

# Appendices



**Appendix-1.1**  
(Reference: Paragraph-1.7; Page 8)

**Details of Departments/Units covered under Performance Audit**

<b>District Level:</b>	CMO, Dehradun	
	CMO, Nainital	
<b>Primary Health Care Facilities</b>		
<b>PHC/UPHC</b>	Dehradun	Tyuni, Balawala, Bhangwant Pur, Thano, Majra,
	Nainital	Talla Ramgarh, Similkha, Chakalwa, Jyolikot
<b>Sub Centre/HWC</b>	Dehradun	Rani Pokhari, Hanol, Kaulagarh, Bullawala, Harrawala, Badowala, Kanharwala, Soda Saroli, Sewlan Kalan, Sewlan Khurd,
	Nainital	Shyam Khet, Similkha, Chakalwa, Ranibagh, Himmatpur, Karanpur, Mangoli, Thapla, Khurpatal, Devidhura, Gethia, Alchona
<b>Secondary Health Care Facilities</b>		
<b>CHC</b>	Dehradun	Raipur, Doiwala, Sahaspur, Sahiya, Chakrata
	Nainital	Ramgarh, Kotabagh, Betalghat, Bhemtal
<b>District Hospital</b>	Dehradun	District Hospital (Coronation), Dehradun
	Nainital	District Hospital (BD Pandey, Male and Female), Nainital
<b>Sub District Hospital</b>	Dehradun	SDH, Prem Nagar, SDH (SPS), Rishikesh
	Nainital	SDH, Haldwani
<b>Tertiary Health Care Facilities</b>		
<b>Medical Colleges</b>	Dehradun	Government Doon Medical College, Teaching Hospital, Dehradun
	Nainital	Government Medical College, Teaching Hospital, Haldwani
<b>Administrative Heads</b>	Director General, MH&FW, Mission Director, NHM, Director General, Medical Education	
<b>AYUSH</b>		
<b>District Level</b>	District Ayurvedic & Unani Officer, Dehradun & Nainital	
	District Homoeopathic Officer, Dehradun & Nainital	
<b>Dispensaries/Hospitals</b>		
<b>Dehradun</b>	Govt. Ayurvedic Hospital Lakhmandal, Nagthat, Jhajra, Majra, Mothrowala, Govt. Homeopathy Hospital Raiwala, Nehrugram, Homeopathy Wing District Hospital DDN	
<b>Nainital</b>	Govt. Ayurvedic Hospital Patlot, Chorlekh, Sawaldey, Nayeli, Halduchod, Nagar Nainital and Haldwani, Government Homeopathy Wing Base Hospital Haldwani and Government Homeopathy Hospital Betalghat	
<b>Government Ayurvedic College</b>	Main Campus College, Ayurveda University, Dehradun	
<b>Administrative Heads</b>	Director, Ayurveda & Unani Services, Director, Homoeopathy Services, Vice Chancellor, Ayurveda University	

**Appendix-2.1 (i)**  
(Reference: Paragraph-2.2; Page 15)

**Details of availability of Doctors, Nurses & Paramedics in all the DHs as on March 2022**

Sl. No.	District	Cadre	SS	MIP	Shortage/ Excess
1	Almora	Doctors	27	22	5
		Nurses	72	20	52
		Paramedics	16	8	8
		Others	6	4	2
2	Bageshwar	Doctors	24	17	7
		Nurses	45	15	30
		Paramedics	16	10	6
		Others	5	2	3
3	Chamoli	Doctors	24	8	16
		Nurses	52	20	32
		Paramedics	16	6	10
		Others	6	4	2
4	Champawat	Doctors	24	14	10
		Nurses	43	15	28
		Paramedics	14	5	9
		Others	5	4	1
5	Dehradun	Doctors	42	37	5
		Nurses	99	46	53
		Paramedics	23	20	3
		Others	12	9	3
6	Haridwar	Doctors	25	20	5
		Nurses	45	25	20
		Paramedics	16	15	1
		Others	6	4	2
7	Nainital	Doctors	27	22	5
		Nurses	69	23	46
		Paramedics	24	10	14
		Others	8	6	2
8	Pauri	PPP Mode			
9	Pithoragarh	Doctors	28	20	8
		Nurses	76	34	42
		Paramedics	19	11	8
		Others	8	7	1
10	Rudraprayag	Doctors	24	16	8
		Nurses	43	13	30
		Paramedics	9	8	1
		Others	5	4	1
11	Tehri	PPP Mode			
12	Udham Singh Nagar	Doctors	32	16	16
		Nurses	85	25	60
		Paramedics	22	17	5
		Others	7	4	3
13	Uttarkashi	Doctors	30	19	11
		Nurses	83	25	58
		Paramedics	24	14	10
		Others	8	6	2

**Appendix- 2.1 (ii)**  
*(Reference: Paragraph-2.2; Page 15)*

**Details of availability of Doctors, Nurses & Paramedics in all the CHCs of the State as on March 2022**

District	Name of CHC	General Medicine Services			General Medicine			Pediatrics Services			Pediatrics			General Surgery Services			General Surgery			Dental Services			Dental			Obstetrics and Gynaecology Services			Obstetrics and Gynaecology			Emergency Services			Laboratory Services/Pathologist			Misc/ Emergency			Anesthesia Services			Anesthesia			Para Medic			Nurse		
		1			2			3			4			5			6			7			8			9			10																							
		Availability(Y/N)	Sanction	Doctor GDMO	Specialist	Availability(Y/N)	Sanction	Doctor GDMO	Specialist	Availability(Y/N)	Sanction	Doctor GDMO	Specialist	Availability(Y/N)	Sanction	Doctor GDMO	Specialist	Availability(Y/N)	Sanction	Doctor GDMO	Specialist	Availability(Y/N)	Sanction	Available	Availability(Y/N)	Sanction	Doctor GDMO	Specialist	Sanction	Vacant	Sanction	Vacant																				
Nainital	CHC Bhimtal	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	0	Y	1	1	0	Y	1	0	Y	2	3	Y	1	0	1	5	6	-1	5	3	2																
	CHC Betalghat	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	3	2	5	2	3																		
	CHC Kotabag	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	0	Y	1	1	0	Y	Y	2	2	Y	1	1	0	4	4	0	5	3	2																		
	CHC Bhawali	Y	1	1	0	Y	1	0	1	Y	1	0	1	Y	1	1	Y	1	0	0	Y	Y	2	2	Y	1	1	0	4	4	0	5	2	3																		
	CHC Garampani	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	Y	2	2	Y	1	0	0	4	3	1	5	0	5																	
	CHC Maldhanchaud	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	Y	Y	2	0	Y	1	0	0	4	2	2	5	0	5																		
	CHC Padampuri	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	0	0	0	Y	1	1	0	Y	Y	2	0	Y	1	1	0	1	0	1	0	0	0																	

PA on Public Health Infrastructure and Management of Health Services for the year ended 31 March 2022

Nainital	CHC Kaladhungi	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	5	0	3	2	1
	CHC Suyalbaadi	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	0	0	5	2	3	3	3	0
	CHC Ramgarh	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	3	2	3	3	0
Bageshwar	CHC Baijnath	Y	1	1	0	Y	1	0	1	Y	1	0	1	Y	1	1		Y	1	1		Y	Y	2	3	Y	1	1	0	5	2	3	5	2	3
	CHC Kapkot	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	2	3	5	2	3
	CHC Kanda	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	0	0	0	Y	1	1	0	Y	Y	2	3	Y	1	1	0	4	1	3	3	2	1
Pithoragarh	CHC Didihat	Y	1	1	0	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	2	3	5	2	3
	CHC Gangolihat	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1		Y	1	1	0	Y	Y	2	0	Y	1	1	0	5	2	3	5	0	5
	CHC munsyari	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	Y	2	2	Y	1	0	0	4	2	2	3	1	2
	CHC Berinag	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	1	4	3	1	2
Almora	CHC Dwarahat	Y	1	1	0	Y	1	0		Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	0	0	6	3	3	5	3	2
	CHC Chaukhutiya	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	0	0	5	4	1	5	3	2
	CHC Bhikiyasain	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	Y	2	0	Y	1	0	0	5	0	5	5	0	5
	CHC Dhauladevi	Y	1	1	0	Y	1	1	0	Y	1	0		Y	1	1	0	Y	1	0	0	Y	Y	2	2	Y	1	1	0	4	0	4	0	0	0
	CHC lamgadha	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	Y	2	1	Y	1	0	0	4	1	3	0	0	0
Almora	CHC Devayal Salt	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	2	Y	1	0	1	5	4	1	3	1	2
	CHC Deghat	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	2	Y	1	0	1	5	2	3	3	1	2
	CHC Jainti	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	Y	2	1	Y	1	0	1	4	1	3	3	0	3
	CHC Shalangi	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	Y	2	1	Y	1	1	0	3	2	1	4	0	4
	CHC Kichchha	Y	1	1	0	Y	1	0	1	Y	1	0	1	Y	1	1		Y	1	0	1	Y	Y	2	2	Y	1	0	2	5	4	1	5	3	2
US Nagar	CHC Jaspur	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	5	0	5	2	3
	CHC sitarganj	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	0	0	Y	1	0	0	Y	Y	2	2	Y	1	1	0	5	3	2	5	2	3

	CHC Gadarpur	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	0	Y	1	0	0	5	3	2	5	3	2
	CHC Nanakmatta	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	3	1	2	3	0	3
	CHC Chakarata	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	3	Y	1	0	0	4	3	1	5	3	2
Dehradun	CHC Doiwala	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	Y	2	0	Y	1	0	0	7	7	0	5	5	0
	CHC Sahiya	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	4	3	1	5	5	0
	CHC Raipur	Y	1	0	1	Y	1	0	1	Y	1	1	0	Y	1	1	0	Y	Y	2	4	Y	1	0	1	4	4	0	3	3	0
	CHC Sahaspur	Y	1	0	1	Y	1	0	1	Y	1	1	0	Y	1	1	0	Y	Y	2	0	Y	1	1	0	5	5	0	3	3	0
	CHC Pabo Pauri	Y	1	0	0	Y	1	1	0	Y	1	0	1	Y	1	0	1	Y	Y	2	0	Y	1	1	0	5	2	3	5	0	5
Pauri	CHC Ghandiyaal	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	Y	2	0	Y	1	0	0	5	2	3	5	0	5
	CHC Nainidanda	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	2	3	5	1	4
	CHC Beeronkhal	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	1	4	5	1	4
	CHC Thalisaind	Y	1	1	0	Y	1	0	0	Y	1	0	1	Y	1	0	1	Y	Y	2	5	Y	1	0	1	5	4	1	5	0	5
	CHC Rikhanikhal	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	2	3	3	1	2
	CHC Yamkeshwar	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	4	6	2	3	2	1
	CHC Kot	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	5	0	3	3	0
	CHC Chailusaind	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	2	Y	1	1	0	4	1	3	3	1	2
	CHC Khirsu	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	1	0	5	3	2	5	0	5
	CHC Naugavkhal	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	0	Y	1	0	0	1	0	1	4	1	3
	CHC Paithani	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	0	0	2	0	2	3	0	3
	CHC Satpuli	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	Y	2	1	Y	1	0	0	3	3	0	5	1	4
Uttarkashi	CHC naugav, Uttarkashi	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	0	0	Y	Y	2	1	Y	1	1	0	7	2	5	5	3	2
	CHC Purola	Y	1	0	1	Y	1	1	0	Y	1	0	1	Y	1	1	0	Y	Y	2	6	Y	1	0	1	6	2	4	5	2	3
	CHC Chinyalisaund	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	3	2	5	3	2

PA on Public Health Infrastructure and Management of Health Services for the year ended 31 March 2022

	CHC Badkot	Y	1	1	0	Y	1	0	1	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	1	4	5	0	5
Tehri	CHC Hindolakhhal	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	0		Y	1	1	0	Y	Y	2	0	Y	1	1	0	5	2	3	5	1	4
	CHC Thatyud	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	7	2	5	5	2	3
	CHC Devprayag (PPP Mode)	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0		Y	1	0	0	Y	Y	2	0	Y	1	1	0	4	1	3	5	1	4
	CHC Baleshwar	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	Y	2	1	Y	1	1	0	4	2	2	5	0	5
Tehri	CHC Kirtinagar	Y	1	1	0	Y	1	0	0	Y	1	1	0	Y	1	1		Y	1	0	0	Y	Y	2	0	Y	1	1	0	4	2	2	3	3	0
	CHC Chham	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	3	2	3	3	0
	CHC Madanegi	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	1	Y	1	0	0	4	2	2	3	0	3
	CHC Chamba	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	4	1	3	3	0
	CHC Pratapnagar	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	0	Y	1	1	0	6	2	4	3	2	1
	CHC Khadi	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	0	0		Y	1	0	0	Y	Y	2	1	Y	1	1	0	4	2	2	3	3	0
	CHC Lambgaw	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	1		Y	1	0	0	Y	Y	2	2	Y	1	0	0	4	2	2	3	0	3
Rudra Prayag	CHC Agastmuni	Y	1	1	0	Y	1	1	0	Y	1	0	1	Y	1	0		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	3	2	5	3	2
	CHC Jakholi	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0		Y	1	0	0	Y	Y	2	1	Y	1	1	0	5	1	4	5	1	4
Chamoli	CHC Joshimath	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	7	3	4	8	2	6
	CHC Tharali	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	4	1	5	0	5
	CHC Gairsain	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	0		Y	1	1	0	Y	Y	2	2	Y	1	1	0	5	1	4	5	1	4
	CHC Pokhari	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	5	Y	1	0	1	5	2	3	5	1	4



	CHC Ghat	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	0	0	Y	Y	2	1	Y	1	1	0	5	1	4	3	1	2
Haridwar	CHC Narsan, Haridwar	Y	1	1	0	Y	1	1	0	Y	1	0	0	Y	1	0		Y	1	1	0	Y	Y	2	1	Y	1	0	0	5	5	0	5	3	2
	CHC Laksar	Y	1	1	0	Y	1	0	1	Y	1	1	0	Y	1	0		Y	1	0	0	Y	Y	2	0	Y	1	0	0	5	4	1	5	2	3
	CHC Bhagwaanpur	Y	1	0	0	Y	1	1	0	Y	1	0	0	Y	1	1		Y	1	0	0	Y	Y	2	0	Y	1	1	0	5	4	1	5	2	3
	CHC Bahadarabad	Y	1	0	0	Y	1	1	0	Y	1	0	0	Y	1	1		Y	1	1	0	Y	Y	2	1	Y	1	1	0	6	4	2	9	7	2
	CHC Jwalapur	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	0		Y	1	1	0	Y	Y	2	2	Y	1	1	0	4	2	2	5	0	5
	CHC Khanpur	Y	1	0	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	0	0	Y	Y	2	1	Y	1	0	0	5	3	2	3	1	2
	CHC manglaur	Y	1	1	0	Y	1	1	0	Y	1	1	0	Y	1	1		Y	1	1	0	Y	Y	2	2	Y	1	0	0	4	2	2	3	2	1
	CHC Landhaura	Y	1	0	0	Y	1	0	0	Y	1	0	0	Y	1	0		Y	1	0	0	Y	Y	2	1	Y	1	0	0	4	3	1	3	2	1

Note: 1. Due to shortage of specialist doctors General Duty Medical Officers have been deployed against the sanctioned posts of Specialist Doctors.

