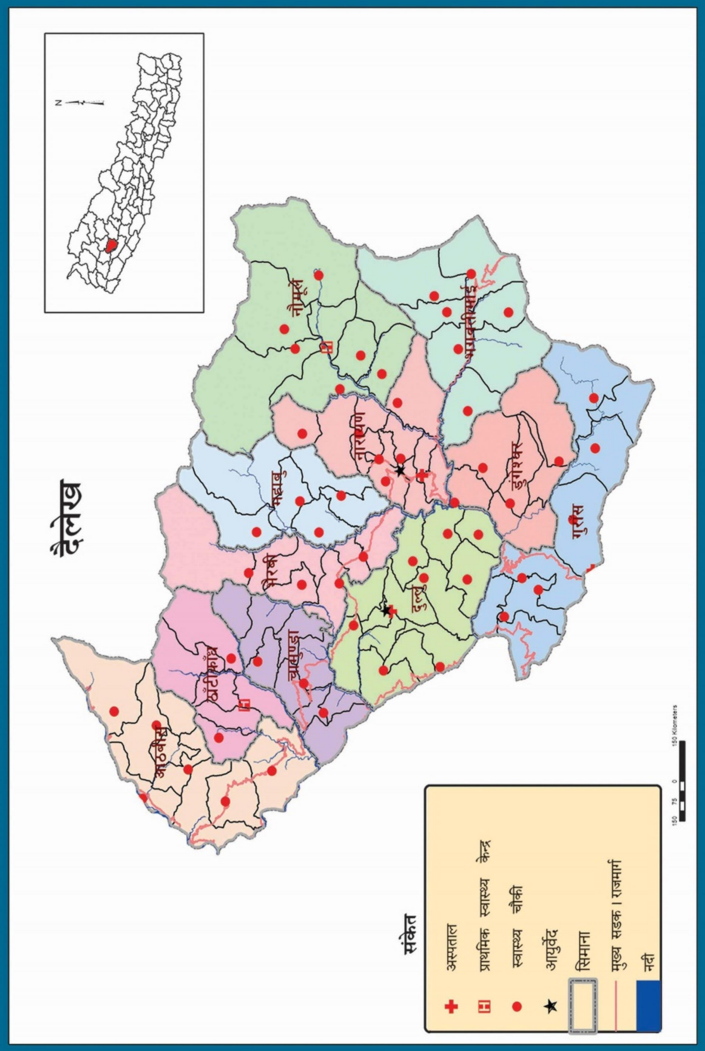

District Annual Health Report

FY 2078/079

Government of Karnali Province

Ministry of Social Development

Health Service Directorate

Health Service Office

Dailekh, Nepal

संरक्षक

थीर प्रसाद रेग्मी
(निमित्त स्वास्थ्य सेवा व्यवस्थापक)

सम्पादक मण्डल

मोतिराम रोकाय (अधिकृत छैठौं तथ्याङ्क)
प्रकाश शाही (कम्प्युटर अपरेटर)

प्रकाशक

स्वास्थ्य सेवा कार्यालय, दैलेख
प्रकाशन मिति २०७९ भाद्र

पत्राचारका लागि ठेगानाः

स्वास्थ्य सेवा कार्यालय, दैलेख

सम्पर्क फोन नं. ०८९-४१०११७ (कार्यालय प्रमुख)
९८५८०२८११७/९८५८०४५१२७ (कार्यालय प्रमुख)
०८९-४१०१२७ (प्रशासन शाखा)
०८९-४१०११५ (लेखा शाखा)
०८९-४१०१५७ (भण्डार शाखा)
फ्याक्स नं. ०८९-४१०११५ (लेखा शाखा)
०८९-४१०१५७ (भण्डार शाखा)
Website: https://hsodailekh.gov.np/
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कर्णाली प्रदेश सरकार

सामाजिक विकास मन्त्रालय

स्वास्थ्य सेवा निर्देशनालय

सुर्खेत

शुभकामना सन्देश

मिति २०७९ भाद्र २१

संविधान प्रदत्त नि:शुल्क प्राथमिक स्वास्थ्य सेवा हरेक नागरिकको नैसर्गिक अधिकार हो भने गुणस्तरीय स्वास्थ्य सेवा प्रदान गर्नु राज्यको प्रमुख दायित्व हो । यही मर्मलाई आत्मसात गरी विगतदेखि नै यस स्वास्थ्य सेवा कार्यालय, दैलेखले उपलब्ध श्रोत साधनको अधिकतम प्रयोग गरी नागरिकको स्वास्थ्यमा उल्लेख्य प्रभाब पारेको कुरा विगतका कार्यसम्पादन मूल्याङ्कनहरुले समेत प्रमाणित गरिसकेको छ । विश्वव्यापी महामारी कोभिड–१९ को उच्च प्रभाव भोग्न बाध्य भएको यस जिल्लाका आकश्मिक अवस्थामा समेत अग्रपंक्तिमा रहेका स्वास्थ्यकर्मीले उच्च मनोवलका साथ एक ढिक्का भएर नियमित स्वास्थ्य सेवालाई निरन्तरता दिई रोग लाग्नेदर र मृत्युदरमा कमी ल्याउन गरेको प्रयासलाई महत्वपूर्ण कोशेढुङ्गाका रुपमा लिएका छौं । न्यून श्रोत र साधनका बाबजूद पनि यस जिल्लाले प्राप्त गरेको उपलब्धीलाई संस्थागत गर्नका लागि आगामी दिनमा कर्णाली प्रदेश स्वास्थ्य सेवा निर्देशनालयले यस जिल्लाले तय गरेका रणनीतिक योजनाहरुमा सहयोग तथा समन्वय गर्ने प्रतिबद्धता पनि व्यक्त गर्दछु ।

यसै सन्दर्भमा स्वास्थ्य सेवा कार्यालय दैलेखले स्वास्थ्य प्रणाली मार्फत आ.ब. २०७८।०७९ मा योजना अनुसार सम्पादन भएका विभिन्न कार्यक्रमहरुको समिक्षात्मक बार्षिक स्वास्थ्य प्रतिवेदन प्रकाशन गर्न लागेकोमा गौरवान्वित भएको महसुश गरेको छु । वर्तमान परिवर्तित सन्दर्भमा संघ, प्रदेश तथा स्थानीय तहका हामी सबैले स्वास्थ्य नै सम्बृद्धिको श्रोत हो भन्ने मान्यतालाई केन्द्रबिन्दुमा राखी समान दायित्व, इमान्दारिता र धैर्यताका साथ अगाडि बढ्यौं भने धेरैकुरा सम्भव हुन्छ भन्ने विश्वास राख्दछु । विगतमा प्राप्त गरेका उपलब्धी र भावी योजनाको सेतुका रुपमा प्रकाशित भएको यस बार्षिक प्रतिवेदन स्वास्थ्य सेवालाई थप उर्जाशील बनाउन महत्वपूर्ण दस्तावेजका रुपमा रहने छ भन्ने विश्वास लिएको छु । यस प्रतिवेदनले हाम्रा सवल पक्षलाई निरन्तरता दिन र दुर्वल, चुनौतीहरुलाई न्यून गर्नमा सहयोग पुग्नेछ भन्ने शुभकामना दिन चाहन्छु । अन्त्यमा यस प्रतिवेदन तयार गर्नमा संलग्न सबै महानुभावहरु प्रति हार्दिक कृतज्ञता व्यक्त गर्दछु ।

निर्देशक

डा. रविन खड्का
निर्देशक
स्वास्थ्य सेवा निर्देशनालय, सुर्खेत ।

कर्णाली प्रदेश सरकार
सामाजिक विकास मन्त्रालय
स्वास्थ्य सेवा निर्देशनालय
स्वास्थ्य सेवा कार्यालय
दैलेख नेपाल

