

FORM-I
Monthly Performance Report on Technical Activities
Regional Offices of Health & Family Welfare

Name of the Regional Office: Raipur
Report for the Month of: March 2011

1	LIAISON & COORDINATION (Give details in Form 1.1)	Participated/ Coordinated	ROH Relevant issues addressed
i.	National Level Meeting attended	1	
ii.	State level Meeting attended	NIL	
iii.	Is RD a member of State level Task Force Committee	NO	
iv.	Court cases being coordinated	NIL	
v.	visits of VIP/High Dignitaries coordinated	NIL	
vi.	Issues addressed/sorted out including UCs	NIL	
vii.	Instts. Visited to assess feasibility for New initiatives/programmes	1	
viii.	Sample (items) collected for quality check.	NIL	
ix.	central monitoring teams coordinated	NIL	
x.	Other Liaison activities undertaken	4	
	Total		

2	Institutes Visited and Reviewed for IPHS	Instts. Visited	Instts. Have 50% IPHS Standards
2.1	States & District HQs visited for review of NRHM		
i.	States HQ (Give details in Form - 2.1)	NIL	
ii.	Districts HQ (Give details in Form -2.1)	1	

2.2	Peripheral Instts visited for Review of IPHS	Instts. Visited	Instts. Have 50% IPHS Standards
i.	DH & SDHs (Give details in Form - 4.1)		
ii.	CHCs (Give details in Form - 4.2)	3	0
iii.	PHCs (Give details in Form - 4.3)	4	0
iv.	SHCs (Give details in Form - 4.4)	4	0
v.	NGOs & Other Instts (Give details in Form - 4.1)	NIL	
	Total		

3	Review Of National Health Programme At District & State Level (Give details in Form - 3.1)	Distts Visited for Progs review	Program as per guidelines
3.1	Routine Existing NHP		
i.	NRHM	1	yes
ii.	NVBDCP	1	yes
iii.	RNTCP	1	yes
iv.	NLEP	1	yes
v.	NBCP	1	yes
vi.	NACP	1	yes
vii.	IDSP	1	yes
viii.	NIDDCP	1	Record not available
	Total		

3.2	Review of Newer Initiatives by GOI (NCD) (Give details in Form - 3.2)	Distts Visited for Progs review	Program as per guidelines
i.	Tobacco control	No programme on NCD	
ii.	Cancer control		
iii.	CVD & Diabetes control		
iv.	Mental Health		
v.	Injuries & trauma		
vi.	Oral Health		
	Total	1	

4	TRAINING PROGRAM ORGANIZED	Training Batches given training	Trainees given training
i.	Malaria microscopy	Nil	
ii.	CBHI	Nil	
iii.	NRHM	Nil	
iv.	Other trainings	Nil	
	Total		

5	RESEARCH STUDIES UNDERTAKEN	Research Studies undertaken
i.	Therapeutic Efficacy studies undertaken	Nil
ii.	Entomological Studies undertaken	Nil
iii.	CBHI studies undertaken	Nil
iv.	RET Studies	Nil
	Total	

6	NVBDCP/MOFRS related Activities at ROH HQ	Blood slides	Discrepancies Variation/ Remarks
6.1	Malaria Clinic:		
i.	Blood slides collected in malaria clinic	Nil	
ii.	Blood slides tested in Malaria clinic	Nil	
iii.	Blood Slides Found Malaria Positive	Nil	
iv.	Malaria + ve cases given Radical Treatment	Nil	

6.2	Cross-checking of blood slides:	Positive slides	Negative slides	Total
i.	Blood slides received at ROH-HQ			
ii.	Blood slides Cross-checked			
iii.	Blood Slides with discrepancies			
iv.	% discrepancies)%

6.3	Other anti-malaria activities	Units Visited
i.	Districts visited for Rapid fever surveys	Nil
ii.	Peripheral laboratories monitored for quality services	Nil
iii.	Therapeutic Efficacy studies undertaken.	Nil
iv.	teams of IRS for Malaria control activities Monitored	Nil
v.	Distts./Instts. Where Epidemiological & Entomological Reviews undertaken	Nil

7. REGIONAL EVALUATION TEAM-FIELD VERIFICATION

7.1	Clients verification of Genuineness of Acceptors of CC methods	Clients Contacted	Discrepancies Observed
i.	ECs Under gone sterilization Operations	12	No discrepancy observed, out of twelve clients.
ii.	ECs consuming Oral pills as CC Methods	07	One client was found fake at Vishrampur
iii.	ECs have got IUDs inserted	04	Only at Vishrampur HSC record is not available
iv.	ECs practicing Barrier methods (condom)	04	Nil
	Total		

