

Data Collection for Health Services Costing in India

Data collection tool: Community Health Centre

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India



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This document is part of a series that provides a standardised methodology for costing health services in India. The series describes the methodology used in the costing and also provides a manual and set of data collection tools for use in applying this methodology. The methodology follows standard costing principles.



			Cost	t data collec	tion tool: Co	ommunity E	Iealth Cent	re		
Interview Date: State Name: District Name: Facility Name:										
Se	ction 1 Genera	l Information:	Interview with	the head of the f	acility or person	n In-charge				
B. C.	Please tell me If the facility i Average lengt	how many hour remains closed of h of stay of IPD	rs per day this fa on Public holida patients of the	Facility is closed acility is open?: ays then mention facility:	total public hol	_ (Hours per da lidays in last yea	y)	_(Days in year)		
					-					



Section 2: Human resource-Salary and fringe benefits details (Details for each person separately using codes given below)

Staff No. Code*	Designation	Speciality	Services (OPD=1, IPD=2, Out- reach=3,OPD+IPD=4, All= 5, OPD+OR=6, IPD+ OR=7)	Monthly gross salary (inclusive of all allowances or deductions)	Annual Incentive received for trainings (TA/DA received for trainings)	Period/days of posting in the year 2017-18\$	Days of absence from this health facility in the period of posting in the year 2017- 18 ^{\$\$}
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*Medical Superintendent = 1, General Surgeon=2, Physician=3, Obstetrician &Gynaecologist=4, Paediatrician=5, Anaesthetist=6, Public health specialist=7, Eye surgeon=8, Dental Surgeon=9, General Duty Medical Officer=10, Medical Officer –AYUSH=11, Staff Nurse=12, Pharmacist=13, Pharmacist – AYUSH=14, Lab. Technician=15, Radiographer=16, Dietician=17, Ophthalmic Assistant=18, Dental Assistant=19, Cold Chain & Vaccine=20, Logistic Assistant=21, OT Technician=22, Multi Rehabilitation/ Community Based Rehabilitation worker=23, Counsellor=24, Registration Clerk=25, Statistical Assistant/ Data Entry Operator=26, Account Assistant=27, Administrative Assistant =28, Dresser= 29, Ward Boys/Nursing Orderly=30, Driver=31, Public Health Specialist=32, Public Health Nurse=33, ANM=34



^{**}For more than one person of a particular category, use alphabetic prefixes. For e.g. if there are 2 medical officers use code 10a and 10b.

[®]Add extra rows, if more personnel

^{\$}Include any person posted during 2017-18, but now transferred/not posted and include any person not posted at this facility during 2017-18, but providing services in PHC for few days or week/ month/ year.

^{\$\$}Leave of any nature, training days, etc.

Staff No. Code	Designation	Speciality	Services (OPD=1, IPD=2, Out- reach=3,OPD+IPD=4, All= 5, OPD+OR=6, IPD+ OR=7)	Monthly gross salary (inclusive of all allowances or deductions)	Annual Incentive received for trainings (TA/DA received for trainings)	Period/days of posting in the year 2017-18	Days of absence from this health facility in the period of posting in the year 2017- 18



Staff No. Code	Designation	Speciality	Services (OPD=1, IPD=2, Out- reach=3,OPD+IPD=4, All= 5, OPD+OR=6, IPD+ OR=7)	Monthly gross salary (inclusive of all allowances or deductions)	Annual Incentive received for trainings (TA/DA received for trainings)	Period/days of posting in the year 2017-18	Days of absence from this health facility in the period of posting in the year 2017- 18



Section 3: Details of annual allowances received (Interviews and record review)

Staff No. Code	Go	vernment residen	ce	Transp	ort facility	Uni	form provided	led/ allowance	
	Square feet of the house building or rooms provided i.e. covered area (Do mention the unit of data collection	Square feet of the open area in the accommodation provided (Do mention the unit of data collection)	Amount paid in a year or How much would you pay if you would rent this house i.e. monthly rental price*12?	Amount paid in a year	Vehicle name and year of make, if provided free	Times per year (a)	Unit cost of uniform (b)	Amount incurred on uniform (a*b) or If unit cost not available ask, "For how much it will be available from market, if bought on its own?"	Any other allowance OR Special allowance



Section 4: Annual services delivered* (Record based) (If data is collected for less than 1 year than mention the period)* Facility reports to be reviewed and not areas reports.

S. No.	Services delivered	Actual services delivered during 2017-18
1	Ante natal care (number of visits)	
2	Institutional deliveries (number of women)	
2	Post-natal care (Number of PNC within 48 hrs at the facility)	
3	Post-natal care (Number of PNC visit by ANM at outreach level)	
4	New-borne care corner (number of new born)	
<i>r</i>	Immunisation (Total number of new children registered for immunization in year 2017-18 Total under the facility)	
5	Immunisation (Total number of new children registered for immunization in year 2017-18 at outreach level)	
6	Total number of old registered children forwarded for immunization in 2017-18.	
7	Routine OPD over 5 years age (number of patients) (Considering all specialities)	
8	Routine OPD under 5 years age (number of patients)	
9	Family Planning: Tubectomy procedure (number of women)	
10	Family Planning: IUCD procedure (number of women)	
11	Special day care services (number of patients) (Primary management wounds, Primary management fracture, Primary management abscess drainage, Primary management burns)	



