

Action Points

Divisional Review Meeting Saraikela (Kolhan Division)

Held on 20.02.2013 at Community Hall, Saraikela

The Kolhan Divisional Review Meeting was chaired by Mr. K. Vidyasagar, Principal Secretary, DoHFW on 20.02.13 at Community Hall, Saraikela. The Mission Director – NRHM; Director in Chief – Health Services; Director Finance – JRHMS also attended the meeting. All Civil Surgeons, Programme Officers, MOICs, District and Block Level Programme Officers participated in this review meeting. State Programme Management Unit made detailed presentation on various programmes under NRHM with special focus to district / block level performance. Facility wise programme physical & financial progress/ performances were reviewed and discussed. The focus given on Health indicators like IMR, MMR, institutional delivery, immunization etc. Following instructions / directions were given –

- **Direction for State Office, Ranchi –**

- Setup bench-mark for the contractual ANMs and Doctors performance based on major programmes indicators which will be used for contract renewal.
- Also setup bench-mark for regular ANMs and Doctors performance based on major programmes indicators which will be used for future transfers-posting and promotion.
- Develop template with guideline for the block level meeting of ANM and Sahiyya.
- Family planning cell in-charge should fix the annual target for all NSV surgeons (individually) and monitor their performance monthly.

- **Civil Surgeon directed to –**

- Take disciplinary action against the district and block level officials absent in the meeting and send the action taken report to state.
- Ensure that the benefit of the programme is reaching to the common public and all health facilities. The delivery points must be fully functional.
- Rationalize the posting of ANMs. All the HSC must be functional by at least one ANM. CS directed to certify the rational deployment of ANMs within district and submit State office within 3 days.
- All CS directed to ensure regular meeting of DLVMC, DHM and DHS according to timeline mentioned in guideline send earlier.
- Civil Surgeon Saraikela and West Singhbhum directed to ensure District Health Mission meeting on or before 25th March 2013.
- Keep proceedings of each of DLVMC, DHM, and DHS meeting. Action Taken Report (ATR) of the same should be prepared and sent to NRHM head quarter.
- Civil surgeon directed to ensure that the review meetings in CHCs are conducted in regular periods.
- Maintain transparency with proper documentation in procurement process at district and block level.

- For procurement of drugs according to EDL, districts follow the e-tender process with the support of NIC officials at district level.
 - Details mapping of HSC must be submitted to State Office till 25th March 2013.
 - Civil Surgeon as well as MOIC will be fully responsible for proper use of procured equipment's.
 - 2 weeks special drive for cleanliness of health facility indoor as well as outdoor.
 - Issue notice to absconding doctors within 1 week and submit the detail report.
 - Random checkup of doctors' presence at health facilities. Ensure the maintenance of movement register.
 - Take over all the building constructed till date and made them functional till 25th March 2013.
 - Keeping in view of the newspaper report on large number of unwanted hysterectomy that happened in Garhwa, all Civil Surgeon and MOICs are warned to check and take stringent action against such illegal practitioners. Also directed to ensure proper IEC, field tour and visit up on their area.
- **All MOIC directed to –**
 - Check and correct the discrepancies in data. MOICs must certify the data/reports before sending it to district / state or uploaded in HMIS.
 - Ensure immunization schedule displayed on health facilities wall.
 - Plan for dropout / left out children for Immunization on campaign mode in non-immunization days.
 - Visit HSCs; attend VHNDs to monitor the services provided at grass root level.
 - ANMs who are not following the ANM Duty Roaster, issue them show-cause letter and take disciplinary action.
 - Ensure regular monthly meeting based on HMIS data with the support of BPM/BAM, ANMs and other staffs and take strict action to improve the performance in all indicators.
 - Ensure regular monthly meeting with ANMs and Sahiyya Sathi.
 - Each of these review meetings must be minuted and the proceedings should be submitted to civil surgeon.
 - Shows cause the ANMs who are poor performing.
 - All the doctors and ANMs should stay in the village/town of posted facility.
 - Conduct special drive for covering left out /dropout children for immunization. Involve local representatives/MLA/PRI members in the campaign.
 - Regarding the backlog payment of JSY, for 6 months or more delay in payment of JSY incentive to beneficiaries/Sahiyya, 20% the interest of total incentive amount will be added per month form the salary of MOIC and Block Account Manager of concerned CHC.
 - Ensure display of doctors visit details roaster-wise at all HSCs (Name of doctor and day of visit).
 - All MOICs are directed to ensure 100% entry of Mother and Child in MCTS portal and also ensure quality utilization of the data.

