

# **Annual Report** **2019 - 2020**

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

Soundram nagar, Gandhigram Post, Dindigul - 624302  
Tamilnadu

# **ANNUAL REPORT**

## **2019-20**



**THE GANDHIGRAM INSTITUTE OF RURAL HEALTH & FAMILY WELFARE TRUST**

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## 1. AN OVERVIEW

The Gandhigram Institute of Rural Health and Family Welfare Trust (GIRH & FWT) was established in the year 1964, with the financial support of Ford Foundation, Government of India and Government of Tamil Nadu, after a **Pilot Health Project** conducted by Dr. T.S. Soundram (founder of the Institute) during 1959 to 1964.

The experiments and achievements of the pilot health project provided the base for promoting further research and training in National Health and Family Welfare programs. Using a community approach, all programs of the Institute are integrated to form a strong net work for health promotion in the country.

The programs of the Institute can be broadly classified into **three areas viz., (1) Training, (2) Research and (3) Service.**

The Institute functions through Government programs such as:

**Central Training Institute (CTI)** for training of Regional level and District level and Primary Health care functions. In the field of training, the Institute has been adopting innovative training methodologies in in-service and professional training programs. Along with fulfilling the training needs of southern states, it extends its training support to other states also through its programs on Peer Education, Participatory Learning and Action Approaches.

**Regional Health Teachers' Training Institute (RHTTI)** for training of nursing personnel and its allied health functionaries in Community Health Nursing.

**Population Research Centre (PRC)** focuses its attention on various population issues like health outcomes and its relationship with health delivery system, implementation of various national health programs, etc by doing empirical research. The research findings of the Institute have served fruitful suggestions for program planners of Government of India. The Institute reports all its research findings regularly to the Central and State Government apart from publishing interesting findings as Research Bulletins.

The Institute has made an impact on:

- Reduction of population growth in the country
- Improvement of Material and Child Health and Family Welfare acceptance
- Prevention of AIDS
- Promotion of RCH concepts
- Promotion of sanitary practices

## **2. OBJECTIVES**

The main objective of the Institute is to advance and accelerate Health, Reproductive and Child Health and Family Welfare programs at the State and National level by:

- **Conducting research studies** in the field of Rural Health, RCH and Family Welfare activities;
- **Organizing training programs** for Health, RCH and Family Welfare Program personnel within the State and personnel from other States; and
- **Developing** improved Health, RCH and Family Welfare practices.

# Highlights of the year 2019 - 2020



## 1.1. From the Director's Desk



Being one among the pioneer in public health training and research institutions of the country, The Gandhigram Institute of Rural Health and Family Welfare Trust (GIRH & FWT) has crossed more than 50 years in serving rural population in health, education, research and services.

Our institute consists of **two major wings** viz., **Training** and **Research**. Training wing comprises **(i) Central Training Institute (CTI)**, which includes Central Unit (CU), Department of Health Promotion & Education (DHPE), Health & Family Welfare Training Centre (HFWTC) and Administrative Unit (AU); **(ii) Regional Health Teachers' Training Institute (RHTTI)**. Research wing consists of **Population Research Centre (PRC)**. These wings conduct various long term and short term training programs and research studies assigned by Central and State Governments regularly. Apart from this, our institute conducted adhoc training programs funded by (ICSSR), National Health Mission (NHM), etc.,

The P.G. Diploma in Health Promotion and Education Course is affiliated with the Tamil Nadu Dr. M.G.R. Medical University, Chennai. It is a one year professional and residential course. We had admitted 15 students for the year 2019-20 (56th batch), representing four from Nepal, two from Odisha, three from Andhra Pradesh, one from Sikkim, three from Tamil Nadu and two from Kerala for the P.G. Diploma in Health Promotion and Education course in the month of October 2019.

During the year 2019-2020, the Health and Family Welfare Training Centre of the Institute was engaged in various short – term training programs funded by NHM. A total of 1682 personnel were trained in 79 batches.

Also we have three batches of DMLT students (60 Nos) for the academic year 2019-2020. This course is approved by Directorate of Medical Education, Tamil Nadu.

In RHTTI during the year 2017-18 we have completed the training of 6<sup>th</sup> batch of Health Visitors course by October 2017 with 27 trainees, and during the year 2018-19 we started the 7<sup>th</sup> batch of Health Visitors course with 15 trainees. They completed the course by April 2019. The short term training courses were imparted for the nursing students (both UG and PG) from nursing colleges of Tamil Nadu, Kerala, Puducherry and Karnataka. A total of 788 nursing students were trained and they carried the message and the vision of our Gandhigram.

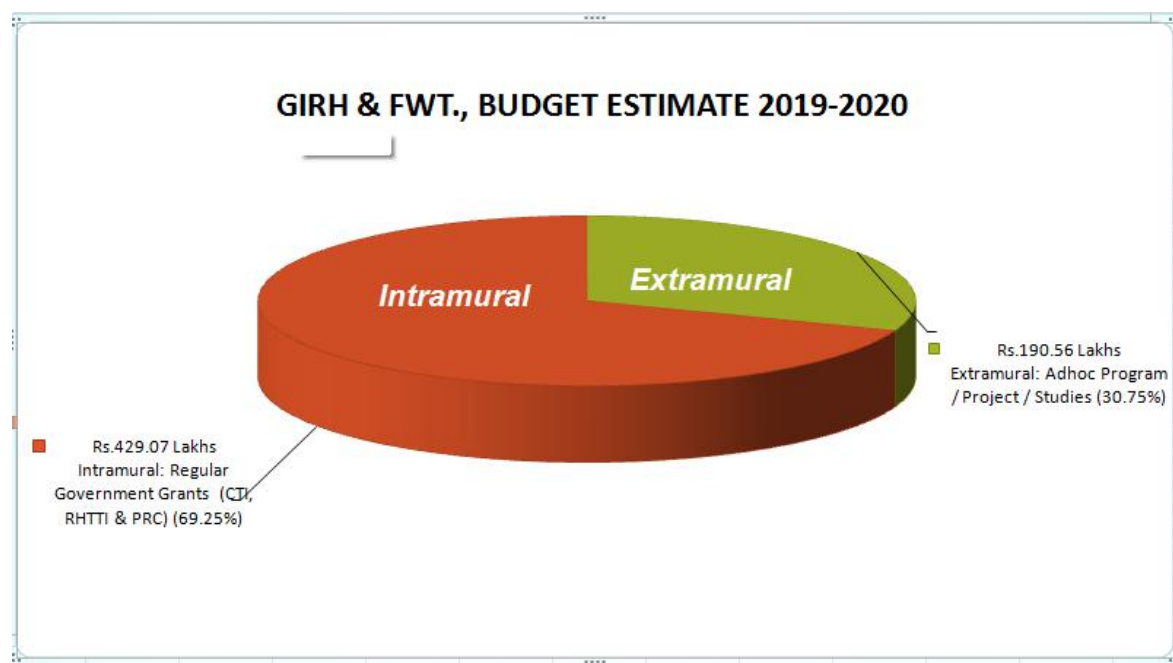
The Population Research Centre, committed to undertake 3 research studies on various topics during 2019-20. The centre was assigned with monitoring implementation of the programs under National Health Mission in 6 districts in Andhra Pradesh, 10 districts in West Bengal, 8 districts in Nagaland, 6 districts in Tripura and 19 districts in Tamil Nadu which were 1) Evaluation of Program Implementation Plan (PIP) under NRHM in districts of Tamil Nadu State. 2) Evaluation of Program Implementation Plan (PIP) under NRHM in districts of Andhra Pradesh State. 3) Evaluation of Program Implementation Plan (PIP) under NRHM in districts of West Bengal State. 4) Evaluation of Program Implementation Plan (PIP) under NRHM in districts of Nagaland State. 5) Evaluation of Program Implementation Plan (PIP) under NRHM in districts of Tripura State. 6) Assessing the reasons for poor performance of Public Health Facilities in Tamil Nadu, in Kayakalp Award scheme. 7) Evaluation of Home Based Newborn Care (HBNC) and Home Based Care of Young Child (HBYC) Programme. 8) Assessing Field Level Implementation of Comprehensive Primary Health Care (CPHC) through Ayushman Bharat Health and Wellness Centres (HWCs) in Tamil Nadu.

The Media Department of our Central Unit has organized health communication programs and has trained 683 personnel of various health functionaries. Regular classes were taken for 514 students of long term and short term training of the institute.

We, in our institute, through continuous efforts, dedicated services, educate and train the personnel in rural health and conduct relevant researches and are stepping towards upliftment of rural population realizing the vision and objectives of our founder chairman Dr. T.S. Soundram Amma.

**Dr. S. SEETHALAKSHMI**  
**DIRECTOR**

## 1.2. GIRH & FWT Revised Estimate



## **2. PART – II**

### **2. POPULATION RESEARCH CENTRE**

Population Research Centre, Gandhigram is one of the 18 Population Research Centres (PRC) promoted by the Government of India (Ministry of Health and Family Welfare). It is attached to the Gandhigram Institute of Rural Health and Family Welfare, (GIRH & FWT), Dindigul District, Tamil Nadu and functions as the Research Unit of the Institute. The Institute, an autonomous body under the Ministry of Health and Family Welfare, is governed by a Board of Trustees comprising of eminent personalities in public life and learned professionals in the field of Public Health, Demography, 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.

PRC is the mainstay of all the research programs of the Institute. The Institute commenced its research activities in the form of an action research through a Pilot Health Project in Athoor block during 1959. In the year 1961, Government of India sanctioned the Family Planning Communication and Action Research Centre (FPCAR) to the Institute to enable it to undertake research programs on various aspects of Family Planning programme implementation. Later, the FPCAR was upgraded and renamed as Population Research Centre. In 1980 the PRC was upgraded as a fully developed centre (Type I PRC) with 17 well experienced technical staff and six supportive staff (Annexure-I). The Director General (Statistics) in the Ministry of Health and Family Welfare, Government of India is responsible for the functioning of all 18 PRCs in the country and PRC, Gandhigram is one among them.

The geographical jurisdiction assigned to the PRC by the Ministry of Health and Family Welfare, Government of India is the state of Tamil Nadu and the Union Territory of Puducherry. However, the PRC activities extend beyond Tamil Nadu to neighboring States / Union Territory such as the Andaman and Nicobar Islands and Lakshadweep. Apart from regular and ad-hoc grants from Government of India, the PRC also undertakes studies funded by other agencies such as Government of

Tamil Nadu, ICMR, UNICEF, DANIDA, USAID, Population Council, Ford Foundation, UNFPA, WHO, IDRC, PATHFINDER International and NACO/APAC. In addition, the centre is involved in many other activities of its parent body (GIRH & FWT) such as teaching the students of Diploma in Health Education, Nursing and other in-service health training programs apart from consultancy and implementation of special programs.

The Population Research Centre also functions as a support centre for the Government of Tamil Nadu in implementing various health and family welfare programs and Health Management and Information System (HMIS), Mother and Child Tracking System (MCTS) in the State and provides valuable information on program performance apart from making suggestions on various measures to improve its performance. Periodic meetings are arranged with the state and district level health officials to disseminate the research findings of PRC. State level seminars were organized in 1996 and in 2000 to disseminate the research findings of National Family Health Survey – I and Rapid Household Survey – Reproductive and Child Health and other projects undertaken by PRC. The research activities of the PRC including the studies undertaken, performance and findings are discussed with the members of the board of trustees during the board of trustees meetings.

The Population Research Centre, Gandhigram, committed to undertake 3 research studies on various topics during 2019-20. Apart from the regular research work, the centre was assigned with monitoring implementation of the programs under National Health Mission in 6 districts in Andhra Pradesh, 10 districts in West Bengal, 8 districts in Nagaland, 6 districts in Tripura and 19 districts in Tamil Nadu. Work completed during the year and the major findings is described in the following pages.

## 2.1. ACTIVITIES OF POPULATION RESEARCH CENTRE

### 2.2. A. RESEARCH STUDIES COMPLETED

Name of the study	Evaluation of Program Implementation Plan (PIP) under NRHM in <b>Chennai, Coimbatore, Cuddalore, Salem, Thiruvallur, Virudhunagar, Kancheepuram, Villupuram, Ariyalur, Dharmapuri, Nagapattinam, Namakkal, The Nilgiris, Ramanathapuram, Thanjavur, Thiruvarur, Trichirapalli, Tirupur and Thoothukudi</b> Districts of Tamil Nadu State
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	S. Ravichandran, N. Dhanabaghyam, N.Kala, V. Saravanakumar, M. Senthil Kumar, L. Lakkana Kumar, Y. Kowsalya Juile
Objectives	To assess the implementation of Program Implementation Plan NRHM in the districts of the State.
Period	August 2019 to January 2020
Sample	From each district : District Hospital, Sub-district Hospital, CHC, PHCs, UPHCs and Health Sub-centres
Progress	Completed
Findings	The existing vacancies in the sanctioned regular posts and posts under NHM at various health institutions hindered the service delivery, particularly; vacancies in the posts of Obstetrician/Gynecologists, Pediatrician, anesthetists at secondary health care level and the medical specialists at the sub-district level and block PHCs need to be recruited at the earliest. The aim of mainstreaming the AYUSH can be achieved if the coordination with Allopathic system improved. Separate agency for Bio medical waste management in each district should be considered to avoid delay in collection of BM wastes. The infrastructure, manpower, equipments, medicines and administration is handled by Municipality and health department may be under one umbrella of health department for the smooth running of UPHCs. Well trained and experienced district level program personnel especially the MBA graduates may be posted for NHM for a better administration of the programs. Housekeeping and bio-medical waste management are outsourced in all the secondary level facilities helps a clean and neat hospital environment. Field visit done by RBSK and MMU teams helps to identify the early detection of diseases and referral for complicated cases. Insurance wards need to be established in Sub-District and upgraded PHCs where specialists/trained medical personnel are posted. Functioning of poly clinics in some of the urban health facilities in Chennai is a good initiative to take specialists services to the poorest of the population. In addition if tele-medicine services are added in other facilities, the benefit of availability of specialist services in the medical colleges and specialty hospitals may benefit and improve the service quality of the vast infrastructure created.