मन्तव्य

स्वास्थ्य नै जीवनको सबैभन्दा ठुलो धन हो । नागरिक अनि राष्ट्रका सरोकारवालाहरु स्वस्थ भए मात्र सम्पूर्ण राष्ट्रको प्रगतिको सम्भावना रहन्छ । संघीय गणतन्त्रात्मक व्यवस्था लागु भइसकेको अवस्थामा प्रबधानात्मक, प्रतिकारात्मक, तथा उपचारात्मक स्वास्थ्यका सेवाहरु जनताको घरदैलोमा पुऱ्याउन संघ, प्रदेश र स्थानिय गरि तीन तहको सरकारको संस्थागत संरचनाको सहकार्य र समन्वयको उतिकै महत्व हुन्छ र कर्णाली प्रदेश सरकारले स्वास्थ्य सेवा एकिकृत प्रणालिबाट दिने गरि कार्यालय पुर्नगठन गरे पश्चात, स्वास्थ्य सेवा कार्यालय दैलेख आधुनिक र आयुर्वेदिक तथा आर्कस्मिक चिकित्सक पद्धतिलाई उतिकै महत्वका साथ अगाडि बढाउदै कर्णाली प्रदेश सरकारले स्वास्थ्य नीति तथा कार्यक्रमहरु कार्यान्वयन गर्न र दैलेख स्थित ११ वटै स्थानिय तहसँग समन्वय, सहकार्य गर्न तत्पर, प्रतिबद्ध रहेको छ । बिश्वभर फैलिएको COVID-19 महामारीले आक्रान्त पारेको बर्ष पनि स्वास्थ्यका धेरै कार्यक्रमहरु सञ्चालित भए भने उपचारात्मक सेवाको सुद्धिढिकरण गर्ने अबसर पनि महामारीले प्रदान गऱ्यो । अत्यन्त महत्वपुर्ण खोप सेवा लगायतका कार्यक्रमहरु प्रभाबित पनि भए । स्वास्थ्य सेवा कार्यालय दैलेखको आ.ब. २०७८/७९ को यस प्रतिबेदनमा सर्म्पुण जिल्लाको स्वास्थ्य कार्यक्रममा सघाउ पुऱ्याउने जिल्ला अस्पताल, ११ वटै पालिका अर्न्तगतको स्वास्थ्य संस्थाहरु, म.स्वा.स्वयम सेविका, गैहसरकारी संस्थाहरुले प्रदान गरिएको स्वास्थ्य सेवाको लेखाजोखा गरिएको छ ।

COVID-19 महामारी रोकथाम तथा नियन्त्रणमा भएका प्रयास र केहि हद सम्म प्राप्त सफलता तथा सिकाई पनि यस प्रतिबेदनमा समाबेस गरिएको छ । जनस्वास्थ्यका कार्याक्रमहरु मध्ये पुर्ण खोपको अबस्था सुधारत्मक रहेको छ भने TB HIV Malaria का रोकथाम तथा उन्मुलनका लक्ष्य प्राप्त गर्न सकिएको छैन । तथापि संस्थागत सुत्केरी गराउने लगायत आमा सुरक्षाका सुचकहरुमा बृद्धि भएपनि अझै धेरै प्रगति हुन पर्ने देखिन्छ । बिशेषत हाम्रो समाजमा बढ्दै गइरहेको नसर्ने रोगको प्रकोप नियन्त्रण तथा मानसिक रोग र आत्महत्याको बढ्दो दर नियन्त्रणमा प्रभावकारी तथा दिगो प्रयास कार्यक्रमको आबश्यकता छ, यधपि COVID-19 को महामारीको बिचमा पनि यस महामारीको प्रतिकार, रोकथाम तथा व्यबस्थापनमा भएको स्वास्थ्य सेवाका आयामहरु तथा ११ वटै पालिकाको अथक प्रयास र स्वास्थ्यका अन्य कार्यक्रम सञ्चालनमा भएका प्रयासको सरहाना गर्छु । साथै आगामी बर्षमा पनि बिगतका कमिकमजोरी सच्याउँदै स्वास्थ्यको दिगो बिकास लक्ष्य हासिल गर्न तिर अग्रसर भई हौसला दिन चाहन्छु । यस प्रतिबेदनले दैलेख जिल्लाको ११ वटै पालिकाको स्वास्थ्य कार्यक्रम सञ्चालन तथा योजना तर्जुमा गर्न सहजिकरण गर्ने बिश्वास लिएको छु । दैलेख जिल्लाको स्वास्थ्यको अबस्था एउटा ऐना हुनेछ यो प्रतिबेदन र यसका कमि कमजोरी पनि आगामि दिनमा सुधारको सुत्रधार हुनेछ भन्ने बिश्वास लिन चाहन्छु ।

स्वास्थ्य तथा जनसंख्या मन्त्रालय, स्वास्थ्य सेवा विभागलाई बिशेष गरि COVID-19 महामारी नियन्त्रण तथा व्यबस्थापनमा दिएको आबश्यक सुझाब र निर्देशनको लागि आभार व्यक्त गर्न चाहान्छु । कर्णाली प्रदेश सरकार, सामाजिक बिकास मन्त्रालय, स्वास्थ्य सेवा निर्देशानलय कर्णाली प्रदेश, सुर्खेतलाई हरबखत प्राप्त मार्ग निर्देशन तथा सहयोगको लागि आभार व्यक्त गर्न चाहान्छु । साथै प्रमुख जिल्ला अधिकारी ज्युको संयोजकत्वमा जिल्लामा रहेका DCCMC लाई पनि आभार व्यक्त गर्न चाहान्छु । साथै जिल्ला स्थीत सम्पुर्ण सरकारी कार्यालयहरु, स्थानिय सरकार, स्वास्थ्यकर्मी, महिला स्वास्थ्य स्वयम सेविका, गैरसकारी संघ सस्था, सञ्चारकर्मीहरुलाई पनि सहकार्य र महामारी रोकथाम तथा नियन्त्रणमा गरेको सहयोग र प्रयासका लागि हार्दिक धन्यबाद दिन चाहन्छु ।

यस प्रतिबेदन तयार तथा प्रकाशन गर्नमा प्रत्यक्ष तथा अप्रत्यक्ष रुपमा सहयोग गर्ने स्वास्थ्य सेवा कार्यालयका विभिन्न शाखाहरुका शाखा प्रमुख ज्यू लगायत सम्पुर्ण सहयोगी संघ संस्थाहरुलाई विशेष धन्यवाद दिन चाहन्छु ।

