

## **BROAD GUIDELINES FOR THE CONDUCT OF DISTRICT LEVEL REVIEW MEETING OF ACTIVITIES UNDER NUHM**

### **The Meeting day**

Indicative date will be suggested from the State Mission Directorate well in advance. The duration of the meeting shall be six hours. However, districts with lesser number of UPHCs can curtail the duration of the meeting.

### **Expected Participants**

1. The DMO(Health) or her/his representative (Chairperson )
2. The District Programme Manager (Convener & Chairperson in the absence of DMO)
3. Elected representatives of the urban local body where the PHC is located.
4. District Urban Health Co-ordinator
5. District Quality Assurance Officer/ Person in charge of QA
6. All Medical Officers in charge of UPHCs in the district
7. One senior staff nurse (on the basis of date of joining) from each PHC
8. One JPHN attached to each UPHC
9. DEO of the UPHC
10. Officials concerned with NUHM at the State Programme Monitoring and Support Unit
11. Any other official as deemed necessary by the Convener

### **Objective**

The sole objective of the meeting is the Review and planning of NUHM activities in the district. The meeting also aims at finding and rectifying anomalies if any in the programme delivery.

### **Agenda**

The meeting shall be organized in an interactive appraisal mode where a component wise review shall happen thread bare with respect to each UPHC. The following can be a broad outline,

1. Overall functioning of UPHC
2. The human resource availability with each UPHCs and the problems/constraints (if any)
3. Training and capacity building activities offered and required for the functionaries
4. Punctuality, out put and morale of the staff at service delivery level
5. Patient turn up , geographical coverage, nature of cases reported at each PHC ,epidemics(out breaks if any) etc., and the disease surveillance activities.
6. Number and nature of referrals support from each UPHC

7. Conformity of the UPHCs to the Patients' Charter, grievances and its redressal , patient feedback and activities related to Quality Assurance and Assessment.
9. Pharmacy and Laboratory functioning, availability of essential equipments, medicines, reagents and consumables.
10. Calibration and upkeep of machines/equipments
11. Intervention made in preventive and promotive care.
12. Community mobilization (MAS, RKY), outreach operations , day observations (eg., UHND), special health drives etc.,
13. Involvement and support of the ULB representatives and problems if any
14. IEC Activities and public health education at PHC and district level as part of the mission.
15. Records and registers upkeep, base line data generation, reporting and uploading of HMIS/MCTS/IDSP.
16. Convergence with other national and state health programmes (eg., RNTCP, NVBDCP, HIV/AIDS, Menstrual Health etc.,)
17. Fund availability and utility

### **Reporting**

A detailed report of the district level review covering each of the above items prepared by the District Urban Co-ordinator and endorsed by the District Programme Manager (NHM) shall reach to the NUHM division of the SPMSU within seven days of the meeting.