

MEDICAL & HEALTH

1. No. of Primary Health Centres	: 74
2. No. of Community Health Centres	: 16
3. No. of C.H.N.Cs	: 17
4. No. of P.P.Units	: 02
5. Project Hospital, Kandleru dam	: 01
6. 9 th Battalion Hospital, Vallivedu	: 01
7. Urabn Family Welfare Centre, Nellore	: 01
8. ICDS., Nellore	: 01
9. Dist. T.B. Control Centre, Nellore	: 01

Doctors

Sl.No.	Name of the Cadre	No. of Post Sanctioned	In position	Vacant	P.G. Lien
1	Civil Surgeon	2	2	0	
2	Civil Surgeon Specialist	7	2	5	
3	CAS	173	149(Reg.)+ 2 (C/B)	6	16
4	Deputy Civil Surgeon	17	15	2	
5	Dental Assistant Surgeon	15	15	0	

Brief Notes on the Developmental/Welfare Activities of Medical and Health Department, SPSR Nellore District.

1. Proposal already sent for Govt. Medical College to Sri PSR. Nellore District.
2. Construction of new patient wards in T.B. Hospital(CDH), Nellore as the old wards constructed 60 years back are leaking and about to collapse.
3. Release of maintenance grant of 34 lakhs to APVVP hospitals in Sri PSR. Nellore District.
4. Enhancement of NRHM budget to MCH Nellore from 1 lakh to 2.5 lakhs.
5. Sanction of 2.5 lakhs NRHM budget to CDH Hospital as MDR T.B. Patients are being treated here, as for this hospital HDS amount not being not released regularly.
6. 3 bedded Dialysis Unit started with the funds of District Collector. This unit giving service to the non-Arogyasree middle class people, about Rs.75000/- is needed for maintenance of this unit every month.
7. Out of 25 Ambulances 8 Ambulances were kept down due to non receipt of funds from the Govt. (Fuel problem)
8. As per the orders of the Commissioner of family Welfare arrangements are done by the District Medical & Health Officer to run the 104 services. For this 10 Govt. vehicles are identified and in which 3 vehicles are giving service at Naidupeta, Kavali and Vakadu cluster with the help of Govt. staff from 28.11.2011. 2 vehicles are under repair.
9. **Non-functioning of CHCs as referral Hospitals:** Due to Paritial implementation of Revitalization of primary Health System Specialist Doctors and supported staff were not allotted to the CHCs, thus the referral system is not implementing well in the district.

10. **Providing of Last Grade Servants to all PHCs:** Some of the PHC were not sanctioned Attender & most of the PHC were not sanctioned Watchman post . those posts are very essential to maintain the cleanliness, greenery and other miscellaneous works of the PHCs.
- .11. To be released budget a tune of Rs. 70, 00, 000/- for the institutions under the control of DM&HO and Rs.50,00,000/- for the institutions under the control of APVVP in total Rs.1,20,00,000/- (Rupees one crore twenty lakhs only) towards payment of long pending electricity charges.
- 12.. Providing budget to clear the 2005 PRC arrears to contractual staff i.e., MPHA (M). Lab Technician, Pharmacist Gr.II, Ophthalmic Officer, and Medical Officers for a tune of Rs.60,17,021.00 (Rupees sixty lakh seventeen thousand and twenty one only)
3. Providing two new vehicles to office of the District Medical and Health Officer, Nellore and Additional District Medical and Health Officer, Nellore for touring in implementation of all National Health Programmes effectively.
4. Construction of New residential quarter building for DM&HO, Nellore in the place of old building and construct to the compound wall, Demolishing of the all Very Old buildings in the Premises of the DM&HO office. Nellore and construct to the compound wall.
5. Providing budget of Rs.1,82,500/- only to clear the pending bills towards rent of sub centre buildings in the Nellore District i.e 365 Private rent buildings at Rs.250/- PM for Two years.
6. Providing 10 [ten] new computers along with printers for update of routine work.
7. Facilities at ART Centre for patients
8. Electrification and toilets at TH ward
9. Due to Partial-implementation of Revitalization of Primary Health System the following PHCs : Venkatachalam, Vinjamur, Naidupet, Indukurpet converted as CHCs are facing difficulty in allotment staff and salaries to the Civil Asst. Surgeon Specialists working in the respective Institutions and also its maintenance due to not allotment of budgets.
10. **CEMONC CENTRES:** The construction of Building for Cemonc Centres has been completed at Sullurpet, but the same was not handed over. At Naidupet construction of building to be started.
11. **TROMA CARE CENTRE, NAIDUPET:** Construction of Building Taken up during year 2007, But it comes to now at slab-Level. The Staffing pattern is also not allotted.
12. **NICU :** The NICU Units functioning in Udayagiri, Kavali, RSP.Hospital, Nellore. Buildings were constructed and staff were not allotted.
13. The Govt. have proposed to construct a National Level Laboratory at District T.B. Hospital, Nellore, Budget is also allotted for construction. But the construction is yet to be started.
14. Providing of equipment to the Lab-Technicians: Half of the PHCs are not sufficiently equipped.

