INDIA

FACILITY SURVEY

(Under Reproductive and Child Health Project)
Phase – II, 2003



International Institute for Population Sciences (Deemed University) Govandi Station Road, Deonar, Mumbai-88

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PREFACE

Reproductive and Child Health (RCH) care is an essential component of the primary health care services, and India is committed to the provision of "Health for All" through primary health care approach. The RCH programme of the Government of India (GoI) aims to effectively bring all the RCH services within easy reach of the community. Since, the Eighth Five Year Development Plan India emphasis was given to the consolidation of existing health infrastructure with a thrust to qualitative improvement in the health services through strengthening physical facilities such as provision of essential equipments, supply of essential drugs and consumables, construction of buildings and staff quarters, filling up vacant posts of medical and paramedical staff and in-service training of staff.

At the district level, there is a hierarchical system of health care establishments (HCE) in India ranging from sub-centre to Primary Health Centre (PHC), to Community Health Centre (CHC)/First Referral Units (FRU) to District Hospitals (DH). Attempts have also been made to link them by appropriate referral systems. The Indian System of Medicine and Homeopathy (ISM & H) has also been important In fact, the Tenth Plan document of GoI focused on mainstreaming ISM & H system. The ISM & H sevices are generally provided through ISM & H hospitals and dispensaries.

For a thorough implementation of the RCH programme as envisaged in the Eighth, Ninth and Tenth Five Year Plans and the National Health Policy and National Population Policy, it is essential to obtain knowledge of the existing situation of the facilities at different levels of HCEs in every district in the country. The Ministry of Health and Family Welfare, GoI, New Delhi therefore, has undertaken a facility survey at the district level to assess the availability of various facilities in terms of infrastructure, staff equipments, supply and their utilisation. The first phase of the Facility Survey was carried out in 1999. It covered 210 DHs, 760 FRUs, 886 CHCs and 7959 PHCs from 221 districts in India. The results and reports of First Phase has already been published and submitted to MoHFW, GoI.

The Ministry of Health and Family Welfare, GoI, New Delhi undertook this survey in remaining districts during second phase in 2003 and designated the International Institute for Population Sciences (IIPS), Mumbai, as the Nodal Agency for preparation of the survey instruments, planning and coordinating the Project related activities of the Regional Agencies. The data collection, tabulation of data as per the tabulation plan provided by the Nodal Agency and preparation of state and district level reports were entrusted to eight Regional Agencies. The World Bank provided the required financial assistance.

In a given district all the government HCEs starting from Sub-centre to District Hospital and from ISM & H Dispensary to Hospital were covered using separate questionnaires, one each for SC, PHC, DH/FRU/CHC and ISM & H Dispensary, and ISM & H Hospital. All the middle level government HCEs like Taluk Hospital, Rural Hospital etc. are grouped under CHC unless they are recognised as FRU.

This survey has collected information regarding the health care facilities available in the different HCEs and all are tabulated and presented in the district level reports. The focus of this report is mainly to provide the health care facility situation prevailing in India and the constituent states based on the information collected during the second phase of the RCH-Facility Survey. This report is based the information collected from 370 Districts Hospitals,

1882 FRUs, 1625 CHCs, 9688 PHCs, 18385 SCs, 2151 ISM & H Hospitals and 7064 ISM & H Dispensary from 370 districts of 26 states. This report provides only the bare minimum facilities required to deliver the RCH services, and thereby avoid the presentation of a huge set of data that are available in the district level reports. This, however, does not undermine the importance of any of the items of the information collected from the different HCEs and not presented in this national report.

This report is divided into seven chapters. Chapter I is the introduction. Chapter II deals with the health care facilities available in the District Hospitals. Chapter III, IV, V, VI and VII are similar presentations respectively for FRU, CHC, PHC, SC, and ISM & H Hospital and Dispensary. A summary of the findings relating to the country as a whole assessed from the pooled data of all the health care establishments covered in the Second Phase of the RCH-Facility Survey is presented in the Executive Summery.

It is hoped that the MoHFW, GoI, will find the data generated through the Facility Survey useful in strengthening the service units and thereby providing quality RCH services. The efforts of the Regional Agencies in data collection, tabulation and analysis and that of the Nodal Agency, IIPS will be truly rewarded if the survey is able to meet the laid out objectives effectively.

P.N. Mari Bhat, Director, IIPS, Mumbai

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We appreciate the hard work of the Regional Agencies involved in the RCH-Facility Survey and their efforts to complete their assignment.

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The Senior Research Officers and Research Officers were indispensable in the process of preparation of this report in more ways than one. As it is difficult to specify the type of help rendered by them at every stage of the preparation of this report, we want to put on record that we appreciate their hard work and are extremely grateful to them.

F. Ram B. Paswan L. Ladu Singh (RCH Coordinators)

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ACRONYMS

ANM Auxiliary Nurse Midwife
ARI Acute Respiratory Infection
BCG Bacillus Calmatte Guerin

BP Blood Pressure

CDD Control of Diarrheal Diseases
CHC Community Health Centre

CSSM Child Survival and Safe Motherhood

DH District Hospital

DPT Diphtheria Pertussis Tetanus

ECG Electro Cardiogram

EmOC Emergency Obstetric Care
EsOC Essential Obstetric Care
FHW Female Health Worker
GoI Government of India
HA Health Assistant

HCE Health Care Establishment

IFA Iron Folic Acid

IIPS International Institute for Population Sciences ISM & H Indian System of Medicine and Homeopathy

IUD Intra Uterine Device MO Medical Officer

MoHFW Ministry of Health and Family Welfare

MPW Multipurpose Worker

MTP Medical Termination Pregnancy
NBCE New Born Care Equipment
NGO Non-Government Organisation

OPD Out Patient Department
OPV Oral Polio Vaccine
ORS Oral Rehydration Salt
ORT Oral Re-hydration Therapy

OT Operation Theatre
PHC Primary Health Centre
PHN Public Health Nurse
RA Regional Agency

RCH Reproductive and Child Health

RMO Resident Medical Officer
RTI Reproductive Tract Infection
STI Sexually Transmitted Infection
TAC Technical Advisory Committee

TT Tetanus Toxoid

UIP Universal Immunization Programme

UT Union Territory

DEFINITION OF SELECTED EXPRESSIONS

1. Adequately equipped/staffed

Having at least 60 percent of the critical inputs

2. Aseptic labour room

Clean room, free from germs of disease, for carrying out delivery

3. Critical Inputs

District hospitals/FRUs/CHCs:

Infrastructure:

Overhead tank and pump facility, electricity in all parts of the hospital, availability of generator, telephone, functional vehicle, laboratory, operation theatre, separate aseptic labour room

Medical Staff:

Gynaecologist/obstetrician, Anaesthetist and Paediatrician.

Supply:

Tubal rings, all six standard kits, emergency obstetric care drug kit, RTI/STI laboratory kit, new born care equipment kit and labor room (normal delivery) kit

Equipments:

Boyle's apparatus, oxygen cylinder and shadowless lamp

Primary Health Centres:

Infrastructure

Continuous water supply, electricity, labour room, laboratory, telephone and functional vehicle

Staff:

At least one medical officer, one laboratory technician and all health assistant males and females (sanctioned posts filled)

Supply:

IUD insertion kit (Kit G), normal delivery kit/labor room kit (Kit I), essential obstetric care drug kit, mounted lamp 200 w bulb, oral pill cycles, measles vaccines, IFA tablet (large) and ORS packets.

Equipment:

At least one functioning deep freezer, vaccine carrier, BP instrument, autoclave, MTP suction aspirator and labor room table and equipment

Training:

At least one Medical Officer trained in laparotomy/caesarian, MTP and delivery and at least one para-medical staff trained in IUD insertion, BP checking, RCH and management of ARI

Sub Centres

Kit A:

Contents IFA tablet (large & small), Vit. A, solution, ORS packet Cotrimaxazole tab. (Paditric), Disposal delivery kit

Kit B:

Tab. Methelergometrine Maleate (0.125mg), Tab. Paracetamol (500mg), Inj. Methelergometrine Maleate (0.2mg/ml., 1ml), Tab. Mebendazole (100mg), Dicyclomine (10mg), Chloramphenicol eye ointment (250mg), Oinment Providone Iodine (5%), Cetrimide Powder (125 gm), Absorbent Cotton, Cotton Bandage (4cm width 4 metres length)

4. **Delivery facility**

All health care establishments having a separate aseptic labour room or attended at least one delivery during the three months prior to the survey is taken as having delivery facility.

5. Emergency contraceptives

Emergency contraceptives are methods of preventing pregnancy after unprotected sexual intercourse. Emergency contraception can be used when a condom breaks, after a sexual assault, or any time unprotected sexual intercourse occurs.

6. Female health worker

One of the main duties of the ANM is to increase the felt need of the community for the health care services through proper counseling and education. But for this particular category of health worker the nomenclature varies from state to state. Hence the chances of ANM getting classified as any of the other female health worker cannot be ruled out. As such, under Female Health Worker category, in this study, we have included Public Health Nurse, Female Health Assistant (ANM) and Female Multipurpose Worker.

Executive Summary

a. Introduction

After the completion of the First Phase of Facility Survey (1998-99) in 221 districts in India, the Ministry of Health and Family Welfare, Government of India has undertaken the Second Phase of Facility Survey in the remaining districts in 2003 to assess the availability of health care facilities and their utilisation in the Sub Centres, Primary Health Centres, Community Health Centres, First Referral Units, District Hospitals, ISM & H Hospitals and ISM & H dispensaries under the Reproductive and Child Health Project. The present national report is based on the data collected during the Second Phase of the Facility Survey in 2003 covering 370 District Hospitals, 1882 First Referral Units, 1625 Community Health Centres, 9688 Primary Health Centres, 18385 Sub Centres, 2151 ISM & H hospitals and 7064 ISM & H dispensaries from 370 districts from 26 states in India.

b. District Hospitals, First Referral Units, Community Health Centres

Relevant information about these health care establishments is provided in Tables A to H. A general observation from these tables is that all the facilities are mostly available at the District Hospital level and limited facilities in the case of ISM & H dispensaries and hospitals, with First Referral Units and Community Health Centres falling in between; not a single health care establishment has all the facilities.

Infrastructure refers to the basic support system in the form of a proper and regularly maintained building, and the basic facilities available within the building for the smooth functioning of the health care establishments. Some of the facilities included are supply of water (source and availability of overhead tank and pump facility), electricity, standby facility in the form of a generator, operation theatre (preferably one separately for gynaecological purpose), laboratory facility for testing blood, urine etc., telephone, functional vehicle and out patient department for gynaecology and RTI/STI. Table A shows whether the out patient department for gynaecology/obstetrics, has name plates to guide the patients, whether there is a facility for counseling the patients, whether there is a separate toilet with running water, whether there is a facility for sterilizing the instruments and whether the health care establishment is linked with the district blood bank.

Almost all health care establishments, except very few, function from their own building. Regularity of maintenance (for at least once in three years) is evident in around 38-40 percent of DHs, First Referral Units and Community Health Centres. Fifty-nine percent of the District Hospitals have pipe water facility and in the case of First Referral Units and Community Health Centres, the supply of water from this source is 49 percent and 44 percent respectively. Facility for overhead tank and pump is found in 90 percent of District Hospitals, 81 percent of First Referral Units and 70 percent of Community Health Centres.

More than 96 percent of the District Hospitals have electricity (in all parts of the hospital), operation theatre, telephone and functional generator and 90 percent of DHs have functional vehicle. More than 91 percent of the DHs have a generator facility. The separate aseptic labour rooms, vehicle on road, OPD facility for RTI/STI are available in 44 percent, 90 percent and 56 percent of DHs respectively. Sixty to seventy-four percent of the DHs in India have gynaecology/obstetric OPD facility, privacy during examination, facility for sterilizing instruments, linkage with blood bank and regular blood supply. The facility of quarters for medical staff and the availability of computer at DHs is not satisfactory.

The facilities available in more than 90 percent of the First Referral Units are operation theatre and electricity in all parts of the hospital. Around seventy-one to eighty-one percent of the First Referral Units have overhead tank and pump, generator and telephone facilities. The availability of functional vehicle and separate aseptic labour room, gynaecology/obstetric out patient department facility, personal computer, linkage and supply of blood from district, privacy during examination and quarters for nurse is very poor in the First Referral Units. The rest of the facilities are inadequate in FRUs.

The proportion of Community Health Centres with different facilities is much lesser than that of First Referral Units and District Hospitals. At least 62 percent of the Community Health Centres have an overhead tank and pump, electricity in all parts of the hospital, generator, operation theatre, telephone and quarters for the nurse.

The staff situation provided in Table B shows that 80 percent of the District Hospitals have Public Health Nurse, Health Assistant Male, pathologist, and Hospitals Anaesthetist. At least 90 percent of the District have obstetrician/gynaecologist, paediatrician, RTI/STI specialist, Technician, Female Health Assistant, Multipurpose Worker Female, Staff Nurse and Pharmacist.

The FRUs staff comprise Multipurpose Worker Female (91%), Health Assistant Female (91%), Laboratory Technician (88%), Staff Nurse (88%) and Pharmacist (87%), RTI/STI specialist (80%), Paediatrician (73%),

Obstetrician/Gynaecologist (71%), Anaesthetist (69%) and Pathologist (67%). The availability of public health nurse is only in 76 percent of the total First Referral Units. Staff availability in Community Health Centres is more or less the same as in the case of the First Referral Unit. The only staff available in more than 80 percent of the CHCs is Laboratory Technician, Health Assistant Male and Female, Multipurpose Worker Male and Female, Staff Nurse and Pharmacist.

Training is an area, which is more pronounced in terms of inadequacy than adequacy. During the three years immediately preceding the survey not even 70 percent of the Medical Officers had in-service training in any specilisation covered in Table B, namely, sterilization, MTP, RTI/STI, and new born care. About 10 percent to 27 percent of MOs in DHs, FRUs, and CHCs only had gone through training for sterilization.

Table C, gives the supply of kits and stock of specific health care items on the day of survey. The supply status of kits shows that the percentage of District Hospitals with kits such as Kit G, Kit I and standard surgical kit vary from about 63 percent to 72 percent. The availability of other kits as given in Table C, is less than 50 percent of DHs in India. The situation in First Referral Units, and CHCs is also almost the same. Notably, all six sets of standard surgical kits, IUD insertion kit and normal delivery kit were supplied to 73 percent to 81 percent of First Referral Units and 74 percent to 81 percent of CHCs.

However, stock of health care items on the day of survey paints a slightly better picture. Except in the case of tubal rings, DT and Vitamin A solution in the District Hospitals, Community Health Centres and First Referral Units, all other items included are available in more than 60 percent of these categories of health facilities. The tubal ring was available in 15-28 percent of DHs, FRUs and CHCs.

Table D shows the availability situation with respect to specific equipment. More than three-fourths of the District Hospitals have all the operation theatre equipment except cardiac monitor, ventilator and OT care/fumigation apparatus and high pressure sterilizer (both vertical and horizontal). Hydraulic operation table, oxygen cylinder, shadowless lamp, X-ray machine, ECG machine, ice-lined freezers and deep freezers are found in at least 60 percent of the First Referral Unit while none of the equipment is available in even two-thirds of the Community Health Centres except x-ray machine and ice-lined freezers.

Adequacy is defined as having at least 60 percent of the critical inputs. Table D shows that adequately equipped health care establishments are less than even one-third in the case of FRUs and CHCs and less than 45 percent of the DHs. Infrastructure, medical staff and the equipment situation is fairly good in the District Hospitals. But only 63 percent of the CHCs and 76 percent of the FRUs are

adequately equipped in terms of infrastructure. The situation of FRUs and CHCs, in terms of medical staff, supply, and equipment is very poor in India.

Since the district and sub-district level health care establishments are expected to serve as referral to the lower level health care establishments, a question was asked during the survey as to whether they had attended to any referred cases during the three months preceding the survey. The results show that 37 percent of District Hospitals, 39 percent of First Referral Units and 46 percent of Community Health Centres had attended to referred cases of delivery.

c. Primary Health Centres

Table E presents the key features of 9688 surveyed Primary Health Centres in India. Out of the total Primary Health Centres, 89 percent are functioning from their own building. In about 12 percent of the Primary Health Centres there is regular maintenance. In 62-66 percent of the PHCs, there is electricity and water facility (at least well water). A little more than two-thirds of the Primary Health Centres have at lest one bed and there is provision for admitting in-patients. At least 46 percent of the Primary Health Centres have a labour room and a test laboratory each. The communication and transportation facilities are available with only a small proportion of Primary Health Centres, as only 20 percent and 23 percent reported having a telephone and functional vehicle respectively. In half of the Primary Health Centres there are staff quarters for the Medical Officer.

There is not a single category of staff that is available in all the surveyed Primary Health Centres. Seventy-eight percent of the Primary Health Centres have at least one Medical Officer, implying that almost two in ten Primary Health Centres function without a Medical Officer. In less than one-sixth of the Primary Health Centres, there is a lady Medical Officer on the staff. In 85 percent of the Primary Health Centres, at least one female health worker is available. Sixty-five percent of the Primary Health Centres have a Laboratory Technician. Primary Health Centres not only lack staff, but they also lack in trained staff. All the Primary Health Centres do not have at least one medical or paramedical staff trained in various components of the RCH Programme. As low as 15 percent of the PHCs have Medical Officers trained in sterilization and MTP respectively and 47 percent trained in RCH integrated training. The training status of paramedical staff is not satisfactory, as 43 percent to 69 percent of the Primary Health Centres have at least one paramedical person trained in IUD insertion, Control of Diarrhoeal Diseases/ Oral Rehydration Therapy, Universal Immunization Programme, Child Survival and safe Motherhood and Reproductive and Child Health.

Under the Reproductive and Child Health progamme, Primary Health Centres are provided few kits of instruments/drugs. About half of the Primary Health Centres had not received IUD insertion kit and Normal Delivery kit. The Essential Obstetric Care drug kit was received by only one-third of the surveyed Primary Health Centres. The Nirodh, oral pills and measles vaccines were received by 48 percent to 59 percent and IFA (large) tablets were received by 57 percent of the Primary Health Centres. Seventy-one percent of PHCs had stock of ORS packets on the day of survey.

Data on the availability of different equipment shows that 64-76 percent of the Primary Health Centres have adult and infant weighing machines. The three sets of equipment necessary for storing and carrying the vaccines, deep freezer, vaccine carrier and refrigerator are available in 53, 68 and 16 percent of Primary Health Centres respectively. The autoclave and steam sterilizer drum necessary for sterilization of the needles and syringes are available in at least 70 percent of the Primary Health Centres. Though Primary Health Centres are expected to provide safe abortion services, the MTP suction is available in less than one-third of the Primary Health Centres. However, the BP instrument is available at 88 percent of the PHCs.

Though all the Primary Health Centres are expected to provide facilities for each component of RCH such as, institutional delivery, safe abortion, neonatal care, and contraceptive services, only a small proportion of Primary Health Centres provide these services. Only 58 percent of the surveyed PHCs in India conducted deliveries, 6 percent PHCs conducted MTP and 22 percent PHCs provided neonatal care. Around 65 percent and 41 percent of PHCs in India conducted IUD insertion and sterilization respectively.

The component of critical inputs when studied separately shows that 41 percent of the Primary Health Centres have adequate equipment. However, the situation of infrastructure, supply and staff is also not encouraging, for example, only 32-48 percent of the Primary Health Centres are adequately equipped with these. Inadequacy reigns high in the training of medical and paramedical staff where only 20 percent of the PHCs are adequately staffed with trained personnel.

d. Sub Centres

Table F presents key features of 18385 surveyed Sub Centers in India. Out of the total SCs, 45 percent function from a government building. A little less than four-fifths of the SCs have a well as the source of water supply. Forty-three percent and seventy-four percent of the SCs have an electricity connection and toilet facility respectively. It is worth while to mention that ninety-five percent of the SCs have a female health worker, and 68 percent of the SCs have a male health worker.

More than 95 percent of the SCs have received Kit A, and Kit B. The supply of some contraceptives such as Nirodh, OP, and IUD and vaccines such as IFA

(large and small), vitamin A solution and ORS packets are regular and satisfactory in 92 percent of the SCs. The stock of all these contraceptives and vaccines are also satisfactory. The availability of functional equipment such as examination table, weighing machines for infants and adults, speculum, medicines chest, vaccine day carrier, and strips for urine test are satisfactory. But the proportion of SCs receiving training for paramedical staff in various fields (IUD insertion, CDD/ORT, UIP, CSSM, RCH and ARI) is almost negligible.

e. ISM & H hospital and dispensary

A total of 2151 ISM & H hospitals and 7064 ISM&H dispensaries were surveyed. Table G and Table H present the key features of the ISM & H hospitals and dispensaries. Seventeen percent of the hospital and 30 percent of the dispensaries function in their own or in the government building. Sixty-seven to seventy-three percent of the hospitals and dispensaries are situated in a pucca building. In 23 percent of the hospitals and in 17 percent of the dispensaries, maintenance is done at least once in three years. Overall, the infrastructure available at the hospital as well as at the dispensary is far from satisfactory. The staff position at the hospital and dispensary is also not upto the mark. The availability of equipment and materials as shown in Table G and Table H is not satisfactory.

Table	A: Percentage of Health Care Establishments with spe	ecific infrastructure facili	ties, India, Facility	Survey, 2003
Sr. No	Infrastructure Facility	DH	FRU	СНС
1	Own building	97.0	94.7	91.0
2	Maintenance at least once in three years	40.1	39.9	37.7
3	Source of water -Pipe	58.7	49.1	43.9
4	Source of water-Well (including tube well) ¹	41.2	50.9	56.1
5	Facility for overhead tank	90.5	80.8	70.0
6	Electricity in all parts of the hospital	96.7	94.3	91.8
7	Operation theatre	99.5	93.7	87.6
8	Separate aseptic labour room	44.4	33.3	31.0
10	Generator functional	91.7	86.9	84.3
11	Telephone facility Vehicles on Road ²	96.7	74.8	62.2
12	Vehicles on Road ²	89.9	56.8	57.4
13	OPD facility for RTI / STI	56.4	24.9	16.0
14	Gynaecology/obstetric OPD facility ³	73.7	53.8	36.0
15	Nameplates to guide clients to Gynaec. OPD	83.8	76.8	67.5
16	Privacy during examination	92.6	89.3	85.8
17	Facility for counseling	78.7	69.1	63.9
18	Separate toilet with running water	67.3	62.6	55.0
19	Facility for sterilizing instruments	87.5	82.9	80.0
20	Linkage with district blood bank	67.5	27.2	15.8
21	Regular blood supply	60.5	27.7	10.5
22	Quarters for obstetrician/gynaecologist	40.1	28.5	21.0
23	Quarters for RMO*	47.1	42.2	44.0
24	Quarters for Nurse	67.5	66.8	71.0
25	Personal computer	47.7	14.7	2.0
	Total	370	1882	1625

- Tap water is not included.
- Includes Ambulance, Jeep, and Car functional on the day of survey Sr no.15 to 19 is taken from Gynaecology/Obstetric OPD. Residential Medical officers. 2.
- 3.

Surv	ey, 2003	-		
Sr. No	Medical and Paramedical Staff	DH	FRU	СНС
1	Obstetrician/ Gynaecologist	90.0	71.0	51.0
2	Pediatrician	90.0	73.0	54.0
3	RTI/STI specialist	90.0	80.0	59.0
4	Pathologist	80.0	67.0	28.0
5	Anaesthetist	83.0	69.0	37.0
6	Laboratory Technician	98.0	88.0	87.0
7	Public Health Nurse	89.0	76.0	73.0
8	Health Assistant (male)	80.0	83.0	85.0
9	Health Assistant (female)	90.0	91.0	88.0
10	Multi purpose worker (male)	89.0	72.0	87.0
11	Multi purpose worker (female)	95.0	91.0	95.0
12	Staff Nurse	90.0	88.0	83.0
13	Pharmacist	94.0	87.0	81.0
	Training of Medical Officer at least one.			
14	Sterilization ¹	27.0	14.0	10.0
15	RTI/STI	63.0	48.0	47.0
16	New born care	59.0	45.0	34.0
17	Medical Termination of Pregnancy	69.0	54.0	44.0
18	RCH Foundation Skill Training	69.0	62.0	61.0
	Total	370	1882	1625

¹ Sterilization includes NSV, Mini lap, Tubectomy (which have been taken from total number of health personnel post filled)

^{**} Percentage of health facility with staff (post filled) are taken from sanctioned number of posts in health facility.

	e C: Percentage of Health Care Establishments with supply of	kit and stock of specifi	ic items on the d	ay of survey,
	, Facility Survey, 2003	1		1
Sr. No	Supply of kits	DH	FRU	СНС
1	Standard surgical kit (all six sets)	72.0	81.0	81.0
2	Emergency obstetric care drug kit	44.0	41.0	40.0
3	RTI / STI laboratory kit	43.0	22.0	17.0
4	Kit G (IUD insertion kit)	63.0	73.0	74.0
5	Kit for new born care equipment	46.0	40.0	33.0
6	Kit I (normal delivery kit/labour room kit)	64.0	74.0	74.0
7	Kit N (equipment for neonatal resection)	44.0	37.0	29.0
8	Kit O (side laboratory test and blood transfusion)	48.0	34.0	23.0
9	Kit P (for donor blood transfusion)	45.0	29.0	17.0
	Stock of health care items (on the day of the survey)			
1	Nirodh pieces	74.0	73.0	70.0
2	Oral pill cycles	69.0	70.0	67.0
3	IUDs	73.0	73.0	70.0
4	Tubule rings	28.0	18.0	15.0
5	DPT	72.0	72.0	75.0
6	OPV	69.0	73.0	76.0
7	TT	80.0	79.0	79.0
8	BCG	75.0	70.0	70.0
9	Measles	76.0	74.0	75.0
10	DT	59.0	56.0	54.0
11	IFA (large)	60.0	62.0	61.0
12	Vitamin A Solution	53.0	55.0	59.0
13	ORS packets	67.0	72.0	73.0
	Total	370	1882	1625

	Table D: Percentage of Health Care Establishments with specific equipment and adequately						
equi	equipped, India, Facility Survey, 2003						
Sr.		DH	FRU	СНС			
No							
	Operation theatre	368	1764	1424			
1	Boyle's apparatus	85.0	56.0	38.0			
2	Cardiac monitor	35.0	18.0	6.0			
3	Ventilator	37.0	21.0	12.0			
4	OT care/fumigation apparatus	55.0	43.0	32.0			
5	Hydraulic operation table	85.0	71.0	54.0			
6	Oxygen cylinder	75.0	67.0	59.0			
7	Shadow less lamp pedestal for minor OT	74.0	66.0	59.0			
8	High pressure sterilizer (horizontal/vertical)	53.0	34.0	21.0			
9	X-ray machine*	96.0	86.0	76.0			
10	ECG machine*	91.0	78.0	63.0			
	Cold chain equipment (functional)						
1	Walk-in coolers	5.0	3.0	3.0			
2	Walk-in freezers	3.0	3.0	2.0			
3	Refrigerators	29.0	49.0	64.0			
4	Ice line freezers	60.0	67.0	68.0			
5	Deep freezer	29.0	60.0	63.0			
	Adequately equipped (at least 60 percent)						
1	Infrastructure@	93.0	76.0	63.0			
2	Medical Staff ¹	80.0	37.0	14.0			
4	Paramedical Staff ²	32.0	37.0	41.0			
5	Supply ³	45.0	32.0	24.0			
6	Equipment ⁴	84.0	61.0	46.0			
7	Referred delivery cases attended during last three months ⁵	37.0	39.0	46.0			
	Total	370	1882	1625			

- @ Overhead tank and pump facility, electricity in all parts of the hospital, availability of generator, telephone, functional vehicle, laboratory, operation theatre, separate aseptic labour room
- 1 Includes obstetrician/gynaecologist, pediatrician and anaesthetist.
- 2 Include staff nurse, ANM, pharmacist, laboratory technician, PHN, health assistant male and female.
- 3 Includes tubal ring, set of standard surgical kits, emergency obstetric care kit, new born care kit, RTI/STI kits and delivery kit I.
- 4 Includes Boyle's apparatus, shadowless lamp and oxygen cylinder.
- 5 Calculated from the number of health facilities which facilities have conducted delivery.
- * Functional equipment.

Table E: Percentage of PHCs with specific facilities and adequately equipped facilities, India, Facility **Survey, 2003**

Total number of PHCs surveyed (9688)

Sr.no	Characteristics	Percent	Sr. no.	Characteristics	Percent
Α.	Infrastructure			Staff (filled)	
1	Own building/Rent free	89.2	1	Medical officer	78.2
2	Regular maintenance	11.9	2	Medical officer female)**	15.5
3	Source of water at least with well*	66.5	3	Health assistant (Male)	81.0
4	Electricity available	66.4	4	Health assistant (Female)	85.3
5	Labour room	48.4	5	MPW female	89.6
6	Laboratory (at least one basic)	45.6		Laboratory technician 65	
7	Telephone	19.8	D	Equipment (Available)	
8	Toilet facility	52.3	1	Infant weighing machine	64.4
9	At least one bed	71.3	2	Adult weighing machine	76.2
10	Vehicle functional	22.8	3	Deep freezer	53.0
11	Staff quarter for M.O.	52.0	4	Vaccine day carrier	68.1
C	Supply		5	BP instrument	87.8
1	Kit G (IUD insertion)	50.0	6	Autoclave	68.3
2	Kit I (Normal delivery kit)	50.5	7	MTP suction aspirator	27.2
3	Essential obstetric care drugs kit	32.2	8	Labor room table	55.0
E	Stock on the day of survey	•	9	Steam sterilizer drum	69.8
1	Nirodh	59.1	10	Refrigerator	15.5
2	Oral pills cycles	58.4	F	At least one MO trained in	
3	IUDs	56.3	1	Sterilization	14.6
4	BCG	45.2	2	MTP	14.6
5	DPT	48.5	3	RCH integrated training	47.4
6	OPV	49.1	G	Paramedical staff trained	
7	Measles	48.1	1	IUD insertion	56.3
8	DT	35.4	2	Checking BP	43.0
9	TT	48.8	3	CDD/ORT	52.7
10	IFA (Large)	57.4	4	UIP	56.7
8	IFA (Small)	50.2	5	CSSM	52.8
11	Vitamin a solution	50.9	6	RCH	68.5
12	ORS packets	71.2	7	ARI	48.0
Н	Adequately equipped (at least 60 percent)		I	Percent conducting (during last 3 months)	
1	Infrastructure@	31.8	1	Delivery	58.1
2	Staff ¹	48.2	2	MTP	6.1
3	Supply ²	39.9	3	Neo Natal care	22.0
4	Equipment ³	41.3	4	IUD insertion	65.2
5	Training ⁴	19.9	5	Sterilization ⁵	46.5

[@] Includes tap water, regular supply of water, electricity telephone, toilet, functional vehicle and Labour room available.

Includes Medical officers male, female and paramedical staff.

Includes IUD kits, delivery kits, mounted lamp supply of OP, measles, IFA large and ORS.

Includes deep freezer, BP instrument, autoclave, labour room equipment, MTP suction and oxygen cylinder.

Includes only medical officers who are currently in position.

Tap water and other source are not included.
Are from all medical officers post filled.

⁵ Includes male and female sterilization.

	e F: Percentage of Sub Centers wi I number of Sub centers surveyed		acmue	s, muia, racinty Survey, 2005	
Sr.		Percent	Sr.		Percent
No.		having	No.		having
A.	Infrastructure		B.	Staff in position or Manpower	***
1	Govt. building	45.2	1	Health worker (male)	67.7
2	Water at least with well*	78.8	2	Health worker (female)	95.1
3	Electricity	43.2	C.	Received of kit	
4	Toilet facility	73.6	1	Kit A Drugs	96.9
	ANM having own moped	11.9	2	Kit B Drugs	95.2
6			3	Kit C Equipment	26.0
D.	Regular Supply **		E.	Equipment (functional) ****	
1	Lubricant Nirodh pieces	96.3	1	Examination table	89.4
2	Oral pills	96.6	2	Infant weighing machine	86.7
3	IUDs	96.0	3	Adult weighing machine	84.9
4	IFA (large)	97.5	4	BP instrument	65.9
5	IFA (small)	94.9	5	Stethoscope	79.5
6	Vitamin A solution	96.7	6	Pressure cooker	86.0
7	ORS packets	92.9	7	Hemoglobinometer	75.1
			8	Reagent strips for urine test	88.3
F.	Stock on the day of survey		9	Speculum	95.7
г.	Stock on the day of survey		10	Medicine chest	83.3
1	Lubricant Nirodh pieces	72.7	11	Vaccine day carrier	99.4
2	Oral pills	78.5	G.	Paramedical Staff trained in(B	oth male&
	-			female)	
3	IUDs	63.8	1	IUD insertion	1.2
4	IFA (large)	88.8	2	CDD/ORT	15.1
5	IFA (small)	84.5	3	UIP	16.9
6	Vitamin A solution	82.6	4	CSSM	13.5
7	ORS packets	83.3	5	RCH	19.1
			6	ARI	11.4

- * Tap water is not included
- ** Regular supply is from stock on the day of survey
- *** Staff in position is from sanction post.
- **** Equipment functional is from availability of equipment

Table G: Percentage of ISM&H Hospitals with specific facilities, India, Facility Survey, 2003					
Total number of ISM&H Hospital surveyed (2151)					
Sr.		Percent	Sr.		Percent
No.		having	No.		having
A.	Infrastructure		B.	. Staff in position or Manpower	
1	Own building	16.7	1	Medical officer	76.8
2	Pucca building	73.4	2	Sisters	72.4
3	Maintenance *	23.5	3	Staff Nurse	76.0
4	Water source tab	15.3	4	Pharmacist	84.4
5	Electricity	44.3			
6	Regular electricity supply	75.7	F.	Supply of Medical	
7	Generator	1.2	1	Medicines for common ailment	26.8
8	Telephone	5.5	2	Medicine for serious ailment ***	7.0
9	Toilet facility	37.6	3	Druggist / Chemist within a km.	26.5
10	Sewerage**	7.9	E.	Availability as per norms	
12	Staff Quarters	7.6	1	Beds/ mattress	68.9
13	Vehicle	1.8	2	Cots	48.9
16	Having medical record	44.4	3	Pillows	47.0
	section				
17	At least one bed	92.8	4	Bed sheets	56.0
18	Paid Nursing facilities	0.9	5	Delivery table	13.5
19	X-ray machine	1.6	6	Examination table	72.1
20	Laboratory	2.7			

- * Maintenance once in three year
- ** Sewerage: at least connected to Municipal sewerage
- *** Specialized medicine for serious ailment sufficient.

Tabl	Table H: Percentage of ISM & H Dispensaries with specific facilities, India, Facility Survey, 2003					
Tota	Total number of ISM&D surveyed (7010)					
Sr.		Percent	Sr.		Percent	
No.		having	No.		having	
Α	Infrastructure		В.	Staff in position		
1	Own building	30.0	1	Medical officer	83.2	
2	Pucca building	67.4	2	Sisters	62.0	
3	Maintenance #	17.3	3	Staff Nurse	87.2	
4	Wall/fencing *	21.8	4	Pharmacist	77.1	
5	Water source at least as well	53.1				
6	Electricity	41.5	D.	Equipment available		
7	Cleanliness up to satisfactory	63.6	1	Tables	73.1	
8	Telephone	2.3	2	Chairs	73.0	
9	Toilet facility	26.7	3	Benches for patients	61.8	
Ε.	Supply of Medicine		4	Dispensing room	40.7	
1	Medicines for common ailment	18.5	5	Examination table	41.6	
2	Medicines for serious ailments \$	7.6				
3	Druggist /Chemist within a km.**	15.5				

- **#** Maintenance at least once in a three years.
- * All around the dispensary
- **\$** Specialized medicine for serious ailment.
- ** Distance below one km.

CHAPTER I

INTRODUCTION

1.1 Background

India is a signatory to the Alma Ata Declaration of 1978 and had committed to attaining "Health for All" by 2000AD through the Primary Health Care approach. The establishment of Primary Health Centres in India started as early as in 1952, and over the last five decades it has undergone several changes to meet the increasing demand for health care services. Until the Eighth Five Year Plan, the emphasis was on the expansion of the health care establishment. However, during the Eighth and subsequent plans the emphasis was mainly on consolidation of existing health infrastructure rather than on expansion. "The trust has been on qualitative improvement in the health services through strengthening of physical facilities like provision of essential equipment, supply of essential drugs and consumables, construction of buildings and staff quarters, filling up of vacant posts of medical and paramedical staff and in-service training of staff."

The National Health Policy stressed on the provision of preventive, promotive and rehabilitative health services to the people thereby making a shift from medical care to health care. The delivery of Primary Health Care is the foundation of the rural health care system and is an integral part of the national health care system. In the rural areas, services are provided through a network of integrated health and family welfare system and the health programmes have been restructured and reoriented from time to time to meet the objectives of the National Health Policy.

The health care delivery system in India can be grouped into four types: (a) public sector, including Government runs hospitals, dispensaries and health centres, (b) those run by non-governmental organizations (NGO), (c) organized private sector and (d) informal private sector comprising faith healers and herbalists etc². Studies have shown that the Government is by far the dominant source of health care such as immunizations, antenatal care, family planning services, and infectious disease control³.¹

^{1.} Government of India, *Bulletin on Rural Health Statistics in India*, June 1998, Rural Health Division, Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India, New Delhi. 1998.

^{2.} Bhat, Ramesh, 1995, *Private Health Care in India*: The *private/public mix in health care in India*, IHPP reprint series. International Health Policy Program, Washington, D. C. World Bank.

^{3.} World Bank, *Improving Women's Health in India*, Washington D. C. 1996.

In line with this, the Ministry of Health and Family Welfare (MoHFW), Government of India (GoI) is implementing a Reproductive and Child Health (RCH) programme in the country. Under this programme, a range of reproductive and child health services is being provided through a network of Government health care establishments. The programme also aims to strengthen health infrastructure in terms of trained staff, equipment and supplies to enhance the facilities to provide good quality RCH services. In this context, during the First Phase in 1998-99 the GoI had decided to undertake the Facility Survey at the district level, in all the 25 states and 7 union territories with the financial assistance provide by the World Bank. Among the Government HCEs, all except the sub-centres, ISM & H facilities are covered in the first phase of the Facility Survey.

During the First Phase in 1998-99, 221 districts from 25 States and 7 Union Territories were covered for the Facility Survey. The data, indicators of critical input, and reports on districts, states and all India based on 221 districts have already been brought out and presented to MoHFW, GoI. The remaining 370 districts from 26 states except Union Territories (UTs were fully covered in Phase I) were again covered under the Facility Survey during Phase – II, in 2003, after a gap of five years. During Phase – II in 2003, in seven districts of Haryana namely Bhiwani, Gurgaon, Hissar, Kaithal, Sonipat, Rewari and Rohtak and one district from Karnataka, which were covered under Phase I, the survey was repeated during the Phase – II, because during First Phase very few facilities at the block level were covered from these districts. It may be noted that instead of 17 districts to be covered from Tamil Nadu during Phase II, only 16 districts were covered because, the Government of Tamil Nadu merged one district named Ariyalur with Perambalur district on 19th April 2002. Thus, district Perambalur was surveyed. It may also be mentioned here that there is no any CHC level facility in West Bengal and Maharashtra. However, the Block Primary Health Centre (BPHC), in West Bengal and Rural Hospital (RH) in Maharashtra has been treated as CHCs in this report.

The GoI decided to survey the Sub-centres, ISM & H dispensaries and ISM & H hospitals during Phase – II (2003), which were not covered during Phase-I (1998-99).

The number of different facilities varies from district to district due to the differences in the population in each district as well as due to the differences in adherence to population norms. The population norms for some of the facilities are given below

Centre	Population Norm	
	Plain area	Hilly/Tribal area
Sub-Centre	5,000	3,000
PHC	30,000	20,000
CHC	120,000	80,000

Sub-centres are peripheral contact points between the Primary Health Care system and the community. One male Multipurpose Worker and one female Multipurpose Worker/ANM are expected to be appointed at each facility. A PHC, on the other hand, is the first contact point between the village community and the Medical Officer. A PHC is expected to have a Medical Office and 14 paramedical and other staff. It acts as a referral unit for 5-6 Sub-centres. It should have 4-6 beds for patients. The activities of the PHCs involve curative, preventive, promotive and family welfare services.

CHCs are basically referral centres for PHCs approximately at the rate of 1:4. Its manpower strength includes four medical specialists (Surgeon, Physician, gynaecologist and Paediatrician) supported by 21 paramedical and other staff. It also should have 30 in-door beds with one OT, X-ray, labour room and laboratory facilities.

1.2 Objectives

The primary objective of the facility survey is to assess the existing situation of the health care facilities available in the government health care establishments at different levels in India in terms of infrastructure, staff, supply and equipment at the district level. The RCH Project of the Government of India has stipulated norms for each health facility considering infrastructure, manpower and supplies adequate for rendering quality RCH services.

The main objectives of the facility survey are to assess

- i. Percent of facilities having critical inputs as per the norms stipulated by the RCH
- ii. Utilisation of these facilities for providing RCH services
- iii. Utilisation of CHCs and FRUs as referral units
- iv. Utilisation of Indian System of Medicine for RCH services
- v. Quality assessment of services at each health facility level

1.3 Methodology

For data collection the whole country was divided into ten regions and each region was entrusted to one agency (hereafter referred to as Regional Agency). However, two regions covering the east and northeastern region was handled by one Regional Agency (Table 1.1). Besides data collection, each Regional Agency has to prepare the district and state level reports as per the model reports.

The International Institute for Population Sciences (IIPS), Mumbai, India was chosen as the nodal agency for this survey by the MoHFW, GoI. IIPS, in its capacity as the nodal agency, had prepared and provided the regional agencies with questionnaires, tabulation plan and model report. IIPS also provided the software package to generate tables for the report.

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All district hospitals, community health centres, rural hospitals and first referral unit are included in the facility survey. However, a district hospital designated as FRU is included in the district hospital category and is treated as first referral unit. In this phase of facility survey all the ISM & H Hospitals and dispensaries in the district are also included.

The selection of primary health centres (PHC) for the facility survey is based on the number of health facilities in the district keeping the minimum and the maximum as 30 and 50 PHCs. In case a district has 30 or less PHCs, all the PHCs were covered by the survey. Thirty PHCs were covered in districts having 30 to 60 PHCs, 40 in districts having 61 to 100 PHCs and 50 from districts with more than 100 PHCs. Selection of specified number of PHCs from the districts was made using circular systematic sampling after rearranging the PHCs alphabetically.

Two Sub-Centres (SC) from each selected PHC were covered by the facility survey. Before selection, the sub centres were stratified into two categories.

- -SC located in government building, and
- -SC located in rented/other type of building.

One sub centre from each category was selected randomly. In case all SCs were located in government buildings, any two were selected randomly. A similar procedure was also followed for the selection of ISM Hospital and Dispensaries.

Critical input and adequacy

For the calculation of adequacy at various facility levels, the following critical inputs have been considered in this report:

For DH/FRU/CHC

Infrastructure: Overhead tank and pump, electricity, telephone, generator, vehicle, OT, laboratory, separate aseptic labour room, adequate equipment in test laboratory.

Medical Staff: Obstetrician/gynaecologist, paediatrician and anaesthetist.

Paramedical Staff: Staff nurse/ANM, pharmacist, laboratory technician, PHN, health assistant male and female.

Supply: Tubal ring, set of standard surgical kits, emergency obstetric care kit, new born care kit, RTI/STI kits and delivery kit I.

Equipment: Boyle's apparatus, shadowlesslamp and oxygen cylinder.

For PHC

Infrastructure: Tap water, regular supply of water, electricity Telephone, toilet, functional vehicle, Labour room available.

Staff: At least one Medical officer male, female and paramedical staff and Laboratory Technician.

Supply: IUD kits, delivery kits, EsOC kit, mounted lamp supply of OP, measles, IFA large and ORS.

Equipment: Deep freezer, B.P. instrument, Labour room equipment, autoclave, MTP aspirators and labour room table.

Training: Training includes only medical officers (Sterilization, NSV, IUD insertion, MTP and RCH foundation skills for 12 days duration).

In order to define adequacy, we have taken the presence or absence of the item at available facility under any item listed above. In case all the items under the category are present, availability will be considered as hundred percent. Let us assume that there are 5 items under one category and one is absent. In this case availability index will be 80 percent (4 items present / 5 total). In this report, a facility is considered adequately equipped if availability index is 60 percent or more. It means that any 3 items should be present in case of 5 items category to classify the facility as adequately equipped. The main disadvantage of this simple procedure is an assignment of equal weight for all the items within the category. For example, in a category of paramedical staff nurse/ANM (female) and pharmacist get the same weight.

1.4 Data Collection Tools and Techniques

(a) Questionnaires, Training and Field Work

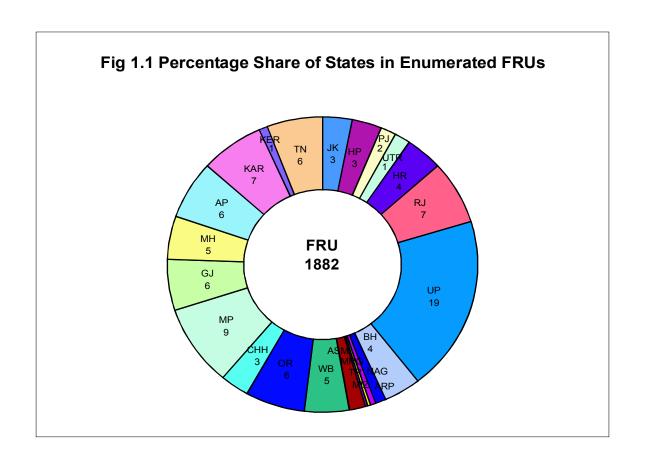
There are five types of questionnaires that were prepared (see Appendix A) and canvassed for Facility Survey. One questionnaire each was for District Hospital, Community Health Centre/Sub-divisional hospital, Primary Health Centres, Sub Centres, ISM & H dispensary and ISM & H hospital. The questionnaire for DH was also used for all the middle level health care establishments like the First Referral Unit, Community Health Centres, Rural Hospital, Taluk Hospital etc. The overall content of the questionnaire and the format was discussed at length among the coordinators of the RCH Project at IIPS before it was presented to the RCH Technical Advisory Committee (TAC) for a formal discussion. At every stage of the preparation of the questionnaire the Ministry of Health and Family Welfare and the World Bank consultant were involved. The questionnaires that were finalised after the detailed discussion with the TAC were sent to the MoHFW for their final approval.

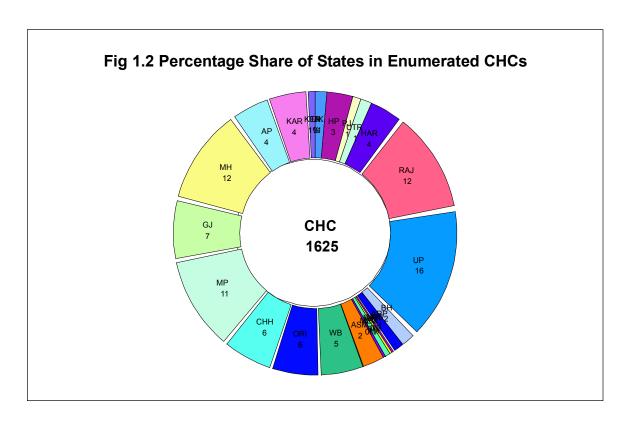
After obtaining the clearance from the Ministry, the questionnaires were discussed at length in a training-cum-workshop organised by IIPS. The Workshop was attended by representatives of all Regional Agencies, Administrative Staff College of India, Hyderabad; Centre for Operations Research Training, Vadodara; ORG, Marg, New Delhi; Development Research Centre New Delhi; Indian Institute of Health Management Research, Jaipur; Society for Economic Development and Environmental Management, New Delhi; MODE Research Private Ltd., New Delhi and Economic Information Technology, Kolkota. A World Bank representative, a resource person and a member of the Technical Advisory Committee participated actively in the discussion of questionnaires.

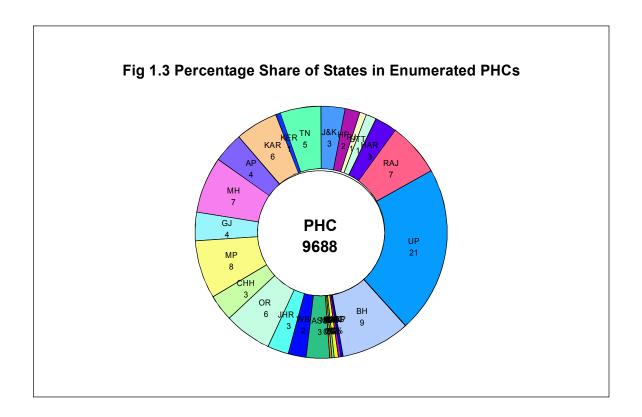
After the training of trainers organised by IIPS, each Regional Agency gave training of the investigators in their respective areas followed by visits to different levels of health care establishments as part of the training. The actual survey was completed in 2003.

(b) Coverage

The Facility Survey covered a total of 370 districts in the second phase as can be seen from Table 1.2 (for names of the districts see Appendix B). The number of health care establishments covered from all the 26 states is 370 district hospitals, 1882 FRUs, 1625 CHCs, and 9688 PHCs, 18385 SCs, 7064 ISM & H dispensaries, and 2151 ISM & H hospital. The percent share of states in the enumerated HCEs are given in Fig. 1.1, 1.2, and 1.3 respectively for FRU, CHC and PHC.







(c) Information covered in this report:

The Facility Survey covered a lot of information regarding the health care facilities available at different levels of health care establishments of the Government. All the information collected is tabulated and presented in the district level reports. The combined reports covered most of the information collected though not all. This national report covers only the important facilities necessary for delivering reproductive and child health care in terms of infrastructure, staff, supply and equipment at each level of the health care establishments. Even among them some are considered critical and are marked by asterisk in the list.

The following information are included in this report for infrastructure in DHs, FRU and CHCs: ownership of building, source of water supply, overhead tank and pump facility, electricity in all parts of the health care establishments, availability of generator, telephone, functional vehicle, adequately equipped laboratory, operation theatre (OT), separate aseptic labour room, deliveries facility, separate operation theatre for gynaecology, OPD facility for gynaecology and RTI/STI, and linkage with district blood bank.

For staff, at least one Gynaecologist/Obstetrician, Anaesthetist, Paediatrician, RTI/STI specialist, pathologist, general duty doctor, Staff Nurse/midwife Laboratory Technician are taken.

The OT Equipment included are Boyle's apparatus, oxygen cylinder, shadowless lamp, high pressure sterilizer (vertical/horizontal), cardiac monitor, ventilator, OT care/fumigation apparatus, and hydraulic table. Besides, X-ray machine and ECG machine is also included. Cold chain equipment include ice-lined freezer, deep freezer and refrigerator.

Supply items included are tubal rings; all six set of standard surgical kits, emergency obstetric care drug kit, RTI/STI laboratory kit, newborn care equipment kit labour room kit and IUD insertion kit.

The inputs used for infrastructural facilities in PHCs are: Ownership of building, availability of toilet facility, continuous water supply, electricity, labour room, laboratory, telephone, functional vehicle and availability of at least one bed. Staff data included at least one Medical Officer, one female Medical Officer, one Laboratory Technician and Health Assistants (male and female) and Medical Officer staying in PHC compound. For supply the items included are availability of IUD insertion kit (kit G), normal delivery kit/labour room kit (kit I), essential obstetric care drug kit, mounted lamp 200 w bulb, oral pill cycles, measles vaccines, IFA tablet (large) and ORS packets. Equipment included are at least one infant weighing machine, one adult weighing machine, functioning deep freezer, vaccine carrier, BP instrument, autoclave, steam sterilizer drum, MTP suction aspirator and labour room table and equipment. Training aspects covered availability of at least one Medical Officer trained in laparotomy/caesarian, MTP and delivery and at least one paramedical staff trained in IUD insertion, BP checking, CDD/ORT, UIP, CSSM, RCH and management of ARI.

