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Supportive Supervision visit Aligarh Division 9-13th June 2015

Team Members:

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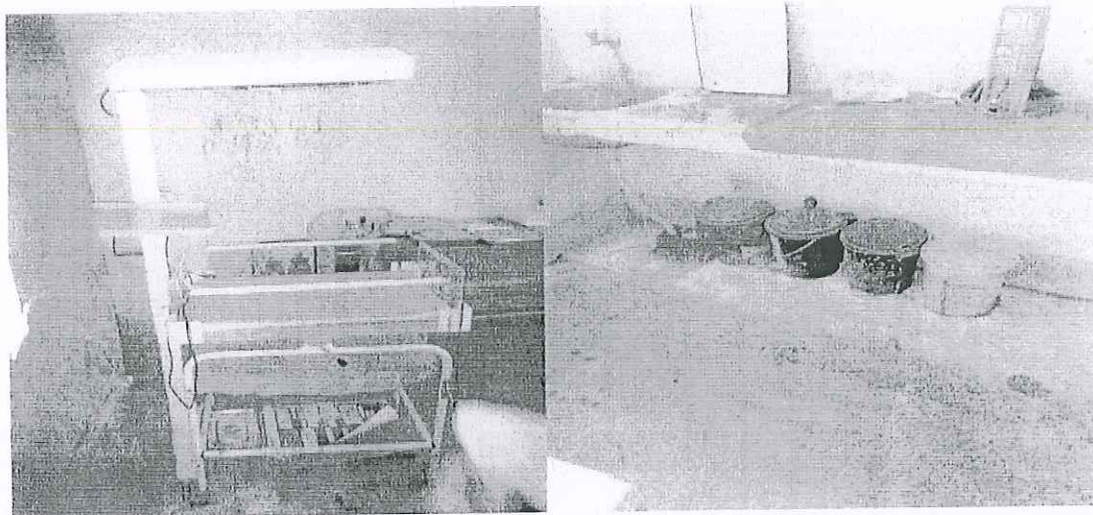
Place of Visit: Etah and Kashganj

With reference to the letter number

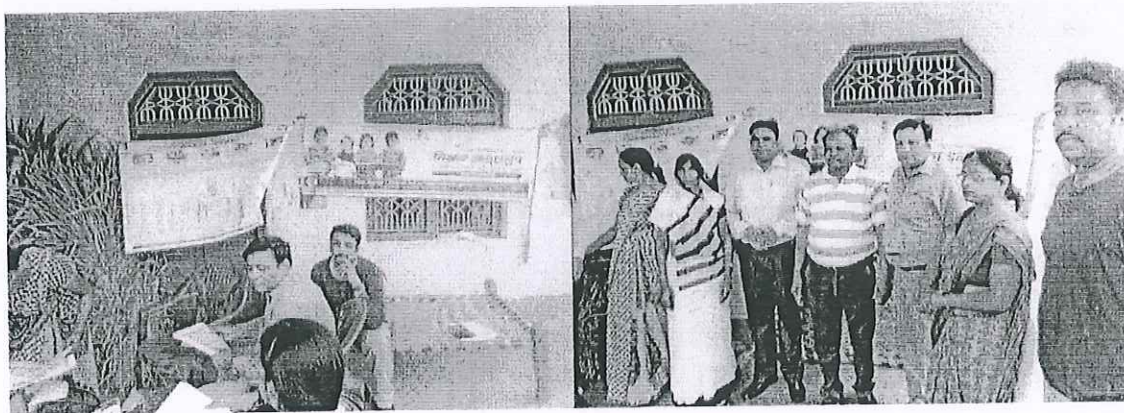
Community Health Centre, Nidhualikala, District-Etah:

The CHC was situated at the metallic cross road 15 kilometres from the district Headquarter and direction banner indicating CHC location was in place at the corner of the road. Community Health centre had new government building and well maintained sufficient quarter for Medical Officer, staff nurse. During uninformed visit to CHC, generator was running as there was power cut. There were wall writings about various health schemes on the walls. The grievance committee Wall writing was done but members name were not mentioned as it was important for knowing the members of staff of health centre. Since her appointment on 25th April 2015, Dr. Sruti Kaur has visit the CHC only 4 times. There are 24 Sub-centre under this Community Health Centre but deliveries are not done. It is planned that at Pilwa sub-centre deliveries will be done within a week. There were separate toilet for male and female but was in dirty condition. Male toilet was used by staffs only not by the patients. The labour room kits are boiled only, for the sterilisation. The New Born Care Centre was neatly maintained and 4 kids were admitted and taken for health care. The pharmacist was maintaining the register properly and essential drug was available.





