(Reference to Paragraph No. 3.5, Page No.72)

Availability of Diagnostic services in DHs

Name of Service	Name of Test/Diagnostic Services	BOD	GAD	GAJ	HYD	KDP	MDK	MED	MUL	NRY	NRS	PED	TDR	UT	YB
Radiology	X-ray for chest, skull, spine, Abdomen, bones	A	A	A	А	A	A	A	A	A	A	A	A	A	A
	Dental X-ray	NA	NA	A	Α	NA	A	NA	NA	A	A	NA	NA	NA	NA
	Ultrasonography	A	A	A	Α	A	A	Α	A	A	A	A	A	A	A
	CT Scan	NA	NA	NA	Α	NA	NA	NA	A	NA	NA	A	A	NA	NA
	Barium Swallow, Barium meal, Barium enema, IVP	NA	A	NA	NA	NA	NA								
	MMR (Chest)	NA	A	NA	NA	NA	NA	NA	A	NA	NA	NA	NA	NA	NA
	HSG	NA	A	NA	NA	NA									
Cardiac	ECG	A	A	A	Α	A	A	A	A	A	A	A	A	A	A
Investigation	Stress Tests	NA	NA	NA											
	ЕСНО	NA	NA	NA	NA	NA	A	NA	A	NA	NA	NA	NA	NA	NA
ENT	Audiometry	NA	NA	NA											
	Endoscopy for ENT	NA	NA	NA											
Ophthalmology	Refraction by using Snellen's Chart	A	A	A	NA	A	A	A	NA	NA	NA	A	NA	NA	NA
	Retinoscopy	NA	A	A	NA	A	NA	NA	A	NA	NA	A	NA	NA	NA
	Ophthalmoscopy	NA	A	A	NA	A	A	NA	A	NA	NA	A	NA	NA	NA
Endoscopy	Laparoscopic (diagnostic)	A	NA	NA	NA										
	Oesophagus	NA	NA	NA											
	Stomach	NA	NA	NA											
	Colonoscopy	NA	NA	NA											
	Bronchoscopy	NA	NA	NA											
	Arthroscopy	NA	NA	NA											
	Hysteroscopy	NA	NA	NA											
Respiratory	Pulmonary function tests	NA	NA	NA	NA	A	NA	NA	NA						

Source: Information furnished by the hospitals.

Code-A=available;/NA= Not available

(Reference to Paragraph No. 3.6.4, Page No. 77)

Availability of Oxygen services in the District Hospitals

Name of Service		District Hospitals												
	BOD	GAD	GAJ	HYD	KDP	MDK	MED	MUL	NRY	NRS	PED	TDR	UT	YB
Whether the requirement of oxygen in the hospital was assessed and infrastructure created accordingly?	NA	A	A	NA	NA	A	A	NA	A	A	A	A	A	NA
Whether the standard operating procedure for oxygen was available and was being followed?	NA	A	A	A	A	NA	NA	A	NA	NA	A	A	A	A
Whether agreements were executed for the supply of uninterrupted oxygen?	NA	A	A	NA	A	NA	NA	A	NF	NA	NA	A	A	A
Whether Centralised oxygen supply system was installed in the hospital?	A	A	A	A	A	A	A	A	A	NA	NA	A	NA	A
In all such cases, whether required buffer stock was assessed and maintained all the time?	A	A	A	A	A	A	A	A	NA	A	A	A	A	A
Whether records of serviceability and availability of oxygen cylinders were maintained as per guidelines?	A	A	NF	NA	A	NA	A	A	NA	A	A	NA	A	A
Whether required number Oxygen Supply (Central) are available in Eclampsia Room?	A	A	A	NF	A	NA	A	A	NA	A	A	A	NA	A

Name of Service						D	istrict H	ospitals						
	BOD	GAD	GAJ	HYD	KDP	MDK	MED	MUL	NRY	NRS	PED	TDR	UT	YB
Whether oxygen reservoir is available for each bed at Special New- born Care Unit?	NA	A	A	NA	A	NA	A	NA	NA	NA	NA	A	A	A
Whether the health institution have Double Outlet Oxygen Concentrator at Special Newborn Care Unit?	NA	A	A	NA	A	NA	A	NA	NA	NA	A	A	A	A
If the Centralised oxygen supply system was not installed whether adequacy of required oxygen cylinders was assessed?	A	A	NF	NF	A	NA	A	NA	NA	A	A	A	A	A

A-Available; NA –Not Available; NF-Not Furnished

(Reference to Paragraph No. 3.8, Page No.79)

Laundry services in the District Hospitals

Name of Service		Disrict Hospitals												
	BOD	GAD	GAJ	HYD	KDP	MDK	MED	MUL	NRY	NRS	PED	TDR	UT	YB
Availability of required linen sets	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Availability of system of changing the patient/OT linen at the prescribed intervals to maintain hygiene	A	A	A	A	A	A	A	A	A	A	NA	A	A	A
Availability of system to check the quality of cleanliness of the linen received from laundry	A	A	A	A	A	A	A	A	A	A	NA	A	A	A
Availability of date wise and patient wise records against each entry of linen issued from linen stock	A	A	A	A	A	A	A	A	A	A	NA	A	A	A
Availability of system for periodic physical verification of linen inventory	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Follow up of procedure for sluicing of soiled and infected linen	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Maintenance of norms for washing and drying of the linens	A	A	A	А	A	NA	A	A	A	A	NA	A	A	A

