

GUIDELINE ON MANAGEMENT OF PRIMARY HEALTH CENTER (NEW) IN PPP MODE



MISSION DIRECTORATE
NATIONAL HEALTH MISSION (NHM)
HEALTH & FW DEPARTMENT
GOVERNMENT OF ODISHA, BHUBANESWAR

2022

A. INTRODUCTION / BACKGROUND :

India has made rapid progress in the past few decades in the Public Health System as reflected improvement in key parameters such as Infant, Child and Maternal Mortality Rates, Total Fertility Rate, and Crude Death Rates. There has been improvement in expanding access and coverage in much of the country. This has largely been achieved by strengthening public health system over the years, and substantially accelerated by the National Health Mission (NHM). NHM support was largely targeted toward improving primary health care and strengthening service delivery at district and sub district levels.

Despite these improvements, comprehensive primary health care in India is yet to be made fully universal. Access to primary health care remains uneven across the length and breadth of the country. The NHM support has improved health care particularly for the vulnerable marginalized and those living in underserved areas such as remote rural geographies.

With a view to further improving the quality of the primary health care in terms of clinical care and outreach services, NHM consider it desirable to hand over the function and responsibilities of operating and managing the selected Primary Health Centers (PHCs) located in remote and vulnerable areas to a concessionaire who would be allowed to operate and manage such facilities in accordance with the terms and conditions laid down in this Services Level Agreement. Government hopes that this would bring about considerable improvement in provision of competent clinical care including public health functions in these areas in the State.

B. OBJECTIVE:

- (i) To improve the quality of primary health care in terms of clinical care in remote and inaccessible Primary Health Centers by making it functional.
- (ii) To ensure provision of competent clinical care services at the PHC(N) based on comprehensive primary health care approach, includes services under RMNCH+A, National Disease Control Programme and Non-Communicable Disease Programme, assure supply of free drugs and diagnostic services.
- (iii) To reduce the out of pocket expenditure (OOPs)

C. OPERATIONAL STRATEGY:

- (i) The Government shall contract out the building and physical infrastructure of the PHC(N) to the Agency along with the existing equipment, furniture and records etc. The Agency will maintain the said building/equipments with due care as would be reasonably expected.

- (ii) The Agency shall provide all the clinical services and other Public Healthcare services, as normally expected from any Primary Health Centre.
- (iii) The Agency will engage its own medical/paramedical/other staff as per the sanctioned norm of PHC(N) for providing services.
- (iv) To implement the project, Government will release annual grant-in-aid in phase manner to the Agency as per the budget provision.
- (v) The Agency is expected to submit mandatory reports like HMIS, IDSP, and facility based MDR & CDR and other programme reports to Government.
- (vi) In addition to Allopathic system of medicine, provision of AYUSH medicine will be continued.
- (vii) In order to ensure quality of care, efforts would be made to equip these PHC(N)s as per NQAS (National Quality Assurance Standards) and standards stipulated in 'Kayakalapa'.
- (viii) All services shall be provided in free of cost to the patients at the hospital. No charges will be collected from patients for availing of any diagnostic test, treatments, drugs, and registration on OP & IP etc.
- (ix) The existing Rogi Kalyan Samiti (RKS) at the level of PHC will be reformed as Jan Arogya Samiti (JAS). If the JAS already exists, then it would be reconstituted to include a representative of the Corporate House along with the existing members. The composition, functionalities, legal framework, roles & responsibilities and meeting schedules will remain same as per the JAS guidelines.
- (x) In order to ensure patients' satisfaction, effective grievance redressal mechanism and regular patient satisfaction survey will be established and same would be reviewed by the respective Jan Arogya Samiti (JAS). The JAS will actively undertake measures towards grievance redressal through patient feedback surveys.

D. BROAD CATEGORIES OF SERVICES UNDER PHC:

The basic unit of service delivery would be the Primary Health Center. The services should include the comprehensive primary healthcare package encompassing outreach, including behavioral change through health education and health promotion, clinical and public health services. The indicative lists of Services to be provided at the PHC level are given below:

Sl No	Services	Brief Description
1.	General Service OPD	The general working hour of hospital OPD would be 8 AM to 12 Noon and 4 PM to 6 PM. However, it may be changed basing on the notifications issued by

