For providing delivery services we have occupied one of the staff quarter of the PHC. The adjoining Ayurvedic dispensary building is also in dilapidated condition and of no use for us. We could not provide full range of NRHM services due to lack of staff and infrastructure' (PHC Mada).

The MO at PHC Khutar remarked that this PHC is being upgraded to a CHC. The new building of PHC is under construction adjacent to the existing PHC building. Staff

quarters are also under constriction. The MO, who is posted on contractual basis, informed that staff available is supportive, but lack of infrastructure is main reason for limited service availability. Irregular electricity supply and lack of any power backup system is another problem. He informed that most of the information about NRHM did not reach to them and they are not given any orientation on the NRHM. Regarding utilization of untied grant, he informed that there is no clear instruction about the use of untied grant.

**Observation from PRC Team:**

1. The four PHCs surveyed were selected after the consultation with the BMO and the district authorities after informing them about the purpose of the study and study design. Despite this cooperation from the concerned medical officers at the PHCs was minimal.
2. It is observed that all the PHCs are functioning on ad-hoc basis, with virtually no control from higher authorities. PHCs in Sihawal are functioning at will of medical officers. These are the only two PHCs out of six PHCs under CHC Sihawal, where medical officers are posted.
3. The PHCs are grossly under-utilized, due to lack of manpower, inappropriate infrastructure and non-cooperation among the authorities.
4. None of the MOs could clearly define NRHM goals and key strategies. This shows the apathy and non-seriousness of the staff regarding NRHM implementation.
5. It is observed that MOs and BMOs have no powers to regulate erring staffs and also there are no incentives for staff for good performance.
6. There is no monitoring mechanism in place at PHC level. In Baidhan, sub-centres are not even reporting the performance to the PHCs and they are reporting directly to the BMO.
7. Most of the PHCs in the districts are designated as the BEmoC and 27x7, but no further facilities are provided to strengthen the services.

## Primary Health Centres

**Table P1: Coverage and facilities of Primary Health Centre**

| Coverage and facilities   | CHC 1 : Sihawal    |                   |                    |                   | CHC 2: Baidhan     |                   |                    |                   |
|---|--------------------|-------------------|--------------------|-------------------|--------------------|-------------------|--------------------|-------------------|
|   | PHC 1 (Amiliya)    |                   | PHC 2 (Amarpur)    |                   | PHC 1 (Mada)       |                   | PHC 2 (Khutar)     |                   |
| Number of Sub - Centres covered by PHC                                    | 6                  |                   | 6                  |                   | 19                 |                   | 14                 |                   |
| Population covered  | 28000              |                   | 41081              |                   | 55,000             |                   | 1,03,466           |                   |
|   | PHC 1 (Amiliya)    |                   | PHC 2 (Amarpur)    |                   | PHC 1 (Mada)       |                   | PHC 2 (Khutar)     |                   |
| Distance & Time Taken to travel in public transport / available mode from | Distance (in Kms.) | Time (in Minutes) | Distance (in Kms.) | Time (in Minutes) | Distance (in Kms.) | Time (in Minutes) | Distance (in Kms.) | Time (in Minutes) |
| Nearest Sub Centre in the coverage area                                   | 1                  | 10                | 4                  | 30                | 3                  | 15                | 0                  | 0                 |
| Farthest Sub Centre in the coverage area                                  | 9                  | 30                | 14                 | 60                | 17                 | 60                | 25                 | 120               |
| Nearest CHC   | 13                 | 30                | 52                 | 120               | 35                 | 120               | 14                 | 35                |
| No. of Beds available   |                    |                   |                    |                   |                    |                   |                    |                   |
| Male  | -                  |                   | 3                  |                   | -                  |                   | 1                  |                   |
| Female  | -                  |                   | 3                  |                   | -                  |                   | 1                  |                   |
| Total   | 6                  |                   | 6                  |                   | 2                  |                   | 2                  |                   |
| PHC functioning on 24x7 basis (Yes:1; No: 0)                              | 0                  |                   | 0                  |                   | 0                  |                   | 1                  |                   |
| PHC equipped to provide basis obstetric services (Yes:1; No: 0)           | 0                  |                   | 0                  |                   | 0                  |                   | 0                  |                   |
| PHC with 4-6 beds (Yes:1; No: 0)  | 1                  |                   | 1                  |                   | 0                  |                   | 0                  |                   |

Table P2 : Primary Health Centres by Infrastructure

| Infrastructure  | CHC 1 : Sihawal    |                    | CHC 2: Baidhan  |                   |
|---|--------------------|--------------------|-----------------|-------------------|
|   | PHC 1<br>(Amiliya) | PHC 2<br>(Amarpur) | PHC 1<br>(Mada) | PHC 2<br>(Khutar) |
| PHC functioning in designated govt. Building<br>(Yes:1; No: 0)                              | 1                  | 1                  | 1               | 1                 |
| Labour Room (Yes:1; No: 0)  | 1                  | 1                  | 1               | 1                 |
| Laboratory(Yes:1; No: 0)  | 1                  | 1                  | 1               | 1                 |
| Prominent display boards regarding service<br>availability in local language (Yes:1; No: 0) | 1                  | 0                  | 0               | 0                 |
| Names of JSY beneficiaries maintained in<br>record(Yes:1; No: 0)                            | 1                  | 0                  | 1               | 1                 |
| Pharmacy for drug dispensing and drug storage<br>(Yes:1; No: 0)                             | 1                  | 1                  | 1               | 0                 |
| Separate public utilities (toilets) for males and<br>females (Yes:1; No: 0)                 | 1                  | 1                  | 0               | 1                 |
| Suggestion / complaint box (Yes:1; No: 0)   | 0                  | 0                  | 0               | 0                 |
| OPD rooms / cubicles (Yes:1; No: 0)   | 1                  | 1                  | 1               | 1                 |
| Piped Water Supply (Yes:1; No: 0)   | 1                  | 1                  | 1               | 1                 |
| Electricity Supply (Yes:1; No: 0)   |                    |                    |                 |                   |
| No regular electricity supply   | 1                  | 1                  | 1               | 1                 |
| Regular electricity supply in all parts   | 0                  | 0                  | 0               | 0                 |
| Telephone (Yes:1; No: 0)  | 1                  | 1                  | 1               | 1                 |
| Computer (Yes:1; No: 0)   | 0                  | 0                  | 0               | 0                 |
| Internet (Yes:1; No: 0)   | 0                  | 0                  | 0               | 0                 |
| Type of sewerage system(Yes:1; No: 0)   |                    |                    |                 |                   |
| Soak pit  | 0                  | 0                  | 0               | 0                 |
| Connected to Municipal  | 0                  | 0                  | 0               | 0                 |
| Sewerage  | 0                  | 0                  | 0               | 0                 |
| Open Drain  | 1                  | 1                  | 1               | 1                 |
| Other   | 0                  | 0                  | 0               | 0                 |
| Waste disposal(Yes:1; No: 0)  |                    |                    |                 |                   |
| Buried in a pit   | 0                  | 0                  | 0               | 1                 |
| Collected by an agency  | 0                  | 0                  | 0               | 0                 |
| Incineration  | 0                  | 0                  | 0               | 0                 |
| Thrown in open  | 1                  | 1                  | 1               | 0                 |
| Standby facility (generator etc.) available in<br>working condition(Yes:1; No: 0)           | 1                  | 0                  | 0               | 0                 |
| separate areas for septic and aseptic deliveries<br>available? (Yes:1; No: 0)               | 0                  | 0                  | 0               | 0                 |
| New Born Care Corner available? (Yes:1; No: 0)  | 0                  | 0                  | 0               | 0                 |
| Status of Cleanliness of OPD reported good or fair  | 0                  | 1                  | 1               | 0                 |
| Status of Cleanliness of Compound / Premises<br>reported good or fair                       | 0                  | 1                  | 1               | 0                 |
| Status of Cleanliness of Room/Wards reported<br>good or fair                                | 0                  | 1                  | 0               | 0                 |

Table P3 : Staff Position of in Primary Health Centre

| Type of Staff  | CHC 1 : Sihawal |                     |   |   |                 |                     |   |   | CHC 2: Baidhan |                     |   |   |                |                     |   |   |
|--|-----------------|---------------------|---|---|-----------------|---------------------|---|---|----------------|---------------------|---|---|----------------|---------------------|---|---|
|  | PHC 1 (Amiliya) |                     |   |   | PHC 2 (Amarpur) |                     |   |   | PHC 1 (Mada)   |                     |   |   | PHC 2 (Khutar) |                     |   |   |
|  | S               | Numbers in Position |   |   | S               | Numbers in Position |   |   | S              | Numbers in Position |   |   | S              | Numbers in Position |   |   |
|  |                 | R                   | C | T |                 | R                   | C | T |                | R                   | C | T |                | R                   | C | T |
| Medical Officer  | 1               | 1                   | 0 | 1 | 2               | 1                   | 1 | 2 | 1              | 1                   | 1 | 2 | 1              | 0                   | 1 | 1 |
| Pharmacist   | 0               | -                   | - | - | 0               | -                   | - | - | 0              | -                   | - | - | 0              | -                   | - | - |
| Nurses   | 0               | -                   | - | - | 0               | -                   | - | - | 1              | 0                   | 2 | 2 | 0              | -                   | - | - |
| ANM  | 1               | 0                   | 1 | 1 | 0               | -                   | - | - | 0              | 0                   | 2 | 2 | 0              | -                   | - | - |
| Lab Technician   | 1               | 0                   | 1 | 1 | 1               | 1                   | 0 | 1 | 1              | 1                   | 0 | 1 | 1              | 0                   | 0 | 0 |
| Driver   | 0               | -                   | - | - | 0               | -                   | - | - | 0              | 0                   | 1 | 1 | 0              | 0                   | 1 | 1 |
| Medical Officer AYUSH                                  | 0               | -                   | - | - | 0               | -                   | - | - | 1              | 1                   | 0 | 1 | 1              | 0                   | 1 | 1 |
| Staff Nurse  | 0               | -                   | - | - | 1               | 0                   | 1 | 1 | 0              | -                   | - | - | 1              | 0                   | 1 | 1 |
| Lady Health Visitor                                    | 0               | -                   | - | - | 0               | -                   | - | - | 0              | -                   | - | - | 1              | 1                   | 0 | 1 |
| Lab Assistant  | 0               | -                   | - | - | 0               | -                   | - | - | 1              | -                   | - | - | 1              | 0                   | 0 | 0 |
| Block Health Education and Information Officer (BHEIO) | 0               | -                   | - | - | 0               | -                   | - | - | 0              | -                   | - | - | 0              | -                   | - | - |
| Statistical Assistant                                  | 0               | -                   | - | - | 0               | -                   | - | - | 0              | -                   | - | - | 0              | -                   | - | - |

S: Sanctioned; R: Regular; C: Contractual; T: Total

Table P4 : Status of training of personnel at Primary Health Centre

| Training                       | PHC having personnel trained in specific category of training during 2007 (Yes:1; No: 0) |                 |                |                |
|--------------------------------|--|-----------------|----------------|----------------|
|                                | CHC 1 : Sihawal  |                 | CHC 2: Baidhan |                |
|                                | PHC 1 (Amiliya)  | PHC 2 (Amarpur) | PHC 1 (Mada)   | PHC 2 (Khutar) |
| Pre Service IMNCI              | 0  | 0               | 0              | 0              |
| Safe Abortion Methods          | 0  | 0               | 0              | 0              |
| Skill Birth Attendant Training | 0  | 0               | 0              | 0              |
| New Born Care                  | 0  | 0               | 0              | 1              |

Table P5: Availability of Labour Room in Primary Health Centre

| Labour Room                        | (Yes:1; No: 0)  |                 |                |                |
|------------------------------------|-----------------|-----------------|----------------|----------------|
|                                    | CHC 1 : Sihawal |                 | CHC 2: Baidhan |                |
|                                    | PHC 1 (Amiliya) | PHC 2 (Amarpur) | PHC 1 (Mada)   | PHC 2 (Khutar) |
| Availability of Labour Room        | 1               | 1               | 1              | 1              |
| Labour Room Currently in Use       | 1               | 1               | 1              | 1              |
| Reasons for not using Labour Room  |                 |                 |                |                |
| Non availability of doctors/staff  | -               | -               | -              | -              |
| Poor condition of the labour room  | -               | -               | -              | -              |
| No power supply in the labour room | -               | -               | -              | -              |
| Other                              | -               | -               | -              | -              |

Table P6: Status of performance of Labour Room during 2007-2008

| Number of deliveries                          | Number of deliveries performed in PHC During 2007-2008 |                 |                |                |
|---|--|-----------------|----------------|----------------|
|   | CHC 1 : Sihawal  |                 | CHC 2: Baidhan |                |
|   | PHC 1 (Amiliya)  | PHC 2 (Amarpur) | PHC 1 (Mada)   | PHC 2 (Khutar) |
| Total Institutional Deliveries                | 1387   | 244             | 700            | 414            |
| Deliveries carried out from 8 pm to 8 am      | 629  | 82              | 0              | 127            |
| Institutional deliveries for JSY card holders | 1387   | 244             | 700            | 414            |
| Number of neonates resuscitated               | -  | -               | -              | -              |

Table P7 : Availability of laboratory Testing in PHC

| Availability Laboratory Testing (Yes:1; No: 0)             |                    |                    |                 |                   |
|--|--------------------|--------------------|-----------------|-------------------|
|  | CHC 1 : Sihawal    |                    | CHC 2: Baidhan  |                   |
|  | PHC 1<br>(Amiliya) | PHC 2<br>(Amarpur) | PHC 1<br>(Mada) | PHC 2<br>(Khutar) |
| Haemoglobin  | 1                  | 1                  | 0               | 0                 |
| Urine RE   | 1                  | 1                  | 0               | 0                 |
| Blood sugar  | 1                  | 0                  | 0               | 0                 |
| Blood grouping   | 0                  | 0                  | 0               | 0                 |
| Blood Smear  | 0                  | 1                  | 0               | 0                 |
| Bleeding time, clotting time                               | 0                  | 0                  | 0               | 0                 |
| Diagnosis of RTI/ STIs with wet mounting, grams stain etc. | 0                  | 0                  | 0               | 0                 |
| Blood smear examination for malaria parasite               | 1                  | 1                  | 1               | 1                 |
| Rapid test for Pregnancy                                   | 1                  | 1                  | 0               | 1                 |
| RPR test for Syphilis                                      | 0                  | 0                  | 0               | 0                 |
| Rapid test for HIV   | 0                  | 0                  | 0               | 0                 |

Table P8 : Number of tests done in PHC in last three calendar months

| Type of Test   | Number of tests done in last 3 calendar months |                    |                 |                   |
|--|--|--------------------|-----------------|-------------------|
|  | CHC 1 : Sihawal                                |                    | CHC 2: Baidhan  |                   |
|  | PHC 1<br>(Amiliya)                             | PHC 2<br>(Amarpur) | PHC 1<br>(Mada) | PHC 2<br>(Khutar) |
| Haemoglobin  | 95   | 8                  | -               | -                 |
| Urine RE   | 227  | 5                  | -               | -                 |
| Blood sugar  | 147  | -                  | -               | -                 |
| Blood grouping   | -  | -                  | -               | -                 |
| Blood Smear  | -  | 2                  | -               | -                 |
| Bleeding time, clotting time                               | -  | -                  | -               | -                 |
| Diagnosis of RTI/ STIs with wet mounting, grams stain etc. | -  | -                  | -               | -                 |
| Blood smear examination for malaria parasite               | 40   | 23                 | 72              | 226               |
| Rapid test for Pregnancy                                   | 24   | 4                  | -               | -                 |
| RPR test for Syphilis                                      | -  | -                  | -               | -                 |
| Rapid test for HIV   | -  | -                  | -               | -                 |

Table P9: Status of Specific Interventions

| Status of Specific Interventions (Yes:1; No: 0)  |                    |                    |                 |                   |
|--|--------------------|--------------------|-----------------|-------------------|
|  | CHC 1 : Sihawal    |                    | CHC 2: Baidhan  |                   |
|  | PHC 1<br>(Amiliya) | PHC 2<br>(Amarpur) | PHC 1<br>(Mada) | PHC 2<br>(Khutar) |
| IPHS Facility Survey done  | 0                  | 0                  | 0               | 0                 |
| PHC functioning on 24 x 7 basis (have 1 MO and 3 or more ANMs / Staff Nurses round the clock)? | 0                  | 0                  | 0               | 1                 |
| AYUSH doctor providing services  | 0                  | 0                  | 1               | 1                 |
| Registered Rogi Kalyan Samiti  | 1                  | 1                  | 1               | 1                 |
| RKS generating resources through user fees   | 0                  | 1                  | 1               | 0                 |
| Money generated by RKS being used  | 1                  | 1                  | 1               | 0                 |
| Display board showing no. of meetings & members of RKS   | 0                  | 0                  | 0               | 0                 |
| Feedback mechanism in place for grievances redressed by RKS                                    | 0                  | 0                  | 0               | 0                 |
| Citizens Charter publicly displayed  | 0                  | 0                  | 0               | 0                 |
| All Standard Treatment Guidelines and Protocols available                                      | 1                  | 0                  | 0               | 0                 |
| <b>Availability of Specific Services</b>   |                    |                    |                 |                   |
| Primary management of wounds   | 1                  | 1                  | 1               |                   |
| Primary management fracture  | 0                  | 0                  | 0               | 1                 |
| Management of Neonatal asphyxia, sepsis  | 0                  | 0                  | 0               | 0                 |
| Management of malnourished children  | 0                  | 0                  | 0               | 0                 |
| Minor surgeries like draining of abscess etc   | 1                  | 1                  | 0               | 0                 |
| Primary management of cases of poisoning/snake, insect or scorpion bite                        | 1                  | 0                  | 0               | 1                 |
| Primary management of dog bite cases   | 0                  | 0                  | 0               | 1                 |
| Primary management of burns  | 1                  | 1                  | 1               | 1                 |
| Facility for MTP available   | 0                  | 0                  | 0               | 0                 |
| Management of RTI/STI  | 0                  | 1                  | 0               | 0                 |
| AYUSH services   | 0                  | 0                  | 1               | 1                 |

Table P10 : Availability of selected equipments in PHC

| Equipments available / working (Yes:1; No: 0) |                 |   |                 |   |                |   |                |   |
|---|-----------------|---|-----------------|---|----------------|---|----------------|---|
|   | CHC 1 : Sihawal |   |                 |   | CHC 2: Baidhan |   |                |   |
|   | PHC 1 (Amiliya) |   | PHC 2 (Amarpur) |   | PHC 1 (Mada)   |   | PHC 2 (Khutar) |   |
|   | A               | W | A               | W | A              | W | A              | W |
| Patient Trolley                               | 1               | 1 | 0               | - | 0              | - | 0              | - |
| Examination table                             | 1               | 1 | 1               | 1 | 0              | - | 1              | 1 |
| Delivery table                                | 1               | 1 | 1               | 0 | 1              | 1 | 1              | 1 |
| Wheel chair                                   | 0               | - | 0               | - | 0              | - | 0              | - |
| Stretcher/ trolley                            | 1               | 1 | 1               | 1 | 0              | - | 1              | 0 |
| Oxygen Cylinder                               | 1               | 1 | 0               | - | 0              | - | 0              | - |
| Suction Apparatus                             | 1               | 1 | 0               | - | 0              | - | 1              | 1 |
| Infant warmer                                 | 1               | 1 | 0               | - | 0              | - | 0              | - |
| Radiant Warmer                                | 1               | 1 | 0               | - | 0              | - | 0              | - |
| Cradle  | 0               | - | 0               | - | 0              | - | 0              | - |
| Autoclave                                     | 1               | 1 | 0               | - | 0              | - | 1              | 0 |
| Sterilisation equipment                       | 1               | 1 | 1               | 1 | 0              | - | 0              | - |
| Bag & Mask                                    | 1               | 1 | 0               | - | 1              | 1 | 0              | - |
| Laryngoscope                                  | 0               | - | 0               | - | 0              | - | 0              | - |
| Oxygen Mask                                   | 1               | 1 | 0               | - | 0              | - | 0              | - |
| Thermometer                                   | 1               | 1 | 1               | 1 | 1              | 1 | 0              | - |
| Suction Machine                               | 1               | 1 | 0               | - | 0              | - | 1              | 1 |
| Water Purifier                                | 1               | 1 | 1               | 1 | 0              | - | 0              | - |
| Microscope                                    | 1               | 1 | 1               | 1 | 1              | 1 | 1              | 1 |
| Haemoglobinometer                             | 1               | 0 | 0               | - | 1              | 1 | 1              | 1 |
| Auto Analyser                                 | 0               | - | 0               | - | 0              | - | 0              | - |
| Autoclave                                     | 1               | 0 | 0               | - | 0              | - | 0              | - |
| Resuscitation equipment                       | 1               | 1 | 0               | - | 0              | - | 0              | - |

A: Available; W: Working



**Table P12 A: Service Outcome (based on data for last three months)**  
(In case where SC/ST/Others breakup is not available, only 'Total' column may be given and tables P12A to P12D may be clubbed into one table.)

| Indicator   | CHC 1: Sihawal                                     |    |        |       |
|---|--|----|--------|-------|
|   | Average monthly number reported in PHC 1 (Amiliya) |    |        |       |
|   | SC   | ST | Others | Total |
| Total ANC Registration                                      | -  | -  | -      | -     |
| Total JSY cases registered                                  | -  | -  | -      | -     |
| Ist Trimester Registration                                  | -  | -  | -      | -     |
| ANC given 3 Checkups  | -  | -  | -      | -     |
| ANC given TT1   | -  | -  | -      | -     |
| ANC given TT2 + Booster                                     | -  | -  | -      | -     |
| ANC completed IFA Prophylaxis                               | -  | -  | -      | -     |
| Total Institutional Deliveries                              | -  | -  | -      | -     |
| No. of JSY cases (out of total institutional deliveries)    | -  | -  | -      | -     |
| No. of infants given BCG                                    | -  | -  | -      | -     |
| No. of infants given DPT3                                   | -  | -  | -      | -     |
| No. of infants given Measles                                | -  | -  | -      | -     |
| No. of infants given Vit. A-first dose                      | -  | -  | -      | -     |
| Children given IFA Syp.                                     | -  | -  | -      | -     |
| IUD Inserted  | -  | -  | -      | -     |
| Male sterilisation carried out                              | -  | -  | -      | -     |
| Female sterilisation carried out                            | -  | -  | -      | -     |
| Total indoor patients                                       | -  | -  | -      | -     |
| Total outdoor patients                                      | -  | -  | -      | -     |
| RTI/STI cases treated                                       | -  | -  | -      | -     |
| Number of maternal deaths in 2007-2008                      | -  | -  | -      | -     |
| No. of cases of obstetric complications referred beyond PHC | -  | -  | -      | -     |
| No. of cataract surgeries carried out                       | -  | -  | -      | -     |
| No. of new TB cases enrolled for DOTS                       | -  | -  | -      | -     |
| No. of new leprosy cases registered for MDT                 | -  | -  | -      | -     |
| No. of leprosy cases completed treatment for leprosy        | -  | -  | -      | -     |

Table P12 B: Service Outcome (based on data for last three months)

| Indicator   | CHC 1: Sihawal                                     |    |        |       |
|---|--|----|--------|-------|
|   | Average monthly number reported in PHC 2 (Amarpur) |    |        |       |
|   | SC   | ST | Others | Total |
| Total ANC Registration                                      | -  | -  | -      | -     |
| Total JSY cases registered                                  | -  | -  | -      | -     |
| Ist Trimester Registration                                  | -  | -  | -      | -     |
| ANC given 3 Checkups  | -  | -  | -      | -     |
| ANC given TT1   | -  | -  | -      | -     |
| ANC given TT2+Booster                                       | -  | -  | -      | -     |
| ANC completed IFA Prophylaxis                               | -  | -  | -      | -     |
| Total Institutional Deliveries                              | -  | -  | -      | -     |
| No. of JSY cases (out of total institutional deliveries)    | -  | -  | -      | -     |
| No. of infants given BCG                                    | -  | -  | -      | -     |
| No. of infants given DPT3                                   | -  | -  | -      | -     |
| No. of infants given Measles                                | -  | -  | -      | -     |
| No. of infants given Vit. A-first dose                      | -  | -  | -      | -     |
| Children given IFA Syp.                                     | -  | -  | -      | -     |
| IUD Inserted  | -  | -  | -      | -     |
| Male sterilisation carried out                              | -  | -  | -      | -     |
| Female sterilisation carried out                            | -  | -  | -      | -     |
| Total indoor patients                                       | -  | -  | -      | -     |
| Total outdoor patients                                      | -  | -  | -      | -     |
| RTI/STI cases treated                                       | -  | -  | -      | -     |
| Number of maternal deaths in 2007-2008                      | -  | -  | -      | -     |
| No. of cases of obstetric complications referred beyond PHC | -  | -  | -      | -     |
| No. of cataract surgeries carried out                       | -  | -  | -      | -     |
| No. of new TB cases enrolled for DOTS                       | -  | -  | -      | -     |
| No. of new leprosy cases registered for MDT                 | -  | -  | -      | -     |
| No. of leprosy cases completed treatment for leprosy        | -  | -  | -      | -     |

Table P12 C: Service Outcome (based on data for last three months)

| Indicator   | CHC 2: Baidhan                                  |    |        |       |
|---|---|----|--------|-------|
|   | Average monthly number reported in PHC 1 (Mada) |    |        |       |
|   | SC  | ST | Others | Total |
| Total ANC Registration                                      | 4   | 4  | 4      | 12    |
| Total JSY cases registered                                  | -   | -  | -      | -     |
| Ist Trimester Registration                                  | -   | -  | -      | -     |
| ANC given 3 Checkups  | -   | -  | -      | -     |
| ANC given TT1   | -   | 4  | 3      | 7     |
| ANC given TT2+Booster                                       | 4   | 4  | 4      | 12    |
| ANC completed IFA Prophylaxis                               | 4   | 4  | 4      | 12    |
| Total Institutional Deliveries                              | 55  | 47 | 134    | 236   |
| No. of JSY cases (out of total institutional deliveries)    | -   | -  | -      | 236   |
| No. of infants given BCG                                    | -   | -  | -      | -     |
| No. of infants given DPT3                                   | -   | -  | -      | -     |
| No. of infants given Measles                                | -   | -  | -      | -     |
| No. of infants given Vit. A-first dose                      | -   | -  | -      | -     |
| Children given IFA Syp.                                     | -   | -  | -      | -     |
| IUD Inserted  | -   | -  | -      | -     |
| Male sterilisation carried out                              | -   | -  | -      | -     |
| Female sterilisation carried out                            | -   | -  | -      | -     |
| Total indoor patients                                       | 55  | 47 | 134    | 236   |
| Total outdoor patients                                      | -   | -  | -      | 1710  |
| RTI/STI cases treated                                       | -   | -  | -      | -     |
| Number of maternal deaths in 2007-2008                      | -   | -  | -      | -     |
| No. of cases of obstetric complications referred beyond PHC | -   | -  | -      | -     |
| No. of cataract surgeries carried out                       | -   | -  | -      | -     |
| No. of new TB cases enrolled for DOTS                       | -   | -  | -      | -     |
| No. of new leprosy cases registered for MDT                 | -   | -  | -      | -     |
| No. of leprosy cases completed treatment for leprosy        | -   | -  | -      | -     |

Table P12 D: Service Outcome (based on data for last three months)

| Indicator   | CHC 2: Baidhan                                    |    |        |       |
|---|---|----|--------|-------|
|   | Average monthly number reported in PHC 2 (Khutar) |    |        |       |
|   | SC  | ST | Others | Total |
| Total ANC Registration                                      | 4   | 4  | 47     | 55    |
| Total JSY cases registered                                  | 4   | 4  | 47     | 55    |
| Ist Trimester Registration                                  | 2   | 3  | 29     | 34    |
| ANC given 3 Checkups  | -   | -  | -      | -     |
| ANC given TT1   | 0   | 2  | 22     | 24    |
| ANC given TT2+Booster                                       | 1   | 1  | 25     | 27    |
| ANC completed IFA Prophylaxis                               | -   | -  | -      | -     |
| Total Institutional Deliveries                              | 30  | 41 | 146    | 217   |
| No. of JSY cases (out of total institutional deliveries)    | 4   | 4  | 47     | 217   |
| No. of infants given BCG                                    | -   | -  | -      | 66    |
| No. of infants given DPT3                                   | -   | -  | -      | 20    |
| No. of infants given Measles                                | -   | -  | -      | 44    |
| No. of infants given Vit. A-first dose                      | -   | -  | -      | 44    |
| Children given IFA Syp.                                     | -   | -  | -      | -     |
| IUD Inserted  | 0   | 0  | 10     | 10    |
| Male sterilisation carried out                              | -   | -  | -      | -     |
| Female sterilisation carried out                            | 50  | 44 | 181    | 275   |
| Total indoor patients                                       | -   | -  | -      | 962   |
| Total outdoor patients                                      | -   | -  | -      | -     |
| RTI/STI cases treated                                       | -   | -  | -      | -     |
| Number of maternal deaths in 2007-2008                      | -   | -  | -      | -     |
| No. of cases of obstetric complications referred beyond PHC | -   | -  | -      | -     |
| No. of cataract surgeries carried out                       | -   | -  | -      | -     |
| No. of new TB cases enrolled for DOTS                       | -   | -  | -      | -     |
| No. of new leprosy cases registered for MDT                 | -   | -  | -      | -     |
| No. of leprosy cases completed treatment for leprosy        | -   | -  | -      | -     |

Table P13 : Status of record maintenance (Yes:1; No: 0)

| Type of Records          | CHC 1 : Sihawal    |                    | CHC 2: Baidhan  |                   |
|--------------------------|--------------------|--------------------|-----------------|-------------------|
|                          | PHC 1<br>(Amiliya) | PHC 2<br>(Amarpur) | PHC 1<br>(Mada) | PHC 2<br>(Khutar) |
| Ante Natal Register      | 0                  | 1                  | 0               | 1                 |
| Eligible Couple Register | 0                  | 0                  | 0               | 1                 |
| Post Natal Care Register | 0                  | 0                  | 0               | 0                 |
| Family Planning Register | 0                  | 0                  | 0               | 1                 |
| Birth & Death Register   | 1                  | 1                  | 0               | 1                 |
| Immunisation Register    | 0                  | 0                  | 0               | 1                 |
| Meeting Register         | 1                  | 1                  | 0               | 1                 |
| JSY Register             | 0                  | 1                  | 1               | 1                 |
| Untied Funds Register    | 0                  | 0                  | 0               | 0                 |

## Chapter 5 Sub Centre

As per the study design, three SCs are to be covered for the survey under each selected PHCs and one of the three SCs should be farthest from the PHC. Accordingly, we have covered 12 SCs under four PHCs. The list of selected SCs as per the study design is given in Table 2 of the introductory chapter. The present chapter findings are based on information obtained from 10 of the 12 sub-centres covered. In two sub-centres (SC Spahi under PHC, Amarpur and SC Karsualal under PHC, Mada) there were no ANM posted and hence, sub-centre information could not be obtained.

