

(2) AGENDA ITEMS

Item No.1 MCH MCH 1-2

MATERNITY & CHILD WELFARE

(i) Physical Achievement (Feb 2010)

Block PHC	ANC-1		ANC-3		IFA Large (PW)		VIT-A (0-1yrs)		VIT-A (1-5 yrs) 5 th dose	
	During	Upto	During	Upto	During	Upto	During	Upto	During	Upto
Block PHC - 1										
Block PHC - 2										
Block PHC - 3										
Urban										
Total	84.2	89.8	84.1	90.6	103.7	105.3	85.1	83.1	32.7	21.0

(ii) Deliveries

Block PHC	Total Deliveries		Govt. Institutional Deliveries		Pvt. Institutional Deliveries	
	During	Upto	During	Upto	During	Upto
Block PHC 1						
Block PHC 2						
Block PHC 3						
Urban						
Total	78.1	80.5	31.4	39.5	44.7	32.6

Comments:- Vitamin A (0-1 yrs) and Vitamin A (1-5 yrs) Performance is very poor.

Item Code MCH 3.1-3.2E

1. Institutional Deliveries in Government Institutions :

1. State average increase = 32.44 % upto February, 2010 as compared to corresponding period of the last year)
2. Percentage of total expected deliveries in Government run institutions = 18.27 %

(a) District % in institutional deliveries as a whole (including Allied Institutes)

Deliveries in year 2008-09		Deliveries in year 2009-10			% Increase/ Decrease over the last year (Upto February)
During February	Upto February	During February	Upto February	%age of deliveries in Govt. Inst	
178	2123	160	2364	25.58	11.35

The percentage increase in institutional deliveries is 11.35 % as compared to the corresponding period of the last year which is lower than the State average and can be improved further with more dedicated efforts.

(b) District Hospital:

Deliveries			
During the Month (February 2010)	Upto the month (February 2010)	Corresponding period of year 2008-09	% age increase or decrease
116	1385	1245	11.24

Deliveries by Doctors posted at DH				
SN	Gynaecologists	Regular/ NRHM	During the month (Feb 2010)	Up to the month (doctor)
1	Dr. Jasbir Singh Aulakh	Regular	106	1296
2	Dr. Amanjot	Regular	0	2
3	Dr. Neera Saith	Regular	10	45
4	Dr. Rohit Ram Pal	Regular	0	0
5	Dr. Simren Bali	Regular	0	0
6	Dr. Paramjit Lal	Regular	0	0
7	Dr. Bhawari	Regular	0	7

(c) CHCs as EmOC – 3:

SN Inst	CHC	Year of Upgradation	Deliveries			Remarks
			Dec 09	Jan 2010	Feb 2010	
1	Dhanaula	2007-08	45	32	18	Excellent
2	Bhadaur	2007-08	26	29	11	Excellent
3	Tapa	2008-09	6	1	4	Very Poor

Deliveries by Doctors posted at EmOC						
SN	Gynaecologists	Institution	Regular/ NRHM	During the month (Feb 2010)	Total Deliveries of Institute (Feb)	
1	Dr. Kiran Deep Kaur Sandhu	Dhanaula	NRHM	14	18	
2	Dr. Gurwinder Kaur	Bhadaur	Regular	11	11	
3	Dr. Isha Gupta	Tapa	Regular	2	4	
4	Dr. Gurpreet Singh			0		

(d) PHCs as 24x7 - 5

SN Inst t	PHC	Year of Upgradat ion	Deliveries			Remarks
			Dec 09	Jan 2010	Feb 2010	
1	Mahal Kalan	2007-08	5	7	5	Poor
2	Channanw al	2007-08	4	6	3	Very Poor
3	Talewal	2008-09	7	6	2	Very Poor
4	Rurke Kalan	2008-09	5	3	1	Very Poor
5	Bhathlan	2009-10	0	0	0	Extremely Poor

Institutes which have poor, very poor or extremely performance need special focus.

