ANNUAL REPORT
2014-2015

DIRECTORATE GENERAL OF HEALTH SERVICES
Government of National Capital Territory of Delhi

DIRECTORATE GENERAL OF HEALTH SERVICES

GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI

ANNUAL REPORT
2014-2015

DIRECTORATE GENERAL OF HEALTH SERVICES
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FORWARD

Directorate General of Health Services brings out its Annual Report in pursuit of regular availability of Health Statistics. The information contained in this document reflects the functioning and achievements of the Directorate of Health Services as well as other Hospitals and other departments working under Govt. of NCT of Delhi.

Directorate General of Health Services delivers health care through its network of Allopathic Dispensaries, Mobile Health Dispensaries, School Health Clinics besides implementation of other programmes/schemes in addition to opening of new Hospitals & Dispensaries. The health care facilities in Delhi are being delivered by a number of government and non-government organizations whose nodal agency is Directorate General of Health Services.

The Directorate is computerized (The Headquarter, districts, School Health Scheme, Mobile Health Scheme) of this directorate for the reports on performance of dispensaries/districts and morbidity data are being collected online through intranet/internet. ICD 10 based system of morbidity reporting has been adopted for morbidity reports included in the publications. All hospitals functioning under the Department of Health & Family Welfare have been provided the facility of online feeding of their monthly reports. SHIB is not the primary holder of data given herein.It only collects and compiles the data from selected health institutions.

The publication of the report is delayed due to constraints of data receipt from all agencies.

I appreciate the efforts of all the staff members of this directorate for the achievements made during reference period. I congratulate the team of State Health Intelligence Bureau, headed by Dr. Pawan Kumar for bringing out this publication despite the constraint of staff in the branch and heavy work load.

Suggestions for further improvement of this publication are always welcome and will be appreciated.

(DR.TARUN SEEM)

DIRECTOR GENERAL HEALTH SERVICES

OFFICIALS ASSOCIATED WITH THE PREPARATION OF

ANNUAL REPORT 2014-15

TEAM

Dr. PAWAN KUMAR	:	ADDL.DIRECTOR (SHIB)
Mr. RAJ KUMAR	:	STATISTICAL OFFICER
Mrs. RATNA BHATTACHARYA	:	P.H.N.
Mr. RAJESH KUMAR GUPTA	:	PHARMACIST
Mrs. SUDERSHAN KHATTAR	:	HEAD CLERK
Mrs. CHANDER KANTA	:	STENOGRAPHER
Mr. VIRENDER SINGH	:	C.D.E.O.
Mr. DIGAMBER ROUTELA	:	N.O.
Mrs. MUKESH	:	N.O.

EDP UNIT

Mr. S.K. JOHRI	:	SR. SYSTEM ANALYST
Mr. AWADHESH KUMAR SINGH	:	ASSISTANT PROGRAMMER

STATE HEALTH INTELLIGENCE BUREAU
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Chapter 1

INTRODUCTION

Delhi is an old city that has slowly expanded over the years to acquire its present status of metropolis. According to census 2011, the total population of Delhi was 167.53 lakh spread over an area of 1483 Sq. km. The population density of Delhi was 11297 persons per Sq Km. in 2011, which is the highest in India amongst all states/Union Teritories. People come from all over India for livelihood and settle in Delhi being the economic hub for development. Only 2.5% of the population resides in rural areas making it a predominantly urban conglomeration (Source: Census-2011).

In Delhi, health care facilities are being provided by both governmental & non-governmental organizations. Besides, local self governance agencies such as Municipal Corporations of Delhi, New Delhi Municipal Council and Delhi Cantonment Board are instrumental in delivery of health care facilities in their respective areas. Various agencies of Government of India such as Ministry of Health and Family Welfare, CGHS, ESI, Railways are also providing health care to general public as well as to identified beneficiaries. Amongst the government organizations, Directorate General of Health Services (DGHS) of Government of NCT of Delhi is the major agency related to health care delivery. This directorate actively participates in delivery of health care facilities and co-ordinates with other Govt. & Non-Government Organization for health related activities for the improvement of health of citizens of Delhi. Services under Directorate of Health Services cover medical & public health. This Directorate plays the key role in co-ordination and implementation of various national and state health programmes.

DEPARTMENT OF HEALTH & FAMILY WELFARE

Department of Health & Family Welfare, Govt. of NCT of Delhi is entrusted with the task of looking after the delivery of health care and health related matter in Delhi. Various directorates, hospitals, departments and autonomous bodies functioning under the Department of Health and Family Welfare, GNCT of Delhi are :-

1. Directorate General of Health Services
2. Directorate of Family Welfare
3. Directorate of Ayurvedic Yoga Unani Siddha and Homoeopathy (AYUSH)
4. Department of Drug Control
5. Department of Food Safety
6. Maulana Azad Medical College
7. Hospitals (other then those functioning as autonomous bodies)

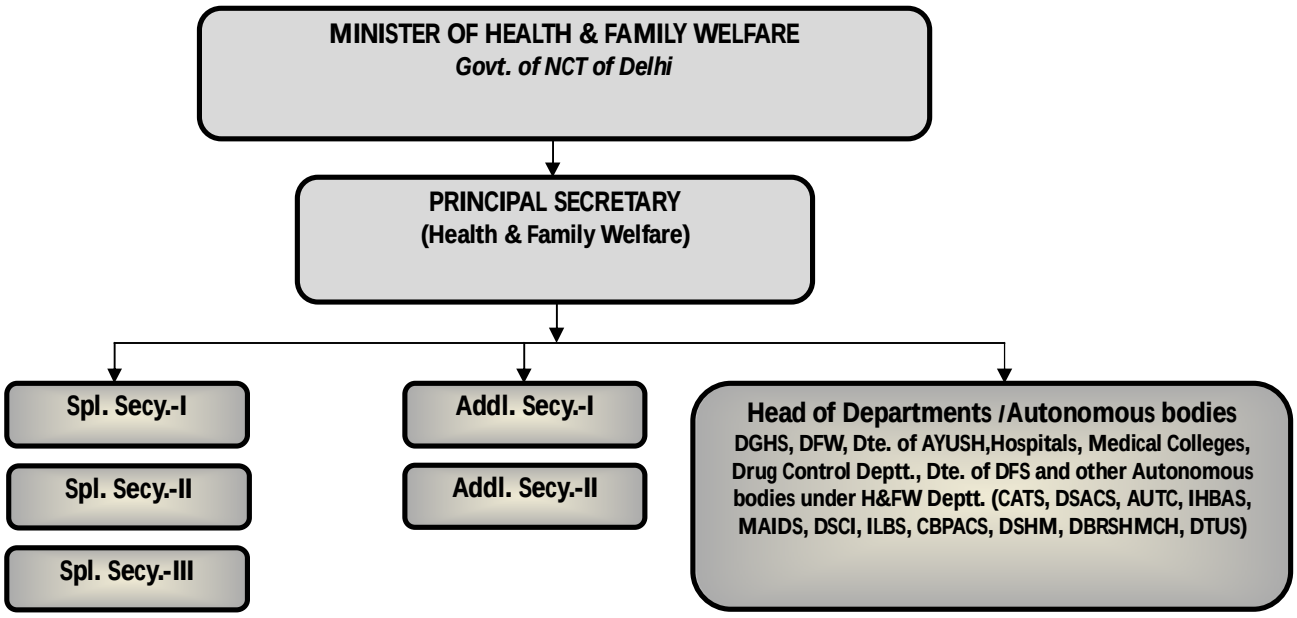
i.	Acharyashri Bhikshu Govt. Hospital, Moti Nagar
ii.	Aruna Asaf Ali Govt. Hospital, Rajpur Road
iii.	Attar Sain Jain Eye and General Hospital, Lawrance Road
iv.	Babu Jagjivan Ram Memorial Hospital, Jahangir Puri
v.	Bhagwan Mahavir Hospital, Pitampura
vi.	Central Jail Hospital
vii.	Chacha Nehru Bal Chiktisalaya, Geeta Colony
viii.	Deen Dayal Upadhyay Hospital, Hari Nagar
ix.	Deep Chand Bhandhu Hospital, Kokiwala Bagh, Ashok Vihar
x.	Dr. Baba Saheb Ambedkar Hospital, Rohini
xi.	Dr. Hedgewar Arogya Sansthan, Karkardooma
xii.	Dr. N.C.Joshi Memorial Hospital, Karol Bagh,

xiii.	GB Pant Hospital, Jawahar Lal Nehru Marg
xiv.	Guru Gobind Singh Government Hospital, Raghubir Nagar
xv.	Guru Nanak Eye Centre, Maharaja Ranjit Singh Marg
xvi.	Guru Teg Bahadur Hospital, Dilshad Garden, Shahdara
xvii.	Health Center Cum Maternity Hospital, Kanti Nagar
xviii.	Jag Pravesh Chandra Hospital, Shastri Park
xix.	Janak Puri Super Speciality Hospital, Janak Puri
xx.	Lal Bahadur Shastri Hospital, Khichripur
xxi.	Lok Nayak Hospital, Jawahar Lal Nehru Marg
xxii.	Maharishi Valmiki Hospital, Pooth Khurd
xxiii.	Nehru Homeopathic Medical College and Hospital, Defence Colony
xxiv.	Pt. Madan Mohan Malviya Hospital, Malviya Nagar
xxv.	Rajiv Gandhi Super Specialty Hospital, Tahir Pur
xxvi.	Rao Tula Ram Memorial Hospital, Jaffarpur
xxvii.	Sanjay Gandhi Memorial Hospital, Mangol Puri
xxviii.	Sardar Vallabhbhai Patel Hospital, Patel Nagar
xxix.	Satyavadi Raja Harish Chandra Hospital, Narela
xxx.	Sewa Kutir Hospital, Kingsway Camp (associated with AAAG Hospital)
xxxi.	Sri Dada Dev Matri Avum Shishu Chikitsalya, Nasir Pur
xxxii.	Sushruta Trauma Centre, Bela Road

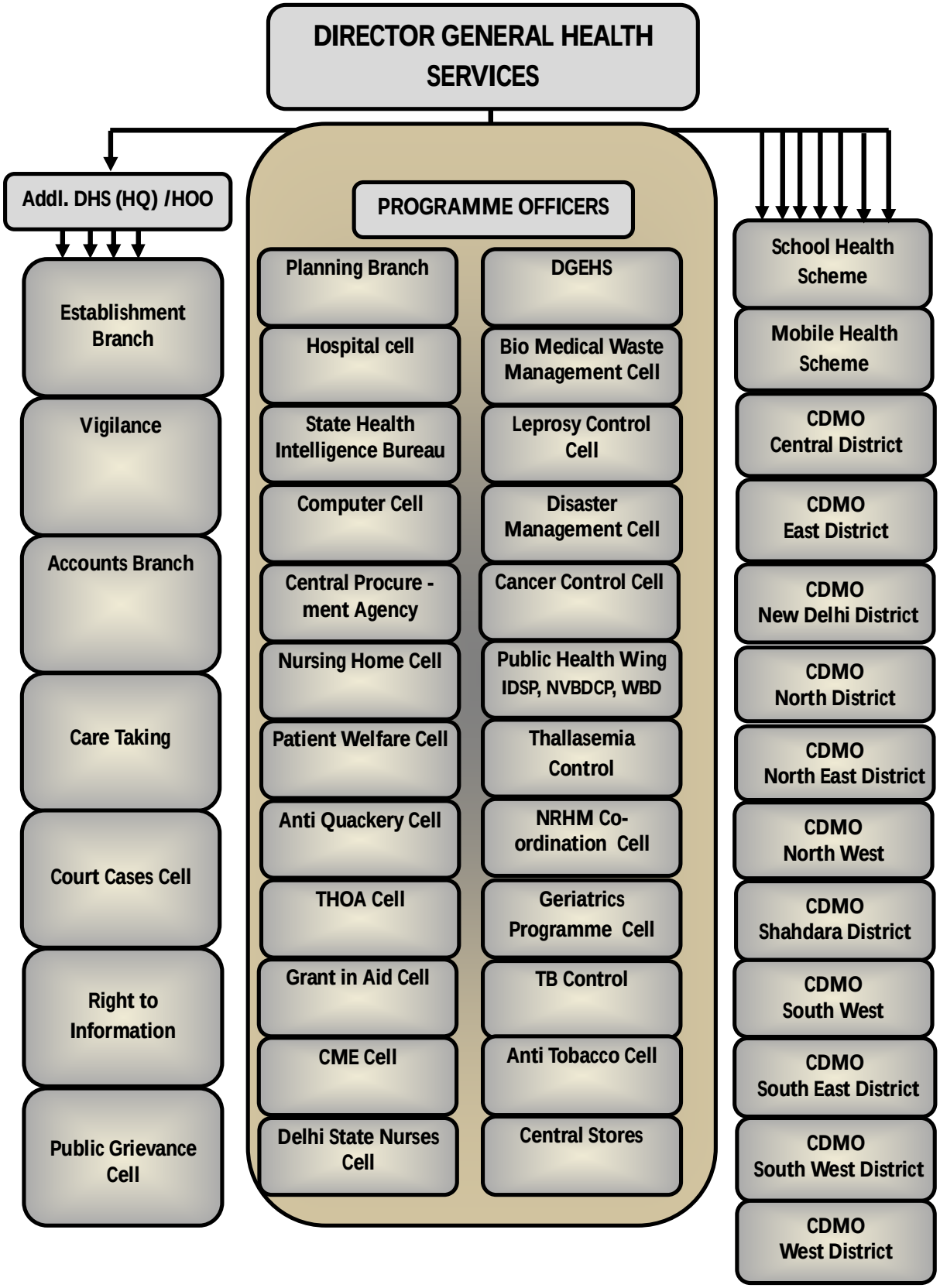
8. Autonomous Bodies/Societies/Hospitals under H&FW Department

i. Ayurvedic & Unani Tibbia College and Hospital, Karol Bagh
ii. Centralized Accidental and Trauma Services, Bela Road
iii. Chaudhary Braham Prakash Ayurvedic Charak Sansthan, Najafgarh
iv. Delhi State AIDS Control Society, BSA Hospital Campus, Rohini
v. Delhi State Cancer Institute, GTB Hospital Complex, Dilshad Garden, Shahdara
vi. Delhi State Health Mission, Vikas Bhawan II, Civil Lines
vii. Delhi Tapedik Unmoolan Samiti, Gulabi Bagh
viii. Dr. BR Sur Homeopathic Medical College and Hospital, Nanak Pura, Moti Bagh
ix. Institute of Human Behavior and Allied Sciences, Shahdara
x. Institute of Liver and Biliary Sciences, Vasant Kunj
xi. Maulana Azad Institute of Dental Sciences, LNH Complex

The organizational structure of Department of Health and Family Welfare, Govt. of NCT of Delhi is as under:



ORGANISATION STRUCTURE OF DIRECTORATE GENERAL OF HEALTH SERVICES



DIRECTORATE GENERAL OF HEALTH SERVICES

The Directorate General of Health Services is the largest department under Department of Health and Family Welfare Govt. of NCT of Delhi providing health care facilities at primary and secondary level to the citizens of Delhi through various types of health outlets, spread all over Delhi viz., Dispensaries & Health Centres, School Health Clinics and Mobile Health Clinics. Till the year 2006, 14 hospitals used to function under the administrative control of Directorate of Health Services and these were declared as independent establishments headed by respective Medical Superintendents in December 2006.

The Directorate General of Health Services is providing health care facilities at primary and secondary level to the citizen of Delhi through various types of health outlets, spread all over Delhi viz. Dispensaries & Health Centres, School Health Clinics and Mobile Health Clinics.

To cope up with the situation regarding need to health outlets, many more health outlets are being added to existing ones from time to time to meet the health needs subject to the availability of resources.

This Directorate also monitors the health services being provided by Registered Private Nursing Homes. The registration is done subject to the fulfillment of prerequisite of Delhi Nursing Home Registration Act 1953 and renewed after every three year. The registration of private Nursing Homes is mandatory under the Act.

As far as the monitoring of various health schemes being run by DGHS, the regular information/data is being obtained from various health outlets under the direct control of DGHS, which are then compiled and analyzed. On the basis of data and its analysis Dispensaries/Health Centres/ Hospitals, the evaluation of various schemes is carried out and necessary corrective measures if needed are taken. In addition to above this directorate is also collecting information regularly from other agencies on communicable diseases, non-communicable diseases and other public health data for taking appropriate measures related to prevention and control of notified diseases.

Sanctioned Strength

The directorate has a total sanctioned strength of 3793 posts. Groupwise Sanctioned strength and vacancy position of the Directorate of Health Services including its subordinate offices as on 31.3.2015 is as mentioned below :-

Group A

S.No.	Category	Sanctioned	Filled	Vacant
1	Director	1	1	0
2	Addl. Director (HQ)	1	1	0
3	CDMO	11	11	0
4	ACDMO	11	9	2
5	Doctors (SAG / NFSG / Specialists / CMO /SMO / MO)	638	485	153
6	Special Director (Admn.)	1	0	1
7	Dy. Controller of Accounts	1	0	1
8	Dy. Director (Plg.)	1	1	0
9	Programmer	1	1	0
Total		666	509	157

Group B

S.No.	Category	Sanctioned	Filled	Vacant
1	Sr. PA.	8	3	5
2	Admn. Officer	2	2	0
3	Sr. A.O. / A.O	2	1	1
4	AAO	9	9	0
5	Statistical Officer	12	6	6
6	Asstt. Programmer	1	1	0
7	Store Purchase Officer	1	0	1
8	Superintendent	1	1	0
Total		**36**	**23**	**13**

Group C

S.No.	Category	Sanctioned	Filled	Vacant
1	LDC	54	22	32
2	UDC	58	38	20
3	Head Clerk	21	18	3
4	Stat.Assistant	34	10	24
5	Steno, Gr. III	10	3	7
6	Steno Gr.II	12	11	1
7	Driver	21	17	4
8	DEO	1	0	1
Total		**211**	**119**	**92**

Paramedical Staff

S.No.	Category	Sanctioned	Filled	Vacant
1	Pharmacist	683	610	73
2	ANM	352	322	30
3	PHN	164	141	23
4	Staff Nurse	5	5	0
5	Lab Technician	2	0	2
6	Lab Assistant	204	195	9
7	Dental Hygienist	10	8	2
8	Physiotherapist	1	1	0
9	Occup. Therapist	1	1	0
10	Jr. Radiographer	3	2	1
11	OT Technician	1	1	0
12	Audiometric Assistant	1	1	0
13	ECG Technician	2	1	1
14	Refrectionist	8	7	1
Total		**1437**	**1295**	**142**

Group D

S.No.	Category	Sanctioned	Filled	Vacant
1	Dresser	280	247	33
2	Nursing Orderly	478	433	45
3	SCC	682	392	290
4	Peon / Non-Peon	0	0	0
5	Daftrary	0	0	0
6	Khalasi	0	0	0
7	Attendant / Helper	0	0	0
8	Chowkidar	2	0	2
9	Darkroom Attendant	1	0	1
Total		**1443**	**1072**	**371**

Budget Expenditure of Directorate of Health Services 2014-15

Head	Actual Expenditure (in Rs. Lakhs)
Non Plan	24155.17
Plan (Medical) & Plan (Public Health)	5179.33
Total	**29334.50**

Chapter 2

ACHIEVEMENTS AT A GLANCE AND IMPORTANT HEALTH STATISTICS

2.1 ACHIEVEMENTS OF DELHI GOVT. DISPENSARIES AND HOSPITALS AT A GLANCE DURING 2014-15

Sl. No	Activity	Nos.
1	**OPD Attendance**	
	Dispensaries(Allopathic)	11001012
	Dispensaries(Ayurvedic)	657027
	Dispensaries(Unani)	428425
	Dispensaries(Homeo)	2169771
	Hospitals	16446833
	Mobile Health Clinics	806188
	School Health Clinic	63507
2	**IPD Attendance in Hospitals**	649690
3	**No. of Laboratory Tests**	
	i) Dispensaries(Allopathic)	1087603
	ii) School Health Scheme	640859
	iii) Mobile Health Scheme	1330
	iv) Hospitals	26039330
4	**No. of X-Rays done in Hospitals**	2266829
5	**No. of Hospitals**	39
6	**No. of Beds in Hospitals**	**10959 (Sanctioned)** 9523 (Operational)
7	**No. of Dispensaries**	260 Allopathic, 43 Mobile Clinics, 72 SHS Clinics/Referral Centres, 101 Homeopathic, 36 Ayurvedic and 18 Unani Dispensaries
8	**New Dispensaries Opened during 2014-15**	1,Homeopathic, 1,Ayurvedic and 1,Unani

2.2 NUMBER OF HEALTH OUTLETS UNDER GNCT OF DELHI

S. No.	Year Health Outlets	2003 -04	2004 -05	2005 -06	2006 -07	2007 -08	2008- 09	2009 -10	2010- 11	2011 -12	2012 -13	2013 -14	2014 -15
1	Allopathic Dispensaries	173	179	182	184	188	214	220	234	248	256	260	260
2	Hospitals	33	33	33	33	34	35	38	38	38	39	39	39
3	Mobile Health Clinics	72	68	71	67	68	72	90	90	90	90	90	43
4	School Health Clinics/ Referral Centres	78	78	15	15	28	28	32	34	93	100	100	72
5	**AYUSH**												
i	Homeopathy	64	66	71	72	78	80	87	92	92	95	100	101
ii	Ayurvedic	21	22	22	22	25	26	27	32	32	33	35	36
iii	Unani	8	9	9	9	10	10	11	15	15	16	17	18
Total		**449**	**455**	**403**	**402**	**431**	**465**	**505**	**535**	**607**	**629**	**641**	**569**

2.3 BASIC STATISTICS OF DELHI GOVERNMENT DISPENSARIES DURING 2014-15

S.No.	Name of District	Annual OPD Attendnance		Number of Lab Investigations		
		New	Old	Blood	Urine	Others
1	2	*3*	*4*	*5*	*6*	*7*
1	Central	754106	397514	122913	34824	806
2	East	704032	452146	108084	16289	195
3	West	889457	533860	151573	34200	--
4	North	520447	174564	38159	5333	0
5	South West`	810784	580873	36158	6564	0
6	North East	405405	182821	52054	15255	0
7	North West	957295	370413	98199	26505	2765
8	South	463796	216931	61759	12587	0
9	Shahadra	881075	454616	100086	27764	0
10	New Delhi	355664	125673	60215	10756	200
11	South East	498938	270602	47310	16395	655
	Total	**7240999**	**3760013**	**876510**	**206472**	**4621**
1	School Health Scheme	57903	5604	457080	0	183779
2	Mobile Health Scheme	483713	322475	1330	0	0
3	Ayurvedic Dispensaries	328503	328524	0	0	0
4	Unani Dispensararies	237181	191244	0	0	0
5	Homeopathic Dispensaries	761276	1408495	0	0	0
	Total	**1868576**	**2256342**	**458410**	**0**	**183779**

2.4 BASIC STATISTICS FOR FAMILY WELFARE ACTIVITIES OF DELHI GOVERNMENT ALLOPATHIC DISPENSARIES 2014-15

Sl.No.	Name of District	Immunization (Total number of doses)								
		BCG	OPV	DPT	HBV	Measles	MMR	Typhoid	DT	TT Doses (Antenatal)
1	2	3	4	5	6	7	8	9	10	11
1	Central	2011	23064	670	656	9588	4466	0	0	4734
2	East	2134	28824	10559	1944	18351	6436	4874	4404	8860
3	West	39306	188116	60023	50473	72588	31925	0	20497	75145
4	North	2579	18106	5661	776	8385	4151	3263	1733	10293
5	South West	2481	32584	24001	11071	586	863	311	0	1481
6	North East	1391	20379	2535	784	9779	2884	2004	6079	4578
7	North West	3797	32232	11188	2158	16775	7073	0	0	10994
8	South	1348	20718	8165	2087	8143	5319	5386	2109	6339
9	Shahadra	3649	7830	8993	2963	7423	4568	3233	0	5498
10.	New Delhi	713	10061	2539	655	5097	2102	1945	1594	4578
11.	South East	3355	37537	13787	3205	16382	7452	5812	5409	11812
12	Mobile Health Scheme	24	189	173	28	37	15	13	14	199
	Total	**62788**	**419640**	**148294**	**76800**	**173134**	**77254**	**26841**	**41839**	**144511**

2.5 STATISTICS RELATING TO PERFORMANCE OF MOTHER LABS IN DELHI GOVERNMENT DISPENSARIES DURING 2014-15

Sl. No.	District Name of the test	Central	East	North	North East	North West	South	South West	West	New Delhi	Shahdara	South East
	No. of MotherLabs	**6**	**4**	**2**	**3**	**4**	**4**	**3**	**6**	**1**	**4**	**3**
1	KFT	5691	312	516	335	9216	916	512	3522	305	1034	112
2	LFT	8794	291	653	449	2619	1621	864	9920	586	3222	02
3	Lipid Profile	9771	254	681	989	1029	1045	771	4460	462	1550	148
4	Serum Electrolyte	470	0	0	0	0	0	0	0	0	0	0
5	Blood Sugar	22181	18178	24389	13690	17251	15124	12974	23698	3172	53679	21783
6	Blood Grouping	722	2484	1505	1924	976	977	3025	2839	366	6176	4833
7	Peripheral Smear	0	0	0	0	0	0	36	311	0	0	0
8	Malaria Test	0	135	6375	0	0	0	0	296	0	790	2429
9	VDRL	08	0	111	0	0	0	0	64	0	0	234
10	HBS AG Rapid Test	02	0	242	0	0	39	0	0	0	0	0
11	Urine Pregnancy Test	32	26	275	219	64	275	48	574	0	636	1780
12	Urine Sugar	4666	2541	2188	3829	1338	1936	2965	4312	628	8683	4650
13	Urine Albumin	4681	2541	2188	3829	1358	1936	2965	4318	628	8683	4546
14	Urine Microscopic	3125	1736	1311	1535	2170	1378	586	3526	354	1715	3078
15	Stool Test	0	0	0	0	0	0	0	08	0	0	04
16	Widal Test	0	55	102	59	0	328	0	0	0	164	132
17	Hematology	13172	517	4895	8062	22201	3289	6303	19216	0	22854	3933
18	Platelet Count	1089	841	193	1314	0	1054	1364	4878	26	1206	561
19	Absolute Eosinohil Count(AEC)	0	0	0	0	0	0	0	205	0	135	7
20	RH Factor	0	612	193	0	0	113	1033	56	0	0	558
21	Urine Routine	12762	2253	1381	4181	1993	1061	2615	8630	1610	8683	1576
22	ECG	0	0	0	0	0	40	0	0	868	0	0
23	Dengue Serology	0	518	0	0	0	70	0	0	0	0	0
Total		**87166**	**33294**	**47198**	**40415**	**60215**	**31202**	**36061**	**90833**	**9005**	**119210**	**50366**

2.6 BUDGET AND MISCELLANEOUS STATISTICS FOR DELHI GOVERNMENT DISPENSARIES DURING 2014-15

Sl.No.	Districts/ Schemes	Budget in Rs. Lakhs	Actual Expenditure in Rs. Lakhs	No. of existing Dispensaries	New Dispensaries Opened	Dispensaries Closed	Functional Dispensaries	Disps. in own building	Other Govt. building.	In Rented buildings	Donated building
1	*2*	*3*	*4*	*5*	*6*	*7*	*9*	*10*	*11*	*12*	*13*
1	Central	1914.97	1740.29	31	0	0	31	11	11	8	0
2	East	1387.21	1304.37	19	0	0	19	12	1	6	0
3	North	1321.47	1294.24	19	0	0	19	3	6	8	2
4	North East	703.65	686.84	23	0	0	23	6	0	17	0
5	North West	2221.89	2211.59	35	0	0	35	19	2	14	0
6	South	990.69	985.66	15	0	0	15	7	1	7	0
7	South West	1630.15	1620.06	29	0	0	29	10	4	15	0
8	West	2300.79	2262.93	35	0	0	35	18	3	14	0
9	New Delhi	1322.20	923.40	13	0	0	13	4	5	4	0
10	Shahdara	1352.15	1309.18	23	0	0	23	12	0	11	0
11	South East	918.95	745.98	18	0	0	18	6	2	10	0
12	School Health Scheme	2142.00	2060.00	72	0	0	72	-	-	-	-
13	Mobile Health Scheme	1444.00	1185.49	43	0	0	43	-	-	-	-
	Total	**19650.00**	**18330.03**	**375**	**0**	**1**	**374**	**108**	**35**	**114**	**2**
Directorate of AYUSH											
11	Ayurvedic Disp.	3960.10	3916.03	35	1	0	36	-	-	-	-
12	Unani Disp.			17	1	0	18	-	-	-	-
13	Homeo.Dispensaries	2142.00	1988.62	100	1	0	101	-	-	-	-
	TOTAL	**6102.10**	**5904.65**	**155**	**3**	**0**	**155**	**0**	**0**	**0**	**0**

2.7 (A) DISTRICT WISE DETAILS OF STAFF POSITION SANCTIONED GROUP A AND B POSTS INCLUDING DIRECTORATE OF AYUSH

Sl. No.	Districts/ Scheme		Group A				Group B						
		Medical	Admn.	Planning & Statistics	Accounts	Others	Medical	Nursing	Other Paramed-ical Staff	Admn.	Planning & Statistics	Accounts	Others
	1	2	3	4	5	6	7	8	9	10	11	12	13
1	Central	74	0	0	0	0	0	62	113	13	0	0	0
2	East	45	0	0	0	0	0	0	0	1	1	1	0
3	West	76	0	0	0	0	0	10	0	0	1	1	1
4	North	52	0	0	0	0	0	0	0	0	1	1	0
5	South West	61	0	0	0	0	0	0	0	0	0	0	1
6	North East	30	0	0	0	0	0	0	0	0	1	1	0
7	North West	76	0	0	0	0	0	0	0	0	5	0	0
8	South	36	0	0	0	0	0	5	0	0	4	2	0
9	New Delhi	32	0	0	0	0	0	5	0	0	0	0	0
10	Shahdara	54	0	0	0	0	0	0	0	0	0	0	0
11	South East	32	0	0	0	0	0	0	0	0	0	0	0
12	School Health Scheme	21	0	0	0	0	0	0	0	0	0	0	0
13	Mobile Health Scheme	35	0	0	0	0	0	0	0	0	0	0	0
	Directorate of AYUSH												
14	Ayurved & Unani Wing	52	2	1	0	0	5	0	0	4	2	2	0
15	Homeopathic Wing	111	0	0	0	0	0	0	0	0	2	1	0
	TOTAL	**787**	**2**	**1**	**0**	**0**	**5**	**82**	**113**	**18**	**17**	**9**	**2**

2.7 (B) DISTRICT WISE DETAILS OF STAFF POSITION SANCTIONED GROUP C POSTS INCLUDING DIRECTORATE OF AYUSH

Sl. No.	Districts/ Scheme	Nursing	Paramedical	Admn.	Planning & Statistics	Accounts	I.T.	Others
1	2	3	4	5	6	7	8	9
1	Central	0	0	0	0	0	0	177
2	East	34	80	6	3	0	0	84
3	West	49	115	11	0	0	0	0
4	North	36	99	7	2	0	0	92
5	South West	47	93	12	0	0	0	147
6	North East	18	52	10	0	0	0	107
7	North West	60	116	7	0	0	0	174
8	South	19	47	6	0	0	0	73
9	New Delhi	19	54	5	0	0	0	73
10	Shahdara	39	76	4	0	0	0	126
11	South East	19	39	4	0	0	0	92
12	School Health Scheme	61	48	8	0	0	0	64
13	Mobile Health Scheme	35	35	4	0	0	0	70
	Directorate of AYUSH							
14	Ayurvedic & Unani Wing	0	11	0	0	0	0	28
15	Homeopathic Wing	0	106	9	0	0	0	73
	TOTAL	436	971	93	5	0	0	1380

2.8- (A) BASIC STATISTICS OF DELHI GOVERNMENT HOSPITAL DURING 2014-2015

Sl.No.	Name of the Hospital	No. of Beds		No of Patients (OPD)				IPD	Surgeries		Deliveries	
		Sanctioned	Functional	New	Old	Emergency (Total)	MLC Cases		Major	Minor	Normal	Cesarean
1	2	3	4	5	6	7	8	9	10	11	12	13
1	Aruna Asaf Ali Govt.Hospital	100	162	210215	136138	44524	4702	10564	2682	8581	1666	365
2	Acharya Shree Bhikshu Govt. Hospital	100	134	286738	209821	134812	4047	9708	2001	20060	947	375
3	Attar Sain Jain Eye and General Hospital	30	30	90148	34729	0	0	1887	1868	222	0	0
4	Bhagwan Mahavir Hospital	250	250	366614	265289	128738	4364	19665	4280	14560	4206	1691
5	Baba Saheb Ambedkar Hospital	540	540	812354	305241	191409	16076	57675	7812	49704	9417	2666
6	Babu Jagjiwan Ram Memorial Hospital	150	100	350322	238279	247521	17515	13224	956	9121	3247	369
7	Central Jail Hospital	240	240	37291	240257	4683	0	6062	0	10	0	1
8	Chacha Nehru Bal Chikitsalaya	221	221	125790	113269	71000	0	13154	2575	0	0	0
9	Deen Dayal Upadhyay Hospital	640	640	641459	229245	317627	29942	57980	13457	34545	8654	3272
10	Deep Chand Bandhu Hospital	200	0	235983	99536	2743	223	0	0	816	0	0
11	Delhi State Cancer Institute	160	102	14911	248974	1673	0	10008	729	6113	0	0
12	Dr. Hedgewar Arogya Sansthan	200	200	287950	144274	124462	8104	16566	2837	7864	3001	1213
13	Dr. N.C. Joshi Memorial Hospital	30	30	106676	78771	7546	0	661	364	1257	0	0
14	G.B.Pant Hospital`	714	714	99470	638732	10687	0	27565	4409	263	0	0

Sl.No.	Name of the Hospital	No. of Beds		No of Patients (OPD)				IPD	Surgeries		Deliveries	
		Sanctioned	Functional	New	Old	Emergency (Total)	MLC Cases		Major	Minor	Normal	Cesarean
1	2	3	4	5	6	7	8	9	10	11	12	13
15	Guru Gobind Singh Govt. Hospital	100	100	197581	289496	146291	0	16737	3325	44956	3120	1179
16	Guru Nanak Eye Center	212	212	126473	108497	6287	209	-	8101	0	0	0
17	Guru Teg Bahadur Hospital	1512	1456	1021247	632445	154533	23180	81439	18664	50582	13457	3477
18	Institute of Liver & Biliary Sciences	180	142	28795	47001	6980	17	5458	936	295	0	0
19	Institute Of Human Behaviour and Allied Sciences	500	346	67957	368331	33827	0	3851	168	81	0	0
20	Janak Puri Super Speciality Hospital	300	26	35281	96829	0	0	560	0	0	0	0
21	Lal Bahadur Shastri Hospital	100	114	474357	249124	384125	24998	22831	3264	46529	5851	1369
22	Lok Nayak Hospital	1847	1847	625323	447843	292342	13245	108508	13912	24133	9587	2629
23	Maharishi Valmiki Hospital	150	150	237906	72453	85922	0	8832	1092	7085	1470	86
24	Pt. Madan Mohan Malviya Hospital	100	100	303360	188787	215302	0	15427	1809	12815	2901	485
25	Maulana Azad Institute of Dental Sciences	10	10	178898	155909	0	0	136	121	1650	0	0
26	Poor House Hospital	60	20	5769	8281	0	1248	8	0	0	0	0
27	Rajiv Gandhi Super Speciality Hospital	650	0	13748	24345	0	0	0	0	0	0	0
28	Rao Tula Ram Memorial Hospital	100	114	306494	151227	102626	7097	10584	1736	3069	2146	318

Sl.No.	Name of the Hospital	No. of Beds		No of Patients (OPD)				IPD	Surgeries		Deliveries	
		Sanctioned	Functional	New	Old	Emergency (Total)	MLC Cases		Major	Minor	Normal	Cesarean
1	2	3	4	5	6	7	8	9	10	11	12	13
29	Sardar Vallabh Bhai Patel Hospital	50	51	252156	129942	50223	0	3643	1142	14449	730	63
30	Satyawadi Raja Harish Chandra Hospital	200	200	381363	157642	58995	4399	5211	690	4278	416	46
31	Sanjay Gandhi Memorial Hospital	300	300	495708	148673	273155	26226	44323	3662	26718	7965	1873
32	Jag Pravesh Chander Hospital	210	135	497771	246756	150844	5847	13416	442	11469	2823	541
33	Sushruta Trauma Cente	49	70	0	13971	16929	4897	4569	1217	2496	0	0
34	Sri Dadadev Matri Avum Shishu Chikitsalya	64	92	142007	66941	36806	0	15788	1412	684	5692	1112
35	Health Center Cum Maternity Hospital, Kanti Nagar	30	15	32529	16058	0	0	1019	0	0	339	0
	Homeopathic/Ayurvedic/Unani Hospitals											
36	A & U Tibbia College & Hospital	300	300	136272	99043	0	0	35023	142	5294	537	0
37	B.R. Sur Homepathic Medical College	50	50	25436	39251	0	0	428	0	0	0	0
38	Chowdhary Brahm Prakash Ayurvedic Charak Sansthan	210	210	101466	166347	NA	NA	6162	42	2144	19	0
39	Nehru Homeopathic Medical College	100	100	80057	105211	0	0	1018	0	394	0	0
	TOTAL	**10959**	**9523**	**9433875**	**7012958**	**3302612**	**196336**	**649690**	**105847**	**412237**	**88191**	**23130**

2.8- (B) BASIC STATISTICS OF DELHI GOVERNMENT HOSPITAL DURING 2014-15

Sl. No.	Name of the Hospital	Lab. Investigations			X-Ray Investigations			Other Investigations			No. of Autopsies done	No. of Dialysis Done	Blood Bank Statistics	
		Blood	Urine	Others	General	Dental	Spl. Inv.	Ultra sound	ECG	Audio-metry			No. of units collected	No. of units issued
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	Aruna Asaf Ali Govt.Hospital	204913	20242	1603	27510	0	07	581	13966	2398	2477	0	-	373
2	Acharya Shree Bhikshu Govt. Hospital	424496	52208	3786	44880	3811	0	8734	10290	1637	0	0	520	422
3	Attar Sain Jain Eye and General Hospital	16860	3760	0	0	0	0	210	3801	0	0	0	0	0
4	Bhagwan Mahavir Hospital	557351	68503	32351	58882	1548	204	15881	12352	1740	0	0	0	1160
5	Baba Saheb Ambedkar Hospital	905321	24362	14568	106861	3231	405	13171	33999	3709	779	737	11265	16464
6	Babu Jagjiwan Ram Memorial Hospital	337216	30609	6974	42612	854	75	5839	13450	2777	1214	0	0	300
7	Central Jail Hospital	294820	41590	8295	15081	910	3420	0	2089	0	0	0	0	0
8	Chacha Nehru Bal Chikitsalaya	499379	22968	37277	46229	0	672	7933	0	0	0	651	-	4006
9	Deen Dayal Upadhyay Hospital	2069105	209618	87384	102226	8770	52570	39980	118247	3635	1650	200	19634	36716
10	Deep Chand Bandhu Hospital	108864	5920	3272	16641	381	0	0	4923	729	0	0	0	0
11	Delhi State Cancer Institute	1031045	6883	0	31292	0	38732	19416	10444	0	0	0	0	0
12	Dr. Hedgewar Arogya Sansthan	814455	47461	14053	60310	0	10	3183	29375	2423	0	0	3546	2982
13	Dr. N.C. Joshi Memorial Hospital	153345	21029	8114	9393	0	0	5524	2849	0	0	0	0	0
14	G.B.Pant Hospital	2438329	63101	411933	576351	0	1495	18723	37165	0	0	0	12531	12115
15	Guru Gobind Singh Govt. Hospital	274958	18058	229	56210	0	0	0	5166	2998	0	0	0	0
16	Guru Nanak Eye Center	0	0	0	0	0	0	0	0	0	0	0	0	0

Sl. No.	Name of the Hospital	Lab. Investigations			X-Ray Investigations			Other Investigations			No. of Autopsies done	No. of Dialysis Done	Blood Bank Statistics	
		Blood	Urine	Others	General	Dental	Spl. Inv.	Ultra sound	ECG	Audio-metry			No. of units collected	No. of units issued
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
17	Guru Teg Bahadur Hospital	2173377	116640	473418	193021	10341	1659	46792	84236	0	1769	2429	30847	53298
18	Institute of Liver & Biliary Sciences	561075	26596	86687	24825	0	1515	17876	6234	0	0	7361	22135	19146
19	Institute Of Human Behaviour and Allied Sciences	545902	8923	7967	8335	0	0	3250	4940	0	0	0	0	40
20	Janak Puri Super Speciality Hospital	145872	3911	659	13894	0	0	0	15533	0	0	0	0	0
21	Lal Bahadur Shastri Hospital	540355	104846	3779	91412	2483	0	12076	20203	1909	779	0	2170	2053
22	Lok Nayak Hospital	5459127	112843	245653	312241	0	4199	55998	180631	8910	1261	4921	22902	37646
23	Maharishi Valmiki Hospital	264316	18975	11583	0	1424	40269	3603	12963	0	0	0	0	0
24	Pt. Madan Mohan Malviya Hospital	540243	11602	20997	29193	0	0	7542	10006	1987	0	0	0	409
25	Maulana Azad Institute of Dental Sciences	5232	0	0	0	34005	0	0	0	0	0	0	0	0
26	Sewa Kutir Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0
27	Rajiv Gandhi Super Speciality Hospital	95683	3092	702	0	0	0	0	5548	0	0	0	0	0
28	Rao Tula Ram Memorial Hospital	286546	24115	3075	34835	0	45	7921	11982	883	310	0	271	446
29	Sardar Ballabh Bhai Patel Hospital	88518	9282	527	19968	0	0	1987	7943	3313	0	0	0	0
30	Satyawadi Raja Harish Chandra Hospital	647468	7831	5691	61672	0	0	0	9522	1164	0	0	196	196
31	Sanjay Gandhi Memorial	476169	71681	472271	96959	1679	75	10394	23324	2087	1234	0	4223	5058

Sl. No.	Name of the Hospital	Lab. Investigations			X-Ray Investigations			Other Investigations			No. of Autopsies done	No. of Dialysis Done	Blood Bank Statistics	
		Blood	Urine	Others	General	Dental	Spl. Inv.	Ultra sound	ECG	Audio-metry			No. of units collected	No. of units issued
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
	Hospital													
32	Jag Pravesh Chander Hospital	313377	42014	11266	42887	0	0	4058	12644	3381	0	0	0	0
33	Sushruta Trauma Cente	34958	74	0	57407	0	4617	1080	1572	0	0	0	1640	1783
34	Sri Dadadev Matri Avum Shishu Chikitsalya	234238	93041	619	4627	0	0	03	2430	0	0	0	245	204
35	Health Center Cum Maternity Hospital, Kanti Nagar	14825	4031	0	0	0	0	0	0	0	0	0	0	0
	Homeopathic/Ayurvedic/Unani Hospitals													
36	A & U Tibbia College & Hosp.	139741	3135	180	1050	0	0	0	0	0	0	0	0	0
37	B.R. Sur Homepathic Medical College	3803	2023	142	2559	0	0	351	143	0	0	0	0	0
38	Chowdhary Brahm Prakash Ayurvedic Charak Sansthan	36039	1785	676	8029	0	0	2748	286	0	0	0	0	0
39	Nehru Homeopathic Medical College	18567	4170	789	0	0	0	1219	0	0	0	0	0	0
	TOTAL	**22755888**	**1306922**	**1976520**	**2197392**	**69437**	**149969**	**316073**	**708256**	**45680**	**11473**	**16299**	**132125**	**194817**

2.9 BUDGET & EXPENDITURE OF DELHI GOVT. HOSPITALS FOR THE YEAR 2014-15

Sl.No.	Name of the Hospital	Budget Estimate (Rs. in lac)		Actual Expenditure (Rs. in lac)		Total Expenditure (Rs. in lac)
		Plan	Non-Plan	Plan	Non-Plan	
1	2	3	4	5	6	7
1	Aruna Asaf Ali Govt.Hospital	1185.00	2542.00	1084.50	2046.00	3130.50
2	Acharya Shree Bhikshu Govt. Hospital	3114.00		2930.00		2930.00
3	Attar Sain Jain Eye and General Hospital	1670.00	3770.00	1106.60	3450.90	4557.50
4	Bhagwan Mahavir Hospital	3849.00		3535.00		3535.00
5	Baba Saheb Ambedkar Hospital	5345.00	6511.00	2168.00	6240.80	8408.80
6	Babu Jagjiwan Ram Memorial Hospital	3372.50		3255.50		3255.50
7	Central Jail Hospital	2070.00		2039.00		2039.00
8	Chacha Nehru Bal Chikitsalaya	Not provided	Not provided	Not provided	Not provided	Not provided
9	Deen Dayal Upadhyay Hospital	177.80		174.64		174.64
10	Deep Chand Bandhu Hospital	2700.00		1353.00		1353.00
11	Delhi State Cancer Institute	10500.00		7913.00		7913.00
12	Dr. Hedgewar Arogya Sansthan	4300.00		4169.94		4169.94
13	Dr. N.C. Joshi Memorial Hospital	1257.00		935.00		935.00
14	G.B.Pant Hospital	11998.00		7443.80		7443.80
15	Guru Gobind Singh Govt. Hospital`	1180.00	2676.00	1101.00	2530.00	3631.00
16	Guru Nanak Eye Center	1000.00		654.92		654.92
17	Guru Teg Bahadur Hospital	11075.00	14196.00	8419.21	13997.33	22416.54
18	Institute of Liver & Biliary Sciences	7200.00		2469.30		2469.30
19	Institute Of Human Behaviour and Allied Sciences	8000.00		7001.00		7001.00
20	Janak Puri Super Speciality	8000.00		1491.00		1491.00

Sl.No.	Name of the Hospital	Budget Estimate (Rs. in lac)		Actual Expenditure (Rs. in lac)		Total Expenditure (Rs. in lac)
		Plan	Non-Plan	Plan	Non-Plan	
1	2	3	4	5	6	7
	Hospital					
21	Lal Bahadur Shastri Hospital	4899.00		4827.00		4827.00
22	Lok Nayak Hospital	9400.00	2304.00	9171.00	2263.00	11434.00
23	Maharishi Valmiki Hospital	1045.00	2483.00	940.00	2300.00	3240.00
24	Pt. Madan Mohan Malviya Hospital	2787.00		2621.13		2621.13
25	Maulana Azad Inst.of Dental Sciences	Not provided	Not provided	Not provided	Not provided	Not provided
26	Sewa Kutir Hospital	Not provided	Not provided	Not provided	Not provided	Not provided
27	Rajiv Gandhi Super Speciality Hospital	Not provided	Not provided	Not provided	Not provided	Not provided
28	Rao Tula Ram Memorial Hospital	3208.00		2771.00		2771.00
29	Sardar Vallabh Bhai Patel Hospital	2446.00		2301.00		2301.00
30	Satyawadi Raja Harish Chandra Hospital	Not provided	Not provided	Not provided	Not provided	Not provided
31	Sanjay Gandhi Memorial Hospital	4865.00		4965.70		4965.70
32	Jag Pravesh Chander Hospital	1665.00	1991.00	1459.57	1879.63	3339.20
33	Sushruta Trauma Cente	Expenditure with LNJP Hospital				
34	Sri Dadadev Matri Avum Shishu Chikitsalya	1900.00		1756.00		1756.00
35	Health Center Cum Maternity Hospital, Kanti Nagar	3850.00		3684.00		3684.00
Homeopathic/Ayurvedic/Unani Hospitals						
36	A & U Tibbia College & Hospital	2955.00		2880.00		2880.00
37	B.R. Sur Homepathic Medical College	849.00		690.21		690.21
38	Chowdhary Brahm Prakash	1900.00		1638.00		1638.00

Sl.No.	Name of the Hospital	Budget Estimate (Rs. in lac)		Actual Expenditure (Rs. in lac)		Total Expenditure (Rs. in lac)
		Plan	Non-Plan	Plan	Non-Plan	
1	2	3	4	5	6	7
	Ayurvedic Charak Sansthan					
39	Nehru Homeopathic Medical College	1298.00		1217.00		1217.00

Chapter 3

DELHI GOVERNMENT DISPENSARIES

Introduction

Primary health care is most important component of health care services for the citizens. This view has been equally echoed by Bhore Committee Report (1948) and accordingly this aspect has been given due consideration in National Health Policy. Directorate General of Health Services, Government of NCT of Delhi is providing primary health care services to the people of Delhi through a network of dispensaries and mobile health clinics throughout Delhi to meet the primary health care needs of citizens of Delhi.

Dispensaries (Health Centres) under DGHS are its front-line health outlets that provide treatment for common ailments including provision of essential medicines to all the persons coming to these dispensaries and also undertake various preventive and promotive activities. The vision of this directorate is to promote these front-line health outlets as the backbone of health services and overall health development and to actively involve these outlets in bottom up planning.

Functioning of Dispensaries

Planning Branch of this Directorate is responsible for planning and opening of new dispensaries, matter related to identification of area, allotment of land, planning and construction of building etc. and financial aspect are being taken care of by this branch. The operation of dispensaries in this Directorate is based upon district pattern. In 2014-2015, there are 11 districts functioning under the administrative control of Chief District Medical Officers. Geographically these districts correspond with the revenue districts.. Each District is headed by a CDMO for monitoring the functioning of District. Each District has got its own chain of Dispensaries.

Facilities at Dispensaries

The facilities provided by these dispensaries are:

- General OPD for treatment of common ailments
- Free distribution of prescribed essential medicines.
- Treatment of minor injuries and dressing etc.
- Basic emergency care during working hours.
- Laboratory Services (Routine Lab. Services)
- Immunization and Family Welfare activities.
- Health Education
- Malaria Clinic (in selected dispensaries only).
- DOTS Center / Microscopy Center (in selected dispensaries only).

Table 3.1 District wise distribution of Delhi Govt. Dispesnaries (Allopathic) as on 31.3.2015

District	No. of Health Centres functioning on 31.3.2014	New Health Centres opened during 2014-15	Health Centres closed during 2014-15	No. of Health Centres functioning on 31.3.2015
Central	31	0	0	31
East	19	0	0	19
New Delhi	13	0	0	13
North	19	0	0	19
North-East	23	0	0	23
North West	35	0	0	35
Shahdara	23	0	0	23
South	15	0	0	15
South-East	18	0	0	18
South-West	29	0	0	29
West	35	0	0	35
Total	260	0	0	260

Table 3.2 Distribution of new allopathic dispensaries opened/ closed since 2003-04

Year	New Health Centres opened	Closed	Total functioning at end of Financial Year
2003-04	9	5	168
2004-05	9	3	174
2005-06	9	2	181
2006-07	5	2	184
2007-08	6	2	188
2008-09	23	2	209
2009-10	12	2	219
2010-11	16	1	234
2011-12	14	0	248
2012-13	08	0	256
2013-14	04	0	260
2014-15	00	0	260

Table 3.3 New dispensaries/seed PUHCs opened in 2014-15

S.No.	Name of Dispensary	Date of opening	District
1.	Nil	Nil	Nil

Chapter 4

MOBILE HEALTH SCHEME

Introduction

The Directorate General General of Health Services is major nodal agency of Govt. of NCT of Delhi which provides Primary Health care facilities to the residents of Delhi. Directorate General of Health Services realizes that no amount of drugs and curative care provided to J.J.Clusters can control their pathetic condition until or unless other sectors also contribute with DGHS to improve overall physical quality of life. As a result, the mobile Health Scheme was established in 1989 as an innovative and effective means of providing primary health care to the JJ clusters in Delhi which chiefly comprised of the poor migrant workers and their family at their doorsteps and now which encompasses a whole lot of other services and initiatives. To start with a fleet of 20 mobile dispensaries was launched covering different J.J. Clusters all over Delhi on weakly basis in1989. Due to paucity to resources and keen interest shown by some NGO's Delhi Government invited NGO sector to participate in the scheme and as a result, a fleet of 90 mobile Dispensaries started providing health care to the J. J. Clusters / unserved areas / construction sites.

Mobile Health Scheme has been strengthened to a fleet of 90 mobile vans to provide basic health care to JJ cluster /unserved areas/construction sites.

Onward June 2014, the involvement of NGO was discontinued as per the decision taken by Govt. of NCT of Delhi. As a result now only 43 Mobile dispensaries are functioning and is managed by staff of MHS.

The services of Mobile Health Scheme can be divided into three major categories:

1. Primary Treatment
2. Preventive and Precautionary
3. Health Education and Rehabilitation.

Modus Oprendi

Teams report to their control rooms as per schedule and after marking attendance the teams collect their medicines and materials for the day and leave the control room in their allotted vehicle to the designated JJ cluster. On reaching the J J clusters, the Mobile van parks itself at pre-determined regular spot and renders health care services for two hours. After providing health care services in that particular J J cluster the team moves to the second J J cluster allotted to it. After completion of scheduled work in second J J cluster, the mobile team returns to the control room. After reaching the control room, the team prepares the daily report and balance of the medicines and other records. After that the staff disburse for the day from the control room. Indents for the medicines are given on

monthly basis. These officers send Morbidity Data Report, Vehicle Duty Report and Immunization & Contraception Report monthly to the Chief Medical Officer, Mobile Health Scheme for compilation and onward transmission as required.

Organizational structure of Mobile Health Scheme at a glance

Head Office-Delhi Government Dispensary Building, B-Block, Prashant Vihar, Delhi-85.

Zones of Mobile Health Scheme

Zone	**Location**
North Zone	Delhi Government Dispensary, SahazadaBagh, Delhi.
East Zone	Delhi Government Dispensary, Dilshad Garden, Delhi.
West Zone	Delhi Government Dispensary, Prashant Vihar, Delhi.
South Zone	Delhi Government Dispensary, Ber Sarai, Delhi.

Drug store of Mobile Health Scheme is located at Delhi Government Dispensary Building, B-Block, Prashant Vihar, Delhi .

No. of Mobile Health Dispensaries functioning under MHS:

Number of mobile dispensaries sanctioned	45
Number of mobile dispensaries running	43

Hired Commercial vehicles with seating capacity of 08 or above are deployed as Mobile Van Dispensaries. A sign board and banner are displayed on these vehicles at time of functioning of Mobile Van Dispensaries.

A mobile health team consists of following members:

Designation	Number	Functions/Duties
Medical Officer	01	Examination of patient, to prescribe the medicines, advises of Immunization and relevant record keeping.
Public Health Nurse/ Auxilliary Nurse Midwife	01	To assist the medical officer while examination, Immunization, Health Education.
Pharmacist	01	To store and dispense the medicines and relevant record keeping.
Dresser	01	Dressing and to assist the PHN
Nursing Orderly	01	Other supportive activities.