- **Human Resource**
 - For the district level HR recruitment, the completion date were given by the respective Civil Surgeon –
 - Saraikela - till 15th March 2013.
 - E. Singhbhum - till 15th March 2013.
 - W. Singhbhum- till 15th March 2013.
 - All Civil Surgeon and MOIC directed to ensure the submission of Appraisal Form of Block Programme Manager and Block Account Manger till 20th March 2013.
- **District and Block level Training –**
 - All due training must be completed till 25th March 2013 and their expenditure must be booked in book of accounts.
- **Mamta Vahan –**
 - Mobile/Phone number of Mamta Vahan Call Centre needs to be printed on the OPD slip.
 - Some discrepancies were found in reports of Mamta Vahan in some of the blocks. Civil surgeons and MOICs directed to analyse the Mamta Vahan programme, correct the discrepancies, prepare action plan to improve the programme, in next 15 days.
 - All Civil Surgeon directed to upload the Mamta Vahan reports in JRHMS website (www.jrhms.jharkhand.gov.in).
 - It is clarified that service of Mamta Vahan can be used in transportation of pregnant women from home to HSC, also.
 - All Civil Surgeon and MOICs directed to display entitlements of JSSK including free transportation on delivery, Mamta Vahan Phone No., Call Centre Phone no. etc. in all health facilities.
 - All Civil Surgeons directed to monitor the Call Centre during nights.
 - Involve local representatives for mobilizing the community for pooling of vehicles at panchayat level and awareness regarding Mamta Vahan.
 - It has been directed to do proper IEC of Mamta Vahan in campaign mode through News Paper at state level.
- **ANC**
 - Figures of ANC shows huge drop out since 1st ANC to 3rd ANC in all the blocks.
 - All MOICs are directed to track all the pregnant women and to improve the performance
 - Civil surgeon directed to procure IFA tablets according to the Rate Contract made by the State and ensure availability and distribution of IFA Tablets at all the facilities.
- **Institutional Delivery**
 - Figure on institutional delivery was unsatisfactory. Also there is very high percentage of unreported deliveries.
 - All Civil surgeon/MOICs are directed to ensure all delivery points are made fully functional and all MOs & ANMs must stay at there respective place of posting.
 - SBA Trained ANMs are to be rationally deployed. Left out to be trained immediately.
 - Fix delivery targets for ANMs & Sahiyya and closely monitor their performance.
 - The district and block level monitoring on VHND is instructed with a special focus on ANC.

- Stop salary and issue show-cause letter to MOs & ANMs posted in following PHCs for less than 10 institutional delivery during current financial year till Jan 2013 –

CHC Name	PHC Name	Total ID	CHC Name	PHC Name	Total ID
E. Singhbhum			Saraikela		
Baharagora	Manusmuria	0	Sadar	Sini	0
	Chitreswar	0		Mangudih	0
Baharagora	Ramchandrapur	0	Chandil	Chawka	0
Dhalbhumgarh	Kokpara	0	Gamharia	Adityapur	1
Chakulia	Sindurgori	0		Hudu	0
Ghatshila	Galudih	0	Ichagarh	Tiruldih	0
	Karadub	0	Nimdih	Hunterpathardih	0
	Khariya Colony	0	Rajnagar	Govindpur	3
	Jhatijharna	0		Chailyama	0
Jugalsalai Sah	Ghorabhandha	0		B.Kuttumb	0
Golmuri	Belajuri	0	W. Singhbhum		
Musabani	Jadugora	0	Tonto	Jangalhat	0
Patmada	Bangurda	0		Tonto Gram	0
Potka	Manpur	0		Tonto HQ	0

- All district Civil Surgeons and MOICs directed to do meeting with ANMs and Sahiyya, for those PHC/HSC which are not running in govt. building for awareness to improve the achievement of institutional delivery within 1 month and submit progress report after 1 month.
- Civil Surgeon, Saraikela directed to submit the details history report of doctors posted at Adityapur PHC, Gamhari, Saraikela.
- In-charge, Musabani CHC directed to issue show-cause letter to MOs and ANMs of PHC Chiteswar and Ramchandarpur. In-charge informed that institutional delivery in both PHCs will be started within 1 month.
- All Civil Surgeons directed to stop salary and issue show-cause letter to the ANMs who are posted in more than one year at those health sub-center, running in government building, with all required equipment/facilities and not performed institutional delivery. Civil Surgeon also directed to start the process for termination of contract of the contractual ANMs and dept. proceeding in the case of regular ANMs, on the basis of performance with respect to key indicators.
- Civil Surgeon and MOICs submit the timeline for starting institutional delivery at HSCs as follows –