**Appendix-2.1 (iii)**  
*(Reference: Paragraph-2.2; Page 15)*

**Details of availability of Doctors/ Nurses & Paramedics in all the PHCs of the State**

Total Number of PHCs in the State 578	Operational Type A ** PHC-525 Type B -PHC-51			
	Doctors	Nurses	Paramedics	Others
Sanctioned strength	627	342	628	NA
Men in position	557	20	489	NA
Vacant	70	322	139	NA

Source- DG Medical Health and Family welfare.

\*\*As per IPHS norms one GDMO has been sanctioned for type A PHC and two GDMOs for type B PHCs.

**Appendix-2.2**  
(Reference: Paragraph-2.2.9; Page 22)

**Details of doctors posted for more than 5 to 20 years**

Sl. No.	Name of Office/Hospitals/Districts	No. of Doctors	
		(5-10 Years)	(More than 10 to 20 Years)
1.	DG Health Office, Dehradun	7	2
2.	Almora	41	25
3.	Bageshwar	09	09
4.	Chamoli	13	05
5.	Champawat	10	07
6.	Dehradun	41	28
7.	Haridwar	07	07
8.	Nainital	42	27
9.	Pauri	31	19
10.	Pithoragarh	21	11
11.	Rudraprayag	15	03
12.	Tehri	21	03
13.	Udham Singh Nagar	12	09
14.	Uttarkashi	15	09
<b>Total</b>		<b>285</b>	<b>164</b>

**Appendix-3.1**  
(Reference: Paragraph-3.1.1; Page 35)

**Details related to availability of OPD Services in DHs of the State**

Services	Name of the Districts										
	Almora	Bageshwar	Chamoli	Champawat	Dehradun	Haridwar	Nainital	Pithoragarh	Rudraprayag	Udham Singh Nagar	Uttarkashi
ENT	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
General Medicine	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Paediatrics	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
General Surgery	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Ophthalmology	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Dental	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Obs. & Gynae	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Psychiatry	Yes	No	No	No	No	No	Yes	No	No	No	Yes
Orthopaedics	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Dermatology & Venereology	No	No	No	Yes	Yes	No	Yes	No	No	No	No

➤ The District Hospitals in two districts, namely Pauri and Tehri are being run on PPP mode and the services are being provided by the Private partners.

**Appendix-3.2**  
(Reference: Paragraph-3.2.1; Page 41)

**Details of Availability of beds for Maternal & Childcare in DHs**

Name of District Hospital	Total Beds	Beds for Maternal & Childcare	SNCU	NBSU
DH, Almora	200	121	-	04
DH, Bageshwar	100	12	-	04
DH, Champawat	100	18	-	-
DH, Chamoli	100	17	10	04
DH, Dehradun	300	72	10	-
DH, Haridwar	100	42	06	-
DH, Nainital	200	49	-	04
DH, Pithoragarh	182	60	12	--
DH, Pauri	200	20	-	-
DH, Rudraprayag	100	16	-	-
DH, Tehri	100	12	12	-
DH, U S Nagar	200	54	12	-
DH, Uttarkashi	200	34	-	04

**Appendix-3.2 (A)**  
(Reference: Paragraph-3.2.1; Page 41)

**Details related to availability of beds in test checked CHCs**

<b>CHC Name</b>	<b>IPD Details of District Dehradun</b>		
	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
<b>CHC, Chakrata</b>	2016-17	Not Available	Not Available
	2017-18	382	30
	2018-19	238	30
	2019-20	330	30
	2020-21	261	30
	2021-22	355	30
<b>CHIC, Doiwala</b>	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	4549	30
	2017-18	3460	30
	2018-19	2776	30
	2019-20	3192	30
	2020-21	1096	30
2021-22	2182	30	
<b>CHC, Saiya</b>	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	Not Available	Not Available
	2017-18	58	30
	2018-19	243	30
	2019-20	638	30
	2020-21	838	30
2021-22	555	30	
<b>CHC, Raipur</b>	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	Not Available	Not Available
	2017-18	4	10
	2018-19	1569	10
	2019-20	2843	10
	2020-21	2508	10
2021-22	2477	10	
<b>CHC, Sahaspur</b>	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	Not Available	Not Available
	2017-18	2466	10
	2018-19	1767	10
	2019-20	2545	10
2020-21	1832	10	

CHC Name	IPD Details of District Dehradun		
	2021-22	1712	10
CHC, Betalghaat	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	Not available	Not available
	2017-18	223	30
	2018-19	157	30
	2019-20	179	30
	2020-21	142	30
	2021-22	171	30
CHC, Kotabag	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	Not available	Not available
	2017-18	552	30
	2018-19	698	30
	2019-20	887	30
	2020-21	644	30
	2021-22	751	30
CHC, Bhimtal	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	361	30
	2017-18	897	30
	2018-19	722	30
	2019-20	1015	30
	2020-21	188	30
	2021-22	92	30
CHC, Ramgarh	<b>Year</b>	<b>No. of IPD Patients</b>	<b>No. of Beds</b>
	2016-17	Not available	Not available
	2017-18	250	10
	2018-19	236	10
	2019-20	185	10
	2020-21	122	10
	2021-22	99	10

**Appendix-3.3**

(Reference: Paragraph-3.3.1, 3.7.1, 3.7.3, 3.7.4, 3.7.5, 3.7.6, & 3.7.8, Page (47,61,64,64,65,68&68))

**Details related to the availability of other Services in DHs of the State**

Services	Name of the District										
	Almora	Bageshwar	Chamoli	Champawat	Dehradun	Haridwar	Nainital	Pithoragarh	Rudraprayag	Udham Singh Nagar	Uttarkashi
Emergency	A	A	A	A	A	A	A	A	A	A	A
Ambulance	A	A	A	A	A	A	A	A	A	A	A
Blood Bank	A	A	A	A	NA	A	A	A	A	A	A
Dietary	A	A	A	A	A	A	A	A	A	A	A
Laundry	A	A	A	A	A	A	A	A	A	A	A
BMW Management	A	A	A	A	A	A	A	A	A	A	A
Mortuary	A	A	A	A	A	A	A	A	A	A	A

➤ The District Hospitals in two districts namely Pauri and Tehri are being run on PPP mode and the services are being provided by the Private partners.



**Appendix-4.1**  
(Reference: Paragraph-4.1; Page 81)

**Month wise Stock out of EDL and coverage across all facilities in the State as per e-Aushadhi portal**

Total States 21 in the Portal	Comparative State Rank for Last 12 months											
	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
STATE RANK*	17	17	14	15	18	18	18	16	15	15	17	16
COVERAGE	23.2	25.61	82.78	46.07	40.15	39.1	44.34	57.13	54.59	54.9	49.77	49.74
STOCKOUT OF EDL IN RWH	96.6	96.69	96.68	96.67	96.87	96.47	96.03	96.11	96.08	96.31	96.4	96.53
STOCKOUT OF EDL IN DH	88.77	89.01	88.67	88.51	88.45	88.54	88.38	87.93	87.83	87.35	86.4	86.29
STOCKOUT OF EDL IN CHC	94.51	94.52	94.66	94.81	94.82	94.41	94.17	93.91	93.52	93.61	93.56	93.63
VALUE OF DRUGS (EXPIRE IN 30 DAYS) ₹ in lakh	0.01	0.16	0.12	0.03	0.53	0.02	0.11	0.52	1.52	1.08	2.12	0.55
PERCENTAGE OF EXP QTY PROP. (BREAKAGE/LOSS/WASTAGE)	50.39	53.76	52.36	49.95	53.79	49.61	51.88	47.61	50.41	53.31	54.64	56.11
AVG DELAY IN DRUG SUPPLY	6.97	6.87	6.87	6.86	6.86	6.75	6.93	7.05	7.04	6.95	6.76	6.67

Source: Information provided by the Department from e-Aushadhi portal.

**Appendix-4.2**  
(Reference: Paragraph-4.1; Page 81)

**Availability of vital drugs in IPD, OT and emergency services in test checked district hospitals**

Sampled Month-			
November-2016, Feb-2018, May-2018, May-2019, November-2020.			
<b>Name of the Department- Emergency Department.</b>			
<b>Number of Sampled Drugs- 25</b>			
<b>Name of Sampled Drugs-</b>			
Inj Oxytocin, Inj. Ampillicin, Inj. Metronizazole, Gentamycin, Inj. Diclofenac Sodium, IV fluids (DNS), Ringer lactate, Plasma expander, Normal saline, Inj Magsulf, Inj Calcium gluconate, Inj Dexamethasone/Betameathazon, Inj Hydrocortisone Succinate, Diazepam, Pheneramine maleate, Inj Corboprost, Fortwin, Inj Phenergen, Inj Hydrazaline, Methyldopa, Nefidepin, Ceftriaxone, Polyvalent Anti Snake Venom, Anti tetanus human immunoglobulin, Inj. Atropine Sulphate			
	Full Available (per cent)	Partial Available (per cent)	Not Available (per cent)
<b>DH Dehradun</b>	11 (44)	08 (32)	06 (24)
<b>DH Nainital</b>	12 (48)	00	13 (52)
<b>Name of the Department- IPD Department.</b>			
<b>Number of Sampled Drugs- 14</b>			
<b>Name of Sampled Drugs-</b>			
Activated Charcoal, Adrenaline, Salbutamol, Aminophylline, Atropine sulphate, Dextrose, Dextrose with normal saline, Diclofenac Sodium, Ringer lactate, Digoxin, Metoclopramide, Vitamin K, (Phytonadione), Antiserum Polyvalent Snake Venom, Sodium Chloride.			
	Full Available (per cent)	Partial Available (per cent)	Not Available (per cent)
<b>DH Dehradun</b>	03 (21.43)	09 (64.29)	02 (14.29)
<b>DH Nainital</b>	00	08 (57.14)	06 (42.86)
<b>Name of the Department- OT Department.</b>			
<b>Number of Sampled Drugs- 23</b>			
<b>Name of Sampled Drugs-</b>			
Inj Oxytocin, Inj. Ampillicin, Inj. Metronizazole, Gentamycin, Inj. Diclofenac Sodium, IV fluids, Ringer lactate, Plasma expander, Normal saline, Inj Magsulf, Inj Calcium gluconate, Inj Dexamethasone, Inj Hydrocortisone Succinate, Diazepam, Pheneramine maleate, Inj Corboprost, Fortwin, Inj Phenergen, Betameathazon, Inj Hydrazaline, Methyldopa, Nefidepin, Ceftriaxone			
	Full Available (per cent)	Partial Available (per cent)	Not Available (per cent)
<b>DH Dehradun</b>	12 (52.17)	04 (17.39)	07 (30.43)
<b>DH Nainital</b>	01 (4.34)	08 (34.78)	14 (60.87)