FINANCIAL ACHIEVEMENTS OF MOBILE HEALTH SCHEME:

Year	Sanctioned Amount (Rs.)	Expenditure(Rs.)	Expenditure per patient (Rs.)
2000-01	36440000	35772499	22.08
2001-02	43021000	42672170	24.06
2002-03	42518000	42419058	21.58
2003-04	47230000	46809969	24.23
2004-05	51810000	51572286	26.54
2005-06	54200000	53119502	26.20
2006-07	55600000	53778989	30.71
2007-08	66575000	63568379	31.44
2008-09	105200000	85563987	34.86
2009-10	110950000	110221959	47.83
2010-11	111000000	97682925	40.98
2011-12	125500000	119732579	56.11
2012-13	142515000	132463638	62.34
2013-14	148290000	123658476	82.56
2014-15	144400000	118549768	147.05

STATISTICAL PREVIEW OF MOBILE HEALTH SCHEME:

A year wise details of the number of Mobile Van Dispensaries run by NGOs in collaboration with MHS and Government staff.

Year	Number of Mobile Van Dispensaries run			Number of patients attended by Mobile Van Dispensaries		
	NGO	Govt. staff	Total	NGO	Govt. Staff	Total
2000-01	28	42	70	653858	966535	1620393
2001-02	21	52	73	644632	1129188	1773820
2002-03	25	44	69	781969	1183451	1965420
2003-04	26	46	72	713980	1217828	1931808
2004-05	22	46	68	681772	1261272	1943044
2005-06	25	46	71	773700	1253520	2027220
2006-07	17	45	62	553202	1197837	1751039
2007-08	24	45	69	679896	1341859	2021755
2008-09	30	45	75	900424	1554120	2454544
2009-10	43	45	88	814518	1490163	2304681
2010-11	43	45	88	859669	1523851	2383520
2011-12	45	45	90	755992	1377984	2133976
2012-13	45	45	90	690144	1434856	2125000
2013-14	40	45	85	747659	750024	1497683
2014-15	0	43	43	0	806188	806188

The sanctioned posts of Mobile Health Scheme:

S No.	Name of the post	Sanctioned Posts	Filled	Vacant
1.	Medical Officer	35	34	01
2.	Public Health Nurse (PHN)	20	17	03
3.	Pharmacist	35	32	03
4.	Auxiliary Nurse Midwife (ANM)	15	15	0
5.	Dresser	35	30	05
6.	NO/Peon/Attendant	35	18 + 16 (outsource)	1
7.	Head Clerk	1	1	0
8.	UDC	1	1	0
9.	LDC	2	1	1
	Total	**179**	**165**	**14**

Chapter 5

SCHOOL HEALTH SCHEME

The Directorate General of Health Services started School Health Scheme in March 1979 with six school health clinics initially. The scheme later expanded to provide comprehensive health care services to the school going children. The School Health Clinics were established in the school premises itself for easy accessibility by children. These were planned to cover the children studying in Government and Government Aided Secondary schools.

The facilities under the scheme are provided through a network of School Health Clinics and School Referral Centres.

Objectives of School Health Scheme

- Ascertaining health status of children studying in Govt. schools till XII class
- Screening for deficiencies, diseases and disabilities.
- Counseling & treating wherever deficiencies and diseases are detected.
- Referral wherever required to district FRU/tertiary hospitals.
- Increasing health awareness and inculcating healthy behaviour.
- Facilitating continuum of health care by creating data base.
- Synergizing with relevant programmes of Education Deptt.(Yuva) & Health Deptt. (Blindness Control, Deafness Control, & AIDS Programme etc.)

Other Achievements of the scheme

- **District half day training -** Academic and skill oriented half day trainings of the Officers and Officials was held on every Second Saturdays of the month in 11 Districts for strengthening the component of School Health Scheme.

- **Coordination with Directorate of Education -** The WIFS reporting module on DOE website has been upgraded in coordination with Directorate of Education.

- **IEC Activities-** Addressing the school children during morning assemblies, addressing Parent Teacher's Meetings, poster making, Quiz competitions, skits, slogan writings, elocutions, outdoor publicity campaign on issues like WIFS, Health awareness, Substance abuse, De-worming and distribution of Print IEC to the target population in the form of Handouts, Folder, and Posters etc.

- **Screening for substance abuse -** As per the recommendation of Juvenile Justice Committee, all Delhi Govt. & Aided school students were screened & counseled.

- **Spectacle distribution -** Total students screened under Nidarshan programme for Refractive Error-42000,Total students found with Refractive Error-7703 & Total spectacles distributed -4721

- **Weekly Iron Folic Acid Supplementation Programme (wifs - Ongoing Programme) -** WIFS programme has been extended up to class XII in all Govt. and Govt. Aided schools of Directorate of Education. The various motivational exercises to be conducted by teams of School Health Scheme and Officers/ Officials of Directorate of Education. Awareness talk on WIFS was given by the Medical Teams in the Morning/ Evening assemblies. Parents were also motivated by the teams in PTMs.

- **Health Clubs -** School health clubs were strengthened in each school which played a major role to educate the peers regarding various health issues.

CHAPTER 6

FUNCTIONS OF BRANCHES AND STATE SCHEMES

6.1. PLANNING BRANCH

Achievements of Planning Branch

The Planning Branch of this Directorate coordinates with all Programme Officers, CDMOs, CMO(MHS), Incharge SHS for monitoring respective Plan Schemes, Plan expenditure, preparation of BE, RE, targets and achievements. It also coordinates with Planning and Finance Department GNCTD for related policy matters on Plan Schemes.

In Delhi, the main thrust under the health sector is to provide preventive, curative and promotive health care services through a network of dispensaries and hospitals in deficient areas in order to provide better health care facilities at the doorstep of the people.

Construction work of 08 dispensary buildings are in final stage and will be opened for public in due course of time.

Budgeting and Planning

During the year 2014-15, there were 13 plan schemes under Medical Sector and 11 plan Schemes in Public Health sector. The budget allotment under medical sector in revenue Head was Rs. 7454.00 lakh and Rs. 40165.00 lakh in Capital Head.

In Public Health Sector the budget allotment under Revenue Head is Rs. 977.00 Lakh.

The actual expenditure for 2014-15 in Revenue Head (Plan Scheme) is 4531.65 lakh and expenditure in Public Health Sector is Rs. 647.68 lakh (Plan).

6.2. HOSPITAL CELL

Introduction

The planning/establishment of different hospitals are being taken care of by Hospital Cell functioning in this Directorate under direct supervision of Director General, Health services. The responsibilities of Hospital Cell include planning and commissioning of hospital, which include site inspection, monitoring and co-ordination with different Govt./Semi-Govt./Autonomous/Pvt. Agencies etc. related to establishment of hospitals. The financial aspects of these upcoming hospitals are also being taken care of by Hospital Cell, like preparation of SFC/EFC memo for cost estimates of hospitals which include estimates of manpower, equipments and other vital components required for establishment of hospital.

The broad functioning of Hospital Cell involves in close coordination with executing agencies and undertakes site inspection etc. along with the engineers. The selected agencies then appoint architects and hospital consultant for preparation of building plans etc. The Director, Health Services approves the preliminary drawings once the detail drawings are prepared by the consultants which are then submitted for approval of DDA/MCD. Once all approvals are in place, the estimated cost is worked out and proposal submitted to Expenditure Finance Committee (EFC) for approval of the project. The Hospital Cell prepares the EFC Memorandum & Cabinet Note including cost estimates, estimates of manpower, equipments etc. In addition to above, the Hospital Cell has been coordinating with secondary care hospitals of Delhi Govt. for various hospital related works.

Other responsibilities under hospital cell:-

i) Uniform user charges levied for various medical services In Delhi Govt. hospitals.
ii) Stretcher Bearer Services
iii) Solar Power Panel in Govt. hospitals.
iv) Plantation issues in Hospitals.

Data base of all hospital projects of DGHS is maintained at Hospital Cell.

Status of Various Hospital Projects-The status of various hospital projects under the Cell during 2014-15 is as under:

Ongoing Hospital Projects:-

(i) 264 beds Hospital at Ambedkar Nagar

52.62% of the work has been completed. Creation of posts & equipment planning is under process. Approval for 137(regular) and 46(outsourced) post has been given for the first phase.

(ii) 823 beds hospital at Sector-9, Dwarka

Foundation work is in progress.

(iii) 262 beds hospital at Burari:

54% work has been completed. Creation of posts and equipment planning is in process. . Approval for 137(regular) and 46(outsourced) post has been given for the first phase.

(iv) 160 beds hospital at Sarita Vihar :

All statutory approvals have been obtained. Tender work is under process.

Upcoming Projects:-

(v) 225 beds hospital at Chattarpur :

Swapping of land with forest Department is under process in joint consultation with TTE Department.

(vi) 200 beds hospital at Keshavpuram :

Request to allot additional land adjacent to the allotted land for better connectivity to the 45 mt. metro road has been placed to DDA(IL).

(vii) 100 beds hospital at Naraina :

This hospital comprising of General Ortho cum Eye hospital cum Mother & Child care has been approved by Secy(Health).

(viii) 200 beds hospital at Vikaspuri :

Modified PE of Rs. 231.11Cr. has been sent to Secy(Health) for approval.

(ix) 100 beds hospital at Bindapur :

100 bedded State of the art Paediatric hospital linked to Dada Dev Matri & Shishu Chakitsalya.

(x) 200 beds hospital at Jwalapuri :

Letter has been written to DUSIB regarding amended ownership documents.

(xi)208 beds hospital at Madipur :

Fresh PE for Rs. 175.42 Cr. as per DSR 2104 minus 12% has been submitted on 07/04/2015. An additional piece of land measuring 1.18 acre has been offered for access to main road which will provide a better connectivity & increased FAR of 375.

Land pool hospital project :-

(xii) 200 beds hospital at Siraspur :

Environmental clearance awaited. It is a proposed Medical College & Trauma Centre where the capacity of beds may be increased from 200 to 500.

(xiii) Hospital project at Sector-17, Dwarka :

This land has been kept for future use by the Health Department.

(xiv) Office complex at Raghubir Nagar :

Fresh medical functional programme of various offices has been sent for preparation of preliminary estimate by the concerned Engineer.

(xv) Hospital project at Deendarpur :

Construction of fresh boundary wall is to be done. Preliminary estimate to be submitted by PWD.

6.3 NURSING HOME CELL

INTRODUCTION

Nursing Home Cell in Directorate General of Health Services was established to register the private nursing homes and hospitals as per provisions of Delhi Nursing Home Registration Act, 1953 and the rules thereunder. Thereafter rules have been amended from time to time depending on the need and various suggestions given by stakeholders. In the initial period of its establishment, the main activities of the cell were to receive applications for registration and to register them depending on the fulfillment of criteria as per above mentioned act and rules. The registration was used to be given valid for one year. However, the nursing home cell was later on entrusted with various other tasks at different times related to private nursing homes and hospitals. The cell has taken very active role for the regulation of private establishments, proposing amendments in rules based on the inputs from stakeholders, implementation of directions of Hon'ble Courts and provision of free treatment to the economically weaker sections (EWS) of the society. It also issues health advisories for information to the owners of private hospitals from time to time. The EWS is now being looked after separately.

Presently, the Nursing home Cell receives applications for new registration from private nursing homes/hospitals and after it is found fit for registration, issues the registration valid for three years. The renewal of registration is done after three years. The cell carry out regular inspections to see that requisite standards are maintained in these registered Nursing Homes.

Major Responsibilities assigned to the cell include:-

1. Registration & Renewal of registration of private Nursing Homes/hospitals under Delhi Nursing Home Registration Act 1953 and the rules amended from time to time.
2. Various Court Case matters pertaining to Pvt. Nursing Homes.
3. Complaints against Private Nursing Homes in Delhi.
4. Information under RTI Act 2005
5. Recommendation to Excise Department for procurement of Narcotic Drugs by Private Nursing Homes.
6. Other Miscellaneous tasks like providing material for Parliament/ Assembly questions, liasioning with Delhi Pollution Control Committee and various other statutory bodies, a bridge between Government and Private Hospitals, furnishing of information about private establishments to the public and to higher authorities etc.

REGISTRATION OF NURSING HOMES

Delhi Nursing Home Registration Act, 1953 was once amended in 2003 & the Rules were amended in the year 1966, 1992 and then in the year 2011. The copy of Act and rules is available on the website of Health and Family welfare Delhi. The owners/applicants of private nursing homes and hospitals are registered as per provision under the said act and rules and it is mandatory. After registration the Nursing home Cell also monitors that quality of health services as prescribed under the said act and rules are kept maintained. The forms for registration are available on the website and can be downloaded. Fee for form has been prescribed as Rs 100/- that can be paid while submitting the form for registration alongwith the requisite prescribed fee for registration. The fee is to be paid through demand

draft of any bank in favour of Director Health Service's payable at Delhi.

COMPLAINTS:

It has been observed that while obtaining treatment the general public faces certain difficulties ranging from administrative in nature to deficiencies in services. Any complaint/grievance in regard of nursing home by general public may also be sent to the Director Health Services/Nursing Home Cell. The complaints are examined preliminarily and after gathering the detailed comments from the concerned hospital and also from the complainant, they are dealt accordingly. Depending on the nature of complaint they are also referred to Delhi Medical Council (DMC) for an enquiry and the orders passed by DMC are implemented. The complaints are also received through PGMS, CPGRAMS, NHRC & PGC etc. There are around 250 -300 complaints received every year which are dealt in time bound manner.

INFORMATION UNDER RTI ACT :

The cell receives more than 400 applications in a year to receive information under RTI Act to know various kinds of details.

HUMAN RESOURCE FOR NURSING HOME CELL : The cell is highly short of staff and carries out all these activities with the help of only two SAG level officers and two Dealing assistants. This causes delay in execution of work at times which is beyond control.

Status of Nursing Home Registrations (2014-15)

- Total No. of Registered Nursing Homes (as on 31.03.2015) : 981
- Total No. of New Registrations during the year (2014-15) : 51
- Total No. of Registrations cancelled during the year(2014-15) : 09

6.4 PATIENT WELFARE CELL

Monitoring of free treatment to the eligible patients of EWS category

The Special Committee constituted by the Hon'ble High Court of Delhi revised the eligilibility criteria of EWS patients is linked to the minimum wages of an unskilled worker. The above patients are eligible for free treatment on 10% of total bed capacity and to 25% patients of total OPD of the hospitals.

For monitoring of Free treatment to the eligible patients of EWS category are being undertaken by the Patient Welfare Cell :

a. Updating the free bed availability on a daily basis.
b. Implementation of Hon'ble High Court of Delhi judgment dated 22.3.2007 in WP (C) No. 2866/2002.
c. Complaints regarding refusal/denial/unsatisfactory free treatment to the eligible patients of EWS category.
d. Compilation of Monthly and Quarterly Report in r/o free treatment.
e. Creation to Web page for updating the data on availability of free beds in these hospitals.
f. Compilation of quarterly report.

Statement in R/O Free Treatment in IPD W.E.F From 01-04-2014 To 31-3-2015 For Eligible patients of EWS Category in Identified Private Hospital

Sno	Name Of The Hospital	Total No Of Beds	Total No Of Free Beds	Total NO OF Admitted Patients	Percentage Of Occupancy Of Free Beds	No. Of Patient Reffered By Govt. Hospitals	No. Of Patient Admitted By The Hospital On Its OWN(SELF)
1	Amar Jyoti Ch. Trust, Karkardooma Delhi-110092	2	1	0	0.00	0	0
2	Action Cancer Hospital, FC-34,A-4 Paschim Vihar	100	10	507	13.89	0	507
3	Kottakkal Arya Vaidya Sala, Karkardooma, Delhi-110092	35	4	179	12.26	0	179
4	Batra Hospital, 1MB Road, Tughlaqabad, Institutional Area, New Delhi-110062	495	50	1694	9.28	0	1694
5	Bimla Devi Hospital Plot No.5, Pkt. B, Mayur Vihar-II, Delhi-110091	20	2	104	14.25	0	104
6	Bhagwan Mahavir Hospital, Sector-14, Extn. Madhuban	26	3	281	25.66	0	281

	Chowk, Rohini, New Delhi-110085						
7	Bensups Hospital, A unit of B.R. Dhawan Memorial Charitable Trust, Bensups Avenue, Sector- 12, Dwarka, Delhi	138	14	100	1.96	0	100
8	Dr. B.L Kapur Memorial Hospital, Pusa Road,New Delhi-110005	400	40	43	0.29	0	43
9	Delhi ENT Hospital & Research Centre, Jasola	25	3	25	2.28	0	25
10	Flt. Lt. Rajan Dhall hospital, sector -B , Pocket-I, Aruna Asaf Ali Marg, Vasant Kunj, New Delhi-70	150	15	487	8.89	0	487
11	Saket City Hospital (A Unit of Gujarmal Modi Hospital & Research Center for Medical Science)	214	21	1938	25.28	0	1938
12	Indian Spinal Injuries Centre, Opp. Police Station, Sector –C, Vasant Kunj, Delhi-110070	145	15	448	8.18	0	448
13	Khosla Medical Institute & Research Society, K.M.I.& R. Centre, Paschim Shalimar Bagh, New Delhi	49	5	40	2.19	0	40
14	Mata Channan Devi Hospital	210	21	1693	22.09	0	1693
15	Maharaja Agrasen Hospital, Punjabi Bagh, New Delhi-26	400	40	2828	19.37	0	2828
16	Mai Kamli Wali Ch. Hospital Plot No.12, J-Block, Community Centre, Rajouri Garden, Delhi-27	45	5	244	13.37	0	244
17	National Chest Institute, Opp. A-133, Niti Bagh,Gautam Nagar, Delhi-110092	15	2	23	3.15	0	23
18	National Heart Institute, 49, Community Centre, East of Kailash, Delhi-	50	5	166	9.10	0	166

	110065						
19	Primus Super Speciality (Veeranwali International Hospital) Chander Gupta Road, Chankapuri, Delhi-110021	13	12	168	3.84	0	168
20	Jeevan Anmol Hospital, Mayur Vihar, Phase-I, Delhi-110091	50	5	94	5.15	0	94
21	Pushpawati Singhania Research Institute for Liver, Renal & Digestive Diseases	106	11	720	17.93	0	720
22	R.B. Seth Jessa Ram Hospital, WEA Karol Bagh, Delhi-110005	88	9	43	1.31	0	43
23	Rockland Hospital, B-33-34, Qutab Institutional Area, New Delhi-110016	110	11	0	0.00	0	0
24	Saroj Hospital, Sector-14, Extn.Near Madhuban Chowk, Rohini, Delhi-110085	170	17	1218	19.63	0	1218
25	Shanti Mukand Hospital, 2 Institutional Area, Vikas Marg Extn. Vikas Marg, Delhi-110092	14	14	174	3.41	0	174
26	Sir Ganga Trust Society, Hospital Marg, Rajinder Nagar, Delhi-110060	675	68	5612	22.61	0	5612
27	Venu Eye Institute & Research Centre	67	20	8539	116.97	0	8539
28	Bhagwati Hospital, C-5/OCF-6, Sector-13, Rohini, Delhi-110085	10	10	218	5.97	0	218
29	Dharamshila Hospital & Research Centre, Vansundhra Enclave, Delhi-110096	200	20	447	6.12	0	447
30	Deepak Memorial Hospital & Medical Research Centre, 5, Institutional Area, Vikas Marg Extn Delhi-110092	100	10	271	7.42	0	271
31	Fortis Escorts Heart Institute, Okhla Road, New Delhi-110025	310	31	393	3.47	0	393

32	Max Balaji Hospital, 108,-A, IP Extension Patparganj Delhi-110092	402	40	2797	19.16	0	2797
33	Max Super Speciality Hospital (A unit of Devki Devi Foundation)	301	30	570	5.21	0	570
34	Jaipur Golden Hospital,2-Institutional Area, Sector-3, Rohini, Delhi-110085	242	24	1904	21.74	0	1904
35	Sri Balaji Action Medical Institute FC-34, A-4, Paschim Vihar New Delhi	200	20	1359	18.62	0	1359
36	Sunder Lal Jain Charitable Hospital, Phase-III, Ashok Vihar, Delhi-110052	168	17	926	14.92	0	926
37	Dr.Vidya Sagar Kaushalya Devi Memorial Health Centre (VIMHANS) Nehru Nagar,Delhi-110065	90	9	69	2.10	0	69
38	Mool Chand Khairati Ram Trust & Hospital, Ring Road Lajpat Nagar, Delhi-110024		0	0		0	0
39	Rajiv Gandhi Cancer Institute & Research Centre, D-18, Sector-V, Rohini, Delhi-110085		0	0		0	0
40	St.Stephen's Hospital Society, Tis Hazari Court, Delhi-110054		0	1		0	1
41	Max Superspecialty Hospital	200	20	833	11.41	0	833
42	Vinayak Hospital	39	4	226	15.48	0	226
43	MGS Super Specialty Hospital	9	8	36	1.23	0	36
44	Jivodaya Hospital	40	4	109	7.47	0	109
45	Sitaram Bharti Institute of Science & Research	59	6	0	0.00	0	0
46	Guru Harkrishan Hospital	45	5	22	1.21	0	22
47	Rockland Hospital	103	10	7	0.19	0	7
48	R L K C(Metro)	100	10	458	12.55	0	458

	Hospital						
49	Jaanki Das Kapoor Memorial Hospital(West)		0	0		0	0
50	Insitute of Liver & Biliary Sciences, Sector–D-I, Vasant Kunj, New Delhi-110070	142	14	0	0.00	0	0
51	Delhi State Cancer Institute, Dilshad Garden, Shahdara, Delhi-110095		0	0		0	0
52	IHBAS, Dilshad Garden, Shahdara, Delhi-110095		0	0		0	0
53	Chaudhary Brahm Prakash Ayurved Charak Sansthan, Khera Dabur, New Delhi-110073	164	16	56	0.96	0	56

6.5 Delhi Arogya Kosh and Delhi arogya Nidhi

Delhi Arogya Kosh

Introduction

"Delhi Arogya Kosh" (DAK) is a registered society which provides Financial assistance **to the extent of Rs. 5 lacs** to the needy eligible patients for treatment of any illness / disease in Government Hospital.

Financial Assistance For Treatment In Government Hospitals:

For **any** illness/treatment/ intervention required by the patient undergoing treatment in a Government Hospital run by Delhi Government or Central Government or Local Bodies or Autonomous Hospital under State Government.

Total No. of patients from 1st April 2014 to 31st March 2015

Delhi Arogya Kosh	Number of Patients	Amount Sanctioned (in Rs.)
	439	36260563

ELIGIBILITY

1. Patient having National Food Security Card.
2. Patient should be a bonafide resident of Delhi for last 3yrs (prior to the date of submission of application)
3. Patient requiring treatment for any illness/ treatment/ intervention in a Government Hospital run by Delhi Govt./ Central Govt./AIIMS /Autonomous Institutes of the State Govt./Local Bodies.

Requisite documents for verification of income:

- National Food Security Card.
- Requisite document for verification of DOMICILE for last 03 years (any one of the

following):

- Domicile Certificate issued from area SDM.
- Ration card
- EPIC (Voter ID)
- Driving License
- Passport
- Extract from the Electoral Roll
- Aadhar Card

Note: In case the patient is a minor, Birth Certificate of the patient and the domicile proof of either of the parent (any one of the aforementioned document)

Where to Apply

Office of the Patient Welfare Cell,Room no 1, 6th Floor, Directorate General of Health Services, F-17, Karkardooma, (Near Karkardooma Court),Delhi-110032. Tel. No. 011-2306851

How to Apply

Application form to be filled by the patient or through his representative alongwith the following documents in person:

- Photocopy of National Food Security Card.
- Original **Estimate certificate** issued by the treating doctor of the concerned Government Hospital indicating the patient's disease and the treatment required alongwith the estimated expenditure of the treatment duly certified by the Medical Superintendent of the said hospital.
- Two **photographs** of the concerned patient, duly attested by the treating doctor of the concerned Government
- Photocopies of the **treatment record**.

Processing of an application

A complete application form alongwith all the requisite documents is processed and sent to Director General Health Services for his approval.

Thereafter, the application needs approval from the Finance Department GNCTD and is thence forwarded to Secretary (Health) and Chairman, DAK for their approvals, respectively.

After the due approvals, the application comes back to Patient Welfare Cell and a cheque of the sanctioned amount is issued in favour of the concerned Government Hospital. The applicant, too, is informed through letter.

DELHI AROGYA NIDHI

Delhi Arogya Nidhi (DAN) is a scheme to provide financial assistance upto Rs. 1.5 lacs to needy patients who has National Food Security Card for treatment of diseases in Government hospitals only.

ELIGILBILITY :

1. Patient should have National Food Security Card.
2. Patient must be resident of Delhi and has to furnish domicile proof of residing in Delhi continuously for last 3yrs (prior to the date of submission of application).
3. Treatment should be from Government Hospital in Delhi.

PROCEDURE FOR APPLYING FOR GRANT

1. Application to be submitted in Patient Welfare Cell, Directorate General of Health Services, 6th Floor, F-17, Karkardooma, Delhi-110032 in prescribed

proforma.

2. Proof of continuous residence in Delhi continuously for last 3yrs (prior to the date of submission of application) . through any one of the following documents :
   - National Food Security Card
   - Electoral Voter's Photo Identity Card (birth certificate in case the patient is a minor).
   - Extract from electoral roll
   - Aadhar Card
3. Original Estimate Certificate duly signed by Consultant/ Medical Superintendent/ Chief Medical Officer of the Hospital.
4. Two photographs of patient, duly attested by the treating doctor.
5. A copy of National Food Security Card.
6. Photocopies of the treatment record.
7. Applicant has to submit an undertaking for his signature verification as given in the application form.

Note: The photocopies of these documents are to be attached with the application and original to be brought at the time of submission of same for verification.

WHERE TO APPLY

Office of the Patient Welfare Cell, Room No 1, 6th Floor, Directorate General of Health Services,F-17, Karkardooma, (Near Karkardooma Court), Delhi.
Total No. of patients from 1st April 2014 to 31st March 2015.

	Number of Patients	Amount Sanctioned
Delhi Arogya Nidhi	68	4275409

6.6 DELHI GOVERNMENT EMPLOYEE'S HEALTH SCHEME

Delhi Government Employees Health Scheme (DGEHS) was launched in April 1997 with a view to provide comprehensive medical facilities to Delhi Government employees and pensioners and their dependants on the pattern of Central Government Health Scheme. All health facilities (hospitals/dispensaries) run by the Govt. of NCT of Delhi and autonomous bodies under Delhi Government, local bodies viz. MCD, NDMC, Delhi Cantonment Board, Central Government and other Government bodies [such as AIIMS, Patel Chest Institute (University of Delhi) etc. are recognized under the scheme. In addition, some Private Hospitals/Diagnostic centers notified from time to time are also empanelled/ empanelled as referral health facilities. The scheme has been modified for the benefit of beneficiaries vide Office Memorandums dated 06.10.2003, dated 21.2.2005, dated 25.10.2007, dated 28.07.2010, 31.01.2012 and 27.04.2012.

OBJECTIVE OF SCHEME

It is a welfare scheme with the objective to provide comprehensive medical care facilities to the Delhi Government employees/ pensioners and members of their families on the lines of CGHS.

STATICSTICS AT A GLANCE

- Serving employees-Approximately 100000.
- Pensioners-Approximately 30000
- Total Beneficiaries- 5 to 6 lakhs
- Total hospitals/diagnostic centers empanelled in NCT-120
- Total hospitals/diagnostic centers empanelled in NCR-31

SALIENT FEATURES OF THE SCHEME

- Comprehensive health Care services to employees and pensioners of Delhi Government through network of Delhi Government dispensaries, Hospitals and Govt./Private empanelled Hospitals and Diagnostic Centers
- All Hospitals/Dispensaries under Delhi Govt., its autonomous bodies and under local self Governance Bodies (viz. Municipal Corporation of Delhi, New Delhi Municipal Council and Delhi Cantonment Board) are recognized for the purpose of medical attendance. Under the scheme it is envisaged to empanel Private Hospitals and Diagnostic Centers in addition to already existing Government facilities for the beneficiaries for availing hospital care and diagnostic facilities. These Private Hospitals/ Diagnostic centers are also envisaged to provide cashless facility in case of medical emergencies to the beneficiaries.
- Based upon CGHS pattern
- Membership is compulsory for all eligible serving employees of GNCTD and for retired employees they have to opt the scheme or Fixed Medical Allowance at the time of retirement.
- Each beneficiary (employee/pensioner) to get attached to Delhi Government Allopathic Dispensary/ Hospital and that would be his/her AMA for all the purpose.
- Benefits of the scheme are prospective in nature.
- On the basis of prescribed rate of Contribution for its membership.
- Referral/Authorization required for undergoing treatment/diagnosis in Private empanelled Hospital/Diagnostic Centre from the AMA
- Treatment facilities – cashless facility for all beneficiaries during emergency in empanelled private hospitals, and for pensioners' cashless facility is available even in non emergent conditions on the authorization of AMA.
- Prevailing CGHS rates for availing treatment/diagnosis in private empanelled hospitals/diagnostic centers.

FACILITIES PROVIDED TO MEMBERS

The following facilities are being provided to the beneficiaries through the recognized health facilities under DGEHS i.e Govt. dispensaries/ hospitals &Private empanelled hospitals:

- Out Patient care facilities in all systems.
- Emergency services in Allopathic system.
- Free supply of necessary drugs.
- Lab. and Radiological investigations.
- Super specialty treatment i.e. Kidney transplant, CABG, Joint replacement etc.
- Family Welfare Services.
- Specialized treatment/Diagnosis in hospitals, both in Govt. and private empanelled hospitals /Diagnostic centers under DGEHS.

PERSONS ELIGIBLE TO OPT FOR DGEH SCHEME:

- All Delhi Government working and retired employees (including family pensioners)
- Sitting and Ex-MLAs and Ex-Metropolitan councilors and their dependents.
- Sitting and retired judges of High Court of Delhi.
- Retired officers of Indian Administrative Service/Indian Forest Service of AGMUT Cader, officers of DANICS/UTCS cadre including their family pensioners.
- Autonomous/Statutory bodies fully funded by Delhi Government
- Families of IAS AGMUT Cadre /DANICS officers posted outside Delhi on deputation/short term transfers on payment of DGEHS subscription in advance on yearly basis.

SUBSCRIPTION FOR THE SCHEME

The following are the current rates of subscription on the basis of Pay / pension of

the Delhi Government Employees/ Pensioners: w.e.f July 2009.

Sr. No.	Grade pay drawn per month	Rate of monthly Subscription
1	Up to Rs. 1,650	Rs. 50.00
2	Rs. 1,800, Rs. 1,900 and Rs. 2000, Rs. 2,400 and Rs. 2,800	Rs. 125.00
3	Rs. 4,200	Rs. 225.00
4	Rs. 4,600, Rs. 4,800 Rs. 5,400 andRs. 6,600	Rs. 325.00
5	Rs. 7,600 and above	Rs. 500.00

The subscription to the scheme in case of employees would be deducted from salary on monthly basis.

CONTRIBUTION BY PENSIONERS

Pensioners/Family pensioners have an option to get the membership of the scheme and get their DGEHS Pensioner card made by paying a lump sum amount equivalent to 10 years contribution as due on the date of becoming life time member of the scheme. The beneficiary is not covered under the scheme during the period for which contribution has not been paid. The scheme has been made open ended for the pensioners i.e. the Pensioners who are not members of the scheme can opt for scheme at any stage by paying it's contribution at the prevailing rates.

ENTITLEMENT OF WARD FOR INDOOR TREATMENT IN EMPANELLED HOSPITALS

Sr. No.	Pay in pay band / Pension / Family Pension drawn per month	Ward entitlement
1	Up to Rs. 13,950	General ward
2	Rs. 13960 to Rs. 19,530	Semi-Private ward
3	Rs. 19,540 and above	Private ward

CASHLESS TREATMENT FACILITY

The cashless facilities as per entitlement in empanelled private hospitals / diagnostic centers in Delhi will be available to serving employees and pensioners in emergent conditions on production of valid DGEHS card. The cashless facilities will also be available to the pensioner beneficiaries even in non-emergent conditions on the authorization of the AMA. Cashless treatment is also available to self and dependent family members of Ministers, MLAs, Ex. MLAs and Ex. Metropolitan Councilors for routine & emergent treatments and investigations on production of valid DGEHS card in original. Credit / Cashless facility is also available to dependents of IAS (AGMUT) & DANICS officers posted on deputation / transfer to outside Delhi.

BUDGET ALLOCATED TO DGEHS BRANCH

Plan Budget

Period	Budget(In thousands)	Actual Expenditure (in thousands)
2011-12	1000	0.955
2012-13	1000	668.282
2013-14	1000	658.525
2014-15	1000	423.446

Non-plan Budget

Period	Budget (In crore)	Actual expenditure (In crore)
2010-11	20.00	19.99
2011-12	30.40	30.37
2012-13	50.00	49.88
2013-14	57.00	56.97
2014-15	65.00	64.99

6.7 CENTRAL PROCUREMENT AGENCY (CPA)

Central procurement Agency (CPA Cell) for drugs was established in Directorate General of Health Services as a part of implementation of one of the main aim of 'Drug Policy' of Govt. of Delhi announced in 1994. The agency is to make available good quality drugs at affordable price in all Government of Delhi Hospitals/Health Centers. The agency was starred with the objective of making pooled procurement of essential drugs after inviting tenders and placing supply orders for the drugs for all institutions/hospitals in the state of Delhi. The pooled procurement programme was to be implemented in three phases.

The scheme "Central Procurement Agency" initially implemented under Drug Control Deptt. and now has been transferred to Directorate of Health Service w.e.f. 1.3.2000 now located at F-17, Karkardooma. The Broad objectives of the scheme was to procure drugs centrally required by the hospitals and various health centers situated different part of Govt. of Delhi and their distribution to these institutions ensuring high quality standards with comparatively low cost. By creating procurement agency the state will be in a position to procure drugs at competitive rates. Because of larger size of orders being placed with the pharmaceutical firms, ensure the availability of drugs which are uniform and good quality & in generic names in all Health Units of State. CPA also ensure the quality of medicines by testing the randomly picked up medicines & surgical consumables in NABL approved Laboratories. In this system of procurement, pit falls of multi point procurement system will also be overcome. Therefore, it is proposed to sustain the scheme during 11th five year plan period.

Achievements during 2014-15

- CPA floated tender for medicines for all items included in Essential Drug list.
- Proposal for formation of a corporation 'Delhi Medical Supplies Corporation' moved and discussion done with stake holders.
- Seven laboratories have been empanelled for lab testing of medicines**.**

6.8 COURT CASES CELL

Court wise & year wise details of the Court Case, defended by Court Case Cell, DGHS (HQ) 2014-2015.

Years	No. of Case BFC					Total	New Case					Total	Decided					Total	Balance on or 31 March, till date
2010-2011	Supreme Court	CAT	District Court	Consumer Form	Delhi High Court		Supreme Court	CAT	District Court	Consumer Form	Delhi High Court		Supreme Court	CAT	District Court	Consumer Form	Delhi High Court		
	01	06	10	07	04	**28**	Nil	05	12	03	13	**33**	Nil	04	02	Nil	07	**13**	**48**
2011-2012	01	07	20	10	10	**48**	Nil	06	03	02	06	**17**	Nil	05	08	03	03	**19**	**46**
2012-2013	01	08	15	09	13	**46**	Nil	05	11	03	20	**39**	Nil	06	02	01	06	**15**	**70**
2013-2014	01	07	27	11	27	**73**	07	02	03	-	12	**24**	02	06	07	04	15	**34**	**63**
2014-2015	01	07	31	11	30	**80**	02	07	04	-	11	**24**	-	01	04	01	04	**10**	**94**

6.9 CENTRAL STORE & PURCHASE

1. Store & Purchase Branch at DGHS (HQ) carries out procurement, storage and distribution of lab,consumable,general items,stationary items,furniture items,miscallanios equipments/items for dispensaries and Seed PUHC under Directorate General of Health Services.
2. AMC/CMC of all Equipments (Inverters,Refrigerators pharmaceutical,semiautomatic blood analysers,etc.).
3. Co-ordination between six District Sub Stores for CPA medicines ans surgical consumable items.
4. Sanction of CPA medicines and surgical consumable items bills of six District Sub Stores under DGHS.
5. Procurement of medicines for eligible poor patients under Delhi Arogya Kosh,DGHS(HQ).
6. Non CPA tender (General stationary items,lab items,etc.)process.
7. Co-ordination of functions and meetings of technical purchase committees and tender related activity.
8. Maintenance of central store for items concerned with store and purchase and also CPA products which is an additional task.
9. Stock Entries and maintenance of stock registers, entries of challans.
10. Entries of bills in stock registers.
11. Proper mainrenance of store.

6.10 BIO MEDICAL WASTE MANAGEMENT CELL

Ministry of Environment and Forest, Govt. of India notified the Biomedical Waste (Management & Handling) Rules, 1998 in exercise of power conferred under sections 6,8 and 25 of the Environment (Protection) Act, 1986. The Delhi Pollution Control Committee has been designated as Prescribed Authority to implement these rules in the National Capital Territory of Delhi. The Lt. Governor of Delhi has constituted an Advisory Committee which has 10 members with Pr. Secretary (H & FW), Govt. of NCT of Delhi as Chairman and Director (Health Services) as Member Secretary/Convener.

There are 131 hospitals (including Ayurvedic Hospitals, Maternity/Home, IPP VIII) in the Govt. sector, 857 registered Nursing Homes in Private Sector and large number of Primary Health Centres run by Government as well as Non Government Organisation. In order to facilitate the proper treatment of the biomedical waste generated from dispensaries, smaller Nursing Home/Clinics Blood Bank/Diagnostic Laboratories etc., the Government has taken initiatives to establish centralized waste treatment facilities.

The Delhi Government has purchased land from Delhi Development Authority (DDA) for establishment of Centralised Biomedical Waste Treatment facilities at Okhla and Nilothi in Delhi. The Okhla plant has become operational on 11th November 2006 and Nilothi plant is operational since April 2011. A third facility M/s Biotec Solutions registered with DPCC is also operational in Delhi since October 2009. Biomedical Waste is collected from all sources in Delhi, transported and treated in these Common Bio-medical Waste Treatment Facilities (CBWTF).

Objectives.

1. acilitation of Biomedical Waste (Management & Handling) Rules 1998 and amendments thereof.
2. Reduction of health care waste induced infection/illnesses and patient safety.
3. Dissemination of the provisions of Acts and Rules to the health care personnel, and also the community at large.
4. Capacity building of health care institutions to manage biomedical waste
5. Strengthening of monitoring mechanism at state and district level.
6. Coordination with other agencies.

Basic data:-

Quantum of biomedical waste generated in Delhi As per DPCC estimate	:	13641.22 Kg. per day
No. of Healthcare establishments in Delhi received in DPCC)	:	2070 (based on applications
No. of Delhi Government Hospitals	:	39
No. of Delhi Govt. Dispensaries	:	260

Service providers in r/o Common Biomedical Waste Facility in collaboration with Govt. of Delhi.

S.No.	Service Provider	Operation started	Address	Installed capacity	Districts allotted by DPCC
1.	M/s Synergy Waste Mgmt. (P) Ltd.	November 2006	Near Compost Plant, Okhla Tank, Mathura Road, New Delhi-110025.	10 ton per day	South Distt. South East Distt. East Distt. Shahdara Distt. North East Distt.
2.	M/s SMS Water Grace BMW (P) Ltd	April 2011	SMS Water Grace BMW Pvt. Ltd., DJB, S.T.P., Nilothi, New Delhi-110041	19 tons per day	South West Distt. West Distt. Central Distt.
3.	M/s Biotec Solutions	October 2009	46, SSI Industrial Area, Delhi-110033.	13 tons	North Distt. North West Distt., New Delhi distt.

Trainings :-

The BMW Management Cell has been conducting regular trainings of all categories of health care workers independently and jointly in collaboration with Centre for Occupational and Environment Health, Maulana Azad Medical College, New Delhi. Since training is an ongoing process to improve the skills and knowledge, all the Health care workers including doctors, nurses, paramedical staff etc. have been trained in BMW (Management & Handling) Rules 1998, at least once. Details of the recently held trainings are as follows:

- A quarterly review meeting of Nodal Officers of Districts has been conducted on 15.12.14.
- National Level Conference on Patient Safety and Biomedical Waste Management was held on 14th & 15th February 2014.
- Training of Nurses from Delhi Govt. Hospitals on Injection Safety and Biomedical Waste Management on 21.01.2015.
- Training of ANMs from Districts on Injection Safety and Biomedical Waste Management on 22.01.2015.
- Training of PHNs from Districts, School Health Scheme & Mobile Health Scheme on Injection Safety and Biomedical Waste Management on 30.01.2015.

Awareness generation: -

Further, regular awareness activities are also being undertaken by the Biomedical Waste Management Cell, Directorate General of Health Services through TV, Outdoor banners, print media and interpersonal communication. Telecast of a documentary film displaying Bio-medical Waste Management in a programme on DD-1. Posters on biomedical waste

management are displayed in health care facilities for health care workers and the general public at large.

Environment Management Group: -

As per the Advisory Committee No.1, it is suggested to constitute a dedicated Environmental Management Group (EMG) in all Govt. Hospitals having 100 beds and above, headed by the Medical Superintendent/Medical Director of
the Hospital and consisting of other members e.g. Nodal Officer (BMW), concerned Engineers from PWD/Engineering Division, Paramedical staff etc.

Dte. General of Health Services, Govt. of NCT of Delhi constituted Environmental Management Cell with the Director as Chairperson and SPO BMW Management as State Programme Officer of Environmental Management Cell.

The mandate of EMG will be to look after the matters concerning implementation of the requirements under Pollution Control Laws including BMW Rules, Air & Water Acts etc. as given below:

- The Biomedical Waste (Management & Handling) Rules, 1998
- The Municipal Solid Waste (Management & Handling) Rules, 2000
- The Water (Prevention & Control of Pollution) Act, 1974
- The Air (Prevention & Control of Pollution) Act, 1981
- The Environment (Protection) Act, 1986
- The E Waste (Management & Handling) Rules, 2011
- The Batteries (Management & Handling) Rules 2011
- The Water (Prevention & Control of Pollution) Cess Act, 1977
- The Hazardous Waste (Management, Handling & Transboundary Movement) Rules 2008
- The Plastics Manufacture, Sale and Usage Rules, 1999
- The Delhi Degradable Plastic Bag (Manufacture, Sale and Storage) and Garbage (Control) Act, 2000
- The Noise Pollution (Regulation and Control) Rules 2000

Advisory Committee:-

A meeting of Advisory Committee for Bio-medical Waste Management was held on 12th June 2014 and 6th January 2015 under the Chairmanship of Secretary (Health & Family Welfare) in his Chamber at 9th Level, Delhi Secretariat, New Delhi-110 002, to discuss the issues regarding Bio-Medical Waste Management and streamlining the system in Delhi. Following issues were discussed:

1. Hon'ble High Court of Delhi order dated 12.12.2014 in contd. Case (C) 102/2014 P.K. Nayyar Vs. S.K. Srivastava and Anr. Regarding closure of M/s Synergy Waste Management Pvt. Ltd. Before next date of hearing i.e. 19.01.2015.

2. National Green Tribunal order dated 17.12.2014 in the matter of Mohd. Irfan Vs Union of India & Ors and Amritapuri Residents Welfare Association & Anr Vs. Union of India & Ors. – to identify the sites including the proposed site at sewage treatment plant complex, Okhla for BMW common disposal plant.

Other issues:

- A Committee under the Chairmanship of Dr. T.K. Joshi of COEH with members from DGHS, DPCC & DDA constituted by Secretary (H & FW). The committee visited the sites identified by DDA and submitted the proposal of four sites to Hon'ble NGT.
- A meeting was organized on 26.02.2015 with all Service Provides, DPCC, DMA, IMA and COEH to sort issues raised by users.
- Effluent Treatment Plant established in almost all the Delhi Govt. Hospitals as a part of Environmental Management Group.
- Delhi Pollution Control Committee (DPCC) in consultation with the Biomedical Waste Management Cell, DGHS, distributed the area among the three CBWTF operators.
- Dte. of Health Services declared the rates for utilizing the Common Bio Medical Waste Treatment Facility w.e.f. 1st January 2015.
- DGHS and its nominee from Districts are part of the monitoring team constituted by DPCC.

6.11 Transplantation of Human Organs Act (THOA) Cell

Ministry of Health & Family Welfare, Govt. of India notified on 27th March 2014, the Transplantation of Human Organs and Tissues Rules, 2014. As per old Rules, the No objection Certificate given to the Donor or the Recipient if the transplantation surgery is done outside the State, where he or she is residing. However, the NOC process has been removed and in place of it Form-20" Verification of residential status, etc–When the living donor is unrelated and if donor or recipient belongs to a State or Union Territory, other than the State or Union Territory where the transplantation is proposed to be undertaken, verification of residential status by Tehsildar or any other authorized officer for the purpose with a copy marked to Appropriate authority of the State or Union Territory of domicile of donor or recipient for their information shall be required.

List of Hospitals where DGHS nominates DGHS nominee to Hospital Authorisation Committee

1. Apollo Hospital 2. Batra Hospital 3. Max Hospital Saket 4. Moolchand Hospital 5. Rockland Hospital 6. Pushpawati Singhania Research Institute 7. ILBS 8. Sir Ganga Ram Hospital 9. Maharaja Agrasen Hospital 10. B.L. Kapur Hospital 11. Army Hospital – (R & R) 12. AIIMS 13. Fortis Hospital Vasant Kunj 14. Action Balaji Institute 15. Dr. Ram Manohar Lohia Hospital.

DGHS is also part of State Level Authorization Committee. DGHS is facing problems from the State of West Bengal, still insisting on the issue of NOC in spite of Notification in r/o Transplantation of Human Organs Act Rules – 2014.

6.12 ANTIQUACKERY CELL

The office of CDMO has been carrying out inspection of various centres/clinics and Quacks and and when complaints/instructions and received from Directorate of Health Services, Delhi Medical Council and other sources.

The Delhi Bhartiya Chikitsa Parishad and Board of Homeoathic System of Medicine shall share the distrcitwise data of practitioners registered with them with the Directroate of Health Services to enable the districtwise authorities to identify the Registered practiotioners with the respective councils.

The members of nominees of Delhi Medical Council, Delhi Bhartiya Chikitsa Parishad and Board of Homeopathic system of Medicine should be part of the Anti Quackery Drive.

District wise performance of antiquackery cases : 2014-15

S.No.	District	No. of Cases Visited
1.	**West**	**44**
2.	**Central**	**29**
3.	**East**	**44**
4.	**North West**	**43**
5.	**South West**	**62**
6.	**South**	**24**
7.	**North East**	**25**
8.	**North**	**106**
9.	**New Delhi**	**55**
10.	**Shahdara**	**14**
11.	**South East**	**18**
Total		**464**

6.13 Delhi State Nursing Cell

Annual report 2014-15

Additional Director, DSNC was appointed in April 2014, followed by 1 PHN was posted on diverted capacity to DSNC as Nursing Officer in April 2014.The 1st step taken by the DSNC to inform the stakeholder about the existence of DSNC was done by organizing a Workshop for Senior nurses from Delhi Govt. hospitals on "Communication Skill" to commemorate Nurses Day on 15th May 2014.

DSNC planned to do a facility survey to assess the ground situation on deployment of Nurses in the health system and shortcomings thereof. In this regard PHN's from SHS , DHS from 11 districts were posted in DSNC during summer vacations. After several rounds of brainstorming sessions and under the guidance of AD/DSNC and consultant/DSNC different formats for data collection of nursing personnel working in Delhi was prepared. Before its implementation DSNC was given the responsibility to conduct Induction Training Workshop.

Secy.(H&F W) directed to conduct induction training workshop for newly recruited staff nurses with the responsibility with DSNC for technical guidance and quality of teaching material for training .Nine back to back , three Day Induction Training workshop for newly recruited Staff Nurses from Delhi Govt. Hospitals had been carried out in the month of June 2014 in collaboration with three College /School of Nursing and CME Cell.

With reference to Secy. H&FW order No.F.24/DSNC/53/ Pt.F./DHS/CME/2014/15140-50 Dated: 11/07/14 and subsequent order dated: 02/12/2014 , all administrative matters pertaining to nursing personnel was brought under DSNC/DHS. Secy.(H&FW) GNCTD delegated some functions from TRC to DSNC/DHS which include cadre management, R/R, recruitment, promotion, ACP/MACP etc. Complete administrative matters pertaining to nursing personnel.

In October, 2014 Technical recruitment Cell , looking after administrative aspect of approx 8000 nursing personnel working in Delhi Govt. Hospitals was physically shifted from Sachivalaya and brought under DSNC,DHS(HQ).Issue of NOC to start Nursing College, new courses and change of strength of students of nursing colleges was also transferred to DSNC.

10th Induction Training workshop was conducted in October 2014.DSNC received an amount of Rs One Lakh under RE 2014-15 DHS (Plan) scheme, which was utilized for conduction of 11th & 12th Induction Training Workshop in March 2015. Induction Training of approximately 409 Newly recruited Staff Nurses from Delhi Govt. Hospitals had been carried out till March 2015. Number of newly recruited staff nurses waiting to undergo training - 598. Approx.

Workshop on Injection safety & Biomedical waste management was carried out in January 2015 for Staff Nurses and ANM's working in Delhi Govt. Hospitals and Delhi Administration Dispensaries respectively in collaboration with BMW cell.

Utilization certificate for last 5 Years is been prepared till 31st March 2015 and is been submitted to Director(Nursing),MOH&FW, Nirman Bhawan on 20/04/15.

DSNC is in the process of creating a Data base of Nursing professionals working in Delhi .One Formats for the same is been forwarded to various Delhi Govt. Hospitals .Some of the data is been obtained from TRC. An another initiative of GOI is launch of National Nursing and Midwifery Portal (NNMP) wherein the role of DSNC would be to authenticate the data and to ensure that data is up-to-date.

Details of nursing cadre in various Hospitals/Medical Institutions are as under:-

PHN & ANM (School Health Schemes/DHS):-

Vacancy position in r/o PHN & ANM working under GNCTD						
Sl.No	**Name of Post**	**Sanctioned posts**	**Filled posts**	**Vacant posts**	**posts filled by contractual engagement**	**Clear Vacancy**
1	**PHN**	164	90	74	51	23
2.	**ANM**	353	244	109	81	28
	Total	**517**	**334**	**183**	**132**	**51**

Nursing Staff : - NS,DNS, ANS, Nursing Sisters, and Staff Nurses.

Details in r/o Nurses working in various hospitals under GNCTD					
Name of Post	**Sanctioned posts**	**Filled posts**	**Vacant posts**	**Posts filled by contractual engagement**	**Clear Vacancy**
Nursing Superintendent	4	0	4	**0**	4
Dy. Nursing Supdt.	35	30	5	0	5
Asstt. Nursing Supdt.	223	168	55	0	55
Nursing Sister	1254	904	350	0	350
Staff Nurse	5813	4559	1254	960	294
Total	7329	5661	1668	960	708

Nursing Teaching Faculty

	Nursing Teaching Faculty Under GNCT of Delhi					
Sl. No	**Name of Post**	**Sanctioned posts**	**Filled posts**	**Vacant posts**	**posts filled by contractual engagement**	**Clear Vacancy**
1	Principal	1	0	1	0	1
2	Vice Principal	1	1	0	0	0
3	Senior Lecturer	4	3	1	0	1
4	Principal Tutor	2	1	1	0	1
5	Senior Tutor	6	0	6	0	6
6	Sister Tutor	32	15	17	0	17
7	Clinical Instructor	23	13	10	1	09
	Total	69	33	36	1	35

Work Under DSNC as on 31.03.15

With reference to Secy.H&FW order No.F.24/DSNC/53/Pt.F./DHS/CME/2014/15140 -50 Dated:11/07/14 and subsequent order dated: 02/12/2014 , all administrative matters pertaining to nursing personnel was brought under DSNC/DHS. DSNC was looking after all Legal/ Court Matters (Central Administrative Tribunal/High Court cases /Supreme Court cases), Vigilance Matters ,Commission Matters(Public Grievances Cell/National Commission for Scheduled Caste/National Commission for Scheduled Tribes/Disability Commission), all work related to extension of nursing staff engaged on contract basis and processing of ACP/MACP cases in r/o nursing personnel.

All establishment matters in r/o regular employees e.g. Amendment/framing Recruitment Rules and Promotion including service matters in r/o Nursing Personnel, Transfer/posting , Preparation / Maintaining Seniority list , Recruitment of regular Staff Nurses, Clinical Instructors, ANM & PHN (Direct Recruitment) through DSSSB.

All matters related to grant of NOC to Nursing School & Colleges ,Induction training to newly recruited Staff Nurses ,Preparation of Data base of all Nurses , Uploading on MIS ,other Miscellaneous matters related to nursing cadre and including all RTI matters is been taken care by DSNC

6.14 CME Cell

Introduction

CME Cell is functioning in this directorate to impart continuing medical education to the medical and paramedical personal working in this directorate. The main purpose for CME cell is to update and to create awareness for the latest techniques/developments to increase the knowledge of medical/ paramedical personals. CME Cell organizes CME programms wherein renowned person of the respective field are called as resource persons to update the knowledge on that respective field.