Deliveries by Doctors posted at 24x7 PHCs					
SN	Medical Officer	Institution	Regular/ NRHM	During the month (Feb 2010)	Total Deliverie s of Institute (Feb)
1	Dr. Manpreet Kaur	Channanwal	Regular	0	3
2	Dr. Supreet Kaur	Talewal	NRHM	0	2
3	Dr. Kamaljit Kaur	Rurke Kalan	NRHM	1	1
4	Dr. Gagandeep Singh	Bhathlan	Regular	0	0

MCH 4.1 - 4.3 IMMUNIZATION

Physical Achievement (Feb 2010)

	TT-2		BCG		DPT-3		OPV-3		MEASLES		HEP-B	
	During	Upto	During	Upto	During	Upto	During	Upto	During	Upto	During	Upto
Block PHC	-	-	-	-	-	-	-	-	-	-	-	-
PHC 1	-	-	-	-	-	-	-	-	-	-	-	-
PHC 2	-	-	-	-	-	-	-	-	-	-	-	-
PHC 3	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-
Urban	-	-	-	-	-	-	-	-	-	-	-	-
Total	69.8	78.5	99.1	96.6	96.5	95.9	96.5	95.9	86.3	93.7	96.5	95.8

Financial achievement (upto Jan 2010) 69%

Camps checked by DIO : During 4 / 12 Upto 62 / 132

Sessions planned & held : During 344 / 338

Tracking bags : Launched or not no information

Revised Micro-plan : Received

Overall Comments: 1. Coverage of TT-2 is low.
2. DIO/ DFPO to undertake supervision & monitoring as per schedule.
3. Financial achievement is only 69%.

ITEM NO.2 JANANI SURAKSHA YOJNA

1. Beneficiaries (Home + Institutional).

Institution	Estimated Beneficiaries	Estimated Level of Achievements (80% of column 1)	Achievements	% Achievements.	Remarks
	1	2	3	4	5
Block PHC 1					
Block PHC2 ____					
Other Institution					
Total	1900	1520	1443	75.95	Poor

2. Institutional Deliveries.

Institution	Estimated Institutional Deliveries.	Estimated Level of Achievements (80% of column 1)	Achievements	% Achievements.	Remarks
	1	2	3	4	5
Block PHC 1					
Block PHC2 ____					
Other Institution					
Total	1520	1216	825	43.42	Poor

3. Accredited Private Institutions (at least 2 per block).

No. of Health Blocks	No. of Private Institutions to be empanelled	No. of Private Institution Empanelled	Remarks
3	6	16	GOOD (Needs improvement in the reporting system.)

4. Urban Coverage.

Population In Lacs	No. of PP Units	No. of ANMs in Urban Areas	No. of beneficiaries to be covered (.33% of Population.)		No. of beneficiaries covered		No. of Beneficiaries Referred from other institutions.
			Home (80% + Inst. of .33 % of Pop.)	Inst. 64% of .33% of Pop.)	Home	Inst.	
1.60	Nil	(To be filled by the distt.)	423	339	39+188=327	188	(To be filled by the distt.)

5. Financial Coverage. (In Lacs.)

Available Budget.	Shortage Of Funds.	Payment Through Cheque.
8.40	-0.028	(To be filled by the distt.)

6. Physical Verification (5% of beneficiaries covered). (To be filled by the distt.)
7. Computerization of JSY beneficiaries. (To be uploaded on the NRHM site by the distt.)
8. Display of Names of JSY beneficiaries. Distt. to tell the status of display
9. District Nodal Officer for JSY. Distt. to tell the name with contact no.
10. District Nodal Officer for redressing the complaints. (Other than the JSY Nodal Officer). Distt. to tell the name with contact no.