Table 1.1 Regional Agencies by the states assigned to them

Region	Regional Agency	States/Union territories
1	Administrative Staff College of India	
	(ASCI), Hyderabad	 Andhra Pradesh
		2. Tamil Nadu
		3. Kerala
		4. Karnataka
2	Centre for Operations Research and	1. Maharashtra
	Training (CORT), Vadodara	2. Gujarat
3	Development Research Service Pvt.	1. Bihar
	Ltd. New Delhi,	2. Jharkhand
4	TNS MODE Pvt. Ltd., New Delhi,	1. Uttar Pradesh (E)
5	TNS MODE Pvt. Ltd., New Delhi,	1. Uttar Pradesh (W)
6	ORG MARG Pvt. Ltd., New Delhi,	1. Madhya Pradesh
		2. Chhattisgarh
7	Development Research Service Pvt.	1. Assam
	Ltd. New Delhi,	2. Arunachal Pradesh
		3. Manipur
		4. Meghalaya
		5. Mizoram
		6. Nagaland
		7. Tripura
8	Economic Information Technology,	West Bengal
	Kolkatta	2. Orissa
9	Society for Economic Development	1. Rajasthan
	and Environmental Management, New	2. Himachal Pradesh
	Delhi	
10	Indian Institute of Health Management	1. Punjab
	Research, Jaipur	2. Haryana
		3. Jammu & Kashmir

Table 1.2 Surveyed Health Care Establishments by states, Facility Survey 2003

Sl no	State	No. of Surveyed districts	DH	FRU	СНС	РНС	SC	ISM&H Hospitals	ISM&H Dispensary
1	Jammu & Kashmir	12	12	57	22	290	529	NA	NA
2	Himachal Pradesh	9	7	58	49	199	365	16	377
3	Punjab	5	5	31	15	71	142	NA	78
4	Uttaranchal	8	7	27	19	144	262	212	58
5	Haryana	14	14	72	63	262	523	08	338
6	Rajas than	21	21	132	191	671	1302	51	1029
7	Uttar Pradesh	63	99	352	256	2081	4346	1579	1488
8	Bihar	29	20	76	26	845	1237	20	109
9	Arunachal Pradesh	10	10	18	16	41	71	04	01
10	Nagaland	6	5	11	8	37	68	NA	02
11	Manipur	3	4	3	4	32	60	NA	NA
12	Mizoram	6	3	5	9	27	53	NA	NA
13	Tripura	1	1	3	NA	11	22	NA	NA
14	Meghalaya	2	1	5	5	25	39	NA	NA
15	Assam	11	11	30	39	290	522	02	02
16	West Bengal	7	8	85	83	209	418	NA	190
17	Jharkhand	14	8	25	NA	285	289	11	60
18	Orissa	21	21	114	87	595	1270	NA	546
19	Chhatisgarh	14	9	59	97	320	678	04	370
20	Madhya Pradesh	35	30	159	177	721	1378	20	960
21	Gujarat	13	13	102	111	356	712	17	300
22	Maharashtra	22	19	86	187	677	1351	04	272
24	Andhra Pradesh	11	11	120	70	380	762	02	339
25	Karnataka	15	14	124	73	540	881	41	281
26	Kerala	2	2	12	13	70	158	11	96
	Tamil Nadu	16	15	110	2	501	947	144	168
	India	370	370	1882	1625	9688	18385	2151	7064

Rural Hospital in Maharashtra, and BPHC in West Bengal have been taken as CHCs surveyed. NA: There is no CHC level health facility in Jharkhand and Tripura.

CHAPTER II

DISTRICT HOSPITAL

2.1 Introduction

In the hierarchical health care system of the Government of India in a district, the district hospital is the apex body, which provides specialised health care services to people on subsidised costs. Every district is expected to have a District Hospital (DH). But in some cases, the Medical College Hospital or any other sub-divisional hospital is found to serve as a DH where a DH as such has not yet been established. Such hospitals are not included in the DH list in this report as they are categorised as a different level of health care establishment. The districts without a DH are Banka, Buxar, Darbhanga, Jamui, Kaimur, Lakhisarai, Paschim Champaran, Sheohar and Supol in Bihar, Ambedkar Nagar, Auraiya, Bhagpat, J. P. Nagar, Kannauj, Kanpur Dehat, Kushambi, Maharajganj, Sarvasti, Sant Kabir Nagar in Uttar Pradesh, Dindori, Gwalior, Harda, Riwa, Umaria in Madhya Pradesh, Dantewara, Jaspur, Kawardha, Koria, Mahasamund, in Chhattisgarh, Bokaro, Chatra, Garwah, Kodarma, Pakur, Purbi Singh Bhum in Jharkhand, Mumbai, Mumbai Sub-Urban, Nadurbar in Maharashtra, Kangra, Sirmaur in Himachal Pradesh, Phek, Tuensiang in Nagaland, Bongaigaon in Assam, Kolasib, Lawangtalai, Mamit, in Mizoram and South Garo Hill in Meghalaya. Some districts from Uttar Pradesh, Uttaranchal have two District Hospitals, one each for males and females, which were listed and surveyed separately. Thus the information collected and analysed in this chapter relates to a total of 370 DHs covered during the Second Phase in 2003 of the RCH facility survey from 370 districts of 26 states in India.

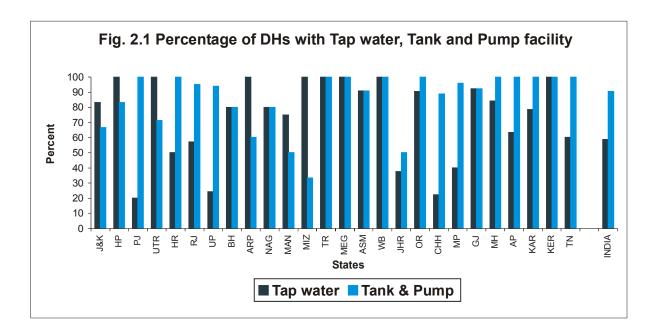
2.2 Infrastructure (Table H1)

On the whole, excluding one or two items of infrastructure, the situation is fairly satisfactory in Andhra Pradesh, Karnataka, Haryana, Rajasthan, Meghalaya, Kerala, Tripura, Nagaland, Himachal Pradesh, Gujarat, Punjab, Tamil Nadu and West Bengal. But in some states like Bihar, Jharkhand and Manipur, the situation is far from satisfactory.

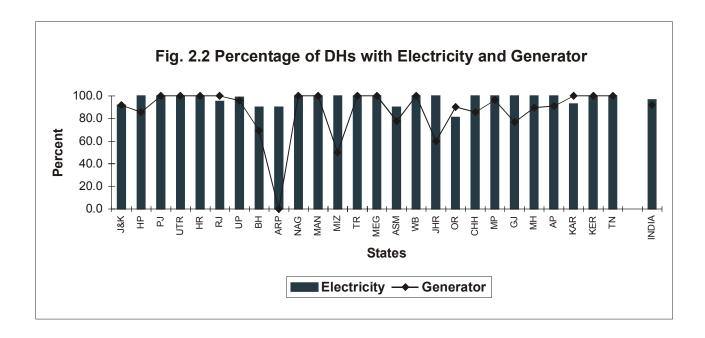
(a) Water and electricity

Of the total 370 DHs, 59 percent have tap water facility and 41 percent have other sources of water. In order to ensure continuous water supply, all hospitals are expected to have a tank and pump facility, but this is not available in 9 percent of the cases. Most of the hospitals in all the states have tap or some other source of water facility. Punjab, Haryana,

Tripura, Meghalaya, West Bengal, and Kerala all DHs, have tank and pump facility (see Fig. 2.1).



At the all-India level, electricity is available in all parts of 97 percent of the 370 district hospitals. But standby facility in the form of a generator is available in 92 percent of the cases. It varies from none out of 10 hospitals in Arunachal Pradesh to all hospitals in Kerala, Tamil Nadu, Karnataka, West Bengal, Meghalaya, Tripura, Manipur, Nagaland, Rajasthan, Haryana, Punjab and Uttaranchal (see Fig. 2.2).



(b) Telephone and vehicle

Telephone facility is available in most of the DHs (97%). But only 75 percent of the hospitals in Manipur report having a telephone facility (which is the lowest among the states). Ninety percent of the total DHs have at least one functional vehicle; but only 50 percent of DHs in Jharkhand have a functional vehicle.

(c) Laboratory

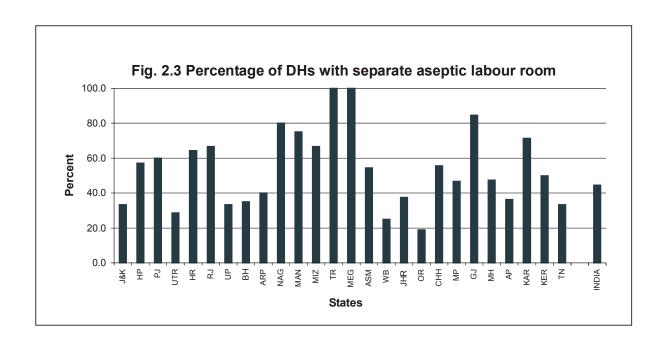
In the context of provision of RCH services, the availability of laboratories in DHs to test the blood and urine of the women seeking antenatal care as well as for the diagnosis of RTI/STI among men and women is critical. Out of the 370 DHs surveyed all over the country, only 73 percent have laboratories. In Himachal Pradesh, Tripura and Meghalaya all DHs have laboratories. But in Manipur none of the DHs have a laboratory. Only 20 percent of the DHs in Arunachal Pradesh have laboratories.

(d) Operation theatre for gynaecological purposes

Almost all DHs in India have an operation theatre (OT) and 48 percent of them have an OT for gynaecological purposes. All the DHs except one each in Rajasthan and Madhya Pradesh have an operation theatre. In Andhra Pradesh, Madhya Pradesh and Meghalaya more than 82 percent of the DHs (those DHs, which have OT facility) have an OT facility exclusively for gynaecological purpose. But in Manipur, Mizoram and Tripura, none of the DHs have OT facility for gynaecological purposes.

(e) Separate aseptic labour room

A separate aseptic labour room is found only in 45 percent of DHs. Not a single major state has all DHs with separate aseptic labour rooms. However, it should not be taken as an absence of delivery facility. The available labour room may not be clean, may be having seepage, or may be kept open for other purposes when not used for delivery, thereby defying the definition of aseptic. In some cases the deliveries are conducted in the operation theatre. At least 71 percent or more of DHs in Karnataka, Gujarat, Meghalaya, Tripura, Manipur and Nagaland have separate aseptic labour rooms (see Fig. 2.3), whereas in only 19 percent of DHs in Orissa have separate aseptic labour rooms.



(f) Out patient department (OPD) for gynaecology and RTI/STI

OPD facility for gynaecology is available in 74 percent of the DHs. This is very low in Maharashtra with only 21 percent of the DHs reporting this facility. All the DHs in Himachal Pradesh, Punjab, Rajasthan, Nagaland, Mizoram, Tripura, Meghalaya, Gujarat, Kerala and Tamil Nadu have OPD facility for gynaecology.

On the whole, OPD facility for RTI/STI is inadequate with only a little more than half of the total number of DHs reporting this facility. In Tamil Nadu, Kerala, Mizoram, Tripura and Meghalaya all the DHs have OPD for RTI/STI.

(g) Linkage with district blood bank

Only 68 percent of the DHs have linkage with district blood banks. Kerala, Tripura and West Bengal are the only three states with all the hospitals having linkage with district blood banks. The situation prevailing in Meghalaya and Arunachal Pradesh is worse.

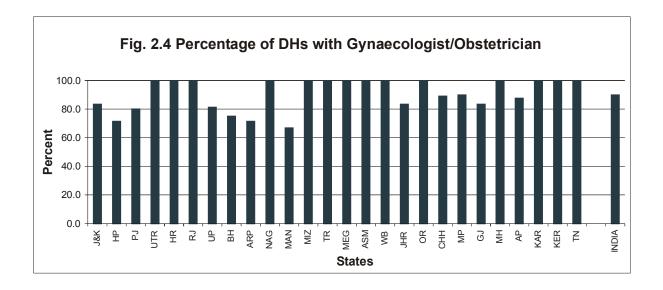
2.3 Staff Position (Table H2)

All the staff positions are taken from the number of DHs having sanctioned posts. The overall situation prevailing in the country is fairly satisfactory in the case of

gynaecologist/obstetrician, paediatrician and RTI/STI specialist, with at least 90 percent of hospitals having such specialists. General duty doctors, Staff Nurse, female health worker, and laboratory technician are available in almost all DHs.

(a) Obstetrician/gynaecologist

For the provision of reproductive health particularly for females a gynaecologist/obstetrician is essential. But 10 percent of the DHs do not have any obstetrician/gynaecologist. However, in Assam, Karnataka, Tamil Nadu, Kerala, Orissa, West Bengal, Maharashtra, Mizoram, Tripura, Meghalaya, Nagaland, Haryana, Rajasthan and Uttaranchal all hospitals have a gynaecologist/obstetrician. In Arunachal Pradesh, Himachal Pradesh and Bihar only 71 to 75 percent DHs have a gynaecologist/obstetrician. This reflects the poor availability of staff in DHs (See Fig. 2.4).



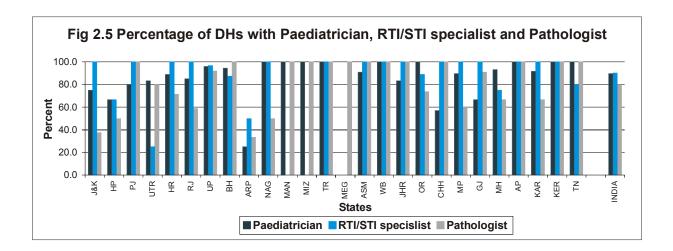
(b) Paediatrician, RTI/STI specialist and pathologist

The importance of paediatrician cannot be underestimated for childcare. But the data from 370 DHs in India show that 10 percent of the DHs do not have a doctor specialised in paediatrics. Except for Kerala, Tamil Nadu, Andhra Pradesh, Orissa, West Bengal, Nagaland, Manipur, Mizoram and Tripura, the other states do not have a paediatrician in the hospital.

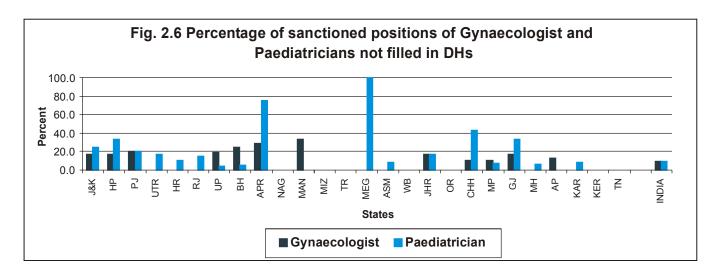
Ninety percent of the DHs at all India level have at least one RTI/STI specialist. All DHs in Punjab, Haryana, Rajasthan, Nagaland, Tripura, Assam, West Bengal, Jharkhand,

Chhattisgarh, Madhya Pradesh, Gujarat, Andhra Pradesh, Karnataka, Kerala and Jammu and Kashmir have at least one RTI/STI specialist.

Eighty percent of the DHs in India have at least one pathologist. All the DHs in Kerala, Tamil Nadu, Andhra Pradesh, Chhattisgarh, Jharkhand, West Bengal, Assam, Meghalaya, Mizoram, Tripura, Manipur, Bihar and Punjab have a pathologist. Only 33 percent of the DHs in Arunachal Pradesh have a pathologist (Fig. 2.5).



For the purpose of RCH, the availability of gynaecologist and paediatrician is very important. The availability of at least one each of these specialists has already been shown in **(Fig. 2.5)**. **Fig. 2.6** shows the percentage of sanctioned posts lying vacant in the case of both gynaecologist and paediatrician.



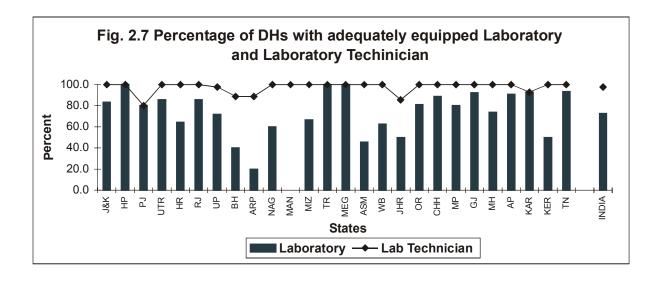
This proportion of unfilled posts of paediatrician varies from none in Tamil Nadu, Andhra Pradesh, Kerala, Orissa, West Bengal, Tripura, Mizoram, Manipur and Nagaland to all the posts in Meghalaya. There are more vacant posts for paediatricians as compared to the posts of gynaecologist at the state level. In Uttaranchal, Haryana, Rajasthan, West Bengal, Orissa, Maharashtra, Karnataka, Kerala, Tamil Nadu, Nagaland, Meghalaya, Assam, Mizoram and Tripura states all the sanctioned posts of gynaecologists are filled, while in Arunachal Pradesh around 29 percent of the sanctioned positions are lying vacant.

(c) Anaesthetist and general duty doctors

Eighty-three percent of the total DHs have at least one Anaesthetist. All the DHs in Jammu and Kashmir, Punjab, Assam, Meghalaya, Tripura, Maharashtra, Andhra Pradesh, West Bengal, Tamil Nadu, and Kerala have an Anaesthetist. All the DHs have general duty male and female doctors except some hospitals in Uttar Pradesh, Uttaranchal, Arunachal Pradesh, Madhya Pradesh, Mizoram, Jharkhand and Karnataka.

(d) Staff nurse, ANM and laboratory technician

The DHs in all the states except those in Jammu and Kashmir, Punjab, Rajasthan, Tamil Nadu, Karnataka and Arunachal Pradesh have a staff nurse, and ANM. A laboratory technician is also available in all DHs except Uttar Pradesh, Arunachal Pradesh, Punjab, Jharkhand, Bihar and Karnataka. The availability of laboratory and laboratory technician in all the states is given in **Fig. 2.7**. In most of the states, the proportion of DHs having a laboratory technician is higher than the proportion having a laboratory. In Himachal Pradesh, Tripura, and Meghalaya, all DHs have both a laboratory and a laboratory technician.

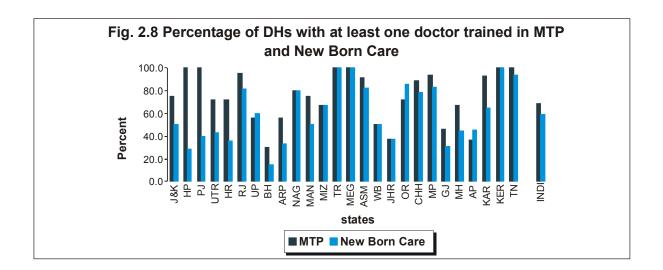


2.4 Training of Medical Officers (Table H3)

Training refers to the percentage of DHs where at least one doctor received in-service training during the three years preceding the date of survey. The current situation is quite unacceptable in all the states except Kerala, Tripura and Meghalaya. Here sterilization training includes training in NSV, mini laproscapy, and tubectomy. At the all India level, only 27 percent of the DHs have at least one doctor trained in sterilization. The corresponding figures for MTP, RTI/STI, new born care and RCH were 69, 63, 59 and 69 percent respectively.

Comparatively, the situation is better in case of training in sterilization in Punjab, Tripura, and Meghalaya where 80 percent to hundred percent of the hospitals have trained doctors. In the case of Uttaranchal, Jharkhand and Andhra Pradesh not a single hospital has doctors trained in sterilization.

On the whole, the situation in Kerala, Tripura and Meghalaya is comparatively better than that in other states with respect to training in sterilization, MTP, RTI/STI, new born care and RCH (see Fig. 2.8).



2.5 Supply and Stock

I. Supply of Tubal Rings and Selected Kits (Table H4)

Table H4, where the supply of kits necessary for reproductive health care is given presents a very bleak picture. All the kits examined here are available in all the District Hospitals in Kerala, Tripura and Meghalaya. The availability of these kits in the other states is very poor. Only 28 percent of the hospitals in India have a supply of tubal ring. But the supply of standard surgical kit, kit with emergency obstetric care drugs, RTI/STI kit, IUD kit, kit for new born care and normal delivery kit is found in 72, 45, 43, 63, 46, and 64 percent of the DHs in India.

(a) Tubal rings and standard surgical kits

The supply of tubal ring in most of the states is very poor. Only in Nagaland, Mizoram, Tripura, Meghalaya, Assam, Madhya Pradesh and Kerala more than 50 percent of the DHs received a tubal ring.

At the all-India level, only 72 percent of the hospitals received all six sets of standard surgical kits. Except in Himachal Pradesh, Haryana, Manipur, Tripura, Meghalaya, Jharkhand, Orissa, Karnataka, Kerala and Tamil Nadu in no other states have all the DHs received six sets of standard surgical kits.

(b) Emergency obstetric care drug kit and RTI/STI laboratory kit

The situation is worse in the case of emergency obstetric care drug kit with only 45 percent of all hospitals reporting to have received it. More than 93 percent of DHs in Tripura, Meghalaya, Orissa, Karnataka and Kerala have this kit. RTI/STI laboratory diagnosis kit is available only in 43 percent of hospitals. It is not available in Arunachal Pradesh and Jharkhand, and it is the least available in Bihar (5 percent), followed by Uttaranchal (14 percent), Jammu and Kashmir (25 percent), Assam (27 percent) and Uttar Pradesh (31 percent).

(c) IUD insertion kit, new born care equipment kit, labour room (normal delivery) kit

At the all India level, 63 percent, 46 percent and 64 percent DHs have IUD kit, new born care, and normal delivery kit respectively. All these three kits are available in all the district hospitals of Kerala, Orissa, Tripura, Meghalaya and Tamil Nadu. At least 71 percent of the DHs in Karnataka, Madhya Pradesh, Himachal Pradesh and Chhattisgarh have all these three kits. The IUD insertion kit and labour room kit is supplied to at least 63 percent of DHs at the all-India level. The situation of availability of all these three kits in Punjab, Uttar Pradesh, Bihar, Nagaland, Mizoram, West Bengal, and Maharashtra is not satisfactory.

II Stock of Selected Items (Table H5)

Stock refers to the stock available on the day of survey irrespective of the quantity. Sixty-nine to eighty percent of the total district hospitals have some stock of Nirodh, oral pill cycles, IUD, OPV, TT, DPT, Measles and BCG vaccines at the national level. But only 53 percent to 67 percent of the DHs in India have Vitamin A solution, IFA large, DT and ORS packets. The situation in the DHs in Bihar, Uttar Pradesh, Uttaranchal, Assam, Maharashtra and Andhra Pradesh is found to be unsatisfactory in terms of stock of all items examined in Table H5. The DHS in most of the states in South India (except those in Andhra Pradesh and Tamil Nadu), present a satisfactory situation.

(a) Contraceptives

A little over 68 percent of the DHs reported having lubricated Nirodh pieces, oral pills and IUD on the day of survey. This includes all district hospitals in Karnataka, Kerala, Gujarat, Madhya Pradesh, Himachal Pradesh, Rajasthan, Manipur, Meghalaya and Tamil Nadu in the case of Nirodh; Haryana, Rajasthan, Arunachal Pradesh, Nagaland, Mizoram, Gujarat, Kerala Punjab and Tamil Nadu in the case of oral pills and IUD.

(b) IFA (large) tablets, Vitamin A solution and ORS packets

Most women are anaemic during pregnancy and they are expected to take 100 IFA tablets during pregnancy to prevent anaemia and if they are declared anaemic they have to take 200 tablets during pregnancy. But on the day of survey, only 60 percent of the DHs had this tablet in stock. None of the major states had all the DHs with this tablet. Among smaller states Tripura and Meghalaya had all hospitals reporting some stock of IFA tablets. Among the remaining states, the situation is slightly better in Haryana, Orissa, Jharkhand, Arunachal

Pradesh, Nagaland, and Tamil Nadu, where at least 80 of the percent DHs have stock of IFA (large) tablets.

Trachoma and Vitamin A deficiency are the common causes of night blindness among children. This can be reduced to a great extent by giving Vitamin A solution. But only 54 percent of the hospitals had this on the day of survey, which includes all hospitals in Nagaland, Tripura, Meghalaya and Manipur. But the situation in Tamil Nadu (7 percent), Bihar (30 percent), Uttar Pradesh (29 percent) and Mizoram (33 percent) is worse.

Diarrhoea is common among children in varying degrees. Fluid replacement is the first treatment to avoid dehydration. For this, oral rehydration salts (ORS) are available in packets which hospitals are expected to stock for emergency. This was available in 67 percent of the hospitals on the day of survey. Among the major states, none of the states had all the DHs reporting a stock of this except Tamil Nadu. The situation is worse in the DHs in Uttar Pradesh, Uttaranchal, Assam and Mizoram.

(c) Vaccines

Around 70 percent of the district hospitals have all the vaccines except DT, which is available only in 59 percent of the hospitals. The situation of these all vaccines in some states like Himachal Pradesh, Punjab, Haryana and Kerala is very satisfactory. But the stock of all these vaccines in Uttar Pradesh, Uttaranchal, and Maharashtra is below average, which is really a matter of concern.

2.6 Equipment (Table H6)

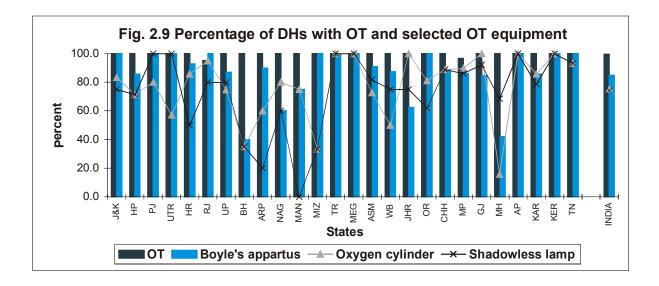
The equipment considered here are those that are expected to be in the operation theatre; X-ray and ECG machine, and selected cold chain equipment and other equipment. The availability is considered on the day of survey.

Boyle's apparatus is available in 85 percent of the DHs. Only 75 percent of the hospitals had oxygen cylinder on the day of survey. Shadowless lamp is available only in 74 percent of the cases. High-pressure sterilizer (both vertical and horizontal) is available in 53 percent of all DHs, while cardiac monitor was available only in 35 percent. OT fumigation apparatus necessary for disinfecting the OT is available in 55 percent of DHs. Hydraulic table in the operation theatre is available in most of the DHs (86%). While X-ray machine is available in 96 percent of DHs, ECG machine is available only in 91 percent. Cold chain equipment, namely ice lined freezer, deep freezer and refrigerator are available in 60, 56 and 29 percent of DHs respectively.

(a) Equipment in the operation theatre

All the DHs in Jammu and Kashmir, Punjab, Uttaranchal, Rajasthan, Mizoram, Tripura, Meghalaya, Orissa, Andhra Pradesh, Kerala and Tamil Nadu have Boyle's Apparatus. All the district hospitals in Andhra Pradesh, Gujarat, Haryana, Meghalaya, Tripura Kerala and Jharkhand have oxygen cylinder in the OT. Similarly shadowless lamp is available in all the DHs of Andhra Pradesh, Kerala, Punjab, Uttaranchal, Tripura and Meghalaya. High-pressure sterilizer (both vertical and horizontal) is available in all the DHs of Andhra Pradesh, Meghalya and Kerala. But most of the bigger states do not have all DHs with cardiac monitor or ventilator. OT fumigation apparatus is available in all the district hospitals of Andhra Pradesh and Karnataka and in some of the smaller states like Tripura and Meghalaya. Hydraulic table in the OT is reported to be available in all the district hospitals of Jammu and Kashmir, Rajasthan, Mizoram, Gujarat, Andhra Pradesh, Kerala, Punjab and Uttaranchal. Bihar and Arunachal Pradesh show a poor situation in all these aspects. Availability of OT equipment in relation to availability of OT is given in Fig. 2.9.

In Andhra Pradesh, Kerala, Tripura and Meghalaya, all the DHs do have OTs and all the selected OT equipment.



(b) X-ray and ECG machine

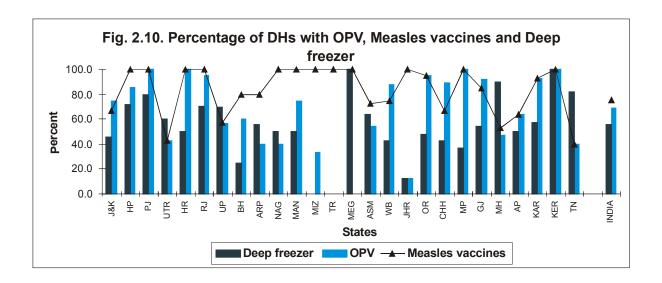
The X-ray machine was available in 96 percent of DHs in India. Except in Bihar, Nagaland, Manipur, Assam, Orissa, Maharashtra and Jammu and Kashmir. The ECG

machine is available in all the hospitals of all the states except some in Himachal Pradesh, Arunachal Pradesh, Tripura, Meghalaya, Jharkhand, Maharashtra, Assam, Bihar, Uttar Pradesh, Orissa, and Haryana.

(c) Cold chain equipment

All the DHs in India do not have all the three cold chain equipment (ice-lined freezer, deep freezer and refrigerator). The availability of ice-lined freezer varies from 13 percent in Bihar to hundred percent in Kerala, Maharashtra, Tripura, and Meghalaya. Variation in deep freezer is from none in Mizoram and Tripura to hundred percent in Kerala. In Bihar, only 25 percent of the DHs have deep freezers. Refrigerator is available in all the four hospitals of only Manipur and the situation of the availability of the refrigerator, deep freezer in the DHs of Uttar Pradesh, Bihar, Arunachal Pradesh, Rajasthan, West Bengal, Orissa, Chhattisgarh, Madhya Pradesh, Gujarat and Karnataka is very bad.

Fig. 2.10 shows the availability of deep freezer in relation to availability of OPV and measles vaccine that needs to be kept in the freezer.



In many states a higher proportion of the DHs reported having a stock of OPV and measles vaccine than having a deep freezer indicating that in some cases the vaccines are not kept in a deep freezer as they should be. The situation in Kerala is much better.

2.7 Adequately Equipped District Hospitals and Those Used as Referral (Table H7)

A district hospital with at least 60 percent of the critical inputs is taken as adequately equipped in that particular aspect. Table H7 provides this information. It shows that 93 percent of the hospitals are adequately equipped with respect to infrastructure, which includes all the hospitals in almost all the states. The proportion of the total hospitals adequately equipped in staff and equipment are 80-84 percent. Among the states, all the hospitals in Orissa, Tripura, Meghalaya, Kerala and Tamil Nadu are adequately equipped with respect to staff. Similarly, all the hospitals in Punjab, Uttaranchal, Gujarat, Kerala, Tamil Nadu, Tripura, Meghalaya and Orissa are adequately equipped with respect to equipment.

Less than half (45%) of the hospitals have reported adequate supply of kits. Except Tripura, Kerala and Orissa to a certain extent, the situation with respect to supply is quite unsatisfactory. All the hospitals in Orissa and Kerala are adequately equipped with respect to infrastructure, staff, supply and equipment. In the adequacy status, the lower hierarchy is occupied by Jharkhand and Manipur in the case of infrastructure. Arunachal Pradesh and Manipur in the case of staff and Bihar and Maharashtra in the case of equipment. In Bihar, there is only one DH out of 20 that is adequately equipped.

A little more than one-third of the DHs have attended to referred cases during the three months immediately preceding the survey. All the four hospitals in Manipur and one hospital in Tripura and 50 percent or more district hospitals in Assam, Tamil Nadu, Maharashtra, Orissa, and 67 percent in Arunachal Pradesh reported to have attended to referred cases. In the remaining states, the proportion is much less than 50 percent.

Table H1: Status of infrastructure in District Hospitals in the states of India, Facility Survey, 2003

								Perce	entage of	DHS hav	ing					
Sl. No	State	No. of	Water 1	Facility	Over head	Electrici	Generator		Vehicl			OT For gynaec	Separate		RTI/STI	Linkage with district blood bank
		DH s	Tap	Other ¹	Tank& pump exist	ty All part	Functional 2	Telephone	e ³ Functi onal	Labor atory	ОТ	purp ose ⁴	Aseptic labour room	Gynaec OPD facility	OPD facility	
1	Jammu & Kashmir	12	83.3	16.7	66.7	91.7	91.7	100.0	100.0	83.3	100.0	41.7	33.3	91.7	33.3	41.7
2	Himachal Pradesh	7	100.0	0.0	85.7	100.0	85.7	100.0	100.0	100.0	100.0	57.1	57.1	100.0	71.4	71.4
3	Punjab	5	20.0	80.0	100.0	100.0	100.0	100.0	100.0	80.0	100.0	60.0	60.0	100.0	80.0	80.0
4	Uttaranchal	7	100.0	0.0	71.4	100.0	100.0	100.0	100.0	85.7	100.0	28.6	28.6	71.4	57.1	85.7
5	Haryana	14	50.0	50.0	100.0	100.0	100.0	100.0	85.7	64.3	100.0	21.4	64.3	92.9	78.6	92.9
6	Rajas than	21	57.1	42.9	95.2	95.2	100.0	100.0	85.7	85.7	95.2	45.0	66.7	100.0	95.2	85.7
7	Uttar Pradesh	99	24.2	74.8	93.9	99.0	95.9	91.9	83.8	71.7	100.0	50.5	33.3	47.5	44.4	70.7
8	Bihar	20	80.0	20.0	80.0	90.0	69.2	90.0	70.0	40.0	100.0	40.0	35.0	50.0	55.0	45.0
9	Arunachal Pradesh	10	100.	0.0	60.0	90.0	0.0	100.0	80.0	20.0	100.0	40.0	40.0	60.0	70.0	10.0
10	Nagaland	5	80.0	20.0	80.0	100.0	100.0	100.0	100.0	60.0	100.0	40.0	80.0	100.0	80.0	80.0
11	Manipur	4	75.0	25.0	50.0	100.0	100.0	75.0	75.0	0.0	100.0	0.0	75.0	75.0	50.0	25.0
12	Mizoram	3	100	0.0	33.3	100.0	50.0	100.0	100.0	66.7	100.0	0.0	66.7	100.0	100.0	66.7
13	Tripura	1	100	0.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	0.0	100.0	100.0	100.0	100.0
14	Meghalaya	1	100	0.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	0.0
15	Assam	11	90.9	0.01	90.9	90.0	77.8	90.9	81.1	45.5	100.0	54.5	54.5	81.8	45.5	54.5
16	West Bengal	8	100	0.0	100.0	100.0	100.0	100.0	100.0	62.5	100.0	62.5	25.0	87.5	87.5	100.0
17	Jharkhand	8	37.5	62.5	50.0	100.0	60.0	100.0	50.0	50.0	100.0	50.0	37.5	62.5	50.0	25.0
18	Orissa	21	90.5	9.5	100.0	81.0	90.0	100.0	100.0	81.0	100.0	33.3	19.0	95.2	33.3	71.4
19	Chhatisgarh	9	22.2	77.8	88.9	100.0	85.7	100.0	88.9	88.9	100.0	55.6	55.6	88.9	44.4	66.7
20	Madhya Pradesh	30	40.0	59.6	96.0	100.0	96.4	100.0	100.0	80.0	96.7	82.8	46.7	96.7	70.0	80.0
21	Gujarat	13	92.3	7.7	92.3	100.0	76.9	100.0	100.0	92.3	100.0	76.9	84.6	100.0	23.1	61.5
22	Maharashtra	19	84.2	15.8	100.0	100.0	89.5	100.0	100.0	73.7	100.0	10.5	47.4	21.1	15.8	36.8
23	Andhra Pradesh	11	63.6	36.4	100.0	100.0	90.9	100.0	100.0	90.9	100.0	90.9	36.4	90.9	72.7	90.9
24	Karnataka	14	78.6	21.4	100.0	92.9	100.0	100.0	100.0	92.9	100.0	7.1	71.4	92.9	64.3	78.6
25	Kerala	2	100.0	0.0	100.0	100.0	100.0	100.0	100.0	50.0	100.0	50.0	50.0	100.0	100.0	100.0
26	Tamil Nadu	15	60.0	40.0	100.0	100.0	100.0	100.0	100.0	93.3	100.0	60.0	33.3	100.0	100.0	80.0
	India	370	58.6	41.3	90.5	96.7	91.7	96.8	89.9	72.7	99.5	47.6	44.6	73.8	56.5	67.6

¹ Tap water is not included.

<sup>Taken from No. of Generator available.
Includes Ambulance, Jeep, and Car functional on the day of survey</sup>

⁴ From OT available.

Table H2: Staff position in District Hospitals in the states of India, Facility Survey, 2003

					Po	ercentage of DHs w	ith at least on	e post filled				
Sl. No	States	No. of DHs	Obstetricia n/Gynaeco logist**	Peadiatrician*	RTI/STI specialist**	Patholo- gist**	Anaesthet ist **	General duty doctor		Staff nurse**	ANM*	LT **
			logist					Male	Female			
1	Jammu & Kashmir	12	83.3	75.0	100.0	37.5	100.0	100.0	100.0	91.7	100.0	100.0
2	Himachal Pradesh	7	71.4	66.7	66.7	50.0	66.7	100.0	100.0	100.0	100.0	100.0
3	Punjab	5	80.0	80.0	100.0	100.0	100.0	100.0	100.0	75.0	75.0	80.0
4	Uttaranchal	7	100.0	83.3	25.0	80.0	40.0	80.0	100.0	100.0	100.0	100.0
5	Haryana	14	100.0	88.9	100.0	71.4	87.5	100.0	100.0	100.0	100.0	100.0
6	Rajas than	21	100.0	85.0	100.0	58.8	85.7	100.0	100.0	95.0	100.0	100.0
7	Uttar Pradesh	99	81.1	95.9	96.7	91.8	88.6	95.7	88.1	100.0	100.0	97.7
8	Bihar	20	75.0	94.4	87.5	100.0	81.3	100.0	100.0	100.0	100.0	88.9
9	Arunachal Pradesh	10	71.4	25.0	50.0	33.3	40.0	90.0	100.0	88.9	80.0	88.9
10	Nagaland	5	100.0	100.0	100.0	50.0	50.0	100.0	100.0	100.0	100.0	100.0
11	Manipur	4	66.7	100.0	0.0	100.0	66.7	100.0	100.0	100.0	100.0	100.0
12	Mizoram	3	100.0	100.0	0.0	100.0	0.0	66.7	66.7	100.0	100.0	100.0
13	Tripura	1	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	1	100.0	0.0	0.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
15	Assam	11	100.0	90.9	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
16	West Bengal	8	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
17	Jharkhand	8	83.3	83.3	100.0	100.0	75.0	100.0	75.0	100.0	100.0	85.7
18	Orissa	21	100.0	100.0	88.9	73.7	85.7	100.0	100.0	100.0	100.0	100.0
19	Chhatisgarh	9	88.9	57.1	100.0	100.0	50.0	100.0	100.0	100.0	100.0	100.0
20	Madhya Pradesh	30	89.7	89.7	100.0	60.0	53.8	96.7	100.0	100.0	100.0	100.0
21	Gujarat	13	83.3	66.7	100.0	90.9	91.7	100.0	100.0	100.0	100.0	100.0
22	Maharashtra	19	100.0	93.3	75.0	66.7	100.0	100.0	100.0	100.0	100.0	100.0
23	Andhra Pradesh	11	87.5	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
24	Karnataka	14	100.0	91.7	100.0	66.7	76.9	100.0	85.7	100.0	92.9	92.9
25	Kerala	2	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
26	Tamil Nadu	15	100.0	100.0	80.0	100.0	100.0	100.0	100.0	100.0	93.3	100.0
	India	370	89.7	89.6	90.2	79.8	83.2	97.9	95.5	98.8	97.9	97.7

^{**} All the figures are taken from Number of DHs having sanctioned posts. LT: Laboratory Technician.

Table H3: Training status of Medical Officers in District Hospitals in the states of India, Facility Survey, 2003

SI.	States	No.	Percentage of the three years			or received traini	ng during
No	States	DHs	Sterilization ¹	MTP	RTI/STI	New born care	RCH
1	Jammu & Kashmir	12	16.7	75.0	25.0	50.0	50.0
2	Himachal Pradesh	7	28.6	100.0	42.9	28.6	71.4
3	Punjab	5	80.0	100.0	60.0	40.0	40.0
4	Uttaranchal	7	0.0	71.4	42.9	42.9	100.0
5	Haryana	14	42.9	71.4	57.1	35.7	57.1
6	Rajasthan	21	61.9	95.2	71.4	81.0	61.9
7	Uttar Pradesh	99	19.2	55.6	69.7	59.6	63.6
8	Bihar	20	5.0	30.0	20.0	15.0	65.0
9	Arunachal Pradesh	10	11.1	55.6	33.3	33.3	66.7
10	Nagaland	5	60.0	80.0	80.0	80.0	100.0
11	Manipur	4	25.0	75.0	50.0	50.0	50.0
12	Mizoram	3	33.3	66.7	100.0	66.7	100.0
13	Tripura	1	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	1	100.0	100.0	100.0	100.0	100.0
15	Assam	11	45.5	90.9	72.7	81.8	63.6
16	West Bengal	8	25.0	50.0	62.5	50.0	37.5
17	Jharkhand	8	0.0	37.5	37.5	37.5	87.5
18	Orissa	21	47.6	71.4	66.7	85.7	100.0
19	Chhatisgarh	9	33.3	88.9	88.9	77.8	77.8
20	Madhya Pradesh	30	16.7	93.3	96.7	83.3	93.3
21	Gujarat	13	0.0	46.2	30.8	30.8	30.8
22	Maharashtra	19	16.7	66.7	55.6	44.4	72.2
23	Andhra Pradesh	11	0.0	36.4	63.6	45.5	27.3
24	Karnataka	14	35.7	92.9	50.0	64.3	92.9
25	Kerala	2	50.0	100.0	100.0	100.0	100.0
26	Tamil Nadu	15	60.0	100.0	86.7	93.3	73.3
	India	370	26.6	68.8	62.9	59.2	68.9

¹ Sterilization included NSV, Mini lap, and tubectomy from total number of health personnel posts filled (Medical Officer).

Table H4: Supply of Tubal Rings and Kits in District Hospitals in the states of India, Facility Survey, 2003

		3 . T		Pe		of DHs having	g received		
Sl. No	State	No. of DHs	Tubal ring (stock)	Std.sur.kit ¹	EmOC kit ²	RTI/STI Laborato ry kit	IUD kit	NBCE kit ³	Kit I ⁴
1	Jammu & Kashmir	12	41.7	58.3	41.7	25.0	50.0	25.0	58.3
2	Himachal Pradseh	7	42.9	100.0	71.4	71.4	100.0	71.4	100.0
3	Punjab	5	20.0	80.0	40.0	40.0	40.0	40.0	80.0
4	Uttaranchal	7	42.9	57.1	0.0	14.3	57.1	0.0	57.1
5	Haryana	14	7.1	100.0	64.3	64.3	100.0	64.3	100.0
6	Rajas than	21	47.6	71.4	52.4	61.9	61.9	47.6	52.4
7	Uttar Pradesh	99	15.2	50.5	32.3	31.3	35.4	23.2	34.3
8	Bihar	20	20.0	25.0	10.0	5.0	20.0	5.0	25.0
9	Arunachal Pradesh	10	30.0	70.0	10.0	0.0	60.0	30.0	70.0
10	Nagaland	5	80.0	60.0	40.0	40.0	60.0	40.0	60.0
11	Manipur	4	25.0	100.0	25.0	25.0	75.0	50.0	75.0
12	Mizoram	3	66.7	66.7	33.3	33.3	66.7	33.3	66.7
13	Tripura	1	100.0	100.0	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	1	100.0	100.0	100.0	100.0	100.0	100.0	100.0
15	Assam	11	81.8	90.9	36.4	27.3	63.6	45.5	72.7
16	West Bengal	8	12.5	87.5	50.0	37.5	62.5	37.5	62.5
17	Jharkhand	8	37.5	100.0	0.0	0.0	87.5	37.5	75.0
18	Orissa	21	23.8	100.0	95.2	66.7	100.0	100.0	100.0
19	Chhatisgarh	9	33.3	88.9	66.7	77.8	88.9	88.9	88.9
20	Madhya Pradesh	30	56.7	93.3	70.0	63.3	89.7	72.4	93.3
21	Gujarat	13	38.5	53.8	53.8	46.2	53.8	46.2	53.8
22	Maharashtra	19	5.3	68.4	36.8	42.1	63.2	31.6	68.4
23	AP	11	0.0	90.9	63.6	72.7	81.8	63.6	72.7
24	Karnataka	14	14.3	100.0	92.9	78.6	92.9	92.9	92.9
25	Kerala	2	100.0	100.0	100.0	100.0	100.0	100.0	100.0
26	Tamil Nadu	15	6.7	100.0	26.7	40.0	100.0	80.0	100.0
	India	370	27.8	72.2	45.4	42.7	63.2	46.1	64.0

- A set of (six standard surgical kit).
 Kit with emergency obstetric care drugs.
 Kit for New Born care equipment.
- 4 Normal delivery Kit.

Table H5: Stock of selected items of health care in District Hospitals in the states of India, Facility Survey, 2003

Sl.		No.			P	ercentage (of DHs ha	ving (As on	the day o	f survey) s	ome stock	c of		
No.	State	of DHs	Nirodh	OP	IUD	IFA (large)	Vit.A	ORS	DPT	OPV	TT	BCG	Measles	DT
1	Jammu & Kashmir	12	50.0	83.3	91.7	83.3	66.7	66.7	75.0	75.0	100.0	75.0	66.7	50.0
2	Himachal Pradesh	7	100.0	100.0	85.7	71.4	71.4	57.1	100.0	85.7	100.0	100.0	100.0	85.7
3	Punjab	5	20.0	60.0	100.0	80.0	40.0	60.0	80.0	100.0	100.0	100.0	100.0	100.0
4	Uttaranchal	7	71.4	57.1	57.1	57.1	57.1	42.9	57.1	42.9	71.4	71.4	42.9	57.1
5	Haryana	14	92.9	100.0	100.0	92.9	85.7	92.9	92.9	100.0	100.0	78.6	100.0	92.9
6	Rajasthan	21	100.0	100.0	100.0	71.4	76.2	85.7	100.0	95.2	100.0	90.5	100.0	66.7
7	Uttar Pradesh	99	52.5	48.5	46.5	36.4	29.3	40.4	59.6	56.6	57.6	56.6	57.6	29.3
8	Bihar	20	50.0	35.0	45.0	45.0	30.0	60.0	70.0	60.0	75.0	85.0	80.0	45.0
9	Arunachal Pradesh	10	90.0	70.0	100.0	80.0	90.0	80.0	60.0	40.0	90.0	100.0	80.0	70.0
10	Nagaland	5	80.0	80.0	100.0	80.0	100.0	100.0	80.0	40.0	100.0	80.0	100.0	100.0
11	Manipur	4	100.0	100.0	75.0	75.0	100.0	75.0	100.0	75.0	100.0	100.0	100.0	100.0
12	Mizoram	3	66.7	33.3	100.0	33.3	33.3	33.3	33.3	33.3	100.0	66.7	100.0	100.0
13	Tripura	1	100.0	0.0	100.0	100.0	100.0	100.0	100.0	0.0	100.0	100.0	100.0	100.0
14	Meghalaya	1	100.0	0.0	100.0	100.0	100.0	100.0	100.0	0.0	100.0	100.0	100.0	100.0
15	Assam	11	72.7	27.3	72.7	45.5	54.5	45.5	45.5	54.5	81.8	72.7	72.7	72.7
16	West Bengal	8	87.5	75.0	50.0	50.0	62.5	50.0	75.0	87.5	87.5	87.5	75.0	87.5
17	Jharkhand	8	87.5	50.0	75.0	87.5	50.0	75.0	87.5	12.5	100.0	87.5	100.0	100.0
18	Orissa	21	95.2	90.5	85.7	85.7	95.2	85.7	85.7	95.2	95.2	95.2	95.2	90.5
19	Chhatisgarh	9	77.8	88.9	77.8	66.7	66.7	77.8	88.9	88.9	88.9	88.9	66.7	88.9
20	Madhya Pradesh	30	100.0	93.3	93.3	70.0	70.0	89.7	89.7	100.0	100.0	100.0	100.0	83.3
21	Gujarat	13	100.0	92.3	100.0	69.2	61.5	92.3	84.6	92.3	76.9	69.2	84.6	76.9
22	Maharashtra	19	31.6	47.4	57.9	42.1	42.1	73.7	52.6	47.4	57.9	47.4	52.6	31.6
23	Andhra Pradesh	11	72.7	72.7	72.7	63.6	36.4	63.6	63.6	63.6	63.6	63.6	63.6	45.5
24	Karnataka	14	100.0	92.9	92.9	78.6	78.6	85.7	92.9	92.9	92.9	92.9	92.9	78.6
25	Kerala	2	100.0	100.0	100.0	50.0	50.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
26	Tamil Nadu	15	100.0	86.7	100.0	80.0	6.7	100.0	40.0	40.0	86.7	40.0	40.0	20.0
	India	370	73.8	68.9	73.5	60.3	53.5	67.3	72.4	69.2	80.3	74.9	75.7	59.2

Table H 6: Availability of selected equipment in District Hospitals in the states of India, Facility Survey, 2003

]	Percentage of D	Hs having the	he following	in their OT		
Sl. No	State	No. of DHs	No. of DHs having OT	Boyle's Apparatu s	Oxygen cylinder	Shadowless lamp ¹	High Pressure Sterilizer	Cardiac monitor	Ventilator	OT care/fumigation	Hydraulic table
1	Jammu & Kashmir	12	12	100.0	83.3	75.0	66.7	91.7	83.3	91.7	100.0
2	Himachal Pradesh	7	7	85.7	71.4	71.4	57.1	57.1	57.1	71.4	71.4
3	Punjab	5	5	100.0	80.0	100.0	80.0	100.0	80.0	80.0	100.0
4	Uttaranchal	7	7	100.0	57.1	100.0	57.1	0.0	28.6	42.9	100.0
5	Haryana	14	14	92.9	85.7	50.0	57.1	35.7	21.4	50.0	85.7
6	Rajasthan	21	20	100.0	95.0	80.0	75.0	55.0	40.0	90.0	100.0
7	Uttar Pradesh	99	99	86.9	74.7	79.8	60.6	18.2	26.3	31.3	97.0
8	Bihar	20	20	40.0	35.0	35.0	25.0	0.0	25.0	30.0	50.0
9	Arunachal Pradesh	10	10	90.0	60.0	20.0	20.0	20.0	20.0	50.0	50.0
10	Nagaland	5	5	60.0	80.0	60.0	0.0	20.0	40.0	60.0	80.0
11	Manipur	4	4	75.0	75.0	0.0	0.0	0.0	75.0	0.0	25.0
12	Mizoram	3	3	100.0	33.3	33.3	0.0	0.0	66.7	66.7	100.0
13	Tripura	1	1	100.0	100.0	100.0	0.0	100.0	100.0	100.0	0.0
14	Meghalaya	1	1	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
15	Assam	11	11	90.9	72.7	81.8	18.2	27.3	27.3	63.6	81.8
16	West Bengal	8	8	87.5	50.0	75.0	75.0	100.0	75.0	75.0	87.5
17	Jharkhand	8	8	62.5	100.0	75.0	62.5	12.5	50.0	25.0	50.0
18	Orissa	21	21	100.0	81.0	61.9	38.1	66.7	23.8	19.0	90.5
19	Chhatisgarh	9	9	88.9	88.9	88.9	44.4	44.4	33.3	66.7	77.8
20	Madhya Pradesh	30	29	86.2	89.7	86.2	51.7	17.2	17.9	62.1	92.9
21	Gujarat	13	13	84.6	100.0	92.3	69.2	76.9	61.5	76.9	100.0
22	Maharashtra	19	19	42.1	15.8	68.4	15.8	5.3	10.5	78.9	36.8
23	Andhra Pradesh	11	11	100.0	100.0	100.0	100.0	90.9	100.0	100.0	100.0
24	Karnataka	14	14	85.7	85.7	78.6	85.7	57.1	71.4	100.0	92.9
25	Kerala	2	2	100.0	100.0	100.0	100.0	100.0	100.0	0.0	100.0
26	Tamil Nadu	15	15	100.0	93.3	93.3	46.7	26.7	20.0	93.3	93.3
	India	370	368	84.8	75.3	74.2	52.9	35.3	36.8	55.4	85.3

High Pressure sterilizer includes both horizontal and Vertical Shadowless lamp prestoleite for minor OT.

contd.....