District	CHC Name	Total no. of HSC	No. of HSC performing ID as on 20.02.13	Add. No. of HSC to started ID in next one month	Add. No. of HSC be started ID in next three month
Saraikela	Chandil	22	3	6	13
	Gamharia	19	6	6	7
	Ichagarh	27	1	3	20
	Kharsawan	21	5	3	13
	Kuchai	14	6	3	5
	Nimdih	29	2	3	15
	Rajnagar	31	0	2	8
	Saraikela	23	0	8	15
	W. Singhbhum	Sadar	22	7	2

	Khuntpani	18	7	4	7
	Tantnagar	18	3	5	10
	Manjhari	21	4	3	14
	Manjhgaon	22	2	4	3
	Kumardingi	20	4	2	4
	Jagannathpur	22	5	3	3
	Barajamda	22	4	4	14
	Jhinkpani	20	5	3	4
	Tonto	18	3	3	4
	Manoharpur	27	4	3	3
	Sonua	30	5	3	4
	Goeikera	24	5	5	10
	Chakradharpur	31	7	4	20
	Bandgaon	27	3	2	10
E. Singhbhum	Bahragora	38	0	2	3
	Chakulia	25	2	1	2
	Dalbhumgarh	21	1	3	3
	Dumaria	18	0	2	5
	Ghatshila	33	0	2	2
	Jugsalai	18	2	3	5
	Musabani	22	1	2	3
	Patamda	31	2	4	6
	Potka	54	0	7	5

- **JSSK**

- Implementation of JSSK is not satisfactory at all the district hospital and CHCs. CHCs/PHCs mentioned below have poor expenditure –

JSSK Expenditure <50% Till January 2013	
West Singhbhum	District Hospital (48%), Kumardungi (20%), Jagannathpur(21%) Barajamada(31%), & Manoharpur(10%)
Saraikela	Chandil (13.05%), Ichagarh(8.44%), Kharsawan(38.39%), Kuchai (21%), Nimdih (20%).
East Singhbhum	Musabani(25%)

- All MOICs including Civil Surgeon directed to provide diet to beneficiaries @ Rs. 50 per day per beneficiary.
- All the MOICs directed to display the entitlements under JSSK in-front of the facilities with details of doctor's (Name, Specialization, Mobile no).
- Provide all the local representatives /PRI members /MLAs/MPs, the details of provisions under JSSK through letter.
- During the meeting, it is observed that most of facilities are not providing referral services to sick neonates under the programme, thus is was directed to provide referral services to sick neonates.

- **Full Immunization**

- All Civil Surgeon, RCH Officers and MOICs directed to verify the immunization and other data before uploading it in HMIS portal and cross check it after uploading.

- Civil Surgeons directed to ensure the visits of district level officials to monitor the immunization sessions/VHND.
- All District RCH Officer directed to submit the details report of those CHC where achievement is less than 60% within 15 days to Principal Secretary Office and Mission Director Office, Ranchi.
- In-charge, Gamharia CHC directed to increase the RI session day other than Thursday and Saturday.
- **MTC**
 - All MOICs directed to arrange meeting of ANMs and Sahiyyas of catchment area where bed occupancy is less than 50%.
- **MCTS**
 - MCTS entry is very poor in maximum facilities.
 - All the Civil Surgeons directed to ensure 100% entry of MCTS data. For outsourcing of data entry, NIC approved rate for data entry may be followed.
- **FRU**
 - It has been observed that despite of regular review and instructions C. Sections are not being taken up in most of the FRUs. All the FRUs in charge directed to improve the performance otherwise punitive actions will be initiated against non-performing doctors.
 - Review the performance of doctors posted/deputed at FRU on regular interval of every 15 days.
 - Issue Show cause to EmOC and LSAS trained MOs, if they are not performing C. Section for recovery of training cost.
 - Civil Surgeon, Saraikela directed to stop salary and issue show-cause letter to Dr. Jakiya Sitara (Posted at Potka, Jainagar and deputed at District Hospital, Saraikela) for recovery of LSAS training amount as she has not contributed in any cesarean/surgery till date.
 - As per information of FRU Rajnagar, In-charge, Dr. Manorama Siddesh attendance is very poor, so Civil Surgeon, Saraikela directed to stop her salary and issue show-cause letter. CS also directed to submit the last 6 months details report of Rajnagar with OPD and attendance register.
 - Civil Surgeon, West Singhbhum directed to use Dr. M.K. Arun as first assistant in cesarean deliveries.
 - Civil Surgeon, West Singhbhum directed to submit the attendance and performance details last six months report of Dr. B.K. Singh.
 - Chakradharpur FRU, In-charge directed to submit the last six month detail report of C-section in private facilities at Chakradharpur.
 - Civil Surgeon, East Singhbhum directed to submit the last six month detail report of Ghatshila doctors performance and report of institutional delivery both at public (with list of equipment available) as well as private facilities.
 - Civil Surgeon, East Singhbhum directed to issue explanation letter to Dr. Rana Singh (Bahragoda FRU) for recovery of LSAS training amount, as he is not co-operating in C-section.