SI No	Services	Brief Description
		Govt. time to time. Services to be provided in OPD are; Diagnosis and screening of patients attending Allopathic OPD and AYUSH OPD, prescription of free drugs, referral of complicated cases. In case of emergency, the PHC Staff shall attend the patient even it is beyond the general working hour.
2.	Care in pregnancy and childbirth	<ul style="list-style-type: none"> • Early registration of pregnancy and Antenatal check-up. • Identifying HRP, GDM • Normal Vaginal delivery & pre referral management in case of emergencies.
3.	Neonatal and infant health care services	<ul style="list-style-type: none"> • Identification and management of high risk newborn. • Management of BA, ARI, Diarrhoea. • Identification & referral for congenital anomalies and AEFI. • Complete Immunization, Vit. A Supplementation
4.	Childhood & adolescent health care services	<ul style="list-style-type: none"> • Identification and management of vaccine preventable diseases. • Early detection & referral for abnormalities, delay and disability. • Prompt Management of ARI, acute Diarrhoea and detection of SAM • Adolescent Health counselling.
5.	Family planning & other reproductive health care services	<ul style="list-style-type: none"> • Provision of condoms, OCP, ECP and insertion & removal of IUCD. • Counselling and facilitation for safe abortion services and Post abortion contraceptive counselling. • Identification and management of RTIs/STIs
6.	Management of communicable diseases including NHP	<ul style="list-style-type: none"> • Diagnosis and management of VBDs • Provision of DOTS for TB and MDT for leprosy • HIV Screening

SI No	Services	Brief Description
7.	Management of Common communicable diseases and acute simple illnesses	<ul style="list-style-type: none"> • Identification, management and referral of common fevers, ARIs, diarrhoea, skin infections, cholera, dysentery, typhoid, hepatitis, rabies and helminthiasis. • Management of common aches, joint pains, and common skin conditions, (rash/urticaria)
8.	Screening & comprehensive management of NCDs	<ul style="list-style-type: none"> • Screening, treatment and referral for Hypertension and Diabetes. • Cancer – screening for oral, breast and cervical cancer and referral for suspected cases of other cancers • Screening and follow up care for occupational diseases, fluorosis, respiratory disorders (COPD and asthma) and epilepsy
9.	Basic ophthalmic and ENT care services	<ul style="list-style-type: none"> • Identification and treatment of common eye problems • Management of common colds, ASOM, injuries, pharyngitis, laryngitis, rhinitis, URI, sinusitis, epistaxis • Manage common throat complaints and removal of foreign body.
10.	Basic dental health care	<ul style="list-style-type: none"> • Screening and basic management for common oral health conditions. • Oral health education about dental caries, periodontal diseases, malocclusion and oral cancers.
11.	Basic geriatric health care services	<ul style="list-style-type: none"> • Management of common geriatric ailments; counselling, supportive treatment • Pain Management and provision of palliative care with support of ASHA
12.	Emergency Medical Services	<ul style="list-style-type: none"> • Stabilization care and first aid before referral in common conditions. • Identify and refer cases for surgical correction cysts / lipoma/ haemangioma/ ganglion and other conditions.

SI No	Services	Brief Description
13.	Screening & basic management of mental ailments	<ul style="list-style-type: none"> • Detection, referral and follow up of patients with severe mental disorders • Dispense follow up medication as prescribed by the Medical officer at PHC/ CHC or by the Psychiatrist at DH.
14.	General Diagnostic services	<ul style="list-style-type: none"> • All 24 prescribed tests are to be conducted at the PHC level. (List is at Annexure-A) • Provision for ensuring hub and spoke model for expanded range of diagnostics
15.	In-patient service	<ul style="list-style-type: none"> • Provisioning of six bedded facility (4 nos. bed for in-patients and 2 nos. as observation beds).
16.	Teleconsultation	<ul style="list-style-type: none"> • Offer teleconsultation services in hub, sub-hub and spoke model through e-Sanjeevani
17.	Health Promotion / Wellness activities	<ul style="list-style-type: none"> • Conducting 40 Health Days as per wellness calendar in a year. (List of Health Days at Annexure-B) • Conducting at least 10 yoga sessions every month • Organizing wellness activities as per Fit India Movement

E. OTHER SERVICES / PROVISIONS IN THE PHC(N) :

The PHC(N) shall ensure following services and provisions.

- (i) **Bio-Medical Waste Management:** Guidelines for Health Care Workers for Waste Management and Infection Control in Primary Health Centers are to be followed.
- (ii) **Free Drugs:** Medicines listed as per essential drug list for PHC shall be supplied by Govt.. Patients attending PHC for treatment shall be provided free drugs. The PHC should ensure rational use and distribution of drugs.
- (iii) **Free Referral Transport Facility:** The existing free referral transport support of Govt. (108 /102 Ambulance Service) shall be linked with the PHC for referral of patients for any emergency.
- (iv) **Laundry Services:** Provision for clean linen shall be made for admitted patients. At least 5 sets of linen shall be made available per bed. Laundry Services may be available in house or outsourced.

- (v) **Water supply:** Adequate water supply and water storage facility (over head tank) with pipe water shall be made available for 24-hrs in the PHC.
- (vi) **Electric city and power back up:** Uninterrupted electricity connection along with power back up support shall be made available in the PHC.
- (vii) **Environment friendly features:** The PHC should be, as far as possible, environment friendly and energy efficient. Rain-Water harvesting, solar energy use and use of energy-efficient bulbs/ equipment should be encouraged.
- (viii) **Computer & Internet:** Computer with Internet connection should be provided for Management Information System (MIS), online reporting and other administrative purpose.