Source: Information furnished by DHs

Code: A = Available; NA = Not available

(Reference to Paragraph No. 3.8, Page No.79)

Laundry Services in the test checked AHs

Name of Service	Area H	ospitals
	Golconda	Malakpet
Availability of required linen sets	A	A
Availability of system of changing the patient/OT linen at the prescribed intervals to maintain hygiene	A	A
Availability of system to check the quality of cleanliness of the linen received from laundry	A	A
Availability of date wise and patient wise records against each entry of linen issued from linen stock	A	A
Availability of system for periodic physical verification of linen inventory	A	A
Follow up of procedure for sluicing of soiled and infected linen	A	A
Maintenance of norms for washing and drying of the linens	A	A

Source: Information furnished by AHs Code: A= Available; NA = Not available

Appendix 3.5 (Reference to Paragraph No. 3.14, Page No.90) Results of Doctors' and Patients' Survey

	Acsults of Doctors and Latients Sur			
SL No	Questionnaire	Number of beneficiaries,	Respo	,
SE IVO	Questionium	Doctors surveyed	Yes	No
1	Provision of required infrastructure	89	73	16
2	Aware of medical records in the hospital for last 3 years	89	84	5
3	Prescribing generic medicine and its availablility in pharmacy	89	76	13
4	Registration of the medical practitioner in the hospital	89	71	18
5	Display of registration number of Doctor in the clinic and prescription	89	25	64
6	Availability of trained and qualified nursing and para medical staff	89	84	5
7	Manual of SOPs in the Doctors chamber	89	63	26
8	Concerned immediately the Public health authorities in case of communicable and notifiable diseases	89	83	6
9	Awareness to patients regarding usage of prohibited drugs and its side-effects	89	82	7
10	Applicability of rules and regulations are sufficient to regulate the Government health sector	89	73	16
11	Any improvement to be made in the healthcare infrastructure in the Government hospitals	89	77	12
12	Monthly meetings to discuss or address the issues faced by the hospital	89	67	22

13	Monitoring system in place for patients requiring long	89	20	69
	term/continuous treatment (with ailments like TB/HIV			
	etc.)			

Results of OPD Patients' Survey

SL No	Questionnaire	Respo	onded s	Not Responded
		Yes	No	
1	Hospital Approachable by Road	375	0	0
2	Availability of the Enquiry/May I Help desk	272	103	0
3	Seating arrangement is adequate at Registration Counter?	355	20	0
4	Availability of Drinking Water Facility	348	27	0
5	Availability of Neat And Clean Toilet Facility	365	10	0
6	Adequacy of Registration Counters	365	9	1
7	Availability of Staff in Registration Counters	373	2	0
8	Cleanliness OPD Area	375	0	0
9	Satisfactory Patient Calling System	291	84	0
10	Satisfaction with the treatment given by the Doctor.	373	1	1
11	Explanation of nature of ailment by the Doctor	373	1	1
12	Availability of prescribed medicines in Pharmacy	371	0	4
13	Availability of all Pathological Tests	247	7	121
14	Availability of all Radiology Tests	215	39	121
15	Availability of Complaint Box	286	89	0

Results of IPD Patients' Survey

SL No	Subject	_	onded s	Not Responded
		Yes	No	
1	Response of Nurses	202	2	2
2	Periodical monitoring by nurses regarding medications	203	2	1
3	Periodical monitoring of Urine Cathers	126	4	76
4	Availability of Drugs in Pharmacy	194	10	2
5	Availability of Lab and Radiology facilities	200	4	2
6	Out of Pocket Expenditure for Medicines and Lab Tests	41	163	2
7	Consent for treatment from family members	204	0	2
8	Information about Patient Rights	205	0	1
9	Prompt Response to complaints	195	2	9
10	Availability of Doctors and services in case of emergency situations	205	1	0
11	Availability of Nurses round the clock	150	0	56
12	Provision of attendant / trolley / wheel chair services	201	1	4
13	Dignified behaviour of the staff while delivering services	205	0	1
14	Restriction of visitors at patient care areas	203	2	1
15	Effective security system in the patient care areas	201	4	1

SL No	Subject	_	onded s	Not Responded
		Yes	No	
16	Provision of food	190	10	6
17	Quality and sufficiency of food	140	2	64
18	Provision of diet as prescribed by the Doctor.	192	2	12
19	Provision of clean and ironed linen	150	0	56
20	Regular change of bed linen	145	3	58
21	Different colour linen in different days	109	37	60
22	Attending complaints about linen	111	23	72
23	Provision of clean house coat / pyjama	97	47	62
24	Regular cleaning of floors, walls etc.	150	0	56
25	Neat and clean status of toilets, sink etc.	134	16	56
26	Separate toilet facility for men and women	189	15	2
27	Regular removal of Garbage from the patient care area	205	0	1

Appendix 3.6
(Reference to Paragraph No. 3.14, Page No.90)
Results of Joint Physical Verification of test checked hospitals