Name of the study	Evaluation of Program Implementation Plan (PIP) under NRHM in <b>Ananathapur, Guntur, Krishna, Prakasam, Srikakulam and West Godavari</b> Districts of Andhra Pradesh State
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	S. Ravichandran, N. Dhanabaghyam, N.Kala, V. Saravanakumar, M. Senthil Kumar, L. Lakkana Kumar
Objectives	To assess the implementation of Program Implementation Plan NRHM in the districts of the State.
Period	October 2019 to November 2019
Sample	From each district : District Hospital, Sub-district Hospital, CHC, PHCs, UPHCs and Health Sub-centres
Progress	Completed
Findings	Implementation of NHM is very useful for the improvement of public health facilities. The Medical college can function as a hub for the telemedicine service, the radiologist in the secondary level hospital may be involved in the electronic X-ray experiment. The vacancies in the posts of Obstetrician/Gynecologists', Pediatrician, anesthetists' at secondary health care level is found to be a stumbling block in realizing the goals of various health programmes, particularly the maternal and child health programme. The Sanctioned medical and paramedical posts need to be revised and the district and area hospitals need to be upgraded and correspondingly Human resource, equipments and infrastructure need to be improved. Mother and child (Talli Bidda) (102) express is used to drop back delivered women in their home successfully. ANC diet program is organized every Friday with the help of volunteers, display of model diet to the AN mothers, MOU with scan centers and private hospital for scan and Iron sucrose injection, safe delivery calendar at the PHCs, Vit A solution program with Vitamin Angels, PPP model "e UPHC" at the urban health centers, Telegram app, ie., sharing communication among program officers and health personnel throughout the district are the successful programs running to improve health care services in Andhra Pradesh State. Suitable administrators may be deployed to monitor the government health programs. Counseling and health education needed at all levels. The aim of mainstreaming the AYUSH can be achieved if adequate drugs and facilities are provided. The huge health service data may be used by the trained data persons at the block level by generating relevant data and help programme managers to manage the implementation of programmes.

Name of the study	Evaluation of Program Implementation Plan (PIP) under NRHM in <b>Bankura, Bardhaman, Birbhum, Koch Bihar, Malda, Mdinnipur East, Murshidabad, Nadia, Puruliya and South 24 Parganas</b> Districts of West Bengal State.
Funding Agency	Ministry of Health and Family Welfare, Government of India

Name of the persons	S. Ravichandran, N. Dhanabaghyam, N.Kala, V. Saravanakumar, M. Senthil Kumar, L. Lakkana Kumar
Objectives	To assess the implementation of Program Implementation Plan NRHM in the districts of the State.
Period	December 2019
Sample	From each district : District Hospital, Sub-district Hospital, CHC, PHCs, UPHCs and Health Sub-centres
Progress	Completed
Findings	Implementation of NHM is very useful for the improvement of public health facilities. The Sanctioned medical and paramedical posts need to be revised and correspondingly Human resource, equipment and infrastructure need to be improved to overcome heavy IP, OP load at the public health facilities. Health educators may be appointed and monitoring needed at all levels. The aim of mainstreaming the AYUSH can be achieved with adequate infrastructure, manpower and drugs at the public health facilities and by giving awareness among people to utilize the services. There is an urgent need to improve the MCH services at the CHC/PHC level so as to reduce the crowd at the higher level facilities. Deliveries-normal and C-section-should be available at rural hospitals and CHCs. Training of peripheral level workers on delivery skill and management of third stage of labour will help to reduce home deliveries conducted by untrained persons. It should be insisted that every PHC should conduct certain number of deliveries—normal deliveries—at the institution so as to reduce number of normal deliveries at the higher level institutions. Introduction of Tele medicine will help in reducing the out of pocket expenses for the general public and also help in crowd management. The CHOs of HWC should be linked to the higher level referral centres through telemedicine system. MCH care at the peripheral level has to be closely monitored to ensure early registration of pregnancies, post-partum care and HBNC by ANM and ASHAs. Immunization and cold chain maintenance are good. Timely flow of funds to the health institutions and timely payment of incentives to the ASHAs will improve the quality of work.

Name of the study	Evaluation of Program Implementation Plan (PIP) under NRHM in <b>Dimapur, Kohima, Longleng, Mokokchung, Mon, Peren, Wokha and Zunheboto</b> Districts of Nagaland State.
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	S. Ravichandran, N. Dhanabaghyam, N.Kala, V. Saravanakumar, M. Senthil Kumar, L. Lakkana Kumar
Objectives	To assess the implementation of Program Implementation Plan NRHM in the districts of the State.
Period	February 2020
Sample	From each district : District Hospital, Sub-district Hospital, CHC, PHCs, UPHCs and Health Sub-centres
Progress	Completed

Findings	<p>The Sanctioned medical and paramedical posts need to be revised especially the specialist such as Obstetrician/Gynecologists, Pediatrician, Anesthetists at various health institutions may be posted in the State. Solar power panel for uninterrupted power supply, Cold chain maintenance, ICU, Blood bank, no shortage of essential medicines, no delay in RKS fund and Ambulance services are the prioritized services urgently needed especially at the district hospitals. The public health facilities need to be upgraded and correspondingly human resource, equipment and infrastructure need to be improved. The aim of mainstreaming the AYUSH can be achieved by providing adequate infrastructure, manpower and drugs at the public health facilities. Timely release of NHM funds without delay will be helpful for the successful implementation of the programs. Outreach services are lacking, establishing mobile medical units (hospital on wheels) may improve the utilization of services. Bio-medical wastes are still buried in the pit even in the District Hospital itself. Proper bio-medical waste management system has to be introduced. There is no blood bank, operation theater, separate septic and aseptic delivery rooms, SNCU/NBSU at some of the districts.</p>
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Name of the study	Evaluation of Program Implementation Plan (PIP) under NRHM in <b>Gomati, Khowai, Sipahijala, Unakoti, South Tripura and West Tripura</b> Districts of Tripura State.
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	S. Ravichandran, N. Dhanabaghyam, N.Kala, V. Saravanakumar, M. Senthil Kumar, L. Lakkana Kumar
Objectives	To assess the implementation of Program Implementation Plan NRHM in the districts of the State.
Period	March 2020
Sample	From each district : District Hospital, Sub-district Hospital, CHC, PHCs, UPHCs and Health Sub-centres
Progress	Completed
Findings	<p>Implementation of NHM is very useful for the improvement of public health facilities. The Sanctioned medical and paramedical posts need to be revised especially the specialist such as Obstetrician/Gynecologists, Pediatrician, Anesthetists at referral health facilities in the State. The public health facilities need to be upgraded and correspondingly human resource, equipment and infrastructure need to be improved. Counseling and health education needed at all levels. The coordination between AYUSH (Ayurveda, Homeopathy) and Allopathic system may be improved and other AYUSH system such as Siddha, Unani, Yoga and Naturopathy may also be improved with adequate infrastructure, manpower and drugs at the public health facilities. CHC is lacking in terms of infrastructure such as blood bank/storage, ultrasound and manpower (specialists) as per the</p>

	norm. In addition to free (government) laboratory, Lab (ASR) is functioning under PPP. MMU may be improved, 102 ambulance initiation and DEIC at every district hospital is an urgent need to improve health services.
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Name of the study	<b>Assessing the Reasons for Poor Performance of Public Health Facilities in Tamil Nadu, in Kayakalp Award Scheme.</b>
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	V. Saravanakumar, S. Ravichandran
Objectives	To understand the various reasons hindering the public health facilities and to suggest the ways to improve cleanliness and hygiene promotion in public health facilities.
Period	January, 2020
Area of study	The public health facilities namely Sub-district hospitals (SDH), CHC/Block PHC, Primary Health Centre (PHC), Urban Primary Health Centre (UPHC) in Dharmapuri, Salem, Kancheepuram, Thiruvallur, Thoothukudi and Chennai districts of Tamil Nadu were selected.
Progress	Completed
Findings	After the implementation of Kayakalp assessment most of the public health facilities have improved in sanitation and hygiene measures and thus improvement in infrastructure, human resource, hospital cleanliness, infection control etc., Two thirds of districts in Tamil Nadu are not performing or not qualified for Kayakalp assessment during 2018-19, as most of the public health facilities are not aware of all the concepts and terms of Kayakalp assessment and lack of awareness on sanitation, infection control and hygienic practices. Reorientation training to all the staff including medical and paramedical staff is an urgent need to improve the standards of government health facilities. Formation of internal assessment committee, Infrastructure shortage, lack of awareness, shortage of equipment, no proper IEC display and provision of funds are the major reasons for not achieving Kayakalp scores. Irregular Fund and delay in receiving funds may affect the improvement of health facilities. To overcome the shortage of manpower problem, new recruitment of medical and paramedical posts as per the IPHS standards is an urgent need and the vacant posts of specialty care services namely, OG, Pediatrician, Anesthetist and sanitary workers, staff nurse may be posted at the earliest for the improvement of public health facilities.

Name of the study	<b>Evaluation of Home Based Newborn Care (HBNC) and Home Based Care of Young Child (HBYC) Programme</b>
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	S. Ravichandran, N. Kala, V. Saravanakumar, M. Senthil Kumar, L. Lakkana Kumar

Objectives	<p>To assess the knowledge, awareness and trainings on HBNC among ASHAs</p> <p>To assess the knowledge, awareness and perceptions regarding HBNC among beneficiaries</p> <p>To examine the status of field implementation of HBNC vis-à-vis the operational guidelines with focus on programmatic challenges.</p>
Period	January, 2020
Sample	50 ASHA and 100 Beneficiaries
Area of study	Dindigul, Dharmapuri, Ramanaathapuram, Thoothukudi, and Salem in Tamil Nadu, each district 10 ASHA and 20 beneficiaries.
Progress	Completed
Findings	Data collected, data entry completed and the data was sent to Population Research Centre, Delhi

Name of the study	<b>Assessing Field Level Implementation of Comprehensive Primary Health Care (CPHC) Through Ayushman Bharat Health and Wellness Centres (HWCs) in Tamil Nadu.</b>
Funding Agency	Ministry of Health and Family Welfare, Government of India
Name of the persons	N. Kala, S. Ravichandran
Objectives	To assess the preparedness of the State of Tamil Nadu and the facilities in its districts to implement the Ayushman Bharat-Health and Wellness Centres in the state.
Period	February 2020 to March 2020
Area of study	Five Health Unit Divisions (HUDs) from three districts of Tamil Nadu selected for study area. 10 Primary Health Centres (PHC), 5 Urban PHCs and Health Sub Centre (HSCs) visited for data collection along with FGDs and Exit Interviews.
Progress	Completed
Findings	The study indicates that improving Primary Health Centre infrastructure to suit the requirements of Health and Wellness Centre was taken up by the State and declared all the rural as well as urban PHCs as HWCs. Up-gradation of PHCs by repairing/adding required space etc., has been done and the State designed branding has also been done in about 70% of the facilities. Medical officers and staff nurses are available in the PHCs still there is a gap between sanctioned post and persons in position. There exists huge vacancies in the posts of Laboratory Technicians and Pharmacists. Training on CPHC to the facility level staff is lacking and team work for CPHC does not exist. Telemedicine/consultation is to start yet. The infrastructure and human resource at the Health Sub-Centre level is very poor. Though all the HSCs in selected blocks have been redesigned as HWCs, the staff position is weak. The State has developed a model in which the ANM/GNM qualified person is trained and posted as the Mid-Level Service provider against

	<p>the national model of having BSC (Nursing) /AYUSH qualified person as MLHP. Many centres do not have a building completed or repair/renovation completed. Drugs in many facilities are enough for two months requirement. The household surveys (denominator) have not been completed and the data is not available in electronic record form. Since telemedicine has not been started mentoring of MLHP/2nd VHN is not carried out by the MO officer of the PHC. For diagnostics, samples are collected and transported through the bike given for this purpose and sent to the CHC for testing. The clients are satisfied with the improved services provided and feel that they get health services at a nearby place and vast improvement has taken place in the services provided. Though the small improvements at the facilities have had its impact on the health seeking behaviour of the clients, the CPHC activities need to be implemented in letter and spirit. Introduction of telemedicine, creating electronic data base / health record of households and wellness activities in the facilities, community involvement in the form of support groups will help in achieving the Universal Health Coverage.</p>
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## **2.3. B. PROPOSED STUDIES**

### **B.1. Research Studies Proposed for 2020-2021**

1. Ensuring safe deliveries: A study on LaQshya initiatives in Tamil Nadu.
2. Addressing Non-communicable disease in Tamil Nadu: Situation Analysis of awareness creation and control of the disease at peripheral level.
3. The uploaded HMIS status report and validation report sent to the respective district officials (DDHS and JDHS) of Tamil Nadu.