**Appendix-4.3**  
(Reference: Paragraph-4.1.1; Page 82)

**Availability of Drugs, Lab Reagents, Consumables & Disposables**

Sl. No.	Categories	Number required as per IPHS 2012	Availability of Drugs in other GMCs and DHs in the State											
			GMC, Srinagar	DH, Haridwar	DH, Tehri	DH, Champawat	DH, Chamoli	DH, Uttarkashi	DH, Almora	DH, Bageshwar	DH, Rudrapur	DH, Pithoragarh	DH, U.S. Nagar	DH, Pauri
1	Analgesic/Antipyretics/Anti Inflammatory	11	7	7	8	6	6	7	8	5	7	7	9	7
2	Antibodies & Chemotherapeutics	76	21	21	28	18	33	18	25	10	21	21	33	21
3	Anti Diarrhoeal	6	2	3	2	2	3	2	3	0	1	2	2	1
4	Dressing Material/ Antiseptic Ointment Lotion	24	14	13	16	14	14	13	17	11	14	15	15	7
5	Infusion Fluids	14	9	9	8	11	11	9	11	9	9	9	13	9
6	Eye and ENT	25	6	1	12	1	2	0	1	1	2	2	15	8
7	Antihistaminic/ Anti- Allergic	12	6	8	7	6	6	6	6	5	6	5	6	6
8	Drugs acting on Digestive System	20	10	9	9	6	9	3	6	4	5	6	6	8
9	Drugs related to Hoemopoetic system	4	1	2	1	2	2	0	0	0	1	0	4	2
10	Drugs acting on Cardiac vascular system	26	9	13	17	10	12	11	11	9	17	8	22	9
11	Drugs acting on Central/peripheral Nervous system	40	16	18	17	11	17	10	12	8	18	6	16	16
12	Drugs acting on Respiratory System	16	4	9	5	1	9	3	5	4	7	3	15	4
13	Skin Ointment/Lotion etc.	23	2	6	5	6	14	4	4	2	5	0	13	4
14	Drugs acting on Uro-Genital system	5	3	3	5	3	4	4	3	2	5	1	4	4
15	Drugs used in obstetrics and Gynecology	35	9	2	19	9	10	2	0	3	14	2	16	15
16	Hormonal Preparation	14	4	2	4	5	4	3	2	0	2	2	2	1
17	Vitamins	24	7	5	10	6	9	5	5	2	8	3	23	8
18	Other Drugs and Material & Misc. Items	83	30	28	47	35	34	21	33	20	22	19	36	22
19	Emergency lifesaving drugs for SNCU	12	11	9	10	3	11	6	8	9	10	7	11	10
20	Other Essential Medicines & Supplies for SNCU	23	60	13	18	15	1	6	9	8	8	8	18	13
	<b>Total</b>	<b>493</b>	<b>231</b>	<b>181</b>	<b>248</b>	<b>170</b>	<b>211</b>	<b>133</b>	<b>169</b>	<b>112</b>	<b>182</b>	<b>126</b>	<b>279</b>	<b>175</b>

**Appendix-4.4**  
(Reference: Paragraph-4.2.1; Page 86)

**Availability of Equipment in remaining DHs in the State**

Sl. No.	Type	Essential & Desirable	Availability of Equipment in other DHs										
			DH, Haridwar	DH, Tehri	DH, Chamoli	DH, Almora	DH, Bageshwar	DH, Rudraprayag	DH, Pithoragarh	DH, Champawat	DH, U.S. Nagar	DH, Uttarkashi	DH, Pauri
1	Imaging equipment	12	2	7	8	2	6	7	10	6	8	6	5
2	X-ray room accessories	8	2	5	8	6	6	1	7	6	8	3	1
3	Cardiopulmonary equipment	13	7	10	4	9	12	10	10	11	13	11	10
4	Labour ward, Neo Natal and Special New-born Care Unit (SNCU) Equipment	27	20	23	21	0	15	17	21	17	15	18	14
5	Special SNCU equipment	11	6	9	7	0	8	0	6	0	6	7	9
6	Disinfection of SNCU Equipment	13	3	7	6	0	10	0	4	0	4	8	5
7	Immunisation Equipment	16	15	15	10	8	7	13	0	3	15	9	9
8	Ear Nose Throat Equipment	23	19	21	16	5	1	4	4	0	8	19	14
9	Eye Equipment	27	17	22	14	10	14	16	21	20	4	24	16
10	Dental Equipment	42	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
11	Laboratory Equipment	87	20	22	22	36	27	35	33	41	36	28	36
12	Endoscopy Equipment	8	0	0	0	0	0	0	0	3	5	0	1
13	Anaesthesia Equipment	25	13	20	8	14	13	15	9	20	17	7	5
14	Post-Mortem Equipment	9	2	8	9	2	6	7	4	9	8	9	0
15	OT Equipment	29	8	17	11	13	11	17	9	21	9	14	8
16	ICU Equipment	34	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
17	Emergency services Equipment	14	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
18	IPD Equipment	19	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
<b>Total</b>		<b>417</b>	<b>134</b>	<b>186</b>	<b>144</b>	<b>105</b>	<b>136</b>	<b>142</b>	<b>138</b>	<b>157</b>	<b>156</b>	<b>163</b>	<b>133</b>

Source: Information provided by DHs. \* NA: Information not available.

**Appendix-4.5**  
(Reference: Paragraph-4.5.4; Page 93)

**Deficient Storage of drugs**

Sl. No.	Name of the HCF	Air Condition Pharmacy	Levelled shelves/racks	Storage away from water and Heat	Drug Stored above the floor	Drug Stored away from walls	24 Hour temperature recording of cold storage area	Display Instructions for storage of vaccines	Functional temperture monitoring device in freezers	Maintenance of temperature chart of deep freezers
1	PHC Bhagawantpur	No	No	No	No	No	No	No	No	No
2	PHC Thano	No	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
3	PHC Jyolikot	No	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
4	PHC Talla Ramgarh	No	Yes	Yes	Yes	Yes	No	No	No	No
5	CHC Ramgarh	No	Yes	Yes	Yes	Yes	No	No	No	No
6	CHC Bhimtal	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
7	DH Dehradun	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
8	PHC Balawala	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
9	PHC Tyuni	No	Yes	Yes	Yes	No	No	No	No	No
10	Doon Hospital	Yes	No	Yes	Yes	No	Yes	No	Yes	No
11	Medical College Haldwani	No	No	No	No	Yes	Yes	No	Yes	No
12	CHC Kotabag	No	Yes	Yes	Yes	No	Yes	No	Yes	Yes
13	PHC Chakalua	No	Yes	Yes	Yes	Yes	No	No	No	No
14	SDH Haldwani	No	No	Yes	Yes	No	No	Yes	No	No
15	SDH Prem Nagar	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes
16	DH Nainital	No	No	Yes	No	No	No	No	No	No
17	PHC Simalkha	No	No	Yes	Yes	Yes	No	No	No	No
18	CHC Doiwala	No	No	Yes	No	No	Yes	No	Yes	Yes
19	CMSD Dehradun	No	No	Yes	No	No	Yes	No	Yes	Yes
20	CHC Raipur	No	No	No	No	No	No	No	No	No
21	CHC Sahaspur	No	Yes	Yes	No	No	Yes	No	No	No
	<b>Not Available</b>	<b>19</b>	<b>9</b>	<b>3</b>	<b>8</b>	<b>11</b>	<b>11</b>	<b>14</b>	<b>10</b>	<b>12</b>

**Appendix-4.6**  
(Reference: Paragraph-4.5.5.2; Page 95)

**Distribution of expired medicines**

Sl. No.	Name of the medicine	Qty. received (Date of expiry)	Qty. distributed after expiry and date till distributed	No. of Days	Qty. still lying in the stores after expiry
1.	Panchnimb churn	02 (March 2017)	01 (06.04.17)	06	--
2.	Betadin lotion	01 (June 2016)	01 (25.11.16)	148	--
3.	Johnson Vakhlet	03 (June 2016)	02 (22.12.16)	175	1
4.	Chandrmrit Ras	04 (Dec 2017)	04 (23.08.18)	235	--
5.	Panchkol Churn	01 (April 2017)	01 (17.03.18)	321	--
6.	Shatskar churn	01 (June 2017)	01 (24.03.18)	267	--
7.	Talisadi churn	01 (June 2017)	01 (19.12.17)	172	--
8.	Nimbadi churn	01 (Jan 2021)	--	--	1
9.	Chandramitr ras	03 (Dec 2016)	03 (21.12.18)	720	--
10.	Kashtkaryadi kvath	02 (March 2017)	02 (21.12.18)	630	--
11.	Darimashtak churn	02 (March 2017)	02 (11.07.19)	832	--
		03 (June 2019)	03 (12.02.20)	227	--
12.	Arjun Churn	05 (March 2017)	05 (26.04.17)	26	--
13.	Yashti madhu churn	02 (March 2017)	02 (21.12.18)	630	--
14.	Haritaki churn	03 (May 2017)	--	--	3
15.	Shankh Bhasm	07 (March 2018)	01 (21.12.18)	265	6
16.	Vasvleh	05 (March 2018)	--	--	5
		02 (June 2020)	--	--	2
17.	Arshkuthar Ras	02 (March 2018)	--	--	1
18.	Veshvanar churn	01 (August 2017)	01 (21.12.18)	477	--
19.	Barsol Tab	03 (Nov 2018)	03 (21.12.18)	21	--
20.	Panchskar churn	02 (Nov 2021)	--	--	2
21.	Triygyadi churn	02 (Jul 2019)	--	--	2
22.	Sarpgandha churn	02 (May 2019)	--	--	1
23.	Arshodhan vati	03 (May 2019)	--	--	3
24.	Gutduchayadi kvath	03 (May 2019)	--	--	3
		02 (June 2021)	--	--	2
25.	Som Churn	02 (April 2019)	--	--	2
		02 (July 2021)	--	--	2
26.	Kalmeghadhi Kvath	20 (March 2019)	--	--	10
		17 (July 2021)	--	--	17
		17 (Jan 2021)	--	--	17
27.	Haridra khand	1 (Dec 2020)	--	--	1
28.	Kaflet	04 (Dec 2021)	--	--	4
29.	Sanjeevani Vati	04 (Aug 2021)	--	--	4
30.	Ashvgandha churn	11 (Feb 2021)	03 (17.09.21)	201	--
31.	Kutja leham	02 (Dec 2021)	--	--	2
32.	Lavanbhaskar churn	02 (July 2021)	--	--	2
33.	Panchskar churn	02 (April 2021)	--	--	1
34.	Amalkyadi churn	01 (April 2017)	01 (17.12.18)	596	--

**Appendix-5.1**  
(Reference: Paragraph-5.1; Page 102)

**District wise requirement and availability of CHCs and PHCs in the State**

Sl. No.	District	CHCs as per IPHS		PHCs as per IPHS	
		Required	Available	Required	Available
1.	Almora	9	9	35	66
2.	Bageshwar	4	3	15	29
3.	Chamoli	5	5	22	39
4.	Champawat	4	0	15	18
5.	Dehradun	24	5	97	47
6.	Haridwar	18	8	72	29
7.	Nainital	14	10	54	45
8.	Pauri	10	13	39	93
9.	Pithoragarh	7	4	27	53
10.	Rudraprayag	3	2	14	38
11.	Tehri	9	11	35	54
12.	Udham Singh Nagar	16	5	63	34
13.	Uttarkashi	4	4	19	33
<b>Total</b>		<b>127</b>	<b>79</b>	<b>507</b>	<b>578</b>

**Appendix-5.2**  
**(Reference: Paragraph-5.7; Page 117)**

**Execution of AYUSH Policy**

Thrust Areas	To be executed as per AYUSH Policy	Actual Execution done/execution not done by the Department		
		Not Executed	Executed	Partially executed
<b>1. Infrastructure upgradation</b>				
<b>A. Upgrade the existing infrastructure facilities and develop new infrastructures.</b>	1. Govt of Uttarakhand to strive to upgrade the existing infrastructure facilities (Hospitals, Specialty Hospitals and Dispensaries) and develop new infrastructures.	1.No existing infrastructure facilities had been upgraded since 2018. 2. No framework/guidelines prepared/ issued and no Budget allotted in this regard.		
<b>B. Accreditation</b>	1. The infrastructure facilities in existing Government Ayurveda Hospitals and Government and Government aided dispensaries to be upgraded to National Accreditation Board for Hospitals & Healthcare Providers (NABH) standards to improve the quality services and augment the patient load. 2.The Govt of Uttarakhand to make efforts to introduce the Uttarakhand Accreditation Standards for Health Care (UASH) for AYUSH systems.	No efforts had been made to introduce the Uttarakhand Accreditation Standards for Health Care (UASH) for AYUSH systems. Thus, no existing infrastructure facilities was upgraded to improve the quality services and augment the patient load.		
<b>C. New services</b>	1. To assess the feasibility of starting Siddha and Naturopathy Hospital in the State in a phase manner. Based on the patient load, the dispensaries and hospitals would be upgraded to the next higher level.	1.No feasibility study had been conducted for establishment of Siddha and Naturopathy Hospital in the State.		
<b>D. Components of the AYUSH Services under National AYUSH Mission envisaged that financial assistance will be provided to the States/ UT Governments</b>	<b>AYUSH Wellness Centres including Yoga &amp; Naturopathy-</b> Naturopathy hospitals 20-30 beds are eligible for ₹ 15 lakhs (₹12 Lakhs as recurring assistance p.a. including Manpower and ₹.3 Lakhs for nonrecurring one-time assistance for treatment equipment's The Yoga wellness Centres are eligible for ₹ 0.6 Lakhs as one time assistance for initial furnishing and recurring assistance of ₹ 5.4 Lakhs p.a. for Manpower, maintenance.	No Proposal had been sent in the State Annual Action Plan regarding Naturopathy hospitals and Yoga wellness centers.		
<b>E. Wellness Centres</b>	1. The Wellness Centres to be identified, under the Ayushman Bharat Yojana.	1.In AYUSH Department 70 (60 in Ayurveda and 10 in Homoeopathy) Health and Wellness Centres identified and are partially operational.		
<b>F. Disease Surveillance in the particular local body (IDSP)</b>	1. Special Outpatient Department OPD to be introduced based on the study conducted on the disease surveillance in the particular local body. (IDSP)	1. No study had been conducted on the disease surveillance. There is no provision in Ayurveda in this regard.		
<b>G. AYUSH health care centers in places of public interest.</b>	1. AYUSH health care centers would be introduced under government and public sector institutions in places of public interest.	1.One new AYUSH health care centre (one homoeopathic dispensary) had been established.		
<b>2. AYUSH Programmes</b>				
<b>A. Public Health Care</b>	1.Services of AYUSH doctors utilized in various aspects of Public Health Service Delivery and various National Disease Control Programmes	1.In National Disease Programmes AYUSH doctors/Paramedical staff provided services along with Allopathy Department.		
	2.Interventions considered as community based AYUSH	2.Outreach Camp & ASHA/ANM programmes are run as community based.		
	3.Initiated for preventive and curative healthcare and had linked with the local self-help groups	3.Community based, AYUSH interventions initiated for preventive health care but not linked with self-help groups.		
<b>B. Tribal Health Care</b>	1.To provide AYUSH health care to the tribal population, medical kits were to be distributed through local self-help groups and tribal promoters	1. Under the programme, no- initiative /plan was prepared to procure and distribution AYUSH Kits for tribal population as a result the		