12	(patientSurMebitecon	(number of patients admitted in the facility for at least 24 hrs) ts admitted in Inpatient ward) gical (Fractures, hernia or traumatic injury) dical (Malaria, Dengue, Typhoid, simple fever, dog and snake s, poisonings, burn, pneumonia, dehydration, respiratory ditions, etc.) diatrics
	IPD	Eye Others
		Total (if not segregated)
13	AYUSH ser	rvices (number of patients)
14	Dental serv	ices (number of patients)
15	Operation t	neatre (number of surgeries treated / patients treated)
16	DOTS prov	ision (number of patients)
15	Number of	school health program / RBSK (Number of camps)
17	Number of	school children screened under RBSK
18	Adolescent	health program (ARSH) (number of camps)
10	Number of	adolescent screened under ARSH program
19	Number of	family planning camps



	Number of patient treated/sterilized in family planning camps	
20	Ambulatory services (number of patients)	
21	Emergency services (number of patients)	
22	Food service /dietician (number of diets served)	
23	Laundry (number of items washed)	
24	Indoor Residual spray (number of household sprayed)	
25	Number of trainings conducted	
26	Number of village health & nutrition days	

Section 4b: Vaccine consumables

S. No.	Vaccine consumables	Number of doses	Number of vials consumed
1	BCG		
2	DPT I+II+III+ Booster		
3	Polio-O+ I+II+III+ Booster		
4	Hepatitis B I+II+III		
5	Pentavalent I+II+III		
5	Measles		
6	Vitamin A (Add the total doses)		
7	TT		
8	OPV booster		
9	Rotavirus vaccine		
10	JE dose 1		
11	Any other		



Section 5: Sources of Revenue

		Amount collected during the period of data collection
1.	Procedure fee (Medical dental combined)	
2.	Referral Charges	
3.	Medical certificate for driving license	
4.	Birth –death registration	
5.	Record checking for Birth –death	
6.	Issuing the card Birth –death	
7.	Any other (specify)	
	Total user fee from 2017-18	

Section 6: Population covered under facility

Total population under the Public Health Centre	Total= Male= Children (under 5 years)=	Female= Children (5-10 years)=
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Section 7 and 8: Details of the Physical infrastructure

Table 7a: Particulars	Specify
Area of the building (Total area in Sq. ft.) (Covered space)	
Area of the building (Total area in Sq. ft.) (Open space)	
What is the rental price of 100 sq ft place where this centre is located?	
Was there any expense on renovation or construction of accessory items during the period 2017-18	



Section 8: Services delivered in different rooms in facility

*Instruction: If the activity is a routine activity, then fill the code 11 (for routine activity)in column b(as shown in the frequency codes below) and hours per day in column (c). Similarly, if the given activity is a fixed activity (fill the respective code in column B, as per codes mentioned) and write the total hours in column 'c' for which the activity was done.

Frequency: *'1' for once a year participation, '2' for twice a year, 3 for thrice a year participation, 4 for quarterly participation, 5 for once every two months, 6 for monthly participation, 7 for fortnightly participation, 8 for weekly participation, 9 for twice a week participation, 10 for thrice a week participation, 11 for routine activity.

Room			Room			Room			Room			Room			Room		
Name			Name			Name			Name			Name			Name		
Area (Sq. 1	feet)		Area (Sq. f	eet)		Area (Sq. 1	feet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)	
Activity name (a)	Freq*	Hours (c)	Activity name (a)	Freq*	Hours (c)	Activity name (a)	Freq * (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq*	Hour s (c)	Activity name (a)	Freq* (b)	Hours (c)

Room Name			Room Name_			Room Name_			Room Name			Room Name_			Room Name_		
Area (Sq. 1	feet)		Activity Freq Hours		Area (Sq. 1	feet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)		
Activity	Freq*	Hours				Activity	Freq	Hours	Activity	Freq	Hour	Activity	Freq	Hour	Activity	Freq	Hours
name (a)	(b)	(c)	name (a)	* (b)	(c)	name (a)	* (b)	(c)	name (a)	* (b)	s (c)	name (a)	* (b)	s (c)	name (a)	* (b)	(c)
																	<u> </u>
																	
																-	



Room			Room			Room			Room			Room			Room		
Name			Name			Name			Name			Name			Name		
Area (Sq. f	feet)		Area (Sq. f	eet)		Area (Sq. f	eet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)	
Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq * (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq* (b)	Hour s (c)	Activity name (a)	Freq* (b)	Hours (c)

Room			Room			Room			Room			Room			Room		
Name			Name			Name			Name			Name			Name		
Area (Sq. f	eet)		Area (Sq. f	eet)		Area (Sq. f	eet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)	
Activity name (a)	Freq*	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq * (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq* (b)	Hour s (c)	Activity name (a)	Freq* (b)	Hours (c)



Room			Room			Room			Room			Room			Room		
Name			Name			Name			Name			Name			Name		
Area (Sq. f	feet)		Area (Sq. f	eet)		Area (Sq. f	eet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)	
Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq * (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq* (b)	Hour s (c)	Activity name (a)	Freq* (b)	Hours (c)

