

Data Collection for Health Services Costing in India

Data collection tool: Primary Health Care

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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 data collection tool: Facility type: Primary Health Centre

Interview Date: Facility Name:		District Nan	ne:	
Section 1 General Information				
Table 1: Interview with the head of t	he facility or person In-charge			
 A. Is it a 24x7 PHC? B. Please tell me how many days per C. Please tell me how many hours per D. If the facility remains closed on Pu E. Average length of stay of IPD patient Mention the number of days of stay	week this facility is closed?: day this facility is open (If A = No) blic holidays then mention total pub	9?: (Hours per day) blic holidays in last year:		
	or expansion in the meanty for this	101111) (11 2017 10		
				+



Section 2 & 3: 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 Officer- MBBS = 1, MO –AYUSH= 2, Dental officer=3, Accountant/Clerk=4, Pharmacist=5, Pharmacist AYUSH=6, Nurse-midwife (Staff-Nurse)=7, Health workers (F)=8, Health worker (M) =9. Health Asstt. (Male) = 10, Health Asstt. (Female)/LHV=11, Health Educator= 12, Data entry cum computer operator=13, Laboratory Technician=14, Cold Chain & Vaccine Logistic Assistant=15, Multi-skilled Group D worker=16, Sanitary worker cum watchman=17, Sanitary worker=18, Watchman=19.



^{**}For more than one person of a particular category, use alphabetic prefixes. For e.g. if there are 2 medical officers use code 1a and 1b.

[®]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.

Section 2: Salary details: Details for each person separately using codes given below

Staff No. Code	Designation	Speciality	Services (OPD=1, IPD=2, Out- reach=3,OPD+IP D=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		Government resi	dence	Trans	port facility	Unifo	orm provided/	allowance	
	Square feet of the house building or rooms provided (Do mention the unit of data collection)	Square feet of the open area in the accommodation provided	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*(Facility reports to be reviewed and not areas reports) (If data is collected for less than 1 year than mention the period)

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 born care corner (number of new borne)	
_	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 under 5 years age (number of patients)	
8	Routine OPD above 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	IPD services (patients admitted in Inpatient ward)	
13	AYUSH services (number of patients)	
14	Dental services (number of patients)	
15	Operation theatre (number of surgeries treated / patients treated)	
16	DOTS provision (number of patients)	
17	Emergency ward (number of patients)	
18	Ambulatory services (number of patients)	
19	Food service/dietician (number of diets served)	
20	Indoor Residual spray (number of households sprayed)	
21	Family planning camps (number of camps)	
	Number of patient treated/sterilized in family planning camps	
22	Number of school health program / RBSK (Number of camps)	
22	Number of school children screened under RBSK	
23	Adolescent health program (ARSH) (number of camps)	
23	Number of adolescent screened under ARSH program	



24	Number of trainings conducted	
25	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 2017-18
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 cardBirth –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=	Female=
	Children (under 5 years)=	Children (5-10 years)=

Section 7: Details of the Physical infrastructure (Interview based)

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. f	eet)		Area (Sq. fe	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. 1	feet)		Area (Sq. f	eet)		Area (Sq. 1	feet)		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	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	Area (Sq. feet) Activity Freq* Hours		Area (Sq. f	feet)		Area (Sq.	feet)		Area (Sq.	feet)		Area (Sq.	feet)	
Activity name (a)	Freq* (b)	Hours (c)	Activity Freq* Hours name (a) (b) (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)	
			(b) (c)														



Room Name			Room Name			Corridor_		 Corridor_		 Corridor_		Corridor_		
Area (Sq. f	eet)		Area (Sq. feet	<u>(</u>)		Area (Sq	. feet)	Area (Sq.	feet)	Area (Sq.	feet)	Area (Sq.	feet)	
Activity name (a)	Freq* (b)	Hours (c)	Activity name (a)	· •										

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 aggingment							Quanti	ity of fu	nctionin	g items	in each	room			
Name of the equipment or furniture	Room no. 1	Room no. 2	Room no. 3	Room no. 4	Room no. 5	Room no. 6	Room no. 7	Room no. 8	Room no. 9	Room no. 10	Room no. 11			Room 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															
Bulbs															



CFL tubes											
Clock/watch											
Coat rack											
Curtain rods											
Curtains											
Cylinder											
Delivery table											
Dressing trolley											
Drum with tap for											
storing water											
Examination bed or table											
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											
reacter / plastic shatting	1		1	1	l	1	l .		l	1	



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									
Others									

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	f functio	ning ite	ms in each	room				
equipment or	Room	Room	Room	Corridor	Corridor	Corridor	Corridor									
furniture	no. 18	no. 19	no. 20	no. 21	no. 22	no. 23	no. 24	no. 25	no. 26	no. 26	1	2	3	4		
Almirah (Big																
steel)																
Almirah (Small																
steel)																
Almirahs (Small																
wooden)																
Armless chairs																
Bed side																
attendant chair																
Bed side locker																
Bed side Screen																



