

ANNUAL REPORT 2013 - 14



**The Gandhigram Institute of
Rural Health and Family Welfare Trust**

ANNUAL REPORT 2013-14



THE GANDHIGRAM INSTITUTE OF RURAL HEALTH AND FAMILY WELFARE TRUST

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CONTENTS

PART-I		
1.	HIGHLIGHTS OF THE YEAR	
	1.1. From the Director's Desk	
PART-II		
2.	RESEARCH	
	2.1. Population Research Centre	
3.	TRAINING	
	3.1. Central Training Institute (CTI)	
	3.1.1. Central Unit	
	3.1.1.1. Central Unit (Communication & Media Wing)	
	3.1.1.2. Central Unit (Management Wing)	
	3.1.2. Health & Family Welfare Training Centre	
	3.1.3. Post Graduate Diploma in Health Promotion & Education	
	3.2. Regional Health Teachers' Training Institute (RHTTI)	
	3.2.1. Diploma in Nursing Education and Administration (DNEA)	
	3.2.2. Health Visitors Course (Promotional Training for ANM/MPHW-F)	
	3.2.3. Short Term Courses for G.N.M. / B.Sc. (N) / M.Sc. (N)	
	3.2.4. Upgradation of DNEA course into Post Basic B.Sc. (N) program	
4.	ADHOC PROJECTS	
	4.1. Non Communicable Disease – work place based intervention project	
	4.2. State Training Resource Centre	
5.	SELF-FINANCING COURSE	
	5.1. Diploma in Medical Laboratory Technology	
6.	DISSEMINATION	
	6.1. Library	
7.	ADMINISTRATIVE STRUCTURE	
8.	ANNEXURES	
	8.1. Participation of Faculty/Staff members in workshops/seminars	
	8.2. Staff details	

1. HIGHLIGHTS OF THE YEAR

1.1. From the Director's Desk

OUR ROLE OVER THE PAST 50 YEARS IN STRENGTHENING ECONOMY THROUGH RESEARCH, TRAINING AND HEALTH PROMOTION IN INDIA

India is the largest country having major part of its population living in rural areas and hence any step taken for improvement of rural population with special attention will help the nation to improve the socio-economic aspect.

Improving healthful living of rural population by promoting their health and by promoting their environment will definitely help them to lead a healthy life and thereby contribute for the improved production of agriculture and other fields and thus contribute for the national economy.



Keeping in mind the above fact as early as 50 years back, our Gandhigram Institute of Rural Health and Family Welfare Trust have declared its main objective as to concentrate on training, education and other supportive and promotional activities mainly to improve the education, job opportunities, lifestyle modification and promotion of healthful living conditions of rural population. All other programmes particularly training and other project works are towards this point keeping in mind the contribution for the national development and economy through healthful living and better healthy environment. And we are making continuous triumphant effect in the planned direction making appropriate adjustment to the environment.

To start with, Respectful Madam, Dr. T.S. Soundram AMMA, started a pilot health project area in Athoor village nearer to Gandhigram in the year 1959. Madam Dr. T.S. Soundram was successful in her project study with encouraging results and hence decided to go further in this direction. From the successful results of the project study which gave encouragement and enthusiasm for our Madam Dr. T.S. Soundram AMMA to start Gandhigram Institute of Rural Health and Family Welfare in the year 1964. The objective is mainly centered around training rural people on health promotion and the rural population to get job oriented training and also in-service and promotional trainings for the health workers under the Directorate of Public Health and Preventive Medicine who provide health care to Rural Population namely Multi Purpose Health Worker (Male) (MPHW-M), Multi Purpose Health Worker (Female) (MPHW-F), Lady Health Visitor (now SHN) and also Medical Officers providing Health care to rural population in Primary Health Centres, Community Health Centres deputed from the Directorate of Public Health and Preventive Medicine, Tamil Nadu.

The Institute has grown facing all obstacles due to changing pattern of health care services delivery system necessitated by changing in the various programmes according to the needs demanded by environment changes and planning over the period of decades. To start with, we had programmes for Lady Health Visitors (LHVs) course of 30 months conducted in

batches for nearly 18 years and then it was stopped consequent to the decision of Government to promote from ANMs/VHNs for LHV posts. We work with Govt. of Tamil Nadu to meet the requirement of services provided by Govt. of Tamil Nadu to rural population. Similarly, we have started affiliation with Directorate of Public Health for the ANM course which was continued for more than 15 years and this course was stopped and now we are conducting training programmes for TINP and DANIDA workers for promotional career training to become VHN/ANM. The Regional Health Teachers' Training Institute (RHTTI) conducts many other training, e.g., nearly for 20 years we are conducting the DPHN course for diploma nurses to become District Public Health Nurse and to enter nursing administration at district level. Late, the curriculum of DPHN course was revised and reframed by Indian Nursing Council as Diploma in Nursing Education and Administration (DNEA) from the year 2001 onward and the course was conducted till the year 2013. The candidates are not only from Tamil Nadu, but also Pondicherry and other northern states are also benefited and contributed to improve the health services in their respective states. As per Indian Nursing Council's (INC) directions, this course is also to be upgraded as Post Basic B.Sc. (Nursing) from this year onwards. We are awaiting orders from the Govt. of India to start this course from the year 2015. Also, the Promotional course was started in the year 1979 for ANM/MPHW-F for ANMs working in municipal corporations of Tamil Nadu. We are also conducting short-term trainings on community health nursing for 5 days, 3 weeks and 1 month, etc. for UG and PG nursing students from Kerala, Kolkata, Uttar Pradesh, Punjab, Pondicherry, etc. throughout the year in batches.

Our Institute is functioning as per the guidelines and directions from the Govt. of India, and Govt. of Tamil Nadu and to meet the training needs of Govt. of Tamil Nadu and training requirements for health field workers as per the guidelines and instructions by Govt. of India. Our Institute was permitted to start the Central Training Institute (CTI) for the southern states in the year 1973 by the Govt. of India.

It consists of:

The Central unit offers training for the District level officials and key trainers. We have been conducting trainings on Information, Education and Communication (IEC), Health communication, Health management and other technical courses for the Government officials and NGOs from the southern states. A variety of health advocacy materials were designed and disseminated through to the public through training and intervention projects.

Health and Family Welfare Training Centre (HFWTC), Diploma in Health Promotion and Education (DHPE) and Central Unit (CU). The Health and Family Welfare Training Centre is involved in the training of Medical Officers of PHCs, in orientation training and also in-service training for effective functioning of Community Health Nurses at block level, Sector Health Nurses at PHC level, Village Health Nurses at HSC level and also TINP and DANIDA workers involved in MCH work to improve their peripheral and village level field oriented activity by giving support to rural mothers in antenatal, natal and postnatal services. Trainings like Managerial Skill Training to MOs, SBA-SN, SBA-ANM, AMTSL, IMNCI-Supervisor, IMNCI-HN Functionaries, BEmONC, IRT-SHN/CHN, ARSH-SHN/VHN, ARSH for ICTC-SN/Counselors, ARSH-MOs and also SBA-ANM from municipalities. HIV / AIDS for MOs, HIV/AIDS for SN and ANM. The HFWTC is also conducting training for candidates sent by Directorate of Public

Health and Preventive Medicine, Tamil Nadu sending the selected candidates for pre-placement course training of 1 year duration to become Multi Purpose Health Worker (Male).

This Institute is also conducting training on Diploma in Medical Laboratory Technology (DMLT) course of TWO YEAR duration for candidates from rural areas with +2 qualification and so far we have completed 2 batches. Earlier, this course was conducted by this Institute as "Certificate in Medical Laboratory Technology" (CMLT) of 1 year duration for more than 10 years period before upgradation as DMLT TWO YEAR DIPLOMA course.

This Institute conducts Diploma in Health Promotion and Education with expert Teachers in Health Education, Behavioural Sciences, etc. have involved in the training of Post Graduate Diploma in Health Promotion and Education and hence affiliated to The Tamil Nadu Dr.M.G.R. Medical University, Chennai. This is being conducted over a period of more than 50 years since this is a pre-requisite qualification for doing rural health services in Govt. of Nepal and many Indian northern states like Uttar Pradesh, Orissa, West Bengal, etc. We used to get often candidates also from other countries like Nigeria.

We often receive projects entrusted to us by Govt. of Tamil Nadu, Tamil Nadu Health Systems Project (TNHSP) and National Rural Health Mission departments. We have conducted a pilot project for TNHSP on Cardio Vascular Diseases for 2 years in Sivaganga and Virudhunagar districts and we have successfully completed the projects and came out with very useful and vital observations and contributed for the upscaling of the observation along with other data already available with the Government of Tamil Nadu to develop a "state health programme called as Non Communicable Disease (NCD) programme, a programme" unique in Tamil Nadu which is the first state in India to start this programme covering 4 non communicable diseases affecting more percentage of people with morbidity and mortality namely hypertension, diabetes mellitus, cancer cervix and cancer breast; mainly early detection and treatment and cure with preventive care whoever earliest detection done for all above 30 years aged men and women. In this programme, the Govt. of Tamil Nadu through TNHSP with World Bank support has again entrusted to us one aspect of this programme implementation namely "*Work Place Based Interventions on NCD diseases*" for the entire state of Tamil Nadu. We have successfully completed this task and submitted the report to the Project Director, TNHSP, Chennai.

The Population Research Centre of our Institute is also involving in Research activities, mostly community oriented research. The papers have been published in various magazines including international magazines. The observations made on community oriented programs are sent to the Government of Tamil Nadu for the use of program evaluations. To quote some examples of such studies are following :

- 1) Pattern of unmet need for Family Planning in selected Districts of Tamil Nadu
- 2) Contraceptive use in Tamil Nadu – District Level Analysis
- 3) Coverage evaluation of Pulse Polio immunization, routine immunization and maternal care, 1999
- 4) Monitoring intensive Pulse Polio immunization in Tamil Nadu
- 5) Women's Autonomy and Fertility Decline in Tamil Nadu

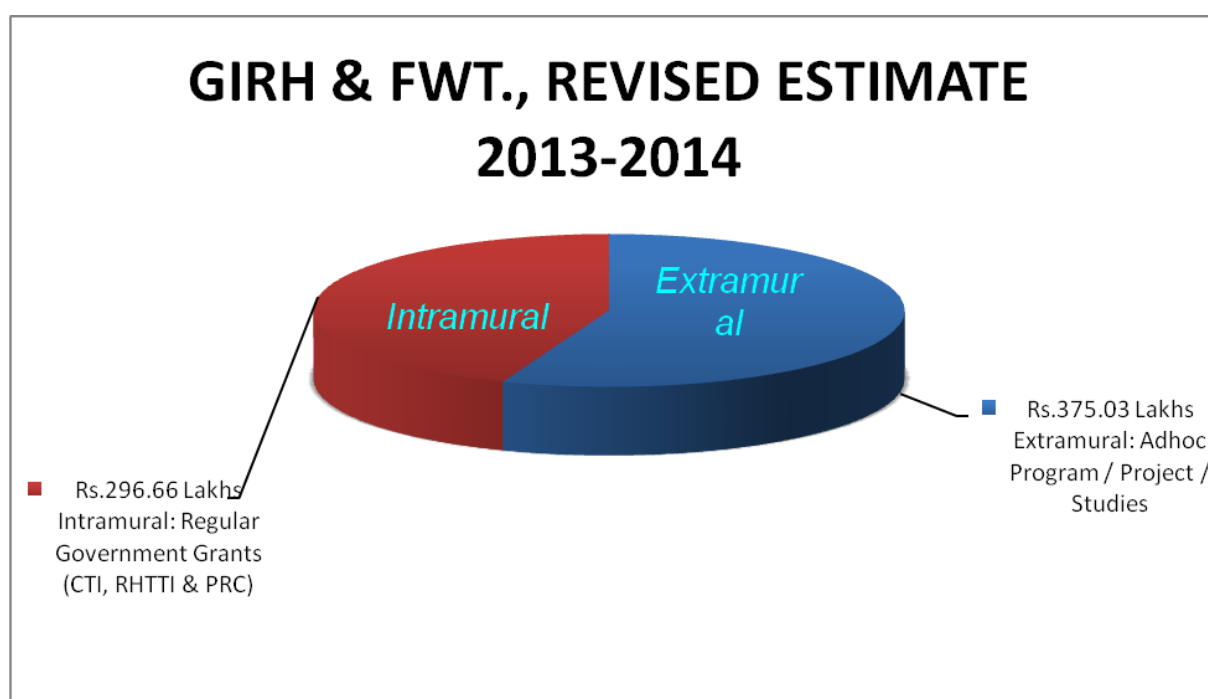
- 6) Evaluation of Functioning of Family Welfare Training Centers in Tamil Nadu
- 7) Study of factors influencing unwanted pregnancies in rural areas of a district in Tamil Nadu
- 8) Promotion of vasectomy through training the providers and community education
- 9) Study on “Installation and utilization of equipment supplied under CSSM Program” in Tamil Nadu

Our Institute is paying special attention to training programs entrusted to us by the Government of Tamil Nadu.

- 1) orientation training of Medical Officers of Primary Health Centers and inservice training of Medical Officers of Primary Health Centers
- 2) Training on “In-service training for LHVs (SHN)”
- 3) In-service training for VHN (ANM)
- 4) In-service training for Anganwadi workers

In addition, our Institute is giving training of empowering women in training by providing massion workers’ training, empowering women by giving training in IEC activities, Peer education training program to prevent and control HIV AIDS.

We pray Almighty to give us courage, strength and perseverance to sustain our activities towards the goal for which the trust was started to strengthen India.



2. RESEARCH

2.1. POPULATION RESEARCH CENTRE (PRC)

Population Research Center (PRC) was established by the Ministry of Health and Family Welfare, Government of India, with the mandate to provide inter alia, critical research based inputs related to Health and Family Welfare programs, health system and policies at the national and state level. The mandate of PRC is to carry out research and evaluation studies related to population studies and to undertake evaluation of the state level population and health programs and schemes assigned by the Ministry of Health and Family welfare, Government of India.