Room			Room			Room			Room			Room			Room		
Name			Name			Name			Name			Name			Name		
Area (Sq. f	eet)		Area (Sq. f	eet)		Area (Sq. f	eet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)	
Activity name (a)	Freq*	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq * (b)	Hours (c)	Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	Freq* (b)	Hour s (c)	Activity name (a)	Freq* (b)	Hours (c)



Corridor	 	Corridor _	 	Corridor		Corridor _	
Area (Sq. feet)	 	Area (Sq. feet) _		Area (Sq. feet)		Area (Sq. feet)	
Corridor		Corridor _		Corridor	 	Corridor	
Area (Sq. feet)	 	Area (Sq. feet) _		Area (Sq. feet)		Area (Sq. feet)	

Corridor	Corridor	Corridor		Corridor	
Area (Sq. feet)	Area (Sq. feet)	Area (Sq. fee	t)	Area (Sq. feet)	
Corridor	Corridor	Corridor		Corridor	
Area (Sq. feet)	Area (Sq. feet)	Area (Sq. fee	t)	Area (Sq. feet)	



Section 9: Details about non-medical items (Observation` and record review) (Do ask for any items that are there in stock register and are stored due to non utilisation or non-functionality)

Name of the							Qu	antity of	functio	ning ite	ms in ea	ch roon	1				
equipment or	Room	Room	Room	Room	Room	Room	Room	Room	Room	Room no. 17							
furniture	no. 1	no. 2	no. 3	no. 4	no. 5	no. 6	no. 7	no. 8	no. 9	no. 10	no. 11	no. 12	no. 13	no. 14	no. 15	no. 16	Room no. 17
Almirah (Big																	
steel)																	
Almirah (Small																	
steel)																	
Almirahs (Small																	
wooden)																	
Armless chairs																	
Bed side																	
attendant chair																	
Bed side locker																	
Bed side Screen																	
Bed side table																	
Buckets																	
Centrifuge																	
CFL tubes																	
Bulbs																	
Clock /watch																	
Coat rack																	
Curtain rods																	
Curtains																	
Cylinder																	
Delivery table																	
Dressing trolley																	
Drum with tap																	
for storing water																	
Examination bed																	
or table																	



	1	1	1	1	ı	1	1		1			ı	
Fans													
Foot step													
Hand washing													
basin													
Height													
measuring stand													
Inpatient iron													
bed													
Kerosene stove													
Labour table													
Large medicine													
cupboard													
Large steel													
benches													
Large wooden													
benches													
Mattress													
Medicine chest													
Medicine trolley													
Metal chair													
Metal file													
cabinet													
Microscope													
Mugs													
Operation Lamp													
Plastic bin													
Refrigerator													
Rubber / plastic													
shutting								 			 		
Sauce pan with								 			 		
lid								 			 		
Side Wall											 		
mounted fan													



G. 1				ı		ı	ı			
Side wooden										
racks										
Sink										
Stool (steel)										
Stool (wooden)										
stove 2 burner										
Stretcher										
Swab rack										
Telephone										
Three seater										
steel chairs										
					_				 	



Name of						Q	uantity of	functionin	g items i	n each ro	om						
the																	
equipment	Room	Room	Room	Room	Room	Room	Room	Room	Room	Room	Room						
or	no. 18	no. 19	no. 20	no. 21	no. 22	no. 23	no. 24	no. 25	no. 26	no. 27	no. 28	no. 29	no. 30	no. 31	no. 32	no. 33	no. 34
furniture																	
Almirah																	
(Big steel)																	
Almirah																	
(Small steel)																	
Almirahs																	
(Small																	
wooden)																	
Armless																	
chairs																	
Bed side																	
attendant																	
chair																	
Bed side																	
locker																	
Bed side																	
Screen																	
Bed side																	
table																	
Buckets																	
Centrifuge																	
CFL tubes																	
Bulbs																	
Clock																	
/watch																	
Coat rack																	
Curtain rods																	
Curtains																	
Cylinder																	



Dolivour									
Delivery									
table									
Dressing									
trolley									
Drum with									
tap for									
storing									
water									
Examination									
bed or table									
Fans									
Foot step									
Hand									
washing									
washing basin									
Height									
measuring									
stand									
Inpatient									
iron bed									
Kerosene									
stove									
Labour table									
Large									
medicine									
cupboard									
Large steel									
benches									
Large									
wooden									
benches									
Mattress									
Medicine									
Medicine									<u> </u>



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chest											
Medicine											
trolley											
Metal chair											
Metal file											
cabinet											
Microscope											
Mugs											
Operation											
Lamp											
Plastic bin											
Refrigerator											
Rubber /											
plastic											
shutting											
Sauce pan											
with lid											
Side Wall											
mounted fan											
Side											
wooden											
racks											
Sink											
Stool (steel)											
Stool											
(wooden)											
stove 2											
burner											
Stretcher											
Swab rack											
Telephone											
Three seater											
steel chairs											
bicci citatis			l								