15. Providing of staff to the 100 bedded Hospital at DSR. Hqrs. Hospital and for 50 bedded Hospital at RSP Children Hospital, Nellore, both the buildings are under construction.
16. Installation of Fire-Extriguishers in all Medical & Health institutions.
17. Conversion of nearby PHCs of National High way No.5 as 24 hours PHCs and Mini-Trauma Care Centres.
18. A tune of Rs.78.00 lakhs have been released under FRU for construction of building. But the process was yet to be started.
19. Release of Budget under Urban slum project for drugs at present is not sufficient and may be enhanced.
20. Establishment of Free NRCs at Divisional level i.e., at Kavali, Nellore and Gudur Area Hospitals is still pending.
21. Plan for Providing of Free vegetables and Nutritional food grains to the Free NRCs by cultivation in Govt. land.
22. Construction of Sub-Centre Buildings: Out of 477 Sub-Centres, 126 Sub-centres are having buildings, and the remaining are required sanctioning for construction.

**BRIEF NOTE ON G.E, CHOLERA, DIARRHOEA/ FOOD POISONING CASES IN
SPSR NELLORE DISTRICT**

SPSR Nellore District consists of 46 Mandals with 74 Primary Health Centres and 3 Municipalities and 1 Municipal Corporation catering the Medical and Health needs of the Rural and Urban Population. The present position from January, 2011 to till date, as follows.

ABSTRACT

1.	No.of G.E / Cholera cases affected Mandals	Nil
2.	No.of G.E / Cholera cases affected Villages	Nil
3.	No.of G.E / Cholera cases	Nil
4.	No.of G.E / Cholera Deaths	Nil
5.	No.of Diarrhoea cases affected Mandals (Mandals:- Venkaatgiri, D.V.Satram, Pellakur and Allipuram)	04
6.	No.of Diarrhoea cases affected Villages (PHCs:- G.K.Palli, D.V.Satram, Pellakur and Allipuram)	04
7.	No.of Diarrhoea Cases	135
8.	No.of Food Poisoning Cases affected Mandals (Mandals:- Sydapuram, Chillakur ,Sangam, Buchi and Ozili)	05
9.	No.of of Food Poisoning cases affected Villages (PHCs:- Sydapuram, Griddalur, Varagali, Sangam, Rebala and Punnepalli)	06
10.	No.of of Food Poisoning Cases	246
11.	No.of Diarrhoea Deaths (D.V.Satram and G.K.Palli)	2
12.	No.of Wells Chlorinated	3124
13.	No.of Water Samples collected for analysis	25
14.	No.of Chlorine Tablets distributed	131509
15.	No.of O.R.S Packets distributed	118300
16.	Sunstroke Cumulative Death cases	6
17.	Dog bite death cases	4

ACTION TAKEN AT PHCs LEVEL:

- The Medical Officer of the concerned PHCs rushed to the affected villages and the patients affected with food poisoning were treated immediately and saved lives without causing any casualties.
- The concerned Medical Officers conducted Medical camps till the situation has come under control.
- The villagers were informed not to eat the stored food, spoiled Non – Vegetarian foods and not to buy spoiled meat, Fish or other Sea foods, etc.
- Over head Tanks were chlorinated and chlorine tablets distributed to all houses.
- Health Education given to the villagers regarding Personal Hygiene and sanitary conditions and about prevention of Communicable diseases.