## **2.4. C. OTHER ACTIVITIES**

### **C.1. Teaching by PRC Staff**

PRC staff are involved in teaching Demography/Population & Health Policies, Statistics, Research Methodology, Health Economics, RCH, NRHM and other Health Programmes to the long-term and short term trainees of other departments of the Institute.

### **C.2. PAPER PUBLICATIONS**

Dr. V. Saravana Kumar published papers on,

- (i) "Anaemic Status of Women in the Reproductive age Group in India", Pune Research Discovery, An International Journal of Advanced Studies, Vol-4 Issue-1 April 2019, p: 1- 9.
- (ii) "Utilization of Anganwadi Centres under ICDS Program for Maternal and Child Health Care in India", International Journal of Advance Research and Innovative Ideas in Education (IJARIIE), Vol-5 Issue-2 2019, p: 2834 to 2839.

**PIP Monitoring of NHM: Tamil Nadu, Andhra Pradesh, West Bengal, Nagaland and Tripura States and AWP Studies\_PRC Gandhigram (2019-2020)**





## **2.5. Additional Project**

### **Longitudinal Ageing Study in India (LASI) Main wave-I**

Longitudinal Ageing Study in India (LASI) Main wave-I was successfully completed for the states of Andhra Pradesh and Telangana funded by Ministry of Health and Family Welfare (MoHFW), Government of India through International Institute of Population Sciences (IIPS). The budget for the conduction of this study for the above said states were Rs.74,12,000/- and Rs.74,12,000/- respectively. This study expected to be conducted every 2 years for the period of 25 years. The results of the LASI expected to be disseminated to the research community in India and around the world for the effective formulation of policies.

The objectives of the study,

- To provide comprehensive and scientific data on the health, economics and social challenges of aging population
- To help in formulating mid and long-term Government policies and programmes for aging population
- To address the health, economics and social challenges of aging population

Under this study, 4400 men and women aged 45 years and above from these two states were covered and collected data on the following areas :Housing, Household Income, Consumption, Assets and Debts, Health Insurance, Demographics, Family and social networks, social welfare schemes, Health Care Utilization, Work, Retirement and Pension, Bio markers such as anthropometric data and blood samples.

These collected data was sent to IIPS, Mumbai for further analysis and dissemination.

### **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 are basically to enhance knowledge, attitude and 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

Need based 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:

**3.1.1. 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

### 3.1.2. CENTRAL UNIT (COMMUNICATION & MEDIA)

The Major objectives of this department is to

- 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.

The activities carried out by Media division of the central unit during this year are presented categorically

#### 1. Teaching work:

Media Division's staff handled classes on communication and Media related subjects to the following categories of trainees

S.N,	Category of trainees	Number of participants
1	Medical officers	6
2	M.Sc.(N) students	21
3	B.Sc.(N) students	349
4	Health visitors (Female)	22
6	DGNM students	21
7	NGO personnel	7
8	CPHN students (Karnataka)	30
9	Community Health Nursing (P.B.B.Sc)	6
10	GNM	35
11	ANM	17
	<b>Total</b>	<b>514</b>

#### 2.Training programs organised by Media division

##### 2.1. Workshop on Information Education and Communication (IEC) strategies

A three day workshop on IEC strategies was organized for the B.Sc., Home students of Fatima College, Madurai. Fifty students Participated in this workshop from 03.07.2019 05.07.2019. The Participants were taught about the various communication tools to design and prepare IEC materials. They were also trained to effectively use Media for the preparation of Health education messages.

##### 2.2. Training on Information Education and Communication

Three months IEC training was started for the District Extension Educators (DEEs) from the Government of Tamil Nadu. 10 DEEs from different Districts of Tamil Nadu

are participating in this batch. The training period is from 03.09.2019 to 02.12.2019. The participants were taught various subjects i.e., Anatomy and Physiology, Communicable diseases, Non communicable diseases, Behavior sciences, Communication, IEC, Management, Counseling, RCH and Educational methods. These inputs are expected to accelerate the Health Education Extension activities to be carried out at the respective districts

### **2.3. Media skill lab for District Extension Educators**

Media skill lab helps the trainees to understand the importance of audio visual aids in health education. They were taught to produce posters, Flash cards, Flip charts, Models, Folders, Audio and Video materials. This practical training helped the trainees to design and prepare low cost teaching aids which can be used for community health education programs. Ten (10) District Extension Educators trainees participated in this program for 5 days. (22.10.2019 to 28.10.2019)

### **2.4 Training on Communication and Education Technology**

Training on Communication and Education Technology was organized for the Nursing students from the following colleges of Tamilnadu.

S. No.	Name of the College	Category Trained	Period	Number of Participants
1	CSI, Jeyaraj Annapackiam College of Nursing	B.Sc., (N)	08.04.2019 to 10.04.2019	49
2	PGP College of Nursing and Research Namakkal.	B.Sc., (N)	08.05.2019 to 10.05.2019	48
3	Christian College of Nursing, Neyyoor.	M.Sc., (N)	08.07.2019 to 12.07.2019	10
4	Institute of Nursing, G.Kuppuswamy Naidu Memorial Hospital, Coimbatore.	M.Sc., (N)	29.07.2019 to 02.08.2019	07
5	Bishop's College of Nursing, Dharapuram	B.Sc., (N)	31.10.2019 to 02.11.2019	22
6	Bishop's College of Nursing, Dharapuram	M.Sc (N)	11.11.2019 to 15.11.2019	7
7	Sacred Heart college of Nursing, A. Vellodu, Dindigul	B.Sc., (N)	20.11.2019 to 22.11.2019	30
8	V.V. Vanniyaperumal Nursing College for women, Virudhunagar	B.Sc., (N)	28.11.2019 to 30.11.2019	40
10	Bishop college of Nursing, Dharapuram.(Batch 2)	B.Sc., (N)	05.12.2019 to 07.12.2019	24
11	PGP College of Nursing & Research, Nammakal.	B.Sc., (N)	09.12.2019 to 11.12.2019	35
12	VPMM College of Nursing, Krishnankoil	B.Sc., (N)	12.12.2019 to 14.12.2019	35

13	Ellen College of Nursing, Coimbatore	B.Sc., (N)	06.01.2020 to 08.01.2020	20
14	Royal College of Nursing, Coimbatore	B.Sc., (N)	09.01.2020 to 11.01.2020	41
15	VPMM College of Nursing, Krishnankoil (Batch 2)	B.Sc., (N)	30.01.2020 to 01.02.2020	33
16	Sri Aurobindo College of Nursing, Karur.	B.Sc., (N)	03.02.2020 to 05.02.2020	41
17	Sri Ramachandra naidu College of Nursing, Tirunelveli.	B.Sc., (N)	10.02.2020 to 12.02.2020	54
Total number of students trained				<b>496</b>

## 2.5 Training on IEC

Fifty (50) B.Sc. (Nursing) students from Christian College of Nursing, Ambilikai, attended one-day specialized training on **“Information Education and Communication”** in Media department on 15.05.2019. Classes were taken on Communication, IEC, Audio Visual Aids, and Puppets. Various strategies of community health education were taught to the students.

## 2.6 Workshop on Advocacy, Communication and Social Mobilisation

A three days workshop on Advocacy, Communication and Social Mobilisation was organized for the M. Sc Nursing students.

S.No	Name of the College	Category Trained	Period	Number of Participants
1.	Aurobindo College of Nursing, Karur.	M.Sc (N)	16.12.2019 to 18.12.2019	7

## 2.7 Workshop on Designing and Preparation of IEC materials

A five days workshop on Designing and preparation of IEC materials was organized for the M.Sc., Home students of Gandhigram Rural Institute, Gandhigram. Four students Participated in this workshop from 22.04.2019 - 26.04.2019. The Participants were taught about the various communication tools to design and prepare IEC materials. They were also trained to effectively use the digital technology for the production of Health education materials.

## 2.8 Training on Information Education and Communication

Three day training on Information Education and Communication was organized for the following Multipurpose Health worker (M) /Sanitary Inspector/Health inspector course students

1.	Dharan School of paramedical sciences, Salem.	MPHW (M)	27.02.2020 to 29.02.2020	18
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## **2.9 Media skill lab**

Media Skill lab was organized for the PG Diploma in Health Promotion Education course students from 12.02.2020 to 27.02.2020. Fifteen (15) students from various states of India and Nepal participated and learnt to develop and prepare cost effective IEC materials. Coloring techniques, lettering skills, preparation of Posters, models, flashcards, flipcharts, folders, audio spots and video films were taught to the students. Hands on training were given to handle various types of audio visual equipments. They were also trained in the techniques of using traditional media (street theatre and puppets) for Health promotion and education programmes in the community.

## **2.10 Orientation training program**

An orientation training program was organized in the Samiyarpatti community for the village leaders. The trainees of 3 months IEC course conducted this program with a lively discussion of the health problems in the community. Self Help Group members, Youth association members, Students, Elders and Village leaders participated in this program on 28.11.2019.

## **2.11 Mass Health Education program**

As a part of the IEC 3 months training a Mass health education activity was organized by the District Extension Educators in Samiyarpatti village on 28.11.2019 from 6.00 PM to 8.00 PM. An edutainment program was presented in the form of a cultural program highlighting Dengue fever. The community members and students were given messages about the preventive measures for Dengue.

## **2.12 Training on Health communication.**

Three days training on Health Communication was organized for the ANM students of Dharan School of Nursing, Salem. They were taught about the innovative communication strategies that can be used for Health promotion in the community. 11 students participated in this skill training from 09.03.2020 to 11.03.2020.

## **2.13 Media Practical for Health Visitor Course (Promotional Training for ANM/MPHW(F)) students**

Media practical training was conducted to help the trainees to understand the importance of audio visual aids in health education. They learnt to produce posters, flipcharts, flashcards, folders, 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 two students from promotional course participated in this program from 05.03.2020 to 07.03.2020.

### **3.DETAILS OF OTHER WORK:**

- Discussion with the Nursing Colleges regarding Capacity Building Training.
  - Preparation of the Training Budget Estimate and submitted to the Ministry of Health and Family Welfare, Govt. of India.
  - Preparation of Annual report of activities and submitted to the MoHFW, Gol.
  - Planning meeting of the three months IEC course District Extension Educators
  - Discussion with the ICDS CDPO and District coordinator regarding the Communication strategies for the IEC project on Breast feeding.
  - Letter to the DMCHO, Palani regarding the production of IEC materials.
  - Letter to the Director of Family Welfare, Government of Tamil Nadu regarding three months IEC course for the newly promoted District Extension Educators.
  - Activities report to MoH&FW., Gol.
- 
- A Document pertaining to the vision of the Institute was prepared and submitted for the Board meeting.
  - An article titled '*Combating Non Communicable Diseases – A Gandhian stratagem*' was prepared for the souvenir to be published for the 150<sup>th</sup> birthday celebration of Mahatma Gandhi
  - Preparatory arrangements for IEC 3 months training. Media and event management for founders day programme Co-ordination work for IEC 3 months training.
  - Training curriculum preparation for IEC trainings. Compilation of reading materials for IEC training.
  - Curriculum preparation for IEC 3 months training.
  - Extensive house hold survey at Samiyarpatti village.
  - Community Extension Educational activities at Samiyarpatti Village.
  - Field visit to Water Treatment Plant at Periyakulam.
  - Compilation of yearly activities
  - Course report preparation for short term trainings
  - Departmental orientation and a lecture on the role of media in health education was given for the medical officers from NIHFW, New Delhi undergoing 4th foundation training program under CHS in collaboration with the MoHFW, Gol.
  - Output/outcome report preparation for MoHFW Discussion with other institutes for IEC training.
  - Organised a Health exhibition for the staff and students
  - Documentation work for Institute's activities
  - Display of awareness posters and messages about of COVID-19.

#### **4. SUPPORT SERVICE**

The Media division did the following support service to various activities of the institute

- Identity card designed & printed - 74
- Banner designing -10
- Photo documentation - 528
- LCD arrangements for classes –862
- PA system arrangements – 243
- Film show – 128
- Poster designing – 338
- Flex banner designing and printing – 4(chart)
- Thermocol models – 68
- University Examination hall arrangements (CCTV, Metal Detector, Mobile Phone Jammer)
- IEC materials designing
- Stock verification
- Poster/cover page/model preparation for in-house training
- Group photo designing work - 25
- Paper puppets-25
- Socks puppets for Home science students training
- Video show -84
- Media arrangements for independence day
- Annual report cover page designing
- Group Photo designing for the Medical officers of Managerial Skill Training
- IEC materials supply to RHTTI school health program
- IEC materials supply to Health Education programme in community
- Audio message production for in house training – 05
- Short film production for in house training – 07
- Assets number writing – 02
- Decoration work for Amma day celebration
- Poster Making for A.P.J. Abdul Kalam Birthday – 1
- Folder preparation for In house training – 86
- Certificate designing and Printing for IEC 3 months training – 10
- Poster making for Cervical cancer awareness
- Banner preparation for HFWTC Display board
- Poster making for world cancer day and corona virus awareness

# CTI - CU - MEDIA



M.Sc. Nursing students displaying thier puppet preparation



Behaviour change communication class for Medical Officers



Short film production on Healh Advocacy



Extension edutainment activity



Dengue awareness in the community



Community needs assesment

# CTI - CU - MEDIA



Media skill lab for Health education students



Audio-visual equipments training for District Extension Educators



Observation visit for MPH(M) students



Communication and Education Technology training



Media practical for MPH(F) students





ANM students with their message for COVID-19

### 3.1.3. CENTRAL UNIT (MANAGEMENT)

#### Trainings

- Co-ordinated 3-months IEC training for District Extension Educators(DEEs), working under Directorate of Family Welfare, Govt. of Tamilnadu, Chennai for the period 3.9.2020 to 02.12.2020 at our Institute. There were 10 DEEs attended this training.
- Co-ordinated one batch of Documentation training for NGOs in Tamil Nadu on 21.3.2020. There were 7 NGO personnel attended this training. The objective of the training was to enhance knowledge and practice documentation methods and means. Topics taken in the training were Introduction, Importance and types of Documentation, Means of Documentation, Financial & technical aspects in Documentation and Role of New Media in Documentation.

