



**ASSESSMENT OF PUBLIC
PRIVATE PARTNERSHIP RUN
CHARITABLE HOSPITALS
UNDER NHM ASSAM**

**Regional Resource Centre for
North-Eastern States**

(Branch of NHSRC, New Delhi,
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Executive Summary

Involvement of Charitable, Trust or Private Sector based Healthcare Facilities through Public Private Partnership (PPP) in promoting the health care services and activities of the National Health Mission towards achieving the National Health Goals while ensuring Universal Health Coverage is a novel approach undertaken by the State Health Societies across the country. Keeping in line with this objective the National Health Mission (NHM) of Assam has also undertaken the endeavour of involving Charitable / Trust Hospitals across the State through PPP to ensure healthcare delivery especially regarding Reproductive, Maternal, New-born and Child Health (RMNCH) services to the poor and underserved beneficiaries in urban / rural areas. These PPP initiatives with Charitable / Trust Hospitals is a positive approach towards achieving better outcomes in mother and child health which has helped in supporting the State of Assam towards ensuring the overall improvement in the maternal and child health outcomes which in turn has aided in lowering the morbidity & mortality associated with mother and children.

The Charitable / Trust Hospitals under PPP with NHM, Assam have done commendable work in providing RMNCH services to poor and underserved beneficiaries in their catchment areas. However, to further improve the quality and the outreach of RMNCH services the Memorandum of Understanding (MoU) requires to be facility specific so that definite Key Performance Indicators can be devised to assess the performance of the facility in consideration. Also, the Charitable / Trust Hospitals in collaboration with the concerned District Health Authority are required to conduct regular surveys of their catchment areas to identify the beneficiaries for the various components of RMNCH services. Moreover, due to the absence of regular monitoring and support from the respective District Health Societies, the Charitable / Trust Hospitals are somewhat unaware of the components as per the MoU under which the funding provided is to be utilized. This has resulted in the Charitable / Trust Hospitals either spending the funds provided in activities which were negated as per the MoU operational guidelines or in the gross underutilization of the funds. In conclusion, the Department of Health & Family Welfare/NHM, Assam may ensure regular review of Charitable / Trust Hospitals at the level of Secretary I/c of H&FW, Government of Assam to ensure availability of adequately trained manpower and the requisite infrastructure to guarantee quality delivery of RMNCH services prior to the signing / renewal of an MoU under PPP for optimal utilization of governmental exchequers.

Background:

Improving the health status of mothers and children and ensuring their survival is a primary concern towards achieving the National Health Goals of the National Health Mission (NHM) of India. Working towards this endeavour of enhancing mother and child health throughout the State of Assam, particularly in municipal wards and its outreach areas concentrating on BPL families, the National Health Mission of Assam has signed Memorandum of Understanding (MoU) with few Private Charitable Hospitals under Public Private Partnership (PPP) across the State. These charitable hospitals play a crucial role in providing health care especially regarding Reproductive, Maternal, New-born and Child Health (RMNCH) to a sizable portion of the urban poor population.

The duration of the Memorandum of Understanding (MoU) is fixed for 1 year only and is further renewable on mutual consent. The First Party (State NHM) provides a fund of Rs. 15 Lakhs per annum to the Second Party (Charitable Hospitals) for rendering specific services agreed upon as per the MoU.

Current list of Charitable hospitals under PPP: FY 2022-23 & FY 2023-24

SL	Name of the Charitable hospital	District	Amount approved/year
1	Red Cross Hospital	Kamrup (Metropolitan)	Rs 15 Lakhs
2	Catholic Hospital, Borgang	Biswanath	Rs 15 Lakhs
3	Burrows Memorial Christian Hospital	Cachar	Rs 15 Lakhs
4	Siva Sundari Nari Sikshasram Hospital	Cachar	Rs 15 Lakhs
5	Makunda Christian Leprosy and General Hospital	Karimganj	Rs 15 Lakhs
6	Saint Lukes Hospital	Tinsukia	MoU not signed / renewed

The Regional Resource Centre for Northeast States (RRC-NE) has been instructed by Joint Secretary (Policy), Ministry of Health and Family Welfare, Government of India, during the Mid-term State Programme Implementation Plan (SPIP) review meeting for the state of Assam to carry out an assessment of the Charitable Hospitals currently under PPP in the State. And subsequently an assessment visit was carried out by a team from RRC-NE of four such charitable hospitals under PPP in the state of Assam during 9th – 12th of May 2023.

The Memorandum of Understanding with Charitable Hospitals of Assam:

The Memorandum of Understanding was agreed on following terms and responsibilities by both the parties:

By the Charitable Hospital (The Second Party):

1. The maternal and child health services shall be provided in the selected wards and outreach areas of the district.
2. The survey of the selected areas for identifying the beneficiaries for various components of RMNCH services shall be done quarterly.
3. The user fee to be charged to the BPL families will be equivalent to the Charges of District Hospitals. A BPL family will be defined as a family with BPL card or receiving treatment in a general ward of the hospital if BPL card is not available with them.
4. The following services will be provided by the hospital. It will consist of both Outpatient Department and Inpatient Department services:

Outpatient Department Services:

- i. Mother & Child Care.
- ii. Immunization of the Children.
- iii. Routine Ante Natal & Post Natal Care.
- iv. Diagnosis and management of Anaemia among pregnant women.
- v. Management of Vitamin A deficiency in the children.
- vi. Nutrition and Health Counselling Services.
- vii. Counselling and appropriate referral for safe abortion services (MTP) for those in need using Manual Vacuum Aspiration (MVA) technique.
- viii. Conducting monthly urban health camps / medical camps in the wards / villages to provide Mother and Child Health Care Services and action plan of the same needs to be submitted to the Joint Director Health Services of the District.
- ix. Family Planning Services e.g., OC Pills, Condoms, Intrauterine Contraceptive Device (IUCD) insertion and permanent contraceptive methods like Vasectomy / Non-Scalpel Vasectomy / organizing Laparoscopic Sterilization camps and dispensation of Emergency Contraceptive Pills.