The Population Research Centre is functioning as a support centre for the Government of Tamil Nadu by monitoring various health and family welfare programs in the State and provides valuable information on program performance apart from making suggestions on various measures to improve its performance. Periodic meetings have been arranged with the state and district level health officials to disseminate the research findings of PRC. The research findings are also published in reputed journals and presented in conferences/seminars.

Population Research Center is the nucleus of all the research programs in the institute. The center is a multidisciplinary unit, staffed with demographers, sociologists, economists, statisticians and computer personnel with vast research experience. Since its inception in 1961, the center has completed more than 300 studies related to

- i) Evaluation of Health and Family Welfare Programs
- ii) Reproductive and Child Health in terms of age at marriage, child mortality, maternal mortality, immunization, abortion, infant mortality and adolescent health.
- iii) Women empowerment
- iv) Healthcare facility Assessment and quality of care
- v) Evaluation of National Rural Health Mission
- vi) Health Information and Management System

Besides Government of India, International organizations like, WHO, UNICEF, USAID, UNFPA, IDRC, Ford Foundation, Population Council, Pathfinder International and national and state level organizations like ICMR, and TNHSP/TANSAC/APAC /VHS have funded the PRC research studies.

The research area of this centre extends from Tamil Nadu to the neighboring states like Pondicherry, Andaman and Nicobar Islands and Lakshadweep.

Studies Completed

Monitoring NRHM Programme Implementation Plan in the State of Tamil Nadu & Puducherry

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	To track the progress the programme implementation plan in

	the districts Salem, Ariyalur, Villupuram, Tiruchirappalli, Virudhunagar, Krishnagiri, Tirunelveli, Tiruvannamalai districts of Tamil Nadu and Yanam district of Pondicherry
Progress	Completed

Analysis of R-HMIS data of nine southern districts of Tamil Nadu

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	Examining quality of data in R-HMIS web-portal
Progress	Completed

Analysis of quality of HMIS data for the year 2012-13

Funding Agency	Ministry of Health and Family Welfare, Government of India
Objectives	Examining quality of data in HMIS web-portal
Progress	completed

ON GOING STUDIES

1. PIP monitoring in some districts of Tamil Nadu
2. Analysis of HMIS data for the year 2013-14
3. Monitoring data upload in the HMIS / TNHMIS and Mother Child Tracking System web portals

3. TRAINING

3.1. CENTRAL TRAINING INSTITUTE (CTI)

Introduction

The Central Training Institute (CTI) is the major stay of most of the training programs conducted in the Gandhigram Institute of Rural Health and Family Welfare Trust. The Government of India recognized the Institute as one of the seven CTIs in India during the year 1973 with the objective to provide guidance for the teaching faculties of the health and family planning training centers and the central family planning field units in the four southern states i.e. Tamil Nadu, Andhra Pradesh, Karnataka and Kerala. The responsibilities are to:

- Train District level extension educators from Tamil Nadu, Andhra Pradesh, Karnataka, U.T. of Pondicherry and Kerala as well as extension educators employed by Ministry of Defense and Railways in the southern zone.
- Provide technical guidelines to the regional family planning training centers and the central family planning fields units in the southern zone.
- Perform duties assigned by the ministry according to the program needs.

Nature of training Programs

All the training programs basically to enhance knowledge, attitude, Skills in technical and managerial aspects of health and its related areas and to provide technical guidance and assistance to the HFWTCs in the states allotted.

These training programs are short-term period, ranges from one week to four weeks for the categories of

- Trainers of training Institutions viz. HFWTCs, ANM training schools, etc.
- District level medical personnel
- District level paramedical personnel

The special training programmes are being conducted for the program personnel of

- Ministry of Railways/Defense
- Voluntary organizations/NGOs

The Central Training Institute of our institute consists of Central Unit (CU), Health and Family Welfare Training Centre (HFWTC), Diploma in Health Education (DHE) and Administrative Unit. The CTI conducts short and long-term training in health promotion and education, health communication and produces educational/media materials for outreach programs. It has an integrated teaching Faculty for the Health and Family Welfare Training Centre, Diploma Course in Health Promotion Education and the Central Unit. The CTI consists of the following units:

Central Unit: Conducts capacity building training programs on Health Communication and Management for the teaching faculties of Regional Training Centres, District Level Extension Educators and other health personnel of Government and Non Governmental Organizations.

Health and Family Welfare Training Centre (HFWTC): organizes training programs for the sub-district level health personnel of various categories.

Health Promotion and Education unit conducts one year Post Graduate Diploma in Health Promotion and Education course for the health professionals working in Government and non-Government sector

During the year 2013-14, the following activities were carried out under the CTI.

3.1.1. CENTRAL UNIT

The central unit was two wings viz. Communication & Management

3.1.1.1. CENTRAL UNIT (COMMUNICATION & MEDIA WING)

Major objectives

- Train long and short term trainees on communication;
- Develop communication strategy for Health and Family Welfare program implementation; and
- Develop IEC/BCC materials to the requirements of Central/State Governments, area projects, and NGOs on Health and Family Welfare themes.

Apart from training, this department designs and produces contents for printed, projected and non-projected aid on health and family welfare themes to suit the needs of training and community education. It also organizes skill lab sessions on preparation and use of various audiovisual aids for different category of trainees.

Details of Teaching Activities

Media Division staff took classes on communication, BCC, IEC, media, micro teaching, public speaking, presentation skills, mass communication, AV aids, photography, imaging

techniques, fine arts and drawing, etc. for various long term and short-term trainees of the institute such as

- PG Diploma in Health Promotion & Education (1 batch)
 - Diploma in Nursing Education & Administration (1 batch)
 - Diploma in Medical Laboratory Technology (1 batch)
 - Health Visitor Course [Promotional Training for ANM/MPHW(F)](1 batch)
 - Multi Purpose Health Worker (Male) (1 Batch)
 - M.Sc. Nursing students (18 batches)
 - B.Sc. Nursing students (28 batches)
-
- **Training on Health and Sanitation:** Based on the request from Organisation for Eelam Refugees Rehabilitation (OfERR), Chennai, training on “Health and Sanitation” was organized for the health workers for 3 days from 17.12.2013 to 19.12.2013. A total of 25 trainees participated in this training program. Certificates were given to all the 25 participants on successful completion of the training.
 - **Training on Disability Care:** Based on the request from Organisation for Eelam Refugees Rehabilitation (OfERR), Chennai, training on “Disability Care” was organized for the health workers for 3 days from 27.01.2014 to 29.01.2014. A total of 30 trainees participated in this training program. Certificates were given to all the 30 participants on successful completion of the training.
 - **Block placement program:** Based on the request of Mizoram University, this block placement program was organised for a Post Graduate student of Department of Social Work for a period of 4 weeks from 13.01.2014 to 07.02.2014. During this program, the student was oriented on Health communication strategies.
 - **One day workshop on “Digital photography”** was organised for the staff members from Gandhigram group institutions in June 2013. The staff members were given training on handling of camera, shooting techniques, image editing skills, etc. A total of 16 staff members participated and benefited out of this one day workshop.

Short Technical Courses Conducted

Certificate course on Digital photography was conducted for 10 days for rural youth in the month of May 2013. Two (2) students participated in this short course. They were given training on handling of camera, shooting techniques, shot composition, image editing, etc.

Certificate course on Fine arts was conducted for 10 days for rural youth in the month of May 2013. Five (5) students participated in this short course. They were given training on drawing, colouring, painting, modeling, etc.

Skill Lab Session

- **Media Practical for Health Visitor Course [Promotional Training for ANM/MPHW(F)] students** was conducted for 3 days from 05.11.2013 to 07.11.2013. This practical

training helps trainees to understand the importance of audio visual aids in health education. They learned to produce posters, flannel graphs, etc. This practical training helped the trainees to design and prepare low cost teaching aids which can be used for community health education programs. Twenty nine (29) students from Health Visitor course participated in this program.

- **Media practical for PGDHPE course students** was conducted from the period from 14.11.2013 to 27.11.2013. Seventeen (17) students participated and learnt to develop and prepare cost effective IEC materials. Coloring techniques, lettering skills, thermocol drawing and cutting were taught to the students. Hands on training was given to handle various types of audio visual equipments, they were also trained in techniques of using the IEC material for Health promotion programmes in the community.

A special health exhibition was organized on 27.11.2013 in the institute campus on various health themes. The PGDHPE students were taught to organize this exhibition and display the IEC materials prepared by them to the public. Around 100 persons benefited by this exhibition.

- **Media practical for MPH (Male) course students** was conducted for 3 days from 17.03.2014 to 19.03.2014. Fifty (50) students participated in this 3 days training from various districts of the state. They were taught to prepare cost effective IEC materials such as posters, flip charts, flash cards, etc. Apart from this they were trained in public speaking skills.
- **Media practical for short-term training students** was conducted in the month of February 2014. This training helps the M.Sc. Nursing trainees to understand the importance of Audio Visual Aids in Community Health Nursing Education. They learn to produce posters, power points, etc. This practical training helps the trainees to design and prepare low cost teaching aids which can be used for Community Health Education programs. They were also taught to handle various Audio Visual equipments and public speaking skills. Two batches of M.Sc. nursing students underwent this practical training as follows:

Batch-I: Asia Heart Foundation, Kolkata (4 students)

Batch-II: Theerthanker Mahaveer College of Nursing, U.P. (5 students)

Mr. K. Ilango Samuel Peter, STO(C&M) functioned as the convener the following

- Publication committee
- Organized Quality Improvement Circle (QIC) for the trainers.

and also as a member of

- Institute promotion committee
- Project proposal committee

Media support service

1. Screening of films/PA system arrangements

- About 175 video film shows were screened for various long/short term courses.
- 235 Public Address Systems were arranged for community extension education programs
- 324 LCD shows were arranged for various trainings of the institute.
- Photo documentation 51 programs

2. Production work

Apart from the training activities this unit produced the following materials on health topics

- Posters – 138
- Flip charts – 96
- Placard – 1
- Puppets – 15
- Banners – 38
- ID cards – 138
- Prospectus designing (DMLT) – 1
- Flash card – 246
- Handmade slide – 17
- Thermocol model – 17
- Flannel graphs – 16
- Matching cards – 32
- Hanging cards – 18
- Artwork – 16
- Display board –
- Chart work – 2
- Newsletter designing

Media Division



Medical Officer Training



DMLT Class



Fine Arts Course



Digital Photography Workshop



Media Practical for MPHWS



Media Practical for DHPE



Field Visit for OERR NGO Trainees

3.1.1.2. CENTRAL UNIT (MANAGEMENT WING)

All the training programs basically to enhance knowledge, attitude, Skills in technical and managerial aspects of health and its related areas and to provide technical guidance and assistance to the HFWTCs in the states allotted.

These training programs are short-term period, ranges from one week to four weeks for the categories of:

- Trainers of training Institutions viz. HFWTCs, ANM training schools, etc.
- District level medical personnel
- District level paramedical personnel

The special training programmes are being conducted for the program personnel of:

- TINP, ICDS, DANIDA
- Ministry of Railways/ Defence
- Voluntary organizations/NGOs

Training of Key Trainers (Non-Medical) was conducted during 27-29 May 2013.

The objective of the training program to train the faculty members on Non-Communicable diseases viz. CVD, Diabetes, Cervical and breast cancer. During this training program, the participants were explained about causes & effects, importance of prevention and controlling of NCD and Life Style Modifications. External resource persons were Dr.Mohan Raj, District co-ordinator and Dr.Balasundari, Gynaecologist of Govt. Hospital, Dindigul district. There were 5 HFWTC faculty members and 3 Regional Health Teachers Training Institute (RHTTI) faculty members of Gandhigram attended this training.

Training of Key Trainers (Non-Medical) was conducted during 26-28 June 2013.

One batch of this training was conducted as per the Instruction of State Health Society, Chennai. The objective of the training program to train the participants on the usage of computer applications effectively. This training helped the participants to gain knowledge on MS-Office and Internet applications with the practical exposure. There were 5 HFWTC faculty members and 3 Regional Health Teachers Training Institute (RHTTI) faculty members of Gandhigram attended this training.

The Central Unit also took sessions as reported hereunder:

- Health Management Information System(HMIS) -Sessions taken for all the M.Sc.(N) students who were on observation visit to our Institute.
- Health Statistics -sessions taken for all the B.Sc.(N) students who were on observation visit to our Institute.
- Vital Statistics sessions taken for promotional course (6 months) students
- Vital Statistics sessions taken for Multi-Purpose Health Worker course (1 year) students

- Monthly, Quarterly and Annual Financial Management Report was prepared and submitted to State Health Society(SHS), DMS, Chennai. Attended quarterly financial review meetings at SHS, Chennai. Monthly advance pending statements were sent to 7 HUDs and SHS, Chennai. Attended two co-ordination meeting held at our Institute to discuss advance settlement status with the program persons from all the HUDs.
- As Client Service-Administrative co-ordinator being involved in the Workplace based Intervention on NCD project (5 months). In this project, 400 workplaces were identified and awareness and Behavior change activities were done among the 400 workplaces. Attended three review meetings in TNHSP, Chennai.

3.1.2. HEALTH AND FAMILY WELFARE TRAINING CENTRE

Introduction

The Institute started functioning as one of the Regional Family Planning Training Centres (RFPTC) in Tamil Nadu from April 1966. With the change in the nomenclature of the Government's Family Planning Program into Health and Family Welfare Program in the country, the name of the center was also changed into Health and Family Welfare Training Centre from the year 1974. The Health and Family Welfare Training Centre (HFWTC), Gandhigram at the Gandhigram Institute of Rural Health and Family Welfare Trust (GIRH &FWT) is one among the 47 training centres in the country and one of the three centers in Tamil Nadu.

Area covered

HFWTC, Gandhigram trains personnel from five revenue districts in the state containing seven Health Unit Districts (HUDs) namely Dindigul, Palani, Theni, Karur, Ramnad, Paramakudi and Sivaganga.