Achievements of CME Cell for the year 2014-15 are as under:-

Details of the workshop organized by CME Cell during 2014-15

S.No.	Conference/Workshop/Course	No. of Officers participated
1.	NIL	NIL

Details of the conference/workshop/seminars and course where the doctors/official were sponsored by CME Cell during 2014-15

S.No.	Name of the training	Venue	No.of Participants
1	Xth Joint Annual Conference of ISMOCD &IAE held on 10th -12th Oct. 2014	Goa, India	1
2	52nd Annual Nation Conference of the Indian Academy of Pediatrics	Samrat Ashok Hotel Complex, New Delhi from 22nd to 25 January 2015.	1
3	"57th Annual Delhi State Medical Conference on 11th January 2015	Hotel The Ashok, New Delhi.	68
4	" New Trends & Best Practices in Managing Hospital Services" on 26th & 27th July 2014 from 10:00 am	Seminar Hall No.-1&2, Kamala Devi Block, India International Centre , 40 Maxmuller Marg, Lodhi Road, New Delhi-110001	69
5	Patient Safety issues for Doctors" on 12th & 13th September 2014 from 09:00 am	Auditorium G.B. Pant Hospital, New Delhi in collaboration with W.H.O.	35
6	Creating Awareness Building Skills	NIMHANS, Bangalore, India from 19th to 20th Feb. 2015.	1

7	21st Annual Conference of Indian Society of Critical Care Medicine	Bengaluru, India from 6th – 8th March 2015.	1
8	"SNOMED CT- Introduction & implementation" on 26th August 2014	FICCI, Federation House, Tansen Marg, New Delhi.	38
9	Programme on Launch of Delhi against Mosquito-Fight the Bite Campaign on 6th April 2014 (Sunday)	Talkatora Stadium, New Delhi.	24
10	"National Training for Nurse on Rational Use of Medicines" held on 27th - 28th June, 2014	Amaltas Hall, Auditorium Block, India Habitat Centre, Lodhi Road Delhi-110003."	58
11	"National Training Course on Promoting Rational Use of Medicines: Enhancing Access and Safe Use of Medicine" held on 1st - 3rd April, 2014	India Habitat Centre, Magnolia Hall, Lodhi at Road, New Delhi-110003:	43
12	"Quality Assurance & Radiation Safety for Diagnostics Imagine and Radiation" on 5th – 6th June 2014 held at	Federation of Indian Chambers of Commerce and Industry, Federation House Tansen Marg, New Delhi -110001.	8
13	Healthcare Executive Management Development Programme (HxMDP) held on 07th -13th September 2014	Hyderabad, India	5
14	One Year Post Graduate Diploma Course in Disaster Preparedness & Rehabilitation (Part Time Programme).	Indian Red Cross Society, Delhi	2
15	Induction training of staff nurse on 18th -20th , 23rd -25th , 26th -28th June 2014. The adjustment	ABCON, GTBH and DDUH	450
16	"IRCON 2014" on 28th 30th November 2014	Chandigarh, India	1
17	National 69th National Conference on Tuberculosis and Chest Diseases	Lalit Hotel, Andheri, Mumbai	3

	2014 on 6th -7th Feb.2015		
18	"National Cancer Congress 2015- on Update in Management of Colorectal Cancer" being organized by Dharamshila Hospital And Research Centre On 21st and 22nd February, 2015	Dharamshila Hospital & Research Centre	26
19	"National Consultative Workshop on Clinical Establishments Act on 16th and 17th December 2014	the NDC conference hall of NIHFW, New Delhi	2
20	"Patient Safety issues for Doctors" to be held on 12th & 13th September 2014	Auditorium G.B. Pant Hospital, New Delhi.	49
21	one day Seminar on Animal Bite Management (Rabies Post Exposure Prophylaxis) on 26th April from 10.00 AM to 4.00 PM	M.V.I.D. Hospital, Kingsway Camp. Delhi	29
22	"Sensitization Workshop (Half Day) On Lead Exposure and Its Health Impact for Primary Care Health Providers" to be held on 20 October 2014	Centre for Occupational and Environmental Health, Maulana Azad Medical College.	26
23	Specialist and MBBS doctors for the calendar year 2014-15	GNCTD Hospital	110
24	International Professional Procurement and Supply Chain Management (IPSCM), Certificate Programme.(UNDP)		50
25	"Vaccine Advocacy in South East Asia" on 06th November 2014 from 09:00 am	Hotel Ashok, Chanakya Puri, New Delhi	9
26	14th World Congress on Public Health	Kolkatta	01
27	Various Training Programme Organized by UTCS	UTCS Building	200
TOTAL			**1310**

Other achievements :-

1. 1310 Medical officers/officials were nominated from various Delhi Govt. hospitals /Districts/schemes/DGHS (HQ) for various CME/trainings/conferences/workshops etc.
2. Distribution of "Standard Treatment Guideline" 2500 Copies.

6.15 GRANT IN AID CELL

Achievements for the year 2014-15

1. GIA to St.John Ambulance Brigade amounting to Rs.5,00,000/- was released in four installments for the year 2014-15.

2. Delhi Kalyan Samiti- One NGO has been recommended for grant for establishment of blood bank.

3. Delhi Govt. contribution to ESIC- Proposal for the year 2009-10 and 2010-11 was put up and meeting was held in this regard at H&F Deptt. and Finance Deptt.Govt.Of NCT of Delhi.

6.16 RIGHT TO INFORMATION ACT, 2005

The progress report of RTI during the year 2014-15

	No. of applications received as transfer from other Pas u/s	Received from April, 14 to March, 15 (including cases transferred to other PAs)	No. of Cases transferred to other PAs u/s 6(3)	Decisions where requests/appeals rejected	Decisions where accepted
Requests	415	1116	311	4	1056
First Appeals	NIL	71	NIL	23	48

RTI Applications received during the period of April 2014 to March 2015

Year & Month	Total RTI received	Fee	Addl. Fee	Total fee Submitted
April 2014 to June 2014	229	1440	258	1698
July 2014 to Sep 2014	279	1940	1420	3360
Oct 2014 to Dec 2014	142	1040	94	1134
Jan 2015 to Mar 2015	466	1790	868	2658
Total RTI (April 14 to March 2015)	**1116**	**6210**	**2640**	**8850**

6.17 PUBLIC GRIEVANCE CELL

The Public Grievance Cell received grievances regarding health related issues (complaint against staff of CDMO office, facilities, opening of dispensaries, NHRC complaints, CPGRAMS complaint, PGC hearing letters, PGMS references, LG references, RTIs matter, MHS complaints, matter related to Govt. Hospital complaints, opening of new hospital, matter pertaining to DAN/IS&M/MCD/T.B./ Anti Quackery/ Nursing Home Cell/ financial assistance and the matter related to branches of Directorate of Health Services.

The matter is examined and forwarded to the concerned branches or districts or hospitals or other departments for enquiry/ comments/ necessary action. If allegation is substantiated then action is taken against the defaulter.

Staff / Manpower :-

Pharmacist	-	01
LDC	-	02
Peon	-	01

Issues requiring decision and Activities of Public Grievance Cell:-

- Compulsory attending of the Public Grievances Commission hearing by the concerned branch officer or concerned CDMO.
- Preliminary enquiry on allegation against Nursing Home is being conducted by Nursing Home Cell, Health Services. If any allegation on negligence & unethical practice by doctors is substantiated in preliminary enquiry, then the matter is forwarded to Delhi Medical Council for final enquiry & disposal of the case.
- The matter forwarded to CDMO concerned and branch for enquiry. Findings of inquiry intimated to the complainant and action is taken against the defaulters.
- The complaint pertaining to PGMS/CPGRAMS Portal examined by this branch and forwarded to the In-charge of concerned branches or districts or hospitals or other departments for comments / necessary action.

6.18 DISASTER MANAGEMENT CELL

Disasters are known to strike without warning. The government, local bodies, voluntary bodies have to work in coordination and cooperation to prevent or control disasters, wherever the need arise. Being a mega-city and capital of India, eventualities in the form of floods and outbreaks like cholera and dengue, terrorist attacks have been witnessed in the past. Delhi is located in a high seismic Zone of the country and the possibility of major earthquakes is very real. Disaster Management Cell works within the confines of mandated functions under Disaster Management Act 2005. The cell is focusing on the lead function "Medical Response & Trauma Care" and support function "search/rescue and evacuation of victims under expert care in emergencies.

Activities under the scheme

Directorate General of Health Services is implementing the plan scheme on disaster management as part of State Disaster Management Plan, wherein funds have been made available for different activities like purchase of equipments and consumables and training of staff.

Action Plan for Disaster Management in Delhi has been prepared by DGHS for state level. Hospital Disaster Management Plans are also been prepared by the individual Delhi Government Hospitals separately.

Achievements during 2014-15

1. Training on emergency Medical Response as part of creation on 1ST responders is one of the prime activity. One hundred fourteen doctors and one hundred seven dresser/nursing orderly working in health centers under Govt. of Delhi were trained
2. As part of medical rehabilitation of victims arising out of crisis situation in the past, the victims under going treatment are being provided with support for medical rehabilitation
3. The cell took part in mock drills conducted from time to time by revenue Department, Government of Delhi.

6.19 Non Communicable Diseases Control Programme

1. Directorate of Public Health: The plan scheme "Directorate of Public Health" under GNCT of Delhi and the programme "NPCDCS" under NHM are focusing on non communicable disease (Hypertension/ Diabetes).

The following activities were undertaken

1. Preparation of information material for common public regarding do's & don'ts of life style habits and importance of early detection.
2. The developed messages were displayed through various out door publicity mediums.
3. Monitoring & Supervision of bi-weekly DT/HT clinic in all Hospitals under GNCT of Delhi.
4. Facilitation of opportunistic screening for DT/HT through Health Centres, GNCTD all over Delhi.

CANCER CONTROL CELL

The activities under "Cancer Control Cell" are being undertaken with to basic objectives.

1. Sustained information dissemination pertaining to danger signals (early signs/symptoms) of common cancers (Breast Cancer, Oral Cancer & Cervix Cancer) & adoption of healthy life style habits towards prevention.
2. Facility up-gradation for treatment of Cancer.

Various activities undertaken in 2014-15 under the programme were as under:

1. Education materials were prepared focusing on the common preventive aspects & early detection issues related to Common Cancers and were displayed through various modes of Metro Network & distributed during field activities.
2. Information dissemination was also done through FM Radio focusing on common cancer during "World Cancer Day".
3. Information dissemination was also done through participation in field activities
4. World Cancer Day celebration in all the Districts& Hospitals for seven days.
5. Weekly Cancer Clinics focusing on Common Cancers in all Hospitals.

6.20 Special Health Programme for Geriatric Population

The population of persons over the age of 60 years has tripled in last 50 years in India. The population of Senior Citizens was 7.7% of total population in 2001 which has increased to 8.14% in 2011. It is estimated that around 14 lakh senior citizens are living in Delhi. Senior Citizens at large require holistic care to meet their social, emotional, health and financial needs. Delhi Government has already framed State Policy for Senior Citizens with commitment to provide Financial and Social security in form of Old Age Pension, Protection of Life and Property and Priority Health care.

Senior Citizens suffer from multiple chronic diseases like Hypertension, Cataract, Osteoarthritis, Chronic Heart Diseases, Diabetes, Nesual deafness and several types of Mental Disorder. These diseases results in disabilities affecting the activities of daily living . It has been reported that 8% of senior citizens are confined to their home or bed.

The following provisions have been made and being implemented to provide special health care services to Senior Citizens in Delhi –

1. General Health Care is being provided to all senior citizens on preferential basis in all Delhi Government Hospitals & Dispensaries.
2. Sunday Clinic for Senior Citizens in Delhi Government Hospitals except superspeciality and maternity & child hospital.
3. Provision of Separate Queues for Senior Citizens at OPD, Pharmacy, Diagnostic Facilities etc
4. Senior Citizen Help Desk in all Delhi Government Hospitals has been set up at OPD.
5. Designated Nodal Officer exist in all hospitals to address the grievances
6. It has also been provisioned that inmates of various Old age home to be attended on priority in each hospitals
7. Screening of Senior Citizens at dispensary level for identification of hidden diseases / disabilities for which one is not aware or which have not been manifested and referral to appropriate higher level. In this activity ASHA worker has been engaged.
8. Training of Medical / Para medical staff on Geriatric Health care so that senior citizens can be attended with care and on priority basis.
9. IEC / Awareness Generation / Observation of International Day for Older Person and similar activities has been organised on 1st October to acknowledge the importance of Senior Citizens and create awareness on various services provided by Delhi Government.

6.21 NATIONAL PROGRAMME FOR PREVENTION AND CONTROL OF DEAFNESS

Burdon of Deafness

Hearing loss is the most common sensory deficit in humans today. As per WHO estimates in India, there are approximately 63 million people, who are suffering from Significant Auditory Impairment; this places the estimated prevalence at 6.3% in Indian population. As per NSSO survey, currently there are 291 persons per one lakh population who are suffering from severe to profound hearing loss (NSSO, 2001). Of these, a large percentage is children between the ages of 0 to 14 years. With such a large number of hearing impaired young Indians, it amounts to a severe loss of productivity, both physical and economic. An even larger percentage of our population suffers from milder degrees of hearing loss and unilateral (one sided) hearing loss.

Objective of the programme:

1. To prevent the avoidable hearing loss on account of disease or injury.
2. Early identification, diagnosis and treatment of ear problems responsible for hearing loss and deafness.
3. To medically rehabilitate persons of all age groups, suffering with deafness.
4. To strengthen the existing inter-sectoral linkages for continuity of the rehabilitation programme, for persons with deafness.
5. To develop institutional capacity for ear care services by providing support for equipment and material and training personnel.

Components of the Programme:

The following components were looked in while implementing the programme: (1) Manpower training & development, (2) Capacity building, (3) Service provisioning, including rehabilitation, (4) Awareness generation through IEC activities, (5) Monitoring & evaluation.

Strategies:

1) Strengthening of service delivery including rehabilitation.
2) Developing human resource for ear care.
3) Promoting outreach activities and public awareness through appropriate and effective IEC strategies with special emphasis on prevention of deafness.
4) Developing institutional capacity of the district hospitals, community health centers and primary health centers, selected under the project.

Programme execution, expansion & achievement:

The GOI Programme Division has taken up and included 4 districts of Delhi in National Programme for Prevention and Control of Deafness (NPPCD Prog.). The “State Health Society Delhi” is implementing NPPCD programme in Delhi on district pattern through respective “Integrated District Health Society”. The districts of Delhi covered in the programme at present are: North East, Central, North West and West in 2014-15.During the year 2014-15, ongoing activity of previous year was carried out i.e. continuation of district level human resource, formal budget allocation for fresh activity was conveyed very late in the year (Feb-15). The permission to utilize unspent fund of previous years to carry out on going activities (Man Power remuneration) was received late in the year for 2014-15. One Audiological Asstt. is in place against the approved post in Prog. The activities / achievements of ENT department of reporting hospital in Ear Care front (statistics) is enclosed.

Annual Performance Report for F.Y. 2014-15

S No	No. of cases examined with Deafness	0-5 years		5-15 years		15-50 years		>50 years		Total	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1	Mild	86	74	213	161	901	929	295	313	1495	1477
2	Moderate	62	58	239	205	1007	1071	758	622	2066	1956
3	Severe	49	41	135	132	427	366	552	430	1163	969
4	Profound	97	75	234	194	787	732	494	400	1612	1401
	Total	**294**	**248**	**821**	**692**	**3122**	**3098**	**2099**	**1765**	**6336**	**5803**

Tympanogram	**1177**	Hearing Aid Trial	**609**

Name of Surgeries performed:

S.No	Surgery	Male	Female	Total
1	Myringoplasty	127	154	281
2	Tympanoplasty	142	146	288
3	Myringotomy	28	15	43
4	Grommet Insertion	17	15	32
5	Stapedectomy	25	20	45
6	Mastoidectomy	183	167	350
	Total	**522**	**517**	**1039**

Referrals:

S.No	Referred For	Up to 15 years		15-50 years		>50 years		Total	
		Male	Female	Male	Female	Male	Female	Male	Female
1	Number of hearing aids fitted	188	168	160	144	147	153	495	465
2	No. of persons referred for rehabilitation	317	296	145	129	158	185	620	610
3	Speech	201	130	61	24	10	17	272	171
4	Counseling	287	193	119	73	70	64	476	330
	Total	**993**	**787**	**485**	**370**	**385**	**419**	**1863**	**1576**

6.22 FLUOROSIS MITIGATION PROGRAMME

Introduction

Fluorosis / Fluoride poisoning among the population living in all the 11 districts of Delhi is quite common. But such information from Hospital records may not be available, possibly due to lack of awareness among the professionals. The health complaints recorded may have been mistaken for other diseases. The drinking water fluoride level recorded from samples of groundwater from various areas of NCT of Delhi provided by the patients of Fluorosis are listed in Table.

Fluoride level in groundwater samples provided by Fluorosis patients

S. No	Area	Fluoride content in mg/L
1	Mohammadpur	2.50
2	Palam	26.07
3	Green Park	19.33
4	Hari Nagar	1.50
5	Nangloi	14.51
6	Uttam Nagar	3.85
7	Shakarpur	6.67
8	Jangpura	2.44
9	New Roshanpura	14.00
10	Lodhi Road	4.00
11	Narela	4.87
12	Srinivaspuri	3.46
13	Sagarpur	32.51
14	Surajpur	4.32
15	Rohini	4.45
16	Maszid Moth	3.45
17	Rani Bagh	6.20
18	Okhla Village	5.95
19	Hari Nagr	24.61
20	Najabhgarh	14.00
21	Durgapark, Nazirpur Road	3.42
22	Ambedkar Colony	12.50
23	J.J Colony Shakarpur	6.67

National guideline for fluoride in drinking water: 1.0 mg per litre is the upper limit: lesser the better.

Study of drinking water quality of 7 villages in South West Delhi

There are reports available on drinking water quality with focus on fluoride with the support form the Ministry of Environment and Forests (GOI) for the systematic study of all drinking water sources in South West of Delhi (Plan area) 7 villages (200-2003).

Table study of drinking water sources in South West Delhi (Palam area) in 7 villages

Name of the village	**Total sources existing and tested for fluoride**	**No. of sources which are safe drinking water**	**No. of sources contaminated with F**	**Range of Fluoride contamination (mg/L)**
Maharani Enclave	128	22	106	1.10-12.59
Mohan Garden	83	32	51	1.10-2.21
Deepak Vihar	45	2	43	1.10-8.75
Palam Extension	74	10	64	1.10-8.24
Om Vihar	5	-	5	1.58-6.25
Suraksha Vihar	30	17	13	1.10-4.48
Hastal Village	122	21	101	1.10-12.89
Total	**487**	**104**	**383**	**-**

The results provide information not only on the extent of fluoride contamination, but safe drinking water sources co-exist along with the fluoride contaminated sources. Shifting a patient, from drinking fluoride contaminated water to an existing safe source should be the immediate concern of a Clinician. However, water quality test date should be shared with Delhi Jal Board to find a permanent solution of getting safe water for the community.

Considering the seriousness of the problem of Fluorosis in the National Capital Territory, Fluoride and Fluorosis Mitigation programme in NCTD is planned and proposed to be implemented commencing from 2007-2008 with well defined aim and objectives.

Aim and objectives of Fluorosis Mitigation Programme

Aim of the Fluorosis Mitigation Programme is to make Delhi free from Fluorosis and provide direction to the nation for Fluorosis eradication from the country.

Following objectives are envisaged for prevention and control the Fluorosis in the population:

1. Establishment Fluorosis Mitigation Cell in the Directorate.
2. Strengthening of Infrastructure. In hospital for diagnosis of Fluorosis and Training of Technicians to conduct diagnostic tests.
3. Capacity building of Health Professionals and Health Administrators, Health Workers & School Teachers through CMEs.

4. Awareness generation in the community.
5. Research and development activities on Fluorosis.
6. Rectification of anemia in pregnancy and low birth weight babies caused by fluoride poisoning will be dealt with on priority.
7. Strengthening the monitoring system in health delivery outlasts / in field areas.
8. Printing reports / procuring books / information material.
9. Updating Private Practitioners through IMA/ any other channels.

Strategy under the Programme

To meet these objectives various activities are being carried out in the form of:

1. Establishment of Fluorosis Mitigation Cell in the Directorate.
2. Strengthening of Infrastructure in hospitals for diagnosis of Fluorosis.
3. Capacity building of health care professionals.
4. Awareness generation in the community.
5. Research and development on Fluorosis.
6. School Dental Fluorosis survey.
7. Strengthening the monitoring system.
8. Printing reports / procuring books / information material.
9. Updating knowledge of Private Practitioners through IMA.

Activities carried out under the Programme

1. Advocacy workshop on Fluorosis.
2. Training of lab technicians where ion meter has been procured.
3. Training of medical officers.
4. Awareness generation in the community for prevention of Fluorosis.
5. Collection of reports for silicosis cases form Hospital.

FLUOROSIS REPORT 2014-15:

S.No	Hospital	Non-Skeletal	Skeletal	Dental	Total
A	**East District**				
1	Lal Bahadur Shastri Hospital	0	0	0	0
B	**Shahdara**	0	0	0	0
2	Dr. Hedgewar Arogya Sansthan	0	0	23	23
3	Health Center Cum Maternity Hospital	0	0	0	0
4	Chacha Nehru Bal Chikitsalya	0	0	0	0
5	Super Speciality Hospital, Tahirpur	0	0	0	0
6	IBHAS	0	0	0	0
C	**North East**	0	0	0	0
7	Jagpravesh Chandra Hospital	0	0	0	0
D	**North**	0	0	0	0
8	St. Stephen's Hospital	0	0	2	2
9	Tirath Ram Shah Hospital	0	0	0	0
10	Balak Ram Hospital	0	0	0	0
11	Sunder Lal Jain Hospital	0	0	0	0
E	**North West**	0	0	0	0
12	Bhagwan Mahavir Hospital	0	0	0	0

13	Dr. Baba Saheb Ambedkar Hospital	0	0	59	59
14	Satayawadi Raja Harish Chander	0	0	56	56
15	BJRM	0	0	0	0
F	**West**	0	0	0	0
16	Central Jail	0	0	0	0
17	Janakpuri Super Speciality Hospital	0	0	0	0
18	Achrya Shree Bhikshu	0	0	21	21
19	Mata Chanan Devi Hospital			0	0
20	Guru Gobind Singh	0	0	48	48
G	**South Wset**	0	0	0	0
21	Rao Tula Ram Hospital	0	0	18	18
H	**South**	0	0	0	0
22	All India Institute of Medical Sciences	0	0	2	2
23	Moolchand Hospital	0	0	0	0
24	Fotis Escorts	0	0	0	0
25	Pt. Madan Mohan Malaviya Hospital	0	0	0	0
I	**Southeast**	0	0	0	0
26	ESI Okhla	0	0	0	0
27	Holy Family Hospital	0	0	0	0
28	Indraprastha Apollo Hospital	0	0	0	0
J	**New Delhi**	0	0	0	0
29	N.C Joshi	0	0	0	0
30	Safdarjung Hospital			0	0
31	Institute of Liver & Billiary Sciences	0	0	0	0
K	**Central**	0	0	0	0
32	Lok Nayak Hospital	0	0	0	0
33	Aruna Asaf Ali Hospital	0	0	0	0
34	B L Kapoor	0	0	0	0
35	Sir Ganga Ram Hospital	0	0	0	0
	TOTAL	**0**	**0**	**229**	**229**

As per reports received in the DGHS, GNCT Delhi, five districts namely North, Northwest, West, southwest and Shahdara Districts are reporting Fluorosis cases.

6.23 SILICOSIS CONTROL PROGRAMME

INTRODUCTION

Silicon Dioxide or Crystallized Silica causes fine dust to be deposited in the lungs. Silicosis is difficult to diagnose at its onset. Silicosis symptoms in varying degrees of severity begin to occur. Those affected may experience shortness of breath, fever, chest pain, exhaustion and dry cough.

The objectives of this programme to mitigate the effects of silicosis include:

1. Reduce new cases of Silicosis in Delhi
2. Capacity building of health care personnel.
3. Strengthen diagnostic facilities in health care institution
4. Awareness generation in the community through IEC/BCC activities specially silicosis prone area and
5. Clinical care and rehabilitation of silicosis affected people in collaboration with social welfare and urban development department.

Physical and Medical Survey

A physical survey was the joint venture of Directorate of Social Welfare and Directorate of Health services. The team consisted of 1 District Social Welfare Officer, 2 Research Officer, DGHS, 3 Kanungo, revenuer department 4 CDPO of Area 5 NCO-PRASAR, 6 Anganwadi workers (AWWs). The Social welfare Department has carried out its physical survey to bring the silicosis victims into antyodaya schemes and granting of pensions.

The health survey results showed that about 68 percent of the symptomatic people surveyed suffered from silicosis, silico-tuberculosis. A large percentage of people also suffered from hearing loss and malnutrition. The survey stressed on need for continued surveillance of the health of the people and a further comprehensive study on the health of Lal Kuan victims. Out of 240 cases suspected to be symptomatic only 165 symptomatic subjects presented for the study and 111 turned up for X-ray. Out of this only 104 subjects had occupational history. Almost 98 subjects presented with a history of working in stone crushers. Out of this 41 were found to be having silicosis. Only one case of silicosis hid not have exposure. It appears that the exposure to dust was associated with silicosis in about 43% patients were also having deafness. In addition to this 82% subjects had low hemoglobin levels i.e. Anemia.

Strengthening of services

Health department is generating awareness about silicosis in the community. Doctors are being sensitized to suspect and detect cases of silicosis. The media interest on occupational hazards has triggered the voice to review occupational safety rules and implement them strongly across the county. The most significant effect has been the minds of the inhabitants of Lal Kuan. It has driven away the feeling of hopelessness and instilled sense of empowerment among the people giving them a new zeal to look forward to life. Active involvement of NGOs has brought public private partnership. Mobile medical vans are now visiting for four days a week. It is distributing free medicines for silicosis and other respiratory and Occupational disease. The building of the Hospital /PUHC at Tajpur with X-ray facility. A Delhi Government Dispensary has also been opened in Lal Kuan itself.

Needed for the detection of the silicosis is almost complete. The survey of the medical team is complete a short report on the health survey has also been submitted to the Delhi Government.

Awareness activities

Directorate General of Health Services has conducted outdoor awareness activities involving metro trains and metro railings keeping in view widely distributed construction workers engaged all over Delhi.

Rehabilitation Strategies

1. A medical team consisting of occupational health experts conducted clinical survey of affected person in Lal Kaun area.
2. A multi purpose Community Health Centre (CHC) for the treatment of the occupational disease will be built at the Tajpur near Lal Kauan.
3. Delhi Government Dispensary has been opened in the area with focus to provide services to silicosis affected people.
4. The Social welfare department, health department and the urban development department will also explore and provide alternative livelihood opportunities for the citizens of Lal Kuan.

Capacity building for Silicosis:

A state level workshop was organized on silicosis on March 19-20, 2015. Over 200 stakeholders participated in the workshop.

6.24 STATE AWARD SCHEME 2014-15

Introduction

State Awards to Service Doctors working in Delhi was first started in the year 1997-98. Under this scheme 20 Service doctors from Allopathic, Homeopathic and Indian System of Medicine who are working under Govt. of NCT of Delhi for the last 15 years or more with excellent services to the people of Delhi are conferred with the State award, every year.

The purpose of state award is to motivate the medical and paramedical staff for better quality service to the population of Delhi. In the award function held on 29th August 2006, Hon'ble Chief Minister announced that this award should also be given to Paramedical staff. Each awardee is given a memento, Citation certificate and cash award.

The award seeks to recognize work of any distinction and is given for distinguished and exceptional achievements/service in all fields of activities/disciplines, such as Medicine, Social Work, medical research, Public health, etc.

There ought to be an element of public service in the achievements of the person to be selected. It should not be merely excellence in a particular field but it should be excellence plus.

All Government Doctors and paramedical staff who fulfill the criteria without distinction of race, occupation, position or sex are eligible for these awards.

The award is normally not conferred to retired Doctors/Officials. However, in highly deserving cases, the Government could consider giving an award to Retired doctor/official if the retirement of the person proposed to be honored has been recent, say within a period of one year preceding the Award function.

It was proposed that the award may be given to 20 Doctors and 31 Paramedical & Nursing staff during current Year. Hon'ble Chief Minister confers these awards to the meritorious candidates. At present each Doctor is given a cash award of Rs.100000/- and each Nurse/Paramedical staff is given Rs.50000/-.

The criteria of selection to the awards:

1. Meritorious/extraordinary work in the field of healthcare/ health promotion/ social service/ health research/ public health.
2. 15 years or more regular service under GNCT Delhi, MCD or NDMC.
3. Recommendations from Head of the department.
4. Vigilance Clearance and Annual confidential report/Work & Conduct report of the candidate.
5. Representation to different institutions, weaker sections.
6. Representation to different streams like Allopathy, ISM&H, Local bodies (Municipal Corporations & NDMC).

The HODs/ Directors/ Medical Superintendents will invite application from deserving candidate working in their institutions and scrutinise them. The recommended applications of the most deserving candidate will be forwarded to Director Health Services. The state award/search committee will decide the final list of candidates to be awarded.

The Approximate number of Awards:

The approximate No. of Awards to be conferred to meritorious candidates is 51. The details are as follows:-

1. Doctors = 20
   a. Teaching = 5
   b. Non-teaching= 3
   c. General cadre= 8
   d. MCD =1
   e. NDMC =1
   f. ISM&H =1
   g. Dental =1
2. Nurses = 11 (Nurses, PHNs, ANMs)

3. Pharmacist/ Technician/ Supervisor / - 10
4. Peon /SCC/ NO/Drivers & other Staff - 10

The award /search committee on the advice of Government may relax the criteria of 15 years experience in Delhi government to the extra ordinary deserving candidates.

Composition of Screening /Search Committee:

The Screening/search committee will consists of following members:

1. Principal Secretary Health and Family Welfare - Chairperson
2. Dean Maulana Azad Medical College - Member
3. Special Secretary Health (dealing paramedical Staff) - Member
4. Medical Superintendent of 500 or more bedded hospital - Member
5. Medical superintendent of 100-200 bedded hospital l - Member
6. Chief Nursing Officer of LNH or GB Pant or GTB hospital - Member
7. Director Health Services - Convenor

The number of awards conferred so far :

Year	Doctors	Paramedical/ Nursing staff
1997-98	20	
1998-99	19	
1999-00	20	
2000-01	20	
2002-03	25	
2003-04	15	
2004-05	20	
2007-08	19	50
2008-09	20	49
2009-10	22	49
2010-11	21	47
2011-12	20	50
Total	**241**	**245**

List of previous awardees is given at annexure I. The application from eligible candidate were invited and scrutinized by Screening Committee based on the recommendation from HODs/Directors/Medical Superintendents. Currently, the awards for the year 2012-13 will be conferred as soon as Hon'ble CM gived date and time for Award function.

Annexure I

Award Function held on1st July 2013 State Awardees for 2011-12				
	Doctors			
S.No.	**Name**	**Designation**	**Official Address**	**Date of Birth**
1	Dr. Anurag Jain	CMO (SAG)	Deen Dayal Upadhyay Hospital, New Delhi	22-06-1958
2	Dr. Ashok Kumar Sethi	Director Professor of Anaesthesia	UCMS & GTB Hospital,, Dilshad Garden, Delhi	03-01-1955
3	Dr. Bibhabati Mishra	Director Professor Microbiology	G B Pant Hospital, New Delhi-	04-09-1954
4	Dr. Dinesh Kumar Dhanwal	Director Professor Medicine	MAMC New Delhi-2	01-01-1966
5	Dr. Madhu Chanda	CDMO (East)	CDMO East Office	26-05-1960
6	Dr. Namita Kalra	Professor Paeododontics	U.C.M.S Dilshad Garden Delhi -95	10-12-1958
7	Dr. Nutan Mundeja	CMO (SAG)	Delhi State Health Mission	10-08-1961
8	Dr. Poonam Sareen Nee Kohli	CMO (NFSG)	Kasturba Hospital Darya Ganj, New Delhi-06	10-06-1967
9	Dr. Praveen Kumar	CMO (SAG)	Dr. Hedgewar Arogya Sansthan, Delhi 32	30-06-1959
10	Dr. Praveen Kumar Malik	Addl. Director (DGEHS)	Directorate of Health Services,	27-07-1960
11	Dr. Rakesh Kumar Gupta	Medical Superintendent	Deep Chand Bandhu Hospital	28-09-1960
12	Dr. Ramesh Chugh	Medical Superintendent	Janak Puri Super Speciality Hospital,	12-11-1958
13	Dr. Sandhya Jain	CMO (NFSG)	Dr. Baba Sahib Ambedkar Hospital	26-10-1966
14	Dr. Savita Babbar	Medical Superintendent	Deen Dayal Upadhyay Hospital, New Delhi	14-06-1957
15	Dr. Shashi Thapa	CMO (NFSG) Homeo	Delhi Govt. Dispensary Mangol Puri, Delhi-83	19-10-1953
16	Dr. Vandana Bagga	CMO NFSG	Guru Gobind Singh Govt. Hospital	19-12-1964
17	Dr. Vijay Kumar Gupta	Consultant (Ophthalmology)	Sanjay Gandhi Memorial Hospital	05-11-1958
18	Dr. Vipon Kapoor	Chief Medical Officer (Medical)	Charak Palika Hospital Moti Bagh -1,	24-11-1953
19	Dr. Virender Kumar Gautam	Director Professor Orthopaedics	MAMC & Lok Nayak Hospital, New Delhi-02	30-05-1955
20	Dr. Zeasaly S.K. Marak	CMO (NFSG)	Addl. CDMO (Central),	26-09-1968
	Nurses/Pharmacist/Paramedical Staff			
	Name	**Designation**	**Official Address**	**Date of Birth**
1	Arvinder Seth	Nursing Sister	Chacha Nehru Bal Chikitsalaya,	01-01-1958
2	Durga Singh	Nursing Sister	DDU Hospital, Hari Nagar	03-07-1963
3	Kanta Ahuja	Nursing Sister	Lal Bahadur Shastri Hospital	04-04-1958

4	Kiran	Nursing Sister	M.V. Hospital, Pooth Khurd, Delhi -39	08-08-1970
5	Kiran Ganju	Nursing sister	Lok Nayak Hospital, New Delhi-02	30-10-1953
6	Kusum Love	Sister In-charge	Guru Gobind Singh Govt. Hospital	26-04-1958
7	Lizy Cherian	Assistant Nursing Suptt.	Charak Palika Hospital, Moti Bagh- 1, New Delhi	03-03-1953
8	Lucy Patrick Simon	Nursing Sister	G.B. Pant Hospital, New Delhi- 110002	04-01-1959
9	Manjeet Kaur Marwah	Assistant Nursing Superintendent	Maulana Azad Institute of Dental Sciences, Delhi-02	18-01-1953
10	Meera Devi	Deputy Nursing Superintendent	Lok Nayak Hospital New Delhi-02	16-01-1953
11	Nirmala Devi	Nursing Sister	Sanjay Gandhi Memorial Hospital, Mangol Puri	08-04-1970
12	Nirmla Devi Navik	Deputy Nursing Superintendent	G.B. Pant Hospital, New Delhi-02	24-01-1953
13	Prem Bajaj	Nursing Sister	Sanjay Gandhi Memorial Hospital, Mangol Puri	01-05-1965
14	Radha Chopra	Nursing Sister	Dr. BSA Hospital, Rohini, New Delhi -85	15-04-1958
15	Sarasamma Rajan	ANM	CDMO (West), DGHS, A-2 Paschim Vihar	21-10-1956
16	Sarasamma .A. Kaimal	ANM	Lal Bahadur Shastri Hospital	19-06-1954
17	Saroj Devi	ANM	Sanjay Gandhi Memorial Hospital, Mangol Puri	19-03-1965
18	Shakuntla Badseara	Nursing Sister	Rao Tula Ram Memorial Hospital Jafarpur,	12-01-1964
19	Sudesh Doara	Nursing Sister	Babu Jagjiwan Ram Memorial Hospital	02-05-1960
20	Sunita Mogha	Nurse	Charak Palika Hospital Moti Bagh- 1, New Delhi	01-05-1962
21	Usha Rani Luthra	Nursing Sister	Babu Jagjiwan Ram Memorial Hospital	16-11-1960
22	Aleyamma Benzon	Lab .Technician	Sanjay Gandhi Memorial Hospital, Mangol Puri	30-05-1964
23	Anasua Dutta	Technical Asstt.	G B Pant Hospital, New Delhi -110002	11-02-1953
24	Bhawani Singh	Dental Mechanic	MAIDS, MAMC Complex	27-06-1960
25	C.R .Prameela	Pharmacist	DGD Vasundhra Enclave, Delhi- 96	14-02-1964
26	Chander Parkash	Pharmacist	Maulana Azad Institute of Dental Sciences,	06-03-1953
27	George Mathew	Technical Assistant	Deptt. of Anaesthesia. G.B. Pant Hospital	02-08-1961
28	Hari Om Sharma	O.T. Assistant	DDU Hospital, Hari Nagar New Delhi-64	07-09-1968
29	Harjinder Kaur	Lab. Technician	Bhagwan Mahavir Hospital, Pitam Pura	03-03-1963
30	Jagnesh Bansal	Pharmacist	Shri Dada Dev Matri Avum Shishu Chikitsalaya, Naseerpur	06-12-1967

31	Kusum Lata	Lab. Technician	BJRM Hospital, Jahangir Puri, Delhi-33	01-04-1968
32	Meenakshi Rehani	Refractionist	Lal Bahadur Shastri Hospital, Khichripur	31-01-1960
33	Narain Singh Keim	Pharmacist	DGHS (DGEHS), F-17, Karkardooma, Delhi-32	25-03-1954
34	Narender Kumar Tyagi	Sanitary Inspector	GB Pant Hospital, JLN Marg, New Delhi -110002	04-07-1957
35	Praveen Arora	Pharmacist,	Dr. BSA Hospital, Sec - 6, Rohini, New Delhi	01-08-1965
36	Randhir Singh Grewal	Pharmacist	Sanjay Gandhi Memorial Hospital, Mangol Puri	02-01-1958
37	Rohit Kumar	ECG Technician	DDU Hospital, Hari Nagar, New Delhi-64	07-08-1969
38	Sant Ram	O.T. Technician	Charak Palika Hospital (NDMC) Moti Bagh- 1	04-03-1953
39	Shashi Kiran Sood	Lab. Assistant	DGD Vasundhra Enclave, Delhi -96	22-04-1954
40	Valsamma Isac	Lab. Assistant	Delhi Govt. Dispensary Block - 5, Trilok Puri	17-11-1953
41	Amrit Lal	Nursing Orderly	DGHS (HQ), F-17, Karkardooma, Delhi-32	28-06-1961
42	Beer Sen	S.S.C	DGD Building, B' Block Prashant Vihar, Delhi	04-04-1962
43	Bhupender Kumar	Driver	Department of Health & Family Welfare, Delhi Secretariat	21-05-1954
44	Chaman Lal	Attendant	DGHS (HQ), F-17, Karkardooma, Delhi-32	06-04-1958
45	Dharamvir Singh	Driver	Sanjay Gandhi Memorial Hospital, Mangol Puri	15-05-1962
46	Hari Kishan	Sweeper cum Chowkidar	DGD Block No. 1, Kalyan Puri, Delhi -110091	19-02-1958
47	Jitender Prasad Sharma	Attendent	RTRM Hospital, Jafarpur New Delhi-73	22-10-1961
48	Bharat Bhushan	Nursing Orderly	DDU Hospital Hari Nagar, New Delhi-64	15-06-1972
49	Rakesh Kumar	Driver	Directorate of Health Services	15-01-1972
50	Vijay Kumar Basista	Field Worker	Directorate of Family Welfare	25-08-1954

6.25 TOBACCO CONTROL PROGRAMME

INTRODUCTION

In Delhi, National Tobacco Control programme is being executed through State Tobacco Control Cell, Directorate of Health Services, Dept of H & FW, GNCTD. Two act namely, Cigarette and other Tobacco Products Act (COTPA) 2003 and Delhi Prohibition of Smoking and Non – Smokers Health Protection Act 1996 are applicable in Delhi. Strict Enforcement of these acts is the main objectives of tobacco control programme in Delhi. Apart from that STCC Delhi is also implementing Tobacco Free Delhi Project, DRY DAY for TOBACCO Campaign, Awareness generation through targeted IEC / QUIZ Programme, Control over Gutkha and other raw Tobacco Products/ Hookah Bar, School based programme and Tobacco Cessation Services etc. With the aim to make Delhi Tobacco Free and protect the people from the ill effects of Second Hand Smoke.

A. FACTS ABOUT TOBACCO AND TOBACCO USE :

1. 41% male and 3.7% female in Delhi use any kind of tobacco product.
2. 14.1% students (upto age 15 yrs) currently use any tobacco products where 4.2% students currently smoke cigarettes and 11.9% currently use tobacco products other than cigarettes
3. Tobacco Products have 7000 deadly chemicals and among these toxic chemicals, 169 are known carcinogen
4. Every year in the world, around 50 lakh people die each year due to Tobacco Use and in India, Tobacco is responsible for 9 lakh deaths per annum.
5. India has highest number of oral cancer in the world and 90% of all oral cancer are due to tobacco habit.
6. 40% - 50% of all Cancer cases in India are due to Tobacco use.

In Delhi, Tobacco Control Activities have been initiated with the enactment of Delhi Prohibition of Smoking and Non – Smokers Health Protection Act 1996. Delhi is among the pioneer states in India which had separate tobacco control legislation even before enactment of Central Legislation i.e Cigarettes and Other Tobacco Products Act (COTPA) 2003. Both the Acts have common major provisions like –

a. Ban on Smoking in Public Places and Public Service Vehicles
b. Ban on direct / indirect advertisements of Tobacco Products
c. Ban on selling Tobacco Products within 100 meters / yards of any educational institutions
d. Ban on selling Tobacco Products to and by minors etc

B. CURRENT MAJOR ACTIVITY GOING ON UNDER TOBACCO CONTROL PROGRAMME IN DELHI

1. AWARENESS & ENFORCEMENT SQUADS : ANTI SMOKING RAIDING SQUADS has been renamed as DISTRICT TOBACCO AWARENESS AND ENFORCEMENT TEAM so as to make it more meaningful as our primary job should be to create awareness & sensitization towards tobacco control programme rather than to act as merely police man to generate revenue by issuing challan and have been extended to all eleven districts to enforce, monitor tobacco control legislation and create awareness. All the teams are working hard to create awareness and implement Delhi Act 1996 ,COTPA 2003 & Gutkha Ban 2012 through out Delhi.

2. TOBACCO CESSATION CENTRES : Two Tobacco Cessation Centers (one each at East district and New Delhi district) were made functional at the PHC level on alternate basis through three dispensaries covering all the district population. Accordingly Psychologists were recruited for counseling and sensitized Tobacco users to quit Tobacco habit. But salary issue these Psychologist have resigned from the programme.

3. DRY DAY FOR TOBACCO ON LAST DAY OF EVERY MONTH : Concept of DRY DAY for TOBACCO on last day of every month in Delhi has been made very popular & has become remarkable tool for Intensive Awareness & Enforcement drive in Delhi as compared to rest of India / world. On this particular day we appeal to all Tobacco Vendors for not to sell any Tobacco Products and also to Public for not to consume any Tobacco Products on that day. We publicized this concept through repeated newspaper advertisement and emails to more than 5000 offices – government / private and various social medias. Apart from this Intensive Awareness & Enforcement drives are being conducted through out the state on this day . Few Examples are –

a. Drive at Domestic & International Airport :

- 70 Taxi drivers and 100 people including airport staff were sensitized on Tobacco Related issues.
- A challan amounting to Rs 2900/- were issued to violators

b. Drive at Hookah Bars in Delhi :

- 12 Hookah Bars in West Delhi were raided.
- Challan amounting to Rs 16400/- were issued for various violations under COTPA 2003.
- Around 200 people were sensitized on Tobacco related issues.
- Samples were collected & has been sent for analysis for presence of Tobacco / Nicotine.

c. Drive at Interstate Bus Terminal, Kashmeri Gate, Delhi

- Around 300 people including staffs were sensitized.
- Challan amounting to Rs 3800 were issued to public violating Tobacco Control Laws
- Challan Amount Rs 25,000/- was issued to Government Bus Terminal as per COTPA 2003 which has been deposited.

d. Drive at New Delhi Railway Stations, Delhi

- Around 200 people including staff were sensitized
- Challan amounting to Rs 14000/- were issued

e. Drive against direct and indirect advertisement of Tobacco Products (Point of Sale Advertisement - POS) on 28.02.2015

- Around 60 Tobacco vendors / shops were raided and around 450 people including tobacco vendors & general public were sensitized
- 31 Challans of amount Rs 9500/- were issued
- 12 Panchnamas under section 5 of COTPA 2003 were filed.
- Advertisement boards (POS) & counters were removed from Tobacco shops
- Tobacco vendors were strictly warned not to display any kind of direct / indirect advertisements of tobacco products on boards or counters.
- They were also been advised for not to accept any kinds of gifts from tobacco companies.

4. BAN ON ALL CHEWABLE TOBACCO PRODUCTS IN DELHI : Earlier Govt of Delhi imposed complete ban on GUTKHA and Pan Masala having Tobacco or Nicotine as ingredients on September 2012. But the other chewable tobacco products like khaini, zarda etc were exempted from this ban. Inview of that STCC Delhi forwarded a fresh proposal to higher authority to impose complete ban on all chewable tobacco products. In response of our proposal, Food Safety Department, GNCTD Govt of Delhi has imposed complete ban on manufacture, storage, sale & distribution of chewable tobacco products like GUTKHA , Flavoured / Scented Tobacco and all Pan Masalas having nicotine or tobacco as ingredients in Delhi w.e.f 26.03.2015.

5.CAPACITY BUILDING / SENSITIZATION PROGRAMME : So far we have conducted capacity building / sensitization programme in following manner –

Department / Group	No of Programme	No of Participants
DTC Depot / Transport Deptt	18	524 (driver, conductor and other staff)
Airport Taxi drivers	2	70
Police Department	18	289
School / Educational Institutions	167	Around 116900 students and staffs.
Health Department	53	1196
Airport staff	1	100
ISBT, Kashmere Gate	6	300
New Delhi Railway Station	5	200
Restaurants- Hookabar	10	200
NGOs / Civil Societies	08	540

6. QUIZ PROGRAMME : A unique Quiz programme as an Awareness Tool through e-mails & social medias like facebook , whatsapp etc at ZERO COST TO EXCHEQUER was started seven months back and is still continuing. We are getting overwhelming response & people are quitting use of Tobacco while getting sensitized on tobacco related issues It has become a very useful awareness tool in Tobacco control Programme in Delhi & a Directory of Tobacco Aware Citizen of Delhi is being developed through this Quiz programme.We are now on 40th question. Questions & answers are being sent to more than 3000 emails of different departments under government and Private sectors along with further dissemination of the message to their subordinates, colleagues, relatives and family members etc. The best part of the quiz is that the participant has to communicate the correct answer of previous question to atleast 10 more people for further dissemination while answering the current question. It is not a knowledge testing tool but a remarkable awareness tool.

7. TOBACCO FREE DELHI INITIATIVE: A campaign to Make Delhi Tobacco Free has been initiated with the aim to make Delhi, Tobacco Free Capital of India in phase manner. In first instance Delhi Police, Transport Department, Education Department and Health Department will be declared Tobacco Free and gradually it will be implemented in rest of the departments. Two types of boards – Tobacco Free Zone & No Smoking Signage were innovated & circulated to all the departments for display. Apart from that every departments have been communicated to undertake following actions -

- Identification of nodal officer from all Department / Building/ Offices : We have received list of nodal officers from various department for training / coordination purpose.
- Display 'Tobacco Free Premises' board at the entrance of boundary wall in Hindi & English languages.
- Display of 'No – Smoking Signage' along with the name and contact detail of Nodal Officer within the building at entrance, reception, prominent places of every floor, staircase, lift and other important places. In this regard instruction sent to all concern department and organisation have stared displaying such boards within their premises.

Banning sale of tobacco products within radius of 100 mtr around all building under the departments by issuing self administrative order.

- IEC programme / awareness generation programme. Maximum utilization of departmental display board for dissemination of anti – tobacco messages.
- Ensure No-Smoking / Tobacco Free status within the premises.
- Instruction also sent for noncompliance of Tobacco Control Legislations & presence of direct / indirect evidence of smoking / use of gutkha like tobacco products may attract challan / fine of nodal officer / Head of the Institute as per Delhi Act 1996 & COTPA 2003.
- Ensuring ban on direct / indirect advertisement of Tobacco Products on State / Interstate Bus Services / Taxies / Autos / Trucks / Tempos /Others

- Display of Anti – Tobacco messages on Transport department properties, public service vehicles and bus / train / flight tickets etc
- Ensuring Smoke free / Gutkha like Tobacco free status in all public service vehicles – Buses, Taxis, Autos etc
- Apart from that regular inspection / monitoring is being conducted through State as well district units.
  - In response to these instruction required mandatory boards has been displayed by many Universities and schools.
  - North Delhi Municipal Corporation has initiated procurement of such display board.
  - Dispensaries and hospitals have also initiated the process to display required boards and same have been communicated to us.
  - Various departments have also submitted the name of nodal officers for sensitization and training purpose.
  - Special commissioner Delhi Police has issued instruction to all Police Stations for notifying nodal officers and for active participation in Tobacco Control activities of the State.

8. BAN ON DIRECT AND INDIRECT ADVERTISEMENT OF TOBACCO PRODUCTS (COUNTER ATTACK TO TOBACCO COMPANIES FOR ILLICIT TRADE PRACTICES): Efforts are being made to control Point of Sale advertisement and surrogate advertisement. In this regard the matter has been brought to the notice of concern department in following manner -

For Surrogate Advertisement Following Action Initiated :

1. Transport Department (for Inter State vehicles with tobacco advertisement entering Delhi from other states)
2. Directorate of Information and Publicity, GNCTD (for evolving terms and condition for empanelled advertisement agencies for restriction of direct /indirect advertisement.
3. DAVP / DIP empanneled advertisement agencies : It has been noticed that tobacco companies mostly place advertisement (surrogate / indirect) through outdoor media and by hiring services of advertisement agencies which are empanelled with DIP or DAVP. Therefore some modifications in terms and condition for advertisement agencies will have a great impact on illegal practices of tobacco companies & such surrogate advertisement can be avoided.
4. In view of above special sensitization programme was conducted for the representatives of various out door, print and website media, where they have been sensitized on impact of direct and indirect advertisement of Tobacco products on minor and less educated population of India.
5. 26 media companies have given us undertaken that they will not partcipate in any Tobacco related direct / indirect advertisement in Social / Public cause.
6. We also brough this matter to DAVP , DIP and Delhi Metro . In response to this letter, Delhi Metro have issued instruction to the agencies empanneled with them for not to indulge in any direct and indirect advertisement of Tobacco Products.
7. DAVP has suggested us to approach Advertising Standard Council (ASCI) of India as ASCI is the nodal organisation in India to look after the matter related to surrogate / indirect advertisement we have written to ASCI for the same.
8. The matter has also been brought to the notice of Secretary, Ministry of Consumer Affairs, Food and Public Distribution, GoI as per their provision to protect the consumers from misleading advertisement and illegal practice of Tobacco Companies.
9. Various media people of different print agencies have also been sensitized on tobacco related issues and are supporting us in our mission to make Delhi Tobacco Free Capital of India.
10. Letters have been written to various tobacco companies to restrain from direct / indirect advertisement of tobacco products especially – Dilbagh Pan Masala, Shikhar Pan Masala, Pataka Tea etc.

For Point of Sale Advertisement Following Action Initiated :

1. MCD , NDMC and Home Department (for removal of Point of Sale Advertisements which are not as per rule). Repeated letters written. Number of challans issued.
2. We have communicated the Tobacco Companies and Tobacco Vendors association in writing for the removal of all kinds of advertisement boards from the shops as some of the shop owners were not aware about the rules and they take these boards / counters as gift from the tobacco companies. They hang it at their shop without knowing that these are illegal. . Therefore all the Tobacco companies have been strictly instructed inwritting to Stop distributing such kind of illegal boards / counters to the tobacco vendors.

9. VAT / TAX HIKE ON TOBACCO PRODUCTS:

In Delhi right now the VAT was 20% across all Tobacco Products. We have proposed to increase VAT upto 50% Level. In this regard a meeting was held under the chairmanship of Chief Secretary, GNCTD along with Finance Secretary. The file is under consideration at Government of Delhi level.

10. ENFORCEMENT OF TOBACCO CONTROL LEGISLATION (FY 2014 -15)

- No of Public Place and Public Service Vehicle Inspected – 8649
- No of Person Fined under Public Places and Public Service Vehicle – 2656
- No of Tobacco Vendors Fined – 456
- Total fine Collected (in INR) – Rs 2,98,160/-

11. OTHER UNIQUE INNOVATIVE ACTIVITIES :

a. Delhi State Tobacco Control Cell has evolved new innovative Tobacco Free Zone boards and No – Smoking Signage along with revised specification and details of Nodal Officer to cover Gutkha like chewable Tobacco Products under the legal provisions. The specification of boards were circulated to different departments in Delhi and CBSE. CBSE has circulated our board throughout India for implementations.

b. We are in a process of incorporate a chapter / subject on Tobacco related issues in the course curriculum of CBSE for 6th – 12th standard students . In this regard we had already communicated with CBSE, NCERT, Ministry of HRD. In response to our communication, State Council of Educational Research and Training have asked few modules on Tobacco Control issues which we have share with them.

c. We have collected samples from hookah bars in Delhi. We are in process of lab testing/ chemical analysis of these sample to check the nicotine and tobacco substance presence in these samples.

d. On our repeated request, in the interest of Tobacco Control Programme, the Licensing Department of Delhi Police has modified the registration / renewal forms of restaurant / eating houses and have included the provisions of Tobacco / Smoke Free rules to protect the public.

e. To protect the minors and the pregnant females attending dispensaries / hospitals, on the instruction of State Tobacco Control Cell, the CDMOs have issued orders that Tobacco sale within the radius of 100 meters from all health centers is prohibited.

f. Spl. Commissioner, Delhi Police for the first time issued instructions to all districts/ Police Stations regarding nomination of Nodal Officers for Tobacco Control Activities and to provide necessary support in this regard to Health Department in the day to day Tobacco Control activities.

Enforcement Data of Tobacco Control Legislation in Delhi since 2007 to March 2015

1. No. of Public Place and Public Service Vehicle Inspected - 405422
2. No. of Person Fined under Public Places and Public Service Vehicle - 70563
3. No of Tobacco Vendors Fined - 6941
4. Total fine Collected (in INR) - Rs 59,74,6900/-

TOBACCO KILLS - QUIT NOW

6.26 THALASSEMIA CONTROL PROGRAMME

Thalassemia is a preventable disease and public at large first needs to make aware about the implications of the diseases as a life long burden. Public should be informed for timely action so that the chances of delivered baby being Thalassemia major is eliminated in the long run. Thus it is required to have sustained information on the preventive, promotive and early detection of Thalassemia.