Name of	Quantity of functioning items in each room													
the														
equipment	Room	Room	Corridor	Corridor			Corridor	Corridor						
or	no. 35	no. 36	1	2	3	4	5	6	7	8				
furniture														
Almirah														
(Big steel)														
Almirah														
(Small steel)														
Almirahs														
(Small														
wooden)														
Armless														
chairs														
Bed side														
attendant														
chair														
Bed side														
locker														
Bed side														
Screen														
Bed side														
table														
Buckets														
Centrifuge														
CFL tubes														
Bulbs														
Clock														
/watch														
Coat rack														
Curtain rods														
Curtains														



		T	1	1	Ι	I		1	1	1		
Cylinder												1
Delivery												İ
table												
Dressing												1
trolley												
Drum with												İ
tap for												İ
storing												1
water												<u> </u>
Examination												1
bed or table												ļ
Fans												ļ!
Foot step												ļ
Hand												
washing												1
basin												<u> </u>
Height												İ
measuring												1
stand												
Inpatient												İ
iron bed												
Kerosene stove												1
Labour table												
Large												
medicine												İ
cupboard												İ
Large steel												
benches												ĺ
Large												
wooden												İ
benches												l
Continue	1		1					l .		l .		



Mattress		Ī							
Medicine									
chest									
Medicine									
trolley									
Metal chair									
Metal file									
cabinet									
Microscope									
Mugs									
Operation									
Lamp									
Plastic bin									
Refrigerator									
Rubber /									
plastic									
shutting									
Sauce pan with lid									
with lid									
Side Wall									
mounted fan									
Side									
wooden									
racks									
Sink									
Stool (steel)									
Stool									
(wooden)									
stove 2									
burner									
Stretcher									
Swab rack									
Telephone									



Three seater steel chairs									

Section 10: Details of Equipment (Observation cum record review of stock registers) (Equipment procured in year 2018 should not be captured, but condemn equipment in year 2018 should be captured)

Room No.	Equipment	Quantity	Price	Date of Purchase of Equipment	Expected life of the equipment	List services for which it is used. Write serial number codes from Annexure 1
Labour Room	Normal Delivery Kit					
	Equipment for assisted vacuum delivery					
	Equipment for assisted forceps delivery					
	Standard Surgical Set I					
	Standard Surgical Set II					
	Standard Surgical Set III					
	Standard Surgical Set IV					
	Standard Surgical Set V					
	Standard Surgical Set VI					
	Equipment for Manual Vacuum Aspiration					
	IUCD insertion kit.					
	Refrigerator					



Vaccination Room ILR (Small) and DF (Small) with Voltage Stabilizer Cold Boxes (Small & Large): Smallone Vaccine Carriers with 4 Icepacks: Two per SC (maximum 2 per polio booth) + 1 for	
Room Voltage Stabilizer Cold Boxes (Small & Large): Smallone Vaccine Carriers with 4 Icepacks: Two per SC (maximum 2 per polio booth) + 1 for	
Cold Boxes (Small & Large): Smallone Vaccine Carriers with 4 Icepacks: Two per SC (maximum 2 per polio booth) + 1 for	
one Vaccine Carriers with 4 Icepacks: Two per SC (maximum 2 per polio booth) + 1 for	
Vaccine Carriers with 4 Icepacks: Two per SC (maximum 2 per polio booth) + 1 for	
Two per SC (maximum 2 per polio booth) + 1 for	
(maximum 2 per polio booth) + 1 for	
PHC.	
Spare ice pack box: 8, 25 & 60 ice	
pack boxes per	
vaccine carrier, Small cold box &	
Large cold box	
Freeze Tag: 2 per ILR bimonthly	
Thermometres	
Ice box.	
Kidney tray	
Bowl	
Cheatle's forceps	
Proper light source/torch	
MCH	
Room	



IPD wards	Equipment for Anaesthesia (Essential)			
	Airway Guedel or Berman, autoclavable rubber, set of 6			
	Bag, breathing, self inflating, antistatic rubber, set of 4			
	Breathing tubes, hoses, connectors for item 1, anti-static			
	Catheter, endotracheal w/cuff, rubber set of 4			
	Catheter, urethral, stainless steel, set of 8			
	Connectors, catheter, straight/curved, 3, 4, 5 mm			
	Cuffs for endotracheal catheters, spare for item 4			
	Face mask, plastic w/rubber cushion &headstrap, set of 4			
	Forceps, catheter, Magill, adult and child sizes, set of 2			
	Intravenous set in box			
	Laryngoscope, set with infant, child, adolescent blades			
	Needle, spinal, stainless set of 4			
	Syringe, anesthetic, control 5 ml Luer mount glass			
	Valve, inhaler, chrome-plated brass, Y-shape			
	Vaporiser, ether or methoxyflurane,			



	wick type			
	Vaporiser, halothane, dial setting			
	Diathermy machine			
	Dressing drum			
	Dressing drum all sizes			
	Needle cutter			
	Adult weighing machine New born weighing machine			
	New born weighing machine			
OPD Rooms (Speciality Specific)				
Rooms				
(Speciality				
Specific)				



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Section 10b: Equipment in Operation Theatre