Performance for the year 2013-14

This department is conducting various short-term training programs for the medical, health and nutrition functionaries of the Govt. Primary Health Centres. Various training programs conducted by the department are funded by National Rural Health Mission (NRHM) through State Health Society, Tamil Nadu. All the training programs are focusing to improve the health status of the people especially those who live in the villages. Main objectives of these programs are envisaged with the following:

- Reduction of infant mortality and maternal mortality.
- Prevention and control of communicable and non-communicable diseases.
- Population stabilization addressing Gender and demographic factors.
- Improving access to integrated comprehensive primary health care.
- Promotion of healthy life-styles.

All the programs conducted in the training centre and HUDs through the training centre were funded by National Rural Health Mission through the State Health Society, Tamil Nadu state.

Various programs conducted in the financial year (2013-14) were :

a) Maternal Health Training

1. Active Management of Third Stage of Labour (AMTSL) training to Medical officers and Staff nurses
2. Basic Emergency Obstetric Care(BEmOC) training to Medical officers of PHCs
3. Skilled Birth Attendant (SBA) Training to Staff-nurses and ANMs

b) Child Health Training

4. Integrated Management of Neonatal and Childhood Illnesses (IMNCI) to Health and Nutrition supervisors and field functionaries
5. Integrated Refresher Training(IRT) to Sector Health Nurses (SHNs) and Community Health Nurses (CHNs)
6. Infant Young Child Feeding(IYCF) Practices training to DTT members, Medical officers, Staff Nurses and CHN/SHN/VHNs

c) Others

7. Managerial Skills Training to Medical officers
8. Adolescent-friendly Reproductive and Sexual-Health services (ARSH) Training to Medical officers
9. Adolescent-friendly Reproductive and Sexual-Health services (ARSH) Training to SHNs/CHNs
10. Adolescent-friendly Reproductive and Sexual-Health services (ARSH) Training to Staff-nurses and ICTC-Counsellors
11. Reproductive Tract Infections and Sexually Transmitted Infections (RTI/STI) training to MOs/SNs/Lab. Technicians
12. Reproductive Maternal and Child Health training
13. Home Based New Born care (NBNBC) for AWW to function as ASHA
14. ASHA training

Detail of the programmes conducted

a) Maternal Health Programs

Government of India considers the Skilled Birth-Attendant as a person who can handle common obstetric and neonatal emergencies, recognize when the situation reaches a point beyond his/her capability and refers the woman or the newborn to a FRU/appropriate facility without delay. Government of India has taken policy initiatives to empower the MOs, ANMs/LHVs/SNs to make them competent for undertaking certain life saving measures. These measures are as follows:

- Permission to use Uterotonic drugs for prevention of PPH.
- Permission to use drugs in emergency situations prior to referral for stabilizing the patient.
- Permission to perform basic procedures at community level in emergency situations.

a.1) Active Management of Third Stage of Labour (AMTSL) Training to MOs (3 days)

The Postpartum hemorrhage is one of the world's leading causes of maternal mortality. Active management of the third stage of labor (AMTSL) is a feasible and inexpensive intervention that can help to save thousands of women's lives. AMTSL involves three basic procedures: the use of a uterotonic agent (preferably oxytocin) within one minute following the delivery of the baby, delivery of the placenta with controlled cord traction, and massage of the uterus after delivery of the placenta, with palpation of the uterus to assess the need for continued massage for the two-hour period following delivery of the placenta. Based on conclusive evidence from clinical trials, the International Confederation of Midwives (ICM) and the International Federation of Gynecology and Obstetrics (FIGO) issued a joint statement in 2003 stating that every woman should be offered AMTSL as a means of reducing the incidence of postpartum hemorrhage.

World Health Organization (WHO) Making Pregnancy Safer Technical Update on Prevention of Postpartum Haemorrhage by AMTSL recommends that "AMTSL should be practiced by all skilled attendants at every birth to prevent postpartum haemorrhage." In this respect the AMTSL training has been imparted to MOs, SNs and ANMs since 2009-10. During this annum, a total of 27 candidates were trained in two batches for three days each in the Hq. hospitals of Ramnad.

No. trained under AMTSL training

Medical officers – 27	2 batches
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a.2) Basic Emergency Obstetric and Newborn Care (BEmONC) Training to MOs (3 days) :

Reducing maternal mortality has arrived at the top of health and development agendas. To achieve the Millennium Development Goal of a 75% reduction in the maternal mortality ratio between 1990 and 2015, countries throughout the world are investing more energy and resources into providing equitable, adequate maternal health services. One way of reducing maternal mortality is by improving the availability, accessibility, quality and use of services for the treatment of complications that arise during pregnancy and childbirth. These services are collectively known as Emergency Obstetric Care (EmOC). The MOs were trained some of such Basic skills in EmOC and hence called BEmOC training. The training was organised in Govt. Theni Medical college hospital for Medical officers of Govt. Primary Health Centres for Dindigul, Palani and Theni to impart skill to avert maternal complications and death of the mothers during emergency obstetric complications. If the MOs of the GPHCs are imparted such skill, a major portion of the maternal deaths can be averted due to the delayed referral to the higher level Hospitals. A total of 74 Medical officers from Dindigul, Palani and Theni HUDs were trained in 14 batches.

No. trained under BEmOC training

Medical officers – 74	14 batches
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a.3) Maternal and Child Health Skill Lab training to MOs and SNs

As part of maternal mortality reduction strategies, MCH skill Lab training was organised in the Institute under the NRHM funding to MOs and Staff Nurses. Main objective of this training has been to improve the skills of the above personnel in conducting normal aseptic delivery, management of complicated labour such as PPH, eclampsia and other high risk deliveries and early referral. The training is imparted through skill demonstration and skill practices with maniquines in the arranged stations. The participant's knowledge and skill are assessed before and after the training by a team of experts like obstetricians, paediatricians, medical officers and public health nursing instructress. The first three days are allotted for the maternal health and remaining two days for the new born care. A total of 70 Medical officers and 291 SNs/ANMs were trained in three batches in 12 batches.

No. trained under MCH skill training

Medical officers – 70	3 batches
Staffnurses/ANMs- 291	12 batches

a.4) Accredited Social Health Activist-Village Health Volunteer (ASHA-VHV) Training

One of the key components of NRHM is to provide every village in the country with a trained female community health activist –the ASHA or the Accredited Social Health Activist. ASHA will be the first port of call for any health related demands to access health services. ASHA will be a health activist in the community who will create awareness on health and its social determinants and mobilize the community towards local health planning and increased utilization and accountability of the existing health services. She would be a promoter of good health practices. She will also provide a minimum package of curative care as appropriate and feasible for that level and make timely referrals.

Capacity building of ASHA is critical in enhancing her effectiveness. It has been envisaged that training will help to equip her with necessary knowledge & skills resulting in achievement of scheme's objectives. Capacity building of ASHA has been seen as a continuous process. They were trained using 7 modules each module was covered in 4 spells of 4-5 days each by the DTT members of the concerned HUDs.

A total of 155 Voluntary Health Activists(VHVs) were trained in all the 7 modules in the annum.

a.5) Skilled Birth Attendants (SBA) Training to SNs and ANMs (15 days)

Around 15% of all pregnant women develop a potentially life-threatening complication that calls for skilled care and some will require a major obstetrical intervention to survive.

Training of Skilled Birth Attendants (SBA) was organized in the Govt. Hq. Hospital, Dindigul. The objective of the training is to upgrade skills of ANMs/Staff Nurses posted in 24 hours PHCs to improve the quality of intra-partum and new born care in institution and achieve better maternal and infant salvage. The candidates were deputed from the HUDs namely- Dindigul, Theni, Karur, Ramnad and Paramakudi. Ten staff nurses of PHCs were trained under SBA in two batches.

No. trained under SBA training

SNs– 10	2 batches
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a.6) Emergency Lab Techniques Training for SNs (3 days)

Emergency Lab techniques training is a three days training programme for SNs of GPHCs with the objective of improving the skill of SNs in basic Lab techniques like basic urine analysis, blood grouping, Hb, blood glucose and urine albumin and sugar test etc.,. In the absence of a regular lab technician the staff nurses will find it difficult to manage the emergency cases without appropriate test results. Hence, acquiring such skills by the staff nurses is essential to take care of the delivery cases safely. Hence, five batches of Emergency Lab techniques training to staff nurses were organised. A total of 113 staff nurses attended the training. It is a hands-on training imparted by the specialists in the department of Microbiology, Bio-Chemistry and pathology at Madurai Medical college.

Staff nurses - 113	5 batches
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a.7. Integrated Management of Neonatal and Childhood Illness (IMNCI) Training to Health and Nutrition Functionaries (IMNCI-HN Training)

The health and nutrition field functionaries namely VHN, AWW, SHN, CHN, Child Development Project Officers (CDPOs), Nutrition Supervisors were given training on various aspects of Integrated Management of Neo-natal and Child hood Illnesses.

The training is organised in two phases as follows:

- i) General IMNCI training for 8 working days and
- ii) Refresher IMNCI for 3 working days

a.7.1. General IMNCI training (8 days)

The objectives of the program were as follows:

To develop technical skills in -

- Early referral of seriously ill children and young infants
- Provide home care to young infants
- Treating children with dehydration by ORS solution and
- Treating children with pneumonia and young infants with local bacterial infection by cotrimoxazole

To improve communication skills in –

- Advising the mother on feeding infants and children
- Keeping young infants warm and giving fluids
- Relieving cough by home remedies
- Observing child for selected signs for follow-up and timely consultation

It is team training with the objective of providing the services in the field in a comprehensive manner by health and nutrition functionaries.

A total of nine batches of training were conducted and 208 candidates were trained. Karur, Ramnad, Paramakudi, and Sivaganga HUDs conducted the training under the supervision of our Institute.

AWWs -208	9 batches
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a.7.2. Refresher IMNCI training to Health and Nutrition functionaries (3 days)

Health and Nutrition functionaries who had already completed the basic IMNCI training were given a refresher training on IMNCI for 3 working days. A total of 200 H&N functionaries were trained in 9 batches as follows:

CHN	5	9 batches
VHN	161	
ANM	14	
SHN	20	

a.8. Infant Young Child Feeding (IYCF)

The Global Strategy for Infant and Young Child Feeding is to revitalize world attention to the impact the feeding practices have on the nutritional status, growth, development, health, and survival of infants and young children. Many mothers, who initiate breastfeeding satisfactorily, often start complementary feeds or stop breastfeeding within a few weeks of delivery. In addition, many children, even those who have grown well for the first six months of life, do not receive adequate complementary feeds. This may result in malnutrition, which is an increasing problem in many countries. More than one-third of under-five children are malnourished. They are stunted, wasted, deficient in vitamin A, iron or other micronutrients. Malnutrition contributes to more than half of the 10.6 million deaths each year among young children in developing countries. Information on how to feed young children comes from family beliefs, community practices and information from health workers. It has often been difficult for health workers to discuss with families how best to feed their young children due to the confusing, and often conflicting, information available. Inadequate knowledge about how to breastfeed, the appropriate complementary foods to give and good feeding practices is often a greater determinant of malnutrition than the availability of food. Hence, there is an urgent need to train all those involved on counseling in infant feeding counseling, in all countries, in the skills needed to support and protect

breastfeeding and good complementary feeding practices. There is also an urgent need to train those who work in areas where HIV is a problem. These women have to be counseled on infant feeding, according to standard guidelines.

The main aim of IYCF programme is to improve the breast feeding and to develop appropriate weaning practices among pregnant, lactating mothers and their family members in order to reduce the infant and young children mortality and morbidity.

The training is being conducted in two stages. In the first stage a trainers' training program was conducted in the Regional Training Institutes (RTIs) for the District training team members and in the second stage at the field level, that is, in the HUDs, by the TOT trained personnel. Three types of training were conducted with two of them in the second stage as follows:

- i) IYCF-TOT training for Dt. Trg. team members (IYCF-TOT)
- ii) IYCF training for MOs and SNs (IYCF-MOs/SNs) and
- iii) IYCF training for CHN/SHN/VHN (IYCF- CHN/SHN/VHN)

a.9) Infant Young Child Feeding TOT (IYCF – TOT)

In the first phase all the district training team members were trained in the RTI and subsequently they were involved in the training of medical and nursing personnel in the HUDs. One batch of training was conducted for 28 Medical and nursing personnel as follows:

MO	14	1 batch
DMCHO	6	
CHN	7	
SHN	1	

In the second stage the training was conducted for MOs and SNs and then to CHNs, SHNs and VHNS in the HUDs.

a.10) IYCF training to MOs and SNs (IYCF –MOs/SNs) 3 days

Medical officers are the managers of GPHCs. As a team leader he/she has to act as an effective supervisor and trainer. Hence, they are being trained under IYCF for a period of three days so as to supervise their subordinates in the day to day functioning. This training is being conducted by the TOT trained personnel for three working days each in the HUDs. A total of 633 MOs/SNs have been trained in 21 batches.

MOs/SNs – 633	21 batches
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a.11) IYCF training to CHNs/SHNs/VHNs (3 days)

The CHN, SHN and VHNs are the personnel who are going to educate the mothers and family members on appropriate practices to feed infants and young children. Hence, these categories of staff were trained in the HUDs by the TOT trained personnel for 3 days. A total of 665 CHNs/SHNs/VHNs were trained in 22 batches.

CHNs/SHNs/VHNs – 665	22 batches
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a.12) Reproductive Maternal and Child Health (RMNCH) for SNs/Lab. Technicians (5 days)

Counseling is a critical public health intervention and service, which when delivered appropriately and effectively, can go a long way in addressing the barrier created by lack of awareness among the clients about the availability of various reproductive, maternal, newborn, child health and family planning services in the public sector health facilities in India. To provide counseling services, a dedicated RMNCH Counselor is being placed at the public sector health facilities under the National Rural Health Mission. It is envisioned that the counselor will play a key role in increasing awareness and generating demand for the various RMNCH services provided at the facilities. The counselor is expected to ensure that all the women, children and families coming to the health facilities are given appropriate information about the available RMNCH services at the facility. RMNCH training was organised in the Institute for 5 days. A total of 81 SNs from GPHCs and Govt. hospitals were trained in 4 batches to strengthen their skill in counseling techniques.