		population was deprived from the envisaged benefits under the programme.
<b>C. Palliative Care</b>	1. Palliative care programme to be extended across the state by ensuring the participation of the local bodies.	1. No framework/guidelines were prepared by the department. As programme structure was not available therefore its implementation/ could not be accomplished.
<b>D. Cancer Care</b>	1. To conduct State level propagation programme for cancer awareness, early detection, prevention and treatment based on the strengths of each system of AYUSH	1.No such programme was conducted.
<b>E. Maternity Care</b>	1. To conduct AYUSH Maternity Awareness Program to provide holistic care to the expectant mothers	1. Assisted in Maternity programs conducted by Allopathy department, no records maintained in this regard,
<b>F. Child Care</b>	1.To introduce Paediatric Healthcare Programmes and to distribute child health care kit.	1.Neither Pediatric Healthcare Program was introduced, nor child health care kits were distributed. Further, no strategy was framed by the department for executing the intervention.
<b>G. Geriatric Care</b>	1. To introduce Special programs for the management of old age problems based on the strengths of each AYUSH systems through dispensaries and hospitals	1.No special programs of old age problems was initiated. Further, no strategy was framed by the department for executing the intervention.
<b>H. Sports Care</b>	1. To introduce Siddha Therapy for treating sports injuries considering the Siddha treatment scope in healing injuries to the energy points in the body	1. Siddha Therapy had not been introduced so far in the state.
	2. To explore the modalities of Yoga & Naturopathy in National Sports Institutes	2. Yoga & Naturopathy had not been initiated in Sports College/institute so far. No framework/ guidelines were prepared for initiating this intervention.
<b>I. Communicable Diseases</b>	1. To launch an integrated AYUSH programme for the effective control, prevention and management of communicable diseases by introducing AYUSH regional communicable disease prevention programme.	1. No region wise programme for communicable diseases was framed.
<b>J. Non-Communicable Diseases</b>	1. To conduct separate program for prevention of lifestyle diseases by integrating the role of each system of AYUSH in all districts	1. Yoga centres (11) are operational in Dehradun, Tehri, Uttarkashi, Pauri and Pithoragarh districts.
	2. Yoga & Naturopathy clinics integrated with the existing AYUSH hospitals and clinics for management of non-communicable diseases	2. Yoga clinics/centres are operational with AYUSH hospitals
<b>K. Lifestyle Management</b>	1. The state government facilitate in conducting an integrated programme on lifestyle diseases management and prevention through public health activities.	1.In Ayurveda hospitals the treatment is given to the patients after consultation of food intake and as of reason, the patients are also made aware regarding it.
	2.Programmes like the ' <i>Ayushmabhava</i> ' the state-level programme to treat the lifestyle diseases introduced to all AYUSH Hospitals and the knowledge of ' <i>Science of Healthy Living</i> ' propagated to the public domain	2. ' <i>Ayushmabhava</i> ' programme is not introduced as a sole program in the State level hospitals as envisaged in the policy.
	3.To introduce de-addiction specialty clinic by leveraging strengths of Ayurveda	3. No de-addiction specialty clinic were established.
<b>3. AYUSH Education</b>		
<b>A. Medical Education</b>	Government of Uttarakhand shall establish AYUSH University by upgrading the existing Faculty Uttarakhand Ayurveda University (UAU) in Dehradun to enhance the quality of AYUSH education in the state.	No initiative was taken up by the department to fulfil the policy intervention.
<b>B. School Education</b>	AYUSH subjects including yoga to be incorporated in various levels of school syllabus.	Department was unaware about this policy intervention.
<b>C. Paramedical Education</b>	The diploma and degree programme in pharmacy, Panchkarma therapy, AYUSH nursing and other specialized courses in AYUSH to be strengthened.	Pharmacy, Panchkarma Education in AYUSH were running as per NCISM norms. AYUSH Nursing courses which were running in Rishikul Ayurvedic College, Haridwar was closed in the year 2016.
<b>D. Capacity Building</b>	Efforts would be taken to update the practitioners and paramedics on new research and scientific method of treatment and medicinal plants in all systems of medicine	<ul style="list-style-type: none"> <li>In University campuses department wise at department level Continuous Medical Education (CME) programme were organized.</li> </ul>

	through Continuous Medical Education (CME) programmes and reorientation programmes. Key institutions with national and international collaboration would be developed for giving proper training to practitioners, educationalist, researchers and students from different systems of medicines.	<ul style="list-style-type: none"> <li>Regular Seminar and training programs were conducted by Ayurveda Department</li> </ul>
<b>4. Research</b>		
<b>A. Academic Research</b>	1. To set up Charak International Research Institute of AYUSH in Kotdwar (District – Pauri, Garhwal) which will act as meaningful interface between the research institution, academy and industry to translate research outcomes for public use and to bridge the knowledge gaps.	1. Not setup yet. However, for preparation of DPR, Government of Uttarakhand sanctioned ₹ 10 crore from the University Development Fund.
<b>B. Clinical Research</b>	1. Grant to be provided for research projects focusing on the efficacy of AYUSH system in public health care programme	1. Clinical/Experimental research topics allotted by the departmental research committee sent to the AYUSH Ministry, Government of India for sanctioning of grant, but it had not been passed by the Government, yet.
<b>C. Drug Research</b>	1. To establish an inter-disciplinary research centre with international standards to scientifically revalidate the classical products and development of new products. The <b>Charak International Research Institute of AYUSH</b> shall include the Drug Research.	1. Establishment of International Ayurveda Research Institute is at initial stage. Formation of DPR is in process. Establishment of Drug Research will be constructed as per the prevailing norms.
<b>D. Extra Mural Research</b>	1. To develop Extra Mural Research Projects on AYUSH aimed at developing the opportunity for scientific scrutiny of AYUSH system for the benefit of users, researchers, practitioners, industries & common people at large	1. No Extra Mural Research Projects were funded by AYUSH Ministry, Government of India or State Government.
<b>5. Drugs</b>		
<b>A. Raw Materials</b>	1. To establish Medicinal Plant nurseries in all AYUSH educational institutions & hospitals with necessary assistance.	1 & 2. Medicinal Plant nurseries was not established in all the AYUSH hospitals; however, Medicinal Plant nurseries had been established in 17 hospitals of 08 districts.
	2. To take up steps to grow herbal garden and to cultivate sufficient medicinal plants in public premises.	
	3. Govt of Uttarakhand would initiate activities with the assistance from Herbal Research and Development Institute (HRDI), Local Bodies, Forest and Wildlife Department and State and Central Medicinal Plant Boards to protect the endangered medicinal flora and fauna.	3. No activities in this regard had been initiated by the Government of Uttarakhand.
	4. Subsidies to be provided for the cultivation of rare medicinal plants and herbs as per the guidelines of National AYUSH Mission. Forward linkages shall be adopted to motivate the farmers to cultivate the medicinal crops.	4. Department failed to adopt/ create linkage therefore, no subsidies were distributed among the farmers to cultivate the medicinal Crops.
<b>B. Drug Manufacturing</b>	1. To strengthen the existing Rishikul State Ayurvedic Pharmacy in Haridwar in terms of infrastructure, equipment and manpower.	1. No change in Status even after introduction of AYUSH Policy.
	2. To adopt the self-sustaining model of the Rishikul State Ayurvedic Pharmacy for inhouse and market supply.	2. At present Rishikul State Ayurvedic Pharmacy not able to supply fully inhouse.
	3. Measures would be taken to include more GMP certified Ayurveda & Unani drug manufacturing unit to ensure uninterrupted supply of drugs with the aim of providing high quality medicaments to the public health initiatives in the State.	3. One proposal for establishment of new Ayurveda & Unani drug manufacturing unit is under consideration.
<b>C. Quality Assurances &amp; Control</b>	1. Govt of Uttarakhand would strengthen the existing <b>Govt Drug Testing Laboratory</b> with necessary manpower and testing facilities.	1. The drug test lab was yet to be strengthened with manpower. However, a proposal for required manpower is under consideration of Government.

6. Governance		
<b>Governance</b>	1. Government of Uttarakhand would make efforts to provide the public with right of choice of treatment through its efforts in co-location of AYUSH infrastructure and manpower in public health facilities.	1. No new AYUSH wings were made operational under co-location in CHCs/PHCs/DHs after introduction of AYUSH Policy. However, to operationalize AYUSH wings in all the Allopathic Hospitals proposal were initiated.
	2. The state government would implement equal status and parity among doctors of different systems in the state.	2. Not done yet.
	3. Uttarakhand Accreditation Standards for Health Care (UASH) shall be introduced for AYUSH systems	3. Not introduced.
	4. To establish Uttarakhand Govt AYUSH holistic treatment centers throughout the state to ensure maximum utilization of the uniqueness of each of the treatment system by healthy cross-referral systems.	4. Not established.
	5. Budgetary Allocations for AYUSH Department to be enhanced to 2% of the total state budget.	5. The budgetary allocations ranged between 0.57 to 0.70 per cent during the years 2016-17 to 2020-21. Efforts were being done to increase budgetary allocation.
	6. Steps to be taken to support setting up of clusters through convergence of cultivation, warehousing, value addition and marketing and development of infrastructure for entrepreneurs.	6. No initiative at the department level.
	7. The government had to take efforts to cover the secondary and tertiary care of AYUSH under the National Healthcare Protection Scheme (NHPS) as announced recently by the Govt of India. AYUSH treatment to be included in Rashtriya Swasthya Bima Yojna (RSBY) schemes and in all future health related schemes.	7. No efforts were visible for the implementation of scheme
7. Institutional Mechanism		
<b>A. To enhance institutional capacity</b>	1. To enhance institutional capacity by strengthening the Department of AYUSH, Uttarakhand National AYUSH Mission, Directorate of Ayurveda and Unani, Uttarakhand Ayurveda University and Govt Drug Testing Laboratory.	1. No change in the status either in infrastructure or in manpower since the implementation of the policy.
<b>B. Compulsory Rural posting and preparation of norms for the doctors serving in the Ayurveda &amp; Homoeopathy institutions.</b>	1. It is to be ensured that one-year rural compulsory posting would be for internees to get effective exposure in primary health care.	1. Not ensured yet. <i>Irrational posting refer para 1.4.2</i>
	2. Norms to be introduced for compulsory serving in the Ayurveda & Homoeopathy institutions for the doctors who have completed MBBS & PG program through Ayurveda and Homoeopathy quota.	2. No norms had been introduced in this regard.
<b>C. Formation of AYUSH Task Force</b>	1. AYUSH Task Force and Surveillance team for the management of Epidemic diseases affecting the community to be formed.	1. Not formed.
<b>D. To institutionalize the successful departmental programmes</b>	1. Steps to be taken to institutionalize the successful departmental programmes by strengthening the required manpower and infrastructure.	The working of the department remained unchanged as neither new recruitment was done nor new infrastructure was created during the period 2016-21.
8. Regulatory Framework		
<b>A. Single - window clearance</b>	1. Single - window clearance to be provided for approvals to commission hospitals, tax breaks and annuity - based financing for setting up hospitals / dispensaries and for start-ups and running of AYUSH manufacturing firms.	1. Yes, all new applications are being channeled through Department of Industries.
<b>B. Educational practices</b>	1. Educational practices and institutions in AYUSH would be sufficiently controlled and regulated to ensure quality in education and research.	1. Proposal send to NCISM to increase post-Graduation seats. MoUs with other Universities/Institutes had been done.