### 1. Coverage by Sub Centres

Table S1 shows that the number of villages covered by the SCs varies from 3 to 12 and the population covered varies from 2,198 to 9,734. The average number of villages covered by the SCs is 6 and average population covered is 7,130. The average distance between the PHC and SC is 7.8 kilometres and the actual distance varies between 3 to 18 kilometres. The average time taken to travel in public/available mode of transport from furthest village to SC is 27 minutes, from SC to PHC is 35 minutes and SC to CHC is 65 minutes. The number of ASHAs working under the SCs varies from 3 to 11 and the average for all the 10 SCs comes to be 6 ASHAs.

### 2. Availability of Infrastructure

Out of the 10 SCs, 9 (90 percent) are having their own government building. IPHS facility survey has not been done in any of the sub-centre. Labour room is available only in 5 (50 percent) of the SCs. Basic amenities such as piped water supply and regular electricity is available to only a few sub-centres. Most of the sub-centres are having handpump adjacent to the SC building. In that sense, the sub-centres are having water supply facility. Telephone facility is available for all the SCs since ANMs are keeping mobile with them. The type of sewerage system of the SCs shows that majority (60 percent) are having open drain system and one-third having soak pit. Almost all the sub-centres dispose their bio-medical waste by throwing them in open and only one SC do so by burying in a pit.

### 3. Residential Status of ANM

More than two-thirds SCs (8 out of 10) have quarters for ANM. Among the eight SCs with ANM quarters, only in three SCs ANMs are staying in quarters. Out of the total, six ANMs resides outside the village they are posted and only one ANM resides in the village of posting. The reason cited by the ANMs for not staying in SC quarter is non availability of water/power facility in the SC, family related reasons and security reasons.

### 4. Availability of Infrastructure at SCs

Staff: All the 12 SCs are having at least one health worker (male or female) working in regular position and 3 SCs have both male and female workers in regular position. The staff availability shows that 17 percent of the sub-centres have only male health worker, female health worker is available in 58 percent of SCs and 25 percent have both male and female health workers in regular positions. None of SCs have any contractual ANMs.

Equipments: None of the SCs have all the listed equipments available with them. BP Apparatus, Weighing Machine and Foetoscope are the common equipments available with 90 percent of the SCs. Sterilizer, Haemoglobinometer and Thermometer are the next most commonly available equipments with 60 percent of the SCs. Less than half of SCs are having Reagent Strips for Urine Test, Cusco Speculum, Mucus extractor and Suction Machine. Height Measuring Scale and Bag and Mask are not available to any of the SCs. It is observed that most of the available equipments are though in working condition, they are not in use frequently. It is also observed that in less than half of the SCs, vital equipments such as BP Instrument, Reagent Strips, Weighing Machines are in working conditions.

Drugs and Kits: Availability of drugs and kits on the date of survey was collected from the SCs. The information was obtained for 16 items including drugs and kits. The availability of drugs shows poor picture. Only three items IFA tablets, rapid pregnancy test kit (Nishchay kit) and disposal gloves are available with more than half of the SCs. Items such as Emergency Contraceptive Pills, Disposable Delivery Kit, Tab. Flucanazole Vaginal, Tab. Misoportal and Partographs are not available in any SC. Rajmilan sub-Centre has

maximum number (10 out of 16) of drugs and kits available on the day of survey, while SC, Sharda has none of the listed items on the day of survey. It is observed that in all the SCs the placement of drugs was in very shabby manner. No ANM could explain about the process of procuring drugs and its distribution. ANM at Sharda and Khori distributed all the IFA tables in one day after they received it. At SC Bihara, ORS was out of stock on the day of survey, it is observed that all the ORS packets were consumed in a single day without any mention of places of distribution. In all the sub-centres, no proper stock register is maintained for drugs. ANM at Rajmilan, could not recognize that IUD being used by her is A-380 type of IUD. It is most common practice among the ANMs to distribute all the condoms, oral pills and ORS to the Anganwadi and Depot Holder in one go and they don't keep these items to distribute while making visit to the area.

#### **5. Labour Room and number of deliveries conducted**

As mentioned above, only five out of 10 SCs (50 percent) have labour rooms. Among the five SCs with labour room, none are using their labour room for conducting deliveries. It is observed from the ANM's records, that home deliveries are prevailing in the area irrespective of the CHC block. The reason for the nonuse of labour room cited by ANMs are; non-stay by ANM at SC, poor condition of SC and lack of confidence by ANMs. It is argued by ANMs, that state government has clear instruction for not to conduct any delivery at SC or at homes. Another reason was lack of equipment and referral linkages.

#### **6. Specific Skills and Procedures**

It is most crucial area of service delivery at sub-centre level, that ANMs should provide services according to the set norms and guidelines. Under NRHM, major thrust is on to register the pregnancy and to provide full range of antenatal and postnatal care to the expectant mother. ANMs in all the 10 SCs asked whether they register pregnancy within three months, carryout 3 ANC visits as per the RCH schedule, provide TT and IFA, and Immunisation Services. It is found that only half of the ANMs register pregnancy within three months. None of ANMs in Sihawal ensure first trimester registration. PRC teams asked ANMs to show the ANC register, it is found that none of the pregnancies registered

was within first trimester. Only one-third of ANMs said that they carryout ANC visits as per the RCH schedule. All the remaining ANMs had no knowledge about RCH schedule of ANC visits. Ninety percent of all the ANMs reported that they carryout specific examination – blood pressure, haemoglobin, and urine test. These three checks are important to identify high risk women. It is observed that, ANMs are using a non-standard method for checking haemoglobin using a strip. It is informed by them that, these are supplied from the CHC. Most of the ANMs have no facility for urine test. As discussed in the previous section that only 40 percent of ANMs have functioning BP instruments, their response to carryout specific examination is should be interpreted with caution. It also understood that most of the ANMs do not know how to gauge blood pressure. Four-fifths of the ANMs reported that that they identify high risk pregnancies. Only one-third of the ANMs reported that they are carrying out IUCD insertion/removal. Among the ANMs who reported that they carry out IUCD insertion/removal, all of them said that IUCD A380 is used and its supply is regular. Half of the ANMs reported that they are trained on insertion/removal of IUCD A380. Out of 10, six ANM reported that they are trained in syndromes treatment of RTI/STI. Immunization services are being provided by all the ANMs.

## 7. Service Outcome

The service outcome data for the last three months show that, on an average, each ANM has registered 58 ANCs. Out of the total ANCs, the average number registered by the ANMs in 1st Trimester is 31. None of the ANC was done according to RCH Schedule. On an average, each ANM has identified 1.3 high risk cases, referred 19 pregnant women to next higher facility. None of the ANM has reported any neonate infections during the last three months. Among the nine SCs where ANM is carrying out IUCD insertion/removal, the average IUCD insertion is 10 during 2007-2008. The service outcome data reveal that the performance of the ANMs varies across the SCs.

## 8. Status of Record Maintenance

To know the status of record maintenance, the information was collected for 11 registers from the SCs. Registers for household survey, ANC, eligible couple, immunization and cashbook are maintained by 8 out of 10 SCs. The record of post natal visits by ANM, birth and death and untied fund is maintained at 6 SCs. There is no record or register to maintain family planning services at 3 SCs. Meeting register is maintained by only one-third of SCs. It is observed that, most of the registers are not updated since long. ANMs informed that they don't get time to complete all the register entries, instead they write all the record in a single register which is more convenient to keep every time they are in some meeting at PHC or CHC. It is found that most of the registers although maintained by SCs, not all the columns are filled-up. For example: in ANC register, information about height, weight, BP, Hemoglobin and any high risk symptoms related to pregnant women are not written. It is also observed, that all the ANMs have different kind of registers, and there is no similarity in the contents of these registers.

Eligible couple registers are not updated by any of the ANMs, entries in these registers were three to four years back. It is surprising to note that only half of the ANMs are maintaining JSY registers that too with meager entries. No specific entry in this register is found except name of the woman, her age and date of delivery, and money given to the beneficiary and to ASHA. On an average every sub-centre is maintaining 7 registers. All eleven registers are maintained by only one SC. It is said by ANMs that since most of the services for pregnant women and family planning acceptors are provided by PHCs and CHCs, they have no information about these cases. Only immunization register is maintained properly by all the ANMs. It can be seen from table S11, that most of the information under NRHM is not maintained by all the SCs. Eligible Couple Register is maintained by 92 percent of the SCs. Three-fourth of SCs maintain Household Survey Register. Only two-third of the SCs maintain Untied Funds Register and Cash Book. Meeting Register is maintained by only one-fourth of the SCs. The record maintenance by each individual SC shows that 2 SCs maintain all the 11 registers, three maintain 10 registers, 3 maintain 9 registers, another 3 maintain 8 registers and 1 maintain 7 registers.

## 9. JSY Scheme – Awareness and Performance

Awareness: All the ANMs are aware about the JSY and the amounts to be given to the beneficiaries. All the ANMs reported that there is an increase in the demand for institutional deliveries after the implementation of the JSY scheme. However, ANM of Sihawal block were of the opinion that since delivery facility is mostly not available at PHCs all the registered pregnancies are not going for institutional delivery. All the ANMs reported that under JSY Scheme, incentive amount to the JSY beneficiaries are being paid by cheque. ANMs also informed that no amount is being paid to the women delivering at home. The time to pay the incentive under JSY cases are reported differently by the ANMs. Three out of ten informed that, JSY beneficiary gets the cheque within a week of delivery. Forty percent of ANMs reported that beneficiary in their area get the payment at least after 2 week of the delivery. The reason cited by ANMs for such delay are – non availability of funds at CHC level, non-availability of cheque books etc. Only half of the ANMs reported that the transport support is available under JSY for shifting the pregnant woman from SC to PHC, in case of emergency. None of the ANMs have any register to record JSY expenditure.

Performance JSY Scheme: All the 10 SCs together have registered 466 JSY cases during the last three calendar months and the average number per SC turns out to be 58 cases. Except two SCs (Khori and Sharda) all the other 8 SCs have reported that they have registered the JSY cases in last three months of the pregnancy. The average number of JSY cases resulted in institutional deliveries during the last three months is 38. ANMs have not disbursed any amount to the JSY cases in last three calendar months. In Madhya Pradesh, still the funds are not made available to the SCs for timely payments to the JSY cases. ANMs informed that since all the payments are made through CHC / PHC they have no idea about any amount that may be given to JSY cases from SCs. ANMs also pointed out that many times payments to JSY beneficiaries are delayed at CHC / PHC, this causes discontent among the JSY beneficiaries, since mostly they are motivated by us for institutional delivery. None of the SCs have given any amount to ASHA under JSY scheme.

## 10. Status of Untied Grants

In all the surveyed SCs untied grant was given during 2007-08. A sum of Rs. 20,000 was given to each sub-centre towards untied grant and maintenance. However, none of the ANMs could produce proper record about the use of untied grant and maintenance carried out at SCs. Eight SCs reported that they have utilized untied grant. All the SCs have joint account with the Sarpanch / Secretary of Gram Panchayat. It is noteworthy to mention that none of the ANMs are satisfied with this setup. ANMs were of opinion that money should be kept with them and no involvement of panchayat is required. It is found that only 6 SCs have maintained the required records and registers to record the decision about spending of untied grant. However, records of expenditure is available with 80 percent of the SCs. Seventy percent of the ANMs reported that these records are reviewed by the Sarpanch. SCs have reported the following expenditure from the Untied Grants: purchase of drugs (70 percent), arranging transport (10 percent), electricity/telephone bills (20 percent), water coolers for patients (30 percent), and whitewash/maintenance (60 percent). Some of the SCs also spent the untied grant to purchase BP instrument, thermometer, bed sheets, chairs, tables, stationery and some also used it for photocopying reporting proforma etc.

## 11. Remarks by ANMs

ANMs have expressed different views about the NRHM and its interventions at sub-centre level.

Views expressed by ANMs are given in verbatim -

### *ANMs of Sihawal Blocks:*

1. *'Sub-Centre ka apna building hona chahiye. Abhi hum ayurvedic aspatal me he dekhte hai'* - Sub-centre should have its own building, presently it is functioning from Ayurvedic dispensary. (SC - Rajgarh)
2. *'Swasthya Kendra me paani, bijali aur boundary wall nahi hai. ANM quarter bhi thik nahi hai. Chhat, toilet ki koi suvidha nahi hai. Sub-centre me bhi paani aur toilet - bathroom hona chahiye'* There is no provision of water, electricity, boundary wall in the sub-centre. ANMs residence also not properly maintained. There is a need to repair roof, toilet and electricity. SC also should have toilet facility. (SC - Baghor)

3. *'Hamare kshetra ka viatar adbhik hai. Aawagaman ke sadhan nahi hai. Isliye sewayen dene me asamarth hote hai'* Area under this sub-centre is very large. There is no transportation available in this area. Therefore, I am unable to provide services properly (SC – Khori)
4. *'Ek aur karmachari SC par hona chahiye. Doctor ki posting PHC per hona chahiye'* There should be one more person (male worker) at sub-centre. Doctor should be posted at the PHC (SC – Sharda)
5. *'MPW ki niyukti sahayak ke roop me ho jaye. Data ki entry ke liye proper formatting ke register mile jisase record rakbna aasan ho jeyega. Parivahan ka koi vyaktigat sadhan upalabdh karwana chahiya'* There should be an AMW as assistant. Proper formats for data entry should be given so that reporting can be made easily. For transportation, some vehicle should be provided. (SC – Hinoti)
6. *'Boundary wall hona chahiye. Paani ki samuchit suvidha hona chahiya. Atirikt karma hone par upswasthya Kendra par hi prasav ho sakta hai. Sarpanch paisa nikalne ke liye aana-kani karte hai, paisa dete hai tabhi sign karte hai. Kebaar me hi dus hazar ki poori rashi nikal lete hai'* Boundary wall and water facility for the sub-centre is required.. If additional room is constructed, delivery can be conducted at the sub-centre itself. Sarpanch did not support in utilizing untied grant. He asks for money to withdraw the amount. He withdrew all the amount of Rs. 10,000 in one go. (SC – Rajmilan)
7. *'Gaon ke swasthya Kendra me ANM ke atirikt staff hone chahiya. Lab hone chahiye. Paani, bijali ki bhi vyavastha hone chahiya'*. There should be more staff other than ANM at the PHC. Laboratory facility and provision of water and electricity is required. (SC – Makrohar).
8. *'Upswasthya Kendra me ek doctor ki vyavastha hona chahiye. Ek fridge hone chahiya'*. A doctor is need in sub-centre. One fridge is also required. (SC – Tiyyara).
9. *'Gaon ke logon me jagarookta lane ke liye panchayat ke logo ko bhumika aada karma chahiye. ANM ke paas awasthya Kendra me dawaiyan uplabdh hona chahiya'*. Panchayat representatives should play a proactive role in spreading awareness in the community. ANM should be given medicines to keep in SC. (SC – Jarha)
10. *'ASHA, anganwadi karyakarta ANM ke kaam me sahayog Karen. Mukh kosh ka khata alag se khola jaye evem MPW ke saath me rakha jaye, jisase kaam achha ho'*. ASHA and AWW should help ANM in the work. Untied grant account should be separately opened jointly with the MPW, so that work can be done smoothly (SC – Bihar)

**Observation from PRC Team:**

- Despite the prior information to the block medical officer about the rapid appraisal activity by PRC, there was no information to the ANMs in this regard. This has leads to improper response to the PRC team at various SCs. At two SCs (Karsualal and Sapahi) concerned ANMs and MPW did not turned-up even after repeated calls.
- Most of the SCs are not providing any services from their building. These SCs are provided with new building during last 4-5 years. All the SCs are having essential infrastructure such as water, fan, equipments, adjoining quarter for ANM. These SCs should be made functional at first.
- No IEC materials was found in any SC. None of the SC have wall writing on health programmes and related with NRHM.
- Involvement in VHSCs is not clear to ANM. There is no record about formation to VHSC, meeting with ASHA and utilization of untied grant with the ANMs.
- ANMs have different reporting formats and registers. There is no commonalities exists regarding record keeping for JSY, untied grant and stock registers.
- Medicines / drugs available with the ANMs are not of use, as most of them were supplied just a month before expiry date.

## Sub Centre

Table S1 : Sub Centres Coverage

| Coverage of Sub-Centre  | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        |                        |
|---|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|------------------------|
|   | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        | Average per Sub Centre |
|   | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |                        |
|   | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |                        |
| Number of villages covered by Sub Centre                                    | 9              | 7      | 5      | 12             | 9      | -      | 4              | -         | 3        | 3             | 4     | 4      | 6                      |
| Population coverage   | 2198           | 8444   | 9735   | 6550           | 6230   | -      | 9000           | -         | 5146     | 8330          | 8234  | 7438   | 7130                   |
| Distance between PHC and Sub Centre   | 4.0            | 4.0    | -      | 3.0            | 8.0    | -      | 13.0           |           | 18.0     | 10.0          | 5.0   | 5.0    | 7.8                    |
| Time Taken (In minutes) to travel in public transport / available mode from |                |        |        |                |        |        |                |           |          |               |       |        |                        |
| Farthest village to Sub Centre  | 30             | 30     | 30     | 30             | 45     | -      | 30             | -         | 15       | 10            | 30    | 15     | 26.5                   |
| Sub Centre to PHC   | 30             | 20     | -      | 30             | 30     | -      | 60             | -         | 30       | 60            | 40    | 15     | 35.0                   |
| Sub Centre to CHC   | 60             | 30     | 30     | 90             | 180    | -      | 90             | -         | 60       | 40            | 40    | 30     | 65.0                   |
| No. of ASHAs working in the Sub Centre area                                 | 9              | 5      | 4      | 11             | 8      | -      | 3              | -         | 3        | 4             | 5     | 4      | 5.6                    |

Table S2: Sub Centres Infrastructure

| Availability of Infrastructure in Sub Centres (Yes:1; No: 0) | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres having respective facility |
|--|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|---|
|  | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |   |
|  | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |   |
|  | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |   |
| Functioning in designated government building                | 1              | 0      | 0      | 0              | 0      | -      | 1              | -         | 1        | 0             | 1     | 0      | 40.0  |
| IPHS Facility Survey Done                                    | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Labour Room  | 0              | 0      | 1      | 0              | 1      | -      | 0              | -         | 1        | 1             | 1     | 0      | 50.0  |
| Piped water supply   | 0              | 1      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 10.0  |
| Regular electricity supply                                   | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 1             | 0     | 0      | 10.0  |
| Telephone  | 1              | 1      | 1      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 100.0                                       |
| Type of sewerage system                                      |                |        |        |                |        |        |                |           |          |               |       |        |   |
| Soak pit   | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 1        | 1             | 0     | -      | 30.0  |
| Connected to Sewerage line                                   | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 1     | 0      | 10.0  |
| Open Drain   | 1              | 1      | 1      | 1              | 1      | -      | 0              | -         | 0        | 0             | 0     | 1      | 60.0  |
| Waste disposal   |                |        |        |                |        |        |                |           |          |               |       |        |   |
| Buried in a pit  | 0              | 0      | 1      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 10.0  |
| Collected by an agency                                       | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Incineration   | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Thrown in open   | 1              | 1      | 0      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 90.0  |

**Table S3 : Sub Centres with ANM staying with or away from SC village by distance from Sub Centre and reasons for not staying in Sub Centre quarter**

| Residential status of ANM (Yes:1; No: 0)  | Sub Centre (Names to be given) |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres |
|---|--------------------------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|------------------|
|   | CHC 1: Sihawal                 |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |                  |
|   | PHC 1: Amilia                  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |                  |
|   | Rajgarh                        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |                  |
| Sub Centre with ANM quarter               | 0                              | 1      | 1      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 0      | 80.0             |
| Sub Centre with ANM                       |                                |        |        |                |        |        |                |           |          |               |       |        |                  |
| staying in SC's quarters                  | 0                              | 1      | 0      | 0              | 0      | -      | 1              | -         | 0        | 1             | 0     | 0      | 37.5             |
| staying within SC's village               | 0                              | -      | 0      | 0              | 0      | -      | 0              | -         | 0        | -             | 1     | 0      | 14.3             |
| staying outside SC's village              | 1                              | -      | 1      | 1              | 1      | -      | -              | -         | 1        | -             | -     | 1      | 85.7             |
| Reason for ANM not staying on SC quarter: |                                |        |        |                |        |        |                |           |          |               |       |        |                  |
| Quality of quarter                        | 0                              | -      | 1      | 1              | 0      | -      | -              | -         | 0        | -             | 0     | 0      | 40.0             |
| Family related reason                     | 0                              | -      | 0      | 0              | 0      | -      | -              | -         | 0        | -             | 0     | 0      | 0.0              |
| Security reason                           | 0                              | 0      | 1      | 0              | 0      | -      | -              | -         | 1        | -             | 0     | 0      | 10.0             |

Table S4 : Sub Centres with Staff in Position

| Availability of Staff (Yes: 1; No: 0) | Sub Centre (Names to be given) |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres with specific staff available |
|---------------------------------------|--------------------------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|--|
|                                       | CHC 1: Sihawal                 |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |  |
|                                       | PHC 1: Amilia                  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |  |
|                                       | Rajgarh                        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |  |
| Health Worker Male in position        | 1                              | 0      | 1      | 1              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 30.0   |
| Health Worker Female in position      | 1                              | 1      | 1      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 100.0  |
| Additional ANM contractual            | 0                              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0  |

Table S5: Availability of Labour Room in Sub Centre

| Labour Room (Yes: 1; No: 0)       | Sub Centre (Names to be given) |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres |
|-----------------------------------|--------------------------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|------------------|
|                                   | CHC 1: Sihawal                 |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |                  |
|                                   | PHC 1: Amilia                  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |                  |
|                                   | Rajgarh                        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |                  |
| Availability of Labour Room       | 0                              | 0      | 1      | 0              | 1      | -      | 0              | -         | 1        | 1             | 1     | 0      | 50.0             |
| Labour Room currently in use      | -                              | -      | 0      | -              | 0      | -      | -              | -         | 0        | 0             | 0     | -      | 0.0              |
| Reasons for not using Labour Room |                                |        |        |                |        |        |                |           |          |               |       |        |                  |
| ANM not staying                   | 0                              | 0      | 1      | 0              | 1      | -      | -              | -         | 1        | 0             | 1     | 0      | 80.0             |
| Poor condition                    | 0                              | 0      | 1      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 20.0             |
| No electric supply                | 0                              | 0      | 1      | 0              | 1      | -      | 0              | -         | 1        | 0             | 0     | 0      | 60.0             |
| Other                             | 0                              | 0      | 1      | 0              | 1      | -      | 0              | 0         | 0        | 1             | 0     | 0      | 60.0             |



Table S7 A : Sub Centres with availability of equipments

| Availability of the equipments<br>(Yes: 1; No: 0) | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres with equipment available |
|---|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|---|
|   | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |   |
|   | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |   |
|   | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |   |
| Sterliser   | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 0        | 1             | 0     | 1      | 60.0                                      |
| Haemoglobinometer                                 | 1              | 0      | 0      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 60.0                                      |
| Bag & Mask  | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                                       |
| Suction Machine                                   | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 0     | 0      | 10.0                                      |
| Thermometer                                       | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 0             | 0     | 1      | 60.0                                      |
| BP Apparatus                                      | 1              | 1      | 1      | 0              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 90.0                                      |
| Weighing Machine                                  | 1              | 1      | 1      | 0              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 90.0                                      |
| Height Measuring Scale                            | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                                       |
| Reagent Strips for Urine Test                     | 0              | 0      | 1      | 0              | 0      | -      | 1              | -         | 1        | 0             | 0     | 1      | 40.0                                      |
| Cuscos Speculum                                   | 0              | 0      | 1      | 0              | 0      | -      | 0              | -         | 1        | 1             | 0     | 0      | 30.0                                      |
| Mucus Extractor                                   | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 0     | 0      | 10.0                                      |
| Fetoscope   | 1              | 1      | 1      | 0              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 90.0                                      |

Table S7 B : Percentage of SCs with functional equipments

| Functional equipments<br>(Yes: 1; No: 0) | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres with functional equipment |
|--|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|--|
|  | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |  |
|  | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |  |
|  | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |  |
| Sterliser                                | 1              | 0      | 0      | -              | -      | -      | 0              | -         | 0        | 1             | -     | 1      | 42.9                                       |
| Haemoglobinometer                        | 1              | -      | -      | -              | -      | -      | 0              | -         | 1        | 1             | 1     | 1      | 62.5                                       |
| Bag & Mask                               | -              | -      | -      | -              | -      | -      | -              | -         | -        | -             | -     | -      | 0.0  |
| Suction Machine                          | -              | -      | -      | -              | -      | -      | 1              | -         | -        | -             | -     | -      | 100.0                                      |
| Thermometer                              | 0              | 1      | 1      | -              | -      | -      | 1              | -         | 1        | -             | -     | 1      | 71.4                                       |
| BP Apparatus                             | 0              | 1      | 0      | 0              | 0      | -      | 0              | -         | 1        | 0             | 1     | 1      | 40.0                                       |
| Weighing Machine                         | 0              | 0      | 1      | 0              | 0      | -      | 0              | -         | 1        | 0             | 1     | 1      | 40.0                                       |
| Height Measuring Scale                   | -              | -      | -      | -              | -      | -      | -              | -         | -        | -             | -     | -      | 0.0  |
| Reagent Strips for Urine Test            | -              | -      | 1      | -              | -      | -      | 1              | -         | 0        | -             | -     | 0      | 40.0                                       |
| Cuscos Speculum                          | -              | -      | 1      | -              | -      | -      | -              | -         | 1        | 1             | 0     | 0      | 100.0                                      |
| Mucus Extractor                          | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | -        | -             | -     | -      | 100.0                                      |
| Fetoscope                                | 1              | 1      | 1      | -              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0                                       |

Table S8 : Status of availability of drugs

| Type of Drugs Available<br>(Yes: 1; No: 0) | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        | % of SCs reporting availability of drug on date of survey |
|--|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|---|
|  | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |   |
|  | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |   |
|  | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |   |
| Iron/ Folic acid                           | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 0      | 70.0  |
| Disposable Delivery Kit                    | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Oral Pills                                 | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 1             | 1     | 1      | 40.0  |
| Emergency contraceptive pills              | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Condoms                                    | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 50.0  |
| IUD  | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 1             | 1     | 1      | 40.0  |
| ORS  | 1              | 1      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 0     | 1      | 40.0  |
| Tab. flucanazole Vaginal                   | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Tab. Misoprostal                           | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Partograph                                 | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0   |
| Pregnancy test kit                         | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0  |
| Syp. Cotrimoxazole                         | 1              | 0      | 0      | 0              | 0      | -      | 1              | -         | 1        | 0             | 1     | 1      | 50.0  |
| Syp. Paracetamol                           | 0              | 1      | 0      | 0              | 0      | -      | 1              | -         | 1        | 0             | 0     | 1      | 40.0  |
| Vitamin A                                  | 0              | 1      | 0      | 0              | 0      | -      | 1              | -         | 1        | 0             | 0     | 1      | 40.0  |
| Tab. Ciprofloxacin                         | 1              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 10.0  |
| Disposable Gloves                          | 0              | 1      | 0      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 60.0  |

Table S9 : Status of Specific Skills and Procedures

| Type of Skill / Procedure<br>(Yes: 1; No: 0)   | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        | % of SCs reporting availability of specific skill / procedure |
|--|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|---|
|  | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |   |
|  | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |   |
|  | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |   |
| Register pregnancy within three months   | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 50.0  |
| Carry out 3 ANC visits as per the RCH schedule (1 <sup>st</sup> : 6 month, 2 <sup>nd</sup> : 7 <sup>th</sup> Month, 3 <sup>rd</sup> : 9 <sup>th</sup> Month) | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 1        | 1             | 0     | 1      | 30.0  |
| Carry out specific examinations like Blood Pressure, Haemoglobin, and Urine  | 1              | 1      | 1      | 1              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 90.0  |
| Provision of TT, IFA etc.  | 1              | 0      | 1      | 1              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0  |
| Identification of High Risk Pregnancies  | 1              | 1      | 0      | 1              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0  |
| Is the ANM carrying out IUCD Insertion/ Removal  | 1              | 1      | 1      | 1              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 90.0  |
| Is IUCD insertion being carried out using IUD A380   | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 1     | 1      | 33.3  |
| Is the supply of IUD A380 regularly available  | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 1     | 1      | 75.0  |
| Has the ANM been trained on the insertion/ Removal of IUD A380   | 0              | 0      | 0      | 0              | 1      | -      | 1              | -         | 0        | 1             | 1     | 1      | 50.0  |
| Is the ANM trained in syndromic treatment of RTI/STI?  | 0              | 0      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 60.0  |
| Immunisation services  | 1              | 1      | 1      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 100.0   |