	Questionnaire	Respo	onded	Not responded
		Yes	No	
Joint Inspection Report-Status of	Whether date of first visit was mentioned?	12	0	3
completeness of In- Patients Records	Whether diagnosis after investigation was made?	11	0	4
	Whether follow up treat was prescribed?	11	0	4
	Whether investigation was advised?	11	0	4
	Whether patients' occupation was noted?	5	7	3
	Whether signature and name of the Doctors was there?	11	1	3
	Whether clinical note was made?	10	2	3
Joint Inspection Report-Beneficiary	Whether bed linen is changed every day?	12	0	3
Survey- Laundry Services	Whether different coloured bed linen is provided on different weekdays?	4	7	4
	Whether bed linen is changed every time when got soiled?	12	0	3
	Whether neat and clean bed linen are provided which are dry and iron pressed?	9	0	6
	Whether clean bed side curtains are provided with each bed?	4	6	5
	Whether complaint about linen was attended?	3	0	12

	Questionnaire	Respo	nded	Not responded
		Yes	No	responded
	Whether any officer visits to check the bed linen every day?	6	2	7
	Whether toilets are neat and clean every time?	11	1	3
	Whether machines are used for moping?	1	14	0
	Whether garbage is removed from patient care area regularly?	12	0	3
	Whether closed trolley is used for removal of garbage?	5	7	3
Joint Inspection Report-Citizen	Whether the facility has established citizen charter?	8	7	0
Charter	Is it displayed in hospital?	8	7	0
	Are there adequate number of notice boards detailing the location of all the services/Departments/wards etc?	14	1	0
	Is it in simple local language (Telugu)?	12	1	2
	Is it followed at all the level?	11	2	2
	The facility displays the services and entitlements available in its Departments.	11	2	2
	It displays rights of patients	5	8	2
	Whether user charges are displayed?	3	3	9
	Charter provides information about available OPD services and their timings Department wise.	10	4	1
	Charter provides information about available diagnostic services.	11	3	1
	Charter provides information about available emergency and trauma care services and mode of approach thereof.	9	4	2
	Charter provides information about available family welfare, maternity and childcare services	9	3	3
	Charter provides information about available immunisation services.	9	3	3
	Charter provides information about available diagnostic services.	12	2	1
	Charter provides information about available ambulance services.	5	9	1
	Charter provides information about responsibilities of users.	4	10	1
	Charter provides information about services not available at the facility level.	1	14	0
	Charter provides information about equipment's not in order.	3	11	1
	Charter provides information about services available to BPL patients.	5	7	3
	Availability of Dietary service in the hospital	8	7	0

	Questionnaire	Respo	onded	Not responded
		Yes	No	responded
Joint Physical	Availability of dedicated kitchen	6	7	2
verification of Dietary Services	Whether dietician is available? If not, since when		11	2
	Whether food supplied to the patients is patients specific such as diabetic, semi solid and liquid?	13	2	0
	Whether system of diet counselling to the patients, formulation of caloric requirement and accordingly setting diet for the patients is adopted?	6	6	3
	Whether types of the diets prescribed by the Department. If so, the details may be furnished	6	6	3
	List of the items to be provided in diet is prepared (Menu Chart)	6	5	4
	Whether diet is provided to the patients as per the Menu chart?	7	3	5
	Whether facility of serving trolley is provided?	6	5	4
	Whether protective gears (apron, head gear, clear plastic gloves) are used by the cooks in the kitchen those serving food?	8	1	6
	Whether proper hygiene of kitchen is maintained?	6	3	6
	Whether quality of diet is checked by a competent person on regular basis as prescribed in IPHS Guideline?	7	2	6
	Whether FSSAI registration certificate were issued under food safety and standard Act 2006and it was renewed regularly?	0	9	6
	Whether distribution of foods to patients is checked by Food Inspector or District authorities from time to time?	1	8	6
	Whether facilities such as refrigerator, water purifier and storage room are available?	9	2	4
	Whether commercial gas cylinders are used in kitchen?	8	3	4
	Whether inventory of kitchen equipment is maintained?	4	4	7
	Whether minimum number of staffs required for cooking and distribution of foods to IPD patients is specified and deployed accordingly?	6	3	6
	Whether Diet Register is maintained. If so, the details may be furnished.	8	2	5
	Air-conditioned pharmacy	2	13	0
	Labeled shelves/racks	9	6	0

	Questionnaire		onded	Not responded
		Yes	No	1 csp on ucu
Joint Inspection	Away from water and heat	14	1	0
Report-Drugs	Drugs stored above the floor	13	2	0
Management Facilities	Drugs stored away from walls	12	3	0
	24-hour temperature recording of cold storage area	8	5	2
	Display instructions for storage of vaccines	7	5	3
	Functional temperature monitoring device in freezers	8	5	2
	Maintenance of temperature chart of deep freezers	7	5	3
	Drugs kept under lock and key	14	1	0
	Poisons kept in a locked cupboard	8	5	2
	Expired drugs stored separately	13	0	2
Joint Inspection Report- Fire-fighting	Whether NOC was obtained from Fire Department?	1	10	4
Services	Whether NOC has been renewed on timely basis?	0	10	5
	Whether the provision of smoke detector is in place?	3	8	4
	Whether the provison of alarm is in place in case of fire?	3	8	4
	Whether fire extinguisher is refilled on timely basis?	0	6	9
	Number of Fire Hydrants available			
	Whether Sand buckets is available in hospital	4	5	6
	Whether underground backup water for fire is available in hospital	5	5	5
	Whether evacuation plans routes for fire exit has been displayed?	2	8	5
	Whether fire extinguisher is installed at power back (DG room) up area?	4	6	5
	Whether underground static water tank is constructed for meeting the fire contingency?	5	5	5