	
Mr.Lingesh, taking a session on role of new media in documentation	Participants receiving training completion certificates for Documentation training

#### Teaching

There were 41 sessions taken for the training programmes conducted in our Institute.

#### Sessions taken

- ❖ New Information Technology for Education
- ❖ Health Management Information System(HMIS)
- ❖ Statistics in Research
- ❖ Literature review
- ❖ Health Statistics
- ❖ SPSS software
- ❖ Types & Methods of documentation

#### Sessions taken for the trainings

- 3-months IEC training for DEEs
- Workshop on Designing and preparation of IEC materials
- One-Day training on IEC
- Communicational Educational Technology Training

- Short-term training on Community Health Nursing

**Category of trainees/Students**

- M.Sc.(Home Science)
- B.Sc.(N)
- MSC (N)
- Sanitary Inspector course students
- ANM students
- District Extension Educators
- NGO personnel

**Other inter-departmental activities**

- Attended Two Training Management Information System(TMIS) review meeting held at Directorate of NHM, Chennai on 10.1.2020 and 19.2.2020. HFWTC, Gandhigram HUDs Dindigul, Palani, Theni, Ramnad and Paramakudi and DTT-MOs of all HUDs attended these meetings. Status TMIS entry were reviewed.
- Prepared and submitted Statistical report on KAP survey on Menstrual Hygiene practice among school going adolescent girls in Athoor block of Dindigul district for Access to Skill Training and Its Impact ICSSR-IMPRESS.
- Attended Planning meeting with DD-IEC, DFW, Chennai on 24-4-2019 regarding 3-months IEC certificate course for District Extension Educators working in the Directorate of Family Welfare, Chennai.
- Made two observation field visits to CHC-Kosavapatti and Anbagam Hospice, Dindigul with B.Sc(N) students who were undergone short-term community Health Nursing training conducted by RHTTI.
- Prepared and Submitted online ICMR proposal on Descriptive study on Diabetes Mellitus for College Students in Dindigul District.
- Performed functions as Warden of Dr.Soundram Mess

### **3.1.4. Health and Family Welfare Training Centre, Gandhigram**

The HFWTC, Gandhigram is one of the seven RTIs in the state and one of the 47 HFWTCs in India catering to the needs of in service training for Medical, Nursing and other Paramedical personnel working in the Govt. Primary Health Centres. The Gandhigram RTI covers four revenue districts consisting of six HUDs namely Dindigul, Palani, Theni, Ramnad, Paramakudi and Sivaganga. The duration of training varies from one day to five weeks.

Under National Health Mission (NHM) capacity building of Health functionaries and allied staff is given prime importance. Many skill Based & knowledge based trainings to the health providers are implemented to improve the skills & Knowledge of service providers to carry out various health care activities in the Institutions and as well as to create awareness among the community on availability and utilization of health care services.

Generally, the training programs are conducted as follows:

- Skill based training are conducted in the major government hospitals or medical college hospitals through six Regional Health Training Institutes (RTIs),
- Knowledge based training are conducted by the RTIs and by the District / Block training teams and
- Community based training-through the district /block training teams coordinated and supervised by the RTIs.

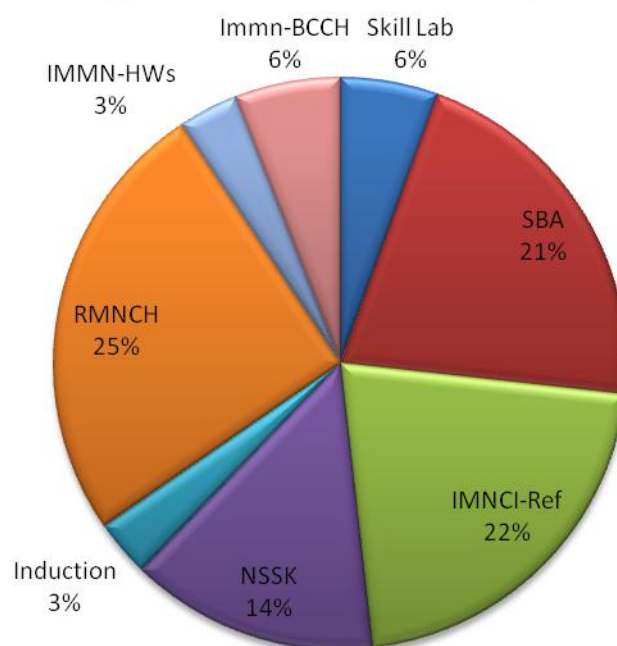
During this year of reporting, 36 % of the allotted batches have been completed as per the Comprehensive Training Plan approved by DPH & PM which includes programs under interim plan. Out of the 4910 candidates to be trained only 1676 candidates (36%). The shortfall was due to the delayed allotment of funds for immunization training (November 2019), low deputation from the HUDs and vacancy of key posts. In certain cases it had been informed that there were more vacancy. These programs were funded by the State Health Society, Chennai.

The O/o DPH funded for the Immunization training to Health Workers and training of of Block Level Cold Chain Handlers.

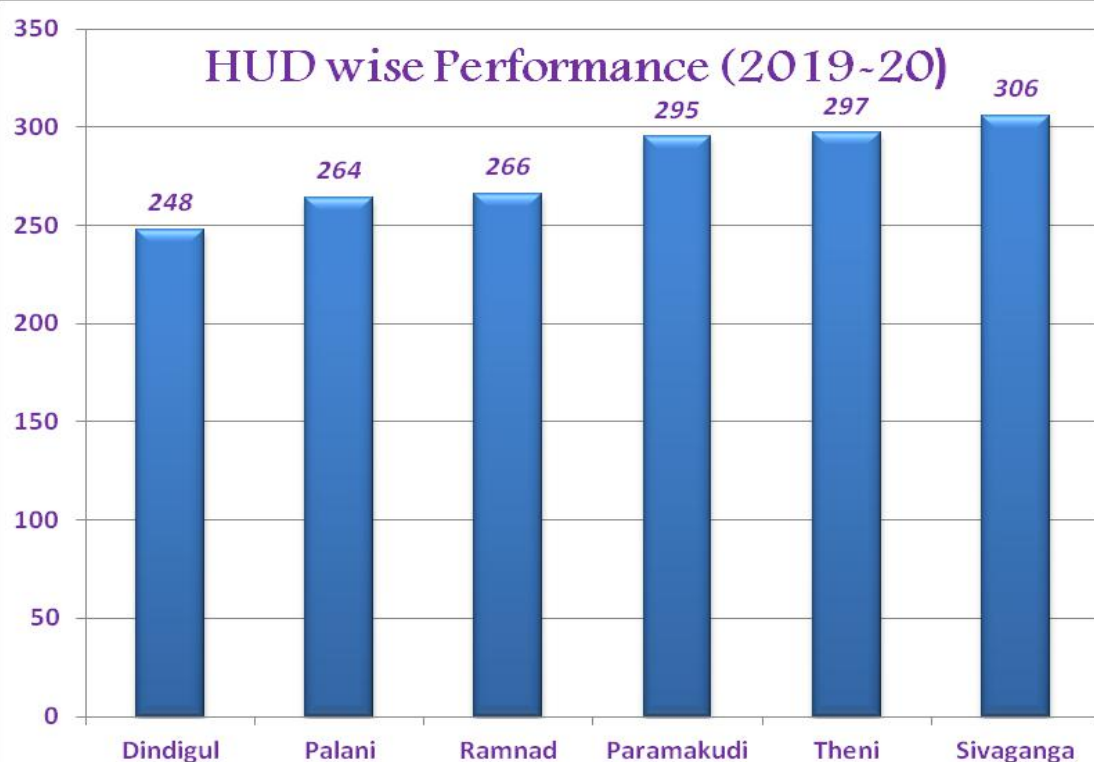
### Training Performance Vs. Target Allotted (2019-20)

Sl. No	Name of the Training	No. of batches		Personnel		
		Planned	Conducted	Planned to be trained	No. of personnel trained	%
<b><u>a) As per CTP</u></b>						
1	Training at Skill Lab	18	10	352	<b>91</b>	<b>26</b>
2	SBA	7	7	42	<b>42</b>	<b>100</b>
3	BEmOC trg to MOs	34	0	170	<b>0</b>	<b>0</b>
4	IMNCI-Ref	14	14	336	<b>340</b>	<b>101</b>
5	NSSK	15	15	450	<b>298</b>	<b>66</b>
6	Managerial skill / Induction Training to MOs	4	1	120	<b>18</b>	<b>15</b>
7	Other Maternal Health Training(RMNCH+A) (3Spell treated as a Single Batch)	7	3	140	<b>167</b>	<b>119</b>
8	Immunization training to Health Care Workers	60	12	1800	<b>294</b>	<b>16</b>
9	Immunization training to - Block Level Cold Chain Handlers	50	16	1500	<b>426</b>	<b>28</b>
<b>Total</b>		<b>209</b>	<b>78</b>	<b>4910</b>	<b>1676</b>	<b>34</b>

## Training Wise Achievement (2019-20)



## HUD wise Performance (2019~20)



## **I Maternal Health**

### **1. MCH Skill lab training to MOs SNs and ANMs**

This hands on training imparts skill to Medical Officers, Staff nurses and ANMs related to maternal and child health in the skill labs established in Regional Training Institutes. Before the students are allowed to handle the humans is essential developing the appropriate skills in midwifery and newborn care in skill laboratories using mannequins. It is the ethical way of learning midwifery skills.



Well-trained Medical Officers, Staff Nurses and Auxiliary Nursing Midwives will have confidence to deliver quality midwifery services.

A total of 91 personnel were trained comprising 06 Medical officers, 46 Staff Nurses, 26 ANMs 11 UHNs and 02 Maternal Assistant. Seven batches of MCH-Skill Lab training were conducted.

<b>Name of Training</b>	<b>No. of batches</b>	<b>No. trained</b>
MCH-Skill Lab	<b>07</b>	<b>91</b>

## **2. Reproductive Maternal New born and Child Health & Adolescent Health Training to Staff Nurses(RMNCH + A -SNs) (A total of 30 working days in 3 spells)**

The quality of services during and after child birth is a key determinant of the reduction in maternal and infant mortality rates. Most obstetric complications and maternal deaths occur during delivery and in the first 48 hours after childbirth. This makes the intra-partum period (defined as labour, delivery and the following 24 hours) a particularly critical time for recognising and responding to obstetric complications and seeking emergency care to prevent maternal deaths. The best way to do so is to maximise facility based deliveries and skilled attendance during home births in 'difficult to reach areas'. Referring women to emergency care in case of complications, and monitoring postpartum mothers are the part and parcel of the motive of skilled attendance.

The Staff Nurses of GPHCs were trained in three spells. The 1<sup>st</sup> and 2<sup>nd</sup> spells of training were for 12 working days each and the 3<sup>rd</sup> spell for six working days. The training is conducted in the CEmONC and NICU of the Paediatrics ward in the Medical college hospitals Govt. district Head Quarters hospitals. First six days were devoted to the theoretical aspects in each of these departments and the other major part of the time is devoted to the practical aspects. Concerned specialists handled the sessions assisted by senior Staff Nurses of these CEmONC and NICU centres of the hospitals. The Institute monitored the programs by visiting regularly.

A total of 167 Staff Nurses were trained putting all the three spells together. The first batch was conducted for 9 Staff Nurses for 35 working days at a stretch in Dt. HQ Hospital, Ramnad.

<b>RMNCH + A by Spells</b>	<b>No. of SNs trained</b>
<b>a) As a Single Batch (35 days)</b>	9
<b>b) I spell (12 days)</b>	61
<b>c) II Spell (12 days)</b>	47
<b>d) III Spell (6 days)</b>	50
<b>Total</b>	<b>167</b>

### 3. SBA Training

Skilled Birth Attendant (SBA) is considered as a person who can handle common obstetric and neonatal emergencies, recognize when the situation reaches a point beyond his/her capability and refer the woman or the newborn to a FRU/appropriate facility without delay. Government of India has taken policy initiatives to empower the ANMs/LHVs/SNs to become 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.

The objective of the training was 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.



TOT trained Medical Officers and Staff Nurses of the hospital along with the faculty of the Institute are handling the sessions. SBA training to ANMs is being conducted at Govt. Head Quarter Hospitals at Dindigul and Ramnad. A total of 42 were comprising 40ANMs and 2 GNMs trained in 7 batches during 2019-2020.