Table S 10 : Service Outcome (based on Data for last 3 months)

| Indicator   | Sub Centre (Names to be given) |        |        |                |        |        |                |           |          |               |       |        | Average per Sub Centre |
|---|--------------------------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|------------------------|
|   | CHC 1: Sihawal                 |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |                        |
|   | PHC 1: Amilia                  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |                        |
|   | Rajgarh                        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |                        |
| Total ANC registered  | 88                             | 48     | 96     | 0              | 0      | -      | 73             | -         | 12       | 64            | 21    | 64     | 58.3                   |
| Out of total ANC, No. Registered in 1 <sup>st</sup> Trimester | 0                              | 0      | 42     | -              | -      | -      | 0              | -         | 8        | 48            | 17    | 41     | 31.2                   |
| No. given 3 ANC visits as per the RCH schedule                | 0                              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                    |
| No. of High Risk Cases identified                             | 0                              | 0      | 0      | 0              | 0      | -      | 3              | -         | 0        | 0             | 2     | 0      | 1.3                    |
| Deliveries conducted by ANM at Sub Centre                     | 0                              | 0      | 0      | 0              | 0      | -      | 5              | -         | 0        | 0             | 0     | 0      | 1.0                    |
| Pregnancies referred and attended by the next higher facility | 0                              | 0      | 0      | 0              | 0      | -      | 3              | -         | 0        | 48            | 25    | 0      | 19.0                   |
| No. of neonate infections identified and referred             | 0                              | 0      | 0      | 0              | 0      | -      | 2              | -         | 0        | 0             | 0     | 0      | 0.5                    |
| No. of IUCD insertions in 2007-2008                           | 23                             | 30     | 2      | 0              | 0      | -      | 25             | -         | 0        | 0             | 3     | 4      | 14.5                   |

Table S11 : Status of Record Maintenance

| Type of Records maintained (Yes: 1; No: 0) | Sub Centre (Names to be given) |        |        |                |        |        |                |           |          |               |       |        | % of SCs reporting maintenance of record |
|--|--------------------------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|--|
|  | CHC 1: Sihawal                 |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |  |
|  | PHC 1: Amilia                  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |  |
|  | Rajgarh                        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |  |
| Household Survey Register                  | 1                              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0                                     |
| Ante Natal Register                        | 1                              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0                                     |
| Eligible Couple register                   | 1                              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0                                     |
| Post Natal care Register                   | 1                              | 0      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 0      | 60.0                                     |
| Family Planning Register                   | 1                              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 0     | 1      | 70.0                                     |
| Birth & Death register                     | 1                              | 1      | 0      | 0              | 0      | -      | 1              | -         | 1        | 1             | 0     | 1      | 60.0                                     |
| Immunisation Register                      | 1                              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0                                     |
| Meeting Register                           | 0                              | 0      | 0      | 0              | 0      | -      | 0              | -         | 1        | 0             | 1     | 1      | 30.0                                     |
| JSY register                               | 1                              | 1      | 1      | 0              | 0      | -      | 0              | -         | 1        | 1             | 0     | 0      | 50.0                                     |
| Untied Funds register                      | 1                              | 1      | 1      | 0              | 0      | -      | 0              | -         | 1        | 1             | 0     | 1      | 60.0                                     |
| Cash Book                                  | 1                              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0                                     |

Table S12 A: Status of Awareness of ANM about JSY Scheme

| ANM's awareness about JSY  | Number of ANMs |                     |
|--|----------------|---------------------|
|  | Interviewed    | Reporting Awareness |
| Aware about JSY  | 10             | 10                  |
| Aware about amounts to be given to beneficiaries   | 10             | 10                  |
| ANM reporting increase in demand for Institutional delivery after implementation of JSY Scheme | 10             | 10                  |

Table S12 B: Status of procedure under JSY Scheme

| ANM's awareness about JSY  | % of ANMs according to response |
|--|---------------------------------|
| Funds being paid to beneficiaries by   |                                 |
| Cash   | -                               |
| Cheque   | 100.0                           |
| Vouchers   | -                               |
| Average time taken after birth for JSY payment to beneficiary                |                                 |
| Less than 1 week.....1   | 30.0                            |
| 1- 2 weeks.....2   | 30.0                            |
| More than 2 weeks.....3  | 40.0                            |
| Transport support for shifting of cases available from Sub Centre to PHC/CHC | 50.0                            |
| Register available for recording of JSY Expenditure                          | -                               |
| <b>Total no. of ANMs interviewed</b>   | <b>10</b>                       |

Table S13: Status of performance of ANM under JSY Scheme

| Performance of ANM under JSY Scheme  | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        | Average per Sub Centre |
|--|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|------------------------|
|  | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |                        |
|  | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |                        |
| Total cases of JSY registered in last 3 calendar months                    | 88             | 48     | 96     | 0              | 0      | -      | 73             | -         | 12       | 64            | 21    | 64     | 58.3                   |
| Total JSY cases resulted in Institutional deliveries in last three months? | 87             | 43     | 86     | -              | -      | -      | 11             | -         | 5        | 33            | 28    | 12     | 38.1                   |
| Total cash disbursed in last 3 calendar months for JSY cases? (Rs.)        | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                    |
| Out of total amount disbursed, the amount disbursed on the following       |                |        |        |                |        |        |                |           |          |               |       |        |                        |
| Home Deliveries (Rs.)  | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                    |
| Institutional deliveries: (Rs.)  | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                    |
| Transport Costs (Rs.)  | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                    |
| Amount given to ASHA (Rs.)   | 0              | 0      | 0      | 0              | 0      | -      | 0              | -         | 0        | 0             | 0     | 0      | 0.0                    |

Table S14 : Status of Untied Grants

| Status of Untied Grants<br>(Yes: 1; No:0)   | Sub Centre     |        |        |                |        |        |                |           |          |               |       |        | % of Sub Centres |
|---|----------------|--------|--------|----------------|--------|--------|----------------|-----------|----------|---------------|-------|--------|------------------|
|   | CHC 1: Sihawal |        |        |                |        |        | CHC 2: Baidhan |           |          |               |       |        |                  |
|   | PHC 1: Amilia  |        |        | PHC 2: Amarpur |        |        | PHC 1: Mada    |           |          | PHC 2: Khutar |       |        |                  |
|   | Rajgarh        | Hinoti | Baghor | Khori          | Sharda | Sapahi | Rajmilan       | Karsualal | Makrohar | Tiyara        | Jarha | Bihara |                  |
| Sub Centre received Untied Grant  | 1              | 1      | 1      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 100.0            |
| Sub Centre reported expenditure from Untied Grant   | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0             |
| ANM having a joint account with the Sarpanch/any other GP functionary                           | 1              | 1      | 1      | 1              | 1      | -      | 1              | -         | 1        | 1             | 1     | 1      | 100.0            |
| Sub Centre reporting maintenance of register to record the decisions taken to spend this amount | 1              | 1      | 0      | 0              | 1      | -      | 0              | -         | 1        | 1             | 0     | 1      | 60.0             |
| Sub Centre reporting written record of transactions being carried out on Untied Funds           | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 1     | 1      | 80.0             |
| Sub Centre reporting that Sarpanch/others ever reviewed the expenditure records                 | 1              | 1      | 0      | 1              | 1      | -      | 1              | -         | 0        | 1             | 1     | 0      | 70.0             |
| Sub Centre reporting expenditure from Untied Grant on the following:                            |                |        |        |                |        |        |                |           |          |               |       |        |                  |
| Spent on Purchase of Drugs  | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 0             | 1     | 1      | 70.0             |
| Arranging Transport   | 0              | 0      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 0     | 0      | 10.0             |
| Paying of Power/ Telephone bills  | 0              | 1      | 0      | 0              | 0      | -      | 1              | -         | 0        | 0             | 0     | 0      | 20.0             |
| Arranging facilities like Water Cooler etc. for patients  | 0              | 0      | 1      | 0              | 0      | -      | 0              | -         | 0        | 0             | 1     | 1      | 30.0             |
| Other (like white wash, maintenance etc.)   | 1              | 1      | 1      | 0              | 0      | -      | 1              | -         | 1        | 1             | 0     | 0      | 60.0             |

## Chapter 6

### Household Survey

This chapter presents the findings of the household survey on NRHM. For the survey, two villages were selected from each selected Sub Centre area. Thus, 24 villages were selected for the household survey from the 12 Sub Centre areas. Fifty households were selected from each of the selected village by following the systematic circular random sampling procedure. For selecting the households, the total number of households in a village was divided by 50 to find out the selection interval. After that, the first household situated at the north-west corner of the village was randomly selected and subsequently every  $r^{\text{th}}$  household was selected moving in an 'anti-clock wise' direction till 50 households were selected. In the district, from the selected 24 villages, we have covered 1207 households for the survey. It may be mentioned here that some of the villages were spread in a large geographical area, in such situation households were selected in proportion to the hamlet / settlement size with random selection of household starting from one corner of that hamlet.

#### 1. Characteristics of the Respondents

Table H1 presents the background characteristics of the respondents (head/senior member of the household). About three-fifths of the respondents are aged 40 years and less and one-fifth are age more than 50 years. Three-fifths of the respondents are males and fourty percent are females. It is found that more than half (55 percent) of the respondent are illiterates. Majority of respondents are currently married (92 percent) and the rest are unmarried (3.3 percent), or divorced/separated (0.1 percent) or widowed (5.1 percent).

#### 2. Characteristics of the Households

Table H2 presents the percentage distribution of the rural households by selected background characteristics. Distribution of the households by social category shows that 54 percent of the households belong to OBC, 15 percent belongs to Schedule Tribe (ST), 12 percent belong to Scheduled Caste (SC) and 18 percent belong to 'Other' castes.

Distribution of households by religion shows that 94 percent of the households are Hindus. Forty-five percent of households have electricity. Negligible number of households (3.5 percent) are living in pucca houses. Toilet facility is available only in 4.2 percent of the households. Piped water is used by 4.3 percent of the households. LPG / Biogas is used by only 3.4 percent of households. Nearly two-thirds (68 percent) of the households own/cultivate agricultural land. Nearly one-third (35 percent) of the households have a mobile phone and 14 percent of the household own a B/W or colour television.

Fifty-nine percent of the households belong to BPL category. The BPL status is also exactly reflected in the households with the low standard of living index (64 percent). The standard of living index is calculated by using the various household items possessed by the households (Appendix-3). Among the living children born in these rural households during the last five years, 47 percent of them were born in institutions.

Waste Disposal, Stagnation of Water and Mosquito Breeding and System of Medicine Preferred Method of waste disposal shows that almost all of the rural households throw their waste in the open space barring 7 percent household who either burry in a pit or burn (Table H3). During the survey, in 29 percent of the households, investigators have observed the stagnation of waster water around the household. Among the households where the stagnation of waste water was observed, the investigators have further observed the mosquito breeding in the stagnant water in almost all these households (98 percent). There is no difference in the stagnation of waster water and the instances of mosquito breeding between the households located in the SC headquarter village and households located in other villages.

System of medicine preferred by the rural households reveals that the allopathic medicine is universally preferred (99 percent). In addition to this, 24 percent of the households prefer traditional healing and about 6 percent also prefer Ayurveda. There is no difference observed in preferred system of medicines among households in sub-centre village and remote village.

### 3. Information about Health Workers and Health Facilities

Nearly two-thirds have heard about ANM and only one-third knew about Male Health Worker (Table H4). Further, only one-fifth of the respondents reported that the health worker has visited them in last one month. This proportion is even less (16 percent) in households in remote villages. Proportion of households that have heard about ANM and male health worker is sub-centre villages. About one-third of the respondents (33 percent) further reported that the health workers are available to them when needed.

Respondents were asked about the availability of the health facilities to the households when required. The responses reveal that facilities other than the listed are more suitably available to the households when needed. More than three-fourths (77 percent) reported other facilities mostly barefoot doctors available to them when required. CHC was reported by one third of the respondents and other government facilities reported are sub-centre (9.2 percent) and PHC (6.6 percent). Private clinic/NGO was reported by only 12 percent of the respondents. There is no difference in the response among households in sub-centre village or remote village. Respondents were further asked about the health facility for which the serious patients are taken. Majority of the respondents (56 percent) mentioned that they take the serious patients to the CHC. Other facilities are also approached by half of the respondent in case of serious patients. One-third of all the respondents also mentioned about District Hospital. There is no difference in the response between the respondents from SC headquarter villages and other villages. Mode of transport used to take serious patients when required was asked from the respondents. Majority of the respondents mentioned that Bus/public transport (71 percent) and hired vehicle (69 percent) are used to take the serious patients, when required.

### 4. NRHM, ASHA and JSY

Table H5 presents the distribution of respondents by their knowledge about NRHM, ASHA and her activities, VHND, VHSC and JSY. One in every ten household respondent (11 percent) have heard about NRHM and there is little difference in this between households located in SC HQ villages (13 percent) and other villages (10 percent). For

those who have heard about NRHM, radio/television is the major source of information (44 percent) followed by Community Member (35 percent), Others (28 percent), Newspaper (17 percent), Panchayat (13 percent) and ASHA (9 percent). Overall, 63 percent of the respondents have heard about ASHA. Those who have heard about ASHA were further asked about their awareness/knowledge regarding various activities of ASHA. About three third of the respondents aware that ASHA carry a kit and about 36 percent are aware that ASHA provide common medicines free of cost. Regarding activities carried out by ASHA, 14 percent are aware that ASHA held discussions about hand washing, 9 percent reported that ASHA discusses about construction of household toilets and 14 percent aware that ASHA held discussions about safe drinking water. The percentage of the respondents aware about different activities of ASHA is slightly higher in SC headquarter villages than in other villages. About one-fifth of the respondents (22 percent) reported that the Village Health and Nutrition Day (VHND) is being organised in the village. Presence of Village Health and Sanitation Committee (VHSC) in the village is reported by 7 percent of all the respondents. About two-thirds of the respondents (63 percent) reported that VHND is being organised once in a month in the village. The percentage of the respondents reporting the frequency of the VHND as quarterly and annually is 10 percent and 14 percent respectively. It may be mentioned here, that most of the respondents were not clear about the VHND and its activities. The team however, did not find any VHND organized in these villages during last one year from records of ASHA. Mostly, immunization sessions held at Anganwadi and other functions such as 'God bhara', Shishu Namkaran' held are perceived as VHND by the respondents.

All the respondents were asked about their awareness regarding JSY scheme. It shows that 89 percent of the respondents are aware about JSY scheme and there is no difference in the awareness between respondents from SC HQ villages and other villages. It is noteworthy to mention that respondents are only aware of monetary incentives under JSY and not the health benefits. Majority of them are not aware about JSY scheme by its name. Those who are aware about the JSY scheme were further asked about their source of information about the JSY. It shows that for majority (70 percent), information about JSY comes from other sources - JSY beneficiary, Janani Express Vehicle and relatives. Common IEC sources reported for information about JSY are - Radio / TV (13.8 percent), Pemphelets

(1.9 percent), Hoardings at SC / PHC (3.5 percent). Interpersonal communication from health functionaries as source of information for JSY was mentioned are – ASHA (17.2 percent), AWC/AWW (12 percent), ANM (8.4 percent) and doctor (5.9 percent) by the respondents. Those who said that they are aware about the JSY scheme were further asked whether any one in the household is a beneficiary of JSY scheme. Among those who are aware about the JSY scheme, 27 percent of them reported that the household is a beneficiary of the JSY scheme. The percentage of the beneficiary households is slightly more in SC HQ villages (28 percent) than in other villages (26 percent). Among the total surveyed households, 24 percent (290 out of 1207) are beneficiaries of the JSY scheme.

## 5. JSY Beneficiaries

Background Characteristics: Socio-economic and demographic characteristics of the beneficiaries are presented in Table H6. Age distribution of the beneficiaries shows that, as expected, majority of them are aged 20-24 years (40 percent). Little less than one fourth (22 percent) of the beneficiaries are aged 25-29 years and 14 percent are less than 20 years. Parity of the beneficiaries shows that distribution is equal and about one-third of all the JSY beneficiaries are first, second and 3+ parity. None of the beneficiary are first time pregnant woman i.e. zero parity.

Social category of the beneficiaries reveals that majority of them are OBC (55 percent), and Scheduled Castes (13 percent) and scheduled tribe (18 percent). Thirteen percent of the beneficiaries are OBCs (from BPL category). Among beneficiaries, 90 percent are Hindu and 10 percent are Muslim. Distribution of beneficiaries by Standard of Living Index (SLI) shows that about two-thirds of them (65 percent) belong to low SLI households, 24 percent belong to medium SLI households and 11 percent to high SLI households. Similarly two-thirds of all the JSY beneficiaries are from BPL households.

Registration of JSY Beneficiaries: JSY first starts with the registration of the pregnant woman for receiving the benefits. More than half (60 percent) of the beneficiaries had heard about the JSY scheme during pregnancy or at the time of delivery. Stage of pregnancy when beneficiary got registered for JSY scheme reveals that more than two third (61 percent) of the beneficiaries got registered during the second trimester of the

pregnancy and the rest during first trimester of pregnancy. It is revealed that 44 percent of the beneficiaries are registered in the 5<sup>th</sup> month of pregnancy. About one-third of the beneficiaries were registered by ANM/FHW (36 percent), 26 percent by Anganwadi worker and 19 percent by ASHA. Place of registration of beneficiaries shows that 28 percent of them were registered in Anganwadi Centre. The percent of beneficiaries registered in health facility either DH/ CHC/ PHC / SC is 28 percent and mostly at CHC or SC. It is also found that about one-fifth of all the registration has been done at hospitals run by PSUs like NTPC, Eastern Coalfields Limited etc. One-fourth of beneficiaries also for registered at their homes by health worker or ASHA.

JSY Card: Only 21 percent of the beneficiaries received the JSY card (Table H8). Among those who received the JSY card, one third of them were helped by ASHA in getting the JSY card. About 8 percent of the beneficiaries reported difficulty in getting the JSY card. It is necessary to mention here that in Madhya Pradesh JSY registration or providing JSY card is not being done as per the guidelines. Mainly JSY cards are not available to the health workers in printed form. Mostly immunization cards or MCH cards are used to mention other information about pregnant woman and this is also accepted for payments to the JSY beneficiaries. It is also observed that wherever, such cards are available they incomplete in information about the pregnant women and her health parameters. Those who faced difficulty in getting JSY cards mentioned about non-availability of cards, tedious procedure for making cards, ASHA or other workers asked money for providing cards etc.

Role of ASHA during the Pregnancy of the Beneficiaries: Table H9 presents the role of ASHAs during the pregnancy of the beneficiaries. Only 27 percent of the beneficiaries said that the ASHA worker provided specific help during last pregnancy. The type of advice received from the ASHA shows very grim picture. Less than 10 percent of women reported that ASHA has given any advice to them regarding diet, danger signs, delivery care, breastfeeding, newborn care and family planning. Beneficiaries were further asked about the type of information received during the antenatal period (micro birth planning) from Doctor/ANM/ASHA. It shows that the place of delivery was informed in advance to 51 percent of beneficiaries, date and place of next check-up was advised to 25 percent and 20 percent of the beneficiaries respectively. Expected date of delivery is told to only 18

percent of beneficiaries. About 15 percent were also told about the referral place, if complications arise.

Place of Delivery and Reason for Opting Institutional Delivery: Among beneficiaries almost all (97 percent) have delivered at health institution and only 3 percent are delivered at home. Most of these deliveries took place at CHC (53 percent), followed by district hospital (24 percent) and at PHC (19 percent). The major reasons cited by the beneficiaries for delivering in Institutions are: money available under JSY (60 percent), better access to institutional delivery (38 percent); better care for mother and new born child (20 percent); and support provided by ASHA (18 percent), other reasons (27 percent) cited by beneficiaries are mainly motivation by family members or Anganwadi workers or Dai.

Transport of the Beneficiaries to Reach the Health Institutions: Among the beneficiaries who delivered in health institutions, one-fifth of them received referral slip from ASHA/health personnel to access delivery services (Table H11). Out of 280 beneficiaries who delivered in institutions, 20 percent have faced one or other difficulty in reaching health institution such as late night timing, non availability of transport on time and insufficient money. A few (3.6 percent) also mentioned that ASHA was not readily available for accompany to the health institution. The average distance to the ultimate place of delivery from the beneficiaries' residence is about 21 kilometres. Three fourth of the beneficiaries used the other vehicles on hire or barrowed from relatives and friends, 23 percent used Government Ambulance. For majority (82 percent), it was family members / relative who arranged vehicles. ASHA was supportive to only in 17 percent of the JSY beneficiaries. Nearly two-thirds of the beneficiaries (62 percent) had money to pay for the transport services. For about two-thirds of the beneficiaries (61 percent) there was no option but to spend on transport to reach the place of delivery and the average amount spent by these beneficiaries on transport is Rs. 554/-. Only one-fourth (24 percent) of all the beneficiaries receives some amount for transport assistance and the average amount received by these beneficiaries is Rs. 176/- under JSY scheme. In both the cases the amount spent on transport is more than the amount received. For 52 percent of the beneficiaries, relatives accompanied them to the health institution and 25 percent reported ASHA accompanied with them.

Waiting Time, Type of Delivery and Satisfaction Regarding Services: The average waiting time at the facility until someone attended the beneficiary is just 4 minutes. Majority of beneficiaries (94 percent) had normal delivery, 5 percent had assisted delivery and Caesarean delivery is only 1.4 percent. The average number of days spent in the health facility till discharge is 2.3 days. Sixty seven percent of the beneficiaries had to pay at the health centre and the average amount turns out to be Rs. 409/-. Among the beneficiaries, majority (77 percent) expressed their satisfaction with the services provided, another 15 percent were somewhat satisfied and 8 percent were not satisfied with the services provided to them. The reason for the non satisfaction was mainly rude behaviour of staff and poor quality of services at the health facility.

Reason for Opting Home Delivery: As mentioned earlier, 10 of 290 beneficiaries (3.4 percent) opted for the home delivery in spite of cash incentives being available under the JSY scheme. All these 10 beneficiaries were asked for the reason for opting home delivery. The major reasons cited by the beneficiaries are transport not available (60 percent), cultural/social reasons (20 percent), and cannot afford is (20 percent).

Cash Incentive Received by the Beneficiary under JSY Scheme: Among the beneficiaries, 85 percent had received the cash incentive under JSY scheme and the average amount received by them is Rs. 1434/-. Out of those who received the cash incentive, almost all 99 percent received it in one installment. In Madhya Pradesh, all the JSY beneficiaries are provided incentive with cheques. The cheque is issued with proper identification of the beneficiary and after submission of case paper and discharge ticket. Among those who received the cash incentive, more than half (54 percent) received much later, one-fourth received within a week and 13 percent got it immediately after the delivery. Nearly 8 percent of the beneficiaries reported that their husband knows about the timing of receipt of amount. For little less than half of the beneficiaries (46 percent), doctor delivered the cash incentive and for one-third other persons in health institution like clerk, accountant etc. delivered the incentive. Cash incentive was paid provided at the place of delivery to the beneficiaries. Little less than one-third of the beneficiaries (31 percent) faced some or

other difficulty in getting money. Twenty percent of beneficiaries reported that they were asked to pay bribe, 26 percent said that it was paid by cheque / draft. It may be mentioned here that majority of beneficiaries had no bank accounts and it is very difficult for them encash the cheque. Half of them also pointed out other problems such as late payments, repeated visit to health facility for getting cheque etc.

## 6. Utilization of Government Health Facility in Last Six Months

This section addresses some of the issues related to the quality of care in government health facilities. First, to understand the extent of utilization of the government health facilities in last six months, all the surveyed households were asked whether anyone from the household availed the services in any government health facility in last six months. It shows that 18 percent of the rural households (220 out of 1207) have availed the health services in government health facility in last six months. The proportion of households availed the services in government health facility is slightly more in households located in SC headquarter villages (20 percent) than in other villages (16 percent). Out of the 220 households that have availed the services in government health facility, interview of the most recent case was taken. In case the most recent case is an adult, the person was interviewed, in case it is child below age 16, the person accompanying the patient was interviewed.

The selected characteristics of the patients/respondents who have availed the health services in government health facilities are presented in Table H16. The age distribution of the respondents shows that 32 percent of all the patients are below age 16 years, about one-fourth of the patients are between age 16-40 years. Twelve percent of all the patients are above age 60 years. Sex distribution of the respondents shows that 52 percent are males and 48 percent are females. The socioeconomic characteristics of the respondents reveal that more than half of them are illiterates, 18 percent are Scheduled Castes and Schedule Tribes, and about three-fifths of them (60 percent) belong to BPL households. Nearly two-thirds of patients belong to households that have low standard of living. The characteristics of the respondents clearly reveal that most of them come from poor households.

Client Satisfaction: Table H17 presents the type of health facility visited and purpose of visit; and satisfaction regarding behaviour of health worker, privacy and availability of medicine at the facility. The type of health facility visited by the respondents show that 57 percent visited PHC, 21 percent visited District Hospital, 13 percent visited SC and another 9 percent visited CHC. The major reason reported by the respondents for the visit shows that three fourth of them visited for the treatment of minor ailment and the remaining one fourth visited for ANC care, child care, immunization and other services. Regarding the behaviour of the staff at the health facility, 89 percent of the respondents said that the staff were courteous. Only few (4 percent) respondents reported that the behaviour of the staff were insulting/derogatory. Ninety percent of the respondents said that the doctor/staff at the health facility listened to their complaints, 7 percent said that they have somewhat listened and 3 percent said that they did not listen. It appears that, except few, the respondents are generally satisfied with the behaviour of staff at the health facility. One of the problems often cited for the government health facilities is the lack of privacy for the woman patients. The problem can be easily addressed with either a simple partition of the examination room or with a cloth curtain. To know about this, the respondents were asked whether women patients treated with privacy and dignity. Three fourth of the respondents reported that women patients are treated with privacy and dignity and 13 percent said that they are not treated with privacy and dignity.

Regarding the availability of medicines, 59 percent of the respondents said that patients with chronic illnesses (like joint pains, heart disease, blood pressure, diabetes etc.) get medicines regularly from the government health facility. However, eight percent of the respondents said that they don't get medicines and one third said they don't know. Respondents were further asked whether doctor from government health facility do private practice during or after the duty hours. For this question, half of them said they 'don't know', one third said 'no', and 19 percent said 'yes'. Satisfaction of the respondents regarding the overall services of the government health facility reveals that 82 percent are satisfied, 13 percent are somewhat satisfied and 5 percent are not satisfied. Satisfaction of the respondents regarding the behaviour of staff at the government health facility also shows a similar level of higher satisfaction with 86 percent satisfied, 10 percent somewhat satisfied and 4 percent are not satisfied. Though the level of satisfaction appears to be

higher, even a smaller level of dissatisfaction regarding services and behaviour of staff has to be looked into. **User Fees and Extra Charges** In the survey, among the respondents who have availed the services in government health facility in last six months, forty three percent (i.e., 81 out of 187) said that they were charged user fees by the health facility (Table H18). Among those who paid the user fees, 86 percent paid for registration, 5 percent for X-ray, 6.2 percent for lab test and 12 percent for medicine, IV set and injection. Among those who have paid the user fees, only about one third said that they have received the receipt for the same and for the remaining two third said that receipts was not given. Among those who paid the user fees, 15 percent said that extra money was charged from them for the services provided. **Services for the BPL Patients** BPL respondents were asked whether BPL patients provided free/subsidized services (Table H19). For this question, 78 percent of the respondents said that they are provided free/subsidized services, 7 percent said that they are not provided free/subsidized services and 14 percent said that they don't know. Majority of the BPL respondents (61 percent) said that they don't face difficulty in getting free/subsidized services whereas; little more than one fourth (27 percent) said that BPL patients face difficulty in getting free/subsidized services. One fifth of the BPL respondents said that RKS facilitates the paper work for BPL patients.

## 7. Outbreak of Diseases

All the respondents were asked whether there is any outbreak of malaria, measles, gastroenteritis, jaundice and other diseases in their area in the last six months (Table H20). The percentage of respondents reported the outbreak of the above diseases in their area in the last six month is 37 percent, 12 percent, 9 percent, 7 percent and 3 percent respectively. These figures should be noted with caution as these are orally reported outbreaks by the respondents. However, it indirectly indicates that mosquito breeding is a major issue in the villages as outbreak of malaria is reported by 37 percent of the respondents. **Action to be taken for Selected Diseases** All the respondents were asked about the following: steps for prevention of diarrhoea; actions to be taken if a family member has a high fever, persistent cough for more than two weeks and loose motions lasting for more than 24 hours; and action to be taken if a child in the family has persistent cough and breathing problems (Table H21). For the prevention of diarrhoea, the proportion of respondents mentioned the hand washing, use of safe food and water, and use of covered containers is 49 percent,

65 percent and 32 percent respectively. The proportion of respondents does not know any simple steps for the prevention of diarrhoea is 27 percent. Actions to be taken for high fever, persistent cough and loose motions for a family member and persistent cough and breathing problems for the child in the family shows that 51-63 percentage of respondents will take the family member/child to the RMP followed by 50-55 percent to the nearest government health facility. Taking the family member/child to the RMP and to the nearest government health facility are the two prominent actions reported by more or less half the respondents. It indicates the importance of the availability of government health facility nearer to the people at the times of need. The proportion reported that they will try with home remedies vary between 16 to 31 percent for all four diseases. It is heartening to know that, for the loose motions, 38 percent of the respondents said that they will start giving ORS.

#### **8. Awareness about Family Planning, VCTC, HIV-AIDS**

Family Planning: Awareness about Spacing Methods and Ideal Gap between Children - The ideal spacing between 1st and 2nd child mentioned by the respondents reveals that majority of them (60 percent) prefer the ideal spacing to be 3 and more years (Table H22). Another 36 percent said that the ideal spacing should be 2 years. Only a few respondents mentioned the ideal spacing as one year. The ideal spacing of 3+ years reported by majority of the respondents clearly indicate the need for spacing methods in our family planning programme. Knowledge regarding the spacing methods reveals that Oral Pills is known to 71 percent of the respondents followed by IUD (54 percent) and Condom (43 percent). One fourth of the respondents said that they don't know the family planning methods available for spacing.