In-Patient Department Services:

- i. Provision of Normal / Caesarean Delivery. In hospitals where caesarean services are available there should be provisions of a blood bank / blood storage unit.
- ii. Provision of facility of Janani Suraksha Yojna (JSY).
- iii. The Charitable Hospital will facilitate Janani Shishu Suraksha Karyakaram (JSSK) benefits for free Diagnostics, Drugs, Blood Transfusion and Transportation as per the operational Guidelines of JSSK.

- iv. Facility for new-born Care such as neonatal resuscitation and management of neo-natal hyperthermia / jaundice etc.
- v. Availability of 24 hours emergency services with appropriate management of injuries and accident. First Aid, stabilization, and management of other emergency conditions of the patients before referral.
- vi. Referral Services.

Investigative Facilities:

- i. Minimum laboratory investigations like haemoglobin, glucose, urine albumin, stool microscopy, RPR test for syphilis etc. for pregnant women.
- ii. Prevention and Control of diseases like Malaria, Tuberculosis, Japanese Encephalitis etc.
- iii. The aforesaid services will be provided in the ward areas as Camps / Clinics every fortnight and regularly in the Hospital premises.
- iv. The cases needing Hospital care related to the RMNCH shall be treated in the Charitable Hospital of the area concerned.
- v. The hospital authority shall keep separate information for each service for these wards and keep records of hospital care from these areas for RMNCH services.
- vi. Monthly reporting of both physical and financial performance for RMNCH services of the selected areas to the District Health Authority. Report collection and submission should be as per government prescribed format.
- vii. Submission of expenditure statement with utilization certificate on month – to – month basis utilizing the advance and the yearly audited accounts for financial year ending in March with utilization certificate to be submitted by 30th of June of each year.
- viii. The first party can utilize the hospital premises of second party as a training centre for doctors, nurses, and other health staff.
- ix. To follow all Government norm / rules as applicable in each Health Programme of NHM.
- x. Production of records of services and statement of expenditure for verification by officials of the Health Department, Government of Assam / Government of India from time to time or as necessary.
- xi. Any other duties as may be mutually agreed upon.

By the District Health Society (The First Party):

1. The Account for this purpose shall be maintained separately and funds to be released to the Second Party with the following conditions:
2. The first party will give a fund of Rs. 15.00 (Fifteen) Lakhs per annum to the second party for rendering the services mentioned.

3. The expenditure for the activities performed for rendering services as mentioned shall be borne as per Action Plan submitted by the hospital and approved by the District Health Society.
4. First advance shall be released against specific activities as mentioned in the Action Plan approved by the District Health Society.
5. The second and subsequent advances shall be released on submission of utilization of 75% of the outstanding advance and after verification report of achievement of activities by the First Party.
6. Release of advance shall be made within two weeks after submission of report of achievement and fund requirement request.
7. Fund for JSY scheme will be released based on the institutional deliveries of the patients which are BPL. And JSSK benefits provided by the PPP hospital will be reimbursed by the District Health Society.
8. Vaccines, contraceptives, and other RMNCH drugs shall be supplied as per requirement of the hospital.
9. A coordination committee will be formed under the Chairmanship of Deputy Commissioner of the District. The committee shall meet quarterly and whose recommendation for further collaboration with the charitable hospital shall be mandatory. The coordination committee will consist of the following:
 - i. Deputy Commissioner of the District – Chairman
 - ii. Additional Deputy Commissioner (Health) of the district – Vice Chairman
 - iii. Joint Director of Health Services of the District – Member Secretary
 - iv. District Programme Manager of NHM – Member
 - v. Four nominees from the Charitable Hospital

Roles and Responsibilities of the Partners:

Activities	Provision of Services		Remarks
	NHM	Charitable Hospital	
Infrastructure Facilities	x	P	
Hospital Building	x	P	
Ambulance	x	P	
Medicine	P	P	Only JSSK drugs & delivery kit provided by DHS
Equipment/Instruments	x	P	
Water/Electricity Charges	x	P	Will be borne by Charitable Hospital
Manpower	x	P	

Activities not to be done from the fund of PPP provided to the charitable hospitals: (As per the Operational Guidelines* for Charitable Hospitals under PPP)

1. Construction of quarters, kitchen, roads, extension of existing hospital building, office set-up, and household toilets etc. The fund should not be used for any kind of new construction except for Labour Room, New-born Care Corner, Ante Natal Care & Post Natal Care ward (if not done in the initial years).
2. Procurement of any vehicles, computers, office furniture, halogen light / lamp, refrigerator etc.
3. Payments towards inserting advertisements in any Newspaper / Journal / Magazine.
4. Organizing *Swasthya Mela* or giving stalls in any Mela for the purpose of awareness generation of health schemes / programmes.
5. Payments towards giving TA/DA to Medical Officers or other staff.
6. Meeting any recurring non-plan expenditure and taking up any individual based activity.

**(As per the Operational guideline for Charitable Hospitals under PPP developed by NHM Assam)*

Fund Allocation Break-up: *

The allocated fund of Rs.15.00 lakh to each Charitable Hospital from NHM, Government of Assam under PPP shall be utilized as per the following break-up:

Operational cost for service delivery	Upper limit of fund
Normal delivery	Rs 5000/- per case (maximum)
Caesarean section	Rs 7550/- per case (maximum)
Health Camps	Rs 72000/- per year for 24 camps
Medicine & Consumables	NHM supply
Procurement of equipment related to Labour Room / New-born Care Corner	Rs 1.00 Lakh as per IPHS
For minor repair & renovation of existing Labour Room / Maternity Ward / New-born Care Corner	Rs 50,000/- per annum as per IPHS
Implementation of Biomedical Waste Management	Rs 10,000/- per year

**(As per the Operational guideline for Charitable Hospitals under PPP of NHM, Assam)*

Field Observations:

RRCNE has conducted the evaluation of 4 (four) PPP hospitals out of 6 (six), viz. Burrows Memorial Christian Hospital (Cachar district), Siva Sundari Nari Sikshasram Hospital (Cachar district), Catholic Hospital Borgang (Biswanth district) and Red Cross Hospital Guwahati (Kamrup Metropolitan district).