In Delhi, services for Thalassemic patients are being rendered mainly through GTB Hospital, Lok Nayak Hospital, Chacha Nehru Bal Chikitsalaya, BSA Hospital and DDU Hospital. Apart from that screening facilities for Thalassemia are also available in Delhi government hospitals. However the following activities have been undertaken under Thalassemia Control Programme –

1. IEC / Awareness Generation / Sensitization Programme on Thalassemia :
2. Screening and Diagnosis Facilities of Thalassemia
3. HPLC testing facility for Thalassemia trait for confirmation of diagnosis at GTB Hospital, Lok Nayak Hospital, Chacha Nehru Bal Chikitsalaya, BSA Hospital and DDU Hospital
4. Blood transfusion facility for Thalassemic Patients in all these hospitals
5. Thalassemia Day Care Centre Services
6. Sensitization and Training of Medical and para medical staff
7. Observation of International Thalassemia Day (8th May)

6.27 COMPUTERIZATION OF DGHS (HQ) AND SUBORDINATE OFFICES

A Computer cell is involved in computerization of DHS (HQ) and subordinate offices and carrying out the following activities for period 2014-2015:

1. Computer Branch is maintaining an intranet facility with two servers and 150 nodes since 2004 that connects the DGHS (HQ) with its various subordinate offices including various district health administrations and special schemes like Mobile Health Schemes and School Health Schemes.
2. Provided AMC Support for Computers & Peripherals.
3. It maintains the web-server that supports various applications being used by various branches of DGHS. In addition it collects OPD and IPD Registration data 38 Delhi Govt Hospitals and 260 dispensaries.
4. It maintains two mbps lease lines and one DSWAN lines to meet the communication needs of the DGHS Intranet.
5. The System had become old and new districts have been added. Accordingly a need-assessment has been done with intent to bring out the next advanced version of the Application Software.
6. Performance data of the computer cell in 2014-15 is as below :
   a. Computer cell also provided IT Support and help centre for various branches of DGHS.
   b. Requests from Depts. Under H&FW for up-loading information : Around 1450
   c. New Web pages designed for various Dept/Hospitals: 25
   d. Modifications done on existing pages for various Dept/Hospitals: 65

6.28 STATE HEALTH INTELLIGENCE BUREAU CUM RESEARCH/ANALYSIS CELL

The State Health Intelligence Bureau Branch was established in the Directorate General of Health Services in 1989 under Plan Scheme. This branch collects, compiles and analysis the health related data of GNCT of Delhi i.e. Communicable and Non-communicable disease, Status Report, Morbidity Data (ICD-10), Mother Lab reports. SHIB prepares Annual report, citizen-charter, health facility.

Functioning/Achievements:-

- Online monthly reporting of Communicable & Non-communicable diseases, received from various Hospitals of Delhi, to CBHI, Govt. of India.
- Collection & compilation of Morbidity & Mortality report (ICD-10), Mother Lab Report and Status Report of Health Institutions of Delhi.
- Preparation of Annual report 2013-14.
- Collection & compilation of annual data for 'Statistical Hand Book' and submit the same to Dte. of Economics & Statistics , GNCT of Delhi.
- Collection, compilation & preparation of annual data for National Health Profile Publication from various hospitals/ health outlets of Delhi and submit to the CBHI.
- Preparation of Citizen Charter of DHS.
- Dealing with RTI matters and other miscellaneous matters.
- In addition to above this branch is also assigned responsibility to prepare the reply of the Parliament/Assembly Questions/Assurance for which the material and

information are collected from the concerned Programme Officers, Scheme Incharges, Districts of this Directorate and other health outlets concerned.

6.29 Statement of non-communicable diseases during 2014 reported by various hospitals / health institutions in Delhi.

Code	Disease Name	Cases			Deaths		
		Male	Female	Total	Male	Female	Total
NCD 11	Hypertension	67580	56269	123849	706	484	1190
NCD 12	Ischemic Heart Diseases	44476	21485	65961	555	237	792
NCD 21	Cerebro Vascular Accident	8263	4630	12893	291	143	434
NCD 22	Other Neurological Disorders	4873	3203	8076	77	64	141
NCD 31	Diabetic Mellitus Type – I	11610	10091	21701	70	52	122
NCD 32	Diabetic Mellitus Type – II	47537	41667	89204	527	435	962
NCD 41	Bronchitis	9123	5535	14658	8	8	16
NCD 42	Emphysemas	1575	727	2302	4	1	5
NCD 43	Asthma	22633	17582	40215	29	19	48
NCD 51	Common Mental Disorder	3223	2086	5309	25	0	25
NCD 52	Severe Mental Disorder	1505	1235	2740	0	0	0
NCD 6	Accidental Injuries	43499	25901	69400	350	113	463
NCD 7	Cancer	38091	36461	74552	1164	873	2037
NCD 8	Snake Bite	61	41	102	1	1	2
Grand Total		**304049**	**226913**	**530962**	**3807**	**2430**	**6237**

This report is collected by SHIB on monthly basis from hospitals situated in Delhi with possibility of duplication of cases or incomplete reporting besides errors in the process of coding / data entry.

6.30 Statement of principal communicable diseases during 2014 reported by various hospitals / health institutions in Delhi.

Sl. No.	Name of the Disease	No. of Patients						Deaths (IPD ONLY)		
		OPD		IPD		Total				
		Male	Female	Male	Female	Male	Female	Male	Female	Total
1	Acute Diarrhoeal Disease	58767	45655	8279	6915	67046	52570	36	37	73

2	Diptheria	977	638	133	80	1110	718	35	27	62
3	Tetanus other than Neonatal	30	1	25	16	55	17	12	4	16
4	NeoNatal Tetanus	0	0	5	3	5	3	0	0	0
5	Wooping Cough	0	1	10	4	12	5	0	0	0
6	Measels	210	120	556	349	766	469	10	5	15
7	Acute Respiratory infection	204457	155243	5717	3925	210174	159168	64	42	106
8	Pneumonia	11951	9769	4559	2789	16510	12558	275	156	431
9	Entric Fever	11553	9991	2708	2096	14261	12087	10	4	14
10	Viral Hepatitis - A	1904	1477	364	220	2268	1697	10	2	12
11	Viral Hepatitis – B	264	148	838	445	1102	593	30	15	45
12	Viral Hepatitis – C,D,E	153	62	672	394	825	456	28	11	39
13	Meningococcal Meningitis	3	2	44	11	47	13	1	0	1
14	Rabies***	12	5	22	12	34	17	10	3	13
15	AIDS (as reported to NACO)	42	6	176	34	218	40	7	1	8
16	Syphillis	85	48	10	3	95	51	0	0	0
17	Gonococcal infection	43	28	1	3	44	31	0	0	0
18	Other STD Diseases	55	30	3	2	58	32	0	0	0
19	Pulmonory Tuberculosis	11299	17072	3902	1494	15201	18566	61	23	84
20	Kala Azar	1	1	3	1	4	2	0	0	0
21	Japanese Encephalitis	0	0	0	0	0	0	0	0	0
22	Cholera	5	40	13	7	18	47	1	0	1
23	Swine Flu	0	0	0	1	0	1	0	0	0
24	Chicken Pox	456	316	40	31	496	347	1	0	1
25	Encephalitis	7	5	147	85	154	90	10	10	20
26	Viral Meningitis	38	15	263	175	301	190	12	12	24
27	All Other diseases treated in institution excluding above mentioned diseases**	170	0	6013	8941	6183	8941	106	94	200
Total		**302482**	**240673**	**34503**	**28036**	**336987**	**268709**	**719**	**446**	**1165**

This report is collected by SHIB on monthly basis from hospitals situated in Delhi with possibility of duplication of cased or incomplete reporting besides errors in the process of coding / data entry and may also be at variance from that under IDSP.

6.31 Statement of compiled morbidity & mortality reports with ICD-10 codes from various hospitals in Delhi during 2014 .

ICD CODE	DISEASE NAME	OPD M	OPD F	OPD CH	IPD M	IPD F	IPD CH	DEATH M	DEATH F	DEATH CH
A00	Cholera	4694	5297	5157	6	53	21	0	0	0
A00-A09	Intestinal infectious diseases	48432	49760	46987	148	141	152	0	0	0
A01	Typhoid and parathyphoid fevers	13427	13839	9663	1605	1088	1618	15	6	2
A02	Other Salmonella infection	192	525	192	7	4	14	2	0	0
A03	Shigellosis	16	19	1142	2	3	141	0	1	0
A04	Other bacterial intestinal infections	1439	982	110	16	8	23	0	0	0
A05	Other bacterial foodborne intoxications	679	210	368	14	5	7	0	0	0
A06	Amoebiasis	22214	23053	24391	330	166	188	0	0	1
A07	Other protozoal intestinal diseases	577	614	410	13	2	4	0	1	1
A08	Viral and other specified intestinal infections	710	456	407	24	28	65	0	0	0
A09	Diarrhoea and gastroenteritis of presumed infections origin	111823	88649	113786	2969	3160	5642	42	36	25
A15	Respiratory tuberculosis, bacteriologically and histologically confirmed	8231	6501	483	496	257	119	62	39	1
A16	Respiratory tuberculosis, not confirmed bacteriologically or histologically	2873	2138	712	1174	573	112	22	28	3
A18	Tuberculosis of other organs	3156	1924	683	341	286	64	10	3	3
A20-A28	Certain zoonotic bacterial diseases	1229	1155	975	7	5	0	0	0	0
A30	Leprosy Hansen's disease	1247	1161	878	5	1	0	0	0	0
A30-A49	Other bacterial diseases	3355	1474	676	74	36	15	55	18	1
A31	Infection due to other mycobacteria	1040	843	204	39	27	3	0	0	0
A37	Whooping cough	186	754	307	8	9	36	0	1	0
A40	Streptococcal septicaemmia	117	116	117	3	9	17	2	0	0
A41	Other septicaemia	4	9	4	1892	1113	791	1028	448	258
A49	Bacterial infection of unspecified site	759	880	859	33	25	10	0	2	0
A50	Congenital syphillis	211	1198	6	1	4	2	0	0	0
A50-A64	Infections with a predominantly sexual mode of trasmission	912	2543	0	0	0	0	0	0	0
A51	Early syphillis	75	38	0	0	0	1	0	0	0
A52	Late syphilis	12	11	0	1	0	0	0	0	0
A54	Gonococcal infection	282	358	0	2	3	0	0	0	0
A57	Chancroid	37	0	0	0	1	1	0	0	0
A58	Granuloma inguinale	78	25	1	0	1	0	0	0	0
A59	Trichomoniasis	291	1414	35	0	0	0	0	0	0
A60	Anogenital herpesviral (herpes simplex) infections	0	24	2	3	1	0	0	0	0
A63	Other predominantly sexually transmitted diseases, not elsewhere classified	95	185	0	2	1	0	0	0	0
A64	Unspecified sexually transmitted disease	114	527	0	5	6	0	0	1	0
A65	Nonvenereal syphilis	703	538	0	0	0	0	0	0	0

A65-A69	Other spirochaetal diseases	9	11	7	0	0	0	0	0	0
A70-A74	Other disease caused by chlamydiae	129	74	0	0	0	0	0	0	0
A71	Trachoma	284	645	410	0	2	6	0	0	0
A82	Mosquito-borne viral encephalitis	65	55	40	0	1	0	1	0	0
A87	Viral meningitis	59	56	66	37	29	61	4	4	6
A90	Dengue fever (classical dengue)	146	186	65	673	377	232	6	5	3
A90-A99	Arthropod-borne viral fevers and viral haemorrhagic fevers	13	15	0	66	62	16	0	0	0
A92	Other mosquito-borne viral fevers	21	79	168	257	183	177	1	0	0
A93	Unspecified arthropod-borne viral fever	576	387	108	23	17	3	0	0	0
B00	Herpesviral [herpes simplex] infections	476	398	273	12	9	1	0	0	0
B01	Varicella [chickenpox]	531	253	626	52	7	11	0	0	0
B02	Zoster [herpes zoster]	744	375	135	42	64	3	2	0	0
B05	Measles	171	125	222	1	1	88	0	0	3
B06	Rubella [German measles]	86	71	151	0	0	0	0	0	0
B07	Viral warts	999	523	563	26	3	49	0	0	0
B08	Other viral infections characterized by skin and mucous membrane lesions,not elsewhere classified	162	97	182	0	1	2	0	0	0
B09	Unspecified viral infection characterized by skin and mucous membrane lesions	181	135	73	4	3	23	0	0	0
B15	Acute hepatitis A	1964	2185	63	166	101	61	1	0	0
B16	Acute hepatitis B	268	137	49	156	78	22	3	3	0
B17	Other acute viral hepatitis	80	21	7	236	129	48	4	1	0
B18	Chronic viral hepatitis	90	8	4	632	320	60	52	14	2
B19	Unspecified viral hepatitis	1733	1314	2459	149	56	89	3	1	0
B20	Human immunodeficiency virus [HIV] disease resulting in infectious and parasitic diseases	55	56	0	23	5	0	3	1	0
B20-B24	Human immunodeficiency virus (HIV) diease	231	180	0	90	30	0	1	0	0
B21	Human immunodeficiency virus [HIV] disease resulting in malignant neoplasms	19	17	0	1	0	0	0	0	0
B22	Human immunodeficiency virus [HIV] disease resulting in other specified diseases	545	356	0	1	1	0	0	0	0
B23	Human immunodeficiency virus disease resulting in other conditions	1323	78	24	33	4	1	1	0	0
B24	Unspecified human immunodeficiency virus (HIV) disease	942	126	0	151	55	0	4	0	0
B25	Cytomegaloviral disease	979	1118	1280	3	0	3	0	0	0
B25-B34	Other viral diseases	6575	8408	6684	4	3	7	0	0	0
B26	Mumps	197	255	483	2	1	5	0	0	0
B27	Infectious mononucleosis	5	2	2	10	5	3	0	0	0
B30	Viral conjunctivitis	10466	10317	6987	1	1	1	0	0	0
B33	Other viral diseases, not elsewhere classified	7971	7173	3966	29	21	41	0	0	0
B34	Viral infection of unspecified site	2944	2445	3946	16	65	52	0	1	0

B35	Dermatophytosis	23216	18476	9201	183	160	84	0	0	0
B35-B49	Mycoses	13887	12591	7681	9	3	3	1	0	0
B36	Other superficial mycoses	7302	6383	3845	2	2	0	0	0	0
B37	Candidiasis	2440	3365	2040	76	59	5	2	0	0
B38	Coccidioidomycosis	64	51	20	0	0	0	0	0	0
B39	Histoplasmosis	40	44	29	0	2	0	0	0	0
B48	Other mycoses, not elsewhere classified	77	52	26	1	0	0	0	0	0
B49	Unspecified mycosis	183	164	173	6	2	0	0	0	0
B50	Plasmodium falciparum malaria	5396	1272	195	38	29	26	3	0	1
B50-B64	Protozoal disease	502	550	636	2	0	0	0	0	0
B51	Plasmodium vivax malaria	450	423	377	115	55	32	1	0	0
B52	Plasmodium malariae malaria	79	62	39	3	4	0	0	0	0
B54	Unspecified malaria	100	92	77	145	60	25	2	2	0
B60	Other protozoal diseases, not elsewhere classified	214	231	87	0	0	0	1	0	0
B64	Unspecified protozoal disease	105	131	123	0	1	0	0	0	0
B65	Schistosomiasis (bilharziasis)	7938	3377	4662	0	0	3	0	0	0
B65-B83	Helminthiases	16465	19181	26689	1	0	1	0	0	0
B67	Echinococcosis	78	97	154	17	24	2	0	0	0
B68	Taeniasis	512	398	309	0	5	0	0	0	0
B69	Cysticercosis	192	184	261	46	23	48	0	0	0
B76	Hookworm diseases	768	940	1928	3	0	0	0	0	0
B77	Ascariasis	2481	2917	4720	108	79	52	0	0	0
B80	Enterobiasis	104	163	220	5	19	78	0	0	0
B81	Other intestinal helminthiases, not elsewhere classified	3090	2513	2296	1	0	7	0	0	0
B82	Unspecified intestinal parasitism	6167	9314	17773	4	0	4	0	0	0
B83	Other helminthiases	548	645	850	1	7	4	0	0	0
B85	Pediculosis and phthiriasis	5588	4944	6910	0	2	0	0	0	0
B85-B89	Pediculosis, acariasis and other Infestations	17694	19619	18805	0	0	0	0	0	0
B86	Scabies	43594	42208	37618	93	42	71	0	0	0
B88	Other infestations	144	28	534	2	0	2	0	0	0
B89	Unspecified parasitic disease	424	455	575	0	1	0	0	0	0
B90	Sequelae of tuberculosis	309	298	76	94	64	26	2	2	0
B90-B94	Sequelae of infectious and parasitic disease	263	208	140	1	0	0	0	0	0
B95	Streptococcus and staphylococcus as the cause of diseases classified to other chapters	56	104	119	3	1	1	0	0	0
C02	Malignant neoplasm of other and unspecified parts of tongue	219	54	1	433	122	40	7	4	6
C03	Malignant neoplasm of gum	69	12	0	128	25	0	1	0	0
C06	Malignant neoplasm of other and unspecified parts of mouth	375	45	0	464	56	4	11	1	0
C08	Malignant neoplasm of other and unspecified major salivary glands	24	26	52	5	5	0	0	0	0
C10	Malignant neoplasm of oropharynx	65	17	1	144	7	0	1	0	0
C11	Malignant neoplasm of nasopharynx	22	11	1	107	27	5	5	0	0

C12	Malignant neoplasm of pyriform sinus	29	2	9	137	8	3	3	1	0
C15	Malignant neoplasm of oesophagus	216	156	35	523	235	0	34	12	0
C16	Malignant neoplasm of stomach	148	63	4	529	234	1	16	9	0
C18	Malignant neoplasm of colon	101	67	0	577	337	4	12	9	0
C19	Malignant neoplasm of rectosigmoid junction	14	7	0	133	24	0	4	1	0
C20	Malignant neoplasm of rectum	88	44	0	407	206	1	11	6	0
C21	Malignant neoplasm of anus and anal canal	37	6	0	53	21	1	0	0	0
C22	Malignant neoplasm of liver and intrahepatic bile ducts	116	50	2	721	350	21	72	27	0
C23	Malignant neoplasm of gallbladder	143	293	8	402	633	0	22	37	0
C24	Malignant neoplasm of other and unspecified parts of biliary tract	28	9	0	150	58	3	5	12	0
C25	Malignant neoplasm of pancreas	78	41	0	333	265	7	18	13	0
C32	Malignant neoplasm of larynx	136	14	6	290	46	0	6	2	0
C33	Malignant neoplasm of trachea	0	0	0	4	4	0	1	0	0
C34	Malignant neoplasm of bronchus and lung	386	112	0	1315	403	1	107	14	0
C40	Malignant neoplasm of bone and articular cartilage of limbs	53	29	24	68	35	28	0	0	0
C41	Malignant neoplasm of bone and articular cartilage of other and unspecified sites	31	15	7	131	67	28	2	2	0
C43-C44	Melanoma and other malignant neoplasms of skin	666	654	626	1	0	0	0	0	0
C50	Malignant neoplasm of breast	0	930	0	0	5440	0	0	55	0
C51-C58	Malignant neoplasms of female genital organs	0	208	0	0	39	0	0	2	0
C53	Malignant neoplasm of cervix uteri	0	227	0	0	564	0	0	15	0
C54	Malignant neoplasm of corpus uteri	0	125	0	0	314	0	0	6	0
C56	Malignant neoplasm of ovary	0	210	0	0	1213	0	0	20	0
C61	Malignant neoplasm of prostate	296	0	0	774	0	0	28	0	0
C64	Malignant neoplasm of kidney, except renal pelvis	63	20	1	153	47	65	5	2	1
C64-C68	Malignant neoplasm of urinary tract	20	30	9	9	1	0	0	0	0
C67	Malignant neoplasm of bladder	202	65	0	568	102	2	6	2	0
C71	Malignant neoplasm of brain	69	40	18	227	169	79	19	5	1
C73	Malignant neoplasm of thyroid gland	50	63	1	84	157	9	1	4	1
C76	Malignant neoplasm of other and ill-defined sites	10	6	1	116	29	7	0	0	0
C78	Secondary malignant neoplasm of respiratory and digestive organs	87	53	1	279	215	4	21	14	0
C79	Secondary malignant neoplasm of other sites	98	54	0	189	149	17	9	1	0
C80	Malignant neoplasm	76	38	0	131	103	7	5	3	0

	without specification of site									
C81	Hodgkin's disease	27	8	8	196	93	64	6	5	0
C82	Follicular [nodular] non-Hodgkin's lymphoma	6	2	1	101	39	0	4	0	0
C85	Other and unspecified types of non-Hodgkin's lymphoma	86	45	5	437	263	58	31	15	0
C90	Multiple myeloma and malignant plasma cell neoplasms	42	25	0	424	210	30	19	4	0
C91	Lymphoid leukaemia	50	10	43	302	142	1000	22	13	3
C92	Myeloid leukaemia	80	42	9	300	146	75	21	13	2
D10	Benign neoplasm of mouth and pharynx	332	269	155	21	19	5	0	1	0
D10-D36	Benign neoplasms	214	283	126	4	30	2	0	0	0
D11	Benign neoplasm of major salivary glands	317	317	22	26	27	2	0	0	0
D14	Benign neoplasm of middle ear and respiratory system	3	1	0	130	41	6	9	1	0
D17	Benign lipomatous neoplasm	523	533	45	71	57	16	0	0	0
D18	Haemangioma and lymphangioma, any site	5	6	143	38	29	47	1	0	0
D21	Other benign neoplasms of connective and other soft tissue	754	661	337	7	16	3	0	1	0
D23	Other benign neoplasms of skin	421	487	89	10	2	4	0	0	0
D24	Benign neoplasm of breast	0	2131	0	0	338	0	0	0	0
D25	Leiomyoma of uterus	0	959	0	0	1680	0	0	1	0
D27	Benign neoplasm of ovary	0	234	0	0	100	0	0	0	0
D31	Benign neoplasm of eye and adnexa	168	190	33	1	3	2	0	0	0
D34	Benign neoplasm of thyroid gland	75	494	8	2	4	1	0	0	0
D50	Iron deficiency anaemia	24642	52340	25056	936	1614	437	19	16	0
D50-D53	Nutritional anaemias	24644	46830	29603	98	116	23	7	2	0
D51	Vitamin B 12 deficiency anaemia	8512	6957	3918	109	71	5	2	0	0
D52	Folate deficiency anaemia	4715	3671	2419	21	27	6	0	0	0
D53	Other nutritional anaemias	7964	13332	7579	175	184	94	1	2	0
D55	Anaemia due to enzyme disorders	160	263	317	4	4	5	0	0	0
D55-D59	Haemolytic anaemias	183	176	116	0	2	3	0	0	0
D56	Thalassaemia	114	200	121	311	142	1022	3	0	0
D64	Other anaemias	168	260	356	896	1018	221	17	21	4
D69	Purpura and other haemorrhagic conditions	7	2	1	310	205	116	10	7	2
E00	Congenital iodine-deficiency syndrome	540	730	23	3	6	1	0	0	0
E00-E07	Disorders of thyroid glad	1559	1880	75	1	10	0	1	0	0
E01	Iodine-deficiency-related thyroid disorders and allied conditioins	1253	1517	47	10	36	4	2	4	0
E02	Subclinical iodine-deficiency hypothyroidism	405	586	99	203	253	0	1	0	0
E03	Other hypothyroidism	1889	2004	86	1474	3018	81	21	38	0
E04	Other nontoxic goitre	122	148	0	32	146	4	0	0	0
E05	Thyrotoxicosis (hyperthyroidism)	360	363	66	107	190	2	4	3	0
E06	Thyroiditis	70	117	21	7	28	0	0	0	0

E07	Other disorders of thyroid	201	145	6	6	12	1	0	0	0
E10	Insulin-dependent diabetes mellitus	18271	17320	749	1385	1098	45	85	55	0
E10-E14	Diabetes mellitus	46669	44361	425	97	46	1	3	2	0
E11	Non-insulin-dependent diabetes mellitus	53127	44954	1472	10886	5993	100	202	96	0
E12	Malnutrition-related diabetes mellitus	6	8	0	12	18	0	0	0	0
E13	Other specified diabetes mellitus	2	0	7	4	3	0	0	0	0
E14	Unspecified diabetes mellitus	5248	5067	95	4700	2682	120	109	110	0
E15	Nondiabetic hypoglycaemic coma	0	0	0	5	0	0	1	0	0
E20	Hypoparathyroidism	375	397	0	8	10	1	0	1	0
E20-E35	Disorder of other endocrine glands	524	399	6	0	0	0	0	0	0
E21	Hyperparathyroidism and other disorders of parathyroid gland	117	111	0	24	15	0	0	0	0
E40	Kwashiorkor	545	225	490	3	0	13	0	0	0
E40-E46	Malnutrition	4118	6548	8481	0	0	0	0	0	0
E41	Nutritional marasmuns	4	30	368	1	0	1	0	0	0
E42	Marasmic kwashiorkor	0	1	71	1	0	0	0	0	0
E43	Unspecified severe protein-energy malnutritiion	61	133	262	2	3	94	0	0	9
E44	Protein-energy malnutrition of moderate and mild degree	914	540	7671	0	4	164	1	0	2
E45	Retarded development following protein-energy malnutrition	49	91	95	0	2	16	0	0	0
E46	Unspecified protein-energy malnutrition	4058	3626	4932	6	12	42	0	0	1
E50	Vitamin A deficiency	4037	5368	4500	5	9	11	0	0	0
E50-E64	Other nutritional deficiencies	19811	23131	16218	0	0	0	0	0	0
E51	Thiamine deficiency	250	274	172	2	2	0	0	0	0
E52	Niacin deficiency (pellagra)	120	175	229	0	0	0	0	0	0
E53	Deficiency of other B group vitamins	13628	16489	8181	144	104	9	0	0	0
E54	Ascorbic acid deficiency	1083	1940	1861	5	1	12	0	0	0
E55	Vitamin D deficiency	7260	12774	6158	278	297	162	2	0	1
E56	Other vitamin deficiencies	103	148	78	21	7	5	0	0	0
E58	Dietary calcium deficiency	9955	20507	9492	6	1	33	0	0	0
E63	Other nutritional deficiencies	147	189	118	3	6	1	0	0	0
E64	Sequelae of malnutrition and other nutritional deficiencies	297	483	309	0	2	2	0	0	0
E65	Localized adiposity	648	684	364	0	0	1	0	0	0
E65-E68	Obesity and other hyperalimentation	3293	3737	659	1	3	0	0	0	0
E66	Obesity	2578	2303	537	334	448	10	4	5	0
E67	Other hyperalimentation	638	0	0	0	0	0	0	0	0
E70-E90	Metabolic disorders	493	941	51	1	0	0	0	0	0
E78	Disorders of lipoprotein metabolism and other lipidaemias	9	1	0	234	113	0	3	0	0
E86	Volume depletion	702	1200	354	236	255	389	2	0	0
E87	Other disorders of fluid, electrolyte and acid-base balance	668	492	463	638	388	99	117	59	3
F00*	Demential in Alzheimer's	354	303	0	0	2	0	0	0	0

	disease									
F00-F09	Organic, including symptomatic, mental disorders	185	145	28	0	0	0	0	0	0
F03	Unspecified dementia	417	218	8	109	56	7	2	0	0
F09	Unspecified organic or symptomatic mental disorder	530	0	0	2	4	0	0	0	0
F10	Mental and behavioural disorders due to use of alcohol	2142	138	85	500	16	1	14	1	0
F10-F19	Mental and behavioural disorders due to psychoactive substance use	927	93	105	0	0	0	0	0	0
F11	Mental and behavioural disorders due to use of opioids	438	40	22	40	6	5	0	0	0
F12	Mental and behavioural disorders due to use of cannabinoids	687	17	52	76	0	1	0	0	0
F13	Mental and behavioural disorders due to sedatives or hypnotics	103	42	0	2	0	0	0	0	0
F17	Mental and behavioural disorders due to use of tobacco	401	96	0	13	0	0	0	0	0
F18	Mental and behavioural disorders due to use of volatile solvents	63	11	14	9	1	0	0	0	0
F19	Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances	1023	3	8	23	1	0	0	0	0
F20	Schiezophrenia	1667	1330	80	434	219	21	0	0	0
F20-F29	Schizophrenia, schizotypal and delusional disorders	2112	2112	123	0	0	0	0	0	0
F22	Persistent delusional disorders	257	343	46	12	13	1	0	0	0
F23	Acute and transient psychotic disorders	774	885	86	49	52	16	0	0	0
F25	Schizoaffective disorders	158	63	0	24	5	0	0	0	0
F28	Other nonorganic psychotic disorders	188	78	13	29	1	1	0	0	0
F29	Unspecified nonorganic psychosis	1006	793	93	91	106	12	1	0	0
F30	Manic episode	442	294	46	40	24	6	0	0	0
F30-F39	Mood (affective) disorders	2976	3559	159	0	1	0	0	0	0
F31	Bipolar affective disorder	1195	611	66	376	125	30	2	0	0
F32	Depressive episodes	2636	2678	129	133	106	8	0	0	0
F33	Recurrent depressive disorder	735	731	12	28	17	4	1	0	0
F34	Persistent mood [affective] disorders	384	522	11	1	5	1	0	0	0
F39	Unspecified mood (affective) disorder	236	421	38	3	10	1	0	0	0
F40	Phobic anxiety disorders	231	208	15	2	2	1	0	0	0
F40-F48	Neurotic, stress-related and somatoform disorders	2926	3295	114	0	3	1	0	0	0
F41	Other anxiety disorders	2140	2166	58	74	109	5	0	0	0
F42	Obessive - compulsive disorder	1123	794	60	26	18	6	0	0	0
F43	Reaction to severe stress, and adjustment disorders	915	1154	273	6	15	3	0	0	0
F44	Dissociative [conversion] disorders	254	677	96	14	20	5	0	0	0
F45	Somatoform disorders	400	507	7	5	17	3	0	0	0

F50	Eating disorders	79	164	230	0	2	0	0	0	0
F50-F59	Behavioural syndromes associates with physiological disturbances and physical factors	1081	231	63	0	0	0	0	0	0
F51	Nonorganic sleep disorders	437	263	13	9	1	0	0	0	0
F52	Sexual dysfunction , not caused by organic disorder or disease	553	33	0	1	0	0	0	0	0
F55	Abuse of non-dependence-producing substances	361	1	0	25	0	0	0	0	0
F59	Unspecified behavioural syndromes associated with physiological disturbances and physical factors	104	0	0	0	0	1	0	0	0
F70	Mild mental retardation	259	130	836	4	10	18	0	0	0
F70-F79	Mental retardation	55	68	641	0	0	0	0	0	0
F71	Moderate mental retardation	112	48	583	7	18	7	0	0	0
F72	Severe mental retardation	20	26	504	152	4	9	0	0	0
G10	Huntington's disease	233	147	55	1	2	0	0	0	0
G11	Hereditary ataxia	194	294	156	20	4	8	0	0	0
G20	Parkinson's disease	2148	2320	4	336	136	10	8	0	0
G20-G26	Extrapyramidal and movement disorders	90	64	15	2	1	0	0	0	0
G40	Epilepsy	11185	8018	5043	1045	568	1447	22	13	1
G40-G47	Episodic and paroxysmal disorders	3281	3206	1091	6	7	1	0	0	0
G41	Status epilepticus	260	178	269	31	25	62	7	0	2
G43	Migraine	4181	4391	100	73	125	18	0	0	0
G44	Other headache syndromes	5738	9408	1422	41	69	10	0	0	0
G47	Sleep disorders	1234	1443	25	370	159	80	5	3	0
G56	Mononeuropathies of upper limb	158	116	1	21	65	0	1	0	0
G57	Mononeuropathies of lower limb	165	112	0	6	2	0	0	0	0
G58	Other mononeuropathies	15	0	0	35	14	0	0	0	0
G60	Hereditary and idiopathic neuropathy	232	266	0	4	5	0	0	0	0
G60-G64	Polyneuropathies and other disorders of the peripheral nervous system	339	368	31	1	1	0	0	0	0
G80	Infantile cerebral palsy	15	11	413	61	22	189	1	0	1
G80-G83	Cerebral palsy and other paralytic syndromes	0	0	0	4	2	0	0	0	0
G81	Hemiplegia	2639	1788	37	328	177	34	9	10	0
G82	Paraplegia and tetraplegia	4	3	3	141	66	30	7	2	0
G83	Other paralytic syndromes	2	1	3	61	24	8	1	0	0
G90	Disorders of autonomic nervous system	21	243	15	9	0	2	2	1	0
G90-G99	Other disorders of the nervous system	0	0	0	8	3	2	0	0	0
G91	Hydrocephalus	36	3	12	159	92	124	13	13	7
H00	Hordeolum and chalazion	2804	3394	2530	160	166	41	0	0	0
H00-H06	Disorder of eyelid, lacrimal system and orbit	4415	4862	4355	3	1	0	0	0	0
H01	Other infammation of eyelid	8133	6148	4564	380	345	130	0	0	0
H02	Other disorders of eyelid	1136	1115	222	30	44	23	0	0	0
H04	Disorders of lacrimal system	684	788	810	149	289	114	0	0	0
H05	Disorders of orbit	470	542	179	101	98	14	0	0	0
H10	Conjunctivitis	35166	35108	23035	1543	1190	557	0	0	0
H10-H13	Disorders of conjunctiva	15692	13533	9934	0	0	1	0	0	0

H11	Other disorders of conjunctiva	3238	3290	1832	204	211	3	0	0	0
H15	Disorders of sclera	1505	1442	885	151	139	22	0	0	0
H15-H22	Disorders of sclera, cornea, iris and ciliary body	415	336	265	0	0	0	0	0	0
H16	Keratitis	1335	1001	375	311	212	19	0	0	0
H17	Corneal scares and opacities	709	717	205	34	29	0	0	0	0
H18	Other disorders of cornea	410	313	109	177	63	8	0	0	0
H19*	Disorders of sclera and cornea in diseases classified elsewhere	13	20	12	10	8	5	0	0	0
H20	Iridocyclitis	478	416	61	155	88	2	0	0	0
H21	Other disorders of iris and ciliary body	286	202	119	8	5	4	0	0	0
H25	Senile cataract	18096	20406	2064	9079	9197	505	0	0	0
H25-H28	Disorders of lens	1523	1769	31	50	43	0	0	0	0
H26	Other cataract	971	889	85	1520	1463	60	0	0	0
H27	Other disorders of lens	1368	2090	209	1119	1150	87	0	0	0
H28*	Cataract and other disorders of lens in diseases classified elsewhere	884	900	49	545	427	0	0	0	0
H30	Chorioretinal inflammation	167	148	18	52	4	0	0	0	0
H33	Retinal detachments and breaks	231	226	53	586	394	12	0	0	0
H34	Retinal vascular occlusions	200	198	12	9	13	0	0	0	0
H35	Other retinal disorders	172	215	24	180	128	19	5	0	0
H36*	Retinal disorders in diseases classified elsewhere	121	118	38	158	58	15	0	0	0
H40	Glaucoma	2077	1920	423	346	341	37	0	0	0
H40-H42	Glaucoma	219	182	16	0	0	0	0	0	0
H44	Disorders of globe	214	260	30	65	14	11	0	0	0
H49	Paralytic strabismus	117	154	241	12	6	0	0	0	0
H49-H52	Disorders of coular muscles, binocular movement, accommodation and refraction	583	682	295	0	0	0	0	0	0
H50	Other strabismus	631	606	425	111	26	43	0	1	0
H51	Others disorders of binocular movements	2348	2584	881	1	1	0	0	0	0
H52	Disorders of refraction and accomodation	41464	47557	12443	3280	2764	821	0	0	0
H53	Visual disturbances	813	470	172	24	15	1	0	0	0
H53-H54	Visual disturbances and blindness	1291	1311	600	0	0	0	0	0	0
H54	Blindness and low vision	2605	2287	1485	185	159	4	0	0	0
H55	Nystagmus and other irregular eye movements	406	383	180	2	11	1	0	0	0
H55-H59	Other disorders of eye and adnexa	229	110	98	0	0	0	0	0	0
H57	Other disorders of eye and adnexa	168	199	70	7	7	1	0	0	0
H59	Postprocedural disorders of eye and adnexa, not elsewhere classified	419	384	174	3	16	1	0	0	0
H60	Otitis externa	22408	14298	13202	38	24	11	0	0	0
H60-H62	Diseases of external ear	13608	14953	13775	1	2	1	0	0	0
H61	Other disorders of external ear	5563	4752	3464	18	13	6	0	0	0

H62*	Disorders of external ear in diseases classified elsewhere	154	111	51	1	2	0	0	0	0
H65	Nonsuppurative otitis media	11190	11076	10057	84	49	11	0	0	0
H65-H75	Diseases of middle ear and mastoid	9857	10240	8072	76	96	32	0	0	0
H66	Suppurative and unspecified otitis media	20353	19230	15163	527	530	236	7	0	0
H67*	Otitis media in diseases classified elsewhere	136	118	75	57	26	0	0	0	0
H68	Eustachian salpingitis and obstruction	471	382	63	1	1	2	0	0	0
H70	Mastoiditis and related conditions	874	699	375	39	38	3	6	0	0
H71	Cholesteatoma of middle ear	722	713	253	26	16	3	0	0	0
H72	Perforation of tympanic membrane	6329	5025	2667	158	119	16	0	0	0
H73	Other disorders of tympanic membrane	364	307	15	3	1	0	0	0	0
H74	Other disorders of middle ear and mastoid	2462	2078	2748	14	22	9	0	0	0
H75*	Other disorders of middle ear and mastoid in diseases classified elsewhere	102	151	151	0	3	1	0	0	0
H80	Otosclerosis	430	377	442	17	8	0	0	0	0
H80-H83	Diseases of inner ear	401	289	260	4	2	1	0	0	0
H83	Other diseases of inner ear	581	356	1	10	20	4	0	0	0
H90	Conductive and sensorineural hearing loss	2798	2513	487	25	221	22	0	0	0
H90-H95	Other disorders of ear	1602	1822	1526	1	0	0	0	0	0
H91	Other hearing loss	1893	1642	1091	105	96	29	0	0	0
H92	Otalgia and effusion of ear	2869	2447	2801	1	5	2	0	0	0
H93	Other disorders of ear, not elsewhere classified	1602	1155	2149	4	8	1	0	0	0
I00-I02	Acute rheumatic fever	234	257	80	0	0	0	0	0	0
I01	Rheumatic fever with heart invlovement	461	617	60	264	321	41	16	12	0
I05	Rheumatic mitral valve diseases	337	221	0	472	657	25	15	6	0
I05-I09	Chronic rheumatic heart diseases	2502	1824	0	14	13	0	0	0	0
I09	Other rheumatic heart diseases	359	289	0	436	714	37	15	25	0
I10	Essential (primary) hypertension	45738	42538	0	18130	10720	0	366	232	0
I10-I15	Hypertensive diseases	62918	57402	0	158	110	0	23	0	0
I11	Hypertensive heart disease	5473	4302	0	2032	1208	0	26	30	0
I12	Hypetensive renal disease	134	41	0	61	22	0	5	2	0
I15	Secondary hypenrtension	416	312	127	70	38	1	3	1	0
I20	Angina pectoris	553	470	0	5736	2218	0	56	44	0
I20-I25	Ischaemic heart diseases	12823	11451	26	219	98	0	26	11	0
I21	Acute myocardial infarction	620	326	1	1213	332	12	93	41	0
I22	Subsequent myocardial infarction	29	14	0	431	114	0	10	0	0
I24	Other acute ischaemic heart diseases	1150	1032	1984	130	54	0	3	1	0
I25	Chronic ischaemic heart disease	2867	1524	60	26088	6823	223	392	152	2
I28	Other diseases of	399	374	129	7	9	0	1	0	0

	pulmonary vessels									
I34	Nonrheumatic mitral valve disorders	3	0	2	624	556	20	16	24	1
I35	Nonrheumatic aortic valve disorders	3	2	1	246	150	32	6	5	0
I42	Cardiomyopathy	1130	731	0	752	524	30	33	29	2
I43*	Cardiomyopathy in diseases classified elsewhere	1070	770	0	40	11	0	1	0	0
I44	Atrioventricular and left bundle-branch block	518	282	2	426	322	7	21	9	0
I48	Atrial fibrillation and flutter	161	101	0	540	505	4	30	39	0
I49	Other cardiac arrhythmias	0	0	0	142	112	5	12	3	5
I50	Heart failure	4	3	4	2901	1063	26	89	47	3
I60-I69	Cerebrovascular diseases	1922	1306	0	133	85	1	17	7	0
I63	Cerebral infaraction	1668	1094	0	561	313	10	32	15	0
I64	Stroke, not specified as haemorrhage or infarction	384	159	4	1072	478	34	80	61	0
I67	Other cerebrovascular diseases	21	0	2	311	149	3	4	1	1
I68*	Cerebrovascular disorders in diseases classified elsewhere	0	0	0	9	5	0	0	2	0
I73	Other peripheral vascular diseases	0	1	0	412	87	1	10	3	0
I78	Diseases of capillaries	0	0	0	1438	463	0	0	0	0
I79*	Disorders of arteries, arterioles and capillaries in diseases classified elsewhere	94	64	168	1	3	0	1	0	0
I80	Phlebitis and thrombophlebitis	972	1319	8	119	107	2	7	0	0
I80-I89	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified	3342	3332	524	6	4	8	4	0	0
I83	Varicose veins of lower extremities	511	365	5	266	199	2	1	0	0
I84	Haemorrhoids	7553	6346	543	911	370	7	3	2	0
I87	Other disorders of veins	425	58	14	14	6	0	0	0	0
I88	Nonspecific lymphadenitis	246	205	326	14	10	8	1	0	0
I95	Hypotension	3155	3900	624	74	51	2	6	4	2
I95-I99	Other and unspecified disorders of the cirulatory system	2186	2405	442	0	1	0	0	0	0
J00	Acute nasopharyngitis	92443	77288	100822	371	342	349	0	0	0
J00-J06	Acute upper respiratory infections	165612	176744	163536	12	11	20	0	0	0
J01	Acute sinusitis	18728	14638	8796	91	165	9	10	1	1
J02	Acute pharyngitis	31017	25929	16379	126	83	38	2	0	0
J03	Acute tonsillitis	6765	6405	12260	103	140	204	3	0	0
J04	Acute laryngitis and tracheitis	815	495	455	7	7	20	0	0	0
J05	Acute obstructive laryngitis [croup] and epiglottitis	136	154	263	9	1	17	0	0	0
J06	Acute upper respiratory infections of multiple or unspecified sites	182960	148237	138131	389	345	692	11	5	2
J10	Influenza due to identified influenza virus	3822	3055	1883	39	47	7	4	0	0
J10-J18	Influenza and pneumonia	9274	9904	10547	21	12	16	7	3	0
J11	Infuenza, virus no identified	5821	4105	3783	46	27	46	1	0	0
J12	Viral pneumonia, not	228	248	1372	96	53	215	17	12	18

	elsewhere classified									
J13	Pneumonia due to Streptococcus pneumoniae	104	75	167	1	2	0	0	0	0
J14	Pneumonia due to Haemophilus influenzae	34	34	54	10	8	1	1	0	0
J15	Bacterial pneumonia, not elsewhere classified	3245	3123	2787	59	114	256	7	0	2
J16	Pneumonia due to other infectious organisms, not elsewhere classified	546	316	1474	47	33	170	6	2	1
J17*	Pneumonia in diseases classified elsewhere	913	635	4	27	12	1	6	3	0
J18	Pneumonia, organism unspecified	5107	3952	6584	1090	798	2453	178	101	84
J20	Acute bronchitis	15638	12831	11327	316	283	196	5	2	3
J20-J22	Other acute lower respiratory infections	24276	24514	18707	39	36	26	0	0	0
J21	Acute bronchiolitis	561	392	1433	57	76	514	3	0	3
J22	Unspecified acute lower respiratory infection	11796	8481	7633	3494	1010	872	56	32	1
J30	Vasomotor and allergic rhinitis	10854	10262	8134	24	23	3	0	0	0
J30-J39	Other diseases of upper respiratory tract	28614	28762	27097	13	12	7	0	0	0
J31	Chronic rhinitis, nasopharyngitis and pharyngitis	4086	4096	3546	138	79	12	0	0	0
J32	Chronic sinusitis	6409	3001	1215	460	220	42	0	0	0
J33	Nasal polyp	667	704	373	388	97	17	0	0	0
J34	Other disorders of nose and nasal sinuses	292	244	136	426	150	65	0	0	0
J35	Chronic diseases of tonsils of adenoids	304	239	302	153	71	305	0	0	0
J36	Peritonsillar abscess	32	23	26	3	8	5	0	0	0
J37	Chronic laryngitis and laryngotracheitis	479	280	176	10	15	0	0	0	0
J38	Diseases of vocal cords and larynx, not elsewhere classified	78	56	4	143	47	6	0	2	0
J39	Other diseases of upper respiratory tract	1365	877	1007	35	27	26	14	8	2
J40	Bronchitis, not specified as acute or chronic	19837	15974	7553	155	108	51	1	1	1
J40-J47	Chronic lower respiratory diseases	29596	29022	16005	2	5	2	0	0	0
J41	Simple and mucopurulent chronic bronchitis	36	31	15	6	1	0	0	0	0
J42	Unspecified chronic bronchitis	1061	810	271	52	31	0	3	0	0
J43	Emphysema	49	27	7	32	11	1	0	0	0
J44	Other chronic obstructive pulmonary disease	22767	15598	5380	3866	1615	125	341	119	4
J45	Asthma	41492	33779	13785	984	1018	243	15	14	0
J46	Status asthmaticus	1605	1591	587	21	40	26	1	0	0
J47	Bronchiectasis	126	107	17	79	207	24	2	2	0
J60	Coalworker's pneumoconiosis	185	89	11	4	13	1	2	0	0
J66	Airway disease due to specific organic dust	390	367	167	0	1	1	0	0	0
J68	Respiratory conditions due to inhalation of chemicals, gases, fumes and vapours	4725	4313	37	63	33	12	3	5	0
J80-J84	Other respiratory diseases principally affecting the interstitium	199	14	7	5	3	0	0	0	0
J81	Pulmonary oedema	44	16	2	49	34	6	1	5	2
J90	Pleural effusion, not elsewhere classified	2215	1719	219	690	334	70	46	18	3

J90-J94	Suppurative and necrotic conditions of lower respiratory tract	286	204	4	13	5	0	1	0	0
J91*	Pleural effusion in conditions classified elsewhere	1715	287	32	13	8	0	1	0	0
K00	Disorders of tooth development and eruption	8876	7441	6276	3	1	1	0	0	0
K00-K14	Diseases of oral cavity, salivary glads and jaws	21884	23516	17930	6	3	1	0	0	0
K01	Embedded and impacted teeth	2909	2047	1198	58	54	13	4	0	0
K02	Dental caries	46354	45823	29504	5	9	5	0	0	0
K03	Other diseases of hard tissues of teeth	2879	2825	1536	0	3	0	0	0	0
K04	Diseases of pulp and periapical tissues	6538	8818	1718	4	3	6	0	0	0
K05	Gingivitis and periodontal disease	16470	17895	4568	6	4	2	0	0	0
K06	Other disorders of gingiva and edentulous alveolar ridge	346	381	181	5	1	1	0	0	0
K07	Dentofacial anomalies (including malocclusion)	1151	1122	384	3	2	5	0	0	0
K08	Other disorders of teeth and supporting structures	644	786	248	196	98	3	0	0	0
K09	Cysts of oral region, not elsewhere classified	3040	2735	689	22	7	1	1	0	0
K10	Other diseases of jaws	530	195	53	30	13	6	0	0	0
K11	Diseases of salivary glands	301	296	61	34	27	6	0	0	0
K12	Stomatitis and related lesions	12014	11832	7140	40	18	26	0	0	0
K13	Other diseases of lip and oral mucosa	624	700	549	84	16	17	0	0	0
K14	Diseases of tongue	964	944	460	29	13	3	0	0	0
K20	Oesophagitis	4247	4513	1293	104	64	10	1	1	0
K20-K31	Diseases of oesophagus, stomach and duodenum	25886	27369	9658	2	4	5	0	0	0
K21	Gastro - oesophageal reflux disease	15203	11737	3547	151	144	25	1	0	0
K25	Gastric ulcer	539	1413	225	69	84	4	0	0	0
K27	Peptic ulcer, site unspecified	789	678	132	157	180	7	0	0	0
K29	Gastritis and duodenitis	42618	52228	14344	1045	1041	294	1	0	0
K30	Dyspepsia	30495	28566	4791	272	298	20	0	0	0
K31	Other disease of stomach and duodenum	1787	1726	438	126	122	28	3	3	0
K35	Acute appendicitis	722	478	73	739	426	175	0	0	0
K40	Inguinal hernia	5488	2203	938	2392	265	400	3	0	0
K40-K46	Hernia	168	12	53	31	17	6	0	0	0
K41	Femoral hernia	163	193	7	59	20	11	0	0	0
K42	Umbilical hernia	419	397	458	355	265	32	1	0	0
K43	Ventral hernia	213	181	21	287	340	7	1	0	0
K45	Other abdominal hernia	177	150	25	38	46	1	2	0	0
K46	Unspecified hernia of abdominal cavity	136	2	0	148	37	17	0	0	0
K50	Crohn's disease (regional entertitis)	1515	2472	725	68	46	8	0	0	0
K50-K52	Noninfective enteritis and colitis	827	1147	917	5	2	1	0	0	0
K52	Other noninfective gastroenteritis and colitis	1261	1569	840	59	49	24	0	0	0
K55	Vascular disorders of intestine	92	101	146	26	14	1	2	2	0
K55-K63	Other diseases of intestines	2718	2839	1402	13	7	3	0	0	0

K58	Irritable bowel syndrome	740	514	68	57	34	2	0	0	0
K59	Other functional intestinal disorders	144	105	95	119	106	77	0	0	0
K60	Fissure and fistula of anal and rectal regions	5210	2907	367	885	351	24	0	1	0
K61	Abscess of anal and rectal regions	323	112	49	258	77	14	1	0	0
K62	Other diseases of anus and rectum	718	697	74	132	76	105	0	0	0
K63	Other diseases of intestine	2048	1603	373	169	119	24	7	7	1
K65	Peritonitis	83	58	14	492	483	73	18	9	0
K66	Other disorders of peritoneum	291	304	81	14	11	23	0	0	0
K70	Alchoholic liver disease	2228	109	30	1740	41	47	199	2	0
K70-K77	Diseases of liver	640	377	81	25	10	1	2	0	0
K71	Toxic liver disease	651	284	2	109	17	0	18	3	0
K72	Hepatic failure, not elsewhere classified	54	36	14	376	108	42	84	25	2
K73	Chronic hepatitis, not elsewhere classified	370	202	0	115	61	0	8	2	0
K74	Fibrosis and cirrhosis of liver	475	368	0	471	161	1	20	7	0
K75	Other inflammatory liver diseases	705	682	68	737	224	135	14	6	1
K76	Other diseases of liver	651	407	16	4303	2210	248	398	109	7
K80	Cholelithiasis	2514	5068	279	2636	5478	157	27	24	2
K80-K87	Disorders of gallbladder, biliary tract and pancreas	638	681	70	35	72	1	0	0	0
K81	Cholecystitis	258	527	59	567	1043	9	1	2	0
K83	Other diseases of biliary tract	83	143	38	242	202	57	8	2	2
K85	Acute pancreatitis	94	63	0	844	440	48	37	14	1
K90	Intestinal malabsorption	1895	1934	1190	13	25	77	0	0	2
K90-K93	Other diseases of the digestive system	7054	8492	5544	2	1	0	0	0	0
K92	Other diseases of digestive system	927	853	619	316	123	23	57	11	0
L00	Staphylococcal scalded skin syndrome	6177	5362	5427	0	0	11	0	0	0
L00-L08	Infections of the skin and subcutaneous tissue	31376	35648	31676	9	8	3	0	0	0
L01	Impetigo	3038	2988	4300	20	5	5	1	0	0
L02	Cutaneous abscess, furuncle and carbuncle	22616	23688	24736	669	377	234	3	2	1
L03	Cellulitis	6189	3985	2678	429	242	105	7	8	0
L04	Acute lymphadenitis	1062	1001	937	29	30	29	0	0	0
L05	Pilonidal cyst	374	331	362	131	18	9	0	0	0
L08	Other local infections of skin and subcutaneous tissue	20612	16656	17222	22	16	12	0	0	0
L10	Pemphigus	284	236	119	6	11	0	0	0	0
L10-L14	Bullous disroders	158	110	59	0	0	0	0	0	0
L13	Other bullous disorders	991	104	66	3	0	0	0	0	0
L20	Atopic dermatitis	8783	8374	7214	34	4	1	0	0	0
L20-L30	Dermatitis and eczema	31816	35342	25772	1	0	0	0	0	0
L21	Seborrhoeic dermatitis	2348	2734	2226	6	4	11	0	0	0
L22	Diaper (napkin) dermatitis	165	273	1827	1	2	1	0	0	0
L23	Allergic contact dermatitis	4249	4803	2318	86	83	44	0	0	0
L24	Irritant contact dermatitis	1477	1429	680	31	6	0	0	0	0
L25	Unspecified contact dermatitis	1348	1271	583	3	2	1	0	0	0
L26	Exfoliative dermatitis	163	68	42	1	0	0	0	0	0
L27	Dermatitis due to	270	530	438	6	4	0	0	0	0

	substances taken internally									
L28	Lichen simplex chronicus and prurigo	1822	1769	680	1	0	0	0	0	0
L29	Pruritus	7743	9064	5949	134	73	25	0	0	0
L30	Other dermatitis	14566	15248	8187	15	20	3	0	0	0
L40	Psoriasis	3654	2341	660	54	12	5	0	0	0
L40-L45	Papulosquamous disorders	104	80	22	0	0	0	0	0	0
L42	Pityriasis rosea	341	298	431	0	1	0	0	0	0
L43	Lichen planus	434	549	221	2	0	0	0	0	0
L50	Urticaria	23086	18744	8531	52	60	54	0	0	0
L50-L54	Urticaria and erythema	6539	7093	3967	1	2	1	0	0	0
L51	Erythema multiforme	146	138	52	5	9	2	1	0	0
L52	Erythema nodosum	98	119	59	0	3	1	0	1	0
L53	Other erythematous conditions	5627	3318	2193	4	3	3	1	0	0
L55	Sunburn	590	1145	280	0	0	0	0	0	0
L55-L59	Radiation-related disorder of the skin and subcutaneous tissue	221	249	396	0	0	0	0	0	0
L56	Other acute skin changes due to ultraviolet radiation	273	349	85	0	0	1	0	0	0
L57	Skin changes due to chronic exposure to nonionizing radiation	428	11	0	7	9	1	0	0	0
L60	Nail disorders	2054	2046	1589	13	2	1	0	0	0
L60-L75	Disorder of skin appendages	6395	7543	3897	0	0	0	0	0	0
L63	Alopecia areata	1911	1222	525	10	0	0	0	0	0
L64	Androgenic alopecia	2309	490	72	4	1	0	0	0	0
L65	Other nonscarring hair loss	507	824	118	2	2	0	0	0	0
L67	Hair colour and hair shaft abnormalities	338	403	34	2	0	0	0	0	0
L68	Hypertrichosis	70	237	28	0	0	0	0	0	0
L70	Acne	26993	27733	4960	65	58	0	0	0	0
L71	Rosacea	199	416	41	3	0	0	0	0	0
L72	Follicular cysts of skin and subcutaneous tissue	519	575	307	90	55	15	0	0	0
L73	Other follicular disorders	699	246	166	11	6	1	1	0	0
L74	Eccrine sweat disorders	1140	894	1211	0	3	2	0	0	0
L80	Vitiligo	4219	2616	1687	6	9	0	0	0	0
L80-L99	Other disorders of the skin and subcutaneous tissue	3703	3962	1938	5	0	0	0	0	0
L81	Other disorders of pigmentation	2939	4406	1213	2	6	2	0	0	0
L82	Seborrhoeic keratosis	124	115	54	0	0	0	0	0	0
L83	Acanthosis nigricans	53	74	0	0	0	0	0	0	0
L84	Corns and callosities	2282	1966	487	13	10	0	0	0	0
L85	Other epidermal thickening	102	119	75	4	3	0	0	0	0
L86*	Keratoderma in diseases classified elsewhere	20	49	7	0	0	0	0	0	0
L91	Hypertrophic disorders of skin	342	734	125	11	9	11	0	0	0
L95	Vasculitis limited to skin, not elsewhere classified	327	288	92	3	0	0	0	0	0
L97	Ulcer of lower limb, not elsewhere classified	181	150	33	164	30	2	0	1	0
L98	Other disorders of skin and subcutaneous tissue, not elsewhere classified	981	1092	429	74	47	27	1	0	0
M00	Pyogenic arthritis	4607	4604	1328	110	68	40	2	0	0
M00-	Arthopathies	188	224	46	0	0	0	0	0	0