SNs – 81	4 batches
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a.13) HBNBC-ASHA-AWWs

Apart from the regular ASHA/VHVs appointed in the tribal areas in Tamil Nadu, the State Health Society planned to train all the Angan Wadi Workers to function as ASHA in the high IMR districts. A total of 213 AWWs were trained in 7 batches in the Institute.

AWW - 213	7 batches
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a.14) Managerial Skill Training to Medical Officers (13 days)

The MOs of PHCs are exposed to various national health policies, goals of Reproductive and Child Health(RCH) and National Rural Health Mission(NRHM) at national and state levels. The content of the curriculum included organisation structure, functions, supervisory arrangement and various other managerial functions such as personnel, financial, material and vehicle management.

Induction training to MOs

The curriculum has been developed based on the training needs expressed by the participants, programme requirements and in the context of NRHM and RCH requirements. Participatory learning and teaching methods are used throughout the course. Ample opportunities are made available for exchange of ideas and experiences, clarifying doubts and practicing the skills learned. The teaching methods include lectures, discussions, case studies, simulations, structured exercises, field visits, computer simulations and field visits. Well experienced resource persons in the field of public health actually shared their experiences among the participants. Inter-disciplinary faculty adds value addition to the training. They were also taken to PHCs and district drug ware house, Dindigul of Tamil Nadu Medical Services Corporation (TNMSC) for practical exposures.

A total of 101 MOs of Government Primary Health Centres(GPHCs) were trained in four batches.

Medical officers – 101	4 batches
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a.15) Reproductive Tract Infection/Sexually Transmitted Infection (RTI/STI) Training

Community based surveys indicate that about 6 % of adult population in India suffers from sexually transmitted infections and reproductive tract infections. The prevalence is considerably higher among high risk groups ranging from 20 – 30 %. HIV epidemic is still concentrated in the core groups in India and the reversal of the HIV epidemic needs an effective prevention and control of sexually transmitted infection. Syndromic case management (SCM) has been endorsed by the WHO as a comprehensive approach for STI/RTI control. As per the convergence framework of NACO-NRHM for STI/RTI service delivery uniform service delivery protocols, operational guidelines, training packages & resources, has been developed.

Trainees are actively participating in a Group work

Apart from SCM the training curriculum includes topics such as public health importance of STI/RTI, history taking, management of cases affected due to sexual violence, male participation, partner treatment, history taking, counselling etc., The participants visited Madurai Medical college and Govt. Rajaji hospital at Madurai for skill orientation. The training was imparted to Lab technicians, SNs and MOs of GPHCs. The duration of the training was 2 days for lab technicians and 3 days for both SNs and MOs.

Training	Duration	No. of batches	No. trained
RTI/STI training to			
i)Lab. Technicians	2 days	5	99
ii) SNs	3 days	13	285
iii) MOs	3 days	12	215

a.16) Adolescent Reproductive and Sexual Health (ARSH) Training

The adolescent (age 10-19) population is estimated as 230 million and they constitute over one-fifth of the population. Adolescent boys and girls have limited access to health services: adolescent girls are caught in the cycle of early marriage, repeated pregnancies and childbearing; they also suffer from poor nutrition, and early-childbearing and reproductive health complications compound the difficulties of adolescent physical development.

Young boys face problems that are equally sensitive as that of girls. Their issues concerns poor acknowledgement and response to their feelings. The workers involved in boys' programmes need to be sensitive and client-centred, that is, they should be male-centred and male-positive.

Addressing adolescents is one of the vital strategies in the RCH programme framework for achieving Reproductive and Child Health (RCH) goals of the country, with special reference to the reduction of IMR, MMR and TFR. Factors such as delaying age at marriage, reducing incidence of teenage pregnancy, prevention and management of obstetric complications including access for early and safe abortion services and reduction of un-safe sexual behavior influence are vital and hence the Adolescent Friendly Health Services (AFHS) are recommended by the Government.

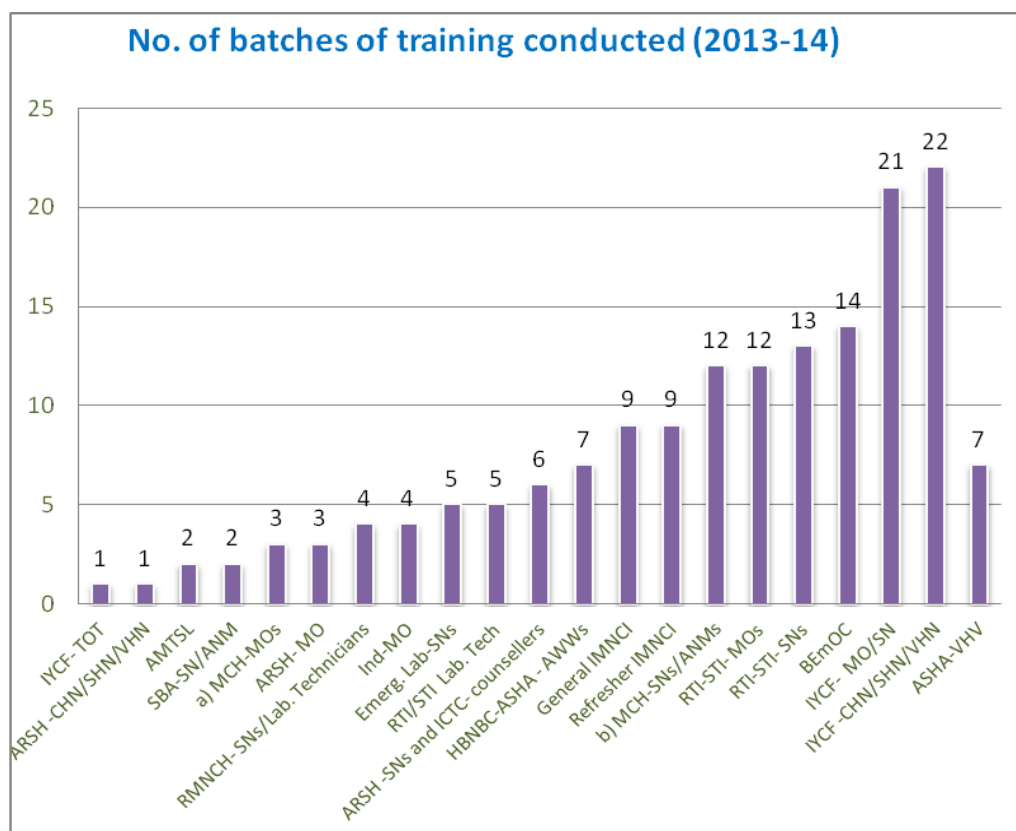
In order to implement the ARSH programmes effectively, orientation programmes were designed for service providers. The training programmes were organized on a pilot basis for all the medical and paramedical personnel working in Dindigul HUD and later replicated throughout Tamil Nadu state by the respective RTIs.

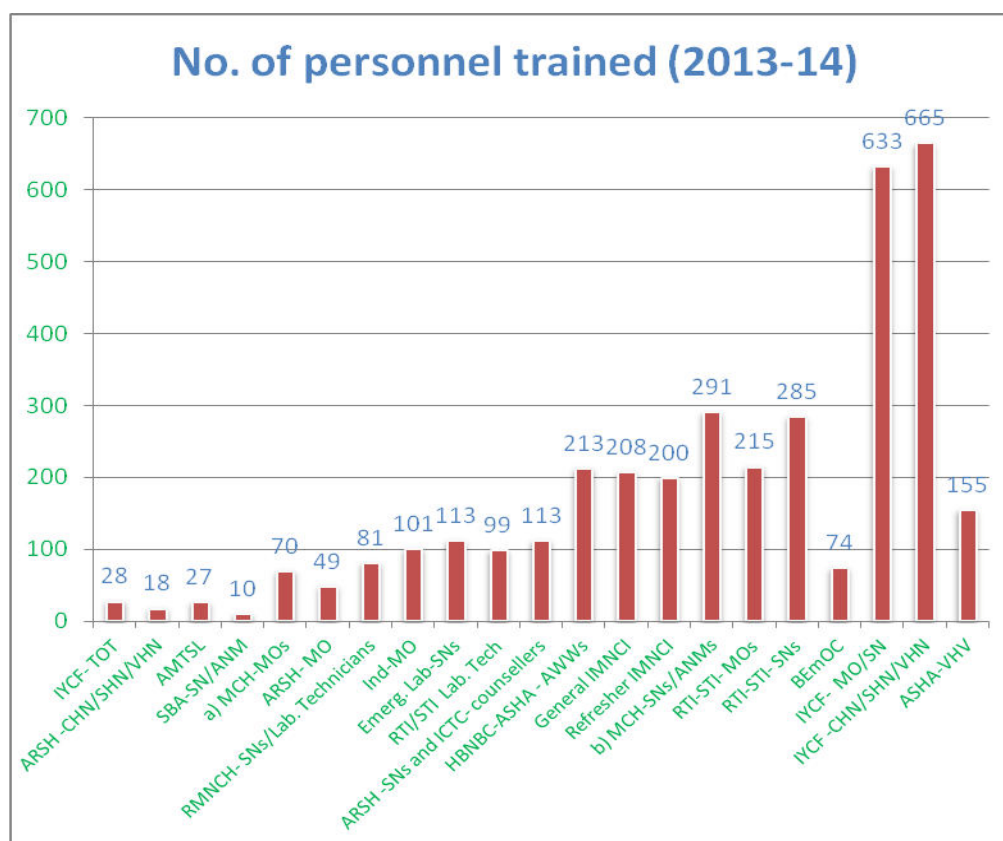
The training facilitated for:

- Enhancing knowledge on the characteristics of adolescent development
- Appreciating the needs of adolescents
- Equipping with information on resources to provide AFHS
- Planning to indicate the changes and deliver AFHS through Teen Clinics at the PHC level and through routine clinics at HSC level
- Role play on counseling

ARSH training was conducted for MOs, CHN/SHN/VHNs and SNs/ICTC-counselors by the Institute. A total of 180 personnel (49 MOs, 18 CHN/SHN/VHNs and 113 SNs/ICTC counsellors) were trained in 10 batches.

Training	Duration	No. of batches	No. trained
ARSH training			
i) CHN/SHN/VHN	5 days	1	18
ii) SNs & ICTC-counsellors	5 days	6	113
iii) Medical officers	3 days	3	49





II) Long-term training

i) Multi Purpose Health Worker (Male) (MPHW-M) Training (1 year) – 50 candidates

One year Multi Purpose Health Worker's training was conducted with 50 candidates (Sponsored by DPH, Govt. of TN) since 17.04.2013. The course has been completed during the month of April, 2014.

Abstract of Training Performance (2013-14)

i) Short-term training:

S. No	Name of Scheme	Training load for 2013-14	Duration	Achievement	
				No. of batches	No. trained
a) Maternal Health					
1.	AMTSL	160	3 days	2	27
2.	BEmOC	93	6days	14	74
3.	MCH SKILL Lab Training i) MOs	150	5 days	3	70
	ii) SNs/ANMs	420	5 days	12	291

4.	ASHA-VHV	176	5 days	7 module s each	155
5.	SBA-SN/ANM	90	21 days	2	10
6.	Emergency Lab. Technics to SNs	300	3 days	5	113
b) Child Health					
7	General IMNCI	782	8 days	9	208
8.	Refresher IMNCI	360	3 days	9	200
9.	Infant Young Child Feeding(IYCF)- TOT for Dt. Trg.team members	30	3 days	1	28
10.	Infant Young Child Feeding(IYCF)- MO/SN	1571	3 days	21	633
11.	Infant Young Child Feeding(IYCF) - CHN/SHN/VHN	1709	3 days	22	665
12.	RMNCH- SNs/Lab. Technicians	115	5 days	4	81
13.	HBNBC-ASHA - AWWs	336	7 Modules each 4 spells of 4- 6 days each	7	213
C) Others					
14.	Managerial Skill Training - MOs	150	15 days	4	101
15.	RTI/STI i) Lab. Technicians ii) SNs iii) MOs	202	2 days	5	99
		540	3 days	13	285
		420	3 days	12	215
16.	ARSH i) CHN/SHN/VHN ii) SNs and ICTC- counsellors iii) Medical officers	30	5 days	1	18
		270	5 days	6	113
		150	3 days	3	49

Trainings of HFWTC



3.1.3. POST GRADUATE DIPLOMA IN HEALTH PROMOTION AND EDUCATION

Introduction

The post Graduate Diploma in Health Promotion and Education (PGDHPE) course is conducted from the year 1964. The course is affiliated to the Tamil Nadu Dr.MGR Medical University, Chennai and commences during the month of July of every year. The course is approved by Medical Council of India. The course prepares the health education professionals as specialists with effective leadership skills in promoting the objectives of the National Health and Family Welfare programs by involving rural people and through inter-sectoral co-ordination and community health education.

Employment Opportunities

The participants get employment opportunities in Block, District and State level organizations, area projects and training institutions. The in-service trainees get promotion and elevated to higher positions as Health Educators, District Communication Officers, Trainers, Project Co-ordinators, Program Planners and so on. There is a wide opportunity to work as Lecturers and Professors in foreign universities.

Criteria for Admission

Educational qualifications are either post graduation or graduation with 2 years of community experience. The participants who are deputed by the employers in the Government sector are given direct admission. Private candidates are selected through an entrance test and interview.

The course content includes: Theory (60%), Field training/ practical (40%). The course content include the subjects related one:

Communicable Disease Control and National Health Programs
Health Administration and Environmental Sanitation
Maternal Child Health Nutrition and Health Statistics
Community Organization, Development and Health Education
Behavioural Sciences and Research Methodology
Communication Methods and Media.