Name of Training	No. of batches	No. trained
SBA	7	42



*Training Conducted by a team of experts*



*Training by panel of experts*



### ***Demonstration with Mannequins by experts***

Integrated Management of Neonatal and Childhood Illness (IMNCI) is a strategy that targets children less than 5 years old — the age group that bears the highest burden of deaths from common childhood diseases. The IMNCI strategy includes both preventive and curative interventions that aim to improve practices in health facilities, the health system and at home. It specifies integrated case management of the most common neonatal and childhood problems with a focus on the most common causes of death. The strategy includes three main components:

- Improvements in the case-management skills of health staff through the provision of locally-adapted guidelines on Integrated Management of Neonatal and Childhood Illness and activities to promote their use.
- Improvements in the overall health system required for effective management of neonatal and childhood illness.
- Improvements in family and community health care practices.

In Tamilnadu as per the operational guidelines from Government of India, State Health Society initiated General IMNCI refresher training for all Health and Nutrition functionaries in batches for three working days each. Fourteen batches of General IMNCI Refresher training was conducted in Gandhigram RTI and 340 personnel (CHN/SHN/VHNs) were trained comprising 276 VHNs, 25 ANMs, 32 SHNs 5 UHNs and 2 CHNs.

<b>Name of Training</b>	<b>No. of batches</b>	<b>No. Trained</b>
Gen - IMNCI- Ref. CHN/SHN/VHN	<b>14</b>	<b>340</b>

#### **4. NSSK trg for ANMs/ VHNs (2 working days)**

The risk of a child dying before completing five years of age is still the highest in the WHO I African Region (76 per 1000 live births), around 8 times higher than that in the WHO European Region (9 per 1000 live births). India's under-five mortality rate now matches the global average (39 deaths per 1,000 live births). But the according to a new report of infant remains a formidable challenge. These data indicate a continued risk of high mortality in the first year of life for Indian children.

As part of the Sustainable Development Goals set out by the UN, India has committed to reaching an under-five mortality rate of 25 deaths per 1,000 live births by 2030. Two-third of the neo-natal deaths occur in the first week of life and deaths among two-third of those which took place within the first 24 hours. Beginning of the sentence due to non-availability of delivery institutions in villages and smaller towns.



**Guest lecture on New born Care**

Causes of neonatal deaths include infection, complications related to premature birth, pneumonia, diarrhoea and measles apart from hypothermia and infection, and basic newborn resuscitation. Resuscitation is one of the three prong strategies to focus on New Born Care in National Rural Health Mission (23% of neonatal death occurs due to asphyxia at birth).

A two-day training was organised with TOT trained health team. The programme will enable the paramedical staff to save new born child and mother at various health centres across the country.

A total of 298 ANMs/VHNs/SHNs were trained in 15 batches during 2019-2020 in our RTI.

Name of Training	No. of batches	No. Trained
NSSK-ANM	15	298

## **II Other Training**

### **5. Managerial skills / Induction training to MOs (15 days)**

The Medical officers of GPHCs are the managers of the Primary Health Centres. To discharge their duties effectively, they need to have a good exposure on the organisational structure and functions of a Primary Health Centre. They have to know about the job functions of various categories of staff, supervisory arrangement, etc. They are exposed to various National Health Programs, management functions such as personnel, financial, material and vehicle management. They are also trained in the prevention and control of epidemics, IDSP, National Immunization Program, Vector-borne diseases, Communication skills, public speaking and other relevant topics to become the effective managers of GPHCs.

Participatory learning and teaching methods are used throughout the course. Well experienced resource persons in the field of public health share their experiences. Inter disciplinary faculty add value addition to the training. Eighteen Medical officers were trained in one batch.

Name of Training	No. of batches	No. MOs trained
Managerial Skill Training to MOs	1	18



**MOs attending a  
guest lecture on  
AFP by Dr Sathis,  
SMO**



**A guest lecture by  
DDTB, Dindigul**





*Dr Poongothai, DD-Medical, Dindigul handle session on Family Welfare Programs*

*Sr Entomologist delivers a guest lecture*



*Dr M. Sankarapandian delivers lecture on "Birth and Death Act"*

*DTT-MO handles a session*





National Family Planning Program in the beginning could not progress due to the higher prevalence of Infant mortality in the country. As the Govt. had realized the importance of ensuring the survival of their newborn to the mothers and family, it implemented various child survival programs. Immunization proved to be the most effect strategy Govt. adopted to reduce the child and maternal mortality. With the implementation of Universal Immunization Program (UIP), significant achievements have been made in preventing and controlling the

Vaccine Preventable Diseases. Immunization has to be sustained as a high priority to further reduce the incidence of all VPDs. Elimination of measles, control of rubella and sustain the eradication of poliomyelitis caused by wild polio virus so as to consolidate the gains achieved in maternal and child health..

Start point		Square lighter than circle. If the expiry date has not passed, USE the vaccine.
End point		Square matches the circle. Do NOT use the vaccine.
End point exceeded		Square darker than the circle. Do NOT use the vaccine.

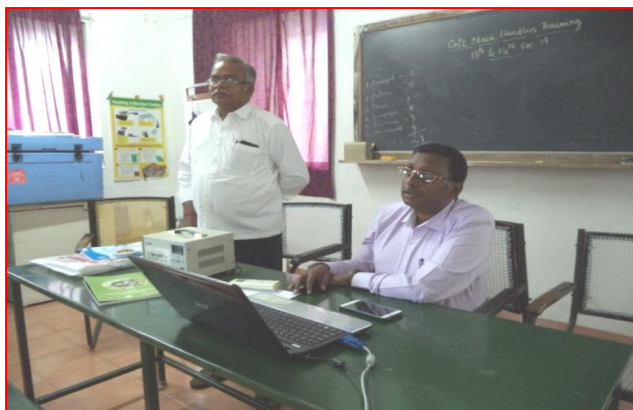
Since inception of UIP, a wide network of cold chain stores have been created consisting of Government Medical Stores, Depots (GMSD) and State, Regional, District and sub-district Vaccine Stores.Cold Chain network in the country has been the backbone to ensure the delivery of vaccine,



The objective of the training is to enable the cold chain handlers to efficiently manage the vaccines and cold chain system. It aims to equip them with the required technical and practical guidance for taking initiatives on their own to devise the most appropriate solution suiting their field circumstances. It is a significant effort to illustrate how technical and operational issues can be addressed in the field in order to maintain potency, safety and supply of vaccines.

A total of 426 personnel were trained in 16 batches to the following categories of staff.

PHARMACIST	HEALTH INSPECTOR	BLOCK HEALTH SUPERVISOR	MSO	VCCM/CCVSK	TOTAL
202	180	38	01	05	426



7.

## Immunization

The training was so designed that the health workers would be able to List diseases that are preventable by immunization under the Universal Immunization Programme (UIP), describe their mode of spread, how they can be recognized and prevented, explain different reasons for the low performance of immunization, micro plan and their roles in the effective implementation of the same. Immunization is one of the most effective method of preventing childhood diseases. With the implementation of Universal Immunization Program (UIP), significant achievements have been made in preventing and controlling the Vaccine Preventable Diseases (VPDs). Immunization has to be sustained as a high priority to further reduce the incidence of all VPDs, eliminate measles, control rubella and sustain the eradication of poliomyelitis caused by wild polio virus and the gains achieved in maternal and neonatal tetanus.



*Inauguration of the Immunization training to HWs  
by the Director, GIRH & FWT*

Session conducted by a team of facilitators for the  
Immunization training to Health Workers

A

total of 294 personnel were trained in 12 batches to the following staff.

VHN	ANM	SHN	CHN	UHN	TOTAL
214	43	27	07	03	294

### **III Special Training (Interim Calendar)**

Six newly recruited General Duty Medical Officers of Central Health Services, Govt. of India were deputed from National Institute of Health and Family Welfare , New Delhi from 13.01.2020 to 18.01.2020 as part of the Foundation Training Program. They were taken to various departments of the Institute to study the functions such as training, research and field activities. They were taken to various Public Health Institutions such as Govt. Primary Health Centre, Health Sub centres, Government Head Quarters hospitals and AYUSH institutions to observe and learn.

## **Foundation Training Program from NIHFw, New Delhi..**



### **3.1.5. POST GRADUATE DEPARTMENT OF HEALTH PROMOTION AND EDUCATION** (Affiliation with the Tamil Nadu Dr. M. G. R. Medical University, Chennai)

#### **Introduction**

The Gandhigram Institute of Rural Health and Family Welfare Trust is pioneer in commencing the Post Graduate Diploma in Health Promotion and Education Course (PGDHPE) in the year 1964, catering to the needs of appointing Health Educators as Block Health Educators/Block Extension Educators. The curriculum was developed by involving the policy-makers and programme executives both from Central and State Governments. The objective of the course is to produce the health education specialist who will promote the implementation of **National Health programmes** under National Health Mission (NHM), health care delivery and development of healthy behavior among people.

The P.G. Diploma in Health Promotion and Education Course is affiliated with the Tamil Nadu Dr.M.G.R. Medical University, Chennai. It is a one year professional and residential course. The student's sanctioned intake is 30 per batch.

#### **Objective of the course**

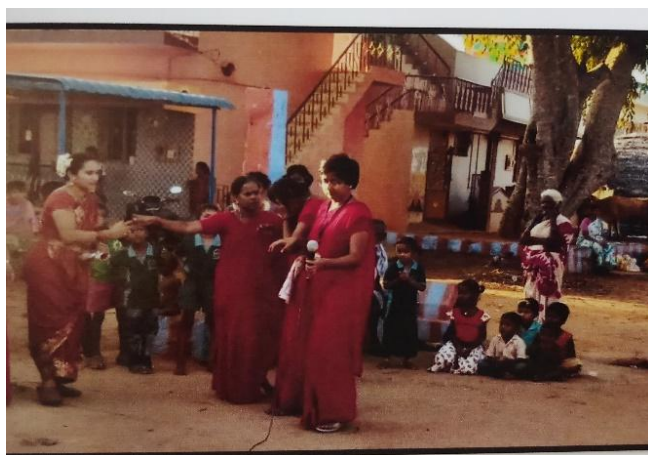
The main objective of the course is to prepare Professional Health Educators who will be able to plan, implement and evaluate the Health Education Programme according to the prevailing health problems and the National Health Programmes.

Our Institute has successfully produced 1488 students who are effectively and efficiently involved in the aspect of health promotion and education in all the National Health programs and thus effectively contributing their services in National Health Mission.

#### **Activities carried out**

The theory classes had been conducted for the PGDHPE (2018-19) students regularly and as part of the course, the PGDHPE students visited the village for conducting the Concurrent Field Training (CFT) programme from the month of April to June 2019. After survey and planning phase, the students implemented the health intervention programme in the village. After conducting the OTC in the village, many group meetings were conducted in CFT village (Sangalpatti village, Dindigul District, Tamil Nadu), in the meeting they imparted the Health Education to the community and tried to change their knowledge, attitude and the behavioral aspects.

CFT Program in Sangalpatti village, Dindigul District, Tamil Nadu



Necessary steps had been taken for admission of candidates to the PGDHPE course for the academic year 2019-20 and the course prospectus and application form has been uploaded in our Institute website [www.girhfw.org](http://www.girhfw.org).

As part of the course, the PGDHPE (2018-19) students carried out Supervisory Field Training (SFT) programme for two months from 16.07.2019 to 15.09.2019. We have relieved the 9 students from the institute for Supervisory Field Training (SFT) programme for their respective selective villages in Odisha, Tamil Nadu, Andhra Pradesh, Sikkim and Nepal and we have received the SFT joining report of the students through their respective SFT Guide.

As part of the PGDHPE course 2018-19, all students have successfully finished their Supervisory Field Training (SFT) in their respective villages.

We have conducted the model examinations for the PGDHPE course 2018-19 in July 2019. Subsequently, we conducted the model viva for the PGDHPE students.

We celebrated the “151<sup>st</sup> Gandhi Jayanthi” in Govt. Higher Secondary School, Mattaparai village, Dindigul District, Tamil Nadu on 05.10.2019. The officials from various departments like Health, Education, Revenue, Panchayat, Gandhigram Trust members and local leaders in the village. Apart from this, the Director of GIRH&FWT, staff, and students of the Institute participated in the Gandhi Jayanthi celebration.

The theory examinations and viva-voce examination schedule were announced by the University from the 15<sup>th</sup> October 2019. The University theory examinations for PGDHPE course (2018-19) commenced from 15.10.2019 to 22.10.2019 and the viva-voce examination was conducted on 30.10.2019. The students were relieved from the Institute on the afternoon of 30.10.2019

The admission selection process was initiated and finalized the candidates and the selection orders were sent to the 18 selected candidates for the year 2019-20.

**Admissions for the year 2019-20 (56<sup>th</sup> batch)** – We had admitted 15 students, representing 4 from Nepal, 2 from Odisha, 3 from Andhra Pradesh, 1 from Sikkim, 2 from Kerala and 3 from Tamil Nadu for the P.G. Diploma in Health Promotion and Education course in the month of October 2019.

### **Classroom Activities for the PGDHPE students**

Apart from the classroom theory sessions, orientation on Concurrent Field Training (CFT) was conducted from 02.01.2020 to 05.02.2020 as a preparation for sending the PGDHPE students for carrying out the field activities in selected two villages namely Kethaiyagoundanpatti and Pachamalaiyankottai from the first of February 2020 onwards. The selection of the suitable villages was carried out for the above said field activities. For the above field visit a permission letter was sent to the Deputy Director of Health Services, Dindigul District.