Table H6: Availability of selected equipment in District Hospitals in the states of India, Facility Survey, 2003

		No.	No. of	Percentage of DH			of DHs having	the following
Sl.	State	of	DHs	the following in t		in working		T
No.	State	DHS	Having	X-RAY*	ECG	Ice line	Deep	Refrigerator ¹
			OT		Machine*	Freezer ¹	Freezer ¹	_
1	Jammu & Kashmir	12	12	91.7	100.0	55.6	45.5	18.2
2	Himachal Pradesh	7	7	100.0	85.7	50.0	71.4	60.0
3	Punjab	5	5	100.0	100.0	80.0	80.0	0.0
4	Uttaranchal	7	7	100.0	100.0	80.0	60.0	50.0
5	Haryana	14	14	100.0	92.9	64.3	50.0	50.0
6	Rajas than	21	20	100.0	100.0	70.0	70.0	41.2
7	Uttar Pradesh	99	99	96.6	90.6	83.7	69.8	19.4
8	Bihar	20	20	70.6	40.0	12.5	25.0	33.3
9	Arunachal Pradesh	10	10	100.0	50.0	62.5	55.6	33.3
10	Nagaland	5	5	66.7	100.0	66.7	50.0	80.0
11	Manipur	4	4	75.0	100.0	50.0	50.0	100.0
12	Mizoram	3	3	100.0	100.0	0.0	0.0	50.0
13	Tripura	1	1	100.0	0.0	100.0	0.0	0.0
14	Meghalaya	1	1	100.0	0.0	100.0	100.0	0.0
15	Assam	11	11	90.9	71.4	70.0	63.6	20.0
16	West Bengal	8	8	100.0	100.0	66.7	42.9	14.3
17	Jharkhand	8	8	100.0	66.7	0.0	12.5	75.0
18	Orissa	21	21	95.2	72.2	47.6	47.6	26.3
19	Chhatisgarh	9	9	100.0	100.0	50.0	42.9	28.6
20	Madhya Pradesh	30	29	100.0	100.0	33.3	36.7	35.3
21	Gujarat	13	13	100.0	100.0	45.5	54.5	15.4
22	Maharashtra	19	19	87.5	85.7	100.0	90.0	66.7
23	Andhra Pradesh	11	11	100.0	100.0	80.0	50.0	9.1
24	Karnataka	14	14	100.0	100.0	57.1	57.1	21.4
25	Kerala	2	2	100.0	100.0	100.0	100.0	0.0
26	Tamil Nadu	15	15	100.0	100.0	80.0	81.8	26.7
	India * Experience to be a fermion for	370	368	95.6	90.8	60.0	55.8	29.3

^{*} Functional taken from the equipment available in OT
1 In working condition taken from available

Table H7: Percentage of adequately equipped of District Hospitals and those used as referral in the states of India, Facility Survey, 2003

Sl.		No. of	Percentage adeq		ipped DHs	(at least 60)	Percentage of
No	State	DH	Infrastructure@	Staff ¹	Supply ²	Equipment ³	DHs utilized as
							referral ⁴
1	Jammu & Kashmir	12	100.0	91.7	33.3	100.0	33.3
2	Himachal Pradesh	7	100.0	71.4	71.4	85.7	20.0
3	Punjab	5	100.0	80.0	40.0	100.0	33.3
4	Uttaranchal	7	85.7	71.4	14.3	100.0	0.0
5	Haryana	14	100.0	64.3	64.3	92.9	20.0
6	Rajas than	21	100.0	95.2	47.6	100.0	35.7
7	Uttar Pradesh	99	94.9	85.9	26.3	86.9	18.2
8	Bihar	20	60.0	70.0	5.0	30.0	20.0
9	Arunachal Pradesh	10	70.0	20.0	10.0	70.0	66.7
10	Nagaland	5	100.0	40.0	40.0	60.0	0.0
11	Manipur	4	50.0	25.0	25.0	50.0	100.0
12	Mizoram	3	66.7	33.3	33.3	66.7	33.3
13	Tripura	1	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	1	100.0	100.0	0.0	100.0	0.0
15	Assam	11	81.8	81.8	45.5	81.8	80.0
16	West Bengal	8	100.0	75.0	37.5	87.5	25.0
17	Jharkhand	8	50.0	62.5	0.0	75.0	0.0
18	Orissa	21	100.0	100.0	100.0	100.0	61.1
19	Chhatisgarh	9	88.9	55.6	77.8	88.9	20.0
20	Madhya Pradesh	30	100.0	89.7	70.0	89.7	45.8
21	Gujarat	13	100.0	84.6	46.2	100.0	12.5
22	Maharashtra	19	100.0	68.4	42.1	36.8	50.0
23	Andhra Pradesh	11	100.0	72.7	72.7	100.0	33.3
24	Karnataka	14	100.0	78.6	92.9	92.9	27.3
25	Kerala	2	100.0	100.0	100.0	100.0	50.0
26	Tamil Nadu	15	100.0	100.0	53.3	100.0	80.0
	India	370	92.7	79.5	44.9	84.1	37.2

(0.0) Facility not having at least 60 percent.

- @ Overhead tank and pump facility, electricity in all parts of the hospital, availability of generator, telephone, functional vehicle, laboratory, operation theatre, separate aseptic labour room
- 1 Includes obstetrician/gynaecologist, paediatrician and anesthetist.
- Includes tubal ring, set of six standard surgical kits, emergency obstetric care kit, new born care kit, RTI/STI kits and delivery kit I.
- 3 Includes Boyle's apparatus, shadowlesslamp and oxygen cylinder.
- 4 Referred cases are taken from those DHs which have conducted delivery.

CHAPTER III

FIRST REFERRAL UNIT

3.1 Introduction

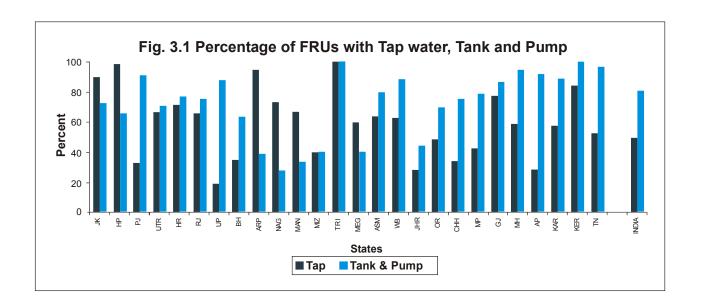
If some of the complications of pregnancy such as anaemia, haemorrhage, obstructed labour, sepsis are detected early and managed appropriately, maternal morbidity and mortality can be reduced substantially. But PHCs are not in a position to give complete obstetric care to the patients due to limited facilities and expertise available. Hence, some of the health facilities have been identified by the Government as First Referral Units (FRUs) and have been supplied with necessary equipment and kits to enable them to meet any emergency related to the health care of the mother, particularly emergency obstetric care (EmOC). On duty personnel in PHC and subcenters are advised to refer patients requiring EmOC to the designated FRU of that area. Hence, FRUS are expected to be fully equipped with adequate manpower, materials, drugs and kits. The information collected and analysed here is related to 1882 FRUs.

3.2 Infrastructure (Table F1)

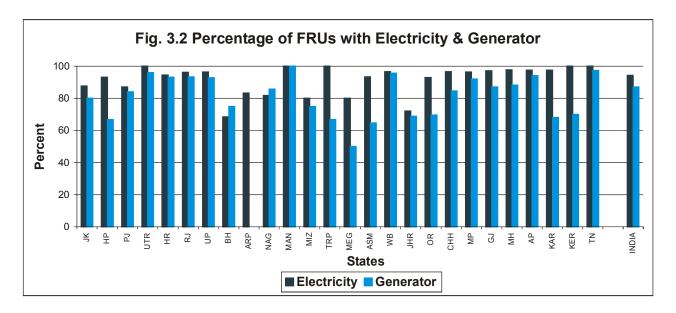
Around 94 percent of the total FRUs have an operation theatre, as well as electricity in all parts of the FRUs. Eighty-one percent of FRUs have overhead tank and pump facility to facilitate continuous water supply and 75 percent have telephone facility. Availability of RTI/STI OPD facility and linkage with district blood bank is far from satisfactory. One-third of the FRUs have a separate aseptic Labour room. Sixty-three percent of the FRUs have laboratory facilities.

(a) Water and electricity

The proportion of FRUs getting water from tap and other sources including well is 49 and 51 percent respectively. In Uttar Pradesh, Punjab, Andhra Pradesh, Bihar, Jharkhand, Chhattisgarh and Madhya Pradesh, a higher proportion of FRUs, obtained water from other sources (including well). (see Fig. 3.1)



Though there are very few FRUs without electricity, electricity in all parts of the hospital is noted only in 94 percent of the 1882 FRUs. Electricity availability varies from 68 percent FRUs in Bihar to hundred percent in Uttaranchal, Kerala, Manipur, Tripura and Tamil Nadu. In Bihar, only seven out of ten FRUs have electricity in all parts of the hospital. Standby facility in the form of generator is available only in the case of 87 percent of the cases. This varies from none in Arunachal Pradesh to 97 percent in Tamil Nadu and in all FRUs in Manipur (see Fig 3.2)



(b) Telephone and vehicle

Telephone facility is available only in 75 percent of FRUs. In Bihar and Uttar Pradesh, not even half of the FRUs have this communication facility, whereas in Kerala, Mizoram and Tripura

all the FRUs have telephones. The states with more than 90 percent of the FRUs having telephones are Uttaranchal, Mizoram, Tripura, West Bengal, Gujarat, Maharashtra, Haryana, Karnataka and Kerala.

At least one functional vehicle is available in 57 percent of the total FRUs. Only 26 and 38 percent of FRUs in Bihar and Andhra Pradesh respectively have at least one functional vehicle whereas in Uttaranchal, Tripura and Kerala more than 80 percent have this facility.

(c) Laboratory

In the context of provision of RCH services, the availability of laboratory in FRUs to test the blood and urine of women seeking antenatal care as well as for the diagnosis of RTI/STI among men and women is critical. Out of the 1882 FRUs surveyed all over the country, only 63 percent have a laboratory. In Punjab, Rajasthan, Tripura, West Bengal and Tamil Nadu, 75 percent of the FRUs or more have a laboratory. But in Manipur and Mizoram none of the FRUs have a laboratory. Only 17 percent of the FRUs in Bihar have a laboratory.

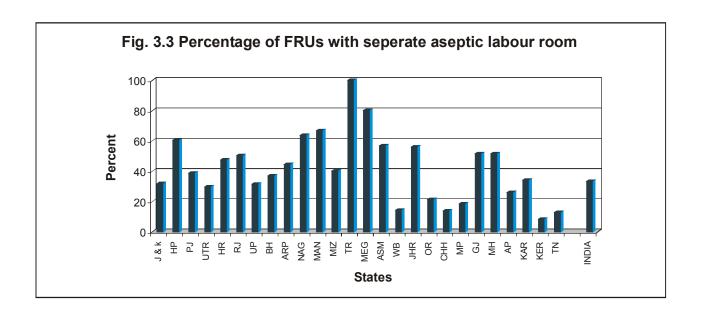
(d) Operation theatre for gynaecological purposes

All the states except West Bengal, Jammu Kashmir, Gujarat and Arunachal Pradesh have more than 90 percent of FRUs with operation theatre facility.

Separate OT for gynaecology is available in only 30 percent of the FRUs. None of the states have all the FRUs with this facility. In Karnataka, less than three percent of the FRUs have a separate operation theatre for gynaecological purposes. Kerala has the highest percentage of FRUs (46 %) with this facility.

(e) Separate aseptic labour room

A separate aseptic labour room helps in reducing the chances of infection during delivery and this is found only in 33 percent of the FRUs. Not a single state except Tripura has all FRUs with a separate aseptic labour room. At least 60-80 percent of FRUs with a separate aseptic labour room is found only in Himachal Pradesh, Nagaland, Manipur, Meghalaya states (see Fig. 3.3). It is lowest in Kerala with only eight percent of the FRUs having this facility.



Not having a separate aseptic labour room should not be taken as not having a delivery facility at all. As pointed out in the case of DHs, the available labour room may not be clean, may be having seepage, or may be kept open for other purposes when no delivery takes place thereby defying the definition of aseptic. In some cases, deliveries may take place in the operation theatre.

(f) Out patient department (OPD) for gynaecology and RTI/STI

The proportion of FRUs with OPD facility for gynaecology is found to be 54 percent. It varies from 13 percent in Maharashtra to hundred percent in Mizoram. Only one-fourth of the FRUs have RTI/STI OPD facility. Among the states, it varies from 5 percent in Gujarat to hundred percent in Tripura.

(g) Linkage with district blood bank

Only 27 percent of the FRUs have linkage with district blood bank and the highest proportion is found in Tripura (100%) followed by Punjab (58%).

3.3 Staff Position (Table F2)

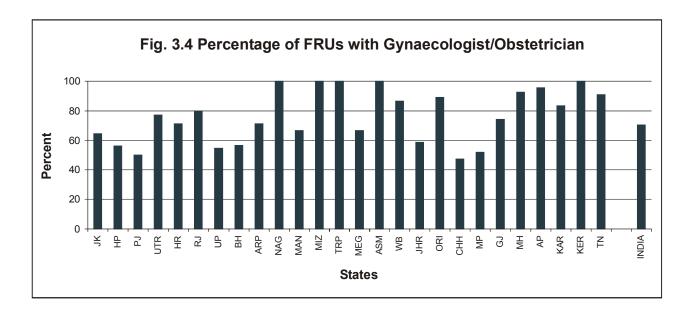
The overall situation is fairly satisfactory in the case of general duty male doctor, ANM, and Staff Nurse with 94 percent each of the total FRUs having them. Eighty-eight percent each of

the FRUs have general duty female doctor and Laboratory Technician. Specialists like gynaecologist/obstetrician, paediatrician, anaesthetist and RTI/STI specialists vary from 61 to 73 percent of the FRUs. Little more than two-third of FRUs (66.1%) have pathologist. Considering the fact that these are units that are expected to handle all referred cases especially relating to emergency obstetric care, the prevailing situation is rather disturbing.

(a) Obstetrician/gynaecologist

For the provision of reproductive health particularly for females, a gynaecologist/obstetrician is essential. But only 71 percent of the total FRUs have at least one doctor specialised in this area.

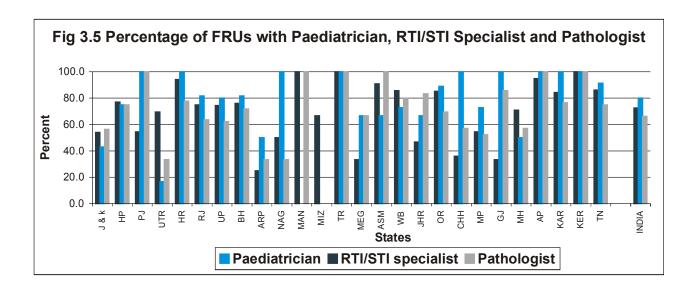
Their availability varies from 47 percent in Chhatisgarh to all FRUs in Kerala, Assam, Tripura, Mizoram and Nagaland (see Fig. 3.4). The situation is better in most of the smaller states in the northeastern region. Fifty-five to fifty-six percent of the FRUs in Uttar Pradesh, Himachal Pradesh and Bihar respectively have this specialist. The lowest was found in Chhattisgarh (47 %).



(b) Paediatrician, RTI/STI specialist and pathologist

The first referral unit is the ground level health care establishment for childcare and there is one paediatrician only in 73 percent of the total FRUs and this is unsatisfactory. Only in Kerala, Tripura and Manipur, all the FRUs have paediatrician. In Arunachal Pradesh, just four FRUs out of the total 18, and in Gujarat 33 FRUs out of the total 102, have doctors with this specialty. In

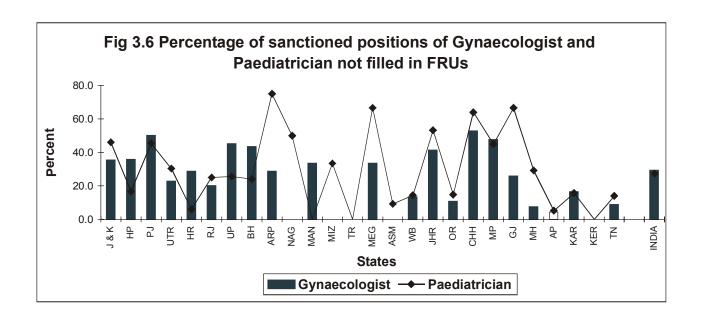
Chhattisgarh, Gujarat and Meghalaya less than 37 percent of the FRUs have paediatrician. <u>Fig 3.5</u> shows the graphical presentation of the situation of various specialists in the states.



At the all India level eighty percent of the FRUs have RTI/STI specialist. The worst situation in terms of availability of RTI/STI specialists is found in Uttaranchal with only 17 percent of the FRUs having this specialist, followed by Tamil Nadu with 43 percent and Madhya Pradesh and Arunachal Pradesh each with 50 percent. It is only in Punjab, Haryana, Nagaland, Manipur, Jharkhand, Chhattisgarh, Gujarat, Maharashtra and Andhra Pradesh that all of the FRUs reported as having RTI/STI specialist.

The availability of at least one pathologist is no better. Punjab, Manipur, Mizoram, Meghalaya, Maharashtra and Karnataka are in a better position with all FRUs having pathologist. But in Uttaranchal, Arunachal Pradesh and Nagaland only one-third of the FRUs have pathologist.

The FRUs are expected to have filled all the sanctioned posts particularly that of the gynaecologist (see Fig 3.6). But the above figure shows that 45 to 64 percent of the sanctioned positions of gynaecologists and paediatricians are vacant in Punjab, Chhattisgarh and Madhya Pradesh. Similarly, in Chhattisgarh, Gujarat, Jharkhand, Meghalaya, and Arunachal Pradesh more than half the sanctioned posts of paediatricians are lying vacant.



(c) Anaesthetist and general duty doctors

The situation of Anaesthetist is slightly better with six out of ten FRUs having at least one. But again it is far from satisfactory. All FRUs in Kerala and Tripura have Anaesthetist. But in Uttaranchal, Arunachal Pradesh, Nagaland, Chhattisgarh less than half of the FRUs have anaesthetist showing a worse situation.

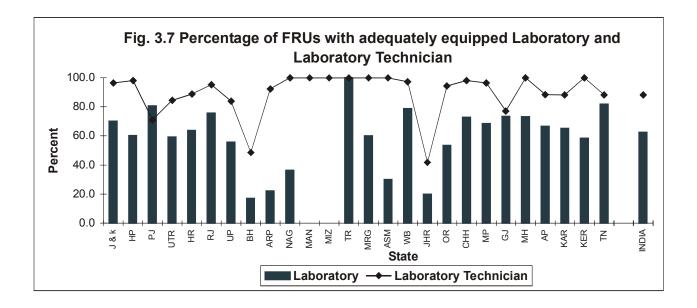
All the FRUs in Gujarat, Kerala, Manipur, Tripura and Meghalaya have general duty doctors. The situation of general duty doctors is satisfactory in all the states.

(d) Staff nurse, ANM and laboratory technician

All the FRUs in Nagaland, Manipur, Mizoram, Tripura, Meghalaya, West Bengal Kerala, Maharashtra, Karnataka, Andhra Pradesh and Tamil Nadu have at least one staff Nurse, and ANM among their staff, with few exceptions. The lowest proportion of FRUs having this category of staff is noted in Bihar with 86 percent of staff nurse and Punjab with 78 percent of the FRUs having ANM.

The availability of at least one ANM in the FRUs is satisfactory and 96 percent of the FRUs have them. All the FRUs in the states of West Bengal, Chhattisgarh, Gujarat, Karnataka and most of the north eastern states have at least one ANM.

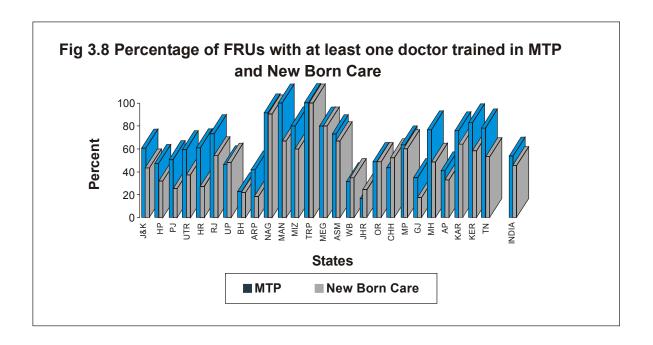
Eighty-eight percent of the total FRUs have laboratory technician (see Fig 3.7). The situation of availability of laboratory technician is better than availability of laboratory. All the FRUs in Maharashtra, Kerala and most of the north-eastern states have laboratory technician. In Bihar and Jharkhand, the proportion is very low (49 % and 42 % respectively).



3.4 Training of Medical Officers (Table F3)

The situation of in-service training of the Medical Officers during the three years preceding the date of survey is quite marginal in all the states except in Tripura. The percentage of FRUs with trained doctors in different aspects in remaining states covered in Table F3 shows a slightly better scenario in Nagaland, Mizoram, Meghalaya and Kerala.

All FRUs in Tripura have doctors trained in sterilization. Similarly in Tripura, all FRUs have trained doctors in MTP, RTI/STI, new born care and RCH services (also see Fig. 3.8). In the remaining states all the FRUs with trained doctors in sterilization is less than one-third.



The MTP and RCH service training received by doctors is slightly better, 54 percent to 62 percent of the FRUs received such training respectively. But less than 50 percent of the FRUs received training for RTI/STI and new born care at the all India level. The situation at the state level is not satisfactory in any training examined in Table F3.

3.5 Supply and Stock

I Supply of Tubal Rings and Selected Kits (Table F4)

The supply situation is very bleak. Among the supply of kits necessary for reproductive health care, four-fifths of the FRUs have all six sets of standard surgical kit, and a little more than two-third have IUD insertion kit and normal delivery (Labour room) kit. But all the kits examined here are available in all of the FRUs of Tripura. Tubal rings and RTI/STI diagnosis laboratory kit is available only in two out of ten FRUs in India.

(a) Tubal rings and standard surgical kit

Tubal rings are available in less than one-fifth of the FRUs in Himachal Pradesh, Punjab, Uttaranchal, Haryana, Bihar, West Bengal, Orissa, Gujarat, Maharashtra, Karnataka, and Tamil Nadu. Surprisingly, not a single supply of tubal ring is found in any FRU in Andhra Pradesh. The situation in most of the states except Tripura is very distressing.

At the all-India level, only 81 percent of the FRUs have all six sets of standard surgical kits. The variation in the availability of standard surgical kits is very high such that while in Bihar only 49 percent of FRUs reported to have this, but in Manipur, Tripura, Mizoram and Kerala all FRUs have this. In Gujarat, Haryana, Karnataka, Himachal Pradesh, Assam, West Bengal, Jharkhand, Orissa, Chhattisgarh, Punjab, Rajasthan, and Madhya Pradesh, at least three-fourths of the FRUs have all six sets of standard surgical kits.

(b) Emergency obstetric care drug kit and RTI/STI laboratory kit

The FRUs are expected to attend to all the emergency obstetric cases that come to the hospital directly or are referred to them by lower level HCEs. However, only 41 percent of the FRUs reported to having received the emergency obstetric care kit. Emergency obstetric care drug kits are available in all the three FRUs in Tripura. The RTI/STI laboratory diagnosis kit is available only in two out of ten FRUs at the all India level. It is the least available kit in all the states.

(c) IUD insertion kit, new born care equipment kit, labour room (normal delivery) kit

At least 73 percent of the FRUs in Himachal Pradesh, Orissa, Chhattisgarh, Madhya Pradesh, Gujarat, Haryana, Karnataka, Kerala, Rajasthan, Tamil Nadu and West Bengal have IUD insertion kit. Bihar ranks at the lowest having only 42 FRUs with IUD kits.

The new born care equipment kit has not been received by most of the FRUs, only 40 percent of the total FRUs reported to having received it. Among the states, it varies from 17 percent in Bihar to 70 percent in Karnataka, 83 percent in Kerala, and hundred percent in Tripura. In Haryana, four out of ten of the FRUs and in Maharashtra and Punjab, around three out of ten of the FRUs have this. The situation in most of the states is far from satisfactory.

Labour room or normal delivery kit has been received by 74 percent of the FRUs, which includes hundred percent FRUs in Tripura and Karnataka and a little over 90 percent of FRUs in Chhattisgarh, Kerala and Tamil Nadu. The lowest level is noted in Bihar (46%). Less than 60 percent of the FRUs received Labour room kits in Punjab, Uttaranchal, Uttar Pradesh, Arunachal Pradesh, Nagaland, Meghalaya, Andhra Pradesh and Bihar.

II Stock of Selected Items (Table F5)

Seventy to seventy nine percent of the total FRUs had some stock of Nirodh, oral pill cycles, IUD, DPT, OPV, TT, BCG and measles vaccine on the day of survey. Fifty-five percent of the FRUs had DT. The status of stock of all these in Bihar is very poor.

(a) Contraceptives

Among the states, the range of variation in the FRUs having some stock of Nirodh is from 37 percent in Assam to hundred percent in Manipur, Tripura and Kerala. The states with more than 80 percent of the FRUs having Nirodh are Haryana, Himachal Pradesh, Manipur, Tripura, Jharkhand, Madhya Pradesh, Chhattisgarh Karnataka, Kerala, Rajasthan, Tamil Nadu, Meghalaya and West Bengal. At the other end, less than 50 percent of the FRUs in Punjab, Nagaland, Mizoram and Assam have stock. The situation of oral pills and IUD availability is more or less the same as that of Nirodh in the states.

(b) IFA (large) tablets, Vitamin A solution and ORS packets

On the day of survey only 62 percent of the FRUs had IFA (large) tablets in stock. In Tripura and Meghalaya almost all the FRUs had stock though it was only 41 percent in Bihar.

Some stock of Vitamin A solution is found only in 55 percent of the FRUs. Again Tripura and Meghalaya stand first with all the FRUs having this, and Tamil Nadu at the other end with only 8 percent of FRUs having Vitamin A.

Oral Rehydration Salt (ORS) is essential for fluid replacement in children suffering from diarrhoea to avoid dehydration. ORS is available in packets and the FRUs are expected to stock them for emergency. This was available in 72 percent of the hospitals. While all the FRUs in Tripura had ORS packets, only 44 percent of the FRUs in Uttaranchal had them.

(c) Vaccines

At least 70 percent of the FRUs have all the vaccines except DT, which is available only in about 56 percent of the FRUs. More than 90 percent of the FRUs in Jammu & Kashmir, all states of northeast India except Assam and Arunachal Pradesh had some stock of DPT vaccine. The situation of availability of the other vaccines at the state level also is not too bad except in the case of DT. On the whole, the situation prevailing in Bihar and also in Maharashtra and Andhra

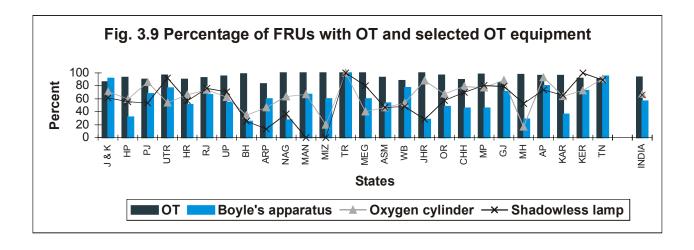
Pradesh is unsatisfactory, where none of the vaccines are available even in 50 percent of the total FRUs in the states.

3.6 Equipment (F6)

As in the case of district hospitals, the equipment considered here include those that are expected to be in the operation theatre, X-ray and ECG machine, selected cold chain equipment and others. Boyle's apparatus is available in 56 percent of the FRUs. Only 67 percent of the FRUs have oxygen cylinder. Shadowless lamp is available in only 66 percent of the cases. High-pressure sterilizer (both vertical and horizontal) is available in 34 percent of all FRUs, while cardiac monitor is available only in a miniscule proportion (17%) and ventilator in 21 percent. OT fumigation apparatus necessary for disinfecting the OT is available in 43 percent of FRUs and while X-ray machine is available in 86 percent, ECG machine is available in only 78 percent. Cold chain equipment, namely ice lined freezer, deep freezer and refrigerator are available in 67, 60 and 48 percent of FRUs respectively.

(a) Equipment in the operation theatre

Availability of Boyle's apparatus in the OT varies from 25 percent in Bihar to hundred percent in Tripura. More than 89 percent of the FRUs in Tamil Nadu and Tripura have oxygen cylinder and shadowless lamp available in the FRUs. None of the FRUs in Manipur and Mizoram have shadowless lamp, high pressure sterilizer and cardiac monitor. However, in Assam and Arunachal Pradesh, only 13-14 percent of the FRUs which is the lowest in India have a pressure sterilizer. The highest, 60 percent is found in Meghalaya and West Bengal. Cardiac monitor and ventilator are almost hardly available in most of the states. Availability of OT equipment in relation to availability of OT is given in Fig. 3.9.

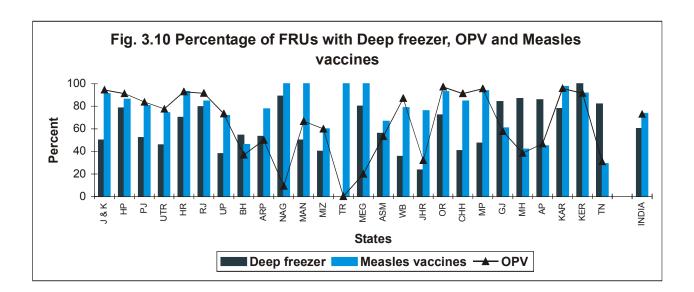


(b) X-ray and ECG machine

All the FRUs in Arunachal Pradesh, Mizoram, Tripura and Kerala have X-ray machines whereas only 52 percent of the FRUs in Bihar have X-ray machine. Most of the FRUs in smaller states also have this machine. Only 78 percent of the total FRUs reported having ECG machine. State-wise variation is more in this case as it varies from none in Meghalaya to hundred percent FRUs in Kerala, Uttaranchal, Nagaland, Mizoram and Tripura.

(c) Cold chain equipment

Forty-eight to sixty-six percent of FRUs in India have all the cold chain equipment. Among the states, less than 45 percent of the FRUs reported the availability of ice-lined freezer only in Jammu & Kashmir, Tripura, West Bengal, Jharkhand and Chhattisgarh. The situation is the same with respect to deep freezer except that in the low category, Uttar Pradesh also should be included. Refrigerators are available only in the case of 48 percent of the FRUs. This includes the hundred percent FRUs with refrigerators in Manipur and Mizoram. A deep freezer is used specifically to store OPV and measles vaccines besides making ice packs. Fig 3.10 shows the availability of deep freezer in relation to the availability of OPV and measles vaccine.



3.7 Adequately Equipped FRUs and Those Used as Referral (Table F7)

As in the case of district hospitals, if a FRU has at least 60 percent of the critical inputs that FRU is considered adequately equipped in that particular component. Table F7 shows that the

situation of infrastructure is much better than that of other components with 76 percent being adequately equipped. This includes all FRUs in Tripura and more than 91 percent FRUs in Karnataka, Kerala and Tamil Nadu. However, only 26 percent of the FRUs in Bihar (lowest) are adequately equipped with infrastructure.

The proportion of the total FRUs adequately equipped in staff is only 37 percent. All FRUs in Tripura are adequately equipped in staff, infrastructure, supply and equipment. The FRUs adequately equipped with staff and supply is only 37 percent and 32 percent respectively in India, which is very discouraging. Sixty-one percent of the FRUs in India have adequate equipped with equipment.

With reference to FRUs being adequately equipped, the situation in Bihar is very bad, while it is very good in Tripura.

At the all India level, only four FRUs out of 10 have attended to referred cases during the three months preceding the survey. All the three FRUs in Manipur and Tripura, and 50 percent or more in Arunachal Pradesh, Nagaland, Mizoram, Assam, West Bengal, Jharkhand, Maharashtra, Kerala, and Tamil Nadu reported to have attended to referred cases. In the remaining states, the proportion is much less than 50 percent.

Table F1: Status of infrastructure in First Referral Units in the states of India, Facility Survey, 2003

								Perc	entage I	FRUs ha	ving					
Sr. No	State.	No. of FRUs	Water	Facility Other ¹	Over head Tank& pump exist	Electrici ty in All part	Genera tor Functio nal ²	Telephone	Vehicle Functio nal ³	Labora tory	ОТ	OT For gynaec, purpose ⁴	Separat e Aseptic labour room	Gynic OPD facility	RTI/S TI OPD facilit	Linka ge with distric t blood
1	J & K	57	89.5	10.5	71.9	87.7	80.0	77.2	35.1	70.2	86.0	26.5	31.6	84.2	29.8	bank 14.0
2.	Himachal Pradesh	58	98.3	1.8	65.5	93.1	66.7	87.9	58.6	60.3	93.1	24.1	60.3	60.3	32.8	20.7
3	Punjab	31	32.3	67.7	90.3	87.1	84.0	77.4	35.5	80.6	90.3	57.1	38.7	51.6	45.2	58.1
4	Uttaranchal	27	66.7	32.3	70.4	100.0	96.0	96.3	81.5	59.3	96.3	26.9	29.6	77.8	25.9	33.3
5	Haryana	72.	70.8	29.2	76.4	94.4	93.1	91.7	55.6	63.9	90.3	13.8	47.2	72.2	47.2	48.6
6	Rajasthan	132	65.2	34.8	74.6	96.2	93.3	62.9	55.3	75.8	92.4	38.5	50.0	61.4	43.2	31.8
7	Uttar Pradesh	352	18.8	81.2	87.2	96.3	92.7	46.0	75.0	55.7	94.9	43.1	31.5	54.0	26.4	28.4
8	Bihar	76	34.2	65.8	63.2	68.4	75.0	46.1	26.3	17.1	98.7	41.3	36.8	39.5	27.6	10.5
9	Arunachal Pradesh	18	94.4	5.6	38.9	83.3	0.0	72.2	33.3	22.2	83.3	26.7	44.4	38.9	38.9	5.6
10	Nagaland	11	72.7	27.3	27.3	81.8	85.7	63.6	45.5	36.4	100.0	27.3	63.6	72.7	63.6	45.5
11	Manipur	3	66.7	32.3	33.3	100.0	100.0	66.7	33.3	0.0	100.0	0.0	66.7	100.0	66.7	33.3
12	Mizoram	5	40.0	60.0	40.0	80.0	75.0	100.0	20.0	0.0	100.0	20.0	40.0	100.0	80.0	40.0
13	Tripura	3	100.0	0.0	100.0	100.0	66.7	100.0	100.0	100.0	100.0	0.0	100.0	100.0	100.0	100.0
14	Meghalaya	5	60.0	40.0	40.0	80.0	50.0	60.0	60.0	60.0	100.0	40.0	80.0	60.0	80.0	0.0
15	Assam	30	63.3	36.7	80.0	93.3	64.7	53.3	40.0	30.0	93.3	42.9	56.7	40.0	26.7	30.0
16	West Bengal	85	62.4	37.6	88.2	96.5	95.7	92.9	41.2	78.8	88.2	17.3	14.1	36.5	17.6	22.4
17	Jharkhand	25	28.0	72.0	44.0	72.0	68.8	64.0	44.0	20.0	100.0	40.0	56.0	48.0	20.0	8.0
18	Orissa	114	48.2	51.8	69.3	93.0	69.5	78.1	61.4	53.5	96.5	18.2	21.1	67.5	7.0	26.3
19	Chhatisgarh	59	33.9	66.1	74.6	96.6	84.6	74.6	50.8	72.9	89.8	15.1	13.6	33.9	10.2	23.7
20	Madhya Pradesh	165	41.8	58.2	78.2	96.4	92.1	72.7	48.5	68.5	98.2	35.8	18.2	56.4	23.6	24.2
21	Gujarat	102	77.5	22.5	86.3	97.1	87.1	98.0	58.8	73.5	85.3	17.2	51.0	33.3	4.9	18.6
22	Maharashtra	86	58.1	41.9	94.2	97.7	88.3	97.7	67.4	73.3	97.7	7.1	51.2	12.8	11.6	45.3
23	Andhra Pradesh	120	28.3	71.7	91.7	97.5	94.1	87.5	37.5	66.7	95.8	44.3	25.8	64.2	27.5	20.8
24	Karnataka	124	57.3	42.7	88.7	97.6	68.1	97.6	62.1	65.3	96.0	2.5	33.9	73.4	13.7	27.4
25	Kerala	12	83.3	16.7	100.0	100.0	70.0	100.0	83.3	58.3	91.7	45.5	8.3	50.0	33.3	33.3
26	Tamil Nadu	110	51.8	48.2	96.4	100.0	97.3	88.2	70.0	81.8	90.9	35.0	12.7	44.5	27.3	29.1
	India	1882	49.0	51.0	80.7	94.3	87.0	74.8	56.8	62.6	93.7	29.8	33.3	53.9	24.9	27.2

¹ Tap water is not included.

² Taken from No. of Generator available.

³ Includes Ambulance, Jeep, and Car functional on the day of survey

⁴ From OT available.

Table F2: Staff position in First Referral Units in the states of India, Facility Survey, 2003

					Pe	rcentage of	FRUs having	g at least one	post filled			
Sl. No	State	No. of FRUs	Obstetrician/ Gynaecologist	Paediatrician **	RTI/STI specialist*	Patholo- gist**	Anaesthe tist **		duty doctor **	Staff nurse**	ANM**	LT **
								Male	Female			
1	Jammu & Kashmir	57	64.7	54.0	42.9	56.3	61.2	100.0	96.1	96.3	94.2	96.4
2	Himachal Pradesh	58	56.3	76.9	75.0	75.0	57.1	90.2	91.7	91.1	86.7	98.2
3	Punjab	31	50.0	54.5	100.0	100.0	83.3	78.3	60.0	82.6	77.8	71.0
4	Uttaranchal	27	77.3	69.6	16.7	33.3	46.7	77.3	100.0	95.8	95.0	84.6
5	Haryana	72.	71.4	94.1	100.0	77.8	91.7	95.0	87.5	88.9	97.8	88.9
6	Rajasthan	132	80.0	75.0	81.8	63.6	80.0	97.5	89.1	85.7	94.7	95.3
7	Uttar Pradesh	352	54.9	74.4	80.0	62.2	65.0	88.0	77.2	88.1	98.7	83.9
8	Bihar	76	56.6	76.0	81.8	71.9	81.5	93.2	72.4	86.3	93.9	48.6
9	Arunachal Pradesh	18	71.4	25.0	50.0	33.3	40.0	91.7	100.0	88.2	87.5	92.3
10	Nagaland	11	100.0	50.0	100.0	33.3	33.3	90.9	100.0	100.0	100.0	100.0
11	Manipur	3	66.7	100.0	0.0	100.0	50.0	100.0	100.0	100.0	0.0	100.0
12	Mizoram	5	100.0	66.7	0.0	0.0	0.0	66.7	75.0	100.0	100.0	100.0
13	Tripura	3	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	5	66.7	33.3	66.7	66.7	66.7	100.0	100.0	100.0	100.0	100.0
15	Assam	30	100.0	90.9	66.7	100.0	91.7	92.3	95.2	96.7	96.0	100.0
16	West Bengal	85	86.7	85.7	72.7	80.0	90.0	100.0	94.3	100.0	97.9	97.3
17	Jharkhand	25	58.8	46.7	66.7	83.3	66.7	95.5	70.6	91.7	100.0	41.7
18	Orissa	114	89.2	85.3	88.9	69.6	74.1	98.0	85.7	96.1	96.3	94.4
19	Chhatisgarh	59	47.2	36.0	100.0	57.1	28.6	96.2	90.9	96.3	95.2	98.2
20	Madhya Pradesh	165	51.9	54.4	72.7	52.4	32.9	96.1	92.0	96.8	100	96.4
21	Gujarat	102	74.3	33.3	100.0	85.7	93.3	100.0	100.0	95.0	76.0	77.2
22	Maharashtra	86	92.6	70.8	50.0	57.1	77.3	98.5	100.0	100.0	100.0	100.0
23	Andhra Pradesh	120	95.7	94.9	100.0	100.0	92.0	94.6	85.0	100.0	94.0	88.5
24	Karnataka	124	83.5	84.3	100.0	76.5	64.4	94.0	83.0	98.3	98.1	88.3
25	Kerala	12	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
26	Tamil Nadu	110	91.1	86.2	91.3	75.0	92.9	89.3	88.6	100.0	95.6	88.2
	India	1882	70.5	72.5	80.0	66.1	68.3	94.2	88.0	93.9	96.1	88.2

^{**} All the figures are taken from Number of FRUs having sanctioned posts. LT: Laboratory Technician.

Table F3 Training status of Medical Officers in First Referral Units in the states of India, Facility Survey, 2003

SI.		No. of	Percentage of F	RUs with at l	least one docto three year in	r received training d	luring last
No	state	FRUs	Sterilization ¹	MTP	RTI/STI	New born care	RCH
1	Jammu & Kashmir	57	10.5	61.4	26.3	43.9	71.9
2	Himachal Pradesh	58	5.2	53.4	44.8	34.5	67.2
3	Punjab	31	17.9	50.0	32.1	25.0	35.7
4	Uttaranchal	27	7.4	59.3	37.0	37.0	85.2
5	Haryana	72	12.7	60.6	46.5	26.8	69.0
6	Rajasthan	132	29.5	72.7	54.5	53.8	63.6
7	Uttar Pradesh	352	19.0	45.7	53.2	47.7	59.2
8	Bihar	76	3.9	22.4	21.1	21.1	59.2
9	Arunachal Pradesh	18	5.9	41.2	23.5	17.6	58.8
10	Nagaland	11	27.3	90.9	90.9	90.9	90.9
11	Manipur	3	33.3	100.0	66.7	66.7	66.7
12	Mizoram	5	0.0	80.0	60.0	60.0	60.0
13	Tripura	3	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	5	20.0	80.0	80.0	80.0	100.0
15	Assam	30	33.3	73.3	63.3	66.7	53.3
16	West Bengal	85	4.8	31.0	25.0	34.5	26.2
17	Jharkhand	25	4.0	16.0	20.0	24.0	84.0
18	Orissa	114	17.5	48.2	42.1	48.2	90.4
19	Chhatisgarh	59	8.6	43.1	58.6	51.7	62.1
20	Madhya Pradesh	165	7.3	63.0	86.7	59.4	77.0
21	Gujarat	102	2.0	34.3	27.5	16.7	44.1
22	Maharashtra	86	14.6	76.8	61.0	48.8	70.7
23	Andhra Pradesh	120	2.6	41.0	29.9	33.3	30.8
24	Karnataka	124	15.4	75.6	49.6	65.0	76.4
25	Kerala	12	33.3	83.3	75.0	58.3	83.3
26	Tamil Nadu	110	23.9	78.9	52.3	53.2	45.0
	India	1882	14.0	54.4	48.4	45.0	61.6

¹ Sterilization included NSV, Mini lap, and tubectomy from total number of health personal post filled (Medical Officer).

Table F4 Supply of Tubal Ring and Kits in First Referral Units in the states of India, Facility Survey, 2003

					Percentage o	of FRUs havin	g received		
Sl. No	State	No. of FRUs	Tubal ring (stock)	Std.sur.kit ¹	EmOC kit ²	RTI/STI kit	IUD kit G	NBCE kit ³	Kit I ⁴
1	Jammu & Kashmir	57	24.6	70.2	31.6	17.5	61.4	22.8	68.4
2	Himachal Pradesh	58	12.1	82.8	37.9	25.9	79.3	34.5	82.8
3	Punjab	31	12.9	80.6	38.7	32.3	64.5	35.5	58.1
4	Uttaranchal	27	18.5	63.0	7.4	7.4	55.6	29.6	55.6
5	Haryana	72	1.4	91.7	48.6	30.6	81.9	36.1	84.7
6	Rajasthan	132	41.7	87.1	52.3	40.2	81.1	42.4	80.3
7	Utter Pradesh	352	21.6	66.2	29.8	15.6	57.4	28.7	57.1
8	Bihar	76	11.8	48.7	15.8	6.6	42.1	17.1	46.1
9	Arunachal Pradesh	18	27.8	55.6	5.6	5.6	50.0	27.8	55.6
10	Nagaland	11	81.8	63.6	45.5	54.5	45.5	54.5	54.5
11	Manipur	3	33.3	100.0	33.3	33.3	66.7	66.7	66.7
12	Mizoram	5	40.0	100.0	40.0	20.0	40.0	60.0	80.0
13	Tripura	3	100.0	100.0	100.0	66.7	100.0	100.0	100.0
14	Meghalaya	5	60.0	60.0	60.0	60.0	40.0	60.0	40.0
15	Assam	30	60.0	80.0	36.7	30.0	70.0	43.3	80.0
16	West bengal	85	5.9	89.4	23.5	10.6	77.6	37.6	81.2
17	Jharkhand	25	28.0	76.0	8.0	4.0	64.0	12.0	76.0
18	Orissa	114	6.1	92.1	52.6	19.3	84.2	50.9	88.6
19	Chhatisgarh	59	23.7	94.9	59.3	27.1	94.9	47.5	94.9
20	Madhya Pradesh	165	34.5	93.5	57.0	28.5	90.3	67.3	88.5
21	Gujarat	102	13.7	81.4	63.7	21.6	78.4	39.2	79.4
22	Maharashtra	86	5.8	68.6	30.2	30.2	61.6	33.7	62.8
23	Andhra Pradesh	120	0.0	72.5	28.3	14.2	57.5	25.0	52.5
24	Karnataka	124	6.5	99.2	84.7	28.2	96.0	70.2	99.2
25	Kerala	12	50.0	100.0	83.3	33.3	100.0	83.3	91.7
26	Tamil Nadu	110	2.7	96.4	11.8	20.0	90.9	45.5	92.7
	India	1882	18.0	80.6	40.6	22.1	73.1	40.4	74.3

A set of six standard surgical kit.
 Kit with emergency obstetric care drugs.
 Kit for new born care equipment
 Normal delivery kit

Table F5 Stock of selected items of health care in First Referral Units in the states of India, Facility Survey, 2003

		No. of				Perce	ntage of FI	RUs having	some stoc	k on the da	y of surve	ey .		
Sl. No	State	FRUs	Nirodh	OP	IUD	IFA (large)	Vit. A	ORS	DPT	OPV	TT	BCG	Measles	DT
1	Jammu & Kashmir	57	54.4	82.5	96.5	87.7	80.7	77.2	93.0	94.7	91.2	77.2	91.2	86.0
2	Himachal Pradesh	58	93.1	84.5	86.2	75.9	79.3	65.5	86.2	91.4	89.7	87.9	86.2	74.1
3	Punjab	31	48.4	48.4	77.4	74.2	71.0	71.0	77.4	83.9	87.1	80.6	80.6	77.4
4	Uttaranchal	27	63.0	55.6	55.6	51.9	48.1	44.4	74.1	77.8	85.2	66.7	74.1	70.4
5	Haryana	72	83.3	75.0	80.6	70.8	69.4	80.6	84.7	93.1	95.8	79.2	93.1	81.9
6	Rajasthan	132	92.4	84.8	90.2	72.0	75.0	76.5	93.2	91.7	90.2	80.3	84.8	66.7
7	Uttar Pradesh	352	58.2	56.5	59.4	47.7	40.3	48.0	71.6	73.3	72.4	69.0	71.9	34.4
8	Bihar	76	55.3	43.4	52.6	40.8	38.2	48.7	42.1	36.8	43.4	47.4	46.1	31.6
9	Arunachal Pradesh	18	72.2	66.7	77.8	83.3	77.8	72.2	50.0	50.0	77.8	66.7	77.8	50.0
10	Nagaland	11	45.5	54.5	90.9	81.8	100.0	90.9	81.8	9.1	100.0	90.9	100.0	100.0
11	Manipur	3	100.0	100.0	66.7	66.7	100.0	66.7	100.0	66.7	100.0	100.0	100.0	100.0
12	Mizoram	5	20.0	40.0	80.0	80.0	60.0	80.0	100.0	60.0	100.0	100.0	60.0	60.0
13	Tripura	3	100.0	0.0	100.0	100.0	100.0	100.0	100.0	0.0	100.0	100.0	100.0	100.0
14	Meghalaya	5	80.0	40.0	100.0	100.0	100.0	80.0	100.0	20.0	80.0	60.0	100.0	80.0
15	Assam	30	36.7	33.3	56.7	36.7	53.3	46.7	36.7	53.3	70.0	63.3	66.7	66.7
16	West Bengal	85	80.0	77.6	70.6	47.1	50.6	55.3	84.7	87.1	91.8	78.8	78.8	62.4
17	Jharkhand	25	80.0	40.0	64.0	56.0	40.0	56.0	64.0	32.0	72.0	72.0	76.0	68.0
18	Orissa	114	76.3	75.4	71.1	69.3	76.3	90.4	86.8	97.4	94.7	93.9	93.0	83.3
19	Chhatisgarh	59	84.7	83.1	81.4	54.2	64.4	79.7	86.4	91.5	86.4	91.5	84.7	74.6
20	Madhya Pradesh	165	87.3	84.2	83.6	55.8	58.8	81.8	89.7	95.8	95.8	86.7	93.9	73.9
21	Gujarat	102	78.4	69.6	67.6	73.5	52.9	87.3	59.8	57.8	62.7	48.0	60.8	35.3
22	Maharashtra	86	48.8	50.0	53.5	57.0	55.8	82.6	41.9	38.4	47.7	38.4	41.9	34.9
23	Andhra Pradesh	120	52.5	54.2	55.8	47.5	34.2	67.5	45.8	46.7	45.8	43.3	45.0	37.5
24	Karnataka	124	96.0	96.8	96.0	84.7	75.0	91.9	96.0	96.0	96.8	94.4	97.6	83.9
25	Kerala	12	100.0	100.0	100.0	83.3	91.7	100.0	100.0	91.7	100.0	100.0	91.7	100.0
26	Tamil Nadu	110	90.9	81.8	90.9	81.8	8.2	95.5	29.1	30.9	80.0	28.2	29.1	8.2
	India	1882	72.8	69.6	73.4	62.1	54.9	71.6	72.3	73.2	78.9	70.0	73.6	55.6

Table F 6 Availability of selected equipment in First Referral Units in the states of India, Facility Survey, 2003

						Percenta	ge of FRUs havi	ng the followi	ng in their OT		
SI No	State	No. of FRUs	Number of FRUs having OT	Boyle"s Apparatu s	Oxygen cylinder	Shadow less lamp ¹	High Pressure Sterilizer**	Cardiac monitor	Ventilator	OT care/f umigation	Hydralic table
1	Jammu & Kashmir	57	49	91.8	71.4	61.2	36.7	53.1	38.8	85.7	85.7
2	Himachal Pradesh	58	54	31.5	59.3	55.6	27.8	9.3	24.1	41.6	59.3
3	Punjab	31	28	67.9	85.7	53.6	35.7	60.7	32.1	32.1	85.7
4	Uttaranchal	27	26	76.9	53.8	92.3	34.6	11.5	7.7	26.9	92.3
5	Haryana	72	65	50.8	66.2	56.9	32.3	15.4	13.8	38.5	60.0
6	Rajasthan	132	122	66.4	73.8	76.2	33.6	21.3	22.1	66.4	69.7
7	Uttar Pradesh	352	334	54.5	62.6	71.0	43.1	10.5	17.7	18.6	87.4
8	Bihar	76	75	25.3	34.7	25.3	17.3	1.3	25.3	14.7	44.0
9	Arunachal Pradesh	18	15	60.0	46.7	13.3	13.3	13.3	20.0	33.3	33.3
10	Nagaland	11	11	27.3	63.6	36.4	0.0	9.1	27.3	45.5	45.5
11	Manipur	3	3	66.7	66.7	0.0	0.0	0.0	66.7	0.0	0.0
12	Mizoram	5	5	60.0	20.0	0.0	0.0	0.0	40.0	20.0	80.0
13	Tripura	3	3	100.0	100.0	100.0	0.0	100.0	100.0	100.0	0.0
14	Meghalaya	5	5	60.0	40.0	80.0	60.0	40.0	80.0	20.0	40.0
15	Assam	30	28	53.6	46.4	46.4	14.3	14.3	25.0	35.7	64.3
16	West Bengal	85	75	77.3	53.3	48.0	60.0	38.7	46.7	20.0	61.3
17	Jharkhand	25	25	28.0	88.0	28.0	40.0	8.0	36.0	12.0	32.0
18	Orissa	114	110	48.2	67.3	57.3	20.9	18.2	11.8	8.2	42.7
19	Chhatisgarh	59	53	45.3	79.2	69.8	20.8	15.1	9.4	22.6	67.9
20	Madhya Pradesh	165	162	45.7	77.2	80.9	24.1	8.0	17.9	25.3	80.2
21	Gujarat	102	87	71.3	88.5	79.3	37.9	28.7	23.0	69.0	81.6
22	Maharashtra	86	84	28.6	16.7	52.4	19.0	3.6	9.5	69.0	34.5
23	Andhra Pradesh	120	115	80.0	93.0	73.9	53.9	33.9	27.8	77.4	82.6
24	Karnataka	124	119	36.1	63.9	65.5	46.2	10.1	19.3	87.4	69.7
25	Kerala	12	11	72.7	72.7	100.0	45.5	45.5	27.3	9.1	72.7
26	Tamil Nadu	110	100	95.0	91.0	89.0	28.0	17.0	15.0	78.0	92.0
	India	1882	1764	56.3	67.1	65.8	34.4	17.5	21.1	42.8	70.9

Conted.....