नि.स्वास्थ्य सेवा व्यवस्थापक

थीर प्रसाद रेग्मी
स्वास्थ्य सेवा कार्यालय, दैलेख

Abbreviations

ABER	- Annual Blood Examination Rate
AFSP	- Agriculture and Food Security Project
AIDS	- Acquired Immune Deficiency Syndrome
ANC	- Antenatal Care
ANM	- Auxiliary Nurse Midwife
AIP	- Annual Parasite Incidence
ARI	- Acute Respiratory Infection
ART	- Anti Retroviral Therapy
ASRH	- Adolescent Sexual and Reproductive Health
BCC	- Behavior Change Communication
BCG	- Bacillus Galmette Guerin
BEONC	- Basic Emergency Obstetric and Neonatal Care
BHSU	- Basic Health Service Center
BMI	- Body Mass Index
CABA	- Children Affected By AIDS
CAC	- Comprehensive Abortion Care
CBIMNCI	- Community Based Integrated Management of Childhood Illness
CD	- Communicable Disease
CD4	- Cell Differentiation
CDD	- Control of Diarrheal Disease
CEONC	- Comprehensive Emergency Obstetric and Neonatal Care
CRP	- Case Fatality Rate
CHU	- Community Health Unit
CHX	- Chlorhexidine
CPR	- Contraceptive Prevalence Rate
C/S	- Cesarean Section
CoFP	- Comprehensive Family Planning
DADO	- District Agriculture Development Office
DALY	- Disability Adjusted
HSO	- Health Service Office
DLSO	- District Livestock Service Office
DoHS	- Department of Health Service
DOTS	- Direct Observed Treatment Short Course
DPT	- Diphtheria Pertussis Tetanus
DQSA	- Data Quality Self-Assessment
DTLA	- District Tuberculosis and Leprosy Assistant
EDCD	- Epidemiology and Disease Control Division
EDPT	- Early Diagnosis and Prompt Treatment
EDP	- External Development Partners
ECO	- Emergency Obstetric Care
EPI	- Expanded Program on Immunization
FP	- Family Planning
FAO	- Food and Agriculture Organization
FCHV	- Female Community Health Volunteer
FPAN	- Family Planning Association of Nepal
FY	- Fiscal Year
HF	- Health Facility
HI	- Health Institution
HH	- House Hold
HIV	- Human Immune Virus

HP	- Health Post
HMIS	- Health Management Information System
HTC	- HIV Testing and Counselling
HW	- Health Worker
IDD	- Iodine Deficiency Disorder
IEC	- Information Education Communication
IFA	- Iron Folic Acid
IMR	- Infant Mortality Rate
IP	- Infection Prevaention
INGO	- International Non-Government Organization
IPD	- Immunization Preventable Disease
IPV	- Injectable Polio Virus
IUCD	- Intra Uterine Contraceptive Device
JE	- Japanese Encephalitis
LMS	- Logistic Managemet Section
LMIS	- Logistic Management Information System
MA	- Medical Abortion
MB	- Multi Bacilli
MCs	- Microscopy Centers
MDT	- Multi Drug Therapy
MDA	- Mass Drug Administration
MDG	- Millennium Development Goal
MDR	- Multi Drug Resistant
M&E	- Monitoring and Evaluation
MIS	- Management Information System
MIYCN	- Maternal Infant nad Young Child Nutrition
MMR	- Maternal Mortality Ratio
MNH	- Maternal and Neonatal Health
MNT	- Maternal and Neonatal Tetanus
MoH	- Ministry of Health
MoSD	- Ministry of Social Development
MR	- Measles Rubella
MWRA	- Married Women of Reproductive Age
NCD	- Non Communicable Disease
NCASC	- National Center of AIDs and STD Control
NHEICC	- National Health Education Information Communication Centre
NHSP	- Nepal Health Sector Program
NHSS	- Nepal Health Sector Strategy
NIP	- National Immunization Program
NMR	- Neonatal Mortality Ratio
NMICS	- Nepal Multiple Indicator Cluster Survey
NRH	- Nutrition Rehabilitation Home
NRCS	- National Red Cross Society
NTC	- National Tuberculosis Center
NSV	- Non Scalpel Vasectomy
OOP	- Out Of Pocket
OPD	- Out Patient Department
OPV	- Oral Polio Virus
ORS	- Oral Rehydration Solution, Oral Rehydration Salts
ORC	- Outreach Clinic
ORT	- Oral Rehydration Treatment
PAC	- Post Abortion Care

PB	- Pauci Bacilli
PBC	- Pulmonary Bacilli Confirmed
PEM	- Protein Energy Malnutrition
PF	- Plasmodium Falciparum
PHCT	- Provincial Health Coordination Team
PHO/PHA	- Public Health Officer/ Public Health Administrator
PLHIV	- People living with HIV
PNC	- Post Natal Care
PR	- Prevalence Rate
PWID	- People Who Inject Drugs
PHCC	- Primary Health Care Centre
PHCORC	- Primary Health Care Out Reach Clinic
PHCRD	- Primary Health Care Revitalization Division
PMTCT	- Prevention of Mother To Child Transmission
PV	- Plasmodium Vivax
RDT	- Rapid Diagnostic Test
RFT	- Release From Treatment
RHD	- Regional Health Directorate
RM	- Rural Municipality
RPR	- Reported Positivity Rate
RTA	- Road Traffic Accident
SAM	- Severe Acute Malnutrition
SBA	- Skill Birth Attendant
SDG	- Sustainable Development Goal
SPR	- Slide Positivity Rate
STI	- Sexually Transmitted Disease
TB	- Tuberculosis
Td	- Tetanus Diphtheria
TNA	- Training Need Assessment
TOT	- Training of Trainers
TSC	- Treatment Success Rate
UM	- Urban Municipality
UHC	- Urban Health Center
UN	- United Nation
UNICEF	- United Nations Children's Fund
VAD	- Vitamin A Deficiency
VPD	- Vaccine Preventable Disease
VBD	- Vector Borne Disease
VSC	- Voluntary Surgical Contraception
WFP	- World Food Program
WHO	- World Health Organization

Table of Content

राष्ट्रिय स्वास्थ्य नीति २०७६

नेपलको संविधानले आधारभूत स्वास्थ्य सेवालाई प्रत्येक नागरिकको मौलिक हकको रुपमा स्थापित गरेको छ । देश संघीय शासन प्रणालीमा गइसकेकोले संघीय संरचनाको बस्तुगत धरातलमा आधारित रही गुणस्तरीय स्वास्थ्य सेवालाई सबै नागरिकको सर्वसुलभ पहुँचमा पुऱ्याउनु राज्यको दायित्व हो । संविधान बमोजिम राज्यका संघ, प्रदेश र स्थानीय तहले सम्पादन गर्ने कार्यहरुको एकल तथा साझा अधिकार सूची, नेपाल सरकारका नीति तथा कार्यक्रमहरु, नेपालले विभिन्न समयमा गरेका अन्तराष्ट्रिय प्रतिवद्धताहरु एवं स्वास्थ्य क्षेत्रभित्रका समस्या र चुनौतिहरु, उपलब्ध श्रोत साधन तथा प्रमाणलाई समेत आधार बनाई राष्ट्रिय स्वास्थ्य नीति २०७६ तर्जुमा गरी जारी गरिएको छ ।

५.३. भावी सोच

स्वस्थ तथा सुखी जीवनलक्षित सजग र सचेत नागरिक ।

५.४. ध्येय

साधन स्रोतको अधिकतम एवं प्रभावकारी प्रयोग गरी सहकार्य र साझेदारीमार्फत नागरिकको स्वास्थ्य सम्बन्धी मौलिक अधिकार सुचिश्चि गर्ने ।

५.५. लक्ष्य

संघीय संरचनामा सबै वर्गका नागरिकका लागि सामाजिक न्याय र सुशासनमा आधारित स्वास्थ्य प्रणालीको विकास र विस्तार गर्दै गुणस्तरीय स्वास्थ्य सेवाको पहुँच र उपभोग सुनिश्चित गर्ने ।

५.६. उद्देश्यहरु

५.६.१. संविधानप्रदत्त स्वास्थ्य सम्बन्धी हक सबै नागरिकले उपभोग गर्न पाउने अवसर सिर्जना गर्नु ।

५.६.२. संघीय संरचनाअनुरुप सबै किसिमका स्वास्थ्य प्रणालीलाई विकास, विस्तार र सुधार गर्नु ।

५.६.३. सबै तहका स्वास्थ्य संस्थाहरुबाट प्रदान गरिने सेवाको गुणस्तरमा सुधार गर्दै सहज पहुँज सुनिश्चित गर्नु ।