Burrows Memorial Christian Hospital (BMCH):

The 70-bedded Burrows Memorial Christian Hospital was established in the year 1935 and is located under Harinagar BPHC catchment area in Cachar District of Assam. Originally the hospital functioned as a Tuberculosis Sanitorium which was eventually converted to a general hospital to cater to the surrounding population. However, presently the hospital caters to a large catchment area which encompassing the Harinagar and Lakhipur Health Blocks of Cachar District and also the border areas of the State of Manipur. The hospital provides services in General Medicine, Surgery, Obstetrics & Gynaecology, Dentistry, Community Based Health Services and has a General Nursing and Midwifery School. The community outreach activities of the hospital include:

- i. Home based palliative care of end stage cancer patients in collaboration with Cachar Cancer Hospital.
- ii. Training of community volunteers, through a 3-month course, in the primary management of common ailments at the peripheral level in collaboration with Christian Medical College, Vellore.
- iii. Health camps in villages where OPD services are provide along with IEC / BCC activities for awareness of common diseases & ailments along with WASH.

Infrastructure:

The hospital functioned from old single storied gable roofed structures which were well maintained and had facilities for a 70 bedded IPD, a 10 bedded HDU, an operation theatre (two operating tables), two bedded labour room, minor OT, dedicated space for registration & waiting area, OPD services, emergency services, laboratory & pharmacy services, USG room and has a functional effluent treatment plant. The hospital also has a PSA Oxygen Generation Plant (80 litres per minute) installed during FY 2021-22.

Human resource:

During the field visit it was observed that the Hospital has constraint of specialist especially Medicine Specialist, Paediatrician & Anaesthetist. The BMCH has a working collaboration with Christian Medical College (CMC), Vellore through which specialists are provided by CMC, Vellore to the hospital on a rotation basis for a fixed tenure. At the time of the assessment visit it was observed that the rotation tenure of the Medicine Specialist, Paediatrician and Anaesthetist were over and further posting of these specialists from CMC, Vellore were in process which would require another couple of months.

SL	Human Resource Category	In position
1	Consultant-Specialist	O&G - 1 Surgeon cum Radiologist - 1 Paediatrician - 0 Anaesthesiologist - 0 Medicine Specialist - 0
2	GDMO	4
3	Nurse Anaesthetist	1
4	Dentist	1
5	Staff Nurse	45, Nursing school faculty - 7
6	Laboratory Technician	4
7	Pharmacist	3
8	Radiographer	3
9	Admin Staff	8
10	Grade 4 / Support Staff	45

Service Provision:

Services	Availability
24 x 7 delivery services including normal and assisted deliveries	Available
Emergency Obstetrics care including surgical intervention like C-Sections and other medical interventions	Available
New-born Care (NBCC)	Available
Treatment of STI / RTI	Available
Management of Communicable Diseases (TB, Malaria, Dengue)	Available
Blood Storage Unit with scope of upgrading to Blood Bank	Not Available
USG / X-Ray services	Available
Essential Laboratory Services	Available
Referral Transport Services	Ambulance is Available
Community Outreach / Health Camp	Available
Palliative Care	Available

Laboratory Services:

The hospital has a fully equipped laboratory with auto blood & biochemistry analysers, PT/APTT machine and centrifuge with around 60 laboratory tests available for patients. Laboratory is manned by four full time Laboratory Technicians. The laboratory maintains liquid waste management protocols as per guidelines with availability of an in-house ETP.

Performance of BMCH:

SL	Services	FY 2020-21	FY 2021-22	FY 2022-23
1	OPD	11,511	15,921	29,826
2	IPD	5,026	5,905	9,183
3	Institutional Delivery (Normal & Assisted)	696	693	953
4	C-section	336	396	527
5	NBSU admission	62	66	169
6	Laboratory tests	53,068	52,751	72,191

**** Monthly Average (FY 2022-23):**

- i. OPD: 2,486
- ii. IPD: 765
- iii. Normal Delivery: 79
- iv. C-Section: 44
- v. Laboratory Tests: 6,016

Expenditure Breakup of NHM, Assam fund received in FY 2022-23: BMCH

SL	Particulars	Amount (In Rupees)
1	New Canteen Building	8,35,529
2	Doctors Chamber Renovation	1,30,118
3	Sanitation & water supply for new canteen	2,94,570
4	Aluminium partition between HDU & Male ward	1,20,927
5	Baby warmer for delivery room	48,000
6	6 Nos of wooden tables with granite tops	68,000
7	JSY payment	2,04,521
Total		17,01,665

Expenditure Breakup of NHM, Assam fund received in FY 2021-22: BMCH

SL	Particulars	Amount (In Rupees)
1	Extension of roof shed & rainwater disposal channel	47,585
2	Installation of floor tiles in hospital wards	4,26,498
3	Construction of concrete dustbins in hospital campus, water tank & floor tiles at OBG department	1,48,257
4	Construction of waiting shed crate, boundary wall	4,00,026
5	Aluminium door & window at OT	2,34,328
6	Aluminium door & window at X-ray department & OB ward	2,32,903
7	Replacement of electric cables in overhead line at hospital	2,38,806
8	Construction of retaining wall and fencing	1,37,501
7	JSY payment	8,400
Total		18,74,304

Expenditure Breakup of NHM, Assam fund received in FY 2020-21: BMCH

SL	Particulars	Amount (In Rupees)
1	Upgradation of HDU corridor, rooms, female ward, isolation ward, toilet etc.	8,38,054
2	Extension & renovation of O&G ward	2,94,495
Total		11,32,549

