

Workshop on District Health Action Plan (DHAP) as per IPHS Hyderabad, Telangana - (27th – 29th May, 2019)

A two day workshop on DH Strengthening & District Health Plan as per IPHS was conducted from **27th to 28th May 2019 at Hyderabad, Telangana** under the chairpersonship of Dr. Yogita Rana, MD, NHM. The participants were State and District Health & Family Welfare officers, RCH Officers, Dean of Medical colleges, District Surgeons /Medical superintendent and Assistant Chief Engineers of Hyderabad, Sub Division Assistant Engineers and Assistant Architect, H&FWD. Opportunity was also utilized to orient all participants on the Layout designs/plans of MCH Wings, Labor Delivery & Recovery (LDR)/SDH/CHC & PHC according to IPHS. Participants from aspirational districts were also oriented on how to take various actions and activities to improve program indicators of aspirational districts. *List of participants and agenda is placed at Annexure I.*

The workshop was followed by 1 day field-visit to SHC, CHC & DH of Sangareddy on 29th May.

A brief report and action points are placed below:

Dr. Rama Krishna (Commissioner Health and Family Welfare, Telangana) welcomed the participants followed by their introduction. He presented state's health profile and the proposal for future upgradation of health services in Telangana.

Thereafter, Dr. Himanshu Bhushan, Advisor- PHA, NHSRC explained the objectives of the meeting & the expected outcome from the workshop. He stressed upon the need for the health officials & the engineers to work in coordination with each other so that a health facility can deliver the services efficiently and also the design will help in practicing various technical protocols. He then presented on principles of planning where the importance of evidence based planning for assured critical care services was explained. He also emphasized on the need for a robust comprehensive action plan for bridging the identified gaps so that the service expected under IPHS can be delivered to the patients.

Dr. Yogita Rana, in her key note address stressed upon ensuring full utilization of the existing healthcare facility & set-up before considering expansion, undertaking regular rounds by the hospital in-charges, matrons/nursing superintendents and other supervisors to ensure adherence to SOPs, find gaps (if any) for the corrective actions. She also insisted upon the need for building a robust and effective grievance redressal mechanism in all the healthcare facilities, for better monitoring and patient care.

Mr. Ajit Kumar and Dr. Kalpana Pawalia from NHSRC took sessions on the concept of MHD, DH strengthening and LDRs, wherein the need of strengthening primary and secondary care services of a district and of providing comfortable & soothing environment for delivery was discussed. The layout plans for critical care areas such as Emergency, OT, HDU, Kitchen, CSSD and Mechanized laundry were also discussed with all the participants. The issue of reducing OOPE while planning for health infrastructure of a district, was also discussed.

A session on Respectful Maternity Care (RMC) was also undertaken by Dr.Kalpana, keeping in view the high caesarian section rates in the state. The correlation between Caesarean section and sub-optimal Child's cognitive development was explained in detail.

The deliberations also involved discussion on layout plans of a 30/50/100/200 bedded MCH wing. Emphasis was given to newer concepts of MNCU and DEIC.

The take away from the session can be summarized as below:

- **Improving the quality** of services provided in the health facilities will not only help in reducing the out of pocket expenditures (OOPE) but will also contribute towards achieving the IPHS.
- **Need of SOP**- Quality to be maintained with a set of standard protocols e.g. consistent gap analysis, gap filling and monitoring.
- **Form follows function**- the concept should be adhered to while planning for any health facility. Range of services to be provided should be focused on before planning infrastructure.
- **Monitoring & Feedback**-There must be a system to measure the outcomes and create a feedback loop for continual improvements.
- **Action Plan**- Preparing district health action plans for the planned work with timelines can serve as a better way to achieve the targets.
- **Referral Linkages**- Plan for assured services as identified for DH, SDH and FRU with referral linkages.

Evidence based planning and its time bound implementation will lead to further achievements and improvements in the health indicators of the districts.

On the 3rd day, a field visit to SHC, CHC and DH level facilities at district Sangareddy was undertaken to observe the best practices and identify the gaps, if any. Many good practices were observed such as Amma Odi and KCR kit schemes. Amma Odi scheme gives free transport facility (before and after delivery) and financial/medical assistance to the pregnant women delivering at any government hospital in the state and the KCR Kit provides them with necessary basic items (approx.16 items) to keep newborn babies (neonates) warm and hygienic. The items include: mother's & baby's clothes, baby soap, oil & powder, mosquito nets, toys, napkins, and diapers which are sufficient for 3 months. The quality of items was good.