Dholeswar Panachayt (Nidhaulikal block, District-Etah) was visited by the team, to observe Mission Indra-dhanush session. Vaccination was done as per Due list which was updated. All vaccines were available but hub-cutter was not available. ASHA was undertaking the mobilisation part and bringing the beneficiaries to the MI-Session cite. During the household visit was observed that MCP card was regularly filled. Village Health and Sanitation committee members were contacted as Gram Pradhan Mr. Ramdas was in kashganj city. The committee register was maintained and in the last six months four meetings has been conducted. The untied fund of the samittee was used on garbage disposal.



Nadarai Sub-Centre (District-Kashganj):

Nadarai sub-centre is located on the main road to Kashganj district. It was observed that around 100 deliveries are conducted each month from the four Gram Sabha's. ANM-Ms. Ramsudhari Devi is residing at the sub-centre. During the team visit, one delivery was done. Delivery kit was sterilised by boiling by adding Dettol and bleaching powder is not available at the sub-centre. The Inverter was working to furnish power back-up. All basic equipments were available & in working condition barring needle & hub-cutter. IFA tablets are not available since April 2015. The untied fund was utilised for the Inverter battery. All registered and records are maintained in professional manner. Village Health and Sanitation Committee had utilised the untied fund for painting and cleaning work. There were no

system for waste management and placenta was thrown in the nearby canal. For the 24 hour water supply, the sub-centre was dependent on hand-pump.

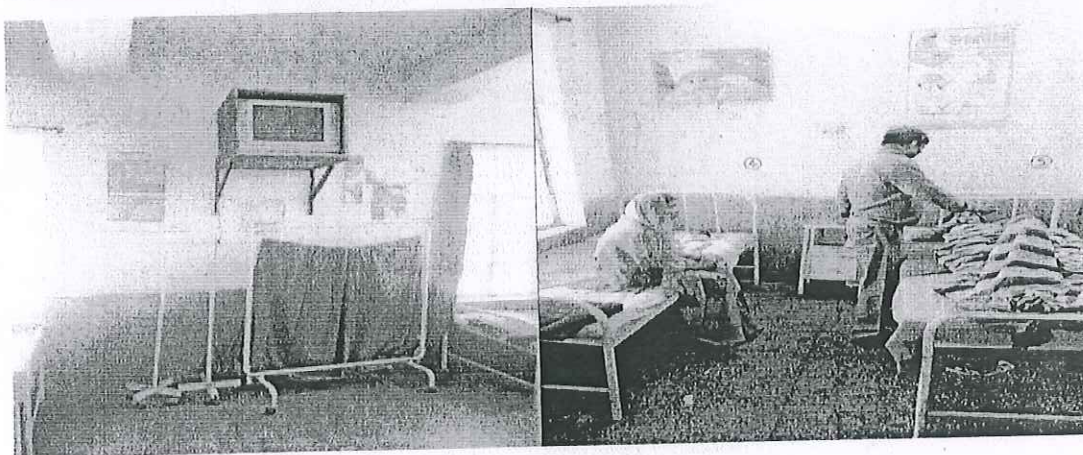
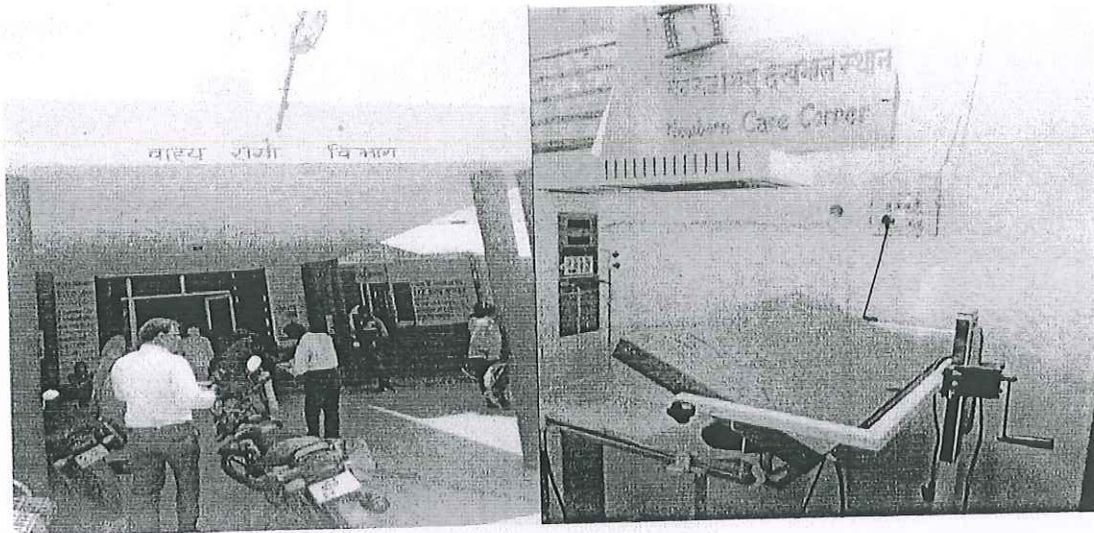