Scope of improvement:

Burrows Memorial Christian Hospital is contributing in a substantial way towards providing health care services to the community in their catchment area. However as per the MoU clauses and the operational guideline released by NHM, Assam in August of 2022, there were certain observations regarding operationalization of services and utilization of funds:

1. As per the MoU, the charitable hospitals are required to conduct surveys on a quarterly basis in their respective catchment areas for identifying the beneficiaries for various components of RMNCH services. The BMCH in collaboration with the District Health Authority has not conducted such surveys to identify beneficiaries of RMNCH services in their catchment area and rather caters to such patients who only visit their hospital. The BMCH in collaboration with the District Health Authority may initiate steps to conduct surveys on a quarterly basis to identify the beneficiaries of RMNCH services in their catchment area to improve the penetration and utilization of such services.
2. As per the MoU, the charitable hospitals are required to conduct monthly health camps /medical camps in their catchment area to provide RMNCH services and the action plan of the same needs to be submitted to the Joint Director of Health Services of the District. The BMCH conducts regular health camps (2-3 per month) in their catchment area, but they are not planned on an annual basis and are rather need based (as and when villages request for such camps). Also, the action plan of such camps is not submitted to the Joint Director of Health Services, Cachar District on a regular basis. The BMCH may initiate steps to work up an annual calendar for conducting health / medical camps in their catchment area in collaboration with District Health Authority which has well defined objectives and expected outcomes and the report of the same may be submitted to the Joint Director of Health Services, Cachar District on a quarterly basis.
3. As per the MoU, for the provision of ‘In-Patient Department Services’, it is mentioned that ***‘In hospitals where caesarean section is available in those facilities there should be a blood bank / blood storage unit’.*** However, in BMCH there is no functional Blood Bank / Blood Storage Unit, and they have to depend on Silchar Medical College & Hospital (SMCH) for their blood product requirements. The round-trip time required to procure blood products from SMCH is one and half hours. The

BMCH may explore the feasibility of operationalizing a Blood Storage Unit in its premises and technical support for the same may be taken from NHM.

4. As per the operational guidelines of the MoU: For minor repairing and renovation of existing labour room / maternity ward / new-born corner, a hospital can spend up to a maximum of Rs.50,000/- per annum as per the IPHS norms. An additional sum of Rs.1.00 Lakh can be utilized by the hospital to procure equipment related to labour room / new-born care corner (NBCC). However, in BMCH, in the last 3 financial years most of the fund was utilised for infrastructure development including renovation of HDU, renovation of isolation and male wards & toilets, renovation of doctors' chambers, construction of boundary & retaining walls, construction of canteen & waiting shed, electrical rewiring, procurement of furniture etc. The District Health Authority may initiate steps to reorient the BMCH on the terms and conditions of the MoU and its Operational Guidelines so that the fund provided is primarily utilized for the services as agreed upon.
5. As per the MoU, the charitable hospitals are required to submit expenditure statement with utilization certificate on a month – to – month basis utilizing the advance and the yearly audited accounts for financial year ending in March with utilizing certificate to be submitted by 30th of June of each year. The BMCH does not submit month – on – month expenditure statement with utilization certificate however they submit annual utilization certificate to the District Health Authority by the 30th of June of each year. The BMCH may initiate steps to submit such expenditure statement and utilization certificates on a month – on – month basis to the District Health Authority.
6. There is a need to train the staff of the hospital especially Nurses, Laboratory Technicians & GDMOs on the newer programmes under NHM so that they will be at par with the other trained health staff of the district. Consideration should be made for NSSK, SBA, FBNC & PPIUCD training along with training in the disease control programmes of NTEP, NLEP, NCD & NVBDCP of the charitable hospital staff.

Siva Sundari Nari Sikshaasram & Anti Natal Clinic (SSNS Hospital):

The hospital was established in the year 1935 as a women hospital and is in Silchar Urban Health Block of Cachar District and currently the hospital is 65 bedded facility (52 bedded female ward & 13 bedded paediatric ward, including NICU).

Infrastructure:

Hospital has dedicated space and infrastructure for registration & waiting area, OPD services, emergency services, IPD, laboratory & pharmacy services, two tabled operation theatre, minor OT, labour room, NICU & USG room. The campus is gated with proper boundary wall throughout the hospital premises. Biomedical waste management protocols are maintained as per guidelines with the services being outsourced.

Human Resources:

The SSNS Hospital do not have any regular staff beside the Nurses (Mid-Wives & ANMs), Laboratory Technicians, and other Support Staff. The Specialists and even the General Duty Medical Officers are available only on the basis of daily reimbursement and as and when such personnel are deputed by the District Health Authority. During the time of the assessment visit, only personnel (specialists) on daily reimbursement basis were available and no doctors were deputed by the District Health Authority.

Services:

Hospital provide basic OPD & IPD services for mother & child. Basic Laboratory services are available at the facility at a very nominal rate for the public. The laboratory has auto blood and biochemistry analysers, centrifuges, and microscopes and around 50 laboratory tests are available for patients. The hospital also has an Auxiliary Nurse Midwifery School.

Performance of the Facility:

SL	Services	FY 2020-21	FY 2021-22	FY 2022-23
1	OPD	7,139	11,126	14,115
2	IPD	2,035	2,340	2,686
3	Normal Delivery	127	123	138
4	C-section	1255	1864	2005
5	NICU admission	433	484	540
6	Laboratory tests	1,397	2,856	4,592

**** Monthly Average (FY 2022-23):**

- i. OPD: 1,176
- ii. IPD: 224
- iii. Normal Delivery: 12
- iv. C-Section: 167
- v. Laboratory Tests: 383

The C-section rate of the hospital is around 14 times that of normal delivery, which may ask for a regular Caesarean Section audit.