Appendix 4.1 (Reference to Paragraph 4.4.1, Page 97) Non submission of indents by the Health Facilities

Actual submission No. of HFs Indent No. of HFs No. of HFs did not submitted Period Date required to submit the annual Value submit annual indents indents indents 2016-17 1,230 No data May 2017 to March 1,246 2017-18 867 379 (30%) 2018 January 2018 to 2018-19 963 1,385 422 (30%) February 2019 April 2019 to 930 2019-20 1,308 378 (29%) November 2019 November 2019 to 2020-21 1,311 1,036 275 (21%) February 2020 July 2021 to 1,300 1,140 160 (12%) 2021-22

September 2021

Appendix 4.2 (Reference to Paragraph 4.8.2, Page 122) Equipment supplied to COE, Niloufer Hospital, Hyderabad

Sl. No.	Item	No. of units supplied	Unit Cost	Cost of supplied qty.
1	Cots Fowler Paediatric ICU	30	25,500	7,65,000
2	Air Mattresses	50	2,820	1,41,000
3	High Frequency Oscillatory Ventilators	4	24,88,500	99,54,000
4	Paediatric Ventilators with NIV Mode	45	11,68,700	5,25,91,500
5	Neonatal Ventilators with NIV Mode	21	12,35,850	2,59,52,850
6	Bubble CPAP Machines	24	3,15,000	75,60,000
7	Paediatric Airvo (HFNC) Machines	275	2,15,460	5,92,51,500
8	Laryngoscope	5	1,68,000	8,40,000
9	Portable ECG	10	1,04,944	10,49,440
10	USG with 3 Probes	5	18,45,200	92,26,000
11	3 Para Monitors	16	28,000	4,48,000
12	5 Para Monitors	7	55,000	3,85,000
13	Infusion Pumps	350	34,272	1,19,95,200
14	Syringe Pumps	300	29,990	89,97,000
15	Open Radiant Warmers	10	54,572	5,45,720
16	Oxygen Hoods	10	1,176	11,760
17	Phototherapy Units	5	42,000	2,10,000
18	Ethylene Oxide Sterilizer	2	16,99,200	33,98,400
19	ABG Machine	5	3,48,100	17,40,500
	TOTAL			19,50,62,870

(Reference to Paragraph 5.8.4, Page 152)

Mother and Child Health Buildings

Sl.No.	Location of MCH Centre	Present Status
1	MCH Sultanbazar	Completed
2	MCH Centre at DH, Sangareddy	Completed
3	MCH Centre at DH, Mahabubnagar	Completed
4	MCH Centre at DH, Tandur	Completed
5	MCH Centre at DH, Jangaon	Completed
6	MCH Centre at DH, Khammam	Completed
7	MCH Centre at DH, Nalgonda	Completed
8	MCH Centre at DH King Koti, Hyderabad	Completed
9	MCH Centre at DH, Karimnagar	Completed
10	MCH Centre at CHC, Eturunagaram,	In progress
	Mulugu District	
11	MCH Centre at AH, Suryapet,	Completed
	Suryapet District	
12	MCH Centre at CHC Manthani, Karimnagar District	Completed
13	MCH Centre at CHC Kollapur, Nagarkurnool District.	Completed
14	MCH Building at AH, Medak	In progress
15	MCH Building at AH, Wanaparthy	Completed
16	MCH Building at AH, Mancherial	Completed
17	MCH Building at CHC, Peddapalli	Completed
18	MCH Building at AH, Kothagudem	Completed
19	MCH Building at AH, Jagtial	Completed
20	MCH Centre at DH, Kamareddy	In progress
21	MCH Centre at Banswada in Kamareddy District	Completed
22	MCH Centre at Gandhi Hospital, Musheerabad, Secunderabad	In progress
23	MCH Building at Gajwel, Siddipet District	In progress
24	MCH Building at Narayankhed in Sangareddy District	In progress
25	MCH Building at Alampur, Jogulamba Gadwal District	In progress
26	MCH Building at GGH, Nizamabad	Completed

(Reference to Paragraph 6.12.3, Page 178)

Delay in release of funds to State Health Societies (SHSs)

Sl. No.	Year	Details of release of ECRP II funds by GoI	GoI sanction date	Amount of GoI share	Date of adjustment of GoI share into SHS Account	Amount (GoI share)	Date of adjustment of State Share into SHS Account	Amount (State Share)	Delay in adjustment of Central Share	Delay in adjustment of State Share
	2021-	First instalment of First Tranche	22-07- 2021	44.80	12-08-2021	44.80	18-11-2021	40.00	21	98
1	2021-	Second instalment of First	24-08-	104.54	22-10-2021	104.54	21-12-2021	40.00	59	60
		Tranche	2021				11-01-2022	19.57		81
	ST INSΊ ΓAL)	TALMENT		149.34		149.34		99.57		
					16-03-2022	29.34	16-08-2022	10.55	44	153
2	2021	Carand	21.01		17-03-2022	40.00	19-09-2022	89.00	45	186
	2021-	Second Tranche	31-01- 2022	149.34	22-03-2022	20.00	-, ,, -,		50	181
					23-03-2022	40.00			51	180
					25-03-2022	20.00			53	178
INST	OND FALME FAL)	NT		149.34		149.34		99.55		
GRA	ND TO	TAL		298.68		298.68		199.12		

