

प्रदेश तहको वार्षिक स्वास्थ्य समीक्षा
आर्थिक वर्ष २०७४/७५

प्रदेश तहले तयार गर्नुपर्ने प्रस्तुतीको नमूना

१. प्रतिवेदन स्थिति :

Type of Health Facility/Service Providers	Provincial level Reporting Status (%)		
	FY 2072/73	FY 2073/74	FY 2074/75
Govt Hospital			
PHCC			
HP (including SHP)			
UHC/CHU			
PHC Outreach Clinic			
Immunization Clinic			
FCHV			
Other Non Public Health Facility			

२. कार्यक्रमको प्रगति अबस्था

कार्यक्रमको नाम : खोप कार्यक्रम

तल उल्लेख गरिएको Template को नमूना अनुसार प्रत्येक कार्यक्रमसँग सम्बन्धित मुख्य सूचकको प्रस्तुती तयार गर्नुपर्नेछ । आशातित प्रगति हुन नसकेमा सो को कारण र सुधारका उपायहरू समेतको छोटो व्याख्या गर्नुपर्ने ।

Districts	Coverage of Measles/Rubella 2nd (%)		
	FY 2072/73	FY 2073/74	FY 2074/75
District 1	85	97	92
District 2	90	91	92
District 3	95	87	91
.....			
.....			
Provincial Total	91	92	92

३. प्रदेशभित्र रहेका स्थानीय तह (नगर/गाउँ पालिका) लाई आ.ब. २०७४।७५ मा निम्न सूचकहरूको उपलब्धि अनुसार ४ बिभिन्न क्याटेगोरीमा विभाजन गरी प्रस्तुत गर्ने (सकेसम्म **GIS Map**) मा:

a. % of DPT-HepB-Hib 3 Coverage

- b. % of cases treated with antibiotics (2-59 months) among pneumonia cases (HF and Outreach)
- c. % of institutional deliveries among expected live births
- d. % of New Acceptor (all) as % of MWRA
- e. % of outpatient (OPD) new visits among total population

Sample

Indicator	List of Local Level (Palika) with coverage			
	Below 50%	50 to 60%	70 to 90%	90% above
DPT-HepB-Hib 3 Coverage %				
Total Number				

४. बजेट र खर्चको अबस्था

४.१. प्रदेश तहमा प्राप्त भएको ससर्त अनुदान

- कूल बजेट, खर्च र खर्च प्रतिशत
- तोकिएको क्षेत्र भन्दा अन्य क्षेत्रमा खर्च भएको भए सो को खर्च र कारण

४.२. प्रदेश तह आफैले स्वास्थ्य क्षेत्रमा विनियोजन गरेको बजेट, खर्च र खर्च प्रतिशत

४.३. स्वास्थ्य क्षेत्रको जम्मा बेरुजु र फर्छ्यौट

४.४. प्रदेश तहको लागि विनियोजित ससर्त अनुदान बाहेक कूल बजेटबाट स्वास्थ्य क्षेत्रमा छुट्याइएको बजेटको प्रतिशत

५. उत्कृष्ट तथा नबिनतम अभ्यास (Best practice, Innovation)

- के कयाकलाप गरिएको हो ?
- कहाँ गरिएको हो ?
- लक्षित समूह (लाभग्राही) को थिए?
- कति लागत लाग्यो ?
- उपलब्धी तथा सिकाई के के रहे ।

६. प्रदेश तहको स्वास्थ्य क्षेत्रका सबल पक्ष, समस्या तथा सुधार गर्नुपर्ने पक्षहरू

६.१. सबल पक्षहरू

- सबल पक्षहरू के के हुन् र यसबाट अरु प्रदेश वा संघले के सिक्न सक्छन् ?

६.२. समस्याहरू

- प्रदेश तहले कार्यसम्पादनका क्रममा समाधान गर्न नसकेका समस्या र सम्भावित कारण हरू के के हुन् ?
- समस्या समाधानका उपायहरू के हुन सक्छन् ?

६.३. समग्र सुधार गर्नुपर्ने पक्षहरू

- प्रदेश तहले प्रभावकारी रूपमा कार्यसम्पादन गर्न सुधार गर्नुपर्ने पक्षहरू के के हुन?