F. KEY DELIVERABLES FOR THE PROJECT:

The Agency has to ensure to achieve following key deliverables in the PHC(N) management project:

Sl No	Activities	Deliverables
1.	All prescribed manpowers are in positioned.	There is no vacancy of maximum 60 days of any position in the PHC(N) throughout the year.
2.	OPD Service (Allopathic)	Min. Avg. OPD 40/day
3.	OPD Service (AYUSH)	Min. Avg. OPD 20/day
4.	Lab Services	All 24 tests are available as per the standard list under free diagnostic services for PHC.
5.	Delivery Services	Minimum Avg. 10 or above delivery per month.
6.	ANC/PNC Clinic	9th of every month PHC conducted Pradhan Mantri Surakshita Martutya Abhiyan (PMSMA) as per the guideline.
7.	IUCD/PPIUCD Services	Minimum Avg. 5/month.
8.	NCD Clinic/Screening	Daily- 90% of OPD above 30 years to be screened.
9.	Functional Designated Microscopy Center (DMC)	PHC must be a functional Designated Microscopy Center
10.	Health Promotion and disease prevention	Conducting at least 27 Health Days in as year as per wellness calendar and at least 10 yoga sessions per month

Sl No	Activities	Deliverables
11.	JAS functionalisation	Effective functionalisation of JAS and meetings are regularly conducted as per provision.
12.	Maintenance of Quality Standard	<ul style="list-style-type: none"> The PHC must be the winner of KAYAKALP in every year. In the 2nd year of Project operation, the PHC must qualify National Quality Assurance Standard (NQAS).

G. MANPOWER PROVISION UNDER THE PROJECT:

Followings are the Human Resources required to be positioned in the PHC (N) for operation and management of PHC(N). .

Sl. No.	Category of Staff	No of post.	Eligibility Qualification
1.	Medical Officer (Allopathic)	1	<ul style="list-style-type: none"> Age- S/he should not be more than 70 years age as on the date of advertisement. MBBS degree from an institute recognized by Medical Council of India. Must have valid registration from the Odisha Council of Medical Registration. Candidates having post qualification experience of working in hospital will be preferred.
2.	AYUSH Medical Officer	1	<ul style="list-style-type: none"> Age- S/he must have attained the age 21 years by the date of advertisement. The candidate must have a bachelor degree in Ayurvedic medicine & Surgery (BAMS)/Bachelor in Homeopathic Medicine & Surgery (B.H.M.S) as the case may be, from a recognized university. He/ She must have completed the internship training if any. He/She should have passes odia language in M.E standard. Must have valid Registration Certificate from the State Ayurvedic/Homeopathic Council. No provisional registration certificate will be entertained.
3.	Pharmacist	1	<ul style="list-style-type: none"> Age- S/he must have attained the age 21 years by the date of advertisement. Minimum Qualification- Degree/Diploma

Sl. No.	Category of Staff	No of post.	Eligibility Qualification
			<p>in Pharmacy from a Govt./Govt. recognized Institution. Minimum 1 year Experience in managing a drug store in a reputed hospital/health center organized by the Govt.</p> <ul style="list-style-type: none"> • He/She should have passes odia language in M.E standard.
4.	Staff Nurse	1	<ul style="list-style-type: none"> • Age: She must have attained minimum age of 21 years. • Minimum Qualification: The candidate must have passed the +2 in any stream under Council of Higher Secondary Education, Odisha or equivalent with BSc. Nursing/Diploma in GNM Course in Nursing from any Government GNM/BSc Nursing Institutions of the State/from any institutions run by PSUs/any other recognized Private Institutions duly approved by Indian Nursing Council and examination conducted by State Nursing and Midwives Examination Board. • Registration Certificate: The candidate must have registered her name in Nursing Council in the State and must possess valid Registration Certificate. • She should have passed Odia language minimum in M.E standard.
5.	ANM	1	<ul style="list-style-type: none"> • Age- She must have attained the age 21 years. • Minimum Qualification-The candidates must have passed the HSC examination & shall have completed ANM course from institution recognized by Govt and approved INC and must have registered in the odisha nursing council. • He/She should have passes odia language in M.E standard.
6.	Lab Technician	1	<ul style="list-style-type: none"> • Age- S/he must have attained the age 21 years. • Minimum Qualification-The candidates must have passed in Diploma in Medical

Sl. No.	Category of Staff	No of post.	Eligibility Qualification
			laboratory Technology from AICTE/ AICTE approved institutions/State Govt. recognised institutions. <ul style="list-style-type: none"> • He/She should have passes odia language in M.E standard.
7.	Attendant -cum- Sweeper	1	<ul style="list-style-type: none"> • Age- S/he must have attained the age 21 years. • Minimum Qualification- Minimum 8th Standard.