Activities

The activities reported here include a brief note on the activities of the 49th batch (2012-2013) and details of the performance of the 50th batch (2013-2014) of the trainees. The trainees of the 49th batch were placed in the Health departments of the states of Tamil Nadu, Andhra Pradesh, Odisha, Sikkim and Nepal for supervisory Field Training (SFT) from 1st May 2013, the trainees submitted SFT reports by 08.06.2013 and these were evaluated by the Faculty-in-charge and Dr.P.Nandagopalsamy, Director.



SFT Programme

Regarding Supervisory Field Training programme for placement of trainees in their native area (state) the contact address and guide name was collected from the trainees for arrangement of SFT programme after the University Examination in the month of April.

Admission for 50th batch

The admission procedures were initiated in the month of March 2013. After scrutinizing the applications according to the eligibility criteria (Graduates with experience or Post Graduates of any discipline) the selected candidates include candidates from Tamil Nadu, Andhra Pradesh, Odisha, and Nepal. The Nepal students are deputed by the Nethra Jothi Sangh , Eye Hospital, Nepal. The Nepal Government also deputed candidates without salary for this course.

Commencement of 50th Batch (2013-2014)

The 15 PGDHPE trainees joined the course in the month of July 2013. The course orientation sessions were held from 15.07.2013 to 18.07.2013. The regular classes commenced from the 3rd week of July 2012. Besides theory classes, well planned skill lab sessions on group approach, designing schedules, and media materials preparation strengthened the training.

Group Laboratory Sessions

The Institute conducts group laboratory sessions, so as to make the trainees to realize the importance of team work. The trainee were tested of their team spirit and learned how to behave in a group situation. They were stimulated to change their inhibitions and to work as cohesive members of the group. The group lab provided opportunity to identify strengths and weaknesses and enlightened the trainees on the importance of integrated service and team work.

This year, group lab session were conducted for the trainees in the month of September 2013 every alternate day (one session) i.e. from 02.09.2013 to 20.09.2013.

Concurrent Field Training (CFT)

Orientation on survey tool preparation for Concurrent Field Training (CFT)

From 21.09.2013 to 30.09.2013, orientation of CFT was conducted. The trainees got skill in the preparation of health survey tools, method of administration of these tools in the field

and the importance of pre-testing and community involvement from the initiation to the final stage of the field work.

After orientation, the trainees were given experience in planning, designing, implementing and evaluating the health education programs and the outcome of their programs in the selected villages namely Vittalnayackenpatti, Kakkathoppu and Chatrapatti of Vedaendur block. The trainees conducted field survey from 01.10.2013 to 09.10.2013 and analyzed the data from 01.11.2013 to 11.11.2013.

Field Seminar for Peer Evaluation:

The Institute organized field seminar as a means to expose and enlighten them on various aspects of the rural health problems and improve their perceptions through peer review. The field seminar was held on 12.11.2013 to 13.11.2013. The trainees presented the survey findings. The comments and suggestions of the fellow trainees and the faculty built in them the concept of validating one another's concept and expectations.

Action plan for field activities:

With the guidance of the faculty the trainees prepared an action plan for the health education intervention in their respective village. The action plans were prepared after the Orientation training camp for the selected village leaders as to ensure community participation,. The OTC program was held on following dates and places:

Kakkathoppu	-	06.12.2013
Vittalnayackenpatti	-	12.12.2013
Chatrapatti	-	13.12.2013

The action plan included schedule for integrating with Government institutions, approaching community groups, schedule for mass, group and individual approaches for health education to solve the identified health problems. The health problems were mostly related to environmental sanitation, temporarily family planning methods, RTI/STI and nutrition and the trainees planned IEC programs for elicited community participation through educating the community.

Media practical

The media practical was conducted at the Media department of the Institute from 15.11.2013 to 27.11.2013. The trainees got experiences in the preparation of various kinds of media materials such as posters, slides, flip charts, flex charts and also got skill in operating AV equipments.

Observation visits

The observation visits were arranged from 27.01.2014 and 28.01.2014. These visits helped the trainees to observe how the public health standards are practiced in the sites they visited: Slow sand and rapid sand water filtration unit in Thirumoothimalai, Milk Dairy Unit , Water purification unit in Madurai and Slaughter house, Dindigul.

Examination

The trainees had study holidays from 1st to 6th April 2014 and appeared for the university examination from 07.04.2014 to 15.04.2014 and viva voce on 21.04.2014.

Result of the 49th batch was published and of the 28 candidates who appeared for the examination 26 candidates passed all the papers and the two trainee appeared for the supplementary examinations held in the month of October 2013.

Model Examination:

First model examination was conducted for the DHPE trainees from 10.02.2014 to 18.02.2014 and second model examination was conducted for the DHPE trainees from 24.03.2014 to 29.03.2014. The theory paper was evaluated and feedback given by the faculty members.

CFT activities:

In the month of February Health Cultural Programme was conducted at three CFT villages (CFT area) and Faculty-in-charge attended the programme at Kakkathoppu.

Special Activities

The 15 trainees attended the International Global Public Health Conference organized by Community Medicine department, SRM Medical College, SRM University, Chennai from 21.02.2014 to 23.02.2014

Dr.M. Abbas, Faculty-in-charge presented the poster presentation on “EFFECTIVENESS OF VARIOUS ISSUES OF FAMILY LIFE EDUCATION ON REPRODUCTIVE HEALTH AMONG SCHOOL ADOLESCENTS” and the poster was awarded by the conference committee.

Gandhi Jayanthi Day

The PGDHPE trainees celebrated the Gandhi Jayanthi festival on 05.10.2013 at Pithalaipatti village, Athoor Block. Dr. R. Kousalya Devi, Managing Trustee, Gandhigram Trust and Village President and people presided over the function.

Community Dinner

On 6th October 2013, the Community Dinner function was organized by Gandhigram Rural University. The trainees actively take part in the Community Dinner programme. The sister Institution staff and their family members were joined the Community Dinner which is used to conduct in every year.

Republic Day

The trainees also participated in and celebrated the 65th **Republic Day** in our Institute. This year, Dr. M. Abbas, faculty-in-charge, DHPE department, hoisted the National flag and given Republic Day message to the participants

Functions of 2013 - 14



3.2. REGIONAL HEALTH TEACHERS' TRAINING INSTITUTE

Introduction

The Regional Health Teachers' Training Institute [RHTTI], Gandhigram, sanctioned as one among the six centers by the Ministry of Health and Family Welfare, Government of India, conducts long-term and short-term courses as under:

Objective

1. To train Public Health Nurses / Nursing Supervisors / Nursing Tutors for the southern region through DPHN/DNEA courses.
2. To organize specific learning experiences in community health for Basic / Post Graduate Nursing students through short term courses.

CONSOLIDATED REPORT OF ACTIVITIES

A. LONG TERM COURSES

S.No.	Course Name	Batches / Period	No. of Trainees
1.	Diploma in Nursing Education and Administration (DNEA)	XII batch (July 2012 – May 2013) (completed)	9
2.	Diploma in Nursing Education and Administration (DNEA)	XIII batch (July 2013 – May 2014) (on-going)	2
3.	Health Visitor Course [Promotional Training for ANM/MPHW (F)]	July – December 2013 (completed)	29

B. SHORT TERM COURSES

S.No.	Course	No. of trainees	Duration	State / UT
1.	B.Sc. (N)	743	1 week	Tamil Nadu, Kerala, Puducherry
2.	P.B.B.Sc. (N)	1	1 week	Tamil Nadu
3.	M.Sc. (N)	71	1 to 3 weeks	Tamil Nadu, Puducherry, Kolkata, U.P., Kerala, Karnataka
4.	G.N.M.	69	1 week	Tamil Nadu
5.	DSI & DMPHW(F)	55	1 day	Puducherry
	Total trainees	939		

TRAINING ACTIVITIES OF RHTTI

LONG TERM COURSE

1. DIPLOMA IN NURSING EDUCATION AND ADMINISTRATION (DNEA) – 10 months

The XII batch of DNEA trainees had their preparatory work for II-semester Govt. Board examinations through revision classes and model examinations. The Govt. Board examinations for the II-semester were conducted in the first week of May 2013. The trainees were relieved on 15.05.2013 after the completion of the course.

The XIII batch of DNEA course was scheduled between July 2013 and May 2014. Issue of applications and receipt of filled-in applications for the XIII batch was in progress to enroll the candidates. After scrutiny of applications as per the Indian Nursing Council criteria, admission orders were sent to the eligible candidates for the academic year 2013-14. The XIII batch of DNEA course commenced on 15th July 2013 with enrollment of 2 candidates.

After the orientation about the Institute, regular classes commenced. Theory sessions were handled by the faculty of RHTTI and HFWTC on different subjects. In addition, the following hands on practical training were provided to the students.

Posting for Clinical Nursing

As part of the curriculum requirement in Clinical Nursing, the DNEA trainees were posted at Leonard Hospital, Batalagundu, for bedside nursing care from 19.08.2013 to 30.08.2013. They got clinical experience in various departments such as Male & Female Medical ward, Female & Male Surgical, Intensive Care Unit (ICU) & Post operative ward. During the postings, the trainees learned bedside nursing care, care study, clinical presentation, ward teaching program, nursing process/nursing care plan on medical and surgical nursing and in assisting the physician on special procedures.

RCH Posting

During the 1st week of September 2013 (from 02.09.2013 to 06.09.2013), the trainees were posted at Dindigul Government Head Quarters Hospital and got exposure to RCH care such as Antenatal Check-ups, health teaching to the pregnant mother, new born care, care of sick babies and pre term babies, assessment and care of post natal mother, case study and preparation of pediatric nursing care plan. The trainees presented assignments on pediatric nursing care plan and mother care record.

Concurrent Field Training (CFT)

During the last week of September 2013 (from 16.09.2013 to 27.09.2013) the trainees were given Concurrent Field Training (CFT) at Kalladipatti village of Ammayanakkanur PHC area. The learning experiences during CFT were household survey and analysis, under-5 assessment, nutrition demonstration, school health program, conducting Focus Group

Discussion for adolescents and mothers of under-5 children. The other programs were demonstration of participatory learning method, conduction of antenatal clinic, leadership survey, ICDS visit etc.

Observation Visits

- Trainees were taken to District Tuberculosis centre (DTC), District Head Quarters Hospital, Dindigul on 07.10.2013. The learning experiences at DTC were case diagnosis, filling up of treatment card, classification of treatment regimen, Sputum examination in the laboratory, DOT therapy, visiting the DOT provider and health teaching to the patients.
- The trainees were posted to the Family Planning Association of India, Dindigul, on 08.10.2013 to learn about various family planning methods and to observe sterilization procedures.
- The Trainees visited Aavin Milk Diary, Madurai to observe milk pasteurization, sewage farm at Avaniyapuram and Regional Vaccine storage centre, Madurai on 11.10.2013.
- Observation visit was made on 17.10.2013 at Viralipatti (Periyakulam) to observe slow and rapid sand filtration.

Psychiatric Nursing Experience

The DNEA students were posted for psychiatric nursing experiences from 04.11.2013 to 13.11.2013 at Govt Rajaji Medical College Hospital, Madurai, to learn about history taking and assessment, case study, nursing care plan, assisting in ECT treatment and Rehabilitation of Psychiatric patients.

Commencement of Second Semester

The second semester starts from 3rd week of December 2013 and will continue till 2nd week of May 2014. In this semester students were free to choose their electives either "*Community Health Nursing and Administration*" or "*Institutional Nursing and Administration*". According to their electives the classes and clinical postings were given to the students. The theory sessions taken in this week were Educational Foundation-I & II, preparation of lesson plan, assignment on preparation of lesson plans on three topics - Maternal Health, Child Health, and General Nursing. They were presented in the class room for review.

Supervisory Field Training (SFT)

On completion of academic training built in with Supervisory Field Training, the DNEA students were placed at Ammayanayakanur Block Primary Health Centre for Supervisory Field Training (SFT) from 03.02.2014 to 21.02.2014. The objective of SFT is to undertake independent responsibility to plan, implement and evaluate the program of RCH and family

planning, nutritional activities in the PHC. The SFT training was provided in supervisory skills by using standardize supervisory tools.

Govt. Board Examinations

During the period under report (April 2013 to March 2014), the following Govt. Board examinations were conducted by Director of Public Health and Preventive Medicine, Chennai, in respect of DNEA course:

DNEA Batch	Semester	Examinations held on	Remarks
12 th batch	II-semester	9-14 th May 2013	9 trainees appeared
13 th batch	I-semester	10-13 th Dec 2013	2 trainees appeared

Results

During the period under report (April 2013 to March 2014), the following Govt. Board examinations results were received:

DNEA Batch	Semester/ held on	No. of trainees		Remarks
		Appeared	Passed	
12 th batch	I-semester Dec 2012	9	9	All pass
12 th batch	II-semester May 2013	9	9	All pass

HEALTH VISITOR COURSE [PROMOTIONAL TRAINING FOR ANM/MPHW(F)] – 6 months

Admission and commencement

Twenty nine (29 nos.) of candidates from various Municipal Corporations of Tamil Nadu have joined promotional training for ANM/MPHW (F) of 6 months duration on 01.07.2013. The details of the candidates are furnished below:

S.No.	Corporation	No. of candidates
1.	Madurai	06
2.	Coimbatore	06
3.	Salem	11
4.	Erode	02
5.	Thoothukudi	02
6.	Tiruppur	02
Total		29

Theory sessions

After the inauguration of the course on 01.07.2013 we have started taking regular theory sessions by RHTTI and HFWTC faculty on the following subjects:

Anatomy & Physiology, Community Health Nursing, Sociology, Principles of Nursing Care, Nutrition, Psychology, Paediatric Nursing, and Environmental Health, Midwifery, Supervision and Communication.

