



OPERATIONAL GUIDELINE INITIATIVES FOR STRENGTHENING ROGI KALYAN SAMITIS

Rogi Kalyan Samiti initiatives are finest examples of effective delivery of social services in hospitals through decentralisation & community participation. A functional RKS can only take effective, need based & appropriate decisions for improvement of health institutions, related delivery systems & judiciously utilise funds allotted/raised under different heads. For the year 2008-09 the following activities have been approved and a brief operational guideline to initiate implementation of different activities is enclosed herewith.

Initiatives proposed in PIP 2008-09 for strengthening Rogi Kalyan Samitis are as follows:

1) AWARD TO BEST PERFORMING ROGI KALYAN SAMITI

Objectives

- The basic objective is to motivate RKS members to be involved in the developmental activities of the institution and to ensure constructive fund utilization.
- To acknowledge & appraise the contribution of Rogi Kalyan Samitis

Provision : There is provision of Rs10000/- in the PIP for giving award to best performing Rogi Kalyan Samiti/s in the District in the financial year 2008-09.

Competitors for this year : Comparisons shall be undertaken exclusively among Rogi Kalyan Samitis constituted at block PHC/CHC/AH level as per the prescribed criteria.

Criteria for grading performance of RKSs

Sl. No	Criteria	Score	Highest Score	Score secured
I. Curative Services				
	OPD Average OPD cases per doctor (in position)	50 cases & above - 10marks	10	
	Indoor Bed occupancy rate	>75% - 10 marks 50% -75% -5 marks	10	
	Delivery (% of Institutional delivery corresponding to total delivery in its focus area)	30%-40% - 5 marks 40%-60% - 10 marks >60% - 15 marks	15	
	Sterilisation Services (Fixed day approach)	10 marks	10	



II. Ancillary Services				
	Lab Services available	10 marks	10	
III. Auxiliary Services				
Planning				
	Meeting status Governing Body Executive Committee	10 marks for each meeting conducted 2marks for each meeting conducted	64	
	Having approved annual action plan & budget	10 marks	10	
	Provision of essential services			
	White washing/distempering.	5marks	5	
	Door/windows/grills repaired & painted.	5marks	5	
	Separate toilets for male & female in functional condition.	5marks	5	
	Provision of 24hrs. pipe water supply.	5marks	5	
	Provision of pure drinking water supply for patients & Staffs.	5marks	5	
	Alternative electricity supply systems exists i.e. inverter /solar systems/Generator in ward, OPD, OT & labour room.	5marks	5	
	Out sourcing/strengthening own system for provision for changing of bed sheet to patients at least on alternate days.	5marks	5	
	Parking area earmarked.	5marks	5	
	Waiting space for patients well maintained. (fixing of chairs, fans, drinking water provision)	5marks	5	
	Gardening in the hospital premises.	5marks	5	
	Canteen for provision of food to patients on subsidized rate.	5marks	5	
	Display of citizen charter/site map/Major medical equipment& instrument operational status /Duty chart/major medicine stock position	5marks	5	



IV.Utilisation of fund				
	Utilisation of fund Less than equal to 30% of total allotted fund (Cumulative) 31%-50% 51%-80% 80% >	No mark 10 marks 20 marks 30 marks	30	
V. Fund raising				
	Fund raising during 2007-08 Fund raising initiatives taken after formation of RKS if any	30 marks	30	
VI. Annual Audit				
	Annual audit conducted for previous year	30 marks	30	
VII. UC submission status				
	Reporting UC & SOE submitted up to last quarter	20 marks	20	
	Aggregate Marks /Secured marks	400 marks		
In case of tie				
	District may fix some additional criteria for selection of best performing RKS.			

Procedure for selection of best performing RKS

Every hospital would be assessed once annually (preferably in the month of Jan) and given a performance rating score. **Performance for the period from April-December of the corresponding year has to be taken into consideration.**

Phase -1

Intimation to Block Medical Officers in advance for giving scope for improvement as per given criteria.

Phase -2

1. District level programme officers viz. ADMO(FW),ADMO(PH),ADMO(Med),DPM,MEIO/Dy. MEIO will go on hospital visit individually or in a team as decided by CDMO concerned for assessment.
2. Assessment must be done on the day of executive committee meeting/Governing body meeting as find suitable & preferably in the month of January.
3. Assessment of the performance of the hospital



All the services in the hospital are to be analyzed based on the given indicators. These are designed in such a way that the aim is to improve the hospital and not to count failures.

These could be based on

- Statistical Analysis
 - Record verification
 - Patients' feedback
 - Staffs' feedback
4. Joint assessment shall be made involving members of the Executive/Governing Committee.
 5. Result of the assessment must be shared with the all other members.

Phase-3

1. Compilation of collected data & preparation of comparative statement for selecting best performing, RKS in the district.
2. Presentation of comparative statement in the quarterly review meeting of office bearers of RKS proposed at district level.
3. Discussion on the findings & Selection of best performing RKS in the said review meeting.
4. Preparation of the minutes & keeping it for record.