<b>C. Introduce bills to prevent quackery in the AYUSH system of medicines</b>	1 Steps to be taken to introduce bills to prevent quackery in the AYUSH system of medicines and to regulate private practitioners and treatment centers.	1. No such bill had been introduced.
<b>D. Implementation of Medical Practitioners Act (Bill) for AYUSH practitioners in Uttarakhand</b>	1. To Implement Medical Practitioners Act (Bill) for AYUSH practitioners in Uttarakhand	Not prepared and implemented.
<b>9. Investment in AYUSH &amp; Wellness Tourism (Key AYUSH investible projects / activities)</b>		
<b>A) Wellness-based AYUSH Projects</b>		
<b>1) AYUSH Township</b>	1. It is to be planned for the development of Uttarakhand Health Tourism and Organic Cultivation related activities. The project shall be proposed as international level Herbal and AYUSH Tourist Hub in the State. The township shall have features like Yoga, Ayurveda and Naturopathy Centre, eco-friendly environment for tourism activities, physiotherapy centre and gymnasium, goshala for indigenous and Himalayan breed cattles, herbal garden, nursery for medicinal and aromatic plants, organic food facility, agriculture, horticulture, floriculture and organic farming zones, studio apartments and villas, space for establishment of wellness / treatment centres, landscaping and other infrastructure amenities such as parking, helipads and retail outlets.	<p><b>Two proposals for AYUSH Township -1.Company Name:</b> Midas Investments Consulting PTE Ltd  <b>Project Details:</b> Development of Wellness City  <b>Prop. Inv. (INR Cr.):</b>150.00  <b>Prop. Emp.:</b>2000  <b>Required 50 Acres land near Dehradun/ Narendra Nagar</b>  <u>As per information provided by the Department-</u>  Investor is interested in Madan Negi land of SIIDCUL. However, is not satisfied with the RFP terms of SIIDCUL as they are asking for ₹ 20 Crores of deposit along with lease money. Investor is also interested in running GMVN and KMVN properties on PPP mode.  <b>2. Company Name:</b> Patanjali Ayurved Limited  <b>Project Details:</b> Ayush Gram and Health Center  <b>Prop. Inv. (INR Cr.):</b>1000.00  <b>Prop. Emp.:</b>2000  <b>Required 1163 Acres of Land in Yamkeshwar Block, Pauri District</b>  <u>As per information provided by the Department-</u>  Investor is in touch with CM office and has assurance for land allotment from CM Office. Doesn't need AYUSH department facilitation right now.</p>
<b>2) AYUSH Gram</b>	1. To be focused on establishing a centre for wellness where consultation and treatment by AYUSH system shall be available along with Yoga with indoor facility. Private investors will be invited to establish AYUSH gram in the state, primarily AYUSH gram are proposed under PPP Mode at Uttarkashi, Champawat, Pithoragarh, Tehri and Chamoli where lands are available with the department.	<p><b>Three proposals for AYUSH Grams –</b>  1. <b>Company Name:</b> Arogya Formulations Pvt Ltd <b>Project Details:</b> Ayurveda Village -R&amp;D, Yoga Centre, Botanical Garden, Herb Pool Centre, Residential Wellness Retreat  <b>Prop. Inv. (INR Cr.):</b>50.00  <b>Prop. Emp.:</b>3500  <b>Aneki-hetampur, Near SIIDCUL, Haridwar</b>  <u>As per information provided by the Department-</u>  Investor has received in-principal approval from all the concerned departments. Currently seeking permissions for land use conversions  2.<b>Company Name:</b> Saukhyam Himalaya Wellness <b>Project Details:</b> 1. Academic Institution imparting knowledge in Ayurveda and Yoga 2. Clinical and Drug Research In the field of Ayurveda &amp; Yoga 3. Ayurveda &amp; Yoga Treatment Centre 4. Wellness Retreat 5. Herbs Cultivation 6. Ayurvedic Pharmacy</p>

		<p><b>Prop. Inv. (INR Cr.):10.00</b>  <b>Prop. Emp.:100</b>  <b>Bidhaulti Village, Dehradun</b>  <u>As per information provided by the Department-</u>  Investor doesn't respond to phone calls.  <b>3. Company Name:</b> Nector Factor Foundation  <b>Project Details:</b> Want to develop Spiritual Eco Zone to promote wellness, Mental and Physical  <b>Prop. Inv. (INR Cr.):80.00</b>  <b>Prop. Emp.:200</b>  <b>Require 80 Acre land anywhere in state. Want to adopt a ghost village for his project.</b>  <u>As per information provided by the Department-</u>Investor is seeking around 80 Acres of land on subsidized rate from the Government. Investor want to develop Spiritual Eco Zone to promote wellness, Mental and Physical Health. Investor has sent a detail project report in the department for the same. DPR and request for land allotment has been forwarded to the secretary.</p>
<p><b>3) Yoga Gram / Centre</b></p>	<p>1. To be focused on developing the state of art, Yoga and meditation centre added with herbal gardens at various suitable places in the state. Primarily Yoga Gram are proposed under PPP Mode in Almora, Tehri, Jageshwar, Uttarkashi, Champawat and Pithoragarh where lands are available with the department.</p>	<p><b><u>Three proposals for Yoga Centres –</u></b>  <b>1. Company Name:</b> Asset Infotech Limited  <b>Project Details:</b> Development of state of Art Yoga &amp; Meditation centre  <b>Prop. Inv. (INR Cr.):7.00</b>  <b>Prop. Emp.:2</b>  <b>54, Chandreshwar Nagar, Mayakund, Rishikesh, Dehradun</b>  <u>As per information provided by the Department-</u>Construction under process.  <b>2. Company Name:</b> International Wellness &amp; Yoga Research Centre  <b>Project Details:</b> Establish Yoga Skill Training and Research Centre  <b>Prop. Inv. (INR Cr.):5.00</b>  <b>Prop. Emp.:25</b>  <b>Three Acres land required. Interested in Departmental land in Naugaon, Uttarkashi</b>  <u>As per information provided by the Department-</u>Investor informed that he wants the land on very economical rates and he would be running the project on Nonprofit model. Interested in Departmental land in Uttarkashi.  <b>3. Company Name:</b> SMAY PY EDUCATION FOUNDATION  <b>Project Details:</b> Yoga Teacher's Training Institute <b>Prop. Inv. (INR Cr.):7.95</b>  <b>Prop. Emp.:100</b>  <u>As per information provided by the Department-</u>Approved / MDDA is not acknowledging CAF (Common Application Form), therefore has not received approval for initiating construction.</p>

<p><b>4) AYUSH Wellness Resort</b></p>	<p>1. To be proposed at the select locations where Panchkarma, Yoga and Naturopathy based treatment provided. Besides Haridwar and Rishikesh the main focus area will be in Kumaon and Garhwal Mandal near hill stations, religious places and on the Char Dham Yatra Route.</p>	<p><b><u>Five proposals for AYUSH Wellness Resort and 17 proposals for AYUSH Wellness Centres</u></b> –1.<b>Company Name:</b> International Marketing Corporation Pvt Ltd  <b>Project Details:</b> Wellness Resort  <b>Prop. Inv. (INR Cr.):</b>200.00  <b>Prop. Emp.:</b>1000  <b>Bahadarabad, Haridwar</b>  <u>As per information provided by the Department-</u>                  Construction work has been completed. Investor has filed the CAF previously. (CAF No. 5804). Need some facilitation in Land transfer.                  2.<b>Company Name:</b> Superior Carbonates &amp; Chemicals Limited  <b>Project Details:</b> Ayush Health Resort  <b>Prop. Inv. (INR Cr.):</b>15.00  <b>Prop. Emp.:</b>110  <u>As per information provided by the Department-</u>                  Inventor is having industrial land in Dehradun. Facing issues with MDDA, as they have denied permission to develop wellness resort in industrial land. Investor is requested to file CAF as an expansion project after consulting with MDDA.                  3. <b>Company Name:</b> Kumar Group of Industries <b>Project Details:</b> Health Resort  <b>Prop. Inv. (INR Cr.):</b>60.00  <b>Jeolikot, Nainital</b>  <u>As per information provided by the Department-</u>Investor is working on the feasibility study for this project. Investor will soon meet with Secretary for project initiation.                  4.<b>Company Name:</b> Raam Eco Resort  <b>Project Details:</b> Eco Resort with 25 rooms and facilities for ayurvedic wellness powered partly with solar energy  <b>Prop. Inv. (INR Cr.):</b>10.00  <b>Prop. Emp.:</b>15  <b>Two Acres of Land Required in Dehradun</b>  <u>As per information provided by the Department-</u>Investor is seeking land.                  5. <b>Company Name:</b> Cottage Nirvana  <b>Project Details:</b> Expansion of Wellness services in resort  <b>Prop. Inv. (INR Cr.):</b>7.95  <b>Prop. Emp.:</b>100  <b>Mukteshwar, Nainital</b>  <u>As per information provided by the Department-</u>Investors are running a resort in Mukteshwar. Want to establish the resort as wellness centre. Are requested to initiate the process of CAF filling.  <b><u>Apart from above 17 AYUSH Wellness Centres proposals were also received which are in pipeline.</u></b></p>
--	--	--

<p><b>Others (AYUSH Hospital, AYUSH University, Cultivation/Pharmacy &amp; Wellness Institute</b></p>	<p><i>Two proposals for AYUSH Hospitals, One for AYUSH University, five proposals for Cultivation/Pharmacy &amp; One proposal for Wellness Institute received were also under process.</i></p>	
<p><b>B. Healthcare-based AYUSH Projects</b></p>		
<p><b>1) Disease Based Hospitals</b></p>	<p>1.To explore letting out its available Hospitals in Dehradun, Tehri, Pauri, Uttarkashi and Pithoragarh to be developed into disease-based hospitals on PPP mode, catering to requirements of specific diseases.</p>	<p>1.No steps had been initiated regarding development of disease-based hospital on PPP mode. 2. There is no proposal in pipeline regarding it.</p>
<p><b>2) 50-Bedded Hospitals</b></p>	<p>1. An integrated 50 bedded AYUSH hospital is under construction at Haldwani (in Nainital district) which will cater to larger society of nearby districts.</p>	<p>1. Not operational yet.</p>
	<p>2. Department to explore its O&amp;M through PPP mode</p>	<p>2. Department had not explored it's O&amp;M through PPP mode, yet.</p>
	<p>3. Department had to initiate plans to develop similar capacity hospitals in other districts of Uttarakhand on PPP mode</p>	<p>3. Two 50 bedded hospitals sanctioned (Tanakpur &amp; Jakhnidhar) by GoI, budget yet to be sanctioned by State Government. But no hospital was proposed on PPP mode.</p>
<p><b>C. Manufacturing-based AYUSH Projects</b></p>		
<p><b>Projects for the development of AYUSH Drug Manufacturing Units and Pharmacies.</b></p>	<p>1. Department of AYUSH to maintain the list of investible projects and shall be updated in this policy for incentives and subsidy benefits.</p>	<p>1. No list of investible projects had prepared by the department.</p>
<p><b>Uttarakhand AYUSH Policy – Incentives</b></p>		
<p><b>Key AYUSH investible projects / activities for private investment including through PPP-</b></p>	<p>To set up an Investment Facilitation Desk (IFD) by the Department of AYUSH.</p>	<p>1.Nodal Officers at Directorate &amp; DAUOs level been nominated for investment facilitation.</p>
	<p>To conduct regular summit / conference and also ensure AYUSH participation in the Global Investment Summit.</p>	<p>2.AYUSH Investment Desk was operationalized during AYUSH Melas organized by the Department. Director, participated in the ‘Global Wellness Summit’ held in Singapore in September 2019. Representatives of AYUSH Department took part in “Invest North Summit, Bangalore”.</p>
	<p>A Help Desk will be set up at the office of the Department of AYUSH.</p>	<p>3.Help Desk had been set up.</p>

**Appendix-7.1**  
(Reference: Paragraph-7.1.1; Page 130)

**Details of Duties/Activities performed by ASHAs and Incentives paid against the Activities/Duties**

Sl. No.	Duties/Activities	Incentive (in ₹)
1	Four ANC check-ups before delivery under Janani Suraksha Yojana.	Rural ₹ 300, Urban ₹ 200 per case
2	To help pregnant women to open bank account and linked with Aadhaar.	₹ 5 per bank account opening and Aadhaar linking to the account.
3	To arrange Doli-Palki to transport women for Delivery	₹ 400 per case
4	To get conducted institutional delivery under Janani Suraksha Yojana.	Rural 300, Urban 200 per case
5	To give first and correct information about maternal death in the community to 104 helpline and medical officer	₹ 1,000 per Information
6	To identify HRP women on PMSMA site for healthy outcome of mother and new-born, 45 days after delivery.	₹ 500 per case
7	To accompany the woman to the hospital for safe abortion.	₹ 150 per case
8	To collect beneficiaries on PMSMA site for 10 months per session.	₹ 100 per month
9	To get the HRP pregnant women examined by the medical officer or Gynaecologist and Obstetrician on the PMSMA site (maximum 03 examination)	₹ 300 per beneficiary
10	To give IFA red pill to women of reproductive age group (non-pregnant & non lactating)	₹ 50 per month
11	To give first information of infant deaths at the Community level.	In Bageshwar, Chamoli, Champawat and Tehri only ₹ 200 per information and in other district ₹ 50 information.
12	To follow-up of children discharged from NRC (03 follow-up visits in next 06 months)	₹ 250 per child
13	For number of children received HBNC visit.	₹ 250 per case
14	Maa meeting (Awareness on Breastfeeding / Low Birth weight babies)	₹ 100 once in three months
15	For number of children received HBYC visit.	₹ 250 per case
16	To distribute ORS to children up to 05 years	₹ 1 per packet for intensive diarrhoea fortnight
17	To mobilize out of school children in the age group of 1-19 years, for NDD once in a year.	₹ 100 once in year
18	To distribute IFA Syrup to children up to 05 years of age.	₹ 100 per child (08 dose per month)
19	To motivate Adolescents (Boys and Girls) to participate in AHD.	₹ 200 per AHD
20	Selection of peer educator	₹ 100 per peer educator
21	To immunize children fully up to 1 year of age (Measles)	₹ 100 per case
22	To immunize children fully up to one and a half years of age (Booster)	₹ 75 per case
23	To mobilize children for outreach Immunization session.	₹ 150 per session.
24	To give DPT Booster at the age of 5 years	₹ 50 per case
25	To give 2nd dose of DPT Booster	₹ 50 per case
26	To motivate for female sterilization	₹ 200 per case
27	To motivate for male sterilization	₹ 300 per case
28	To motivate to undergo operation after delivery or within 7 days	₹ 300 per case
29	To motivate for PPIUCD	₹ 150 per case
30	To motivate for PAIUCD	₹ 150 per case
31	To motivate to have a gap of 2 years between marriage and birth of the first child	₹ 500 per case
32	To motivate for 03-year gap between the birth of 1 <sup>st</sup> and 2 <sup>nd</sup> child	₹ 500 per case
33	To motivate to adopt permanent family planning measures after the birth of children	₹ 1,000 per case
34	Injectable Contraceptive DMPA (ANTRA Programme)	₹ 100 per dose.
35	To give a new initiative to the new couple	₹ 100 per kit
36	To motivate the mother-in-law and daughter in-law in the Saas-Bahu - Pati Sammelan	₹ 100 per Sammelan



Sl. No.	Duties/Activities	Incentive (in ₹)
37	To maintain record of births and deaths every month	₹ 300
38	To make a due list of pregnant women every month	₹ 300
39	To make a due list of children for immunisation every month	₹ 300
40	To make a list of the target couples every month	₹ 300
41	To survey the houses in every 06 months	₹ 300
42	To participate in monthly meeting of PHC every month	₹ 150
43	Mobilization for VHND	₹ 200
44	Mobilization for VHSNC	₹ 150
45	To work as ASHA Help Desk	₹ 150 per Help Desk
46	To organize a PLA Meeting	₹ 100 per meeting
47	To make malarial blood slides	₹ 15 per slide
48	Treatment of malaria patients (PVF &PF)	₹ 75 per case
49	Door to door larval preventive (source reduction) and protection action for dengue prevention	₹ 1 per household up to a maximum of ₹ 1,000 transition period from July to November or up to 05 months
50	To identify leprosy cases	₹ 250 per case (if confirmed later)
51	To provide PB facility	₹ 400 per case
52	To provide MB facility	₹ 600 per case
53	To conduct regular survey in the campaign of active cases of leprosy	₹ 1,000 concerned ASHA workers of 1,000 population of identified area on spring.
54	To inform suspected TB cases, referred on the basis of first informer	₹ 500 per case (for confirmed case)
55	Cases completed treatment for tuberculosis	₹ 1,000 per case
56	Cases completed treatment for drug resistant tuberculosis	₹ 5,000 per case
57	Duties at Health and Wellness Centre	₹ 1,000 per ASHA per month
58	For universal screening of Common community-based check list number of CBAC forms filled	₹ 10 per screened person
59	For patients who got health check-up done from time to time in the health centre	₹ 100 per person per year ₹ 50 per person per 06 month
60	State Government incentive	₹ 3000 per month and 10% activity linked incentive.