ITEM NO. 3 FAMILY WELFARE

1. No Scalpal Vasectomy (NSV).

Institution	ELA (20% of Total Sterilization).	Achievement	% Achievement	Random Checking	Remarks
Block PHC 1					
Block PHC2_____					
Other Institution					
Total	590	158	26.8	(To be filled by the Distt.)	Very Poor

2. Tubectomy.

Institution	ELA.	Achievement			% Achievement	Random Checking (5%)	Remarks
		Lapro	Mini Lap	Total			
Block PHC 1							
Block PHC2_____							
Other Institution							
Total	2360	760	760	1520	64.4	(To be filled by the Distt.)	Poor

3. Laproscope.

Single Puncture/ Double Puncture.	Brand	Name of Intuition where located	Working/ Non-Working.	Surgeon Available Y/N
(To be filled by the Distt.)				

4. Copper-T.

Institution	ELA.	Achievement	% Achievement	Random Checking	Remarks
Block PHC 1					
Block PHC2_____					
Other Institution					
Total	10235	8222	80.3	(To be filled by the Distt.)	Poor

5. Oral Pill Users.

Institution	ELA.	Achievement	% Achievement	Random Checking	Remarks
Block PHC 1					
Block PHC2_____					
Other Institution					
Total	2565	1992	77.7	(To be filled by the Distt.)	Poor

6. Condom Users.

Institution	ELA.	Achievement	% Achievement	Random Checking	Remarks
Block PHC 1					
Block PHC2 ____					
Other Institution					
Total	13280	10925	82.3	(To be filled by the Distt.)	Poor

7. NSV Fixed Days Services (On Tuesday).

Name of the Institution.	Achievement	Remarks
(To be filled by the Distt.)		

8. NSV-Mega Camps.

Name of the Institution.	No. of Camps Held	Achievement	Remarks
(To be filled by the Distt.)			

9. Tubecmy Fixed Days Services (On Thursday).

Name of the Institution.	Achievement	Remarks
(To be filled by the Distt.)		

10. Tubecmy-Mega Camps.

Name of the Institution.	No. of Camps Held	Achievement	Remarks
(To be filled by the Distt.)			

11. Insurance Claims.

	Cases	Claim Filed	Received Claim	Pending Claim
Deaths	To be filled by the Distt. case wise			
Failure of Sterilization				
Complication				

12. Sterilization Failure Cases operated before 29-11-05.

No. of Cases	Status Report
To be filled by the Distt. case wise	

13. Empanelment of Service Providers (Trained & Certified) for various methods of sterilization.

Service Provider		Conventional Vasectomy	NSV	Mini-Lap	Lapro
Govt.	Pvt.				
(To be filled by the Distt.)					

14. Empanelment of Private Institution for various methods of sterilization.

Name of the Institution	Conventional Vasectomy	NSV	Mini-Lap	Lapro
(To be filled by the Distt.)				

15. Financial Coverage. (In Lacs.)

1	Available Budget.	Unspent Balance as on 28/02/10	Remarks
	33.77	20.39	

16.

Incentives Paid on the Operation Day (Yes/No) To be filled by the Distt.

17. Quarterly meeting of Quality Assurance Committee (QAC). To be filled by the Distt.

18. Computerization of data. To be uploaded on the NRHM site by the distt.

ITEM NO.3 FW 3-PC & PNDDT ACT

No. of Registered Centers – 18

Inspections	Target upto month	Achievement upto month	% Achievement
	66	17	25.8%

Remarks :-

Very poor performance

Dates of Distt. Advisory Committee Meetings

1 st	2 nd	3 rd	4 th	5 th	6 th
10.8.09	6.10.09	11.11.09			

Remarks: The meetings are not held regularly as per Act.

Action taken for violation of PC & PNDDT Act.

	Upto 31.3.2005	2005-06	2006-07	2007-08	2008-09	2009-10	Total upto date
Suspensions	NIL	4	NIL	NIL	NIL	1	5
Cancellations	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Court-cases launched	NIL	1	NIL	NIL	NIL	NIL	1

Remarks: Nil

performance during 2006-07, 2007-08 & 2008-09.

