

**Pre CRM Supportive supervision visit to the district Bahraich from 11/10/2019 to 12/10/2019**

**Team Leader:** Dr Nishant G. Bhardwaj, DGM National Programs

**Team Members:** Mr Abhishek Yadav, Consultant –NP

**Facilities Visited:** Facilities visited (District TB Centre, District DR-TB Centre, District Drug Store), IDSP Unit, NVBDCP and NLEP Programme.

**Major District Indicators**

**NPY-DBT:**

% Bank Details Validated 52

% Paid Beneficiary (Total) 57

% Amt. Paid (Total) 54

**Current - Outcome Status - 2018:**

Success Rate as per total notified - 2018 - 78%

% of Outcome not Assigned 5%

**HIV Status Report:**

% TB patients with known HIV status – 78

**UDST status 2019: 64%**

**TB NotificationRate:140**

Public- 109

Private- 31

**Major Observations:**

1. Laboratory at DMC DTC Bahraich is too small (congested) to work conveniently along with general lab and DOTS centre.
2. The disposal of BMW is done by using burial pit at 15 DMCs and through BMW agency at 9 DMCs
3. Appropriate containers/plastic bags (color coded, leak proof etc) are not available at the most of the DMCs where the access of BMW agency is in place.
4. STLs and LTs are not trained BMW management.
5. Diagnostic algorithm was not found to be displayed in almost all DMCs
6. Referral from ICTC to RNTCP low (3.5%). Should increase in ICTC centers at DH.
7. PMDT records not updated since last 03 years.
8. Follow up of MDR/XDR not being properly monitored at district level.
9. Nikshay Aushadhi training not done at district level.
10. Nikshay Aushadhi not update at DTC/TU/PHI Level.
11. Reconstitution is not done at DTC.
12. Seepage of water available in DTC drug store.
13. Reconstitution Register was not available.
14. No rodent control measure in DTC/TU level store.
15. Very poor stock management at District and as well at TU level.
16. Fire-Extinguishers are not installed in the DTC store.
17. Date of Expiry not maintain in PWB.
18. Treatment cards in not complete.

19. Minimal IEC visibility at TU level.
20. Wall writing to be completed before CRM visit.
21. ATP and tour diaries are not available at TU and District level thus showing poor monitoring and supervision.
22. CBNAAT Machine at TU Nanpara is underutilized and that of DTC is non functional since 25.09.19.
23. DRTB Centre was not functional due to non availability of support staff.
24. DRTB Centre to be shifted from the Burn and Trauma unit to a separate ventilated place in District male hospital.

**Recommendations:**

1. Meeting was done with Principal, CMS, and DTO, Head DRTB centre to resolve all the issues and send the compliance report before the CRM visit.

**IDSP**

Reporting on Form S of IDSP is very low i.e. 2.44%, so DSO of the IDSP was requested to increase the reporting as well as timeliness should also be ensured.

**NVBDCP**

Micro plan of spray and fogging was not available.

Dengue NS1 kit was not available.

Hydrocoel camp was not organized.

ACMO, VBD was requested to update all records & logistics and increase the expenditure.

  
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