General Instructions to the Medical Officers and Para Medical Staff

- All the Medical Officers of PHCs in the District are alerted for immediate attention of Epidemic at their PHC areas.
- The Para Medical staff are instructed for regular supervision on chlorination of Over Head Tanks and maintenance of village sanitation.
- Health Supervisors should inspect for any drinking water pipe leakages and inform to the concerned Medical Officer and inturn to the RWS authorities for immediate rectification.
- The Medical officers should instructed to the Pharmacists to indent all

Sl.No	Diseases	Cases	Deaths
1	Malaria	132	0
2	Dengue Fevers	4	1
3	Chikungunya	0	0
4	Japanese Encephalitis(J.E,)	0	0
5	Filaria	375	0
6	Swine Flu	0	0
7	Diarrhoea – Out Break Cases	135	2
8	Food Poisoning cases	246	0
9	Diarrhoea – sporadic cases	24173	0
10	Typhoid Fevers(Enteric Fevers)	2016	0
11	Fevers of unknown origin(PUO)	47856	0
12	Viral Hepatitis (Jaundice)	147	0
13	Hanta Virus	3	2

Epidemic Drugs In advance.

NATIONAL RURAL HEALTH MISSION



OBJECTIVES

1. Reduction of Infant mortality rate, Maternal Mortality rate, and Total Fertility rate.
2. Access integrated comprehensive primary Health care.
3. Prevention and control of communicable diseases, including locally endemic diseases.
4. Achieve population stabilization, gender and demography balance.
5. Revitalize local health traditions and mainstreaming AYUSH
6. Promotion of Healthy Life styles.

GOALS

1. Facilitate increased access and utilization of quality health services by all.
2. Set up a platform for involving the Panchayat Raj institutions and community in the management of Primary Health care and infrastructure.

EXPECTED OUTCOME FROM THE MISSION (SPSR Nellore district)

Description	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12
IMR Per 1000 live births	47.80	43.00	38.50	34.00	29.50	25.00
MMR Per 100000 live births	181	160	140	120	100	80
TFR Children for women	1.80	1.70	1.60	1.58	1.56	1.50

Total No ASHA In Position: 2291

Financial Status in main Interventions of NRHM during 2011-12

Intervention	Opening Balance as 01-04-2011 at Dist Health Society	Opening Balance at PHCs/Institutions	Releases from CFW	Releases to PHCs/Institutions	Expenditure as per SOE 28-11-2011	Balance at Dist. Health Society	Balance available in PHCs /institutions
ASHA Incentives	57,86,075	9,53,813	1,20,43,400	1,04,91,450	87,37,454	73,38,025	27,07,809
JSY	(-) 10,83,482	14,41,501	49,27,200	24,85,016	10,65,466	13,96,107	22,64,19
24x7 MCH	5,00,491	5,13,379	36,93,353	31,59,675	20,54,262	10,34,169	16,18,792
Village Health Sanitation committees	1351	49,21,210	1,06,17,000	--	27,82,310	1,06,18,351	21,38,900
Sub Center United Funds	45,800	25,25,552	5,09,000	--	13,48,029	5,54,800	11,77,523
Hospital Development Society (RKS)	1,40,80,962	14,67,794	29,98,038	1,41,05,203	51,24,076	29,73,797	79,92,141

Other issues of NRHM

- Staff of 104 services (FDHS) are on strike
- 108 services POL amount Budget not received from the Government
- Coordinator of 108 requested to DM&HO for supply of POL by the filling stations