AIDS and VCTC: The awareness, modes of getting and source of information for HIV/AIDS are presented in Table H23. Among the respondents, 72 percent are aware about the HIV/AIDS. With regard to knowledge about the modes of transformation of HIV/AIDS, the table reflects that 56-63 percent of the respondents aware that unsafe sexual contact, sharing of needles/syringes and blood transfusion are the very important modes of transformation. About 12 percent of the respondents aware that HIV/AIDS transforms from infected mother to child. The percent of respondents do not know about

the modes of getting HIV/AIDS is 14 percent. Few respondents reported the misconceptions like shaking hands, sneezing and insect bite are the modes of getting HIV/AIDS. Source of information for the HIV/AIDS reveals that TV is the prominent source of information (60 percent) for the respondents followed by friends/relatives/neighbours/community etc. (57 percent), health workers (21 percent), posters (16 percent), newspapers (15.2 percent), and radio (12 percent). Those who were aware about HIV/AIDS were further asked about their awareness regarding the HIV/AIDS Counselling Centre/Voluntary Counselling and Testing Centre (VCTC) nearby. The response shows that, only one fifth (19 percent) of the respondents are aware about the nearby Counselling Centre/VCTC. Those who are aware about the nearby Counselling Centre/VCTC were further asked about the location of Counselling Centre/VCTC. The percent of respondents said that the Counselling Centre/VCTC is located in PHC is 30 percent, CHC is 27 percent, District Hospital is 17 percent, Sub District Hospital is 19 percent and Private Hospital is 7 percent. Among those who are aware about the location of VCTC, most of them (97 percent) reported that that it is located in the government health facility.

Suggestions given by the respondents: The suggestions given by the respondents for the improvement of services in the villages are given in Table H24. It shows that respondents generally expect toilet facility, health facility, health workers, cleanliness, sanitation, safe drinking water, pucca road and transport facility for their villages. The suggestions given by them reveal the genuine expectations of the villagers for the improvement of the health and sanitation in their villages.

## Household Characteristics (Based on Household Schedule)

**Table H1. Characteristics of the respondents**  
Percent distribution of respondents by background characteristics

| Characteristics of the respondents | Percent     |
|------------------------------------|-------------|
| <b>Age</b>                         |             |
| < 30 years                         | 28.0        |
| 30-39 years                        | 30.2        |
| 40-49 years                        | 22.4        |
| 50-59 years                        | 10.8        |
| 60 years or more                   | 8.7         |
| <b>Sex</b>                         |             |
| Male                               | 59.0        |
| Female                             | 41.0        |
| <b>Years of Schooling</b>          |             |
| Illiterate                         | 54.8        |
| 1-5 years                          | 14.8        |
| 5-9 years                          | 16.4        |
| 10 years or more                   | 14.1        |
| <b>Marital Status</b>              |             |
| Unmarried                          | 3.3         |
| Currently Married                  | 91.5        |
| Widowed/Divorced                   | 0.1         |
| Separated                          | 5.1         |
| <b>Total number of respondents</b> | <b>1207</b> |

**Table H 2. Characteristics of the household**  
 Percent distribution of households by their background characteristics

| Characteristics of the household  | Percent     |
|---|-------------|
| <b>Social Category</b>  |             |
| SC  | 12.3        |
| ST  | 15.7        |
| OBC   | 54.3        |
| Others  | 17.8        |
| <b>Religion</b>   |             |
| Hindu   | 93.5        |
| Muslim  | 6.5         |
| Christian   | -           |
| Sikh  | -           |
| Others  | -           |
| Households having BPL status  | 59.0        |
| Households living in pucca house  | 3.5         |
| Households with electricity   | 45.2        |
| Households with toilet facility   | 4.2         |
| Households with piped water supply  | 4.3         |
| Households using LPG/Biogas for cooking                                   | 3.4         |
| Household having own agricultural land /cultivating any agricultural land | 68.1        |
| Household own a colour/B&W television                                     | 14.4        |
| Household have a mobile phone   | 34.9        |
| Households with low Standard of Living Index                              | 63.5        |
| % of children born in Health Institutions during last 5 years             | 47.0        |
| <b>Total number of households</b>   | <b>1207</b> |

Table H 3. Percent distribution of households by their waste disposal, stagnation of waste water and mosquito breeding around the house and system of medicine preferred by them.

| Waste disposal, stagnation of water and mosquito breeding and system of medicine preferred                              | Households located in Sub Centre HQ Village | Households located in other village | All         |
|---|---|-------------------------------------|-------------|
| <b>Method of waste disposal by the household</b>  |   |                                     |             |
| Thrown in the open  | 93.7  | 93.0                                | 93.4        |
| Buried in a pit   | 4.8   | 4.5                                 | 4.6         |
| Burnt   | 1.5   | 2.5                                 | 2.0         |
| Other methods   | -   | -                                   | -           |
| <b>Stagnation of waste water around the household</b> (stagnation of waste water observed by the interviewer)           | 29.4  | 25.5                                | 27.4        |
| <b>Instance of mosquito breeding in the stagnant water</b> (among the households where stagnation of water is observed) | 98.3  | 94.1                                | 96.4        |
| <b>System of medicine preferred</b> ( <i>multiple answer</i> )  |   |                                     |             |
| Allopathic  | 99.5  | 99.8                                | 99.7        |
| Ayurveda  | 6.6   | 4.5                                 | 5.6         |
| Yoga and Naturopathy  | 0.3   | 0.2                                 | 0.2         |
| Unani   | -   | -                                   | -           |
| Siddha  | -   | -                                   | -           |
| Homeopathy  | 2.6   | 0.5                                 | 1.6         |
| Traditional Healing   | 24.7  | 23.5                                | 24.1        |
| Any other   | 1.5   | 3.3                                 | 2.4         |
| None  | -   | -                                   | -           |
| <b>Total number of households</b>   | <b>607</b>                                  | <b>600</b>                          | <b>1207</b> |

Table H 4. Percent distribution of household respondents by their information about availability of health worker, health facilities and transport used to take serious patients

| Information about health workers and health facilities   | Households located in Sub Centre HQ Village | Households located in other village | All         |
|--|---|-------------------------------------|-------------|
| <b>Availability of health workers</b>  |   |                                     |             |
| Heard about ANM  | 73.1  | 62.8                                | 68.0        |
| Heard about Male Health Worker   | 35.4  | 28.5                                | 32.0        |
| Visited by a Health Worker in last one month   | 20.0  | 16.3                                | 18.2        |
| Health Workers are available when needed   | 36.2  | 29.8                                | 33.1        |
| <b>Availability of health facilities to the households, when required (multiple responses)</b> |   |                                     |             |
| RMP  | 19.6  | 18.5                                | 19.1        |
| Private Clinic/NGO   | 13.3  | 11.7                                | 12.5        |
| Sub Centre   | 10.9  | 7.5                                 | 9.2         |
| PHC  | 8.4   | 4.8                                 | 6.6         |
| CHC  | 32.6  | 36.0                                | 34.3        |
| Others   | 75.8  | 77.8                                | 76.8        |
| <b>Facility for which serious patients are taken, when required (multiple responses)</b>       |   |                                     |             |
| RMP/private Clinic   | 15.7  | 15.5                                | 15.6        |
| NGO Hospital Clinic  | 16.3  | 14.8                                | 15.6        |
| PHC  | 3.6   | 2.2                                 | 2.9         |
| CHC  | 55.5  | 57.0                                | 56.3        |
| District/Sub Divisional Hospital   | 34.4  | 31.7                                | 33.1        |
| Others   | 49.3  | 50.0                                | 49.6        |
| <b>Mode of transport used to take serious patients, when required (multiple responses)</b>     |   |                                     |             |
| Bullock Cart   | 0.2   | 0.3                                 | 0.2         |
| Bus  | 73.1  | 68.5                                | 70.8        |
| Private Vehicle  | 17.8  | 18.0                                | 17.9        |
| Ambulance  | 0.2   | 0.7                                 | 0.4         |
| Others   | 66.6  | 72.3                                | 69.4        |
| <b>Total number of household respondents</b>   | <b>607</b>                                  | <b>600</b>                          | <b>1207</b> |

## NRHM, ASHA and JSY

Table H 5. Percent distribution of household respondents by their knowledge about NRHM, ASHA and her activities, VHND, VHSC and JSY

| NRHM, ASHA and JSY  | Households located in Sub Centre HQ Village | Households located in other village | All         |
|---|---|-------------------------------------|-------------|
| <b>Heard of NRHM</b>  | 12.7  | 9.7                                 | 11.2        |
| <b>If heard of NRHM, source of information about NRHM (multiple responses)</b>    |   |                                     |             |
| ASHA  | 3.9   | 15.5                                | 8.9         |
| Radio/television  | 50.6  | 36.2                                | 44.4        |
| Newspaper   | 24.7  | 6.9                                 | 17.0        |
| Panchayat   | 10.4  | 15.5                                | 12.6        |
| Community Member  | 39.0  | 29.3                                | 34.8        |
| Other   | 24.7  | 31.0                                | 27.6        |
| <b>Heard of ASHA</b>  | 61.1  | 64.2                                | 62.6        |
| <b>ASHA and her activities, VHND and VHSC</b>                                     |   |                                     |             |
| ASHA carry a kit  | 38.0  | 33.7                                | 35.8        |
| ASHA provide a common medicines free of cost                                      | 34.9  | 36.3                                | 35.6        |
| ASHA held discussions about hand washing  | 17.0  | 11.4                                | 14.1        |
| ASHA held discussions about construction of household toilets                     | 11.1  | 5.8                                 | 8.4         |
| ASHA held discussions about safe drinking water                                   | 17.6  | 10.2                                | 13.8        |
| Village Health and Nutrition Day being organized in the village                   | 25.0  | 19.0                                | 22.0        |
| Presence of Village Health and Sanitation Committee in the village                | 8.4   | 5.0                                 | 6.7         |
| <b>Frequency of Village Health and Nutrition Day</b>                              |   |                                     |             |
| Weekly  | 13.1  | 11.9                                | 12.6        |
| Monthly   | 59.3  | 67.9                                | 63.0        |
| Quarterly   | 10.3  | 10.1                                | 10.2        |
| Annual  | 17.2  | 10.1                                | 14.2        |
| <b>Aware about the JSY scheme</b>   | 89.3  | 88.2                                | 88.7        |
| <b>If aware about JSY, source of information about the JSY (multiple options)</b> |   |                                     |             |
| Radio/Television  | 16.4  | 11.2                                | 13.8        |
| Pamphlets   | 2.8   | 0.9                                 | 1.9         |
| Hoardings at SC/PHC etc.  | 4.2   | 2.6                                 | 3.5         |
| ASHA Worker   | 18.5  | 15.9                                | 17.2        |
| Anganwadi Centre/Worker   | 14.4  | 9.6                                 | 12.0        |
| ANM   | 9.2   | 7.6                                 | 8.4         |
| Doctor  | 5.4   | 6.4                                 | 5.9         |
| Gram Panchayat  | 3.1   | 5.5                                 | 4.3         |
| NGOs/SHGs   | 0.2   | -                                   | 0.1         |
| Other   | 67.3  | 71.8                                | 69.6        |
| <b>Household beneficiary of JSY Scheme</b>  | 28.1  | 26.1                                | 27.1        |
| <b>Total number of household respondents</b>                                      | <b>541</b>                                  | <b>529</b>                          | <b>1070</b> |

## JSY Beneficiaries

Table H 6. Percent distribution of JSY beneficiaries by their background characteristics

| Characteristics of the JSY beneficiaries                           | Percent    |
|--|------------|
| <b>Age</b>   |            |
| < 20 years   | 14.1       |
| 20-24 years  | 40.3       |
| 25-29 years  | 21.7       |
| 30-34 years  | 12.8       |
| 35-39 years  | 8.3        |
| 40-44 years  | 2.8        |
| 45-49 years  | -          |
| <b>Parity</b>  |            |
| 0  | -          |
| 1  | 35.4       |
| 2  | 33.0       |
| 3 & 3+   | 31.6       |
| <b>Social category</b>   |            |
| SC   | 12.8       |
| ST   | 17.9       |
| OBC  | 54.8       |
| Others   | 14.5       |
| <b>Religion of the household</b>                                   |            |
| Hindu  | 89.3       |
| Muslim   | 10.7       |
| Christian  | -          |
| Sikh   | -          |
| Others   | -          |
| <b>SLI of the household</b>  |            |
| Low  | 64.8       |
| Medium   | 24.1       |
| High   | 11.0       |
| <b>BPL household</b>   | 65.9       |
| <b>Place of last delivery (delivery previous to this delivery)</b> |            |
| Household  | 3.4        |
| Health Institution   | 96.6       |
| <b>Total number of JSY beneficiaries interviewed</b>               | <b>290</b> |

## Registration of JSY Beneficiaries

Table H 7. Timing, person and place of registration for JSY scheme

| Timing, place of registration for JSY scheme and JSY card                | Percent    |
|--|------------|
| <b>Timing of hearing about JSY scheme</b>                                |            |
| Before being pregnant  | 40.4       |
| During pregnancy   | 59.6       |
| <b>Stage of pregnancy when beneficiary got registered for JSY scheme</b> |            |
| 1 <sup>st</sup> month  | 0.8        |
| 2 <sup>nd</sup> month  | 9.7        |
| 3 <sup>rd</sup> month  | 28.0       |
| 4 <sup>th</sup> month  | 17.8       |
| 5 <sup>th</sup> month or later   | 43.6       |
| <b>Person who registered the beneficiary for JSY scheme</b>              |            |
| Doctor   | 2.2        |
| LHV  | 1.1        |
| ANM/FHW  | 35.8       |
| Anganwadi worker   | 26.1       |
| ASHA worker  | 18.7       |
| Others   | 16.0       |
| <b>Place where the beneficiary was registered for JSY scheme</b>         |            |
| District/Sub-district Hospital   | 4.9        |
| Community Health Centre  | 10.4       |
| PHC  | 4.5        |
| Sub-Centre   | 8.2        |
| Anganwadi Centre   | 28.0       |
| Private hospital accredited by the government                            | 0.4        |
| At home  | 25.7       |
| Other places   | 17.9       |
| <b>Total number of JSY beneficiaries</b>                                 | <b>290</b> |

## JSY Card

Table H 8. Receipt of JSY card, role of ASHA in getting JSY card and difficulties faced by the beneficiary in getting the JSY card

| JSY Card   | Percent    |
|--|------------|
| JSY card received by the beneficiary   | 20.6       |
| ASHA worker helped the beneficiary in getting JSY card                                       | 31.0       |
| Beneficiary faced difficulty in procuring JSY card   | 7.9        |
| <b>If faced difficulty, type of difficulties faced by beneficiary<br/>(multiple options)</b> |            |
| Cards were not available   | 20.0       |
| Formalities for making cards were too cumbersome   | 40.0       |
| Was asked to pay money for the card  | 20.0       |
| Other difficulties   | 20.0       |
| <b>Total number of JSY beneficiaries</b>   | <b>290</b> |

Table H 9. Role of ASHA during the pregnancy of the beneficiaries

| Role of ASHA during the pregnancy of the beneficiaries  | Percent    |
|---|------------|
| ASHA worker provided specific help during last pregnancy  | 26.6       |
| <b>Beneficiary received advice from ASHA during pregnancy for the following (<i>multiple options</i>)</b>                               |            |
| Diet  | 13.1       |
| Danger signs  | 6.2        |
| Delivery care   | 8.2        |
| Breastfeeding   | 9.3        |
| Newborn care  | 8.9        |
| Family planning   | 7.9        |
| Not applicable (ASHA not appointed in the village)  | 3.8        |
| <b>Information given to the beneficiary (Micro Birth Planning) during antenatal period by Doctor/ANM/ASHA (<i>multiple options</i>)</b> |            |
| Date of next check-up   | 24.7       |
| Place of next check-up  | 19.6       |
| Date of expected delivery   | 17.9       |
| Place of delivery   | 50.5       |
| Place of referral, if complications arise   | 15.1       |
| <b>Total number of JSY beneficiaries</b>  | <b>290</b> |

Table H 10. Place of delivery and reason for opting institutional delivery

| Place of delivery and reason for opting institutional delivery             | Percent    |
|--|------------|
| <b>Place of delivery</b>   |            |
| District/Sub-district Hospital   | 24.4       |
| Community Health Centre  | 52.6       |
| PHC  | 18.9       |
| Sub-Centre   | 0.3        |
| Trust/NGO Hospital   | -          |
| Private hospital   | -          |
| Private hospital accredited by the government                              | 0.3        |
| At home  | 3.4        |
| Total  | (290)      |
| <b>Reasons for opting Institutional Delivery (<i>multiple reasons</i>)</b> |            |
| Money available under JSY scheme   | 59.8       |
| Better access to institutional delivery                                    | 38.4       |
| Better care for mother and new born child                                  | 19.9       |
| Services in the area   | 1.1        |
| Support provided by ASHA   | 18.1       |
| Availability of transport assistance                                       | 4.6        |
| Previous child was born in an institutions                                 | 2.1        |
| Other  | 27.0       |
| Total  | (280)      |
| <b>Total number of JSY beneficiaries</b>                                   | <b>290</b> |

Table H 11. Transport of the beneficiaries to reach the Health Institution

| Process of Transport  | Percent    |
|---|------------|
| Received referral slip from ASHA/health personnel to access delivery services   | 21.1       |
| Faced difficulty in reaching Health Institution   | 19.6       |
| If faced difficulty, type of difficulties faced in reaching the Health Institution by the beneficiaries ( <i>multiple options</i> ) |            |
| It was late in the night  | 25.5       |
| Did not have sufficient money   | 14.5       |
| Transport was not immediately available   | 74.5       |
| Male members in the household were not present  | -          |
| ASHA was not readily available  | 3.6        |
| Others  | 14.5       |
| Average distance to the ultimate place of delivery from the beneficiary's residence (in kms)  | 21.0       |
| Mode of transport used by the beneficiary to reach the ultimate place of delivery   |            |
| Government Ambulance  | 23.2       |
| Private vehicle   | 3.2        |
| Vehicle arranged by Local Health Committee  | -          |
| Other   | 73.6       |
| Persons facilitated in arranging the transport  |            |
| ASHA  | 17.1       |
| ANM/Health Worker   | 1.1        |
| Village Health Committee  | -          |
| Family members/relatives  | 81.9       |
| Others  |            |
| Beneficiary had money to pay for the transport services   | 61.6       |
| Average amount spent on transport (in Rs.)  | 440.1      |
| Average amount of transport assistance received under JSY scheme by the beneficiary (in Rs.)  | 52.3       |
| Cases where amount spent on transport is more than the amount received  | 227        |
| Persons accompanied the beneficiary to the Health Institution   |            |
| ASHA  | 25.3       |
| Relatives   | 51.6       |
| Mother/Mother-in-law  | -          |
| Husband   | -          |
| ANM/health Worker   | 0.2        |
| Others  | 22.9       |
| <b>Total number of JSY beneficiaries</b>  | <b>280</b> |

Table H 12. Waiting time at the health facility, type of delivery, amount spent at the health facility and satisfaction regarding services available in the health facility

| Waiting time, type of delivery and satisfaction regarding services                       |            |
|--|------------|
| Average waiting time at the facility until someone attended the beneficiary (in minutes) | 4.0        |
| Type of delivery (Percent)   |            |
| Normal   | 93.6       |
| Assisted (Forceps, Vacuum)   | 5.0        |
| Caesarean  | 1.4        |
| Average number of days spent in the facility till discharge                              | 2.3        |
| Percent beneficiary who have to pay at the health centre                                 | 67.5       |
| Average amount paid to the health centre (Rs.)   | 409.1      |
| Satisfaction regarding the services available in the health centre (Percent)             |            |
| Satisfied  | 77.1       |
| Somewhat satisfied   | 15.0       |
| Not satisfied  | 7.9        |
| Reasons for not satisfied with the services in the health centre (Percent)               |            |
| Staff was rude   | 52.4       |
| Facility was not clean   | -          |
| Poor quality of services   | 42.9       |
| Other  | 4.8        |
| <b>Total number of JSY beneficiaries</b>   | <b>280</b> |

Table H 13. Reason for the JSY beneficiary to opt home delivery, in spite of cash incentives being available under the JSY Scheme

| Reason for the beneficiary to opt home delivery              | Percent   |
|--|-----------|
| <b>Reasons for home delivery (<i>multiple options</i>)</b>   |           |
| Home delivery is more convenient                             | -         |
| Fear of stitches/caesarean                                   | -         |
| Indifferent behaviour of Medical/paramedical staff           | -         |
| Cultural/social reasons                                      | 20.0      |
| Transport not being available                                | 60.0      |
| Can't afford   | 20.0      |
| Others   | 40.0      |
| <b>Total number of JSY beneficiaries under Home Delivery</b> | <b>10</b> |

Table H 14. Cash incentive received by the beneficiary under JSY scheme

|  |              |
|--|--------------|
| <b>Cash incentive</b>  |              |
| <b>Beneficiary received cash incentive under JSY scheme (Percent)</b>    | 247<br>85.2  |
| <b>Average amount received by beneficiary as cash incentive (in Rs.)</b> | 1434.4       |
|  | Percent      |
| <b>Received the cash incentive:</b>                                      |              |
| In one go  | 98.8         |
| In 2 instalments   | 1.2          |
| In 3 instalments   | -            |
| <b>Timing of the receipt of the cash incentive by beneficiary</b>        |              |
| At the time of registration  | -            |
| At the time of antenatal checkups  | -            |
| Much before the delivery   | -            |
| Within a week before the EDD   | -            |
| Immediately after the delivery   | 13.0         |
| Within a week after the delivery   | 24.7         |
| Much later   | 54.7         |
| Not received yet   | -            |
| Do not know/husband knows  | 7.7          |
| Other  | -            |
| <b>The person who delivered the cash incentive to the beneficiary</b>    |              |
| Doctor   | 46.1         |
| LHV  | 4.9          |
| ANM/FHW  | 11.4         |
| Anganwadi worker   | 1.2          |
| ASHA worker  | 2.0          |
| Others   | 34.3         |
| <b>Place where the cash incentive received by the beneficiary</b>        |              |
| District/Sub-district Hospital   | 26.2         |
| Community Health Centre  | 52.0         |
| PHC  | 19.7         |
| Sub-Centre   | 0.8          |
| Anganwadi Centre   | 0.8          |
| Private hospital accredited by the government                            | -            |
| At home  | 0.4          |
| Other place  | -            |
| <b>Faced difficulty in getting incentive money</b>                       | 30.9<br>(76) |
| <b>If faced difficulty, type of difficulty faced by the beneficiary</b>  |              |
| Was asked to pay the bribe   | 21.1         |
| When paid by cheque/draft  | 26.3         |
| Other difficulty   | 52.6         |
| <b>Total number of JSY beneficiaries</b>                                 | <b>290</b>   |

Figures in parentheses are number of beneficiaries

Table H 15. Utilization of government health facility in last 6 months

| Utilization of government health facility   | Households located in Sub Centre HQ Village | Households located in other village | All  |
|---|---|-------------------------------------|------|
| Percent of household who availed health services in government health facility in last 6 months | 20.4  | 16.0                                | 18.2 |
| Total number of households  | 607   | 600                                 | 1207 |

Table H 16. Characteristics of the respondents who have availed the services in government health facility in last 6 months

| Characteristics of the respondent   | Percent    |
|---|------------|
| <b>Age</b>  |            |
| < 16 years  | 31.7       |
| 16-19 years   | 7.2        |
| 20-29 years   | 14.9       |
| 30-39 years   | 12.5       |
| 40-49 years   | 14.9       |
| 50-59 years   | 6.7        |
| 60 years or more  | 12.0       |
| <b>Sex</b>  |            |
| Male  | 52.4       |
| Female  | 47.6       |
| <b>Years of schooling completed</b>   |            |
| Illiterate  | 56.3       |
| 1-5 years   | 17.8       |
| 6-9 years   | 19.2       |
| 10+ years   | 6.7        |
| <b>Marital status</b>   |            |
| Unmarried   | 38.0       |
| Currently Married   | 58.3       |
| Divorced/Separated  | -          |
| Widowed   | 3.8        |
| <b>Social category of the household</b>   |            |
| SC  | 8.2        |
| ST  | 10.9       |
| OBC   | 59.1       |
| Others  | 21.8       |
| <b>Religion of the household</b>  |            |
| Hindu   | 98.6       |
| Muslim  | 1.4        |
| Christian   | -          |
| Sikh  | -          |
| Others  | -          |
| <b>BPL Household</b>  | 59.5       |
| <b>Standard of Living Index of the household</b>  |            |
| Low SLI   | 63.6       |
| Medium SLI  | 22.7       |
| High SLI  | 13.6       |
| <b>Total respondents who have availed the services in government health facility in last 6 months</b> | <b>220</b> |

## Client Satisfaction

Table H 17. Type of health facility visited, purpose of visit and client satisfaction regarding behaviour of health worker, privacy and availability medicines

| Type of health facility visited, purpose of visit and client satisfaction  | Percent |
|--|---------|
| <b>Type of health institution where service availed</b>  |         |
| District/Sub District Hospital   | 16.8    |
| CHC  | 63.0    |
| PHC  | 12.0    |
| Sub Centre   | 5.8     |
| AYUSH  | 2.4     |
| <b>Purpose of visit to the health facility</b>   |         |
| Treatment of minor ailment   | 47.6    |
| ANC care   | 1.4     |
| Child care   | 16.8    |
| Immunization   | -       |
| Other  | 34.1    |
| <b>Behaviour of the staff at the health facility</b>   |         |
| Courteous  | 68.6    |
| Casual/Indifferent   | 21.2    |
| Insulting/Derogatory   | 10.1    |
| <b>Listening of complaints by Doctor/staff</b>   |         |
| Listened to complaints   | 75.0    |
| Somewhat listened  | 12.0    |
| Not listened   | 12.0    |
| Can't say  | 1.0     |
| <b>Women patients treated with privacy and dignity</b>   |         |
| Yes  | 56.7    |
| No   | 30.3    |
| Don't know   | 13.0    |
| <b>Patients with chronic illnesses (like joint pains, heart disease, blood pressure, diabetes etc.) get medicines regularly from health facility</b> |         |
| Yes  | 37.5    |
| No   | 36.1    |
| Don't know   | 26.4    |
| <b>Private practice of the doctors during and after the duty hours</b>   |         |
| Yes  | 72.0    |
| No   | 15.5    |
| Don't know   | 12.6    |
| <b>Satisfaction with the overall services of the govt health facility</b>  |         |
| Satisfied  | 36.7    |
| Somewhat satisfied   | 23.7    |
| Not satisfied  | 39.6    |
| <b>Satisfaction with behaviour of staff at the govt health facility</b>  |         |
| Satisfied  | 46.3    |
| Somewhat satisfied   | 21.0    |
| Not satisfied  | 32.7    |
| <b>Total respondents who have availed the services in government health facility in last 6 months</b>  | 220     |

Table H 18. User fees and extra charges

| User fees and extra charges for the services provided   | Percent    |
|---|------------|
| <b>User fees charged from the users</b>   |            |
| Yes   | 66.8       |
| No  | 33.2       |
| <b>If user fees charged, type of user fees</b>  |            |
| Registration  | 82.0       |
| X-ray   | 13.7       |
| Ultrasound  | 5.0        |
| Lab test  | 28.1       |
| Other   | 18.7       |
| <b>Receipt given for the user fees</b>  |            |
| Given   | 61.6       |
| Not given   | 38.4       |
| <b>Extra money charged for the services provided</b>  |            |
| Yes   | 58.0       |
| No  | 41.3       |
| Don't know  | 0.7        |
| <b>Total respondents who have availed the services in government health facility in last 6 months</b> | <b>138</b> |

Table H 19. Services for the BPL patients

| BPL Patents   | Percent   |
|---|-----------|
| <b>BPL patients provided free/subsidized services</b>   |           |
| Yes   | 17.3      |
| No  | 55.6      |
| Don't know  | 27.2      |
| <b>BPL patients face difficulty in getting free/subsidized services</b>                                   |           |
| Yes   | 38.3      |
| No  | 30.9      |
| Don't know  | 30.9      |
| <b>RKS facilitates the paperwork for BPL patients</b>   |           |
| Yes   | 8.6       |
| No  | 44.4      |
| Don't know  | 46.9      |
| <b>Total BPL respondents who have availed the services in government health facility in last 6 months</b> | <b>81</b> |

**Table H 20. Outbreak of selected diseases (Malaria, Measles, Gastroenteritis, Jaundice and Other Diseases) in the respondents' area in the last six months**

| <b>Outbreak of diseases</b>                                  | <b>Percent</b> |
|--|----------------|
| <b>Outbreak of Malaria in the last six months</b>            |                |
| Yes  | 57.5           |
| No   | 31.0           |
| Don't know   | 11.5           |
| <b>Outbreak of Measles in the last six months</b>            |                |
| Yes  | 35.4           |
| No   | 53.8           |
| Don't know   | 10.9           |
| <b>Outbreak of Gastroenteritis in the last six months</b>    |                |
| Yes  | 42.2           |
| No   | 44.1           |
| Don't know   | 13.7           |
| <b>Outbreak of Jaundice in the last six months</b>           |                |
| Yes  | 28.6           |
| No   | 53.9           |
| Don't know   | 17.5           |
| <b>Outbreak of Any Other Diseases in the last six months</b> |                |
| Yes  | 17.6           |
| No   | 59.6           |
| Don't know   | 22.8           |
| <b>Total number of household respondents</b>                 | <b>1207</b>    |