The Staff so engaged / recruited/ appointed by the Agency shall be exclusively on the pay roll of the Agency and shall under no circumstances this staff will ever have any claim, whatsoever for appointment with the Government. The Agency shall be solely responsible for the performance and conduct of the staff notwithstanding the source of hiring such staff.

The Agency shall be fully responsible for adhering to provisions of various laws applicable on them including labour laws. In case the Agency fails to comply with the provisions of applicable laws and thereby any financial or other liability arises on the Government by Court orders or otherwise, the Agency shall be fully responsible to compensate/ indemnify to the Government for such liabilities. For realization of such damages, Government may even resort to the provisions of any Act, which is in force or other laws as applicable on the occurrence of such situations.

H. EQUIPMENT, CONSUABLES AND MISCELLANEOUS SUPPLIES:

The equipments and supplies will be added at the PHC(N) level in accordance with the expanded range of services. Indicative list of items for equipment and supplies required for the PHC(N) is attached at **Annexure-C**.

I. IEC & BRANDING:

Following information shall be displayed and available in the PHC(N):

- (i) Display of signage and name of the facility
- (ii) If the facility is a Health & Wellness Center (HWC), then there must be branding as per HWC Protocols.
- (iii) Display of IEC material and standard protocols
- (iv) Display of Citizen Charter

- (v) Display the name & designation of PHC staff
- (vi) Display on the department wise available services
- (vii) Display on available drugs
- (viii) Display the names of Rogi Kalyan Samiti /Jan Kalyan Samiti members
- (ix) Installation of LED screen in patient waiting area for IEC display
- (x) Information on grievance referral displayed
- (xi) Information on referral transport displayed
- (xii) Information on nearest referral facility displayed
- (xiii) Notice Board

J. DURATION OF PROJECT:

- (i) The duration of the project will be initially for one year.
- (ii) However, the project may be extended subject to the fund provision approved in NHM PIP and satisfactory performance of the Agency in PHC (N) operation and management. The renewal of contract will be two years in each occasion.
- (iii) The period of contract will be calculated from the date of physically handing over of the PHC(N) to the Agency or from the last day of last MoU signed.

K. GRANT-IN-AID & ACCOUNTS MANAGEMENT UNDER THE PROJECT:

- (i) Grant-in-Aid for the project shall be released to the Agency on the basis of budget provision made in the NHM PIP.
- (ii) The disbursement/release of funds by Zilla Swasthya Samiti (ZSS) to the Agency would be in three installments i.e. 30%, 35% and 35% in advance of total project cost. The 1st installment i.e. 30% will be released after signing of the MoU and submission of the performance security in the mode of Bank Guarantee. The 2nd installment, i.e. 35% will be released on 4th month after receipt of the utilization certificate for 75% of 1st installment. The 3rd installment i.e. 35% will be released after receipt of the utilization certificate for 75% of 2nd installment on 9th month of annual project period.
- (iii) The Agency will open a separate saving bank account for the grant-in-aid in any Nationalized Bank. The account will be opened in the name of the project, which shall be operated jointly by at least two office bearers authorized for the purpose by the management committee of the NGO.
- (iv) A Statement of Expenditure (SOE) / Utilization Certificate (UC) will be furnished by the Agency to the District on monthly/quarterly basis. Annual audit of the PHC(N) accounts would be undertaken through a qualified Chartered Accountant

and the audit report and accounts for the year would be furnished to the District and Mission Directorate, NHM by 31st May of the succeeding year.

- (v) NHM / ZSS will conduct concurrent audit on quarterly basis and as and when required.
- (vi) The Government reserves its right to get a special audit conducted of the accounts of the PHC(N) after giving at least 30 days notice to the Agency. Further, Auditor General of Odisha, can as per their discretion, conduct an audit of the accounts of the PHC(N).
- (vii) The selected Agency is required to deposit a Bank Guarantee of Rs. 1,00,000/- (Rupees one lakh only) per project in the name of Zilla Swasthya Samiti from a Nationalized Bank with valid period of minimum one year as performance security. It will be the responsibility of the Agency to renew the Bank Guarantee before expiry and ensure its validity as per the contract period extended time to time.

L. TERMINATION OF CONTRACT:

- The Government or the Agency desires to terminate the project before the expiry of the contract, a notice period of 30 days will be given to the other party.
- The Government reserves the right to terminate the agreement without assigning any reason, if services of the Agency create serious adverse publicity in media and prima facie evidence emerges showing negligence of the NGO /any financial irregularities done by the NGO /misappropriation of Govt. funds by the NGO.
- Any assets created under the project out of the project grant-in-aid or funds collected from any sources will be the property of the State Government and will be handed back to the Government, as such, after the project duration is over/discontinued/terminated. Assets created by the Agency from its own funds for the project will also remain the property of the Government.