District Combined Hospital, Kashganj:

The district hospital was previously a Community Health Centre and upgraded to district hospital. There were no sufficient quarters to accommodate staff. Despite being District Hospital, The Operation Theatre was not operational. There was no regular sterilisation as per records. The delivery set was sterilised by boiling water only. In the labour room, there was no attached toilet. Delivery register was not filled properly and what type of delivery is not mentioned. Team suggest for the due column to be filled for the accuracy of the information. The hospital was poor on Human Resource area as there were no Anaesthetist, Paediatrician & General Surgeon. Rapid Plasma Reagin test is not conducted. The Partographs were available but not filled properly.. The team guided and informed usability of completing the partographs. The referral register was poorly maintained.

Essential Drugs for delivery was not available. At the time of visit, there was no electricity supply and generator was not operative properly. MCTS Operator was on duty but his printer and internet was not working. The system of communicative devices were also not working properly

The Grievance Redressal Mechanism was not in place and no wall painting or complaint box was available.

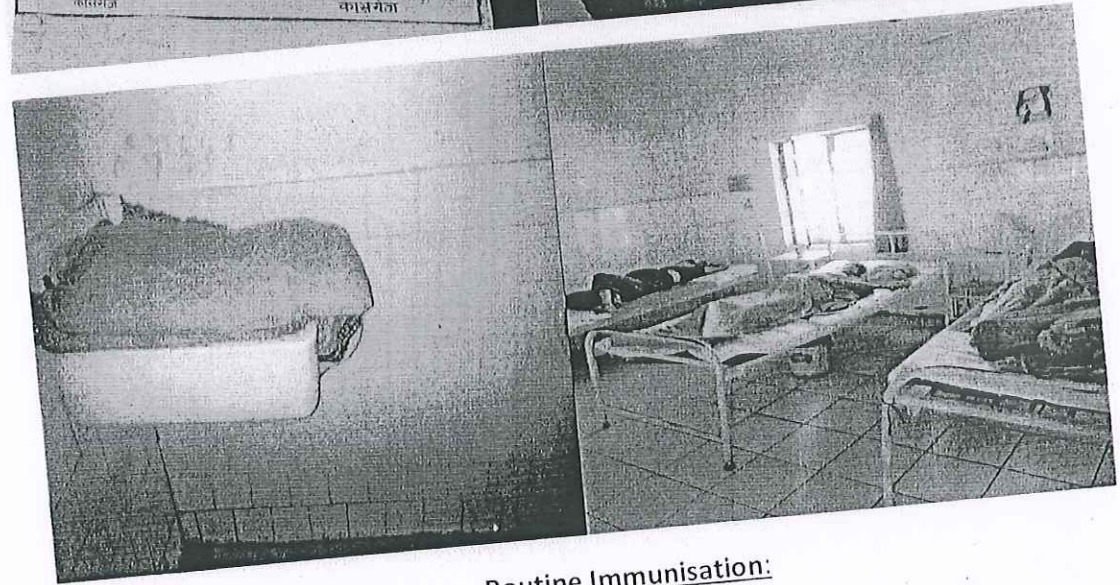
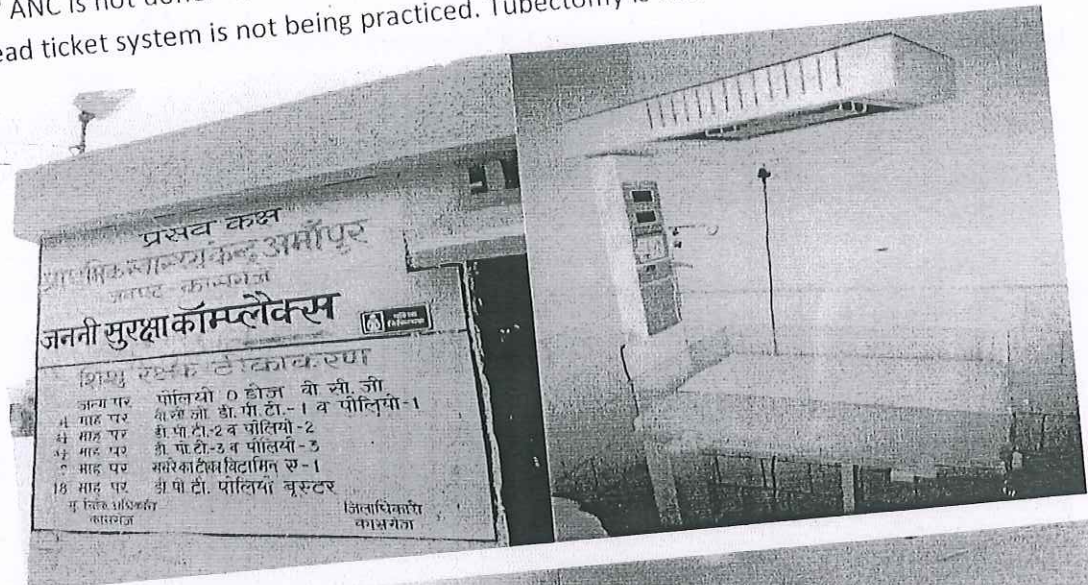


Aligarh CMO Office Mission Indra Dhanush evening meeting with UNICEF, WHO UNDP and development partners

Amapur, BPHC (District-Kashganj):

During the visit BPHC, it was observed that under the JSY only one time food is being served and no written guideline is available at the Block-PHC. The team informed that Breakfast, Lunch and dinner has to be served as per the scheme. Again due to the problem in the PFMS, JSY payment has not been done since April 2015 to the beneficiaries. New Born stabilisation unit was not functional. There were not any wall writing about the Grievance

committee, complain/suggestion box was not verified during the visit. The Delivery kit was sterilised by boiling water and autoclave was junking/dysfunctional. Drug register was maintained properly and drug supply was sufficient except IFA Tablets. The labour room column mentioned in the register so that data becomes helpful in analysis. It was vivid that 4th ANC is not done. The PNC register could not be verified due to unavailability. Indoor bed head ticket system is not being practiced. Tubectomy is conducted on seasonal basis only.