Clinical postings

As part of the curriculum requirement, the trainees were posted in clinical areas as furnished below:

Batch	No. of trainees	Period of posting		Clinical area	Learning experience
		From	To		
Batch-I	15	01.8.2013	15.8.2013	Medical, Surgical, Paediatric, and Maternity Wards of Leonard Hospital, Batlagundu	Care of patients, Nursing care plans, Clinical presentation, Maintenance of Mother care record, Health teaching programme
Batch-II	14	16.8.2013	30.8.2013		
Batch-I	15	07.10.2013	-	District Tuberculosis Centre, Govt. Headquarters Hospital, Dindigul	To learn about RNTCP, Drug Regime, Sputum Test, and care of Tuberculosis patients
Batch-II	14	08.10.2013	-		
Batch-II	14	07.10.2013	-	Family Planning Association of India, Dindigul	To learn about various family planning methods and to observe sterilization methods
Batch-I	15	08.10.2013	-		

Concurrent Field Training (CFT)

The trainees were also posted in Ammayanayakanur block PHC for concurrent field training (CFT) to complete household survey and analysis, conducted antenatal clinic, participated in immunization sessions, school health program, organized nutrition demonstration and exhibition, ICDS visit, practiced participatory learning methods and focus group discussions, conducted leadership survey and orientation training program for the leaders:

S.No.	Period	Place	Posting for (subjects)
1.	From 16.09.2013 to 27.09.2013	Kalladipatti village, Ammayanayakanur Block PHC	Concurrent Field Training (CFT)

Observation visit

The trainees were taken for observational visit to the following places as furnished below:

S.No.	Period	Place	Posting for (subjects)
1.	26.07.2013	Blood bank, Anbagam HIV/ AIDS Hospice, Dindigul	To learn about functions and activities of blood bank and HIV/ AIDS hospice
2.	11.10.2013	Aavin Dairy Milk, Sewage Farm, and Walk-in Cooler, Madurai	To learn about milk pasteurization, disposal of waste and vaccine storage
3.	17.10.2013	Rapid and slow sand water filtration, Viralipatti	To learn about water filtration systems

Supervisory Field Training (SFT)

The trainees were posted for supervisory field training for 3 days from 28.10.2013 to 30.10.2013 at Ammayanayakanur PHC to learn about supervision and management skills required at PHC level. During SFT, the trainees were able to learn maintenance of records and reports, using of rating scale and check list to assess the existing facilities of PHC and HSC, using of quality assessment check list, and preparation of check list for immunization session. Theory sessions were taken by the Medical Officers, Community Health Nurse, and Sector Health Nurse on Health Care Delivery System, Role of SHN, Role of CHN, Supervision Skills and Food Safety measures.

Media practicals

The trainees were posted in Media division for communication skill and media practicals from 05.11.2013 to 07.11.2013 (3 days) to learn about Audio Visual Aids preparation and handling.

Examinations

Model theory and practical examinations were conducted for the trainees between 9th and 16th December 2013. The Govt. Board examinations were conducted from 23rd to 30th December 2013. After completion of board examinations, the trainees were relieved on 31st December 2013.

Renewal/validity from Indian Nursing Council

Steps have been taken to renew the Health Visitor course for the academic year 2014-15.

SHORT-TERM COURSES IN COMMUNITY HEALTH NURSING

This course is being run to enrich undergraduate and post graduate nursing students' knowledge, attitude, and skills in technical and managerial aspects of health and its allied areas in community health. The period of training ranges from one day to four weeks. The flow chart of the programs is furnished as follows:

S.No.	Name of the Nursing College	Name of the course	No. of trainees	Period of Training
1.	M.E.S. College of Nursing, Kerala	B.Sc.(N) (2 batches)	46	1-5 March 2013 8-12 March 2013
2.	Annai Dora College of Nursing, Theni	B.Sc.(N)	13	1-5 April 2013
3.	Govt. College of Nursing, Kottayam, Kerala	M.Sc.(N)	4	8-12 April 2013
4.	Sri Aurobindo College of Nursing, Karur	B.Sc.(N)	30	8-12 April 2013
5.	Mother Teresa College of Nursing, Puducherry	M.Sc.(N)	5	15-19 April 2013
6.	E.S. College of Nursing, Villupuram	B.Sc.(N) (2 batches)	39	15-19 April 2013 22-26 April 2013
7.	Pondicherry University Community College, Puducherry	DSI & DMPHW	55	19 th April 2013 (1 day)
8.	West Fort College of Nursing, Thrissur, Kerala	B.Sc.(N)	50	13-17 May 2013
9.	Christian College of Nursing, Ambilikai	B.Sc.(N)	51	17 th June 2013 (1 day)
10.	R.V.S. College of Nursing, Coimbatore	M.Sc.(N)	2	17 th June to 5 th July 2013
11.	Alva's College of Nursing, Karnataka	M.Sc.(N)	3	1-5 July 2013
12.	Madurai Medical College, Madurai	M.Sc.(N)	5	29 th July to 2 nd Aug 2013
13.	City College of Nursing, Mangalore, Karnataka	M.Sc.(N)	4	12-23 Aug 2013
14.	Upasana College of Nursing, Kollam, Kerala	M.Sc.(N)	6	12-23 Aug 2013
15.	Thanthai Roever College of Nursing, Perambalur	M.Sc.(N)	3	14-23 Aug 2013
16.	Al Shifa College of Nursing, Malappuram, Kerala	M.Sc.(N)	5	26-30 Aug 2013
17.	College of Nursing, Ananthapuri Hospitals & Research Institute,	B.Sc.(N)	44	26-30 Aug 2013

	Thiruvananthapuram			
18.	Christian College of Nursing, Neyyoor, Kanyakumari District	M.Sc.(N)	4	2-6 Sep 2013
19.	Annai Dora College of Nursing, Theni	B.Sc.(N)	22	7-11 Oct 2013
20.	Christian Fellowship Hospital, Oddanchatram	G.N.M.	35	8 th Oct 2013 (1 day)
21.	C.S.I. Eliza Caldwell College of Nursing, Idaiyangudi	B.Sc.(N)	26	21-25 Oct 2013
22.	Sree Abirami College of Nursing, Coimbatore	B.Sc.(N)	18	4-8 Nov 2013
23.	Dr. Kumaraswami Health Centre College of Nursing, Kanyakumari	B.Sc.(N) (2 batches)	40	11-15 Nov 2013 18-22 Nov 2013
24.	Sree Abirami College of Nursing, Coimbatore	B.Sc.(N)	18	25-29 Nov 2013
25.	College of Nursing, Dr. Mahalingam Paramedical Sciences & Research, Erode	B.Sc.(N) (2 batches)	42	2-6 Dec 2013 9-13 Dec 2013
		G.N.M.	5	9-13 Dec 2013
		M.Sc.(N)	2	2-6 Dec 2013
26.	Annammal College of Nursing, Kuzhithurai, Kanyakumari District	B.Sc.(N)	40	16-20 Dec 2013
27.	S.R.M. College of Nursing, Kattankulathur, Kancheepuram District	M.Sc.(N)	4	6-10 Dec 2013
28.	Matha College of Nursing, Manamadurai	M.Sc.(N)	1	6-10 Dec 2013
29.	Sacred Heart Nursing College, A. Vellodu	B.Sc.(N)	46	21&22 Jan 2014
30.	Asia Heart Foundation, Kolkata	M.Sc.(N)	4	3-14 Feb 2014
31.	East Coast Institute of Medical Sciences, Puducherry	B.Sc.(N) (2 batches)	48	3-7 Feb 2014 10-14 Feb 2014
32.	Aladi Aruna College of Nursing, Alangulam	B.Sc.(N) (2 batches)	36	17-21 Feb 2014 24-28 Feb 2014
33.	M.E.S. College of Nursing, Malappuram, Kerala	B.Sc.(N) (2 batches)	42	17-21 Feb 2014 24-28 Feb 2014
34.	Theerthanker Mahaveer University, Moradabad, U.P.	M.Sc.(N)	6	17-28 Feb 2014
35.	Athiparasakthi College of Nursing, Melmaruvathur	G.N.M. PBBSc(N)	29 1	3-7 Mar 2014
		B.Sc.(N) (3 batches)	92	10-14 Mar 2014 17-21 Mar 2014 24-28 Mar 2014

36.	Holy Family College of Nursing, Idukki, Kerala	M.Sc.(N)	4	24-28 Mar 2014
37.	Mother Teresa Post Graduate Research Institute of Health Sciences, Puducherry	M.Sc.(N)	4	24-28 Mar 2014
Total short-term trainees			939	

UPGRADATION OF DNEA COURSE INTO POST BASIC B.Sc. (NURSING) PROGRAM

The Indian Nursing Council, New Delhi, has instructed us to upgrade the 10 months DNEA course into Post Basic B.Sc. (Nursing) program at our Institute from the academic year 2013-14 onwards. Necessary proposal had been prepared and sent to the Ministry for its approval.

We received 'in principle' approval in October 2013 from the Ministry of Health & Family Welfare, Govt. of India, New Delhi, for upgradation of existing DNEA course into Post Basic B.Sc. (Nursing) program. On receipt of this approval letter, we have sent a letter to the Ministry seeking clarifications regarding Indian Nursing Council's norms and requested sanction order for upgradation of Post Basic B.Sc. (Nursing) program from the academic year 2014-15.

REGIONAL HEALTH TEACHERS' TRAINING INSTITUTE

COMMUNITY ACTIVITIES



4. ADHOC PROJECTS

4.1. Non Communicable Disease – a State level work place based intervention project

Work place based intervention to create awareness regarding Non-Communicable Diseases (NCD) in Tamil Nadu

A team consisting of the Director, a Media expert, Health education expert and a Research expert viz. took the roles as follows in this project and carried out the activities:

- Dr. P. Nandagopalsamy, Director
Team Leader
- Mr.K.Ilango Samuel Peter, Senior Technical Officer (Communication & Media)
State Project Co-ordinator
- Dr.M.Malarvizhi, Teaching Faculty, Health education Department
Communication Expert
- Dr.S.Ravichandran, Additional Director, Population Research Centre
Consultant

This team jointly prepared an Expression of Interest (EoI) followed by the submission of a detailed full proposal to Tamil Nadu Health Systems Project (TNHSP). This proposal was technically selected by the NCD team of the TNHSP, Government of Tamil Nadu, to carry out the state level intervention project.

An overview of the project

Project Title

Design and implement workplace interventions to create awareness & to enable behavior change and health seeking behavior among the workforce & their families on Non communicable diseases like Cardio Vascular diseases, Diabetes mellitus, Cervical Cancer & breast cancer in the state of Tamil Nadu

Background

The Tamil Nadu Health Systems Project is being implemented in Tamil Nadu from January 2005 with the financial assistance from the International Development Association. The primary focus of the project is to strengthen the secondary level health facilities in providing quality health care services to the poor thereby reducing the mortality, morbidity and disability especially in the areas of maternal and child health, tribal health and non communicable diseases.

One of the important activities amongst various other activities include creating awareness about Non Communicable Diseases such as Cardiovascular Diseases (Hypertension and Diabetes mellitus) cervical and breast cancer and their predisposing risk factors through sensitization campaigns and to bring about life style and behavior modification among various target groups in the state of Tamil Nadu and also provide screening and treatment services.

Over the last few decades, Tamil Nadu has made considerable progress in public health care delivery system. The disease burden to communicable disease has come down to a large extent. However, the non – communicable diseases, especially Cardiovascular disease, diabetes mellitus, various cancers etc are showing an increasing trend. Non communicable diseases, due to their chronicity account for high morbidity and mortality with an increasing trend in the developing countries.

Burden due to Cardiovascular diseases

In India, Cardiovascular Disease (CVD) is the largest cause of death and disability. By 2020, 2.6 million Indians are predicted to die due to coronary heart disease, which constitutes 54.1% of all CVD deaths. Nearly, 50% of these deaths are likely to occur among the productive young / middle age group, which will have a negative bearing on the Indian economy.

Pilot project on CVD Prevention & Treatment program

The Tamil Nadu Health Systems initiated efforts for risk factor reduction for Cardiovascular Diseases. The pilot programme was carried out (2007 – 2009) by the Media department of Gandhigram Institute of Rural Health and Family Welfare in two districts namely Virudhunagar and Sivaganga. It was aimed in creating awareness about CVD and its predisposing risk factors through sensitization campaigns and to bring about life style and behavior modification in the target group. Specific BCC interventions for schools such as formation of heart clubs, organizing of competitions, rallies were done. Sensitisation programme, rallies, formation of heart clubs, lecture sessions, advocacy done to bring changes in the eateries were means of interventions addressed for the various target groups. Activities like village heart clubs, group meetings, heart mela etc were done in the community. In addition IEC was done in the form of print, indoor and outdoor displays and mass media propaganda were carried out in the pilot districts to create awareness on the various factors causing CVD and to create a life style modification among individuals above the age of 30 years. All persons (Males/Females) above age of 30 years were screened for Hypertension and Diabetes Mellitus at all primary health centres, government hospitals, medical college hospitals, municipal hospitals etc. It is expected that from the awareness created, the people by themselves should present at nearest health facilities for screening of these diseases.

