8th Common Review Mission, Tamil Nadu
**Overview**

Visit Profile and List of Facilities visited.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Kancheepuram</th>
<th>Madurai</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Hospital</td>
<td>01</td>
<td>01</td>
</tr>
<tr>
<td>Sub District Hospital</td>
<td>01</td>
<td>02</td>
</tr>
<tr>
<td>CHC</td>
<td>03</td>
<td>02</td>
</tr>
<tr>
<td>PHC/APHC</td>
<td>03</td>
<td>03</td>
</tr>
<tr>
<td>HSC</td>
<td>06</td>
<td>02</td>
</tr>
<tr>
<td>Urban PHC/Health Post</td>
<td>02</td>
<td>04</td>
</tr>
<tr>
<td>Panchayat/villages/AWW</td>
<td>01</td>
<td>04</td>
</tr>
<tr>
<td>Other Facilities (Medical Colleges/Trg Institutes)</td>
<td>03</td>
<td>05</td>
</tr>
<tr>
<td>Total (43)</td>
<td>20</td>
<td>23</td>
</tr>
</tbody>
</table>

- 2 TNMSC warehouse, 3 MMU, 108 and 104 call centres, IPH, Food lab
- CRM Team Members : 17 members from different organisations, supported by State and District officials

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**Indicators**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Tamil Nadu</th>
<th>India</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMR (SRS 2014)</td>
<td>21</td>
<td>40</td>
</tr>
<tr>
<td>MMR (SRS 2012)</td>
<td>90</td>
<td>178</td>
</tr>
<tr>
<td>TFR</td>
<td>1.7</td>
<td>2.4</td>
</tr>
</tbody>
</table>

- IMR (Infant Mortality Rate): Refers to the number of deaths of children under one year of age per 1,000 live births.
- MMR (Maternal Mortality Rate): Refers to the number of maternal deaths per 100,000 live births.
- TFR (Total Fertility Rate): Refers to the average number of children a woman would have if she experienced the fertility rates of the age-specific fertility rate schedule throughout her childbearing years.
Best Practices/Innovations

- Fast Recruitment through specially constituted Medical Recruitment Board (MRB)
- Robust system for Grievances Redressal by 104 services
- VHN with Laptop – on line reporting + Monitoring
- Tribal Health Birth Waiting Room
- Screening of Congenital deformities and other obstetric complications
Public Health Infrastructure vis-à-vis requirement

<table>
<thead>
<tr>
<th>Facilities</th>
<th>Number existing</th>
<th>Required as per IPHS norms</th>
<th>Shortage</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Hospital</td>
<td>31</td>
<td>31</td>
<td>0</td>
</tr>
<tr>
<td>Block PHC/CHC</td>
<td>385</td>
<td>548</td>
<td>29.7%</td>
</tr>
<tr>
<td>HSC</td>
<td>8706</td>
<td>13164</td>
<td>33.8%</td>
</tr>
</tbody>
</table>

273 Blood Storage Centers in State at upgraded PHCs

- Out of pocket Expenses is Zero except in case of pick up of Pregnant Women for institutional delivery.
Institutional Delivery - shifting from private to public sector.

Efficient High Risk pregnancy tracking and management in both the districts

Encouraging – Institutional Delivery – ‘Phone to Heart Touch’

Breast Feeding, Zero dose immunization and Vitamin K at birth are ensured at each facilities.

Database for PPIUCD services maintained very well.

Though sterilization is preferred method.

No NSSK training till date to labour room staff at SNCU/NICU/GH/DH

RBSK is not implemented.
TOR 3: Disease Control Programme

- RNTCP Treatment cards are well maintained and DOTS is happening as per guideline
- NCD well managed and established programme
- IDSP reporting good and prompt
- JE vaccination in RI – Excellent coverage (Madurai)
- National Tobacco Control Programme – well organised in Kancheepuram district

TOR 4: Human Resources and Training

- Medical Recruitment Board*
- Good Network of Training Institutes – Six Regional Training Institutes
- Two years training for AWW on multiple Health issues – Initiative to creating future pool of VHN (Madurai)
- Robust system of Supportive Supervision and Mentoring in place for handholding & training of staff Nurses, SBA and ANM.
TOR 5: Community Processes and Convergence

- Active involvement of PRI in VHSNC, Selection of ASHA, and monitoring VHNDs
- State has selected programme specific ASHA for high endemic districts – Leprosy, Malaria and HBNC
- VHSNC formed across the State at the Gram Panchayat level.

TOR 6: Knowledge and Information

- Web portals developed and used for data management at various levels. (eg VHNs*)

Though Data entered under PICME does not get freeze.

- Hospital Management System - connected 264 Secondary care and 6 Tertiary care institutes through network - common data base of patients is shared between the connected institutes.
TOR 7: Health Care Finance

- State has Supportive Supervision Team for monitoring comprising Finance representative
- Accounting Software is well functional at District Level and need to disseminate Accounting software at Sub-district levels
- Registration of agencies Public Finance Management System (PFMS) is nearly 100%
- **Funds from State to district is released activity wise and not pool-wise**
- **Funds release through Multiple Directorates, need to streamline**
- **Banking arrangement guidelines opening of Group Bank A/C and Sub Accounts are not followed at State & District level**
TOR 8 : Quality Assurance

- District Quality Team has been fully formed in Kancheepuram, but yet to be formed in Madurai.
- PHCs in Tamil Nadu being ISO certified under a State initiative.
- The patient’s feedback system and review mechanism weak at facilities.
- Inadequate Bio Medical waste management in Madurai.

TOR 9 : Drugs, Diagnostics and Procurement and Supply Chain Management

- TNMSC procurement system was very sound. However it needs up-gradation and visibility into real time data.
- Drugs including SIDHA medicines were found to be adequate at all the facilities. No stock out was observed.
TOR 10 : National Urban Health Mission

- NUHM roll out at its nascent stage.
- Urban facilities have been mapped out and around 150 urban PHCs are uploading data in the HMIS portal.
- Urban health cell formed
- Constitution of MAS and selection of Urban ASHA under Process

TOR 11 : Governance and Management

- District Level Vigilance and Monitoring Committee not formed in the state
- Rogi Kalyan Samiti is functioning in 2172 facilities. The meeting of the committee held regularly on Periodic basis. Minutes of meetings being maintained.

*Members needs orientation on their role and responsibilities*
THANK YOU

Feb 16, 2015. New Delhi