Table H 21. Action to be taken for selected diseases (diarrhoea, high fever, persistent cough, loose motion, persistent cough and breathing problems for a child)

| Action to be taken for selected diseases (Multiple responses)                                  | Percent     |
|--|-------------|
| <b>Prevention of diarrhoea</b>   |             |
| Hand washing   | 14.9        |
| Use of safe food and water   | 36.9        |
| Use of covered containers  | 8.9         |
| Proper disposal of garbage   | 9.6         |
| Other  | 17.3        |
| Don't know   | 55.3        |
| <b>Action to be taken if a family member has a high fever</b>                                  |             |
| Get the blood tested for malaria   | 4.8         |
| Taken to the RMP   | 26.8        |
| Take to the nearest govt. health facility  | 57.4        |
| Consult ASHA   | 0.7         |
| Try home remedies  | 15.4        |
| Other  | 71.1        |
| Don't know   | 0.6         |
| <b>Action to be taken if a family member has a persistent cough for more than two weeks</b>    |             |
| Taken for sputum testing   | 3.1         |
| Taken to the RMP   | 24.7        |
| Take to the nearest govt. health facility  | 53.9        |
| Consult ASHA   | 1.0         |
| Try home remedies  | 38.9        |
| Other  | 67.5        |
| Don't know   | 0.6         |
| <b>Action to be taken if a family member has loose motions lasting for more than 24 hours</b>  |             |
| Stop giving Oral Fluids/Food etc   | 0.6         |
| Start giving ORS   | 10.0        |
| Taken to the RMP   | 24.4        |
| Take to the nearest govt. health facility  | 55.8        |
| Consult ASHA   | 1.7         |
| Try home remedies  | 28.2        |
| Other  | 63.5        |
| Don't know   | 1.0         |
| <b>Action to be taken if a child in the family has persistent cough and breathing problems</b> |             |
| Try home remedies  | 34.2        |
| Taken to the RMP   | 23.5        |
| Take to the nearest govt. health facility  | 51.4        |
| Consult ASHA   | 1.7         |
| Other  | 63.2        |
| Don't know   | 2.2         |
| <b>Total number of household respondents</b>   | <b>1207</b> |

Table H 22. Awareness about spacing methods and ideal gap between 1<sup>st</sup> and 2<sup>nd</sup> child

| Awareness about spacing methods and ideal gap between children   | Percent    |
|--|------------|
| Aware about the family planning methods                          | 80.0       |
| <b>Ideal gap between 1<sup>st</sup> and 2<sup>nd</sup> child</b> |            |
| 1 year   | 3.5        |
| 2 year   | 19.5       |
| 3 and more years   | 76.9       |
| <b>Methods available for spacing</b>                             |            |
| IUD  | 21.3       |
| Oral Pills   | 52.3       |
| Nirodh/Condom  | 40.6       |
| Any other  | 12.3       |
| Don't know   | 33.4       |
| <b>Total number of household respondents</b>                     | <b>966</b> |

Table H 23. Awareness about modes of getting AIDS, source of information about AIDS and awareness about VCTC

| AIDS and VCTC  | Percent       |
|--|---------------|
| Heard of HIV/AIDS  | 29.4<br>(355) |
| <b>Awareness about modes of getting HIV/AIDS (out of respondents who have heard of AIDS)</b>   |               |
| Unsafe sexual contact  | 80.6          |
| Blood transfusion  | 24.4          |
| Sharing needles/syringes   | 33.7          |
| From mother to child   | 11.8          |
| Shaking hands  | 1.4           |
| Sneezing   | 0.8           |
| Insect bite  | -             |
| Kissing  | 0.6           |
| Others   | 23.6          |
| <b>Source of information for HIV/AIDS (out of respondents who have heard of AIDS)</b>  |               |
| Radio  | 46.6          |
| TV   | 33.1          |
| Health workers   | 13.2          |
| Posters  | 11.0          |
| Newspapers   | 19.7          |
| Others   | 52.0          |
| <b>Aware about HIV/AIDS counselling centre/VCTC nearby(out of respondents who have heard of AIDS)</b>  | 20.2<br>(72)  |
| <b>Respondents by reported location of HIV/AIDS counselling centre/ VCTC (out of respondents who are aware about HIV/AIDS counselling centre/ VCTC nearby)</b> |               |
| PHC  | 5.6           |
| CHC  | 38.9          |
| District Hospital  | 34.7          |
| Sub-District Hospital  | 1.4           |
| Private Hospital   | 1.4           |
| Other  | 18.1          |
| <b>Total number of household respondents</b>   | <b>72</b>     |

**Table H 24: Suggestions given by the respondents**

|  |                   |
|--|-------------------|
| • Govt. Hospital/PHC/SC needed in the village                        |                   |
| • Doctor/ANM/ health worker should stay in the village               |                   |
| • Doctor/ANM needed in the village                                   |                   |
| • Facility for delivery should be available within the village       |                   |
| • Treatment should be available for all types of diseases            |                   |
| • Medicines should be available regularly                            |                   |
| • Treatment should be free of cost                                   |                   |
| • Drinking Water, Toilets Electricity facility needed in the village |                   |
| • Transport facility for patients is needed                          |                   |
| • Cleanliness needed in the village                                  |                   |
| • Pucca roads needed/roads should be repaired                        |                   |
| • Information/publicity about health schemes needed                  |                   |
| • ASHA should provide information about health schemes               |                   |
| • No suggestions/can't say/satisfied-                                | 114 (9.4 percent) |

## Chapter 7

### Status and Performance of ASHA

In Madhya Pradesh, ASHA scheme is introduced from the beginning of NRHM and almost all the villages have at least one ASHA worker in place in the state. Present chapter discusses the status and performance of ASHA workers under NRHM. As per the study design, ASHA worker was to be interviewed in every village to understand her functioning and performance on the key issues of NRHM such as her appointment, training, roles and responsibilities, her involvement in JSY, immunization etc. It also looked into the incentives and monetary benefits to ASHA and support from family members to ASHA.

#### 1. Status of ASHA

In Sidhi district, ASHAs are functional in almost all villages having more than one thousand and above population. During the survey, we could contact 21 ASHAs in 24 villages. The average population served by ASHA is 1339 and on an average ASHA is catering 2.1 villages. On the recruitment, 24 percent informed that they have been selected on the recommendation of ANM, three quarter (76 percent) were selected on the recommendation of Gram Pradhan. As per the guidelines, ASHAs supposed to be selected by Gram Panchayat through village health committee, only 5 percent of ASHAs reported that their selection was done after approval of their name by village health committee. It was observed that mostly ASHAs belonged to the influential families of the villages and no selection criteria such as education, willingness to serve community and her background was kept in mind. Some of the ASHAs are wives of community health workers and most of their job is done by their husband.

#### 2. Training of ASHA

Ninety-five percent of ASHAs in Sidhi have undergone training after their selection. Mostly training was given at district level. All the ASHAs have undergone first module training. The second and third module training was imparted to 95 percent and 90 percent ASHAs respectively. In Sidhi, fourth module was not yet started, hence no ASHA worker has undergone fourth module training. They have also received ASHA kit.

### **3. Role and Performance**

It is expected that ASHAs would take a leading role in motivating community for health services. She is also supposed to provide health education to the community. However, it was observed that mostly ASHSs are not working as per the expectation. Only 25 percent of ASHAs reported that they are working as DOTS provider. On an average they have benefited 8 cases in a month during three months prior to survey. It is observed that ASHSs in Sihawal block has not registered any JSY beneficiary during three months prior to survey. Average number of cases handled during last three months shows that on an average ASHAs given ORS to 12 children with diarrhoea, accompanied with 6 institutional deliveries, distributed 8 oral pill cycles, given drugs to 16 malaria patients, identified 5 new pregnancies. They have organized only 2 meetings and arranged VHND only once. It may be mentioned here that mostly ASHSs are not well versed with the NRHM and takes their job as casual work.

### **4. Incentives received**

It was envisaged that ASHSs would be motivated by the incentives they receive from their work. For various activities they are supposed to get incentives. It was observed that mechanism for incentive is not proper. ASHSs have no idea about different incentive they could receive under NRHM for various activities. It was asked to each ASHS, about the average incentive they receive in a month. It was observed that most of the ASHSs have no record of their work and incentives they receives. It was difficult for them to recall these facts. Some of the ASHSs could report on this aspect. It shows that, on an average, they get Rs. 505 for JSY, Rs. 186 for sterilization cases, Rs. 13 for VHND. For other work as assisting ANM in immunization, doing work at Anganwadi etc. they get Rs. 173. In all they get Rs. 877. ASHSs reported that incentives are not given properly, mainly paper formalities for incentives are a great concern and they get money only after one month after submitting the case.

### **5. Difficulties faced support required in implementation of NRHM**

It is observed that nearly all the ASHSs are not well aware of the NRHM. In fact NRHM has never been defined to them in any training. However, percentage of ASHAs who responded about the problems faced by them by types of problems are non-availability of

funds (38 percent), delay in supply of drugs, behaviour of health staff not supportive (19 percent) and inadequate facility for institutional delivery in their area (38 percent).

ASHAs were also asked about the support they require in overcoming these difficulties. Nineteen percent reported about more training to be imparted to ASHAs, 52 percent said that there should be a fixed remuneration, 48 percent said that payments should be made timely and 29 percent said other measures, such as regular meeting, availability of doctor in the village.

## 6. Awareness of ASHAs

ASHAs were asked about different health aspects to know their awareness about preventive steps in diarrhoea, timing of initiation of breastfeeding, exclusive breastfeeding and cash incentive given under JSY scheme. Two-thirds of ASHAs are aware of important steps for prevention of diarrhoea, 95 percent are aware of timing of initiation of breastfeeding. All of them are aware of age of child till when he/she should be exclusively breastfed and amount of JSY incentives

### Observation by PRC Team

- ASHAs are not selected as per the guidelines. Mostly they belong to the influential families of village and as such are not very interested in their work as ASHA.
- ASHAs are not aware of different national health programmes and have not done any target survey for assessment of demand in their area.
- ASHA kits are not of standard quality, medicines and drugs provided to them are found to be near expiry. There is no mechanism to replenish the drug kit of ASHA
- ASHAs have not used their kits, as most of the ASHAs have no knowledge about the use of drugs. Some of them cannot even read the name of drugs, their manufacturing date and expiry.
- There is a lack of coordination between ANM and ASHA.

**Status and Performance of ASHA  
(Based on ASHA Schedule)**

**Table A1. Status of ASHA**

|   |       |
|---|-------|
| A. Number of ASHA interviewed in the district                     | 21    |
| B. Average population served by ASHAs interviewed                 | 1339  |
| C. Average number of village / habitations served by AHSA covered | 2.1   |
| D. Percentage of ASHAs by method of selection                     |       |
| Selected on recommendation of ANM                                 | 23.8  |
| Selected on recommendation of Gram Pradhan                        | 76.2  |
| Selected on recommendation of Anganwadi Worker                    | 4.8   |
| Selected by Village Health Committee                              | 4.8   |
| Previously working as Dai   | -     |
| Other   | 9.5   |
| E. Percentage of ASHAs undergone training                         | 95.2  |
| F. Percentage of ASHAs undergone training by modules              |       |
| Module 1  | 100.0 |
| Module 2  | 95.0  |
| Module 3  | 90.0  |
| Module 4  | -     |
| G. Percentage of ASHAs issued ASHA Kit                            | 95.0  |

**Table A2. Role and Performance of ASHA**

|   |      |
|---|------|
| A. Percentage of ASHAs who are DOTS provider                                  | 25.0 |
| B. Average monthly no. of JSY cases facilitated in last 3 months by ASHA      | 8.2  |
| C. Average no. of cases handled in last three months                          |      |
| Children with diarrhea given ORS  | 12   |
| Accompanied Institutional deliveries cases                                    | 6    |
| Number of Oral Pills distributed  | 8    |
| Number of Malaria Patients given drugs  | 16   |
| Number of new pregnancies identified  | 5    |
| Number of group meetings like Mahila mandals arranged                         | 2    |
| Number of Health & Nutrition days arranged                                    | 1    |
| D. Average money incentive received by an ASHA on an average during one month |      |
| JSY   | 505  |
| Sterilisation   | 186  |
| VHND  | 13   |
| Other   | 173  |
| Total   | 877  |

**Table A3. Distribution of ASHAs by reported types of difficulties faced and kind of support required**

|   |      |
|---|------|
| A. Percentage of ASHAs by types of difficulties faced in implementing programme activities under NRHM |      |
| Funds not available in time   | 38.1 |
| Adequate training is not provided   | -    |
| Delayed supply of drugs   | 23.8 |
| Behaviour of staff in health facilities is not appropriate  | 19.0 |
| Inadequate facilities for institutional deliveries  | 38.1 |
| B. Reported kind of support require ASHA to enable her to implement the programme more effectively    |      |
| More training is to be arranged for ASHA & Community members  | 19.0 |
| ASHA should be paid a fixed remuneration  | 52.4 |
| Payments should be made timely  | 47.6 |
| Other   | 28.6 |

**Table A4. Distribution of ASHAs by reported awareness on different aspects**

|   |       |
|---|-------|
| A. Percentage of ASHAs reporting awareness about            |       |
| Important steps for prevention of diarrhoea                 | 66.7  |
| Time of initiating Breast Feeding                           | 95.2  |
| Age of child till when he/she should be exclusive breastfed | 100.0 |
| Amount of cash incentive given under JSY                    | 100.0 |

## Chapter 8

### Gram Panchayat

Gram Panchayat schedule was canvassed to the member of GP/Sarpanch representing the selected village. It covered the basic information about the Gram Panchayat (population and households covered), IEC activities carried out, functioning of the VHSC, implementation of ASHA and JSY, and awareness about the ASHA at the Gram Panchayat level. Out of 24 villages covered for the survey, we could interview 16 Gram Panchayat Members/Sarpanches. It was mainly secretary of the panchayat who could provide vital information about population and related information about the panchayat and its villages. It is found that most of the Sarpach / Panchayat members are not aware of the ongoing health programmes particularly NRHM and its components. It was also felt that they are little scared when asked about the funds received under various health schemes.

The average population of the 16 villages is 2820 with an average SC population of 409 (14.5 percent) and ST population of 444 (15.7 percent). The average number of households per village is 627 with an average of 118 SC and 113 ST households. The average number of BPL families per village is 262 with an average of 65 SC and 75 ST households. Regarding the regular availability of ANM, nearly one third (33 percent) of the Gram Panchayats reported that the ANM is regularly available in the village. Little more than half of the Gram Panchayats (53 percent) reported that they know the tour plan of the ANM. About 44 percent of the Gram Panchayats reported that the Sub Centre is providing timely services to the patients in the village. Nearly 56 percent of the Gram Panchayats reported that it had a role in conducting/finalising IEC programme in the village. However, less than one-third of GPs have conducted any IEC activities during last six months.

Only two-thirds of all the Gram Panchayats have reported the existence of the VHSC in their village. It is noteworthy to mention that barring only one GP, all have ASHA in position. Only 8 percent of GPs reported that they have prepared village health action

plan and have received untied grant for VHSC. Regular meeting of VHSCs is reported by 17 percent of GPs.

All the GPs covered have reported that they are aware of benefits of JSY scheme. It is obvious, that JSY is being projected as a flagship scheme for promoting institutional delivery, but at GP level, the sarpanch or other GP functionaries relate this scheme only with the cash incentives and not with the health benefit from JSY. Only one third of all the GPs have reported that NRHM has brought improvement in their area. It is observed JSY or NRHM as a programme is not known to any GP Sarpanch. Many of them informed that they are never called for any discussion by health functionary on these programmes. Those who are aware of NRHM, were asked about the type of improvement due to NRHM in their villages. The spontaneous response was availability of facility and monetary support under JSY scheme. A few reported that funds are available for sub-centres or better facilities at CHC/PHC for referral patients and about availability of transport facility.

It is observed that majority of GPs are not fully aware about NRHM and its components. Some of them even informed that they have learned about NRHM only after discussion with the PRC team, and before this there was no interaction with the health department regarding NRHM. More than two thirds of all the GPs reported other problems like lack of water and sanitation, non-availability of doctors in the village, lack of IEC on health related aspects in response to the question on problems faced by GP in implementation of NRHM activities.

Observation from PRC Team:

- Gram Panchayats are not informed about the launch of NRHM and its components.
- GPs are never involved in decision making at village level by health department
- Selection of ASHS workers has been done by and large by GPs but GPs are not aware of their role in NRHM

- Role of GPs in providing health services is found negligible, most of the sarpach / GP members informed that they provide facilities only when it is asked for by health department.
- Village health planning is not known to any GP. Moreover, role of VHSCs are also not clear to many GP members / Sarpach

**Table G1. Status of Gram Panchayats Covered**

|  |      |
|--|------|
| A. Number of Gram Panchayats covered in the district             | 16   |
| B. Average population of the Gram Panchayat covered              |      |
| Scheduled Caste  | 409  |
| Scheduled Tribe  | 444  |
| Total  | 2820 |
| C. Average number of Households in the Gram Panchayats covered   |      |
| Scheduled Caste  | 118  |
| Scheduled Tribe  | 113  |
| Total  | 627  |
| D. Average number of BPL families in the Gram Panchayats covered |      |
| Scheduled Caste  | 65   |
| Scheduled Tribe  | 75   |
| Total  | 262  |

**Table G2. Level of awareness and involvement of Gram Panchayats**

|  |       |
|--|-------|
| A1. Percentage of Gram Panchayat reporting regular availability of ANM   | 33.3  |
| A2. Percentage of Gram Panchayat reporting awareness about ANM Tour Plan   | 53.3  |
| B. Percentage of Gram Panchayat reporting timely services provided by Sub Centre to the patients                             | 43.8  |
| C. Percentage of Gram Panchayat reporting role of Gram Panchayat in conducting/finalizing IEC programme in Gram Panchayat    | 56.3  |
| D. Percentage of Gram Panchayat reporting existence of VHSC in their Gram Panchayat  | 68.8  |
| E. Percentage of Gram Panchayat reporting regular meetings of VHSC   | 16.7  |
| F. Percentage of Gram Panchayat reporting Village health Plan been prepared by VHSC  | 8.3   |
| G. Percentage of Gram Panchayat reporting that VHSC has received any Untied Fund   | 8.3   |
| H. Percentage of Gram Panchayat reporting ASHA workers in position   | 93.8  |
| I. Percentage of Gram Panchayat reporting awareness of the benefits under JSY scheme   | 100.0 |
| J. Percentage of Gram Panchayat reporting that NRHM brought about any improvement in their area                              | 31.3  |
| K. Percentage of Gram Panchayat reporting conduct of IEC activities during last 6 months                                     | 31.2  |
| L. Distribution of Gram Panchayats covered by type improvement reported due to NRHM  |       |
| • Funds available for maintenance of Sub Centres   | 20.0  |
| • Community support is available as ASHA worker  | -     |
| • Funds/facilities are available under JSY   | 100.0 |
| • Better facilities are available for CHCs/PHCs for referred patients  | 20.0  |
| • Transport facilities are available   | 40.0  |
| • Other  | -     |
| M. Distribution of Gram Panchayats by type of difficulties faced in implementing programme activities under NRHM             |       |
| • Funds not available in time  | 12.5  |
| • Decision making with the community leaders is difficult  | 18.8  |
| • ASHA has not been adequately trained   | 12.5  |
| • Adequate facilities for institutional deliveries not available   | 12.5  |
| • Any other  | 75.0  |
| M. Distribution of Gram Panchayats by kind of support required to enable them in implementing the programme more effectively |       |
| • More funds are required for maintenance/ effective functioning   | 12.5  |
| • Gram Panchayat should be given direct control over funds   | 12.5  |
| • More training is to be arranged for ASHA and Community members   | 12.5  |
| • Any other  | 68.8  |

## Chapter 9

### Quality of Care and Client Satisfaction (Based on IPD Exit Interview)

#### 1. Introduction

As per the study design, 5-10 IPD patients have to be interviewed at each of the health facility (1 District Hospital, 2 CHCs and 4 PHCs) at the time of discharge. Hence, the expected number of exit interview in the district varies between minimum of 35 and maximum of 70. Accordingly, we have interviewed 15 IPD patients from the DH and 5 from the CHC, Baidhan. No patient could be interviewed from CHC, Sihawal during our visits, since there was no patient admitted during that time. All the four PHCs are not providing any services for indoor patients hence no patients could be found at any PHC for IPD exit interview. Altogether, 20 IPD exit interviews are taken. As the number of patients interviewed is small (15 for DH, 5 for CHC), a caution is necessary while interpreting the figures.

#### 2. Characteristics of the patients

Characteristics of the patients interviewed for the IPD exit-interview are presented in Table EI-1. The age distribution of the IPD patients shows that almost all (95 percent) of the patients are aged less than 40 years and the remaining 5 percent are aged 60 years and above. The majority of the IPD patients interviewed are females (65 percent), currently married (75 percent) and from rural areas (80 percent). Purpose of admission to the health facility shows, that 55 percent of the patients were admitted for delivery, 25 percent for child treatment and remaining 20 percent for minor ailments. About three-fourths of the patients in DH were admitted for delivery followed by child health (20 percent) and remaining for minor ailments (7 percent).

#### 3. Waiting Time

The average waiting time for the patients for the Registration is 33 minutes (Table EI-3). The average waiting time for Registration in DH (30 minutes) is less than the waiting time in CHC (40 minutes). After the Registration, the patients had to wait on an average 30

minutes for the Doctor's call in the district hospitals. The average waiting time for Doctor's call in CHC is more than two hours. On an average, the doctors have examined the patients for 15 minutes and 20 minutes in DH and CHC respectively. Getting admission to the ward takes more time in DH (37 minutes) as compared to the CHC (19 minutes). However, services start early in DH (11 minutes) compared to CHC (16 minutes) once the patient gets admitted to the hospital. Getting discharge from DH takes about 38 minutes after all the required formalities are completed. Average discharge time for patients in CHC is about two hours.

#### **4. Satisfaction regarding Waiting Time**

Satisfaction of the patients regarding waiting time for different services is given in Table EI-4. The satisfaction with the waiting time for registration, doctor's call, doctor's examination, admission to ward, getting services and to get discharged is assessed with four categories: too long, appropriate, too short and can't say. It shows that majority of patients categorize waiting time as appropriate or too short. About one-fourth of the patients were dissatisfied from the waiting time in registration and another 20 percent rated waiting time for admission to ward and time to discharge as too long. It is noted that patients either at DH and CHC are not very dissatisfied with the waiting time for different services. Though the dissatisfaction levels are not very high for services (except for doctor's examination time), even the small level of dissatisfaction has to be properly addressed.

#### **5. Behaviour of Staff**

Behaviour of each category of staff (doctor, nurse, technical staff, ayah, ward boy and counter clerk) is assessed with a four point scale - rude, reasonable, good and very kind (Table EI-5). All the patients said that the doctor greeted them in a friendly manner in the first instance but 10 percent said that doctor did not greet them in friendly manner. Regarding the behaviour of doctors, nurses and technical staff, 40-80 percent of the patients said that their behaviour is good. Only one patient each from the district hospital and CHC reported that the behaviour of the doctor was rude. It is found that supporting staff at both types of facilities are not sensitive towards the patients. Patients termed their behaviour as either rude or very kind. However, majority of patients found behaviour of

ayah, ward boy and counter clerk as very kind. The figures indicate that the patients in general are satisfied with the behaviour of all categories of staff in the health facilities.

The patients were asked whether the hospital authorities have taken some unique/innovative measure to improve the staff behaviour in the hospital (Table EI7). For this question, 85 percent of the patients said that no unique/innovative measure was taken to improve the behaviour of the staff and 10 percent said that measures have been taken.

## **6. Privacy**

One of the criticisms for the services in public health facilities in India is lack of privacy during the examination, particularly for female patients. This can be addressed easily by making partitioning of the room or by keeping a curtain in the examination room. In the exit interview all the patients were asked whether there was privacy at the place of examination. On the whole, 95 percent of patients said that there was privacy in the place of examination. All the patients reported the presence of privacy in CHCs.

## **7. Patient-Doctor/Provider Communication**

Client-provider communication is one of the important dimensions of the quality of care. The doctor-patient communication was assessed from the patients in the following issues: doctor listened to the description of the ailment; doctor allowed to ask questions; doctor responded to questions; doctor discussed about ailment; doctor talked about recovery; and doctor gave other advice (Table EI-8). The response of the patients with respect to their interaction with the doctor shows that the patients are not totally happy with it. Regarding listening to the patient's ailment, 80 percent of the patients said that the doctor always listened to their ailment patiently, Though the majority of the patients (75 percent) said that the either the doctor always/somewhat allowed to ask questions or responded to questions still 39 percent of the patients said that the doctor did not respond to their questions. Similarly about one-third of the patients said that the doctor did not discuss about their ailment with them/talked about their recovery or gave any other advice.

Hospital wise satisfaction regarding the doctor-patient communication shows, majority of patients are satisfied about their communications with the doctor in CHCs. However, the analysis of client-provider communication clearly indicates that it needs to be improved in health facilities, more so in DH.

## **8. Cleanliness of the Facility**

Cleanliness of health facilities is assessed through the frequency of cleaning of floor and toilet/bathroom, changing patient's uniform and changing bed-sheets. Regarding the frequency of cleaning of the floor, the percentage of patients reported that the cleaning is done thrice a day is 25 percent, twice in a day is 65 percent, once in day is 10 percent. This shows that floor cleaning is done regularly and on daily basis. The percentage of patients said that the toilet/bathroom is cleaned twice a day is 25 percent, once a day is 45 percent and less than once a day is 25 percent. Cleanliness of floor and toilet/bathroom appears to be poor in CHCs. In DH, cleaning of floor and toilet/bathroom are done at least once a day, whereas in CHCs 20 percent of patients said that the floor cleaning is done once a day and 40 percent said that toilet/bathroom cleaning is done less than once a day.

Overall, 60 percent of patients said that patient uniform was not changed during their hospitalisation. It appears that changing bed sheet is not a common practice in the hospitals as 75 percent of patients reported that the bed sheet was changed less than once a day. Only 15 percent of the patients said that bed sheet was changed once a day.

## **9. Satisfaction Regarding the Cleanliness of the Facility**

The satisfaction regarding the cleanliness of the facility is assessed through three categories of satisfaction – satisfied, somewhat satisfied and not satisfied (Table EI10). It shows that 30-85 percent of the patients are clearly satisfied for cleaning of floor, cleaning toilet/bathroom, changing patients uniform and bed sheets. Dissatisfaction is more for not changing of bed sheets and uniform than for cleanliness. Satisfaction by type of facility shows that dissatisfaction is more in DH compared to CHCs for the various aspects of cleanliness. For example, about three-fourth of patients are nor satisfied with the frequency of changing bed sheets and 60 percent are not satisfied with the frequency of

changing patients clothing. The data on frequency of the cleanliness and satisfaction regarding the same clearly shows that lack of cleanliness is major issue in the health facilities.

#### **10. Crowding in the Facility**

Crowding in the facility is assessed through availability of cot for the patients, adequacy of the space in the ward, satisfaction with the arrangement of ward and adequacy of space in IPD (Table EI-11). Eighty percent of all the patients said that they got the cot immediately after the admission to the ward and all of them said that the cot was available to them till the time of discharge. As the bed occupancy in the hospitals is low availability of cot is not a problem in the hospitals. Regarding the adequacy of space in the ward, 65 percent said that it is not adequate, 40 percent said that they are not satisfied with the ward arrangements and there is a noise in wards.

#### **11. Amenities Provided by the Hospital**

The availability of amenities in health facilities as reported by the patients are given in Table EI-12. It shows that all the listed amenities are available only at district hospital. CHC have only medical shop and ambulance facility. It is noted that patients are not aware of these facilities being provided in the hospitals. Only 60 percent of patients are aware that DH have ambulance facility. Telephone for patients available is known to only 13 percent of patients. Less than one-fourth have reported availability of a canteen at the hospital. Among those who have reported availability, nearly half of them are satisfied with the facility. Television facility is not reported by any patients either at DH or CHC.

#### **12. Continuity of Treatment**

Patients satisfied with the services will continue to visit the facility. However, dissatisfied patients may cause harm to the public health programmes/facilities by discouraging others to go the government facility. Hence, any dissatisfaction may lead to underutilisation of the facilities and wastage of precious public resources. To understand this, the patients were asked about their overall satisfaction with the visit to the health facility, their willingness to visit again and their willingness to recommend the facility to others. Table

EI- 13 shows that, overall, 25 percent of the patients are 'satisfied' with their visit to the facility and 50 percent are 'somewhat satisfied' and another 25 percent are dissatisfied. Hence, the patients are neither highly satisfied nor dissatisfied – the satisfaction lies in between. Satisfaction by type of hospital shows that 80 percent of patients from DH and 60 percent from CHC are 'satisfied', or somewhat satisfies. Those who are not satisfied with the services or visit to the hospital said that it is due to lack of quality services or poor quality of services. Majority of patients (85 percent) said that they would visit again to the facility in case they need and 90 percent said that they would recommend this hospital to others.