M. MONITORING MECHANISM:

- The District Programme Management Unit & Block Programme Management Unit will regularly monitor the progress by undertaking field visits, provide supportive supervision and resolve the operational issues, if any. Primarily the PPP Coordinator at the District level is responsible to coordinate & facilitate for smooth functioning of the project.

- At the State level, PPP Cell, NHM will monitor the project and organize external evaluation of the projects by External Independent Agencies in each three years of completion of operation.
- Regular annual assessment of the project shall be done by the District after completion of one year for further renewal of contract.
- The programme will be reviewed bi-monthly/quarterly at the district level and half-yearly/annually at the State level.

N. MISCELLANEOUS:

- The Agency will not indulge in promotion or encouragement of any religious or political activities. The Agency should be sensitive to the local sensibilities and the tribal culture. It is presumed that the Agency will undertake only lawful activities.
- The Agency is permitted to establish partnership with other agency /organization for performing full or in part any of the activities expected from the Agency as per this MoU.
- The Government reserves its rights to give directions to the Agency in public interest regarding the management and operation of the PHC(N) or for any other matter related to the PHC(N) including the selection of personal.
- Agency may mobilize additional resources for supplementary support to improve the service delivery and facility in the PHC(N). The ZSS must be kept informed on such activity.

O. ANNEXURES:

ANNEXURE A : List of Diagnostics for PHCs

#	Diagnostics
1.	Haemoglobin
2.	Blood group
3.	Bleeding time
4.	Clotting time
5.	Blood sugar
6.	HCV Antibody Test (Anti HCV)
7.	Kala Azar
8.	Filariasis
9.	TB – Montoux
10.	Test for Dengue
11.	Malaria: Slide method
12.	Malaria: Rapid test
13.	RPR/ VDRL test for syphilis
14.	HIV test (Antibodies to HIV 1 & 2)
15.	Hepatitis B surface antigen test
16.	Sputum for AFB
17.	Typhoid test (IgM)
18.	Urine test for pregnancy
19.	Multi-reagent Urine test
20.	Urine Microscopy
21.	Stool for Ova and Cyst
22.	Visual Inspection Acetic Acid (VIA)
23.	Test for Iodine in Salt (Used for Food)
24.	Water testing for faecal contamination and Chlorination

ANNEXURE- B : Health Days to be celebrated.

Sl. No.	Date	Day
1.	12 th January	National Youth Day
2.	24 th January	Save the Girl Child Day
3.	30 th January	Anti-Leprosy Day
4.	4 th February	World Cancer Day
5.	10 th February	National Deworming Day
6.	11 th February	International Epilepsy Day
7.	8 th March	International Women's Day
8.	24 th March	World Tuberculosis Day
9.	7 th April	World Health Day
10.	11 th April	National Safe Motherhood day
11.	14 th April	Ayushman Bharat-Health and Wellness Centre Day
12.	25 th April	World Malaria Day
13.	10 th May	Mother's Day
14.	28 th May	Menstrual Hygiene Day
15.	28 th May to 8 th June	Intensified Diarrhoea Control Fortnight
16.	31 st May	World No Tobacco Day
17.	14 th June	World Blood Donor Day
18.	21 st June	International YOGA Day
19.	11 th July	World Population Day
20.	28 th July	World Hepatitis day
21.	01-07 August	World Breast Feeding Day/Week
22.	10 th August	National Deworming Day
23.	15 th August	Independence Day
24.	25 th Aug to 8 th Sep	Eye Donation Fortnight
25.	01-07 September	National Nutrition Week
26.	29 th September	World Heart Day
27.	1 st October	World Elderly Day
28.	8 th October	World Sight Day
29.	10 th October	World Mental Health Day
30.	21 st October	World Iodine Deficiency Disorder Day
31.	29 th October	World Stroke day

Sl. No.	Date	Day
32.	7 th November	National Cancer Awareness Day
33.	12 th November	World Pneumonia Day
34.	14 th November	Children's Day
35.	14 th November	World Diabetes Day
36.	15-21 November	Newborn Week
37.	17 th November	World Prematurity Day
38.	21 Nov to 4 th December	NSV Fortnight
39.	1 st December	World AIDS Day
40.	12 th December	Universal Health Coverage Day