 ^{**} High Pressure sterilizer includes both Horizontal and Vertical
 Shadowless lamp prestoleite for minor OT

Table F6 Availability of selected equipment in First Referral Units in the states of India, Facility Survey, 2003

SI	_	Number of	Number of FRUs	Percentag FRUs having (fo			ntage of FRU oment workin	
No	State	FRUs	having OT	X-ray machine*	ECG Machine*	Ice line Frezer ²	Deep Freezer ²	Refrigerator ²
1	Jammu & Kashmir	57	49	95.8	93.6	44.0	50.0	33.3
2	Himachal pradesh	58	54	91.5	77.8	81.1	78.6	72.7
3	Punjab	31	28	92.0	90.9	52.4	52.2	31.8
4	Uttaranchal	27	26	91.3	100.0	65.2	45.8	66.7
5	Haryana	72	65	81.4	74.3	85.1	70.1	59.4
6	Rajasthan	132	122	92.2	82.7	84.4	79.7	62.0
7	Uttar Pradesh	352	334	80.2	75.3	59.4	37.9	43.7
8	Bihar	76	75	52.1	62.5	50.0	54.3	22.2
9	Arunachal Pradesh	18	15	100.0	50.0	61.5	53.3	50.0
10	Nagaland	11	11	66.7	100.0	90.0	88.9	90.0
11	Manipur	3	3	66.7	0.0	50.0	50.0	100.0
12	Mizoram	5	5	100.0	100.0	50.0	40.0	100.0
13	Tripura	3	3	100.0	100.0	33.3	0.0	0.0
14	Meghalaya	5	5	40.0	.0	75.0	80.0	66.7
15	Assam	30	28	66.7	71.4	72.0	56.0	50.0
16	West Bengal	85	75	94.1	96.0	34.2	35.4	23.0
17	Jharkhand	25	25	68.8	60.0	20.0	23.5	60.0
18	Orissa	114	110	76.4	48.4	70.8	72.3	33.9
19	Chhatisgarh	59	53	76.1	62.9	40.7	40.7	64.3
20	Madhya Pradesh	165	162	85.4	60.4	51.9	47.2	63.6
21	Gujarat	102	87	88.0	68.8	84.9	84.1	59.1
22	Maharashtra	86	84	80.6	77.8	88.1	86.8	72.3
23	Andhra Pradesh	120	115	93.5	96.3	93.5	85.7	27.8
24	Karnataka	124	119	94.2	77.6	79.7	77.9	67.3
25	Kerala	12	11	100.0	100.0	100.0	100.0	8.3
26	Tamil Nadu	110	100	98.8	82.6	83.9	82.1	28.6
	India	1882	1764	85.5	78.1	66.7	60.2	48.5

^{*} Functional from the equipment available in OT2 Working condition from available

Table F7 Percentage of adequately equipped First Referral Units and those used as referral in the states of India, Facility Survey 2003

Sl. No	State	No. of FRUs	Percentage ad	percen	ıt)		Percent of FRUs utilized as referral ⁴
110		rkus	Infrastructure@	Staff ¹	Supply ²	Equipment ³	utilized as referral
1	Jammu & Kashmir	57	78.9	49.1	24.6	80.7	27.3
2	Himachal Pradesh	58	82.8	12.1	29.3	46.6	40.0
3	Punjab	31	77.4	16.1	32.3	71.0	33.3
4	Uttaranchal	27	81.5	51.9	14.8	77.8	33.3
5	Haryana	72.	80.6	19.4	36.1	58.3	30.8
6	Rajasthan	132	75.8	42.4	44.7	65.2	41.4
7	Uttar Pradesh	352	72.7	49.4	21.0	65.1	26.9
8	Bihar	76	26.3	30.3	7.9	14.5	33.3
9	Arunachal Pradesh	18	50.0	11.1	11.1	38.9	50.0
10	Nagaland	11	72.7	9.1	45.5	27.3	50.0
11	Manipur	3	33.3	33.3	33.3	33.3	100.0
12	Mizoram	5	80.0	40.0	40.0	20.0	50.0
13	Tripura	3	100.0	100.0	100.0	100.0	100.0
14	Meghalaya	5	40.0	40.0	40.0	20.0	50.0
15	Assam	30	60.0	40.0	40.0	40.0	60.0
16	West Bengal	85	84.7	28.2	17.6	50.6	30.0
17	Jharkhand	25	40.0	28.0	0.0	28.0	85.7
18	Orissa	114	66.7	69.3	41.2	58.8	41.5
19	Chhatisgarh	59	66.1	10.2	35.6	61.0	12.5
20	Madhya Pradesh	165	73.9	27.9	40.0	65.5	34.2
21	Gujarat	102	84.3	15.7	36.3	68.6	31.3
22	Maharashtra	86	95.3	20.9	26.7	29.1	50.0
23	Andhra Pradesh	120	78.3	28.3	20.0	82.5	36.0
24	Karnataka	124	92.7	42.7	71.8	65.3	21.4
25	Kerala	12	91.7	66.7	83.3	75.0	71.4
26	Tamil Nadu	110	91.8	54.5	23.6	88.2	55.0
	India	1882	75.8	37.0	31.6	61.3	39.4

[@] Overhead tank and pump facility, electricity in all parts of the hospital, availability of generator, telephone, functional vehicle, laboratory, operation theatre, separate aseptic labour room

^(0.0) No any facility at least 60 equipped.

^{1.} Includes obstetrician/gynaecologist, paediatrician and anaesthetist.

Includes tubal ring, set of standard surgical kits, emergency obstetric care kit, new born care kit, RTI/STI
kits and delivery kit I.

^{3.} Includes Boyle's apparatus, shadowless lamp and oxygen cylinder.

^{4.} Referred cases are utilised are taken from those FRUs have conducted delivery.

CHAPTER IV

COMMUNITY HEALTH CENTRE

4.1 Introduction

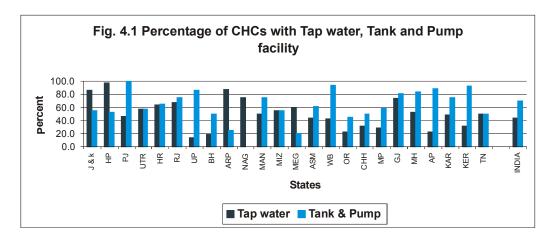
Though not designated as such, community health centres are also first referral units where referral cases from lower level health care establishments are sent. The CHCs have to take care of these cases besides their usual health care activities. While there are only two CHCs in Tamil Nadu, there are 256 CHCs in Uttar Pradesh. There is no CHC level facility in West Bengal and Maharashtra. However, the Block Primary Health Centre (BPHC) in West Bengal and Rural Hospital (RH) in Maharashtra have been treated as CHCs in this report. This report, thus, deals with a total of 1625 CHCs which include 83 BPHCs of West Bengal and 187 RHs from Maharashtra.

4.2 Infrastructure (Table C1)

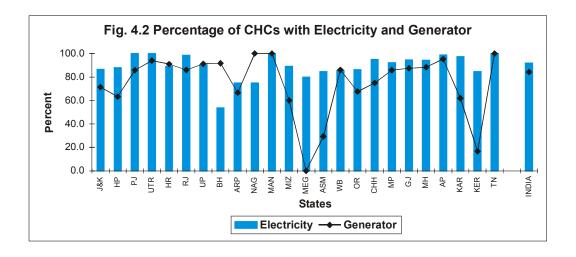
In general, most of the CHCs (92 %) have electricity in all parts of the health centre. Operation theatre and aseptic labour room facilities are available in 88 and 31 percent of the CHCs in that order. Around 62 percent of the CHCs have a telephone, and 57 percent have functional vehicle. While 56 percent of the CHCs got water from other sources, 44 percent got it from tap, thus nearly all CHCs had water facility from one source or the other. But storage facility in the form of an overhead tank and pump facility is available only in 70 percent of the CHCs.

(a) Water and electricity

A higher proportion of CHCs (86 to 98 percent) got water from taps in Jammu & Kashmir, Himachal Pradesh and Arunachal Pradesh. The availability of tank and pump facility varied from none in Nagaland to hundred percent in Punjab. Besides Orissa, the states with less than 50 percent (see Fig. 4.1) of the CHCs with tank and pump facility are Chhattisgarh and Bihar.



Though there are only very few CHCs without electricity, electricity in all parts of the hospitals is noted only in 92 percent of the 1625 CHCs. Only 54 percent of CHCs in Bihar have electricity in all parts of the health care establishment. The standby facility in the form of generator is available only in 84 percent of the cases in India. This varies from none in Meghalaya to hundred percent in Tamil Nadu, Nagaland and Manipur. In Kerala only 17 percent of the CHCs have this facility. In Andhra Pradesh and Manipur, all CHCs have electricity as well as a generator (see Fig.4.2).



(b) Telephone and vehicle

At least 62 percent of the CHCs have a telephone facility in India. In the states of Uttar Pradesh, Bihar and Assam less than 26 percent of the CHCs have telephone, whereas in most of the states in south India, more than 80 percent of CHCs have a telephone. Availability of a functional vehicle varies from a minimum of 25 percent in Manipur to hundred percent in Kerala.

(c) Laboratory

In the context of provision of RCH services, the availability of a laboratory in CHCs to test the blood and urine of the women seeking antenatal care as well as for the diagnosis of RTI/STI among men and women, is critical. Out of the 1625 CHCs surveyed, only 59 percent have a laboratory. The availability of laboratory facility at the state level is also not satisfactory. In Punjab, Haryana, Madhya Pradesh, Gujarat, Andhra Pradesh, and Tamil Nadu 50-80 percent of the CHCs have a laboratory. But in Manipur, only 25 percent of the CHCs have a laboratory facility. Only twenty-three percent of the CHCs in Bihar have a laboratory.

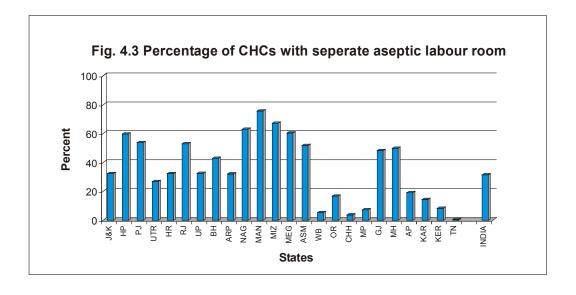
(d) Operation theatre for gynaecological purpose

All the CHCs in Bihar, Mizoram and Meghalaya have OTs. However, only 50 percent of CHCs in Tamil Nadu have OT facility and this is the lowest in India.

However, separate OT for gynaecology is available only in 20 percent of total CHCs, which include the lowest (0 percent of the CHCs) in Tamil Nadu, Karnataka, Arunachal Pradesh and Nagaland while Punjab has the highest.

(e) Separate aseptic labour room

A separate aseptic labour room is found only in 31 percent of the CHCs. As in the case of FRUs, not a single state has all CHCs with separate aseptic labour room. The highest proportion of 75 percent is found in Manipur while Tamil Nadu does not have even one. Sometimes the deliveries take place in the OT. (see Fig. 4.3).



However, this should not be misconstrued as an absence of delivery facility. There may be various reasons whereby the labour room defies the definition of aseptic, for instance, it may be used for other purposes, or it may be unclean and damp.

(f) Out patient department (OPD) for gynaecological purpose and RTI/STI

OPD facility for gynaecological purpose is not very common in the states with a figure of just 36 percent at the national level. However, in some states like Jammu & Kashmir, Uttaranchal, Rajasthan, Haryana, and Mizoram, at least 60 percent of the CHCs have a gynaecological OPD. OPD facility for RTI/STI is almost absent in CHCs for some states and the highest percentage of 77 is found in Mizoram. In Arunachal Pradesh, Manipur, Orissa, Chhattisgarh, Kerala and Tamil Nadu, not a single CHC has this facility.

(g) Linkage with district blood bank

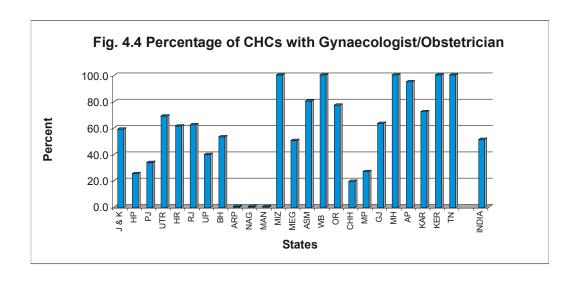
Only a miniscule proportion of CHCs (16 %) have linkage with district blood banks. Eighty-seven percent CHCs in Punjab and fifty-four percent of the CHCs in Maharashtra have linkage with district blood banks, and less than 26 percent of the CHCs in the remaining states have such a facility.

4.3 Staff Position (Table C2)

The availability of specialist physicians in the CHCs is much below the prescribed standard. A gynaecologist/ obstetrician is available in just 51 percent of the CHCs, while that of paediatrician is about 54 percent of CHCs. RTI/STI specialist and pathologist are available in 60 percent and 28 percent of CHCs respectively and Anaesthetists are less than four in ten. On the whole, the situation with respect to the general duty doctor male, Staff Nurse, ANM and laboratory technician in CHCs is fairly satisfactory with 92 percent, 91 percent, 95 percent and 88 percent respectively. About four-fifths of the total CHCs have a female general duty doctor.

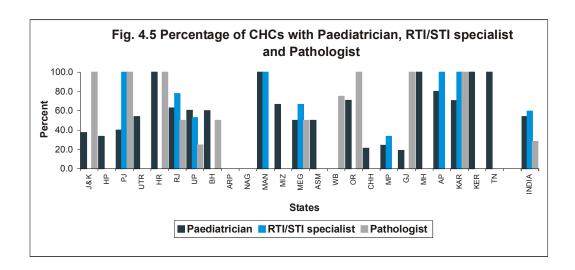
(a) Obstetrician/gynaecologist

The availability of at least one gynaecologist/obstetrician at the CHCs is nil in some of the north eastern states while it is found in full strength (100%) in West Bengal, Maharashtra, Kerala, Mizoram and Tamil Nadu (see Fig.4.4).



(b) Paediatrician, RTI/STI specialist and pathologist

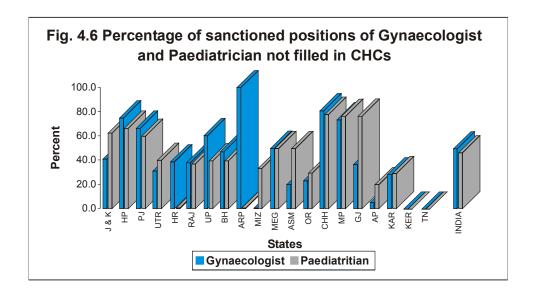
The presence of one paediatrician in 54 percent of the total CHCs is far from the satisfactory. There is no paediatrician in the CHCs in Arunachal Pradesh, Nagaland and West Bengal. In Haryana, Manipur, Maharashtra, Kerala and Tamil Nadu, all CHCs have a paediatrician; the proportion is 24 percent in Madhya Pradesh and 21 percent in Chhattisgarh. <u>Fig. 4.5</u> is the graphical presentation of the presence of a specialist in the CHCs in the states.



The proportion of CHCs with a RTI/STI specialist is negligible in many states and there is no such specialist in many states. But in some states like Punjab,

Manipur, Andhra Pradesh and Karnataka all CHCs have a RTI/STI specialist. Only 28 percent CHCs in India have pathologist.

CHCs also are referral centres, though they are not designated as such, and should have a gynaecologist/obstetrician and paediatrician to take care of RCH needs. Fig. 4.6 shows the percentage of sanctioned positions that are not filled for these two types of specialists. In Arunachal Pradesh and Nagaland, the posts of paediatrician and gynaecologists are not sanctioned and filled.



(c) Anaesthetist and general duty doctors

Less than four out of ten CHCs have an Anaesthetist. Not a single Anaesthetist is available in the CHCs in Himachal Pradesh, Arunachal Pradesh, Nagaland, Mizoram, West Bengal, Orissa and Tamil Nadu. However, in some states such as Haryana, Manipur and Kerala all CHCs have an Anaesthetist.

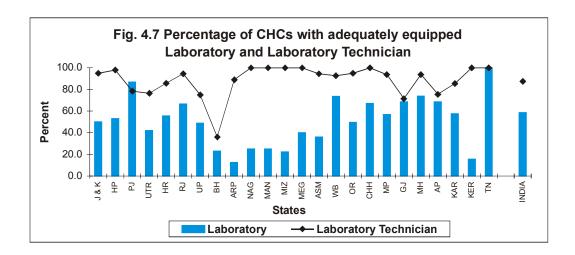
All the CHCs in Tamil Nadu, Gujarat and Manipur have both male and female general duty doctors. The situation in the remaining states is also not too bad.

(d) Staff nurse, ANM and laboratory technician

All the CHCs in Punjab, Maharashatra, Tamil Nadu and most of the remaining states have at least one Staff Nurse, ANM among their staff. Among the states the lowest proportion of CHCs having a staff nurse is Bihar with only 77 percent CHCs. Overall, the situation of staff nurse and ANM at the all India level and state level is

quite satisfactory, but all CHCs in all states except a few do not have this category of staff.

The availability of laboratory technician is good in all states except Bihar, which has only 36 percent CHCs with this facility. At the all India level 88 percent of the CHCs have a laboratory technician. More than 90 percent of the CHCs have this category of staff only in Jammu & Kashmir, Himachal Pradesh, Rajasthan, West Bengal, Orissa, Assam, Maharasthra, Madhya Pradesh, Kerala, Tamil Nadu and some states from the north eastern region. Fig. 4.7 shows a comparison of the availability of laboratory and laboratory technician. In most of the states there is a higher percentage of CHCs with a laboratory technician than with a laboratory. The difference is very high in Nagaland and Arunachal Pradesh.

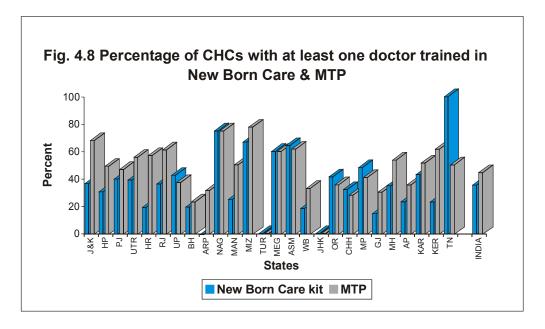


4.4 Training of Medical Officers (Table C3)

The percentage of CHCs with at least one doctor with an in-service training during the three years preceding the survey in selected health care aspects given in Table C3 presents an unsatisfactory situation. There are very few exceptions. In Manipur, only 50 percent of CHCs (which is the highest among the states) has doctors trained in sterilization and the highest percentage of CHCs in Mizoram (78%) has doctors trained in MTP. Most of the states want in these two aspects.

Madhya Pradesh has the highest percentage of CHCs (81%) with doctors trained for RTI/STI. Andhra Pradesh is at the lowest where only in 19 percent of CHCs, the doctors received training for RTI/STI. In 35 percent of CHCs in India, the medical officers received training for new born care. At least one medical officer received training for new born care in all the CHCs of Tamil Nadu. In Arunachal

Pradesh none of the medical officers at the CHCs received training in new born care (see Fig. 4.8).



The situation of CHCs in RCH training is slightly better. At the all India level, 61 percent CHCs have medical officers trained in RCH services. Again the highest is found in Tamil Nadu, where, the medical officer received training in RCH services in all the CHCs. But the situation in Arunachal Pradesh and Bihar is bad, where only 38 percent each (lowest in India) of medical officers in CHCs received training for medical officer.

4.5 Supply and Stock

I. Supply of Tubal Rings and Kits (Table C4)

Supply of kits necessary for reproductive health care is given in Table C4 and it presents a very bleak picture. Not a single state has reported the availability of all the kits in all the CHCs. IUD insertion kit, six standard surgical kit, and labour room kit are available at 74 percent to 81 percent CHCs in India. Tubal ring (16 percent) and RTI/STI kits (17 percent) are almost absent. Emergency obstetric care drug kit and newborn care equipment kits are available only in 37 percent and 33 percent of the CHCs respectively.

(a) Tubal rings and standard surgical kits

None of the CHCs in Andhra Pradesh, Tamil Nadu and Orissa have received tubal rings. Among the states the highest proportion is noted in Mizoram with 67 percent of the 9 CHCs reporting its availability.

At the all India level, only 81 percent of CHCs have all six sets of standard surgical kits. In some states, like Bihar, Arunachal Pradesh, Nagaland, Meghalaya and Tamil Nadu less than 51 percent of the CHCs have this kit.

(b) Emergency obstetric care drug kit and RTI/STI laboratory kit

The situation is still not better in the case of emergency obstetric care drug kit with only 37 percent of all CHCs reporting its supply. Eighty-four percent of all CHCs in Karnataka received this kit. None of the CHCs in Tamil Nadu, Arunachal Pradesh and Manipur have received emergency obstetric care kits. RTI/STI laboratory diagnosis kit is available in four percent of the CHCs in Bihar, in 5 percent of the CHCs in Uttaranchal, and 9 percent of the CHCs in Jammu & Kashmir.

(c) IUD insertion kit, new born care equipment kit, labour room (normal delivery) kit

IUD insertion kit has been received by more than 80 percent of the CHCs in Himachal Pradesh, Punjab, and Rajasthan, Madhya Pradesh, Chhattisgarh, Karnataka and Kerala. Among the remaining states Meghalaya has the lowest where only 20 CHCs have received this kit. As far as new born care equipment kit is concerned, except in Mizoram (67%) and Punjab (60%), none of the other states deserve any mention. At least four-fifths of the CHCs have a labour room kit in Himachal Pradesh, Rajasthan, Manipur, Orissa, Chhattisgarh, Madhya Pradesh, Karnataka and Kerala.

II Stock of Selected Items of Health Care (Table C5)

On the day of the survey at least 67 percent of the CHCs reported some stock of Nirodh, Oral pills, IUD, ORS packets and all vaccines except DT. Some stock of IFA (large) is found in 61 percent of the CHCs, while that of vitamin A solution is found in 59 percent at the all India level.

(a) Contraceptives

In general, the situation of contraceptives is least satisfactory in Maharashtra, Assam, Andhra Pradesh and Bihar. Not all CHCs in these states had a stock of Nirodh, oral pills and IUD at the time of survey. In Himachal Pradesh, Haryana, Chhattisgarh, Kerala, Karnataka, and Tamil Nadu more than 85 percent of the CHCs have stock of Nirodh. The situation of oral pills and IUD in most of the states is more or less similar to that of Nirodh. A similar situation is found in the case of oral pills in all states except Andhra Pradesh, Maharashtra and Uttar Pradesh, and in the case of IUD it is found in all states except Bihar, Gujarat, Maharashtra, Orissa and Uttar Pradesh.

(b) IFA (large) tablets, vitamin A solution and ORS packets

In general with respect to all three items included in this sub-section, Andhra Pradesh and Uttar Pradesh, Uttaranchal, Bihar, West Bengal have painted a very poor picture. IFA tablets were found in less than 54 percent of the CHCs in these states. It is more or less the same situation for Vitamin A and ORS. This situation of IFA (large) in CHCs is much better in Tamil Nadu (100%), Kerala (92%), Karnataka (91%), and Nagaland (88%). Only in six states (Jammu & Kashmir, Nagland, Meghalaya, Kerala, Punjab, and Rajasthan) at least 80 percent of CHCs have a stock of vitamin A solution. In all the large states except Andhra Pradesh, Bihar, Uttar Pradesh and West Bengal, there was stock of ORS packets in at least two-thirds of the CHC.

(c) Vaccines

All the vaccines were found in less than 60 percent of the CHCs in Andhra Pradesh, Gujarat, Maharashtra and Bihar. It is surprising considering the fact that these states, particularly Maharashtra and Gujarat, are generally good in provision of health care. The situation is much better in Manipur, Nagaland, Kerala and Tamil Nadu.

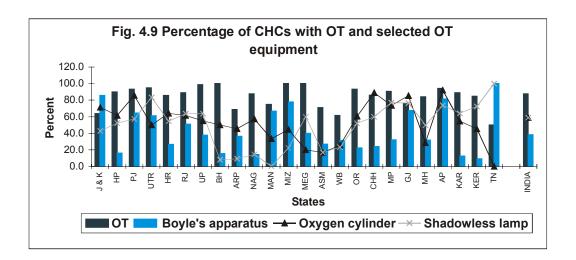
4.6 Equipment (Table C6)

Most of the CHCs do not have much of the equipment considered here. The highest proportion is found in the case of X-ray machine where 76 percent of CHCs have it at the all India level. Sixty-four percent of the CHCs have a refrigerator. Similarly, 59 percent of the CHCs have a shadowless lamp and oxygen cylinder separately. Cardiac monitor and ventilator are almost absent with just 6 percent and 13 percent CHCs respectively having it.

(a) Equipment in the operation theatre

Boyle's apparatus is available in 38 percent of the CHCs. Except Gujarat, Jammu & Kashmir, Punjab, Uttaranchal, Rajasthan, Manipur, Mizoram, Andhra Pradesh and Tamil Nadu not even 50 percent of the CHCs in the remaining states have Boyle's apparatus. The availability of the oxygen cylinder is slightly better. Most of the states except a few in south India and north east India have more than 50 percent of the CHCs with this life saving equipment. The states with less than 50 percent of CHCs having shadowless lamp are Jammu & Kashmir, Bihar and all the states of the north-east region.

The high-pressure sterilization both vertical and horizontal, is found in only 21 percent of CHCs in India. The high-pressure sterilization both vertical and horizontal, is found in 43 percent of CHCs in Andhra Pradesh (that is the highest), followed by Meghalaya with 40 percent CHCs. In the remaining states the situation is worse. The cardiac monitor is almost absent in CHCs in most of the states; the highest observed is 57 percent in Punjab. The situation is almost the same in the case of the ventilator, even though the percentage level is slightly high in most states. Fumigation apparatus in OT is available in more than 50 percent of the CHCs in Jammu & Kashmir, Rajasthan, Gujarat, Karnataka and Andhra Pradesh. The situation of the hydraulic table is better but not satisfactory. None of the CHCs in Kerala and Tamil Nadu have equipment like the cardiac monitor, ventilator and OT with fumigation. Availability of OT equipment in relation to availability of OT is given in Fig.4.9.



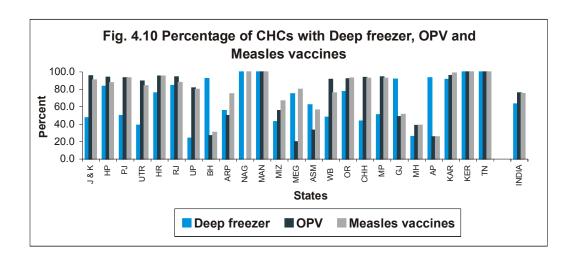
(b) X -ray and ECG machine

In Jammu & Kashmir, Uttaranchal, Rajasthan, Mizoram, Gujarat, Andhra Pradesh and Karnataka at least 85 percent of CHCs and all CHCs of Punjab have x-

ray machine. ECG machine is available at all the CHCs only in Jammu & Kashmir, Uttaranchal, Bihar, Manipur, Mizoram. The CHCs in some states do not have an ECG machine.

(c) Cold chain equipment

At least 63 percent of the CHCs have all the cold chain equipment given here. The availability of ice-lined freezer at the all India level is only in 68 percent of the CHCs. Among the states, however, the availability of ice-lined freezer varies from 29 percent in West Bengal to hundred percent in Manipur, Kerala, and Tamil Nadu. The states with more than 90 percent CHCs with ice-lined freezers are Manipur, Gujarat, Maharashtra, Andhra Pradesh, Kerala and Tamil Nadu. Deep freezers are available in 63 percent of the total CHCs, which includes more than 80 percent of the CHCs in Himachal Pradesh, Rajasthan, Bihar, Nagaland, Manipur, Gujarat, Andhra Pradesh, Karnataka, Kerala and Tamil Nadu. Deep freezer is used specifically to store OPV and measles vaccines besides making ice packs. <u>Fig. 4.10</u> shows the availability of deep freezer in relation to the availability of OPV and measles vaccine.



The percentage of CHCs with some stock of vaccines in Tamil Nadu, Kerala, Nagaland and Manipur is equal to the percentage of CHCs with deep freezers.

A refrigerator is available only in 64 percent of the CHCs. 70 percent of the CHCs with a refrigerator are found only in Gujarat, Himachal Pradesh, Uttaranchal, Arunachal Pradesh, Nagaland, Meghalaya, Assam and Karnataka.

4.7 Adequately Equipped Community Health Centres and Those Used as Referral (Table C7)

Table C7 shows that 63 percent of the CHCs are adequately equipped with respect to infrastructure. There is no single state with all the CHCs adequately equipped in terms of infrastructure, staff, supply or equipment. At least three-fourths of the CHCs are adequately equipped with respect to infrastructure in Gujarat, Punjab, Mizoram, Andhra Pradesh and Karnataka.

A little less than one half of the 1625 CHCs are adequately equipped in equipment. At least 60 percent of the CHCs falling in this category are found only in Jammu & Kashmir, Uttaranchal, Punjab and Andhra Pradesh.

The situation of staff and supply is poor with just 14 percent of the CHCs being adequately equipped in staff and 24 percent being adequately equipped with supply. It is only in Tamil Nadu and Orissa that there are at least 50 percent of CHCs adequately equipped in staff. Excluding Andhra Pradesh and Punjab, where at least 80 percent of CHCs are found to be adequately equipped in supply, none of the other states need special mention.

A little less than 50 percent of the CHCs in India have attended to referred cases during the three months preceding the survey. But in Himachal Pradesh, Haryana, Nagaland, Meghalaya, Kerala and Tamil Nadu all CHCs reported to have attended to referred cases. In Jammu & Kashmir, Punjab, Madhya Pradesh and Chhattisgarh, not a single CHC attended to referred cases.

Table C1: Status of infrastructure in Community Health Centers in the states of India, Facility Survey, 2003

					iii asti uct			Percenta								
SI. No	State.	No. of CHCs	Water	Facility Other ¹	Over head tank & pump	Electricity All parts	Generator Functiona l ²	Telephone	Vehicle Functiona	Labora tory	от	OT For Gynaec	Separat e Aseptic labour	Gynaec OPD facility	RTI/S TI OPD facility	Linkage with district blood
1	J&K	22	86.4	13.6	54.5	86.4	71.4	54.4	45.5	50.0	63.6	21.4	31.8	77.3	50.0	bank 9.1
2	Himachal Pradesh	49	97.7	2.3	53.1	87.8	63.2	83.7	55.1	53.1	89.8	20.3	59.2	38.8	26.5	12.2
3	Punjab	15	46.7	53.3	100.0	100.0	85.7	93.3	46.7	86.7	93.3	57.1	53.3	60.0	46.7	86.7
4	Uttaranchal	19	57.9	42.1	57.9	100.0	94.0	89.5	68.4	42.1	94.7	33.3	26.3	73.7	10.5	10.5
5	Haryana	63	63.5	36.5	65.1	88.9	90.9	88.9	63.5	55.6	85.7	9.3	31.7	65.1	34.9	31.7
6	Rajasthan	191	67.0	33.0	74.9	98.4	86.1	49.2	46.6	66.5	89.0	27.1	52.4	46.6	36.6	15.2
7	Uttar Pradesh	256	13.7	86.3	86.3	90.6	91.3	25.4	77.7	48.8	98.8	34.4	32.0	52.0	20.7	11.7
8	Bihar	26	19.2	80.8	50.0	53.8	91.7	19.2	42.3	23.1	100.0	42.3	42.3	38.5	30.8	3.8
9	Arunachal Pradesh	16	87.5	12.5	25.0	75.0	66.7	50.0	37.5	12.5	68.75	0.0	31.5	6.3	0.0	0.0
10	Nagaland	08	75.0	25.0	0.0	75.0	100.0	37.5	50.0	25.0	87.5	0.0	62.5	50.0	50.0	12.5
11	Manipur	04	50.0	50.0	75.0	100.0	100.0	25.0	25.0	25.0	75.0	33.3	75.0	0.0	0.0	25.0
12	Mizoram	09	55.6	44.4	55.6	88.9	60.0	100.0	33.3	22.2	100.0	33.3	66.7	88.9	77.8	22.2
13	Tripura*															
14	Meghalaya	05	60.0	40.0	20.0	80.0	0.0	40.0	60.0	40.0	100.0	20.0	60.0	40.0	60.0	0.0
15	Assam	39	43.6	56.4	61.5	84.6	29.4	10.3	41.0	35.9	71.1	33.3	51.3	30.8	12.8	10.3
16	WB (BPHC) ⁺	83	42.2	67.8	94.0	85.5	86.1	75.0	45.8	73.5	61.4	7.8	4.8	4.8	2.4	1.2
17	Jharkhand*															
18	Orissa	87	23.0	77.0	44.8	86.2	67.6	72.4	60.9	49.4	93.1	4.9	16.1	39.1	0.0	3.4
19	Chhatisgarh	97	30.9	69.1	50.5	95.0	75.0	51.5	47.4	67.0	82.4	1.3	3.1	6.2	0.0	11.0
20	Madhya Pradesh	180	28.9	71.1	58.9	92.2	85.7	57.2	51.1	56.7	90.6	15.3	6.7	33.9	8.9	6.1
21	Gujarat	111	73.9	25.2	81.1	94.6	87.3	95.5	69.4	68.5	80.2	4.5	47.7	16.2	2.7	10.8
22	Maharashtra(RH) ⁺	187	52.0	48.0	84.1	94.1	88.3	81.3	67.4	73.8	86.1	10.6	49.2	18.2	13.4	54.1
23	Andhra Pradesh	70	22.9	77.1	88.6	98.6	95.2	85.7	25.7	68.6	94.3	26.2	18.6	48.6	11.4	1.4
24	Karnataka	73	49.3	50.7	75.3	97.3	61.9	95.9	61.6	57.5	89.0	0.0	13.7	45.2	4.1	12.3
25	Kerala	13	30.8	69.2	92.3	84.6	16.7	84.6	46.2	15.4	84.6	18.2	7.7	0.0	0.0	0.0
26	Tamil Nadu	02	50.0	50.0	50.0	100.0	100.0	100.0	100.0	100.0	50.0	0.0	0.0	50.0	0.0	0.0
	India	1625	43.9	56.1	69.8	91.8	84.3	62.2	57.4	58.6	87.6	20.0	31.1	35.9	15.9	15.8

Note: * There are no hospitals that CHC level in the states of Tripura and Jharkhand. ¹ Tap water is not included. ² Taken from No. of Generatora available. ³ Includes Ambulance, Jeep, and Car functional on the day of survey. ⁴ Taken from OT available. ⁺ There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHC.

Table C2: Staff position in Community Health Centres in the states of India, Facility Survey, 2003

					Percentag	ge of CHCs wi	th at least or	e post fi	lled			
Sl. No	State	No. of CHCs	Obstetrician/G ynaecologist**	Paediatrician **	RTI/STI specialist**	Pathologist**	Anaesthelo gist**	Genera docto	or**	Staff nurse**	ANM**	LT**
								Male	Female			
1	Jammu & Kashmir	22	58.8	37.5	0.0	100.0	33.3	95.2	93.8	88.9	88.9	95.0
2	Himachal Pradesh	49	25.0	33.3	0.0	0.0	0.0	88.9	82.4	83.3	85.7	97.9
3	Punjab	15	33.3	40.0	100.0	100.0	50.0	100.0	0.0	100.0	100.0	78.6
4	Uttaranchal	19	68.8	53.8	0.0	0.0	33.3	80.0	100.0	88.2	100.0	76.5
5	Haryana	63	61.1	100.0	0.0	100.0	100.0	94.4	83.9	87.1	95.1	85.7
6	Rajasthan	191	62.0	62.9	77.8	50.0	42.9	94.4	86.4	83.6	93.9	94.5
7	Uttar Pradesh	256	39.6	60.3	52.9	24.3	43.9	84.7	50.0	80.9	98.5	74.9
8	Bihar	26	52.9	60.0	0.0	50.0	15.4	93.8	54.5	76.9	100.0	36.0
9	Arunachal Pradesh	16	0.0	0.0	0.0	0.0	0.0	83.5	80.0	867	91.0	89.0
10	Nagaland	08	0.0	0.0	0.0	0.0	0.0	85.7	85.7	100.0	100.0	100.0
11	Manipur	04	0.0	100.0	100.0	0.0	100.0	100.0	100.0	100.0	100.0	100.0
12	Mizoram	09	100.0	66.6	0.0	0.0	0.0	85.7	85.7	100.0	100.0	100.0
13	Tripura*											
14	Meghalaya	05	50.0	50.0	66.7	50.0	50.0	80.0	80.0	100.0	100.0	100.0
15	Assam	39	80.0	50.0	0.0	0.0	57.1	85.7	85.0	97.4	91.2	94.4
16	WB (BPHC) ⁺	83	100.0	0.0	0.0	75.0	0.0	94.7	100.0	100.0	94.1	92.8
17	Jharkhand*											
18	Orissa	87	76.9	70.7	0.0	100.0	0.0	88.2	50.0	93.8	97.5	94.9
19	Chhatisgarh	97	19.0	21.0	0.0	0.0	8.0	94.0	78.3	91.5	79.3	100.0
20	Madhya Pradesh	180	25.9	24.1	33.3	0.0	10.6	92.1	75.2	94.6	97.0	93.8
21	Gujarat	111	63.2	18.8	0.0	100.0	0.0	100.0	100.0	92.7	63.6	71.6
22	Maharashtra(RH) ⁺	187	100.0	100.0	0.0	0.0	67.0	96.0	100.0	100.0	100.0	97.2
23	Andhra Pradesh	70	94.7	80.0	100.0	0.0	60.0	87.5	80.6	100.0	86.4	75.4
24	Karnataka	73	71.9	70.6	100.0	100.0	33.3	95.9	84.4	95.3	100.0	85.5
25	Kerala	13	100.0	100.0	0.0	0.0	100.0	100.0	80.0	100.0	0.0	100.0
26	Tamil Nadu	02	100.0	100.0	0.0	0.0	0.0	100.0	100.0	100.0	100.0	100.0
	India	1625	50.9	53.9	59.5	28.2	37.1	92.4	80.0	91.1	94.8	87.6

Note:

^{*} There are no hospitals that CHC level in the states of Tripura and Jharkhand

^{**} All the figures are taken from Number of CHCs with sanctioned posts.

LT: Laboratory Technician.

+ There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHC.

Training status of Medical Officers in Community Health Centres in the states of Table C3 **India, Facility Survey, 2003**

Sl.	State	No. of	Percentage of	CHCs with a	nt least one do last three ye	ctor received training	ng during the
No	State	CHCs	Sterilization ¹	MTP	RTI/STI	New born care	RCH
1	Jammu & Kashmir	22	13.6	68.2	36.4	36.4	77.3
2	Himachal Pradesh	49	8.2	49.0	53.1	30.6	73.5
3	Punjab	15	0.0	46.7	40.0	40.0	53.3
4	Uttaranchal	19	11.1	55.6	38.9	38.9	72.2
5	Haryana	63	3.2	57.1	44.4	19.0	74.6
6	Rajasthan	191	17.9	61.1	51.6	36.3	65.3
7	Uttar Pradesh	256	16.8	37.2	50.4	42.4	64.4
8	Bihar	26	7.7	23.1	26.9	19.2	38.5
9	Arunachal Pradesh	16	0.0	31.3	18.8	0.0	37.5
10	Nagaland	8	0.0	75.0	62.5	75.0	75.0
11	Manipur	4	50.0	50.0	50.0	25.0	50.0
12	Mizoram	9	33.3	77.8	66.7	66.7	77.8
13	Tripura*						
14	Meghalaya	5	0.0	60.0	60.0	60.0	80.0
15	Assam	39	20.5	61.5	46.2	64.1	59.0
16	WB (BPHC) ⁺	83	1.2	32.9	28.0	18.3	18.3
17	Jharkhand*						
18	Orissa	87	10.3	35.6	41.4	41.4	93.1
19	Chhatisgarh	97	2.1	27.8	46.4	32.0	55.7
20	Madhya Pradesh	180	5.6	40.8	81.0	48.0	72.1
21	Gujarat	111	1.8	30.0	28.2	14.5	46.4
22	Maharashtra(RH) ⁺	187	10.6	53.6	48.6	34.6	56.4
23	Andhra Pradesh	70	1.5	35.4	18.5	23.1	30.8
24	Karnataka	73	8.3	51.4	38.9	43.1	68.1
25	Kerala	13	15.4	61.5	69.2	23.1	92.3
26	Tamil Nadu	2	0.0	50.0	50.0	100.0	100.0
	India	1625	9.6	44.4	47.5	35.4	61.1

- Note: * There are no hospitals equals to CHC level in the states of Tripura and Jharkhand
 - 1 Sterilization includes NSV, both female sterilization and training received by doctor from whom CHC has filled post of doctor.
 - + There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHCs.

Table C4 Supply of Tubal Rings and Kits in Community Health Centres in the states of India, Facility Survey, 2003

				F	Percentage	of CHCs ha	ving receiv	ved	
Sl. No	State	No. of CHCs	Tubal ring (stock)	Std.sur. kit ¹	EmOC ²	RTI/STI kit	IUD Kit	NBCE kit ³	Kit I ⁴
1	Jammu & Kashmir	22	18.2	50.0	9.1	13.6	36.4	4.5	59.1
2	Himachal Pradesh	49	8.2	87.8	24.5	14.3	83.7	22.4	89.8
3	Punjab	15	20.0	93.3	53.3	33.3	86.7	60.0	73.3
4	Uttaranchal	19	10.5	68.4	5.3	5.3	52.6	36.8	57.9
5	Haryana	63	1.6	90.5	39.7	22.2	76.2	25.4	79.4
6	Rajasthan	191	27.2	93.2	40.8	36.1	87.4	34.6	86.9
7	Uttar Pradesh	256	20.3	79.7	27.7	10.2	72.7	33.2	72.7
8	Bihar	26	11.5	38.5	15.4	3.8	34.6	3.8	42.3
9	Arunachal Pradesh	16	37.5	37.5	0.0	6.3	31.3	18.8	37.5
10	Nagaland	8	75.0	50.0	50.0	50.0	25.0	50.0	62.5
11	Manipur	4	25.0	100.0	0.0	0.0	75.0	25.0	100.0
12	Mizoram	9	66.7	88.9	22.2	33.3	55.6	66.7	77.8
13	Tripura*								
14	Meghalaya	5	40.0	40.0	60.0	40.0	20.0	40.0	20.0
15	Assam	39	48.7	66.7	20.5	12.8	56.4	33.3	64.1
16	WB(BPHC) ⁺	83	2.4	81.9	6.0	2.4	77.1	15.7	75.9
17	Jharkhand*								
18	Orissa	87	0.0	83.9	49.4	6.9	79.3	33.3	87.4
19	Chhatisgarh	97	14.4	95.9	59.8	11.3	93.8	23.7	91.8
20	Madhya P.	180	26.0	93.9	43.3	12.2	90.6	51.1	83.9
21	Gujarat	111	8.1	80.2	60.4	14.4	76.6	34.2	77.5
22	Maharashtra (RH)+	187	4.8	62.0	32.6	34.6	48.7	32.1	49.7
23	Andhra P.	70	0.0	60.0	14.3	1.4	42.9	10.0	38.6
24	Karnataka	73	9.6	100.0	83.6	13.7	98.6	54.8	100.0
25	Kerala	13	30.8	100.0	38.5	0.0	100.0	15.4	92.3
26	Tamil Nadu	2	0.0	50.0	0.0	0.0	50.0	0.0	50.0
	India	1625	15.5	81.0	37.3	16.8	73.8	32.6	74.5

Note:

^{*} There are no hospitals as equals to CHC level in the states of Tripura and Jharkhand 1. A set of (six standard surgical kit).

2. Kit with emergency Obstetric care drugs.

Kit Will enlegency Obstenic Care drugs.
 Kit for New Born care equipment.
 Normal delivery Kit.
 + There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHCs.

Table C5 Stock of selected items of health care in Community Health Centres in the states of India, Facility Survey, 2003

Sl.	State	No. of CHCs	Percentage of CHCs having some stock on the day of survey											
No.			Nirodh	OP	IUD	IFA (large)	Vit.A	ORS	DPT	OPV	TT	BCG	Measles	DT
1	Jammu & Kashmir	22	59.1	81.8	86.4	86.4	81.8	77.3	90.9	95.5	72.7	77.3	90.9	90.9
2	Himachal Pradesh	49	87.8	83.7	81.6	67.3	67.3	61.2	89.8	93.9	89.8	89.8	87.8	79.6
3	Punjab	15	53.3	53.3	93.3	73.3	86.7	86.7	100.0	93.3	100.0	100.0	93.3	86.7
4	Uttaranchal	19	63.2	47.4	47.4	42.1	36.8	52.6	73.7	89.5	89.5	63.2	84.2	78.9
5	Haryana	63	85.7	73.0	77.8	73.0	71.4	79.4	85.7	95.2	96.8	82.5	95.2	77.8
6	Rajasthan	191	91.1	84.3	89.5	75.9	80.1	80.1	94.2	94.2	91.6	79.1	88.0	63.4
7	Uttar Pradesh	256	61.7	60.2	64.5	53.9	47.7	53.9	77.3	81.6	80.9	74.6	80.1	33.6
8	Bihar	26	46.2	38.5	46.2	38.5	34.6	42.3	30.8	26.9	26.9	30.8	30.8	26.9
9	Arunachal Pradesh	16	56.3	50.0	75.0	81.3	75.0	68.8	31.3	50.0	75.0	56.3	75.0	31.3
10	Nagaland	8	37.5	37.5	87.5	87.5	100.0	87.5	87.5	.0	100.0	100.0	100.0	100.0
11	Manipur	4	75.0	100.0	75.0	75.0	75.0	100.0	75.0	100.0	100.0	100.0	100.0	100.0
12	Mizoram	9	55.6	22.2	88.9	66.7	55.6	66.7	77.8	55.6	100.0	88.9	66.7	77.8
13	Tripura*													
14	Meghalaya	5	60.0	40.0	80.0	80.0	80.0	60.0	80.0	20.0	60.0	40.0	80.0	60.0
15	Assam	39	48.7	41.0	69.2	43.6	59.0	59.0	41.0	33.3	59.0	53.8	56.4	56.4
16	WB (BPHC) ⁺	83	78.3	71.1	72.3	43.4	45.8	51.8	86.7	91.6	89.2	78.3	75.9	47.0
17	Jharkhand*													
18	Orissa	87	64.4	62.1	63.2	71.3	69.0	93.1	89.7	92.0	93.1	93.1	93.1	82.8
19	Chhatisgarh	97	88.7	90.7	87.6	55.7	68.0	89.7	94.8	93.8	93.8	91.8	92.8	77.3
20	Madhya Pradesh	180	79.4	80.0	71.7	45.6	51.1	78.9	90.0	94.4	94.9	82.8	92.8	68.3
21	Gujarat	111	69.4	64.9	62.2	75.7	49.5	84.7	50.5	48.6	58.6	38.7	51.4	27.0
22	Maharashtra (RH) ⁺	187	44.4	43.3	50.3	58.3	56.7	74.9	40.6	38.5	51.9	37.4	39.0	32.1
23	Andhra Pradesh	70	35.7	37.1	35.7	34.3	24.3	57.1	25.7	25.7	27.1	27.1	25.7	22.9
24	Karnataka	73	97.3	95.9	94.5	91.8	69.9	93.2	98.6	95.9	97.3	91.8	98.6	78.1
25	Kerala	13	100.0	92.3	100.0	92.3	92.3	100.0	100.0	100.0	100.0	100.0	100.0	84.6
26	Tamil Nadu	2	100.0	0.0	50.0	100.0	50.0	50.0	100.0	100.0	100.0	100.0	100.0	50.0
	India	1625	70.0	67.0	70.2	61.0	58.6	72.9	74.8	75.8	79.1	70.2	75.4	54.3

^{*} There are no hospitals equal to the CHC level in the states of Tripura and Jharkhand
+ There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHCs.

Table C 6 Availability of selected equipment in Community Health Centres in the states of India, Facility Survey-2003.

			Percentage of CHCs having the following in their Operation Theatre										
Sl. No	State	No. of CHCs	No. of CHCs having OT	Boyle's Apparatus	Oxygen Cylinder	Shadow Less Lamp1	High Pressure Sterilizer**	Cardiac Monitor	Ventilator	OT care/ fumigat ion	Hydraulic table		
1	Jammu & Kashmir	22	14	85.7	71.4	42.9	14.3	35.7	14.3	85.7	64.3		
2	Himachal Pradesh	49	44	15.9	61.4	52.3	13.6	0.0	11.4	27.3	36.4		
3	Punjab	15	14	64.3	85.7	57.1	21.4	57.1	28.6	42.9	92.9		
4	Uttaranchal	19	18	61.1	50.0	83.3	22.2	11.1	0.0	16.7	88.9		
5	Haryana	63	53	26.4	64.2	54.7	17.0	3.8	5.7	24.5	43.4		
6	Rajasthan	191	171	50.9	61.4	63.7	15.8	6.4	14.0	50.3	48.5		
7	Uttar Pradesh	256	253	37.5	54.9	63.6	32.8	3.6	11.5	10.7	85.4		
8	Bihar	26	26	15.4	50.0	7.7	7.7	0.0	23.1	0.0	26.9		
9	Arunachal Pradesh	16	11	36.4	45.5	9.1	18.2	9.1	36.4	0.0	9.1		
10	Nagaland	08	07	14.3	57.1	14.3	0.0	0.0	42.9	42.9	14.3		
11	Manipur	04	03	66.7	33.3	0.0	0.0	0.0	66.7	0.0	66.7		
12	Mizoram	09	09	77.8	44.4	22.2	22.2	22.2	44.4	33.3	88.9		
13	Tripura*												
14	Meghalaya	05	05	40.0	20.0	60.0	40.0	20.0	80.0	20.0	20.0		
15	Assam	39	30	26.7	16.7	16.7	6.7	6.7	23.3	16.7	33.3		
16	WB (BPHC) ⁺	83	51	31.4	25.5	23.5	13.7	0.0	13.7	2.0	2.0		
17	Jharkhand*												
18	Orissa	87	81	22.2	60.5	51.9	12.3	4.9	3.7	0.0	19.8		
19	Chhatisgarh	97	80	23.8	88.8	60.0	6.3	3.8	7.5	8.8	42.5		
20	Madhya Pradesh	180	163	31.9	73.6	77.3	10.4	1.8	12.3	12.3	67.5		
21	Gujarat	111	89	67.4	85.4	76.4	33.7	14.6	14.6	68.5	78.7		
22	MAH (RH) ⁺	187	161	31.7	26.1	49.7	21.7	7.5	11.8	68.3	28.6		
23	Andhra Pradesh	70	65	81.5	92.3	73.8	43.1	10.8	7.7	73.8	84.6		
24	Karnataka	73	64	12.5	54.7	64.1	26.6	0.0	12.5	78.1	50.0		
25	Kerala	13	11	9.1	45.5	72.7	9.1	0.0	0.0	0.0	36.4		
26	Tamil Nadu	02	01	100.0	0.0	100.0	0.0	0.0	0.0	0.0	.0		
	India	1625	1424	38.1	59.0	58.9	20.6	6.0 Conted	12.5	32.9	54.4		

^{*} There are no hospitals that are equal to CHC level in the states of Tripura and Jharkhand
** High Pressure sterilizer includes both Horizontal and vertical. 1. Shadowless lamp prestoleite for minor OT

⁺ There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHCs.