## Quality of care and Client Satisfaction at IPD Facilities

(Based on IPD Exit Interview)

Table EI-1: Background characteristics of the in-patients

| Background Characteristics of the In-Patients | Percent   |
|---|-----------|
| <b>Age</b>                                    |           |
| < 20 years                                    | 10.0      |
| 20-29 years                                   | 75.0      |
| 30-39 years                                   | 10.0      |
| 40-49 years                                   | -         |
| 50-59 years                                   | -         |
| 60 years or more                              | 5.0       |
| <b>Sex</b>                                    |           |
| Male  | 35.0      |
| Female  | 65.0      |
| <b>Marital Status</b>                         |           |
| Unmarried                                     | 20.0      |
| Currently Married                             | 75.0      |
| Divorced/Separated                            | -         |
| Widowed                                       | 5.0       |
| <b>Residence</b>                              |           |
| Rural   | 80.0      |
| Urban   | 20.0      |
| <b>Type of Health Facility</b>                |           |
| District Hospital                             | 75.0      |
| CHC   | 25.0      |
| PHC   | -         |
| <b>Total In-patients interviewed</b>          | <b>20</b> |

Table EI-2: Purpose of admission in the Health Institution

| Purpose of admission in the Health Institution | Percent                 |          |          |           |
|--|-------------------------|----------|----------|-----------|
|  | Type of Health Facility |          |          |           |
|  | District Hospital       | CHC      | PHC      | All       |
| Minor illness                                  | 6.7                     | 60.0     | -        | 20.0      |
| Family planning surgery                        | -                       | -        | -        | -         |
| Delivery                                       | 73.3                    | -        | -        | 55.0      |
| Cataract surgery                               | -                       | -        | -        | -         |
| Child admitted                                 | 20.0                    | 40.0     | -        | 25.0      |
| Other  | -                       | -        | -        | -         |
| <b>Total In-patients interviewed</b>           | <b>15</b>               | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-3: Waiting time

| Average waiting time for:            | Average waiting time (in minutes) |          |          |           |
|--------------------------------------|-----------------------------------|----------|----------|-----------|
|                                      | Type of Health Facility           |          |          |           |
|                                      | District Hospital                 | CHC      | PHC      | All       |
| Registration                         | 30.6                              | 40.0     | -        | 33.0      |
| Doctor's call                        | 28.9                              | 144.0    | -        | 59.2      |
| Doctor's examination                 | 15.9                              | 20.0     | -        | 16.9      |
| Admission to ward                    | 37.3                              | 19.0     | -        | 32.8      |
| Getting services                     | 11.3                              | 16.0     | -        | 12.5      |
| To get discharged                    | 38.7                              | 118.0    | -        | 58.5      |
| <b>Total In-patients interviewed</b> | <b>15</b>                         | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-4: Satisfaction regarding waiting time

**A.**

| Type of Facility               | District Hospital            |             |           |           |
|--------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:              | Satisfaction (% of patients) |             |           |           |
|                                | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration                   | 20.0                         | 53.3        | 26.7      | -         |
| Doctor's call                  | 14.3                         | 50.0        | 35.7      | -         |
| Doctor's examination           | 7.1                          | 57.1        | 35.7      | -         |
| Admission to ward              | 20.0                         | 40.0        | 40.0      | -         |
| Getting services               | 6.7                          | 46.7        | 46.7      | -         |
| To get discharged              | 13.3                         | 46.7        | 40.0      | -         |
| <b>In-patients interviewed</b> | <b>15</b>                    |             |           |           |

**B.**

| Type of Facility               | CHC                          |             |           |           |
|--------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:              | Satisfaction (% of patients) |             |           |           |
|                                | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration                   | 40.0                         | 20.0        | 40.0      | -         |
| Doctor's call                  | 20.0                         | 40.0        | 40.0      | -         |
| Doctor's examination           | 20.0                         | 60.         | 20.0      | -         |
| Admission to ward              | 20.0                         | 40.0        | 40.0      | -         |
| Getting services               | 20.0                         | 20.0        | 60.0      | -         |
| To get discharged              | 40.0                         | 20.0        | 40.0      | -         |
| <b>In-patients interviewed</b> | <b>5</b>                     |             |           |           |

**C.**

| Type of Facility               | PHC                          |             |           |           |
|--------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:              | Satisfaction (% of patients) |             |           |           |
|                                | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration                   | -                            | -           | -         | -         |
| Doctor's call                  | -                            | -           | -         | -         |
| Doctor's examination           | -                            | -           | -         | -         |
| Admission to ward              | -                            | -           | -         | -         |
| Getting services               | -                            | -           | -         | -         |
| To get discharged              | -                            | -           | -         | -         |
| <b>In-patients interviewed</b> | -                            | -           | -         | -         |

**D.**

| Type of Facility               | All                          |             |           |           |
|--------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:              | Satisfaction (% of patients) |             |           |           |
|                                | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration                   | 25.0                         | 45.0        | 30.0      | -         |
| Doctor's call                  | 15.8                         | 47.4        | 36.8      | -         |
| Doctor's examination           | 10.5                         | 57.9        | 31.6      | -         |
| Admission to ward              | 20.0                         | 40.0        | 40.0      | -         |
| Getting services               | 10.0                         | 40.0        | 50.0      | -         |
| To get discharged              | 20.0                         | 40.0        | 40.0      | -         |
| <b>In-patients interviewed</b> | <b>20</b>                    |             |           |           |

Table EI-5: Behaviour of Staff

| Staff Behaviour                          | Percent                 |          |          |           |
|--|-------------------------|----------|----------|-----------|
|  | Type of Health Facility |          |          |           |
|  | District Hospital       | CHC      | PHC      | All       |
| <b>Doctor greet in a friendly manner</b> |                         |          |          |           |
| Yes                                      | 93.3                    | 80.0     | -        | 90.0      |
| Somewhat                                 | -                       | -        | -        | -         |
| No                                       | 6.7                     | 20.0     | -        | 10.0      |
| <b>Behaviour of Doctor</b>               |                         |          |          |           |
| Rude                                     | 6.7                     | 20.0     | -        | 10.0      |
| Reasonable                               | 13.3                    | 20.0     | -        | 15.0      |
| Good                                     | 80.0                    | 60.0     | -        | 75.0      |
| Very kind                                | -                       | -        | -        | -         |
| <b>Behaviour of Nurse</b>                |                         |          |          |           |
| Rude                                     | -                       | 20.0     | -        | 5.0       |
| Reasonable                               | 26.7                    | 60.0     | -        | 35.0      |
| Good                                     | 73.3                    | 20.0     | -        | 60.0      |
| Very kind                                | -                       | -        | -        | -         |
| <b>Behaviour of Technical Staff</b>      |                         |          |          |           |
| Rude                                     | -                       | -        | -        | -         |
| Reasonable                               | 40.0                    | 66.7     | -        | 50.0      |
| Good                                     | 40.0                    | 33.3     | -        | 37.5      |
| Very kind                                | 20.0                    | -        | -        | 12.5      |
| <b>Behaviour of Ayah</b>                 |                         |          |          |           |
| Rude                                     | 15.4                    | 33.3     | -        | 18.8      |
| Reasonable                               | -                       | -        | -        | -         |
| Good                                     | -                       | -        | -        | -         |
| Very kind                                | 84.6                    | 66.7     | -        | 81.3      |
| <b>Behaviour of Ward Boys</b>            |                         |          |          |           |
| Rude                                     | 23.1                    | 25.0     | -        | 23.5      |
| Reasonable                               | -                       | -        | -        | -         |
| Good                                     | -                       | -        | -        | -         |
| Very kind                                | 76.9                    | 75.0     | -        | 76.5      |
| <b>Behaviour of Counter Clerk</b>        |                         |          |          |           |
| Negligent                                | 7.1                     | -        | -        | 5.3       |
| Arrogant                                 | -                       | 20.0     | -        | 5.5       |
| Indifferent                              | -                       | 40.0     | -        | 10.5      |
| Good                                     | 92.9                    | 40.0     | -        | 78.9      |
| <b>Total In-patients interviewed</b>     | <b>15</b>               | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-6: Unique/innovative measure taken to improve the staff behaviour

| Staff Behaviour Staff   | Percent                 |          |          |           |
|---|-------------------------|----------|----------|-----------|
|   | Type of Health Facility |          |          |           |
|   | District Hospital       | CHC      | PHC      | All       |
| <b>Unique/innovative measure taken to improve the staff behaviour</b> |                         |          |          |           |
| Yes   | 6.7                     | 20.0     | -        | 10.0      |
| No  | 93.3                    | 60.0     | -        | 85.0      |
| Don't know  | -                       | 20.0     | -        | 5.0       |
| <b>Total In-patients interviewed</b>                                  | <b>15</b>               | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-7: Privacy

| Privacy   | Percent                 |          |          |           |
|---|-------------------------|----------|----------|-----------|
|   | Type of Health Facility |          |          |           |
|   | District Hospital       | CHC      | PHC      | All       |
| <b>Patients reporting Presence of privacy at the place of examination</b> | 93.3                    | 100.0    | -        | 95.0      |
| <b>Total In-patients interviewed</b>                                      | <b>15</b>               | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-8: Patient-Doctor/Provider Communication

| Patient-Doctor Communication                               | Percent                 |          |          |           |
|--|-------------------------|----------|----------|-----------|
|  | Type of Health Facility |          |          |           |
|  | District Hospital       | CHC      | PHC      | All       |
| <b>Doctor listened to description of ailment patiently</b> |                         |          |          |           |
| Yes, somewhat  | 6.7                     | 20.0     | -        | 10.0      |
| Yes, always  | 80.0                    | 80.0     | -        | 80.0      |
| No   | 13.3                    | -        | -        | 10.0      |
| <b>Doctor allowed to ask questions</b>                     |                         |          |          |           |
| Yes, somewhat  | 13.3                    | 40.0     | -        | 20.0      |
| Yes, always  | 53.3                    | 60.0     | -        | 55.0      |
| No   | 33.3                    | -        | -        | 25.0      |
| <b>Doctor responded to questions</b>                       |                         |          |          |           |
| Yes, somewhat  | 15.4                    | 40.0     | -        | 22.2      |
| Yes, always  | 46.2                    | 20.0     | -        | 38.9      |
| No   | 38.5                    | 40.0     | -        | 38.9      |
| <b>Doctor discussed about the ailment</b>                  | 60.0                    | 80.0     | -        | 65.0      |
| <b>Doctor talked about the recovery</b>                    | 53.3                    | 80.0     | -        | 60.0      |
| <b>Doctor gave 'other advice'</b>                          | 53.3                    | 80.0     | -        | 60.0      |
| <b>Total In-patients interviewed</b>                       | <b>15</b>               | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-9: Cleanliness of the facility

| A.   |                       |                 |                            |                     |
|--|-----------------------|-----------------|----------------------------|---------------------|
| Type of Facility                               | District Hospital     |                 |                            |                     |
| Frequency of cleaning                          | Percent of In-patient |                 |                            |                     |
|  | Floor                 | Toilet/Bathroom | Changing Patient's Uniform | Changing Bed Sheets |
| Thrice a day                                   | 33.3                  | 6.7             | 26.7                       | 6.7                 |
| Twice a day                                    | 60.0                  | 26.7            | 6.7                        | 6.7                 |
| Once a day                                     | 6.7                   | 46.7            | 66.7                       | 6.7                 |
| Less than once a day                           | -                     | 20.0            | -                          | 80.0                |
| <b>Total number of in-patients interviewed</b> | <b>15</b>             |                 |                            |                     |
| B.   |                       |                 |                            |                     |
| Type of Facility                               | CHC                   |                 |                            |                     |
| Frequency of cleaning                          | Percent of In-patient |                 |                            |                     |
|  | Floor                 | Toilet/Bathroom | Changing Patient's Uniform | Changing Bed Sheets |
| Thrice a day                                   | -                     | -               | -                          | -                   |
| Twice a day                                    | 80.0                  | 20.0            | -                          | -                   |
| Once a day                                     | 20.0                  | 40.0            | 60.0                       | 40.0                |
| Less than once a day                           | -                     | 40.0            | 40.0                       | 60.0                |
| <b>Total number of in-patients interviewed</b> | <b>5</b>              |                 |                            |                     |
| C.   |                       |                 |                            |                     |
| Type of Facility                               | PHC                   |                 |                            |                     |
| Frequency of cleaning                          | Percent of In-patient |                 |                            |                     |
|  | Floor                 | Toilet/Bathroom | Changing Patient's Uniform | Changing Bed Sheets |
| Thrice a day                                   | -                     | -               | -                          | -                   |
| Twice a day                                    | -                     | -               | -                          | -                   |
| Once a day                                     | -                     | -               | -                          | -                   |
| Less than once a day                           | -                     | -               | -                          | -                   |
| <b>Total number of in-patients interviewed</b> | <b>-</b>              |                 |                            |                     |
| D.   |                       |                 |                            |                     |
| Type of Facility                               | All                   |                 |                            |                     |
| Frequency of cleaning                          | Percent of In-patient |                 |                            |                     |
|  | Floor                 | Toilet/Bathroom | Changing Patient's Uniform | Changing Bed Sheets |
| Thrice a day                                   | 25.0                  | 5.0             | -                          | 5.0                 |
| Twice a day                                    | 65.0                  | 25.0            | 20.0                       | 5.0                 |
| Once a day                                     | 10.0                  | 45.0            | 20.0                       | 15.0                |
| Less than once a day                           | -                     | 25.0            | 60.0                       | 75.0                |
| <b>Total number of in-patients interviewed</b> | <b>20</b>             |                 |                            |                     |

Table EI-10: Satisfaction of patients regarding cleanliness of the facility

A.

| Type of Facility           | District Hospital               |                    |               | Total number of in-patients interviewed |
|----------------------------|---------------------------------|--------------------|---------------|---|
|                            | Satisfaction (% of in-patients) |                    |               |   |
| Satisfaction regarding     | Satisfied                       | Somewhat satisfied | Not satisfied |   |
| Floor cleaning             | 73.3                            | 13.3               | 13.3          | 15                                      |
| Toilet/Bathroom cleaning   | 20.0                            | 33.3               | 46.7          | 15                                      |
| Changing patient's uniform | 20.0                            | 20.0               | 60.0          | 15                                      |
| Changing bed-sheets        | 6.7                             | 20.0               | 73.3          | 15                                      |

B.

| Type of Facility           | CHC                             |                    |               | Total number of in-patients interviewed |
|----------------------------|---------------------------------|--------------------|---------------|---|
|                            | Satisfaction (% of in-patients) |                    |               |   |
| Satisfaction regarding     | Satisfied                       | Somewhat satisfied | Not satisfied |   |
| Floor cleaning             | 60.0                            | 20.0               | 20.0          | 5                                       |
| Toilet/Bathroom cleaning   | 20.0                            | 40.0               | 40.0          | 5                                       |
| Changing patient's uniform | 40.0                            | 20.0               | 40.0          | 5                                       |
| Changing bed-sheets        | -                               | 40.0               | 60.0          | 5                                       |

C.

| Type of Facility           | PHC                             |                    |               | Total number of in-patients interviewed |
|----------------------------|---------------------------------|--------------------|---------------|---|
|                            | Satisfaction (% of in-patients) |                    |               |   |
| Satisfaction regarding     | Satisfied                       | Somewhat satisfied | Not satisfied |   |
| Floor cleaning             | -                               | -                  | -             | -                                       |
| Toilet/Bathroom cleaning   | -                               | -                  | -             | -                                       |
| Changing patient's uniform | -                               | -                  | -             | -                                       |
| Changing bed-sheets        | -                               | -                  | -             | -                                       |

D.

| Type of Facility           | All                             |                    |               | Total number of in-patients interviewed |
|----------------------------|---------------------------------|--------------------|---------------|---|
|                            | Satisfaction (% of in-patients) |                    |               |   |
| Satisfaction regarding     | Satisfied                       | Somewhat satisfied | Not satisfied |   |
| Floor cleaning             | 70.0                            | 15.0               | 15.0          | 20                                      |
| Toilet/Bathroom cleaning   | 20.0                            | 35.0               | 45.0          | 20                                      |
| Changing patient's uniform | 25.0                            | 20.0               | 55.0          | 20                                      |
| Changing bed-sheets        | 5.0                             | 25.0               | 70.0          | 20                                      |

Table EI-11: Crowding in the facility

| Crowding in the facility                                  | Percent                 |          |          |           |
|---|-------------------------|----------|----------|-----------|
|   | Type of Health Facility |          |          |           |
|   | District Hospital       | CHC      | PHC      | All       |
| <b>Availability of cot</b>                                |                         |          |          |           |
| Immediately   | 73.3                    | 100.0    | -        | 80.0      |
| Not immediately but same day                              | 26.7                    | -        | -        | 20.0      |
| Next day  | -                       | -        | -        | -         |
| After more than a day                                     | -                       | -        | -        | -         |
| <b>Availability of cot/bed till the time of discharge</b> |                         |          |          |           |
| Yes   | 100.0                   | 100.0    | -        | 100.0     |
| No  | -                       | -        | -        | -         |
| <b>Adequacy of space in the ward</b>                      |                         |          |          |           |
| Not adequate  | 80.0                    | 20.0     | -        | 65.0      |
| Somewhat adequate   | 13.3                    | 60.0     | -        | 25.0      |
| Adequate  | 6.7                     | 20.0     | -        | 10.0      |
| <b>Satisfaction with the ward arrangement</b>             |                         |          |          |           |
| Not satisfied   | 46.7                    | 20.0     | -        | 40.0      |
| Somewhat satisfied  | 40.0                    | 20.0     | -        | 35.0      |
| Satisfied   | 13.3                    | 60.0     | -        | 25.0      |
| <b>Adequacy of space in IPD</b>                           |                         |          |          |           |
| Not adequate  | 40.0                    | -        | -        | 30.0      |
| Somewhat adequate   | 46.7                    | 60.0     | -        | 50.0      |
| Adequate  | 13.3                    | 40.0     | -        | 20.0      |
| <b>Lot of noise in the ward</b>                           |                         |          |          |           |
| Yes   | 33.3                    | 60.0     | -        | 40.0      |
| No  | 66.7                    | 40.0     | -        | 60.0      |
| <b>Total number of in-patients interviewed</b>            | <b>15</b>               | <b>5</b> | <b>-</b> | <b>20</b> |

Table EI-12: Amenities provided by the hospital

A.

| Type of Facility            | District Hospital                       |   |  |  |
|-----------------------------|---|---|--|--|
| Amenities                   | % of in-patients reporting Availability | Total number of in-patients interviewed | % of in-patients reporting Satisfaction among those who said that the amenity is available | Total number of in-patients interviewed who said that the amenity is available |
| Television                  | -                                       | -                                       | -  | -  |
| Canteen                     | 33.3                                    | 5                                       | 60.0   | 3  |
| Medical shop                | 26.7                                    | 4                                       | 50.0   | 2  |
| Telephone                   | 13.3                                    | 2                                       | 50.0   | 1  |
| Accommodation for relatives | 46.7                                    | 7                                       | 57.1   | 4  |
| Ambulance                   | 60.0                                    | 9                                       | 33.3   | 3  |

B.

| Type of Facility            | CHC                                     |   |  |  |
|-----------------------------|---|---|--|--|
| Amenities                   | % of in-patients reporting Availability | Total number of in-patients interviewed | % of in-patients reporting Satisfaction among those who said that the amenity is available | Total number of in-patients interviewed who said that the amenity is available |
| Television                  | -                                       | -                                       | -  | -  |
| Canteen                     | -                                       | -                                       | -  | -  |
| Medical shop                | 80.0                                    | 4                                       | 50.0   | 2  |
| Telephone                   | -                                       | -                                       | -  | -  |
| Accommodation for relatives | -                                       | -                                       | -  | -  |
| Ambulance                   | 60.0                                    | 3                                       | -  | -  |

C.

| Type of Facility            | PHC                                     |   |  |  |
|-----------------------------|---|---|--|--|
| Amenities                   | % of in-patients reporting Availability | Total number of in-patients interviewed | % of in-patients reporting Satisfaction among those who said that the amenity is available | Total number of in-patients interviewed who said that the amenity is available |
| Television                  | -                                       | -                                       | -  | -  |
| Canteen                     | -                                       | -                                       | -  | -  |
| Medical shop                | -                                       | -                                       | -  | -  |
| Telephone                   | -                                       | -                                       | -  | -  |
| Accommodation for relatives | -                                       | -                                       | -  | -  |
| Ambulance                   | -                                       | -                                       | -  | -  |

Table Contd . . .

D.

| Type of Facility            | All                                     |   |  |  |
|-----------------------------|---|---|--|--|
| Amenities                   | % of in-patients reporting Availability | Total number of in-patients interviewed | % of in-patients reporting Satisfaction among those who said that the amenity is available | Total number of in-patients interviewed who said that the amenity is available |
| Television                  | -                                       | -                                       | -  | -  |
| Canteen                     | 25.5                                    | 5                                       | 60.0   | 3  |
| Medical shop                | 40.0                                    | 8                                       | 50.0   | 4  |
| Telephone                   | 10.0                                    | 2                                       | 50.0   | 1  |
| Accommodation for relatives | 35.0                                    | 7                                       | 57.1   | 4  |
| Ambulance                   | 60.0                                    | 12                                      | 25.0   | 3  |

Table EI-13: Continuity of treatment

| Continuity of treatment                                   | Percent                 |       |     |      |
|---|-------------------------|-------|-----|------|
|   | Type of Health Facility |       |     |      |
|   | District Hospital       | CHC   | PHC | All  |
| <b>Satisfaction with the visit to the health facility</b> |                         |       |     |      |
| Dissatisfied  | 20.0                    | 40.0  | -   | 25.0 |
| Somewhat satisfied  | 53.3                    | 40.0  | -   | 50.0 |
| Satisfied   | 26.7                    | 20.0  | -   | 25.0 |
| <b>Reason for dissatisfaction (if dissatisfied)</b>       |                         |       |     |      |
| Lack of facilities  | -                       | -     | -   | -    |
| Bad experience with the Doctor                            | 33.3                    | -     | -   | 20.0 |
| Poor quality of services                                  | 66.7                    | 100.0 | -   | 80.0 |
| Charges are exorbitant                                    | -                       | -     | -   | -    |
| Other   | -                       | -     | -   | -    |
| <b>Visit again to the facility (if fell sick)</b>         |                         |       |     |      |
| Yes   | 86.7                    | 80.0  | -   | 85.0 |
| No  | 13.3                    | 20.0  | -   | 15.0 |
| May come/unsure   | -                       | -     | -   | -    |
| <b>Recommend this hospital to others</b>                  |                         |       |     |      |
| Yes   | 93.3                    | 80.0  | -   | 90.0 |
| No  | 6.7                     | 20.0  | -   | 10.0 |
| <b>Total number of in-patients interviewed</b>            | 15                      | 5     | -   | 20   |

## Chapter 10

### Quality of Care and Client Satisfaction (Based on OPD Exit Interview)

As per the study design interview 5-10 OPD patients at each of the selected health facility (1 District Hospital, 2 CHCs and 4 PHCs) at the time of their exit from the hospital was to be taken. Hence, the expected number of OPD exit interview in the district varies between minimum of 35 and maximum of 70. In Sidhi district health facility beyond district hospital are not providing OPD services to its fullest. PRC team approached CHCs for three continuous days and PHCs for two days to capture the patients perception about the health services provided in OPD. Team could complete 33 OPD exit interviews; 17 from district hospital and 8 each from CHC and PHC. It is necessary to interpret results cautiously as number of patients interviewed is very small.

#### 1. Characteristics of the patients:

The age distribution of the OPD patients shows that 46 percent of the patients belong to younger age of less than 30 years. Patients age 50 and above constitute only 15 percent of all the patients attending OPD including one-tenth of them age more than 60 years. There is no gender difference in OPD attendees. The majority of the OPD patients interviewed are currently married (73 percent) and from rural areas (70 percent). Purpose of visit to the health facility shows, forty-five percent came for treatment of minor ailments. More than one-third of patients interviewed at district hospital came for treatment of their children. Purpose of OPD visit by type of facility shows that minor and child illnesses are the two major reasons for the visit to the health facility.

#### 2. Average Waiting Time for Services

Overall, to get all the OPD services it takes on an average one hour for the patients in the hospitals (Table EO-3). Average time to get the OPD services is highest in district hospital (67 minutes) followed by CHC (35 minutes) and PHC (25 minutes). The waiting for the different OPD services shows that, getting different OPD services takes at least 10 minutes in the hospitals. Overall the average waiting time for the registration and doctors

examination is 17 minutes then the other services in the health facilities. Average waiting time for registration is higher in DH (23 minutes) followed by CHC (14 minutes) and PHC (7 minutes). Similarly, average waiting time for doctor's examination is also highest in DH (25 minutes) compared to CHCs and PHCs (8 minutes). None of the patients interviewed had gone to avail services for injection and dressing. Getting medicines takes only 5 minutes at district hospital, whereas it requires at least 10 minutes for getting medicines at CHC and PHC. The waiting time for the OPD services shows that, to get the services, the patients have to wait more time in DH than in CHCs and PHCs.

### 3. Satisfaction Regarding Waiting Time

Satisfaction of the patients regarding waiting time for different services is given in Table EO-4. The satisfaction with the waiting time for registration, doctor's examination, injection, dressing, getting medicines, and paying bill is assessed with four categories (too long, appropriate, too short and can't say). It shows that, except for registration, dissatisfaction is not very high as only 9-16 percent of the patients said that the waiting time is too long for these services. In fact, most of the patients (28-53 percent) reported that the waiting time for these services is too short. It is found that patients are mostly dissatisfied from the services at district hospital than CHC and PHC. Though the dissatisfaction levels of OPD services are not very high (except for registration time), even the small level of dissatisfaction has to be properly addressed.

### 4. Behaviour of Staff

Behaviour of each category of staff (doctor, nurse, technical staff, ayah, ward boy and counter clerk) is assessed with a four point scale - rude, reasonable, good and very kind (Table EO-5). None of the patients in any health facility reported that doctors behaved rudely with them. Majority of the patients found that all the service providers behaved reasonably or in good posture while taking the treatment. Thirteen percent of the patients said that the doctor greeted them in 'somewhat friendly manner' and 87 percent said that the doctor greeted them in a 'friendly manner'. Regarding the behaviour of doctors, nurses and dispenser, 66-78 percent of the patients said that they are good.. The figures indicate

that, the patients in general, are satisfied with the behaviour of all categories of staff in the health facilities.

## **5. Privacy**

In the exit interview, all the OPD patients were asked whether there was privacy at the place of examination. On the whole, only 79 percent of patients said that there was privacy in the place of examination. The percentage of patients reporting the presence of privacy is much lower in lowest in PHCs (50 percent) followed by 63 percent in CHC and cent percent at district hospital.

## **6. Patient-Doctor/Provider Communication**

The response of the OPD patients with respect to their interaction with the doctor shows that the patients have lot of concern about this. Regarding listening to the patient's ailment, 78 percent of the patients said that the doctor always listened to their ailment patiently, 16 percent said that the doctor listened somewhat and 6 percent said that doctor did not listen. The percentage of patients who said that the doctor did not allow to ask questions is 9 percent, did not respond to questions is 34 percent, did not discuss about the ailment is 53 percent, did not talk about recovery is 66 percent, and did not give other advice is 87 percent. This shows a clear relationship between the waiting time for services of doctors and patient-doctor interaction. If waiting time is more, communication between patient and doctor is less. It is also interesting to note that responses to the patients queries are not been addressed properly. These results show that the OPD patients are not happy with the communication of the doctors. Doctor-patient communication by type of hospital did not differ much and patients unhappiness is more or less similar with all the facilities.

## **7. Cleanliness of the OPD Facility.**

Satisfaction of the patients regarding the cleanliness of the OPD facilities (OPD room, examination room, dispensary, laboratory, injection room and dressing room) is presented in Table EI-8. It shows that, overall, 87-97 percent of the patients felt that the OPD facilities are clean and only 3 percent of the patients said that the facility is not clean.

## 8. Crowding in the OPD Areas

Compared to cleanliness, lot of dissatisfaction exists for crowding/inadequacy of space in the OPD facilities (OPD Room, Examination Room, Dispensary, laboratory, Injection Room and dressing Room) of the hospitals. The percentage of patients who said that the space is not adequate in OPD Room is 12 percent, Examination Room is 6 percent, Dispensary is 16 percent and laboratory 3 percent. Patients from district hospital reporting inadequacy or some what adequacy for different service points are OPD room (47 percent), examination room (29 percent) and dispensary (18 percent).

## 9. Continuity of Treatment

Table EI-13 shows that, overall, 31 percent of the patients are 'satisfied' with their visit to the facility, 58 percent 'somewhat satisfied' and 12 percent are dissatisfied. Compared to Satisfaction by type of hospital shows, none of the patients from PHC are fully satisfied with the visit to the facility while all the patients from DH are satisfied to some extent. Patients from CHC and PHC reasoned to poor quality of services and lack of facility for their dissatisfaction. Almost all the patients said that they would come again to the facility, in case they fell sick. Similarly, 95 percent of the patients said that they would recommend the hospital to others.

It may be mentioned that services at CHC and PHC in Sidhi district are very limited. It is observed that most of these facilities are functional only for a few hours per day. PHCs are not even provided services on day-to-day basis since most of the PHCs have no staff in position and therefore, services are not available. These results should be interpreted with caution.