Current Status of Court Cases

Court Cases launched upto date	No. of Cases still pending in Courts	No. of Cases decided	Dismissed	Conviction
1	1	NIL	NIL	NIL

Status of Reports (Received or not)

- Detailed information regarding Registered Centers under PC &PNDT Act (23 columns proforma) -- No
- Information regarding Court Cases -- Yes
- Information regarding Suspension or Cancellation report) -- Yes (but not proper of registration by Punjab Medical Council.
- Information regarding verification of Sex-ratio Survey conducted by M/s AMS Consulting Ltd. -- Yes
- Certificate by Civil Surgeon regarding authenticity of data considered for awards to Panchayats. -- Yes

REVISED NATIONAL TB CONTROL PROGRAMME

Performance under RNTCP upto Feb, 2010

1.1 District Profile					
Population in lacs	No. of TUs	No.of DMCs	No. of DOT Centers		
5.94	1	6	136		
1.2 Performance & Indicators					
% of chest symptomatic patients examined (should be 2-3 % of new adult OPD)	New Sputum positive case detection rate (Should be 67-95/lac) (c*12/Projected Population)	Total case detection Rate (Should be 180-257/lac) (i*12/Projected Population)	Sputum conversion Rate of NSP Patients registered 3 months (Should be >90%)	Cure Rate of NSP patients registered one year back (Should be >85%)	Remarks
2.1%	45	83	74%	79%	Performance is poor
1.3 RNTCP Contractual Staffing & Training Status					
STLS		STS		LT	
Sanctioned	In Place	Sanctioned	In Place	Sanctioned	In Place
1	1	1	1	6	6
TBHV		DTO trained	No. of untrained STS	No.of untrained STLS	Remarks
Sanctioned	In Place				
1	1	Yes	0	0	All Trained & In Place

NATIONAL LEPROSY ERADICATION PROGRAMME

1.1 New Cases Detected upto Feb, 2010								
Districts	New Cases Detected during the Month			New Cases Detected Cumulative from 1.04.09			Remarks	
	PB	MB	Total	PB	MB	Total		
Barnala	0	0	0	0	2	2		
1.2 Case deleted upto Feb, 2010								
Districts	Cases Deleted during the month			Cases Deleted (Cumulative from 1.04.09)			Remarks	
	PB	MB	Total	PB	MB	Total		
Barnala	0	0	0	2	3	5		
1.3 Balance Case & Punjabi Case upto Feb, 2010								
Districts	Cases Balance (Under Treatment)			Punjabi Cases			Remarks	
	PB	MB	Total	PB	MB	Total		
Barnala	0	5	5	0	0	0		
1.4 Staff Position								
District	NMS's				Driver			
	Sanctioned	Filled	Vacant	Consolidated Salary	Sanctioned	Filled	Vacant	Consolidated Salary
Barnala	1	0	1	6000/-	1	0	1	4500/-

NATIONAL BLINDNESS CONTROL PROGRAMME

Cataract Operation

Sr. No	Districts/ PHC	Popu.	Target	Prop. Target upto Feb. 10 (Cataract)	Performance				
					Cataract without IOL	Cat. With IOL during the month	TOTAL	Upto the month	% age upto the month
1	Block PHC 1								
2	Block PHC 2								
3	Barnala	526,931	3,894	3,569	9	391	400	3,663	102.6

Comments : have performed outstanding

IOL Performed

Sr. No	Districts	Popu.	Target (IOL) 90% of Cataract	Prop. Target upto Feb. 10 (IOL)	During the month	Upto the month	% age upto the month
1	Block PHC 1						
2	Block PHC 2						
3	Barnala	526,931	3,407	3,123	391	3,203	102.5