Table C 6 Availability of selected equipment in Community Health Centres in the states of India, **Facility Survey, 2003**

SI. Su No of			No. of CHCs	Percent CHCs having	0	Percentage of CHCs cold chain equipment working condition			
No	State	No. of	having	X-ray	ECG	Incline Doon			
110		CHCs	OT	machine**	Machine**	Frezer ²	Freezer ²	Refrigerator ²	
1	J & K	22	14	92.9	100.0(12)	38.9	47.4	31.3	
2	Himachal Pradesh.	49	44	77.8	50.0	81.8	83.7	77.8	
3	Punjab	15	14	100.0	84.6	36.4	50.0	57.1	
4	Uttaranchal	19	18	87.5	100.0	52.9	38.9	83.3	
5	Haryana	63	53	73.3	50.0	84.2	75.9	68.2	
6	Rajasthan	191	171	86.5	69.7	89.9	84.6	68.5	
7	Uttar Pradesh	256	253	73.9	26.3	50.7	24.1	62.1	
8	Bihar	26	26	15.4	100.0(2)	63.6	92.3	50.0	
9	Arunachal Pradesh.	16	11	75.0	NA	60.0	55.6	72.7	
10	Nagaland	08	07	0.0	NA	85.7	100.0	100.0	
11	Manipur	04	03	50.0	100.0(1)	100.0	100.0	50.0	
12	Mizoram	09	09	85.7	100.0(2)	50.0	42.9	33.3	
13	Tripura*								
14	Meghalaya	05	05	25.0	NA	66.7	75.0	100.0	
15	Assam	39	30	40.0	0.0	78.1	62.5	75.0	
16	WB (BPHC) ⁺	83	51	11.1	75.0	29.3	48.1	65.5	
17	Jharkhand*								
18	Orissa	87	81	32.0	0.0	77.1	77.4	41.4	
19	Chhatisgarh	97	80	62.7	51.0	41.7	43.6	69.1	
20	Madhya P.	180	163	73.2	33.7	55.9	51.1	65.8	
21	Gujarat	111	89	82.7	65.9	93.0	91.7	73.3	
22	Maharashtra (RH) ⁺	187	161	82.8	75.6	91.1	92.0	64.1	
23	Andhra P.	70	65	88.9	93.2	91.7	93.3	30.8	
24	Karnataka	73	64	90.7	67.7	88.7	91.4	89.1	
25	Kerala	13	11	100.0	66.7	100.0	100.0	46.2	
26	Tamil Nadu	02	01	0.0	0.0	100.0	100.0	0.0	
	India	1625	1424	76.1	61.3	68.0	63.2	64.3	

Note:

^{*} There are no Hospitals as equals to CHC level in the states of Tripura and Jharkhand. ** Functional from the equipment available in OT + There are no CHCs in the states of Maharashtr and West Bengakl. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHC.

Table C7 Percentage of adequately equipped CHCs and those used as referral in India, Facility Survey, 2003

Sl.	State	No. of	Percentage ade	Percentage of			
No		CHC	Infrastructure@	Staff ¹	Supply ²	Equipment ³	CHCs utilized as
							referral ⁴
1	Jammu & Kashmir	22	59.1	31.8	4.5	63.6	0.0
2	Himachal Pradesh.	49	73.5	0.0	16.3	28.6	100.0
3	Punjab	15	93.3	6.7	60.0	80.0	0.0
4	Uttaranchal	19	68.4	36.8	10.5	73.7	NA
5	Haryana	63	68.3	7.9	25.4	44.4	100.0
6	Rajasthan	191	66.5	16.2	35.1	49.2	50.0
7	Uttar Pradesh	256	66.4	34.0	18.4	57.8	62.5
8	Bihar	26	7.7	19.2	3.8	11.5	NA
9	Arunachal Pradesh	16	25.0	0.0	6.3	18.8	50.0
10	Nagaland	8	25.0	0.0	37.5	0.0	100.0
11	Manipur	4	50.0	0.0	0.0	25.0	NA
12	Mizoram	9	77.8	22.2	55.6	55.6	66.7
13	Tripura*						
14	Meghalaya	5	20.0	20.0	40.0	0.0	100.0
15	Assam	39	38.5	12.8	17.9	7.7	60.0
16	West Bengal +	83	42.2	1.2	12.0	3.6	NA
17	Jharkhand						
18	Orissa	87	50.6	54.0	28.7	42.5	33.3
19	Chhatisgarh	97	43.3	0.0	17.5	48.5	0.0
20	Madhya Pradesh	180	50.6	5.0	22.8	47.2	0.0
21	Gujarat	111	76.6	1.8	29.7	58.6	66.7
22	Maharashtra +	187	72.0	4.8	22.5	24.1	34.3
23	Andhra Pradesh	70	75.7	7.1	5.7	82.9	38.1
24	Karnataka	73	80.8	13.7	60.3	49.3	50.0
25	Kerala	13	61.5	15.4	38.5	30.8	100.0
26	Tamil Nadu	2	50.0	50.0	0.0	0.0	100.0
	India	1625	62.8	14.2	24.1	46.0	46.4

Note: @ Overhead tank and pump facility, electricity in all parts of the hospital, availability of generator, telephone, functional vehicle, laboratory, operation theatre, separate aseptic labour room

- * There are no hospitals that equal the CHC level in the states of Tripura and Jharkhand
- 1 Includes obstetrician/gynaecologist, paediatrician and anesthetist.
- Includes tubal ring, set of standard surgical kits, emergency obstetric care kit, new born care kit, RTI/STI kits and delivery kit I.
- 3 Includes Boyle's apparatus, shadolesslamp and oxygen cylinder.
- 4 Referred cases are utilized are taken from those CHCs have conducted delivery
- (0.0) No any facility having at least 60 percent.
- + There are no CHCs in the states of Maharashtra and West Bengal. The Rural Hospital (RH) in Maharashtra and Block Primary Health Centre (BPHC) in West Bengal are treated as CHCs.

CHAPTER V

PRIMARY HEALTH CENTRE

5.1 Introduction

The primary health centres have the major responsibility of providing both preventive and curative health care services in the area. This includes delivery of reproductive and child health services, such as, antenatal care and immunization in addition to routine inpatient and out patient services. Compared to District Hospitals or sub-divisional Hospitals, PHCs are accessible to a larger population, as one PHC is expected to serve 30,000 population. However, just the availability of PHCS is not sufficient for the effective delivery of these services. They should also have essential infrastructure, staff, equipment and supplies. This chapter presents the status of the 9688 PHCs surveyed in India with respect to the availability of selected infrastructure, staff, equipment and supplies, besides training of medical and para-medical staff.

5.2 Infrastructure (Table P1)

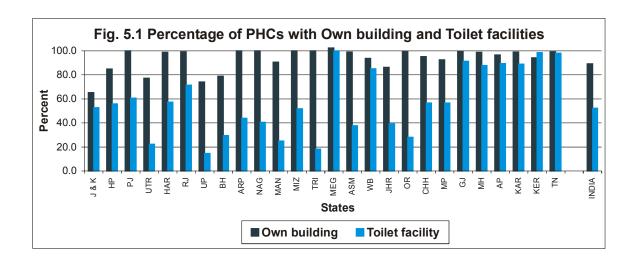
Table P1 presents the percentage of PHCs with selected infrastructural facilities such as own building, toilet facility, continuous supply of tap water, electricity, labour room, laboratory, telephone, functional vehicle and beds for in-patients in each state. In India, out of 9688 surveyed PHCs, 89 percent are functioning from their own building, but only 52 percent have at least one flush toilet. Twenty-four percent and 66 percent of the PHCs respectively have tap water and electricity, while slightly less than 50 percent have a labour room. Telephone facility and functional vehicle are not very common, with only 20 percent of the total PHCs having the former and 23 percent having the latter. In 29 percent of the PHCs even one bed is not available. An examination of the availability of selected infrastructural facilities shows that own building, electricity, flush toilet, and beds are available with a comparatively large percent of PHCs, but the facility of tap water, labour room, telephone connection and vehicle are available with only a limited number of PHCs

(a) Own building and flush toilet facility

In most of the states more than 89 percent of the PHCs function from their own building. Uttar Pradesh is the only state with the lowest number of PHCs for only 74 percent of PHCs have their own building.

In PHCs where women are expected to get services like antenatal and postnatal check-ups including internal examination and IUD insertions, and where women are admitted for delivery, sterilization or MTP, it is crucial to have at least one toilet. However, only 52 percent of the PHCs in India have at least one flush toilet. More than 90 percent of the PHCs in south India, Meghalaya and West Bengal have flush toilet facilities. But this is not so in all the PHCs in many states. In Bihar, Uttar Pradesh and Tripura, majority of the PHCs do not have a toilet facility.

<u>Fig. 5.1</u> shows the percentage of PHCs with their own building and flush toilet facility.



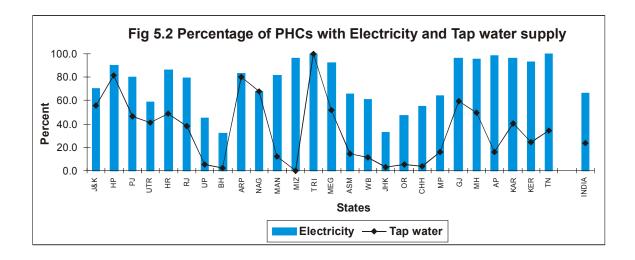
(b) Water supply

In any health facility, continuous supply of water is a critical input. However, less than one-fourth of the surveyed PHCs have tap water supply. With the exception of Tripura where all the surveyed PHCs have tap water, there are only two states, Himachal Pradesh and Arunachal Pradesh, where more than 80 percent of the PHCs have tap water supply. The condition is particularly worse in Bihar (2%), Jharkhand (3%), Chattisgarh (4%), Uttar Pradesh (5.7%), and Orissa (6%) in terms of availability of tap water facility.

(c) Electricity

Provision of immunization to children and pregnant women is one of the important functions of the PHC. PHCs need electricity for purposes of lighting, operating equipment and for storage of vaccines at specified temperatures in a refrigerator/ freezer.

Forty-four percent of the PHCs in India function without electricity. In Andhra Pradesh, Gujarat, Kerala, Maharashtra, Tamil Nadu, Himachal Pradesh, and Tripura at least 90 percent of the PHCs have electricity. The situation is particularly bad in Bihar, Uttar Pradesh and Orissa, where more than half of the surveyed PHCs function without electricity. The percentage of PHCs having continuous tap water supply and electricity is shown in <u>Fig. 5.2</u>. Only in Tripura there is supply of tap water and electricity in all the PHCs.



(d) Labour room

In the context of the National population policy, 2000 goal of eighty percent institutional deliveries, the availability of a labour room is a critical facility for a PHC. However, only 48 percent of the PHCs in India have a labour room. The percentage of PHCs having a labour room in states ranges from the highest of hundred percent in Tripura to the lowest of 21 percent in Chattisgarh. Besides Maharashtra, the states with at least 60 percent of PHCs with a labour room are Rajasthan, Arunachal Pradesh, Nagaland, Mizoram, Tripura, Megalaya, and all the southern states. Besides Bihar, the states with 27 percent or less PHCs with a labour room are Jharkhand and Chattisgarh.

(e) Laboratory

In the context of provision of RCH services, the availability of laboratory in PHC to test blood and urine of the women seeking antenatal care as well as for the diagnosis of RTI/STI among men and women is critical. Out of the 9688 PHCs surveyed all over the country, only 46 percent have laboratory facilities. In Mizoram, Tripura, Gujarat, Maharashtra and Andhra Pradesh, 84 percent or more PHCs have laboratory facilities. In

West Bengal and Orissa, only five and seven percent PHCs have a laboratory respectively.

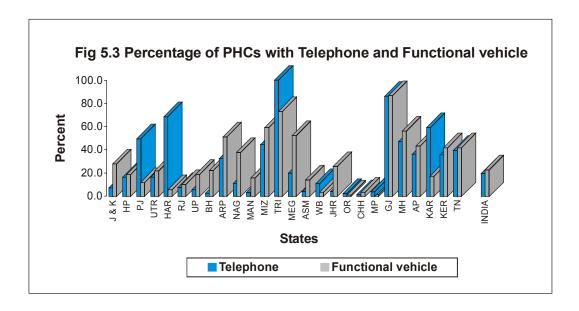
(f) Telephone

For communication purposes, especially as the PHCs are supposed to refer the complicated cases to higher health facilities, the telephone facility in PHC is very important, but it is a scarce facility in a PHC. Only one in every five PHCs in India has a telephone connection. In Gujarat (86%), Haryana (69%), Tripura (100%), and Karnataka (59%), more than half of the PHCs have a telephone connection, and in Assam, Bihar, Madhya Pradesh, Orissa, Uttar Pradesh, Manipur, Jharkhand, Chattisgarh, and Rajasthan, 7 percent or less than 7 percent of the PHCs have a telephone facility.

(g) Vehicle

In the context of the out-reach programme of the PHCs and referral of the complicated cases to higher health facilities, the availability of a vehicle in running condition becomes a critical input. But only twenty-three percent of the PHCs in India have a functional vehicle.

In all the states, with the exception of Arunachal Pradesh, Mizoram, Tripura, Meghalaya, Gujarat, and Maharashtra, less than 50 percent of the PHCs have any vehicle. Availability of telephone and functional vehicle is shown in **Fig.5.3** for the states in India.



(h) In-patient beds

PHCs are supposed to provide medical services for in-patients and hence are expected to have at least six beds. Little more than two-thirds of the PHCs in India have at least one bed. In Nagaland, Mizoram, Tripura and Meghalaya, every PHC has a bed. In many major states more than 90 percent of the PHCs have beds. But the situation in Bihar is bad, where only four percent of the PHCs have one bed.

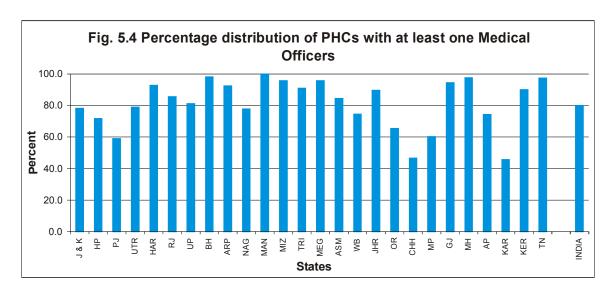
5.3 Staff Position (Table P2)

Only selected staff is given in Table P2. At least one medical officer is available in 80 percent of the total PHCs, which includes 16 percent having a female medical officer. Male Health Assistant is as common as Female Health Assistant as at least one of the former is available in 81 percent of the PHCs and the latter in 85 percent of the PHCs.

(a) Medical officer

The availability of at least one Medical Officer (MO) on the role of PHC is absolutely essential. However, almost two in every ten PHCs in India is functioning without any doctor, while some are functioning with more than one.

In Manipur every PHC has Medical Officer, and in Bihar and Tamil Nadu 97 percent of the PHCs have at least one Medical Officer respectively. At the same time, in Karnataka and Chattisgarh around 54 percent PHCs do not have even a single Medical Officer. In some states, though some PHCs do not have a Medical Officer on their regular staff, they hire the services of private doctors on a contract basis. In a number of states at least 75 percent of the PHCs have a medical doctor (see Fig. 5.4).



In Manipur almost all the PHCs have a Medical Officer and there are no PHCs without a Medical Officer. The percentage of PHCs without a Medical Officer varies from none in Manipur to 54 percent in Karnataka and Chattisgarh separately.

(b) Medical officer (female)

The inclusion of a lady Medical Officer on the PHC staff, is advantageous maternal care services, as women can confide with a lady doctor easily. However, only 16 percent of the PHCs (with at least one Medical Officer) in India have at least one lady Medical Officer). It is the highest in Tamil Nadu where 69 percent of the PHCs (with at least one Medical Officer have a lady Medical Officer. In Andhra Pradesh, Haryana, Karnataka, and Kerala 24 to 39 percent of the PHCs have at least one lady Medical Officer. But in Orissa, Uttar Pradesh and Gujarat only 3 percent or less of PHCs have a lady Medical Officer. Lady medical doctors are not available in the PHCs in Maharashtra.

(c) Medical Officer staying in the PHC compound

For attending to emergency cases round the clock, it is necessary to have an MO in the PHC compound. But this is determined by the availability of staff quarters as well as the MOs desire to stay in the quarters. <u>Fig.5.5</u> shows that no state has quarters for the MO in the PHC, except for Tripura. However, even the available quarters are not fully used in any of the states except Arunachal Pradesh where 97 percent of the quarters are occupied.

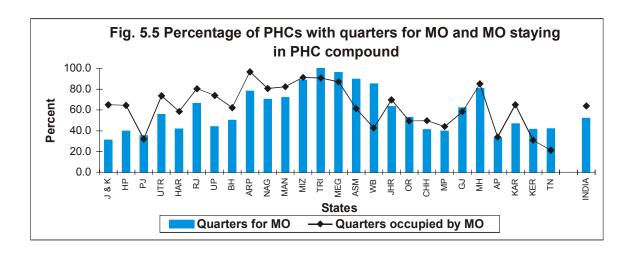


Table P2 shows that in 64 percent of the PHCs, the MO stays in the PHC compound at the all India level. In 80 percent of the PHCs or more, in Rajasthan, Arunachal Pradesh, Nagaland, Manipur, Mizoram, Tripura, Meghalaya, and Maharashtra, the MO stays in the PHC compound, but in Punjab, West Bengal, Andhra Pradesh, Kerala, and Tamil Nadu in 21-43 percent of the PHCs, the MO is available in the PHC compound.

(d) Health assistant (male)

As far as the implementation of the RCH programme is concerned, male health workers have a role in popularising the male methods of family planning among men and educating as well as counselling men on RTI/STI and HIV (AIDS). They also are expected to help female health workers in immunization sessions. The staffing pattern of PHCs includes male health worker, though around fourth –fifths of the PHCs in India have at least one male health worker. In most of the states except Bihar 50 percent or more of the PHCs have a single male health assistant. In Bihar only 31 percent of PHCs have a male Health Assistant.

(e) Health assistant (female) and female health worker

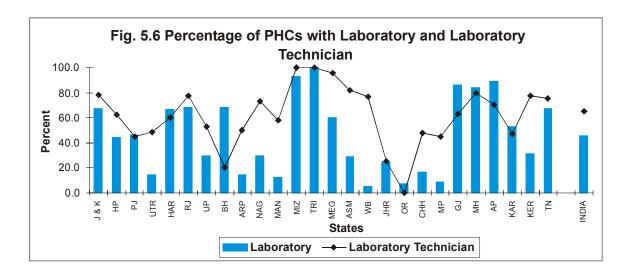
The health assistant (female) also known as ANM has a key role to play in the implementation of the RCH programme at the PHC as well as in the out reach activities of PHCs. Their availability varies from 36 percent in Bihar to hundred percent in Nagaland, Mizoram and Tamil Nadu. At least four-fifths of the PHCs in all the states in south India and some other states have an ANM. But there is not a single PHC in Orissa with a female health assistant. Because of the difference in nomenclature of the PHC staff

in different states and because of the possibility of some of the ANMs getting classified in some other category of female health workers, a new category called Female Health Worker (FHW) was created taking all the Public Health Nurses, Female Health Assistant and Female Multipurpose Workers. This shows that in most of the states more than 75 percent of the PHCs have FHWs. In fact in Kerala, Andhra Pradesh, Manipur, Tripura, and Mizoram, every PHC has at least one FHW. Only in Orissa none of the PHCs have any FHW.

(f) Laboratory technician

Along with the laboratory for pathological tests the availability of a Laboratory Technician on the PHC staff is necessary. In India, 46 percent of the PHCs have a laboratory and 65 percent of the PHCs have a Laboratory Technician on their staff. In Mizoram and Tripura, all the PHCs have a Laboratory Technician but in Orissa, not a single PHC has a Laboratory Technician. In the remaining states, the PHCs with a Laboratory Technician ranges from 20 percent in Bihar to 96 percent in Meghalaya. Among the southern states, Kerala has the largest, that is 78 percent and Karnataka has the lowest that is 47 percent of PHCs employing a Laboratory Technician.

The percentage of PHCs with a laboratory and with a Laboratory Technician is given in <u>Fig. 5.6</u>. In Tripura, all PHCs have a laboratory as well as a laboratory technician.



5.4 Training Status of PHC Staff (Table P3 & P4)

The Training of PHC staff refers to the training received during last three years before the survey.

(a) Medical officer (Table P3)

In-service training in various components of RCH enhances the skills and utility of medical and paramedical staff in PHCs. Though PHCs are expected to provide facilities for conducting normal deliveries, MTP, sterilisation and treatment of RTI/STI, very few PHCs have doctors trained for this specialization. In India 15, 11, 15 and 47 percent of PHCs have at least one Medical Officer trained in conducting sterilization (tubectomy), NSV, MTP and RTI/STI respectively. In none of the states do all the PHCs have medical officers with a specialised background. Among all the states, the status of the medical staff's training is best in Tripura.

(b) Paramedical staff (Table P4)

Table P4 presents the percentage of PHCs with at least one paramedical staff trained in IUD insertion, checking blood pressure, control of diarrhoea CDD/oral Rehydration Therapy (ORT), Universal Immunization Programme (UIP), Child Survival and Safe Motherhood (CSSM) Programme, RCH Programme and Acute Respiratory Infection (ARI). It is necessary to mention here that there are a number of training programmes for the paramedical staff, and some of them have overlapping contents.

On the whole, the training status of paramedical staff is better in comparison to that of medical staff. In more than 53 percent of the surveyed PHCs in India there is at least one paramedical person on the staff who is trained in IUD insertion, CDD/ ORT, UIP, CSSM and RCH. A comparatively lesser percentage of PHCs have a paramedical person trained in checking BP (43%) and ARI (48%). However, in CSSM training, these two components are also included. Only in Tamil Nadu most of the PHCs have at least one paramedical person trained in each of the above mentioned training programme. The status of paramedical staff's training is better in most of the states in south India where at least 90 percent of the PHCs have at least one paramedical person trained in all the above mentioned training programmes. In Maharashtra, Bihar and West Bengal majority of the paramedical staff of PHCs lack any kind of training.

5.4 Stock of Vaccines, Contraceptives and Prophylactic Drugs(Table P5)

The information on whether PHCs were supplied with necessary contraceptives, vaccines, drugs and kits is supplemented with data on the availability of stock of these items on the date of survey. Table P5 presents the percentage of PHCs, which had some stock of each of the contraceptives (Nirodh, oral pills, IUD), vaccines (BCG, DPT, DT, OPV, Measles, TT), vitamin A, IFA tablets, (small and large) and ORS packets.

(a) Contraceptives

In India 56-59 percentage of the PHCs had stock of each of the three contraceptives. Among all the states, only in Tripura almost all the PHCs reported stock of each of the three contraceptives. In Karnataka, Gujarat, Rajasthan and Jharkhand, 80 percent or more PHCs had some stock of each of the contraceptives. The position of stock is particularly poor in Orissa, where less than one-tenth of PHCs have each of this contraceptive, followed by Uttar Pradesh, and Chattisgarh where less than half of the PHCs reported having stock of each of the three contraceptives.

(b) Prophylactic drugs

About 51-57 percent of the surveyed PHCs in India reported having some stock of each of the IFA (large), IFA (small) and vitamin A solutions. The ORS packets were available with 71 percent of the PHCs. Tripura is the only state where as high as hundred percent of the PHCs had stock of each of IFA-large and small, vitamin A and ORS packets. In Jammu & Kashmir, Haryana, Rajasthan, Nagaland, Manipur, Meghalaya, Assam, and West Bengal, 70 percent or more of the PHCs had each of the above mentioned four items of drugs. As in the case of other inputs IFA (large and small) and vitamin 'A' were available with less than 15 percent of the PHCs in Orissa.

(c) Vaccines

About 45-49 percent of the PHCs in India reported having some stock of the BCG, DPT, OPV, Measles and TT vaccines. DT vaccine was in stock only in 35 percent of the PHCs.

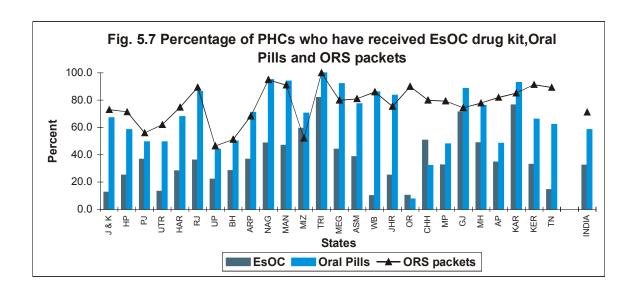
Seventy percent or more PHCs in Gujarat, Maharashtra, Andhra Pradesh, Karnataka, Kerala, Nagaland and Tamil Nadu had some stock of all the vaccines namely, BCG, DT, DPT, OPV Measles and TT vaccines. The condition is particularly a matter of concern in Bihar, Uttar Pradesh, Uttaranchal, West Bengal, Jharkhand, Orissa, Chattisgarh, and Madhya Pradesh, where only 10-44 percent of the PHCs, have all the vaccines. The situation in the remaining states falls between this range.

5.5 Regular Supply of Kits, Contraceptives, Vaccines (Table P6)

Under the RCH programme, PHCs in India are provided with a few instrumental/medicinal kits. PHCs also received a regular supply of contraceptives, vaccines and medicines. The survey reveals that at least 50 percent of PHCs were supplied with IUD insertion kit (kit G), and normal delivery kit (kit I). Only 32 percent of PHCs had a regular supply of Essential Obstetric care drug kit at the all India level. The mounted lamp (200 W) essential for the treatment of hypothermia, a common health problem among neo-natals, is supplied to only seven percent of the PHCs in India. The oral pills, measles vaccine, IFA tablets (large and small) and ORS packets were supplied to at least 95 percent of the PHCs.

Similar to the pattern of supply at the national level, in most of the states the least supplied items are mounted lamps and the Essential Obstetric Care Drug Kit.The condition of supply of kits G and I, and pills, is comparatively better.

As in the case of the other inputs with regard to the supply of these critical kits/vaccines/ contraceptive there is a large state level variation. Among the states, in Rajasthan, Mizoram, Tripura, Jharkhand, Gujarat, Maharashtra, Andhra Pradesh, Karnataka, and Tamil Nadu 60 percent or more PHCs have received kits G and I, and only in Tripura as high as 82 percent of the PHCs received the EmOC kit. The regular supply of OP is as low as 68 percent of PHCs in West Bengal to all the PHCs of Punjab, Uttaranchal, Tripura, Meghalaya, and all the states of south India. The regular supply of mounted lamp 200w has been found in all the PHCs in Tripura and in the remaining all the states regular supply is less than 18 percent of the PHC. Eighty-five percent or more PHCs from all the states received a supply of measles vaccine. The supply of IFA (large and small), and ORS packets are regular in 80 percent or more PHCs in all the states of India. The percentage of PHCs with EsOC drug kit, oral pills and ORS packets is shown in Fig.5.7.

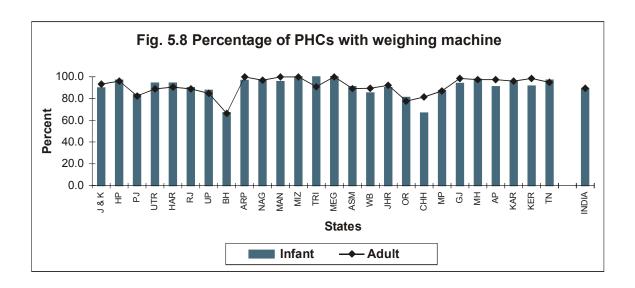


5.7 Equipment(Table P7)

Certain equipment is essential for the delivery of RCH services. This section discusses the status of PHCs with respect to the availability of these inputs on the day of survey. At the all India level, more than fourth-fifths of the PHCs have infant and adult weighing machines autoclave, steam sterilizer drum, labour room table and equipment and a instrument. Equipment like MTP suction, deep freezer and vaccine were available in 53-68 percent of the PHCs at the all India level.

(a) Infant and adult weighing machine

For the identification of low birth weight babies as well as for assessing the nutritional status of the infants and monitoring their growth, infant weighting machines in PHCs is essential. In 90 percent of the PHCs, such a machine is available which implies that in one-tenth of the PHCs a baby cannot be weighed at the time of birth. It can be noticed from Table P7 that except the states of Bihar (67%) and Chattisgarh (67%) all the other states have at least 81 percent of the PHCs with infant weighing machines. A comparison of the percentage of PHCs with adult and infant weighing machines can be obtained from **Fig.5.8**.



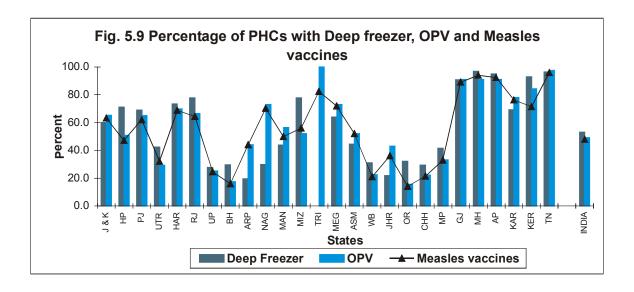
For checking the weight of pregnant women during ante-natal visits, PHCs are expected to keep adult weighing machines. About 90 percent of the PHCs in India have adult weighing machine. Except in the case of Bihar, the availability of adult weighing machines in other states are quite satisfactory. At the all-India level, around 10 percent of the PHCs are working without a functional weighing machine for the adults. All the PHCs in Manipur, Mizoram and Meghalaya, have a functional weighing machine, while 67 percent of the PHCs in Bihar and 78 percent of the PHCs have this machine.

(b) Deep freezer and vaccines carrier

A deep freezer is needed in PHCs for the storage of vaccines. There is substantial variation in the availability of a deep freezer among the states. In Maharashtra, Gujarat and most of the states of south India, 90 percent or more of the PHCs have a deep freezer but in Bihar, Uttar Pradesh, Arunachal Pradesh, West Bengal, Jharkhand, and Orissa only 32 percent or less of PHCs a have deep freezer. Only 53 percent of the PHCs in India have a deep freezer.

While conducting the immunization camp, the PHC staff need to carry vaccines from the PHC to the site of camp. Sixty-eight percent of the surveyed PHCs reported the availability of vaccine carriers. The situation in all the states in south India, Jammu & Kashmir, Punjab, Rajasthan, Manipur, Mizoram, Tripura Gujarat and Maharashtra is much better where more than 90 percent of the PHCs have vaccine carriers. However the situation is not so encouraging in of Bihar (39%), West Bengal (43%), Orissa (21%) and Chattisgarh (38%).

<u>Fig.5.9</u> gives the availability of the deep freezer in relation to the stock of OPV and measles vaccine in the states in India.



(c) BP instrument

More than fourth-fifths of the surveyed PHCs reported having at least one BP instrument. This is an essential component of antenatal care. Except Uttar Pradesh, West Bengal and Chattisgarh, 73-77 percent of the PHCS in other states have a BP instrument.

(d) Autoclave and steam sterilizer drum

Though for sterilizing needles, syringes and other instruments, autoclave or steam sterilizer drum is absolutely essential, only 82 percent and 89 percent of the PHCs in the surveyed

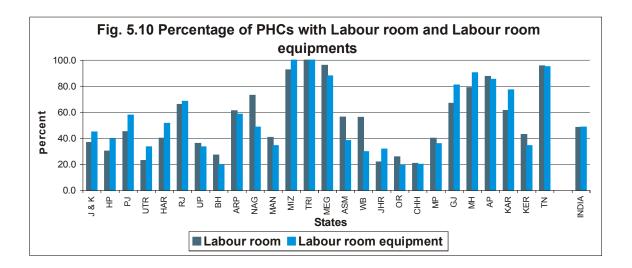
districts in India have these two pieces of equipment respectively. However, in most of the PHC, the steam sterilizer drum is comparatively more commonly available. The availability of the steam sterilizer drum varies from 75 percent of the PHCs in West Bengal to 96 percent in Mizoram. Similarly, the availability of Autoclave varies from the 62 percent of the PHCs in Chattisgarh (which is the lowest) to all the PHCs in Mizoram.

(e) MTP suction aspirator

The provision of safe abortion services for women having an unwanted pregnancy is one of the functions of the PHCs. For conducting an abortion PHCs are expected to have an MTP suction respirator. Among all the equipment for which data are presented in Table P7, MTP suction aspirator is the least available equipment. More than 80 percent of the PHCs in Jammu & Kashmir, Himachal Pradesh, Uttaranchal, Haryana, Nagaland, Manipur, Mizoram, Tripura, Meghalaya and Karnataka have a MTP suction aspirator. The situation of Bihar is worse where only in 18 percent of PHCs have this MTP suction aspirator.

(f) Labour room table and equipment

In the context of provision of services of institutional deliveries, the availability of labour room table and equipment in PHCs is essential. In 91-93 percent of the surveyed PHCs in India; labour room table and equipment are available respectively, which implies that more than 90 percent of the PHCs in India posses necessary equipment to conduct deliveries. The availability of labour room table and equipment ranges from the highest (100%) in some north eastern states to the lowest in Bihar (74%). Thus, the situation in Bihar is again poor when compared to other states (see Fig. 5.10).



5.8 Performance and Programme (Table P8)

PHCs are expected to provide various services in the area of maternal and child health care, family planning and treatment of RTI/STI. As seen in Table P8, PHCs rendered family planning services (65 percent IUD insertion, 9 percent male and 38 percent female sterilization). Around 58 percent of PHCs, conducted delivery during the last three months. In Tripura, all the PHCs conducted delivery, while only 22 percent of the PHCs, in Himachal Pradesh conducted delivery. At the all India level, only 6 percent of the PHCs provided MTP services. The situation in most of the state except Tripura in terms of MTP services is more or less the same and highly unsatisfactory. Similarly, only 22 percent of the PHCs provided neonatal care, which varies from three percent in Kerala to hundred percent in Tripura.

Treatment for pneumonia and diarrhoea are provided by 53 percent and 68 percent of the PHCs respectively. Eighty percent of the PHCs and more in Rajasthan, Nagaland, Tripura, Meghalaya, and Madhya Pradesh treated children for pneumonia and diarrhoea. But Kerala, shows one of the poorest performances where 2-3 percent of the children were treated for pneumonia and diarrhoea.

5.9 Adequate Equipment (Table P9)

The needles, syringes, autoclave and disposal items have their own significance at the PHCs. The PHCs need all these items for day-to-day functioning and requirement. But the situation of needles, syringes, autoclave and disposal items is not adequate in all the PHCs in India. Sixty-two to eighty percent of the PHCs at the all India level have adequate supplies of these four items. Except for Bihar, which has less than 60 percent, all these four sets of equipment are found to be adequate in more than 91 percent of the PHCs.

5.10 Percentage of PHCs Adequately Equipped (Table P10)

Table P10 shows state-wise adequacy of each component of critical inputs. In India 32, 48, 40, 41, and 20 percent of the PHCs have adequate critical inputs in infrastructure, staff, supply, equipment and training respectively. A little less than half of the PHCs are adequate in staff, but only about 20-41 percent are found adequate in infrastructure, equipment, training and supplies. In most of the states, the pattern of adequacy is the same with a few exceptions. The situation of PHCs in terms of infrastructure and training is far from satisfactory. Tripura has the highest percentage of PHCs with adequate infrastructure, staff, supply, equipped, and training. In Tamil Nadu, Karnataka, Maharashtra, Gujarat, Tripura and Meghalaya, 58 percent to hundred percent

of the PHCs have adequate infrastructure, staff, supply and equipment. The situation of PHCs, in terms of adequately equipped critical inputs (infrastructure, staff, supply, equipment and training) is marginal in states of Madhya Pradesh, Chattisgarh, Orissa, West Bengal, Arunachal Pradesh, Bihar, Uttar Pradesh and Rajasthan.

Table P1: Status of Infrastructure in Primary Health Centres in the states of India, Facility Survey, 2003

						Percen	tage of PHC	s having			
Sl. No	State	No. of PHCs	Own *building	Toilet Facility #	Tap Water @	Electricity Available	Labour room	Laboratory**	Telephone	Vehicle Functional	PHCs with at least one bed
1	Jammu & Kashmir	290	65.2	52.8	55.9	69.9	36.7	67.2	7.3	27.6	92.0
2	Himachal Pradesh	199	84.9	55.8	81.4	90.4	30.2	44.2	16.2	18.0	69.3
3	Punjab	71	100.0	60.6	46.5	80.3	45.1	46.5	49.3	11.3	95.8
4	Uttaranchal	144	77.1	22.2	41.0	59.0	22.9	14.6	16.0	21.5	95.1
5	Haryana	262	98.9	57.3	48.5	85.9	40.1	66.8	68.6	5.3	99.0
6	Rajasthan	671	99.3	71.4	38.2	79.6	66.0	68.3	7.3	10.3	95.8
7	Uttar Pradesh	2081	74.2	14.7	5.7	45.0	36.0	29.8	5.5	18.1	89.3
8	Bihar	845	78.8	29.5	2.1	32.0	27.0	68.0	2.4	21.9	3.9
9	Arunachal Pradesh	41	100.0	43.9	80.5	82.9	61.0	14.6	31.7	51.2	73.2
10	Nagaland	37	100.0	40.5	67.6	67.6	73.0	29.7	10.8	37.8	100.0
11	Manipur	32	90.6	25.0	12.5	81.3	40.6	12.5	3.1	15.6	59.4
12	Mizoram	27	100.0	51.9	0.0	96.3	92.6	92.6	44.4	59.3	100.0
13	Tripura	11	100.0	18.2	100.0	100.0	100.0	100.0	100.0	72.7	100.0
14	Meghalaya	25	100.0	100.0	52.0	92.0	96.0	60.0	20.0	52.0	100.0
15	Assam	290	99.0	37.6	14.8	65.5	56.2	29.0	3.8	13.8	41.7
16	West Bengal	209	93.8	85.2	11.5	61.2	56.0	4.8	11.0	3.3	23.9
17	Jharkhand	285	86.3	39.3	2.8	33.0	21.8	24.6	4.2	25.6	76.5
18	Orissa	595	99.7	28.1	5.7	47.7	25.7	6.9	1.7	1.0	46.4
19	Chattisgarh	320	95.3	56.6	4.1	54.7	20.6	16.9	1.6	3.8	45.0
20	Madhya Pradesh	729	92.6	56.7	16.2	64.1	41.4	8.6	3.7	1.8	54.4
21	Gujarat	356	99.7	91.3	59.3	96.1	66.9	86.2	85.7	86.5	92.7
22	Maharashtra	677	98.7	87.7	49.6	95.3	78.9	84.0	47.1	56.4	96.8
23	Andhra Pradesh	380	96.6	89.5	16.3	98.4	87.4	89.2	36.3	43.2	92.4
24	Karnataka	540	99.1	88.9	40.7	95.9	61.3	52.6	58.7	17.2	77.6
25	Kerala	70	94.3	98.6	24.3	92.9	42.9	31.4	35.7	41.4	48.6
26	Tamil Nadu	501	99.4	98.2	34.3	99.8	95.6	67.5	39.7	41.7	73.5
	India	9688	89.2	52.3	23.5	66.4	48.4	45.6	19.8	22.8	71.3

Note: @ Water Supply through Tap only # Toilet facility: Flush toilet.

* Own building also includes rent free and donated building.

** At least one basic Laboratory.

Table P2: Staff position in Primary Health Centres in the states of India, Facility Survey, 2003

					Perc	entage of	PHCs with a	t least one	
GL N	G	No. of	N	Medical Offi	icer	Health	Assistant**		
Sl. No	State	PHCs	All (Male &Female)	Medical Officer Female*	Quarters occupied by MO	Male	Female	Female Health Worker*** (MPW)	Laboratory Technician @
1	Jammu & Kashmir	290	78.2	35.0	65.2	83.0	78.6	88.5	78.2
2	Himachal Pradesh	199	71.8	12.9	64.6	82.4	81.0	86.0	62.3
3	Punjab	71	59.0	14.3	32.0	63.6	51.6	80.4	45.0
4	Uttaranchal	144	79.0	3.5	73.8	90.6	64.9	92.3	48.5
5	Haryana	262	92.7	39.0	58.7	57.0	48.8	86.9	60.3
6	Rajasthan	671	85.5	11.0	80.5	87.4	86.5	88.0	77.8
7	Uttar Pradesh	2081	81.2	3.0	74.2	92.2	88.6	89.7	52.8
8	Bihar	845	98.1	15.1	62.3	30.9	35.7	80.0	20.2
9	Arunachal Pradesh	41	92.5	21.6	96.9	79.2	40.0	60.0	50.0
10	Nagaland	37	77.8	7.1	80.8	95.5	100.0	80.0	73.1
11	Manipur	32	100.0	21.9	82.6	87.5	86.7	100.0	57.9
12	Mizoram	27	95.7	9.1	91.7	100.0	100.0	100.0	100.0
13	Tripura	11	90.9	20.0	90.9	100.0	80.0	100.0	100.0
14	Meghalaya	25	95.8	52.2	87.5	85.0	69.2	86.7	95.5
15	Assam	290	84.5	15.4	61.5	90.4	88.0	91.0	82.1
16	West Bengal	209	74.5	6.8	42.7	66.7	85.7	100.0	76.9
17	Jharkhand	285	89.6	28.7	70.0	71.3	84.4	79.6	25.4
18	Orissa	595	65.4	2.9	49.5	66.7	0.0	0.0	0.0
19	Chhatisgarh	320	46.5	6.8	49.6	79.0	80.7	17.5	47.7
20	Madhya Pradesh	729	60.3	10.4	44.2	72.6	78.5	78.5	45.2
21	Gujarat	356	94.4	0.9	58.4	58.2	76.3	75.1	63.0
22	Maharashtra	677	97.6	0.0	85.5	91.4	93.6	93.2	80.0
23	Andhra Pradesh	380	74.3	37.7	34.1	84.6	88.7	100.0	70.1
24	Karnataka	540	45.6	24.0	65.1	55.3	86.4	98.3	46.9
25	Kerala	70	90.0	39.7	31.0	94.7	91.2	100.0	77.8
26	Tamil Nadu	501	97.4	69.1	21.0	97.5	100.0	93.3	75.7
	India	9688	80.0	15.5	64.1	81.0	85.3	89.6	65.0

Note: * Column (4) Female Doctor from column (3) all. = At least one MO occupied quarter is taken from No. of PHCs having quarter NA: Information Not Available, ** Taken from Number of PHCs having sanction post, *** Taken from Number of PHCs having sanction post, @ Taken from Number of PHCs having sanction post

Table P3. Training status of Medical Officers in Primary Health Centres in the states of India, Facility Survey, 2003

Sl.	State	No. of	Percentage of PHC having at least one MO received training during last three years							
No		PHCs	Sterilization*	NSV ¹	MTP ²	RCH ³				
1	Jammu & Kashmir	290	19.0	13.4	29.0	61.4				
2	Himachal Pradesh	199	10.1	9.5	18.6	48.2				
3	Punjab	71	12.7	8.5	16.9	49.3				
4	Uttaranchal	144	0.7	4.2	4.9	45.8				
5	Haryana	262	32.1	13.0	40.8	77.5				
6	Rajasthan	671	8.8	8.2	15.4	47.4				
7	Uttar Pradesh	2081	9.2	8.6	5.9	47.4				
8	Bihar	845	0.1	24.0	12.8	14.7				
9	Arunachal Pradesh	41	14.6	4.9	29.3	34.1				
10	Nagaland	37	8.1	0.0	24.3	48.6				
11	Manipur	32	31.3	21.9	31.3	37.5				
12	Mizoram	27	77.8	14.8	55.6	51.9				
13	Tripura	11	81.8	81.8	100.0	81.8				
14	Meghalaya	25	44.0	32.0	56.0	80.0				
15	Assam	290	19.7	11.7	29.0	53.1				
16	West Bengal	209	8.1	7.2	11.5	12.9				
17	Jharkhand	285	42.5	28.8	28.8	63.5				
18	Orissa	595	7.7	6.4	11.6	49.1				
19	Chhatisgarh	320	2.8	2.5	2.5	13.4				
20	Madhya Pradesh	729	10.3	7.1	9.7	33.1				
21	Gujarat	356	8.7	5.1	10.7	70.5				
22	Maharashtra	677	29.4	15.7	11.7	76.4				
23	Andhra Pradesh	380	39.5	13.9	16.3	50.0				
24	Karnataka	540	24.1	6.1	16.7	56.3				
25	Kerala	70	5.7	2.9	15.7	68.6				
26	Tamil Nadu	501	18.2	6.6	28.5	50.3				
	India	9688	14.6	10.8	14.6	47.4				

^{*} Tubectomy.
1 No scalpel vasectomy.

² medical termination of pregnancy.3-Reproductive and child health integrated training of 12 days duration.

Table P4 Training status of Paramedical Staff in Primary Health Centres in the states of India, Facility Survey, 2003

Sl.	State	No. of	Percentag	e of PHCs, a	t least one Pai last th	ramedical ree years	staff receiv	ved trainin	g during
No	State	PHCs	IUD insertion	Checking BP	CDD/ORT	UIP	CSSM	RCH	ARI
1	Jammu & Kashmir	290	49.0	36.9	36.6	51.4	37.9	64.1	31.4
2	Himachal Pradesh	199	39.7	33.7	42.2	41.2	40.7	55.8	40.7
3	Punjab	71	62.0	36.6	47.9	57.7	52.1	73.2	43.7
4	Uttaranchal	144	63.9	61.1	66.7	71.5	66.0	70.8	62.5
5	Haryana	262	75.6	45.8	69.1	71.0	70.6	84.4	65.6
6	Rajasthan	671	41.7	28.6	37.6	36.5	34.0	66.3	38.0
7	Uttar Pradesh	2081	66.3	53.6	65.6	69.8	65.9	62.0	55.4
8	Bihar	845	88.9	17.3	39.9	54.0	18.2	37.2	26.6
9	Arunachal Pradesh	41	41.5	12.2	19.5	26.8	2.4	34.1	0.0
10	Nagaland	37	83.8	86.5	81.1	75.7	89.2	91.9	83.8
11	Manipur	32	21.9	0.0	21.9	40.6	37.5	43.8	9.4
12	Mizoram	27	77.8	77.8	74.1	81.5	44.4	48.1	70.4
13	Tripura	11	90.9	27.3	36.4	90.9	45.5	100.0	9.1
14	Meghalaya	25	68.0	60.0	56.0	60.0	60.0	68.0	56.0
15	Assam	290	75.5	66.6	84.8	82.1	85.2	89.0	73.8
16	West Bengal	209	7.2	2.9	6.7	9.6	12.4	13.4	7.7
17	Jharkhand	285	77.9	58.2	62.1	71.6	59.6	77.2	45.6
18	Orissa	595	24.5	17.0	24.7	34.3	36.0	50.6	27.6
19	Chhatisgarh	320	20.3	10.6	26.9	19.1	35.9	37.2	24.1
20	Madhya Pradesh	729	51.6	35.0	45.1	50.0	61.0	60.1	44.4
21	Gujarat	356	29.2	10.1	24.7	30.9	33.1	95.2	24.4
22	Maharashtra	677	5.8	0.7	4.4	2.2	0.7	97.2	1.8
23	Andhra Pradesh	380	62.6	99.5	99.7	99.7	99.7	99.7	99.7
24	Karnataka	540	80.2	90.4	93.7	95.2	90.6	97.2	93.1
25	Kerala	70	40.0	92.9	92.9	92.9	92.9	92.9	92.9
26	Tamil Nadu	501	99.0	99.8	100.0	100.0	99.8	95.8	100.0
	India	9688	56.2	43.0	52.7	56.7	52.8	68.5	48.0

Table P5: Stock of selected items of health care in Primary Health Centres in the states of India, Facility Survey, 2003

						P	ercentage of	PHCs havi	ng some stoc	k on the da	y of survey				
Sl.	State	No. of	Co	ontraceptives			Prophyla	ctic drugs				Vac	ccines		
No.	State	PHCs	Nirodh	Oral Pill	IUD	IFA (Large)	IFA (Small)	Vit . A	ORS Packet	BCG	DPT	OPV	Measles	DT	TT
1	Jammu & Kashmir	290	52.4	67.0	61.0	85.0	85.5	85.5	73.1	52.4	65.5	65.2	63.4	58.3	69.0
2	Himachal Pradesh	199	714	58.3	48.2	60.3	54.0	63.3	71.4	46.7	50.0	50.8	47.2	41.2	53.8
3	Punjab	71	58.0	49.3	61.0	72.0	62.0	62.0	56.0	62.0	63.4	65.0	62.0	56.3	63.4
4	Uttaranchal	144	56.0	49.3	40.3	50.0	47.2	46.0	62.0	24.3	31.3	29.2	32.0	24.3	33.3
5	Haryana	262	74.0	67.9	75.2	73.2	73.7	71.0	74.7	61.8	64.5	69.8	68.7	46.2	71.0
6	Rajasthan	671	92.4	86.3	89.0	84.2	84.0	84.4	89.4	57.1	67.5	66.5	64.4	46.1	65.3
7	Uttar Pradesh	2081	44.4	44.0	39.4	49.0	42.0	37.0	46.5	22.5	24.0	25.2	24.5	8.1	25.0
8	Bihar	845	50.4	50.1	53.0	61.4	63.3	61.4	51.3	17.4	15.0	17.3	16.0	10.0	16.0
9	Arunachal Pradesh	41	63.4	71.0	44.0	83.0	83.0	71.0	68.3	17.0	39.0	44.0	44.0	15.0	41.5
10	Nagaland	37	68.0	95.0	57.0	92.0	92.0	81.1	95.0	84.0	78.4	73.0	70.3	70.3	81.1
11	Manipur	32	97.0	94.0	72.0	87.5	87.5	69.0	91.0	47.0	59.4	56.3	50.0	37.5	56.3
12	Mizoram	27	18.5	70.4	52.0	67.0	67.0	67.0	52.0	52.0	52.0	52.0	56.0	30.0	52.0
13	Tripura	11	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	82.30	100.0	73.0
14	Meghalaya	25	84.0	92.0	72.0	88.0	96.0	76.0	80.0	76.0	76.0	73.0	72.0	60.0	68.0
15	Assam	290	79.0	77.2	59.0	85.0	86.0	71.0	81.0	49.0	49.0	52.0	52.0	53.4	52.0
16	West Bengal	209	81.3	86.1	64.0	82.0	84.0	84.2	86.1	34.4	21.0	22.5	21.0	15.3	30.0
17	Jharkhand	285	86.0	83.5	80.0	75.0	74.4	78.0	75.4	41.4	43.5	43.0	36.1	35.1	40.4
18	Orissa	595	6.4	7.4	4.4	14.5	12.0	9.0	90.0	15.0	16.0	15.5	14.1	11.1	15.0
19	Chhatisgarh	320	41.0	32.0	21.0	42.0	32.2	30.0	80.0	20.0	22.0	22.2	21.3	16.3	22.2
20	Madhya Pradesh	729	51.3	48.0	37.0	49.0	45.3	38.0	79.4	30.0	32.6	33.2	33.0	21.0	32.0
21	Gujarat	356	87.0	88.5	86.2	67.4	62.0	66.3	74.4	76.0	88.0	91.0	89.0	70.0	83.4
22	Maharashtra	677	65.1	76.0	89.0	31.5	24.0	51.4	78.0	89.0	95.0	91.0	94.1	75.0	92.0
23	Andhra Pradesh	380	51.3	48.4	47.1	20.3	16.0	15.5	82.0	86.3	93.0	91.0	92.4	82.0	92.4
24	Karnataka	540	94.0	93.0	89.4	91.0	87.2	61.5	85.2	70.2	74.1	78.0	76.3	58.5	79.4
25	Kerala	70	61.4	66.0	81.4	56.0	59.0	56.0	91.4	79.0	83.0	84.3	71.4	79.0	86.0
26	Tamil Nadu	501	70.0	62.0	80.0	72.3	100.0	47.1	89.4	93.0	97.0	97.4	96.0	70.1	95.2
	India	9688	59.1	58.4	56.3	57.4	50.2	50.9	71.2	45.2	48.5	49.1	48.1	35.4	48.8

Table P6: Regular supply status in Primary Health Centres in the states of India, Facility Survey, 2003

GI.						Percenta	ge of PHC	s having			
SI. No	State	No. of PHCs	Kit G ¹	Kit I ²	EsOC drug Kit	Mounted Lamp 200W	Oral pills*	Measles Vaccine	IFA Tab (large)*	IFA Tab (Small)*	ORS Packets
1	Jammu & Kashmir	290	35.2	43.8	12.4	7.6	90.7	95.7	96.7	96.8	91.5
2	Himachal Pradesh	199	56.3	62.8	25.1	14.1	96.1	92.6	99.0	98.9	100.0
3	Punjab	71	56.3	54.9	36.6	16.9	100.0	100.0	98.0	97.7	100.0
4	Uttaranchal	144	26.4	27.8	13.2	7.6	100.0	100.0	98.6	100.0	98.9
5	Haryana	262	63.0	46.2	28.2	12.6	93.8	96.1	96.4	97.3	95.3
6	Rajasthan	671	81.0	66.9	36.1	6.9	99.0	98.4	99.5	99.1	98.8
7	Uttar Pradesh	2081	27.2	30.4	22.1	5.6	95.4	98.4	96.0	96.5	96.2
8	Bihar	845	6.6	38.2	28.4	2.5	82.7	92.5	86.7	85.4	84.2
9	Arunachal Pradesh	845	34.1	48.8	36.6	4.9	93.1	88.9	91.2	91.2	78.6
10	Nagaland	37	57.0	48.6	48.6	16.2	82.9	100.0	94.1	94.1	94.3
11	Manipur	32	66.0	37.5	46.9	12.5	90.0	93.8	85.7	85.7	93.1
12	Mizoram	27	63.0	81.5	59.3	3.7	73.7	86.7	94.4	94.4	92.9
13	Tripura	11	64.0	90.9	81.8	100.0	100.0	100.0	90.9	81.8	100.0
14	Meghalaya	25	56.0	60.0	44.0	8.0	100.0	100.0	100.0	100.0	100.0
15	Assam	290	53.4	60.3	38.6	9.0	90.2	96.0	99.2	98.0	95.7
16	West Bengal	209	36.4	35.9	10.0	1.9	68.3	93.0	93.0	92.0	92.8
17	Jharkhand	285	73.3	59.6	24.9	4.9	96.6	99.0	99.1	99.1	98.6
18	Orissa	595	14.0	16.6	10.3	1.0	81.8	97.6	86.0	90.1	97.2
19	Chhatisgarh	320	29.0	24.1	50.6	0.9	84.3	100.0	77.6	84.5	95.3
20	Madhya Pradesh	729	49.5	44.0	32.6	4.7	95.7	100.0	95.7	95.4	95.6
21	Gujarat	356	88.2	84.8	71.3	5.1	99.7	100.0	100.0	100.0	99.6
22	Maharashtra	677	822	77.8	48.7	18.5	98.8	99.8	97.9	98.8	99.0
23	Andhra Pradesh	380	63.0	62.4	34.5	7.6	100.0	100.0	98.7	98.3	100.0
24	Karnataka	540	94.0	90.6	76.5	4.4	100.0	100.0	100.0	100.0	100.0
25	Kerala	70	83.0	44.3	32.9	2.9	100.0	100.0	100.0	100.0	100.0
26	Tamil Nadu	501	94.0	87.2	14.4	17.2	100.0	100.0	100.0	100.0	99.8
	India	9688	50.0	50.5	32.2	7.1	94.6	96.6	96.0	95.8	96.5

^{1&#}x27; IUD insertion kit. 2' Normal delivery kit. 3' Essential Obstetric care drug kit * Supply is taken from the number of PHCs having some stock on the day of survey.