Equipment	Quantity	Price	Date of Purchase of Equipment	Expected life of the equipment	List services for which it is used. Write serial number codes from Annexure 1
Boyles apparatus					
EMO machine					
Cardiac machine					
Defibrillator for OT					
E Ventilator for OT					
Horizontal high pressure steriliser					
Vertical high pressure steriliser 2/3drum					
Shadow less lamp ceiling track mounted					
Fumigation apparatus					
Dusting machine e					
Oxygen cylinder					
Nitrous oxide cylinder					
Hydraulic operation table					
OT table					
Anaesthesia machine					
Pulse oxymeter					
Suction machine					
Others					



Section10c: Special equipment for new born care corner

Equipment	Quantity	Price	Date of Purchase of Equipment	Expected life of equipment	List services for which it is used. Write serial number codes from Annexure 1
Catheter, endotracheal, open tip, funnel end rubber, 12Fr					
Catheter, mucus, rubber, open ended tip, size 14FR					
Catheter, nasal, rubber, open tip, funnel end, size 8Fr					
Catheter, suction, rubber, size 8Fr					
Cells for item 6 (Laryngoscope)					
Dextrose ticks					
Infantometer: Measuring range 33-100 cm					
IV Cannulas (22 G and 24 G)					
IV infusion sets (adult and pediatrics)					
Lamp, ultra-violet (heat source) with floor stand					
Laryngoscope, infant, w/three blades and spare bulbs.					
Lateral mask, with ventillatory bag, infant size					
Nasal Prongs					
Nasogastric tube (8,10,12 FG)					
Nebulisers/MD					
Oropharyngeal airway (000-4 Guydel size					
Oxygen Cylinders					
Photo therapy Unit					
Plastic/disposable syringes including tuberculin					
Radiant warmers					
Resuscitator, automatic, basinet type					
Scalp vein set No. 22 and 24					
Stadiometer: Measuring range 60-200 cm					
Stilette, curved, for stiffening tracheal catheter SS					
Thermometers					
Suction machine					
Generator					
Monitors					
Oxygen concentrator					



Others			

Section 10d: Dental Equipments

Equipment	Quantity	Price	Date of Purchase of Equipment	Expected life of equipment	List services for which it is used. Write serial number codes from Annexure 1
Amalgam carrier					
Artery forceps					
Autoclave					
Bone cutter					
Cheatel forceps					
Dental chair					
Dapper glass					
Dressing drum (big)					
Endo box					
Electric BP apparatus					
Glass mortar					
Glass pestle					



Glass bead sterilizer		
Hammer chisel		
Kidney tray		
Matrix retainer (ivory)		
Light cure machine		
Mirror tops		
Mirror handles		
Plastic filling instruments		
Probe		
Tooth extraction forceps		
Tweezers		
Steel tray		
Operating light		
Halogen bulbs		
High and low vacuum motored suction		
Air rotor hand piece		
Micro motor 35000 rpm		
EMS scalar		
3 way syringe		
X ray viewer		
Compressor 3/4 HP with driver and filter		
Stool with pneumatic cylinder		
Surgical curette		
Sterilizer		
Dental X-ray tube head		
Dental X-ray turner with stand		
Development box		
Needle holder		



Electrical sterilizer			
Cotton drum			
Steel Almirah			
Needle destroyer			
Revolving doctor chair			
Visiting chair			
Glass slab			
Matrix bands (ivory)			
Light cure composite			
Mucus suction trap			
Thermometer			
Others			
			AL EDOCA



Section 10e: Laboratory Equipment

Equipment	Quantity	Price	Date of Purchase of Equipment	Expected life of equipment	List services for which it is used. Write serial number codes from Annexure 1	
Binocular microscope			1 1			
Monocular Microscope						
Laproscope						
Nebuliser						
Stadio-meter						
Coploscope						
Cryotherapy equipment						
Spirometer						
Non-invasive ventilator						
Dialysis machine						
Haemoglobinometer						
Semi-auto analyser						
Nebuliser						
NSV Kit						
Peak Expiratory Flow Rate (PEFR) Meter (Desirable)						
Others						



Section 10f: Radiological equipment

Equipment	Quantity	Price	Date of Purchase of Equipment	Expected life of equipment	List services for which it is used. Write serial number codes from Annexure 1
Aprons lead					
Dark room accessories					
Dark room timer					
Diagnostic X-ray Unit 20 C 7300 m A with automatic Device					
Film clips					
Illuminator					
Lamps shadow less: Ceiling lamp Portable type					
Lead sheets					
X-ay protection screen					
X-ray film processing tank					
X-ray view box					
Others					



Section 11: Details of drugs consumed in the facility (Consumption data to be taken and not the supply data) (Review the stock- register and list the quantity of drugs in drug list sheets provided at the end of tool by using the sheets to photocopy index of drugs register and write quantity and utility against each drug as given below