५.६.४. अति सीमान्तकृत वर्गलाई समेट्दै सामाजिक स्वास्थ्य सुरक्षा पद्धतिलाई सुदृढ गर्नु ।

५.६.५. सरकारी, गैर सरकारी तथा निजी क्षेत्रसँग बहुक्षेत्रीय साझेदारी, सहकार्य तथा सामुदायिक सहभागितलाई प्रवर्धन गर्नु ।

५.६.६. नाफामूलक स्वास्थ्य क्षेत्रलाई सेवामूलक स्वास्थ्य सेवामा रुपान्तरण गर्दै जानु ।

६. नीतिहरु

६.१. सबै तहका स्वास्थ्य संस्थाहरुबाट तोकिए बमोजिम निःशुल्क आधारभूत स्वास्थ्य सेवा सुनिश्चित गरिनेछ ।

६.२. स्वास्थ्य बिमा मार्फत बिशेषज्ञ सेवाको सुलभ पहुँच सुनिश्चित गरिनेछ ।

६.३. सबै नागरिकलाई आधारभूत आकस्मिक स्वास्थ्य सेवाको पहुँच सुनिश्चित गरिनेछ ।

६.४. स्वास्थ्य प्रणालीलाई संघीय संरचनाअनुरुप संघ, प्रदेश र स्थानीय तहमा पुर्नसंरचना, सुधार एंव विकास तथा विस्तार गरिनेछ ।

६.५. स्वास्थ्यमा सर्वव्यापी पहुँचको अवधारणाअनुरुप प्रवर्धनात्मक, प्रतिकारात्मक, उपचारात्मक, पुनर्स्थापनात्मक तथा प्रशामक सेवालाई एकीकृत रुपमा विकास तथा विस्तार गरिनेछ ।

६.६. स्वास्थ्य क्षेत्रमा सरकारी, निजी तथा गैर–सरकारी क्षेत्रबीचको सहकार्य तथा साझेदारीलाई प्रवर्द्धन व्यवस्थापन तथा नियमन गर्नुका साथै स्वास्थ्य शिक्षा, सेवा र अनुसन्धानका क्षेत्रमा निजी, आन्तरिक तथा बाह्रा लगानीलाई प्रोत्साहन एवं संरक्षण गरिनेछ ।

६.७. आयुर्वेद, प्राकृतिक चिकित्सा, योग तथा होमियोप्याथिक लगायतका चिकित्सा प्रणालीलाई एकीकृत रुपमा विकास र विस्ता गरिनेछ ।

६.८. स्वास्थ्य सेवालाई सर्वसुलभ, प्रभावकारी तथा गुणस्तरीय बनाउन जनसंख्या, भूगोल र संघीय संरचनाअनुरुप सीप मिश्रित दक्ष स्वास्थ्य जनशक्तिको विकास तथा विस्तार गर्दै स्वास्थ्य सेवालाई व्यवस्थित गरिनेछ ।

६.९. सेवा प्रदायक व्यक्ति तथा संस्थाबाट प्रदान गरिने स्वास्थ्य सेवालाई प्रभावकारी, जवाफदेही र गुणस्तरीय बनाउन स्वास्थ्य व्यवसायी परिषद्हरुको संरचनाको विकास, विस्ता तथा सुधार गरिनेछ ।

६.१०. गुणस्तरीय औषधी तथा प्रविधिजन्य स्वास्थ्य सामाग्रीको आन्तरिक उत्पादनलाई प्रोत्साहन गर्दै, कुशल उत्पादन, आपूर्ति, भण्डारण, वितरणलाई नियमन तथा प्रभावकारी व्यवस्थापनमार्फत पहुँच एवं समुचित प्रयोग सुनिश्चित गरिनेछ ।

६.११. सरुवा रोग, किटजन्य रोग, पशुपन्छीजन्य रोग, जलवायु परिवर्तन र अन्य रोग तथा महामारी नियन्त्रण लगायत विपद् व्यवस्थापन पूर्वतयारी तथा प्रतिकार्यको एकीकृत उपायहरु अवलम्वन गरिनेछ ।

६.१२. नसर्ने रोगहरुको रोकथाम तथा नियन्त्रणका लागि व्यक्ति, परिवार, समाज तथा सम्बन्धित निकायलाई जिम्मेवार बनाउँदै एकीकृत स्वास्थ्य प्रणालीको विकास तथा विस्तार गरिनेछ ।

६.१३. पोषणको अवस्थालाई सुधार गर्न, मिसावटयुक्त तथा हानिकारक खानालाई निरुत्साहित गर्दै गुणस्तरीय एवं स्वास्थ्यवर्धक खाद्यपदार्थको प्रवर्द्धन, उत्पादन, प्रयोग र पहुँचलाई विस्तार गरिनेछ ।

६.१४. स्वास्थ्य अनुसन्धानलाई अर्न्तराष्ट्रिय मापदण्डअनुरुप गुणस्तरीय बनाउँदै अनुसन्धानबाट प्राप्त प्रमाण र तथ्यहरुलाई नीति निर्माण योजना तर्जुमा तथा स्वास्थ्य पद्धतिको विकासमा प्रभावकारी उपयोग गरिनेछ ।

Sustainable Development Goals (SDGs)

The 2030 Sustainable Development Goals (SDGs) – a set of 17 Goals, 169 targets and 230 + indicators for achievement by 2030; Nepal one of the 193 signatory nations. SDGs aspire for eradication of poverty, zero hunger, good health and well-being, quality education, gender equality, clean water, energy & environment, 'good' growth & jobs, peace & justice among others.

Sustainable Development has been a global agenda since the last 25 years. The Millennium Development Goals (MDGs) based on Millennium Declaration in the year 2000 by the United Nations (UN) has set foundation for Sustainable Development Goals (SDGs) to be achieved by 2030. The UN Conference on Sustainable Development held in Rio de Janeiro in June 2012, and UN General Assembly (UNGA) held in September 2014 prepared solid foundation for SDGs and finally agreed in the UNGA held in September 2015. Nepal, as a member of the UN, is a part of this global initiative. Sustainable development continues to be in-built in Nepal's socio-economic development. Nepal's efforts for the successful implementation of the MDGs have also opened new avenues for the implementation of SDGs planned for 2016-2030.

Sustainable Development Goals

Goal 1	End poverty in all its forms everywhere
Goal 2	End hunger, achieve food security and improved nutrition and promote sustainable agriculture
Goal 3	Ensure healthy lives and promote well-being for all at all ages
Goal 4	Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
Goal 5	Achieve gender equality and empower all women and girls
Goal 6	Ensure availability and sustainable management of water and sanitation for all
Goal 7	Ensure access to affordable, reliable, sustainable and modern energy for all
Goal 8	Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all
Goal 9	Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation
Goal 10	Reduce inequality within and among countries
Goal 11	Make cities and human settlements inclusive, safe, resilient and sustainable
Goal 12	Ensure sustainable consumption and production patterns
Goal 13	Take urgent action to combat climate change and its impacts*
Goal 14	Conserve and sustainably use the oceans, seas and marine resources for sustainable development
Goal 15	Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss
Goal 16	Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels
Goal 17	Strengthen the means of implementation and revitalize the global partnership for sustainable development.

Nepal, despite being engulfed in a decade long armed conflict during the initial years of Millennium Development Goals (MDG) implementation, has achieved significant progress on most MDG targets. Some targets have been met in advance and others have been met within the 2015 deadline.