M25										
M01*	Direct infections of joint in infectious and parasitic diseases classified elsewhere	1045	856	120	4	0	1	0	0	0
M02	Reactive arthropathies	805	796	128	2	3	0	0	0	0
M05	Seropositive rheumatoid arthritis	2680	3059	224	15	26	3	0	0	0
M05-M14	Inflammatory polyarthropathies	10841	14024	608	21	8	1	0	0	0
M06	Other rheumatoid arthritis	2509	4018	52	128	318	6	0	12	0
M10	Gout	1449	1901	171	115	50	3	0	1	0
M12	Other specific arthropathies	463	412	89	1	7	1	0	0	0
M13	Other arthritis	25630	31962	978	176	238	31	1	2	0
M14*	Arthropathies in other diseases classified elsewhere	336	494	22	2	4	0	0	1	0
M15	Polyarthrosis	6585	8091	1180	2	6	1783	48	35	19
M15-M19	Arthrosis	859	823	99	11	24	0	0	0	0
M16	Coxarthrosis [arthrosis of hip]	822	764	105	59	42	0	0	0	0
M17	Gonarthrosis [arthrosis of knee]	8985	10463	1109	480	2039	10	0	1	0
M18	Arthrosis of first carpometacarpal joint	136	135	51	2	3	2	1	0	0
M19	Other arthrosis	165	128	23	104	215	4	0	3	0
M20	Acquired deformities of fingers and toes	791	738	212	55	22	12	0	0	0
M20-M25	Other joint disorder	483	560	0	6	4	0	0	0	0
M21	Other acquired deformities of limbs	169	118	113	90	65	68	0	0	0
M22	Disorders of patella	82	90	5	57	20	0	0	0	0
M23	Internal derangement of knee	279	256	18	88	25	3	0	0	0
M24	Other specific joint derangements	589	664	41	38	27	8	0	0	0
M25	Other joint disorders, not elsewhere classified	7875	9258	2004	62	96	2	0	0	0
M32	Systemic lupus erythematosus	135	145	20	47	84	7	0	6	0
M34	Systemic sclerosis	45	16	0	9	25	1	0	0	0
M35	Other systemic involvement of connective tissue	103	70	40	223	62	42	0	0	0
M40	Kyphosis and lordosis	1932	1626	590	5	4	22	0	0	0
M40-M43	Deforming dorsopathies	284	243	17	0	1	0	0	0	0
M41	Scoliosis	224	214	56	14	24	16	0	0	0
M42	Spinal osteochondrosis	256	266	33	1	13	0	0	0	0
M43	Other deforming dorsopathies	180	86	33	55	92	12	1	0	0
M45	Ankylosing spondylitis	2118	2153	300	108	16	2	1	0	0
M45-M49	Spondylopathies	859	944	25	15	3	0	0	0	0
M47	Spondylosis	6464	7171	1225	193	1323	2	0	1	0
M48	Other spondylopathies	110	235	8	193	202	1	0	0	0
M49*	Spondylopathies in diseases classified elsewhere	156	185	14	50	37	1	0	0	0
M50	Cervical disc disorders	3731	4564	322	52	52	5	0	0	0
M50-M54	Other dorsopathies	1564	1700	26	9	8	0	0	0	0
M51	Other intervertebral disc disorders	3374	3117	114	827	517	12	2	0	0

M53	Other dorsopathies, not elsewhere classified	228	375	11	7	29	0	0	0	0
M54	Dorsalgia	3321	4657	317	860	816	52	0	0	0
M60	Myositis	563	571	111	81	25	23	0	0	0
M60-M63	Disorders of muscles	913	820	186	0	0	0	0	0	0
M62	Other disorders of muscle	864	869	111	11	7	1	0	0	0
M65	Synovitis and tenosysnovitis	786	821	89	40	45	12	0	0	0
M65-M68	Disorders of synovium and tendon	263	156	0	0	0	0	0	0	0
M66	Spontaneous rupture of synovium and tendon	36	74	5	4	4	0	0	0	0
M67	Other disorders of synvium and tendon	1514	1223	136	24	26	4	6	7	0
M70	Soft tissue disorders related to use, overuse and pressue	8543	8992	1805	12	10	0	0	0	0
M70-M79	Other soft tissue disorders	5784	5811	2650	0	0	0	0	0	0
M71	Other bursopathies	423	268	10	7	11	1	0	0	0
M72	Fibroblastic disorders	151	127	5	22	22	10	2	6	0
M75	Shoulder lesions	1188	1557	75	32	62	2	0	0	0
M79	Other soft tissue disorders, not elsewhere classified	1012	1253	199	137	126	16	0	0	0
M80	Osteoporosis with pathological fracture	3641	6603	47	25	35	4	1	2	1
M80-M94	Disorders of bone density and structure	1040	1190	8	0	1	0	0	0	0
M81	Osteoporosis without pathological fracture	2657	3590	48	76	209	17	1	0	0
M83	Adult ostemalacia	396	650	16	7	19	2	0	0	0
M85	Other disorders of bone density and structure	642	685	156	17	2	11	0	0	0
M86	Osteomyelitis	448	434	313	97	36	55	1	0	1
M86-M90	Other osteopathies	316	373	370	9	0	4	0	0	0
M89	Other disorder of bone	233	152	40	160	130	13	0	0	0
M90*	Osteopathies in diseases classified elsewhere	85	69	142	15	6	1	0	0	0
M91	Juvenile osteochondrosis of hip and pelvis	67	129	11	1	0	6	0	0	0
N02	Recurrent and persistent haematuria	132	99	10	6	5	2	0	0	0
N03	Chronic nephritic syndrome	9	8	11	1739	833	36	84	34	2
N04	Nephrotic syndrome	16	26	96	107	68	152	0	1	1
N05	Unspecified nephritic syndrome	16	48	9	34	31	34	0	0	0
N10	Acute tubulo-interstitial nephritis	28	230	12	12	32	5	0	0	0
N12	Tubulo-interstitial nephritis, not specified as acute or chronic	86	93	37	45	65	6	0	1	0
N13	Obstructive and reflux uropathy	402	614	5	364	219	188	5	0	0
N17	Acute renal failure	10	69	7	662	327	27	98	62	1
N18	Chronic renal failure	2149	1415	0	7655	4748	20	101	53	2
N19	Unspecified renal failure	570	380	3	174	88	11	26	1	0
N20	Calculus of kidney and ureter	4629	3373	626	1855	1075	93	3	1	0
N20-N23	Urolithiasis	701	486	85	16	7	2	0	0	0
N21	Caldulus of lower urinary tract	604	425	201	150	79	15	0	0	0
N23	Unspecified renal colic	2486	1898	357	63	68	5	0	0	0

N25	Disorders resulting from impaired renal tubular function	327	213	7	7	16	9	1	0	1
N25-N29	Other disorders of kidney and ureter	130	214	75	0	0	0	0	0	0
N28	Other disorders of kidney and ureter, not elsewhere classified	37	18	1	916	463	29	57	35	0
N30	Cystitis	4525	5409	1242	73	120	28	0	0	0
N30-N39	Other diseases of urinary system	6210	14564	1807	10	8	3	2	0	0
N32	Other disorders of bladder	1211	1443	34	439	42	19	0	0	0
N34	Urethritis and urethral syndrome	491	902	107	27	32	4	0	0	0
N35	Urethral stricture	1432	91	15	609	75	32	1	0	0
N39	Other disorders of urinary system	5990	14508	6315	1741	2060	297	31	44	0
N40	Hyperplasia of prostate	4255	443	68	1805	4	9	20	0	0
N40-N51	Diseases of male genital organs	2805	0	60	25	0	6	0	0	0
N41	Inflammatory diseases of prostate	319	0	0	73	0	0	0	0	0
N43	Hydrocele and spermatocele	2794	0	173	616	0	0	1	0	0
N45	Orchitis and epididymitis	1559	122	149	123	1	21	0	0	0
N46	Male infertility	535	0	0	56	0	0	1	0	0
N47	Redundant prepuce, phimosis and paraphimosis	398	0	709	279	0	105	3	0	0
N60	Benign mamary dysplasia	398	3748	60	9	38	2	0	0	0
N60-N64	Disorders of breast	0	2335	0	0	14	0	0	0	0
N61	Inflammatory disorders of breast	0	926	0	0	145	0	0	2	0
N62	Hypertrophy of breast	0	261	0	0	63	8	0	0	0
N63	Unspecified lump in breast	0	1411	0	0	243	0	0	0	0
N64	Other disorders of breast	0	216	0	0	26	0	0	0	0
N70	Salpingitis and oophoritis	54	6085	96	0	154	2	0	0	0
N70-N77	Inflammatory diseases of female pelvic organs	0	25433	0	0	70	0	0	0	0
N71	inflammatory diseases of uterus, except cervix	0	3164	0	0	72	0	0	0	0
N72	Inflammatory diseases of cervix uteri	0	7578	27	0	142	0	0	0	0
N73	Other female pelvic inflammatory diseases	0	20875	0	0	130	1	0	0	0
N74*	Female pelvic inflammatory disorders in diseases classified elsewhere	0	645	0	0	3	0	0	0	0
N75	Diseases of Bartholin's gland	4	228	3	3	67	5	0	0	0
N76	Other inflammation of vagina and vulva	0	7201	17	0	37	0	0	0	0
N77*	Vulvovaginal ulceration and inflammation in diseases classified elsewhere	0	102	0	0	9	0	0	1	0
N80	ebndometriosis	0	4093	1	0	450	2	0	0	0
N80-N98	Non inflammatory disorders of female genital tract	0	12312	0	0	48	0	0	0	0
N81	female genital prolapse	0	3100	0	0	526	0	0	0	0
N82	Fistulae involving female genital tract	0	196	0	0	148	0	0	0	0
N83	Nonimflmmatory disorders of ovary, fallopian tube and broad ligament	0	585	0	0	568	0	0	0	0

N84	Polyp of female genital tract	0	655	18	0	249	0	0	0	0
N85	Other noninflammatory disorders of uterus, except cervix	0	285	0	0	254	0	0	4	0
N86	Erosion and ectropion of cervix uteri	0	658	0	0	40	3	0	0	0
N87	Dysplasia of cervix uteri	0	58	0	0	15	0	0	0	0
N88	Other noninflammatory disorders of cervix uteri	0	343	0	0	75	0	0	0	0
N89	Other noninflammatory disorders of vagina	0	86	1	0	124	0	0	0	0
N90	Other noninflammatory disorders of vulva and perineum	0	316	12	0	17	4	0	0	0
N91	Absent, scanty and reare mentruation	0	11995	120	0	88	3	0	0	0
N92	Excessive, frequent and irregular menstruation	0	17610	172	0	888	52	0	0	0
N93	Other abnormal uterine and vaginal bleeding	0	3017	15	0	949	23	0	0	0
N94	Pain and other conditions associated with female genital organs and menstual cycle	0	23438	280	0	99	14	0	0	0
N95	Menopausal and other perimenopausal disorders	0	2031	6	0	543	3	0	0	0
N96	Habitual aborter	0	666	0	0	96	0	0	0	0
N97	Female infertility	0	5868	0	0	794	0	0	0	0
N98	Complications associated with artificial fertilization	0	236	1	0	27	1	0	0	1
N99	Postprocedural disorders of the genitourinary system, not elsewhere classified	0	136	1	0	4	2	0	0	0
O00	Ectopic pregnancy	0	113	0	0	347	0	0	0	0
O00-O08	Pregnancy with abortive outcome	0	359	0	0	5	0	0	0	0
O01	Hydatidiform mole	0	14	0	0	33	1	0	0	0
O02	Other abnormal products of conception	0	42	0	0	504	0	0	1	0
O03	Spontaneous abortion	0	779	0	0	796	0	0	0	0
O04	Medical abortion	0	1525	0	0	1061	0	0	0	0
O05	Other abortion	0	1767	0	0	1867	1	0	0	0
O06	Unspecified abortion	0	45	0	0	512	0	0	0	0
O07	Failed attempted abortion	0	25	0	0	33	0	0	0	0
O08	Complications following abortion and ectopic and molar pregnancy	0	29	0	0	23	0	0	0	0
O10	Pre-existing hypertension complicating pregnancy, childbirth and the puerperium	0	75	0	0	22	0	0	0	0
O10-O16	Oedema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium	0	3006	0	0	251	0	0	0	0
O11	Pre-existing hypertensive disorderwith superimposed proteinuria	0	71	0	5	26	5	0	0	0
O12	Gestational (pregnancy - induced) oedema and proteinuria without hypertension	0	679	0	0	80	0	0	0	0
O13	Gestational (pregnancy - induced) hypertension without significant proteinuria	0	124	0	0	150	0	0	0	0

O14	Gestational (pregnancy - induced) hypertension with significant proteinuria	0	173	0	0	177	0	0	0	0
O15	Eclampsia	0	7	0	0	84	0	0	0	0
O16	Unspecified maternal hypertension	0	3	0	0	131	6	0	0	0
O20	Haemorrhage in early pregnancy	0	3008	0	0	598	0	0	0	0
O20-O29	Other maternal disorders predominantly related to pregnancy	0	1050	0	0	3	0	0	0	0
O21	Excessive vomiting in pregnancy	0	1498	0	0	309	0	0	0	0
O22	Venous complications in pregnancy	0	30	0	0	10	0	0	0	0
O23	Infections of genitourinary tract in pregnancy	0	2212	0	0	229	0	0	0	0
O24	Diabetes mellitus in pregnancy	0	196	0	0	411	0	0	0	0
O25	Malnutrition in pregnancy	0	6597	0	0	911	0	0	0	0
O28	Abnormal findings on antenatal screening of mother	0	1077	0	0	217	0	0	1	0
O30	Multiple gestation	0	374	0	0	412	0	0	0	0
O32	Maternal care for known or suspected malpresentaion of fetus	0	137	0	0	207	4	0	0	0
O34	Maternal care for known or suspected abnormality of pelvic organs	0	336	0	0	614	0	0	0	0
O36	Maternal care for known or suspected fetal problems	0	182	0	0	687	0	0	0	0
O40	Polyhydramnios	0	68	0	0	86	0	0	0	0
O42	Premature rupture of membrances	0	82	0	0	1524	0	0	0	0
O47	False labour	0	340	0	0	2916	0	0	0	0
O48	Prolonged pregnancy	0	225	0	0	4192	0	0	0	0
O60	Pretern delivery	0	42	0	0	2067	0	0	0	0
O61	Failed induction of labour	0	4	0	0	474	36	0	0	0
O68	Labour and delivery complicated by fetal stress (distress)	0	5	0	0	427	0	0	0	0
O69	Labour and delivery complicatied by umbilical cord complications	0	0	0	0	21	0	0	0	0
O70	Perineal laceration during delivery	0	1	0	0	184	0	0	0	0
O72	Postpartum haemorrhage	0	2	0	0	610	0	0	2	0
O80	Single spontaneous delivery	0	131	0	0	34768	3800	0	1	2
O80-O84	Delivery	0	2	0	0	8029	0	0	0	0
O81	Single delivery by forceps and vaccum extractor	0	0	0	0	775	13	0	0	0
O82	Single delivery by cesarean section	0	58	0	0	12651	366	0	1	0
O83	Other assisted single delivery	0	314	0	0	1592	0	0	0	0
O84	Multiple delivery	0	0	0	0	1005	0	0	0	0
O99	Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium	0	668	0	0	466	0	0	0	0
P00	Fetus and newborn affected by maternal	0	272	149	0	38	3	0	0	0

	conditions that may be unrelated to present pregnancy									
P03	Fetus and newborn affected by noxious influences transmitted via placenta or breast milk	0	0	3	0	0	1135	0	0	64
P05	Slow fetal growth and fetal malnutrition	0	0	86	0	0	481	0	0	13
P07	Disorders related to short gestation and low birth weight, not elsewhere classified	0	0	1600	289	215	3112	0	0	169
P21	Birth asphyxia	0	0	5	0	0	702	0	0	121
P22	Respiratory distress of newborn	0	0	6	0	0	1393	0	0	116
P23	Congenital pneumonia	0	0	0	0	0	69	0	0	13
P24	Neonatal aspiration syndromes	0	0	0	0	0	330	0	0	49
P36	Bacterial sepsis of newborn	0	0	81	0	0	1012	0	0	133
P58	Neonatal jaundice due to other excessive haemolysis	0	0	142	0	0	551	0	0	2
P59	Neonatal jaundice from othe and unspecified causes	0	0	650	0	0	2458	0	0	6
P81	Other disturbances of temperature regulation of newborn	0	0	611	0	0	4	0	0	0
P90	Convulsions of newborn	0	0	306	0	0	102	0	0	1
P92	Feeding problems of newborn	0	0	2339	0	0	4427	0	0	0
Q10	Congenital malformations of eyelid, lacrimal apparatus and orbit	2	1	142	0	4	23	0	0	0
Q12	Congenital lens malformations	50	71	29	3	0	11	0	0	0
Q21	Congenital malformations of caridac septa	0	0	0	166	253	1166	2	20	13
Q22	Congenital malformations of pulmonary and tricuspid values	0	0	0	76	13	30	2	0	0
Q24	Other congenital malformations of the heart	0	1	0	86	195	798	7	7	45
Q25	Congenital malformations of great arteries	0	1	0	14	21	276	1	0	5
Q30	Congenital malformations of nose	6	1	3	69	60	20	0	0	0
Q31	Congenital malformations of larynx	0	0	0	1	0	33	0	0	0
Q35	Cleft palate	0	0	3	90	62	136	0	0	1
Q36	Cleft lip	2	0	0	94	73	113	0	0	1
Q37	Cleft palate with cleft lip	29	32	48	44	32	62	0	0	1
Q44	Congenital malformations of gallbladder, bile ducts and liver	0	1	0	165	94	47	10	6	1
Q52	Other congenital malformations of female genitalia	0	0	3	0	36	69	0	0	0
Q53	Undescended testicle	9	0	65	34	0	135	0	0	0
Q54	Hypospadias	0	0	10	14	1	193	0	0	0
Q61	Cystic kidney disease	76	40	0	40	18	4	1	1	0
Q62	Congenital obstructive defects of renal pelvis and congenital malformations of ureter	67	61	46	4	32	27	0	0	1
Q65	Congenital deformities of hip	95	90	0	2	2	35	0	0	0

Q65-Q79	Congenital malformations and deformations of the musculoskeletal system	0	0	0	1	0	1	0	0	0
Q66	Congenital deformities of feet	94	96	1	19	9	132	0	0	0
R00	Abnormalities of heart beat	2961	2543	1067	73	55	3	11	4	4
R00-R09	Symptoms and signs involving the circulatory and respiratory systems	14584	12609	11015	4	4	1	0	0	0
R01	Cardiac murmurs and other cardiac sounds	608	686	278	130	108	50	2	1	0
R02	Gangrene, not elsewhere classified	312	387	121	280	80	17	4	3	0
R03	Abnormal blood-pressure reading, without diagnosis	690	374	140	1	0	1	0	0	0
R04	Haemorrhage from respiratory passages	1145	856	592	384	183	22	3	1	3
R05	Cough	101235	95775	81501	3343	2474	3297	0	0	0
R06	Abnormalities of breathing	816	655	55	133	114	45	2	1	0
R07	Pain in throat and chest	2825	1462	515	739	528	34	1	1	0
R09	Other symptoms and signs involving the circulatory and respiratory systems	251	267	142	32	12	7	19	5	6
R10	Abdominal and pelvic pain	50910	53421	28502	927	1368	325	5	2	0
R10-R19	Symptoms and signs involving the digestive system and abdomen	29882	36089	21822	10	10	5	0	0	0
R11	Nausea and vomiting	20311	25291	18844	969	1116	789	1	0	0
R12	Heartburn	16749	18218	3096	0	13	0	0	0	0
R13	Dysphagia	1736	1105	399	28	16	2	0	1	0
R14	Flatulence and related conditions	11532	13205	4951	47	28	11	0	0	0
R15	Faecal incontinence	40	40	7	1	1	0	0	0	0
R16	Hepatomegaly and splenomegaly, not elsewhere classified	630	443	5	40	24	31	0	0	0
R17	Unspecified jaundice	56	56	8	907	248	106	48	20	1
R18	Ascites	988	811	106	1318	396	36	123	31	0
R19	Other symptoms and signs involving the digestive system and abdomen	270	158	30	38	51	6	0	0	0
R20	Disturbances of skin sensation	1892	1908	372	13	22	6	1	1	0
R21	Rash and other nonspecific skin eruption	678	502	246	13	8	6	1	0	0
R22	Localized swelling, mass and lump of skin and subcutaneous tissue	381	189	55	205	176	34	4	2	2
R23	Other skin changes	329	382	122	7	11	6	0	0	0
R25	Abnormal involuntary movements	169	142	3	9	5	33	0	0	1
R30	Pain associated with micturition	6037	6652	2097	34	33	2	0	0	0
R30-R39	Symptoms and signs involving the urinary system	5017	6332	2491	6	1	1	0	0	0
R31	Unspecified haematuria	180	68	29	217	49	20	1	1	1
R32	Unspecified urinary incontinence	244	141	24	25	14	4	0	0	0
R33	Retention of urine	135	37	14	137	32	3	1	0	0
R34	Anuria and oliguria	23	20	0	3	4	0	0	0	0
R35	Polyuria	260	405	31	82	4	2	0	0	0
R36	Urethral discharge	108	388	0	2	1	1	0	0	0
R39	Other symptoms and signs involving the urinary system	148	131	135	36	11	8	0	0	0

R40	Somnolence, stupor and coma	443	478	375	5	2	0	0	0	0
R40-R46	Symptoms and signs involving cognition, perception, emotional state and behaviour	2495	3494	1133	1	1	1	0	0	0
R42	Dizziness and giddiness	3828	6752	1253	216	248	35	0	0	0
R43	Disturbances of smell and taste	327	397	112	1	1	0	0	0	0
R47	Speech disturbances, not elsewhere classified	127	162	120	17	6	7	0	0	0
R49	Voice disturbances	210	104	4	21	8	1	0	0	0
R50	Fever of unknown origin	97950	83019	84327	2870	1616	1115	21	25	7
R50-R69	General symptoms and signs	85089	90960	59899	43	46	48	1	0	0
R51	Headache	43973	53775	17421	242	330	95	4	1	0
R52	Pain, not elsewhere classified	3730	4381	796	47	48	3	0	0	0
R53	Malaise and fatigue	32660	43315	15340	22	36	7	0	0	0
R54	Senility	388	498	159	3	0	0	0	0	0
R55	Syncope and collapse	114	222	107	248	153	29	2	1	0
R56	Convulsions, not elsewhere classified	242	56	74	760	455	855	30	13	8
R57	Shock, not elsewhere classified	399	191	131	214	113	17	198	85	18
R59	Enlarged lymph nodes	463	352	357	224	181	54	4	0	0
R60	Oedema, not elsewhere classified	256	185	54	19	25	8	0	0	0
R61	Hyperhidrosis	646	536	301	9	0	2	0	0	0
R62	Lack of expected normal physiological development	41	45	182	1	5	105	1	0	1
R68	Other general symptoms and signs	2190	1516	784	642	655	198	1	2	0
R69	Unknown and unspecified causes of morbidity	4941	6133	5005	62	62	4	1	0	0
R73	Elevated blood glucose level	540	338	0	10	11	3	1	1	0
R74	Abnormal serum enzyme levels	20	4	0	1	0	1	0	0	0
R75	Laboratory evidence of human immunodeficiency	277	158	17	31	14	2	0	0	0
R76	Other abnormal immunological findings in serum	29	15	1	5	2	2	0	0	0
R80	Isolated proteinuria	80	54	13	93	75	29	0	0	0
R81	Glycosuria	73	98	9	12	26	14	0	0	0
R82	Other abnormal findings in urine	271	453	153	31	51	41	0	0	0
R95	Sudden infant death syndrome	312	283	201	0	0	2	0	0	1
R95-R99	III defined and unknown causes of mortality	388	638	4	4	2	0	0	0	0
S00	Superficial injury of head	7301	4490	2993	147	29	35	5	0	1
S00-S09	Injuries to the head	1455	1189	1546	9	1	1	0	0	0
S01	Open wound of head	743	211	308	255	108	179	3	0	0
S02	Fracture of skull and facial bones	410	268	144	418	123	105	4	1	3
S04	Injury of cranial nerves	147	98	124	13	9	0	0	0	0
S05	Injury of eye and orbit	345	189	278	43	9	27	0	0	0
S06	Intracranial injury	17	2	84	430	128	113	35	5	3
S09	Other and unspecified injuries of head	164	50	127	460	180	140	21	11	4
S10	Superficial injury of neck	1092	760	1324	7	1	2	0	0	0
S10-S19	Injuries to the neck	757	766	525	26	6	3	0	0	0

S13	Dislocation,sprain and strain of joints and ligaments at neck level	471	474	2	28	10	6	0	0	0
S20	Superficial injury of the thorax	940	482	479	86	14	7	1	0	0
S20-S29	Injuries to the thorax	240	280	70	2	0	0	0	0	0
S22	Fracture of ribs(s), sternum and thoracic spine	96	44	30	171	92	12	2	0	0
S30	Superficial injury of abdomen, lower back and pelvis	1231	1084	370	10	15	4	0	0	0
S30-S39	Injuiries to the abdomen, lower back, lumbar spine and pelvis	845	522	241	2	1	0	0	0	0
S31	Open wound of abdomen, lower back and pelvis	73	49	48	15	31	1	1	0	0
S32	Fracture of lumbar spine and pelvis	3044	2541	1534	426	198	64	1	0	0
S33	Dislocation, sprain and strain of joints and ligaments of lumbar spine and pelvis	1160	1505	534	11	9	0	0	0	0
S37	Inury of pelvic organs	1	0	0	296	187	28	82	21	0
S39	Other and unspecified injuries of abdomen, lower back and pelvis	32	45	3	95	24	7	7	0	0
S40	Superficial injury of shoulder and upper arm	10828	7525	4259	42	17	7	1	0	0
S40-S49	Injuries to the shoulder and upper arm	2447	2647	867	31	11	3	0	0	0
S41	Open wound of shoulder and upper arm	156	62	46	8	5	2	0	0	0
S42	Fracture of shoulder and upper arm	2729	2337	648	645	320	141	2	0	0
S43	Dislocation,sprain and strain of joints and ligaments of shoulder girdle	214	166	25	96	21	2	0	0	0
S45	Injury of blood vessels at shoulder and upper arm level	331	368	80	1	1	0	0	0	0
S50	Superficial injury of forearm	4278	3711	2839	51	52	5	0	0	0
S50-S59	Injuries to the elbow and forearm	3608	3715	2931	62	26	28	0	0	0
S51	Open wound of forearm	435	616	136	19	4	26	0	0	0
S52	Fracture of forearm	2608	1880	1656	638	351	144	10	0	0
S53	Dislocation,sprain and strain of joints and ligaments of elbow	286	455	167	18	10	4	0	0	0
S56	Injury of muscle and tendon at forearm level	132	55	43	2	1	0	1	0	0
S59	Other and unspecified injuries of forearm	5029	3018	1991	32	5	2	0	0	0
S60	Superficial injury of wrist and hand	11741	8598	5010	111	22	10	0	0	0
S60-S69	Injuries to the wrist and hand	3982	3544	2378	3	0	4	0	0	0
S61	Open wound of wrist and had	782	870	374	94	21	8	0	0	0
S62	Fracture of wrist and hand level	3250	3356	381	193	53	22	0	0	0
S63	Dislocation,sprain and strain of joints and ligaments at wrist and hand level	326	656	69	11	2	0	0	0	0
S69	Other and unsepcified	160	22	6	42	11	23	0	0	0

	injuries of wrist and hand									
S70	Superficial injury of hip and thigh	2103	2021	1300	41	14	3	2	0	0
S70-S79	Injuries to the hip and thigh	2579	2582	1579	100	40	32	0	0	0
S71	Open wound of hip and thigh	255	578	54	38	12	3	0	0	0
S72	Fracture of femur	2879	2462	1060	1230	813	171	10	6	0
S80	Superficial injury of lower leg	7498	6569	3933	129	30	8	0	0	0
S80-S89	Injiuries to the knee and lower leg	5068	4941	2640	78	19	7	0	0	0
S81	Open wound of lower leg	6810	4448	7663	126	46	2	2	0	0
S82	Fracture of lower leg, including ankle	2858	1809	441	1264	596	106	3	1	0
S83	Dislocation,sprain and strain of joints and ligaments of knee	698	694	449	634	470	26	0	0	0
S89	Other and unspecified injuries of lower leg	5044	4048	9112	59	10	5	0	0	0
S90	Superficial injury of ankle and foot	8326	6530	3771	121	49	57	0	0	0
S90-S99	Injuries to the ankle and foot	4951	4699	2550	20	7	7	0	0	0
S91	Open wound of ankle and foot	865	540	387	127	30	29	1	0	3
S92	Fracture of foot, except ankle	3102	2210	235	189	52	17	0	0	0
S93	Dislocation, Sprain and strain of joints and ligaments at ankle and foot level	833	696	271	46	11	0	0	0	0
S97	Crushing injuries of ankle and foot	108	118	2	27	7	5	0	0	0
S99	Other and unspecified injuries of ankle and foot	4960	2975	2002	25	18	4	0	0	0
T00	Superficial injuries involving muliple body regions	2947	2429	2434	1	2	0	0	0	0
T00-T07	Injuries of involving multiple body regions	1634	1417	1120	0	0	0	0	0	0
T01	Open wounds involving multiple body regions	234	181	176	61	17	25	0	0	1
T02	Fractures involving multiple body region	2935	1418	1544	223	67	60	2	0	0
T03	Dislocations,sprains and strains involving multiple body regions	108	34	24	1	2	0	0	0	0
T05	Traumatic amputations involving multiple body regions	180	169	220	3	0	0	0	0	0
T07	Unspecified multiple injuries	90	115	84	9	1	3	2	0	0
T08	Fracture of spine, level unspecified	112	102	31	38	34	2	1	0	0
T08-T14	Injuries to unspecified part of trunk, limb or body region	37	48	16	1	0	2	0	0	0
T13	Other injuries of lower limb, level unspecified	135	0	0	14	3	0	0	0	0
T14	Injury of unspecified of body	89	1	0	227	120	57	19	0	0
T15	Foreign body on external eye	190	124	46	0	1	2	0	0	0
T15-T19	Effects of foreign body entering through natural orifice	173	207	218	0	0	2	0	0	0
T16	Foreign body in ear	165	108	61	2	1	16	0	0	0
T20	Burn and corrosion of	413	344	539	68	126	73	0	1	0

	head and neck									
T21	Burn and corrosion of trunkl	53	42	40	5	7	3	0	0	0
T22	Burn and corrosion of shoulder and upper limb, except wrist and hand	332	285	257	3	1	1	0	0	0
T23	Burn and corrosion of wrist and hand	743	911	531	22	7	6	0	0	0
T24	Burn and corrosion of hip and lower limb, except ankle and foot	163	259	240	3	1	4	0	0	0
T25	Burn and corrosion of ankle and foot	391	280	255	1	0	0	0	0	0
T28	Burn and corrosion of other internal organs	66	23	91	0	3	1	0	0	0
T29	Burn and corrosions of multiple body regions	807	436	954	13	3	2	1	0	0
T29-T32	Burn and corrosion of multiple and unspecified body regions	476	289	206	0	0	1	0	0	0
T36	Poisoning by systemic antibiotics	1	0	0	361	245	108	9	8	0
T50	Poisoning by diuretics and other and unspecified drugs, medicaments and biological substances	243	128	310	68	65	32	9	4	1
T51	Toxic effect of alcohol	38	5	2	186	16	2	11	1	0
T59	Toxic effect of other gases, fumes and vapours	16	230	75	0	0	0	0	0	0
T65	Toxic effect of other and unspecified substances	33	4	0	233	128	60	9	4	2
T90	Sequelae of injuries of head	5	3	1	218	71	170	10	0	1
T90-T98	Sequelae of Injuries of poisioning and of other consequences of external causes	156	131	54	0	1	0	0	0	0
T94	Sequelae of injuries involving multiple and unspecified body regions	0	0	0	191	34	31	9	3	0
T95	Sequelae of burns, corrosions and frostbite	92	91	25	0	2	0	1	0	0
V01	Pedestrian injured in collision with pedal cycle	1697	764	249	15	0	1	17	3	1
V01-V09	Pedestrian injured in transport accident	320	155	92	0	0	0	0	0	0
V02	Pedestrian injured in collision with two or three wheeled motor vehicle	209	131	87	1	0	0	0	0	0
V03	Pedestrian injured in collision with car,pick -up truck or van	67	30	36	3	0	0	0	0	0
V04	Pedestrian injured in collision with heavy trasport vehicle or bus	28	14	19	1	0	0	0	0	0
V05	Pedestrian injured in collision with railway train or railway vehicle	23	22	1	2	0	0	0	0	0
V09	Pedestrian injured in other and unspecified transport accidents	5157	2000	2554	16	1	1	4	1	1
V10-V19	Pedal cyclist injured in transport accident	236	134	154	0	0	0	0	0	0
V12	Pedel cyclist injured in collision with two or three wheeled motor vehicle	737	435	72	0	0	0	0	0	0
V20	Motorcyle rider injured in collision with pedestrian or animal	46	5	0	177	32	19	30	4	0

V21	Motorcyle rider injured in collision with pedal cycle	562	58	4	1	0	0	0	0	0
V22	Motorcycle rider injured in collision with two or three wheeled motor vehicle	227	30	8	6	0	1	0	0	0
V23	Motorcycle rider injured in collision with car,pick-up truck or van	196	29	12	35	6	0	1	0	0
V29	Motorcyle rider injured in other and unspecified transport accidents	291	117	85	20	3	1	0	0	0
V30	Occupant of three-wheeled motor vehicle injured in collision with pedestrian or animal	12	12	5	0	0	0	0	0	0
V42	Car occupant injured in collision with two- or three-wheeled motor vehicle	47	36	19	0	0	0	0	0	0
V43	Car occupant injured in collision with car, pick-up truck or van	63	31	26	2	0	0	0	0	0
V74	Bus occupant injured in collision with heavy transport vehicle or bus	69	154	24	0	0	0	0	0	0
W00-X59	Falls	249	221	221	11	4	3	0	0	0
W01	Fall on same level from slipping , tripping and stumbling	5854	3550	3135	24	6	3	2	0	0
W02	Fall involving ice-skates, skis, roller-skates or skateboards	32	39	50	0	0	0	0	0	0
W03	Other fall on same level due to collision with, or pushing by, another person	240	168	104	0	0	0	0	0	0
W04	Fall while being carried or supported by other persons	166	259	82	0	0	0	0	0	0
W05	Fall involving wheelchair	176	109	15	1	2	2	0	0	0
W06	Fall involving bed	32	15	112	1	6	4	0	0	0
W07	Fall involving chair	66	38	10	0	1	0	0	0	0
W08	Fall involving other furniture	116	3	18	0	0	1	0	0	0
W10	Fall on and from stairs and steps	139	144	117	25	34	50	2	2	0
W17	Other fall from one level to another	155	95	148	23	14	19	0	0	1
W18	Other fall on same level	60	56	46	22	14	8	0	0	0
W19	Unspecified fall	101	69	29	14	5	2	1	0	0
W20-W49	Exposure to inanimate mechanical forces	147	237	120	1	0	0	0	0	0
W25	Contact with sharp glass	89	1090	37	8	1	1	0	0	0
W26	Contact with knife, sword or dagger	150	61	26	9	0	0	0	0	0
W34	Discharge from other and unspecified firearms	58	30	17	33	4	1	2	0	0
W50	Hit, struck, kicked, twisted, bitten or scratched by another person	1277	840	400	78	41	4	8	0	0
W50-W64	Exposure to animate mechanical forces	304	199	268	2	0	0	0	0	0
W51	Striking against or bumped into by another person	277	192	14	1	0	0	0	0	0
W52	Crushed, pushed and stepped on by crowd or	36	38	132	0	0	0	0	0	0

	human stampede									
W53	Bitten by rat	293	148	60	0	0	0	0	0	0
W54	Bitten or struck by dog	20377	10268	9940	1469	414	899	0	0	0
W55	Bitten or struck by other mammals	1135	1355	361	2	0	1	0	0	0
W85	Exposure to electric transmission lines	110	56	13	4	6	1	1	0	0
W85-W99	Exposure to electric current, radiation and extreme ambient air temprature and pressure	1	1	2	0	0	0	0	0	0
W86	Exposure to other specified electric current	0	0	0	2	2	6	1	0	0
W87	Exposure to unspecified electric current	1	4	4	4	0	2	0	0	0
W89	Exposure to man-made visible and ultraviolet light	0	0	0	0	1	1	0	0	0
W91	Exposure to unspecified type of radiation	0	1	0	0	0	0	0	0	0
W92	Exposure to excessive heat of man-made origin	17	8	2	0	0	0	0	0	0
X00	Exposure to uncontrolled fire in building or structure	2730	1644	1083	0	0	0	0	0	0
X00-X09	Exposure to smoke,fire and flames	341	424	13	0	0	0	0	0	0
X09	Exposure to unspecified smoke, fire and flames	307	398	25	1	0	0	0	0	0
X30	Exposure to excessive natural heat	416	250	200	0	0	0	0	0	0
X69	Intentional self-poisoning by and exposure to other and unspecified chemicals and noxious substances	114	140	21	4	3	1	0	0	0
X85	Assault by drugs, medicaments and biological substances	2041	908	124	33	22	4	1	0	0
X85-Y09	Aasault	103	110	0	1	0	0	0	0	0
X99	Assault by sharp object	92	13	0	24	2	0	2	0	1
Y00	Assault by blunt object	1077	413	103	1	0	0	0	0	0
Y03	Assault by crashing of motor vehicle	283	180	42	0	5	1	0	0	0
Y04	Assault by bodily force	1476	895	159	4	21	0	2	1	0
Y59	Other and unspecified vaccines and biological substances	179	197	119	0	0	0	0	0	0
Z00	General examination and investigationof presons without complaint and reported diagnosist	16609	11662	9528	7982	3117	397	0	0	0
Z00-Z13	Person encountering health services for examination and investigation	2173	1829	465	20	11	3	0	0	0
Z02	Examination and encounter for administrative purposes	481	381	105	1	11	3	0	0	0
Z04	Examination and observation for other reasons	2	1899	7571	215	428	34	9	0	0
Z08	Follow up examination after treatment for malignant neoplasms	0	8	22	582	639	54	0	0	0
Z09	Follow up examination after treatment for conditions other than malignant neoplasms	464	812	263	851	662	144	1	3	1

Z10	Routine general health check-up of defined suppopulation	1278	2071	1735	63	51	3	0	2	0
Z11	Special screening examination for infectious and parasitic diseases	330	48	144	1	7	2	0	0	0
Z20-Z29	Persons with potential health hazards related to communicable diseases	357	404	6334	0	0	0	0	0	0
Z22	Carrier of infectious disease	359	299	568	154	0	2	0	0	0
Z23	Need for immunizaion against single bacterial disease	127	191	314	0	0	2	0	0	0
Z24	Need for immunizaion against certain single viral diseases	63	132	1184	9	0	2	0	0	0
Z26	Need for immunization against other single infectious diseases	15	1506	2743	0	721	10	0	0	0
Z27	Need for immunization against combinations of infectious diseases	2209	3253	22865	0	0	10100	0	0	0
Z29	Need for other prophylactic measures	60	1608	854	4	78	0	0	0	0
Z30	Contraceptive management	26053	49679	521	6	4472	360	0	0	0
Z30-Z39	Persons encountering health services in ciccumstances related to reprocuction	15819	29646	316	0	0	720	0	0	0
Z31	Procreative management	12686	1397	30	2	50	77	0	0	0
Z32	Pregnancy examination and test	0	38041	0	0	535	0	0	0	0
Z33	Pregnant state, incidental	0	646	0	0	61	0	0	0	0
Z34	Supervision of normal preganancy	0	78590	0	0	9633	0	0	2	0
Z35	Supervision of high-risk pregnancy	0	8856	0	0	1579	0	0	2	0
Z36	Antenatal screening	0	69650	0	0	1396	0	0	0	0
Z37	Outcome of delivery	0	1105	252	0	2501	1564		0	4
Z38	Liveborn infants according to place of birth	0	0	556	0	0	19158	0	0	9
Z39	Postpartum care and examination	0	8386	103	0	3453	112	0	0	0
Z40	Prophylactic surgery	1	284	0	0	2	1	0	0	0
Z45	Adjustment and management of implanted device	4	162	62	342	151	10	0	0	0
Z48	Other surgical follow-up care	21	547	8	306	121	12	1	0	0
Z49	Care involving dialysis	0	0	0	11774	6886	244	16	4	0
Z51	Other medical care	0	0	0	6225	8097	722	75	26	0
Z52	Donors of organs and tissues	1	1	0	334	598	7	0	0	0
Z54	Convalescence	26	74	104	0	0	0	0	0	0
Z60	Problems related to social environment	43	128	17	0	0	0	0	0	0
Z72	Problems related to lifestyle	126	130	51	1	1	0	0	0	0
Z80-Z99	Persons with potential health hazards related to family and personal history and certain conditions influencing health status	103	11086	10860	42	11	4	0	0	0
Z94	Transplanted organ and tissue status	0	2	0	733	227	14	20	9	1
Z95	Presence of cardiac and	3	5	0	721	152	0	0	0	0

	vascular implants and grafts									
Z96	Presence of other functional implants	148	97	3	378	359	14	0	0	0

Disclaimer :

The above reports are based upon the morbidity / mortality reports of various hospitals in Delhi submitted to SHIB based on the diagnosis made by the treating doctors. The data is not fully validated. Inadvertent errors during the data entry process / coding / typing may be there despite best efforts. SHIB is not the primary holder of the data. It only collects and compiles the data from select health institutions.

Chapter 7

NATIONAL HEALTH PROGRAMMES

7.1 DELHI STATE HEALTH MISSION

INTRODUCTION

Delhi has one of the best health infrastructures in India, which is providing primary, secondary & tertiary care. Delhi offers most sophisticated & state of the art technology for treatment and people from across the states pour in to get quality treatment. Inspite of this, there are certain constraints & challenges faced by the state. There is inequitable distribution of health facilities as a result some areas are underserved & some are unserved. Thereby, Delhi Govt. is making efforts to expand the network of health delivery by opening Seed PUHCs in unserved areas & enforcing structural reforms in the health delivery.

Delhi State Health Mission implements the following National Health Programs:-

1. Reproductive, Maternal, Newborn, Child and Adolescent Health

- RMNCH + A
- Mission Flexipool
- Immunization
- Iodine Deficiency Disorder

2. National Urban Health Mission (NUHM)

3. Communicable Disease Programme:-

- Integrated Disease Surveillance Project
- National Leprosy Eradication Program
- National Vector Borne Disease Control Program
- Revised National Tuberculosis Control Program

4. Non-Communicable Disease Programme:-

- National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stoke (NPCDCS)
- National Program for Control of Blindness (NPCB)
- National Mental Health Program (NMHP)
- National Programme for Health Care of the Elderly (NPHCE)
- National Programme for Prevention and Control of Deafness (NPCCD)
- National Tobacco Control Programme (NTCP)
- National Oral Health Programme (NOHP)
- National Programme for Palliative Care (NPPC)
- National Programme for Prevention & Management of Burn Injuries (NPPMBI)

State Program Management Unit and 11 District Program Management Units implement these programs as per approval of the State Program Implementation Plan received from Govt. of India.

Some key achievements under National Urban Health Mission during 2014-15 are as follows:-

(a) Coverage of unserved / underserved areas: Almost all the unserved / underserved areas have been identified across the State. 59 Seed PUHCs have already been set up in such areas to provide comprehensive health care services, each looking after approx. 50,000 population. These subsequently shall be up-graded into full fledged PUHC level facilities depending upon their workload.

(b) Health Management Information System (HMIS): Dedicated web portal for capturing all Public health / indicator based information from the end source and generate reports / trends to assist in planning and monitoring activities. Data generated at facility level is captured on this web based portal on monthly basis. At present there are 295 Delhi Govt, 181 MCD, 100 CGHS & 73 ESI, NDMC, Autonomous, NGO & other health facilities (dispensaries & hospitals) are reporting on HMIS on monthly basis. Excluding these facilities, nearly 220 private hospitals and nursing homes are also reporting on HMIS Portal. The performance of health care services is being utilized by various departments of State and GOI for monitoring and planning health policies and strategies.

(c) Mother & Child Tracking Systems (MCTS): Mother and Child Tracking System is another important tool designed by GOI, to monitor and ensure timely appropriate healthcare service delivery to pregnant women and children upto 5 years of age by tracking and providing them with services. The goal is to reduce Morbidity & Mortality related to pregnancy, child birth, post-natal mothers and children. Effective tracking of beneficiaries has been possible only because geographical area of all the Districts of Delhi have been mapped into pockets of approx. 50,000 populations.

All GNCTD (Dispensaries, Seed PUHCs, Hospitals), MCD (M&CW Centres, IPP-8 Centres, Maternity Homes & Hospitals) & CGHS Hospitals are using this software for tracking of pregnant women and children health care service delivery. To encourage the real time data entry i.e. within 72 hours of service delivery, an initiative has been taken by GOI for updating the data through Unstructured Supplementary Service Data (USSD) by using mobile technology by the ANMs.

(d) State MIS Portal:

One of the important IT initiatives facilitated through the Delhi State Health Mission to develop IT modules, web based applications and operationalizing them to streamline processes and facilitate monitoring on indicators, performance and outputs. The various Modules developed are as follows:

ASHA & PUHC Module: All health facilities belonging to the GNCTD / MCD / NDMC and autonomous bodies have been plotted geospatially on a base map. Further the entire state is to be carved into 10,000 population pockets, codified and documented. These areas have been coded. Each area has the demographic data which gives the targets for various programs. The mapping has been done for facilities belonging to the Government of NCT of Delhi and the three Municipal Corporations of Delhi. The same information has also been mapped on the Geospatial map which can be accessed on website. The performance on few identified parameters are also displayed and linked to the HMIS.

Other modules developed by the state are:

Information regarding Free Bed availability in Private Hospitals
School Health Module
Payroll Module

NIRANTAR - Store and Inventory Module
PNDT Module
Transfer Posting Module
DGEHS Module
Online OPD registration

(e) ASHA: The linkage of the community with the health care delivery system is being done by ASHAs. At present State has 4661 ASHAs in place. These ASHAs have been trained in knowledge and skills required for mobilizing and facilitating the community members to avail health care services.

(f) Refferal Linkages: A pilot project is being implemented in two clusters in the State with Secondary level hospitals (Sanjay Gandhi Memorial Hospital and Lal Bahadur Shastri Hospital). These hospitals have been linked to the nearby PUHCs. Linked PUHCs level facilities are providing ANC care. Hospitals are providing High risk and delivery care to the beneficiaries of linked PUHCs. This gives opportunity to the hospitals to devote more time to high risk and delivery cases.

(g) Mobile Dental Clinics

Operationalization of 2 Mobile Dental Clinics & 4 Mobile Dental IEC Vans is being done by MAIDS with support of Delhi State Health Mission. In 2014-15, North East District was covered by the Vans / Clinics.

Strengthening of infrastructure:

- **Construction of 6 Delhi Governments Dispensary** has been done with funding support from Delhi State Health Mission at following places:-

1. Sector-4, Rohini
2. Sector - 21, Rohini
3. Madanpur Khadar, Phase-I
4. Madanpur Khadar, Phase-II
5. Gaumtpuri (Molarband)
6. Sawda Ghevra

- **Construction of 200 Bed Hospital at Ambedkar Nagar:-** DSHM is funding the construction of 200 Bed Hospital at Ambedkar Nagar. Approximately 46% construction has been completed in 2014-15.
- **Operationalization of Ambulances:** Centralized Accident Trauma Services is being supported for procurement of 100 Basic Life Support Ambulance being providing support for operationalization of 120 Patient Transport Ambulances procured through DSHM.
- **Implement of e-office** has been done successfully in the State Program Management Unit since April, 2014.

Financial Report for the year 2014-15

Delhi State Health Mission					
Detail of program-wise Release & Expenditures for the f.y. 2014-15					
Code	**Pools Activities**	**Total Budget of 2014-15**	**Opening Balance as per Ucs**	**Funds Received during the f.y. 2014-15**	**Total Expenditure incurred during the f.y. 2014-15**
					(Amount in Lacs)
A	RCH Flexible Pool	6660.00	-2362.90	4020.00	3964.15
B	Mission Flexible Pool	7093.00	-1371.37	1018.00	7017.12
C	Immunization including pulse polio	916.00	669.07	772.92	1090.80
D	NIDDCP	100.00	0.00	10.67	0.20
	NUHM	8942.00	0.00	6241.00	6536.04
	Communicable Diseas		0.00		
E	IDSP	144.00	-8.01	56.61	88.75
F	NVBDCP	70.00	261.67	444.00	4.57
G	NLEP	211.00	1.63	78.22	107.10
H	RNTCP	2967.00	49.06	1338.87	1574.50
	Non Communicable Diseas		0.00		
I	NPCB	289.00	186.02	212.94	110.61
J	NMHP	83.00	0.00	83.20	0.03
K	NPHCE		0.00		0.00
L	NPPCD	24.00	37.35	20.80	3.34
M	NTCP	93.00	0.00	12.81	0.68
N	NOHP		0.00		0.00
O	NPCDCS	310.00	247.00	141.00	0.00
	State share		3400.00	4940.00	0.00
	GRAND TOTAL	**27902.00**	**1109.52**	**19391.04**	**20497.89**

7.2 NATIONAL LEPROSY ERADICATION PROGRAMME

Introduction

Leprosy, a chronic disease caused by infection from Mycobacterium leprae. It spreads from one untreated patient to another person via respiratory tract or injured skin. Leprosy is curable and free treatment is available in all government hospitals and dispensaries in Delhi.

Leprosy is classified into two categories: Multibacillary (MB) and Paucibacillary (PB). Treatment is simple and all newly detected cases must be started on an appropriate MDT regimen immediately. MDT is the combination of Rifampicin, Clofazimine & Dapsone for MB patients and Rifampicin & Dapsone for PB patients. Leprosy is associated with intense stigma because of the disabilities and deformities that result from leprosy. Most of disabilities are preventable. Damage to peripheral nerves supplying the hands and feet, result in loss of sensation over the area supplied by the nerve and paralysis of the muscles supplied by them.

Disability due to leprosy can be prevented by early detection of disease, adequate advice and explanation regarding disease and complications and prompt and appropriate management, if disability sits in. The social stigma attached to leprosy and the social discrimination against its suffering is beginning to weaken as the message that the disease now completely curable is spreading far and wide. Community awareness has also increased over the years.

Objectives of NLEP:

- Integration of leprosy services in general health care system
- Further reduction of leprosy burden in Delhi.
- Reduction of stigma attached to Leprosy.
- Prevention of disability, medical acre of disabled and rehabilitation of displaced patients.

Strategies:

- Integration of leprosy services in general health care system including health care institutions managed by local bodies (MCD, NDMC and Cantonment)
- Well organized referral system to the needy patients
- Further reduction of leprosy burden in Delhi (New case detection and disability cases).
- Elimination of stigma attached to Leprosy with intention to domiciliary treatment and inclusion of patient in family.
- Prevention of disability & Rehabilitation.
- Early case deduction and adequate treatment (MDT)
- Prevention of leprosy related disabilities (POD), and
- Comprehensive rehabilitation (IBR) and CBR)
- Monitoring and evaluation of NLEP
- Surveillance of drug resistance (MDT)

Salient Features of NLEP Delhi:

1. Implementation of NLEP through NRHM (SPMU, DPMU)
2. There is a strong political commitment to further reduce the burden of leprosy

3. Result Based Decentralized Planning with integrated setup involving districts and grass root level functionaries.
4. NLEP is ensuring availability of MDT Drugs through districts to all health care institutions
5. Strong commitment for quality diagnosis and treatment in all Health Care Institutions
6. Establishment of referral for suspected, and complicated patients to district hospitals
7. Involvement of ASHA, NGOs, RWA in Anti Leprosy Activities
8. There is ILEP technical support in all eleven districts
9. NLEP is Involving treated leprosy patients in IEC and DPMR activities
10. Time to time school surveys, employees survey, targeted intervention are carried out
11. NLEP is participating in big social & religious gatherings.
12. IEC activates are carried out in vernacular language & display in the offices.
13. Relevant Messages are disseminated through newspaper, TV, Radio and Telephones
14. Regular conduction of prevention of disability and technical training to all health care personnel
15. Disability Care and Medical Rehabilitation including reconstructive surgeries (RCS)
16. Reporting of cases to DLOs & State Health Directorate as per simplified information system (SIS)
17. Computerization of records, maintenance mandatory district master register
18. Assisting mobility of monitoring staff-provision of hired vehicle in each district.
19. Supportive supervision at state and district level.
20. Evaluation, feedback and revised action.
21. Incentive, awards and recognition to good workers for better motivation.

Achievements of NLEP Delhi:

Leprosy burden

Intensive anti-leprosy activities started during the last decade only. Prevalence of Leprosy in Delhi has come down to 1.24 per 10,000 populations in March 2015. The rigorous Information Education & Communication (IEC) activities, active search and MDT services were carried out regularly. The active search has been stopped in 2004. New patients are voluntarily reporting to health care institutions. Similarly new cases detection rate has reduced to 12.61/100000 population for Delhi Patients.

Strengthening of referral system

Each district has referral hospitals. All referral hospitals have a referral team consist of Dermatologists, Orthopaedicians, Ophthalmologists, PMR Specialist, Physiotherapist and Lab Technician. Dermatologist is the coordinator for this team. Referral of patients is required for confirmation of diagnosis or specialized care for reaction/disability care.