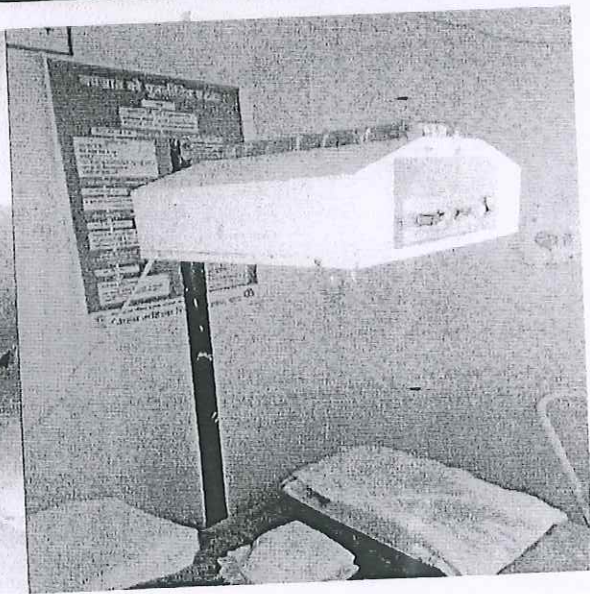
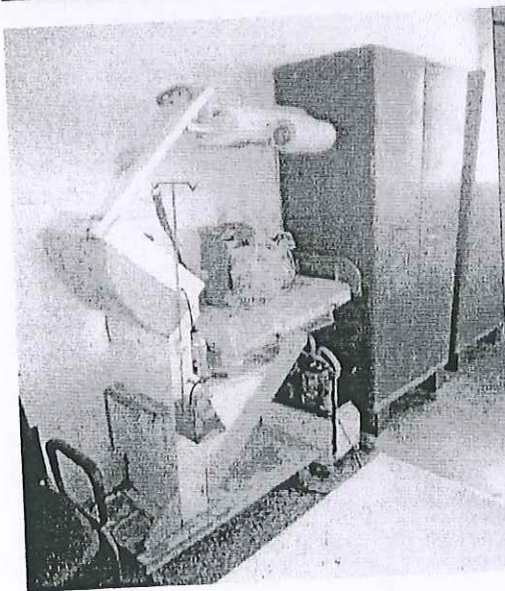
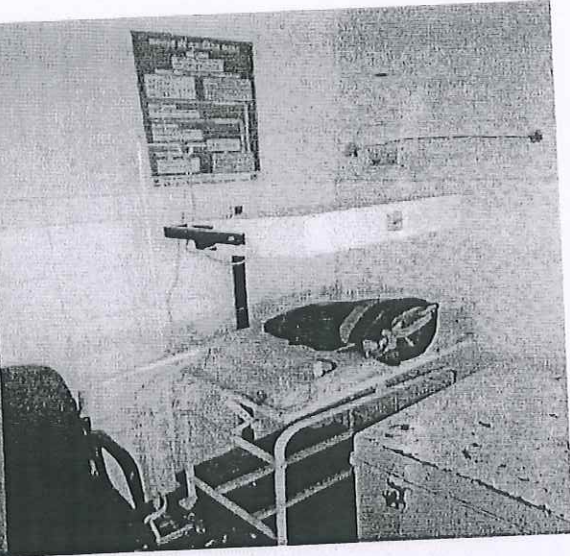


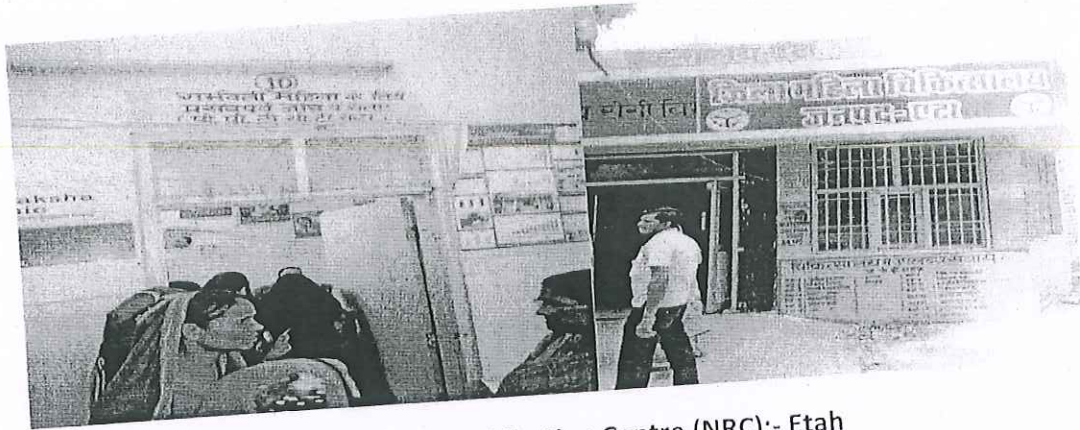
Routine Immunisation:

Sub-centre-Tali, Block-Sahavar, Distt-Kashganj- was visited by the team. ASHA was bringing the beneficiaries to the centre for the vaccination. It was observed that time of opening is mentioned on the vial and no vaccines were on expiry time or date. The sufficient vaccines were available and hub cutter was functional. Four important messages after the vaccinations were not given to parents; the team suggested that four important messages dissemination is integral part of the vaccination drive to prevent/avoid fall outs.