७. स्वास्थ्य सूचकहरूको विश्लेषण

बिभिन्न तहमा हुने समीक्षा कार्यक्रम स्वास्थ्य संस्थाहरूले गरेको प्रतिवेदनमा नै आधिरत हुने र समीक्षा कार्यक्रम सम्पन्न भए पश्चात प्रतिवेदन संशोधन गर्न नमिल्ने भएकोले समीक्षा हुनुभन्दा अगावै सम्बन्धित प्रदेश स्वास्थ्य कार्यालय, स्थानीय तह र स्वास्थ्य संस्थाहरूसँग समन्वय गरी स्वास्थ्य संस्थाहरूले आ.ब. २०७४।७५ को श्रावणदेखि आषाढ महिनासम्म प्रतिवेदन गरेका सम्पूर्ण सूचनाहरूलाई रूजु (भरिफिकेसन) गरी तथ्यांकको गुणास्तर सुनिश्चित गर्नु पर्दछ । प्रदेश तह (नगर/गाउँपालिका) ले स्वास्थ्य कार्यक्रमको समीक्षाका लागि स्थानीय परिवेश अनुसार तल उल्लेखित सूचकहरू मध्ये प्राथमिकता दिनुपर्ने सूचकहरू पहिचान/छनौट गरी प्रत्येक कार्यक्रमको कम्तीमा १ सूचक समावेश हुनेगरी (Tracer Indicators) प्रदेश स्वास्थ्य कार्यालय/जिल्ला अनुसार प्रगति देखिने गरी स्वास्थ्य सूचकहरूको तुलनात्मक विश्लेषण सहित प्रस्तुती तयार गर्नुपर्दछ ।

Achievement/Analysis of Health Indicators

INDICATORS	Unit	FY 2072/73	FY 2073/74	FY 2074/75
A. REPORTING STATUS				
No. of monthly report of HF reporting	No			
% of PHC-ORC clinics reporting to Health Facility	%			
% of Immunization clinics reporting to Health Facility	%			
% of Female Community Health Volunteers (FCHVs) reporting to Health Facility	%			
Average number of People served by HF (Per day)**	No			
Average number of People served by PHC/RC (Per clinic)	No			
Average number of People served by Immunization Clinic (Per clinic)	No.			
Average number of People served by FCHV per month (Per month per FCHV)	No.			
% of new clients attempt for health care services	%			
% of senior citizen (New) among total (New) client served	%			
Average visit of clients for health care services	Times			
B. CHILD HEALTH				
IMMUNIZATION COVERAGE				
% of children under one year immunized with BCG	%			
% of children under one year immunized with DPT-HepB-Hib3	%			
% of children under one year immunized with PCV 3	%			
% of children under one year immunized with IPV	%			
% of children aged 9-11 months immunized with Measles/Rubella 1st	%			

% of children aged 12-23 months immunized with JE	%			
% of children aged 12-23 months immunized with Measles/Rubella 2nd	%			
% of Pregnant women immunized by TD2 and 2+	%			
Dropout Rate BCG vs. Measles/Rubella 1st	%			
Dropout Rate DPT-HepB-Hib1 vs. DPT-HepB-Hib3	%			
Wastage Rate of BCG	%			
Wastage Rate of DPT-HepB-Hib (Penta)	%			
Wastage Rate of Polio (OPV)	%			
Wastage Rate of PCV	%			
Wastage Rate of IPV	%			
Wastage Rate of MR	%			
Wastage Rate of JE	%			
Wastage Rate of TD	%			
NUTRITION				
% of children aged 0-11 months registered for growth monitoring (New visits)	%			
% of children aged 0-23 months registered for growth monitoring (New Visits)	%			
Proportion of malnourished children as % of new growth monitoring (0-23 months)	%			
Average number of Growth Monitoring visits (0-23 months)	%			
% of children aged 0- 6 months registered for growth monitoring, exclusively breastfed for the first six months	%			
% of children aged 6–8 months registered for growth monitoring received solid, semi-solid or soft foods	%			
Vitamin A mass distribution coverage 1st Round	%			
Vitamin A mass distribution coverage 2nd Round	%			
Deworming tablet mass distribution coverage 1st Round	%			
Deworming tablet mass distribution coverage 2nd Round	%			
% of recovery rate of SAM cases	%			
% of defaulter rate of SAM cases	%			
% of death rate of SAM cases	%			
% of children aged 6-23 months who received at least one cycle (60 Sachets) Baal Vita (MNP)	%			

% of children aged 6-23 months who received 3 cycle (180 Sachets) Baal Vita (MNP)	%			
CB-IMNCI (Newborn Care)				
% of newborns who had chlorhexidine ointment applied immediately after birth	%			
% of PSBI among registered 0-2 months infant (sick baby)	%			
% of infants aged 0-2 months with PSBI receiving a complete dose of Gentamycin	%			
Number of infants deaths aged 0-2 months	No.			
CB-IMNCI -ARI				
Incidence of acute respiratory infection (ARI) per 1,000 children under five years (new cases)	/1000			
Incidence of Pneumonia (Pneumonia + Severe Pneumonia) per 1,000 U5 yrs Children (new cases)	/1000			
Proportion of severe Pneumonia among registered new ARI cases	%			
% of Antibiotics treatment who suffered from pneumonia	%			
Number of Deaths due to ARI	No.			
DIARRHEA				
Incidence of diarrhea per 1,000 under five years children (new cases)	/1000			
% of severe dehydration cases among children under five years (new cases)	%			
% of diarrheal cases treated with Zinc and ORS among children under five years with diarrhea	%			
Number of Deaths due to diarrhea	No.			
C. FAMILY HEALTH				
SAFE MOTHERHOOD				
% of pregnant women attending first ANC among expected live births (Any times 1st Visit)	%			
% of pregnant women who had four ANC checkups as per protocol (4th, 6th, 8th and 9th month)	%			
% of women who received a 180 day supply of iron folic acid during pregnancy	%			
% of institutional deliveries among expected live births	%			
% of deliveries attended by SBA (at HF and Home) among expected live birth	%			
% of vacuum, forceps and C/S deliveries among total delivery (Health Facility)	%			