Appendix 7.1 (Reference to Paragraph 7.2.3.2, Page 194) Leprosy Prevalence Rate in 19 Districts

Sl. No.	District	2020-21	2021-22
1	Adilabad	0.59	0.70
2	Jayashankar Bhupalpally	0.08	0.40
3	Jogulamba Gadwal	0.37	0.52
4	Kamareddy	0.10	0.17
5	Karimnagar	0.06	0.24
6	Khammam	0.43	0.47
7	Mahabubnagar	0.38	0.55
8	Medak	0.19	0.26
9	Medchal – Malkajgiri	0.16	0.18
10	Mulugu	0.21	0.29
11	Nagarkurnool	0.36	0.48
12	Nalgonda	0.63	0.66
13	Nizamabad	0.13	0.24
14	Rajanna Sircilla	0.07	0.25
15	Rangareddy	0.25	0.28
16	Vikarabad	0.55	0.69
17	Wanaparthy	0.22	0.33
18	Warangal (Rural)	0.23	0.29
19	Yadadri Bhuvanagiri	0.31	0.48

Appendix 7.2 (Reference to Paragraph 7.2.6, Page 197) Sub Centres with API more than 2 in the Districts

Sl. No.	District	2017	2018	2019	2020	2021
1	Kumuram Bheem Asifabad	12	2	6	6	5
2	Jayashankar Bhupalpally	26	24	2	5	3
3	Bhadradri Kothagudem	32	17	21	49	31
4	Mahabubabad	0	2	2	2	2
5	Mancherial	18			2	2
6	Mulugu			26	29	37

Appendix 7.3 (Reference to Paragraph 7.2.6, Page 198)

Spraying operations conducted in Districts during 2016–21 $\,$

Sl. No.	Name of the District	Rounds	Date of Spray (2016)		Actual spray schedule	Delay in no. of days
1	Adilabad	I	07-05-2016	29-07-2016	01-05-2016	6
2	Adilabad	II	13-08-2016	02-11-2016	16-07-2016	28
3	Warangal	I	13-06-2016	09-08-2016	01-05-2016	43
4	Warangal	II	26-08-2016	24-10-2016	16-07-2016	41
5	Khammam	I	01-06-2016	04-08-2016	01-05-2016	31
6	Khammam	II	19-08-2016	27-12-2016	16-07-2016	34
7	Karimnagar	I	23-06-2016	28-08-2016	01-05-2016	53
8	Mahabubnagar	I	15-06-2016	16-07-2016	01-05-2016	45
9	Mahabubnagar	II	17-08-2016	25-10-2016	16-07-2016	32
Sl. No.	Name of the District	Rounds	Date of Spray (2017)		Actual spray schedule	Delay in no. of days
1	Bhadradri Kothagudem	I	01-06-2017	24-08-2017	01-05-2017	31
2	Jayashankar Bhupalpally	I	01-06-2017	23-08-2017	01-05-2017	31
3	Mahabubabad	I	23-06-2017	31-07-2017	01-05-2017	53
4	Adilabad	I	23-06-2017	06-08-2017	01-05-2017	53
5	Kumuram Bheem Asifabad	I	22-06-2017	03-07-2017	01-05-2017	52
6	Khammam	I	28-06-2017	06-07-2017	01-05-2017	58
7	Nirmal	I	08-07-2017	20-08-2017	01-05-2017	68
8	Nagarkurnool	I	06-07-2017	22-07-2017	01-05-2017	66
9	Mancherial	I	20-07-2017	10-08-2017	01-05-2017	80
1	Bhadradri Kothagudem	II	30-08-2017	23-11-2017	16-07-2017	45
2	Jayashankar Bhupalpally	II	02-09-2017	15-12-2017	16-07-2017	48
3	Adilabad	II	04-09-2017	22-11-2017	16-07-2017	50
4	Kumuram Bheem Asifabad	II	26-08-2017	02-09-2017	16-07-2017	41
5	Khammam	II	08-08-2017	28-08-2017	16-07-2017	23
6	Nirmal	II	06-10-2017	12-10-2017	16-07-2017	82
7	Nagarkurnool	II	06-09-2017	23-09-2017	16-07-2017	52
8	Mancherial	II	08-09-2017	25-11-2017	16-07-2017	54