ANNEXURE-C : List of Equipment and other Logistics required at PHCs

Type	Items	Quantity required
1. Items required for routine services		
Furniture and Fixtures	1. Examination table - 4	4
	2. Writing tables with table sheets- 6	6
	3. Plastic chairs (for in-patients' attendants)-10	10
	4. Armless chairs - 16	16
	5. Full size steel almirah- 7	7
	6. Table for Immunization/FP/Counseling- 1	1
	7. Bench for waiting area- 2	2
	8. Wheel chair -2	2
	9. Stretcher on trolley -2	2
	10. Wooden screen 1	1
	11. Foot step- 5	5
	12. Coat rack -2	2
	13. Bed side table- 6	6
	14. Bed stead iron (for in-patients)- 6	6
	15. Baby cot-2	2
	16. Stool -10	10
	17. Medicine chest -1	1
	18. Lamp -3	3
	19. Side racks- 4	4
	20. Mattress for bed -6	6
	21. Generator for power back support to PHC (10 KVA)	1
Clinical Material, tools and equipment	1. Basin 825 ml. Ss (Stainless Steel)	1
	2. Basin deep (capacity 6 litre)	1
	3. Instrument tray with cover 310 x 195x63mm SS	2
	4. Dressing Drum with cover 0.945 litres stainless steel	3
	5. Hemoglobinometer (strip/micro-cuvette)	2
	Glucometer	2
	6. Weighing Scale, Adult 125 kg/280 lb	2
	7. Instrument sterilizer	2
	8. Sphygmomanometer Aneroid 300 mm with cuff	2
	9. Kelly's haemostat Forceps straight 140 mm	2
10. Cheatle's Forceps	2	

Type	Items	Quantity required
	11. Cheatle holder	2
	12. Needle holder	2
	13. Scalpel holder with blade	
	14. Sponge holding forceps	4
	15. Kidney tray	4
	16. Artery Forceps, straight, 160mm Stainless steel	4
	17. Stitch cutter	4
	18. Alles forceps	4
	19. Dressing Forceps (spring type), 160 mm, stainless steel	4
	20. Stethoscope	2
	21. Hub Cutter/Needle Destroyer	2
	22. I/V Stand	10
	23. Artery Forceps-Curved	5
	24. Digital Thermometer	5
	25. Examination Lamp	2
	26. Oxygen Cylinder with trolley	5
	27. Stadiometer	2
	28. Nebulizer	2
	29. Gauze Cutting Scissors Straight	4
	30. Handheld Pulse Oximeter	2
2 Lab Diagnostic materials		
	1. Slide drying rack	2
	2. Specimen collection bottle	
	3. Micro-pipette	2
	4. Yellow Tips for Micropipette	
	5. Microscope	1
	6. Neuber Chamber	2
	7. ESR Stand with tube	2
	8. TC-DC Count apparatus	1
	9. Stopwatch	1
	10. Sickeling test kit	
	11. Water quality test- H2S Strip test	
	12. Semiautomated Bio-Chemistry Analyzer	1
	13. Centrifuge machine	1
	17. Urine Analyzer(Urine strips)	
	18. Peak Flow Meter	2
	19. Lab Autoclave	1
	20. Refrigerator	1

Type	Items	Quantity required
	21. Incubator	1
	22. Centriguge-12/8 Tubes	1
	23. Needle Destroyer	1
3. Items required for providing RMNCAH+N services		
Labour Room	The Labour Room should have the following:	
	1. Labour table with mattress, sheet, pillow (numbers as per case load), Macintosh, Foot-rest	1
	2. Brass V drape to collect blood and amniotic fluid	2
	3. Wall clock with seconds hand	1
	4. Wall mounted thermometer	2
	5. Suction apparatus	2
	6. Equipment for adult resuscitation	2
	7. Equipment for neonatal resuscitation	2
	8. Delivery trolley	1
	9. IV drip stand	2
	10. Screen/Partition between two tables	2
	11. Stool for birth companion	2
	12. Lamp – wall mounted or side	2
	13. Autoclave	1
	14. Autoclave drums for instruments, linen, gloves, cotton, gauge, threads sanitary pads	3
	(a) Autoclaved delivery set for each delivery	3
	15. Refrigerator	1
	16. Sphygmanometer, adult and newborn thermometer and newborn weighing machine	1
	17. Consumables like gloves, apron, cotton, thread, gauze, sanitary napkins, catgut, IV drip sets, needle, cord clamp, medicines (injectable, oral and parenteral, leucoplast) etc	
	18. Pulse oxymeter	1
	19. Sterilizer	2
	20. Oxygen cylinder	1
	21. Oxygen concentrator	2
22. Partograph		
23. Delivery kit for HIV positive women		

Type	Items	Quantity required
	24. Labelled plastic jars for drugs and injectables with date of expiry written on them against each drug	1
	25. Coloured bins for bio medical waste management(1-Set)	3
	26. Hub cutter	1
	28. Plastic tubs for 0.5% Chlorine solution	
	29. Intranatal protocols	
	30. Wheel chair/patient's trolley	1
	31. 7 Trays: Delivery tray, Episiotomy tray, Medicine tray, Emergency drug tray, Baby tray, MVA tray, PPIUCD tray (see content below)	1
	32. Hand-washing area and toilet for the admitted clients	
	33. Foeto-scope/Foetal Doppler	2
	34. Stethoscope,	2
	35. Display of SBA quality protocols, and shadow less lamp	
	36. Mosquito Repellent	5
New Born Care Corner (NBCC)	1. Baby tray	3
	2. Paediatric stethoscope	2
	3. Baby scale	2
	4. Radiant warmer	1
	5. Self-inflating bag and mask–neonatal size (0 and 1)	2
	6. Oxygen hood (neonatal)	2
	7. Laryngoscope and Endotracheal intubation tubes	2
	8. Two set of pencil cell batteries (one is spare)	
	9. Mucus extractor with suction tube and a foot-operated suction machine NG tubes	
	10. Blankets	2
	11. Two clean and dry towels	5
	12. Feeding tubes	
	13. Empty vials for collecting blood	
	14. Alcohol handrub	
	15. HLD/sterile glo	