### **Concurrent Field Training (CFT) of PGDHPE students (2019-20)**

**Survey Phase:** After the completion of orientation on Concurrent Field Training (CFT) the students were taken to the selected villages for carrying out the different surveys from 01.02.2020 to 11.02.2019 (11 days).

CFT Programs in Kethaiyagoundanpatti & Pachamalaiyankottai villages, Dindigul District, Tamil Nadu



## Observation Visits

The students were taken for observation visits to Thirumoorthy Nagar, Udumalpet to learn about slow sand filter water treatment and rapid sand filter water treatment on 28.02.2020 and to Madurai for visiting slaughter house at Nelpettai, sewage treatment farm and solid waste management plant in Avaniyapuram on 29.02.2020.





### Media Practical

The students were given hands-on training in preparation of different health education materials like posters, flipcharts, flannel graph, hand bills, notice, flash cards, puppets, banners along with computer operation, photography and videography from 12.02.2020 to 27.02.2020 (16 days) in the Media Division of our Institute.



### **Concurrent Field Training (CFT) of PGDHPE students**

After the completion of survey analysis, the students were unable to conduct the OTC programme in their respective villages due to covid-19 pandemic in March 2020.

Due to covid-19 outbreak, the DHPE Department could not conduct the regular theory sessions as per the time table, thus the PGDHPE students went to their native places with the Institute's permission. Hence, we could not have the normal classroom teaching for the month of April 2020 as per the schedule prepared for the course. But, we found the transition to online teaching and learning effective for this period. Hence, as per the direction of the Director, all DHPE Faculties handled their respective classes through online, Gmail, Zoom App to cover the April 2020 month portions. Due to complete lockdown curfew by the Central and State Governments, the students and faculties could not proceed with the CFT programme in their respective villages, but we continued the CFT programme through online. And we are determined to complete the entire portions, subjects and CFT record activities of DHPE within the stipulated time, despite the hardships emerged due to covid-19.

### **3.2. REGIONAL HEALTH TEACHERS' TRAINING INSTITUTE (RHTTI)**

#### **3.2.1. I) HEALTH VISITOR COURSE [PROMOTIONAL TRAINING FOR ANM/MPHW(F) – Six Months VII-Batch (2018-19)]**

We have commenced the VII-batch of the course on 25<sup>th</sup> October 2018, and enrolled 15 candidates from various municipal corporations of Tamil Nadu and Directorate of Medical and Rural Health Services.

- **Theory Session**

Theory sessions were taken by RHTTI faculty on Anatomy and Physiology, principles of nursing, Psychology, Sociology, Communication, Supervision and Management, Pediatrics, Midwifery and Community Health Nursing.

- **Model examination**

Model examinations were conducted from 25.03.2019 to 03.04.2019. After model examinations were over, study holidays for the Govt. board examinations were declared for the students from 07.04.2019 to 11.04.2019.

- **Govt. Board Examination**

The Govt. board examinations were conducted for the students from 12.04.2019 to 24.04.2019. The trainees were relieved on 24.04.2019 after completion of the Course.

The Internal mark list of 15 regular candidates sent to Directorate of Public Health and Preventive Medicine, Chennai.

- **Result**

The Government board examination results for 15 candidates of VII-batch (2018-19) received from Directorate of Public Health and Preventive Medicine, Chennai. All the 15 candidates were passed successfully and the course certificates were issued by the Board of Examination to the candidates.

#### **II) HEALTH VISITOR COURSE [ PROMOTIONAL TRAINING FOR ANM/MPHW (F) – 6 Months VIII-Batch (2019-20)]**

The recognition order/validity for the academic year 2019-20 received from Tamil Nadu Nurses and Midwives Council, Chennai, and Indian Nursing Council, New Delhi. Preliminary work has been initiated for admission of candidates. Admission intimation letters were sent to all municipal corporations of Tamil Nadu

and Directorate of Medical and Rural Health Services to select and depute the candidates for the course.

Admission orders were sent to eligible candidates of the municipal corporations of Tamil Nadu and DMS for the course.

We have commenced the VIII-batch of the course on 25<sup>th</sup> October 2019. We have enrolled 22 candidates from various Government hospitals, Medical college hospitals and Municipal corporations of Tamil Nadu.

S.No.	Deputed from DMS/DME/Municipal Corporation	No. of candidates
1	Govt. Medical College Hospitals (Sivagangai, Vellore, Villupuram & Kanyakumari)	4
2	Municipal Corporations (Avadi & Salem)	4
3	Govt. ESI Hospitals/Dispensaries (Chennai & Tirunelveli)	3
4	Govt. District Headquarters Hospitals of Tamil Nadu	11
<b>Total</b>		<b>22</b>

### **Theory**

Regular theory sessions were taken by teaching faculty on Anatomy & Physiology, Principles of Nursing, Paediatrics, Midwifery, Community Health Nursing, Environmental Sanitation, Nutrition, Sociology and Psychology, Family Planning, Communication, Supervision & Management, Lesson Plan & Practice Teaching, and Health Education.

### **Clinical posting**

Trainees were posted for their clinical experience at Government District Headquarters Hospital, Dindigul, from 02.12.2019 to 14.12.2019. During the clinical posting, the trainees were able to give bedside nursing care for the patients in the medical ward, surgical ward, paediatric ward and maternity wards. In addition to that, as part of the curriculum requirement, they have completed two nursing care plans of medical surgical and paediatrics, mother care record and clinical presentation on various diseases.

## Observation Visit & Community Postings

S.No.	Period	Place	Posting for (subjects)
1.	20.12.2019	District Tuberculosis Centre, Dindigul Govt. Headquarters Hospital, Dindigul	To learn about RNTCP, Lab investigations, Drug regimen and care of TB patients
2.	21.12.2019	Blood Bank and Anbagam AIDS Care Centre, Dindigul	<ul style="list-style-type: none"> <li>To learn about functions and storage facilities of Blood Bank .</li> <li>To learn about HIV/AIDS and care of HIV/AIDS patients at AIDS. care</li> </ul>
3.	08.01.2020 to 10.01.2020	Family Planning Association of India, Dindigul	To learn about various family planning methods, and to observe laparoscopy and pre, post care of family planning procedures
4.	03.02.2020 to 15.02.2020	Concurrent Field Training at Alagampatti village, Sakkayanayakanur PHC area	To learn about Household survey, Participatory Learning Methods/ Techniques, Nutrition Demonstration, Immunization and School Health program.
5.	09.03.2020 to 11.03.2020	Supervisory Field Training (SFT) at Rural Health Centres, Ammayanayakkanur Block PHC	To understand the set up and functions of Health Sub centre in the Rural area.
6.	12.03.2020 to 13.03.2020	Supervisory Field Training (SFT) at Urban Health Centres, Dindigul Municipal Corporation	To understand the set up and functions of Urban health centre.

## Concurrent Field Training

Concurrent Field Training (CFT) at Alagampatti village, Sakkayanaickanur Additional PHC area, was conducted from 03.02.2020 to 15.02.2020. During the CFT posting, the trainees were able to do the following activities:

- Orientation, village transect, numbering of houses and community mapping
- Conduction of household survey
- Continuation of household survey and consolidation of survey
- Participating in school health programme
- ICDS visit and under-five assessment
- Participating in outreach services
- Conduction of focus group discussion
- Participating in Ante Natal Clinic and administration of vitamin-A prophylaxis
- Conduction of Participatory Learning Methods techniques
- Health Sub-Centre (HSC) visit and participating in immunization programme

- Nutrition demonstration and exhibition
- Conduction of orientation training camp for the leaders

### Media Practical

The trainees were posted in Media division on 05.03.2020 to 07.03.2020 to learn about preparation and use of Audio Visual Aids.

### Supervisory Field Training (SFT)

The trainees were posted for Supervisory Field Training (SFT) at Urban Health Centres, Dindigul Municipal Corporation for a period of 2 days from 12.03.2020 & 13.03.2020. The following activities were carried out by the trainees during their SFT:

- UPHC orientation
- Attending antenatal clinic at Urban Health Centre
- Discussion with UHN/HV/MCHO about their roles & responsibilities
- Participating in the UPHC activities
- Learning the records & the reports
- Attending review meeting at UPHC
- Preparation of ATP, FTP and Duty roaster
- Participating in the immunization clinic conducted at Saveriyarpalayam Health post
- Health centre visit and use of facility assessment check list at Mariyanathapuram Attending theory sessions taken by Medical Officer and others at PHC.

### Government Board Examination

In view of lockdown due to COVID-19 outbreak, the Health Visitor course trainees were relieved in the absence of Govt. Board examinations on 23.04.2020 after completion of the course.

### 3.2.2. III) SHORT TERM TRAINING ON COMMUNITY HEALTH NURSING EXPERIENCE

Sl. No.	Name of the College	Category of students	Period		Duration	No. of trainees
			From	To		
	<b>COMMUNITY HEALTH NURSING</b>					
1	Bishop's College of Nursing, Dharmapurai	M.Sc.(N)	03.06.2019	07.06.2019	4 days	2
2	Sri Ramachandra Naidu College of Nursing, Sankarankoil	M.Sc.(N)	03.06.20019	07.06.2019	5 days	1

3	Christian Fellowship Hospital, Oddanchatram	D.G.N.M.	07.06.2016	--	1 day	34
4	Seventh Day Adventist College of Nursing, Ottapalam, Kerala	B.Sc.(N)	17.06.2019	19.06.2019	3 days	39
5	Christian College of Nursing, Ambilikkai	B.Sc.(N)	06.07.2019	--	1 day	50
6	State Institute of Health & Family Welfare, Bangalore	C.P.H.N.	21.10.2019	23.10.2019	3 days	30
7	KMC, Trichy	B.Sc.(N)	29.10.2019	02.11.2019	5 days	40
8	O.P.R. Memorial College of Paramedical Science, Vadalur	B.Sc.(N)	04.11.2019	08.11.2019	5 days	40
9	O.P.R. Memorial College of Paramedical Science, Vadalur	B.Sc.(N) A.N.M. P.B.B.Sc.(N)	11.11.2019	15.11.2019	5 days	15 17 6
10	Vinayaka Mission's College of Nursing, Karaikal	M.Sc.(N)	06.11.2019	20.11.2019	12 days	1
11	O.P.R. Memorial School of Nursing, Vadalur	D.G.N.M	18.11.2019	22.11.2019	5 days	19
12	Kasturba Gandhi School of Nursing, Malavanthangal, Villupuram District	D.G.N.M	18.11.2019	22.11.2019	5 days	16
13	Dr. Mahalingam Institute of Paramedical Sciences, Erode	B.Sc.(N)	25.11.2019	29.11.2019	5 days	28
14	Dr. Mahalingam Institute of Paramedical Sciences, Erode	D.G.N.M B.Sc.(N)	16.12.2019	20.12.2019	5 days	17 8
15	Aswini College of Nursing, Thrissur, Kerala	B.Sc.(N)	20.01.2020	24.01.2020	5 days	30
16	Aswini College of Nursing, Thrissur, Kerala	M.Sc.(N)	20.01.2020	24.01.2020	5 days	1
17	Aswini College of Nursing, Thrissur, Kerala	B.Sc.(N)	27.01.2020	31.01.2020	5 days	29
18	Vignesh Nursing College, Thiruvannamalai	M.Sc.(N)	10.02.2020	14.02.2020	5 days	14
19	Bishop's College of Nursing, Dharapuram	B.Sc.(N)	17.02.2020	21.02.2020	5 days	25
20	Nehru College of Nursing, Palakkad, Kerala	B.Sc.(N)	24.02.2020	28.02.2020	5 days	37
<b>MIDDLE LEVEL HEALTH CARE PROVIDER (MLHP) TRAINING</b>						
21	Sara College of Nursing, Dharapuram	B.Sc.(N)	02.03.2020	07.03.2020	6 days	23
22	Sara College of Nursing, Dharapuram	B.Sc.(N)	09.03.2020	14.03.2020	6 days	22
23	Nehru Nursing College, Vallioor, Tirunelveli District	B.Sc.(N)	16.03.2020	20.03.2020	5 days	24
<b>Total</b>						<b>568</b>

## Regional Health Teachers Training Institute (RHTTI)



Visit to District Tuberculosis Centre at District Govt. Headquarters Hospital, Dindigul



Visit to Family Planning Association of India, Dindigul



Health Check-up & Health Education Programme  
at Govt. Primary School, Azhagampatti Village



PLM Technique Demonstration at Azhagampatti village



Nutrition Demonstration and Exhibition at Azhagampatti village



Orientation Camp for the leaders at Community Hall, Azhagampatti village



Short Term Course on Community Health Nursing for B.Sc.(N) students

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## 4. Self financing course

### 4.1. Diploma in Medical Laboratory Technology (DMLT)-2 years

The Gandhigram Institute of Rural and Family Welfare Trust is conducting a self financing two year Diploma course in Medical Laboratory Technology (DMLT) Course approved by the Directorate of Medical Education, Govt of Tamil Nadu vide GO (MS) No- 357 of Health and Family Welfare (PME) Department dated 09.10.2017.



#### Objectives of the course:

At the end of the course, the students will able to

- Perform all the pathological, serological and bio-chemical examinations of all the samples of human being efficiently.
- Develop and enforce a professional code of conduct.
- Understand and perform their roles in National Health Programmes in hospital settings.