Sl.	Name of the District	Round	Date of Spray (2018)		Actual spray	Delay in
No.		S			schedule	no. of
1	Bhadradri Kothagudem	I	29-06-2018	04-09-2018	01-05-2018	days 59
2	Jayashankar	I	01-06-2018	13-09-2018	01-05-2018	31
	Bhupalpally					
3	Kumuram Bheem Asifabad	I	15-07-2018	09-08-2018	01-05-2018	75
4	Adilabad	I	28-06-2018	07-08-2018	01-05-2018	58
5	Mancherial	I	10-07-2018	26-07-2018	01-05-2018	70
1	Bhadradri Kothagudem	II	01-10-2018	19-11-2018	16-07-2018	77
2	Jayashankar Bhupalpally	II	10-09-2018	16-11-2018	16-07-2018	56
3	Kumuram Bheem Asifabad	II	10-09-2018	25-10-2018	16-07-2018	56
4	Adilabad	II	10-09-2018	24-10-2018	16-07-2018	56
5	Mancherial	II	10-09-2018	17-09-2018	16-07-2018	56
Sl. No.	Name of the District	Rounds	Date of Spray	(2019)	Actual spray schedule	Delay in no. of days
1	Adilabad	I	27-06-2019	17-07-2019	01-05-2019	57
2	Kumuram Bheem Asifabad	I	01-07-2019	31-07-2019	01-05-2019	61
3	Mancherial	I	07-07-2019	21-08-2019	01-05-2019	67
4	Mahabubabad	I	15-07-2019	31-07-2019	01-05-2019	75
5	Jayashankar Bhupalpally	I	17-06-2019	17-08-2019	01-05-2019	47
6	Mulugu	I	17-06-2019	17-08-2019	01-05-2019	47
7	Bhadradri Kothagudem	I	15-06-2019	26-08-2019	01-05-2019	45
1	Adilabad	II	27-08-2019	05-10-2019	16-07-2019	42
2	Kumuram Bheem Asifabad	II	09-09-2019	06-10-2019	16-07-2019	55
3	Mancherial	II	20-09-2019	13-10-2019	16-07-2019	66
4	Mahabubabad	II	20-09-2019	11-10-2019	16-07-2019	66
5	Jayashankar Bhupalpally	II	17-09-2019	05-10-2019	16-07-2019	63
6	Mulugu	II	19-08-2019	07-11-2019	16-07-2019	34
7	Bhadradri Kothagudem	II	09-09-2019	07-11-2019	16-07-2019	55
Sl. No.	Name of the District	Rounds	Date of Spray	(2020)	Actual spray schedule	Delay in no. of days
1	Kumuram Bheem Asifabad	I	15-06-2020	08-07-2020	01-05-2020	45
2	Mancherial	I	24-06-2020	07-08-2020	01-05-2020	54
3	Mahabubabad	I	24-06-2020	29-07-2020	01-05-2020	54

4	Jayashankar Bhupalpally	I	17-06-2020	22-07-2020	01-05-2020	47
5	Mulugu	I	05-06-2020	16-08-2020	01-05-2020	35
6	Bhadradri Kothagudem	I	15-06-2020	22-07-2020	01-05-2020	45
1	Kumuram Bheem Asifabad	II	27-08-2020	03-09-2020	16-07-2020	42
2	Mancherial	II	10-08-2020	18-09-2020	16-07-2020	25
3	Mahabubabad	II	01-08-2020	21-09-2020	16-07-2020	16
4	Jayashankar Bhupalpally	II	27-08-2020	11-09-2020	16-07-2020	42
5	Mulugu	II	24-08-2020	17-09-2020	16-07-2020	39
6	Bhadradri Kothagudem	II	06-08-2020	28-09-2020	16-07-2020	21
Sl. No.	Name of the District	Rounds	Date of Spray	(2021)	Actual spray schedule	Delay in no. of days
1	Kumuram Bheem Asifabad	I	28-07-2021	08-08-2021	01-05-2021	88
	Tistiaoaa					
2	Mancherial	I	02-08-2021	06-08-2021	01-05-2021	93
3		I	02-08-2021 01-06-2021	06-08-2021 23-07-2021	01-05-2021 01-05-2021	93 31
	Mancherial					
3	Mancherial Mahabubabad Jayashankar	I	01-06-2021	23-07-2021	01-05-2021	31
3 4	Mancherial Mahabubabad Jayashankar Bhupalpally	I	01-06-2021 01-06-2021	23-07-2021 14-07-2021	01-05-2021 01-05-2021	31
3 4 5	Mancherial Mahabubabad Jayashankar Bhupalpally Mulugu	I	01-06-2021 01-06-2021 17-06-2021	23-07-2021 14-07-2021 30-07-2021	01-05-2021 01-05-2021 01-05-2021	31 31 47
3 4 5 6	Mancherial Mahabubabad Jayashankar Bhupalpally Mulugu Bhadradri Kothagudem Kumuram Bheem	I I	01-06-2021 01-06-2021 17-06-2021 15-06-2021	23-07-2021 14-07-2021 30-07-2021 01-08-2021	01-05-2021 01-05-2021 01-05-2021 01-05-2021	31 31 47 45
3 4 5 6 1	Mancherial Mahabubabad Jayashankar Bhupalpally Mulugu Bhadradri Kothagudem Kumuram Bheem Asifabad	I I I II	01-06-2021 01-06-2021 17-06-2021 15-06-2021 20-09-2021	23-07-2021 14-07-2021 30-07-2021 01-08-2021 26-09-2021	01-05-2021 01-05-2021 01-05-2021 01-05-2021 16-07-2021	31 31 47 45 66
3 4 5 6 1	Mancherial Mahabubabad Jayashankar Bhupalpally Mulugu Bhadradri Kothagudem Kumuram Bheem Asifabad Mancherial	I I II	01-06-2021 01-06-2021 17-06-2021 15-06-2021 20-09-2021 02-08-2021	23-07-2021 14-07-2021 30-07-2021 01-08-2021 26-09-2021 03-10-2021	01-05-2021 01-05-2021 01-05-2021 01-05-2021 16-07-2021	31 31 47 45 66
3 4 5 6 1 2 3	Mancherial Mahabubabad Jayashankar Bhupalpally Mulugu Bhadradri Kothagudem Kumuram Bheem Asifabad Mancherial Mahabubabad Jayashankar	I I I II II II	01-06-2021 01-06-2021 17-06-2021 15-06-2021 20-09-2021 02-08-2021 01-10-2021	23-07-2021 14-07-2021 30-07-2021 01-08-2021 26-09-2021 03-10-2021 10-10-2021	01-05-2021 01-05-2021 01-05-2021 01-05-2021 16-07-2021 16-07-2021	31 31 47 45 66 17 77