Referral Centres (Hospitals) for Leprosy in various Districts of Delhi.

S No.	District	Referral Hospital	Referral Hospital
1	East	LBS Hospital	
2	Shahdara	GTB Hospital	TLM Hospital
3	Northeast	JPC Hospital	
4	North	M V Hospital	SRHC Hospital

5	Northwest	BSA Hospital	SGMH Hospital
6	West	DDU Hospital	GGS Govt. Hospital
7	Southwest	RTRM Hospital	
8	South	AIIMS	PT MMM Hospital
9	Southeast	ESI Hospital Okhla	
10	New Delhi	RML Hospital	Safdarjung Hospital SSK Hospital
11	Central	Lok Nayak Hospital	Hindu Rao Hospital

Involvement of ASHA and Community volunteers

ASHA is involved in following areas for leprosy control activities:

- Generating awareness in the community in local language to reduce stigma.
- Encourage self reporting of suspected patients for early case detection and treatment.
- Identify/ suspect leprosy completions in the community and refer them to the treatment centre.
- Ensuring leprosy treatment regularity and its timely completion.
- Encouraging leprosy disabled persons to practice self care (as advised by doctor/ health worker).
- Encouraging the leprosy affected persons for health contact examination of their family.

Reduction of Stigma and Discrimination:

Various IEC/BCC activities (involving electronic, outdoor and interpersonal communication) are conducted by national leprosy eradication programme in Delhi. A State level workshop was also conducted for religious leaders in Delhi. The commitment made by religious leaders for reduction of stigma has far reaching results.

Disability Prevention and Medical Rehabilitation:

After achieving the primary goal of eliminating leprosy as a public health problem, prevention of deformities and disabilities has been given higher emphasis during the 12th Five Year Plan period (2012-2017). The DPMR services are to be provided through the infrastructure already existing. The Objectives of DPMR (Disability Prevention & Medical Rehabilitation) are to prevent disabilities and worsening of existing deformities in all needy leprosy affected persons cases, both patients on treatment and those released form treatment and to develop a referral system for providing POD services to all leprosy patients. For correction of disability, surgeries were conducted by various hospitals in Delhi.

Remember Five Points for Advocacy for Leprosy:

1. Leprosy patches are painless
2. Patches are without itch
3. Leprosy is not a killer disease
4. Leprosy is curable with MDT
5. MDT is available free of cost in all Govt. hospitals and dispensaries

6. State level Leprosy workshop was organised in Dr RML Hospital on 30th-31st January 2015. About 213 Participants (Doctors and Paramedical Staff) took part in active discussion.

Abbreviations Used:

AIIMS H	All India Institute of Medical Science
ASHA	Accredit Social Health Activist
BCC	Behaviour Change Communication
BSA H	Baba Saheb Ambedkar Hospital
CBR	Community Based Rehabilitation
DDU H	Deen Dayal Upadhayay Hospital
DLO	District Leprosy Officer
DPMU	District Programme Management Unit
GGS H	Guru Gobind Singh Hospital
GTB H	Guru Teg Bahadur Hospital
IBR	Institution Based Rehabilitation
IEC	Information Education & Communication
ILEP	International Federation of Anti Leprosy Associations
JPC H	Jag Pravesh Chander Hospital
LBS H	Lal Bahadur Shastri Hospital
MB	Multibacillary
MCD	Municipal Corporation of Delhi
MDT	Multi Drug Therapy
MV H	Maharishi Valmiki Hospital
NDMC	New Delhi Municipal Council
NGO	Non-Government Organization
NLEP	National Leprosy Eradication Programme
NRHM	National Rural Health Mission
PB	Paucibacillary

POD	Prevention of Disabilities
Pt MMM H	PT. Madan Mohan Malviya Hospital
RCS	Reconstructive Surgery
RML H	Ram Manohar Lohia Hospital
RTRM H	Rao Tula Ram Memorial Hospital
RWA	Residents Welfare Association
SGMH H	Sanjay Gandhi Memorial Hospital
SHS	State Health Society
SIS	Simplified Information System
SPMU	State Programme Management Unit

			NATIONAL LEPROSY ERADICATION PROGRAMME																	
	DISTRICT	**Delhi State**			**MONTHLY PROGRESS REPORT**						**Reporting Month-March- 2015**									
	District of Delhi		**Cases on record as on First April**			**New Cases detected (cumulative from 1st April)**					**Among New cases (cumulative from 1st April)**		**Cases discharged (cumulative from 1st April)**			**Cases on record at the End of Reporting Month**				
			PB	**MB**	**Total**	**PB(A)**	**PB(C)**	**MB(A)**	**MB©**	**Total**	**Females**	**Grade I**	**Grade II**	**PB**	**MB**	**Total**	**PB**	**MB**	**Total**	**PR**	**NCDR**
	East	1576135	14	46	60	31	5	40	0	76	23	7	11	29	54	83	21	32	53	**0.34**	**4.82**
	Shahdara	1196524	8	184	192	41	5	180	15	241	37	12	41	37	194	231	17	185	202	**1.69**	**20.14**
	Northeast	1487904	9	59	68	17	2	51	7	77	22	4	15	22	77	99	6	40	46	**0.31**	**5.18**
	North	1515998	24	41	65	32	4	42	1	79	19	6	11	45	46	91	15	38	53	**0.35**	**5.21**
	Northwest	2423860	53	167	220	33	3	123	11	170	58	22	23	55	168	223	34	133	167	**0.69**	**7.01**
	West	2731680	13	108	121	15	0	95	7	117	29	10	20	19	109	128	9	101	110	**0.40**	**4.28**
	Southwest	1470483	24	59	83	32	2	58	1	93	24	11	16	35	64	99	23	54	77	**0.52**	**6.32**
	South	1330889	52	152	204	42	3	96	4	145	32	20	25	62	132	194	35	120	155	**1.16**	**10.89**
	Southeast	1618940	19	52	71	23	3	30	1	57	10	4	7	35	58	93	10	25	35	**0.22**	**3.52**
	New Delhi	1147351	6	8	14	7	0	20	0	27	8	3	0	7	14	21	6	14	20	**0.17**	**2.35**
	Central	1577652	12	28	40	7	2	21	0	30	7	2	1	18	23	41	3	26	29	**0.18**	**1.90**
	Total Delhi	**18077416**	**234**	**904**	**1138**	**280**	**29**	**756**	**47**	**1112**	**269**	**101**	**170**	**364**	**939**	**1303**	**179**	**768**	**947**	**0.52**	**6.15**
	UP		76	560	636	107	4	460	20	591	136	20	90	111	426	537	76	614	690		
	Bihar		66	402	468	85	4	337	9	435	77	43	77	71	415	486	84	333	417		
	MP		8	19	27	5	2	23	0	30	9	3	4	3	16	19	12	26	38		
	Jharkhand		10	32	42	6	0	19	1	26	8	2	6	9	25	34	7	27	34		
	Chhattisgarh		3	7	10	0	0	3	0	3	0	0	1	3	5	8	0	5	5		
	Orissa		2	5	7	1	0	2	0	3	0	0	0	2	4	6	1	3	4		
	WB		1	14	15	1	0	3	0	4	2	1	1	1	7	8	1	10	11		
	Rajasthan		1	19	20	6	0	10	1	17	2	2	4	1	7	8	6	23	29		
	Haryana		15	33	48	9	2	27	0	38	12	2	9	17	32	49	9	28	37		
	Other states		1	16	17	3	0	16	0	19	7	2	5	2	12	14	2	20	22		
	Total Outside Delhi	**0**	**183**	**1107**	**1290**	**223**	**12**	**900**	**31**	**1166**	**253**	**97**	**197**	**220**	**949**	**1169**	**198**	**1089**	**1287**		
	Nepal		1	11	12	0	0	2	0	2	2	0	0	0	8	8	1	5	6		
	Bangladesh		0	1	1	0	0	0	0	0	0	0	0	0	1	1	0	0	0		
	Others		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Total Other countries	**0**	**1**	**12**	**13**	**0**	**0**	**2**	**0**	**2**	**2**	**0**	**0**	**0**	**9**	**9**	**1**	**5**	**6**		
	Total New Cases	**18077416**	**418**	**2023**	**2441**	**503**	**41**	**1658**	**78**	**2280**	**524**	**198**	**367**	**584**	**1897**	**2481**	**378**	**1862**	**2240**	**1.24**	**12.61**
	Relapse		0	10	10	0	0	10	0	10	0	0	0	0	7	7	0	13	13		
	Reentered		31	303	334	56	1	352	3	412	61	25	90	48	420	468	40	238	278		
	Refferred		1	3	4	0	0	7	0	7	0	0	0	0	1	1	1	9	10		
	Reclassified		0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1		
	Total	**0**	**32**	**317**	**349**	**56**	**1**	**369**	**3**	**429**	**61**	**25**	**90**	**48**	**428**	**476**	**41**	**261**	**302**		
	Grand Total	**0**	**450**	**2340**	**2790**	**559**	**42**	**2027**	**81**	**2709**	**585**	**223**	**457**	**632**	**2142**	**2957**	**419**	**2123**	**2542**		

7.3 INTEGRATED DISEASE SUREVEILLANCE PROJECT AND PUBLIC HEALTH CAMPAIGN OF GOVT. OF N.C.T. OF DELHI (IDSP/NVBDCP)

Annual Report-Public Health-IV (IDSP/NVBDCP)

Integrated Disease Surveillance Programme (IDSP) was launched with World Bank assistance in November 2004 to detect and respond to disease outbreaks quickly. The project was extended for 2 years in March 2010 i.e. from April 2010 to March 2012, World Bank funds were available for Central Surveillance Unit (CSU) at NCDC & 9 identified states (Uttarakhand, Rajasthan, Punjab, Maharashtra, Gujarat, Tamil Nadu, Karnataka, Andhra Pradesh and West Bengal) and the rest 26 states/UTs were funded from domestic budget. The Programme continues during 12th Plan (2012-17) under NHM with outlay of Rs. 640 Crore from domestic budget only.

- State Surveillance Unit has been established at DHS (HQ) in Delhi and 11 District Surveillance Unit (DSUs) have been established at different districts of Delhi. Central Surveillance Unit (CSU) established and integrated in the National Centre for Disease Control, Delhi.

- Under the programme weekly disease surveillance data on epidemic prone disease are being collected from reporting units such as sub centres, primary health centres, community health centres, hospitals including government and private sector hospitals and medical colleges. The data are being collected on 'S' syndromic; 'P' probable; & 'L' laboratory formats using standard case definitions. Presently, more than 90% districts report such weekly data through e-mail/portal (www.idsp.nic.in). The weekly data are analyzed by SSU/DSU for disease trends. Whenever there is rising trend of illnesses, it is investigated by the RRT to diagnose and control the outbreak.

- State/districts have been asked to notify the outbreaks immediately to the system. On an average, 8-10 outbreaks are reported yearly (2014-15) by the States.

- Media scanning and verification cell was established under IDSP in July 2008. It detects and shares media alerts with the concerned states/districts for verification and response. A total of 3063 media alerts were reported from July 2008 to November 2014 and 122 till 31st March 2015. Majority of alerts were related to diarrhoeal diseases, food poisoning and vector borne diseases.

- A 24X7 call center was established at DHS (HQ) to receive disease alerts on a telephone number (011-22307145). The information received is provided to the concerned department or resolved at SSU level for investigation and response. The call centre was extensively used during H1N1 influenza pandemic in 2009-2015 and dengue outbreak in Delhi in 2010-14.

- District laboratories (Pt/ MMMH, MVIDH) have been strengthened for diagnosis of epidemic prone diseases. These labs have been supported by a contractual microbiologist to manage the lab and an annual grant of Rs 4 lakh per annum per lab for reagents and consumables. Five more labs (BSAH for Northwest, AAAH for central, BJRMH for North, RTRMH for Southwest & LBSH for east) are being strengthened for different districts.

- Considering the non-availability of health professionals in the field of Epidemiology, microbiology and Entomology at district and state levels, MOHFW approved the recruitment of trained professionals under NHM in order to strengthen the disease surveillance and response system by placing one Epidemiologist each at state/district head quarters, one Microbiologist and Entomologist each at the state head quarters. The post of a Veterinary Consultant at State Surveillance Unit has been approved by the

MOHFW recognizing the Mission Statement of One Health Initiative. 408 Epidemiologists, 181 Microbiologists, 25 Entomologists and 3 Veterinary Consultants are in position as on 31st March 2015.

Ongoing regular activities:

❖ **Surveillance activities:**

Surveillance of IDSP data through collection, compilation, analysis and interpretation & feedback to the DSOs regularly. Sometimes the IDSP portal becomes defunct and unable to do analysis at SSU level for which Complaints sent to the CSU for corrections.

❖ **Field visits :**

Field visits are performed regularly to the concerned DSUs and field areas where outbreaks are reported and controlled in time. DHOs, DJB and PHE depts. try to delay action for which repeated meetings are done with DHOs, DJB-En, DSOs & DMCs along with documentary evidence (L-form data and line-list) & persuasion to control outbreaks.

❖ **Correspondence:**

All letters/RTIs/Public Grievances and emails received are responded on time.

Current Training Undergone:

- All DSOs have been trained for FETP at PHFI, Gurgaon.
- Epidemiologists have been trained for FETP at PHFI, Gurgaon.
- Microbiologists have been trained for FETP at BJMC, Pune.
- SSO, DSOs, Epidemiologists, Microbiologists have been trained for Measles at Imperial Hotel, Delhi by WHO.
- State Microbiologist has been trained for Quality Management System (QMS) at IIPA, Delhi.

Training provided during 2014-15:

- Medical officers of all dispensaries under 11 DSUs for Dengue Management.
- Lab Technicians of all dispensaries under 11 DSUs under Dengue Management.
- Induction training for all Medical officers of all dispensaries under 11 DSUs under IDSP.
- Measles training to MOs of all dispensaries under 11 DSUs.
- Induction training for Data Managers & Data Entry Operators.
- Ebola training for Physician, Pediatrician, Microbiologist/ Pathologist, Nodal Officer & staff nurse of all Sentinel Surveillance Hospitals under 11 DSUs for Ebola Management.
- District wise H1N1 training for Specialist/Medical officer/Nurses/Nodal officer both from Pvt. & Govt. /Paramedical Staff.

Outbreaks Investigated & Controlled in Delhi in 2014

Sno.	Date	Disease	Week	Total Cases	Death	Area affected

1	24.02.14	Hepatitis E	9th	8-10	Nil	GGSGH Residential Campus, Raghubir Nagar
2	13.06.14	Typhoid Fever	24th	5-6	Nil	Khayala/Vishnu Garden.
3	02.07.14	Typhoid Fever	27th	11	Nil	Basai Darapur
4	08.07.14	Food Poisoning	28th	12	Nil	Govt. Girl School, Patparganj
5	22.08.14	Typhoid Fever	34th	10-15	Nil	Shora Kothi/ Kedar building, Subji Mandi
6	15.09.14	Typhoid Fever	38th	25	Nil	Jahangir Puri &Bharola
7	04.10.14	Cholera	43rd	8	Nil	Paharganj , Nabi karim

Water Borne Diseases / Vector Diseases & communicable diseases are most commonly occurred in Delhi. Some of the major Diseases have been controlled through IDSP. Some major Diseases are as follows:

EBOLA VIRUS DISEASE:

- Ebola virus disease (EVD), formerly known as Ebola haemorrhagic fever, is a severe, often fatal illness in humans.
- The virus is transmitted to people from wild animals and spreads in the human population through human-to-human transmission.
- The average EVD case fatality rate is around 50%. Case fatality rates have varied from 25% to 90% in past outbreaks.
- The first EVD outbreaks occurred in remote villages in Central Africa, near tropical rainforests, but the most recent outbreak in West Africa has involved major urban as well as rural areas.
- Community engagement is key to successfully controlling outbreaks. Good outbreak control relies on applying a package of interventions, namely case management, surveillance and contact tracing, a good laboratory service, safe burials and social mobilisation.
- Early supportive care with rehydration, symptomatic treatment improves survival. There is as yet no licensed treatment proven to neutralise the virus but a range of blood, immunological and drug therapies are under development.
- There are currently no licensed Ebola vaccines but 2 potential candidates are undergoing evaluation.

Preparedness/Action taken for Ebola Virus Disease (EVD)

- ❖ Screening of passengers coming from West African (EVD affected) countries being done at APHO, Delhi/ Mumbai/ Bangalore according to category A (Suspected), Category B (Probable), Category C (Confirmed). Isolation & quarantine facilities are available at APHO.
- ❖ Identified referral Hospitals for isolation & quarantine facilities are: Lok Nayak Hospital & Dr. Ram Manohar Lohia Hospitals

- ❖ 32 Nodal officers have been identified in each Sentinel Surveillance Hospital (SSH) for EVD by 01 State Nodal Officer (identified by GoI).
- ❖ NCDC, Delhi & NIV, Pune have been geared to test samples for Diagnosis of EVD.
- ❖ Doctors & paramedical staff deputed for EVD management have been trained under all 11 districts.
- ❖ Surveillance of each suspected EVD passengers has been carried out by IDSP on daily basis and daily report was submitted to MoHFW & Delhi State.
- ❖ Technical Advisory committee had been formed.
- ❖ All EVD related Guidelines had been disseminated to all the stake holders of Delhi.
- ❖ Rapid Response Team (RRT) & Training of Trainers (TOT) had been identified & trained at NIHFW & IIPA respectively.
- ❖ Setting up the control Room at Nirman Bhawan (011-23061302) & DHS (011-22307145) for 24x7.
- ❖ 400 PPE kits have been distributed to all SSHs.

Vector/Water Borne Diseases:

Control of Dengue, Malaria, Cholera, JE & Chikungunya since Den-2 strain of Dengue had been identified during 2013 for which 20 more review meetings were organized under the Chairmanship of Hon'ble Health Minister and control measures were taken to control it alongwith Malaria, Cholera, JE & Chikungunya during 2014-15. Lack of awareness among the community and inadequate cooperation of MCD staff resulted into 5546 dengue confirmed cases and 6 deaths as on 14.12.2013 and 199 Malaria, 8 Chikungunya and 338 cholera cases in Delhi.

The State Epidemiologist participated as resource person at the community level to create awareness about dengue in more than 10 remote areas in collaboration with VHAI. Amendments in DMC Act have been suggested to penalize the defaulters. He also participated in the training programme carried out by DHOs of Delhi for Principals, teachers and other RWAs and participated in various inter-sectoral coordination committee meetings/workshops organized by MHOs of 3 DMCs.

Meeting held with DOE to involve Delhi Govt. school students and teachers in dengue control. Action plan for next 3 month developed and submitted to Sec (H) of GNCT-Delhi. He also participated in NPCC meeting. Inter-sectoral Coordination work shop/training under NVBDCP is proposed to be organized this month to improve the situation.

He has been providing training for H1N1 in collaboration with DSOs to all the Medical Officers in various districts.

PREPAREDNESS OF HOSPITALS

- Total 34 Sentinel Surveillance Centres are fully functional for Dengue diagnosis and treatment. Each centre has dedicated fever clinic, Dengue beds, trained staff and additional manpower deployed in some hospitals.
- In addition to the existing staff 22 Medical Officers and 40 Lab Technicians were deployed in different Hospitals for management of Dengue cases.
- Nodal officers were deputed for each Sentinel Surveillance Centre.

- Around 1232 dedicated Dengue beds are available in Govt. Hospitals at present and the MSs are also requested to increase the number of beds for Dengue cases as and when required.
- Private Hospitals registered under the Delhi Nursing Home Registration Act 1953 are also directed to increase Dengue beds up to 10 beds in smaller and medium sized Hospital and more in bigger Hospitals as per the requirement.
- All the Hospitals are directed to ensure that the dengue fever cases requiring admissions are not denied admission due to lack of beds.
- Advisory for Dengue Management has already been circulated to each Hospital from time to time.
- Dengue Control Room established at DHS (Ground floor) round the clock and Dengue Control Room. (Phone No. 011-22307145).

Month and year wise Situation of Dengue Cases from 2006 to 2015 (up to 30.04.2015)

Year	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total	Death
2006	0	0	0	0	0	1	5	59	412	2163	681	45	3366	
2007	2	1	0	1	0	0	2	15	68	320	129	10	548	1
2008	0	0	0	0	0	0	4	71	505	496	197	39	1312	2
2009	0	0	0	0	0	0	2	2	33	337	713	66	1153	3
2010	0	0	0	0	0	1	51	885	2360	2246	678	38	6259	8
2011	0	0	1	3	0	1	10	51	179	512	328	46	1131	8
2012	0	0	0	2	0	3	4	4	55	951	1005	69	2093	4
2013	2	2	0	3	0	2	11	142	1962	2442	549	459	5574	6
2014	0	0	2	0	3	10	7	11	87	318	444	113	995	3
2015	0	3	1	3	0*									

Specialized Activities:

Special visit to DDUH for feasibility survey of Yellow Fever Vaccination Centre. **Feasibility survey report prepared and submitted to DHS.** Time period of Identification & feasibility survey delayed for one year leading to inadequate and inappropriate space.

Janakpuri Super speciality Hospital as alternative/optional centre for Yellow Fever Vaccination Centre is suggested.

MERS:

- Monitoring of Middle East Respiratory Syndrome (MERS) cases of Hajj pilgrimage and maintained the record received from the APHO.
- Dr. Charan Singh was designated as State Nodal Officers for MERS-CoV.
- Dr. Ram Manohar Lohia Hospital (RMLH) & Safdarjung Hospital (SJH) were identified as referral Hospital for making necessary arrangement for isolation and critical care facilities 24x7 in their respective Hospitals to provide Medical/ Emergency services to the victims of MERS-CoV.
- Nodal officers & RRT members were provided training for MERS by MOHFW.

Audits:

Participation/facilitation of audit done and DSHM to finalize the audit report. Audit report and audited UCs are to submitted to NPO-IDSP to get the next release.

Planning:

Actively participation in planning process. Meetings of Planning are attended and inputs given.

Action Plan of NVBDCP for 2014

- Seeing the trend of Dengue situation, it is observed that the Dengue control measures will require attention throughout the year as infrequent cases do occur during January to June.
- Training & Monitoring of DBCs will continue initially during January to March by the SPO and intensified during peak months. DBCs will be supported to inspect the old as well as under/newly construction sites without any obstructions.
- Training will be given to all untrained staff during January to March. ASHA workers will also be trained during January to March and involved in Dengue Awareness Campaign.
- Thirty one sentinel hospitals and 3 Research Institutes will continue to carryout various activities like taking blood samples from the suspected patients with viral syndrome, maintaining line-listing of positive cases of dengue, malaria and chikungunya during January to March.
- Data Hub will continue to be maintained at DHS for the program management during throughout the year. There would be insect collectors in the field.
- Data of previous years will be analyzed to make the strategy more effective and it is also proposed that a committee will also analyze how to improve common traditional equipments using for spraying etc (operational research).
- School children will be given projects and also Quiz will organize to create awareness about the Dengue control during January to March and similar programme would be organized in Bal Bhawan during summer vacations. Training or activity carried out must be validated and visible.
- Strengthening and capacity building alongwith promotion of training, health education, and research on surveillance, vector control, laboratory diagnosis and case management will continue throughout the year.
- Preparedness of capacities to prevent and control outbreaks with appropriate contingency plans for vector control, hospitalization, IEC and adequate logistics arrangement will continue throughout the year.
- Advisory in this regard will be modified and resend on the basis of output received from the experts and will be sent to all the sentinel hospitals.
- Dengue Awareness Campaign will be continued starting from January throughout the year. School children will be trained and involved in such awareness campaigns.
- Intersectoral coordination conference will be organized every month and various issues related to vector disease control will be taken up and feedback/output/

comments will be compiled to modify the advisory, needs of involving more blood banks and Private Hospitals will be listed and appropriate action will be taken.

- Direction regarding more Dengue beds will be issued as per need in all Sentinel Surveillance Hospitals.
- Proper sanitary conditions & cleanliness drive will be ensured by all local bodies throughout the year to control mosquitoes breeding and a special cleanliness drive will be observed by the local bodies in the month of August & September.
- A fresh circular will be issued to all major building owning agencies like CPWD, PWD GNCTD, MCD (land and Building) NDMC, Railways, DDA etc to maintain their buildings free from mosquito breeding throughout the year.
- Awareness and orientation programs need to be organised for medical and paramedical staff during early months of the year so that control measures could be taken well in time.
- Breeding prone areas will be checked on random basis by DBCs or Designated senior Officers who will monitor the situation and report on weekly basis.
- They will be provided with Temiphos for the prevention of mosquito breeding.
- Similar exercise will be taken through civic society namely Resident Welfare Associations, market committees etc.
- Seasonal recruitment/detailment of extra Lab Technicians and Medical officers to be posted during peak Dengue season (July to December) to provide 24x7 lab facilities. MOs can also be diverted from different dispensaries to meet out the staff demands in peak months of Dengue.

ADVOCACY COMMUNICATION AND SOCIAL MOBILIZATION

IEC/BCC public notices have been published in leading newspaper (Hindi, English, Urdu)

Public campaigning also done through the following outdoor media.

SN.	Type of outdoor media
1	Nukkad Natak
2	Magic Show
3	BRT Bus Q Shelters
4	Metro station display panels
5	Electronic display (Computerize animation)
6	Public Utilities
7	Metro Station Guide Map
8	Metro feeder buses
9	Metro Train Inside Panels
10	Metro Railings
11	Public Booth
12	Police Booth
13	Metro Station Public Utility
14	Bus Q Shelter
15	Metro Double sided Pillars

H1N1

H1N1 virus has now taken on the behavior of a seasonal influenza virus, hence H1N1 influenza episodes and seasonal influenza are to be treated on similar lines. Such cases occur round the year with peaks occurring generally during autumn and winter months.

Since there is no antigenic drift (mutation) of the virus from the one found during pandemic 2009-10, hence, the community has acquired herd immunity against this virus and present influenza behaving like seasonal influenza.

EMPIRICAL DATA:

	2009		2010		2011		2012		2013		2014		2015	
	+ve	Death	+ve	Death	+ve	Death	+ve	Death	+ve	Death	+ve	Death	+ve	Death
Jan.	0	0	288	13	1	0	1	0	39	1	1	0	439	5
Feb.	0	0	40	1	3	1	3	0	908	11	7	0	2452	5
March	0	0	9	0	6	0	2	0	534	4	1	0	1346	2
April	0	0	2	0	1	0	4	0	17	0	5	0	30	0
May	0	0	1	0	7	1	3	0	6	0	8	0	1	0
Jun	55	0	3	0	2	0	1	0	3	0	2	0		
July	103	0	73	5	2	0	2	0	1	0	0	0		
Aug.	502	1	850	14	0	0	6	0	1	0	2	0		
Sept.	989	11	561	22	0	0	39	0	1	0	0	0		
Oct.	437	7	21	1	0	0	10	1	0	0	0	0		
Nov.	666	10	1	0	0	0	3	0	0	0	0	0		
Dec.	4336	52	1	0	0	0	4	0	1	0	12	0		
Total	7088	81	1850	56	22	2	78	1	1511	16	38	0	4268	12

Recent Steps taken by IDSP-Delhi for containment of H1N1:

1. An expert committee was constituted by Director Health Services for monitoring the recent upsurge of H1N1 influenza, death audit, reviewing the preparedness in hospitals, districts, health centers, laboratories, logistics etc.
2. Review of deaths due to H1N1 was done by the expert committee on 10.01.2015 wherein case sheets and other documented were examined in detail and discussion were held physicians of concerned hospitals. Out of three deaths 02 were having other co-morbid conditions and mix of influenza which could be the cause of mortality.
3. There after meeting of District Surveillance Officers (DSOs) was conducted on the same day i.r. 10.01.2015 for 11 districts to review the real-time preparedness of the hospitals under jurisdiction for maintaining the adequate stock of medicines

(Oseltamivir phosphate-Fluvir), PPE (Personal Protection Equipment), Hand rub, VTM(Viral Transport Media), sensitization of doctors in their district and raising awareness regarding seasonal influenza including H1N1 among medical and community in the field.

As per requirement stock was made available to DSOs in the district for medicine and syrup Fluvir for confirmed cases in the district under proper maintenance of records. Alcohols rub was distributed to health facilities for proper patient care.

4. Epidemiologist along with the concerned DSOs were sent to identified hospitals with checklist for verifying the isolation facilities, intensive care facilities (ventilators), availability of medicines (Oseltamivir phosphate- Fluvir), PPE (Personal Protection Equipment), VTM (Viral Transport Media), raising awareness regarding seasonal influenza including H1N1 and sensitizing the nominated Nodal Officer of the hospital and their authorities.
5. At present H1N1 testing facility is available in three Govt. institutes free of cost and four private laboratories. Feasibility to start the testing facility in two more Govt. hospitals is under progress. For that State Microbiologist was sent to MAMC & UCMS for feasibility survey regarding Influenza testing. Discussion was held by the DHS with principal (UCMS) and Dean (MAMC) for initiating the process of H1N1 testing facility. Three more private labs have been given provisional permission for testing H1N1.
6. List of 22 designated hospitals with name of Nodal Officers, mobile number and with dedicated beds and ventilators. Three more hospitals (one Govt. & two private) have started facility for H1N1 management.
7. Continuous review meeting by Secretary Health (02.01.2015, 13.01.2015) and DHS (on 12.01.2015, 16.01.2015 & 20.01.2015) were held with expert committee group to review the situation in Delhi and accordingly steps and strategy to contain the infection was undertaken.
8. For raising awareness in the community, outdoor campaigning in the form of hoardings/ metro pannel has been done and Flex Boards with information regarding seasonal flu including H1N1 have been affixed in all the Delhi Govt. Dispensaries/ Mobile Health Clinics across Delhi.
9. Other IEC activities like Radio spot, Audio CD for Dos and Don'ts in public address systems of Hospitals, Advisory for public in leading newspapers is under process and will be implemented soon after completion of codal formalities.
10. Guidelines and specific Standard Operating procedures (SOPs) were prepared and disseminated to all the Nodal officers of identified hospitals, DSOs & Medical Officers of health facilities.
11. Training of doctors, nurses and paramedics of identified hospitals is already being conducted by NCDC.

12. Sufficient stock of medicines (Oseltamivir capsule: 8000/75mg, 2000/30 mg and syrup: 100), N95 masks, PPE etc are available at the DHS Head Quarter.
13. Regular monitoring & day to day analysis of H1N1 data is being undertaken by IDSP Cell at DHS HQ.
14. Press and media are updated whenever required for current status and measure being undertaken by DHS for managing the H1N1 influenza in Delhi.
15. Continuous coordination is being maintained with officers at NCDC and EMR division of DGHS (MOHFW, GOI) for updates and change in guidelines for H1 N1 influenza.
16. Training of Medical Officers of DGDs under various District Surveillance Units are continued in respective districts.
17. For raising awareness in the community, outdoor campaigning was done in the form of hoardings/ metro panel. Flex Boards with information regarding seasonal flu including H1N1 have been affixed in all the Delhi Govt. Dispensaries/ Mobile Health clinics across Delhi.
18. Guidelines and specific Standard Operating procedures (SOPs) were prepared and disseminated to all the Nodal officers of identified hospitals, DSOs & Medical Officers of health facilities.
19. Regular monitoring & day to day analysis of H1N1 data is being undertaken by IDSP Cell at DHS HQ.
20. Press and media are updated regarding current status and measures being taken by DHS for managing Seasonal Influenza in Delhi.
21. In order to facilitate the general public, three more private Labs (Sir Ganga Ram Hospital, Sequence referral lab & Max Super Specialty Hospital) have been given provisional permission for testing H1N1 samples.
22. In order to facilitate the general public, provisional permission has been given to one Govt. (Dr. Hedgewar Arogya Sansthan) & two Private (BLK Hospital & Max Super Specialty) Hospital for admission & treating the H1N1 patients. Facility has been extended to hospitals having beds more than 100 with Ventilator for treatment of H1 N1.
23. IEC activities through print media & Radio spots, PA system of Hospitals, have been undertaken.
24. Letters were issued written to 3 DMCs, DMRC, Education Department, Delhi University, JNU, NDMC, Delhi Tourism, Delhi Transport Department, Northern Railway, Cantonment Board etc. for broadcasting message regarding Seasonal Flu in their Public address system for rising awareness in general public.
25. Training of doctors, nurses and paramedics of identified hospitals was being conducted by NCDC.

26. Fresh Clinical Guidelines for Management of influenza (H1N1) & Categorization of influenza cases were disseminated to all Govt./Pvt. Hospitals, Districts, CDMOs offices.
27. DO`s & DON`Ts (H1N1) were disseminated to all Govt./ Pvt. Hospitals, Districts, CDMOs offices, 3 DMCs and other Govt. Departments.
28. A meeting is convened on 18.02.2015 at 11.00 am in DHS conference Hall to discuss various issues related to laboratory testing of H1N1 & the charges levied from the patients. Private labs were sensitized to perform test only on category C patients so that unnecessary tests are avoided. They were requested to adhere to the guidelines/treatment norms endorsed by MoHFW, GoI & DHS, GNCTD.

    Following decisions were taken.

    a) Ceiling amount for testing H1N1 was fixed at Rs. 4500/-
    b) Testing should be done in Category C patients only.
    c) The complete line listing of the positive patients should be sent to this Directorate

29. Awareness campaign being conducted through print media, electronic media etc.
30. Drug Controller, GNCTD has convened a meeting with the chemist association, stockist and distributors of Oseltamivir and they have assured to supply the drug to the department as per requirement.
31. Oselatmivir is come under schedule X and there is limited number of chemists (100) in Delhi which posses licence of schedule X group of drugs. So this drug is not freely available with all chemists but under the control with prescription from Doctors. There is no shortage of Oseltamivir in Delhi
32. Updated public information regarding H1N1 in form of public notice has been prepared and sent to DIP for advertisement in 7 leading newspaper (2 English, 3 Hindi, 1 Urdu & 1 Punjabi) on 19.02.2015.
33. Information for public in form of Public notice regarding seasonal Influenza were published in 7 leading newspaper (2 English, 3 Hindi, 1 Urdu, 1 Punjabi) on 19.02.2015 to aware general public regarding this illness. Reply submitted for Parliament Questions regarding H1N1 received on 20.02.2015.
34. Show Cause Notice were given to both the defaulter labs on 21.02.2015 (Healthcare Laboratories & Global Laboratories) and reply was expected within 48 hrs.
35. A meeting is convened on 23.02.2015 at 10.30 am under the chairmanship of Director Health Service with all lab owners & microbiologists regarding H1N1. Representative from three new private labs are also invited with proposal for H1N1 testing (Quest Diagnostics, lifeline laboratories & Dr. Suri Lab).
36. Minutes of meeting held on 18.02.2015 with all private lab owners and Microbiologists were prepared and submitted for approval.

37. Office order was prepared & issued to all private lab owners regarding not to charge beyond the aforesaid ceiling amount for testing Influenza A (H1N1) and only Category C patients require testing.
38. It was reiterated that private labs should not charge above the fix ceiling price for testing (Rs. 4500/-).
39. Provisional permission given to Dr. Suri Lab for testing of Influenza A (H1N1) samples on 26.02.2015.

8. REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAM IN DELHI

Revised National Tuberculosis Control Program DELHI

- Tuberculosis is the most pressing health problem in our country as it traps people in a vicious cycle of poverty and disease, inhibiting the economic and social growth of the community at large. Tuberculosis still remains a major public health problem in Delhi. 40% of our population in Delhi is infected with TB germs and is vulnerable to the disease in case their body resistance is weakened.
- Delhi has been implementing the Revised National TB Control Programme with DOTS strategy since 1997. Delhi State RNTCP has been merged with NRHM (DSHM) w.e.f. 01.04.2013. The Delhi State RNTCP is being implemented through a decentralized flexible mode through 25 Chest Clinics equivalent to DTC. Out of 25 Chest Clinics, MCD are running 12, GNCTD-10, NDMC -1, GoI-1and NGO-1 chest clinics respectively. Delhi is the only state in the country where one NGO – Ramakrishna Mission, has been entrusted the responsibility to run the RNTCP in a district. The RNTCP has 201 diagnostic centres and 551 treatment centres located all over Delhi. The NGOs and Private Medical Practitioners are participating in the implementation of the RNTCP in a big way. The diagnosis and treatment is provided free to the patients under the RNTCP. The NGOs & Private Practitioners are also providing free diagnosis and treatment services.
- Delhi has been the first State in the country to have full coverage with DOTS (WHO recommended treatment strategy for TB) since 1997 and with DOTS–PLUS (treatment schedule for Drug resistant TB) since 2008.
- Delhi has been the best performing State in terms of achieving international objective of the programme in detecting new infectious TB patients 70% and their success rate at 85% consistently for the last eleven years.
- The State has been able to bring down the death rate due to tuberculosis at the lowest level of 3% (all India 4%) amongst new infected patients, 2% (4% All India) amongst new sputum negative patients and 1% (2% All India) amongst new extra pulmonary cases. Therefore the State is saving lot of lives and achieving the goal of the Programme to decrease mortality due to TB.
- Delhi has been treating maximum number of children suffering from TB at the rate of 14% against 6% all India figures.
- Delhi State RNTCP became the first State in the country to have base line drug sensitivity to second line drugs in all cases of MDR TB.

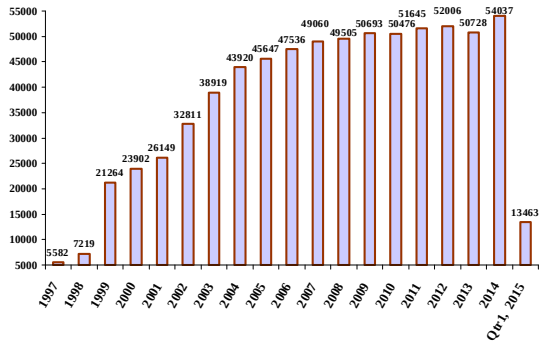
PERFORMANCE OF DELHI STATE RNTCP

Indicator	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	Qtr 1, 2015
Total number of patients put on treatment	26,149	32,811	38919	43920	45,647	47,536	49,060	49,505	50,693	50476	51,645	52006	50728	54037	13463
New Infectious patients put on treatment	8630	10764	11345	11925	12703	13719	13695	14000	14156	13680	13770	13982	12969	13704	3541
Conversion rate from infectious to non infectious status at three months of treatment (Target 90%)	88%	86%	88%	90%	91%	89%	89%	90%	89%	89%	89.5%	90%	89%	89%	91%
Case detection rate of new infectious patients (Universal coverage)	74%	89%	90%	92%	85%	89%	86%	86%	80%	82%	85%	85.7	80%	80%	85%
Case detection rate of all types of TB patients (Universal coverage)	83%	101%	114%	125%	124%	113%	114%	113%	105%	112%	118%	128%	118%	122%	119%
Success rate (cure + completion) of new smear positive (Target 90%)	83%	84%	82%	85.5%	87%	87%	86%	87%	87%	86%	86%	85.7%	86%	85%	85%
Death Rate (Target < 5%)	3%	2.5%	2.7%	2.5%	2.3%	2%	2.8%	2.5%	2.5%	3%	3%	2.7%	2.6%	3.5%	3%
Default Rate (Target < 5%)	9%	9%	9.5	6.5%	5.3%	5%	5%	4.5%	4.5%	4.3%	4.5%	4.4%	5%	5.7%	4.8%
Failure Rate (Target < 5%)	4%	4%	4.5%	4%	3.8%	4%	4.5%	4%	4.5%	4%	4%	4.1%	3%	2.7%	2.9%
Number of persons saved from death	4775	6201	7117	8449	9015	9507	9328	9690	9921	9489	9690	9776	9486	9875	2518
Number of persons prevented from getting infected with TB	311973	392348	406730	440044	474457	553576	504126	522900	528714	504633	507310	513839	480501	523407	130131

PERFORMANCE OF REVISED NATIONAL TB CONTROL PROGRAMME
From 1997 to Qtr 1, 2015

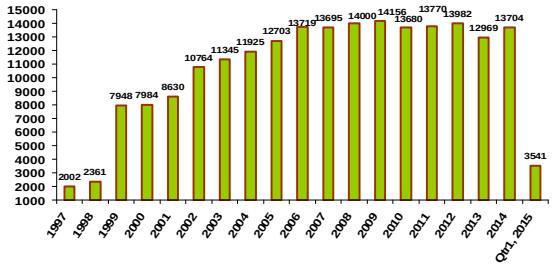
Revised National TB Control Programme-DELHI

Yearly Total cases put on Treatment



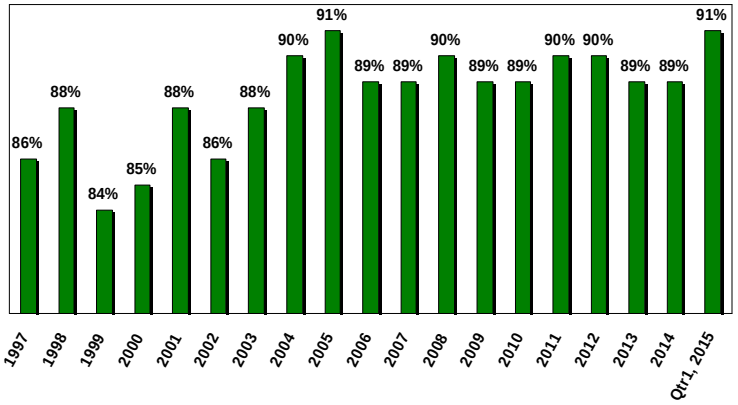
Revised National TB Control Programme-DELHI

Yearly new sputum Positive cases put on Treatment



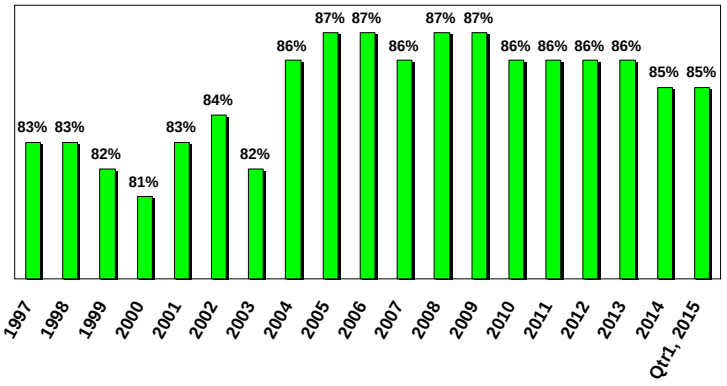
Revised National TB Control Programme-DELHI

Sputum Conversion Rate of New Sputum positive patients

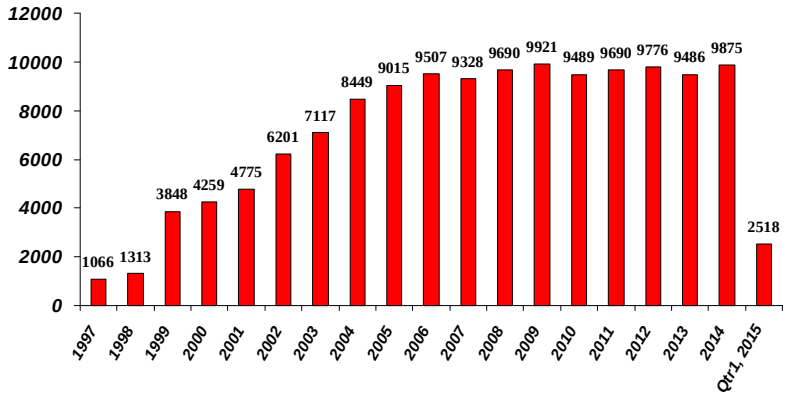


Revised National TB Control Programme-DELHI

Success Rate of new sputum Positive patients



NUMBER OF LIVES SAVED FROM DEATH



Revised National TB Control Programme- DELHI

Impact Of DOTS 1997 to Up to Qtr 1, 2015

- **7,02,405 patients put on treatment**
- **>86 out of 100 patients treated successfully**
- **>73,99,526 infections averted**
- **>7,39,952 illness averted**
- **>1,33,057 precious lives saved**

9. NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS

The "State Health Society Delhi" is implementing NPCB programme in Delhi on district pattern through respective "Integrated District Health Society". Various approved activities were under taken **during the year 2014-15** as per Prog. guidelines. The detail of activities under taken during this period is given here under:-

Campaign cataract countdown

NGOs are motivated to hold the screening camps all over Delhi in collaboration with Integrated District Health Societies, especially in the under privileged areas of city and in NCR and the cases detected with cataract are transported and operated in fixed facilities managed by NGOs. The cataract surgeries are also under taken by Govt. Hospitals. The Programme used to give support to these hospitals on procuring the consumables and some equipment through State / District Health Societies. During the reporting period; fund have been made available to IDHS to support on this front but amount was not utilized as the govt. hospitals had fulfilled their demands from regular sources. The details of the cataract surgeries performed are as under:

Year	No. of Cataract Surgeries	IOL Surgeries out of total cataract surgeries
2007-08	93,808	91,159
2008-09	92,064	89,956
2009-10	90,859	87,878
2010-11	90,372	87,739
2011-12	90,944	89,740
2012-13	87,912	85,795
2013-14	75,186	73,587
2014-15	85,260	83,737

School Eye Screening Project

Under this project **during 2014-15**, health teams of Chacha Nehru Sehat Yojna under School Health Scheme DHS had done the primary screening of students of schools of Deptt. of Education GNCTD. All students of up to class XII are examined by health teams and those students suspected to be suffering with defective vision are further examined by Refractionist and those needing glasses are provided free spectacles through respective IDHS. The report of School Eye Screening Project is as below: -

Year	No of additional teachers trained	No. of Students Screened	No. of Students detected with refractive error	No. of Students provided free glasses
2007-08	Nil	Nil	Nil	Nil
2008-09	342	140381	23949	11943
2009-10	Nil	53746	7694	2194
2010-11	56	114835	9676	5853
2011-12	NR	NR	NR	4874
2012-13	Nil	608264	82064	12887
2013-14	Nil	630809	53697	5513
2014-15	Nil	4,69,144	41,305	4721

Eye Banking Activities

Under the NPCB, the Eye Banks located in Delhi are continuously encouraged to collect as many eyes as possible. In the month of August / Sept. 2014 an "Eye Donation Fortnight" was also held, under which

special incentive is given to the eye banks to promote the eye donations activities. Talk on Radio and Doordarshan were got organized during this fortnight by eminent eye specialists of State.

The report of Eye Banks is as below: -

Year	No. of Eyes Collected	No. of Eyes used in Kerotoplasty
2007-08	1883	862
2008-09	1778	1013
2009-10	2075	1169
2010-11	2094	1175
2011-12	2400	1249
2012-13	2935	1707
2013-14	3365	1946
2014-15	3571	1928

The eye banks are connected with MTNL Toll free number 1919 so that the calls made on this number are promptly attended to by the eye banks and all those who wish to donate their eyes can also contact the eye banks on this number. All the eye banks have kept one of the telephone lines dedicated for this purpose i.e. they would provide a 24 hrs. X 7 days service on this number. The list of the eye banks and their complete address that have been connected with this service is as below:

S. No.	Name of Eye Bank	Location of Eye Bank	Direct Telephone Number
1	National Eye Bank	Dr. R. P. Centre, AIIMS, Aurobindo Marg, New Delhi-29	26589461 26593060
2	Eye Bank at Venu Eye Institute	1/31/, Sheikh Sarai, Institutional Area, Phase-2, New Delhi-17	29250952 9899396838
3	Central Eye Bank, Sir Ganga Ram Hospital	Sir Ganga Ram Hospital Marg, Rajinder Nagar, New Delhi-60	25732035
4	Sewa Eye Bank	29, Link Road, Lajpat Nagar-III, New Delhi-24	29841919
5	Shroffs Eye Bank	5027, Kedar Nath Road, Darya Ganj, New Delhi-02	011-43524444 9650300300
6	Guru Nanak Eye Centre	Maharaja Ranjit Singh Marg, Delhi-02	23234612, 23235145 23234622
7	Safdarjung Hospital Eye Bank	Aurobindo Marg, New Delhi-29	9868272292 26707217
8	Army Hospital Eye Bank	R.R. Centre, Subroto Park N. Delhi	011-23338181 011-23338187 01123338440
9	Eye Bank at Guru Govind Singh Institute of Eye Research & Cure Centre	31, Defanse Enclave, Vikas Marg New Delhi-92	22542325 9810155682
10	Centre for sight	Preet Vihar Delhi-92	22042226 8468004687
11	Eye Bank at Sunder Lal Jain Hospital	B 1/5, Phase-3, Sawan Park Ashok Vihar N. Delhi-52	01147030900

The eye banks are also given the financial assistance for collection of tissues @ Rs. 1000/- per eye ball collected. During 2014-15 an amount of Rs. 27,67,500/- were utilized on this activity, some pending payment of previous year was also paid @ Rs. 750/- per eye ball.

Eye Donation Counselors were recruited in previous years through IDHSs, deployed in various Govt./Pvt. Eye Banks of Delhi and are helping in motivating the family members for eye donation of diseased.

Supply Of Ophthalmic Equipments

To strengthen the service component in Govt. Hospitals, funds have been made available to the IDHS West Distt., so that Govt. Hospital of the district may use them for procuring ophthalmic equipment to augment the ophthalmic services in the hospitals. For strengthen the service component in Vision Centre in Delhi Govt. Disp. Rs.8,00,000/- were allocated to 5 district health societies for procuring ophthalmic equipment to augment the ophthalmic services in the primary health care. South West district has procured the equipment and utilized the fund.

Grant-in-Aid to various IDHSs

Under the programme, some of components like grant-in-aid to NGOs for Cataract Surgery, "School Eye Screening Project", collection of Eye Balls, Salary to Eye Donation Counselors working in eye banks and Para Medical Ophthalmic Asstt in Vision Centers, procuring and maintenance of equipment for hospitals, opening and strengthening of vision centers and for IEC activity are being implemented at the level of District Health Societies and for this an amount of Rs.2,34,00,000/- was released to them during the year 2014-15 in addition to the unspent balance available with them.

Strenghthening Of Eye Department Of District Hospital

Non-recurring assistance of Rs. 20 lakhs were allocated and fund was provided to IDHS West District for procuring ophthalmic equipment as commodity assistance for strengthening of Eye Deptt. of Acharya Shree Bhikshu Hospital and is available with district.

Training of Eye Surgeons

The GOI is providing training to in service Eye Surgeons in identified institutes in following areas: - ECCE / IOL Implantation Surgery, Small Incision Cataract surgery, Phaco-emulsification, Low Vision Services, Glaucoma, Pediatric Ophthalmology, Indirect Ophthalmology & Laser Techniques, Vitreoretinal Surgery, Eye Banking & Corneal Transplantation Surgery etc. Delhi has been allotted 7 slots for training, (4 for Phaco & 2 for Medical Retina & Vitreo Retinal Surgery and 1 for SICS). The State has to nominate eye specialists for these training. A total of 06 Eye specialists were nominated to Govt. of India in the year 2014-15 for training and 4 of them have joined the training.

Vision Centres

GoI has been asking to open the Vision Centres in the facilities like Primary Health Centres or facilities equivalent to primary health centre. This year stress was again given to open the already approved 18 Vision Centres in Primary Health Care. The funding assistance for which was provided in previous years. All other IDHSs were asked to utilize the unspent balance with them. The fund was released to various IDHSs towards the salary of PMOAs and their services were utilized in the Vision Centres and also in the Eye Department of District hospitals. During this period 7 vision centers were functionalized out which 1is by NGO.

Status of Vision Centers up to 2014-15

Vision Centers approved in Delhi till 2014-15

S. No.	Distt	No of Vision Centre approved till 2014-15	Place identified in Delhi Govt. Dispensary	Equipment purchased	Manpower in position	VC Fully functional ↓
1	North East	1	Identified	0	0	0
2	Shahdara	1	Old Seemapuri	1	1	1

3	East	2	Mayur Vihar Ph III BankEnclave	2	2 partial	2 partial
4	Central	1	Run by NGO	1	1	1
5	New Delhi	1	Identified	0	0	0
6	North	2	-Jahangirpuri, -Identified	0	0	0
7	North West	1	Sawanpark	1	1	1
8	West	3	Nihal Vihar KamruddinNgr Sudarshan-Park	0	0	0
9	South West	2	Sector 14 Dwarka Pndwalakalan	2	0	0
10	South	2	Bersarai, Chhatarpur	2	2 partial	2 partial
11	South East	2	Batla House, Tajpur	0	0	0
	Total	**18**	**18**	**9**	**7**	**7**

Celebration of 29th National Fortnight on Eye Donation (29th NFED): 25.08.2014 to 08.09.2014:

There are about 0.12 million corneal blind persons in India and many other with visual impairment due to corneal disease. About 20,000 new cases are added every year in this pool. Majority of such blind persons are young and their sight can be restored only by a corneal transplantation. Presently about 45,000 to 50,000 eyes are collected every year by the Eye Banks working in Govt. NGO sector in various parts of India but there is still a backlog of corneal blind persons waiting for transplantation. In order to bridge this gap in demand and supply of corneal tissue and to further increase collection of cornea, a joint campaign of IEC was organized for eye donation during 28th National Fortnight on Eye Donation (NFED) with the help of eye banks functioning in Delhi State under the directive of GOI. The activities of NFED were organized by health centers, district level secondary hospitals, medical college hospitals, autonomous organization, NGO Hospitals and private partners during which the cause of eye donation was highlighted with intensified educational and motivational efforts to increase the collection of donor tissue and to create awareness among the general public about preventive aspect of corneal blindness. The main activity was held in eye banks, where eye banks faculty and staff of various eye banks of Delhi has organized the orientation sessions for the health staff of other departments in hospital and also of various linked hospitals about their role in eye donation being the first contact health staff with family members of deceased and how to counsel and motivate family members for donating the eyes of the deceased. Because the hospital staff, under the Hospital Cornea Retrieval Prog. (HCRP), is expected to inform death to the eye donation counselor if available in hospital or to the linked Eye Bank well in time and also motivate relatives of deceased for eye donation. The Eye Bank Staff will further motivate the relatives for eye donation and if they agree, tissue may be harvested. The felicitation of family members who have donated the eyes of their deceased members along with the recipient of cornea and their family members have been held in Eye banks, particularly notable were National Eye Bank Dr. R. P. Centre AIIMS, Guru Nanak Eye Centre, Shroff's Eye Center and others.