Comments : have performed outstanding

School Eye Screening

Sr. No.	Name of the District	Population	Performance				
			Target for the year 2009-10	Prop. Target of Feb. 10	During the month	upto the month	% Age upto the month
1	2	3	4	5	6	7	8
1	Block PHC 1						
2	Block PHC 2						
3	Barnala	526931	7,571	6,940	485	13,290	191

Comments : have performed outstanding

Refractive Errors Detected

Sr. No.	Name of the District	Population	Target for the year 2009-10	Prop. Target of Feb. 10	Performance		
					During the month	upto the month	% Age upto the month
1	2	3	4	5	6	7	8
1	Block PHC 1						
2	Block PHC 2--						
3	Barnala	526931	454	416	40	864	207

Comments : have performed outstanding

Spects distributed

Sr. No.	Name of the District	Popu.	Target for the year 2009-10	Prop. Target of Feb. 10	Performance		
					During the month	upto the month	% Age upto the month
1	2	3	4	5	6	7	8
1	Block PHC 1						
2	Block PHC 2--						
3	Barnala	526931	136	125	0	526	421

Comments : have performed outstanding

IDSP**Performance Grading- IDSP Weekly Reporting**

Parameters	January 2010			February 2010		
	Form-P	Form-S	Form-L	Form-P	Form-S	Form-L
Timely Reporting	Yes	Yes	Yes	Yes	Yes	Yes
Reporting Units Covered	Yes	Yes	Yes	Yes	Yes	Yes
Total % age Reporting Weekwise						
First Week	81.25	75.38	72.73	81.25	80.00	100.00
Second Week	62.50	70.77	54.55	75.00	76.92	90.91
Third Week	62.50	69.23	63.64	93.75	76.92	81.82
Fourth Week	56.25	92.31	81.82	93.75	73.85	100.00
Total	65.63	76.92	65.91	85.94	76.92	93.18
Instant Outbreak Reporting in 2010	No outbreak	No outbreak	No outbreak	No outbreak	No outbreak	No outbreak
Overall Performance > 100%- Excellent > 70-99%- Very Good > 50-69%- Good > < 50%- Satisfactory	Good	Very Good	Good	Very Good	Very Good	Very Good

Performance Grading H1N1 (Swine Flu)

Parameters	Yes/No
Timely Reporting of suspected cases	Yes
Treatment under Cat-B	Yes
Timely sample collection and dispatch to designated lab	Yes
Timely and complete treatment to H1N1 patients	Yes
Timely Contact tracing & Treatment	Yes (5)
Performance	Very Good

SCHOOL HEALTH

Progress Report of School Visited

1. Progress Report of Referral Cases (Dental & Eye ailments also)

Sr. No.		No. of students Referred for treatment			No. of students treated		
		Up to the prev. month	During the month	Up to the month	Up to the prev. month	During the month	Up to the month
	A) General Ailments						
	B) Dental Diseases						
	C) Refractory Errors			760			
	D) Spectacles given			507			

NOTE: - REPORT UPTO 31-12-09, LATEST REPORT NOT RECEIVED, GENERAL & DENTAL DISEASES REPORT TO BE COMPILED FROM 01-04-2010 ONWARD.

2. Progress Report of RHD/CHD cases

<i>Sr. No.</i>	<i>No. of students</i>	<i>No. of RHD/CHD cases referred</i>	<i>% age with students</i>	<i>Remarks</i>
	67898	17	0.025	-

3. Progress Report of Cancer

<i>Sr. No.</i>	<i>No. of students</i>	<i>No. of Cancer cases referred</i>	<i>% age with students</i>	<i>Remarks</i>
	67898	NIL	-	-

OPD PHC

Item Code OPD-I

Block PHC	No. of PHCs/RHs	No. of Medical Officer Posted in these PHCs	OPD		No OPDs per Medical Officer	Estimated Population (Rural)	No. of OPD per 1000 Population
			During Feb-09	Upto Feb-09			
BPHC-1							
BPHC-2							
BPHC-3							
	12	12	4351		363	405854	10.7