7.2	Field Verification of RCH Clients	Clients Contacted	Observations/Discrepancies Observed
i.	ANC cases Field verified	11	<p>Siltara: 50% of interviewed beneficiary known about the Gap between the two pregnancies. The leprosy patients are taking MDT from the CHC instead of the sub center which need to be channelized. ANC services are as per schedule but no PNC visit carried out. No fake cases of the Temporary and permanent contraceptives were found in verified beneficiaries. ASHA workers are involved actively in the ANC and PNC service in coordination with health workers at HSC.</p> <p>Rawan: HSC records are not well maintained. The beneficiaries of ANC, PNC, INC related to health services were poor in verified mothers. PNC visit are not carried out. The ANM should give timely advice to the beneficiaries during the health session. Card is not available at one verified child immunization.</p> <p>Vishrampur: The beneficiaries of ANC, PNC, INC related to health services were poor in verified mothers. No deliveries are conducted at HSC because of inadequate facilities as told by ANM. PNC visit not carried out. The ANM should give timely advice to the beneficiaries during the health session. She is trained in CuT insertion, but not inserting to the client. The record regarding various contraceptives not maintained.</p> <p>Kochyai: The beneficiaries of ANC, PNC, INC related to health services were poor in verified mothers. Institutional deliveries are conducted. PNC visit not carried out. The ANM should give timely advice to the beneficiaries during the health session. She is trained in CuT insertion, but not inserting to the client. The record regarding the various contraceptives not maintained. Immunization conducted at Health center. Surveyed JSY beneficiaries are paid as per guideline. Card is not available at one verified child immunization.</p>
ii.	INC cases Field verified	12	
iii.	PNC cases field verified	14	
iv.	JSY cases field verified	14	
v	Children verified for fully immunization	13	
	Total	64	

7.3	Community Satisfaction Studies Undertaken for quality of work done by Health workers	SUBJECTS Interviewed
i.	Sarpanches of PRI contacted	01
ii.	Mothers contacted to assess work of ASHAs	11
iii.	Mothers contacted to assess work of ANMs	10
iv.	patients contacted for care satisfaction	Nil
v.	staff contacted for job satisfaction	5

8. HIFU PERFORMANCE

8.1. Strengthening & Monitoring Health Information system		Numbers
i.	Health Sector-Policy Reform databases (HS-PROD) sets collected.	Nil
ii.	Batches given CBHI related training	Nil
iii.	trainees given training	Nil
iv.	Health Related NEWS Appeared in Newspapers	Nil

8.2. Liaison with State Health Authority to expedite the flow of information		Numbers
i.	States from where Annual Reports on health Statistics are collected	HMIS status report of the visited health facilities of R
ii.	Other health related information (specify)	

8.3. Conduct specific studies		Numbers
i.	Instts. Visited to conduct studies i.r.t. Health Information System (HIS)	Nil
ii.	Reviews undertaken to assess effectiveness of the of specific Health Program	Nil

9	UNUSUAL EVENTS REPORTED	Items reported
i.	Newer Diseases/epidemic reported	
	Malaria (<i>fp</i>)	Nil
	CGD	Nil
	DFD	Nil
	H1N1 cases	Nil
	Encephalitis like Illnesses	Nil
	Other New cases (specify)	Nil
ii.	Epidemics investigated	Nil
	Fever epidemic	Nil
	Diarrhea epidemic	Nil
	Other epidemics (specify)	Nil
iii.	Natural disasters	Nil
	Floods	Nil
	Storms & lightening	Nil
	Earth quacks	Nil
	Fire accidents	Nil
	Tsunamis	Nil
	Accidents	Nil
	Others (specify)	Nil

10 ADMINISTRATIVE ACTIVITIES

10.1 Staff Status

S. No	Staff	Sanctioned	In-position	Vacant pots
i.	Group-A			
ii.	Group-B (Gaz)			
iii.	Group-B (NG)			
iv.	Group-C			
v.	Group-D			
	Total			

10.2 Budget Status**(Amount in Lakh of INR)**

S. No	Budget Lines	Plan	Non-Plan	Total
i.	BE Current Year			
ii.	Utilization till date			
iii.	% Utilization			
iv.	RE Current year			
v.	BE Next Year			

10.3 Pending Issues

S. No	Cases	pending cases	cases material submitted	cases sorted out
i.	Administrative issues	N.A.		
ii.	Audit Para	N.A.		
iii.	Parliament Assurance	N.A.		
iv.	Court cases	N.A.		
	Total	N.A.		

10.4 Other Admn issues

S. No	Cases	pending cases	cases material submitted	cases sorted out
i.	N.A.			
ii.	N.A.			
iii.	N.A.			
iv.	N.A.			
	Total			

SIGNATURES OF REGIONAL DIRECTOR