Substantial progress has been made in child health with the MDG targets on infant mortality and under-five mortality already being met and rates of malnutrition substantially decreased. The MDG for reducing maternal mortality is also on track. The increase of HIV/AIDS prevalence has been halted and reversed, and prevalence and death rates associated with tuberculosis (TB) have declined markedly. Malaria remains under control.

However, the overall MDG achievements mask the disparities in outcomes by gender, social group, and geography. Also the social focus of development spending of the government has resulted in under-investment in the economic sector which is undermining the progress in physical infrastructure and in turn constraining economic growth. Besides, the governance deficit continues for effective service delivery particularly at subnational and local levels. Completing the unfinished MDG tasks and overcoming the disparities in the achieved outcomes and governance challenges need to be built in to the proposed SDGs and their strategies.

The proposed specific targets for SDG 1:

i. End all forms of malnutrition.

The proposed specific targets for SDG 2:

(i) Reduce the prevalence of undernourishment (measure of sufficiency of access to food at country level).
(ii) Reduce the prevalence of underweight children under-five years of age.
(iii) Reduce the proportion of households with inadequate food consumption (food consumption score).
(iv) Reduce the prevalence of anemia among women of reproductive age and children to less than one percent each.
(v) Increase the food grain production by at least 50 percent from the current level

The proposed specific targets for SDG 3:

(i) Reduce the MMR to less than 70 per 100 thousand live births.
(ii) Reduce preventable deaths of newborn and children to less than 1 percent.
(iii) Eliminate HIV, TB and malaria and other tropical diseases, and water borne diseases by 2030.
(iv) Reduce NCDs by one-third.
(v) Increase the CPR (modern methods) to 75 percent.
(vi) Raises the proportion of births attended by SBAs to 90 percent.
(vii) Increase institutional deliveries to 90 percent and provide post-natal care for 90 percent of mothers

NEPAL HEALTH SECTOR STRATEGY 2015-2020

Introduction

The origins of the five-year strategic health planning process in Nepal can be traced back to 2003 when the Council of Ministers endorsed the *Health Sector Strategy: An Agenda for Reform*. The strategy put in place the first Nepal Health Sector Program (NHSP-I) as its implementation plan for the period 2005-2010. The second sector Program for the period 2010-2015 (NHSP-II) was largely seen as an extension of the previous one, albeit with greater emphasis on partnerships, local governance, decentralized service delivery and equitable access to essential health care services. Nepal Health Sector Strategy 2015-2020 (NHSP-III) is recognised as the strategy that will guide the sector, taking into account multi-sector collaboration to address wider determinants of health, over the next five-year period. It responds to the existing socio-political environment and the changes that have taken place both in the local and global health agenda.

The NHSS stands on four **strategic principles**

1 Equitable access to health services
2. Quality health services
3. Health systems reform
4. Multi-sectoral approach

The Result Framework

The result framework of NHSS has 10 goal level indicators ensured through 9 outcomes and 26 outputs.

Goal No	Goal: Improved health status of all people through accountable and equitable health delivery system	Baseline		Target
		2011	2014	2020
1	Maternal mortality ratio (per 100,000 live births)	-	190*	125
2	Under five mortality rate (per 1,000 live births)	54	38	28
3	Neonatal mortality rate (per 1,000 live births)	33	23	17.5
4	Total fertility rate (births per women aged 15–49 years)	2.6	2.3	2.1
5	% of children under-5 years who are stunted	41	37.4	31
6	% of women aged 15-49 years with BMI less than 18.5	18.2	-	12
7	Life lost due to RTA per 100,000 population	34**		17
8	Suicide rate per 100,000 population ***	-	16.5	14.5
9	DALYs lost due to CDs, NCDs, MNH and Injuries	8319695*		6738953
10	Incidence of impoverishment due to OOP expenditure in health#	na		↓20%

*Sources: NDHS 2011, NMICS 2014,*UN Estimates, **MoPPTM, ***Nepal Police, +IHME, #NLSS*

Outcomes (9)

1. Rebuilt and strengthened health systems: HRH, Infrastructure, Procurement and Supply chain management
2. Improved quality of care at point of delivery
3. Equitable distribution and utilization of health services
4. Strengthened Decentralized Planning and Budgeting
5. Improved Sector Management and Governance
6. Improved Sustainability of Healthcare Financing
7. Improved Healthy Lifestyles and Environment
8. Strengthened Management of Public Health Emergencies
9. Improved availability and use of evidence in decision-making processes at all levels.

कर्णाली प्रदेश सरकार स्वास्थ्य नीति २०७६

१. दूरदृष्टि

सबै प्रदेशबासीको पहुँचमा सबल स्वास्थ्य प्रणाली- सचेत, स्वस्थ र सुखारी कर्णाली ।

२. ध्येय

उपलब्ध साधन-स्रोतको प्रभावकारी प्रयोग गरी सम्बन्धित सरकार, सेवा प्रदायक एवं सरोकारवाला बीच समन्वय र सहकार्य मार्फत प्रदेशबासीको स्वस्थ रहन पाउने मौलिक हक सुनिश्चित गर्ने ।

३. लक्ष्य

प्रदेशबासीको गुणस्तरीय स्वास्थ्य सेवामा पहुँच तथा यसको उपभोगलाई सुनिश्चित गर्न समतामूलक एवं जवाफदेही स्वास्थ्य प्रणालीको माध्यमबाट अविच्छिन्न सेवा उपलब्ध गराउने ।

४. उद्देश्यहरु

क. संविधान प्रदत्त स्वास्थ्य सम्बन्धी हकको उपभोग गर्ने परिवेश सुनिश्चित गर्नु ।

ख. प्रभावकारी एवं मैत्रीपूर्ण स्वास्थ्य सेवाको विकास र विस्तार गर्नु ।

ग. स्वास्थ्यमा पर्याप्त लगानीलाई दिगो बनाई कुशल व्यवस्थापन गर्नु ।

घ. स्वास्थ्यमा सरकारी, गैरसरकारी तथा निजी क्षेत्रसँग साझेदारी, सहकार्य र जनसंलग्नता प्रवर्द्धन गर्नु ।

ङ. आयुर्वेद तथा वैकल्पिक लगायतका स्वास्थ्य प्रणालीहरुको सन्तुलित विकास एवं विस्तार गर्नु ।

च. स्वास्थ्य संस्थाहरुबाट प्रदान गरिने सेवाको गुणस्तर सुनिश्चित गर्नु ।

छ. स्वास्थ्य सम्बन्धी सामाजिक सुरक्षा कार्यक्रमहरुमा सामन्जस्यता स्थापित गर्दै थप सुदृढ गर्नु ।

५. नीतिहरु

५.१. प्रदेशबासीलाई निःशुल्क आधारभूत स्वास्थ्य सेवा प्रवाहित भएको सुनिश्चित गरिनेछ ।

५.२. आकस्मिक स्वास्थ्य सेवाको पहुँच वृद्धि गरी सेवाको व्यवस्थापनलाई सुदृढ गरिनेछ ।

५.३. प्रदेशभित्रका स्वास्थ्य संस्थामा विशेषज्ञ स्वास्थ्य सेवाको पहुँच सुलभ गराइनेछ ।

५.४. स्वास्थ्य सेवाको प्रभावकारिता वृद्धि गर्न पूर्वाधार विकास, स्वास्थ्य उपकरणको व्यवस्था तथा स्वास्थ्य संस्थालाई प्रविधिमैत्री बनाइनेछ ।

५.५. प्रचलित स्वास्थ्य सम्बन्धी सूचना प्रणालीलाई एकीकृत गरी सुदृढ बनाइनुका साथै प्रदेशभित्र स्वास्थ्य अनुसन्धानलाई प्रबर्द्धन गरिनेछ ।