Source: SHS.

**Appendix-7.2**  
(Reference: Paragraph-7.10.; Page 141)

**Detail of unavailability of essential equipment as required under the programme guidelines in DEICs of selected districts**

Name of Equipment	To be available	Available at DEICs		
		Dehradun	Nainital	
Diagnostic Equipment/Tools for Vision, Hearing & Speech, Intellectual, Emotional & Behavioral Assessment.	Hearing Impairment	06	01	06
	Vision Impairment	10	08	04
	Retinopathy of prematurity	11	04	02
	Speech and language disorder	02	01	02
	Cognition, Intellectual disability and mental disorder	09	01	09
	ASD/Autism: Autism Spectrum disorder	01	Nil	01
	ADHD: Attention Deficit Hyperactivity	01	Nil	01
	Learning Disability	01	Nil	Nil
	LD- Dyslexia	01	Nil	01
	Behavioral Learning	01	01	01
	Cerebral Palsy and Neuromotor impairment	01	Nil	01
Dental Equipment's & Consumables	Equipment	40	03	Nil
	Consumables	46	05	Nil
Medical Equipment	13	10	06	
Lab Equipment	04	03	02	
Sensory Integration Equipment	20	02	03	

(Source: Information provided by DEICs).

**Appendix-7.3**  
(Reference: Paragraph-7.12.1; Page 143)

**Details of payments of compensation against Sterilisation**

<b>Compensation for female sterilization</b>						
<b>Year</b>	<b>Fund Approved (in lakh)</b>	<b>Actual Expenditure</b>	<b>Compensation per case</b>	<b>Number of cases against which compensation paid</b>	<b>Achievement against sterilization</b>	<b>Difference</b>
A	B	C	D	E	F	G=F-E
<b>2016-17</b>	385.05	3,41,44,000	2,000	17,072	17,107	(-35)
<b>2017-18</b>	400	1,64,05,000	2,000	8,203	12,529	4,327
<b>2018-19</b>	360	3,19,33,000	2,000	15,967	12,479	3,488
<b>2019-20</b>	360	3,18,47,000	2,000	15,924	10,057	5,867
<b>2020-21</b>	360	1,37,46,889	2,000	6,873	8,690	1,817
<b>2021-22</b>	320	1,62,01,414	2,000	8,101	10,739	2,638
<b>Total</b>	<b>2,185.05</b>	<b>14,42,77,303</b>	<b>-</b>	<b>72,140</b>	<b>71,601</b>	<b>539</b>
<b>Compensation for male sterilization</b>						
<b>2016-17</b>	46.36	14,55,000	2,700	539	690	151
<b>2017-18</b>	40.5	27,17,000	2,700	1,006	362	644
<b>2018-19</b>	27	20,38,000	2,700	755	338	417
<b>2019-20</b>	27	23,06,000	2,700	854	244	610
<b>2020-21</b>	27	11,00,460	2,700	408	154	254
<b>2021-22</b>	27	3,66,805	2,700	136	226	90
<b>Total</b>	<b>194.86</b>	<b>99,83,265</b>	<b>-</b>	<b>3,698</b>	<b>2,014</b>	<b>1,684</b>

Source: Data provided by SHS/NHM.

**Appendix-7.4**  
(Reference: Paragraph-7.12.2; Page 144)

**Details of sterilization failure cases settled with delay**

Case study No.	District- Dehradun				
	Date of Filing Claim Form	Claim settlement date	Date of issue of payment order	Number of days	Number of days
A	B	C	D	E=C-D	F=D-B
1	08-09-2015	07-06-2016	25-07-2019	1143	1416
2	29-09-2015	07-06-2016	25-07-2019	1143	1395
3	16-12-2015	07-06-2016	25-07-2019	1143	1317
4	16-12-2015	07-06-2016	25-07-2019	1143	1317
5	16-12-2015	07-06-2016	25-07-2019	1143	1317
6	25-01-2016	07-06-2016	25-07-2019	1143	1277
7	12-02-2016	07-06-2016	25-07-2019	1143	1259
8	23-02-2016	07-06-2016	25-07-2019	1143	1248
9	09-04-2015	07-06-2016	19-12-2018	925	1350
10	10-04-2015	07-06-2016	19-12-2018	925	1349
11	10-04-2015	07-06-2016	19-12-2018	925	1349
12	10-04-2015	07-06-2016	19-12-2018	925	1349
13	24-04-2015	07-06-2016	19-12-2018	925	1335
14	24-04-2015	07-06-2016	19-12-2018	925	1335
15	28-04-2015	07-06-2016	19-12-2018	925	1331
16	12-06-2015	07-06-2016	19-12-2018	925	1286
17	15-07-2015	07-06-2016	19-12-2018	925	1253
18	16-07-2015	07-06-2016	19-12-2018	925	1252
19	22-07-2015	07-06-2016	19-12-2018	925	1246
20	19-08-2015	07-06-2016	19-12-2018	925	1218
21	23-08-2015	07-06-2016	19-12-2018	925	1214
22	01-05-2017	03-11-2017	18-01-2021	1172	1358
23	11-05-2017	03-11-2017	18-01-2021	1172	1348
24	22-05-2017	03-11-2017	18-01-2021	1172	1337
25	01-07-2017	03-11-2017	18-01-2021	1172	1297
26	18-07-2017	29-07-2018	18-01-2021	904	1280
27	09-09-2017	29-07-2018	18-01-2021	904	1227
28	10-03-2017	29-07-2018	18-01-2021	904	1410
29	27-09-2016	09-04-2019	18-01-2021	650	1574
30	27-03-2018	09-04-2019	18-01-2021	650	1028
31	20-04-2018	09-04-2019	18-01-2021	650	1004
32	19-05-2018	09-04-2019	18-01-2021	650	975
33	31-05-2018	09-04-2019	18-01-2021	650	963
34	06-11-2018	09-04-2019	18-01-2021	650	804
35	15-06-2018	09-04-2019	18-01-2021	650	948
36	16-06-2018	09-04-2019	18-01-2021	650	947
37	16-06-2018	09-04-2019	18-01-2021	650	947
38	07-06-2018	09-04-2019	18-01-2021	650	956
39	13-08-2018	09-04-2019	18-01-2021	650	889
40	29-06-2016	01-07-2017	18-01-2021	1297	1664
41	13-09-2016	01-07-2017	18-01-2021	1297	1588
42	24-10-2016	01-07-2017	18-01-2021	1297	1547
43	15-11-2016	01-07-2017	18-01-2021	1297	1525

Case study No.	District- Dehradun				
	Date of Filing Claim Form	Claim settlement date	Date of issue of payment order	Number of days	Number of days
A	B	C	D	E=C-D	F=D-B
44	18-11-2016	01-07-2017	18-01-2021	1297	1522
45	29-11-2016	01-07-2017	18-01-2021	1297	1511
46	23-12-2016	01-07-2017	18-01-2021	1297	1487
47	01-11-2017	01-07-2017	18-01-2021	1297	1174
48	30-01-2016	NA	18-01-2021		1815
49	29-03-2016	NA	18-01-2021		1756
50	16-05-2016	NA	18-01-2021		1708
51	26-05-2016	NA	18-01-2021		1698
52	31-05-2016	NA	18-01-2021		1693
53	13-06-2016	NA	18-01-2021		1680
54	22-06-2016	NA	18-01-2021		1671
55	26-06-2016	NA	18-01-2021		1667

*Information fetched by CMO Office, Dehradun (NA=Not Available).*

**Appendix-7.5**

*(Reference: Paragraph-7.12.3.1; Page 144)*

**Achievements of targets Sterilisation in the State under Limiting Method**

<b>Year</b>	<b>Target</b>	<b>Achievement (per cent)</b>	<b>Shortfall (per cent)</b>
<b>2016-17</b>	28000	17,797 (64)	10,203 (36)
<b>2017-18</b>	21500	12,891 (60)	8,609 (40)
<b>2018-19</b>	19000	12,817 (67)	6,183 (33)
<b>2019-20</b>	19000	10,301 (54)	8,699 (46)
<b>2020-21</b>	19000	8,844 (47)	10,156 (53)
<b>2021-22</b>	17000	10,976 (64)	8,024 (36)
<b>Total</b>	<b>123500</b>	<b>73,626 (59)</b>	<b>51,874 (41)</b>

*Source: HMIS.*

**Appendix-7.6**  
(Reference: Paragraph-7.12.3.1(a); Page 144)

**Details of Vasectomy against total Sterilisation in the State**

<b>Particulars</b>	<b>2016-17</b>	<b>2017-18</b>	<b>2018-19</b>	<b>2019-20</b>	<b>2020-21</b>	<b>2021-22</b>	<b>Total</b>
<b>Total Sterilisation Conducted</b>	17,797	12,891	12,817	10,301	8,844	10,965	73,615
<b>Number of Tubectomies Conducted</b>	17,107	12,529	12,479	10,057	8,690	10,739	71,601
<b>Number of Vasectomies Conducted</b>	690	362	338	244	154	226	2014
<b>Percentage Female Sterilisation (Tubectomies) to Total Sterilisation</b>	96.12	97.19	97.36	97.63	98.26	97.94	97.26
<b>Percentage Male Sterilisation (Vasectomies) to Total Sterilisation</b>	3.88	2.81	2.64	2.37	1.74	2.06	2.74

Source: HMIS.

**Appendix-7.7**

*(Reference: Paragraph-7.12.3.1(b); Page 144)*

**Details of laparoscopic sterilization in the State (Tubectomy)**

<b>Particulars</b>	<b>2016-17</b>	<b>2017-18</b>	<b>2018-19</b>	<b>2019-20</b>	<b>2020-21</b>	<b>2021-22</b>
<b>Number of Tubectomies Conducted</b>	17,107	12,529	12,479	10,057	8,690	10,739
<b>Laparoscopic Sterilisations (Female Sterilisations)</b>	10,435	7,643	7,612	6,135	4,813	6,422
<b>Percentage of Laparoscopic Sterilisations to Total Female Sterilisations</b>	61.00	61.00	61.00	61.00	55.39	59.80

*Source: HMIS.*



## Appendix-7.8

(Reference: Paragraph-7.12.3.2; Page 145)

## Status of Target &amp; Achievement under PP-IUCD in the State

Year	Target	Achievement (percentage)	Shortfall (percentage)
2016-17	19,200	12,249 (64)	6,951 (36)
2017-18	19,200	11,372 (59)	7,828 (41)
2018-19	19,200	10,703 (56)	8,497 (44)
2019-20	19,200	8,372 (44)	10,828 (56)
2020-21	19,200	8,508 (44)	10,692 (56)
2021-22	19,200	9,330 (49)	9,870 (51)
<b>Total</b>	<b>1,15,200</b>	<b>60,534 (53)</b>	<b>54,666 (47)</b>

Source-HMIS

**Appendix-7.9**

*(Reference: Paragraph-7.12.3.2; Page 145)*

**Status of Target & achievement in the state (Oral Pills cycle)**

<b>Year</b>	<b>Target</b>	<b>Achievement (percentage)</b>	<b>Shortfall (percentage)</b>
<b>2016-17</b>	31,080	30,980 (100)	100 (0)
<b>2017-18</b>	31,080	29,332 (94)	1,748 (6)
<b>2018-19</b>	31,080	26,544 (85)	4,536 (15)
<b>2019-20</b>	31,080	21,933 (71)	9,147 (29)
<b>2020-21</b>	31,080	15,328 (49)	15,752 (51)
<b>2021-22</b>	31,080	24,959 (80)	6,121 (20)
<b>Total</b>	<b>186,480</b>	<b>1,49,076 (80)</b>	<b>37,404 (20)</b>

Source: HMIS.