	T	ı ı	1	1			1	1	ı		
Bed side table											
Buckets											
Centrifuge											
Bulbs											
CFL tubes											
Clock /watch											
Coat rack											
Curtain rods											
Curtains											
Cylinder											
Delivery table											
Dressing trolley											
Drum with tap for											
storing water											
Examination bed											
or table											
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									1
Sauce pan with									
lid									<u>i</u>
Side Wall									1
mounted fan									
Side wooden									1
racks									İ
Sink									
Stool (steel)									
Stool (wooden)									
stove 2 burner									<u>i</u>
Stretcher									<u> </u>
Swab rack									<u> </u>
Telephone									ĺ
Three seater steel									1
chairs									<u> </u>
Others									<u> </u>
									į



ı	1	I	1			1	1		1

Section 10a: 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	Useful life of equipment	List services for which it is used. Write serial number codes from Annexure 1
Labour	Normal Delivery Kit					
Room						
	Equipment for assisted vacuum delivery					
	Equipment for assisted forceps delivery					
	Standard Surgical Set (for minor procedures like episiotomies stitching).					
	Equipment for Manual Vacuum Aspiration					
	Equipment for New Born Care and Neonatal Resuscitation.					
	IUCD insertion kit.					
	Refrigerator					
MCH Room	ILR (Small) and DF (Small) with Voltage Stabilizer					
	Cold Boxes (Small & Large): Small- one					
	Vaccine Carriers with 4 Icepacks: Two per SC (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 Respectively Freeze Tag: 2 per ILR bimonthly Thermometers Ice box.			
OPD Room				



Inpatient wards			

Section 10b: Operation Theatre

	Quantity	Price	Date of Purchase of Equipment	Useful life of 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 Pulse oxymeter Suction machine			
Pulse oxymeter			
Suction machine			

Section10c: Special equipment for new born care corner

	Quantity	Price	Date of Purchase of Equipment	Useful life of equipment	List services for which it is used. Write serial number codes from Annexure 1
Open care system: radiant warmer, fixed height,					
with trolley, drawers, O2-bottles					
Resuscitator (silicone resuscitation bag and mask					
with reservoir) hand-operated, neonate, 500ml					
Weighing Scale, spring					
Pump suction, foot operated					
Thermometer, clinical, digital, 32-34 0C					
Light examination, mobile, 220-12 V					
Hub Cutter, syringe					
Laryngoscope and Endotracheal intubation tubes					
(neonatal).					
Feeding tubes for baby					
Others					



Table 10d: Dental Equipment

Equipment	Quantity	Price	Date of Purchase of Equipment	Useful 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	_		

Table 10e: Laboratory and X-ray equipment

Equipment	Quantity	Price	Date of Purchase of Equipment	Useful life of equipment	List services for which it is used. Write serial number codes from Annexure 1
Binocular microscope					
Monocular Microscope					
Laproscope					
Nebuliser					
Stadio-meter					
Coploscope					
Cryotherapy equipment					
Spirometer					
Non-invasive ventilator					
Dialysis machine					
Haemoglobinometer					



Semi-auto analyser			
Equipments for pap smear			
Cusco's vaginal speculum (each of small, medium and large size)			
Sim's vaginal speculum – single & double ended -(each of small, medium and large size)			
Anterior Vaginal wall retractor			
Kidney tray			
Bowl			
Cheatle's forceps			
Proper light source/torch			

Section 11: Details of drugs consumed in the facility (Take consumption data and not the supply data) (Review the stock-register and list the quantity of various drugs consumed and their utility against each of them as shown 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		





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		
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		
+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		
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		
Spinal Needle Disposable Adult BIS		
Urobag		
Sponges		
Mucus Sucker		
Mersilk On Cutting Needle		
Polyglycolic Acid, Braided, Coated And Absorbable,		
Half Circle Round Body		
Calcium Gluconate		
Drotavarine		
Pentazocine Lactate		
Hydroxyethyle Starch 6% Saline Solution		
Others		
		of M. EDUCAD



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)		
GIC		
Mercury		
Polycarbonate cement		
Pyrocresol (formacresol)		
crepe bandage 8x10 cm		
Cotton gauge		
IV set		
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			

Section 14: Details of stationary items and other miscellaneous 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		



D 11	
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	
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	
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	
Expenditure on dietetics	

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	
RA factor	
X-rays	
Ultrasound	
Dental (IOPA X-ray)	



Section 18: Details of referral transport (Data to be taken from referral reports).

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	

Section 20: Details about utilisation of funds and grants

Funds and grants	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		



Jacha-Bacha scheme	
Measlescampaign 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 ac	tivity	Fixed schedu	le activity		Routine act	Routine activity		
code no		Fixed schedule	Routin e	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 service									
12.	IPD (Patients admitted in Inpatient ward)									
13.	Operation theatre									
14.	Dental procedures									
15.	Emergency duty									



	Activity name	Type of ac	tivity	Fixed schedule activity			Routine activity		
Service code no		Fixed schedule	Routin e	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
16.	AYUSH services (OPD)								
17.	DOTS provision								
18.	Outreach services								
19.	School health programs								
20.	Adolescent health programs								
21.	Any other IEC activity done for 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	
25.	Meetings at the state head quarters						NA	NA	
26.	Meetings in CHC						NA	NA	
27.	Meetings at PHC itself						NA	NA	
28.	Meeting with ANM's from Sub centre						NA	NA	
29.	Meetings with local bodies						NA	NA	
30.	Meetings with ASHAs						NA	NA	



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