- Civil Surgeon, East Singhbhum directed to issue explanation letter to Dr. Sandip Kumar Ghose for not performing C-section in Govt. facility where as he is performing C-section in his own private facility (informed by In-charge of Bahragoda FRU).
- All the FRU in charge will ensure to fix display board with mentioning 24x 7 functioning of FRU and the name of the specialists and mobile no. posted in prominent place for conducting C-section free of cost.

- **Family Planning**

- The achievement of NSV and Tubectomy in most of the facilities are unsatisfactory. Civil surgeon and ACMO directed to monitor this and ensure improvement in performance.
- Issue show-cause letter to all district ACMOs for poor performance.

- **HMS/AMG/Untied Fund**

- CHCs/PHCs mentioned below have poor expenditure in HMS/AMG/Untied Fund. MOICs are directed to visit their respective CHC/PHC/HSC, identify the works required in the facility, bring the issues with estimated expenditure into proceeding of HMS meeting, take approval and get the work done.

	Saraikela	E. Singhbhum	W. Singhbhum
Untied Fund VHSNC	Chandil(49) Seraikella CHC(7.15%), Kuchai(49%), Nimdih (49%), Rajnagar(42%).	Chakulia(47%), Patamda(41%), Dumaria(38%), Musabani(45%), Bahragora(37%), & Ghatshila(21%)	Khuntpani (38%), Chakradharpur(23%), Goikera(38%), Bandgaon(40%), Manjhari(47%), Kumardungi (42%), Tonto (28%), Majhgaon(46%), Barajamada(44%), & Manoharpur(44%)
Untied Fund HSC	Kharsawan(46%), Nimdih(47%), Rajnagar(35%), Seraikella(14%).	Patamda(44%), Jugsalai(38%), Dhalbhumgarh(22%), Bahragora(33%), Ghatshila(31%), & Potka(26%),	Kumardungi (40%), Tonto (22%), Jhikpani(43%), Jagannathpur(43%) Barajamada(17%), & Manoharpur(32%)
Untied Fund PHC	Chaliyawan PHC (Rajnagar)(40%), Brahamkutumb PHC (Rajnagar)(36%).		Jhikpani(43%), Jagannathpur(32%) Barajamada(44%), & Manoharpur(32%)
Untied Fund CHC			Jhikpani(10%) & Barajamada(24%),
AMG HSC	Ichagarh (27%), Kharsawan (38%), Nimdih (43%) & Seraikella (0%)	Dumaria (0%), Dhalbhumgarh (29%), Ghatshila (19%) & Potka (43%)	Jhikpani (0%), Manoharpur (0%) & Barajamada (0%)
AMG PHC	Ramni (0%), Kuchai (0%), Hunterpatherdih (40%), Chaliyawan (45%) & Govindpur (45%)		Jhikpani (0%) & Barajamada (0%)
AMG CHC	Kharsawan (39%)	Bahragora (43%)	
HMS/RKS PHC			Jhikpani (43%) & Manoharpur (0%)
HMS/RKS CHC	Ichagarh(14%),	Bahragora (35%)	Kumardungi (31%) & Manoharpur (0%)

- Ensure proper and 100% utilization of Untied Fund as per guideline. All expenditure must be booked and SOE to be submitted till 25th March 2013.
- **MMU**
 - All the Civil Surgeons directed to ensure MMU are equipped with all mandatory equipments, medicines, doctors & staffs.
- **Finance**
 - All Civil Surgeons and MOIC are directed to improve expenditure.
 - All Civil Surgeons directed to issue show-cause letter facility wise to those MOICs or MOs whose expenditure is less than 50% till date.
 - All are strictly directed to follow financial rule / procedures in expenditure, ensure proper accounting, book keeping and documentation.
 - All Civil Surgeons directed run 1 week special drive in from 1st March 2013 for booking of all pending expenditure and updating the ledger book. Civil Surgeon submit a certify copy just after drive that all pending expenditure have been book and ledger book is updated till date.
 - Financial review must be ensured every month at district and block level. Action plan to be submitted to Mission Director/Director Finance within 15 days.
 - Provide signed hard copy of FMR with physical as well as financial to state head quarter on or before 5th of every month.


(Aboobacker Siddique P.)
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