A total of 45 students were undergoing the course in 2018-2019 as follows:

Batch No	Academic Year	No .of Students		
		Male	Female	Total
VII	2017 – 2019	7	8	15
VIII	2018-2020	1	14	15
IX	2019-2021	3	27	30

## **Activities of the DMLT course:**



### **a) Regular theory and practical classes**

Seventh and VIII batch of DMLT students attended the theory and practical classes as per the curriculum given by King Institute of Preventive Medicine and Research, Chennai.

### **b) Lab experience in hospital settings**

As per the curriculum of the course 15 students (2017 – 2019 batch) attended one month Laboratory training from 01<sup>ST</sup> September to 30<sup>TH</sup> September 2019 at District Head Quarters Hospital, Dindigul. They had the skill practice in the following labs:

- General lab
- Blood bank
- ICTC
- RNTCP.



The batch also attended internship training first spell from 2<sup>nd</sup> February 2020 to 20<sup>th</sup> March 2020 at Kasturba Hospital, Gandhigram.

### **c) Achievement in Medical Board Examination**

The DMLT students (2017 – 2019 batch) appeared for the Medical board examination conducted by the Directorate of Medical Education, Govt. of Tamil Nadu. 14 students were passed out the exam successfully.

### **d) Admission of candidates for the academic year 2019 -2021.**

As per the new GO Ms. No. 357 Health and Family Welfare (PME-2) dt. 09.10.2017 admitted 30 candidates for the academic year 2019-21.

### **Awareness on COVID-19**



## 5. DISSEMINATION UNIT

### 5.1. Library

The GIRH Institution of education has the main responsibilities of equipping Students, Trainees, Researchers, Faculty and Staff with advanced knowledge. In particular library undertakes many responsibilities and performs varied functions and it plays a vital role to our education & research by providing invaluable resource for knowledge and services.

#### **Mission of the Library:**

"To provide quality services, facilitating access to comprehensive and relevant resources, and fostering good learning environment through the collection of physical and electronic documents from various sources and disseminate to patron".



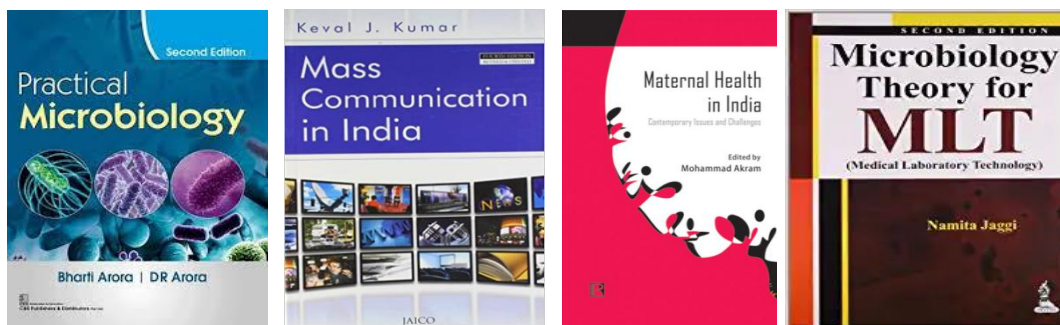
#### **Library Facilities:**

- More number of seats are available for all library users
- Library has good ventilation and lighting facilities
- A good environment for reading the resources
- Wi-Fi connectivity is available in the library premises
- Printing facility is available in the library with some criteria
- Library resources transaction facility is available for all users
- Internet facility for all the library users including searching and downloading

#### **Library Holdings:**

##### BOOKS:

- |                               |                          |
|-------------------------------|--------------------------|
| • Public Health               | • Mass Communication     |
| • Demography                  | • Training & Development |
| • Family Welfare              | • Psychology             |
| • Reproductive & Child Health | • Social Psychology      |
| • Communication               | • Research Methodology   |
| • Sociology                   | • Anthropology           |
| • Environmental Sanitation    | • General Management     |
| • Nursing and Midwifery       | • Statistics             |
| • Behavioral Sciences         | • Nutrition              |
| • Health Education            |                          |
| • Medicine                    |                          |



### WHO Books:

In-addition to its collection, the library has access to World Health Organization books focused on Public Health, Preventive Medicine, Primary Health Care, Nursing Management and Allied Health. Also, a collection of some old reports and documents published by WHO are kept preserved.



### List of Books Purchased for the Academic Year 2019-2020

Sl. No	Accession Nos.	Authors	Title of the Book
1	10703	Mehta, N V	Income-Tax Ready Reckoner
2	10704	Vinod K Singhania	The Budget 2019-20
3	10705	John R Weeks	Population: An Introduction to Concepts & Issues
4	10706	Bradn McLoughw	Urban and Regional Planning
5	10707	Arthur Stinchcombe	The Logic of Social Research
6	10708	Jeane W Anastas	Teaching in Social Work
7	10709	Jafar	Education, Migration and Human Development
8	10710	Sita Vanka	Gender, Law and Health
9	10711	Arpita Verma	Women's Health and Nutrition
10	10712	John R Short	An Introduction to Urban Geography
11	10713	Anthony Giddens	New Rules of Sociological Method
12	10714	Shanthi Johnson	Ageing and Health in India
13	10715	Usha Manjunath	Total Quality Service in Health Care
14	10716	Kilangla Jamir	Agriculture and Rural Transformation
15	10717	Mohammad Akram	Maternal Health in India
16	10718	Pramanick	Sociology of G. .S Ghurye

17	10719	George Ritzer	Postmodern Social Theory
18	10720	Sangeeta Gupta	Elderly Widows
19	10721	Jay Weinstein	Demography
20	10722	Aditi Kundu	Population, Fertility, and Family Planning
21	10723	Mohammad Akram	Sociology of Health
22	10724	Ramesh Kumar	Health, Human Rights of Ethics
23	10725	Madhu Nagla	Sociology of Health and Medicine
24	10726	Lakshmana	Population, Development, and Environment
25	10727	Insa Klasing	Disability and Social Exclusion in Rural India
26	10728	Remi de Bercegal	Small Towns of Decentralisation in India
27	10729	Rani Mehta	Social Dynamics of Inclusive Development
28	10730	Daliya Cebastian	Ageing & Elder Abuse
29	10731	Marianne	Group Work: Process and Practice
30	10732	Uwe Flick	An Introduction to Qualitative Research
31	10733	Wsevolod W Isajiw	Causation and Functionalism in Sociology
32	10734	Thingar	Demography
33	10735	Immy Holloway	Essentials of Qualitative Doctorate
34	10736	Anuj Kapilashrani	Global Health Governance and Commercialisation of Public Health in India
35	10737	Martin J Osseswaarde	Introduction to Sustainable Development
36	10738	John Rex	Key Problems of Sociology Theory
37	10739	Sujit K Bose	Operations Research Method
38	10740	Vimala Veeraraghavan	Text Book of Parametric and Non Parametric Statistics
39	10741	Sorinder SFodhka	A Handbook of Rural India
40	10742	Pulapre Balakrishnan	Economic Growth and its Distribution in India
41	10743	Jean Dreze	Social Policy
42	10744	Tina Sachdeva	Population Policy and Family Welfare
43	10745	Kashyap	Rural Sociology
44	10746	Amrita Verma	Indian Social Movement
45	10747	Suresh Vadranam	Local Government Good Governance NEO Social Transition
46	10748	CBS Publishers	First Aid Manual for Nurses
47	10749	James Dooher	Fundamental Aspects of Mental Health Nursing
48	10750	CBS Publishers	Textbook of Environmental Hygiene
49	10751	Keval J Kumar	Mass Communication in India
50	10752	Keval J Kumar	Mass Communication in India
51	10753	J Ochei	Medical Laboratory Science: Theory

			& Practice
52	10754	J Ochei	Medical Laboratory Science: Theory & Practice
53	10755	Namita Jaggi	Microbiology Theory for MLT
54	10756	Namita Jaggi	Microbiology Theory for MLT
55	10757	Bharti Arora	Practical Microbiology
56	10758	Bharti Arora	Practical Microbiology
57	10759	Bharti Arora	Practical Microbiology
58	10760	Bharti Arora	Practical Microbiology
59	10761	Satish Gupta	The Short of Text Book of Medical Microbiology
60	10762	Satish Gupta	The Short of Text Book of Medical Microbiology

### Journals:

Library has subscription and free National & International Journals for the past 30 years focused on Health and allied subjects. Because of Journals are the medium of scientific communication with up-to-date information.

- Demography India
- Economic & Political Weekly
- Health Action
- Health: Promotion and Education
- Health: A Journal Devoted to Healthful Living
- Indian Journal of Continuing Nursing Education
- Indian Journal of Clinical Practice
- Journal of Family Welfare
- Journal of Pediatric Nursing
- Journal of Medical Surgical Nursing
- Journal of Community Health Nursing
- Journal of Obstetrics and Gynaecology Nursing
- Journal of Mental Health Nursing
- Journal of Nursing Education & Administration
- Nightingale Nursing Times
- The Indian Journal of Social Work
- The Nursing Journal of India
- YOGA and Total Health

In addition, library has health management related Magazines, News Letters & News Papers

### **Back Volumes:**

Library has very good collection of back volumes of journals focused on Demography, Epidemiology, Family Planning, Health Sciences, Medical Research, Nursing, Nutrition, Preventive Medicine, Public Health and General Management.

### **Project Reports:**

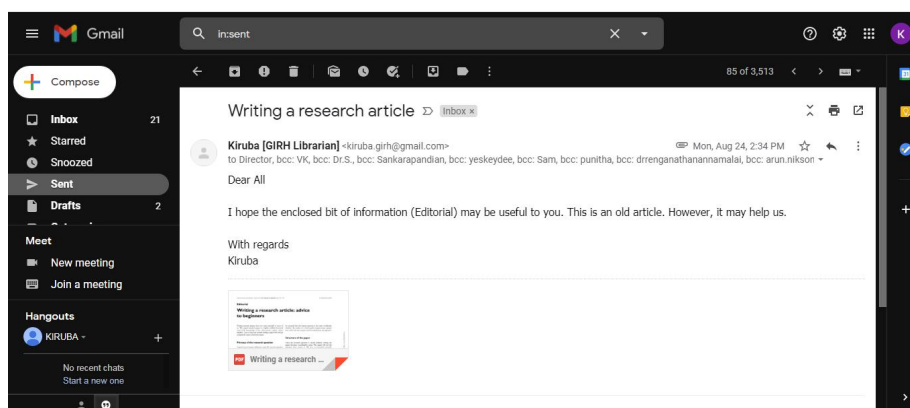
Library has a good collection of students and research scholar's dissertation in various subject headings done in Health Education, Demography, Mental Health, Public Health and etc., which is extremely useful for new trainees and students for their research and project.

### **Services:**

Library provides the following important services to all the users of GIRH such as Current Awareness Service (CAS), Selective Dissemination of Information (SDI), and News articles from different Journals, Magazine and News papers. The Information covered on community health, preventive medicine, nursing management and allied subjects. All the information has been forwarding to all the users via their email IDs. CAS service is monthly based and SDI and News articles are daily based. Also, main objective is to provide the reference service. Librarian assists users to find the references needed to their study and research.

Librarian provides a user education in regular basis for the new users including students from various courses, trainees and others coming to our institute, which helps users to identify the available resources in library (Print and Electronic) for easy access.

### **Electronic services:**



### **Databases:**

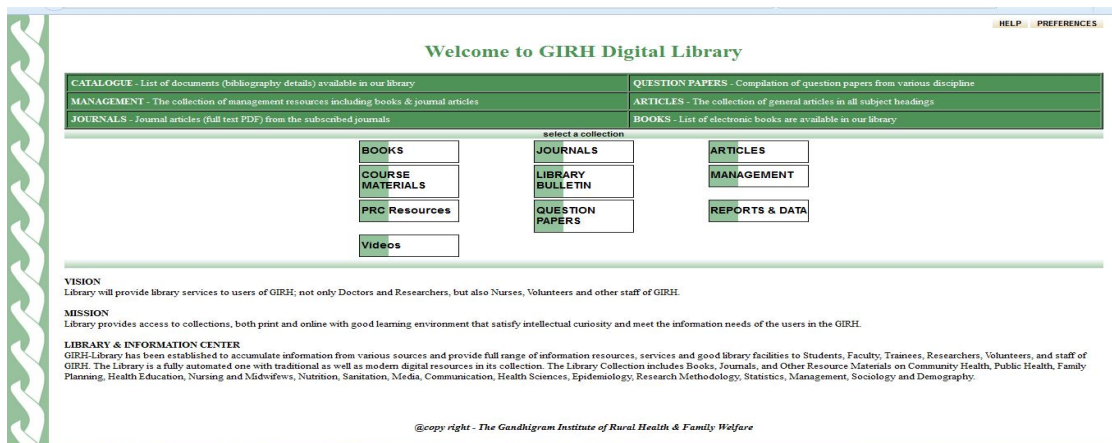
CDS/ISIS, GSDL and PubMed databases are used to retrieve the citation and full text literature.

### **CDS/ISIS:**

Currently, library has a collection of electronic catalogues documented and indexed with the help of library software called CDS/ISIS and through this e-catalogue librarian is able to meet the user's needs.

## **Greenstone Digital Library (GSDL):**

For the digital library, the librarian recently has started and builds a digital platform with the help of Greenstone Digital Library (GSDL) Software. Through this software all the electronic resources are gathered and built the collection. After the completion of these work users can have an easy access to all the electronic resources including Journal articles, eBooks, and etc in all formats (PDF, WORD, PPT, and EXCEL).