Table P7 Availability of selected equipment in Primary Health Centres in the states of India, Facility Survey, 2003

						Pe	rcentage of PHC	Cs having func	tional			
Sl. No	State	No. of PHCs	Infant Weighing machine ¹	Adult weighing ¹	Deep freezer ²	Vaccine carrier ²	BP instrument ¹	Autoclave ¹	Steam sterilizer drum ¹	MTP suction aspirator ¹	Labour room table ¹	Labour room equipment ¹
1	Jammu &Kashmir	290	89.9	93.4	60.0	93.4	93.0	84.0	90.0	81.4	88.2	93.1
2	Himachal Pradesh	199	96.7	96.1	71.0	76.3	97.6	85.1	85.2	81.4	85.5	91.0
3	Punjab	71	83.9	82.5	69.0	94.4	90.1	82.0	91.2	76.9	95.0	90.2
4	Uttaranchal	144	94.1	88.9	42.4	42.4	84.4	72.4	92.7	90.9	92.9	97.9
5	Haryana	262	94.1	90.6	73.3	92.0	88.0	74.7	91.5	83.0	91.9	92.6
6	Rajasthan	671	90.2	88.9	77.8	91.4	84.1	75.7	87.6	72.7	89.5	92.8
7	Uttar Pradesh	2081	87.6	84.8	27.6	48.5	76.9	79.1	89.1	75.2	94.7	97.5
8	Bihar	845	66.9	66.5	29.6	39.4	82.3	82.5	87.6	17.5	74.3	47.6
9	Arunachal pradesh	845	96.6	100.0	19.5	56.1	97.4	75.0	77.8	77.8	90.5	91.7
10	Nagaland	37	97.1	97.1	29.7	78.4	97.2	93.8	88.0	92.9	100.0	100.0
11	Manipur	32	95.5	100.0	43.8	96.9	85.7	77.8	94.4	100.0	100.0	100.0
12	Mizoram	27	100.0	100.0	77.8	100.0	100.0	100.0	95.8	85.7	100.0	100.0
13	Tripura	11	100.0	90.9	0.0	100.0	100.0	80.0	88.9	80.0	100.0	90.9
14	Meghalaya	25	100.0	100.0	64.0	80.0	91.7	56.3	89.5	90.0	95.8	100.0
15	Assam	290	91.0	89.4	44.5	86.2	86.3	80.3	92.2	71.9	92.6	92.8
16	West Bengal	209	85.1	89.6	31.1	43.5	73.4	64.0	75.0	50.0	56.4	75.8
17	Jharkhand	285	90.0	92.2	21.8	78.2	83.8	80.1	83.8	72.6	86.6	86.7
18	Orissa	595	81.0	77.7	32.1	20.8	86.8	73.7	87.0	54.5	81.3	89.5
19	Chhatisgarh	320	66.7	81.5	29.4	38.1	74.4	61.9	79.9	66.7	76.6	81.3
20	Madhya Pradesh	729	87.3	87.0	41.6	57.0	85.3	79.1	87.2	69.3	86.1	88.4
21	Gujarat	356	93.9	98.6	90.7	95.8	93.7	88.3	91.1	60.6	91.7	92.0
22	Maharashtra	677	97.7	97.6	96.8	99.6	96.1	99.1	98.2	66.0	95.8	98.2
23	Andhra pradesh	380	91.0	97.6	95.0	97.6	84.5	89.3	91.0	69.6	96.0	98.8
24	Karnataka	540	96.1	96.2	69.1	99.1	88.1	81.3	78.6	81.9	93.9	97.6
25	Kerala	70	91.4	98.5	92.9	94.3	82.4	66.7	90.6	44.4	77.5	75.0
26	Tamil Nadu	501	96.9	95.0	96.4	99.6	92.9	89.3	87.5	75.9	98.7	100.0
	India	9688	89.4	89.5	53.0	68.1	85.3	82.0	88.6	62.8	91.2	93.3

^{1.} Equipment functional is from equipment available 2. Including both Freezers (300 and 140 lit.) available and vaccine day carrier available

Table P8Performance of Primary Health Centres for family planning delivery and treatment of children, Facility Survey, 2003

			Percentage	of PHC gi	iving service	onths preceding		of PHCs condu	0 \	
Sl.		No.			surv	ey)		Steriliza	ation**	IUD
No ·	State	of PHCs	Delivery Conducted	МТР	Neo natal care	Children Treated for Pneumonia	Children Treated for diarrhea	Male	Female	Insertion
1	Jammu & Kashmir	290	51.0	12.8	42.8	64.5	85.5	3.4	5.5	42.8
2	Himachal Pradesh	199	21.6	9.5	18.6	54.8	86.4	16.6	31.4	37.7
3	Punjab	71	25.4	9.9	23.9	31.0	63.4	2.8	39.4	66.2
4	Uttaranchal	144	47.2	0.0	13.2	68.1	83.3	5.6	16.7	52.8
5	Haryana	262	33.2	13.0	19.5	60.3	94.3	7.3	35.1	85.1
6	Rajasthan	671	66.2	6.7	34.1	84.9	90.2	4.8	74.8	87.6
7	Uttar Pradesh	2081	50.0	3.6	12.5	61.0	67.8	3.4	32.4	53.6
8	Bihar	845	53.7	7.2	36.4	43.2	34.8	5.4	33.6	55.4
9	Arunachal Pradesh	845	70.7	24.4	63.4	58.5	82.9	.0	4.9	34.1
10	Nagaland	37	91.9	35.1	81.1	89.2	83.8	5.4	8.1	48.6
11	Manipur	32	68.8	21.9	46.9	78.1	90.6	0.0	0.0	65.6
12	Mizoram	27	96.3	22.2	18.5	51.9	88.9	0.0	66.7	63.0
13	Tripura	11	100.0	100.0	100.0	100.0	100.0	90.9	100.0	63.6
14	Meghalaya	25	84.0	16.0	84.0	80.0	92.0	0.0	12.0	64.0
15	Assam	290	46.2	13.4	27.9	70.7	81.0	0.7	18.6	54.8
16	West Bengal	209	16.7	3.3	11.5	27.8	35.9	0.0	4.8	16.3
17	Jharkhand	285	49.8	14.4	33.0	45.3	42.5	3.5	45.6	68.1
18	Orissa	595	23.9	0.3	9.7	49.2	72.8	1.2	6.9	8.4
19	Chhatisgarh	320	70.6	2.5	24.7	75.6	93.8	8.1	38.8	66.9
20	Madhya Pradesh	729	82.0	2.7	34.2	86.4	90.9	8.3	55.2	80.9
21	Gujarat	356	53.9	3.4	11.0	34.6	77.0	0.8	19.1	84.6
22	Maharashtra	677	80.8	3.4	26.1	31.5	72.4	46.4	89.1	89.5
23	Andhra Pradesh	380	93.2	11.3	12.1	8.2	55.5	44.2	96.3	91.8
24	Karnataka	540	58.9	6.7	10.0	50.6	76.1	3.0	10.6	92.2
25	Kerala	70	10.0	7.1	2.9	31.4	85.7	4.3	32.9	78.6
26	Tamil Nadu	501	98.4	5.4	15.0	2.0	3.2	0.0	14.8	90.6
	India	9688	58.1	6.1	22.0	53.0	67.9	8.7	37.9	65.1

^{**}Male sterilization: convectional vasectomy and No-scalpel vasectomy (NSV). Female sterilization: abdominal and Laparoscopy

Table P9 Percentage of PHCs with adequate equipment available in the states of India, Facility Survey, 2003

SI.		No. of		Adequate of Su	ipplies of	
No	State	PHCs	Needles	Syringes	Syringes autoclave	Disposal item used
1	Jammu & Kashmir	290	48.6	46.9	53.8	87.9
2	Himachal Pradesh	199	80.9	80.0	65.3	64.8
3	Punjab	71	73.2	81.7	71.8	98.6
4	Uttaranchal	144	91.7	91.7	67.4	91.7
5	Haryana	262	79.0	80.9	70.2	91.6
6	Rajasthan	671	80.6	83.9	67.7	86.9
7	Uttar Pradesh	2081	72.3	74.7	62.2	88.3
8	Bihar	845	0.1	56.1	56.8	44.7
9	Arunachal Pradesh	41	46.3	51.2	29.3	85.4
10	Nagaland	37	43.2	45.9	18.9	81.1
11	Manipur	32	37.5	40.6	56.3	93.8
12	Mizoram	27	70.4	74.1	48.1	88.9
13	Tripura	11	100.0	100.0	90.9	90.9
14	Meghalaya	25	84.0	92.0	76.0	100.0
15	Assam	290	73.8	72.8	43.1	72.8
16	West Bengal	209	60.8	63.6	33.0	56.0
17	Jharkhand	285	67.7	68.8	48.1	80.0
18	Orissa	595	51.4	51.9	36.5	91.4
19	Chhatisgarh	320	84.4	85.0	25.9	95.6
20	Madhya Pradesh	729	70.2	70.9	42.7	93.9
21	Gujarat	356	71.6	83.1	74.7	88.5
22	Maharashtra	677	84.9	83.8	98.2	50.7
23	Andhra Pradesh	380	49.7	66.8	83.2	95.0
24	Karnataka	540	42.4	45.4	74.4	91.9
25	Kerala	70	70.0	80.0	45.7	78.6
26	Tamil Nadu	501	49.9	62.3	99.4	60.7
	India	9688	61.9	69.8	62.4	79.9

Table P10 Percentage of Primary Health Centres with adequate equipment and critical inputs in the states of India, Facility Survey, 2003

Sl.	C4-4-	No. of	Perce	entage of P	HC having a	t least 60 percer	nt
No	State	PHCs	Infrastructure*	Staff ¹	Supply ²	Equipment ³	Training ⁴
1	Jammu &Kashmir	290	31.4	31.4	28.6	40.3	30.3
2	Himachal Pradesh	199	39.7	29.1	44.2	42.7	20.1
3	Punjab	71	40.8	38.0	43.7	43.7	19.7
4	Uttaranchal	144	27.8	68.1	23.6	27.1	7.6
5	Haryana	262	54.6	51.1	46.2	41.2	50.4
6	Rajasthan	671	33.2	25.6	69.2	53.9	14.8
7	Uttar Pradesh	2081	17.2	52.8	19.5	28.6	12.4
8	Bihar	845	8.9	19.6	11.4	6.2	15.5
9	Arunachal Pradesh	845	70.7	53.7	31.7	26.8	19.5
10	Nagaland	37	59.5	62.2	59.5	40.5	18.9
11	Manipur	32	12.5	65.6	56.3	28.1	37.5
12	Mizoram	27	70.4	40.7	44.4	96.3	59.3
13	Tripura	11	100.0	90.9	100.0	81.8	100.0
14	Meghalaya	25	56.0	68.0	60.0	68.0	56.0
15	Assam	290	21.0	35.2	50.0	32.4	29.7
16	West Bengal	209	12.0	5.7	23.0	8.6	9.1
17	Jharkhand	285	9.8	38.2	50.5	21.4	42.5
18	Orissa	595	3.2	0.2	3.5	15.1	13.4
19	Chhatisgarh	320	2.8	26.3	14.1	8.8	3.8
20	Madhya Pradesh	729	10.0	35.4	32.0	26.2	11.4
21	Gujarat	356	89.0	85.7	83.4	80.6	17.1
22	Maharashtra	677	76.5	95.6	67.4	91.4	31.9
23	Andhra Pradesh	380	59.2	88.4	40.3	84.5	34.5
24	Karnataka	540	58.1	58.0	88.9	61.1	23.1
25	Kerala	70	42.9	91.4	55.7	34.3	18.6
26	Tamil Nadu	501	64.7	96.8	77.8	92.2	27.7
	India	9688	31.8	48.2	39.9	41.3	19.9

^{*} Includes tap water, regular supply of water, electricity telephone, toilet, functional vehicle and Labour room available.

^{1.}Includes Medical officers male, female and paramedical staff.

^{2.}Includes IUD kits, delivery kits, EOsC kit, mounted lamp supply of OP, measles, IFA large and ORS.

^{3.} Includes deep freezer, B.P. instrument, Labour room equipment, autoclave, MTP aspirators and labour room table

^{4.} Training includes only medical officers (Sterilization, NSV, IUD insertion, MTP and RCH foundation skills 12 days duration.

CHAPTER VI

SUB - CENTRE

6.1 Introduction

Sub-Centers (SCs) are the most peripheral health institutions catering to the health care needs of the rural population. It is the most peripheral contact point between the Primary Health Care system and the community. It is manned by one multipurpose worker (male) and one multi-purpose worker (female) /ANM. Even though the sub-centre wise population norm at the national level has been met, there are wide interstate variations.

Under the Facility Survey during 2003, a total 18,385 SCs were surveyed from 370 districts in 26 states of India. This chapter presents the findings from 18,385 surveyed sub-centres.

6.2 Coverage of SCs (Table S1)

(a) Village covered by Sub-Centres

Out of the 18,385 Sub-Centres a little less than one-fourth are from Uttar Pradesh. Around 73 percent of the SCs cover less than six villages at the all India level, and around 26 percent of the SCs covers more than six villages.

At least 80 percent of the SCs covered les than six villages in Jammu & Kashmir, Punjab, Haryana, Rajasthan, Nagaland, Mizoram, Assam, West Bengal, Gujarat, Maharashtra and Kerala. On the contrary, there are states like Himachal Pradesh, Meghalaya and Orissa, where more than 50 percent of the SCs are overloaded with the responsibility of providing the health services to more than six villages.

(b) Distance from village.

At the all India level 48 percent of the SCs have the nearest village located within a radius of one kilometer and around 12 percent of the SCs have the farthest villages located beyond a distance of 10 km and more.

In Himachal Pradesh, Punjab, Haryana, Uttar Pradesh, Uttaranchal, West Bengal, Kerala, Tamil Nadu and Orissa 50 percent or more SCs have the nearest village located at a distance of less than one km, where in Arunachal Pradesh, Nagaland, Manipur and Tripura, 57 percent or more SCs have the farthest village located at a distance of more than 10 km.

(c) Distance from PHC

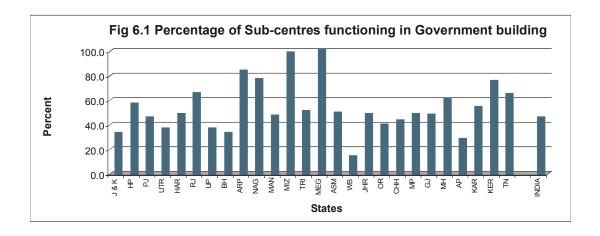
At the all India level 74, percent of the SCs are located at less than one km distance from the PHC, and the remaining SCs are located at a distance of more than 10 km.

In Jammu & Kashmir, Punjab, Haryana, Uttar Pradesh, Bihar, Assam, West Bengal, Jharkhand, Chhatisgarh, Orissa, Andhra Pradesh, Karnataka, Kerala and Tamil Nadu, 70 percent or more Sub-centres are located at a distance of less than ten km from the PHC. Around 60-89 percent of the SCs in Arunachal Pradesh, Nagaland, Manipur, Mizoram and Tripura are located a distance of more than 10 km from the PHC.

6.3 Infrastructure (Table S2)

(a) Own building

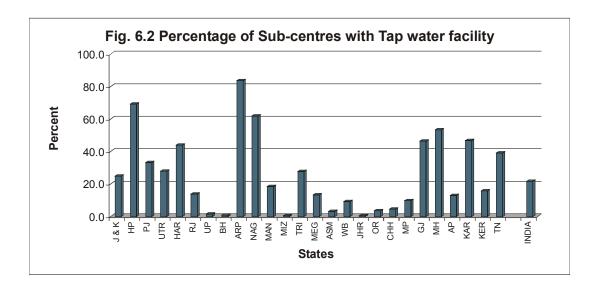
Forty-five percent of SCs have their own government building. Fifty percent or more SCs in Himachal Pradesh, Rajasthan, Arunachal Pradesh, Nagaland, Mizoram, Meghalaya, Maharashtra, Tripura, Karnataka, Kerala and Tamil Nadu function from government buildings (see fig. 6.1). In Jammu & Kashmir, Uttaranchal, Uttar Pradesh, Bihar, West Bengal, Andhra Pradesh and Orissa, 38 percent of the SCs or less are functioning from the government building. The situation is worse in West Bengal, where only 14 percent of the SCs are functioning from the government building.



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(b) Water supply

At the all India level, the proportion of SCs housed in government buildings which are getting water supply through taps is only 21 percent. This means that 79 percent SCs are getting water supply from other sources such as tube well, hand pump, bore well and other sources (see Fig. 6.2).



In Himachal Pradesh, Arunachal Pradesh, Nagaland and Maharashtra more than 50 percent of the SCs have tap water supply, but in the remaining states, the main source of water supply is other than tap water. The water supply through taps in the SCs in Uttar Pradesh, Bihar, Mizoram, Jharkhand, Orissa and Chhattisgarh is almost negligible.

(c) Electricity

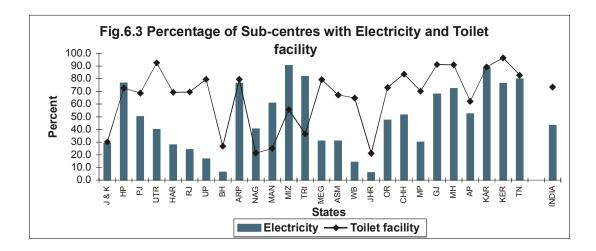
Fifty-seven percent of the SCs, which are functioning from government buildings in India are without any electricity facility. The situation in Jammu & Kashmir, Haryana, Rajasthan, Uttar Pradesh, Bihar, West Bengal, Jharkhand and Madhya Pradesh is serious where only 6 percent to 30 percent of the SCs have a supply of electricity. But at least 80 percent of the sub-centres with an electricity connection are found in the states of Tamil Nadu, Karnataka, Mizoram and Tripura.

(d) Toilet facility

The facility Survey also collected information on the availability of toilets facilities in the SCs. Twenty-six percent of the SCs at the all India level are without a toilet facility, while 74 percent of the SCs have a toilet facility. Eighty percent or more SCs have a toilet facility in Uttaranchal, Uttar Pradesh, Arunachal Pradesh, Meghalaya, Chhattisgarh, Gujarat, Maharashtra, Karnataka, Kerala, and Tamil Nadu.

But only 21-30 percent of the SCs in Jammu & Kashmir, Nagaland, Manipur, and Tripura have toilet facility. The remaining states fall in between these two figures.

Sub centre with electricity and toilet facilities are presented in <u>fig. 6.3</u>. In Karnataka and Arunachal Pradesh, all SCs have electricity as well as toilet facility.



6.4 Staff (Table S3)

The information on health workers of SCs by sex was collected for both sanctioned posts and filled posts. The same information is presented in Table S3. The filled post or the post in position is taken from the total sanctioned posts of SCs in each state.

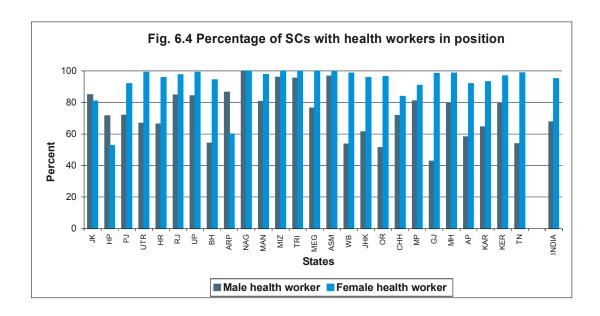
Forty-one percent of the SCs at the all India level do not have a sanctioned post of male health worker. Out of the SCs, which have a sanctioned post of male worker, only 68 percent of them have filled the post.

The proportion of SCs with at least one sanctioned post for male health worker varies from 12 percent in Assam to 99 percent in Tamil Nadu. The situation is not any better in Uttar Pradesh (17%), Rajasthan (17%), Haryana (20%), or Meghalaya (44%) in terms of sanctioned posts of male health worker. Fifty-two percent or more SCs in the remaining states have at least one sanctioned post for male health worker.

With the exception of Gujarat, in most of the states 50 percent or more SCs have at least one post of male health worker in position. The SCs with at least one post of male health worker varies from 43 percent in Gujarat to hundred percent in Nagaland. At least there are 16 states, where 70 percent of the SCs or more have the post of the male health worker in position.

The role of female health worker is very important at SCs. Only five percent of the SCs do not have a female health worker in position. The situation of sanctioned female post in Arunachal Pradesh is the least, where only 35 percent of the SCs have a sanctioned post for a female health worker. In the remaining states, 73 percent SCs or more have a sanctioned post for a female health worker.

Out of those SCs which have at least one sanctioned post for a female health worker, only 53 percent and 60 percent of the SCs in Himachal Pradesh and Arunachal Pradesh respectively have filled the post. But in the remaining states, 81 percent or more SCs have filled the post of female health worker. In Nagaland, Mizoram, Tripura, and Assam all SCs have at least one male and one female health worker (see Fig. 6.4).



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6.5 Staying Place of ANM (Table S4)

The presence of the ANM all 24 hours at the SCs is essential for the people to avail the health services. That is why the government has focused on providing quarters to the ANM at SCs. If the SC is not having any quarters facility, the ANM may stay somewhere else. This information has been presented in Table S4.

(a) SCs, Quarters and own house in SCs Village.

For India as a whole, in 23 percent of SCs, the ANM stays in quarters attached to the SC, and in another 16 percent of SCs, the ANM stays in her own house but in the village where the SC is located.

The percentage of SCs with the ANM staying in the quarters of SCs varies from as low as 0.2 to 0.4 percent in West Bengal and Jammu & Kashmir respectively to as high as 69 percent in Meghalaya. Except for eight states namely, Rajasathan, Arunachal Pradesh, Mizoram, Meghalaya, Maharashtra, Karnaraka, Kerala and Tamil Nadu, in most of the remaining states, 30 percent or very ANM resides at the, SCs quarters.

The proportion of SCs which provide ANM accommodation in the same village varies from only 4 percent in Kerala to 64 percent in Tripura. With a few exceptions here and there in most of the state, 30 percent of the SCs or less have provision for ANM accommodation in the same village.

(b) In SC's area or outside SC's village

The proportion of SCs where the ANM is staying in the SC area, though not in the SC village varies from 4 percent in West Bengal to 42 percent in Haryana. But in Meghalaya, the ANM does not stay in any of the Sub-centres or even in the SC area. At the all India level, only in 22 percent of the SCs, the ANM stays in the SC area.

Cases where the ANM stays outside the SC area varies from 5 percent in Tripura to 88 percent in West Bengal. In some other states such as Jammu & Kashmir, Uttar Pradesh, Bihar, Manipur, and Gujarat, the ANM stays away from the SC area in more than 50 percent of the SCs.

Thus, this is not a conducive situation in India, where a large number of ANMs stay away from the SC or even away from the SC's area.

6.6 Home Visit by ANM

One of the important duties and responsibilities of the ANM is to make home visits in the SC's area and meet needy people particularly, adolescent girls, pregnant women, children, and others to provide advice, RCH and other health services.

The overall situation in India seems to be reasonable; in 96 percent of the SCs, the ANMs made home visits during the two weeks preceding the survey. The ANM makes home visits in all the SCs in Haryana, Tripura, Meghalaya, Assam, Jharkhand and Tamil Nadu. This situation is very discouraging in Himachal Pradesh where the ANM makes home visits in only 41 percent of the SCs. But in most of the states, except Himachal Pradesh (41%), Arunachal Pradesh (76%), Manipur (70%) and Mizoram (66%), the ANM makes home visits in more than 90 percent of the SCs.

6.7 Training of Health Workers (Table S5)

This section highlights the SCs in-sevice training status of at least one staff with focus on IUD, CDD/ORT, UIP, CSSM, RCH and ARI. There are few SCs with staff trained for the aforesaid specialisation. This is serious at the all India level as well as at the state level. A negligible proportion, less than two percent of SCs, received training for IUD insertion at the all India level. The situation is more or less the same in all the states except Jammu & Kashmir, Tripura, Mizoram, and Manipur, where the corresponding figures are in the range of 11-27. In all the states in south India, Uttaranchal, and West Bengal, none of the staff of SCs are trained for IUD.

The staff receiving training for CDD/ORT is found in only 15 percent of the SCs in India. At the state level, the same figure varies from two percent of the SCs in Gujarat to 68 percent of the SCs in Mizoram. The corresponding figures for most of the remaining state are less than 30 percent of SCs.

In service training for UIP, CSSM, RCH and ARI are available by at least one staff member in 17, 14, 19 and 11 percent of the SCs in India. The status of in-service training of SCs staff is quite unsatisfactory. A similar situation prevails in all the states of India.

6.8 Regular Supply of Contraceptives and Vaccines (Table S6)

Table S6 provides information on the status of contraceptives and vaccines for reproductive and child health. At the all India level, at least ninety percent of the SCs, have a regular supply of contraceptives including condoms, oral pills, IUD and other vaccines, such as, IFA large, Vitamin A, ORS and also the delivery disposal kit.

(a) Contraceptives

i. Condom

More than ninety-six percent of the SCs have a regular supply of condoms at the national level. In Tamil Nadu, Tripura and Meghalaya, all SCs received condoms regularly. The supply of condom is not encouraging in Mizoram, Nagaland, Bihar and Manipur where only 50-83 percent of the SCs received condoms on a regular basis. The supply of condoms is regular in at least 90 percent of the Sub-centres in the remaining states.

ii. Oral Pills and IUD:

The supply of oral pills and IUD in the SCs at the state and national levels is more or less the same as in the case of condoms. Overall the supply of oral pills and IUD at the state and national levels is satisfactory. At the national level, 96 percent or more SCs have regular supply. The scenario is similar at the state level with the exception of Nagaland, Mizoram, Manipur and Bihar where supply of oral pills is regular in 67 percent to 87 percent of the SCs and IUD in 40 percent to 80 percent of the SCs. The supply of oral pills and IUD in the remaining states is regular in 90 percent or more SCs.

(b) Vaccines

The supply situation of vaccines, such as, IFA (large), Vitamin A, and ORS packets as observed from the Table S6 presents a very good picture. The supply of all these three vaccines is the lowest in Bihar where 80 percent to 86 percent of the SCs have a regular supply of these vaccines. The regular supply of all these vaccines in all the remaining states is more than the 90 percent of the SCs.

(c) Disposal delivery kit

Around 91 percent SCs have regular supply of DDK at the national level. The supply of DDK varies from 50 percent Sub-centres in Manipur to all the SCs in Andhra Pradesh. Fifty percent to seventy seven percent SCs have regular supply of DDK in the states of Jammu & Kashmir, Bihar, Arunachal Pradesh, Nagaland, Manipur, Mizoram, West Bengal, Madhya Pradesh and Kerala. But supply is regular in at least 87 percent of the SCs in remaining all states.

6.9 Equipment and its utilization (Table S7)

Certain equipment is essential for the delivery of RCH services at SCs. This section discusses the status of SCs with respect to the availability of kits which includes Kit A, Kit B, Kit C and equipment comprising needle syringe, immunization card and eligible couple registers.

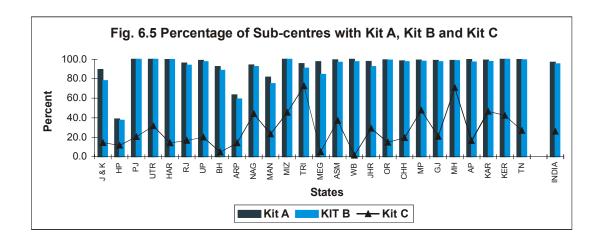
(a) Availability and utilization of kit A, kit B, and kit C

At the all India level, 97 percent of the SCs received kit A, and more than 99 percent of those SCs have utilized kit A.

The supply and utililsation of kit A is unsatisfactory for the state of Himachal Pradesh, where only 39 percent the SCs received it, followed by Arunachal Pradesh (63%). Four-fifths or more of the SCs received kit A in the remaining states in India. Most of the SCs, which had received kit A, used it in all the states in India. The utilisation is more or less satisfactory in all the states.

Ninety-five percent of the SCs at the all India level have got the supply of kit B and 99 percent of them have utilised it. The availability of kit B in Himachal Pradesh is very poor where only 38 percent of the SCs have received it. Which is followed by the state of Arunachal Pradesh (59%) and Jammu & Kashmir (78%). However, the kit B was received by 86 percent to hundred percent SCs in remaining states in India. The utilisation of the same kit B at national level as well as state is quite satisfactory.

The availability of kit C at the national level as well as state level is quite unsatisfactory. Only 26 percent of the SCs received kit C at the national level. At the state level, it varies from one percent in West Bengal to 71 percent in Maharashtra. In all the states except Maharashtra less than 50 percent of the SCs received Kit C. In all the states, where SCs received kit C, most of them have also utilised it. The utilisation is more or less satisfactory. kit A and kit B are more or less equally available at the SCs, but availability of kit C is less compared to kit A, and kit B (see Fig. 6.5)



(b) Adequate supply of needle, syringe, immunization card, and eligible couple register

In the Facility Survey, information was collected on the availability of equipment such as needle, syringe, immunization card and eligible couple register, from all the sampled SCs. Further information was collected on whether this equipment was sufficient for the following one month. All this information is presented in Table S7.

i. Needles

At the all India level, there are adequate needles available in around 92 percent of the SCs. The availability is not pronounced in Manipur, Arunachal Pradesh, Mizoram, Jammu & Kashmir, and Nagaland, where only 39, 51, 64, 68, and 73 percent of the SCs respectively have an adequate supply of needles. At the time of survey, four-fifths of the SCs of the remaining states had a sufficient supply of needles for the following month.

ii. Syringe

The availability of syringes is found at 91 percent of the SCs in India. In Tripura all the Sub centres have adequate syringes for the following month. But only 37 percent of the Sub-centres in Manipur have adequate syringes for the following month. In 50 percent of the SCs or more in most of the remaining states have adequate syringes for the following month.

iii. Immunization card and eligible couple register

The immunization card and eligible couple register are the important ledgers to maintain the immunization and eligible couple records respectively. At the all India level, 92 percent, and 85 percent of the SCs have adequate stock of immunization cards and eligible couple registers respectively.

In Nagaland, Arunachal Pradesh, Manipur, Bihar, Jammu & Kashmir, West Bengal, Gujarat and Kerala, 40 percent to 89 percent of the SCs have adequate stock of immunization cards for the following month, while in the rest of the states, ninety percent of the SCs or more have adequate stock of immunization cards for the following month.

At the all India level and in most of the states, the situation of eligible couple register is not very satisfactory. Only in Kerala, do all the SCs have adequate eligible couple registers for the next month. The situation is worse in Arunachal Pradesh, where only 20 percent of the SCs have a register for the month to follow. Four-fifths of the SCs of the rest of the states have adequate stock of eligible couple registers for month to come.

6.10 Performance of Sub-Centre (Table S8)

All the SCs are expected to provide various services in the area of maternal and child health care, family planning and others. Information on the performance of SCs during the three months preceding the date of survey was collected. As seen in Table 8, out of 18,385 SCs surveyed, the highest percent of SCs which have provided family planning services are 75 percent for IUD insertion and 87 percent for distribution of condoms. As high as 96 percent of SCs in India registered ANC cases and provided ANC services, and PNC services separately. More than four-fifths of the SCs in India conducted delivery. Ninety-one to ninety-five percent of SCs provided immunization services to children and infants respectively. A little less than four-fifths of the SCs also treated cases of ARI at the national level.

(a) ANC, delivery and PNC services

The registration of ANC varies from only 39 percent of the SCs in Himachal Pradesh to nearly all the SCs in Uttaranchal, Haryana, Tripura, Tamil Nadu, Maharasthra, Gujarat, Madhya Pradesh, Chhattisgarh, and Uttar Pradesh. In many states, more than 90 percent of the SCs registered the ANC cases.

The proportion of SCs providing ANC services varies from a low of 37 percent of SCs in Himachal Pradesh to 47 percent SCs in Arunachal Pradesh (second lowest), and

73 percent SCs in Manipur (third lowest), to all SCs in Uttaranchal, Haryana, Tripura, Chhattisgarh, Madhya Pradesh, Gujarat, and Tamil Nadu. The situation in the rest of the states seems to be good where more than 80 percent of the SCs provided ANC services.

Only 10 percent to 50 percent of the SCs conducted delivery in West Bengal (10%), Arunachal Pradesh (23%), Jammu & Kashmir (40%) and Himachal Pradesh (50%) during the last three months preceding the survey. Ninety nine percent of the SCs in Uttaranchal conducted delivery, which is the highest among the states.

As far as PNC services are concerned, only 31 percent to 85 percent of the SCs provided PNC services in Arunachal Pradesh (31%), Himachal Pradesh (38%), Manipur (65%), Jammu & Kashmir (78%), Mizoram (79%), and Bihar (85%). But more than 91 percent of the SCs in remaining states in India provided PNC services, including Gujarat where nearly all the SCs provided PNC services.

(b) Family planning performance

The performance of SCs in the field of family planning is judged by the services provided by the SCs in the form of IUD insertion, condoms and oral pills distribution.

Around 3 percent to 25 percent of the SCs did IUD insertion cases in Arunachal Pradesh (3%), Assam (14%), Jammu & Kashmir (14.2%), Andhra Pradesh (20%), Meghalaya (21%), West Bengal (24.6%) and Manipur (25%). But in the rest of the states, more than 50 percent of the SCs have conducted IUD insertion. The IUD insertion is the highest in Tamil Nadu, where 95 percent of the SCs rendered this service, followed by Punjab with 90 percent.

The situation of condom distribution by SCs is unsatisfactory in Arunachal Pradesh (13%), Mizoram (17%), Himachal Pradesh (41%), and Nagaland (50%). All the SCs in Tripura distributed condoms. Fifty-five percent or more SCs distributed condoms in the remaining states in India.

In Tripura, all the SCs distributed oral pills. But the distribution of oral pills is not satisfactory in Arunachal Pradesh (35%), Manipur (48%), and Bihar (70%), where less number of SCs distributed it. However, four-fifths or more SCs distributed oral pills in the rest of the states.

(c) Infants and child immunization

The SCs providing infant and child immunization services is not satisfactory in Arunachal Pradesh, where only 27 percent of the SCs provided both these categories of

health care services respectively. The corresponding figures for Bihar are 73 percent and 68 percent respectively. But the situation in most of the remaining states is much better, where four-fifths or more SCs have been providing immunization services to infants and children during the three months preceding the survey.

(d) ARI and diarrhoea treatment

Table S8 shows, that 22 percent of the SCs did not treat ARI and diarrhoea cases at all at the national level. The situation in a few states including Bihar (33%), Andhra Pradesh (40%), and Jharkhand (49%) leaves much to be desired.

Table S1: Percentage of Sub Centers by Coverage in the state of India, Facility Survey, 2003

CI		No.	Villages co	vered by	Distance from	n villages	Distance fr	om PHC
SI No.	State	of SC's	Less than six km	More six km	Nearest village ¹	Farthest village ²	Less than ten km	More than ten km
1	Jammu & Kashmir	529	90.5	9.5	47.4	11.9	74.3	25.7
2	Himachal Pradesh	365	16.7	56.4	65.4	16.4	29.9	14.8
3	Punjab	142	90.8	9.2	62.0	4.9	82.4	17.6
4	Uttaranchal	262	67.9	32.1	50.4	14.5	66.0	31.3
5	Haryana	523	93.5	6.5	75.0	2.5	72.1	27.9
6	Rajasthan	1302	90.5	9.1	35.4	7.5	65.0	33.6
7	Uttar Pradesh	4346	76.1	23.8	68.4	3.2	87.4	11.9
8	Bihar	1237	66.4	29.5	38.1	1.7	81.3	18.7
9	Arunachal Pradesh	71	62.0	38.0	11.3	64.8	11.3	88.7
10	Nagaland	68	94.1	5.9	7.4	57.4	32.4	67.6
11	Manipur	60	76.7	23.3	36.7	63.3	31.7	68.3
12	Mizoram	53	100.0	0.0	11.3	35.8	39.6	60.4
13	Tripura	22	68.2	31.8	4.5	95.5	18.2	81.8
14	Meghalaya	39	43.6	56.4	46.2	28.2	56.4	43.6
15	Assam	522	86.0	12.5	34.1	2.9	83.5	16.5
16	West Bengal	418	81.8	18.2	73.2	6.2	87.6	12.4
17	Jharkhand	289	46.0	44.3	13.1	43.9	70.9	29.1
18	Orissa	1270	43.5	56.4	58.3	15.7	84.9	15.1
19	Chhatisgarh	678	70.9	29.1	35.4	22.9	69.9	30.1
20	Madhya Pradesh	1378	61.5	38.3	34.9	17.9	63.9	36.1
21	Gujarat	712	94.5	5.5	11.9	15.6	64.0	36.0
22	Maharashtra	1351	88.0	11.9	14.4	21.0	58.8	41.1
23	Andhra Pradesh	762	68.9	31.0	40.7	14.7	71.3	28.7
24	Karnataka	881	78.8	21.1	44.5	13.3	72.1	27.9
25	Kerala	158	98.7	1.3	79.1	4.4	90.5	9.5
26	Tamil Nadu	947	52.9	47.1	62.5	10.9	74.2	25.8
	India	18385	73.0	25.9	47.6	11.5	74.2	24.4

Percentage may not add up to 100 percentage due to missing cases. 1 Less than one kilometer, 2 More than ten kilometre

Table: S2-Percentage of Sub Centers by Status of infrastructure in the state of India, Facility Survey, 2003

Sl.	State	No of	SC Functioning	Water	supply*	Electricity*	Toilet*
No	State	SCs	Govt. building	Тар	Others	Yes	Yes
1	Jammu & Kashmir	529	32.5	24.4	75.0	29.1	30.2
2	Himachal Pradesh	365	56.2	68.8	31.2	76.6	72.7
3	Punjab	142	45.1	32.8	67.2	50.0	68.8
4	Uttaranchal	262	36.3	27.4	72.6	40.0	92.6
5	Haryana	523	47.6	43.4	56.6	27.7	69.5
6	Rajasthan	1302	65.0	13.4	86.4	24.0	69.7
7	Uttar Pradesh	4346	36.2	1.1	98.8	16.7	79.6
8	Bihar	1237	32.5	0.2	99.8	6.2	26.6
9	Arunachal Pradesh	71	83.1	83.1	16.9	76.3	79.7
10	Nagaland	68	76.5	61.5	38.5	40.4	21.2
11	Manipur	60	46.7	17.9	82.1	60.7	25.0
12	Mizoram	53	98.1	0.0	100.0	90.4	55.8
13	Tripura	22	50.0	27.3	72.7	81.8	36.4
14	Meghalaya	39	100.0	12.8	87.2	30.8	79.5
15	Assam	522	49.0	2.7	97.3	30.9	67.2
16	West Bengal	418	13.6	8.8	89.5	14.0	64.9
17	Jharkhand	289	47.8	.0	100.0	5.8	21.0
18	Orissa	1270	38.9	3.0	97.0	47.2	73.1
19	Chhatisgarh	678	42.8	4.1	95.9	51.4	83.8
20	Madhya Pradesh	1378	47.8	9.3	90.7	30.0	70.3
21	Gujarat	712	47.5	45.9	54.1	68.0	91.4
22	Maharashtra	1351	60.4	52.9	45.7	72.3	91.1
23	Andhra Pradesh	762	27.4	12.4	87.6	52.2	62.2
24	Karnataka	881	53.7	46.3	53.7	88.8	89.4
25	Kerala	158	74.7	15.3	84.7	76.3	96.6
26	Tamil Nadu	947	64.1	38.7	60.6	79.9	82.9
	India	18385	45.2	21.1	78.8	43.2	73.6

^{*} Percentage taken from Sub Center with Government Building.

Table: S3- Percentage of Sub Centres with staff in position in the state of India, Facility Survey, 2003

SI		N C	Health	worker Male	Health wo	orker Female
No.	State	No of SCs	Post Sanction	In position*	Post Sanction	In position*
1	Jammu & Kashmir	529	82.6	84.9	75.6	80.8
2	Himachal Pradesh	365	79.7	71.5	96.7	52.7
3	Punjab	142	82.4	71.8	96.5	92.0
4	Uttaranchal	262	19.5	66.7	99.6	99.2
5	Haryana	523	91.6	66.2	99.2	95.8
6	Rajasthan	1302	17.1	84.7	95.6	97.6
7	Uttar Pradesh	4346	16.6	84.2	99.4	99.2
8	Bihar	1237	55.6	54.2	84.4	94.3
9	Arunachal Pradesh	71	83.1	86.4	35.2	60.0
10	Nagaland	68	76.5	100.0	98.5	100.0
11	Manipur	60	51.7	80.6	73.3	97.7
12	Mizoram	53	94.3	96.0	96.2	100.0
13	Tripura	22	100.0	95.5	100.0	100.0
14	Meghalaya	39	43.6	76.5	94.9	100.0
15	Assam	522	11.5	96.7	92.1	99.8
16	West Bengal	418	93.3	53.6	99.0	98.6
17	Jharkhand	289	55.4	61.3	87.5	95.7
18	Orissa	1270	88.4	51.4	99.9	96.5
19	Chhatisgarh	678	98.5	71.7	100.0	83.8
20	Madhya Pradesh	1378	90.4	81.0	98.3	90.8
21	Gujarat	712	70.6	42.7	100.0	98.5
22	Maharashtra	1351	95.4	79.5	99.8	98.6
23	Andhra Pradesh	762	69.8	58.1	99.6	92.0
24	Karnataka	881	61.4	64.5	100.0	93.1
25	Kerala	158	67.1	79.2	100.0	96.8
26	Tamil Nadu	947	98.5	53.8	100.0	98.7
	India	18385	58.7	67.7	96.7	95.1

^{*} In position are from Number of Sub centers having sanction post.

Table S4: Percentage of Sub Centres by staying place of ANM in the state of India, Facility Survey, 2003

Sl	State	No.		Perce	ntage of SCs	5	
no		of SC	In quarter	In own	In SC	Out side	Home
			of SC	house in SC	area	SC area	visits**
				village			
1	Jammu & Kashmir	529	0.4	12.6	10.6	68.8	83.9
2	Himachal Pradesh	365	13.9	11.8	40.3	28.5	41.4
3	Punjab	142	7.7	13.4	29.6	49.3	98.6
4	Uttaranchal	262	17.6	12.6	30.9	38.9	98.5
5	Haryana	523	13.4	10.3	41.7	34.6	100.0
6	Rajasthan	1302	33.9	12.0	31.1	22.4	96.5
7	Uttar Pradesh	4346	14.8	8.5	17.6	59.0	99.1
8	Bihar	1237	3.6	12.2	32.0	52.1	92.3
9	Arunachal Pradesh	71	33.8	38.0	8.5	19.7	76.1
10	Nagaland	68	4.4	41.2	27.9	26.5	98.5
11	Manipur	60	5.0	21.7	16.7	56.7	70.0
12	Mizoram	53	30.2	37.7	18.9	13.2	66.0
13	Tripura	22	13.6	63.6	18.2	4.5	100.0
14	Meghalaya	39	69.2	12.8	.0	17.9	100.0
15	Assam	522	23.4	28.2	22.0	26.4	99.6
16	West Bengal	418	0.2	7.2	4.3	87.8	94.5
17	Jharkhand	289	6.2	21.5	29.1	43.3	99.7
18	Orissa	1270	29.2	14.1	35.6	20.9	99.1
19	Chhatisgarh	678	30.2	38.1	15.2	16.5	99.3
20	Madhya Pradesh	1378	24.1	20.5	20.2	35.2	98.8
21	Gujarat	712	22.2	14.2	11.8	51.8	99.6
22	Maharashtra	1351	44.0	16.6	14.7	24.4	89.8
23	Andhra Pradesh	762	12.7	57.2	8.7	21.4	94.6
24	Karnataka	881	41.9	4.2	25.1	28.8	96.8
25	Kerala	158	51.3	3.8	9.5	35.4	93.7
26	Tamil Nadu	947	41.4	12.0	21.5	24.3	99.9
	India	18385	22.5	15.9	21.7	39.7	95.7

Note: somewhere percentage may not 100 due to missing cases. ** Home visits made by ANMs during last two weeks.

Table S5 Percentage of Sub Centres with trained health workers in the state of India, Facility Survey, 2003

SlNo	C4a4a		F	Percentage of	SCs staff re	ceived train	ning	
	State	SC	IUD	CDD/ORT	UIP	CSSM	RCH	ARI
1	Jammu & Kashmir	529	11.2	19.8	22.9	16.6	27.2	17.2
2	Himachal Pradesh	365	4.1	38.2	43.0	35.6	33.7	34.3
3	Punjab	142	4.2	26.8	31.0	24.6	33.8	24.6
4	Uttaranchal	262	0.0	6.1	6.1	4.2	5.0	3.4
5	Haryana	523	0.8	38.2	40.5	22.2	45.1	35.6
6	Rajasthan	1302	1.6	4.2	4.1	4.1	8.0	3.8
7	Uttar Pradesh	4346	0.2	4.8	5.6	3.4	3.9	3.3
8	Bihar	1237	1.8	5.7	9.7	4.4	12.9	3.0
9	Arunachal Pradesh	71	2.8	5.6	7.0	5.6	8.5	7.0
10	Nagaland	68	7.4	55.9	47.1	41.2	50.0	44.1
11	Manipur	60	11.7	13.3	16.7	5.0	6.7	0.0
12	Mizoram	53	15.1	67.9	77.4	32.1	22.6	35.8
13	Tripura	22	27.3	18.2	4.5	0.0	9.1	18.2
14	Meghalaya	39	5.1	10.3	17.9	10.3	12.8	7.7
15	Assam	522	1.9	5.9	5.7	4.2	2.1	4.2
16	West Bengal	418	0.0	12.0	12.7	14.1	11.5	11.2
17	Jharkhand	289	3.8	14.2	13.1	9.7	24.9	6.6
18	Orissa	1270	0.7	22.4	26.8	22.4	27.2	18.8
19	Chhatisgarh	678	0.1	22.6	15.2	26.0	17.6	17.4
20	Madhya Pradesh	1378	1.3	27.9	29.7	31.4	23.2	22.9
21	Gujarat	712	0.1	2.0	1.7	1.1	21.8	1.7
22	Maharashtra	1351	0.1	11.3	9.9	18.6	49.4	8.0
23	Andhra Pradesh	762	0.0	25.3	25.3	25.1	24.8	25.2
24	Karnataka	881	0.0	23.4	24.5	18.7	27.7	24.4
25	Kerala	158	0.0	22.2	23.4	17.7	18.4	17.7
26	Tamil Nadu	947	0.0	34.5	52.4	17.6	27.6	5.0
	India	18385	1.2	15.1	16.9	13.5	19.1	11.4

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Table S6 Percentage of Sub Centres by regular supply of contraceptives and vaccines in the state of India, Facility Survey, 2003

SI.			Perce	ntage of	SCs havi	ng regular	supply		
No.	State	No of SC	Condom	Oral pill	IUDs	IFA (large)	Vit. A	ORS	DDK
1	Jammu & Kashmir	529	89.5	92.0	85.3	92.7	90.1	91.6	73.4
2	Himachal Pradesh	365	95.2	95.3	93.0	96.8	97.6	96.3	90.1
3	Punjab	142	96.9	100.0	97.6	98.6	98.5	96.2	90.5
4	Uttaranchal	262	99.5	99.5	97.8	100.0	100.0	100.0	96.3
5	Haryana	523	98.8	96.9	96.7	97.7	96.3	96.6	87.8
6	Rajasthan	1302	99.3	99.0	99.2	99.5	98.6	99.1	91.2
7	Uttar Pradesh	4346	95.8	95.9	96.1	96.9	96.5	96.5	93.9
8	Bihar	1237	78.3	82.9	79.6	85.5	79.9	82.6	65.0
9	Arunachal Pradesh	71	94.1	100.0	100.0	96.0	78.4	92.7	66.7
10	Nagaland	68	60.5	67.2	40.0	90.6	74.1	84.1	64.5
11	Manipur	60	83.3	87.2	80.0	95.9	86.7	95.8	50.0
12	Mizoram	53	50.0	75.0	72.7	82.6	84.9	84.9	77.5
13	Tripura	22	100.0	100.0	95.5	86.4	100.0	100.0	86.7
14	Meghalaya	39	100.0	100.0	100.0	97.4	97.4	97.1	91.7
15	Assam	522	92.9	88.5	84.7	98.2	92.9	95.4	92.9
16	West Bengal	418	91.1	87.1	84.7	90.2	92.8	91.2	69.0
17	Jharkhand	289	97.6	97.8	96.2	99.2	97.6	97.6	90.6
18	Orissa	1270	97.3	98.6	97.9	99.8	99.7	99.7	88.2
19	Chhatisgarh	678	98.9	99.8	99.6	98.1	98.4	98.6	73.7
20	Madhya Pradesh	1378	99.0	99.3	99.4	99.4	99.0	99.0	98.3
21	Gujarat	712	98.6	98.8	99.2	99.9	99.9	99.9	98.6
22	Maharashtra	1351	97.3	98.5	99.3	99.4	99.8	99.7	98.6
23	Andhra Pradesh	762	99.8	99.9	100.0	99.9	100.0	99.9	100.0
24	Karnataka	881	100.0	100.0	100.0	100.0	100.0	100.0	93.1
25	Kerala	158	99.2	98.5	100.0	100.0	100.0	99.3	73.4
26	Tamil Nadu	947	100.0	100.0	100.0	100.0	100.0	0.0	90.1
	India	18385	96.3	96.6	96.0	97.5	96.7	92.9	90.5

1 Regular supply are taken from those sub centers was having stock available on day of survey DDK- Disposal delivery kit.