Phase-4

Occasion for felicitating best performing RKS:

Awards shall be given at any district level public function or as decided by Chief District Medical Officer.

Phase-5

Follow up action

Score	Status	Priority action
>75%	Good	-Success stories of respective institutions shall be documented & circulated among other RKSs. -Giving scope to functionaries of respective institutions for sharing experiences in the district level meeting.
50%-75%	Average	Facilitate in execution of planned activities.
<50%	Poor	Programme Officer from the district (as Selected by the CDMO) shall attend the meeting regularly at least for coming 3 months for reorientation, development of action plan, facilitating execution of planned activities etc.



Time line

Activities	Month				Remarks
	Dec	Jan	Feb	March	
Intimation to RKSs regarding the award scheme	ÿ				
Assessment of individual RKS		ÿ			
Prize distribution			ÿ		

Budget breakup:

Allotted funds may be expended on given heads:

- Trophy to the best performing RKS
- Individual citation to highest attendees or for any outstanding contribution towards the management of the Institution among community members.
- TA to representatives of best performing RKS for attending prize distribution ceremony
- Refreshment
- Documentation
- Other related arrangements required if any

Detail budget break up shall be approved by respective CDMO for conducting the programme.

2) ORIENTATION-CUM-REVIEW MEETING OF OFFICE BEARERS OF ROGI KALYAN SAMITI

Objectives

- To take stock of activities undertaken by respective Rogi Kalyan Samitis during the quarter.
- To give inputs for managing operational difficulties.
- To share best practices for replication.
- To encourage members for taking all functional decision with regards to hospital.

Representatives called to attend Orientation-cum-Review Meeting

- Members of Rogi Kalyan Samitis constituted at DHH, SDH, Block PHC,CHC & AH level will participate in the meeting.
- Two (2) members i.e. Member Secretary & any one Community representative of respective RKS are to be invited.
- This meeting shall be chaired by Collector-cum-Chairman, EC, ZSS. Chief District Medical Officer has to convene the meeting. In absence of Collector-cum-Chairman, EC, ZSS, Chief District Medical Officer will preside over the meeting. Other wing officers like ADMO (FW), ADMO (PH) are also to be invited to participate in the meeting. DPM, DAM, DHIO & MEIO/ Dy.MEIO will also attend it.



Periodicity of organising meeting : Quarterly

Venue : It must not be organised at district head quarter only. Other hospitals in the district may also be given chance to host this meeting.

This Review cum orientation meeting must focus on:

- **Individual presentation** by each RKS on progress made during the last quarter & operational difficulties faced if any followed by **open house discussion**.
- **Orientation on selected** topics such as maintenance of books of accounts & record keeping, best practices being conducted in other district or state, revised guidelines on utilisation of grant to RKS, avenue for starting income generating activities through RKS & its procedures etc.
- **Experience sharing by any of the community member** on his/her involvement in Rogi Kalyan Samiti.
- **Transact walk to nearby hospital** to see the improvement made by respective RKS & for giving suggestions for its development.

Budget (Unit cost)

@ Rs 150/- per invitee which includes working lunch, TA, training materials & contingency as required etc.

Provision

Rs 5000/- per meeting has been allotted under this head in PIP

Additional fund if require for organising the programme may be met from RCH-II untied fund available at District.

3. EXPOSURE VISIT

Exposure visit provide opportunities for useful interactive learning. It helps in changing attitudes & triggering innovative thoughts. So its a powerful tool for empowering people.

We are planning to take representatives of Rogi Kalyan Samitis for an exposure trip to a place where RKSs are functioning well. This activity will be coordinated by the state. We are in the process of finalising the trip plan. Detail modalities will be intimated to you afterwards.

4. REGULAR MEETING

Rogi Kalyan Samiti are the registered societies constituted in the hospitals as an innovative mechanism to involve peoples representatives in the management of the hospital with a view to improve its functioning. People's involvement is key to success in this programme. So it is essential to have regular meetings at each institution level for desired result.

Objective

Ensure organising RKS meeting on regular basis.

Initiatives for organising regular meeting

Provision of Contingency-cum-Refreshment cost for organising meeting

@ Rs500/- per governing body meeting at all levels

@ Rs 200/- per Executive body meeting at all levels



This fund will be met out of RKS fund available at the Institution.

Recognition to highest attendees in the meeting among community members

A consolidated attendant sheet shall be maintained at the end part of the proceeding register to facilitate the selection of highest attendees. He/She shall be felicitated during annual award giving ceremony proposed for RKS.

Introducing meeting tracking register for tracking status of the meeting

Level	Responsible person	Responsibilities
District	Hospital Manager	-Separate register to be maintained for tracking status of meeting by Hospital Manager at district level & BPO at block level.
Block	BPO	-BPO shall intimate the proposed date of meeting well in advance to DHIO for information & also the status after meeting. Same information shall be conveyed to BPO by MO(I/c)/AYUSH doctor at PHC(N) level. -Visit plan to attend RKS meeting shall be finalised based on the report after consultation with CDMO.

**Mission Director
NRHM, Orissa.**