District Women Hospital, Etah:

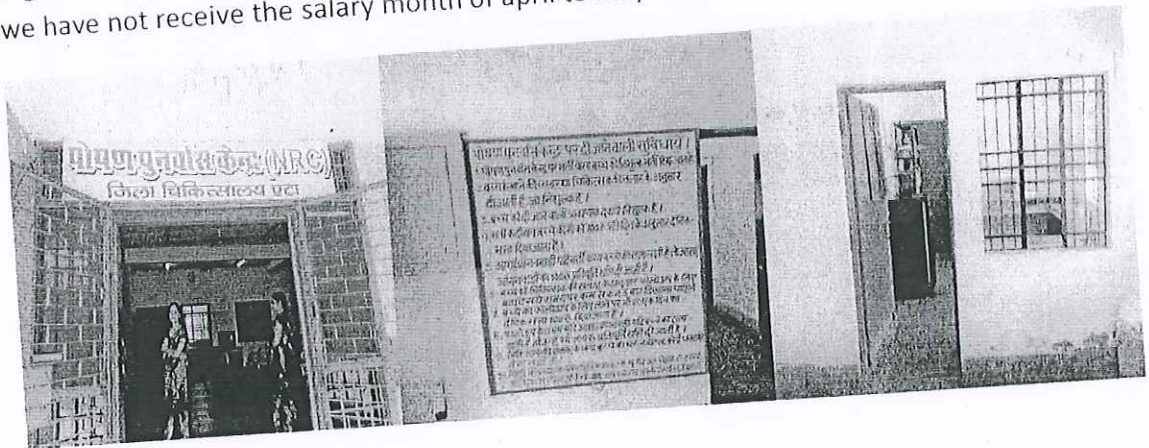
The Medical Officers, staff nurse quarters were not in good shape. There is no paediatrician or General Surgeon in the hospital. The radiant warmer and phototherapy unit was not functional and had a very bad condition. The operational Theatre was not having table, light, ceiling, anaesthesia machines and ventilators. The Hospital toilet was very dirty and unhygienic. Ultra sound and X-Ray machine were not functional in District Women Hospital. OPD register, MDR and referral register (IN & OUT) were also not maintained properly. JSSK Entitlement and protocol posters were on the display.





Nutritional Rehabilitation Centre (NRC):- Etah

The sufficient staff and infrastructure were properly maintained. The kitchen was neat and clean and it was observed that hygienic food based on instruction of nutritionist was prepared. At present, two malnourished children were admitted to NRC out of ten beds. Wall painting was not done. Food chart was maintained to clearly map the diet served. The sufficient toys were not available for the recreations of kids. All staffs were present and staff register was properly maintained. And all staff trained 3 days NRC training. Told the all staffs we have not receive the salary month of april to may 2015.