- Information of Medical Officers posted and No. of OPD needs to be checked
- Average OPD needs improvement

NATIONAL RURAL HEALTH MISSION
NRHM (Finance)- Untied Funds & AMG Funds

Name of Component	Opening Balance as on 01/04/09	Funds Released from State HQ	Misc. receipts	Refunds, if any	Total Funds Available	Expenditure up to 28/02/10	% of Utilization	Closing Balance as on 28/02/10	Remarks
Untied Funds									
Untied Fund CHCs	34210	200000			234210	133235	57%	100975	Fair
Untied Fund PHCs	62292	200000			262292	116462	44%	145830	Poor
Untied fund SCs	195171	750000			945171	485543	51%	459628	Fair
Untied fund VHSC	1337840	1600000			2937840	1472509	50%	1465331	Poor
Annual Maintenance Grant									
AMG CHC	64113	300000			364113	100773	28%	263340	Poor
AMG PHC	50476	400000		89600	360876	169990	47%	190886	Poor
AMG SC	0	370000			370000	69780	19%	300220	Poor
Rogi Kalyan Samiti PHC		800000			800000	9765	1%	790235	Poor

MMU

It has been observed from the report of MMU for the year 2009-10 (upto the month February, 2010) that the Mobile Medical Units are not working properly. The Functioning of MMU is not taken seriously by the Civil Surgeons. In some MMU X-Ray machines are not working in some MMU's ECG are not done regularly. It is also observed that roster for the movement of Mobile Medical Van is not being maintained. For the smooth functioning of MMU the following steps be taken :-

1. The roster movement of MMU must be maintain roster should be prepared by the concerned SMO where the MMU Van is stationed copy of the roster send to districts & State Head Quarter so that the movement of MMU may be check at any time.
2. The roster should be prepared so that MMU may visit two villages in a day if possible. The MMU van should visit at least two days, in the villages under one Sub Centre.
3. It is also observed that when the driver of MMU is on leave the van remain station. So the alternate should be done by the SMO from SANCHI Ltd. (Out-Sourcing agency, address of which is already with the districts).

4. Where no Medical Officer is posted in PHC, MMU should visit PHC for at least two days in a week to attend the patient at PHC.
5. As the MO (Female) is posted in MMU so the ANM of the block should be directed by the SMO to bring the pregnant ladies for Ante Natal Checkup.
6. Blood slides for suspected cases of Malaria must be prepared by the Laboratory Technician.
7. The reporting performa is prepared and attached herewith so kindly send the report in the performa based.

(Action to be taken by Civil Surgeons)

Performa as per Civil Surgeon meetings Agenda

1. SELECTION OF ASHA: -

(Feb. 2010) Report Sent by District regarding selection of ASHAs

Sanctioned Tentative ASHA in district	Selection of ASHA till previous month	Selection of ASHA during the month	ASHA(zero performance Terminated during the month	Total Selection of ASHAs	Remaining ASHAs yet to be completed
406	320	0	0	320	86

Comment :

Civil Surgeon was instructed to appoint the remaining ASHAs yet to be completed as per the instructions/guidelines on the basis of Status Report sent by District to State Head Quarter.

2. Certificate regarding payment of Backlog incentives : -

Certificate in this regard has been received.

3. Streamline the payment of incentives to ASHA : -

To Streamline the payment of incentives to ASHA all the Civil Surgeons were already instructed to open the Bank A/c of each ASHA But **opening of the bank A/c is still under process in your district.** Civil Surgeon was again instructed to complete the task at the earliest and only A/c payee cheque should be issued to ASHA. So the strategy of e-banking may be adopted in future.

With the purpose to evaluate the performance of each ASHA, a format has already been supplied to the district and the Civil Surgeon was instructed to submit the report in this regard every month after due verification at block and district level.