World Sight Day Campaign - 2014:

The World Sight Day (WSD) is being celebrated globally on second Thursday of October every year with different theme since 2000. During this period World Sight Day 2014 was celebrated on 10th Oct. 2014. The theme for WSD 2014 was 'Universal Eye Health' with call on action 'Early Detection of Diabetic Retinopathy (DR)'. The key intervention of WSD is to promote universal eye health coverage and reduce levels of avoidable blindness due to Catarct, Refractive Error and Corneal Bilndness & Diabetic Retinopathy etc. by 25% by 2019. Various approved IEC & Screening activities were successfully organized in Delhi State by State Unit of NPCB Delhi under State Health Society, Delhi through respective Integrated District Health Societies (IDHSs) of Delhi Districts for creating mass awareness for eye care & prevention of blindness and to improve Eye Care in Delhi. The activities were held at health center, hospitals and in schools. IEC material like display of banners, distribution of pamphlets, holding painting and poster making & slogan writing competition in schools were held and prizes were given to best performers. Health talks were organized for health staff, patients and visitors. The Group Discussions were held, documentary film show was also arranged in hospitals and health centers. Rallies by school students were held in surrounding area of school, Nukkad Nataks were also held. The IEC activities were under taken in health centers, hospital, AHA Units & health Centers. The children have participated in various activities held in Schools.

World Glaucoma Week Celebration - 08th to 14th March 2015:

The 7th World Glaucoma Week 08.03.2015 to 14.03.2015 was observed all over Delhi to create awareness amongst the public about prevention and control of Glaucoma and to emphasize the need for taking more initiatives with regard to Glaucoma. In order to celebrate 'World Glaucoma Day / Week' in a befitting manner all over Delhi under the directives of National Programme for Control of Blindness (GOI), a 'Glaucoma Detection, Control and Prevention Week' was observed from March 08th to 14th, 2015 across the city in in health centers, district level secondary hospitals, medical college hospitals, autonomous organization, NGO Hospitals and private partners during which the various activities concerning it was under taken in a week long period for creating awareness among masses. The screening camps were organized, IEC material was displayed and health talks were held during the period.

Motia Bind Mukti Abhiyan:

The Govt. of Delhi has organized 15th Phase of Motiabind Mukti Abhiyan (MMA) in March 2015. About 500 screening centers were set up all over Delhi in existing fixed health centers of various health agencies functioning in Delhi. Area specific Pulse Polio Coordinators were involved in this programme who visited the respective health centers for distribution of logistic material, programme related stationary and IEC material and collection of reports directly from the center In charges. About 40 referral hospitals from Govt. and Non-Govt. sector were identified under Motiabind Mukti Abhiyan, Phase-VX, These hospitals have performed cataract surgery and provided IOLs to patients. A list of the hospitals identified is attached.

List of Hospitals identified as base hospital under MMA Phase VX:

1) East Zone:

1. Guru Teg Bahadur Hospital, Dilshad Garden, Delhi-95.
2. Lal Bahadur Shastri Hospital, Mayur Vihar Ph-II, Khichripur, Delhi-91.
3. Swami Dayanand Hospital, Shahdara, Delhi-95.
4. Jag Pravesh Chand Hospital, Shastri Park Delhi-53.
5. Dr. Hedgewar Arogya Sansthan, Karkardooma, Delhi.

2) West Zone:

6. Deen Dayal Upadhyay Hospital, Hari Nagar, New Delhi-110064.
7. Vinayak Hospital, Gujranwala Town, Delhi-110009.
8. RTRM Hospital, Jaffar pur, Delhi-110073
9. Guru Govind Singh Govt. Hospital, Raghubir Nagar, Delhi110027.
10. Mahrishi Valmiki Hospital, Pooth Khurd, New Delhi-110039
11. Sardar Vallabh Bhai Patel Hospital, East Patel Nagar New Delhi-08.
12. Acharya Shree Bhikshu Hospital, Moti Nagar, Delhi-15.
13. Nayantara Eye Hospital, B-106,, Subhadra Colony, Delhi-35
14. Bhagwan Mahavir Hospital, Pitampura Delhi-34

3) North Zone:

15. Hindu Rao Hospital, Subzi Mandi-07.
16. SGM Hospital, Mangolpuri, Delhi-83.
17. Aruna Asaf Ali Hospital, Rajpur Road, Delhi-54.
18. Attar Sain Jain Hospital, Lawrence Road, Industrial Area.
19. Dr. Baba Ambedkar Hospital, Rohini, Delhi-85.
20. Shree Jeewan Hospital, 67/1 New Rohtak Road, New Delhi-05.
21. Sant Nirankari Charitable Hospital, Nirankari Colony, Delhi-110009
22. Chadha Medical & Social Welfare Society (Regd.), 339, Rajdhani Encl. Delhi.
23. Bhagwan Mahavir Hospital, H-4/5 Guru Harikishan Marg, Pitampura, Delhi -34.
24. ESI Hospital, Rohini, Sector-15, New Delhi-110085.
25. N.C. Joshi Hosp., East Park Road, Joshi Lane, Karol Bagh, N Delhi-5.
26. Satyawadi Raja Harishchnadra Hospital, Sector-A-7, Narela, Delhi

4) South Zone:

27. Banarsidas Chandiwala Eye Institute, Maa Anandmai Marg, Kalakaji, New Delhi-19.
28. Dr. R.P. Centre, AIIMS, Ansari Nagar, New Delhi-110029.
29. Charak Palika Hospital, Moti Bagh, New Delhi-110021.
30. Holy Family Hospital, Okhla Road, New Delhi
31. Safdarjang Hospital, Aurbindo Marg New Delhi-110029
32. Lala Aman Singh Charitable Eye Reasrch & medical Centre, Hauz Rani, Saket, New Delhi-17.
33. Kishwaran Charitable Eye & Medical Centre, Badarpur, New Delhi-44.
34. Pandit Madan Mohan Malviya Hospital, Malviya Nagar, New Delhi-17.

***5)* Central Zone:**

35. Guru Nanak Eye Centre, Maharaja Ranjit Singh Marg, New Delhi-02.
36. Dr. RML Hospital, New Delhi-01.
37. Smt. Sucheta Kriplani Hospital, Panchkuian Road, New Delhi-01.
38. Northern Railway Central Hosp, Basant Lane, Panchkuian Road, N.D.
39. Rajdhani Charitable Eye Hospital, Qutab Road Delhi-110006.

Chapter 10

HOSPITALS OF GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI

The hospitals are integral part of health care delivery system of any state. Hospitals are expected to be the partners and supporters of health care delivery system rather than limiting their role to medical care only. In the present scenario, the role of hospitals range from providing primary level medical care to hospital care (secondary/tertiary level).

The planning/ establishment of new hospitals is taken care of by Hospital Cell/ Planning Branch of the Directorate of Health Services. The broad functions of Hospital Cell involve planning and commissioning of hospitals which include site inspection, monitoring and coordination with different Govt./ semi Govt./ autonomous/ Pvt. Agencies etc. related to establishment of Hospitals. The financial aspect of these upcoming hospitals such as preparation of SFC Memo for cost estimates of hospital which include estimates of manpower, equipments and other vital components required for establishment of hospital are also being taken care of by Hospital Cell.

In the year 2006-07, there were fourteen hospitals functioning under Directorate of Health Services. Since December 2006, these hospitals have been declared as independent establishments with powers of head of the department delegated to the respective Medical Superintendent of these hospitals. Presently 39 hospitals are functioning independently under overall administrative control of Department of Health & Family Welfare.

The hospitals functioning under Department of Health & Family Welfare , Govt. of NCT of Delhi are as under :-

ALLOPATHIC SYSTEM OF MEDICINE

1. Acharyashree Bhikshu Govt. Hospital, Moti Nagar
2. Aruna Asaf Ali Govt. Hospital, Rajpur Road
3. Attar Sain Jain Hospital, Lawrence Road
4. Dr. Baba Saheb Ambedkar Hospital, Rohini
5. Babu Jagjivan Ram Memorial Hospital, Jahangir Puri
6. Bhagwan Mahavir Hospital, Pitampura
7. Central Jail Hospital,Tihar New Delhi
8. Chacha Nehru Bal Chiktisalaya,Geeta Colony
9. Deen Dayal Upadhyay Hospital, Hari Nagar
10. Deep Chand Bhandhu Hospital,Kokiwala Bagh, Ashok Vihar
11. Dr. Hedgewar Arogya Sansthan, Karkardooma
12. Dr. N.C.Joshi Memorial Hospital, Karol Bagh
13. GB Pant Hospital, Jawahar Lal Nehru Marg, New Delhi
14. Guru Gobind Singh Government Hospital, Raghubir Nagar
15. Guru Nanak Eye Centre, Maharaja Ranjeet Singh Marg
16. Guru Teg Bahadur Hospital, Shahdara
17. Health Centre cum Maternity Hospital Kanti Nagar
18. Jag Pravesh Chandra Hospital, Shastri Park
19. Janak Puri Super Speciality Hospital, Janak Puri
20. Lal Bahadur Shastri Hospital, Khichripur
21. Lok Nayak Hospital, Jawahar Lal Nehru Marg

22. Maharishi Valmiki Hospital, Pooth Khurd
23. Pt. Madan Mohan Malviya Hospital, Malviya Nagar
24. Sewa Kutir Hospital, Kingsway Camp (linked to AAAG hospital)
25. Rajiv Gandhi Super Speciality Hospital, Tahir Pur
26. Rao Tula Ram Memorial Hospital, Jaffarpur
27. Sanjay Gandhi Memorial Hospital, Mangol Puri
28. Sardar Vallabh Bhai Patel Hospital, Patel Nagar
29. Satyavadi Raja Harish Chander Hospital, Narela
30. Sri Dada Dev Matri Avum Shishu Chikitsalya, Nasir Pur
31. Sushruta Trauma Centre, Bela Road

HOMEOPATHIC SYSTEM OF MEDICINE

32. Nehru Homeopathic Medical College, Defence Colony

The hospitals functioning as autonomous bodies under the department are as under :

ALLOPATHIC SYSTEM OF MEDICINE

33. Delhi State Cancer Institute, GTBH Complex, Dilshad Garden
34. Institute of Human Behaviour & Allied Sciences, Dilshad Garden
35. Institute of Liver & Biliary Sciences, Vasant Kunj
36. Maulana Azad Institute of Dental Sciences, LNH-MAMC Complex

INDIAN SYSTEM OF MEDICINE AND HOMEOPATHY

37. A& U Tibbia College & Hospital, Karol Bagh
38. Chaudhary Braham Prakash Ayurvedic Charak Sansthan, Khera Dabar
39. Dr. B.R. Sur Homeopathic Medical College, Hospital & Research Centre,Nanak Pura, Moti Bagh

BRIEF DESCRIPTION OF HOSPITALS PERFORMANCE

1. ACHARYASHREE BHIKSHU GOVERNMENT HOSPITAL

This hospital situated in Moti Nagar in West Delhi is one of the 7 colony hospitals taken over by Delhi Government from MCD on 1.10.1996 for up gradation to a 100 bedded multispecialty hospital. This Colony Hospital at Moti Nagar is spread over 4.77 acres of Land. With the naming of the hospital after the Jain Muni Acharyshree Bhikshu on 15.01.2005, this Moti Nagar Colony Hospital is now known as Acharayashree Bhikshu Government Hospital. The hospital functioned with a sanctioned strength of 100 beds during the year.

After completion of the OPD block, OPD services from new OPD block were inaugurated by the Hon'ble Health Minister on 13.09.2003.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	81	334084	128870	49140	0	6942	1520	14561
2010-11	100	100	362776	214845	59091	0	7396	1874	9484
2011-12	100	80	440831	206779	79503	398	7813	2012	9360
2012-13	100	112	382709	216479	100793	0	7145	1683	8642

2013-14	100	134	403657	256858	120226	0	9187	2152	9502
2014-15	100	134	286738	209821	134812	4047	9708	2001	20060

Achievements during 2014-15 are as under:

1. Bed Strength increased upto 134 beds from 100 beds. This extra bed facility is being provided/ managed within existing infrastructure and staff strength. 150 beds and staff strength for 150 beds has been approved by A/R, file is under submission for notification of 150 bed strength and staff.
2. Solar water heating system has been installed over the roof top of hospital building.
3. E.T.P. has been installed in the hospital.
4. Proper signages have been installed including neon signages at roof top in four languages and in front of casualty.
5. Landscaping and plantation has improved the hospital look significantly.
6. Drinking water and toilet facilities have been augmented for patients and attendants in the wards and OPD.
7. Sitting and waiting areas for patients have been made outside the sample collection centre of pathology lab, OPD, IPD, OTs and Pharmacy.
8. Upgradation of conference room with PA system installation.
9. Doctor's duty room has been upgraded with attached washrooms and drinking water facilities.
10. Face lifting of hospital building and proper lighting in and around the hospital building has been provided.
11. The Pharmacy Counters have been increased from four to six (functional) and construction of pharmacy store is in progress.
12. Central U.P.S for whole hospital has been installed.
13. V.A.M. has been commissioned which will save electricity.
14. Blood Storage facility has been augmented by linking the hospital storage centre with Red Cross Society of India in addition to regional bank (DDU Hospital)
15. The ambulance service has been enhanced with the availability of CATS ambulances in hospital campus.
16. Renovation and construction of water cooler stands in the hospital has been done to eliminate the seepage in the hospital building.
17. White washing and minor repair work of basement, hospital building and boundary wall.
18. Generator Set has been put on auto start mode in case of non-supply of electricity.

2 ARUNA ASAF ALI GOVERNMENT HOSPITAL

Aruna Asaf Ali Govt. Hospital (Civil Hospital) is presently having three functional units. The main hospital complex is situated at 5, Rajpur Road with second functional unit at Subzi Mandi Mortuary. The hospital also manages services at Poor House Hospital at Sewa Kutir, Kingsway Camp, (a hospital under Social Welfare department). The main hospital complex is having 100 beds. At present, the hospital is providing services in the following specialties:

General Surgery, General Medicines, Paediatrics, Orthopedic Surgery, Gynecology and Dental

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	100	215251	135162	0	0	9077	1594	10216
2010-11	100	100	206267	133439	48274	6130	9115	2572	10072
2011-12	100	139	180695	114546	45093	2598	8907	2617	7640
2012-13	100	139	174816	139672	47706	2865	9179	2346	6566
2013-14	100	139	203368	129957	54208	3605	9545	2416	10094
2014-15	100	162	210215	136138	44524	4702	10564	2682	8581

3. ATTAR SAIN JAIN EYE & GENERAL HOSPITAL

This 30 bedded primary level eye & general hospital situated in Lawrence Road Industrial area of North West Delhi provides medical care to public. The hospital was taken over by Delhi Government on 16th June 1999.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	30	30	48807	19024	0	0	864	856	94
2010-11	30	30	65038	-	0	0	780	777	83
2011-12	30	30	69537	24816	0	0	827	818	-
2012-13	30	30	83741	34143	0	0	1074	1063	154
2013-14	30	30	94772	31811	0	0	1549	1516	250
2014-15	30	30	90148	34729	0	0	1887	1868	222

During the year 2014-15 other achievements are as under:

The number of major surgeries has increased by about 25% over last year. The hospital has completed the process of acquiring new photo-emulsification machine which will further augement the number of eye surgeries/operation being performed.

4. AYURVEDIC & UNANI TIBBIA COLLEGE & HOSPITAL

Ayurvedic & Unani Tibbia College & Hospital was re-established into the new building at Karol Bagh by Masih-Ul-Mulk Hakim Ajmal Khan Saheb. The foundation stone of the Institute was laid by H.E. Lord Hardinge (the then Viceroy of India) on 29th March, 1916. This Institution was inaugurated by Father of the Nation Mahatma Gandhi on 13th February 1921. Previously this college and allied units were managed by a board established under Tibbia College Act, 1952. This Act now has been repealed by a new Act known as Delhi Tibbia College (Take Over) Act, 1998 and enforced by the Govt. of NCT of Delhi w.e.f. 1st May, 1998.

The college is affiliated to the University of Delhi since 1973. It provides 4 ½ years regular course of study followed by one year internship leading to the award of the degree of Bachelor-of- Ayurvedic Medicine & Surgery (BAMS) and Bachelor of Unani Medicine & Surgery (BUMS). There are 28 Departments (14 Departments for each system) and a Hospital with 300 beds (functional) attached to the College to give practical training to the students.

The admission in BAMS & BUMS /M.D. (Ay) & M.D. (Unani) are dealt by Faculty of Ayurveda & Unani Medicines, University of Delhi. The Post Graduate Course (M.D) in the subject of Kriya Sharir & Kayachikitsa of Ayurved Medicine and in the subject of Moalejat of Unani Medicine have been started from Academic Session 2002 with intake capacity of 3 students in each discipline.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	300	150	13461	59574	0	0	0	0	0
2010-11	300	300	122951	69494	0	0	4402	156	3965
2011-12	300	300	112815	84102	0	0	0	0	0
2012-13	300	300	128095	100880			4555	134	5901
2013-14	300	300	173531	105231	0	0	5196	156	6864
2014-15	300	300	136272	99043	0	0	35023	142	5294

5. DR. BABA SAHEB AMBEDKAR HOSPITAL

Dr. Baba Saheb Ambedkar Hospital, Rohini is a 500-beded multi specialty hospital with provision of super specialties in future. This hospital is the biggest hospital in North-west Delhi catering to the population of around 10 lacs. This hospital was started in August 1999 under Directorate of Health services but is now working directly under Department of Health and Family Welfare, Govt. of NCT, Delhi since 01.08.2003. At present the hospital is having 540 functional beds.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	500	500	665902	295847	126863	6862	42067	8989	40843
2010-11	500	540	683801	29791	128990	11158	42253	8755	39055
2011-12	500	540	721825	321931	132990	12145	49453	10085	39222
2012-13	540	540	728875	318750	145577	15884	48630	8165	41179
2013-14	540	540	789972	227418	154732	14400	50772	8135	39896
2014-15	540	540	812354	305241	191409	16076	57675	7812	49704

During the year 2014-15 other achievements are as under:

1. Proposed establishment of Medical College attached to Dr. BSA Hospital.
   (a) Construction of temporary structure for Medical College is near completion.
   (b) Manpower required for initial starting of Medical college has been sanctioned.
   (c) Consent for affiliation obtained.
2. Pulmonology OPD started in May 2014.
3. Online OPD registration of patient has started this year.
4. Much more no. of neurosurgical cases were managed and operated this year and separate Neurosurgical ward was started after joining of Neuro Surgeon.
5. Independence Day (2014) was celebrated in hospital with
   (a) Week Long Blood Donation camp from 9th to 15 August 2014 with organization of six indoor & Six Outdoor Donation camp and 420 units of blood were collected.
   (b) Special plantation drive was launched in the hospital and will continue.
6. Under Swachh Bharat Abhiyaan massive cleanliness drive was launched in the hospital.

6. BABU JAGJIVAN RAM MEMORIAL HOSPITAL

This 100 bedded secondary level hospital situated in resettlement colony in Jahangirpuri in North West Delhi provides health care services in broad basic specialties. The hospital is providing OPD services, round the clock emergency and casualty services, labour room, Nursery and Indoor facility in all basic clinical specialities. Rogi Kalyan Samiti has been established in Babu Jagjivan Ram Hospital w.e.f. 04-06-2010. 50 new beds have been added raising the total no. of beds to 150 from 100. Facilite of the hospital is proposed and shall be carried out shortly and facility of ICU.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	100	435086	214074	0	5914	12931	3005	7443
2010-11	100	100	326943	198579	130879	14060	11568	2154	7495
2011-12	100	100	321792	195770	141587	15108	12583	1263	9207
2012-13	150	100	334271	207294	143479	15928	12694	902	6652
2013-14	150	100	335012	178786	178063	18854	13053	865	8169

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
2014-15	150	100	350322	238279	247521	17515	13224	956	9121

During the year 2014-15 other achievements are as under:

S, No.	Target/Description of work	Achievement
1.	Plan for expansion of additional 50 bed with existing structure	9 bed added and remaining in process
2	Plan for fill up the 113 posts of different categories staff	47 posts of different categories filled up, efforts are onto fill up the existing vacant post.
3	Water proofing treatment on the roof of ward no. 3 and Administrative Block corridor, BJRMH	Completed
4	Renovation of Toilet of Casualty and OPD Block, BJRMH	Completed
5	Provision of separate pipeline for ETP treated water for horticulture purpose and AC Plant, BJRMH	Completed
6	Provision of construction of shed for waiting room outside Gynea ward no.1 at BJRMH	Postponed due to technical reason as directed by higher authority.
7.	Repair of Gynae O.T Block, BJRMH	In process
8.	Construction of Boundary wall near Mortuary, BJRMH	In process
9.	Construction of Shed at the backyard of Nurses 'Hostel, BJRMH	Will be started soon
10.	Provision of Electrical wiring for light & fans, power points at OPD registration area, Lab & Ward No. 2 in BJRMH	Completed
11	Supply, installation, testing & commissioning of 50 LPH R.O. System (7 jobs) at BJRMH	In process
12.	Providing & Fixing Window type ACs (23 Nos,) in BJRMH	In process
13.	Providing for One Water Cooler with Purifier in Surgical Store	In process
14.	Augmentation of central AC Plant at BJRMH	Not yet started

7. BHAGWAN MAHAVIR HOSPITAL

This 200 bedded secondary level hospital is situated in Pitampura area of North West Delhi. The vision of the hospital is to provide quality health services in all the specialties in a harmonious atmosphere to every section of society especially the under privileged through this 200 bedded multi specialty hospital, whereby quality to be ensured by close monitoring, constant feedback from the people and regular CME's for the staff, well equipped library & yoga work outs.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	200	172	317766	179015	43493	4221	9845	1947	5158
2010-11	200	218	331009	189740	70631	1848	12264	2759	8426
2011-12	250	240	291501	219968	70560	1863	14544	3406	10452
2012-13	250	250	331042	218359	78640	3190	17823	3769	11971
2013-14	250	250	365870	154944	66953	4848	19550	4100	13303
2014-15	250	250	366614	265289	128738	4364	19665	4280	14560

During the year 2014-15 other achievements are as under:

1.Blood storage unit functional during the above said period.
2.Better service of IPD, provided by obstetrics & Gynae, paeds, Ortho and Surgery departments.

8. CENTRAL JAIL HOSPITAL

Central Jail Hospital located in Tihar Jail Complex provides the medical care to the inmates of Tihar Jail in New Delhi, which is one of the largest prison complexes in the world. The complex comprises of seven prisons in the Tihar Complex with sanction capacity of 4000 prisoners and accommodates over twelve thousand prisoners. The hospital is having 270 beds, 150 in main hospital and 120 in Deaddiction Centre (DAC). DAC is ISO 9001-2008 certified unit. The hospital has separate medical, surgical, tuberculosis and psychiatric wards. The hospital has an integrated counseling and testing Centre (ICTC) for HIV, functioning in Central Jail Hospital functioning since June 10, 2008, a DOTS Centre for Tuberculosis treatment and also a Dental unit. The hospital provides round the clock casualty services for the inmates. Pulse polio immunization programs are carried out regularly as per kept separately. Various NGO's also working with tihar prisons and contributing toward medical services.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	270	270	29391	250402	47233	0	4178	0	0
2010-11	270	270	27186	25654	41427	0	6767	0	06
2011-12	240	240	24010	218241	44789	0	5969	0	57
2012-13	240	240	28130	227868	36884	0	5049	10	49
2013-14	240	240	33316	248120	358	0	4193	0	235
2014-15	240	240	37291	240257	4683	0	6062	0	10

During the year 2014-15 Major achievements are as under:

1. Diabetic Camp at CJ-3 on 14.11.2014
2. Cardiac checkup Camp at Central Jail No. 3 on 18.12.2014 by Dr. Kalra Hospital.
3. Mental Health Unit formed for streamlining & effective delilvery of mental health services, Mental Health screening camp organized by team of psychiatrists to find out hidden cases in need of psychiatric support.
4. The prisoner suffering from various contagious diseases are kept separately.
5. Special diet for HIV/AIDS, Tubercular and other deserving inmates as per standing order.
6. 120 bedded Hospital with Medical, Surgical, Tuberculosis and Psychiatric wards and 80 Bedded de addictions centre (ISO certified).
7. Round the clock Emergency services in all jail along with M.I. Room.
8. Regular Health Checkup of inmates.
9. Training of Newly appointed doctors was conducted.
10. Training of Gumsum Panja volunteers was done.
11. Celebration of awareness about drugs abuse at CJ-3 with Narcotics Conuncil Bureau at DAC.

9. CHACHA NEHRU BAL CHIKITSALAYA

Chacha Nehru Bal Chikitsalaya, a 216 bedded hospital superspeciality pediatric hospital situated in Geeta Colony has been established to provide preventive & quality curative services to children up to age of 12 years. This is a teaching hospital affiliated to Maulana Azad Medical College. The hospital was established in the year 2003 in an area of 1.6 hectare. Besides providing medical facilities it is being developed as a, Post Graduate Teaching/ Training institute affiliated to Maulana Azad Medical College.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	216	216	134617	123166	46082	0	12161	2261	0
2010-11	216	216	124381	101764	59776	0	15152	2662	0
2011-12	216	216	120947	116743	55420	0	17123	2767	0
2012-13	216	216	115011	119049	63263	0	12650	2342	0
2013-14	216	216	116902	115477	54861	0	13205	2711	5833
2014-15	221	221	125790	113269	71000	0	13154	2575	0

During the year 2014-15- other achievements are as under:

1. CNBC has got its second reaccreditation from NABH w.e.f. February 15 valid till February 18.
2. CNBC has been empanelled with Prime Minister National Relief Fund as a children hospital.
3. CNBC got accreditation from National Neonatology Forum for level III, a Neonatal Intensive Care Unit.

10. CHAUDHARY BRAHM PRAKASH AYURVEDIC CHARAK SANSTHAN

Chaudhary Brahm Prakash Ayurvedic Charak Sansthan, an ayurvedic teaching institute with 210 bedded Hospital was established in 2009 in Khera Dabar in rural Najafagarh area for providing Ayurvedic treatment to the public. The Sansthan started the OPD in Dec. 2009 and IPD in June. 2010. This prestigious institute fully financed and controlled by the Health & Family Welfare Department, Govt. of Delhi, running as a society provides Ayurveda health services, education and research. Society named as “Ch. Brahm Prakash Ayurvedic Society” was formed in the year 2006 with Hon’ble Minister (H&FW) as Chairperson and Pr. Secretary (H&FW) as Vice-Chairperson, which was registered under Societies Registration Act, 1860. On the foundation day ceremony in the year 2007, the institute was renamed as “Chaudhary Brahm Prakash Ayurvedic Charak Sansthan” by the Honorable Chief Minister, Smt. Sheila Dixit, in the honor of first Chief Minister of Delhi, Late Shri Chaudhary Brahm; Prakashji. The name of the Sansthan was further modified vide two resolutions of the Governing Council of the Sansthan in the year 2008 and 2009 and now it is known as “Ch. Brahm Prakash Ayurved Charak Sansthan”.

The institute is spread over 95 Acres of Eco-friendly & Huge Campus with total built up area of 47,150 Sq. Mtr. and 4 stored building with basement in Hospital Complex. The foundation of this premier institute was laid in 2007 and within two years this Institute started functioning from its hospital unit in 2009. The institute has five Lecture theatres and 01 Seminar hall equipped with audio visual facility. Other amenities are separate boys and girls’ hostel, Doctors hostel, Central Library, Sports ground, Canteen and Housing complex.

The admission capacity of institute for Ayurvedacharya degree (graduate course -B.A.M.S.) is 100.The institute is affiliated to Guru Gobind

Singh Indraprastha University, recognized by Central Council of Indian Medicine and approved by Department of AYUSH, Govt. of India. The institute has 210-bedded hospital. Other amenities include hostels for students, quarters for staff and nurses and faculty residences.

The institute has fully equipped modern Operation Theatres, where minor surgeries are performed using the latest techniques and technology. Emergency Lab provides 24 hours services throughout the year, for all emergency investigations. The hospital has two panchakarma units one for male and another for female which are providing special ayurvedic treatment to the chronic patients of paralysis, joint

disorders, disc related ailments, migraine skin disorders like psoriasis, eczema, acne, chronic sinusitis etc. Kshar sutra Unit is providing specialty treatment to the patients of anorectal disorders like hemorrhoids, fistula & fissures. Leech application unit is providing specialty treatment to the patients of DVT, psoriasis, diabetic ulcers/foot, varicose ulcers etc. Ambulance facility with BLS and AC is available to transfer patients to other hospitals or meet any exigency/disaster situation.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	210	0	6768	4992	0	0	41	0	54
2010-11	210	210	54086	74348	0	0	2122	106	454
2011-12	210	210	100761	206442	0	0	15962	497	1466
2012-13	210	210	94824	200929	0	0	5903	459	1474
2013-14	210	210	97502	189283	0	0	6395	436	1716
2014-15	210	210	101466	166347	0	0	6162	42	2144

11. DEEN DAYAL UPADHYAY HOSPITAL

Deen Dayal Upadhyay Hospital, presently a 640 bedded hospital, was started in 1970 in Hari Nagar in West Delhi which was extended upto 500 Beds in 1987. Casualty services in the hospital was started in 1987 for day time only and with effect from April,1998 the services became functional round the clock. In 2008, trauma block was commissioned which increased the bed strength to 640; emergency services shifted to this new block with expanded emergency room and wards. This hospital is providing specialized services to people of West Delhi and imparting training to Post graduate and para-medicals students.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	640	640	570913	220112	239519	23564	61743	11906	4017
2010-11	640	640	494721	229776	274728	22078	54372	11640	3499
2011-12	640	640	506136	154290	278818	25709	53473	9568	6117
2012-13	640	640	532551	157584	287910	26035	58477	12688	3575
2013-14	640	640	562399	228710	-	-	64367	12845	3030
2014-15	640	640	641459	229245	317627	29942	57980	13457	34545

During the year 2014-15- other achievements are as under:

1. Beds increased in PICU/NICU.
2. Separate Paediatrics Emergency started .
3. Renovation of OPD & toilet Blocks done.
4. OST clinic started.

12. DEEP CHAND BHANDHU HOSPITAL

Chief Minister Sheila Dikshit, on Friday, inaugurated OPD services of 200-bed Deep Chand Bandhu hospital at Kokiwala Bagh, Ashok Vihar, in the presence of Union Communication Minister Kapil Sibal. Dikshit stated the hospital has been dedicated to late Deep Chand Bandhu, who represented Wazirpur constituency in the Legislative Assembly. Health Minister Ashok Kumar Walia, local MLA Jai Shankar Gupta and other eminent personalities were present on the occasion.

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2012-13	200	-	13722	5201	1	0	0	0	34
2013-14	200	-	176528	104503	971	0	0	0	228
2014-15	200	-	235983	99536	2743	223	0	0	816

During 2014-15 physical achievements are as under :

1.12-Hours emergency services and admission of patients in casualty ward with 18 beds from 8 am to 8 pm has been started along with 12 hour (8 to 8) coverage of path lab and x-rays.

2.Ten Special Clinics have been started in the afternoon (2-4 pm).

3.Tenders for all outsourcing services have been finalized except security services which is in process.

4.Facility Integrated ART Centre set up

13. DELHI STATE CANCER INSTITUTE

Delhi State Cancer Institute, a cancer hospital with 100 sanctioned beds is situated in UCMS-GTBH complex at Dilshad Garden in east Delhi. Delhi State Cancer Institute was approved by the Council of Ministers, Govt. of NCT of Delhi on 5th April 2006 for establishing as an autonomous institute under the Societies Registration Act. First phase facilities at this Institute with OPD services, chemotherapy and linear accelerator based radiotherapy facility were formally inaugurated by the Hon'ble Chief Minister of Delhi on the 26th August 2006. The Institute has been making consistent progress in all its activities ever since its establishment. One hundred bedded in-patients facility consisting of General Wards, Semi-Private Wards, Private Wards and Deluxe Suites have been commissioned during FY 2010-11 along with the existing thirty-two bedded day care set up. All facilities including medicines are provided free to all the patients. While the OPD and all support services for all the patients are available from 7.00 AM to 5.00 PM on all working days the emergency services are available on round-the-clock basis.

The hospital has the latest technology radiodiagnosis facilities with 128-slice CT scanner with RT Simulation, Digital X-ray, Digital Mammography, high-end ultrasound with breast elastography and RFA. All these equipments are on PACS and LAN for online reporting and access. Ultra-modern, fully automated Lab equipments for hematology, biochemistry, immunoassay and microbiology all connected through LAN for instant online reporting and access are available to provide necessary laboratory support.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	32	4642	113454	0	0	0	0	0
2010-11	100	95	7104	132239	479	0	1438	0	48
2011-12	100	95	9175	155044	1859	0	6776	36	538
2012-13	100	95	9693	174662	2528	0	7734	53	1071
2013-14	160	102	13617	216016	3381	0	8946	244	2443
2014-15	160	102	14911	248974	1673	0	10008	729	6113

The number of chemotherapy cases and radiation treatments over the past years has been as under:

Year	Chemotherapy cases	Radiation treatments
2006	5974	15369
2007	14278	42465
2008	17395	52116
2009	21356	64701
2010	23534	114893
2011	28521	131557
2011-12	28924	135034
2012-13	31765	162507
2013-14	36901	161639
2014-15	39242	206007

In addition 60107 patients were give day care supportive treatment during 2014-15.

During the year 2014-15 other achievements are as under :

1. Commissioning of Robotic Surgery system at DSCI (East).
2. Commissioning of Histopathology equipments at DSCI (East).
3. Commissioning of Immunohistochemistry for precision pathology diagnosis.
4. Commissioning of Flow Cytometry facility for precision pathology diagnosis.
5. Commissioning of Frozen Section System at DSCI (East).
6. Commissioning of ABG Analyzer at DSCI (East).
7. Commissioning of CSSD Equipments including Plasma Sterilizer at DSCI (East).
8. Commissioning of in-house Laundry services at DSCI (East).
9. Commissioning of digital mobile C-arm at DSCI (East).
10. Construction for installation of PET-CT & Gamma Camera equipments at DSCI (East).
11. Commencement of Intervientional Radiology Procedures at DSCI (East).
12. Ultrasoung unit with shear-wave elastography and contrast capability at DSCI (East).
13. Dedicated ultrasound facility for indoor patients at DSCI (East).
14. Setting up of Blood Bank Storage Services at DSCI (East).
15. Expansion of Dharamshala facility from 114 to 213 persons at DSCI (East).
16. Commissioning of Treatment Planning System at DSCI (East) & (West).
17. Commissing of ultrasound at DSCI (West).
18. Placement of orders of digital mammography with tomosynthesis at DSCI (Wast).
19. Placement of orders of First Liner Accelerator for DSCI (West).
20. Placement of orders of hospital beds for indoor facility for DSCI (West)

14. DR.B.R.SUR HOMEOPATHIC MEDICAL COLLEGE,HOSPITAL & RESEARCH CENTRE

Dr. B. R. Sur Homoeopathic Medical College, Hospital & Research Centre was established in November 1985 by Dr. B. R. Sur, who is a great philanthropist and a leading Homoeopath of Delhi. The hospital started functioning in the year 1986 with its diagnostic facilities like X-Ray, Ultrasound, ECG, Pathology Laboratory and Operation Theater facilities, though it was formally inaugurated by Shri Jagpravesh Chander as a full fledged 40 bedded hospital in 1987. This institution was donated to Govt. of NCT of Delhi on 1st October 1998. The medical college is having a 50 bedded attached hospital. This institution is situated in Nanak Pura, Moti Bagh, New Delhi and is built on a land measuring one acre and has 27,000 sq. ft. covered area on three floors. The institution is affiliated to Singh Indraprastha University imparting Bachelor in Homeopathic System of Medicine (BHMS) Degree Course of 5 ½ years

with an admission capacity of 50 students every year. There is a common entrance test conducted every year by Guru Gobind Singh Indraprastha University. The hospital runs special Sunday clinic for senior citizens.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	50	50	2663	41093	0	0	362	0	0
2010-11	50	50	27873	42766	0	0	434	0	0
2011-12	50	50	29132	40158	0	0	386	0	0
2012-13	50	50	25750	38272	0	0	357	0	0
2013-14	50	50	24290	32251	0	0	0	0	0
2014-15	50	50	25436	39251	0	0	428	0	0

During the year 2014-15 other achievements are as under:

1.Infrastructure :

(a)Display of signages.

(b)Installation of air purifiers in wards.

2.Academics :

(a)Purchase of equipments for various departments.

(b)Purchase of books for the library

3.Faculty:

(a)Requisition has been sent to the UPSE by Dte. of Ayush for the appointment of Lecturers/Assistant Professors/Professors on deputation.

(b)Advertisements have been made for the recruitment of Guest Faculty and Senior Residents.

(c) Creation of 04 posts of Lab. Attendants on outsource basis.

(d)Appointment of 01 Lab. Technician and 01 Staff Nurse.

4. Community Outreach :

(a) Health Camps are organized every Monday at Kusumpur, Pahari slum, Vasant Vihar by the Incharge Department of Community Medicine & students. Health Camps have been orgainzed in collaboration with NGO's

5. Extramural Research :

(a) The final report on the clinical trial of "Sub-clinical Autoimmune Thyroiditis" (conducted under the extramural scheme of the Deptt. of Ayush Govt. of India in collaboration with CCRH and Institute of nuclear medicine and Allied Science. DRDO Govt. of India) has been published in international peer reviewed Journal" Homeopathy"

6. Participation of students:

(a) Students participate in State and National Health Programme Such as Pulse Polio Immunization. Motiabind Mukti Abhiyan Mother & Child carepaign, Aarogya Mela, Perfect Health Mela etc.

15. DR. HEDGEWAR AROGYA SANSTHAN

This 200 bedded secondary level hospital in Trans Yamuna areas is located near the Karkardooma Courts and is surrounded by localities of Krishna Nagar, Kanti Nagar, and Arjun Nagar etc. The hospital is spread over 4.8 acres of land . The OPD services of the hospital in limited specialties were started in Nov. 2002 in the partially completed building. The Hospital at present is providing both IPD and OPD services with supporting Diagnostic services.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	200	200	377570	163196	20025	3461	0	3781	11581

2010-11	200	200	414658	178290	6544	3470	19700	3690	11578
2011-12	200	200	457061	206286	0	3678	17992	3236	11277
2012-13	200	200	530341	285486	107027	6016	20719	3564	9702
2013-14	200	200	521209	292959	105539	4454	22602	3465	8572
2014-15	200	200	287950	144274	124462	8104	16566	2837	7864

During the year 2014-15 other achievements are as under:

1.Upgradation of MRD Department.
2.Face lifting of hospital building and renovation of toilets.
3.Patient's waiting area is improved.Better facilities provided to patients in respect of sitting area.

16. DR. N.C.JOSHI MEMORIAL HOSPITAL

Dr.N.C. Joshi Memorial Hospital is a 30 bedded secondary level hospital located in midst of City in Karol Bagh in Central Delhi. The hospital was established in 1970 as an orthopedics hospital. The hospital services since then have been strengthened and upgraded upto the present level in phased manner. Dr. N.C. Joshi Hospital is mainly a specialized orthopedic hospital but now several general specialties like medicines, Eye, ENT, and Gynae etc. have been added to the existing orthopedic facilities.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	30	30	146059	0	0	0	208	780	0
2010-11	30	30	96786	0	0	0	0	0	0
2011-12	30	30	80776	104976	18	0	805	370	8891
2012-13	30	30	90167	113472	0	0	910	9216	416
2013-14	30	30	96856	108380	0	0	702	113	1884
2014-15	30	30	106676	78771	7546	0	661	364	1257

During the year 2014-15 other achievements are as under:

1.Upgradation of Hospital Beds from 30 to 60, started Emergency Services from 8 AM to 8 PM
2.Staff strengthening for 60 Beds General Hospital including 30 Bedded Maternity & Child Health Services with round the clock emergency Services
3.Completed 60 bedded infrastructure and services,man power file is in A.R. Deptt.

17. GOVIND BALLABH PANT HOSPITAL

The Foundation stone of Govind Ballabh Pant Hospital was laid in October 1961 and was commissioned by the Prime Minister late Pundit Jawaharlal Nehru on 30th April 1964. From a very humble beginning with 229 beds, indoor admissions of 590 patients and outdoor department (OPD) attendance of 8522 in 1964-65, the hospital has gradually expanded over the years. Now this is a 615 bedded hospital. The hospital is a nationally recognized tertiary care institution for cardiac, neurological and gastrointestinal disorders. It offers specialized medical and surgical treatment to about 5 lac patients in the OPD and almost 23,000 patients every year.

It is one of the reputed centers for post-doctoral teaching and training and recognized for many path

breaking researches. The Institution is recognized by Medical Council of India and University Grants Commission as an independent post graduate college affiliated to University of Delhi. The institution offers post-doctoral D.M. degrees in Cardiology, Neurology and Gastroenterology and M.Ch. degrees in Cardio thoracic Surgery, Neuro Surgery and Gastrointestinal Surgery. Students are also admitted in M.D. courses in the fields of Microbiology, Pathology, Psychiatry and Radio-Diagnosis - in association with Maulana Azad Medical College - a sister institution. In addition, many departments are recognized for Ph. D. courses.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	601	557	69871	433879	0	0	21193	3616	130
2010-11	615	615	68809	437994	0	0	22879	4020	87
2011-12	627	627	78281	457290	0	0	24554	4588	155
2012-13	691	691	89774	53289	9688	0	26845	4738	201
2013-14	691	681	96526	599686	14622	0	27177	4741	331
2014-15	714	714	99470	638732	10687	0	27565	4409	263

During the year 2014-15 other achievements are as under:

1. Connection Corridor between EDP Block and Old Block is going to be completed within a month.
2. Construction of Modular OTs for Liver Transplantation Program completed.
3. Training of various personnel for Liver transplantation program.
4. Procurement of various equipments for liver transplantation program.
5. Conferences, Symposiums & CME live workshops organize by All the Departments of the Hospital for update skills & Knowledge.
6. Golden Jubilee of the Hospital Commemorates special stamp released on the Hospital releases by President of India.
7. Successfully carried out liver Transplant.
8. Complex brain heart & gastro-liver surgeries successfully performed.
9. Large no. of acute heart attack patients treated round the clock by angioplasty as life saving procedure.

18. GURU GOBIND SINGH GOVT. HOSPITAL

Guru Gobind Singh Govt. Hospital is a 100-bedded hospital established in the resettlement colony of Raghubir Nagar, West Delhi under "Special Component plan" with a view to provide secondary level health care to low socio economic group of people of Raghubir Nagar and adjacent areas. The scheme was approved at an estimated cost of Rs.16.96 crores. Construction of the hospital building began in 1993 in a plot of land measuring approximately 14 acres. On completion of the OPD block, OPD services were commissioned on 30th Dec.1995. The hospital services have since been strengthened and upgraded to the current level in a phased manner.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	100	300465	199038	72216	409	0	2766	13934
2010-11	100	100	32597	8797	82008	1259	11069	3097	15744
2011-12	100	100	323100	225607	87535	1963	11503	3257	18049
2012-13	100	100	293917	231714	102066	2276	11300	1911	16577

2013-14	100	100	199743	273289	133891	-	16902	3038	15447
2014-15	100	100	197581	289496	146291	0	16737	3325	44956

During the year 2014-15 other achievements are as under:

- Severely Acute Malnourished Children SAM Cubicle : A Cubicle in Ward-I with three beds added for SAM children.
- Solar Lights : Solar lights installed in Hospital and campus area.
- Rain Water Harvestiong: One extra water reservoir is under completion to meet the water crisis.
- Extra Water Reservior : Rain Water Harvesting system installed in the hospital.
- Hospital Signages : Proper hospital signages installed.
- Training to 20 student Nurses of Action Balaji Hospital : 20 student Nurses from Dec., 2014 to Feb.14 were imparted training in Obs & Gyane. And Paeds.
- Condemnation of equipments : Condemnation of equipments /items processed and disposed off.
- Training to Trainee: Training to trainee, Lab Technicians, X-Ray technicians, OT Technicians from Outside institutions.
- Biometric Attendance System : Biometric attendance system launched w.e.f. 01 April 2014. All the staff is using the system which is being monitored.
- Regular Meetings: Regular meetings with all Incharges for monitoring of services and system. All the circulars, order etc. are sent through e-mail of all Inchages.
- Disability Camp: Disability camp organized alongwith Social Welfare Deptt. on 12th & 13th March, 2015.
- Fully functional HIMS system in Hospital.
- Quality Assurance process : Quality assurance process started.
- Swachch Bharat Abhiyan activites are continued.
- Motivation of Staff : Through cultural and other activities.

19. GURU NANAK EYE CENTRE

Guru Nanak Eye Centre was conceived in 1971 with a view to provide best eye Centre to residents of Delhi. The name of institution was adopted as GNEC with a view to maintain the teaching of Guru Nanak & initial support was provided by Gurudawara Prabanthak Committee Delhi. The Outpatient Department block started functioning in 1977 and the Indoor Patients were kept in eye ward of LNJP hospital. GNEC became administratively independent on 14th March 1986 with complete indoor facility. 184 bedded hospitals started functionally in small building.

Guru Nanak Eye Centre, presently a 212 bedded eye hospital is part of MAMC-LNH-GBPH-GNEC complex. The hospital is attached to Maulana Azad Medical College. The Eye Centre, each year, imparts comprehensive training in Ophthalmology to post-graduates and undergraduates (as part of MBBS course) of Maulana Azad Medical College. The postgraduate training includes clinical, research and other academic activities. Besides, the centre also trains faculty members from other institutions coming for specialized training. A number of ophthalmologists are trained under national programme for prevention of Cataract blindness and the centre gets a number of observers from all over the country and visitors from different parts of the world.

It provides comprehensive eye health care services to the public. The Eye Centre started functioning independently in 1985. The various services provided by the Centre includes OPD services, indoor services, operation theatre (24 hours) facilities, emergency services (24 hours), Speciality clinics, Eye Banks, Community eye services through peripheral health center at Narela, Delhi and by being a referral center of the Motia- Mukti-Bind Abhiyan Programme of Government of NCT of Delhi.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	212	212	92029	105853	4368	205	11142	10610	31655
2010-11	212	212	94142	108451	2982	1259	11303	10820	1692

2011-12	212	212	107159	121075	4123	215	13782	12295	1823
2012-13	212	212	98862	120326	5225	249	15274	12333	2549
2013-14	212	212	116117	127014	6330	259	14518	11916	1320
2014-15	212	212	126473	108497	6287	209	0	8101	0

During the year 2014-15 other achievements are as under:

OT has been renovated and commissioned.

20. GURU TEG BAHADUR HOSPITAL

Guru Teg Bahadur Hospital is the prestigious and largest Hospital situated in Dilshad Garden area of Trans-Yamuna (East Delhi) with 957 sanctioned beds. The hospital started functioning in 1985 with 350 beds. The hospital is tertiary care teaching hospital associated with University College of Medical Science. The hospital serves as a training center for undergraduate and post-graduate medical students. The hospital also runs 3½ Years Diploma in Nursing and Midwifery course in its School of Nursing. The hospital provides round the clock emergency service in common clinical disciplines including neurosurgery facilities for road side accident and other trauma victims, burn care facilities, thalassemia day care center, CT-Scan, Hemo-dialysis and Peritoneal dialysis besides OPD/IPD services in broad basic specialties.

G.T.B. Hospital runs a fully equipped regional blood bank center which apart from fulfilling the needs of this area as a blood bank also has facilities for providing various fractionated blood components.OPD and IPD registration, Blood Sample collection centers, Admission and Enquiry, Lab investigation services and Medical Record Data have already been computerized and integrated through LAN.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	957	1027	791249	706102	215253	11096	75270	16987	40714
2010-11	957	1185	786755	520297	229894	11056	78065	16964	41169
2011-12	957	1196	891995	706984	242134	17392	77838	17796	48852
2012-13	957	1196	716249	493920	244372	15688	65393	17815	59599
2013-14	1512	1456	862800	585807	267075	161513	77813	19243	53811
2014-15	1512	1456	1021247	632445	154533	23180	81439	18664	50582

During the year 2014-15 other achievements are as under:

1.Department of Bio Chemistry had procured fully automated high throughput analyser and chemiluminecence based immune SA analyser.

2. Blood bank has created luco reduced blood component (RCC and platelets) Red cell anti body csreening in blood doners held and annual blood donation camp in GTB Campus in the month 2014.

3. Department of Gynaenocology created a separate room for low risk patients as LR 1,A separate Obstetrics intensive care unit has been made functional and srarted one stop centre and CRPI with 23 beds on 24.9.2014. One stop centre for sexual assult survivors as per government guide lines operationalised.

4.DEM centre and DEM OPD started on 19.8.2014 and 5.4.2014 respectively.Private ward 2nd floor started on 13.8.2014..

21. HEALTH CENTER CUM MATERNITY HOSPITAL, KANTINAGAR

Health center cum maternity hospital a 30 bedded Hospital was established in 2008 and is situated in Kanti Nagar, Delhi thickly populated area of East Delhi for providing maternity services to the residents. Daytime Casualty and Minor OT services were started in May 2010 and observation facilities was made functional during the year.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	30	0	28349	18833	0	0	0	0	0
2010-11	30	10	31669	17899	0	0	256	0	34
2011-12	30	10	33228	20648	0	0	709	0	108
2012-13	30	16	35977	19325	0	0	664	0	56
2013-14	30	16	33013	17017	0	0	947	0	57
2014-15	30	15	32529	16058	0	0	1019	0	0

22. INSTITUTE OF HUMAN BEHAVIOR AND ALLIED SCIENCE

The Hospital for Mental Diseases (HMD), Shahdara, was established in 1966 in the eastern outskirts of Delhi across the Yamuna River at a time when custodial care of mentally ill was order of the day. During this era, the society had lost hopes for recovery of such patients and kept them far away. It was a virtual dumping ground for society's unwanted people. There used to be inadequate facilities, paucity of trained staff and often ill-treatment to patients. The hospital was converted into a multidisciplinary institute under the Societies Act and registered as a Society by Supreme Court order in response to public interest litigation. Since its inception in 1993, it has served as a good example of how judicial intervention can bring about changes for the benefit of the patients. At present, it is functioning as an autonomous body with support from Central and Delhi Governments for its maintenance and developmental activities.

Institute of Human Behaviour & Allied Sciences (IHBAS) is a tertiary level Medical Institute deals in patient care, teaching and research activities in the field of Psychiatry and neurological sciences. The Institute is an autonomous body registered under the Societies Act 1860, funded jointly by Ministry of Health and Family Welfare, Government of India and Government of NCT of Delhi. As an autonomous body, the institute has its Memorandum of Association and Rules and Regulations duly approved under the Societies Act. Minister for Health, Govt. of NCT of Delhi is the President and Chief Secretary, Govt. of NCT of Delhi is the Chairman of the Executive Council of the institute. This institute has hospital with 500 sanctioned beds with 336 functioning beds. The nature of the institute has been outlined as modern, state of the art tertiary care center and post graduate teaching training institute for behavioural, neurology and allied sciences. The institute aims at integrating psychiatry as specialty with other disciplines related to human 172ehavior by providing comprehensive treatment programmes.

The hospital has Standing Medical Board for issuance of disability certificate under Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 Act for mental illness/disorders and Neurological disorders/Cerebral Palsy etc..

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	334	334	47964	269503	15013	0	3208	88	65
2010-11	500	336	52457	286595	18396	0	3562	78	81
2011-12	500	336	56672	314813	20338	0	3344	109	44
2012-13	500	336	63116	340143	2525	0	3395	122	51
2013-14	500	346	65971	336244	2745	0	3549	161	31
2014-15	500	346	67957	368331	33827	0	3851	168	81

During the year 2014-15 other achievements are as under:

1. Role in formulating the National Disaster Management Guidelines.
2. Resource Centre for Tobacco Control (RCTC).
3. Identified Centre of excellence in the field of Mental Health.
4. Community servies; Providing technical expertise and specialist medical intervention for reform of government run home for mentally retarded (Asha Kiran).
5. A referral centre for viral load under NACO.

23. INSTITUTE OF LIVER & BILIARY SCIENCES

The Institute of Liver and Biliary Sciences (ILBS) has been established by the Government of the National Capital Territory (NCT) of Delhi as an Autonomous Institute, under the Societies Registration Act – 1860, at New Delhi. ILBS has been given the status of Deemed University by the University Grants Commission (UGC). The institute with 180 sanctioned beds is situated at D-1 Vasant Kunj, New Delhi. The foundation stone of ILBS was laid in 2003. The first phase of ILBS was completed in 2009. The hospital was started functioning in the year 2009 for providing special treatment of liver related problem with latest medical facilities. The formal inauguration of the hospital took place on January 14, 2010 by the Chief Minister of Delhi, Mrs. Sheila Dixit. ILBS envisions becoming an international Centre of excellence for the prevention and cure, advance competency-based training and cutting edge research in liver, biliary and allied sciences.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	180	86	3208	4526	282	01	1104	67	07
2010-11	180	100	7173	12671	1800	06	3163	227	04
2011-12	180	118	10430	20656	2808	8	3737	382	22
2012-13	180	122	17434	30427	4210	12	4365	564	124
2013-14	180	143	21840	40425	5811	18	5435	797	240
2014-15	180	142	28795	47001	6980	17	5458	936	295

24. JAG PARVESH CHANDRA HOSPITAL

The hospital is situated in Shastri Park area of North East District of Delhi covering about a million population residing in Ghonda, Seelampur, Yamuna Vihar and Babarpur Assembly constituencies of Trans Yamuna Area. This hospital provides secondary health care services to the people of the above Assembly Constituencies and adjoining areas in addition to primary health care services, laboratory services, MCH, Family Welfare services and other emergency services. Keeping in view of the above objective O.P.D. services at 200 bedded Shastri Park Hospital under Directorate of Health Services, Govt.

of Delhi were inaugurated by Hon'ble Health Minister on 3rd Oct. 2003 through a part of OPD Block which was still under construction. Complete OPD block was handed over by PWD during 2nd quarter of 2005. At present the hospital is functioning with full 200 beds.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	200	200	53237	107241	24168	1638	9075	602	2552
2010-11	200	200	445080	146706	80301	1230	10384	1770	2839
2011-12	200	200	409191	199316	80887	2960	11547	2354	7754
2012-13	200	200	420233	218612	76977	5212	12255	2090	8135
2013-14	200	210	390872	138690	103919	14466	12338	2123	10696
2014-15	210	135	497771	246756	150844	5847	13416	442	11469

During the year 2014-15 other achievements are as under:

1.No waiting list for any major/minor surgery in eye department.

25. JANAK PURI SUPER SPECIALTY HOSPITAL

Janak Puri Super Speciality Hospital, with 300 sanctioned beds is situated in Janakpuri West Delhi, under Govt. of N.C.T. of Delhi with a view to provide Super Speciality level health care to people of west Delhi. The Hospital has been constructed on a plot with an area of 8.82 acre. The Hospital started the services of OPD from 18th Sept.' 2008. At present the OPD and supportive services of Laboratory, Radiology, Speech therapy, Occupational and Physiotherapy are operational. Out of the total 49 posts of SRs in the hospital, 16 posts have been temporarily transferred to RTRM Hospitals during the year.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	300	0	12274	20866	0	0	0	0	0
2010-11	300	0	18796	36252	0	0	0	0	0
2011-12	300	0	24103	47149	0	0	0	0	0
2012-13	300	0	31579	65754	0	0	0	0	0
2013-14	300	0	28711	71731	0	0	0	0	0
2014-15	300	26	35281	96829	0	0	560	0	0

During the year 2014-15 other achievements are as under:

-commencement of Indoor Services with 26 beds
-Establishment of Hitech Equipment in Laboratary Services
-Requirement of Ministerial Staff, Resident doctors
-Completioin of E-tendering for out sourcing Service.