% of women who had at least three postnatal care (PNC) visit as per protocol among expected live birth	%			
% of postpartum mothers who received Vitamin A supplements among expected live birth	%			
% of women receiving maternity incentives among total institutional deliveries	%			
% of women receiving ANC incentives among total institutional deliveries	%			
% of met need for emergency obstetric care service (Target: 15% of estimated live birth)	%			
Number of Neonatal death	No			
FAMILY PLANNING				
FP new acceptors as % of WRA (all modern FP methods)	%			
FP new acceptors-IUCD	No			
FP new acceptors - Implant	No			
Contraceptive prevalence rate (CPR) (modern methods) (<i>unadjusted</i>)	%			
Current User at the end of FY – Condom	No.			
Current User at the end of FY - Pills	No.			
Current User at the end of FY - Depo	No.			
Current User at the end of FY - IUCD	No.			
Current User at the end of FY - Implant	No.			
FEMALE COMMUNITY HEALTH VOLUNTEERS (FCHV)				
Total number of FCHVs (Including Urban FCHVs)	No.			
% of mothers group meeting held	%			
Number of women utilizing FCHV fund	No.			
Total amount of FCHV fund at end of the fiscal year	Rs.			
Amount of money invested from the FCHV fund	Rs			
% of FCHV fund utilized (invested)	%			
D. MALARIA / KALA-AZAR				
Registered KALA-AZAR Positive cases	No.			
Total Number of Slides examined for LD bodies	No.			
Total number of rK39 (RDT for Kala-azar) tested	No.			
Malaria Confirmed cases (PV, PF, P Mix)	No.			

Total number of blood smears screened for Malaria	No.			
Total number of RDTs performed for Malaria	No.			
Malaria Confirmed cases (Indigenous, Imported)	No.			
E. LEPROSY				
New case detection rate (NCDR) per 100,000 population	/100000			
Prevalence rate (PR) per 10,000	/10000			
Number of Disability Grade 2 among new cases	No			
F. TUBERCULOSIS				
Case Notification Rate all form of TB per 100000 population	/100000			
Case Notification Rate PBC new and relapseTB cases per 100000 population	/100000			
Sputum conversion rate (All PBC)	%			
Treatment success rate (All PBC)	%			
Slide Positivity rate (from facility with laboratory only)	%			
G. HIV/AIDS				
% of pregnant women who tested for HIV at an ANC checkup.	%			
H. CURATIVE SERVICES				
Outpatient (OPD) new visits	No.			
% of outpatient (OPD) new visits among total population	%			
Proportion of female patients among total new OPD visits	%			

***To calculate average number of People served by HF (Per day), 24 working days in a month can be taken as a general standard*

जिल्ला समन्वय समितिले समायोजनको लागि स्थानीय तहबाट संकलन गर्नुपर्ने विषय

१. बजेट र खर्चको अबस्था

१.१ स्थानिय तहमा प्राप्त भएको ससर्त अनुदान

- कूल बजेट, खर्च र खर्च प्रतिशत
- तोकिएको क्षेत्र भन्दा अन्य क्षेत्रमा खर्च भएको भए सो को खर्च र कारण

१.२ स्थानिय तह आफैले स्वास्थ्य क्षेत्रमा बिनियोजन गरेको बजेट, खर्च र खर्च प्रतिशत

१.३ स्वास्थ्य क्षेत्रको जम्मा बेरुजु र फर्छ्यौट

१.४ स्थानिय तहको लागि बिनियोजित ससर्त अनुदान बाहेक कूल बजेटबाट स्वास्थ्य क्षेत्रमा छुट्याइएको बजेटको प्रतिशत

२. उत्कृष्ट तथा नबिनतम अभ्यास (Best practice, Innovation)

- के कुर्याकलाप गरिएको हो ?
- कहाँ गरिएको हो ?
- लक्षित समूह (लाभग्राही) को थिए?
- कति लागत लाग्यो ?
- उपलब्धी तथा सिकाई के के रहे ।

३. स्वास्थ्य संस्थाका सबल पक्ष, समस्या तथा सुधार गर्नुपर्ने पक्षहरू

३.१ सबल पक्षहरू:

- सबल पक्षहरू के के हुन् र यसबाट अरु तहले के सिक्न सक्छन् ?

३.२ समस्याहरू:

- स्थानीय तहले कार्यसम्पादनका क्रममा आफुले समाधान गर्न नसकेका समस्या र सम्भावित कारण हरू के के हुन्, समस्या समाधानका उपायहरू के हुन सक्छन् ?

३.३. समग्र सुधार गर्नुपर्ने पक्षहरू:

- स्थानीय तहले प्रभावकारी रूपमा कार्यसम्पादन गर्न सुधार गर्नुपर्ने पक्षहरू के के हुन?