५.६. स्वास्थ्य सेवालाई प्रभावकारी र गुणस्तरीय बनाउन सीप मिश्रित स्वास्थ्य जनशक्ति विकास र विस्तार गरिनेछ ।

५.७. गुणस्तरीय औषधि तथा प्रविधिजन्य सामग्रीमा पहुँच वृद्धि गर्न उत्पादन, आपूर्ति, भण्डारण तथा वितरण र प्रयोगलाई व्यवस्थित गरिनेछ ।

५.८. प्रदेशभित्र सञ्चालित स्वास्थ्य संस्थामार्फत प्रवाह हुने सेवाको गुणस्तरीयता सुनिश्चित गर्न प्रभावकारी समन्वय, सहकार्य, अनुगमन तथा नियमन गर्ने व्यवस्था मिलाइनेछ ।

५.९. जनस्वास्थ्यको क्षेत्रमा प्रदेशको लगानीलाई वृद्धि र व्यवस्थित गरी व्यक्तिगत खर्च गर्नुपर्ने अवस्थाको न्यूनीकरण गरिनेछ ।

५.१०. आपत्कालीन स्वास्थ्य अवस्था तथा अन्य सरूवा रोग एवं महामारी नियन्त्रणका लागि बहुपक्षीय सहकार्य गरी यसका असरको न्यूनीकरण र सेवामा निरन्तरता प्रदान गरिनेछ ।

५.११. स्वास्थ्य क्षेत्रमा समुदायको संलग्नता सहितको सुशासन तथा स्वास्थ्यकर्मीको सुरक्षाको प्रत्याभूति गरिनेछ ।

५.१२. सुरक्षित मातृत्व, बाल स्वास्थ्य, किशोरावस्थाको स्वास्थ्य, परिवार नियोजन तथा प्रजनन् स्वास्थ्य सेवाको विकास र विस्तार गरी पहुँचमा थप सहजता ल्याइनेछ ।

५.१३. व्यक्ति, परिवार र समाजलाई परिचालन गरी स्वस्थ जीवनशैली अपनाउन अभिप्रेरित गर्दै नसर्ने रोगको उपचारलाई आधारभूत स्वास्थ्य सेवास्तरदेखि नै व्यवस्थापन गरिनेछ ।

५.१४. जनस्वास्थ्यको संरक्षण र प्रवर्द्धन गर्नका लागि प्रवर्द्धनात्मक तथा प्रतिकारात्मक सेवाको विकास र विस्तार गरिनेछ ।

५.१५. प्रदेशबासीको पोषण अवस्थामा दिगो सुधार गर्न स्थानीयस्तरमा उत्पादन हुने स्वास्थ्यवर्धक रैथाने खाद्यवस्तुको प्रयोग र पहुँचलाई विस्तार गरिनेछ ।

५.१६. सीमान्तकृत लक्षित वर्गलाई समेट्दै स्वास्थ्य सेवामा उनीहरुको पहुँच सुनिश्चित गरी सामाजिक सुरक्षा कार्यक्रमलाई सुदृढ गरिनेछ ।

५.१७. प्रदेशबासीलाई स्वास्थ्य सेवा सुविधा उपलब्ध गराउनका लागि आयुर्वेद तथा वैकल्पिक चिकित्सा पद्धतिलाई सन्तुलित रुपमा विकास, विस्तार र सुदृढ गरिनेछ ।

५.१८. प्रदेशको स्वास्थ्य तथा जनसांख्यिक तथ्यांक तथा सूचनाको संकलन, विश्लेषण तथा प्रयोगलाई विकास कार्यक्रम तर्जुमाको मूल आधार बनाइनेछ ।

SUMMARY FACT SHEET

SN	Program Indicators	2076/077	2077/078	2078/079
	Reporting Status (%)			
1	Percentage of HMIS Reporting Status	100	100	100
2	Percentage of HMIS On Time Reporting Status	26.8	65.3	78.6
3	Percentage of LMIS Reporting Status	100	100	100
4	Percentage of PHC/ORC Reporting Status	73.6	89.2	90.7
5	Percentage of EPIC Reporting Status	82.7	94.9	96.7
6	Percentage of FCHV Reporting Status	90.3	96.7	97.8
	Averge no. of People served			
1	PHC/ORC (Per clinic)	20	19.7	19.9
2	EPIC (Per clinic)	16.3	17.2	15.6
3	FCHV (reporting Period)	18.4	18.8	17.3
	National Immunization Programme			
1	BCG Coverage	77.2	106.3	82.7
2	DPT-HepB-Bib3 Coverage	79.4	101.4	98.3
3	Measles-1 Coverage	83.2	92.8	97.4
4	Measles-2 Coverage	67.5	84.9	85
5	JE Coverage	78.3	88.6	94.3
6	TD2 & TD2+ Coverage	54.9	75.3	60.6
7	Full Immunization Coverage	66	85.2	84.1
	Nutrition Programme			
1	Children aged 0-23 months registered for growth monitoring	70.2	83.9	90.3
2	Percentage of newborns with low birth weight (<2.5kg) among total delivery by HWs	5.6	6	6.2
3	Percentage of children aged 0-23 months registered for Growth Monitoring (New) who were Underweight	4.9	4.1	4.9
4	Iron Compliance among Expected Pregnancy(180 tabs)	61.3	75.1	69.1
5	Percentage of Postpartum Women who received Vitamin A	84.8	96.7	77
	CB-IMNCI Programme			
1	Percentage of severe pneumonia and very severe disease among total new cases	0.31	0.18	0.27
2	Percentage of severe dehydration among total cases	0.22	0.11	0.34
3	Percentage of PSBI among registered 0-2 months infant (sick baby)	20.8	18.9	21.2
4	Percentage of PSBI cases received complete dose of Gentamicin	66	70.8	70.9
5	Incidence of ARI among children under five years (per 1000)	1351.5	1118	1174.4
6	Incidence of pneumonia among children under five years (per 1000)	175.5	83.2	108.5
7	Percentage of pneumonia cases treated with antibiotics (HF & ORC)	114	100.7	101.2
8	Diarrhoea incidence rate among children under five years	930	841.2	779.3
9	Percentage of children under five years with diarrhea treated with zinc and ORS	94.8	100.4	93.3

SN	Program Indicators	2076/077	2077/078	2078/079
10	Percentage of newborns applied chlorhexidine (CHX) gel immediately among reported live birth	94.9	95.9	98.2
11	Percentage of PSBI Cases treated with first dose of gentamycin	76	80.2	88.9
12	CBIMCI <2Months-Total Death	19	19	16
13	CBIMCI-(2-59Months) Total Death	7	3	2
	Safe Motherhood Programme			
1	ANC 1st visits as % of expected live birth	82.2	95.9	84.9
2	4 times ANC visits as % of per protocol	66.3	84.5	71.2
3	Percentage of women who had 3 PNC check-ups as per protocol (1st within 24 hours, 2nd within 72 hours and 3rd within 7 days of delivery)	32.3	55.7	58.3
4	No. of delivery conducted by SBA	3107	3980	3639
5	No. of delivery conducted by other	1706	1731	855
6	Percentage of home delivery of expected live birth	9.70	9.98	2.95
7	Delivery conducted by SBA as % of expected live birth	49.9	64.2	63.2
8	No. of Home Delivery	604	619	170
9	Percentage of institutional delivery among expected live birth	77.3	92.1	78.1
10	PNC 1st visit as % of expected live birth	77.3	92.3	78.1
11	No. of PAC services provided	310	313	243
12	Percentage of C/S deliveries	1.7	1.3	2.2
13	No. of maternal death	0	1	5
14	No. of neonatal death	19	22	19
15	No. of still births	74	106	64
	Family Planning Programme			
1	No. of IUCD service sites (functional)	20	18	20
2	No. of Implant service sites (functional)	22	26	33
3	CPR (Unadiusted)	23.08	25.15	29.67
4	FP (spacing) new acceptors as % of MWRA	21.8	18.6	16.9
	FCHV Programme			
1	Number of FCHV	810	817	821
2	Proportion of pills cycles distribution by FCHV among total distribution	35.24	30.53	27.87
3	Proportion of condoms distribution by FCHV among total distribution	28.66	32.71	31.60
4	Percentage of mother group meeting conducted by FCHV	83.4	89.9	109.2
5	No. of maternal death reported	0	0	5
6	Total Neonatal Deaths reported	18	17	18
	PHC-ORC Programme			
6	No. of PHC-ORC	205	205	215
7	Average no. of people served by PHC-ORC per month	20	19.7	19.9
8	Percentage of PHC-ORC conducted among total Clinic	73.6	89.19	90.71
	Tuberculosis Control Programme			
1	TB - Case notification rate	47.9	42.6	66.9
2	Total Number of TB Case	142	128	170
3	Treatment success rate	95.2	94.3	92.6
	Leprosy Control Programme			