## **User and the electronic resources:**

(Users access electronic resources via their email IDs)

Based on this services librarian sends electronic resources requested by the users as well as SDI (Selective Disseminated of Information) to the library users including The Director, HoDs, Faculty, PGDHPE students, DMLT students, HV course students, GIRH staff and all trainees and others.

## **Free eBook & eJournals:**

Librarian frequently downloading eBooks and eJournals from online (health databases and Journals websites) related to Health and Healthcare Management and kept in the electronic repository of GSDL database for easy access and also forward to users.



*Regarding this emails services, librarian communicates to all the users on daily based and last year sent more than 1300 mails in different subject headings and the resources. In common resources/information to sent everyone and subject based information forwarded to concerned users.*

## **Consortium:**

Librarian is a member of Association of Vision Science Librarian (AVSL) and its consist of more 200 librarians in world wide. Librarian is able to collect the unavailable articles, data and any other resources from AVSL for institute faculty and the students.

## 6. ADMINISTRATIVE STRUCTURE

### 6.1. LIST OF BOARD OF TRUSTEES - Members address list (2019-2020)

Smt. Sheela Rani Chunkath, IAS (Rtd) No. 17, Kaveri Salai, Kalachetra Colony, Besant Nagar, Chennai – 600 090. Chairman	The Secretary to Government of India Ministry of Health and Family Welfare Nirman Bhavan New Delhi – 110 108 Ph: 011-23062432 / 23061863 Ex-Officio
The Secretary to Govt. of Tamil Nadu Health and Family Welfare Department Government of Tamil Nadu Secretariat Chennai – 600 009 Ph: 044-25671875 Ex-Officio	The Director of Public Health & Preventive DMS Office Complex, Medicine, 359 Anna Salai, Teynampet Chennai – 600 006 Ph: 044-24320802 <a href="mailto:dphpm@rediffmail.com">dphpm@rediffmail.com</a> Ex-Officio
The Director International Institute for Population Sciences (Deemed University) Govandi Station Road Deonar, Mumbai – 400 088 Ph: 022-25562062 / 25573943 Ex-Officio	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 Ph: 044-24919232 Ex-Officio
The District Collector, Dindigul District Velunachiar Compound Dindigul – 624 001 Ex-Officio	Dr.R. KousalyaDevi Life Trustee Gandhigram Trust Gandhigram – 624 302 Special Invitee
Ms. Shobana Ramachandran, Managing Director, M/s.TVS Srichakra Ltd, No.16, Jawahar Road, Madurai 625002. Member	Shri.K.Shivakumar, Managing Trustee, Gandhigram Trust Gandhigram – 624 302 Ph: 0451 – 2452326 Ex-Officio
The Vice Chancellor Gandhigram Rural University Gandhigram – 624 302 Ph: 0451 – 2452371 Ex-Officio	The Medical Superintendent Kasturba Hospital Gandhigram – 624 302 0451-2452328 Ex-Officio
Dr. G. Natchiar Director (HRD) Aravind Eye Hospital, Anna Nagar Madurai – 625 020 Ph: 0452- 2532653 / 4356100 Member	Dr.R. Jayaraman Principal Officer-CED Trust, Paddy and Flower Market Complex, Mattuthavani, Madurai – 625 007. Cell No. 9443069056 Member
Dr. Aram Subramaniam, M.S., MCH. Madurai Medical College, Madurai – 625 020. Member	Sri. R. D. Thulasiraj, Director – Operations, Aravind Eye Care System & Executive Director-LAICO, 72, Kuruvikaran Salai, Gandhi Nagar, Madurai – 625 020. Member
Shri. M.P. Vasimalai Executive Director DHAN Foundation 1A, Vaidyanathapuram East, Kennet Cross Road, Madurai – 625 016 Member	Shri D.V. Jayaraman Partner M/s. V. Ramaswamy Iyer & Co., Chartered Accountants A-55, M.V.M. Nagar, Karur Road Dindigul – 624 001 Special Invitee
The Director, GIRH & FWT Soundram Nagar Gandhigram – 624 302 Member Secretary	Chairman - 1 Ex-officio Members - 9 Members - 6 Special Invitee's - 2 Member Secretary - 1 19

## 6.2. LIST OF EXECUTIVE COMMITTEE MEMBERS:

### EXECUTIVE COMMITTEE MEMBERS LIST (2019-2020)

S. NO.	EXECUTIVE COMMITTEE MEMBER NAME & ADDRESS	STATUS ON THE EXECUTIVE COMMITTEE
1.	Sri K. Shivakumar Managing Trustee Gandhigram Trust GANDHIGRAM – 624 302	Chairperson
2.	Dr. R. Kousalya Devi Life Trustee Gandhigram Trust GANDHIGRAM – 624 302	Special Invitee
3.	The Vice Chancellor, Gandhigram Rural University GANDHIGRAM – 624 302	Member
4.	Sri D.V. Jayaraman (Institute Auditor) Partner M/s. V. Ramaswamy Iyer & Co., A-55, M.V.M. Nagar Karur Road DINDIGUL – 624 001 0451-2430744 / 9443023643	Member
5.	Shri. M.P. Vasimalai Executive Director DHAN Foundation, 1A, Vaidyanathapuram East, Kennet Cross Road, Madurai – 625 016.	Member
6.	Dr. Aram Subramaniam, Madurai Medical College, Madurai – 625 020	Member
7.	The Director GIRH & FWT Soundram Nagar GANDHIGRAM – 624 302	Member Secretary
8.	Dr.M. Sankarapandian, Statistician, HFWTC GIRH & FWT Soundram Nagar GANDHIGRAM – 624 302	Elected Member (Teaching staff)
9.	Sri. R. Nallendiran, Upper Division Clerk, GIRH & FWT Soundram Nagar GANDHIGRAM – 624 302	Elected Member (Non-Teaching staff)

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.

### **6.3. FINANCE COMMITTEE MEMBERS LIST 2019-2020**

1. Shri K Shivakumar, B.Sc.,FCA.,FICWA.,DMA.(ICA) - CONVENER  
Finance Committee (GIRH & FWT.),  
Managing Trustee,  
Gandhigram Trust,  
Gandhigram 624 302.
2. Dr.G. Pankajam,  
Member, Finance Committee (GIRH & FWT.,)  
Secretary, Gandhigram Trust,  
Gandhigram – 624 302  
Ph: 0451 – 2452326
3. Prof. Dr.R. Jayaraman,  
Member, Finance Committee (GIRH & FWT.,)  
Member Secretary-CED Trust,  
54, Visuvasapuri First Street,  
Gnanaolivupuram,  
Madurai – 625 016.  
Cell No. 9443069056  
Ph : 0452-2459109
4. Shri D.V. Jayaraman, B.Com., F.C.A.,  
Chartered Accountants  
Member, Finance Committee (GIRH & FWT.,)  
M/s. V. Ramaswamy Iyer & Co.,  
A-55, M.V.M. Nagar, Karur Road  
Dindigul – 624 001  
Ph: 0451-2430744 / 2431944
5. The Director  
GIRH & FWT  
Soundram Nagar  
Gandhigram – 624 302  
Member Secretary

## 7. ANNEXURES

### 7.1. Participation of Faculty/Staff members in workshop/seminars/meetings

Name & Designation	Program details	Date	Place
Dr. S. Ravichandran, Chief	1st Orientation Workshop of Population Research Centre, Organized by Ministry of Health and Family Welfare, Government of India	30.05.2019 to 31.05.2019	New Delhi
Dr. S. Ravichandran, Chief	Attended Training Workshop on “Data Management & Analysis Using SPSS and STATA” Organized by Population Research Centre (PRC), ISEC	16.09.2019 to 21.09.2019	Bengaluru
Dr. S. Ravichandran, Chief	Attended 13th Common Review Mission (CRM) National Level Briefing Workshop	16.10.2019	New Delhi
Dr. S. Ravichandran, Chief	13th CRM in Tamil Nadu	16.10.2019 - 23.10.2019	Viruthungar
Dr. S. Ravichandran, Chief	Attended 4th Knowledge Dissemination Workshop at Patna University	16.01.2020 to 17.01.2020	Patna
Dr,N.Dhanabhagym, Assistant Chief	1st Orientation Workshop of Population Research Centre, Organized by Ministry of Health and Family Welfare, Government of India	30.05.2019 to 31.05.2019	New Delhi
Dr. N. Kala, Research Investigator	1st Orientation Workshop of Population Research Centre, Organized by Ministry of Health and Family Welfare, Government of India	30.05.2019 to 31.05.2019	New Delhi
Dr.V.Saravanakumar Research Investigator	Attended Training Workshop on “Data Management & Analysis Using SPSS and STATA” Organized by Population Research Centre (PRC), ISEC	16.09.2019 to 21.09.2019	Bengaluru
Mr.M.Senthil Kumar	1st Orientation Workshop of Population Research Centre, Organized by Ministry of Health and Family Welfare, Government of India	30.05.2019 to 31.05.2019	New Delhi
Mr. N. Raja Kumar	1st Orientation Workshop of Population Research Centre, Organized by Ministry of Health and Family Welfare, Government of India	30.05.2019 to 31.05.2019	New Delhi
Mrs. K. Alageswari, PHNO	District Quality Management Team Training	21.11.2019 to 23.11.2019	Health & Family Welfare Training Centre, Madurai
Mrs. K. Alageswari, PHNO	ToT organized by IIHS, Chennai, under FSTP Project	22.01.2020 to 23.01.2020	Hotel Kiscoil Grant, Coimbatore
Mr. R. Ganesan, SSO	Orientation Training Program for De-sludge Operators	19.11.2019	Karunguzhi, Chengalpattu District

**7.2. SANCTIONED STAFF STRENGTH (2019-2020)  
(GOVT. GRANTS AND INSTITUTE FUNDS)**

**I. GOVERNMENT GRANT**

S. No.	Name of the post	Permanent		
		Sanctione	Filled	Vacant
<b><u>1.1. CTI-Central Unit</u></b>				
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	<b>4</b>	<b>3</b>	<b>1</b>
<b><u>1.2. CTI-Diploma in Health Promotion &amp; Edn.</u></b>				
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	2	2
	Total	<b>8</b>	<b>4</b>	<b>4</b>
<b><u>1.3. CTI-Health &amp; Family Welfare Trg. Centre</u></b>				
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	0	2
	Total	<b>10</b>	<b>5</b>	<b>5</b>
<b><u>1.4. CTI-Administrative Unit</u></b>				
19.	Administrative Officer	1	0	1
20.	Office Superintendent	1	0	1
21.	Senior Accountant	1	1	0
22.	Stenographer	1	0	1
23.	Steno-Typist	3	3	0
24.	Librarian	1	1	0
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	1	1
30.	Driver	6	1	5
31.	Attender	2	2	0
32.	Peon-cum-Daftry	1	1	0
33.	Domestic Staff	3	2	1
	Total	<b>27</b>	<b>16</b>	<b>11</b>

S. No.	Name of the post	Permanent		
		Sanctione	Filled	Vacant
<b>2. Regional Health Teachers Training Institute</b>				
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	0	1
41.	Domestic Staff	2	2	0
42.	Cook	1	1	0
	Total	<b>12</b>	<b>8</b>	<b>4</b>
<b>Population Research Centre</b>				
43.	Chief	1	1	0
44.	Assistant Chief	1	1	0
45.	Research Officer	2	0	2
46.	Research Investigator	4	2	2
47.	Field Investigator	4	3	1
48.	Data Assistant	4	3	1
49.	Documentalist	1	1	0
50.	Office Superintendent	1	1	0
51.	Assistant	1	0	1
52.	Upper Division Clerk	1	1	0
53.	Lower Division Clerk	1	1	0
54.	Driver	1	1	0
55.	Attender	1	1	0
	Total	<b>23</b>	<b>16</b>	<b>7</b>
	<b>TOTAL</b>	<b>84</b>	<b>52</b>	<b>32</b>

## **II. INSTITUTE FUND**

S.No.	Name of the post	Permanent		
		Sanctioned	Filled	Vacant
1.	Accounts Officer	1	0	1

## **III. BUILDING MAINTENANCE FUND**

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

## **IV. MESS**

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

**RECRUITMENT DETAILS FOR THE YEAR 2019-2020**

Permanent Positions: Nil

**RETIREMENT DETAILS FOR THE YEAR 2019-2020**

Permanent Positions:

S. No.	Name & Designation	Grant	Date
1	Dr. A. Mohan Principal	CTI HFWTC	Relieved on 14.05.2019 AN
2	Smt. G. Poongavanam Upper Division Clerk	CTI-AU	Retired on superannuation on 30.06.2019 AN
3.	Sri. K. Rajaperumal Health Education Instructor	CTI HFWTC	Retired on superannuation on 31.01.2020 AN

**Recruitment details for the year 2019-2020 Contract Position (PRC):**

S. No.	Name & Designation	Grant	Date of joining
1	Ms. T. Nithya, Lower Division Clerk	PRC	14.06.2019 FN

**Contract Position (PRC):**

S. No.	Name & Designation	Grant	Date of Relieving
1	Sri. S. Palanichamy, Office Superintendent	PRC	31.08.2019 FN
2	Ms. Y. Kowsalya Julie, Field Investigator	PRC	29.02.2020 AN



The Gandhigram Institute of Rural Health and  
Family Welfare Trust

Soundram nagar, Gandhigram Post, Dindigul - 624302  
Tamilnadu