(Reference to Paragraph 8.2.2, Page 215)

List of Indicators and Sub Indicators

Target Number	Description	Global indicator	National Indicator	State Indicator (SIF)
3.1	By 2030, reduce the global maternal mortality rate to less than 70 per 100,000	3.1.1 Maternal Mortality rate	3.1.1 Maternal Mortality Rate, (per 1,00,000 live births)	3.1.1 Maternal mortality rate
	live births	3.1.2 Proportion of births attended by skilled health personnel	3.1.2 Percentage of births attended by skilled health personnel (Period 5 years)	3.1.2 Percentage of births attended by skilled health personnel(Period 5 years)
			3.1.3 Percentage of births attended by skilled health personnel (Period 1 year)	3.1.3 Percentage of births attended by skilled health. personnel. (Period 1 year)
			3.1.4 Percentage of women aged 15–49 years with a live birth, for last birth, who received. Antenatal care, fourtimes or more (Period 5 years/1 year) (in percentage)	3.1.4 Percentage of women aged 15–49 years with a live birth, for last birth, who received Antenatal care, four times or more.
3.2	By 2030, end preventable deaths of newborns and children under 5 years of	3.2.1 Under-5 mortality rate	3.2.1 Under - five mortality rate, (per1,000 live births)	3.2.1. Under-5 mortality rate
	age, with all countries aiming to reduce neonatal	3.2.2 Neonatal mortality rate	3.2.2 Neonatal mortality rate,(per 1,000 live births)	3.2.2 Neonatal mortality rate
	mortality to at least as low as 12 per 1,000 livebirths and under- 5 mortality to at least as low as 25 per 1,000 live births		3.2.3 Percentage of children aged 12-23 months fully immunised	3.2.3 Percentage of children aged 12-23 months fully immunised (BCG, Measles and three doses of Pentavalent vaccine)
3.3	By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases	3.3.1 Number of new HIV infections per 1,000 uninfected population	3.3.1 Number of new HIV infections per 1,000 uninfected population	3.3.1 Number of new HIV infections per 1,000 uninfected population
	and combat hepatitis, water-borne diseases and other communicable	3.3.2 Tuberculosis incidence per 1,00,000 population	3.3.2 Tuberculosis incidence per 1,00,000 population	3.3.2 Tuberculosis incidence per 100,000 population
	diseases	3.3.3 Malaria incidence per 1,000 population	3.3.3 Malaria incidence per 1,000population	3.3.3 Malaria incidence per 1,000 population
		3.3.4 Incidence of Viral Hepatitis B per 1,00,000 population	3.3.4 Prevalence of Viral Hepatitis B per 1,00,000 population	3.3.4 Viral Hepatitis (including A & B) incidence per 100,000 population
		3.3.5 No. of people requiring interventions against neglected tropical disease	3.3.5 Dengue: Case Fatality Ratio, (in ratio)	3.3.5 Dengue: Case Fatality Ratio
			3.3.6 Number of Chikungunya cases	3.3.6 Number of Chikungunya cases
			3.3.7 Number of newcases of Kalaazar/ V Leishmaniasis	3.3.7 Number of newcases of Kala azar / V Leishmaniasis
			3.3.8 Number of newcases of Lymphatic Filariasis (LF)	3.3.8 Number of newcases of Lymphatic Filariasis (LF)

			3.3.9 Proportion ofgrade- 2 cases amongst new cases of Leprosy, (in rate per million)	3.3.9 The proportion ofgrade- 2 cases amongst new cases of Leprosy
			3.3.10 HIV Prevalence Rate, (in percentage)	3.3.10 HIV PrevalenceRate
3,4	By 2030, reduce by one third premature mortality from non communicable diseases through prevention and treatment and promote	3.4.1 Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease	3.4.1 Number of deaths due to cancer	3.4.1 Number of deaths due to cancer
	mental health and well- being	3.4.2 Suicide mortality rate, (per 1,00,000 population)	3.4.2 Suicide mortality rate (per 1,00,000 population)	3.4.2 Suicide mortality rate
			3.4.3 Percentagedistribution of leading cause groups of deaths	
3.5	Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol	3.5.1 Mortality rate attributed to unintentional poisoning	3.5.1 Percentage of population (men (15 - 49 years) & women (15 - 49 years)) who drink alcohol about once a week out of total population (men (15 - 49 years & women (15 - 49 years)) who drink alcohol	
		3.5.2 No. of persons treated in de- addiction centers	3.5.2 Number of persons treated in de-addiction centers	3.5.2 Number of persons treated in de-addiction centers
			3.5.3 Percentage of population (men (15-54 years)) and women (15- 49 years)) who consume alcohol	3.5.3 Percentage of population (men (15-54years) and women (15- 49 years)) who consume alcohol.
3.6	By 2020, halve the number of global deaths and injuries from road traffic accidents	3.6.1 Death rate due to road traffic injuries	3.6.1 People killed/injured in road accidents (per 1,00,000 population)	3.6.1 People killed/injured in road accidents (per 1,00,000 population)
3.7	By 2030, ensure universal access to sexual and reproductive health- care services, including for family planning, information and education and the integration of reproductive health into	3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods	3.7.1 Percentage of currently married women (15-49 years) who use any modern family planning methods,	3.7.1 Percentage of currently married women (15-49 years) who use any modern family planning. methods
	national strategies and programmes	3.7.2 Adolescent birth rate (aged 10-14 years, aged 15-49 years) per 1,000 women in that age group	3.7.2 Percentage of women aged 15-19 years who were already mothers or pregnant	3.7.2 Percentage of women aged 15-19 years who were alreadymothers or pregnant
			3.7.3 Percentage of Institutional Births (5 years/1 year)	3.7.3 Institutional Births (%) (5 years/1 year)
			3.7.4 Percentage of currently married women aged 15-49 years who have their need for family planning satisfied with modern methods	3.7.4 Percentage of currently married women aged 15-49 years who have theirneed for family planning satisfied with modern methods
3.8	Achieve universal health coverage, including financial risk protection, access to quality essential	3.8.1 Coverage of essential health services	3.8.1 Percentage of currently married women (15-49 years) who use any modern family planning methods	3.8.1 Percentage of currently married women (15-49 years) who use any modern family planning methods