Name of drug	Quantity Consumed	Quantity Expired	Price Per Unit	List services for which it is used. Write serial number codes from Annexure 1
Iron And Folic Acid - Dried Ferrous Sulphate				
Eq. To Ferrous Iron And Folic Acid				
Methyledopa Anhydrous				
Nifedipine				
Labetalol				
Digoxin				
Mag Sulphate				
Folic Acid				
Ampicillin Trihydrate Eq. To Ampicillin				
Gentamycin Sulphate Eq. To Gentamycin				
Ampicillin Trihydrate Eq. To Ampicillin				
Anhydrous				
AmoxycillineTrihydrate Eq.To Amoxycilline				
Metronidazole				
Nitrofurantoin				
Doxycycline Hydrochloride				
Methylegometrine Maleate				
Misoprostole				
Dicycloamine				
Magnesium Sulphate Eq To Doxycycline				
Oxytocin				
Hyoscine Butyle Bromide				
Dextrose Eq. To Dextrose Anhydrous				
Lignocane Hydrochloride				
Metronidazole				
Gentamycin Sulphate				



Cefotaxime Sodium		
Coxacillin		
Sensorcrain		
Promethazene Hydrochloride		
Declofenac		
Paracetamol		
Ibubrufen		
Multivitamin		
Domperidone		
Anti D Immunoglobulin- Polyclonal Human		
Anti Rhd		
Adrenaline Tartrate		
Atropine Sulphate		
Dopamine Hydrochloride		
Bupivacane Hydrochloride		
Betamethasone Phosphate		
Halothane		
Thiopentone		
Veduronium Bromide		
Ketamine Hydrochloride		
Salbutamol Sulphate		
Frusemide		
Diazapam		
Dexomethasone Sodium Phosphate Eq To		
Dexomethasone Phosphate		
Etofyllin B Plus *, Anhydrous Theophylline**		
Combination		
Adrenaline Tartrate		
Amikacin		
Aminophyline		
Ampicillin Sodium Eq To Ampicillin		
Anhydrous		
Dopamine		



Phenobarbitone Sodium				
Phenytoin Sodium Bp				
STI/RTI kits				
Kit 1 – Grey				
Kit 2 – Green				
Kit 3 – white				
Kit 4 – Blue				
Kit 5 – Red				
Kit 6 – Yellow				
Drugs for TB				
Isoniazid				
Rifampicin				
Pyrazinamide				
Ethambutol				
Streptomycin				
Kanamycin				
Amikacin				
Drugs for NCD: Cardiovascular				
Glyceryl Trinitrate				
Isosorbide Dinitrate				
Atenolol				
Perindropil				
Methyldopa				
Propranolol Hydrochloride				
Labetolol Hydrochloride				
Metoprolol Tartrate				
Prazosin Hydrochloride				
Enalpril				
Telmisartan				
Amlodipine				
Simvastatin				
Nifedipine				
Digoxin				
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Drugs for NCD: Antidiabetics		
Glibenclamide		
Glicazide		
Insulin recombinant Neutral Human short		
acting		
Insulin recombinant Neutral Human long		
acting		
Metformin Hydrochloride		
Drugs for NCD: Diuretics		
Fursemide		
Hydrochlorothiazide		
Spironolactone		
Medroxyprogesterone Acetate		
Drugs for NCD: Respiratory		
Beclomethasone Dipropionate		
Budesonide		
Ipratropium Bromide		
Salbutamol		
Theophyline		
Diphenhydramine Hydrochloride +Ammonium		
Chloride		
Diphenhydramine Hydrochloride		
AmoniumBicarb,Tinc		
Bromhexine Hydrochloride		
Aminophyline		
Oral Pills		
Others		





Section 12: Details of Consumables. Material and Supplies consumed in the facility

Consumables	Quantity	Price Per Unit	List services for which it is used. Write serial number codes from Annexure 1
Bandages 4 meters* 5cm			
Bandages 5 meters*10cm			
Bandages 5 meters*15cm			
Biowaste polythene			
Blade 11 no.			
Cotton wool absorbent surgical 500g packet			
Crape bandage BP 3 mtr x 10cm			
Crape bandage BP 3 mtr x 15cm			
Crape bandage BP 3 mtr x 7.5cm			
Disinfectant fluids (Phenly-Ltr)			
Disposable surgical rubber gloves 6.5			
Gauge cloth 90cm*18 mtr			
Infusion set vented with needle for single use (IV set)			
IV Cannula 20 No.			
IV cannula 24 no.			
Mouth wash			
Mucus suction trap			
Spirit			
Surgical tape 25mm*9.1 meter			
Surgical tape 50mm*9.1 meter			
Surgical tape 75mm*9.1 meter			
Sulphuric acid			
Phenol/hypochlorite			
Immersion oil			



Methylene blue		
Methylated spirit		
Menadione Usp (Vit K3)		
Sodium Lactate (Ringers Lactate)		
Sodium Chloride		
Potassium Chloride		
Sodium Chloride		
Absorbent Cotton		
Povidine Iodine Solution		
Disposable Examination Gloves Latex		
Surgical Gloves Sterile BIS		
Hypodermic Syringe For Single Use BP/BIS		
Hypodermic Needle For Single Use BP/BIS		
Cotton Bandage		
Absorbent Gauze		
Surgical Spirit BP		
Infusion Equipment BIS, IV Set With Hypodermic Needle		
Intra Cath Cannula For Single Use (IV Catheters) BIS		
Chromic Catgut On Round Body Needle		
Cord Lamp		
Muccus Sucker		
Medicated Soap		
K-90, Plain Catheter		
Floyes Catheter (Self Retaining Catheter)		
Sticking Plaster (Surgical Tape)		
Sodium Bicarbonate		
Sterile Water		
Section Tube		