Table S7 Percentage of Sub Centres with adequately available kits and equipment in the state of India, Facility Survey, 2003

Sr no	State	No. of SC	Kit		Kit		Kit		Adequacy of	Adequacy of	Adequacy of immunization	Register adequate ³
	1 0 1/ 1 '		Received	Utilised	Received	Utilised	Received	Utilised	Needles ²	Syringes ²	card ²	
1	Jammu & Kashmir	529	89.4	97.7	78.1	97.3	14.4	93.4	68.4	64.1	82.8	85.8
2	Himachal Pradesh	365	38.8	98.3	37.5	98.3	11.7	86.1	92.6	94.7	93.1	93.5
3	Punjab	142	100.0	100.0	100.0	97.2	20.4	96.6	92.5	87.2	95.2	95.5
4	Uttaranchal	262	100.0	100.0	100.0	100.0	31.7	100.0	98.0	98.4	94.4	85.1
5	Haryana	523	99.8	100.0	99.6	98.8	14.0	97.3	97.0	95.1	95.0	86.0
6	Rajasthan	1302	96.0	99.7	93.9	99.1	16.6	97.2	96.0	96.4	96.0	94.1
7	Uttar Pradesh	4346	98.8	99.5	97.4	98.7	20.0	97.8	94.1	94.1	91.2	84.3
8	Bihar	1237	92.6	96.9	88.7	94.4	4.8	84.7	84.2	81.1	89.0	83.3
9	Arunachal Pradesh	71	63.4	93.3	59.2	85.7	14.1	80.0	51.0	49.1	68.8	20.0
10	Nagaland	68	94.1	100.0	92.6	100.0	44.1	96.7	72.6	71.0	39.7	81.6
11	Manipur	60	81.7	100.0	75.0	100.0	23.3	100.0	39.0	36.6	87.9	68.0
12	Mizoram	53	100.0	98.1	100.0	98.1	45.3	100.0	63.5	76.9	92.0	65.3
13	Tripura	22	95.5	100.0	90.9	100.0	72.7	100.0	100.0	100.0	100.0	31.8
14	Meghalaya	39	97.4	86.8	84.6	90.9	5.1	100.0	100.0	94.1	97.0	81.8
15	Assam	522	99.4	99.6	96.9	98.8	37.2	95.9	91.0	90.1	90.8	82.8
16	West Bengal	418	100.0	99.5	97.4	96.3	1.4	0.0	83.0	77.8	84.6	86.1
17	Jharkhand	289	97.9	98.9	92.4	98.1	29.1	70.2	81.3	83.3	91.4	77.0
18	Orissa	1270	99.5	99.3	99.1	99.0	14.6	98.4	96.9	95.5	95.2	83.0
19	Chhatisgarh	678	98.4	99.7	97.5	99.7	19.3	99.2	88.5	89.6	90.8	80.5
20	Madhya Pradesh	1378	99.3	99.9	98.0	99.4	47.7	96.7	91.7	89.7	94.1	78.6
21	Gujarat	712	98.9	99.9	97.5	100.0	20.8	97.3	91.2	90.6	88.4	84.6
22	Maharashtra	1351	99.0	99.9	98.7	99.9	70.8	99.2	95.3	93.2	90.9	92.1
23	Andhra Pradesh	762	99.6	99.3	97.2	99.3	16.4	76.0	95.5	95.0	94.3	62.4
24	Karnataka	881	99.1	100.0	97.8	100.0	46.5	99.5	83.9	82.9	92.6	82.3
25	Kerala	158	100.0	100.0	100.0	99.4	42.4	98.5	94.2	96.2	89.0	100.0
26	Tamil Nadu	947	99.7	99.9	99.5	100.0	26.9	98.8	93.9	91.7	98.6	98.3
	India	1838 5	97.0	99.4	95.2	98.8	26.0	96.6	91.5	90.5	91.9	85.3

Note: kit A- contents IFA tablet (Large &small), Vit.A solution, ORS packet Cotrimaxazole tab. (Pediatric), Disposal delivery kit Kit B: Tab. Methelergometrine Maleate 0.125mg), Paracetamol (500 mg) j. Methelergometrine (0.2mg/ml., 1ml,tab.Mebendazole (100mg) Dicyclomine (10mg), Chloramphenicol eye ointment (250mg) Oinment povidone lodine (5%), centrimide powder (125gm), Absorbent cotton roll, Kit C: Availability of varuous equipment as per requirement. 2. Adequacy (for next one month) is from number of SC having available equipment , 3. Eligible couple register is adequate for next six months are taken from number of SCs have supplies of register.

Table S8 Percentage of Sub Centres by their performance during last three months in the state of India, Facility Survey, 2003

Sr no	State	No. of SC	ANC register ed	ANC provi ded	Delivery conducted	PNC Provided	IUD inserted	Condom distributed	Oral Pills distributed	Infant immunized	Children Immunized	Children treated for ARI& Diarhoea
1	Jammu & Kashmir	529	89.0	84.7	40.1	78.3	14.2	55.0	82.2	83.9	84.7	88.8
2	Himachal Pradesh	365	39.2	37.2	50.2	38.2	61.2	41.1	88.3	41.1	86.4	83.5
3	Punjab	142	97.9	97.9	81.0	95.8	90.1	85.2	93.0	98.6	97.2	86.6
4	Uttaranchal	262	100.0	100.0	98.9	99.2	86.3	90.8	88.9	99.6	90.5	88.5
5	Haryana	523	100.0	99.8	96.9	99.6	98.3	99.0	98.7	99.8	93.5	97.9
6	Rajasthan	1302	98.3	98.6	92.7	97.0	84.9	98.3	98.3	97.5	93.2	91.4
7	Uttar Padesh	4346	99.6	99.1	99.2	99.4	89.1	93.1	93.6	99.2	95.5	70.6
8	Bihar	1237	86.5	82.6	80.9	85.4	61.8	71.5	70.4	73.4	67.8	33.2
9	Arunachal Pradesh	71	40.8	46.5	23.9	31.0	2.8	12.7	35.2	26.8	26.8	69.0
10	Nagaland	68	98.5	95.6	88.2	92.6	30.9	50.0	89.7	94.1	92.6	98.5
11	Manipur	60	75.0	73.3	58.3	65.0	25.0	53.3	48.3	91.7	91.7	71.7
12	Mizoram	53	98.1	86.8	52.8	79.2	50.9	17.0	84.9	98.1	98.1	94.3
13	Tripura	22	100.0	100.0	95.5	95.5	81.8	100.0	100.0	100.0	100.0	95.5
14	Meghalaya	39	92.3	94.9	76.9	97.4	20.5	66.7	94.9	97.4	100.0	97.4
15	Assam	522	99.4	98.9	81.6	97.1	14.0	93.3	87.2	98.7	98.9	81.8
16	West Bengal	418	92.6	92.6	10.0	91.4	24.6	90.2	83.3	92.6	93.1	90.7
17	Jharkhand	289	94.1	93.8	87.9	93.4	81.7	92.4	86.5	88.9	87.5	49.1
18	Orissa	1270	99.4	99.4	93.5	99.1	69.4	92.8	95.0	99.2	95.8	98.3
19	Chhatisgarh	678	99.9	99.7	87.2	98.7	70.6	98.1	98.7	99.9	95.4	89.1
20	Madhya Pradesh	1378	99.7	99.6	84.4	99.2	80.4	97.8	98.4	99.4	97.1	85.0
21	Gujarat	712	100.0	100.0	84.0	99.7	92.8	99.3	99.7	96.5	94.2	93.7
22	Maharashtra	1351	98.7	98.4	78.9	97.6	68.7	74.7	93.7	99.1	98.5	83.9
23	Andhra Pradesh	762	99.0	98.0	79.1	97.8	78.9	92.5	97.8	97.9	83.2	39.6
24	Karnataka	881	99.2	98.6	81.0	98.8	88.1	96.7	98.3	98.9	91.5	75.8
25	Kerala	158	97.5	98.1	0.6	97.5	19.6	95.6	94.3	97.5	91.1	95.6
26	Tamil Nadu	947	99.9	99.7	78.0	99.5	94.6	54.6	89.7	99.8	72.3	91.6
	India	18385	96.6	96.0	83.7	95.5	75.0	86.8	92.2	95.1	90.9	78.0

PNC: Postnatal care. SC: Sub center. ARI: Acute respiratory infection

CHAPTER VII

ISM & H HOSPITAL AND DISPENSARY

7.1 Introduction

The Indian System of Medicine and Homeopathy includes Ayurveda, Homeopathy, Unani, Siddha and therapy such as Yoga and Naturopathy. A major strength of Indian System of Medicine and Homeopathy (ISM & H) is that it is accessible, acceptable and affordable. India also has a vast network of Government ISM & H health care institutions. There are 3,000 hospitals with over 60 beds and over 23,000 dispensaries providing primary healthcare. The National Health Policy (1983) visualised an important role for the ISM & H practitioners in the delivery of health services. During the Tenth Five Year plan period the major thrust has been given to mainstreaming the ISM & H system, and utilisation of the services of the ISM & H practitioners or improving access to health care and coverage under national programmes. There is a need for successful implementation of ISM & H and dispensary in providing health care for the population and to achieve the set goals (NPP 2000) and (NHP 2002).

During the second phase of Facility Survey all ISM & H hospitals and dispensaries of 21 states were also covered. Here it is necessary to mention that in the five states, namely Jammu & Kashmir, Manipur, Mizoram, Tripura and Meghalaya, there were no any ISM & H hospital and dispensary. The information presented in this chapter is mainly based on data collected from 21 states. Altogether, a total of 2151 ISM & H hospitals and 7064 ISM & H dispensary were covered. Thus, this chapter presents the status of the 2151 ISM & H hospitals and 7064 ISM & H dispensary with respect to the availability of some selected infrastructure, staff, and supply of medicine, and some other materials and equipment.

Table I1 shows that concentration of hospital and dispensary is high in Uttar Pradesh with 1488 hospitals out of total 2151 hospitals surveyed during Facility Survey in the Second Phase and Uttar Pradesh also has 1579 dispensaries out of 7064 dispensaries surveyed. Some states like Punjab, Nagaland, and West Bengal do not have any ISM & H hospital.

There are mainly four types of ISM & H hospitals and dispensaries such as Ayurvedic, Homeopathy, Unani and Siddha. The total number of hospitals surveyed are 1804 Ayurvedic hospitals, 69 Homeopathy hospitals, 157 Unnani hospitals and 124 Siddha hospitals. Similarly, the total 7064 ISM & H dispensaries include 4558 Ayurvedic, 2001 Homeopathy, 246 Unnani and 172 Siddha dispensaries. There are at least 47 dispensaries under the other category. The number of Ayurvedic hospitals and dispensaries are more than the any other category.

Most of the Siddha hospitals and dispensaries are located in Tamil Nadu. Maharashtra also has 10 Siddha dispensaries. Most of the concentration of Ayurvedic hospitals and dispensaries are found in Uttar Pradesh, Uttaranchal, Tamil Nadu, Rajasthan, Madhya Pradesh, and Karnataka.

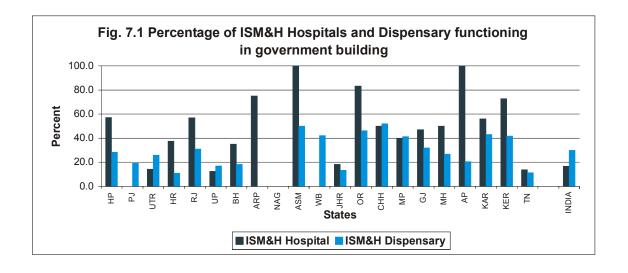
7.2 Infrastructure (Table I2)

For infrastructure, mainly the type of building, its maintenance, compound wall fencing, water supply, electricity, telephone, toilet, sewage, and availability of vehicle are examined.

(a) Own building

At the all India levels, around 17 and 30 percent of ISM & H hospitals and dispensaries have their own buildings respectively. Thus, the situation of Government building for hospital and dispensary for this health system is not satisfactory.

The availability of Government building for hospital and dispensary at the state level shows a mixed picture. In Assam and Andhra Pradesh, all hospitals function from the Government building. Fifty percent of the hospitals or more have Government buildings in Karnataka, Maharashtra, Chhattisgarh, Arunachal Pradesh, Rajasthan, Orissa, Kerala and Himachal Pradesh (see Fig. 7.1).



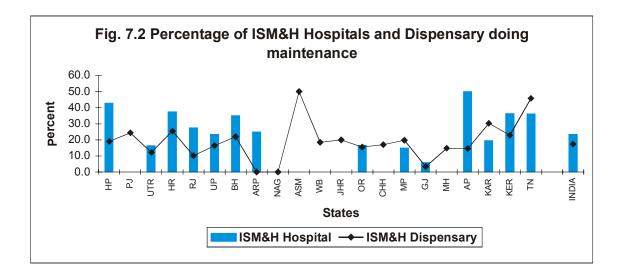
(b) *Pucca* building

At the all India level, Seventy-three percent and sixty-seven percent ISM & H hospitals and dispensaries respectively have *pucca* buildings. The ISM & H hospitals with *pucca* buildings vary from the lowest that is 61 percent hospitals in Karnataka to hundred percent hospital in Haryana, Rajasthan, Assam, Orissa, Chhattisgarh, Maharashtra, Himachal Pradesh and Andhra Pradesh. Similarly, dispensaries with *pucca* building varies from none in Arunachal Pradesh to hundred percent in Assam. The situation of *pucca* building in hospital and the running of a dispensary from a Government building is far below satisfactory.

(c) Compound wall fencing and maintenance of building

The situation of wall fencing around the hospital and dispensary is not satisfactory at all. Only 22 percent of the hospitals and dispensaries separately have wall fencing building at the national level as well as at the state level in India.

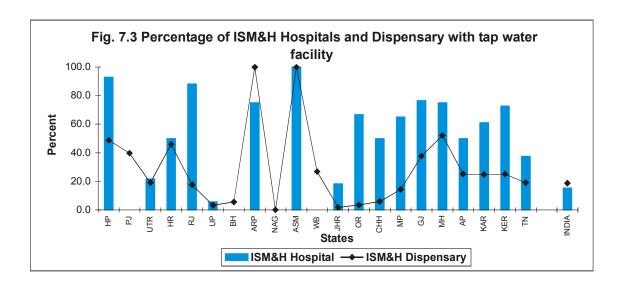
Similarly, the situation of maintenance of the building is also unsatisfactory at both the national and the state levels. In twenty-four percent of the hospitals and 17 percent of the dispensaries, expenditure on the maintenance of the building is incurred once in a three years (see fig. 7.2).



(d) Tap water

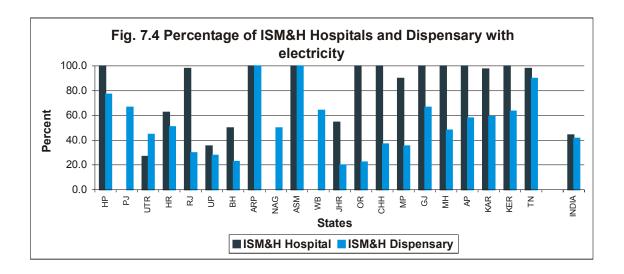
The situation of supply of water through taps is quite unsatisfactory at the national level as well as at the state level. Only 15 percent of the hospitals and 18 percent of the dispensaries at the all India level have water supply from taps. Fifty-two percent to hundred percent of the dispensaries and hospitals in Maharashtra, Assam and Arunchal Pradesh have

water supply through taps (see fig. 7.3). In Bihar, there is no tap water facility, and none of the ISM & H dispensaries in Nagaland have tap water facility.



(e) Electricity

The availability of electricity is found in 44 percent of the hospitals and 42 percent of dispensaries at the all India level. In Assam and Arunachal Pradesh all hospitals and dispensaries have a supply of electricity. The situation in Bihar is poor among the states, where only 50 percent of the hospitals and 23 percent of the dispensaries have electricity supply (see fig. 7.4).



(f) Telephone

The availability of telephone facility in hospitals and dispensaries is still quite unsatisfactory in India. It is noted that only six percent of the hospitals and two percent of the dispensaries have telephone facility at the all India level. The situation at the state level also is more or less the same.

(g) Toilet facility

At the all India level, around 38 percent of the hospitals and 27 percent of the dispensaries have the toilet facility. All hospitals in Andhra Pradesh, Maharashtra, Gujarat, Chhatisgarh, Assam and Arunachal Pradesh have toilet facility. In Arunachal Pradesh, Haryana, Rajasthan, Bihar, Orissa, Madhya Pradesh and Karnatakka 50 percent to 85 percent of the hospitals have toilet facility. The situation of toilets in the dispensaries is unsatisfactory except in the states of Arunachal Pradesh and Assam.

(h) Sewerage system

The situation of sewerage system in ISM & H hospitals in India, is very bad. At the national level only 8 percent of the hospitals have sewerage facility. In Assam, Haryana, and Arunachal Pradesh none of the hospitals have sewerage system. In Karnataka, Andhra Pradesh, Maharashtra, Madhya Pradesh and Chhattisgarh 50 to 75 percent hospitals have a sewerage system.

(i) Vehicle available

The availability of vehicle in ISM & H hospitals is almost negligible at the all India level where, only less than two percent hospital have a vehicle. None of the hospitals in Kerala, Andhra Pradesh, Assam, and Haryana have any vehicle.

7.3 Staff Position (Table I3)

(a) Medical officer

Seventy seven and eighty three percent of the hospitals and dispensaries respectively have at least one medical officer. In Kerala, Andhra Pradesh, Maharashtra, Chhattisgarh, Jharkhand, Assam, Arunachal Pradesh, Bihar, Rajasthan, Haryana, and Himachal Pradesh, all hospitals have at least one Medical Officer. Similarly, all the dispensaries in Assam and

Arunachal Pradesh have at least one medical officer. The availability of a medical officer at the hospital is the least in Uttar Pradesh with 72 percent of the hospitals having a medical officer. Similarly, the availability of medical officer at the dispensary is the lowest in Gujarat where only 47 percent of the dispensaries have a medical officer in position.

(b) Sister and staff nurse

Seventy-two percent of the Hospitals and 62 percent dispensaries have the post of sister in position at the all India level. In Bihar and Arunachal Pradesh, this post is field in all the hospitals and dispensaries. The situation in the remaining states as far as hospital and dispensary are concerned, both is not satisfactory. Around 76 to 87 percent of the hospitals and dispensaries have staff nurse post in position at the all India level. At the state level, the situation of availability of staff nurse is better in hospital than in dispensary. All hospitals in Kerala, Maharashtra, Gujarat, Madhya Pradesh, Jharkhand, Assam, Arunachal Pradesh and Bihar have staff nurse post fiiled. Similarly, the post of the staff nurse is filled in all dispensaries in Punjab and Chhatisgarh.

(c) Pharmacist

Eighty-four percent of the hospitals and seventy-seven percent of the dispensaries in India have the post of pharmacist in position. All hospitals in Maharashtra, Madhya Pradesh, Chhattisgarh, Jharkhand, Assam, Arunachal Pradesh and Bihar, and all dispensaries in Orissa have pharmacist. The situation of pharmacist in position is better in hospitals at the national level as well as at the state level than in dispensaries.

7.4 Availability of Medicine and Other Facilities (Table I4)

(a) Medicine for common ailments

At the all India level, only 27 percent of the hospitals and 18 percent of the dispensaries have sufficient medicines for common ailments. The availability of sufficient medicine for common ailments varies from 9 percent of the hospitals in Kerala to all the hospitals in Andhra Pradesh, Tamil Nadu and Assam. None of the dispensaries in Arunachal Pradesh, Nagaland and Assam have sufficient medicine for common ailments.

(b) Specialized medicine for serious ailments

The situation of specialised medicines for serious ailments at the all India level is unsatisfactory. Around 93 percent of the hospitals and 92 percent of the dispensaries in India do not have sufficient medicine for serious ailments. The availability of medicine for serious ailments at the state level varies from none of the hospitals in Kerala, Jharkhand and Haryana

to 50 percent of the hospitals in Andhra Pradesh, Maharashtra, and Assam. The availability of this medicine is highest (33 % dispensary) in Tamil Nadu, but it is not available in any dispensary of Arunachal Pradesh, Nagaland, Jharkhand and Assam. Thus, the situation of availability of medicine for serious ailments at the state level too is far from satisfactory.

(c) Bed and mattress

Around 47 percent of the hospitals and all dispensaries do not have adequate beds/mattresses at the all India level. In Rajasthan, Himachal Pradesh, Chhattisgarh, Madhya Pradesh, Gujarat, Andhra Pradesh and Kerala, 70 percent of the hospitals or more have adequate beds/mattresses. The adequacy of beds/mattresses in the remaining states is very negligible and not worth mentioning.

(d) Delivery table

The availability of a delivery table in the hospital and dispensary is also unsatisfactory at the national level as well as at the state level. At the all India level only 14 percent of the hospitals and forty-two percent of the dispensaries have a delivery table. None of the hospitals in Kerala, Jharkhand, and Assam have a delivery table. But 50 percent to 83 percent of the hospitals in Andhra Pradesh, Gujarat, Orissa (83% is the highest), Chhattisgarh and Arunachal Pradesh have a delivery table. Out of a total 1579 ISM & H dispensaries in Uttar Pradesh, none of them have a delivery table. Only 9 percent of the dispensaries in Tamil Nadu have a delivery table. Whereas, 90 percent of dispensaries in Haryana and all dispensaries in Arunachal Pradesh have a delivery table available.

7.5 Performance of ISM & H Hospital and Dispensary (Table I5)

The performance refers to percentage of ISM & H hospitals and dispensary admitting patients during the last one year preceding the survey. At the national level, 16 percent of the hospital and 72 percent of the dispensaries admitted male patients for treatment. Similarly, at the national level, 15 percent of the hospitals and 72 percent of the dispensaries admitted female patients for treatment. Again only 10 percent of the hospital and 71 percent of the dispensaries admitted children below 12 years. It is clear from Table I5 that the people being admitted and treated at ISM & H dispensary is much higher than that in the hospital. There is considerable variation in the admission of patients for ISM treatment at the state level.

Table I1 Number of ISM&H Hospitals & Dispensaries by selected characteristics in the states of India, Facility Survey, 2003.

C		ISM&H	ISM&H	Ayu	rvedic	Hom	eopathy	U	nani	Sidhh	ıa	Others*
Sr. No	State	Hospital	Dispensa ry	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensa ry	Dispensar y
1	Himachal Pradesh.	16	377	16	368	00	04	00	03	00	00	02
2	Punjab	NA	78	NA	64	NA	08	NA	06	NA	00	00
3	Uttaranchal	212	58	209	30	01	27	02	01	00	00	00
4	Haryana	08	338	07	307	00	18	01	13	00	00	00
5	Rajasthan	51	1029	46	915	01	71	03	37	01	00	06
6	Uttar Pradesh	1488	1579	1413	278	28	1148	138	62	00	00	00
7	Bihar	20	109	08	60	06	17	04	09	00	00	25
8	Arunachal Pradesh	04	01	01	00	03	01	00	00	00	00	00
9	Nagaland	NA	02	NA	01	NA	01	NA	00	NA	00	00
10	Assam	02	02	02	01	00	01	00	00	00	00	00
11	West Bengal	NA	190	NA	56	NA	132	NA	00	NA	00	02
12	Jharkhand*	11	60	11	34	02	11	01	06	00	00	09
13	Orissa	06	546	04	279	02	269	NA	07	NA	00	01
14	Chhatisgarh	04	370	04	334	00	22	00	04	00	00	00
15	Madhya Pradesh	20	960	18	853	02	70	00	36	00	00	01
16	Gujarat	17	300	17	239	00	61	00	00	00	00	00
17	Maharashtra	04	272	03	255	01	00	00	05	00	10	02
18	Andhra Pradesh	02	339	01	183	01	104	00	52	00	00	00
19	Karnataka*	41	266	32	266	02	07	05	07	00	00	01
20	Kerala	11	96	10	60	01	35	00	00	00	01	00
21	Tamil Nadu	144	169	05	02	19	05	03	00	123	161	00
	India	2151	7064	1804	4558	69	2001	157	246	124	172	47

Note: There is no ISM&H Hospital and Dispensary in J&K, Manipur, Mizoram, Tripura, Meghalaya.

^{*.} Both facilities (Ayurvadic and Homeopathic) are functioning at same place due to that it may exeed total number of facility.

NA Not applicable

Table I 2 Status of infrastructure in ISM&H Hospitals and Dispensaries by selected characteristics in the states of India, Facility **Survey, 2003.**

				Own b	ouilding	Pucc	а	Wall fe	ncing ¹	Mainto	enance ²	Тар	water
Sr. No.	State	No .of ISM &H H	No .of ISM&H D	ISM&H Hospital	ISM&H Dispensar y	ISM&H Hospital	ISM &H Dispe nsary	ISM&H Hospital	ISM& H Dispens ary	ISM&H Hospital	ISM&H Dispensar y	ISM&H Hospital	ISM&H Dispensar y
1	Himachal Pradesh	14	377	57.1	28.4	100.0	54.9	28.6	5.3	42.9	19.1	92.9	48.8
2	Punjab	NA	78	NA	19.2	NA	85.9	NA	66.7	NA	24.4	NA	39.7
3	Uttaranchal	212	58	14.2	25.9	61.8	58.6	6.1	13.8	16.5	12.1	21.7	19.0
4	Haryana	08	338	37.5	10.9	100.0	83.4	37.5	63.6	37.5	25.4	50.0	45.9
5	Rajasthan	51	1029	56.9	31.0	100.0	89.2	74.5	33.8	27.5	10.1	88.2	17.5
6	Uttar Pradesh	1488	1579	12.5	16.9	73.1	70.8	16.7	14.9	23.4	16.4	5.7	3.2
7	Bihar	20	109	35.0	18.3	65.0	52.3	40.0	12.8	35.0	22.0	0.0	5.5
8	Arunachal Pradesh	04	01	75.0	0.0	75.0	0.0	75.0	0.0	25.0	0.0	75.0	100.0
9	Nagaland	NA	02	NA	0.0	NA	50.0	NA	0.0	NA	0.0	NA	0.0
10	Assam	02	02	100.0	50.0	100.0	100.0	0.0	50.0	0.0	50.0	100.0	100.0
11	West Bengal	NA	190	NA	42.1	NA	74.2	NA	20.5	NA	18.4	NA	26.8
12	Jharkhand*	11	60	18.2	13.3	81.8	46.7	27.3	5.0	0.0	20.0	18.2	1.7
13	Orissa	06	546	83.3	46.3	100.0	51.3	83.3	8.6	16.7	15.6	66.7	3.3
14	Chhatisgarh	04	370	50.0	51.9	100.0	50.5	0.0	13.8	0.0	17.0	50.0	5.9
15	Madhya Pradesh.	20	960	40.0	41.2	95.0	62.4	30.0	9.7	15.0	19.8	65.0	14.3
16	Gujarat	17	300	47.1	32.0	94.1	89.0	64.7	31.7	5.9	3.3	76.5	37.7
17	Maharashtra	04	272	50.0	26.8	100.0	38.2	75.0	23.2	0.0	14.7	75.0	52.2
18	Andhra Ppradesh.	02	339	100.0	20.6	100.0	69.3	50.0	40.4	50.0	14.5	50.0	25.1
19	Karnataka*	41	266	56.1	43.1	61.0	36.7	48.8	18.9	19.5	30.2	61.0	24.6
20	Kerala	11	96	72.7	41.7	81.8	63.5	63.6	25.0	36.4	22.9	72.7	25.0
21	Tamil Nadu	144	169	13.9	11.3	75.0	79.8	59.0	33.3	36.1	45.8	37.5	19.0
	India	2151	7064	16.7	30.0	73.4	67.2	22.0	21.7	23.5	17.4	15.3	18.5

Note: There is no ISM&H Hospital and Dispensary in J&K, Manipur, Mizoram, Tripura, Meghalaya. 1 Compound wall/Fence all around. 2 Maintenance once in three years.

NA Not applicable

Contd.....

Table I 2 Status of infrastructure in ISM&H Hospitals and Dispensaries by selected characteristics in the states of India, Facility Survey, 2003.

				Electr	ricity ³	Telep	hone	T	oilet	ISM	I &H*
Sl. No	State	No .of ISM&H H	No .of ISM&H D	ISM&H Hospital	ISM&H Dispensar y	ISM&H Hospital	ISM&H Dispensar y	ISM&H Hospital	ISM&H Dispensary	Sewerage ⁴	Vehicle ⁵
1	Himachal Pradesh.	16	377	100.0	77.2	78.6	2.7	85.7	24.4	35.7	28.6
2	Punjab	NA	78	NA	66.7	NA	6.4	NA	44.9	NA	NA
3	Uttaranchal	212	58	26.9	44.8	1.4	5.2	29.7	24.1	2.8	0.9
4	Haryana	08	338	62.5	50.9	25.0	2.1	50.0	31.1	0.0	0.0
5	Rajasthan	51	1029	98.0	30.0	39.2	1.3	86.3	25.4	25.5	2.0
6	Uttar Pradesh	1488	1579	35.5	27.8	1.3	1.3	32.7	21.8	2.7	0.7
7	Bihar	20	109	50.0	22.9	20.0	3.7	65.0	31.2	15.0	5.0
8	Arunachal Pradesh	04	01	100.0	100.0	0.0	0.0	100.0	100.0	0.0	50.0
9	Nagaland	NA	02	NA	50.0	NA	0.0	NA	50.0	NA	NA
10	Assam	02	02	100.0	100.0	50.0	50.0	100.0	100.0	0.0	0.0
11	West Bengal	NA	190	NA	64.2	NA	10.5	NA	45.3	NA	NA
12	Jharkhand*	11	60	54.5	20.0	18.2	0.0	27.3	8.3	36.4	9.1
13	Orissa*	06	546	100.0	22.3	66.7	0.4	83.3	12.5	50.0	33.3
14	Chhatisgarh	04	370	100.0	37.0	25.0	0.3	100.0	21.1	75.0	75.0
15	Madhya Pradesh	20	960	90.0	35.3	35.0	1.4	85.0	24.7	50.0	25.0
16	Gujarat	17	300	100.0	66.7	82.4	4.3	100.0	41.0	29.4	11.8
17	Maharashtra	04	272	100.0	48.2	100.0	7.0	100.0	31.6	75.0	25.0
18	Andhra Pradesh	02	339	100.0	58.1	50.0	5.0	100.0	36.9	50.0	0.0
19	Karnataka*	41	266	97.6	59.1	36.6	3.2	85.4	34.6	63.4	2.4
20	Kerala	11	96	100.0	63.5	45.5	5.2	100.0	78.1	9.1	0.0
21	Tamil Nadu	144	169	97.9	89.9	3.5	0.0	36.8	23.1	31.3	2.1
	India	2151	7064	44.3	41.6	5.5	2.3	37.6	26.8	7.9	1.8

Note: There is no ISM&H Hospital and Dispensary in J&K, Manipur, Mizoram, Tripura, Meghalaya.3. electricity available. 4. Connected to municipal sewerage. 5 Vehicle available (Only in hospital) NA: Not applicable

Table I 3 Position of staff in ISM&H Hospitals and Dispensaries by position of the staff*, Facility Survey, 2003.

Sl.		No .of N		Medica	l officer	Sis	ster	Sta	aff nurse	Pha	rmacist
No	State	ISM&H H	ISM&H D	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary
1	Himachal Pradesh	16	377	100.0	74.0	84.6	52.3	84.6	38.9	85.7	48.8
2	Punjab	NA	78	NA	84.6	NA	88.9	NA	100.0	NA	88.9
3	Uttaranchal	212	58	77.7	70.7	100.0	NA*	83.3	NA*	64.5	79.3
4	Haryana	08	338	100.0	86.9	66.7	71.4	0.0	75.0	75.0	80.7
5	Rajasthan	51	1029	100.0	83.3	75.0	94.7	92.1	90.1	90.0	86.8
6	Uttar Pradesh	1488	1579	72.0	87.9	62.0	100.0	72.9	NA*	85.9	78.7
7	Bihar	20	109	100.0	96.0	100.0	100.0	100.0	50.0	100.0	90.3
8	Arunachal Pradesh	04	01	100.0	100.0	100.0	NA*	100.0	NA*	100.0	0.0
9	Nagaland	NA	02	NA	50.0	NA	100.0	NA	NA	NA	0.0
10	Assam	02	02	100.0	100.0	100.0	100.0	100.0	50.0	100.0	50.0
11	West Bengal	NA	190	NA	92.1	NA	NA*	NA	0.0	NA	78.1
12	Jharkhand*	11	60	100.0	92.9	100.0	66.7	100.0	0.0	100.0	76.5
13	Orissa	06	546	100.0	93.4	100.0	NA*	100.0	NA*	NA	100.0
14	Chhatisgarh	04	370	100.0	72.5	100.0	31.3	54.5	100.0	100.0	75.5
15	Madhya Pradesh	20	960	95.0	78.7	71.4	78.5	100.0	58.3	100.0	82.6
16	Gujarat	17	300	94.1	47.0	91.7	0.0	100.0	50.0	94.1	55.6
17	Maharashtra	04	272	100.0	91.1	75.0	64.3	100.0	66.7	100.0	65.7
18	Andhra Pradesh	02	339	100.0	82.6	100.0	60.0	44.4	78.6	46.2	85.2
19	Karnataka*	41	266	82.9	89.7	55.6	7.5	90.0	25.0	90.9	18.9
20	Kerala	11	96	100.0	83.3	100.0	NA*	100.0	NA*	97.9	76.3
21	Tamil Nadu	144	169	97.2	94.6	71.9	NA*	75.8	NA*	84.3	98.7
	India	2151	7064	76.8	83.2	72.4	62.1	76.0	87.2	84.4	77.1

Note: There is no ISM&H Hospital and Dispensary in J&K, Manipur, Mizoram, Tripura, Meghalaya.

Staffs in position are from No. of hospitals having staff sanctioned.

the facility are not having sanction post. Not applicable NA*

NA

(0.0)No any facility filled post

Table I 4 Availability of selected equipment and medicines in ISM&H Hospitals and Dispensaries norms, Facility Survey, 2003

GL N	State	No .of	No .of		for common ment ¹	Specializ	zed edicine ²		lattresses equate	Delivery t	able available
Sl. No		ISM&H H	ISM&H H ISM&H D	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary **
1	Himachal Pradesh	16	377	50.0	7.4	28.6	2.4	78.6	NA	35.7	75.1
2	Punjab	NA	78	NA	5.1	NA	1.3	NA	NA	NA	52.6
3	Uttaranchal	212	58	65.6	36.2	5.2	6.9	53.8	NA	7.1	0.0
4	Haryana	08	338	62.5	12.7	0.0	5.6	37.5	NA	12.5	90.2
5	Rajasthan	51	1029	33.3	10.9	7.8	3.0	82.4	NA	27.5	31.1
6	Uttar Pradesh	1488	1579	13.9	28.2	1.9	11.0	48.0	NA	13.2	0.0
7	Bihar	20	109	10.0	1.8	10.0	0.9	30.0	NA	30.0	44.0
8	Arunachal Pradesh	04	01	25.0	0.0	25.0	0.0	25.0	NA	50.0	100.0
9	Nagaland	NA	02	NA	0.0	NA	0.0	NA	NA	NA	50.0
10	Assam	02	02	100.0	0.0	50.0	0.0	50.0	NA	0.0	50.0
11	West Bengal	NA	190	NA	5.8	NA	3.2	NA	NA	NA	26.3
12	Jharkhand*	11	60	27.3	3.3	0.0	0.0	9.1	NA	0.0	55.0
13	Orissa	06	546	50.0	15.8	33.3	7.7	66.7	NA	83.3	68.9
14	Chhatisgarh	04	370	25.0	23.5	25.0	7.0	75.0	NA	50.0	31.1
15	Madhya Pradesh	20	960	60.0	7.1	10.0	0.7	70.0	NA	35.0	46.6
16	Gujarat	17	300	64.7	31.0	29.4	14.3	88.2	NA	64.7	75.7
17	Maharashtra	04	272	50.0	25.4	50.0	14.0	50.0	NA	25.0	74.3
18	Andhra Pradesh	02	339	100.0	20.6	50.0	22.7	100.0	NA	50.0	72.3
19	Karnataka*	41	266	14.6	4.3	2.4	2.8	36.6	NA	17.1	71.2
20	Kerala	11	96	9.1	7.3	0.0	3.1	81.8	NA	0.0	47.9
21	Tamil Nadu	144	169	100.0	100.0	59.0	32.7	13.2	NA	3.5	8.9
	India	2151	7064	26.8	18.5	7.0	7.6	47.4	NA	13.5	41.9

Note: There is no ISM&H Hospital and Dispensary in J&K, Manipur, Mizoram, Tripura, Meghalaya.

1 sufficient medicine for common ailment 2' sufficient medicine for serious ailment

2 Distance of nearest druggist/chemist below one kilometer ** Examination table NA: Not applic

NA:Not applicable

Table I 5 ISM&H Hospitals and Dispensaries admitting patients for treatment during last one years in the states of India, Facility Survey, 2003

Sl.		No .of	No .of	M	lale	Female	2	Children	(<12 age)*
No.	State	ISM&H H	ISM&H D	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary	ISM&H Hospital	ISM&H Dispensary
1	Himachal Pradesh	16	377	71.4	88.1	64.3	88.0	64.3	88.1
2	Punjab	NA	78	NA	100.0	NA	100.0	NA	100.0
3	Uttaranchal	212	58	6.6	34.5	5.2	34.5	3.8	34.5
4	Haryana	08	338	25.0	98.8	25.0	98.8	25.0	98.5
5	Rajasthan	51	1029	62.7	88.0	62.7	87.9	51.0	87.9
6	Uttar Pradesh	1488	1579	12.8	14.9	11.0	14.9	7.5	14.9
7	Bihar	20	109	15.0	46.8	15.0	46.8	10.0	40.4
8	Arunachal Pradesh	04	01	25.0	100.0	25.0	100.0	25.0	100.0
9	Nagaland	NA	02	NA	50.0	NA	50.0	NA	50.0
10	Assam	02	02	100.0	50.0	100.0	50.0	100.0	50.0
11	West Bengal	NA	190	NA	73.2	NA	73.2	NA	54.7
12	Jharkhand*	11	60	18.2	51.7	18.2	51.7	18.2	51.7
13	Orissa	06	546	100.0	97.4	100.0	97.4	100.0	97.4
14	Chhatisgarh	04	370	75.0	85.9	75.0	85.9	50.0	85.7
15	Madhya Pradesh	20	960	65.0	92.2	65.0	92.2	50.0	90.1
16	Gujarat	17	300	76.5	93.3	76.5	93.3	70.0	93.3
17	Maharashtra	04	272	50.0	77.2	50.0	77.2	50.0	76.1
18	Andhra Pradesh	02	339	100.0	90.3	100.0	90.3	100.0	90.3
19	Karnataka*	41	266	36.6	96.8	36.6	96.8	24.4	96.8
20	Kerala	11	96	54.5	56.3	54.5	56.3	27.3	56.3
21	Tamil Nadu	144	169	11.1	88.1	11.8	88.1	2.1	87.5
	India	2151	7064	16.0	72.3	14.6	72.3	10.3	71.3

Note: There is no ISM&H Hospital and Dispensary in J&K, Manipur, Mizoram, Tripura, Meghalaya.

NA: Not applicable

^{*} Includes male & female children

APPENDIX A-I REPRODUCTIVE AND CHILD HEALTH (RCH) PROJECT FACILITY SURVEY- 2002 DISTRICT HOSPITAL/SUB-DIVISIONAL HOSPITAL/RH/CHC IDENTIFICATION

State:		
District :		
Name of Tehsil/taluk: _		
Name of Block:		
Type of health facility	District hospital	
Since when is this healt	h facility functioning? (YEAR) h facility functioning from this building? (YEAR) signated as a first referral unit (FRU)? Yes 1 No 2 ttached to this hospital? Yes 1 No 2	
Designation of the office Designation of the response	er-in-charge	
(IF MORE THAN ONE RESPONDENTS) Population cove Date of data collection Date month Name of the Investigat Signature of the Investigat	year	

1. INFRASTR	UCTURE			
Q1.1	Compound Wall/Fencing	All around	1	
		Partial	2	
		None	3	
1.2 Water Su	ipply			
Q1.2 a	Source	Piped	1	
		Bore Well/Hand pump/Tube Well	2	
		Well	3	
		Other	4	
Q1.2 b	Whether overhead tank and pump exist	(Specify) Yes	1	
Q1.2 b	Whether evernedd tank and pump exist	No	2	
IF YES in Q1	.2 b			
Q 1.2 c	Is the pump in working condition?	Yes	1	
		No	2	
Q 1.2 d	Whether overhead tank capacity is adequate	Yes	1	
0.1.0		No	2	
Q 1.2 e	Is piped water supply available to	Yes Operation Theatre 1	No 2	
		Laboratory 1	2	
1.3 ELEC	_ CTRICITY	Toilet 1	2	
		La all parts	1	
Q 1.3 a	Is electricity available in all parts of the	In all parts	1	
	hospital?	In some parts	2	
0.4.0.1	D 1 1: (0 1	None	3	
Q 1.3 b	Regularity of Supply	Continuous No continuous	1 2	
Q 1.3 c	Stand by Facility:	Yes	1	
4 1.0 0	Availability of generator	No	2	
IF GENERATO	OR IS AVAILABLE			
Q 1.3 d1	Is the capacity adequate?	Yes	1	
u u .	to the supusity adoquate.	No	2	
Q 1.3 d2	Is the generator currently functioning	Yes	1	
		No	2	
Q 1.3 d3	Whether fuel for generator is available	Yes	1	
	as per requirement	No	2	
Q 1.4	Sewage	Soak Pit	1	
		Connected to Municipal Sewage	2	
1.5. Disp	osal of waste:	No sewage facility	3	
Q 1.5 a		Vos	1	
u 1.5 a	Is waste segregated as infectious and non- infectious?	Yes No	1 2	
IF YES in Q 1	1.5 a, ask Q1.5 b & Q 1.5 c AND IF NO in Q 1.5			
Q 1.5 b	What is the mode of disposal of infectious	1		1
Q 1.5 D	•	Bury in a pit Thrown in common/public disposa	al nit	1 2
	waste?	Thrown in common/public disposal Thrown outside hospital compour		3
		Thrown outside hospital compound		3 4
		Use incinerator	1	
				5 6
015-	Minatio the mede of discount of man	Other (specify)		6
Q 1.5 c	What is the mode of disposal of non-	Bury in a pit	مند اما	1
	infectious waste?	Thrown in common/public disposa		2
		Thrown outside hospital compour		3
		Thrown inside hospital compound	I	4
		Use incinerator		5
		Other (specify)		6

Q 1.5 d	What is the mode of disposal of waste?	Bury in a pit	1
		Thrown in common/public disposal pit	2
		Thrown outside hospital compound	3
		Thrown inside hospital compound	4
		Use incinerator	5
		Other (specify)	6
Q 1.5 e	What is the mode of disposing biological	Bury in a pit	1
	waste?	Thrown in common/public disposal pit	2
		Thrown outside hospital compound	3
		Thrown inside hospital compound	4
		Use incinerator	5
		Other (specify)	6
1.6 BUILDNIN	IG		
Q 1.6 a	Ownership	Own	1
	·	Rented	2
		Donated/rent free	3
Q 1.6 b	Building condition Requires major repairs	Yes	1
		No	2
Q 1.6 c	Is minor repair quickly arranged	Yes	1
		No	2
Q 1.6 d	Maintenance	Never done so far	1
		New building (< 2YEARS OLD)	2
		On request	3
		When was it done last year ago	4
Q 1.6 e	Labour Room	Yes	1
		No	2
Q 1.6 f	Require additional Labour Room	Yes	1
		No	2
Q 1.6 g	Operation Theatre	Yes	1
		No	2
Q 1.6 h	Require additional OT	Yes	1
		No	2
	·		

1.7 Staff Quarters

	0	Number of	f quarters
	Category of Staff	Available	Occupied by same allottee
Doctor	In-charge		
	Obstetrician/Gynecologist		
	Pediatrician		
	Duty Doctor (RMO)		
	Anesthesiologists		
	Others		
Paramed	lical Nurse		
	Pharmacist		
	X-ray technician		
	Laboratory technician		
	Other (Specify)		
Class IV	Ambulance Driver		
	Attendant		

Q 1.8 a	Telephone	Yes	1
		No	2
Q 1.8 b	STD facility	Yes	1
		No	2
Q 1.8 c	Personal Computer	Yes	1
		No	2
IF PERSONA	L COMPUTER IS NOT AVAILABLE, 'Q 1.8d' AND Q 1	.8'e' WILL BE 'NOT APPLICABLE'	
Q 1.8 d	E-mail	Yes	1
			•
		No	2
Q 1.8 e	NIC Terminal	No Yes	2 1
Q 1.8 e	NIC Terminal		2 1 2
Q 1.8 e	NIC Terminal Other (Specify)	Yes	1
		Yes No	1
		Yes No Yes	1 2 1

1.9. Cleanliness

(OBSERVE AND CLASSIFY AS GOOD / FAIR / POOR)

SI.	Availability /	OPD	ОТ	Rooms	Wards	Toilets	Premises
No.	Cleanliness status						(compound)
1.	Available						
	Yes = 1						
	No = 2						
2	Cleanliness status						
	Good = 1						
	Fair = 2						
	Poor = 3						
	@Not applicable =4						

@ IF THE FACILITY IS NOT AVAILABLE, THEN IT BECOMES NOT APPICABLE

Q 1.10		f these close to the hospital? WELL AS OBSERVE)	Yes	NO	
	a.	Garbage dump	1	2	
	b.	Cattle Shed	1	2	
	c.	Stagnant pool	1	2	
	d.	Any Polluting industry	1	2	

2. VEHICLES

Type of	Numb	er of vehi	cles			IF, C	OFF ROAD,		
vehicles				Reason			Since when ? (IN MONTHS)		
	Available	Off	On the						
	the Road Road	Road	No POL	Waiting for repair	Lack of driver	Vehicle 1	Vehicle 2	Vehicle 3	
Ambulance									
Jeep									
Car									
Others 'specify'									

Q 2.1	Is the allocation of money to this hospital sufficient for POL?	Yes No	1 2	
Q 2.2	Is the allocation of money to this hospital sufficient	Yes	1	
	for repair?	No	2	

3. STAFF

3.1 Positions sanctioned, filled and available

SI.	Category of staff	Nu	mber of po	osts	If Vacant, since when (IN MONTHS)		
No.	Satisfier of Starr	Sanctioned	Filled	Available	'"'	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	110,
					I	II	III
1	Doctor in-charge						
2	Gynecologist & Obstetrician						
3	Pediatrician						
4	Anesthesiologist						
5	Specialist in RTI/STI (STD officer)						
6	Pathologist						
7	Surgeon						
8	General duty doctors: Male						
	Female						
9	Staff for conducting delivery: (a) Staff Nurse						
	(b) ANM						
	(c) Mid-wife						
10	Pharmacist/Compounder						
11	Lab technician/Lab Assistant						
12	Radiographer						
13	Computer/Clerk						
14	Public Health Nurse (PHN)						
15	Health Assistant – Male						
16	Health Assistant – Female						
17	Multipurpose Worker - Male						
18	Multipurpose Worker - Female						
19	Group C/category III staff						
20	Group D/category IV cleaners						
21	Others 'specify'						

3.1 Availability for emergency call

Q 3.1 a	Anaesthesits	Part time	1
		Contractual	2
		No arrangement	3
Q 3.2 b	Gynecologist	Part time	1
		Contractual	2
		No arrangement	3
Q 3.3	Is OT nurses available	Yes	1
		No	2
Q 3.4	Is OT attendant available	Yes	1
		No	2

ei vice	Training of Doc	tors			
SI. No.	A	Availed Training in		Numb	per of doctors
			9	Trained	Availability of trained doctor
1	Male-Sterilizat	Male-Sterilizations: No-scalpel			
	Female - Steri	lizations:	Tubectomy Mini-lap		
2	Medical Termi	nation of P	regnancy		
3	RTI/STI				
4	Newborn care				
5	RCH Foundation	on skill trai	ning (10 days)		
		Gynecolo	gy / Obstetric OPD Yes = 1 No = 2	RTI / STI (OPD Yes = 1 No = 2
Availab	ility of facility		No = 2		No = 2
If Yes,	ASK WHETHER TH	 E FOLLOV	VING FACILITIES A	RE AVALABL	E
SI. No.	FACILITY			Yes = 1 No = 2	Yes = 1 No = 2
1.	Boards/Name Pla	tes to guid	e the clients		
2.	Adequate Workin	g Space			
3.	Privacy during Ex	amination			
4.	Facility for Couns	selling			
5.	Separate Toilet w	ith running	g water		
6.	Facilities for Ster	ilizing instr	uments		
7.	Specialist (male o	loctor)			
8.	Specialist (female	doctor)			
8.	Specialist (female	doctor)	referral and reverse	Yes	1

5. WARDS / BEDS

SI.	Item Description	Total
No.		Number
1.	Number of wards	
2.	Number of beds	
3.	Number of Female wards (including maternity wards and gynecological wards)	
4.	Number of beds for females (including maternity beds and gynecological beds)	
5.	Number of maternity cases admitted during the last 3 months? (NOTE DOWN FROM THE RECORD)	
6	Number of Total deliveries (during the last three months): (a) Normal deliveries	
7	Average number of days a woman stay in hospital after (TAKE MOST RECENT 15 CASES ONLY) (a) Normal delivery	
8	Total number of paediatrics beds**	
9	Number of children admitted in paediatric beds during the last three months**	
10	Average number of days a bed in paediatric ward is occupied during the last three months	
11	No. of cases referred to higher facilities during the last 3 months	
12	No. of referral cases handled during the last 3 months	
13	No. of booked maternity cases during the last 3 months	

* COMPLICATED NON-CAESERIAN CASES INCLUDE PREMATURE LABOUR, OBSTRUCTED LABOUR, PROLONGED LABOUR, BREECH PRESENTATION, ETC

** ONLY FOR DH AND MEDICAL COLLEGE

Q 5.1 a	Is separate asecptic labour room available?	Yes 1
		No 2
Q 5.1 b	(IF NO in Q 5.1 a)	Operation theatre1
	Where do you conduct deliveries?	Labour room2
		Do not conduct deliveries3
		Other (SPECIFY)4
Q 5.1 c	Is labour room clean and well lit?	Yes 1
		No 2
Q 5.1 d	Is there provision for new born care	Yes 1
		No 2
Q 5.1 e	Is there ORT corner in	
	(a) Pediatric Ward	Yes 1
		No 2
	(h) ODD	
	(b) OPD	Yes 1
		No 2
6. TEST	LABORATORY	
Q 6a	Is adequate equipments available?	Yes 1
		No 2
Q 6b	Is adequate chemicals available ?	Yes 1
		No 2
Q 6c	Is laboratory maintained in orderly manner?	Yes 1
	(OBSERVE)	No 2

Q 6d	Is test facility available for	Yes	No
	1. Routine blood/urine/stool 2. Malaria 3. Blood group 4. RTI/STI 5. Hematology 6. Biochemistry 7. Pathology 8. Microbiology culture facilities	1 1 1 1 1 1	2 2 2 2 2 2 2

7. OPERATION THEATRE

1.	No. of operation theatres (OT) available	
2.	OT used whether only for obstetric/gynecological purpose*	Yes1 No2
3	Has O.T. enough space ?	Yes1 No2
4	Is OT fitted with air conditioner ?	Yes1 No2
5	Is the air conditioner working?	Yes1 No2
6	Is generator available for OT ?	Yes1 No2
7	Is emergency light available in OT ?	Yes1 No2
8	Is fumigation done regularly ? (CHECK THE RECORDS)	Yes1 No2
9	Is the days of sterilization in a week displayed on the public notice on O.T.?	Yes1 No2

^{*} If more than one then ask (whether one of the OT is exclusively used for ______ purpose?)