acces qualit essen	health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all	3.8.2 Proportion of population with large household expenditures on health as a share of total household expenditure or income	3.8.2 Percentage of TB cases successfully treated (cured plus treatment completed) among TB cases notified to the national health authorities during a specified period	3.8.2 Percentage of TBcases successfully treated (cured plus treatment completed) among TB cases notified to the nationalhealth authorities during a specifiedperiod
			3.8.3 Percentage of people living with HIV currently receiving ART among the detected number of adults and children living with HIV	3.8.3 Percentage of people living with HIV currently receiving ART among the detected number of adults and children living with HIV
			3.8.4 Prevalence of hypertension among men and women age15–49 years (in percentage)	3.8.4 Prevalence of hypertension among men and women age 15–49 years (in percentage)
			3.8.5 Percentage of population in age group 15-49 who reported sought treatment out of total population inthat age group having diabetes	3.8.5 Proportion of population in age group15-49 years who are currently taking medication for diabetes (insulin or glycaemic control pills) among number of adults 15-49 years who are having random blood sugar levelhigh (>140 mg/dl)
			3.8.6 Percentage of women aged 15-49 who have ever undergone Cervix examinations	3.8.6 Proportion of women aged 30-49 years who report they were ever screened for cervical cancer and the proportion of women aged 30-49 years who report they were screened for cervical cancer during the last 5years
			3.8.7 Percentage of women aged 15-49 years and men aged 15-49 years with useof any kind of tobacco	3.8.7 Percentage of women aged 15-49 years and men aged 15-49 years with use of any kind of tobacco,
			3.8.8 Total physicians, nurses and midwives per 10,000 population.	3.8.8 Total physicians,nurses and midwives per 10,000 population.
3.9	By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination	3.9.1 Mortality rate attributed to unintentional poisoning, (per 1,00,000 population)	3.9.1 Mortality rate attributed to unintentional poisoning, (per 1,00,000 population)	3.9.1 Mortality rateattributed to unintentional poisoning, (per1,00,000 population)
		3.9.2 Proportion of men and women reporting Asthma in the age group (aged 15-49 years) (in percentage)	3.9.2 Proportion ofmen and women reporting Asthma in the age group (aged 15-49 years) (in percentage)	3.9.2 Proportion of men and women reporting Asthma in the age group (aged 15-49 years) (in percentage)
		3.9.3 Mortality rate attributed to unintentional poisoning		
3.a	Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate	3.a.1 Age - standardised prevalence of current tobacco use among persons aged 15 years and older.	3.a.1 Percentage of women aged 15-49 years and men aged 15-49 years who use any kind of tobacco	3.a.1 Prevalence of current tobacco usesamong men and women aged 15 -49 years

Appendices

3.b	Support the research and development of vaccines and medicines for the communicable and noncommunicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries touse to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health and in particular, provide access to medicines for all	3.b.1 Proportion of the target population cover by all vaccines included in their national programme	3.b.1 Budgetary allocation for Department of Health Research	3.b.1 Budgetaryallocation for Department of Health Research
		3.b.2 Total net official development assistance to medical research and basic health sectors		
		3.b.3 Proportion of health facilities that have a core set of relevant essential medicines available and affordable on a sustainable basis		
3.c	Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries andsmall island developing States	3.c.1 Health worker density and distribution	3.c.1 Total physicians, nurses and midwives per 10,000 population, in percentage	3.c.1 Total physicians,nurses and midwives per 10,000 population,in percentage
			3.c.2 Percentage of government spending (including current and capital expenditure) in health sector to GDP	3.c.2 Percentage of government spending (including current and capital expenditure) in health sector to GDP
3.d	Strengthen the capacity of all countries in particular developing countries for early warning risk reduction and management	3.d.1 International Health Regulations (IHR) capacity and health emergency preparedness		
	of national and global health risk	3.d.2 Percentage of blood stream infections due to selected antimicrobial-resistant organisms		