Section: 12b. Dental consumables

Dental consumables	Quantity	Price Per Unit	List services for which it is used. Write serial number codes from Annexure 1
Disposable syringe 2cc			
Disposable syringe 5cc			
Gloves 6.5, 7, 7.5			
Root canal Reamers (45-80)			
Root canal Reamers (15-40)			
Suture needles			
Self- etching bond			
Silver alloy			
Sodium hypochlorite			
Xylocaine			
Kodak X-ray films			
Developer and fixer			
8 spreaders (15-40)			
Spreaders (45-80)			
Kalsogen 10			
Formacresol			
Orafil			
Zinc phosphate cement			
Zinc oxide			
H-files			
Cotton			
Spirit			
K files (15-40)			
Kalgenol			



Absorbent paper points (45-80)		
Absorbent paper points (15-40)		
Calcium with paste + CaOH2 powder		
Diamond burs		
Guttapercha points (15-40)		
Guttapercha points (45-80)		
Glass Ionomer Cement		
Mercury		
Polycarbonate cement		
Pyrocresol (formacresol)		
crepe bandage 8x10 cm		
Cotton gauge		
Others		



Section 13: Details about IEC material (Observation cum record review in stock register)

Type of IEC material (Specify size)	Quantity	Expenditure	List services for which it is used. Write serial number codes from Annexure 1
Flex board			
Paper Charts			
Wall paintings			
Handbills			
Pamphlets			
Booklets			
Others			

Section 14: Details of stationary items (Record review for billed amounts of purchased stationary)

Item	Quantity	Expenditure
Article indent book		
Attendance register		
Bath soap		
Carbon paper		
Cash receipt book		
Disinfectant fluids (Phenly-Ltr)		
Harpic		
Health management info system subcenter register		
Indoor register		
Nirma		
OPD card		
OPD register		
Out-station dak book		



	1	
Pencil		
Broom		
Photostat paper		
Pocha		
Poly bags for biowaste		
Register IDSP		
Savlon solution		
Spirit		
Stamp ink		
Stamp pad		
Stock + OPD register		
Toilet brush		
Towels + dusters		
A-4 paper		
Vim powder		
BMI charts		
Others		



Section 15: Vehicles Details

Type of Vehicle	Quantity	Date of Purchase of Vehicle	Price	Average Life

Section 16: Utilities

	Expenditure (Annual)
1.Means of transport	Dapenditure (rimuur)
Maintenance	
Repairs	
Insurance	
Others	
Total (If available)	
2. Building	
Electricity	
Water	
Facility rent (if relevant)	
Maintenance	
Telephone	
Kerosene	
Other	
Total (If available)	
3. Equipment	
Maintenance	
Repairs	
Other	
Total (If available)	
Expenditure on laundry	



Section 17: Laboratory/ Radiological investigation/Procedure

Type of tests	Quantity
Haemoglobin	
TLC	
DLC	
ESR	
Malaria parasite	
Sputum testing for TB (AFB)	
Routine urine	
Widal	
Blood grouping	
Bleeding time, clotting time (BT and CT	
Cholesterol	
Urea	
Uric acid	
Blood sugar	
Rapid tests for pregnancy	
RPR test for Syphills/YAWS surveillance (in high endemic area only) VDRL	
Rapid tests for HIV	
Elisa for HIV	
Coomb's test	
RA factor	
Radiological tests	
X-rays	
Ultrasound	
ECG	
ECG	
Stress test	
2-D echo	
Ultrasound scan	
Endoscopy	



Ct scan	
Dental: IOPA X-ray	

Section 18: Details of referral transport

Total number of patients referred from facility using referral transport	No. of Under-Fives	No. of Over-Fives	List services for which it is used. Write serial number codes from Annexure 1

Section 19: Details about cash benefits paid to patients

Name of Scheme	Amount paid during the period 2017-18
JSSK Any other	
Any other	

^{*}Staff could be asked to mention the different entitlements for patient services and then data should be collected for same.



Section 20: Details about utilisation of funds and grants

Name of the grant	Amount spent in the 2017-18	List services for which it is used. Write serial number codes from Annexure 1
Annual Maintenance Grant for PHCs		
ASHA incentive for completing 3 ANCs		
Incentive to ASHAs		
Incentive to ASHA under child health		
Infant death audit		
Jaccha Baccha scheme		
Measles campaign grant		
Mobility support for school health officer		
Mobility support for supervision for state & district level		
Mobilization of children through ASHA or other mobilizers		
Monitoring & supervision of IMNCI activities		
Monthly meeting of PEEs-ARSH		
Other strategies/activities (family planning)		
RCH outreach camps		
Untied fund for PHCs		
Untied fund for VHSC (PHC level)		
Others		



Section 21: Time allocation sheet. Staff Member Code (Enter Code as entered in Table 2):