Statement of Expenditure FY 2020-23:

Financial Year	Opening Balance with Interest (Rs)	Fund Received	Utilisation	Closing Balance (Rs)
2020-21	10,20,760	NIL	NIL	10,20,760
2021-22	10,51,253	NIL	10,43,061	*10,51,253
2022-23	10,81,426	7,50,000	NIL	18,31,426

**Utilization Certificate not submitted*

Scope of improvement:

1. As per the MoU, the charitable hospitals are required to conduct surveys on a quarterly basis in their respective catchment areas for identifying the beneficiaries for various components of RMNCH services. The SSNS Hospital in collaboration with the District Health Authority has not conducted such surveys to identify beneficiaries of RMNCH services in their catchment area and rather caters to such patients who only visit their hospital. The SSNS Hospital in collaboration with the District Health Authority may initiate steps to conduct surveys on a quarterly basis to identify the beneficiaries of RMNCH services in their catchment area to improve the penetration and utilization of such services.
2. As per the MoU, the charitable hospitals are required to conduct monthly health camps /medical camps in their catchment area to provide RMNCH services and the action plan of the same needs to be submitted to the Joint Director of Health Services of the District. The SSNS Hospital has not conducted any health / medical camps in its catchment area in the last three financial years. The SSNS Hospital may initiate steps to work up an annual calendar for conducting health / medical camps in their catchment area in collaboration with District Health Authority which has well defined objectives and expected outcomes and the report of the same may be submitted to the Joint Director of Health Services, Cachar District on a quarterly basis.
3. As per the MoU, for the provision of “In-Patient Department Services’, it is mentioned that ***‘In hospitals where caesarean section is available in those facilities there should be a blood bank / blood storage unit’***. However, in SSNS Hospital there is no functional Blood Bank / Blood Storage Unit, and they have to depend on Silchar Medical College & Hospital (SMCH) for their blood product requirements. The SSNS Hospital may explore the feasibility of operationalizing a Blood Storage Unit in its premises and technical support for the same may be taken from NHM.
4. As per the MoU, the charitable hospitals are required to submit expenditure statement with utilization certificate on a month – to – month basis utilizing the advance and the yearly audited accounts for financial year ending in March with utilization certificate to be submitted by 30th of June of each year. However, the charitable hospital did not submit any Expenditure Statement and Utilisation Certificate to District health Authority for the last three financial years. As per the discussion with the authorities of the hospital the hospital has spent an amount of Rs 10,43,061 on discounts on hospital bills for the poor patients and purchasing hospital equipment like CPAP machine, Humidifiers etc in the financial year 2021-22. However, no Utilisation Certificate was submitted to NHM for the same. Based on committed expenditure, NHM office has released an additional Rs 7.50 lakh as first instalment in the year 2022-23 making total closing balance of Rs 18.314 Lakhs as on 31st March 2023. The District Health Authority needs to regularly assess and scrutinize the SSNS Hospital regarding the utilization of the fund provided under PPP.

5. Also due to PFMS issue, no claims have been made under JSY head. The District Health Authority may assist the SSNS Hospital in this regard so that the JSY beneficiaries receive their entitlements.
6. The ANMs of the hospital were only trained in immunisation from NHM in the year 2011-12. However no other training has been imparted to the staff. The Midwives & ANMs of the hospital need to be trained in newer programs under NHM and they should be nominated for regular trainings organized by District NHM for proper handholding. Moreover, the hospital does not have any GDMOs or Specialist under its regular pay roll and they attend the hospital on basis of daily remuneration.

Red Cross Hospital, Guwahati, Kamrup (Metro)

Red Cross Hospital is a 10 bedded charitable hospital located in the Guwahati Urban area, Assam. The facility is in a Public-Private Partnership with NHM, Assam wherein the facility has agreed as per MoU for implementation of the Health and Family Welfare activities for the improvement of maternal and child healthcare services within the district especially of the municipal ward catering to BPL families. The MoU between District Health Society (on behalf of NHM Assam) and Red Cross Hospital for the financial year 2022-23 was signed by the District Health Society with Red Cross Hospital on 31st March 2023 and at the same time the operational guideline *for Charitable Hospitals under PPP of NHM, Assam was shared with them.*

Performance of Red Cross Hospital, Kamrup (Metro):

SL	Services	FY 2022-23
1	OPD	212
2	IPD	03
3	Normal Delivery	01
4	C-section	03
5	NICU admission	0
6	Laboratory tests	360

Infrastructure:

The RMNCH infrastructure at the hospital comprises of a well-maintained building with designated area for registration, OPD complex, a labour room, obstetrics and gynaecology operation theatre (two tabled), female ward (10 bedded), pharmacy, and a sterilization unit. The hospital is also equipped with four radiant warmers (including a phototherapy unit), and three mucous suckers for new-born care management. Bio-medical Waste Management System is outsourced, for which the hospital is charged on a monthly basis. The hospital was closed for 2 years for renovation and started its operation from early 2022.

Human resource:

During the field visit it was found that Red Cross Hospital had constraint of essential manpower. Among the 16-hospital staff employed at the facility only three were permanent staff and the rest were contractual.

SL	Human Resource Category	In position
1	Consultant-Specialist	O&G - 1 Surgeon - 0 Paediatrician - 0 Anaesthesiologist - 0 Medicine Specialist - 0
2	GDMO	1
4	Dentist	0
5	Staff Nurse (only ANM)	3
6	Laboratory Technician	2
7	Pharmacist	1
8	Radiographer	0
10	Grade 4 / Support Staff	6

The services of a Paediatrician and Anaesthesiologist are being hired on a case-to-case basis.