Referral Transport

- No information received on the Physical performance
- Performance in the last eight months from the issue of guidelines is poor.
- Either the community is not aware of this incentive, IEC /BCC campaign to be carried out so that it reaches the masses.

4. Evaluation of ASHAs Performance based upon their Average Earnings :-

REFERRAL TRANSPORT							
Sr. No	Districts	Target to be covered for 8 months	Physical performance	Expenditure as per SOE	Achievement as per SOE	%age Achievement	Remarks
1	Barnala	1800	No information	1000	5	0.3	Poor

SURAKHIT JANEPYA YOJNA

Surakhit Janepya Yojna				
Sr No.	Districts	Institutions Empanelled	Physical Performance	Remarks
1	Barnala	Nil	-	Poor

- No Private Health Institution has been accredited under the Scheme by district Barnala. To empanel Accredited Private Health Institutions
- Funds have been released to district in Jan,2010 under the scheme
- District were requested to conduct meeting with Private Health Institutions, District IMA and FOGSI bodies making them aware about the scheme and to share the minutes of the meeting with the state. However, no report has been received from the district.
- Focus of the scheme should be to cover all BPL/SC/ST beneficiaries with emphasis to cover those PHC areas which have not been made 24x7 till date.
- Scheme to be publicized with the involvement of Community mobilizers, BCC Facilitators, BEEs , LHVs, ANMs and ASHAs at the grassroot level .

VILLAGE HEALTH AND SANITATION COMMITTEE

Village Health and Sanitation Committee									
S. No.	Name of the District	Opening Balance as on 1.4.09	VHSC formed	Funds Released by State in 09-10	Funds Available at district	Funds Released by		No. of VHSC Accounts Opened	Refund if any
						District to Block	Block to VHSC		
1	Barnala	13.38	170	16.0	29.38	16.0	16.0	146	-

- Funds released to 160 VHSCs out of 170 VHSCs.
- Funds released by block to 160 VHSCs however 146 VHSC accounts opened.
- Funds available for remaining 10 VHSCs as per opening balance.

NRHM-TRAINING

S. No.	Name of Training	Target	Expected Achievement	Actual Achievement	Back-Lock	Budget Allocated	Expenditure
1	MTP	3	3	0	3	-	-
2	Laparoscopic Sterilisation	3	3	3	0	-	-
3	Minilap Sterilisation	3	3	3	0	19135	12700
4	Contraceptive Update HW (F)	30	30	28	2	18970	9424
5	Contraceptive Update HW (M)	30	30	27	3	18970	9110
6	RTI/STI – MO	20	20	0	20	27480	0
7	RTI/ STI – Paramedicals	30	30	23	7	26130	16650
8	ARSH – MOs	25	25	0	25	60707	0
9	ARSH – LHV/ ANM	90	30	0	90	193350	0
10	ARSH – School Teachers	30	30	0	30	34780	0
11	IMEP Training	50	50	40	10	28486	13666

	(Paramedicals)						
	TOTAL					428008	61550

OVERALL – Physical – POOR; Financial – POOR (14.38%)

PREVENTION OF FOOD ADUTERATION-Sample seized

Sr. No.	Monthly target	Packed samples seized	Loose Samples Seized	Total samples seized	Percentage of achievement
1	15	3	9	12	80%

Prosecutions

Sr. No.	Court cases lunched during the month	Pending for lunching till date	Performance
1	19	13	Average

DRUG CONTROL

Monthly norms of inspections	Inspection conducted in February 2010	Percentage of achievement	Monthly norms of sampling of drug	Sample taken in February 2010	Percentage of achievement
30	13	43.33%	10	Nil	0.00%

I BIRTH & DEATH REGISTRATION

Estimated Live Births 2010	Live Births Registered		%age Registration (Prop.)	Institutional Births	%age of Instt. Births to total Reg. Live Births	Remarks
	During Feb-10	Upto Feb-10				
10324	558	1142	66%	946	83%	Incomplete data, Needs Improvement