Service	Activity name	Type of a	ctivity	Fixed schedu	le activity		Routine acti	ivity	
code no		Fixed schedule	Routine	Frequency (once in a week/once in month/twice a week etc.)*	Hours per day of activity	Days for which the activity was done during the year 2017-18	Time per person (in minutes) (a)	Number of beneficiaries on a routine day (b)	If not (a) and (b) then how much time to do the activity
1.	Ante natal care								
2.	Institutional deliveries								
3.	Post natal care								
4.	New born care corner								
5.	Immunisation (at the facility)								
	Immunisation (outreach)								
6.	Routine OPD								
7.	Tubectomy motivation								
8.	Tubectomy procedure								
9.	IUCD motivation								
10.	IUCD procedure								
11.	Special day care services								
12.	IPD (Patients admitted in Inpatient ward)								



Service	Activity name	Type of a	ctivity	Fixed schedul	le activity		Routine act	ivity	
code no									
		Fixed schedule	Routine	Frequency (once in a week/once in month/twice a week etc.)*	Hours per day of activity	Days for which the activity was done during the year 2017-18	Time per person (in minutes) (a)	Number of beneficiaries on a routine day (b)	If not (a) and (b) then how much time to do the activity
13.	OT: Surgeries, eye related operations, Gynae operations, etc.								
14.	Dental procedures								
15.	Emergency duty								
16.	AYUSH services (OPD)								
17.	DOTS provision								
18.	Outreach services								
19.	School health programs								
20.	Adolescent health programs								
21.	IEC activity done for other National health programs						NA	NA	
22.	Special duties (Like during emergencies, jails, etc.)								
23.	Posting to another facility								
24.	Meetings at district level						NA	NA	



Service	Activity name	Type of a	ctivity	Fixed schedu	le activity		Routine act	ivity	
code no	-		-		-			_	
		Fixed schedule	Routine	Frequency (once in a week/once in month/twice a week etc.)*	Hours per day of activity	Days for which the activity was done during the year 2017-18	Time per person (in minutes) (a)	Number of beneficiaries on a routine day (b)	If not (a) and (b) then how much time to do the activity
25.	Meetings at the state head quarters						NA	NA	
26.	Meetings in CHC itself						NA	NA	
27.	Meeting with ANM's from Sub centre						NA	NA	
28.	Meetings with ASHAs						NA	NA	
29.	Meetings with local bodies						NA	NA	
30.	Routine administrative work / Maintenance of record, register & reports (Routine HMIS)						NA	NA	
31.	Family planning camp								
32.	Other health camps								
33.	Outreach : Pulse polio immunisation								
34.	Outreach : Village Health & Nutrition days						NA	NA	
35.	Disease surveillance and Control of local endemic diseases						NA	NA	
36.	Outreach: House to house surveys								



Service	Activity name	Type of activity		Fixed schedule activity			Routine activity		
code no									
		Fixed schedule	Routine	Frequency (once in a week/once in month/twice a week etc.)*	Hours per day of activity	Days for which the activity was done during the year 2017-18	Time per person (in minutes) (a)	Number of beneficiaries on a routine day (b)	If not (a) and (b) then how much time to do the activity
37.	Outreach : Water and Sanitation						NA	NA	
38.	Monitoring and supervision activities						NA	NA	
39.	Trainings conducted for staff at the facility						NA	NA	
40.	Ambulatory services								
41.	Laboratory services								
42.	Radiological services								
43.	Pharmacy services								

^{*&#}x27;1' for once a year participation, '2' for twice a year, 3 for thrice a year participation, 4 for quarterly participation, 5 for once every two months, 6 for monthly participation, 7 for fortnightly participation, 8 for weekly participation, 9 for twice a week participation, 10 for thrice a week participation.



Annexure 1

Code	A 4: *4	Code	A 4: -4	Code	A 4: 4
no	Activity name	no	Activity name	no	Activity name
1	Ante natal care	16	AYUSH services (OPD)	31	Family planning camp
2	Institutional deliveries	17	DOTS provision	32	Other health camps
3	Post natal care	18	Outreach services	33	Outreach : Pulse polio immunisation
4	New born care corner	19	School health programs	34	Outreach: Village health & nutrition days
5	Immunisation (at the facility)	20	Adolescent health programs	35	Disease surveillance and Control of local endemic diseases
6	Routine OPD*	21	IEC activity done for other National health programs	36	Outreach: House to house surveys
7	Tubectomy motivation	22	Special duties (Like during emergencies, jails, etc.)	37	Outreach: Water and Sanitation
8	Tubectomy procedure	23	Posting to another facility	38	Monitoring and supervision activities
9	IUCD motivation	24	Meetings at district level	39	Trainings conducted for staff at the facility
10	IUCD procedure	25	Meetings at the state head quarters	40	Ambulatory services
11	Special day care services	26	Meetings in CHC itself	41	Laboratory services
12	IPD (Patients admitted in Inpatient ward)*	27	Meeting with ANM's from Sub centre	42	Radiological services
13	OT: Surgeries, eye related operations, Gynae operations, etc.	28	Meetings with ASHAs	43	Pharmacy services
14	Dental procedures	29	Meetings with local bodies	44	Transport
15	Emergency duty	30	Routine administrative work / Maintenance of record, register & reports (Routine HMIS)	45	Others (specify)

^{*}In case of speciality wise OPD & IPD, please mentioned the speciality along with codes 6 & 12