Service Delivery

Services	Availability
ANC & PNC services	Available
Immunization services	Not available (Hospital does not have ILR)
24 x 7 delivery services including normal and assisted deliveries	No MO is available at night
Emergency Obstetrics care including surgical intervention like C-Sections and other medical interventions	Available (elective only)
New-born Care	Available
Full range of Family Planning services including Laparoscopic Sterilization services	Not available
Safe Abortion Services	Available (non-emergency)
Blood Storage facility with scope of upgrading to Blood Bank facilities	Not available (Collaboration with external blood bank)
Essential Laboratory Services	Available
Referral Transport Services	1 Ambulance and 1 Mobile Medical Unit is available
Medical camps	Conducted (1-2 per month)

Laboratory Services

The hospital has a fully equipped laboratory with auto blood & biochemistry analysers, PT/APTT machine and centrifuge with around 59 laboratory tests available for patients. Laboratory is manned by two full time Laboratory Technicians. The laboratory maintains liquid waste management protocols as per guidelines and BMW is outsourced.

Fund utilization

A grant of Rs 7,00,000 was sanctioned in favour of Red Cross Hospital for FY 2022-23. However, as the MoU was signed on the 31st of March 2023, funds could not be utilized in that FY.

Scope for Improvement:

1. As per the MoU, the charitable hospitals are required to conduct surveys on a quarterly basis in their respective catchment areas for identifying the beneficiaries for various components of RMNCH services. The Red Cross Hospital in collaboration with the District Health Authority has not conducted such surveys to identify beneficiaries of RMNCH services in their catchment area and rather caters to such patients who only visit their hospital. The Red Cross Hospital in collaboration with the District Health Authority may initiate steps to conduct surveys on a quarterly basis to identify the beneficiaries of RMNCH services in their catchment area to improve the penetration and utilization of such services.
2. As per the MoU, the charitable hospitals are required to conduct monthly health camps /medical camps in their catchment area to provide RMNCH services and the action plan of the same needs to be submitted to the Joint Director of Health Services of the District. The Red Cross Hospital had conducted only two health / medical camps in the FY 2022-23 and one of the camps was conducted within the hospital premises itself. The Red Cross Hospital may initiate steps to work up an annual calendar for conducting health / medical camps in their catchment area in collaboration with District Health Authority which has well defined objectives and expected outcomes and the report of the same may be submitted to the Joint Director of Health Services, Kamrup (Metro) District on a quarterly basis.
3. As per the MoU, for the provision of "In-Patient Department Services", it is mentioned that ***'In hospitals where caesarean section is available in those facilities there should be a blood bank / blood storage unit'***. However, in Red Cross Hospital there is no functional Blood Bank / Blood Storage Unit. The Red Cross Hospital may explore the feasibility of operationalizing a Blood Storage Unit in its premises and technical support for the same may be taken from NHM.
4. The Red Cross Hospital is not providing 24x7 emergency services due to limited availability of human resources. It is advisable that District Health Authority and Red Cross Hospital revisit the Terms of Reference and restructure the Memorandum of

Understanding which may include a provision for deputation of the requisite manpower on a rotation basis from the District NHM.

5. There is a need to train the staff of the hospital especially Nurses, Laboratory Technicians & GDMOs on the newer programmes under NHM so that they will be at par with the other trained health staff of the district. Consideration should be made for NSSK, SBA, FBNC & PPIUCD training along with training in the disease control programmes of NTEP, NLEP, NCD & NVBDCP of the charitable hospital staff.

Catholic Hospital, Borgang:

Catholic Hospital is a 150 bedded charitable hospital having multiple specialities located under Behali Health Block in Biswanath District, Assam. The facility is in a Public-Private Partnership with NHM, Assam since FY 2009-10, wherein the facility as per MoU is responsible for implementation of the Health and Family Welfare activities for the improvement of maternal and child health within the district especially for BPL families and Tea Garden workers etc. The assessment was done taking last 3 financial years data base.

SL	Services	FY 2020-21	FY 2021-22	FY2022-23
1	OPD	22,975	19,254	19,636
2	IPD	4,226	3,672	3,078
3	Normal Delivery	118	110	68
4	C-section	800	485	402
5	NICU admission	NA	NA	NA
6	Laboratory tests	501	24,963	3,2157

**** Monthly Average (FY 2022-23):**

- I. OPD: 1636
- II. IPD: 257
- III. Normal Delivery: 6
- IV. C-Section: 34
- V. Laboratory Tests: 2680

The C-section rate of the hospital is around 6 times higher than that of normal delivery, which may ask for a regular Caesarean Section audit.

Infrastructure:

The MCH infrastructure at the hospital comprises a well-maintained hospital building with designated area for registration, OPD complex, a labour room, obstetrics and gynaecology operation theatre, maternal ward, eclampsia management room, Special New-born Care Unit (SNCU), blood bank, pharmacy, paediatric ICU, and a sterilization unit. The facility has its own Bio-medical Waste Management System with ETP.

Human resource:

During the field visit it was found that Catholic Hospital had the following manpower:

SL	Human Resource Designation	In position
1	Director	1
2	Assistant Director	1
3	Administrator	1
4	Medical Superintendent	1
5	Specialist	O & G - 1 General Medicine - 1 Surgeon - 2 Anaesthesiologist - 1 Cardiologist - 1 Paediatrician - 2 Pathologist - 1 Radiologist - 1
6	Senior RMO & Sonologist	1
7	RMO	3
8	Dentist	1
9	Physiotherapist	1
10	Staff Nurse	GNM-3
11	Public Relations Officer	1
12	Supervisor	2
13	ANM	42
14	Laboratory Technician	7
15	Pharmacist	7
16	Paramedical Staff	17
17	Radiographer	7
18	Attendant / Ward boy	6
19	MRD Staff	6
20	Billing Staff	5
21	Laundry	5

Service Delivery:

Services	Availability
ANC & PNC services	Available
Immunization services	Available
24 x 7 delivery services including normal and assisted deliveries	Available
Emergency Obstetrics care including surgical intervention like C-Sections and other medical interventions	Available

Services	Availability
New-born Care	Available
Full range of Family Planning services including Laparoscopic Sterilization services	Not available (Only health talks are given)
Safe Abortion Services	Not available
Blood Bank	Available
Essential Laboratory Services	Available
Referral Transport Services	4 private vehicles are used for patient transport
Medical camps	Conducted (1-2 per month)

Laboratory Services

The hospital has a fully equipped laboratory with auto blood & biochemistry analysers, PT/APTT machine and centrifuge with around 80 laboratory tests available for patients. Laboratory is manned by seven full time Laboratory Technicians. The laboratory maintains liquid waste management protocols as per guidelines with availability of an in-house ETP.