26. LAL BAHADUR SHASTRI HOSPITAL

This secondary level 100 Bedded General Hospital is situated in Khichdipur area of East Delhi in a resettlement Colony. The hospital campus is spread over 10.11 Acres of land. The OPDs services of the hospital in limited specialties were started in December 1991 in the partially completed building. The hospital services since then have been strengthened and upgraded up-to the present level in phased manner. The hospital has Medical Board for issuance of disability certificate under Persons with

Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 Act.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	100	529184	215424	0	11648	18775	2534	23845
2010-11	100	114	675418	136133	164395	14165	17325	3240	22109
2011-12	100	114	402215	183044	179124	18737	18296	4414	38257
2012-13	100	114	421977	207376	205205	16741	20273	3294	33898
2013-14	100	114	476738	216389	239948	21648	20796	7906	41728
2014-15	100	114	474357	249124	384125	24998	22831	3264	46529

During 2014-15 major achievements are as under :

- Decongestion and Renovation of existing OPD Block (Still work in progress).
- Renovation and Re-allocation of Eye and ENT OPD from the existing OPD Block to a New Wing (Old Block).
- Shifting & Re-allocatioin of Lab Block to Blood Bank Block.
- Renovation of Physiotherapy and making it more patient friendly.
- Installation of Bio metric Attendance system.
- Separation of Anti Rabies Clinic on 03.01.2015 from Medical OPD to a separate wing with dedicated staff and injection room.
- Gyane Casualty on 08.08.2014 separated from crowded and congested labour Room to adjoining area with dedicated separate staff.
- LBS Hospital is designated as one of the Model hospital for MCH services in Delhi by Mission Director (NRHM). Mission is planning to strengthen the hospital in view of heave obstetrics case load
- LBS hospital is designated as referral hospital for obstetrics cases from Maternity Centre Khichripur and Patparganj, Delhi.
- Obs & Gyane Department of LBS Hospital has been felicitated for providing quality family planning services for last three years consecutively by DFW for outstanding achievement in PPIUCD. Last year the Hospital was given a plaque by DFW for achieving millennium development goals (MDG) 4 & 5 for quality family planning services.
- Starting of Psychiatry OPD.
- Creation of Isolation Ward with Screening Facility for Swine Flu Patients.
- The Hospital is having Rain Water Harvesting Facility, Effluent Treatment Plant, Biomedical Waste Management and is getting 10% rebate in water bill due to Rain Water Harvesting.
- The Hospital is having Fire Clearance Certificate and Labour Licence and full DPCC compliance.
- Successfully tendered for housekeeping services in June, 2014
- Installatiion of 750 KVA Generatior set is in progress and is likely to be completed in 15 days time.Construction of One Stop Centre is in progress and is likely to be completed in 10 days time.

27. LOK NAYAK HOSPITAL

Lord Irwin laid down the foundation stone of this old hospital that was set up in Central Jail complex, named for the bulwark of British Vice regality - Lord Irwin on 10 January 1930. It was in 1936 that under Lt. Col. Cruickshank, I.M.S., and this Lok Nayak Hospital was commissioned 'Irwin Hospital' with bed strength of 320. In November 1977 the name of Irwin Hospital was changed to LNJP Hospital . Lok Nayak Hospital christened in 1989 from Lok Nayak Jai Prakash Narayan Hospital (LNJP) was originally popular and still continues to be known as Irwin Hospital.

Lok Nayak Hospital is a premier public hospital under Govt. of NCT of Delhi with present bed strength of 1821. During these 6 decades of its existence this hospital has grown enormously in its size and volume so as to cope with the growing needs of the ever-increasing population of this capital city. New State of out OPD, emergency block and indoor word are being constructed some of the builds one already made operational and others are coming up including ortho indoor block. The catchments area of this Hospital includes the most thickly populated old Delhi areas including Jama Masjid and Trans Yamuna Area. Patients attending this hospital from the neighbouring states and other parts of the city have increased manifolds. The hospital provides the general medical care encompassing all the departments like Medicine, Surgery, Obstt. & Gynae, Paediatrics, Burns & Plastic etc. It also provides specialized services like Dialysis, Lithotripsy, Respiratory Care, Plastic Surgery and others. New Department of Pulmonary Medicine is being setup. The hospital also provides the tertiary care connected with the National Programmes including mainly family welfare & maternity and child health care.

The hospital is tertiary level teaching hospital attached to Maulana Azad Medical College, providing clinical training facilities to under graduate and post graduate students.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	1597	1757	590259	351115	191640	10798	78488	12907	19461
2010-11	1774	1774	8946700	219149	9522	83079	13715	25371	
2011-12	1774	1811	531608	393871	224543	10078	89360	17466	29322
2012-13	1839	1816	571439	392202	259746	8387	91909	13758	23973
2013-14	1847	1882	538460	407622	248564	9990	93097	15012	23377
2014-15	1847	1847	625323	447843	292342	13245	108508	13912	24133

During 2014-15 other achievements are as under :

1. The building of new OPD block has been functional since 14th july-2014. It is one of the initiations for the new era of Lok Nayak Hospital which has been chosen to be a model hospital of Delhi Govt.

2. A new spacious ART Centre for HIV patients havs been made functional.

3. A large number of waiting halls with basic amenities for relatives / attendants of patients have been constructed.

4. Lok Nayak Hospital issued first free copy of Birth & Death certificate & launch of issuance of 1st free copy of Birth & Death certificate from Lok Nayak Hospital was done by Shri S.K. Srivastava Chief Secretary GNCTD on 13th June 2014.This has been a huge step on making it convenient for public to get Birth & Death Certificate.

5. I.T. Department has successfully completed the installation process of 14 biometric machines in LNH for attendance monitoring of employees.

6. Extended departmentof OBS & Gyane. is IVF and Reproductive Biology Centre. This Centre is working as outstanding deptt. with very high success rate as compared to global success rate.

7. 22 beds have been added to medicine emergency considering a heavy rush of patients.

8. Inforamtion centre / helpdesk for senior citizens at the entrance of hospital are operational.

9. Main Kitchen and dietry Deptt. for indoor patients is under renovation.

10. Account Branch under renovation.

11.OPD

Smooth and efficient functioning of a huge annual OPD of approx. 10 lacs patients, maintain punctuality and discipline of OPD staff.

Screening and Educational Programme for awareness of diabetic patients and general public being run in screening OPD of hospital.

12.MRD

Lok Nayak Hospital is desigenated sentinel surveillance Hospital for Dengue & VBD disease reporting and coordination with nodal officer of differents department and transmission of data and report to MCD is been done in 2014.1526 patients were reported to be screened for dengue and 156 were found positive.

Birth and death certificate is being printed in front of parent / next of keen and issued to them there and then to make it convenience for the stake holders.

MRD provide all data for implementing of all programs under National Rural Health mission, providing data for state health intelligence Bureau, integrated disease surveillance programme, reporting of communicable and non-communicable disease / generating morbidity and mortality stats.

28. MAHARISHI VALMIKI HOSPITAL

This 150 Bedded secondary level hospital situated in rural area of North West Delhi provides services in broad basic specialities.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	150	150	209109	99966	49933	3848	10707	1591	5117
2010-11	150	150	271288	67661	83799	5322	10665	1404	4718
2011-12	150	150	257045	65786	92142	5705	9179	1284	5510
2012-13	150	150	270077	56134	99114	4852	8619	1278	5894
2013-14	150	150	276024	76386	87170	5748	9298	985	6406
2014-15	150	150	237906	72453	85922	0	8832	1092	7085

During 2014-15 other achievements are as under :

1. Work of new hospital block (maternity & child Wing) for another 100 bedded is on full swing and is expected to be completed soon.
2. Starting of Blood Bank is in progress.
3. NRHM schemes like JSSK, JSY, Sterilization, IYCF, NRC, MTP, IUCD etc. are running smoothly.
4. Blood C/S, Urine C/S services started.
5. Thyroid function test started

29. MAULANA AZAD INSTITUTE OF DENTAL SCIENCES

Maulana Azad Dental Institute of Dental Sciences is located within the Maulana Azad Medical College – Lok Nayak Hospital Campus situated near Delhi Gate. The institute has 10 bedded hospital. The College and Hospital made its inception as a "Dental Wing" in 1983. Two decades later, on 26th September 2003, Dental Wing was upgraded to its present status of a full-fledged Dental College and Hospital. The institute is a Centre for technical education in the field of dentistry, conducts professional research and provides basic as well as specialized dental health care services to the patients. Bachelor of Dental Surgery (BDS) is a four years graduate programme offered at the institute with admission capacity of 20 students in BDS. The colleges is affiliated with University of Delhi.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	10	10	249374	102332	528	0	0	64	1527
2010-11	10	10	107101	111838	0	0	142	127	849
2011-12	10	10	114018	172649	60	20	202	188	1733
2012-13	8	8	159929	122211	0	0	161	144	2491
2013-14	10	10	126983	147576	0	0	121	124	2009
2014-15	10	10	178898	155909	0	0	136	121	1650

During the year 2014-15 following are the major achievements:

1. MAIDS played a Major role in setting a guiness world record for "Maximum number of dental check-ups done in one day (more than 5600 patients)" on 13th November 2014 at Yamuna sports complex, patparganj. The event was organized by Shri Guptisagar Dharam Jain trust, India along with MAIDS and Indian Dental Association, North East, Delhi.
2. Director-Prinicipal, Prof. (Dr.) Mahesh Verma was confirmed with Prestigious award "padma Shri".
3. During 2014-15, MAIDS provided Dental treatment to 3,34,807 Dental Patiens in OPD. It also conducted 1650 Minor and 121 Major Dental Surgeries. It admitted 136 Indoor patients.
4. During 2014-15, 29,856 IOP A and 4149 OPG X-Rays were done.
5. The present building of MAIDS is not sufficient to meet even day to day requirements. Thererfore, a Second Phase Building shall be constructed on the existing land adjacent to the exisiting Building MAIDS has obtained A/A & E/S of the competent Authority for incurring an expenditure of Rs. 64.88 Crores for ' Construction of 2nd Phase Building of MAIDS for its expansion" as per recommendations / approval of Expenditure Finance Committee (EFC) in its 4th Meeting for the year 2013-14 held on 11th September, 2013. The work has already been started during 2014-15.
7. Under the NRHM Programme, MAIDS has got 06 "Mobile Dental Clinics" with all necessary equipments and minor treatment facilities like Dental Chairs, X-Ray units etc. to serve the Dental Patients in various parts of Delhi and work under Community Dentistry Department.
7. The "Continuing Dental Education Department' is being setup in MAIDS which shall have 31 Simulators besides other latest Dental and Audio-Visual equipments. This work is being carried out by DSIIDC. The work has started and shall be completed by soon.
8. Machinery & Equipments worth Rs. 1,20,20,817/- and all types Consumable worth Rs. 1,64,17,227/- were purchased during 2014-15.

30. NEHRU HOMEOPATHIC MEDICAL COLLEGE AND HOSPITAL

Nehru Homoeopathic Medical College and Hospital is one of the premier and reputed Homoeopathic Colleges of India and is located in B-Block of Defence Colony in South Delhi. This college has a 100 bedded hospital. The institution was founded by Padam Bhushan Awardee late Dr. Yudhvir Singh, a great freedom fighter, social worker and pioneer Homoeopath of India. The foundation stone of the college building was laid by Dr. Sushila Nayyar, Hon'ble Minister of Health and Family Welfare on August 22, 1963. The O.P.D. Wing was inaugurated by the Hon'ble Prime Minister, late Shri Lal Bahadur Shastri on May 6, 1964. Classes in the college were started from 1967 for Diploma in Homeopathic Medicine and Surgery (DHMS) Course, upgraded to Bachelor in Homeopathic System of Medicine and Surgery(BHMS) Course under Board of Homoeopathic System of Medicine. On September 1, 1972 this institution was handed over by Dr. Yudhvir Singh Charitable Trust to Delhi Administration.

The college affiliated to Delhi University in 1992 and the college imparts 5½ year of course in Bachelor of Homoeopathic System of Medicine and Surgery. The admission capacity of 50 students per year.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	100	81698	105051	0	0	0	0	0
2010-11	100	100	79997	98708	0	0	1412	0	176
2011-12	100	100	79869	109632	0	0	1390	0	0
2012-13	100	100	79777	109279	0	0	1087	0	0
2013-14	100	100	77984	103280	0	0	1494	0	366
2014-15	100	100	80057	105211	0	0	1018	0	394

During the year 2014-15 following are the major achievements:

Purchase of Semi-Auto Bio-chemistry Analyzer Machine for OPD Lab.
Bio Metric Maachine installed.
NOC regarding fire Safety obtained.
Sanction issued for CCTV camera.

31. PT. MADAN MOHAN MALVIYA HOSPITAL

Pt. Madan Mohan Malviya Hospital is 100 bedded designated district hospitals for south district. The hospital was amongst 7 hospitals handed over to Delhi Government by MCD and was taken over from MCD in 1998 and. The hospital is spread over 3.08 acres of land.

The brief performance statistics of the hospital from 2009-10 to 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	92	410046	158512	98994	NA	5317	821	6189
2010-11	100	92	303560	149550	63851	--	2717	433	9460
2011-12	100	100	247425	92776	97578	NA	7557	1288	7665
2012-13	100	100	272225	104963	150048	0	11971	1532	13044
2013-14	100	100	293016	187956	161711	0	14639	1353	14735
2014-15	100	100	303360	188787	215302	0	15427	1809	12815

During the year 2014-15 following are the major achievements:

1. X-Ray Department strengthened through installation of 300 mA X-ray machine.
2. Strengthening of Opthalmalogy Department.
3. Strengthening of Security of hospital.
4. Sitting arrangement for patients and their attendents strengthened.

32. RAJIV GANDHI SUPER SPECIALITY HOSPITAL

Rajiv Gandhi Super Speciality hospital with sanctioned 650 beds is being established in Tahirpur North East Delhi, with a view to provide Super Speciality health care to people of North East Delhi and Trans Yamuna area with an approximate population of 50 Lacs. The hospital has been constructed in area of 13.00 acre. The Hospital started the services of OPD from 11th Sept. 2008. At present the OPD and supportive services of Laboratory, Radiology, Screening of Cardiology, Echo, etc. are available.

The brief performance statistics of the hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	650	0	27211	30027	0	0	0	0	0
2010-11	650	0	28128	26814	0	0	0	0	0
2011-12	650	0	32291	31688	0	0	0	0	0
2012-13	650	0	32910	32397	0	0	0	0	0
2013-14	650	0	8188	23748	0	0	0	0	0
2014-15	650	0	13748	24345	0	0	0	0	0

During the year 2014-15 following are the major achievements:

30 beds dialysis centre.

33. RAO TULA RAM MEMORIAL HOSPITAL

Rao Tula Ram Memorial Hospital is situated in Jaffar Pur in the rural area of South West district of Delhi. The hospital campus is spread over 20 acres of land. The hospital is located adjacent to ITI , very close to Police Station.

The OPD Services of the hospital in limited specialties were started in August 1989 in the partially completed building. The hospital services since then have been strengthened and upgraded up-to the present level in phased manner.

The brief performance statistics of the hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	100	100	257490	127587	47543	5143	7028	870	1665
2010-11	100	113	252581	132071	50453	4742	7714	1304	2651
2011-12	100	114	268969	104444	63792	5701	10486	1585	2475
2012-13	100	114	273984	112253	73014	6037	10369	1716	2411
2013-14	100	108	268911	121822	83503	7034	10456	1592	2802
2014-15	100	114	306494	151227	102626	7097	10584	1736	3069

During 2014-15 other achievements are as under:

1. CCTV Cameras tender finalized through PWD Electrical. Installation of cameras to be done.

2. New 100 bedded building project, EFC memo sent for approval to H&FW.

3. New laparoscope has been procured and the laparoscopic surgeries have been started at RTRM.Hospital.A total of 113 laproscopic surgeries has been done from June 2014 to March 2015.Further plan to start cystoscopy and PURP.

34. SANJAY GANDHI MEMORIAL HOSPITAL

Sanjay Gandhi Memorial Hospital situated in Mangolpuri Area of North West Delhi was commissioned in April 1986 as one of the seven 100 bedded hospitals planned by the Govt. of NCT of Delhi during the 6th five year plan under Special component plan for Schedule Cast/Schedule Tribes. Later it was augmented to 300 beds in 2010

The hospital now caters to the health needs of a population of 15-20 lakh residing in the JJ clusters & resettlement colonies of Mangolpuri, Sultanpuri, Nangloi, Mundka & Budh Vihar etc. The hospital provides O.P.D. facility of all general departments in forenoon and 24 hours services in Casualty, Laboratory and Radiological investigations, Delivery (Child Birth), Operation Theatres and Blood Bank services.

The brief performance statistics of the hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	300	300	397242	215898	108787	18722	26727	4857	21784
2010-11	300	300	562087	92433	145169	18269	27238	4494	27003
2011-12	300	300	672342	96226	110068	24152	27898	4457	25333

2012-13	300	300	595848	86691	138492	23733	29648	3830	25062
2013-14	300	300	443315	102053	236172	24804	33492	3603	25317
2014-15	300	300	495708	148673	273155	26226	44323	3662	26718

During the year 2014-15 following are the major achievements:

1.One Stop Centre (OSC):- The first OSC in Delhi is made operational from 28.08.2014 in this hospital for the services to Sexual Assault Victims. This Centre provides safe, comfortable & supporting environment to Sexual Assault survivors. It provides counseling, recording of statement & lodging of FIR, free transport to victim, referral to shelter home if required. This is done in addition to prompt medical treatment and collection of evidence in such cases.

2. Swachh Bharat Abhiyan :-

(a) Development of the green areas of the hospital by planting trees & maintenance of parks within hospital complex.

(b) Toilets of the hospital are repaired and upgraded. All toilets are made functional.

(c) Strict monitoring of cleanliness of hospital premises is done on regular basis.

3. DNB (Surgery) a post graduate course has also started from September, 2014 in the hospital in addition DNB courses running in deptt. of OBG & Pediatrics.

4.Orgainized 25 blood donation camps in collaboration with NGOs and other social organizations.

5.0% infection rate achieved in about 1000 cases operation for cataract in the year 2014-15.

6.More than 30% increase in cataract surgery in last one year.

7.Providing free glasses to very poor patients since Nov-2014 through donation.

35. SARDAR VALLABH BHAI PATEL HOSPITAL

Sardar Vallabh Bhai Patel Hospital, a 50 bedded secondary level hospital is located in thickly populated colony of Patel Nagar (Part of West Delhi), surrounded by adjoining colonies of Baba Farid Puri, Rajasthan Colony, Prem Nagar, Baljeet Nagar, Ranjeet Nagar, Shadi Pur, Kathputli Colony, Regar Pura etc inhabited by large population of people belonging to Low and Middle Socio – economic status. About 7 – 8 lakhs of people fall in the catchment area of the Hospital and are dependent on this hospital for their day-to-day Health needs.

Earlier this was an MCW Centre with MCD, which was taken over from MCD by Govt. of NCT of Delhi on 01.10.1996 by a special act passed through assembly. The prime aim of the takeover was to upgrade this hospital to 50 bedded capacities so that it acts as a Secondary Level Health care delivery outlet in the area. Its main objective is to provide minimum free basic health care services. This hospital is spread over 1.37 Acres of Land. The Hospital is Three Storey building divided into Two Wings spread on an area of 5339 Sq m with built up area of 2334 sq m.

The brief performance statistics of the SVBP hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	50	50	282797	171850	30067	0	3116	1004	9015
2010-11	50	50	276798	164622	28168	0	4115	1073	9549
2011-12	50	60	233790	142150	29944	0	4497	1138	10299
2012-13	50	60	227587	141384	30826	0	4281	1457	12778
2013-14	50	50	244018	121810	39983	0	4961	1516	12927
2014-15	50	51	252156	129942	50223	0	3643	1142	14449

During the year 2014-15 following are the major achievements:

The Construction of ETP has been completed and now it has been commissioned now.

1. The site plan / signage boards have been put up in the entire hospital building for the guidance of general public.

2. This hospital has also been notified for the purpose of issuance of Disability certificates to the handicapped /Physically challenged persons residing with in the jurisdiction of the west District.

3. Several Renovation progrmmes of repairing and flooring of toilets in the hospital have been undertaken and completed.

4. Swach Bharat Abhiyaan was oragnised on 2nd October, 2014 on the birth anniversary of Mahtma Gandhi, father of nation. The pledge was administered to all the staff member of the hospital for keeping hygienicness and cleanliness in the hospital. Entire hospital staff was sensitized regarding the benefits of the Swach Bharat Abhiyaan, which has been initiated by the Hon'ble Prime Minister of India.

36. SATYAWADI RAJA HARISH CHANDER HOSPITAL

Satyawadi Raja Harish Chander Hospital with 200 functional beds is situated in the Narela subcity area of West District of Delhi and caters to the health needs of people residing in the town of Narela and adjoining rural areas. The OPD services of the hospital were started in 2003. Emergency, Nursing & IPD Services are available with common latest medical facilities.

The brief performance statistics of the hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	200	200	303789	138663	20210	1474	7529	1088	7664
2010-11	200	200	303245	128488	23765	1458	8031	1255	11036
2011-12	200	200	315104	161549	24481	2043	9251	988	9323
2012-13	200	200	302837	170219	31417	3002	9730	694	11031
2013-14	200	200	294547	152743	42335	4058	6876	438	13747
2014-15	200	200	381363	157642	58995	4399	5211	690	4278

37. POOR HOUSE HOSPITAL

This 60 bedded hospital for inmates of Sewa Kutir (Poor house) is situated at Sewa Kutir Kingsway Camp and medical services in the hospital are being managed by Aruna Asaf Ali Hospital. The brief performance statistics of the hospital during 2014-15 is as under:

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	60	40	0	0	0	0	0	0	0
2010-11	60	60	0	0	0	0	0	0	0
2011-12	60	60	4544	4036	0	0	16	0	0
2012-13	60	20	4513	5390	0	0	0	0	0
2013-14	60	20	3667	3110	0	0	0	0	0
2014-15	60	20	5769	8281	13950	1266	8	0	0

During 2014-15 major achievements are as under :

Infrastructure of remaining 40 beds, on which the constraction work has been initiated since the month of December 2014 onwards.

38. SHRI DADA DEV MATRI AVUM SHISHU CHIKITSALAYA

Shri Dada Dev Matri Avum Shishu Chikitsalaya is a 64 bedded Hospital to provide mother and child care and is located at Dari in South West District of Delhi. It has an area of 10470 sq mtrs with facilities of hostel and staff accommodation. This is the first Hospital of its own kind of GNCT Delhi to provide Mother and Child Health Services in an integrated way.

The brief performance statistics of the hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	64	24	97592	79917	1949	0	1263	206	139
2010-11	64	64	93033	67380	10899	0	7619	1121	384
2011-12	64	64	131871	49372	17162	0	11833	1441	572
2012-13	64	64	117135	59225	23113	0	15106	1737	636
2013-14	64	88	105128	75422	28574	13	16400	1845	694
2014-15	64	92	142007	66941	36806	0	15788	1412	684

During 2014-15 major achievements are as under :

1. Visitor Hall facility for patients/attendants since Oct.2014
2. ETP installed and made functional.
3. Family Planning camp conducted with great success during world population fortnight.
4. Blood donated camp organized successfully on Independence day.
5. Hospital nominated for quality assurance program of DSHM.
6. Initiation of e-office in collaboration with Ch. Brahm Prakash Engineening college, Zafarpur.

39. SUSHRUTA TRAUMA CENTRE

Sushruta Trauma Centre located on Bela Road near ISBT was established in1998 for providing critical care management to all acute poly-trauma trauma victims including head Injury and excluding Burn, as an annexe of Lok Nayak Hospital under overall administrative and financial control of medical superintendent Lok Nayak Hospital. Subsequently Sushruta Trauma Centre was declared an Independent Institution and declared Medical Superintendent, Sushruta Trauma Centre as HoD having all administrative and financial control By Hon'ble L.G. of Delhi vide office order dated 23/02/07. The hospital is having 49 sanctioned beds. It is situated in middle of Delhi and provides critical care management to Poly trauma cases including Head injuries only with latest facilities.

The brief performance statistics of the hospital during 2014-15 and previous years is as under :

Year	No. of Beds		No. of Patients (OPD)				IPD	No. of Surgeries	
	Sanctioned	Functional	New	Old	Emergency	MLC		Major	Minor
2009-10	49	70*	0	9591	12096	2970	3864	1650	1567
2010-11	49	80*	0	8500	10888	2793	3273	1125	2001
2011-12	49	70	0	12491	14493	2559	4845	1166	2074
2012-13	49	70	0	12773	15165	2847	5050	1238	2134
2013-14	49	69	0	13353	17123	3654	5158	1535	3238
2014-15	49	70	0	13971	16926	4897	4569	1217	2496

During 2014-15 major achievements are as under :

Inspite of staff crunch, the outcomes of patients and treatement facilities provided to troma patients efficiently and in time.

Chapter 11

DIRECTORATE OF AYUSH

Introduction

Directorate of ISM & Homeopathy was established in September 1996 and has ISM Wing functioning from A & U Tibbia College Campus and Homeopathic Wing has been allotted separate Budget head since September 2003. Govt. of NCT of Delhi is determined to encourage and develop these systems of medicine and make available these facilities to public. Govt. of NCT of Delhi encourages development of these systems of medicine by establishing Educational, Healthcare Research Institutions.

Functioning of the Directorate

Director, Dte. Of AYUSH is assisted by technical personnel like Deputy Directors, Asstt. Directors, Licensing Authority (ISM) etc. in each system of medicine. Presently, the Directorate of AYUSH is located at A&U Tibbia College Complex at Karol Bagh, New Delih-5 & Homeopathic wing located at CSC-III, 1st floor,B Block Preet Vihar, Delihi.

The Directorate is also conducting re-orientation training programmes in Aurveda/Unani/Homeopathy for practitioners and also gives grant-in-aid to Delhi Bhartiya Chikitsa Parishad, Board of Homeopathy System of Medicine, Chaudhary Brahm Prakash Aurvedic Charak Sansthan, Dilli Homoeopathic Anusandhana Parishad, JAMIA HAMDARD and Examining B ody of paramedical courses which are te autonomous bodies under the Govt. of Delhi. The Directorate is also aproviding financial assistance to some NGOs working in the field of Ayurveda, UNANI, yoga, and Homoeopathy etc. A Drug Control Department for Ayurveda and Unani Systems of medicine is also functioning at Headqarter of the Directorate and Drug Testing Laboratory of Ayurvedic, Unani & Homoepathic medicines is likely to be established in near future. Survey Samples of Ayurvedic and Unani drugs are being tested by NABL accredited labs as per D&C Act 1940 and enforcement of DMR Act 1954 is also being done by the Directorate.

Health Facilities under the Directorate of AYUSH

The following Educational Institution, Hospitals, Dispensaries and Research Institutions functioning under the Directorate during 2014-15.

1. Ayurvedic and Unani Tibbia College & Hospital, Karol Bagh, Bew Delih.
2. Nehru Homoepathic Medical College and Hospital, Defence Colony, New Delih.
3. Dr. B.R. Sure Homeopathic Medical College and Hospital, Nanak Pura, New Delhi.
4. haudhary Brahm Prakash Ayurvedic CharakSansthan, khera dabar village Najafgarh.
5. Dispensaries as on (31.03.2015)

Homeopathic Dispensaries	-	101
Ayurvedic Dispensaries	-	36
Unani Dispensaries	-	118

Performance of the Ayush Dispensaries

During the year 2014-2015, 3 new dispensaries (1 Homeopathic(opened at Homeopathic Wing & Tibbia College Camps), 1 Ayurvedic (opened at IHBAS) and 1 Unani (opened at IHBAS) were opened Table 8.1 shows the number of AYUSH dispensaries under the directorate over last decade.

Table 8.1 Annual OPD Attendance of Delhi Government AYUSH dispensaries during 2014-15 and previous years.

Year	OPD	Ayurvedic Dispensaries	Unani Dispensaries	Homeopathic Dispensaries	Total
2014-15	New	328503	237181	761276	1326960
	Old	328524	191244	1408495	1928263
	Total	**657027**	**428425**	**2169771**	**3255223**
2013-14	New	3,00,520	2,06,492	6,94,507	12,01,519
	Old	2,92,420	1,68,948	12,30,712	16,92,080
	Total	**5,92,940**	**3,75,440**	**19,25,219**	**28,93,599**
2012-13	New	269770	152985	662212	1084967
	Old	269234	125368	1148246	1542848
	Total	**539004**	**278353**	**1810458**	**2427815**
2011-12	New	276218	123187	646064	1045469
	Old	306512	106268	1104203	1516983
	Total	**582730**	**229455**	**1750267**	**2562452**
2010-11	New	361470	361470	165507	1250378
	Old	340413	149744	1175988	1666145
	Total	**701883**	**315251**	**1899389**	**2916523**
2009-10	New	285862	117136	645009	1048007
	Old	411383	191118	1088213	1690714
	Total	**697245**	**308254**	**1733222**	**2738721**

Table 8.2 Sanctioned posts of Directorate of Ayush 2014-15

Group	Posts	ISM Wing	Homeopathic Wing	Total
Group A	Medical	52	111	163
	Planning & Statistics	1	0	1
Group B	Medical	5	0	5
	Administration	4	0	4
	Planning & Statistics	2	2	4
	Accounts	2	1	3
Paramedical		11	106	117
Admin.		0	9	9

Others	28 + 25 (outsource)	68	121

Table 8.4 Budget of Ayush dispensaries during 2014-15

S.No.	**Dispensaries**	**Budget in Rs. Lakhs**	**Actual Expenditure in Rs. Lakhs**
1	Ayurvedic Dispensaries + Unani Dispensaries	3960.10	3916.03
2	Homeopathic Dispensaries	2142.00	1988.62
	Total	6102.10	5904.65

Table 8.3 Budget of AYUSH dispensaries during 2014-15 (Plan & Non Plan)

S.No.	Dispensaries	Budget in Rs. Lakhs	Actual Expenditure in Rs. Lakhs
1	Ayurvedic Dispensaries + Unani Dispensaries	3960.10	3916.03
2	Homeopathic Dispensaries	2142.00	1988.62
	Total	6102.10	5904.65

Chapter 12
Directorate of Family Welfare

ANNUAL REPORT 2014-15

The Directorate of Family Welfare was established in the year 1976 as a part of the Directorate of Health Services subsequently in 1992-93, the Department of Family Welfare was separated administratively from Director of Health Services. The Department was created to reduce the IMR (Infant Mortality Rate), MMR (Maternal Mortality Rate) & TFR (Total Fertility Rate). The various activities mandated include planning, implementing, supervising, collaborating, monitoring and evaluating various aspects of RCH Program. RCH programme was included under National Rural Health Mission in 2005. RCH is one of the six flagship program under NRHM. It has six components:- Reproductive, Maternal, Neonatal, Child & Adolescent Health.

Delhi is one of the smallest state in the country with an area of 1483 sq. km. and it stands tall with a population of 1, 67, 53,235 (Census2011). Population density of Delhi is almost 11,300 per sq km as compared to All India population density of 340 only and is the highest in the country. The population of Delhi is dynamic nature as because of better Job opportunities and availability of health services which imposes additional burden to meet the services. The resources are limited and population is ever increasing so there is a need to propagate 'small family norm' as a way of life among the eligible population. In this context, the role of the Directorate of Family Welfare is vital.

Directorate of Family Welfare is responsible for planning, monitoring, evaluating, supervising and co-ordinating with other agencies of Delhi Govt. including NGO's in the delivery of Primary Health Care Services.

1. To facilitate provision of antenatal and natal services to pregnant women.
2. To facilitate implementation of Post partum program.
3. To facilitate provision of family planning services (Basket of contraceptives, female/male sterilization, Counseling for family planning services etc.)
4. Implementation of UIP (Universal Immunization Program).
5. Surveillance of VPD (Vaccine Preventable Diseases) Services
6. Implementation of Pulse Polio Program.
7. Implementation of PC & PNDT (Pre conception & Pre Natal Diagnostic Techniques Act 1994 Prevention of Sex Selection) and MTP (Medical Termination of Pregnancy) Act.
8. Co-ordination and execution of IEC activities through Mass Education Media.
9. Procurement of State Specific vaccines such as MMR, Typhoid & Pentavalent Vaccines. Supply chain management of family welfare logistics
10. To facilitate provision of Adolescent Health Services in the state of Delhi.
11. Capacity Building to upgrade knowledge & skills of various categories of health functionaries.

Goals of RCH Programme by the end of 12th Five year plan (2017)

1. Reduction of MMR from the Present level of 103 to per lakh live births to less than 100
2. Reduction of IMR presently from 24 per thousand to 15 per thousand
3. Neonatal Mortality Reduction from 16 to 10 per thousand
4. Under Five mortality from 32 to 20
5. TFR to be reduced from 1.7 to 1.5

Parameter	Delhi	India	Departmental goal by 2017
IMR	24/1000 (SRS 2013)	42/1000 LB (SRS 2013)	<15/1000 LB
MMR	103/100000 LB (SRS 2013)	162/100000 LB (SRS 2013)	<100/100000
Intuitional Delivery	83% (CRS 2014)	73% (CES 2009)	>90%
Immunization Coverage	76% (HMIS 2014)	61% (CES 2009)	>95%
Child Sex Ratio (0-6 Yrs)	866 (Census 2011)	914 (Census 2011)	950:1000
Sex Ration (at birth)	896 (CRS 2014)	909 (CRS 2013	>920

The important Programmes and Achievements are as under :-

a. **Maternal Health:-**

- Augmenting Maternity Beds to ensure 100% Institutional Delivery so far 500 Maternity Beds have been added and are in process.
- Implementation of **Janani Shishu Yojna (JSY)** scheme to ensure institutional deliveries for SC, ST and BPL population. Around 13000 beneficiaries have benefitted from this scheme.
- Implementation of **Janani Shishu Suraksha Karyakaram (JSSK)** to ensure 'No Out of Pocket Expenses' for Maternity and Child care services up to the age of 1 Year
- To provide free transport to pregnant women and sick children upto 1 year from residence to nearest Govt. Hospital and back.

- **Child Health:** Providing **Pentavalent Vaccine to Delhi Children since 12th March,2013 to protect against five disease Diphtheria, Pertussis, Tetanus, Hepatitis- B, Hib Associated, Pneumonia and Septicaemia.**
- The State has been able to reduce its IMR from 33 to 24 per 1000 Live Births in last five years. '
- **Strengthening of Newborn Care Units** through creating **192 beds** exclusively for Out Born Sick Neonates in 16 identified Hospitals spread all over the State so far 82 beds have been made functional.
- Strengthening of Neonatal services at primary level through 4800 ASHA's as community link worker for improving **Home Based New Born Care**.

- **Strengthening of Nutritional Rehabilitation Centres (NRCs)** to manage malnourished children from presently 5 to 9 NRCs in the state & 26 Infant Young Child Feeding Practices (IYCF) Centres.

b. Adolescent Health:

- Adolescent constitute 22% of the total population so state is providing adolescent health services through 268 Adolescent Clinics.
- Total Adolescents registered in clinics was 91000, out of which 60,000 were provided clinical services and 58 thousands counselling services.

- In order to decrease the prevalence of Anaemia, the state is implementing weekly Iron and Folic Acid supplementation Programme(WIFS)through more than 12 thousand schools and 10,000 Anganwadis.

c. Population Stabilization:-

- Population stabilization is one of important objective of the state and state had already achieved the goal of **Total Fertility Rate of 1.7.**
- Quality Assurance is one of the Key issues in provision of all the services including population stabilization
- **Convergence with AYUSH** through a sensitization workshop in March 2014.
- **FP 2020 Workshop:** Dissemination workshop held in November 2014

d. Save the Girl Child:-

- The Sex Ratio at Birth in Delhi has declined 9 points in2013 which is an indicator of effective implementation of PC & PNDT Act. The data available from Civil Registration System indicates that Sex Ratio at Birth was 809 females per 1000 males in the year 2001 and it is **currently at 896 in 2014.** The child sex ratio (0-6 Yrs.) is 866 as per 2011 census.

Achievements/Schemes at a glance 2014-15

S.No.	New Initiatives	Salient features	Progress of the current year	Progress of previous years scheme
1	Strengthening of Maternity beds	Addition of 500 beds in hospitals	Will ensure 60,000 additional institutional deliveries	Universalization of Antenatal care, neonatal care and postnatal care. 83% deliveries in the State are institutional
3	Janani Shishu Suraksha Karyakaram	To ensure no out of pocket expenses for pregnant women and newborns	About 2.41 lac women provided benefit under this scheme and around 38,399 sick newborn provided benefit across the state	Have been Kept Rs. 626 Lakhs in the current financial year

4	Free transportation of Pregnant women and sick Neonates	All pregnant women are being transferred from their residence to nearby govt. hospital free of cost and back to residence also	54,000 Pregnant women & 1620 children were transported so far.	The state has fleet of 150 ambulances. The community can avail this facility b y dialling 102
5	Improvement in Female Child Sex ratio	896/1000 male children	Advocacy for female children and strict implementation of PC-PNDT Act	Gradual change in the mindset of people

Achievements of the Department April 2014 to March 2015

S No	Parameters	District
1.	Deliveries conducted at Public Institutions (Including C-Sections)	205471
2.	Deliveries conducted at Private Institutions (Including C-Sections)	42528
3.	Total Institutional Deliveries	247999
4.	Number of Newborns having weight less than 2.5 kg	51927
5.	Number of Newborns breast fed within 1 hour of birth	187776
6.	Fully Immunized children upto 11 months)	277179
7.	Measles, Mumps, Rubella (MMR) Vaccine	212207
8.	Dose-9 Vitamin A	126205
9.	NSV	811
10.	Female Sterilization	16647
11.	IUCD at Public	71754
12.	PPIUCD	30798
13.	OCP	196352
14.	Emergency Contraceptive Pill (ECP)	7021
15.	Condom	3988820

*** The Data has been taken from HMIS portal**

The data for the month of January, 2015 is provisional.

Chapter 13

Delhi State AIDS Control Society

Introduction

The Delhi State AIDS Control Society is an autonomous body of Delhi Govt. It became functional from 1st November, 1998 and a nodal agency which is responsible for implementing the National AIDS Control Programme funded by Govt. of India. The main objective of the society to prevent and control HIV transmission and to strengthen state capacity to respond to long-term challenge posed by the epidemic. The society is implementing various components through various departments/ institutes of Govt. and Non-Government.

Service Center of DSACS

Facilities	Numbers
District AIDS Prevention in convergence wit Delhi State Health Mission/NRHM	4 (North, East, Central, North-East)
Targeted Intervention (TI) Projects for High Risk Groups & Bridge Population	88 (36-FSW, 12-MSM, 8-Transgender, 15-IDUs, 4-Truckers, 13 Migrant) Projects
Opiod Substitution Therapy (OST) Centers for Injecting Drug Users	8 (4NGO Based & 4 Public Health Facilities)
Integrated Counseling and Testing Centers (ICTCs) for HIV counseling and testing	90 standalone, 3 Mobile, 3 PPP ICTC, 132 F-ICTCs
Sexually Transmitted Infection (STI) Clinic	28
Apex STD Center & Regional STD center(S.J. Hospital & MAMC)	2
Anti Retroviral Treatment (ART) centers for first line ART	9
Center for Excellence (COE) for ART, MAMC for 2nd line ART	1
Pediatric COE/ RP, Kalawati Saran Childrer Hospital	1
Community Support Centers (CSC)	2
PLHIV Help Desks (Earlier DICs)	5
Model Blood Bank(IRCS & DDU Hospital)	2
Blood Bank (DSACS Supported)	20 (12-BCSU, 5- MBB, 3-DLBB)
Regional Blood Transfusion Centers(RBTCs)	9
National Reference Lab (AIIMS &NDMC) + State Reference labs(LHMC, SJH, UCMS, MAMC)	2+4
Blood Storages centers	10
Red Ribbon clubs in college	82
Youth friendly Health Center at Jamia Milia Islamia	1

Targeted Intervention

Delhi State AIDS Control Society (DSACS) has been implementing 88 Targeted Intervention Projects in partnership with Non Government Organizations (NGOs) and Community Based Organizations (CBOs). It is a peer led intervention wherein services like regular outreach and behavior change communication, STI treatment and management, free condom distribution to

High Risk Groups, counseling, clean needle and syringes, abscess management and Opioid Substitution Therapy (OST) for IDUs and other services like HIV testing and ART through referral and linkages are provided at their doorsteps.

During FY 2014-15 about 70800 High Risk Groups were covered Out of which, 41350 Sex Workers followed by Men having Sex with Men (MSM) (14000), Transgender (5650) and Injecting Drug Users (IDUs) (8900). About 220000 Migrant Workers and 50000 Truckers have been covered in this year.

Information Education Communication

DSACS had observed important events like World blood donor day, International Youth Day, National Voluntary Blood Donation Day, World AIDS Day, National Youth Day, and some other event in collaboration with NACO i.e. Raahgiri, participation in IITF-2014 MTV Roadies etc in 2014-15. IEC division of DSACS performed various activities during 2014-15 i.e. Newspapers Advertisement, Printing of IEC materials, performance of Nukkad Natak, Magic Show etc to disseminate HIV/AIDS Messages.

Sensitization programme were organized at Red Ribbon Clubs in Colleges to educate College students on HIV/AIDS and motivate for Voluntary Blood Donation. DSACS also organized various activities i.e T-shirt painting, Poster making Competition, Slogan writing, Photography etc. during College festivals. 1293 participants of different organization were trained on HIV/AIDS through mainstreaming division of DSACS. IVRS Helpline 1800 11 1097 was smoothly functioning throughout the year.

Financial Assistance Scheme

Delhi State AIDS Control Society is implementing Financial Assistance Scheme of Delhi Government. This scheme was launched in year 2012. In this scheme DSACS is providing assistance in 4 categories i.e. People living with HIV/AIDS/Children living with HIV/AIDS, Orphan Children infected with HIV/AIDS, Destitute Children infected with HIV/AIDS and Orphan children affected by HIV/AIDS. The main objective of the scheme is to increase access to Anti Retroviral Treatment. Money provided for transportation cost to access Anti Retroviral Treatment. This will help achieve >95% drug adherence and prevent emergence of durg resistance and need for costly second line treatment.

Improving nutritional status and physical capacity of the person to earn livelihood,help orphan children in accessing anti retroviral treatment, treatment of other infections that they are at risk, nutritional support, education and skill building.

Physical	
Category Type	**Target achieved 2014-15 (till Dec. 2014)**
People/Children living with HIV/AIDS on ART	2048

Orphan Children infected with HIV/AIDS	17
Destitute Children infected with HIV/AIDS in institutional care	29
Orphan children affected by HIV/AIDS	21
TOTAL	**2115**
Total No. of PLHIVs alive and on ART (till January 2015)	18091
Details of 350 cases is submitted to Food & Supply Department for issuance of Food Security Card	
Financial Year 2014-15	
Released Assistance from April 2014- December 2014	195.98 lakh
Assistance from December 2014 to March 2015	40.25 lakh (approx)

Blood Safety

Blood Transfusion Services plays a vital role in health care delivery system. Under Blood Safety component various activities are being taken up by Delhi State AIDS Control Society (DSACS) to ensure supply of safe blood and blood products. In Delhi availability of Blood is insure through a network of 68 Blood Banks out of which 20 are NACO supported Blood Banks (2 Model Blood Banks, 12 Major Blood Banks with Blood Component Separation Units, 2 Major Blood Banks, 4 District Level Blood Banks, and 3 Government Blood Banks (ESI, ATFC & Northern Railway Hospital) are supported by NACO.

Blood Safety Program DSACS provides technical support in form of Manpower that includes Lab Technicians, Counselors, and Drivers for three Blood Mobiles & one Blood Transport Van, financial support in form of contingency grant in aid, procurement of Blood bank consumables. These supports are provided as per their classification & budget allocation in Annual Action Plan. Supportive supervision with Drug Inspector from Drug Control Department Govt. of NCT of Delhi to NACO supported Blood Banks is being done on regular basis which helps them to improve in routine blood bank functioning.

Also for making Voluntary Blood Donation approachable at door steps, three Blood Banks in Delhi are provided with Blood Mobiles each (Blood Bank- IRCS, Dr. RML Hospital & DDU Hospital). This way making convenient for public to participate in voluntary blood donation drive.

In order to promote & making public aware on voluntary blood donation, two days in the year are earmarked by WHO - World Blood Donors Day on 14th June & National Voluntary Blood Donation Day on 1st October. These two days are being observed by Blood Safety Division DSACS in association with National AIDS Control Organization (NACO) and other stake holders.

NACO along-with DSACS observed World Blood Donor Day on 14th June 2014 by organizing a National level event at Administrative Block, PGI Auditorium, Dr. Ram Manohar Lohia Hospital. The program was graced by Hon'ble Union Minister of Health & Family welfare, Govt. of India as Chief Guest along-with Director General, NACO, Secretary General –IRCS, Director General Health Services. Regular repeat Voluntary Blood Donor Camp Organizers & Donors were felicitated on this occasion.

NACO along-with DSACS observed National Voluntary Blood Donation Day by organizing a National event on 1st October 2014 at Jawahar Lal Nehru Stadium where Hon'ble Union Minister of Health and Family Welfare, Govt. of India, graced the occasion as chief guest along-with Secretary (H & FW), Govt. of India, D.G. (NACO) and other dignitaries. A rally had been flagged off by the Hon'ble Union Minister of Health and Family Welfare, Govt. Of India, at 8.30 a.m. from Jawaharlal Nehru Stadium & the slogan of the day was "Run for the Little Red Dot Power" and seemed to be quite popular with the massive turnout of youth from various higher educational Institutions, present at the event. More than two thousand enthusiastic participants were mostly students, Jawaans from CISF, and NSS volunteers. He also released a NACO-NBTC document, "Training Module for Blood Bank Nurses".

Voluntary Blood Donor, individuals working for the cause of Voluntary Blood Donation and organizations were felicitated on this occasion. Also, the Project Director, DSACS, Dr. Mrinalini Darswal was appreciated and felicitated for her commitment to the cause and special contribution to Blood Transfusion Services by Hon'ble Union Minister of Health and Family Welfare, Govt. of India.

Care, Support and Treatment

Care, Support & Treatment division of Delhi SACS provide its services to PLHIVs through its Nine Antiretroviral Treatment centers (ARTC), One Center of Excellence (CoE), One Pediatric enter of Excellence (PCoE) and Two Community Support Centers.

ICTC

Integrated Counseling and Testing Centre is a place where a person is counseled and tested for HIV, on his own free will or as advised by a medical provider. At Integrated Counseling and Testing Centre (ICTC) the clients undergo an HIV test in a supportive and confidential environment. In ICTCs, clients know about other linkage services i.e. HIV prevention, care and treatment services and get the access accurate information about HIV prevention and care. Those people who found HIV-negative are supported with information and counseling to reduce risks and remain HIV-negative and those people who found HIV-positive are provided psychosocial support and linked to treatment and care. An ICTC Counselor has an aimed when counseling the clients to providing information on HIV/AIDS and bringing about behavior change in the client.

In the year 2014-15, there were 90 stand alone ICTCs,3 Mobile testing van, 3 FICTCs in Public Private Partnership mode were existing and 132 new Facility Integrated Counseling and Testing Centers were established in sub-district health facilities of Delhi to increase the detection of Antenatal HIV positivity and to upscale HIV prevention and care services in Delhi.

HIV-TB Activities in the last 1 year had shown a marked improvement in collaborative activities and strengthening of linkages between both the programmes as both the officials from RNTCP and Delhi SACS took an active interest in dealing with HIV-TB co-infection detection.

The guidelines of PMTCT programme was revised by the NACO as per WHO norms and the ICTC division of DSACS is planning to roll out the same in Delhi by the F.Y. 2014-15 and related activities including the trainings & logistic arrangements have been going at high pace and speed for successful implementation of the programme in Delhi.

Chapter 14
DRUGS CONTROL DEPARTMENT

The Drug Control Department, GNCT of Delhi is an independent department under the Health & Family Welfare Deptt. GNCT of Delhi and is located at F-17, Karkadooma, Delhi-110032.

Main Activities

The department is enforcing the provisions of the following central enacted laws:

Drugs & Cosmetics Act, 1940 and the rules framed thereunder.

Drugs & Magic Remedies (Objectionable Advertisements) Act, 1954 and the Rules framed thereunder.

Drugs (Price Control) Order, 1995.

The enforcement of the above noted laws is carried out by the Drugs Inspectors of this department by way of required inspections of the manufacturing units of allopathic drugs, surgical dressing, diagnostic reagents, Homeopathic medicines, cosmetics as well as the sales units located in Delhi. The Drug Inspectors take samples of drugs and cosmetics from the manufacturing and sale premises for ascertaining the quality of the drugs available in Delhi.

Under the Drugs & Magic Remedies (Objectionable Advertisements) Act, 1954 various advertisements published in media are scrutinized with reference to misleading/false claims of Drugs to cure certain diseases, if violation under the Act or the rules is observed appropriate action is taken against the person/firm/advertiser as the case may be.

For the enforcement of Drug (Price Control) Order, 1995 the department, in coordination with National Pharmaceuticals Pricing Authority , keeps a track of the drugs that are being sold in Delhi to the consumers do not exceed the maximum retail price fixed by the Government/manufacturer.

Recent Initiatives taken by the Drug Control Department

With view of have better administrative control, better enforcement of the drug laws and more transparency major structural changes has been carried out in the Drug Control Department. Delhi has been divided into 09 districts following the revenue pattern already in vogue in several other departments. All the licensees whether manufacturer /wholesaler and retailers have been sub divided into the district pattern instead of the age old head wise system being followed in the department.

Development of dedicated website of the Department

The website of the Drug Control Department was launched in the year 2009 having url address www.drugscontrol.delhigovt.nic.in . This website is already functional and provides details about different licensees i.e. retailers, wholesalers, distributors, drugs, manufacturing units, blood banks, approved testing laboratories with their names, addresses, licenses details etc. located at Delhi. The organizational structure and contact numbers and addresses of the officials of the department, procedures to be followed for applying grant of different types of licenses and different statutory forms and citizen charter are also available on the website. Some frequently asked questions are also provided

for the help of the general public and prospective licensees. The objective is to update information from time to time and provide error-free information about the department on the website about the licensees under the new district wise pattern of Delhi.

Activities & Achievements of Drugs Control Department for the year 2014-15

A. INSPECTIONS

a.	Manufacturing Units:	255
b.	No. of cases where violation detected	--
c.	Sales establishments:	4702
d.	No. of cases where violation detected	298

B. SPECIAL INSPECTIONS

a.	Manufacturing Units:	10
b.	No. of cases where violation detected	--
c.	Sales establishments:	432
d.	No. of cases where violation detected	76

C. COMPLAINTS

a.	No. of complaints received	90
b.	No. of cases where violation detected	37
c.	No. of cases where stock of drugs /cosmetics/ documents seized	06

D. SAMPLE FOR TEST/ANALYSIS –

1..	No. of Samples collected	325
2.	No. of test reports received	242
3.	No. of samples reported as standard quality	233
4.	No. of samples reported as not of standard quality (Annexure 'A')	09
5.	No. of samples found spurious	--

E. DEPARTMENTAL ACTION

a.	No. of cases where licences cancelled	09
b.	No. of cases where licences suspended	225
c.	No. of cases were warning issued	13

F. PROSECUTION

1.	No. of cases launched (Annexure 'B')	06
2.	No. of cases decided (Annexure 'C')	04
3.	No. of cases convicted	--
4.	No. of cases acquitted/ discharged	--
5.	No. of cases pending in the court + High Court Misc. Petitions	105

G. DETAILS OF FIRMS WHERE LICENCES GRANTED/CANCELLED

(1) Sales Establishments granted licences

a.	Allopathic Sales Establishments	2123
b.	Restricted Sales Establishments	01
c.	Homeopathic sales Establishments	--

(2). Manufacturing units granted licences

1.	Allopathic Drugs Mfg. Units	25
2.	Homoeopathic Medicines Mfg. Units	--
3.	Cosmetics Mfg. Units	05

(3). No. of sale firms where licences surrendered and cancelled

1.	Allopathic Sales Establishments	717
2.	Restricted Sales Establishments	--
3.	Homeopathic sales Establishments	--
4.1.	Allopathic drugs mfg. Units	06
4.2.	Homoeopathic drugs mfg. Units	--
4.3	Cosmetics mfg. units	04

H. NO. OF LICENCED FIRMS.

1.	Sales Establishment	20517
1.1	Allopathic Drugs	19594
1.2	Restricted Drugs	582
1.3	Homeopathic	341

2.	Mfg. Establishment	779
2.1	Allopathic Drugs	254
2.2	Homoeopathic Drugs	05
2.3	Cosmetics	520

Chapter 15
DEPARTMENT OF FOOD SAFETY

The Department of food safety is a regulatory department whose basic mandate is to make available safe and wholesome food to the citizens of Delhi. For the purpose, the department endeavours to bring the Food Business Operators (FBOs) within the regulatory framework of Food Safety & Standards Act, 2006 by way of granting them registration/licensing. In order to minimize the interface between its officers and the FBOs the department has introduces online system of regisitration and licensing. It has also established a 'Facilitation Centre' in the heart of the city at 8th floor, Mayur Bhawan, Connaught Place, New Delhi to facilitate online filing of applications. During the current year 2014-15, 7168 license and 21033 registration have been issued to the FBOs.

In order to keep surveillance over such articles of food which can be potentially harmful to the health of the consumers, the department keeps vigil by way of lifting 'surveillance samples', and also lifts 'legal samples' on the basis of complaints received from the public or as a part of the routine vigil, and takes action against defaulters/ violators of the FSS Act and Rules/Regulations made there-under. During the current year 2014-15, 1483 legal samples and 841 surveillance samples were found not conforming to the safety standards laid down under the FSS Act and Rules/Regulations made there-under. Punitive action as provided under the law has been taken in such cases.

During the year, an awareness campaign was alos launched through print and electronic media to apprise the public about the ways and means to minimize the effect of pesticide residues on fruits and vegetables.

The department remains committed to ensure availability of safe and wholesome food to the citizens of Delhi by implementing the provisions FSS Act and Rules/Regulations made there-under in letter and spirit.

YOGA FOR PREVENTION OF HYPERTENSION & OTHER DISEASES

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