## Quality of care and Client Satisfaction at OPD Facilities

(Based on OPD Exit Interview)

Table EO-1: Background characteristics of the patients

| Background Characteristics of the Out-Patients | Percent   |
|--|-----------|
| <b>Age</b>                                     |           |
| < 20 years                                     | 9.1       |
| 20-29 years                                    | 36.4      |
| 30-39 years                                    | 21.2      |
| 40-49 years                                    | 18.2      |
| 50-59 years                                    | 6.1       |
| 60 years or more                               | 9.1       |
| <b>Sex</b>                                     |           |
| Male   | 48.5      |
| Female   | 51.5      |
| <b>Marital Status</b>                          |           |
| Unmarried                                      | 15.2      |
| Currently Married                              | 72.7      |
| Divorced/Separated                             | -         |
| Widowed  | 12.1      |
| <b>Residence</b>                               |           |
| Rural  | 69.7      |
| Urban  | 30.3      |
| <b>Type of Health Facility</b>                 |           |
| District Hospital                              | 51.5      |
| CHC  | 24.2      |
| PHC  | 24.2      |
| <b>Total out-patients interviewed</b>          | <b>33</b> |

Table EO-2: Purpose of visit to the Health Institution

| Purpose of visit in the Health Institution | Percent                 |          |          |           |
|--|-------------------------|----------|----------|-----------|
|  | Type of Health Facility |          |          |           |
|  | District Hospital       | CHC      | PHC      | All       |
| Minor Illness                              | 17.6                    | 50.0     | 100.0    | 45.5      |
| FP Services                                | 5.9                     | -        | -        | 3.0       |
| Antenatal Care                             | 5.9                     | 25.0     | -        | 9.1       |
| PNC  | -                       | -        | -        | -         |
| Eye Check-up                               | 11.8                    | -        | -        | 6.1       |
| MDT-DOTs                                   | -                       | -        | -        | -         |
| Child Illness                              | 35.3                    | 25.0     | -        | 24.2      |
| Other                                      | 23.5                    | -        | -        | 12.1      |
| <b>Total out-patients interviewed</b>      | <b>17</b>               | <b>8</b> | <b>8</b> | <b>33</b> |

Table EO-3: Waiting time

A.

| Type of Facility                         | District Hospital                   |                                   |
|--|-------------------------------------|-----------------------------------|
| Average waiting time for:                | No. of patients availed the service | Average waiting time (in minutes) |
| Registration                             | 17                                  | 23.2                              |
| Doctor's examination                     | 17                                  | 25.6                              |
| Injection                                | -                                   | -                                 |
| Getting medicines                        | 3                                   | 5.0                               |
| Dressing                                 | -                                   | -                                 |
| Paying bill                              | 3                                   | 13.3                              |
| <b>Total time taken for OPD services</b> |                                     |                                   |

B.

| Type of Facility                         | CHC                                 |                                   |
|--|-------------------------------------|-----------------------------------|
| Average waiting time for:                | No. of patients availed the service | Average waiting time (in minutes) |
| Registration                             | 8                                   | 13.8                              |
| Doctor's examination                     | 8                                   | 8.1                               |
| Injection                                | -                                   | -                                 |
| Getting medicines                        | 8                                   | 13.1                              |
| Dressing                                 | -                                   | -                                 |
| Paying bill                              | -                                   | -                                 |
| <b>Total time taken for OPD services</b> |                                     |                                   |

C.

| Type of Facility                         | PHC                                 |                                   |
|--|-------------------------------------|-----------------------------------|
| Average waiting time for:                | No. of patients availed the service | Average waiting time (in minutes) |
| Registration                             | 7                                   | 6.9                               |
| Doctor's examination                     | 7                                   | 8.4                               |
| Injection                                | -                                   | -                                 |
| Getting medicines                        | 8                                   | 9.4                               |
| Dressing                                 | -                                   | -                                 |
| Paying bill                              | -                                   | -                                 |
| <b>Total time taken for OPD services</b> |                                     |                                   |

D.

| Type of Facility                         | All                                 |                                   |
|--|-------------------------------------|-----------------------------------|
| Average waiting time for:                | No. of patients availed the service | Average waiting time (in minutes) |
| Registration                             | 32                                  | 17.3                              |
| Doctor's examination                     | 32                                  | 17.5                              |
| Injection                                | -                                   | -                                 |
| Getting medicines                        | 19                                  | 10.3                              |
| Dressing                                 | -                                   | -                                 |
| Paying bill                              | 3                                   | 13.3                              |
| <b>Total time taken for OPD services</b> |                                     |                                   |

Table EO-4: Satisfaction regarding waiting time

**A.**

| Type of Facility     | District Hospital                   |                              |             |           |           |
|----------------------|-------------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:    | No. of patients availed the service | Satisfaction (% of patients) |             |           |           |
|                      |                                     | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration         | 17                                  | 29.4                         | 47.1        | 23.5      | -         |
| Doctor's examination | 17                                  | 11.8                         | 76.5        | 11.8      | -         |
| Injection            | -                                   | -                            | -           | -         | -         |
| Getting medicines    | 3                                   | 100.0                        | -           | -         | -         |
| Dressing             | -                                   | -                            | -           | -         | -         |
| Paying bill          | 3                                   | -                            | 66.7        | 33.3      | -         |

**B.**

| Type of Facility     | CHC                                 |                              |             |           |           |
|----------------------|-------------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:    | No. of patients availed the service | Satisfaction (% of patients) |             |           |           |
|                      |                                     | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration         | 8                                   | 12.5                         | 50.0        | 25.0      | 12.8      |
| Doctor's examination | 8                                   | 12.5                         | 62.5        | 25.0      | -         |
| Injection            | -                                   | -                            | -           | -         | -         |
| Getting medicines    | 8                                   | 25.0                         | 37.5        | 37.5      | -         |
| Dressing             | -                                   | -                            | -           | -         | -         |
| Paying bill          | -                                   | -                            | -           | -         | -         |

**C.**

| Type of Facility     | PHC                                 |                              |             |           |           |
|----------------------|-------------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:    | No. of patients availed the service | Satisfaction (% of patients) |             |           |           |
|                      |                                     | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration         | 7                                   | 14.3                         | -           | 85.7      | -         |
| Doctor's examination | 7                                   | -                            | 28.6        | 71.4      | -         |
| Injection            | -                                   | -                            | -           | -         | -         |
| Getting medicines    | 8                                   | 12.5                         | -           | 87.5      | -         |
| Dressing             | -                                   | -                            | -           | -         | -         |
| Paying bill          | -                                   | -                            | -           | -         | -         |

**D.**

| Type of Facility     | All                                 |                              |             |           |           |
|----------------------|-------------------------------------|------------------------------|-------------|-----------|-----------|
| Waiting time for:    | No. of patients availed the service | Satisfaction (% of patients) |             |           |           |
|                      |                                     | Too Long                     | Appropriate | Too Short | Can't Say |
| Registration         | 32                                  | 21.9                         | 37.5        | 37.5      | 3.1       |
| Doctor's examination | 32                                  | 9.4                          | 62.5        | 28.1      | -         |
| Injection            | -                                   | -                            | -           | -         | -         |
| Getting medicines    | 19                                  | 15.8                         | 31.6        | 52.6      | -         |
| Dressing             | -                                   | -                            | -           | -         | -         |
| Paying bill          | 3                                   | -                            | 66.7        | 33.3      | -         |

Table EO-5: Behaviour of Staff

| Staff Behaviour                          | Percent                 |       |      |      |
|--|-------------------------|-------|------|------|
|  | Type of Health Facility |       |      |      |
|  | District Hospital       | CHC   | PHC  | All  |
| <b>Doctor greet in a friendly manner</b> |                         |       |      |      |
| Not friendly                             | -                       | -     | -    | -    |
| Yes, somewhat                            | 11.8                    | -     | 28.6 | 12.5 |
| Yes                                      | 88.2                    | 100.0 | 71.4 | 87.5 |
| <b>Behaviour of Doctor</b>               |                         |       |      |      |
| Rude                                     | -                       | -     | -    | -    |
| Reasonable                               | 5.9                     | -     | 28.6 | 9.4  |
| Good                                     | 70.6                    | 100.0 | 71.4 | 78.1 |
| Very kind                                | 23.5                    | -     | -    | 12.5 |
| <b>Behaviour of Nursing Staff</b>        |                         |       |      |      |
| Rude                                     | -                       | -     | -    | -    |
| Reasonable                               | 25.0                    | -     | 40.0 | 26.3 |
| Good                                     | 75.0                    | 100.0 | 60.0 | 73.7 |
| Very kind                                | -                       | -     | -    | -    |
| <b>Behaviour of Dispenser</b>            |                         |       |      |      |
| Rude                                     | -                       | 12.5  | -    | 4.8  |
| Reasonable                               | 20.0                    | 25.0  | 25.0 | 23.8 |
| Good                                     | 80.0                    | 62.5  | 62.5 | 66.7 |
| Very kind                                | -                       | -     | 12.5 | 4.8  |
| <b>Behaviour of Technician</b>           |                         |       |      |      |
| Rude                                     | -                       | -     | -    | -    |
| Reasonable                               | -                       | -     | -    | -    |
| Good                                     | 83.3                    | 100.0 | -    | 88.9 |
| Very kind                                | -                       | -     | -    | 11.1 |
| <b>Total out-patients interviewed</b>    | 17                      | 8     | 8    | 33   |

Table EO-6: Privacy

| Privacy   | Percent                 |      |      |      |
|---|-------------------------|------|------|------|
|   | Type of Health Facility |      |      |      |
|   | District Hospital       | CHC  | PHC  | All  |
| <b>Patients reporting presence of privacy at the place of examination</b> | 100.0                   | 62.5 | 50.0 | 78.8 |
| <b>Total out-patients interviewed</b>                                     | 17                      | 8    | 8    | 33   |

Table EO-7: Patient-Doctor/Provider Communication

| Patient-Doctor Communication                               | Percent                 |          |          |           |
|--|-------------------------|----------|----------|-----------|
|  | Type of Health Facility |          |          |           |
|  | District Hospital       | CHC      | PHC      | All       |
| <b>Doctor listened to description of ailment patiently</b> |                         |          |          |           |
| Yes, somewhat  | 17.6                    | 12.5     | 14.3     | 15.6      |
| Yes, always  | 76.5                    | 87.5     | 71.4     | 78.1      |
| No   | 5.9                     | -        | 14.3     | 6.3       |
| <b>Doctor allowed to ask questions</b>                     |                         |          |          |           |
| Yes, somewhat  | 29.4                    | -        | 42.9     | 25.0      |
| Yes, always  | 52.9                    | 100.0    | 57.1     | 65.6      |
| No   | 17.6                    | -        | -        | 9.4       |
| <b>Doctor responded to questions</b>                       |                         |          |          |           |
| Yes, somewhat  | 11.8                    | 37.5     | 28.6     | 21.9      |
| Yes, always  | 58.8                    | 50.0     | -        | 43.8      |
| No   | 29.4                    | 12.5     | 71.4     | 34.4      |
| <b>Doctor discussed about the ailment</b>                  |                         |          |          |           |
| Yes  | 70.6                    | 25.0     | 14.3     | 46.9      |
| No   | 29.4                    | 75.0     | 87.5     | 53.1      |
| <b>Doctor talked about the recovery</b>                    |                         |          |          |           |
| Yes  | 41.2                    | 25.0     | 28.6     | 34.4      |
| No   | 58.8                    | 75.0     | 71.4     | 65.6      |
| <b>Doctor gave 'other advice'</b>                          |                         |          |          |           |
| Yes  | 17.6                    | 12.5     | -        | 12.5      |
| No   | 82.4                    | 87.5     | 100.0    | 87.5      |
| <b>Total out-patients interviewed</b>                      | <b>17</b>               | <b>8</b> | <b>8</b> | <b>33</b> |

Table EO-8: Satisfaction of OPD patients regarding cleanliness of the facility

A.

| Type of Facility       | District Hospital                   |                             |                 |       |
|------------------------|-------------------------------------|-----------------------------|-----------------|-------|
| Satisfaction regarding | No. of patients availed the service | Cleanliness (% of patients) |                 |       |
|                        |                                     | Not Clean                   | Partially Clean | Clean |
| OPD Room               | 17                                  | -                           | 23.5            | 70.6  |
| Examination Room       | 17                                  | -                           | 11.8            | 82.4  |
| Dispensary             | 17                                  | -                           | -               | 23.5  |
| Laboratory             | 17                                  | -                           | 5.9             | 17.6  |
| Injection Room         | -                                   | -                           | -               | -     |
| Dressing Room          | -                                   | -                           | -               | -     |

B.

| Type of Facility       | CHC                                 |                             |                 |       |
|------------------------|-------------------------------------|-----------------------------|-----------------|-------|
| Satisfaction regarding | No. of patients availed the service | Cleanliness (% of patients) |                 |       |
|                        |                                     | Not Clean                   | Partially Clean | Clean |
| OPD Room               | 8                                   | 12.5                        | 37.5            | 50.0  |
| Examination Room       | 8                                   | -                           | 25.0            | 75.0  |
| Dispensary             | 8                                   | -                           | 62.5            | 37.5  |
| Laboratory             | 8                                   | 12.5                        | 12.5            | -     |
| Injection Room         | -                                   | -                           | -               | -     |
| Dressing Room          | -                                   | -                           | -               | -     |

C.

| Type of Facility       | PHC                                 |                             |                 |       |
|------------------------|-------------------------------------|-----------------------------|-----------------|-------|
| Satisfaction regarding | No. of patients availed the service | Cleanliness (% of patients) |                 |       |
|                        |                                     | Not Clean                   | Partially Clean | Clean |
| OPD Room               | 8                                   | -                           | 25.0            | 75.0  |
| Examination Room       | 8                                   | -                           | -               | -     |
| Dispensary             | 8                                   | -                           | 50.0            | 50.0  |
| Laboratory             | 8                                   | -                           | -               | -     |
| Injection Room         | -                                   | -                           | -               | -     |
| Dressing Room          | -                                   | -                           | -               | -     |

D.

| Type of Facility       | All                                 |                             |                 |       |
|------------------------|-------------------------------------|-----------------------------|-----------------|-------|
| Satisfaction regarding | No. of patients availed the service | Cleanliness (% of patients) |                 |       |
|                        |                                     | Not Clean                   | Partially Clean | Clean |
| OPD Room               | 33                                  | 3.0                         | 27.3            | 66.7  |
| Examination Room       | 33                                  | -                           | 12.1            | 51.5  |
| Dispensary             | 33                                  | -                           | 27.3            | 33.3  |
| Laboratory             | 33                                  | 3.0                         | 6.1             | 9.1   |
| Injection Room         | -                                   | -                           | -               | -     |
| Dressing Room          | -                                   | -                           | -               | -     |

Table EO-9: Satisfaction of OPD patients regarding crowding in the facility

A.

| Type of Facility       | District Hospital                   |                          |                   |          |
|------------------------|-------------------------------------|--------------------------|-------------------|----------|
| Satisfaction regarding | No. of patients availed the service | Crowding (% of patients) |                   |          |
|                        |                                     | Not Adequate             | Somewhat Adequate | Adequate |
| OPD Room               | 17                                  | 17.6                     | 29.4              | 47.1     |
| Examination Room       | 17                                  | 11.8                     | 17.6              | 64.7     |
| Dispensary             | 17                                  | 11.8                     | 5.9               | 11.8     |
| Laboratory             | 17                                  | -                        | 5.9               | 11.8     |
| Injection Room         | -                                   | -                        | -                 | -        |
| Dressing Room          | -                                   | -                        | -                 | -        |

B.

| Type of Facility       | CHC                                 |                          |                   |          |
|------------------------|-------------------------------------|--------------------------|-------------------|----------|
| Satisfaction regarding | No. of patients availed the service | Crowding (% of patients) |                   |          |
|                        |                                     | Not Adequate             | Somewhat Adequate | Adequate |
| OPD Room               | 8                                   | 12.5                     | 75.0              | 12.5     |
| Examination Room       | 8                                   | -                        | 75.0              | 12.5     |
| Dispensary             | 8                                   | -                        | 100.0             | -        |
| Laboratory             | 8                                   | 12.5                     | 12.5              | -        |
| Injection Room         | -                                   | -                        | -                 | -        |
| Dressing Room          | -                                   | -                        | -                 | -        |

C.

| Type of Facility       | PHC                                 |                          |                   |          |
|------------------------|-------------------------------------|--------------------------|-------------------|----------|
| Satisfaction regarding | No. of patients availed the service | Crowding (% of patients) |                   |          |
|                        |                                     | Not Adequate             | Somewhat Adequate | Adequate |
| OPD Room               | 8                                   | -                        | 12.5              | 87.5     |
| Examination Room       | 8                                   | -                        | 12.5              | -        |
| Dispensary             | 8                                   | 37.5                     | 37.5              | 25.0     |
| Laboratory             | 8                                   | -                        | -                 | -        |
| Injection Room         | -                                   | -                        | -                 | -        |
| Dressing Room          | -                                   | -                        | -                 | -        |

D.

| Type of Facility       | All                                 |                          |                   |          |
|------------------------|-------------------------------------|--------------------------|-------------------|----------|
| Satisfaction regarding | No. of patients availed the service | Crowding (% of patients) |                   |          |
|                        |                                     | Not Adequate             | Somewhat Adequate | Adequate |
| OPD Room               | 33                                  | 12.1                     | 36.4              | 48.5     |
| Examination Room       | 33                                  | 6.1                      | 30.3              | 36.4     |
| Dispensary             | 33                                  | 15.2                     | 36.4              | 12.1     |
| Laboratory             | 33                                  | 3.0                      | 6.1               | 6.1      |
| Injection Room         | -                                   | -                        | -                 | -        |
| Dressing Room          | -                                   | -                        | -                 | -        |

Table EO-10: Continuity of treatment

| Continuity of treatment                                   | Percent                 |       |       |      |
|---|-------------------------|-------|-------|------|
|   | Type of Health Facility |       |       |      |
|   | District Hospital       | CHC   | PHC   | All  |
| <b>Satisfaction with the visit to the health facility</b> |                         |       |       |      |
| Dissatisfied  | -                       | 25.0  | 25.0  | 12.1 |
| Somewhat satisfied  | 64.7                    | 25.0  | 75.0  | 57.6 |
| Satisfied   | 35.3                    | 50.0  | -     | 30.3 |
| <b>Reason for dissatisfaction, if dissatisfied</b>        |                         |       |       |      |
| Lack of facilities  | -                       | 50.0  | -     | 25.0 |
| Bad experience with the Doctor                            | -                       | -     | -     | -    |
| Poor quality of services                                  | -                       | 50.0  | 100.0 | 75.0 |
| Charges are exorbitant                                    | -                       | -     | -     | -    |
| Other   | -                       | -     | -     | -    |
| <b>Visit again to the facility (if fell sick)</b>         |                         |       |       |      |
| Yes   | 82.4                    | 100.0 | 100.0 | 90.9 |
| No  | 11.8                    | -     | -     | 6.1  |
| May come/unsure   | 5.9                     | -     | -     | 3.0  |
| <b>Recommend this hospital to others</b>                  |                         |       |       |      |
| Yes   | 88.2                    | 100.0 | 100.0 | 93.9 |
| No  | 11.8                    | -     | -     | 6.1  |
| <b>Total out-patients interviewed</b>                     | 17                      | 8     | 8     | 33   |



| <b>Block C. Infrastructure [Information to be collected from Chief Medical Officer (CMO) Office]</b> |                                      |   |   |  |   |                         |
|--|--------------------------------------|---|---|--|---|-------------------------|
| <b>Q. No.</b>  |                                      |   |   |  |   |                         |
| <b>D114.</b>   | Name of the Respondent               |   |   | <b>Dr. S. B. Singh</b>   |   |                         |
| <b>D115.</b>   | Designation of the Respondent        |   |   | <b>Chief Medical Officer</b>   |   |                         |
|  | <b>Public Health Infrastructure</b>  | <b>Total Existing (In Nos.) (As on 30.6.2008)</b> | <b>New Buildings Under Construction (In Nos.) (As on 30.6.2008)</b> | <b>Total Number where IPHS facility survey completed (As on 30.6.2008)</b> | <b>No. of facilities where IPHS Upgradation completed (As on 30.6.2008)</b> |                         |
| <b>D116.</b>   | Sub Centre                           | 287   | -   | 0  | 0   |                         |
| <b>D117.</b>   | PHC                                  | 41  | -   | 0  | 0   |                         |
| <b>D118.</b>   | 24x7 PHCs                            | -   | -   | 0  | 0   |                         |
| <b>D119.</b>   | CHC                                  | 10  | -   | 0  | 0   |                         |
| <b>D120.</b>   | First Referral Units (FRUs)          | 1   | -   | 0  | 0   |                         |
| <b>D121.</b>   | Mobile medical units                 | 0   |   |  |   |                         |
| <b>D122.</b>   | Sub Divisional Hospitals             | 0   | -   | 0  | 0   |                         |
| <b>D123.</b>   | District Hospitals                   | 1   | -   | 1  | 0   |                         |
| <b>D124.</b>   | AYUSH                                | 72  | -   | 0  | 0   |                         |
|  | <b>Private Health Infrastructure</b> |   | <b>Total Existing (In Nos.) (As on 30.6.2008)</b>                   |  |   |                         |
| <b>D125.</b>   | Hospitals (More than 30 bedded)      |   | 13  |  |   |                         |
| <b>D126.</b>   | Nursing Homes (Less than 30 bedded)  |   | 7   |  |   |                         |
| <b>Facilities available in the district for delivery</b>   |                                      |   |   |  |   |                         |
|  | <b>Facility</b>                      | <b>Number of Facilities</b>                       |   |  |   |                         |
|  |                                      | Total existing in the District (As on 30.6.2008)  | Operational 24x7  | Providing BeMOC  | Providing CeMOC (Having Blood Storage, Anesthetist and Gynecologist)        | With New Born Care Unit |
| <b>D127.</b>   | District Hospital                    | 1   | 1   | 1  | 1   | 1                       |
| <b>D128.</b>   | Sub Divisional Hospital              | 0   | -   | -  | -   | -                       |
| <b>D129.</b>   | CHC                                  | 10  | 10  | 10   | 0   | 0                       |
| <b>D130.</b>   | PHC                                  | 41  | 4   | 0  | 0   | 0                       |
| <b>D131.</b>   | Public Maternity Homes               | -   | -   | -  | -   | -                       |

|              |                                    |   |   |   |   |   |
|--------------|------------------------------------|---|---|---|---|---|
| <b>D132.</b> | Others Public (ESI, Railways etc.) | - | - | - | - | - |
| <b>D133.</b> | Others Private                     | - | - | - | - | - |
| <b>D134.</b> | Private accredited for JSY         | - | - | - | - | - |

| <b>Block D.</b> |                   | <b>Human Resources Available in the District</b> <i>(Information to be collected from Chief Medical Officer (CMO) Office)</i> |                            |                             |                          |  |
|-----------------|-------------------|---|----------------------------|-----------------------------|--------------------------|--|
| <b>Q. No.</b>   |                   |   |                            |                             |                          |  |
|                 | <b>Category</b>   | <b>No. sanctioned</b>   | <b>Regular in Position</b> | <b>Contractual Recruits</b> | <b>Total in Position</b> |  |
| <b>D135.</b>    | Medical Officer   | 37  | 11                         | 0                           | 11                       |  |
| <b>D136.</b>    | Gynaecologist     | -   | -                          | -                           | -                        |  |
| <b>D137.</b>    | Anaesthetist      | -   | -                          | -                           | -                        |  |
| <b>D138.</b>    | Paediatrician     | -   | -                          | -                           | -                        |  |
| <b>D139.</b>    | Other Specialists | 28  | 3                          | 0                           | 3                        |  |
| <b>D140.</b>    | Staff Nurses      | 92  | 55                         | 13                          | 68                       |  |
| <b>D141.</b>    | ANM               | 389   | 258                        | 36                          | 294                      |  |

| <b>Block E.</b>  |                               | <b>Rogi Kalyan Samities (RKS)</b> <i>Information to be collected from District Programme Management Unit (DPMU)</i> |                                |
|--|-------------------------------|---|--------------------------------|
| <b>Q. No.</b>  |                               |   |                                |
| <b>D142.</b>   | Name of the Respondent        | Mr. Himanshu Pratap Singh   |                                |
| <b>D143.</b>   | Designation of the Respondent | District Programme Manager  |                                |
| Number of facilities having Rogi Kalyan Samities (RKS) Registered? |                               |   |                                |
|  |                               | <b>Total functioning</b>  | <b>No. with Registered RKS</b> |
| <b>D144.</b>   | District Hospital             | 1   | 1                              |
| <b>D145.</b>   | Sub Divisional Hospital       | 0   | -                              |
| <b>D146.</b>   | CHC                           | 10  | 10                             |
| <b>D147.</b>   | PHC                           | 41  | 41                             |

| <b>Block F. Janani Suraksha Yojana(JSY) (Information to be collected from District Programme Management Unit (DPMU))</b> |   |  |  |  |
|--|---|--|--|--|
| <b>Q. No.</b>  |   |  |  |  |
|  |   | <b>Response Category</b>   |  | <b>Skip</b>  |
| <b>D148.</b>   | Whether any PPP initiative being undertaken in the district for the implementation of JSY Scheme?         | Yes.....1<br>No.....2 ✓  |  | > Q D151   |
| <b>D149.</b>   | If yes, number of private health facilities accredited for JSY scheme                                     |  |  |  |
| <b>D150.</b>   | Which of the following areas are covered under PPP initiatives ( <i>Encircle all applicable options</i> ) | Lab services.....A<br>Diagnostics like Ultrasound & X-Rays.....B<br>Bio Medical waste Disposal....C<br>Sanitation.....D<br>Security.....E<br>Hiring of specialist services....F<br>Procurement of Drugs/<br>Equipment.....G<br>Providing transportation facility for delivery & referral cases....H<br>Other.....I |  |  |
| <b>Q. No.</b>  |   | <b>Total Institutional Deliveries Reported during 2007-08</b>  | <b>Total number of Registered JSY Women during 2007-08</b> | <b>Out of total number of Registered JSY Women, number of women opting for Institutional Delivery during 2007-08</b> |
|  | <b>At Govt. Facilities</b>  |  |  |  |
| <b>D151.</b>   | Scheduled Caste   | -  | -  | -  |
| <b>D152.</b>   | Scheduled Tribe   | -  | -  | -  |
| <b>D153.</b>   | General   | -  | -  | -  |
| <b>D154.</b>   | APL   | -  | -  | -  |
| <b>D155.</b>   | BPL   | -  | -  | -  |
| <b>D156.</b>   | <b>Total</b>  | -  | -  | -  |

| <b>Block F. Janani Suraksha Yojana(JSY) (Information to be collected from District Programme Management Unit (DPMU))</b> |   |   |   |   |
|--|---|---|---|---|
| <b>Q. No.</b>  |   |   |   |   |
|  | <b>At Private Facilities (Wherever accredited for services)</b> |   |   |   |
| <b>D157.</b>   | Scheduled Caste   | - | - | - |
| <b>D158.</b>   | Scheduled Tribe   | - | - | - |
| <b>D159.</b>   | General   | - | - | - |
| <b>D160.</b>   | APL   | - | - | - |
| <b>D161.</b>   | BPL   | - | - | - |
| <b>D162.</b>   | <b>Total</b>  | - | - | - |

| <b>Block G. Financial Mechanisms (Information to be collected from Finance Manager in District Programme Management Unit (DPMU))</b> |   |                          |             |
|--|---|--------------------------|-------------|
| <b>Q. No.</b>  |   |                          |             |
| <b>D163.</b>   | Name of the Respondent  |                          |             |
| <b>D164.</b>   | Designation of the Respondent   |                          |             |
|  |   | <b>Response Category</b> | <b>Skip</b> |
| <b>D165.</b>   | Have all the vertical health societies created under different programmes merged in to a District Health Society? | Yes.....1<br>No.....2✓   | >Q D168     |
| <b>D166.</b>   | Whether the merged district health society is registered?   | Yes.....1<br>No.....2    |             |
| <b>D167.</b>   | Is there a common bank account for all programmes in District Health Society                                      | Yes.....1<br>No.....2    |             |
| <b>D168.</b>   | Whether the district has prepared District Action Plan for the current year?                                      | Yes.....1✓<br>No.....2   | >Q D170     |
| <b>D169.</b>   | If yes, has the plan been approved by the district society?   | Yes.....1✓<br>No.....2   |             |

|              |   |   |  |
|--------------|---|---|--|
| <b>D170.</b> | How are the funds being received from the State in the district<br><i>(Encircle all applicable options)</i> | Activity wise.....A<br>As flexi pool funds.....B✓<br>Based on a set formula like size of district etc.....C<br>Based on previous year's expenditure ..... D<br>Based on Annual Action Plan .E✓<br>Others (pl Specify) .....F<br>Not aware.....G |  |
| <b>D171.</b> | Are the funds received were transferred electronically by the State   | Yes.....1✓<br>No.....2  |  |
| <b>D172.</b> | How many Sub Centres have Operational Joint Bank Account of ANM and Sarpanch?                               | -   |  |
|              | No. of centres for which Untied Grant for the current year transferred?                                     | -   |  |
| <b>D173.</b> | CHC   | -   |  |
| <b>D174.</b> | PHC   | -   |  |
| <b>D175.</b> | Sub Centre  | -   |  |