Burden due to Cervical cancer

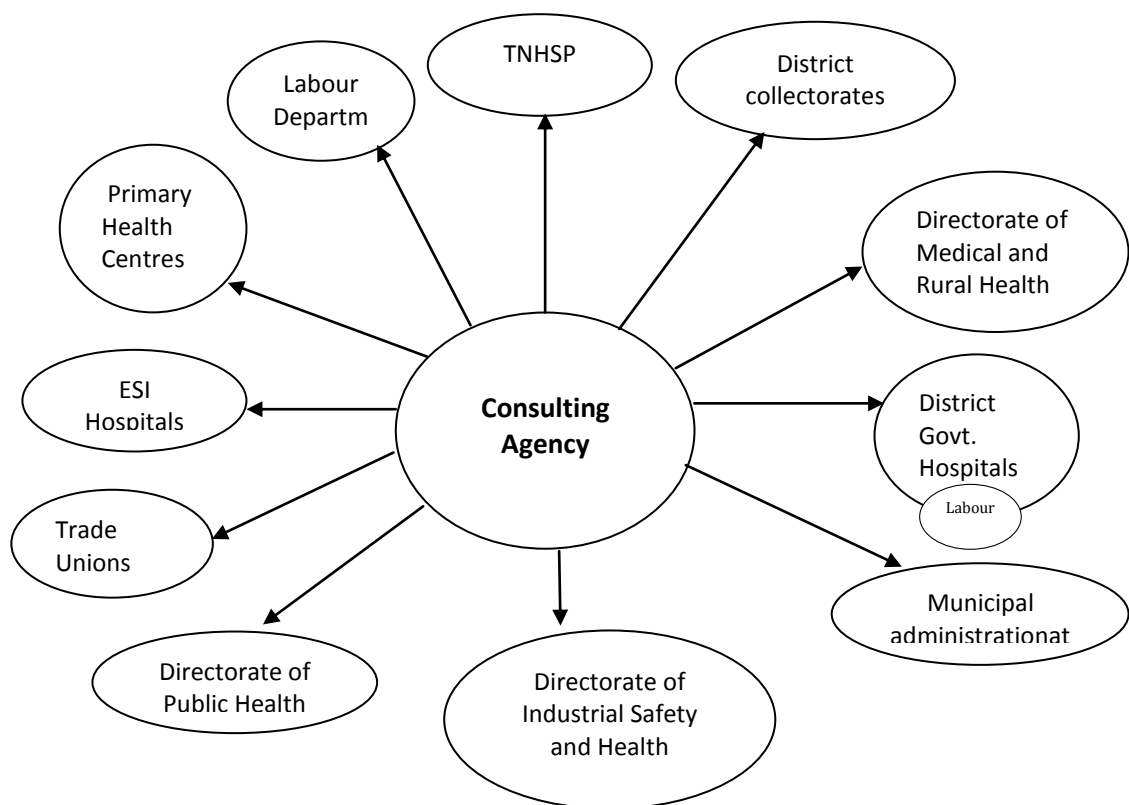
The Incidence of Cervical Cancer is very high in Tamil Nadu. It is the most common cancer occurring in Women. 80% of the population living in rural areas is at high risk due to low

socio economic status, poor genital hygiene, early marriage, lack of awareness on the disease and availability of services. Early detection, screening and treatment are key factors to prevent the risks for cervical cancer.

Upscaling the program and collaboration with other departments

In the upscaling programme of Non Communicable Diseases, services will be provided for prevention, screening and treatment of the following four diseases **Cardiovascular Diseases (Hypertension), Diabetes Mellitus, Cervical and Breast cancer** for the entire state of Tamil Nadu in a phased manner.

In the upscaling programme, in addition to implementing the Non Communicable Diseases programme in the three tiers of health system namely DPH, DMS and DME, it is planned to involve other departments like Education, Rural Development, Labour, ESI and Municipal administration to reach out to various groups in the community thus ensuring best results.



Self Help Groups (SHGs), community professionals and the community resource persons of the rural development department will help as a referral link to educate and motivate people in the community for better health seeking behavior. However inorder to reinforce the messages and to create mass awareness for the working group there is a need to organise specific communication activities in the workplaces and similarly among the school children by formation and conducting of activities through “Health Clubs”.

In coordination with TNHSP and Directorate of Industrial Safety and Health (DISH), the project team of our Institute carried out the following activities initially in 400 factories across Tamil Nadu for a period of 20 weeks.

- Organising state level and regional level advocacy meetings in coordination with the Labour department officers and other key officials in the workplace and labor unions to enlist support for the work place interventions.
- Pilot testing of activities in selected factories of urban, rural and tribal areas
- Sensitization meetings in workplaces to realise the burden of NCD
- Implementation of intensive advocacy programs on Life style modification

Milestones of the project

- 1) Contract signing on 23.7.2013 with TNHSP, Government of Tamil Nadu
- 2) Project inauguration on 19.8.2013
- 3) Induction training to RCOs in September
- 4) Submission of inception report
- 5) State level NCD advocacy workshop at Chennai on 29.08.2013
- 6) 16 Regional level NCD advocacy workshops across Tamil Nadu
- 7) Recruitment of 192 field staff in the first week of September
- 8) Preparatory work for hiring of cultural troop
- 9) Designing of first set of IEC materials
- 10) Finalisation of the list of factories for the intervention

Special Programs Conducted

- **Induction Training for the Regional Coordinators (RCOs) of NCD project**
As a part of the NCD work place based intervention 4 Regional coordinators were identified. The training was conducted at Gandhigram from 20.08.2013 to 22.08.2013. They were trained on the key messages to be delivered regarding NCD, communication strategies to be followed, plus their roles and responsibilities in the project. Each RCO were allotted 8 districts and assigned the responsibility to carry out the project activities in their region with the support of the field staff.
- **State level NCD workshop for the state level stake holders**
A state level NCD advocacy workshop was organised at Chennai on 29.08.2013. The aim of this workshop was to orient the stake holders about the workplace based intervention project of Gandhigram. There were representatives from the State Government, Labour department, Directorate of Industrial Safety and Health (DISH). The strategic communication that was planned to carry out this project was conveyed in the workshop by the NCD core team of Gandhigram. Totally there were 46 participants who shared their views and also gave their suggestions to carry out the project in 800 workplaces across Tamil Nadu in two spells (400 + 400)
- **Regional level NCD workshop for the regional level stake holders**
16 Regional level NCD advocacy workshops were organised across Tamil Nadu in September 2013. The objective of these workshops is to orient the representatives

from the Government and from the workplaces about the NCD intervention. The NCD core team members gave the participants a clear idea about the implementation strategies for the workplaces and also noted the suggestions that emerged from the workshop. The details of the workshops conducted are as follows

Region/Place	Date	Region/Place	Date
Vellore	10.09.2013	Dindigul	13.09.2013
Villupuram	11.09.2013	Madurai	27.09.2013
Tiruvallur	13.09.2013	Trichy	26.09.2013
Kancheepuram	12.09.2013	Tanjore	30.09.2013
Salem	20.09.2013	Virudhunagar	10.09.2013
Erode	12.09.2013	Sivagangai	11.09.2013
Tiruppur	10.09.2013	Tuticorin	13.09.2013
Coimbatore	13.09.2013	Tirunelveli	12.09.2013

Key personnel of the project to carry out the field activities

Dr.R.Naranaswamy, Director i/c, GIRH was the Team Leader.

Mr.M.Chellamuthu, faculty of the department of health promotion and education was the project coordinator of the NCD project.

Mr.K.Rajaperumal, Health Education Officer, HFWTC, was the communication expert.

Mr.S.Ravishankar statistical assistant was the Client Service and administrative in charge.

- **Orientation training to staff**

3 days induction/orientation training was organized for the field staff as two batches from 15.11.2013 to 17.11.2013 and 18.11.2013 to 20.11.2013 at our institute. The induction training was focused about detailed sessions on Hypertension, Cardio Vascular Disease, Diabetic millets and cancer breast and cervix and ways to prevent and control them by the experts in the field.

- **Preparation of IEC materials, pre testing**

Totally 20 numbers of IEC form boards (5 boards for each disease) on Non Communicable Diseases with content and design prepared by Mr.K.Rajaperumal, communication expert in this project. The IEC boards contained signs and symptoms, causative factors, consequences and prevent and control NCDs. The prepared IEC materials were pretested in three workplaces from 07.11.2013 to 09.11.2013 and 27.11.2013 as final.

- **Submission of BCC plan**

The BCC plan with appropriate methods and media and duration of the activities, against the programme of sensitization and BCC activities prepared and submitted to TNHSP for their concurrence and approval.

- **Demo show**

On 28.11.2013, Demo show on the approved activities (IEC exhibition, healthy food exhibition, and cultural programme, live demo on yoga and meditation and video clippings on NCD) for the interventions on NCD was carried out at our institute in front of the experts from TNHSP, DISH and Public Health Department to make a shape in the proposed interventions activities.

NCD Workplace Based Intervention Project



- **Pilot testing**

Pilot testing on interventions on NCD such as sensitization programme, special lecture programme, IEC exhibition, Healthy food exhibition, Cultural programme on NCD, Live Demo on Yoga and meditation, sports and quiz programme, video clippings on NCDs and formation of clubs were carried out in three different workplaces of Tribal (02.12.2013 to 04.12.2013) Rural (05.12.2013 to 07.12.2013) and Urban (06.12.2013, 08.12.2013 and 09.12.2013) areas.

Selection of cultural troops 14 cultural troops were selected through advertisement from all the area of Tamil Nadu to conduct cultural programme in 400 workplaces. These 14 troops were trained by a well trained master troop. The role play, skit and songs for the cultural programme were prepared by Mr.M.Chellamuthu, Project Coordinator and Mr.K.Rajeperumal, Communication Expert of this project. The Role play, skit and songs were prepared for 2 to 3 hours approximately.

Phase – II

The second phase was the implementation phase which include the following activities

- **Sensitization meeting**

One hour sensitization programme was organized for the authorities, workers and family members of the workers to orient and prepare them to gain more information during the intervention period. The sensitization meeting was carried out by the district coordinators and the field coordinators of the NCD project. This sensitization programme was carried out for 5 weeks from the 4th week of November to 4th week of December 2013.

- **Arranging special lecture**

During the sensitization period guest lecture programme also organized. The guest lecture on NCDs was spoken by the Medical Doctors from TNHSP, DISH, and Public Health Department and the trained experts in the field of NCDs. The number of guest lecture programme for every workplace was based on the need, convenience and requirement of the workplaces. Duration of the guest lecture programme was minimum one hour.

- **Exhibition on IEC and Healthy Food**

The printed IEC material were exhibited in the common places such as canteen, meeting hall, open place and in the dining hall wher the workers can access at any time. 20 boards which contain all NCDs were exhibited from morning to evening to cover all the workers. The IEC materials kept in a sequential order by diseases. The district coordinators and the field coordinators clarified the doubts raised by the workers.

Along with the IEC exhibition Healthy food exhibition was also organized to provide awareness about the food stuffs need to be taken in our daily diet. Green leafy, vegetables, cereals, millets, grains, fruits and boiled food items such as idly, idiyappam, puttu were kept with their nutritive value and calories.

- **Cultural programme**

The professional trained troops were used to conduct cultural programme among the workers. The cultural troop consists of 6-7 members with musician. The message and information was delivered in local, easily understandable language. The duration of the cultural programme was 2 hours.

- **Live demo – yoga and meditation**

Live demo in yoga and meditation was arranged to give exposure about yoga and its significant role in prevent and control of non communicable diseases. Qualified and well experienced yoga expert handled the yoga and meditation session. During live demo the workers also encouraged to follow yoga master to do yoga.

- **Interpersonal communication (one to one and one to group meeting)**

Group meeting and one to one meeting were conducted to clarify the doubts related to NCDs and motivated to adopt a good healthy practices including going for screening to know their health status.

- **Formation of clubs (heart club, cycle club, walking club)**

In every workplaces various health club such as heart club, cycle club, walking club were formed and insisted them to have a conversation about NCDs among the workers whenever time permits.

- **Report submission**

As per the proposed plan the workplace based interventions on NCDs to be completed in 400 workplaces as on first week of March 2014. But only 388 were completed and the reaming 12 workplaces was identified and completed with the support of TNHSP and DISH by end of April 2014. As soon as completed the interventions in all the workplaces final report with all relevant photographs for every activity for each work places prepared as 4 volume and submitted to TNHSP, chennai.

4.2. STATE TRAINING RESOURCE CENTRE (STRC)

Objectives

The purpose of establishing the State Training and Resource Centre is to build capacities of Targeted Intervention project functionaries to ensure qualitative improvement in their functioning and to achieve the objective of prevention of new HIV infections among HRGs and bridge population. State training and Resource Centre also ensures the need based quality training of TIs as per NACP III's technical and operational Guidelines. It also develops local resources like facilitators for training, demonstration sites to ensure that the skill development process is sustained and apart from these, it shall also undertakes operational research and learning site development.

Scope of work

STRC will train various categories of staff working in TI projects:- Project Director, Program Managers, Finance and Administrative officers, Counsellors ANMs Outreach Workers and Peer Educators Monitoring and Evaluation, Doctors or any others as indicated by NACO. In the FY 2013-2014, STRC has trained 1376 staffs on four thematic trainings in coordination with TANSACS and Technical Support Unit, APAC. The below tabular column provides the information on the training load for various trainings according to the typology of Tis and the status of the numbers trained for the period of April 2013-September 2013

Status of the Training Load and the Trained Status																	
State: Tamilnadu and Pudhucherry																	
For the period of April 2013 to September 2013																	
S#	Thematic area - for training	Categories of staff to be trained in the period of April 2013 to September 2013								Category of staff and numbers trained (Typology Wise)							
		Typology								Typology							
		FSW	MSM	IDU	TG	Comp	Mig-rants	Truc-kers	Total	FSW	MSM	IDU	TG	Comp	Mig-rants	Truckers	Total
1	Induction training	25	11			58	7	2	101	25	30			29	7	2	91
2	Outreach Planning	13	9			24			46	13	9			24			46
3	Refresher Peer Education	266	240			681	89	118	1394	232	186			594	81	117	1210
4	Peer Education	25				10			35	24			5				29
5	Total	329	260			773	96	120	1576	294	225		5	647	88	119	1376

STRCs will hold regular meetings with TANSACS and Technical Support Unit of TANSACS for sharing and discussing program progress, emergent lessons, and outcomes. STRC is generally being reviewed every year based on the reports submitted and also by the trainings conducted. The annual performance review of STRC shall be conducted at the end of every year and based on satisfactory performance, extension will be given.

5. SELF-FINANCING COURSE

5.1. DIPLOMA IN MEDICAL LABORATORY TECHNICIAN (DMLT) COURSE (2 YEARS)

Apart from these short-term programs the department is conducting two year Diploma in Medical Laboratory Technology course affiliated to King Institute of Preventive Medicine, Guindy, Chennai under the control of Directorate of Medical Education. It is conducted as co-education course for candidates having +2 qualification with an aggregate of 50% marks in science subjects. It is a self-financing course with hostel arrangement for both boys and girls.