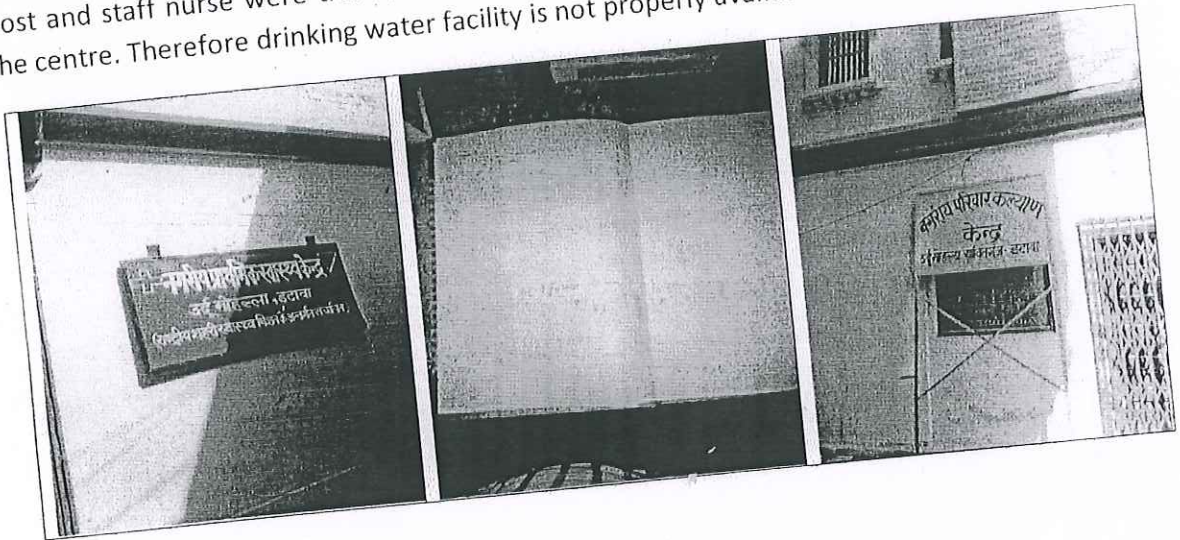


Sub-Centre-Dhumani, Block-Jaithra, District-Etah:

IEC related with Entitlements, schemes, staff etc were vivid. But there were no proper system of waste disposal. Delivery kit was sterilised by boiling only. All basic equipments were available & in working condition except needle & hub-cutter and RBSK pictorial tool kit was available