SN	Program Indicators	2076/077	2077/078	2078/079
1	Incidence of leprosy per 10,000 population	0.27	0.4	0.24
2	Percentage of new leprosy cases presenting with a grade-2 disability	25	0	0
	Malaria Control Programme			
1	Malaria risk population	296147	300261	254011
2	No. of confirmed malaria cases	8	0	3
3	Reported death due to malaria	0	0	0
	Rabies			
1	Number of persons treated for animal bite	473	163	175
2	Number of deaths due to rabies	0	0	0
	Snake Bite			
1	Number of persons treated for snake bite	46	41	13
2	Number of deaths due to snake bite	0	0	0
	HIV/AIDS Programme			
1	No of people counseled (PMTCT+HTC)	5875	7469	7860
2	No of people tested for HIV(PMTCT+HTC)	4548	5912	5858
3	No of reported HIV +ve case (New) (PMTCT+HTC)	1	1	5
4	No. of Persons Receiving ART	191	192	203
	OPD Service			
1	Total new OPD visit	255233	243318	221818
2	Total new OPD visit as % of total population	86.2	81	87.1
3	Total new female OPD visit as % of total OPD visit	59.14	59.52	60.39
	District Hospital Information			
1	Total Number of OPD case	13356	12364	10873
2	Total Number of emergency case	3105	2909	3611
3	Number of sanctioned beds	15	15	15
4	Number of available beds	52	52	52
5	Average length of stay in hospital	2.4	1.2	2.3
6	Total new OPD visit as % of total population	4.51	4.12	4.28
7	Bed occupancy rate	35.1	16.3	30.6
8	Total Number of death among inpatients	7	2	6

Executive Summary

This District Annual Health Report of Health Service Office of fiscal year 2078/2079 (2021/2022) reflects the performance of different programs over the preceding three fiscal years and presents problems/constraints actions taken against them and suggested actions for further improvement. Health service information on its progress and achievement of health institutions of local levels, district aligning with national service coverage have been presented and analyzed comparatively in this report.

The Annual Report of Health Service Office, Dailekh for fiscal year 2078/2079 (2021/2022) analysis the performance of different programmes over the preceding three fiscal years and presents the achievements. This report is mainly based on information collected by DoHS's Health Management Information System (HMIS) from Dailekh District Hospital to peripheral health facilities. A total of 4 Hospital (District Hospital, Dullu Hospital, Aathabis Basic Hospital Gurans Basic Hospital), 2 Primary Health Care Centers (PHCCs), 55 Health Posts (HPs) reported to HMIS in 2078/079. This report also includes service coverage by 215 Primary Health Care/Outreach Clinics (PHC/ORC), 261 Expanded Programmed of Immunization (EPI) clinics and 821 Female Community Health Volunteers (FCHVs), 18 Community Health Units, 25 Basic Health Service Center, 4 Urban Health Centers. Total of 4 NGOs (Nepal Red Cross society, GMR, FPAN, Dailekh Puls) also reported to HMIS this year.
Major programmers implemented in the district were Expanded Program on Immunization, Nutrition program, IMNCI, Family Planning, Safe Motherhood, FCHV program, PHC/ORC program, TB control program, Malaria, Kala-azar, Leprosy Elimination Program, Covid-19 prevention and control and HIV/AIDS prevention and control program.

Reporting status of Hospitals, PHC & HP was 100 percent each. Similarly, 100 percent of urban health centre, 100 percent of community health units, Basic Health Service Center, 90.7 percent of PHC outreach clinics, 96.7 percent of EPI clinics, 97.8 percent of FCHVs and 100 percent of NGO have reported to 100 percent HMIS & 100 percent LMIS Reported in fiscal year 2078/079. Completeness and timeliness of reporting from public facilities & regular report from non-public health facilities to HMIS have always been increasing compared to previous fiscal years.

CHILD HEALTH

IMMUNIZATION

Dailekh district was declared fully immunized district on 4th Ashad 2074. The District immunization coverage of most of the antigens in the regular National Immunization Program (NIP) during fiscal year coverage of Dailekh district for all vaccine was found in increasing trends with >90% coverage for major antigens. There was 82.7% BCG, 98.3% DPT-3 and 85% measles coverage. Coverage of PCV-3 was 96.2% though other antigens as MR second and JE had 94.3% each and Td2/2+ in pregnancy had 60.6% coverage. There was low drop out rate and wastage rate of all antigens was high due to utilization of increased quantity of antigens for multiple sessions in view of achieving fully immunized district declaration.

NUTRITION

The growth monitoring services had been targeted to children below 2 years of age. Second round of mass Distribution Campaign of Vitamin A capsule to 6 to 59 months children and De-worming distribution to 12-59 months with coverage of 82.3% & 79.15% respectively. Moreover, 77% of the pregnant mothers & 69.1% of delivered mothers received 180 iron tablets in this district. About 90.3% of under 2 years children are registered for growth monitoring, among which 4.9% are reported underweight which have slightly increasing from last fiscal year i.e. 4.1 percent.

COMMUNITY BASED INTEGRATED MANAGEMENT OF NEONATAL AND CHILDHOOD ILLNESS (CB-IMNCI)

The CB-IMNCI program has been rolled out to all municipalities of district which aim to reduce neonatal and child mortality. The CB-IMNCI program has been implemented up to community level and it has shown positive results in management of neonatal & childhood illnesses. Most of the newborns 98.2% received Chlorhexidine applied immediately after birth in fiscal year 2078/079 ARI cases per 1000 under five populations has increasing. Incidence of pneumonia (Pneumonia + Severe Pneumonia) has slightly in increase trend. Similarly there was decrease in incidence of Diarrhoea cases along with slightly increasing cases of severe dehydration.

FAMILY HEALTH

FAMILY PLANNING

The Contraceptive prevalence rate (CPR) for modern methods is 29.67% in District. In fiscal year 2078/079. It seems to be slightly increasing by 4.52 percent from 25.15% in 2077/078 to 29.67% in fiscal year 2078/079. There is an decreasing trend of new acceptors of long acting modern methods.