FORT NIGHT / MONTHLY PROGRESS REPORT ON FAMILY WELFARE AND CSSM PROGRAMMES

DISTRICT: SPSR Nellore		MONTH :Nov.2011		Year: 2011-12	
Sl.No.	Physical performance indicators / Vital events	Total District Performance		Tribal Area Performance	
		Progress during the Month	Progress Up to the Month	Progress during the Month	Progress Up to the Month
1	2	3	4	5	6
1	Maternal Health				
a)	No. of ANCs Registered	4581	37253		
b)	No. of High risk ANCs (Identified)	197	1545		
c)	No. of ANCs received 4 check-ups	4050	32945		
2	Institutional Deliveries				
A	Govt. Institutions				
	a) PHCs	164	1140		
	b) CHCs	146	1079		
	c) Area Hospitals	164	1055		
	d) Dist. Hospitals	445	3168		
	e) Other Govt. Institutions	0	0		
	Sub Total (a to e)	919	6438		
B	Private Institutions	3049	25859		
C	Domestic Deliveries conducted by				
	a) MPHA(F) / MPHS(F)	104	649		
	b) Trained Birth Attendent		0		
	c) Untrained Birth Attendent	50	385		
	Sub Total (a to c)	154	1034		
	Grand Total (A+B+C)	4122	33331		
3	No. of Deliveries conducted in 24hrs MCH Centers	154	1005		
4	Postnatal checkups (3 checkups)				
	a) Postnatal Checkups with in 48 hours	2947	33597		
	b) Postnatal Checkups between 48 hours and 14 days	3765	34241		
5	Immunisation				
A	Pregnant Women				
a)	TT (2nd dose + Booster)	4356	35606		
b)	IFA beneficiaries	3419	32499		
B	Infants				
a)	BCG	4088	32360		
b)	OPV Birth dose (0 dose)	3475	29722		
c)	Polio (3rd dose)	3969	31929		
d)	DPT (3rd dose)	3969	31929		
e)	Hep-B Birth dose (0 dose)	3475	29722		

f)	Hep-B (3rd dose)	3969	31929		
g)	Measles	3790	31273		
h)	Full Immunisation (Infants)	3790	31273		
i)	Vitamin-A (1st dose)	0	22093		
j)	Vitamin-A (Total of 2nd to 9th dose)	0	19997		
k)	DT (5 years)	5598	34242		
l)	TT (10 Years)	5421	33978		
m)	TT (16 Years)	4384	33787		
6	Family Planning Beneficiaries				
A	Vasectomy	5	67		
	a) Conventional	2	23		
	b) NSV	3	44		
B	Tubectomy	1834	12052		
	a) Traditional	1834	12052		
	b) D.P.L.	0	0		
	Total : (Vas+Tub)	1839	12107		
C	IUD (Cu T) Insertions	1295	9982		
D	Nirodh Pieces				
a)	Total Nirodh pieces distributed	71114	949454		
b)	Nirodh pieces Distributed to Vasectomised Persons	60	804		
c)	Regular Nirodh Users	19764	19764		
E	Oral Pills Cycles				
a)	Oral Pills Cycles distributed	8234	84682		
b)	Oral Pills Users	9771	9771		
F	No. of MTP Cases done	4	53		
7	Vital Events Recorded				
a)	No. of Births	4088	33102		
b)	No. of Still Births	34	234		
c)	No. of Infant Deaths	54	362		
d)	No. of Maternal Deaths	3	33		
8	J S Y				
a)	No. of JSY beneficiaries	171	1110		
b)	JSY Budget Released	-	2468200		
c)	JSY Expenditure	118100	740500		

**National Vector Borne Diseases Control Programme
(NVBDCP)
Progress Report of SPSR Nellore District for the year 2011
(Up to NOVEMBER , 2011)**

S.NO	Name of the Disease	No of Cases	No.of Deaths	No.of Suspected Cases	No of Suspected Deaths
1	MALARIA	134 (PV-109+Pf-25)	0		
2	FILARIA	12	0		
3	DENGUE	4	1	95	0
4	CHEKUN GUNYA	0	0	0	0
5	J.E	0	0	0	0
6	KALAZAAR	0	0	0	