The ANMs posted at the SC were well versed with the village/block health profile and had maintained an updated line listing of all the beneficiaries of their sub center. The ANMs were also well trained in handling tablets and worked on an Aadhar-based Mother and Child Tracking System (MCTS) software, which is used to track women at every Stage of pregnancy. It is suggested that the state may consider recognition/appreciation of such grass root level workers to keep them motivated. Moreover, good level of cleanliness, use of proper signage, comfortable waiting areas, professionally designed OPDs and display of performance chart graphs in the OPD were also observed in the facilities visited. Also the nurses posted in Labour Room were technically competent but design of LDR was not appropriate. MCP cards available with the beneficiaries & interaction with them indicated that range & quality of services during ANC needs further improvement.

Based on the deliberations with Dr. Yogita Rana and State nodal officer certain actions points were agreed upon as follows-

1. Sangareddy DH was proposed as a center for excellence for MCH wing.
2. NHSRC support would be sought in its proper planning and strengthening for designing MCH wing.
3. A 2 day visit to MGIMS, Wardha would be undertaken by an expert group team from Telangana, to gain sound understanding of an MCH Wing design, functioning, planning and best practices.
4. NHSRC can also support in orienting the district level supervisors on the monitoring & supervisory tools & check-list to improve quality of services in the fields at the facility.
5. A G.O. from the state can be issued for taking daily rounds by hospitals in-charges & managers.
6. Further proposals in the PIP for strengthening of health facilities will be based on expected services as per IPHS & gaps found accordingly through a comprehensive district health action plan.

Annexure-I

Orientation workshop on Layout and plans held on 28th May 2019 by NHSRC / GoI

S.No	Participant	Organization
1	Dr.Yogita Rana	MD, NHM
2	Dr. Himanshu Bhushan	NHSRC
3	Mr. Ajit Kumar Singh	NHSRC
4	Dr. Neha Jain	NHSRC
5	Dr.Kalpana Pawalia	NHSRC
6	Dr. Kushagr Duggal	NHSRC
7	Dr. Ashutosh Kothari	NHSRC
8	Dr. Ashok Kumar	Progammer Officer TVVP
9	Dr. Rambabu Naik	State Nodal Officer, Quality Assurance
10	Dr. Rajini	JD NHM
11	Dr.B.Suresh	Nirmal
12	M Yeshwanth Rao	Mancherial
13	CH hussain	EE, TSMSIDC, Khammam
14	G Sridhar	TSMSIDC
15	G Kumar	EE, TSMSIDC, Adilabad
16	M Lingaiah Naidu	P.O. Hyderabad
17	P Gopal	Jayashankar Bhupalpalli
18	Gowtham Chouhan	Mulugu
19	A Yadaiah	Vikarabad
20	P Raghu	Jangoan
21	M Krishna Rao	Siddipet
22	Dr.K.Vamshi Krishna	Medak
23	K Pandu Ranga Vittal	EE, TSMSIDC, Mahabubnagar
24	Dr.Tirupathi	Sircilla
25	Dr.S.venkateshwarlu	Suryapet
26	Umashankar	UNICEF NHM HYD
27	K Mallikarjuna	Narayanapet
28	GJVN Prakash	EE, TSMSIDC, Siddipet
29	J Ajay Kumar	Kamareddy
30	Dr.A.Sanjeeva Rao	Warangal Rural
31	A Sadamohan	Jagithyal
32	K Ramesh	EE, TSMSIDC, Karimnagar
33	M Sharath	Gajwel
34	Harish Sagar	Wanaparthy
35	Dr. Ramakanth	Peddapally

36	Dr. L. Lokilal	Dy. EE. Nalgonda
37	Dr.Bheem Sagar	Mahabubabad
38	Upender	Utnoor
39	Chalapathi Rao	EE, TSMSIDC, Rangareddy
40	A Jaipal Reddy	Nizamabad
41	Dr.P.Prasad	Ghatkesar
42	V kotya Naik	Bhonghir
43	A Manohar	Bhonghir
44	S Vijay Kumar	Jogulamba Gadwal
45	Dr. Nagabushanam	P.O. (HS&I) Hyderabad
46	Dr.M.Suresh Kumar	AH Malakpet
47	Dr.Nagabhushanam	Nagarkurnul
48	Usha Reddy & Team	Usha Reddy Architects