Type	Items	Quantity required
Clinical Material tools and equipment	1. Weighing Scale (10 Kg)	2
	2. Vulsellum Uterine Forceps curved 25.5 cm	2
	3. Cusco's/Graves Speculum vaginal bi-valve	2
	4. Sims retractor/depressor	2
	5. Sims Speculum vaginal double ended ISS Medium	2
	6. Uterine Sound Graduated	2
	7. Cord cutting Scissors, Blunt, curved on flat, 160 mm ss	2
	8. Foetoscope	
	9. Ambu Bag (Paediatric size) with Baby mask	2
	10. Episiotomy Scissors	2
	3. Glucometer	1
4. Items required for providing Specialist services		
Oral Health	1. Interdental cleaning aids	
	2. Dental Probe/ Periodontal Probe	2
	3. Mouth Mirror	4
	4. Tooth model with brush and torch	1
ENT	1. Examination Torch(LED)	2
	2. Tongue Depressor(wooden:100/pack)	1
	3. Mouth Gag	2
	4. Tuning fork	3
	5. Nasal Speculum (St. Claire's)*	2
	6. Ear Speculum – metallic, dull finish	2
	7. Jobson-Horne probe	2
	8. Otoscope	1
NCD	1. Glucometer with strips and lancet	1
	2. VIA Kit for screening cervical cancer	1
	3. Digital BP Apparatus	1
	4. Aneroid BP apparatus	1
Ophthalmic services	1. Snellen vision chart	1
	2. Near vision chart	1
	3. Colour Vision Chart	1

P. Staff ToR of PHC(N) Management Project:

1. Medical Officer (MBBS):

Reporting authority: Block Public Health Officer

Job Description:

- a) Diagnosis and treatment of patients attending OPD and IPD.
- b) Prescription of drugs out of the available essential drug list.
- c) Conduct minor surgery, ANC, normal delivery, PNC etc in the hospital.
- d) Emergency case management and referral to the higher health institutions, if required.
- e) Ensure that the services under comprehensive primary healthcare relating to Reproductive health, Maternal health, Newborn & Child health, Adolescent health, Communicable Diseases and Non-Communicable Disease services are provided in the hospital.
- f) Supervision of day to day hospital activities and management so as to ensure quality assurance and client satisfaction care of the patients.
- g) Supervision on proper maintenance and update of the records & reports at the Hospital.
- h) Facilitate in functioning of Rogi Kalyan Samiti / Jan Arogya Samiti in the PHC(N) and ensure convening of the scheduled meetings.
- i) Facilitate in achieving quality standards like KAYAKALP Award / NOAS.
- j) General administration of the PHC(N) and staff management etc.
- k) Keep close coordination with BPHO, BPMU and other key line department functionaries for smooth operation of the Hospital and regularly attend block level monthly meetings/training programmes.
- l) Verify institution based reports & returns generated every month and their analysis before submission to CHC/District.
- m) Ensure proper implementation of FPC/KMC in the Hospital.
- n) Conduct verification/ audit of the stock allotted/procured for Hospital and forward the indent to CHC/District for adequate available of drugs & consumables.
- o) Ensure proper adherence and management of bio-medical waste protocols.
- p) Any other tasks assigned by the CDM&PHO/ BPHO from time to time.

2. AYUSH Medical Officer:

Reporting authority: MO I/C, PHC (N)

Job Description:

- a) Diagnosis & treatment of patients from own system of medicines (Ayurvedic/Homeopathic) and dispensing of drugs.

- b) To conduct/assist normal delivery after obtaining of SAB training.
- c) To support the Medical Officer I/C in day to day operation and management of the Hospital.
- d) To conduct field visit and provide handholding support to the field level health functionaries for enhance their skill, knowledge & practice, if directed by the Block/District Health Authority.
- e) Provide support in delivery of services under RMNCH+A, Communicable Diseases and Non-Communicable Diseases.
- f) Assist in preparation of reports & returns of the PHC(N) and their analysis to take corrective measures.
- g) In absence of Medical Officer I/C, responsible for overall management & functioning of the hospital.
- h) Ensure proper implementation of FPC/KMC in the Hospital.
- i) If required, extend services during any emergency / epidemic situation.
- j) Facilitate in achieving quality standards like KAYAKALP Award / NQAS.
- k) Ensure proper adherence and management of bio-medical waste protocols.
- l) Any other tasks assigned by the CDM&PHO/ BPHO /PHC(N) MO I/C from time to time.