**Appendix-8.1**  
(Reference: Paragraph-8.7.1.2; Page 164)

**Details of Retailers/Wholesalers of the State, Uttarakhand with validity of registration**

Sl. No.	License/Register	Issue Date	Renewal Date <sup>1</sup>	Inspection Date	Valid up to
<b>District-Almora</b>					
1	12/W/10117	29-08-2017	29-08-2012	28-08-2017	28-08-2017
2	13/R/12551	NA	15-09-2014	NA	14-09-2019
3	17/R/10958	NA	NA	NA	02-12-2017
4	48/R/12552	NA	12-01-2016	NA	11-01-2021
5	77/W/16884	NA	NA	NA	03-03-2020
6	108/R/15157	23-01-2016	NA	NA	22-01-2021
7	119/W/19504	02-02-2011	NA	NA	01-02-2021
8	152/R/12950	26-06-2014	NA	NA	25-06-2019
9	158/R/13726	02-02-2011	NA	NA	01-02-2021
10	168/R/15788	23-01-2016	23-01-2016	NA	22-01-2021
11	171/R/13811	16-09-2014	NA	NA	15-09-2019
<b>District-Pithoragarh</b>					
12	30/R/18193	NA	NA	NA	27-05-2020
13	50/R/13019	NA	NA	NA	01-01-2021
14	55/R/12399	NA	10-03-2013	NA	09-03-2018
15	62/R/17084	NA	05-05-2015	NA	04-05-2020
16	85/R/17226	30-03-2015	NA	NA	29-03-2020
17	120/W/19786	NA	NA	NA	03-09-2020
18	154/R/13236	31-05-2013	NA	NA	14-12-2019
19	157/RX/18238	20-05-2005	NA	NA	19-05-2020
<b>District- Chamoli</b>					
20	20/R/19606	NA	NA	NA	28-07-2020
21	35/R/10203	NA	09-10-2012	NA	08-10-2017
22	112/R/16363	27-10-2014	NA	NA	16-10-2019
23	119/R/20127	NA	NA	NA	15-11-2020
24	143/R/12349	NA	07-08-2010	NA	06-08-2015
<b>District-Bageshwar</b>					
25	4/S/15064	05-02-2009	05-02-2014	NA	04-02-2019
26	26/R/11754	28-03-2013	28-03-2013	NA	27-03-2018
27	30/R/16145	03-07-2014	03-07-2014	NA	02-07-2019
<b>District-Rudraprayag</b>					
28	31/S/15160	NA	NA	NA	30-06-2019
<b>District-Champawat</b>					
29	13/R/19857	25-02-2016	NA	NA	24-02-2021
30	33/R/16808	NA	NA	NA	17-04-2020
31	48/R/13565	NA	22-08-2013	NA	21-08-2018
<b>District-Nainital</b>					
32	15/W/15078	NA	NA	NA	30-07-2019
33	71/W/18470	NA	NA	NA	27-09-2020
34	111/R/16430	14-08-2014	NA	NA	13-08-2019
35	124/R/19856	01-02-2011	NA	NA	31-01-2021
36	139/W/10786	NA	13-03-2015	NA	12-03-2020
37	155/W/15266	NA	NA	NA	05-05-2019
38	212/W/16053	NA	NA	NA	01-12-2019
39	249/R/13227	NA	NA	NA	23-09-2018
40	300/W/10778	NA	31-12-2013	NA	30-12-2017
41	325/R/17685	19-12-2014	NA	NA	27-11-2020
42	384/W/19925	NA	NA	NA	16-10-2020
43	476/R/17901	NA	NA	NA	29-07-2020
44	520/R/18854	24-06-2015	NA	NA	23-06-2020
45	536/R/12255	NA	30-09-2014	05-01-2019	29-09-2019

<sup>1</sup> NA-Renewal date not available in the documents.

Sl. No.	License/Register	Issue Date	Renewal Date <sup>1</sup>	Inspection Date	Valid up to
46	618/W/12484	NA	NA	NA	31-12-2017
47	706/R/16437	NA	NA	NA	23-07-2019
48	852/R/15507	NA	NA	NA	13-10-2020
49	853/R/13550	NA	NA	NA	11-12-2018
<b>District- Udham Singh Nagar</b>					
50	5/W/13896	NA	NA	NA	21-04-2018
51	95/R/18253	16-04-2015	16-04-2015	NA	15-04-2020
52	99/R/14859	28-01-2016	28-01-2016	NA	27-01-2021
53	216/W/20006	15-01-2016	15-01-2016	NA	14-01-2021
54	227/W/18256	20-08-2015	20-08-2015	NA	19-08-2020
55	262/W/20146	NA	NA	NA	12-01-2021
56	264/W/12955	NA	26-02-2013	NA	25-02-2018
57	279/R/11559	16-03-2001	01-01-2013	NA	31-12-2017
58	293/R/19606	NA	NA	NA	20-04-2021
59	343/R/14097	NA	18-10-2013	NA	17-10-2018
60	350/R/18003	05-01-2016	05-01-2016	NA	04-01-2021
61	366/R/10313	NA	NA	NA	16-02-2017
62	411/W/15607	17-04-2017	17-04-2017	NA	16-04-2019
63	425/R/20012	NA	NA	NA	04-08-2020
64	490/R/10515	NA	NA	NA	26-04-2017
65	524/R/15879	NA	NA	NA	11-07-2021
66	571/W/20038	NA	NA	NA	30-07-2020
67	636/W/19655	NA	10-02-2016	NA	09-02-2021
68	639/W/20132	NA	NA	NA	25-12-2020
69	712/R/18625	03-07-2010	03-07-2015	NA	07-07-2020
70	828/R/14029	09-02-2009	09-02-2014	18-07-2020	08-02-2019
71	834/R/14437	NA	17-04-2014	NA	16-04-2019
72	842/R/19604	NA	NA	NA	06-01-2021
73	888/R/19487	13-10-2005	13-10-2005	NA	12-10-2020
74	891/W/19967	NA	NA	NA	27-01-2021
75	913/R/18261	20-08-2015	20-08-2015	09-02-2021	19-08-2020
76	917/R/16307	NA	NA	NA	17-12-2019
77	931/R/18001	16-06-2015	16-06-2015	NA	15-06-2020
78	936/W/15597	17-04-2014	17-04-2014	NA	16-04-2019
79	969/W/15184	NA	18-08-2004	NA	17-08-2009
80	1009/W/13648	NA	16-12-2013	NA	15-12-2018
81	1054/R/17999	NA	02-02-2016	NA	01-02-2021
82	1064/R/19611	NA	NA	NA	09-02-2021
83	1114/RW/19481	04-11-2015	NA	NA	03-11-2020
84	1120/W//19962	NA	27-11-2015	09-02-2021	26-01-2020
85	1138/R/13171	20-08-2013	20-08-2013	NA	19-08-2018
86	1154/R/14438	NA	19-11-2013	NA	18-11-2018
87	1167/R/10361	29-10-2010	NA	NA	28-10-2020
88	1174/W/18645	13-10-2015	13-10-2015	NA	12-10-2020
89	1189/W/17106	NA	05-11-2014	NA	04-11-2019
90	1208/R/20144	NA	NA	NA	12-10-2020
91	1265/R/13902	NA	05-01-2016	NA	04-01-2021
92	1281/R/12227	NA	14-12-2012	NA	13-12-2017
93	1289/R/18015	07-05-2015	NA	NA	06-05-2020
94	1311/R/14732	18-11-2008	18-11-2013	NA	
95	1323/R/13932	17-04-2014	17-04-2019	07-11-2019	16-04-2019
96	1348/R/11746	05-11-2014	05-11-2014	NA	04-11-2019
97	1377/W/12326	22-04-2013	22-04-2013	NA	21-04-2018
98	1394/R/20036	NA	NA	NA	27-01-2021
99	1445/R/15905	NA	NA	NA	27-01-2021
100	1466/R/19971	NA	NA	NA	27-01-2021
101	1481/W/20032	NA	NA	NA	15-02-2021
102	1485/W/19552	13-10-2015	13-10-2015	09-02-2021	12-10-2020

Sl. No.	License/Register	Issue Date	Renewal Date <sup>1</sup>	Inspection Date	Valid up to
<b>District- Dehradun</b>					
103	56 / R/13127	13-07-2015	NA	NA	12-07-2020
104	237 / R/14972	27-01-2016	27-01-2016	NA	26-01-2021
105	284/R/10990	NA	NA	NA	26-11-2017
106	289 / R/13413	30-07-2009	NA	14-01-2019	15-01-2019
107	298 / R/19580	NA	NA	NA	11-12-2020
108	323 / W/13706	04-01-2014	NA	NA	03-01-2019
109	344 / R/14337	NA	19-01-2016	11-02-2021	28-01-2021
110	357 / R/10986	NA	NA	NA	18-12-2017
111	368 / W/12274	NA	NA	NA	25-07-2018
112	497 / W/12092	25-06-2008	NA	NA	24-06-2018
113	541 / R/10547	14-09-2012	NA	05-02-2018	13-09-2017
114	1010 / W/13665	NA	NA	NA	29-12-2018
115	1622 / R/10983	NA	NA	NA	31-12-2017
116	1629 / R/13128	16-06-2015	NA	NA	15-06-2020
117	1666 / W/11059	23-11-2007	NA	NA	22-11-2017
118	1676 / R/10180	NA	NA	NA	13-08-2017
119	1686 / RW/10591	28-02-2004	NA	NA	31-12-2017
120	2098 / R/17874	05-08-2015	NA	NA	04-08-2020
121	2101 / R/11357	NA	NA	NA	08-02-2021
122	2107 / W/10985	NA	01-01-2013	-	31-12-2017
123	2912 / R/10968	30-08-2012	NA	NA	29-08-2017
<b>District- Uttarkashi</b>					
124	8 / R/11469	27-04-2001	18-06-2013	NA	17-06-2017
125	72 / R/11470	27-04-2001	06-09-2012	NA	05-09-2017
126	75 / R/17099	NA	24-05-2015	NA	23-05-2020
127	91 / R/17098	NA	24-05-2015	NA	23-05-2020
128	113 / R/12628	06-09-2003	06-09-2003	NA	05-09-2018
129	125 / R/11990	NA	NA	NA	31-12-2017
<b>District- Tehri</b>					
130	12 / R/18172	NA	NA	NA	25-08-2020
131	37 / R/16582	NA	NA	NA	08-02-2016
132	47 / R/13588	30-12-2009	NA	NA	29-12-2019
133	60 / R/11084	02-08-2004	NA	NA	10-05-2017
134	66 / R/13222	11-11-2009	NA	NA	10-11-2019
135	67 / R/13224	NA	NA	NA	10-11-2019
136	74 / R/16848	NA	NA	NA	19-02-2021
137	101 / S/10436	NA	30-05-2014	NA	01-06-2016
138	206 / R/19620	NA	NA	NA	10-01-2021
<b>District- Haridwar</b>					
139	75 / R/12578	26-10-2015	26-10-2015	NA	25-10-2020
140	97 / W/16230	NA	06-05-2015	NA	05-05-2020
141	289 / W/10539	NA	NA	NA	21-11-2017
142	305 / W/19347	15-10-2015	NA	NA	14-10-2020
143	722 / R/10501	09-07-2002	NA	NA	08-07-2017
144	30/RW/15105	NA	01-01-2013	NA	31-12-2017
<b>Name of the District- Pauri</b>					
145	30/RW/15105	NA	01-01-2013	NA	31-12-2017
146	50/R/19914	NA	NA	NA	05-01-2021
147	99/W/15928	NA	02-07-2014	NA	01-07-2019
148	108/R/17331	NA	NA	04-06-2020	-
149	113/R/16571	NA	25-02-2015	NA	24-02-2020
150	154/R/17655	07-10-2005	07-10-2015	NA	06-10-2020
151	165/R/13974	29-11-2008	29-11-2013	NA	28-11-2018
152	171/R/19817	15-10-2015	NA	NA	14-10-2020
153	189/R/11343	NA	01-01-2013	NA	31-12-2017
154	216/W/10793	25-10-2012	25-10-2012	NA	24-10-2017
155	221/R/19912	NA	NA	NA	18-01-2021

**Appendix-9.1**  
(Reference: Paragraph-9.2; Page 171)

**Formulation of State Indicator Framework (SIF) & District Indicator Framework (DIF)**

Global Target No.	Targets of SDG-3	Indicators	NI/SI
3.1	By 2030, reduce the global maternal mortality ratio to less than 70 per 1,00,000 live births	3.1.1 Maternal mortality ratio (per 1,00,000 live births)	NI
		3.1.2 Percentage of births attended by skilled health personnel. (Period five years)	NI
		3.1.3 Percentage of births attended by skilled health personnel. (Period one year)	NI
		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. (Period five years/one year)	NI
		3.1.5 Percentage of women receiving post Natal care from skilled health professional within two days of birth.	SI
		3.1.6 Percentage of pregnant women received complete vaccination	SI
3.2	By 2030, end preventable deaths of newborns and children under five years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-five mortality to at least as low as 25 per 1,000 live births	3.2.1 Under-five mortality rate (per 1,000 live births)	NI
		3.2.2 Neonatal mortality rate (per 1,000 live births)	NI
		3.2.3 Percentage of children aged 12-23 months fully immunized (BCG, Measles and three doses of Pentavalent vaccine)	SI
		3.2.4 Infant mortality rate per 1,000 live births	SI
		3.2.5 Percentage of Low Birth Weight (LBW in institutions)	SI
		3.2.6 Percentage of children aged 0-5 year received full immunization.	SI
		3.2.7 Percentage of children 0-5 year screened for 4D's under Rastriya Bal Suraksha Karykram.	SI
3.3	By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases	3.3.1 Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations	NI
		3.3.2 Tuberculosis incidence per 1,00,000 population	NI
		3.3.3 Malaria incidence per 1,000 population	NI
		3.3.4 Prevalence of viral Hepatitis “B” per 1,00,000 population	NI
		3.3.5 Dengue: Case Fatality Ratio (CFR)	NI
		3.3.6 Number of Chikunguniya cases	NI
		3.3.7 Percentage of grade-2 cases amongst new cases of Leprosy (per million people)	NI
		3.3.8 Notification of T.B as per govt of India	SI
		3.3.9 Success rate of T.B. care cases	SI
		3.3.10 No. of non-communicable disease cases per one lakh population	SI
		3.3.11 No. of communicable disease cases per one lakh population	SI
		3.3.12 No. of outbreaks/Epidemic replated/Typhoid	SI
3.4	By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being	3.4.1 Number of deaths due to cancer	NI
		3.4.2 Suicide mortality rate per 1,00,000 population	NI
3.5	Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol	3.5.1 Number of persons treated in de-addiction centre.	NI