Fund utilization:

Expenditure Breakup of NHM fund for FY 2022-23 of Catholic Hospital, Borgang:

SL	Particulars	Amount (In Rupees)
1	Reimbursement for (LSCS: Rs.7,550 x 85)	6,41,750
2	Reimbursement for (Normal: Rs.5,000 x 13)	65,000
3	Health Camp	3,000
4	Patient Monitor	1,00,000
5	NICU Renovation	22,000
6	BMW Bag	10,000
7	Bank Charge	265.00
Total expense		8,42,015

Expenditure Breakup of NHM fund for FY 2021-22 of Catholic Hospital, Borgang:

SL	Particulars	Amount (In Rupees)
1	Reimbursement for (LSCS: Rs.7,550 x 132)	9,96,600
2	Reimbursement for (Normal: Rs.5,000 x 34)	1,70,000
3	Neo natal Patient Monitor	1,00,000
4	Patient Monitor	1,00,000
5	Renovation new-born Care	50,000
6	BMW Bag	10,000
7	Bank Charge	122.00
Total expense		14,26,722

Expenditure Breakup of NHM fund for FY 2020-21 of Catholic Hospital, Borgang:

SL	Particulars	Amount (In Rupees)
1	Reimbursement for (LSCS: Rs.7,550 x 57)	4,30,350
2	Reimbursement for (Normal: Rs.5,000X13)	65,000
3	Renovation of Labour Room	50,000
4	BMW Bag	10,000
5	Bank Charge	4.72
Total expense		5,55,354

Expenditure Breakup of NHM fund for FY 2019-21 of Catholic Hospital, Borgang:

SL	Particulars	Amount (In Rupees)
1	Reimbursement for (LSCS: Rs.7,550 x 124)	9,36,200
2	Reimbursement for (Normal: Rs.5,000 x 32)	1,60,000
3	Health Camp Medicine	28,700
4	Health Camp expenses	69,000
5	Renovation of maintenance of NICU	50,000
6	BMW Bag	10,000
7	New-born radiant warmer	92,960
8	Transportation	7,040
9	Bank charge	4.72
Total expense		13,53,906

Scope for improvement:

1. As per the MoU, the charitable hospitals are required to conduct surveys on a quarterly basis in their respective catchment areas for identifying the beneficiaries for various components of RMNCH services. The Catholic Hospital Borgang in collaboration with the District Health Authority has not conducted such surveys to identify beneficiaries of RMNCH services in their catchment area and rather caters to such patients who only visit their hospital. The Catholic Hospital Borgang in collaboration with the District Health Authority may initiate steps to conduct surveys on a quarterly basis to identify the beneficiaries of RMNCH services in their catchment area to improve the penetration and utilization of such services.
2. As per the MoU, the charitable hospitals are required to submit expenditure statement with utilization certificate on a month – to – month basis utilizing the advance and the yearly audited accounts for financial year ending in March with utilization certificate to be submitted by 30th of June of each year. The Catholic Hospital Borgang does not submit month – on – month expenditure statement with utilization certificate however they submit annual utilization certificate to the District Health Authority by the 30th of June of each year. The Catholic Hospital Borgang may

initiate steps to submit such expenditure statement and utilization certificates on a month – on – month basis to the District Health Authority.

3. Identification of BPL patients among the total number of patients approaching the Catholic Hospital Borgang is a challenge for the facility staff. It is recommended that DPM of District NHM should provide the requisite data to the facility to aid in identification of patients.
4. There is a need to train the staff of the hospital especially Nurses, Laboratory Technicians & GDMOs on the newer programmes under NHM so that they will be at par with the other trained health staff of the district. Consideration should be made for NSSK, SBA, FBNC & PPIUCD training along with training in the disease control programmes of NTEP, NLEP, NCD & NVBDCP of the charitable hospital staff.

Summary of salient observation as per the conditionalities of the Memorandum of Understanding (MoU):

SL	Areas of Concern	Burrows Memorial Christian Hospital	Siva Sundari Nari Sikshasram Hospital	Catholic Hospital, Borgang	Red Cross Hospital
A	Services as per MoU				
A1	The maternal & child health services including OPD & IPD	Yes	Yes	Yes	Yes
A2	Provision of Normal / Caesarean Delivery	Yes	Yes	Yes	Yes
A3	Facility for new-born Care	Yes	Yes	Yes	Yes
A4	Family Planning Services & sterilisation	No	Yes	No	No
A5	Availability of 24 hours emergency services	Yes	Yes	Yes	No(No night duty MO)
A6	Provision of facility of Janani Suraksha Yojna (JSY) & Janani Shishu Suraksha Karyakaram (JSSK)	Yes	No (PFMS issue)	Yes	No (Newly registered)
A7	Minimum laboratory investigations like haemoglobin, glucose, urine albumin, stool microscopy, RPR test for syphilis etc. for pregnant women.	Yes	Yes	Yes	Yes
A8	Outreach Camps	Yes	No	Yes	No
B.	Infrastructure required as per MoU / Service provision				
B1	Availability of Hospital Building	Yes	Yes	Yes	Yes
B2	Availability of equipment/instrument	Yes	Yes	Yes	Yes
B3	Provisions of a blood bank / blood storage unit.	No	No	Yes	No
B4	Provision of Ambulance for referral transport	Yes	Yes	Yes	Yes
C	Specialist availability as per MoU / service provision (1. Not defined as per MoU, however the availability of services for Maternal & Child health including Caesarean Section is defined)				
C1	Obstetrics & Gynaecology	Yes	Yes (Consultant basis)	Yes	Yes
C2	Paediatrician	No	Yes (Consultant basis)	Yes	No
C3	Anaesthesiologist	No (Nursing Anaesthetist present)	Yes (Consultant basis)	Yes	No
C4	Medicine	No	Yes (Consultant basis)	Yes	No
D	Funds utilization as per MoU (Rupees 15 Lakhs allocated every year principally for service delivery component and some amount for Minor repair/renovation only for Labour room/Maternity ward/NBCC.)				
D1	Submission of expenditure statement with UC	Yes	No (for last 3 FY)	Yes	No (Late signing of MoU)
D2	Fund utilised as per MoU norms	No	No	Yes	NA (Fund received late)
D3	Fund received on time from District	Yes	Yes	Yes	No (Fund received late)