3. Pharmacist:

Reporting authority: MO I/C, PHC (N)

Job Description:

- a) Dispensing of drugs to patients as per the prescription of Medical Officer.
- b) Maintain physical stock relating to equipments, assets, drugs, consumables and stationeries etc along with their updated records.
- c) Responsible for indenting of stocks from time to time.
- d) To assist the Medical Officer in minor surgeries and emergency management etc.
- e) Dressing to injured patients, administration of injection etc.
- f) Involve in the quality assessment and implementation process under KAYKALP /NQAS.
- g) Proper adherence and management of bio-medical waste protocols.
- h) Assist in preparation of periodical reports & returns.
- i) Any other tasks assigned by the BPHO / MO I/C from time to time.

4. Staff Nurse:

Reporting authority: MO I/C, PHC (N)

Job Description:

- a) Conduct ANC, PNC and Family Planning services (contraceptives and Tubectomy / Vasectomy methods), NCD programmes etc.
- b) To assist the Medical Officer in minor surgeries and emergency management etc.

- c) Assist Medical Officer during normal delivery; also conduct delivery independently after trained on SAB.
- d) Administration of injections.
- e) Dressing injured patients.
- f) Assist in delivery of services under comprehensive primary healthcare relating to Reproductive health, Maternal health, Newborn & Child health, Adolescent health, Communicable Diseases and Non-Communicable Disease services are provided in the hospital.
- g) Involve in the quality assessment and implementation process under KAYKALP /NQAS.
- h) Assist in the immunization programme
- i) Assist in the PMSMA programme in the hospital.
- j) Ensure proper implementation of FPC/KMC in the Hospital.
- k) Maintenance of RMNCH+A/Disease control programme/NCD programme related records/registers and facilitate in preparation of periodical reports & returns.
- l) Proper adherence and management of bio-medical waste protocols.
- m) Any other tasks assigned by the BPHO / MO I/C from time to time.

5. Laboratory Technician:

Reporting authority: MO I/C, PHC (N)

Job Description:

- a) Examination of all kind of general pathological tests as per the prescription of Medical Officer.
- b) Microscopic examination of malaria slides of the catchment area brought by field workers and referred cases from the hospital OPD.
- c) After multi-skilling, prescribed list of lab tests for PHC(N) must be conducted.
- d) Ensure the PHC(N) is extending lab services as per Designated Microscopic Center (DMC).
- e) Involve in the quality assessment and implementation process under KAYKALP /NQAS.
- f) Related records and stocks shall be maintained properly and will assist in preparation of periodical reports & returns.
- g) Ensure Laboratory is properly maintained as per protocol and available instruments are used properly.
- h) Proper adherence and management of bio-medical waste protocols.
- i) Any other tasks assigned by the BPHO /PHC(N) MO I/C from time to time.

6. ANM:

Reporting authority: MO I/C, PHC (N)

Job Description:

- a) Counseling on RMNCH+A, DCP and NCD services.
- b) Conduct ANC, PNC and family planning services (contraceptives and Tubectomy / Vasectomy)
- c) Assist Medical Officer during normal delivery; also conduct delivery after trained on SAB.
- d) Conduct out-reach activities in the PHC(N) areas, if required.
- e) Assist in delivery of services under comprehensive primary healthcare relating to Reproductive health, Maternal health, Newborn & Child health, Adolescent health, Communicable Diseases and Non-Communicable Disease services are provided in the hospital.
- f) Maintenance of RMNCH+A/Disease control programme/NCD programme related records/registers and facilitate in preparation of periodical reports & returns.
- g) Involve in the quality assessment and implementation process under KAYKALP /NQAS.
- h) Ensure proper implementation of FPC/KMC in the Hospital.
- i) Assist in the immunization programme
- j) Assist in the PMSMA programme in the hospital.
- k) Proper adherence and management of bio-medical waste protocols.
- l) Any other tasks assigned by the BPHO /PHC(N) MO I/C from time to time.

7. Attendant – cum-Sweeper:

Reporting authority: MO I/C, PHC (N)

Job Description:

- a) Ensure hospital inside and outside area properly and regularly cleaned.
- b) Proper adherence and management of bio-medical waste protocols.
- c) To sweep, mop and maintain the cleanliness of hospital.
- d) To attend the dressing of patients who had been administered with minor surgery.
- e) To attend patients admitted in indoor.
- f) To dispatch the hospital reports in nearby CHC and to keep the filing of documents in appropriate files as per instruction of MO or other staffs.
- g) Provide support service to the hospital staff.
- h) To dump the waste of ward, O.T. etc. in pit and to make measures for its decomposition.
- i) To follow the instruction of medical officer and other staff
- j) Any other tasks assigned by the PHC(N) MO I/C from time to time.