## Part B

## District Hospital

The infrastructure details to be supported by digital photographs of the facility and other areas like operation Theater, wards, pharmacy, lab etc

| <b>Block A.</b>   | <b>Identification Details</b> (Information to be collected from the Office Of Medical Superintendent of the Hospital)                                  |  |                       |
|---|--|--|-----------------------|
| <b>Q. No.</b>   | <b>Questions (for both Male/Female)</b>  |  |                       |
| <b>D176.</b>  | Name of District Hospital  | <b>District Hospital, Sidhi</b>                        |                       |
| <b>D177.</b>  | Name of the Respondent   | <b>Dr. S.K.S. Baghel</b>                               |                       |
| <b>D178.</b>  | Designation of the Respondent  | <b>Civil Surgeon</b>                                   |                       |
|   | Distance & Time Taken to travel to District Hospital in public transport from  | <b>Distance (in Kms.)</b>                              | <b>Time (in Hrs.)</b> |
| <b>D179.</b>  | Nearest CHC in the coverage area: Chruhat  | <b>13</b>  | <b>45</b>             |
| <b>D180.</b>  | Farthest CHC in the coverage area: Baidhan   | <b>125</b>   | <b>240</b>            |
| <b>D181.</b>  | Distance of District Hospital from the nearest bus stop (in Kms.)  | < 0.5 Km.....1<br>0.5 – 1 Km.....2✓<br>>1 Km.....3     |                       |
| <b>D182.</b>  | Has the IPHS facility survey been carried out in the District Hospital   | Yes.....1✓<br>No.....2                                 |                       |
| <b>Block B.</b>   | <b>Physical Infrastructure</b> (Information to be collected from the Office Of Medical Superintendant of the Hospital and supplemented by observation) |  |                       |
| <b>Q. No.</b>   | <b>Questions</b>   | <b>Response Category</b>                               |                       |
| <b>D183.</b>  | Area of the Hospital (in Sq. mtrs.)  | -  |                       |
| <b>D184.</b>  | Number of indoor beds available  | 142  |                       |
| <b>D185.</b>  | Is the hospital located near residential area?   | Yes.....1✓<br>No.....2                                 |                       |
| <b>D186.</b>  | Is necessary environmental clearance obtained from Pollution Control Board by the Hospital?  | Yes.....1<br>No.....2✓                                 |                       |
| <b>D187.</b>  | Whether hospital building is disable friendly as per provisions of Disability Act? (Ramp, Lift, wheel chair movement etc.)                             | Yes.....1<br>No.....2✓                                 |                       |
| <b>Administrative/ Main Block (Availability of following)</b> |  |  |                       |
| <b>D188.</b>  | Waiting Space adjacent to each consultation and treatment room   | Yes- in all .....1<br>No.....2<br>Yes – in some.....3✓ |                       |
| <b>D189.</b>  | Registration Counter   | Yes.....1✓<br>No.....2                                 |                       |
| <b>D190.</b>  | Blood Bank/ Blood storage Unit   | Yes.....1✓<br>No.....2                                 |                       |

|                          |   |  |
|--------------------------|---|--|
| <b>D191.</b>             | Doctors' Duty Room  | Yes.....1✓<br>No.....2   |
| <b>D192.</b>             | Isolation Room  | Yes.....1✓<br>No.....2   |
| <b>D193.</b>             | Treatment Room  | Yes.....1✓<br>No.....2   |
| <b>D194.</b>             | Pharmacy (Dispensary)   | Yes.....1<br>No.....2✓   |
| <b>D195.</b>             | Intensive Care Unit (ICU)   | Yes.....1✓<br>No.....2   |
| <b>D196.</b>             | High Dependency Wards   | Yes.....1<br>No.....2✓   |
| <b>D197.</b>             | Critical Care Area (Emergency Services)   | Yes.....1<br>No.....2✓   |
| <b>D198.</b>             | Examination and Preparation Room  | Yes.....1✓<br>No.....2   |
| <b>Hospital Services</b> |   |  |
| <b>D199.</b>             | Hospital Kitchen (Dietary Service)  | Yes.....1✓<br>No.....2   |
| <b>D200.</b>             | Central Sterile and Supply Department (CSSD)  | Yes.....1✓<br>No.....2   |
| <b>D201.</b>             | Hospital Laundry  | Yes.....1<br>No.....2✓   |
| <b>D202.</b>             | Medical and General Stores  | Yes.....1<br>No.....2✓   |
| <b>D203.</b>             | Engineering Services Backup   | Yes.....1<br>No.....2✓   |
| <b>D204.</b>             | Ventilation (Natural or mechanical exhaust) in the wards  | Yes.....1✓<br>No.....2   |
| <b>D205.</b>             | Water coolers / Refrigerators   | Yes.....1<br>No.....2✓   |
| <b>D206.</b>             | Round the clock water supply  | Yes.....1✓<br>No.....2   |
| <b>D207.</b>             | Overhead water storage tank with Pumping and boosting arrangements                                | Yes.....1<br>No.....2✓   |
| <b>D208.</b>             | Provision for fire fighting   | Yes.....1<br>No.....2✓   |
| <b>D209.</b>             | Proper drainage and sanitation system for waste water, surface water, sub soil water and sewerage | Yes.....1<br>No.....2✓   |
| <b>D210.</b>             | How is the Bio Medical Waste disposed? ( <i>Encircle all applicable options</i> )                 | Buried .....A✓<br>Incineration.....B<br>Outsourced to agency<br>.....C<br>Thrown in open.....D |
| <b>D211.</b>             | Is Bio Medical Waste segregated in three different bins?  | Yes.....1<br>No.....2✓   |

|              | <b>Number of Residential Quarters available for all medical and Para medical staff</b> | <b>No. Available</b>   | <b>No. Occupied</b> |
|--------------|--|------------------------|---------------------|
| <b>D212.</b> | Medical Staff  | <b>6</b>               | <b>6</b>            |
| <b>D213.</b> | Para medical staff   | <b>25</b>              | <b>25</b>           |
| <b>D214.</b> | Parking place  | Yes.....1✓<br>No.....2 |                     |
| <b>D215.</b> | Medical Records Section  | Yes.....1✓<br>No.....2 |                     |
| <b>D216.</b> | Is the disease classification being carried out as per protocols                       | Yes.....1✓<br>No.....2 |                     |
| <b>D217.</b> | Availability of telephone  | Yes.....1✓<br>No.....2 |                     |
| <b>D218.</b> | Availability of Fax equipment  | Yes.....1✓<br>No.....2 |                     |
| <b>D219.</b> | Availability of Computers  | Yes.....1✓<br>No.....2 |                     |
| <b>D220.</b> | Availability of Internet services  | Yes.....1✓<br>No.....2 |                     |

| <b>Obstetrics &amp; Gynae Section (Information to be collected from the Sister In charge of Gynae ward &amp; supplemented by Observation from records)</b> |   |                                 |                                     |
|--|---|---------------------------------|-------------------------------------|
| <b>D221.</b>   | Name of the Respondent  | Mrs. Jorgina Dube               |                                     |
| <b>D222.</b>   | Designation of the Respondent                                   | Sister In-Charge                |                                     |
|  |   | <b>Response Category</b>        | <b>Skip</b>                         |
| <b>D223.</b>   | Is there a separate Ward for Female Patients?                   | Yes.....1✓<br>No.....2          | >Q D226                             |
| <b>D224.</b>   | If Yes, the number of beds                                      | 20                              |                                     |
| <b>D225.</b>   | Bed Occupancy Rate in the last 12 months (As on March 31, 2008) | 132.8 %                         |                                     |
| <b>D226.</b>   | Total OPD in last 3 calendar months                             | 2546                            |                                     |
| <b>D227.</b>   | Total deliveries in last 3 calendar months                      | 1756                            |                                     |
| <b>D228.</b>   | Is there a separate OT available for Gynaecology & Obstetrics   | Yes.....1<br>No.....2✓          |                                     |
| <b>Procedures Carried Out</b>  |   |                                 |                                     |
|  | <b>Particulars</b>  | <b>Availability of Services</b> | <b>If Yes, Numbers in 2007-2008</b> |
| <b>D229.</b>   | Total deliveries conducted                                      |                                 | 6960                                |
| <b>D230.</b>   | Caesarean section deliveries                                    | Yes.....1✓<br>No.....2          | 87                                  |

|   |   |                        |                              |
|---|---|------------------------|------------------------------|
| <b>D231.</b>  | Caesarean section for JSY                       | Yes.....1✓<br>No.....2 | 87                           |
| <b>D232.</b>  | Assisted Delivery                               | Yes.....1✓<br>No.....2 | No Separate record available |
| <b>D233.</b>  | Forceps delivery                                | Yes.....1✓<br>No.....2 | No Separate record available |
| <b>D234.</b>  | MTP   | Yes.....1✓<br>No.....2 |                              |
| <b>D235.</b>  | Mid trimester Abortion                          | Yes.....1✓<br>No.....2 | 40                           |
| <b>D236.</b>  | Ectopic Pregnancy                               | Yes.....1✓<br>No.....2 | -                            |
| <b>D237.</b>  | Retained Placenta                               | Yes.....1✓<br>No.....2 | 7                            |
| <b>D238.</b>  | Eclampsia                                       | Yes.....1✓<br>No.....2 | 8                            |
| <b>D239.</b>  | PPH   | Yes.....1✓<br>No.....2 | 6                            |
| <b>D240.</b>  | Sterilisation                                   | Yes.....1✓<br>No.....2 | 148                          |
| <b>D241.</b>  | Suturing Cervical Tear                          | Yes.....1✓<br>No.....2 | -                            |
| <b>D242.</b>  | Hysterectomy                                    | Yes.....1✓<br>No.....2 | 1                            |
| <b>D243.</b>  | Infertility Treatment                           | Yes.....1✓<br>No.....2 | -                            |
| <b>Surgical Section</b> ( <i>Information to be collected from the Sister In charge of Surgical ward &amp; supplemented by Observation</i> ) |   |                        |                              |
| <b>D244.</b>  | Name of the Respondent                          |                        |                              |
| <b>D245.</b>  | Designation of the Respondent                   |                        |                              |
|   | No. of Surgical OPD in last three months: Total |                        | 674                          |
| <b>D246.</b>  | Female  |                        | 234                          |
| <b>D247.</b>  | Male  |                        | 440                          |
|   | No. of Surgical IPD in last three months: Total |                        | 739                          |
| <b>D248.</b>  | Female  |                        | 242                          |
| <b>D249.</b>  | Male  |                        | 497                          |

|              | Availability of Services                          | Response Category      | If Yes, Numbers in last 3 months |
|--------------|---|------------------------|----------------------------------|
| <b>D250.</b> | Emergency (Accident & other emergency) (Casualty) | Yes.....1✓<br>No.....2 | -                                |
| <b>D251.</b> | Pancreas Surgery                                  | Yes.....1<br>No.....2✓ | -                                |
| <b>D252.</b> | Spleen and Portal Hypertension Surgery            | Yes.....1<br>No.....2✓ | -                                |
| <b>D253.</b> | Abdomen Surgery                                   | Yes.....1✓<br>No.....2 | -                                |
| <b>D254.</b> | Breast Surgery                                    | Yes.....1<br>No.....2✓ | -                                |
| <b>D255.</b> | Leprosy Reconstructive surgery                    | Yes.....1<br>No.....2✓ | -                                |

**Medical Section (Information to be collected from the Sister In charge of Medical ward & supplemented by Observation)**

| <b>D256.</b> | Name of the Respondent                           |                        |                                  |
|--------------|--|------------------------|----------------------------------|
| <b>D257.</b> | Designation of the Respondent                    |                        |                                  |
|              | Medical OPD in last three months                 |                        | 906                              |
| <b>D258.</b> | Female   |                        | 310                              |
| <b>D259.</b> | Male   |                        | 596                              |
|              | Medical IPD in last three months                 |                        | 615                              |
| <b>D260.</b> | Female   |                        | 239                              |
| <b>D261.</b> | Male   |                        | 376                              |
|              | Availability of Services                         | Response Category      | If Yes, Numbers in last 3 months |
| <b>D262.</b> | Dermatology and Venerology (Skin & VD) RTI / STI | Yes.....1<br>No.....2✓ | 221                              |
| <b>D263.</b> | Services under NLEP                              | Yes.....1✓<br>No.....2 | -                                |
| <b>D264.</b> | Pleural Aspiration                               | Yes.....1✓<br>No.....2 | -                                |
| <b>D265.</b> | Pleural Biopsy                                   | Yes.....1<br>No.....2✓ | -                                |
| <b>D266.</b> | Bronchoscopy                                     | Yes.....1<br>No.....2✓ | -                                |

|              |                                   |                        |   |
|--------------|-----------------------------------|------------------------|---|
| <b>D267.</b> | Lumbar Puncture                   | Yes.....1<br>No.....2✓ | - |
| <b>D268.</b> | Pericardial tapping               | Yes.....1<br>No.....2✓ | - |
| <b>D269.</b> | Skin scraping for fungus / AFB    | Yes.....1<br>No.....2✓ | - |
| <b>D270.</b> | Bone Marrow Biopsy                | Yes.....1<br>No.....2✓ | - |
| <b>D271.</b> | Endoscopic Specialised Procedures | Yes.....1<br>No.....2✓ | - |
| <b>D272.</b> | Psychiatry Services               | Yes.....1<br>No.....2✓ | - |

| <b>Pediatric Section (Information to be collected from the Sister In charge of Pediatric ward &amp; supplemented by Observation)</b> |  |                             |         |
|--|--|-----------------------------|---------|
| <b>D273.</b>   | Name of the Respondent                             | Smt. Alka Yadav             |         |
| <b>D274.</b>   | Designation of the Respondent                      | Sister-In-charge            |         |
|  | <b>Pediatric OPD in 2007-2008</b>                  | <b>Total Numbers: 15530</b> |         |
| <b>D275.</b>   | Female   | -                           |         |
| <b>D276.</b>   | Male   | -                           |         |
| <b>D277.</b>   | Designated/identified Beds for newborns available? | Yes -----1✓<br>No -----2    | >Q D279 |
| <b>D278.</b>   | <b>If yes, no. of beds</b>                         | 30                          |         |
|  | <b>Pediatric Patients admitted in 2007-2008</b>    | <b>Numbers</b>              |         |
| <b>D279.</b>   | Total Admitted                                     | 3928                        |         |
| <b>D280.</b>   | Neonates admitted                                  | 509                         |         |
| <b>D281.</b>   | Other Infants (1-11 Months) admitted               | 1093                        |         |
| <b>D282.</b>   | Children under 5 yrs admitted                      | 1782                        |         |
|  | <b>Services Available</b>                          |                             |         |
| <b>D283.</b>   | Asphyxia Management                                | Yes.....1✓<br>No.....2      |         |
| <b>D284.</b>   | Management of severe malnourished children         | Yes.....1✓<br>No.....2      |         |

| <b>Pediatric Section (Information to be collected from the Sister In charge of Pediatric ward &amp; supplemented by Observation)</b> |   |                        |                                |
|--|---|------------------------|--------------------------------|
| <b>D285.</b>   | Management of Neo Natal Sepsis                    | Yes.....1✓<br>No.....2 |                                |
| <b>D286.</b>   | Management of Dehydration and Diarrhoeal Cases    | Yes.....1✓<br>No.....2 |                                |
| <b>D287.</b>   | Management of Respiratory Tract / Pnuemonia Cases | Yes.....1✓<br>No.....2 |                                |
|  | <b>Equipment Available</b>                        | Available?             | If available, whether working? |
| <b>D288.</b>   | Cradle  | Yes.....1✓<br>No.....2 | Yes.....1✓<br>No.....2         |
| <b>D289.</b>   | Incubator   | Yes.....1✓<br>No.....2 | Yes.....1✓<br>No.....2         |
| <b>D290.</b>   | Radiant Heat Warmer                               | Yes.....1✓<br>No.....2 | Yes.....1✓<br>No.....2         |
| <b>D291.</b>   | Phototherapy Unit                                 | Yes.....1✓<br>No.....2 | Yes.....1✓<br>No.....2         |
| <b>D292.</b>   | Bag with Mask                                     | Yes.....1✓<br>No.....2 |                                |
| <b>D293.</b>   | Laryngoscope                                      | Yes.....1<br>No.....2✓ | Yes.....1<br>No.....2          |
| <b>D294.</b>   | Oxygen Mask                                       | Yes.....1✓<br>No.....2 |                                |
| <b>D295.</b>   | Suction Machine                                   | Yes.....1✓<br>No.....2 | Yes.....1✓<br>No.....2         |
| <b>D296.</b>   | Thermometer                                       | Yes.....1✓<br>No.....2 | Yes.....1✓<br>No.....2         |
|  | <b>Availability of drugs</b>                      |                        |                                |
| <b>D297.</b>   | ORS (WHO new formula)                             | Yes.....1✓<br>No.....2 |                                |
| <b>D298.</b>   | Vitamin A Solution                                | Yes.....1✓<br>No.....2 |                                |
| <b>D299.</b>   | Iron folic Acid Syrup                             | Yes.....1<br>No.....2✓ |                                |
| <b>D300.</b>   | Paediatric Antibiotics                            | Yes.....1✓<br>No.....2 |                                |

| <b>Diagnostic Section (Information to be collected from Radiology Section &amp; supplemented by Observation)</b> |                                 |                          |  |
|--|---------------------------------|--------------------------|--|
| <b>D301.</b>   | Name of the Respondent          |                          |  |
| <b>D302.</b>   | Designation of the Respondent   |                          |  |
|  | Diagnostic OPD in last 3 months |                          |  |
| <b>D303.</b>   | Female                          | -                        |  |
| <b>D304.</b>   | Male                            | -                        |  |
|  | <b>Availability of services</b> | <b>Response Category</b> | <b>If Yes, Number carried out in last 3 months</b> |
| <b>D305.</b>   | X-Ray                           | Yes.....1✓<br>No.....2   | <b>820</b>   |
| <b>D306.</b>   | Ultrasound                      | Yes.....1<br>No.....2✓   | -  |
| <b>D307.</b>   | Ultrasound guided Biopsy        | Yes.....1<br>No.....2✓   | -  |
| <b>D308.</b>   | ECG                             | Yes.....1✓<br>No.....2   | -  |

| <b>Lab Services (Information to be collected from the Lab Technician &amp; supplemented by Observation)</b> |                                    |                          |  |
|---|------------------------------------|--------------------------|--|
| <b>D309.</b>  | Name of the Respondent             | Shri Omkar Singh         |  |
| <b>D310.</b>  | Designation of the Respondent      | Lab Technician           |  |
|   | Number attended in last 3 months   | Total: 4492              |  |
| <b>D311.</b>  | Female                             | -                        |  |
| <b>D312.</b>  | Male                               | -                        |  |
|   | <b>Availability of services</b>    | <b>Response Category</b> | <b>If Yes, Number carried out in last 3 months</b> |
|   | <b>CLINICAL PATHOLOGY</b>          |                          |  |
| <b>D313.</b>  | Haematology                        | Yes.....1✓<br>No.....2   | <b>1559</b>  |
| <b>D314.</b>  | Urine Analysis                     | Yes.....1✓<br>No.....2   | <b>821</b>   |
| <b>D315.</b>  | Stool Analysis                     | Yes.....1✓<br>No.....2   | <b>0</b>   |
| <b>D316.</b>  | Semen Analysis (morphology, count) | Yes.....1✓<br>No.....2   | -  |

| <b>Lab Services (Information to be collected from the Lab Technician &amp; supplemented by Observation)</b> |  |                        |   |
|---|--|------------------------|---|
| <b>D317.</b>  | CSF Analysis (Cell count, culture sensitivity etc., gram staining) | Yes.....1<br>No.....2✓ | - |
| <b>D318.</b>  | Aspirated fluids (cell count cytology)                             | Yes.....1<br>No.....2✓ | - |
| <b>PATHOLOGY</b>  |  |                        |   |
| <b>D319.</b>  | PAP smear  | Yes.....1<br>No.....2✓ | - |
| <b>D320.</b>  | Split Skin Smear Examination for leprosy                           | Yes.....1<br>No.....2✓ | - |
| <b>D321.</b>  | Sputum   | Yes.....1✓<br>No.....2 | - |
| <b>D322.</b>  | Histopathology   | Yes.....1<br>No.....2✓ | - |
| <b>D323.</b>  | Microbiology   | Yes.....1<br>No.....2✓ | - |
| <b>D324.</b>  | Serology   | Yes.....1✓<br>No.....2 | - |
| <b>D325.</b>  | Biochemistry   | Yes.....1✓<br>No.....2 | - |
| <b>D326.</b>  | Physiology (Pulmonary function test)                               | Yes.....1<br>No.....2✓ | - |

**Block C. Human Resource (Information to be collected from the Statistics Section of the Office of Medical Superintendent of the Hospital)**

|              |                                       |                   |                            |                                |              |
|--------------|---------------------------------------|-------------------|----------------------------|--------------------------------|--------------|
| <b>D327.</b> | Name of the Respondent                | Dr. Baghel        |                            |                                |              |
| <b>D328.</b> | Designation of the Respondent         | Civil Surgeon     |                            |                                |              |
|              | <b>Category of Personnel</b>          | <b>Sanctioned</b> | <b>Regular In Position</b> | <b>Contractual In Position</b> | <b>Total</b> |
| <b>D329.</b> | Hospital Superintendent               | 1                 | 0                          | 0                              | 0            |
| <b>D330.</b> | Medical Specialist                    | 3                 | -                          | -                              | -            |
| <b>D331.</b> | Surgery Specialist                    | 2                 | -                          | -                              | -            |
| <b>D332.</b> | Gynaecologist                         | 3                 | 1                          | 0                              | 1            |
| <b>D333.</b> | Gynaecologist (short term trained MO) | 0                 | -                          | -                              | -            |
| <b>D334.</b> | Pediatrician                          | 2                 | 2                          | 0                              | 2            |
| <b>D335.</b> | Anesthetist                           | 2                 | 1                          | 0                              | 1            |

| <b>Block C. Human Resource (Information to be collected from the Statistics Section of the Office of Medical Superintendent of the Hospital)</b> |   |    |    |   |    |
|--|---|----|----|---|----|
| <b>D336.</b>   | Anesthetist (short term trained MO)       | 0  | -  | - | -  |
| <b>D337.</b>   | Radiologist                               | 1  | -  | - | -  |
| <b>D338.</b>   | General Duty Doctor                       | 5  | 4  | 0 | 4  |
| <b>D339.</b>   | Public Health Manager                     | 0  | -  | - | -  |
| <b>D340.</b>   | AYUSH Physician                           | 0  | -  | - | -  |
| <b>D341.</b>   | Pathologists                              | 1  | 1  | 0 | 1  |
| <b>D342.</b>   | Psychiatrist                              | 0  | -  | - | -  |
| <b>D343.</b>   | Dermatologist / Venereologist             | 0  | -  | - | -  |
| <b>D344.</b>   | ENT Surgeon                               | 0  | -  | - | -  |
| <b>D345.</b>   | Ophthalmologist                           | 0  | -  | - | -  |
| <b>D346.</b>   | Orthopaedician                            | 1  | 1  | 0 | 1  |
| <b>D347.</b>   | Microbiologist                            | 0  | -  | - | -  |
| <b>D348.</b>   | Dental Surgeon                            | 1  | 1  | 0 | 1  |
|  | <b>Para-Medicals</b>                      |    |    |   |    |
| <b>D349.</b>   | Staff Nurse                               | 75 | 17 | 0 | 17 |
| <b>D350.</b>   | Hospital worker (OP/ward +OT+ blood bank) | 16 | 6  | 0 | 6  |
| <b>D351.</b>   | Sanitary Worker                           | 20 | 12 | 0 | 12 |
| <b>D352.</b>   | Ophthalmic Assistant / Refractionist      | 2  | 1  | 0 | 1  |
| <b>D353.</b>   | Social Worker / Counselor                 | 0  | -  | - | -  |
| <b>D354.</b>   | ECG Technician                            | 0  | -  | - | -  |
| <b>D355.</b>   | Audiometrician                            | 0  | -  | - | -  |
| <b>D356.</b>   | Laboratory Technician ( Lab + Blood Bank) | 8  | 8  | 0 | 8  |
| <b>D357.</b>   | Laboratory Attendant (Hospital Worker)    | 3  | 1  | 0 | 1  |
| <b>D358.</b>   | Dietician                                 | 0  | -  | - | -  |
| <b>D359.</b>   | ANM                                       | 8  | 6  | 0 | 6  |
| <b>D360.</b>   | LHV                                       | 1  | 1  | 0 | 1  |
| <b>D361.</b>   | PHN                                       | 0  | -  | - | -  |
| <b>D362.</b>   | Radiographer                              | 4  | 1  | 0 | 1  |
| <b>D363.</b>   | Pharmacist                                | 0  | -  | - | -  |
| <b>D364.</b>   | Matron                                    | 3  | 0  | 0 | 0  |
| <b>D365.</b>   | Physiotherapist                           | 0  | -  | - | -  |

| <b>Block C. Human Resource (Information to be collected from the Statistics Section of the Office of Medical Superintendent of the Hospital)</b> |                                      |    |    |   |    |
|--|--------------------------------------|----|----|---|----|
| <b>D366.</b>   | Medical Records Officer / Technician | 7  | 2  | 0 | 2  |
|  | <b>Administrative Staff</b>          |    |    |   |    |
| <b>D367.</b>   | Manager (Administration)             | 1  | 0  | 0 | 0  |
| <b>D368.</b>   | Junior Administrative Officer        | 2  | 2  | 0 | 2  |
| <b>D369.</b>   | Office Superintendent                | 2  | 2  | 0 | 2  |
| <b>D370.</b>   | Accounts Manager                     | 0  | -  | - | -  |
| <b>D371.</b>   | Driver                               | 2  | 0  | 1 | 1  |
| <b>D372.</b>   | Peon                                 | 13 | 10 | - | 10 |

| <b>Block D. Other Framework and Structure Related Issues (Information to be collected from the Office of Medical Superintendent of the Hospital)</b> |  |   |             |
|--|--|---|-------------|
|  |  | <b>Response Category</b>  | <b>Skip</b> |
| <b>D373.</b>   | Whether the Rogi Kalyan Samiti established for the Hospital  | Yes.....1✓<br>No.....2  | >Q D382     |
| <b>D374.</b>   | If Yes, whether Rogi Kalyan Samiti Registered for the Hospital?  | Yes.....1✓<br>No.....2  |             |
| <b>D375.</b>   | Are there any official charges for consultation/ procedures?   | Yes.....1✓<br>No.....2  | >Q D378     |
| <b>D376.</b>   | If yes, are people belonging to BPL/ SC/ ST exempted/ subsidized?  | Yes.....1✓<br>No.....2  | >Q D378     |
| <b>D377.</b>   | If yes, what is the procedure for granting exemption ( <i>Encircle all applicable options</i> )              | Based on BPL Ration Card.....A✓<br>Based on Certification by hospital authorities/ Govt.....B✓<br>Based on recommendation of RKS.....C✓<br>Based on Financial compensation by RKS.....D<br>Others (please specify).....E✓ |             |
| <b>D378.</b>   | How do RKS generate additional resources other than govt. grants? ( <i>Encircle all applicable options</i> ) | Donation.....A<br>User fees.....B✓<br>Other innovative means (through arrangements like PPP, outsourcing of services etc.).....C✓   |             |

| <b>Block D. Other Framework and Structure Related Issues (Information to be collected from the Office of Medical Superintendent of the Hospital)</b> |   |   |  |
|--|---|---|--|
| <b>D379.</b>   | How is the money generated used?<br><i>(Encircle all applicable options)</i>                  | Retained within the facility for local use.....A✓<br>Retained but not used....B<br>Transferred to district Accounts.....C<br>Other .....D |  |
| <b>D380.</b>   | Is display board put up in Hospital showing number of members, number of meetings of RKS etc? | Yes.....1<br>No.....2✓  |  |
| <b>D381.</b>   | How feedback is taken for grievance redressal by RKS?   | Social Audit.....1<br>Public Scrutiny of action taken .....2<br>No feedback mechanism ...3✓<br>Others (please specify).....4              |  |

**D382.** Any Other Special Ward/ Procedures not covered above

District hospital has nutritional rehabilitation centre (NRC). The NRC has established with the support of DFID and EC. This centre is mainly caters the malnourished children age less than 6 years. In NRC, children along with the mothers called based on the reports from field and given 7 to 15 days stay. During their stay, children are provided nutrition supplement and mothers are taught to prepare nutritious food available locally. It has been very effective in lowering the prevalence of grade-3 and grade-4 malnutrition.

**D383.** Any other remarks by MS of the hospital/ Other members which have not been captured in the questions above but are relevant

Remarks are mentioned in the district profile

**D384.** Any other remarks or suggestions for improvement of services by Observer which have not been captured in the questions above but are relevant

Remarks are mentioned in the district profile

**If the patient has availed service either in (OPD or IPD) the observer to go to Exit**

**Interview Schedule**  
D D M M Y Y

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 0 | 5 | 0 | 1 | 0 | 9 |
|---|---|---|---|---|---|

Date

**Nikhilesh Parchure**

Name of the Investigator



Signature of the Investigator

## Appendix - 2

## Scores given for the computation of Standard of Living Index

| Variables                      | Categories                    | Categories                   | Scores |
|--------------------------------|-------------------------------|------------------------------|--------|
| Type of house                  |                               | Pucca                        | 4      |
|                                |                               | Semi Pucca                   | 2      |
|                                |                               | Kachcha                      | 0      |
| Ownership of house             |                               | Yes                          | 2      |
|                                |                               | No                           | 0      |
| Separate Kitchen               |                               | Yes                          | 1      |
|                                |                               | No                           | 0      |
| Toilet facility                | Separate toilet               | Yes                          | 2      |
|                                |                               | No                           | 0      |
| Fuel for cooking               | LPG/Biogas for cooking        | Yes                          | 2      |
|                                |                               | No                           | 0      |
| Source of drinking water       | Water supply - piped          | Yes                          | 2      |
|                                |                               | No                           | 0      |
| Ownership of items             | Mattresses                    | Yes                          | 1      |
|                                | Pressure cooker               | Yes                          | 1      |
|                                | Chair                         | Yes                          | 1      |
|                                | Cot/Bed                       | Yes                          | 1      |
|                                | Table                         | Yes                          | 1      |
|                                | Clock/ Watch                  | Yes                          | 1      |
|                                | Electricity                   | Yes                          | 2      |
|                                | Sofa set                      | Yes                          | 2      |
|                                | Fan                           | Yes                          | 2      |
|                                | Radio/Transistor              | Yes                          | 2      |
|                                | Television (Black & White)    | Yes                          | 2      |
|                                | Sewing Machine                | Yes                          | 2      |
|                                | Telephone (Other than mobile) | Yes                          | 2      |
|                                | Bicycle                       | Yes                          | 2      |
|                                | An Animal Drawn Cart          | Yes                          | 2      |
|                                | Water pump                    | Yes                          | 2      |
|                                | Thresher                      | Yes                          | 2      |
|                                | Television (Colour)           | Yes                          | 3      |
|                                | Telephone (mobile)            | Yes                          | 3      |
|                                | Computer                      | Yes                          | 3      |
| Motor Cycle/Scooter            | Yes                           | 3                            |        |
| Refrigerator                   | Yes                           | 3                            |        |
| Washing Machine                | Yes                           | 3                            |        |
| Car/Van/Jeep                   | Yes                           | 4                            |        |
| Tractor                        | Yes                           | 4                            |        |
| Ownership of agricultural land |                               | 5 acres or more              | 4      |
|                                |                               | 2 - 4.9 acres                | 3      |
|                                |                               | < 2 acres/Not known          | 2      |
|                                |                               | No agricultural land         | 0      |
| Ownership of irrigated land    |                               | At least some irrigated land | 2      |
|                                |                               | No irrigated land            | 0      |
| Total (Maximum)                |                               |                              | 78     |

| SLI (Standard of Living Index) | Score   |
|--------------------------------|---------|
| Low                            | 0 - 14  |
| Medium                         | 15 - 24 |
| High                           | 25 - 78 |