at the sub-centre but not made to use. All registered and records were maintained. Village Health and Sanitation Committee had utilised the untied fund for cleanliness drive. For the 24 hour water supply, the sub-centre was dependent on hand-pump.

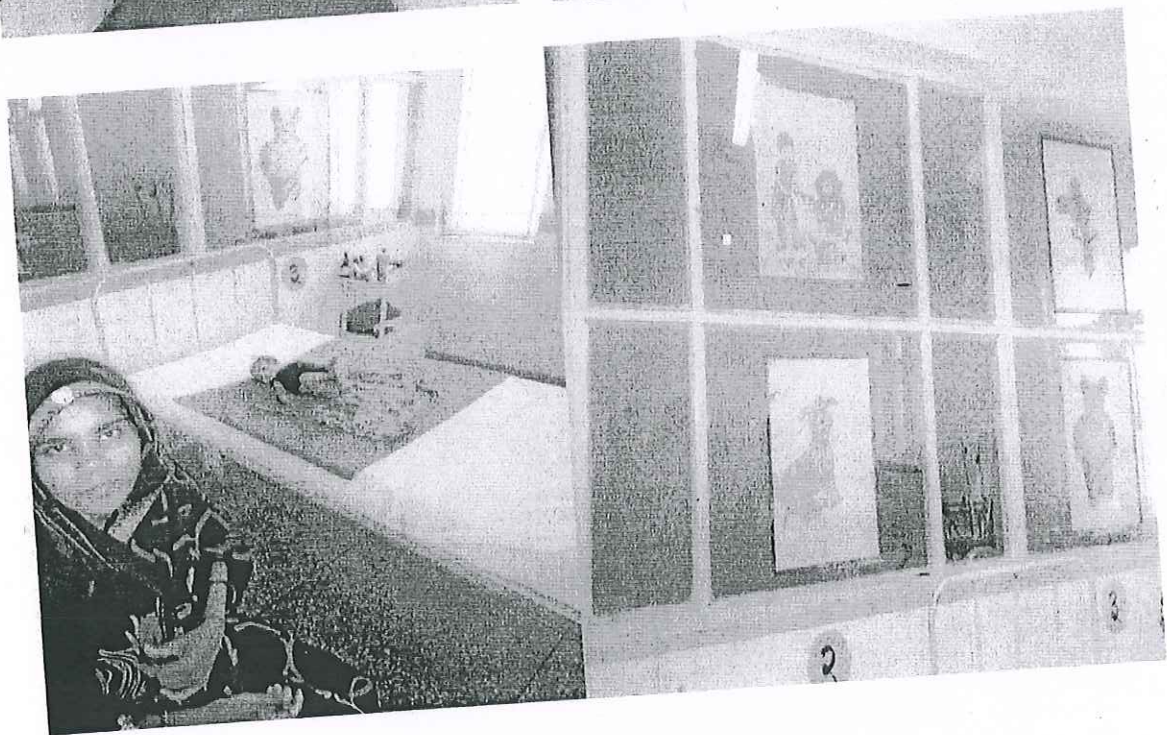
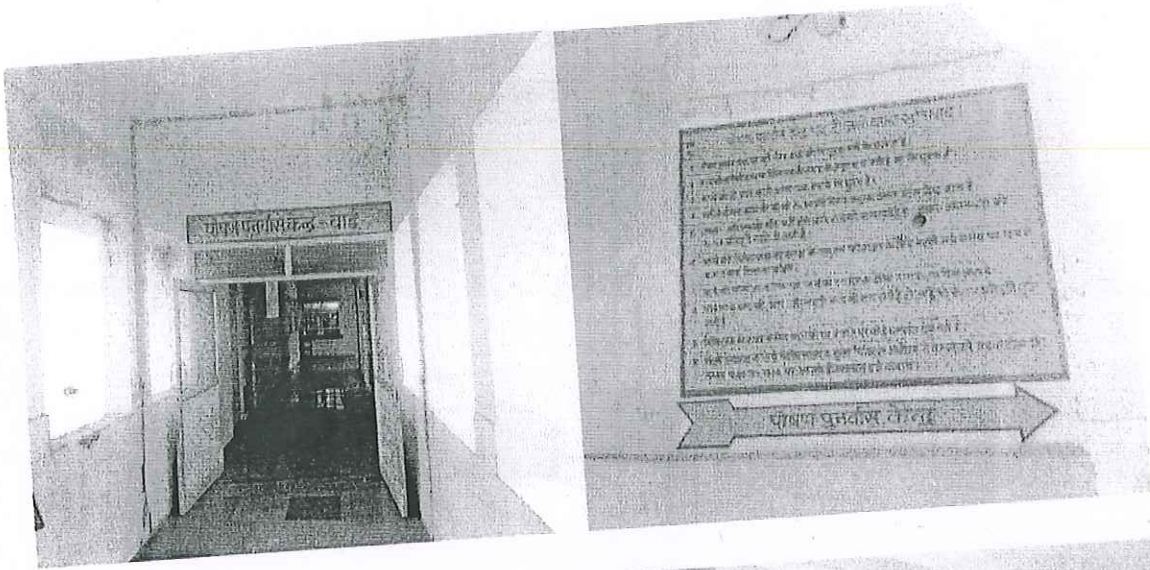
Urban Health Post, Sabit ganj, Etawah:

However District Etawah was not in plan to visit, but as these facilities were on the way to Aligarh, these facilities were visited only for programme purpose. It was observed that health post was actively functional and total 13 staffs were posted. Retired CMO was the medical officer of the health post. The health post had sufficient furniture, BP & Weighing machine are functional. Pharmacist was keeping the record neatly and drug supplies were sufficiently available. On the day of visit, 44 new patients and 19 old cases were done. The available staff nurses were doing the task of patient registration, a complete departure from the assigned job responsibilities/skills. Delivery infrastructure was available at the health post and staff nurse were trained but so far not appropriate deliveries were conducted at the centre. Therefore drinking water facility is not properly available.



Nutritional Rehabilitation Centre (NRC) - Etawah:

The sufficient staff and infrastructure were properly maintained. The kitchen was neat and clean and it was observed that hygienic food based on instruction of nutritionist was prepared. At present, two malnourished children were admitted to NRC out of ten beds (Saloni and Nitya). Wall painting was not done and it was suggested by Rajeev Kumar Dubey PC (Child Health) SPMU, NHM for the kind & type of wall painting. Food chart was not maintained to clearly map the diet served. The sufficient toys were not available for the recreations of kids. All staffs were present and staff register was properly maintained. And all staff trained 3 days NRC training.



Sick Newborn Care Unit (SNCU) - Etawah:

The SNCU Ward very neat & clean only Only 8 Radiant Warmer available and 2 Photo Therapy available One contractual paediatrician and 5 Staff nurse posted in SNCU One doctor and 2 Staff Nurse trained in FBNC and FBNC Observer ship training the sufficient staff and infrastructure were properly maintained. At present, two Sick neo born were admitted to SNCU Wall painting was not done and it was suggested by Rajeev Kumar Dubey PC (Child Health) SPMU, NHM for the kind & type of protocol poster & wall painting. All staffs were present and staff register was properly maintained.



Wala

Baby
PCCCH)

DR (R)