Global Target No.	Targets of SDG-3	Indicators	NI/SI
3.6	By 2020, halve the number of global deaths and injuries from road traffic accidents	3.6.1 People killed/injured in road accidents (per 1,00,000 population)	NI
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 national strategies and programmes	3.7.1 Percentage of currently married women who use any modern family planning methods	NI
		3.7.2 Adolescent birth rate (15–19 years) per 1,000 women in that age group	NI
		3.7.3 Percentage of Institutional Births	NI
		3.7.4 Percentage of currently married women (15-49 years) who use any modern method of family planning (Similar to indicator 5.6.1)	NI
3.8	Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all	3.8.1 Monthly per capita out-of-pocket expenditure on health as a share of Monthly Per capita Consumption Expenditure (MPCE)	SDG INDEX 2020-21 NITI Aayog
		3.8.2 Percentage of people living with HIV currently receiving ART among the detected number of adults and children living with HIV	NI
		3.8.3 Percentage of TB cases successfully treated (cured plus treatment completed) among TB cases notified.	NI
		3.8.4 Prevalence of hypertension among men and women aged 15-49 years (in percentage).	NI
		3.8.5 Percentage of population in age group 15-49 who reported sought treatment out of total population in that age group having diabetes.	NI
		3.8.6 Percentage of women aged 15-49 who have ever undergone Cervix examination.	NI
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 Proportion of men and women reported Asthma in the age group of 15-49 years	NI
3.a	Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate	3.a.1 Percentage of men and women aged 15 years and above with use of any kind of tobacco	NI
3.b	Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, 23 in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use the full 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 covered by all vaccines included in their national programme	NI
		3.b.2 Budgetary allocation for department of Health Research	NI
3.c	Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries,	3.c.1 Total physicians, nurses and midwives per 10,000 population	NI
		3.c.2 Percentage of government spending (including current and Capital expenditure) in health sector to GDP.	NI

Global Target No.	Targets of SDG-3	Indicators	NI/SI
	especially in least developed countries and small island developing States		
3.d	Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks	National indicators are under development.	
<b>Total</b>	<b>13</b>	<b>Total=45 (NI=33, SI=12)</b>	

Sl. No.	Indicators adopted by Uttarakhand
1.	Mothers who received postnatal care from a doctor/nurse/LHV/ANM/midwife/other health personnel within two days of delivery (unit: <i>Per cent</i> )
2.	Percentage of currently married women (15-49) who use any method of family planning (unit : <i>Per cent</i> )
3.	Annual notification of Tuberculosis incidence per one lakh population (unit: Number per 1,00,000 population)
4.	Percentage of children aged 0-5 year received full immunization.
5.	Percentage of children 0-5 year screened for 4D's under Rastriya Bal Suraksha Karykram (unit : <i>Per cent</i> )
6.	Percentage of children aged 12-23 months fully immunized (BCG, Measles and three doses of Pentavalent vaccine) (unit : <i>Per cent</i> )
7.	Percentage of Institutional Deliveries (unit: <i>Per cent</i> )
8.	Percentage of pregnant women who had completed four and more Antenatal care services (ANCs) (unit: <i>Per cent</i> )
9.	Percentage of pregnant women received complete vaccination (unit: <i>Per cent</i> )



**Appendix-9.2**  
(Reference: Paragraph-9.5, Page 172)

**Steps taken by CPPGG and awareness among various stake holders through meetings and workshops**

Sl. No.	Subject	Date	Objective
1	Workshop: Strengthening outcome budgeting	16 November 2019	Shri Amit Singh Negi, CEO – CPPGG and Principal Secretary Dept. of Planning, Govt. of Uttarakhand laid down the importance of outcome budgeting and encouraged all participants to further strengthen the outcome-output framework of their respective departments. Dr. Manoj Pant, ACEO, CPPGG spoke about the importance of extending the budget allocation to the outcome level and discussed the SDG framework in detail. He also stressed on the need to develop a robust data ecosystem for effective planning and monitoring of the various development activities in the state.
2	Workshop: SDG Orientation workshop	16 December 2019	An SDG orientation workshop was conducted for the Finance Controllers of the various departments, agencies and corporations on 16 December 2019. Keynote address was delivered by Sh. Amit Singh Negi, Secretary, Finance and Planning, Govt. of Uttarakhand. Dr. Manoj Pant, ACEO-CPPGG, led a session on SDGs where he spoke about the inception of SDGs. <b><i>The program included a detailed presentation on SDGs and its alignment with Outcome budget</i></b>
3	Visit by Delegation from Bangladesh	19 December 2019	A delegation of senior members from PMO Bangladesh, Bangladesh Planning Commission and UNDP Bangladesh arrived in Dehradun on 19 December <b><i>for one day exposure visit to study localization and integration of the Sustainable Development Goals (SDGs) into the state planning and functioning process.</i></b> Delegates highlighted the identical nature of problems faced by Bangladesh and Uttarakhand, particularly due to Climate Change & also enthusiastic for further collaboration with Uttarakhand on knowledge sharing, identical problems and relevant solutions and practices.
4	Workshop: District Level SDG Stakeholder Consultation – Haridwar	24 December 2019	The workshop aimed to foster discussion and <b><i>strengthen connection between experts and district level SDG stakeholders.</i></b> Identifying the key issues faced on ground level and their probable solutions. Develop district level macro road map for achieving State Vision 2030 and discussing the constraints and availability of required resources for solutions
5	Workshop: Aligning SDGs with GPDP	09 January 2020	State level <b><i>workshop on aligning the SDGs with GPDP was conducted on 09 January 2020. Officials of Panchayati Raj, Rural Development, Planning, and elected representatives of 13 Zila Panchayats and 95 Block Panchayats were oriented on the importance of SDGs framework and on integrating SDGs with GPDP.</i></b>
6	Workshop: District Level SDG Sensitization Workshop	January 28, 2020	District Level SDGs sensitization workshops were organized in Champawat, Pithoragarh, Almora and Bhimtal districts during the month of January & shared information on all government schemes mapped as per their relevant SDGs.
7	Training of Trainers: Integrating SDGs with Gram Panchayat Development Plans	January 30, 2020	It focused on <b><i>integrating SDGs in the planning of District plan (DP) and Gram Panchayat Development Plans (GPDP).</i></b>
8	Webinar: Role of Statistics in Achieving Good Health and Gender Equality	June 29, 2020	CPPGG hosted a webinar on the occasion of ‘National Statistics Day’, 29 June 2020 on ‘Role of Statistics in achieving Good Health and Gender Equality’
9	ToT on Institutionalisation of SDGs through Panchayats	September 4, 2020	A virtual ToT (Training of Trainers) was organised on Institutionalisation of Sustainable Development Goals (SDGs) by National Institute of Rural Development Panchayati Raj (NIRDPR) Hyderabad. The

Sl. No.	Subject	Date	Objective
			ToT comprised of presentations, case studies, short videos to train participants in integrating SDGs with Gram Panchayat Development Plan (GPDP).
10	Meeting on Finalizing SDG State level Indicator Framework	September 18, 2020	CPPGG commenced a series of meetings from 10th -18th September 2020 with various State Departments to finalize SDG State level Indicator Framework (SIF). The meetings chaired by Ms. Manisha Panwar, ACS Planning/CEO CPPGG was attended by 46 officials of state departments. Following this departments are supposed to collect data based on the final SDG state level indicators. This data will be used by CPPGG to prepare an analytical report on State's performance on different goals and targets.
11	Webinar on Outcome Budgeting	September 30, 2020	Webinar was oriented about the <b>concepts of outcomes, outputs, inputs, indicators, targets and activities in relation to public budgeting.</b>
12	SDG Localisation at District level	October 7, 2020	Localization of SDGs is of key importance for the achievement of Sustainable Development Goals by the State. To ensure SDG localization and integration State considers that it is pertinent to develop district level vision and action plan in line with State vision plan. the aim of the exercise is to contextualize the global agenda and make it locally relevant.
13	Uttarakhand District SDG Index report	October 8, 2020	The Institute of Applied Statistics and Development Studies (IASDS), Lucknow has prepared a District wise SDG index for the state based on the targets and data collected from various state departments.
14	Ensuring Policy in Practice	January 29, 2021	develop 'Adarsh Gram Panchayat Development Plans (GPDP)'. CPPGG provided its technical expertise
15	Launch of SDG Dashboard tool	December 1, 2020	Hon. CM requested district level officials to update district level data and information on the dashboard from time to time. He also requested them to identify low performing areas in the district as per the SDG indicators and prioritize and channelize efforts in order to help the state achieve its SDG Vision by 2030.
16	District level stakeholder consultation workshops	December 15, 2020	The events were organized <b>to support the districts in developing District vision and action plan in line with the State vision plan 2030 for the achievement of Sustainable Development Goals.</b> The workshops included a SWOT analysis of the district with reference to SDGs divided under four thematic areas of Sustainable livelihood, Human Development, Social Development and Environmental Sustainability.
17	MOU with Panchayati Raj Department	January 4, 2021	CPPGG signed an MOU with Panchayati Raj Department (PR), Government of Uttarakhand to support the department in SDG Integration and Localization. The MoU entails providing technical support for Gram Panchayat Development Plan, Capacity Building of government officials and elected representatives, Integration of appropriate technologies and best practice research and evaluation of new developments.
18	Ensuring Policy in Practice	January 29, 2021	The objective of the meeting was to support the stakeholders develop a GPDP covering all the 29 subjects under the 11th Schedule of the Constitution related to Panchayati Raj.
19	Webinar on Restoring our Ecosystem for Sustainable living	June 5, 2021	CPPGG in collaboration with ENVIS Resource centre Wildlife Institute of India (WII) organized a webinar on 5th June to commemorate the World Environment Day 2021. The theme for this year was Ecosystem Restoration.
20	Facilitating Model Panchayat Development Plans	July 23, 2021	The events jointly organized by the Department of Panchayati Raj and CPPGG aim to develop model panchayat development plans for the district, block and village level covering the 29 subjects and Sustainable Development Goals.
21	International Youth Day	August 12, 2021	The event aimed to sensitize the <b>youth about the 17 global goals and aware them of their role as equal stakeholders in the path towards sustainable development.</b>
22	Uttarakhand SDGs State & District Indicator Framework & SDG	October 10, 2021	NITI Aayog's Vice Chairperson Dr. Rajiv Kumar today <b>launched Uttarakhand SDGs State &amp; District Indicator Framework &amp; SDG monthly monitoring dashboard. A 3-Tier Panchayat model plan developed for holistic gram, block and district panchayat planning was also released.</b>

Sl. No.	Subject	Date	Objective
	monthly monitoring dashboard		
23	District SDG Action plan, data ecosystem, and monitoring workshop	October 25, 2021	The goal of the workshop is to localize and integrate SDGs in district level planning, implementation, and monitoring. SDG Action plan at local level has significant implications in achieving the global goals at State and country level, it will act as a guideline for district level officials responsible for implementation of the global goals in the state, to devise or align programs/activities need to be undertaken to attain Uttarakhand Vision 2030.
24	SDG awareness event in schools and inter colleges at Block level	October 26, 2021	The event aims to create <i>awareness about the 17 Sustainable Development Goals among the future torch bearers of the Global goals.</i>
25	Uttarakhand @25 Bodhisattva	November 22, 2021	CPPGG & UNDP has organized Uttarakhand @ 25 Bodhisattva on 22 November 2021.
26	Uttarakhand @25 Bodhisattva	November 27, 2021	Special attention is being paid to the good use of this natural property. Everyone has to come forward to save Himalayas and balance with nature
27	Celebrating 7th Anniversary of SDGs	September 23, 2022	Signature campaign urging people to pledge to work towards a sustainable Uttarakhand. He said that departments follow their roadmap to achieve 17 SDGs by 2030.
28	Sashakt Uttarakhand @ 25 Chintin Shivar	November 25, 2022	The objective of the Chintan Shivar was to build a roadmap for the development of Uttarakhand.

Source: CPPGG website

**Appendix-9.3**  
*(Reference: Paragraph-9.5; Page 173)*

**Details of collaboration with multiple organisations**

Indian Institute of Technology – Roorkee	For consultation of infrastructure and technical works
Indian Institute of Management – Kashipur	For consultation of Business / Marketing / Enterprise development / Skill Development / Private-Public Participation and Policy Planning
G.B. Pant University of Agriculture & Technology – Pantnagar	For consultation of Agriculture / Horticulture / Livestock / Fisheries and Farm sector
G.B. Pant National Institute of Himalayan Environment – Kosi-Katarmal, Almora	For GIS based planning and resource mapping
Swami Rama Himalayan University – Jolly Grant	For consultation of public medical services
University of Petroleum and Energy Studies (UPES), Dehradun	For consultation of Conventional and non-conventional topics
Centre for Public Policy – Doon University	For consultation of Education sector
Uttarakhand Academy of Administration – Nainital	For consultation of Capacity development of the employees and policy planning
United Nations Development Programme (UNDP)	Technical partners

*Source-CPPGG website.*