MALARIA ACTION PLAN :-

- 1 .Based on the past incidence, the problematic PHCs sub centers and village are identified .Vector control measures are taken effectively and regularly
- 2 .General Spraying should be taken above 5 API villages in the district
3. Focal Spraying should be taken 2 to 5 API villages in the district
4. Anti adult and Anti larval operations will be taken in Dengue cases prevailed villages in the district
5. ASHAs,AWWs,should involve in surveillance of Vector Borne Diseases
6. Health Education Should be given to local leaders at village level especially on Environ mental Sanitation **All Health Personnel should educate the public especially about the Dengue Larvae**
7. All Line Departments should be involved
8. IEC activities should be taken at village level on Vector borne Diseases
9. All stocks and Requirements should Procured for the year 2011
10. During raining season, Gambusia fish will be released in water stagnant areas to control Mosquito breeding.

BRIEF NOTE ON HIV/AIDS, SPSR NELLORE

District HIV/AIDS Prevention and Control Unit is closely working with all Line Departments. No. of ToT trainings and awareness programs were conducted for other departments staff –

- Under main streaming concept trainings for ANMs on Whole Blood Test was provided to initiate HIV testings in all 74 PHCs, especially to ANCs. 151 ANMs were trained on HIV/AIDS Counseling and Screening during May and June months of 2011 in 6 batches. 600 ANMs are giving trainings at Cluster level are going on.
- 32 Lab Technicians were provided training on HIV Screening in the month of June 2011 for 2 days
- Linkages of PLHAs (People Living with HIV/AIDS) to various government schemes like AAY cards, Bus pass, Double Nutrition, Pensions by coordinating with other departments like DRDA, APSRTC, ICDS, Civil Supply etc.
- DAPCU is conducting Mass Campaigning on special occasions like Candle Light Memorial Day, National Blood Donation Day.
- 1527 PLHA details were submitted to Civil Supply Dept. for sanctioning AAY cards, out of it 1010 PLHAs were sanctioned the AAY in first phase
- 1000 bus passes were given to eligible PLHAs.
- 1657 applications were submitted to DRDA for sanctioning of ART Pensions
- Candle Light Memorial Day was observed on 3rd Sunday of May
- HIV/AIDS awareness program was conducted at SHAR centre at Sri Harikota on 6th of May'11
- Formation of Red Ribbon Clubs in 248 Junior, Degree and Professional Colleges in the district
- Conducted National voluntary Blood Donors Day on 1-10-2011 and World AIDS Day on 1-12-2011 with the involvement of general population and line departments
- Conducted Police Sensitization Program for new police trainees at Chemidugunta in the month of Nov'11
- 1 phase Folk Media Campaign was conducted during July'11 and II phase is going on in the district
- 28 LTs from 104 services were undergone HIV testing training

**Cummulative Report of HIV/AIDS, SPSR Nellore.
November -2011**

S.No.	Indicator	During the Nov	Cummulative April-11 to Nov11
	Total No.of HIV Tests	9563	63585
	Total found positive	142	1401
	% Positive cases	1.48	2.20
NON-ANC Testings			
	<i>Tested (Non-ANC)</i>	5526	35290
	<i>Positive (Non-ANC)</i>	135	1331
	% of Positive cases	2.44	3.77
ANC Testings			
	<i>Tested (ANC)</i>	4037	28295
	<i>Positive (ANC)</i>	7	70
	% of Positive cases	0.17	0.25
	Positive Deliveries	4	78
	MB Pairs given NVP	4	69
ART Cases			
	ART Cases Registered	117	8910
	On ART Cases	143	5102
LFUs(Loss of Follow Up)		622	

Brief Notes on javahar Bala Arogya Raksha Screening Campaign
S.P.S.R Nellore District

The Government of Andhra Pradesh Launched Javahar Bala Arogya Raksha, the School Health Programme was launched on 14.11.2010 and Screening on School going children at commenced in the District from 18-01-.2011.