8. OPERATION THEATRE EQUIPMENT

	Items	Available Yes = 1 No = 2	Working Yes = 1 No = 2 NA = 3
1	Boyles Apparatus		
2	E M O Machine		
3	Cardiac Monitor for OT		
4	Defibrillator for OT		
5	Ventilator for OT		
6	Horizontal High Pressure Sterilizer		
7	Vertical High pressure Sterilizer 2/3 drum capacity		
8	Shadowless Lamp Ceiling Trak mounted		
9	Shadowless Lamp Pedestal For Minor OT		
10	OT Care/Fumigation apparatus		
11	Gloves & dusting Machine		
12	Oxygen Cylinder 660 Ltrs 10 Cylinders for 1 Boyles Apparatus		
13	Nitrous Oxide Cylinder 1780 Ltr. 8 for one Boyles Apparatus		
14	Hydraulic Operation Table		

9. OTHER EQUIPMENTS

	Items	Available Yes = 1 No = 2	Working Yes = 1 No = 2 NA = 3
1.	X-ray machine		
2.	ECG machine		
3	Ultrasound		

10. COLD CHAIN EQUIPMENTS

SI. No.	Cold chain equipments	Available Yes = 1 No = 2	IF AVAILABLE, How many?	In working condition (In No.)	Temperature maintained Yes = 1	If no working since (In mo	g order when
					No = 2	1st item	2nd item
1.	Walk-in coolers						
2.	Walk-in freezers						
3.	Icelined freezers						
4.	Deep freezers						
5.	Refrigerators						

10.1. BLOOD BANK FACILITY

Q 10.1 a	Is the hospital having linkage with district blood	Yes	1
	bank?	No	2
		No district blood bank	3
Q 10.1 b	Is established and regular blood supply available?	Yes	1
		No	2

11. CONTRACEPTIVE, VACCINE, DRUGS Availability Item Experience of stock out during Present Stock last three months SI. No. Yes No Α Contraceptives (1) Lubricated Nirodh pieces...... (2) Oral pill Cycles..... (3) IUDs..... (4) Tubal rings..... Vaccine Doses (1) DPT..... (2) OPV..... (3) TT..... (4) BCG..... (5) Measles...... (6) DT..... С **Prophylactic Drugs** (1) IFA Tablet. Large (2) IFA Tablet Small..... (3) Vitamin A Solution..... (4) ORS Packets..... (1) Tab. Paediatric Cotromoxazole Ε RTI/STI drugs Availability of other Drugs (1) Essential drug as per hosp. Drug list..... (2) Life saving drug including Anti snake venume...... (3) Laboratory regents..... (4) X-Ray films..... Condition of storage of drugs G 1. Good 2. Fair 3. Poor **TESTING VACCINE** 11.1 Q 11.1a Is OPV send for testing in last 3 months Yes 1 No 2 Q11.1 b If yes in Q 11.1a Fit 1 What was the result? Unfit 2 Result awaited 3

12. SU	PPLY OF KITS			
Sr No.	Type of Kit		Supplied Yes = 1 No = 2	<pre>IF YES, Is it in use ? Yes = 1 No = 2</pre>
1	Standard Surgical Set I - Kit E			
2	Standard Surgical Set II - Kit F			
3	Standard Surgical Set III - Kit H			
4	Standard Surgical Set IV - Kit J			
5	Standard Surgical Set V - Kit K			
6	Standard Surgical Set VI - Kit L			
7	IUD Insertion Kit - G			
8	Normal Delivery Kit - I			
9	Kit Equipment for Anaesthesia - M			
10	Kit Equipment for Neo-Natal Resuscitati			
11	Kit for Side Laboratory Test & Blood Tr	ansfusion - O		
12	Kit for Donor Blood Transfusion - P			
13	Kit for New Born Care Equipments			
14	Kit with Emergency Obstetric Care Drug			
15	Kit with Consumable items for RTI/STI	Laboratory diagnosis		
12	Ctook Maintonones			
	Stock Maintenance			
Q 13.1	Is there a store room to keep d		Yes	1
0.10.0	contraceptives and equipments If Yes in Q 13.1 (Observe)	·	No	2 1
Q 13.2	Is it damp?		Yes No	2
Q 13.3	Whether the storeroom has pro	pper lighting facility?	Yes	<u>2</u> 1
Q 13.3	Whether the storeroom has pro	per lighting facility:	No	2
Q 13.4	Whether the size of the storero	om is sufficient for	Yes	1
2 10.1	keeping stock?	om is surnicione for	Somewhat inac	
	nooping crooks		Grossly inadequ	•
Q 13.5	How are thermolabile drugs store	ed	Cool room	1
			Refrigerator	2
			Any other	3
Q 13.6	Whether the room is damp?		Yes	1
			No	2
Q 13.7	Are stock registers maintained	regularly	Yes	1
			No	2
Q 13.8	Is expiry date drugs register mai	ntained properly	Yes	1
4 10.0	is exput and analysis agrees men	The property	No	2
14. SE	RVICE AVAILABILITY		-	
Q 14.1	Number of days (IN A MONTH	the following services		
	are available:	the remerning controls		
		nte-natal Clinics		
	, ,	ost-natal clinics		
	(c) In	munization Sessions		
Q 14.2	Any special counter available in	the hospital to easily	Yes	No
	obťain	, ,		
		(a) Oral Pills	1	2
		(b) Condom	1	2
		(c) ORS Packets	1	2
Q 14.3	IF YES FOR ANY OF THE ABO	VE		nctioning regularly?
			(a) (b)	(c)
		Yes	1 1	1
	If no newhold are from this colors are the	No	2 2	2
	If reported as functioning regular Verify	iy, irivestigator should		
	Verily			
15 //	COMMODATION FACILITY FOR	EVWILLES UE VOVILLE	TED DATIENT	-c
15. A	CONINDUATION FACILITY FUR	FAIVILLES OF ADIVIT	IED FAIIENI	J

Q 15.a	Facility for stay available	Yes	1
		No	2
Q 15.b	Cooking facility available	Yes	1
		No	2

ALL PERFORMANCE IN TABLE 16A, 16B & 17 REFER TO LAST COMPLETED THREE MONTHS PRIOR TO DATE OF SURVEY (TO BE COPIED FROM RECORDS)

16 A PERFORMANCE

Sr. No.	Туре	Services utilized	Number
1.	Antenatal care	Examined at OPD	
		Admitted	
2.	Postnatal care	Examined at OPD	
		Admitted	
3.	Deliveries conducted	TOTAL	
4.	Normal deliveries	Total	
5.	Complicated deliveries	Direct admission	
		Referred	
		Total	
6.	Caesarian sections	Direct admission	
		Referred	
		Total	
7.	Medical termination of pregnancy (MTP)		
8.	Male Sterilization		
	(a) Vasectomy		
	(b) No scalpel vasectomy		
9.	Female Sterilization		
	(a) Tubectomy		
	(b)Laparoscopic		
	(в) сарагоѕсоріс		
	(c)Mini-lap		

16 b. PERFORMANCE AT HOSPITAL/CHC/FRU PREVIOUS LAST QUARTER Sr. Item Number No. No. of patients, examined in OPD during the calendar year to last 2. No. of in patients examined during the calendar year to last quarter No. of patients examined during the calendar year to last quarter All patients Gynaecology **Paediatricts** Surgical Medical Total No. of Beds 4. 5. 6. Number of operations performed Gyane. Obstet. Surgery No. of caesarian sections performed No. of MTP's performed No. of male sterilisation performed 10. No. of female sterilisation performed No. of IUD insertion done 11. 12. No. of children treated for Pneumonia Acute gestroenterites Other emergencies treated 13. No. of cases provided emergency obst. Care 14. No. of cases provided surgical emergency care 15. No. of cases provided medical emergency care 16. No. of lab tests performed Routine Malaria Biochemistry Haematology STI/RTI 17. No. of ECG's performed 18. No. of X-rays done 19. No. of In service training programms conducted for Doctors for Paramedicals 20. No. of workshops/seminars held 16 c Occupancy rate of Maternity bed Pediatric bed

17. NUMBER OF CASES OF DIARRHOEA/PNEUMONIA/RTI/STI Diarrhoea Males Females Total (Children below Admitted age 5) Treated at OPD Total Admitted Pneumonia (Children below Treated at OPD age 5) Total RTI/STI Admitted Treated at OPD Total

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APPENDIX A-II REPRODUCTIVE AND CHILD HEALTH (RCH) PROJECT FACILITY SURVEY - 2002

PRIMARY HEALTH CENTRE IDENTIFICATION

State:	
District:	
Name of Tehsil/taluk:	
Name of Block:	
Name of PHC:	
Since when the PHC is functioning (YEAR)	
Since when is this PHC functioning from this building? (YEAR)	
Name of the head quarter village/block	
Number of villages covered by the PHC	
Population covered by the PHC (LATEST) [ENTER THE MONTH AND YEAR TO WHICH THE POPULATION RELATES TO]	
Distance (IN KM) between PHC and the nearest (within the state) higher level health facility (WRITE WITHIN BRACKETS THE TYPE OF HEALTH FACILITY)	Month Year
FRU/CHC HQ/RH/DH (FRU-1, CHC- 2, RH- 3, DH- 4) Nearest sub-centre	
Farthest sub-centre	
No. of villages in PHC area accessible through out the year	
Total No. of sub-centres attached to the PHC	
No. of sub-centres attached to this PHC with its own premises	
Name of the respondent123	
Type of work of the respondent Medical	
(SPECIFY) (IF MORE THAN ONE RESPONDENT, CIRCLE THE NUMBER AGAINST ALL RESPONDENTS) Date of data collection	
Date Month year	
Name of the Investigator	
Signature of the Investigator	

	NFRASTRUCTURE HC Building					
Q 1.1a	Ownership of PHC bui	ilding	Ov	vn		1
			_	nted		2
Q1.1b	Type of PHC building			nated/Rent F cca	ree	3 1
Q1.15	(OBSERVE)		_	mi- <i>Pucca</i>		2
				chcha		3
Q1.1c	Maintenance			gular casional		1 2
				ver done so	far	3
			Ne	w building /<	< 2YEARS OLD)	4
					t (civil/ electrical)	5
Q1.1d	Present condition of the	e building		nen was it do ood	one lastyears ago	<u>6</u> 1
	(Respondent)	3	Ne	eds minor rep		2
			Ne	eds major rep	pair	3
1.2 S	taff Quarters					
	Category of Staff	Number of			Whether at least one stay in the PHC	
		Total		ed by same	compound	
				llottee es - 1	Yes = 1 No = 2	
			N	0 - 2	110 – 2	
	Medical Officer					
	Health Assistant (Male)					
	Health Assistant (Female)					
	Nurse/ANM					
	Others 'specify'					
1.3 V	Vater Supply				<u>l</u>	
Q1.3a	Main Source:			Тар	1	
-	Wall Source.				·	
-	Wall Source.			Tube Well	/Hand Pump/Bore Well 2	
-	Wall Goalog.			Tube Well / Well	·	
-				Tube Well / Well Other	/Hand Pump/Bore Well 2 3 4 (SPECIFY)	
	(ASK Q 1.3b AND Q 1.3c		IF SOURC	Tube Well / Well Other	/Hand Pump/Bore Well 2 3 4 (SPECIFY) R SUPPY IS TAP)	
			IF SOURC	Tube Well / Well Other	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) R SUPPY IS TAP)	
Q1.3b	(ASK Q 1.3b AND Q 1.3c Is water supply regula	r?	IF SOURC	Tube Well / Well Other CE OF WATE Yes No	/Hand Pump/Bore Well 2 3 3 4 (SPECIFY) R SUPPY IS TAP) 1 2	
Q1.3b	(ASK Q 1.3b AND Q 1.3c	r? regular,	IF SOURC	Tube Well / Well Other	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) R SUPPY IS TAP)	
Q1.3b	(ASK Q 1.3b AND Q 1.3c) Is water supply regula If water supply is not Whether overhead tan	r? regular,	IF SOURC	Tube Well / Well Other	/Hand Pump/Bore Well 2 3 3 4 (SPECIFY) R SUPPY IS TAP) 1 2 1	
Q1.3b Q1.3c 1.4 ELEC	(ASK Q 1.3b AND Q 1.3c) Is water supply regula If water supply is not Whether overhead tan	r? regular,	IF SOURC	Tube Well / Well Other	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) 7 8 SUPPY IS TAP) 1 2 1 2 1 2	
Q1.3b Q1.3c 1.4 ELEC Q1.4a	Is water supply regula If water supply is not Whether overhead tan TRICITY Electricity connection	regular, ık is available?		Tube Well / Well Other Other Yes No Yes No	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) 7 8 SUPPY IS TAP) 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
Q1.3b Q1.3c 1.4 ELEC Q1.4a	Is water supply regula If water supply is not Whether overhead tan TRICITY Electricity connection Whenever you need, i	regular, ık is available?		Tube Well / Well Other	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) 7 8 SUPPY IS TAP) 1 2 1 2 1 2	
Q1.3b Q1.3c 1.4 ELEC Q1.4a	Is water supply regula If water supply is not Whether overhead tan TRICITY Electricity connection	regular, ık is available?		Tube Well / Well Other Other Yes No Yes No Yes No Yes	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) 7 8 SUPPY IS TAP) 1 2 2 1 2 1 2 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 2 1 1 1 1 2 1	
Q1.3b Q1.3c 1.4 ELEC Q1.4a Q1.4b 1.5 C	Is water supply regula If water supply is not Whether overhead tan TRICITY Electricity connection Whenever you need, i	regular, ık is available?		Tube Well / Well Other Other Yes No Yes	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) 7 8 SUPPY IS TAP) 1 2 2 1 2 1 2 2 1 2 1 2 1 2 1 2 1 2 1	
Q1.3b Q1.3c 1.4 ELEC Q1.4a	Is water supply regula If water supply is not Whether overhead tan TRICITY Electricity connection Whenever you need, is communication Facility	regular, ık is available?		Tube Well / Well Other Other Yes No Y	/Hand Pump/Bore Well 2 3 4 4 (SPECIFY) 7 8 SUPPY IS TAP) 1 2 2 1 2 1 2 2 2 1 2 2 2 1 2 2 2 1 2 2 2 1 2 2 2 1 2	

1.6 Toi	let Facility (<i>IF TOILET IS AVAILABLE)</i>				
	Type of toilet		Toilet	1 Toilet	2 Toilet 3
		Flush	1	1	1
		Pit	2	2	2

1.7	Vehicle	(Jeep/Ambulance)		
Q1.7a		Vehicle available?	Yes	1
			No	2
Q1.7b		IF AVAILABLE, since when? (YEAR)		
Q1.7c		IF NOT AVAILABLE, whether there is provision	Yes	1
		to hire vehicle?	No	2
Q1.7d		Is the vehicle functional on date of interview?	Yes	1
			No	2
Q1.7e		IF OFF ROAD, since when	Less than 15 days	1
			15 days to 45 days	2
			45 + days	3
Q1.7f		Is PHC driver available for regular duty?	Yes	1
			No	2
Q1.7g		Is PHC driver available for emergency duty?	Yes	1
			No	2
Q1.7h		Supply of petrol/diesel	Sufficient	1
			Insufficient	2
Q1.7i		Is allocation of money sufficient for repair?	Sufficient	1
			Not sufficient	2

2.FACILITIES AVAILABLE

2.1 Operation theatre (OT)

Sr. No.	Facilities	Yes - 1 No - 2	Utilized Yes - 1
			No - 2 NA - 3
1	Is O.T. available?		
2	Is separate generator available for O.T. ?		
3	Is there an exhaust fan fixed in the OT?		
4	Is Fumigation done regularly in O.T.?		

2.2 Labour room / IUD room

Sr.		Yes - 1	Utilized
No.	Facilities	No - 2	Yes -1
			No - 2
			NA -3
1	Is labour room/ IUD room available?		
2	Is fumigation done regularly in labour room/IUD		
	room		•

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2.3 OTH	ER FAC	EILITIES			
	Sr. No.	Facilities Available	9	Yes - 1 No - 2	Utilized Yes - 1 No - 2 NA - 3
	1	Separate ANC clinic room			NA U
	2	Dispensing Room			
	3	Doctors' Room			
	4	Store Room			
	5	Facility for Basic Laboratory Service	es		
		(a) Blood test – routine			
		(b) Blood test - VDRL			
		(c) Urine test			
		(d) Stool test			
·	I				
Q2.4	No.	of beds available			
Q2.5	ls b	ed-sheets or blankets available as per	norms?	Yes No	1 2
3. §		POSITION AND TRAINING STAU	TUS	INO	2
Sr. No.	Cat	egory of Staff	Number of Po	sts	IF VACANT, since
			Sanctioned	Regular	when the position is vacant (IN MONTHS)
1.		dical officer			
2.	Med	dical Officer (Female)			
IF NO PO	ST OF N	MEDICAL OFFICER IS FILLED,			
Q3.1a		ny doctor appointed on a contract o	r temporary	Yes	1
	bas	'ES in Q3.1a		No	2
Q 3.1b			Number of Do	octors	
		Male Female			
		i emale	<u> </u>		

3.2 IN-SERVICE TRAINING OF MEDICAL OFFICER DURING LAST 3 YEARS (Relates to current MOs)

	Category of Training	Number Trained
1.	Sterilization - tubectomy	
2.	No scalpel vasectomy	
3.	Medical Termination of Pregnancy (MTP)	
4.	RCH integrated training of 12 days duration	

3.3 NON-MEDICAL STAFF

SI.	Category of Staff	Number of posts		
No.	catagor, or etail	Sanctioned	Filled	
1.	(Health Educator) / Pharmacist			
2.	Compounder			
3.	Lab. Technician			
4.	Class III staff			
5.	Driver			
6.	Class IV Staff			
7.	Other (Specify)			

3.4 PARA-MEDICAL STAFF - Availability and in-service training

SI.	No. of posts Number trained in during I Category of staff				last (3 years)						
No.	Sutagory or otall	Sanctioned	Filled	1	2	3	4	5	6	7	8
1	Public health nurse/staff nurse/ midwives										
2	Health asst. – Male										
3	Health asst. – Female										
4	Multi-purpose worker –Male										
5	Multi-purpose worker –Female										
6	Others 'specify'										

NOTE: 1. IUD = Intra Utrine Device 2. UIP = Universal Immunization Programme

3.CDD/ORT = Control of Diarrheal Diseases / Oral Rehydration Therapy

4.ARI = Acute Respiratory Infection 5. CSSM = Child Survival and Safe Motherhood

6. RCH = Reproductive and Child Health Awareness generating training of RCH (integrated training of 12 days duration)

7.Sexually Transmitted Infections 8.Blood Pressure Checking

(CHANGE NOMENCLATURE AS IT PREVAILS IN DIFFERENT STATES/UTs WHEN QUESTIONNAIRE IS PRINTED. INCLUDE THE ORIGINAL ALSO TO ENABLE STANDARDIZATION IN TABULATION)

4.1 GENERAL

Sr. No.	Items	Number	
		Available	Functioning / in use
1.	X-Ray machine		
2.	Examination Table		
3.	Weighing Machine (Infant)		
4.	Weighing Machine (Adult)		
5.	B.P. Instrument		
6.	Stethoscope		
7.	Autoclave		
8.	Steam Sterilizer Drum		
9.	MTP Suction Aspirators		
10.	Microscope & Lab. Equipment		
11.	Oxygen Cylinder		
12.	Labour Room Equipments		
13.	Labour Room Table		
14.	O.T. table		

4.2 COLD CHAIN EQUIPMENTS

Sr. No.	Items	Nun		Whether thermometer is available * Yes = 1, No = 2
		Available	Functioning	165 – 1, 110 – 2
1.	ILR 300			
2.	ILR 140			
3.	Deep Freezer 300			
4.	Deep Freezer 140			
5.	Refrigerator			
6.	Cold Box			
7.	Vaccine/Day Carrier			

* Irrespective of the type of thermometer like dial thermometre, horizontal thermometre

_	4.3 MAINTENANCE OF COLD CHAIN EQUIPMENTS (IF TERMOMETRE FOR ILR IS AVAILABLE OBSERVE AND ENTER)							
Q4.3a	Whether the thermometer is functioning?	Yes No	1 2					
Q4.3b	Whether thermometer is kept in ILR?	Yes No	1 2					
Q4.3c	Whether daily temperature chart is maintained?	Yes No	1 2					
Q4.3d	Number of times the temperature was out of range of 2° - 8° during the last one week							

5. ADEQUACY OF								
Q5.a	Needles	Adequate	1					
		Inadequate	2					
Q5.b	Syringes	Adequate	1					
		Inadequate	2					
Q5.c	Syringes are autoclaved or not	Autoclaved	1					
		Not autoclaved	2					
Q6.a	Are disposable items used?	Yes	1					
		No	2					
Q6.b	How are they destroyed after use?	Bury in a pit	1					
		Public disposal	2					
		Thrown outside PHC	3					
		Thrown inside PHC	4					
		Others (Specify)	5					

7. LIST OF KITS WITH EQUIPMENTS/DRUGS

Sr.		Supplied to	Utilized
No.	Kits	PHC	Yes - 1
		Yes - 1	No - 2
		No - 2	NA - 3
1.	Kit A Drugs (Sub-Centre)		
2.	Kit B Drugs (Sub-Centre)		
3.	Kit C Equipments (Sub-Centre)		
4.	Kit D Equipments (PHC)		
5.	Kit G IUD insertion (PHC)		
6.	Kit I Normal delivery kit (PHC)		
7.	Kit of Essential obstetric care drugs (PHC)		
8.	New born care equipments (PHC):		
8 a.	Infant resuscitation bag with mask (capacity 700 ml with safety valve set to 70 cm of water)		
8 b.	Weighing machine (Pan type 0-10 Kg with 50 gm sensitivity)		
8 c.	Paddle operated suction machine		
8 d.	Mounted lamp with 200 w bulb (warming device)		
8 e.	Baby bassinet \$		

^{\$:} A basket with a hood over one end (in some cases even without a hood), for use as a baby's cradle

8. CONTRACEPTIVES, VACCINES AND DRUGS

Туре		Unit	Quantity of stock on the day of survey	Whether supply is regular Yes = 1 No = 2	quantity	1	Experience of out of stock during the last one month Yes = 1 No = 2
8.1 Contra	ceptives	•			•		
Piece		Number					
2. Oral Pill	l	Cycles					
3. IUDs		Number					
8.2 Vaccin	nes	1		1			
1. BCG							
2. DPT							
3. OPV		Vials or ampulse					
4. Measle	es	·					
5. DT							
6. TT							
8.3 Prophy	ylactic Drugs		<u> </u>	1			
1. IFA Ta	b. (Large)	Number of strips					
2. IFA Ta	b. (Small)	Number of strips					
3. Vit. A	Solution	Bottle					
4. ORS Pa	ackets	Number					
5. Contra	maxazol	Tablet					
9. TES	TING VACCINE						
Q9.1	Was OPV send	for testing	in last 3 mo	onths		Yes No	1 2
Q9.2 If yes, what was the result ?						Fit Unfit Result awaited	1 2 3

10. PERFORMANCE AT THE HEALTH FACILITY (COPY FROM FORM 7 OR ITS EQUIVALANT AVAILABLE)

SI. No.	Items	Number (PERFORMED DURING THE LAST THREE MONTHS)
10.1	Deliveries conducted at the PHC	
10.2	Neo-natal care	1
	a. No. of new born babies weighed	
	b. No. of low birth weight babies	
	c. Treated at PHC	
	d. Referred to FRU/DH	
10.3	No. of children under 5 with pneumonia	L
	a. Treated at PHC	
	b. Referred to FRU/DH	
10.4	No. of children under 5 with acute diarrhoeal diseases	I
	a. Treated at PHC	
	b. Referred to FRU/DH	
10.5	No. of male sterilizations	I
	a. Conventional vasectomy	
	b. No-Scalpel vasectomy	
10.6	No. of female sterilizations	I
	a. Abdominal	
	b. Laparoscopic	
10.7	No. of IUD insertions	
10.8	No. of medical termination of pregnancy	
10.9	No. of patients attended in OPD in last 3 months	
10.10	No. of Lab. tests in last 3 months	
10.11	No. of x-rays done in last 3 months	
10.12	No. of patients attended in IPD in last 3 months	

11. TO BE COMPLETED BY MEDICAL OFFICER-IN-CHARGE

Kindly list major problems, (mentioned below), that you face in efficiently effecting service delivery to the satisfaction of the clients and the solutions you perceive in rectifying these problems. Please be specific (maximum five problems of utmost priority).

- a. Manpower
- b. Infrastructure
- c. Supply model
- d. Vehicle
- e. Any other specific problems

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APPENDIX A-III REPRODUCTIVE AND CHILD HEALTH (RCH) PROJECT FACILITY SURVEY - 2002

SUB CENTRE IDENTIFICATION

State:	
District:	
Name of Tehsil/taluk:	
Name of Block:	
Name of Sub Centre:	
Since when the SC is functioning (YEAR)	
Since when is this SC functioning from this building? (YEAR)	
Name of the PHC to which it is attached to	
Number of villages covered by the SC	
Population covered by the SC (LATEST) MonthYear [ENTER THE MONTH AND YEAR TO WHICH THE POPULATION RELATES TO]	
Distance (IN KM) between PHC and SC	
Distance (IN KM) between SC and (Other than SC Village)	
Nearest village under SC	
Farthest village under SC	
No. of villages in SC area accessible through out the year	
Name of the respondent123	
Designation of the respondent	
Male Health Worker	
Date of data collection	
Date Month Year	
Name of the Investigator	
Signature Investigator	

1. IN	NFRAS	TRUCTURE							
1.1 S	C Build	ing							
Q1.1	Wh	ere is the SC functioning?		Govt. build Rented build Rent free, Building	lding	t / Voluntai	ry society	1 2 3	
				ANM's hou	120			4	
				Other				5	
						PECIFY)		Ü	
1.2 S	taff Qu	arters			, -	•			
Q 1.2	Wh	ere is ANM staying?		In quarters			1		
				In own hou		village	2		
				In sub-cen			3		
/ONLY 505	7//005	OUR OFFITEEN WITH A CONFEDER	ENT DUU	Outside SC			4		
	1 HUSE	SUB-CENTRES WITH A GOVERNME	EN I BUILL	JING ASK 1.3	3 10 1.5)				
1.3 W	Vater Su			T					
	Ma	in Source of water supply		Тар			1		
					/Hand Pu	mp/Bore W			
				Well			3		
					Other4 (SPECIFY)				
1.4 Electri	icity				101	LON 1)			
Ω 1.4	ls F	Electricity available?		Yes			1		
•		aramazio.		No			2		
1.5 Toilet	Facility	,							
Q 1.5	ls 7	Toilet available?		Yes No			1 2		
1.6 Mode	of Tra	nsportation		NO					
Q 1.6	Wh	nat is the main mode of transport	tation	Own mope	ed		1		
		M use to visit the villages?		Cycle			2		
				Other			3		
				Specify					
	Staff Po								
(3	Sanction	ned and in position)							
		Staff	Numbe		In positi	on			
			Male	Female	Male	Female			
		Health worker	IVIAIC	Terriale	IVIAIC	Terriale			
		Part time Voluntary worker							
		(ANM Assistant)							
		Contractual female health worker							
	•					1	1		
		*: In Position means that the p should not be on leave for more							
		deputation							

2. IN-SERVICE TRAINING (WHETHER THE STAFF/HEALTH WORKER HAS UNDERGONE THE FOLLOWING TRAINING WHILE IN SERVICE?)

SI.		Female	Male
No.	Category of Training		
		Yes = 1	Yes = 1
		No = 2	No = 2
1.	Intra Utrine Device (IUD) Insertion		
2.	Control of Diarrheal Diseases /		
	Oral Rehydration Therapy (CDD/ORT)		
3.	Universal Immunization Programme (UIP)		
4.	Child Survival and Safe Motherhood (CSSM)		
5.	Awareness generating training of RCH		
	(integrated training of 12 days duration)		
6.	Acute Respiratory Infection (ARI)		

3. EQUIPMENTS

3.1 GENERAL

SI. No.	Items		Number
NO.	items	Available	Functioning/Used
1.	Examination Table		
2.	Weighing Machine (Infant)		
3.	Weighing Machine (Adult)		
4.	B.P. Instrument		
5.	Stethoscope		
6.	Pressure cooker		
7	Hemoglobinometer		
8.	Reagent strips for urine test		
9.	Speculum		
10.	Stove		
11.	Almirah		
12.	Medicine Chest		
13.	Any Other Equipments (specify)		

3.2 COL	D CHA	IN EQUIPMENTS							
Q 3.2a		Is vaccine/day carrier	available*?			Yes	1		_
		[*AVAILABLE BUT KEPT IN PHC SHOULD ALSO BE INCLUDED]					2		
Q 3.2b	Q 3.2b						1		_
		Is it being utilized?	No	2					
4. CON	ΓINGEN	CY							
Q 4.1A		Did ANM receive any	contingency	/ to		Yes	1		
purchase Kerosene?						No	2		
IF Yes in	1 Q4.1á	a, ask Q4.1b & Q4.1c							
Q4.1b		Mention the quantity	in Liters						
Q4.1c		When did she receive	contingency	y last?					
						Month	Ye	ar	
5. AVA	ILABIL	ITY AND ADEQUAC	Y						_
									_
SI.	Availa	ability and Adequacy	uacy Needles Syringes Ma			ernal	Reagents	Kerosene	1
No.					_	alth/	(Strips)	(Litre)	
					_	nization ard			
1.	Numb	er available on the							1
	day o	f visit							
2.	Is it a	dequate for the next							
	one n	nonth?							
		Adequate = 1							
		Inadequate = 2							J
Q 5.1a		Whether eligible coup	ole registers	are supplied?		Yes	1		_
		-				No	2		
If YES i	in Q5.1	a, ask Q5.1b							
Q 5.1b		Is it adequate for nex	t six months	3		Yes	1		
						No	2		
Q 5.2a		Whether maternal an	d Child care	records are sup	plied?	Yes	1		
If OF 2	- Voc	ask Q5.2b				No	2		_
	= res,					1			
Q 5.2 b		Is it adequate for nex	t six months	3		Yes	1		
						No	2		

6.CONTRACEPTIVES, VACCINES, DRUGS AND DDK

Туре		Unit	Quantity of stock on the day of survey	Whether supply is regular Yes = 1 No = 2	Whether the available quantity is sufficient for the next month's Requirement? Yes = 1 No = 2	Experienced out of stock during the last one month Yes = 1 No = 2
6.1	Contraceptives					
1.	Lubricated Nirodh Pieces	Number				
2.	Oral Pill	Cycles				
3.	IUDs	Number				
6.2	Prophylactic Drugs (Co	ntents of I	Drug Kit A)	•		
1.	IFA Tablet (Large)	Number of strips				
2.	IFA Tablet (Small)	Number of strips				
3.	Vitamin A solution	Bottle				
4	ORS packets	Number				
5	Cotrimaxazole tablet (Pediatric)	Tablet				
6	Disposable Delivery Kit	Number				

6.3 Contents of Drug Kit B

SI. No.	Name of item	Unit	Quantity of stock on the day of survey	Whether supply is regular Yes = 1 No = 2	Whether the available quantity is sufficient for the next month's requirement? Yes = 1 No = 2	Experience of out of stock during the last one month Yes = 1 No = 2
1	Tab.Methelergometrine Maleate (0.125 mg)	Tablet				
2	Tablet paracetamol (500 mg)	Tablet				
3	Inj. Methelergometrine Maleate (0.2 mg/ml., 1 ml)	Ampule				
4	Tab. Mebendazole (100 mg)	Tablet				
5	Dicyclomine (10 mg)	Tablet				
6	Chloramphenicol eye ointment (250 mg)	Applicap				
7	Oinment Povidone Iodine (5%)	Tube				
8	Cetrimide Powder (125 gm)	Packet				
9	Absorbent Cotton	Roll				
10	Cotton Bandage (4 cm width x 4 metres length)	Roll				

7. RECEIPT AND UTILIZATION OF KITS (KITS WITH EQUIPMENTS AND DRUGS)

SI. No.	Kits	Received Yes-1	Date of receipt (last received)	Utilized by SC Yes - 1
		No-2	NA = 3	No – 2
1.	Kit A Drugs			
2.	Kit B Drugs			
3.	Kit C Equipments			

8.	Have you developed Sub-Center Plan for this year?	Yes	1
	[IF YES, PHYSICALLY VERIFY]	No	2

9. PERFORMANCE DURING THE LAST THREE MONTHS

SI.	Performance	Number
No.		
1.	Total Number of home visited (Last two weeks from survey)	
2.	Total antenatal cases registered	
3.	No. of women provided ANC	
4.	No. of women visited during post natal period	
5.	No. of infants immunized	
6.	No. of children immunized	
7.	No. of children treated for ARI & diarrhoea	
8.	No. of OP packets distributed	
9.	No. of condoms distributed	
10.	Total No. of Dai/AWW meeting organised/attended	
11.	Total No. of health cases attended/treated minor ailments	
12.	No. of deliveries conducted by ANM in sub centre or home	
13.	No. of IUD inserted by ANM	

		Yes	1
10.	Do you have fixed service days?	No	2

IF Yes

	Da	Days fixed for			
	Immunization care	Ante-natal care			
Village 1					
Village 2					
Village 3					
Village 4					
Village 5					
Sub-centre HQ					

11. TRAVELING ALLOWANCE

Q 11.1a	Do you get Fixed	Travel Allowan	ce?	Yes	1
				No	2
If No in Q1	1.1a, ask Q11.1b				
Q 11.1b	Whether ANM ha	s received TA	during the last	Yes	1
	three months?			No	2
Q 11.1c	<i>IF NO</i> in Q 11.1	b,			
	When did she red	ceive the last TA	\?		
				Month	Year
					. 66.
12 INVEST	GATOR'S ASSESSM	MENT OF THE (CLEANLINESS OF S	UB-CENTRE BUI	I DING AND REMISES
12. INVEST	'IGATOR'S ASSESSN	MENT OF THE (CLEANLINESS OF S	UB-CENTRE BUI	LDING AND REMISES
12. INVEST					LDING AND REMISES
12. INVEST	Gub-center bu		CLEANLINESS OF S		LDING AND REMISES
12. INVEST					LDING AND REMISES
12. INVEST	Sub-center bu	uilding	Sub-center p	remises	LDING AND REMISES
12. INVEST	Sub-center bu	uilding = 1	Sub-center p Very clean	remises = 1	LDING AND REMISES
12. INVEST	Sub-center bu Very clean Clean	uilding = 1 = 2	Sub-center p Very clean Clean	remises = 1 = 2	LDING AND REMISES

APPENDIX A-IV REPRODUCTIVE AND CHILD HEALTH (RCH) PROJECT FACILITY SURVEY - 2002 INDIAN SYSTEMS OF MEDICINE & HOMOEOPATHY

INDIAN SYSTEMS OF MEDICINE & HOMOEOPATHY GOVT. HOSPITALS

IDENTIFICATION

State:		
District:		
Name of Tehsil/Block	_	
Name of Block	_	
Name & Address of the Hospital	-	
System of Medicine Ayurveda Homoeopathy Unani Siddha	1 2 1 2	
Location Code Rural Urban		
Distance of the Hospital from District Headquarters (Kms)		
Since when this Hospital is functioning (Year)		
Since when this Hospital is functioning in this Building (Year)		
Name of the Officer in-charge	-	
Designation of the Officer in-charge		
Date of data collection Date Month Year		
Name of the Investigator	-	
Signature of the Investigator	-	

1	INFRASTRUCTURE		
1.1	Building		
Q1.1a	Ownership of Building	Rented Owned	1 2
		Rent free/Donated	3
Q1.1b	Type of Structure	Pacca	1
Q	(Observe)	Semi Pacca	2
	(0000110)	Kachcha	3
Q1.1c	Is compound Wall/Fence Available	All around	1
Q1.10	10 compound vvaii/1 choc/tvaiiable	Partial	2
		No	3
Q1.1d	Maintenance	Once in a year	1
Q	Maintonaireo	Once in 3 years	2
		Never done so far	3
		New building less than 2 years old	4
1.2	Other facilities in the building	Trew ballaring lead than 2 years old	
Q1.2a	Main Source of Water Supply	Тар	1
Q1.20	Wain Godice of Water Supply	Tube well/Hand Pump/Bore Well	2
		Well	3
		Others	4
Q1.2b	Whether Overhead Tank and Pump exist	Yes	1
Q1.20	Whether Overhead Tank and Fullip exist	No	2
Q1.2c	If Yes in q1.2b,	Yes	1
Q1.20	Is the pump in working condition	No	2
Q1.2d	Availability of Electricity	Yes	
Q1.20	Availability of Electricity	No	1 2
Q1.2e	Degularity of Floatric Cumply	Continuous	1
Q1.2e	Regularity of Electric Supply		
Q1.2f	Is Generator available	Not Continuous Yes	2
Q1.ZI	is Generator available		1
04.2~	Availability of Talambana Facility	No	2
Q1.2g	Availability of Telephone Facility	Yes	1
Q1.2h	A 11-1-114 4 T - 11-4 T 114 -	No Yes	2
Q1.Zn	Availability of Toilet Facility		1
04.0:	Time of Coverage	No Cook nit	2
Q1.2i	Type of Sewerage	Soak pit	1
		Connected to Municipal Sewerage	2
04.0:	Discount of Mosts Material	No Sewerage Facility	3
Q1.2j	Disposal of Waste Material	Burry in a pit	1
		Thrown in common/ Public disposal pit	2
		Thrown outside Hospital Compound	3
04.014	Cleanliness	Thrown inside Hospital Compound	4
Q1.2k	Cicariiii	(i) OPD	
	(Observe and Classify as Good-1, Satisfactory-2,	(ii) Deeme	
	Unsatisfactory-3)	(ii) Rooms	
		(iii) Wards	
		(iii) Wards	
		(iv) Toilets	
		(iv) Toilets	
		(v) Hospital Premises	
		(vi) Surrounding	
		(vi) Surrounding	
		(Space outside the hospital)	
		(vii) Puilding	
		(vii) Building	
	•		

2. AVAILABILITY OF DOCTORS AND STAFF IN THE HOSPITAL (AS ON DATE OF SURVEY) SI. Category **Available** Number in Shortfall (Col. Total No. of months for No. **Position** which all the staff Col. 4) mentioned in Col.5 were not in position during last three years 3 2 4 5 6 Medical Officer 2 Sister 3 Staff Nurse Pharmacist 5 Cook Dhobi 6 Others **EQUIPMENTS & OTHER INFRASTRUCTURE FACILITIES** Q3.1 Whether Staff quarters Available 1 No 2 Q3.2 No. of Quarters Q3.3 Is any Vehicle Available Yes 1 No 2 Q3.4 If yes in 3.3 is the Vehicle in working condition Yes 1 No Q3.5 Total No. of Indoor Departments Q3.5a Name of the Department 2 3 Q3.6 Total No. of Department in O.P.D. Q3.6a Name of the Department 2 3 Q3.7 Total No. of Beds in the Hospital Q3.8 Does the Hospital have a Medical Record Section Yes 2 No Very Good Q3.9 If Q3.8 = yes whether Maintenance and Availability 1 of Records is Satisfactory 2 Not Maintained Properly Q3.10 Total No. of Rooms Q3.11 Total No. of Wards Q3.12 Whether the paid nursing home facilities are Yes 1 2 available No Q3.13 Whether the following testing facilities are available Q3.13a X-ray Machine Yes 1 No 2

Yes

No

1

Q3.13b

Bio-chemical /pathological Laboratory

Q3.14 Availability of Following

SI. No.	Items	Available as per Norms Yes=1 No=2	Adequacy Yes =1 No=2
1	Beds/Mattresses		
2	Cots		
3	Pillow		
4	Bedsheets		
5	Delivery Tables		
6	Examination Tables		
7	Others Specify		

4 SUPPLY OF MEDICINE

Q4.1	Availability of Medicines for common ailment	Sufficient	1
		Insufficient	2
		Not available at all	3
Q4.2	Availability of specialized medicine for serious	Sufficient	1
	ailment	Insufficient	2
		Not available at all	3
Q4.3	Distance (code) of nearest druggist/ chemist	<1km	1
	where ISM & H medicine are available (km):	1-2 km	2
		>2 km	3

5 PERFORMANCE

5.1 Month-wise No. of Indoor Patients Admitted during April 2001- March 2002

SI. No.	Month	Adul	t (12+)	Children (<12)		Total	
		Male	Female	Male	Female	Male	Female
1	APR						
2	MAY						
3	JUNE						
4	JULY						
5	AUG						
6	SEPT						
7	OCT						
8	NOV						
9	DEC						
10	JAN						
11	FEB						
12	MAR						
TOTA	\L						

5.2 Major Five Reasons for which patients are frequently admitted to the facility during April 2001- March 2002

SI.	Reasons				
No.	Name	Code			
1					
2					
3					
4					
5					

Name and Codes of Ailments:

Gastro intestinal disorders	1
Liver disorder	2
Respiratory diseases	3
Kidney/urinary diseases	4
Infectious disease	5
Heart diseases	6
Cancer	7
Skin diseases	8
Arthritis	9
Piles	10
Fistula	11
Psychosomatic diseases	12
Gynecological Disorders	13
Old age related problems	14
Diseases of Children	15
Pregnancy /Delivery related problem	16
Gynecological Problem	17
Other (Specify)	18

5.3 Total No. of patients availing the following facilities during April 2001- March 2002

SI. No.	Name of Facility	No. of Patients
1	Labour Room	
2	Operation Theatres	
3	Panchakarma	

6 Suggestion for improvement of facilities in the Hospital (code)				
Following items may be emphasized:	Supply of medicine	1		
	Manpower	2		
	Financial aspects	3		
	Infrastructure including space and Testing facilities	4		
	Publicity	5		
	Any others	6		

APPENDIX A-V REPRODUCTIVE AND CHILD HEALTH (RCH) PROJECT FACILITY SURVEY - 2002 INDIAN SYSTEMS OF MEDICINE & HOMOGODATHY

INDIAN SYSTEMS OF MEDICINE & HOMOEOPATHY GOVT. DISPENSARIES

IDENTIFICATION

State:		
District:		
Name of Tehsil/Taluk		
Name of Block		
Name & Address of the Dispens	saries	
System of Medicine (code) Location Code	Ayurveda 1 Homoeopathy 2 Unani 3 Siddha 4 Rural 1 Ida 1	
Distance of the Dispensary from		
Distance of the Dispensary from	, ,	
Distance of the Dispensary fron	n the nearest PHC (Kms)	
Distance of the Dispensary fron	n the nearest Sub-center (Kms)	
Since when this Dispensary is f		
Since when this Dispensary is f	unctioning in this Building (Year)	
Name of the respondent		
Designation of the respondent		
Date of data collection Date		
Name of the Investigator		
Signature of the Investigator		

1	INFRASTRUCTU	JRE			
1.1 B	Building				
Q1.1a	Ownership of Build	ding		Rented Owned Rent free/Donate	1 2 d 3
Q1.1b	Type of Structure (<i>Observe</i>)			Pacca Semi Pacca Kachcha	1 2 3
Q1.1c	Is compound Wall	Fence Available		All around Partial No	1 2 3
Q1.1d	Maintenance			Once in a year Once in 3 years Never done so fa	1 2
1.2 0	Other facilities in th	e building			
Q1.2a	Main Source of W	ater Supply		Tap Tube well/Hand F Well Others	Pump /Bore Well 2 3 4
Q1.2b	Availability of Elec	tricity		Yes 1 No 2	
Q1.2c	Availability of Telephone Facility		Yes 1 No 2		
Q1.2d	Availability of Toile	et Facility		Yes 1 No 2	
Q1.2e	General cleanlines	s in the Dispens	ary	Good Satisfactory Unsatisfactory	
2	AVAILABILITY OF	F DOCTORS AN	D STAFF IN TH	<u>. </u>	N DATE OF SURVEY)
SI. No.	Category	Number of Posts Available	Number in Position	Shortfall (Col.3-Col.4)	Total No. of months for which all the staff mentioned in Col.5 were not in position during last three years
1	2	3	4	5	6
1	Medical Officer				
2	Sister				
3	Staff Nurse				
5	Pharmacist Cook				
6	Dhobi				
7	Others				

3	EQUIPMENTS & OTHER INFRASTRUCTURE FACILITIES		
Q3a Q3b Q3c	No. of tables No. of chairs No. of Benches for patients		
Q3d	Is separate dispensing room available	Yes No	1 2
ОЗе	Is examination Table available	Yes No	1 2

4	SUPPLY OF MEDICINE		
Q4a	General availability of Medicines for serious ailment	Sufficiently available	1
		Normally available	2
		Below Normal	3
Q4b	Availability of specialized medicine for serious ailment	Sufficiently available	1
		Normally available	2
		Below Normal	3
Q4c	Distance (code) of nearest druggist/chemist where ISM	<1km	1
	& H medicine are available (km):	1-2 km	2
		>2 km	3

5 PERFORMANCE

5a Month-wise Attendance during April 2001 - March 2002

SI.	Month	Male	Female	Children	Total
No.	1	2	3	4	5
1	APR				
2	MAY				
3	JUNE				
4	JULY				
5	AUG				
6	SEPT				
7	ОСТ				
8	NOV				
9	DEC				
10	JAN				
11	FEB				
12	MAR				
	TOTAL				

5b Major ailments for which patients are frequently visited the dispensary

SI. No.	Ailment		
No.	Name	Code	
1			
2			
3			
4			
5			

Name and Codes of Ailments:

Gastro intestinal disorders	1
Liver disorder	2
Respiratory diseases	3
Kidney/urinary diseases	4
Infectious disease	5
Heart diseases	6
Cancer	7
Skin diseases	8
Arthritis	9
Piles	10
Fistula	11
Psychosomatic diseases	12
Gynecological Disorders	13
Old age related problems	14
Diseases of Children	15
Other (Specify)	16

6	SUGGESTION FOR IMPROVEMENT OF FACILITIES IN THE D	ISPENSARY (CODE):		
	(Multiple codes in order of priority separated with comma (,) may be given	/en)		
	Codes: More attention is required on:			
	Supply of medicine 1			
	Man power	2		
	Financial aspects	3		
	Infrastructure including space and testing facilities	4		
	Publicity	5		
	Other (Specify)	6		

APPENDIX B List of Surveyed District

Bihar	1.Banka 4.Sitamarahi 7.Purnia 10.Muzaffarpur 13.Vaishali 16.Khagaria 19.Lakhisarai 22.Buxar 25.Jehanabad 28.Nawada	2.Patna 5.Madhubani 8.Saharsa 11.Siwan 14.Samastipur 17.Bhagalpur 20.Sheikhpura 23.Kaimur(Bhabua) 26.Aurangabad 29.Jamuli	3.Paschim Champaran 6.Supal 9.Darbhanga 12.Saran 15.Begusarai 18.Sheohar 21.Purba Champaran 24.Rohtas 27.Gaya
Jharkhand	1.Garwah 4.Godda 7.Dumka 10.Ranchi 13.Pakur	2.Chatra 5.Sahibganj 8.Dhanbad 11.Lohargada 14.Gumla	3.Kodarma 6.Paschim Singhbhum 9.Bokaro 12.Purbi Singhbhum
Uttar Pradesh	1.Saharanpur 4.Moradabad 7.Meerut 10.Aligarh 13.Firozabad 16.Buduan 19.Kheri 22.Rae Bareli 25.Etawah 28.Jalaun 31.Hamirpur 34.Chitrakoot 37.Kaushambi 40.Faizabad 43.Shrawasti 46.Siddharthnagar 49.Gorakhpur 52.Azamgarh 55.Jaunpur 58.Varanasi 61.Sonbhadra	2.Muzaffarnagar 5.Rampur 8.Bhagapat 11.Hatras 14.Etah 17.Pilibhit 20.Sitapur 23.Farrukhabad 26.Auraiya 29.Jhansi 32.Mahoba 35.Fatehpur 38.Allahabad 41.Ambedkar Nagar 44.Balrampur 47.Basti 50.Kushinagar 53.Mau 56.Ghazipur 59.Mizapur 62. Maharajganj	3.Bijnore 6.Jyotiba Phul Nagar 9.Gaziabad 12.Agra 15.Mainpuri 18.Shahajahanpur 21.Lucknow 24.Kannuai 27.Kanpur dehat 30.Lalitpur 33.Banda 36.Pratapgarh 39.Barabanki 42.Sultanpur 45.Gonda 48.Guatam Baudh Nagar 51.Deoria 54.Ballia 57.Chandauli 60. Sant Ravidas Nagar 63. Sant kabir Nagar
Uttaranchal	1.Uttarkashi 4.Pithoragarh 7.Hardwar	2.Rudraprayag5.Bageshwar8.Udham Singh Nagar	3.Tehri Garhwal 6.Champawat

Madhya Pradesh	1.Sheopur 4.Gwalior 7.Guna 10.Satna 13.Sidhi 16.Ratlam 19.Dewas 22.Indore 25.East Nimar 28.Sehore 31.Katni 34.Chhindwara	2.Morena 5.Datia 8.Tikamgarh 11.Rewa 14.Neemuch 17.Ujjain 20.Jhabua 23.West Nimar 26.Rajgarh 29.Raisen 32.Narsimhapur 35.Seoni	3.Bhind 6.Shivpuri 9.Panna 12.Umaria 15.Mandsaur 18.Shajapur 21.Dhar 24.Barwani 27.Vidisha 30.Harda 33.Dindori
Chhatisgarh	1.Koriya 4.Korba 7.Kawardha 10.Mahasamund 13.Bastar	2.Jashpur5.Jangir-Champa8.Rajnandgaon11.Dhamtari14.Dantewada	3.Raigarh 6.Bilaspur 9.Raipur 12.Kanker
Assam	1.Kokrajhar 4.Kamrup 7.Sonitpur 10.Karimganj	2.Dhubri 5.Darrang 8.Lakhimpur 11.Hailakandi	3.Bongaigaon6.Nagaon9.North Cachar Hills
Arunachal Pradesh	1.Tawang 4.Papum Pare 7.Tirap 10.Lohit	2.West Kameng5.Upper Subansiri8.Upper Siang	3.East Kameng 6.West Siang 9.Dibang Valley
Manipur	1.Senapati 4.Ukhrul	2.Tamenglong	3.Churachandpur
Meghalaya	1.west Garo Hills	2.South Garo Hills	
Mizoram	1.Mamit 4.Serchhip	2.Kolasib 5.Lawngtlai	3.Champhai 6.Saiha
Nagaland	1.Mon 4.Wokha	2.Tuensang 5.Dimapur	3.Zunheboto 6.Phek
Tripura	1.Dhalal		

Andhra Pradesh	1.Adilabad 4.Khammam 7.East Godavari 10.Nellore	2.Rangareddi 5.Srikakulam 8.West Godavari 11.Chittoor	3.Mahbubnagar 6.Vizianagaram 9.Prakasam		
Karnataka	1.Bagalkot 4.Gadag 7.Haveri 10.Davanagere 13.Banglore Rural	2.Bijapur 5.Dharwad 8.Bellary 11.Shimoga 14.Hassan	3.Koppal 6.Uttar Kannada 9.Chitradurga 12.Udupi 15.Chamarajanagar		
Tamil Nadu	1.Chennai 4.Namakkai 7.Nagapattinam 10.Pedukkottai 13.Theni 16.Tiruneveli	2.Dharmapuri 5.Kapur 8.Thiruvarur 11.Sivaganga 14.Virudhunagar	3.Salem 6.Perambalur 9.Thanjavar 12.Madurai 15.Toothukudi		
Kerala	1.Palakkad	2.Pathanamthitta			
Maharashtra	1.Nandurbar 4.Amravati 7.Gondiya 10.Jalna 13.Pune 16.Ahmadnagar 19.Solapur 22.Sindhudurg	2.Dhule 5.Wardha 8.Yavatmal 11.Nashik 14.Mumbai 17.Latur 20.Satara	3.Buldana 6.Bhandara 9.Hingoli 12.Thane 15.Mumbai(Suburban) 18.Osmanabad 21.Ratnagiri		
Gujarat	1.Kachchh 4.Mahesana 7.Bhavnagar 10.Vadodara 13.Navsari	2.Banas Kantha 5.Jamnagar 8.Anand 11.Narmada	3.Patan6.Porbandar9.Dohad12.The Dangs		
West Bengal	1.Jalpaiguri 2.Uttar Dinajpur 3.Dakshin Dinajpur 4.Maldah 5.Murshidabad 6.North Twentyfour Parganas 7.South Twentyfour Parganas				
Orissa	1.Sambalpur4.Baleshwar7.Jagatsinghapur10.Dhenkanal	2.Sundargarh5.Bhadrak8.Cuttack11.Anugul	3.Kendujhar 6.Kendrapara 9.Jajapur 12.Nayagarh		

Orissa	13.Khordha 16.Kandhamal	14.Puri 17.Sonapur	15.Gajapati 18.Balangir
	19.Rayagada	20.Kaoraput	21.Malkangiri
Rajasthan	1.Hamumangari 4.Jhunjhunun 7.Jaipur	2.Churu 5.Karauli 8.Sikar	3.Alwar 6.Dausa 9.Nagaur
	10.Jalor	11.Pali	12.Tonk
	13.Bundi	14.Bhilwara	15.Rajsamand
	16.Dungarpur 19.Baran	17.Chittaurgarh 20.Jhalawar	18.Kota
Himachal Pradesh	1.Chamba 4.Kullu 7.Sirmaur	2.Kangra 5.Mandi 8.Shimla	3.Lahul & Spiti 6.Solan 9.Kinnaur
Punjab	1.Nawanshahr 4.Muktsar	2.Fatehgarh Sahib 5.Mansa	3.Moga
Haryana	1.Panchkula 4.Sonipat 7.Sirsa 10.Rohtak 13.Gurgaon	2.Kaithal 5.Jind 8.Hisar 11.Jhajjar 14.Faridabad	3.Kamal 6.Fatehabad 9.Bhiwani 12.Rewari
Jammu & Kashmir	1.Kupwara 4.Badgam 7.Leh(Ladakh) 10.Punch	2.Baramula 5.Pulwama 8.Doda 11.Rajauri	3.Srinagar 6.Anantanag 9.Udhampur 12.Kathua

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