II Sex Ratio

Estimated Live Births 2010	Live Births Registered		Sex Ratio (Upto Feb-10)	Institutional Births (Upto Feb-10)		Sex Ratio of Instt. Live Births (Upto Feb-10)	Remarks
	During Feb-10	Upto Feb-10		Male	Female		
1721	558	629	513	816	520	426	819

III Death Registration

Estimated Deaths 2009	Deaths Registered		%age Registration	Remarks
	During Feb-10	Upto Feb-10		
696	99	192	28%	

IV Infant Deaths Registration

Estimated Infants Deaths 2009	Infants Deaths Registered		%age Registration	Remarks
	During Feb-10	Upto Feb-10		
				Information Needs to be send regularly

V Issuance of Certificates

No. of Applications received		No. of Application Disposed Off	No. of Application Pending	Remarks
During Feb-10	Upto Feb-10	During Feb-10		
				Information Needs to be send regularly

- Information needs to be sent every month at state Head Quarter along with the below mention certificate.
- Certified by the block SMO that no items is lying unserviceable in the block.
- Certified by the Civil Surgeon that no items is lying unserviceable in the block.

SECONDARY HEALTH CARE

Hospital Performance Indicators

The hospital performance indicators relating to the activities performed in District Hospitals, Sub Divisional Hospitals and Community Health Centres for the month of February 2010 were reviewed in comparison with that of the corresponding period of the last year i.e. February 2009 and previous month of the same year i.e. January 2010. The Activity indicators, Clinical and Diagnostic indicators of all the District Hospitals were discussed separately in detail.

Tier wise comparison i.e. (District Hospitals, Sub Divisional Hospitals and Community Health Centres)

Comparison with previous month

Indicators of most of the districts showed increasing trend.

Comparison with previous year

Indicators of most of the districts showed increasing except DH Kapurthala, SDH Faridkot, Nawanshahr and Tarn Taran..

(Action to be taken by Civil Surgeon)

Grading

The Agenda for the Core Quality for the month of February 2010 was discussed. Following points were highlighted:-

GRADINGS AT A GLANCE: COMPARISON JANUARY 2010 AND FEBRUARY 2010										
TYPE OF HOSPITAL	A+		A		B		C		D	
	Jan-10	Feb-10	Jan-10	Feb-10	Jan-10	Feb-10	Jan-10	Feb-10	Jan-10	Feb-10
DISTRICT HOSPITALS (21)	8	20	12	1	1	0	0	0	0	0
SUB DIVISIONAL HOSPITALS (39)	5	19	20	14	10	5	3	1	1	0
COMMUNITY HEALTH CENTRES (106)	7	38	37	49	45	18	16	1	1	0

Out of 21 DHs, 1 institutions are below acceptable grade A+
1 in Grade "A"

MANSA	1	MANSA
Out of 39 SDHs, 6 institutions are below acceptable grade A		
5 in Grade "B"		
BATHINDA	1	TALWANDI SABO
FEROZEPUR	2	ZIRA
HOSHIARPUR	3	GARHSHANKAR
JALANDHAR	4	PHILLAUR
LUDHIANA	5	SAMRALA
1 in Grade "C"		
MUKTSAR	1	GIDERBAHA
Out of 106 CHCs, 1 institutions are below acceptable grade B		
1 in Grade "C"		
MUKTSAR	1	SARAWAN BODLA

All the CS/DMC were told to look especially for the institutions falling in grade C & D. They will conduct joint tours in there institutions and submit the report regarding low grading by 30th of every month.

Benchmarks

The benchmarks of all the Specialist Doctors who did not achieve the targets during the month of February 2010 were discussed. There were 35 doctors in the state whose achievement was less than 100%. The authorities were directed to call the explanation of the doctors and ask them to improve their performance.