Objectives of the JBAR:

1. Early detection and care of students with health problems
2. Development of health attitude and behavior among the students
3. Ensure a health environment for children at school
4. Prevention of communicable diseases
5. Increased learning capabilities because of good health and nutrition

School Health Programme to improve retention etc.,:

Concerned Head of the Departments / Officers shall take immediate action to prescribe a nutritious menu depending on locally available food like Grains, Pulses, Cereals, Vegetables, Fruits and local food habits etc., in consultation with nutrition experts. The menu increasing intake of rice with Cereals including Jowar, Ragi to extent possible. Mushrooms should be encouraged

Sanitation Hygiene

1. Defunct Toilets should be repaired on regular basis
2. Mechanism should be created and regular maintenance of school toilet facilities
3. Teachers to monitor proper cleaning of toilets and maintenance of hygiene
4. Hygiene education should be imparted for all children
5. Ensure usage of dustbins

District Medical and Health officer.

1. Necessary guidelines issued to all the Medical officer, SHPO in the district to extend their cooperation in conducting the screening camps at schools and motivate the children to participate in the screening campaign.

2. Conducted a meeting with RVM .PO, M.E.O. & Medical Officer on implementation of School Health Programme 19-02.2011 at Golden jublihal Nellore at the Chairmanship of District COLLECTOR AND MAGISDATE..

3. Involve all the M.Os, Paramedical staff, ASHA's, A.W.W's to participate in the School Health Campaign and directions may be issued to participate in all school Health Programme besides attending their regular duties.

ABSTRACT:

In our district **138** Medical teams are appointed for conduct J.B.A.R. School Health Screening camps for children. From January **18-1-2011 to 29-11-2011**. totally: **3092** Schools were screened by **138** teams and **TOTAL 187098** children were screened. Referred **2162** children to CHNCs and DSR. Hospital for better treatment.

No. of Clusters	: 17
No. of Primary Health Centres	: 74
No. of Sub-Centres	: 477
No. of Gramapanchayaths	: 961
No. of Primary Schools	: 2849
No. of Upper Primary Schools	: 517
No. of High Schools (including Ashram Residencial)	:391
Total Schools	: 3757
Total No. of Children (Age Group 5-15)	:285580
Screening Campaign	: 18.01.11 to 29-11-2011
No. of Doctors Deployed	: 138
No. of Paramedical Staff Deployed	: 1324
No. of Schools covered as on 29-11-2011	: 3092
NO. of Children Screened	:187098
No. of Children Referred to Specialist as on 29-11-2011	: 2162
Percentage of Schools covered	: 82 %
Percentage of children covered	: 65.5 %
Total no of children treated mionerailment	: 39567

Public Health System Strengthening – Revitalisation of Primary Health System conversion of Dispensaries, Civil Hospitals, Subsidiary Health System conversion of Primary Health Centres for creation of rational Primary Health Structure in Rural Areas of Sri PSR. Nellore District :

It is submitted in terms of G.O.Ms.No.92 HM&FW., Dept. dated 23.04.2010 & G.O.Ms.No.209 HM&FW., Dept. dated 18.08.210 the Revitalisation of the Primary Health System was implemented in Sri PSR. Nellore District from January, 2011. But the process of revitalization yet to be finalized due to non-receipt further orders from the Government.

Further it is submitted that some of the institutions like PHCs converted as CHCs having some problems in redeployment of staff, allotment of area, drawal of salaries to the staff allotted to newly created CHCs. The district administration is also facing difficulty in delegation of powers to DDOs of newly converted CHCs.

In view of the above early orders is required from Government to complete the process of Rationalization of Rural Health System.

PARTICULARS OF PC&PNDT ACT

Total No. of Hospitals in the Distinct	..	408
Register Hospitals	..	205
Pending Hospitals	..	43

		248
Remaining Hospitals	..	160

Total		408