Recommendations and Way Forward for PPP Charitable Hospitals under NHM, Assam:

1. The Memorandum of Understanding for Public Private Partnership signed among the National Health Mission, Assam and the Charitable Hospitals **needs to be facility specific. The performance of the specific facility along with the catchment area needs to be initially considered following which Key Performance Indicators and targets for RMNCH services delivery need to be defined for that charitable hospital.**
2. As per the MoU, the charitable hospitals are required to conduct surveys on a quarterly basis in their respective catchment areas for identifying the beneficiaries for various components of RMNCH services. However, during the assessment visit it was observed that no such surveys were conducted by the charitable hospitals. **The charitable hospitals in collaboration with the respective District Health Authorities may initiate steps to conduct surveys on a quarterly basis to identify the beneficiaries of RMNCH services in their catchment area to improve the penetration and utilization of such services.**
3. During the assessment it was observed that the charitable hospitals were not clear about the areas / heads where the funds provided by NHM, Assam were to be utilized. Although, the Operational Guidelines did broadly mention the areas where the funds could be utilized the charitable hospitals were not utilizing the funds as per instructions. For example, the BMCH, Cachar in the last three financial years had utilized almost all of their funds for infrastructure development including renovation of HDU, isolation and male wards & toilets, renovation of doctors' chambers, construction of boundary & retaining walls, canteen & waiting shed, electrical rewiring, procurement of furniture etc. On the other hand, the SSNS Hospital, Cachar could not utilize a major portion of the fund provided for the last three financial years as they were not clear regarding the specific budget heads under which the funds should be spent. This indicated a clear lack of communication among the District NHM and the Charitable Hospitals. Hence, **there is a need for reorientation of the charitable hospitals on the operational guidelines for proper utilization of funds as per specific budget heads.**
4. **The renewal / signing of the Memorandum of Understanding should be undertaken within the first quarter of the financial year** (as soon as the RoP of the SPIP is available) **to ensure adequate utilization of the funds** by the charitable hospitals to guarantee that the requisite healthcare services are provided to the beneficiaries all year through. For example, the MoU with the Red Cross Hospital, Kamrup (Metro) for the FY 2022-23 was signed on the 31st of March 2023.
5. The NHM, Assam is required to **conduct extensive review of all eligible charitable hospitals prior to selection for operations under PPP** to provide RMNCH services to the intended beneficiaries. The overall performance of the hospitals along with the availability of adequately trained manpower & requisite infrastructure (BSU or Blood

Bank for C-Sections) needs to be considered to ensure smooth service delivery post selection. For example, the Red Cross Hospital, Kamrup (Metro) has a very low footfall (only 18 OPDs / month, 01 normal delivery / year and 03 C-sections/ year) for the FY 2022-23. On the other hand, although both the BMCH and the SSNS Hospitals in Cachar District regularly conducted C-sections they did not have a BSU or Blood Bank.

6. In the Memorandum of Understanding it was clearly mentioned regarding JSSK entitlements and benefits. However, during the visit it was found that the awareness regarding these entitlements were not uniform in all charitable hospitals, i.e., entitlements for free transportation, free diagnostics including USG etc. Although the MoU specifies the availability of free drugs from district NHM for the RMNCH beneficiaries, it was observed that the supply was irregular or inadequate. **It is recommended that the district NHM should reorient the PPP Hospitals regarding these entitlements under JSSK and ensure provision of adequate supply of drugs under the free drugs initiative of NHM.**
7. During the visit it was observed that there is a need to train the staff of the charitable hospitals especially Nurses, Laboratory Technicians & GDMOs on the newer programmes under NHM so that they will be at par with the other trained health staff of the district. It is recommended **that timely trainings are conducted by the district NHM for building the capacity of staff at the PPP Hospitals with special focus on NSSK, SBA, FBNC & PPIUCD training along with training in the disease control programmes of NTEP, NLEP, NCD & NVBDCP.**

Photographs:



Burrows Memorial Christian Hospital,
Cachar



Catholic Hospital, Bishwanath



Siva Sundari Narisikshasram Hospital,
Cachar



Red Cross Hospital, Kamrup (Metro)



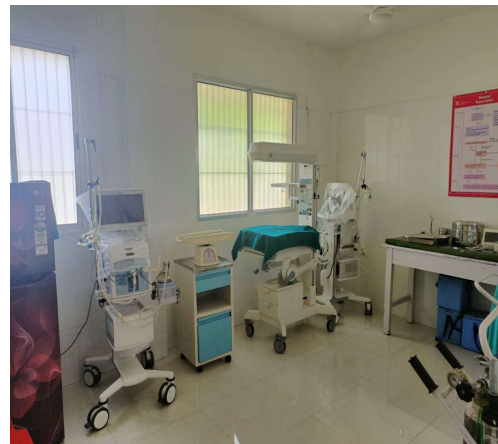
**HDU, Burrows Memorial Christian Hospital,
Cachar**



**PSA, Burrows Memorial Christian
Hospital, Cachar**



OT, Catholic Hospital, Bishwanath



NBCC, Red Cross Hospital (Kamrup)

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