- 100% result in the board examination 2014
- Regular classes are going on for the I & II years students
- The process of admission for 2014-16 is on

DMLT students at laboratory



6. DISSEMINATION

6.1. LIBRARY

The Library of the Institute was actively engaged in the procurement, processing and maintenance of books, journals, reports and other printed documents and served the ever increasing demand for effective dissemination of knowledge and development of skills.

The Library of the Institute has a collection of 10,423 books and 4000 back volumes of periodicals included various subjects related to Public Health, Population, Family Welfare, RCH, Communication, Sociology, Environmental Sanitation, Concepts and Components of RCH, Behavioural Sciences, Health Education, Mass Communication, Training, Psychology, Social Psychology, Research Methodology, Anthropology, Management, Statistics, Economics, Nutrition, Medicine, Nursing and so on. It received 50 periodicals both on gratis and by subscription. It also received almost all the WHO publications by subscription. Around 1,500 visitors utilized the Library during this period. 1,700 books were issued. Better information services are rendered through computer database and network and CD ROM facilities.

As current awareness service, we are bringing out a monthly Bulletin namely GandhiLib Current Awareness Monthly News Bulletin in which we list all the Books, Periodicals, Reports, etc., received every month.

7. ADMINISTRATIVE STRUCTURE

BOARD OF TRUSTEES

The Institute is governed by Board of Trustees comprising eminent personalities in public life and professionals in the field of Public Health, Population, Rural Development, Nutrition and Family Welfare. The Chairman of the board implements policy decisions through a full time Director who is also the member-secretary of the Trust. The Director is responsible for the day-to-day administration of the Institute. Under the co-ordination and supervision of the Director, functions the research, training, extension service and administrative wings of the Institute. The names of the current members of the Board of Trustees are listed as below:

BOARD OF TRUSTEES

<p>Smt. Lakshmi Pranesh, I.A.S.,(Rtd) Former Chief Secretary to Govt. of TN Old No.48, New No.30, Rukmani Road, Kalachetra Colony, Besant Nagar (Extension), Chennai – 600 090 Chairman</p>	<p>The Secretary to Government of India Ministry of Health and Family Welfare Nirman Bhavan New Delhi – 110 108 Member</p>
<p>The Secretary to Govt. of Tamil Nadu Health and Family Welfare Department Government of Tamil Nadu Secretariat, Chennai – 600 009 Member</p>	<p>The Director of Public Health & Preventive Medicine DMS Office Complex, 359 Anna Salai, Teynampet, Chennai – 600 006 Member</p>
<p>The Director International Institute for Population Sciences (Deemed University) Govandi Station Road Deonar, Mumbai – 400 088 Member</p>	<p>The District Collector, Dindigul District Velunachiar Compound Dindigul – 624 004 Member</p>
<p>The Senior Regional Director Regional Office for Health & Family Welfare (Ministry of Health & Family Welfare), Govt. of India, A-2A, Rajaji Bhawan, Besant Nagar, Chennai – 600 090 Member</p>	<p>Dr. R. Jayaraman Principal Officer-CED Trust, 54, Visuvasapuri First Street, Gnanaolivupuram Madurai – 625 016. Member</p>
<p>The Medical Superintendent Kasturba Hospital Gandhigram – 624 302 Member</p>	<p>Dr. R. KousalyaDevi Life Trustee, Gandhigram Trust Gandhigram – 624 302 Member</p>
<p>Dr. G. Natchiar Director (HRD), Aravind Eye Hospital Anna Nagar, Madurai – 625 020 Member</p>	<p>The Vice Chancellor Gandhigram Rural University Gandhigram – 624 302 Member</p>
<p>Shri D.V. Jayaraman Partner M/s. V. Ramasamy Iyer & Co., Chartered Accountants A-55, M.V.M. Nagar, Karur Road Dindigul – 624 001 Member</p>	<p>Shri M.R. Rajagopalan Managing Trustee Gandhigram Trust, Gandhigram – 624 302 Member</p>
<p>Shri K. Shivakumar Gandhigram Trust Gandhigram – 624 302 Member</p>	<p>The Director, GIRH & FWT Soundram Nagar, Gandhigram – 624 302 Member Secretary</p>

EXECUTIVE COMMITTEE

Sl. No.	Executive Committee Member Name & Address	Status on the Executive Committee
1.	Shri M.R. Rajagopalan Managing Trustee Gandhigram Trust GANDHIGRAM – 624 302	Chairperson
2.	Dr. R. Kousalya Devi Life Trustee Gandhigram Trust GANDHIGRAM – 624 302	Member
3.	Prof. A. Joseph Dorairaj, Vice Chancellor i/c, Gandhigram Rural University GANDHIGRAM – 624 302	Member
4.	Shri D.V. Jayaraman (Institute Auditor) Partner M/s. V. Ramasamy Iyer & Co., A-55, M.V.M. Nagar Karur Road DINDIGUL – 624 001	Member
5.	The Director GIRH & FWT Soundram Nagar GANDHIGRAM – 624 302	Member Secretary
6.	Shri M. Chellamuthu Teaching Assistant-DHPE, GIRH & FWT Soundram Nagar GANDHIGRAM – 624 302	Elected Member (Teaching staff)
7.	Shri N. Rajakumar Computed Operator (PRC) GIRH & FWT Soundram Nagar GANDHIGRAM – 624 302	Elected Member (Non-Teaching staff)

The Board has constituted a Finance Committee to review the financial position of the Institute and accounting system, scrutinize the budget, analyze expenditure and suggest methods to improve the financial position of the Institute. The Finance Committee reviews all the audited reports and suggests steps to implement them. This committee at present consists of the following members:

FINANCE COMMITTEE

Sl. No.	Finance Committee Member Name & Address	Status on the Finance Committee
1.	Shri K. Shivakumar, B.Sc.,FCA.,FICWA.,DMA.(ICA) Finance Committee (GIRH & FWT.,) Secretary, Gandhigram Trust, Gandhigram 624 302.	Convener
2.	Shri M.R. Rajagopalan Secretary Gandhigram Trust Gandhigram – 624 302	Member
3.	Prof. Dr.R. Jayaraman Principal Officer, CED Trust 54, Visuvasapuri First Street, Gnanaolivupuram, Madurai – 625 016.	Member
4.	Shri D.V. Jayaraman, B.Com., F.C.A., Chartered Accountants Institute Auditor M/s. V. Ramasamy Iyer & Co., A-55, M.V.M. Nagar, Karur Road Dindigul 624 001	Member
5.	The Director GIRH & FWT Soundram Nagar Gandhigram – 624 302	Member Secretary

8. ANNEXURES

8.1. Participation of faculty/staff members in workshop/seminars

Name & Designation	Program details	Date	Place
Dr.S.Ravichandran, Chief	Annual Action Plan meeting	27.03.2014	Thiruvananthapuram
Dr.N.Dhanabaghyam, Asst. Chief	Orientation workshop on monitoring Health Systems & Programs	12.07.2013 to 14.07.2013	NIHFW, New Delhi
Dr.N.Dhanabaghyam, Asst. Chief	Annual Action Plan meeting	27.03.2014 To 29.03.2014	Thiruvananthapuram
Dr. J. Joseph Durai Selvam, Research Investigator	Training on “ Statistical Computing using R ”	27.08.2013 & 28.08.2013	Department of Biostatistics, CMC, Vellore

Dr. J. Joseph Durai Selvam, Research Investigator	Orientation workshop at MDWS, New Delhi	26.12.2013	MDWS, New Delhi
Mr.V.Saravanakumar, Research Investigator	Training course on monitoring under NRHM	07.10.2013 To 11.10.2013	NIHFW, New Delhi
Mr.V.Saravanakumar, Research Investigator	Attended Training on R-HMIS and SAS	29.11.2013 to 31.11.2013	State Health Mission, Puducherry
Mr.V.Saravanakumar, Research Investigator	ICSSR sponsored Research Methodology workshop entitled, "Short Course on Quantitative Data Analysis"	19.02.2014 To 28.02.2014	Department of Demography, University of Kerala, Trivandrum
Mr.M.Senthilkumar, Field Investigator	ICSSR sponsored Research methodology workshop on 'Qualitative Data analysis'	19.02.2014 & 20.02.2014	Demography University of Kerala, Trivandrum
Mr.K.Ilango Samuel Peter, STO (C & M)	Smt. Savitri Keshavlal Oza Seminar on "Rural Water Supply and Sanitation"	11.11.2013	Gandhigram Rural University, Gandhigram
Mr.K.Ilango Samuel Peter, STO (C & M)	As resource person for soft skill program and handled session on 'Effective Communication Skill'	21.12.2013	Gandhigram Rural University, Gandhigram
Mr.K.Ilango Samuel Peter, STO (C & M)	Third Co-ordination Council Meeting (sharing of resource among Gandhigram group institutions)	22.01.2014	Gandhigram
Mr.K.Ilango Samuel Peter, STO (C & M)	As Resource Person for Refresher Training program for Working Women's Forum (WWF) to handle session on Motivation and Team Building Skills	17.03.2014 & 24.03.2014	Home Science Department, Gandhigram Rural University
Mr. K. Ilango Samuel Peter, STO (C & M)	NCD sensitization program	05.04.2013	TNHSP, Chennai
Mr. K. Ilango Samuel Peter, STO (C & M)	NCD project consultation meetings	30.04.2013 20.05.2013 25.06.2013 07.08.2013 23.08.2013 02.09.2013 31.10.2013	TNHSP, Chennai
Mr. K. Ilango Samuel Peter, STO (C & M)	NCD project contract signing meeting	23 & 24.06.2013	TNHSP, Chennai

Mr. K. Ilango Samuel Peter, STO (C & M)	Resource person for NCD State level NCD workshop at Chennai	29.08.2013	TNHSP, Chennai
Mr. K. Ilango Samuel Peter, STO (C & M)	Regional level workshops	Sept 2013	Vellore, Villupuram, Kanchipuram, Thiruvallur, Tiruchirappalli, Madurai and Tanjore

8.2. STAFF DETAILS

SANCTIONED STAFF STRENGTH AS ON 31.03.2014 (GOVT. GRANTS AND INSTITUTE FUND)

I. GOVERNMENT GRANT

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.1. CTI-Central Unit				
1.	Director	1	1	0
2.	Senior Training Officer (Mgmt.)	1	0	1
3.	Senior Technical Officer (Comm. & Media)	1	1	0
4.	Statistical Assistant	1	1	0
	Total	4	3	1
1.2. CTI-Diploma in Health Promotion & Edn.				
5.	Professor in Health Education	1	0	1
6.	Lecturer in Health Education (Medical)	1	0	1
7.	Lecturer in Health Education (Non-Medical)	1	1	0
8.	Lecturer in Behavioural Sciences	1	1	0
9.	Teaching Assistant	4	3	1
	Total	8	5	3
1.3. CTI-Health & Family Welfare Trg. Centre				
10.	Principal	1	0	1
11.	Medical Lecturer-cum-Demonstrator	1	0	1
12.	Social Science Instructor	1	0	1
13.	Health Education Instructor	1	1	0
14.	Statistician	1	1	0
15.	Public Health Nurse Instructor	1	1	0
16.	Health Education Extension Officer	1	1	0
17.	Senior Sanitarian	1	1	0
18.	Senior Health Inspector	2	2	0
	Total	10	7	3
1.4. CTI-Administrative Unit				
19.	Administrative Officer	1	0	1

20.	Office Superintendent	1	0	1
21.	Senior Accountant	1	1	0
22.	Stenographer	1	1	0
23.	Steno-Typist	3	3	0
24.	Librarian	1	0	1
25.	Upper Division Clerk	2	1	1
26.	Artist-cum-Draftsman	1	1	0
27.	Projectionist	1	1	0
28.	Store Keeper-cum-Clerk	1	1	0
29.	Clerk-cum-Typist	2	2	0
30.	Driver	6	3	3
31.	Attender	2	2	0
32.	Peon-cum-Daftry	1	1	0
33.	Domestic Staff	3	3	0
	Total	27	20	7
2. Regional Health Teachers Training Institute				
34.	Principal	1	1	0
35.	Public Health Nursing Officer	3	1	2
36.	Senior Sanitarian Officer	1	1	0
37.	Health Education Officer	1	0	1
38.	Lower Division Clerk	1	1	0
39.	Steward – cum-clerk	1	1	0
40.	Attender	1	1	0
41.	Domestic Staff	2	2	0
42.	Cook	1	1	0
	Total	12	9	3
3. Population Research Centre				
43.	Chief	1	1	0
44.	Assistant Chief	1	1	0
45.	Research Officer	2	0	2
46.	Research Investigator	4	3	1
47.	Field Investigator	4	1	3
48.	Computor	1	0	1
49.	Tabulator	1	1	0
50.	Machine Operator	1	1	0
51.	Computer Operator	1	1	0
52.	Documentalist	1	1	0
53.	Office Superintendent	1	1	0
54.	Assistant	1	0	1
55.	Upper Division Clerk	1	1	0
56.	Lower Division Clerk	1	0	1
57.	Driver	1	1	0
58.	Attender	1	1	0
	Total	23	14	9
	TOTAL	84	58	26

II. INSTITUTE FUND

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.	Typist	1	1	0

III. BUILDING MAINTENANCE FUND

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.	Electrician-cum-Pumpman	1	1	0

IV. MESS

S. No.	Name of the post	Permanent		
		Sanctioned	Filled in	Vacant
1.	Cook	1	1	0

ADHOC PROJECTS

RETIREMENT DETAILS FOR THE YEAR 2013-2014

S.No	Name	Designation	Date of retirement
1.	Sri. F. Nirmalkumar David	Peon-cum-Daftry	31.01.2014

STAFF EXPIRED IN THE YEAR 2013-2014

S.No	Name	Designation	Date of death
1.	Sri. R. Natarajan	Driver	13.11.2013