SAFE MOTHERHOOD

Access and availability of safe motherhood services to the community has been ensured with increase in number of birthing centers and coordination with other stakeholders for strengthening human resources, equipments and infrastructures in birthing centers. Service statistics of the fiscal year 2078/079 shows that 85 percent of the mothers received first antenatal care services, however only near 71% of expected live births made four ANC visits as per protocol indicating that about half of the mothers did not complete the recommended four ANC visits. There was slightly decrease in institutional delivery 78% & skilled birth attendance (SBA) during delivery 63.2%. Likewise percentage of mothers who received first postnatal care at the health facility was at 78.1%. There was 5 case maternal death reported, 19 cases of neonatal deaths & 64 still births were reported in fiscal year 2078/079. 99 cases caesarean section (C/S) was done.

FEMALE COMMUNITY HEALTH VOLUNTEER (FCHV)

A total of 821 Female Community Health Volunteers (FCHVs) are working in dailekh and are involved in the promotion of safe motherhood, child health, family planning, and other community based health services to promote health and healthy behavior of mothers and community people with support from health workers and health facilities. 109.2% of mother group meeting conducted by FCHV in fiscal year 2078/079. FCHVs have contributed in distribution of 27.87 percent oral pills and 31.60 percent condom at the district level. FCHVs distributed a total of 101825 pieces of condoms, 4883 cycle of Pills and 22337 packets of ORS, 135340 zinc tablets in the FY 2078/079. Besides, they are also actively involved support on regular prority health programs, national campaign events, as counseling and referring mothers to the health facilities for the service utilization.

PRIMARY HEALTH CARE OUTREACH CLINIC (PHC/ORC)

There are total 215 PHC/ORCs and in HMIS reporting system, 90.7% of the clinics are functional. Averages of 19.9 persons were served per clinic.

EPIDEMIOLOGY & DISEASE CONTROL

MALARIA

A total of 371 Malaria-Blood Slide (blood smears) were collected. The Annual Blood Slide Examination Rate (ABER) was 0.13 percent. 3 case Positivity.

FILARIA

In FY 2078/79 Dailekh, District Hospital reported and peripheral level of health facility has reportrted No case.

TUBERCULOSIS

Treatment by Directly Observed Treatment Short Course (DOTS) for Tuberculosis (TB) is being in district through 60 treatment centers. 1 MDR sub center. The Case Notification Rate (CNR) per 100,000 has reduced to 66.9%, Treatment Success Rate (TSR) has slightly decreased to 92.4% in fiscal year 2078/079.

LEPROSY

The Reported Case Detection Rate per 10,000 populations 0.24% which is below elimination level and has decreased slightly than previous FY. Total cases 6 of leprosy were detected in FY 2078/079.

NCD and Mental Health

District Level Training of Health Service providers were carried out for package for Essential Non-Communicable Diseases (PEN) program scaled up to all HFs and Mental health as a psychosocial health promotion program was conducted in Dailekh.

HIV/AIDS AND STI

HIV exists as a public health problem in Dailekh. There are 4 HTC centers, 2 ART site, 1 ART dispensing site (Dullu Hospital) and 1 CD4 count centre (District Hospital). 4 HTC centers (DH, Dullu, Naumule, Lakandra) , 1 ART dispensing site and CD4 centre were established in district hospital, CCC and CHBC-1(Dailekh Plus), 60 PMTCT (All HFs). Aathbis, Dullu municipality, border of Accham district, share for more than half of HIV cases of district. Total 1275 people were counseled & tested for HIV & 5 New PMTCT/HTC positive case was reported in 2078/079. The number of clients receiving ART was 203 in this year. A total of 6585 tests were done antenatal, labor and delivery, and postnatal period.

CURATIVE SERVICES

Curative services are provided through 4 hospita (2 Hospital, 2 Basic Hospital), 2 Primary Health Care Centers (PHCCs), 55 Health Posts (HPs),18 Community Health Units, 25 Basic Health Service Center, 4 Urban Health Centers as well within the district Percentage of new OPD visits has slightly decreased from 81% in fiscal year 2077/078 to 87.1% in fiscal year 2078/079. Health service office procured free essential medicine and also received from Province & Central store then supplied to all of Health facilities.

SUPPORTING PROGRAMS

HEALTH TRAINING

The overall goal of Health training is to develop capacity of health service providers to deliver gaulity health care services. Objective of health training is tp produce skilled human resurces. Health trainings are generally conducted as, in service, & specialized as onsite coaching which are targeted to all level health workers within the district.

In this Fiscal year, series of training have been conducted in district such as SBA, Implant, Immunization Basic, FB-IMNCI, CNSI, ToT of IMNCI Coacher, IMNCI/Equity & access, MNH update, MPDSR, HMIS/LMIS, Mental Health, CICT, IMU apps, ECCT, RDQA oreantion, municipal level Health profile update training etc.

HEATLH EDUCATION, INFORMATION AND COMMUNICATION

The health education information and communication program is one of the most important supporting health programs which is as old as the modern health services in Nepal. The general objective of the program is to raise the health awareness of the people to promote health status and to prevent disease throught full utilization of available resources. Health Service Office implements IEC activities utilizing various methods and media according to the local needs of the people. Major activities conducted in this fiscal year includes production and distribution of IEC materials, airing of health radio programs and messages through local FM radio, health exhibition, publication of health messages in print media, Media person, community interaction program for health service promotion, IEC program on anti-tobacco, non-communicable diseases control and celebration of different health days, COVID 19 prevention and control program was aslo aired and broadcasted vai local FM radio, pamphlet and broser were distributed for message dissemination.

LOGISTIC MANAGEMENT

District Health Service Store took responsibilities to store and distributes health commodities for the government health facilities and other facilities provided by LMD, HSD Extenal Devlopmental parters. It also involves in repairing and maintenance of instruments along with transport vehicles, Repacking and supply of drugs, vaccines & key commodities including essential druges and other items of regular program, Support to national campaigns. Overall, LMIS reporting stands at 100 percent in dailekh district form Hospital, Basic Hospital, PHCs, HPs, Community Health Units, Basic Health Service Center and Urban Health Centers.

PLANNING, MONITORING, SUPERVISION AND INFORMATION MANAGEMENT

Management Information System (MIS) Section of HSO coordinates with district HF and other NGOs for timely reporting and feedback. It also provides technical supports to district health facilities in HMIS. Major activities conducted by this section in fiscal year 2078/079 were done in District Annual Performance Review Meeting, conduction of Immunization, MNH update, MPDSR, HMIS/LMIS, training for newly recruited health workers and Construction and maintenance of Hospitals, Hospital staff quarters.

1. Introduction

1.1. Background

Political Bordering

- East : Jajarkot
- West : Achham
- North : Kalikot
- South : Surkhet

Positioning

- Altitude : 28 ° 35' North to 29° 8' North
- Lattitude : 81° 25' East to 81° 53' East

Height from sea leval

- Lowest : 544 m (Tallo Dungeshor)
- Highest : 4168 m (Mahabu lekh)
- District Headquater (Dailekh Bazar) : 1448 m (Devkota Chowk)

Total area: 1502 sq. KM

- 80% hilly region
- 20% high hill

Political and administrative division

- Region : Karnali Province
- District Headquarter : Dailekh Bazar
- Electoral Constituencies : 2
- Province Electoral Constituencies : 4
- Municipality : 4
- Rural municipality : 7
- Total Ward: 90

Climatic profile

- Average temperature
  Maximum: 34 degree Celsius
  Minimum: 5 degree Celsius
- Annual rainfall : 1700 mm

Economic situation

- Agriculture : 92%
- Labor : 6%
- Job and business : 2%
- Average annual income : Rs 3552

Land utilization

- Jungle: 78026 hector (51.95%)
- Grazing area: 3698 hector (2.46%)
- Agricultural land: 43121 hector (28.71%)
- Others: (rock, revir, khola) 25355 hector (16.88%)

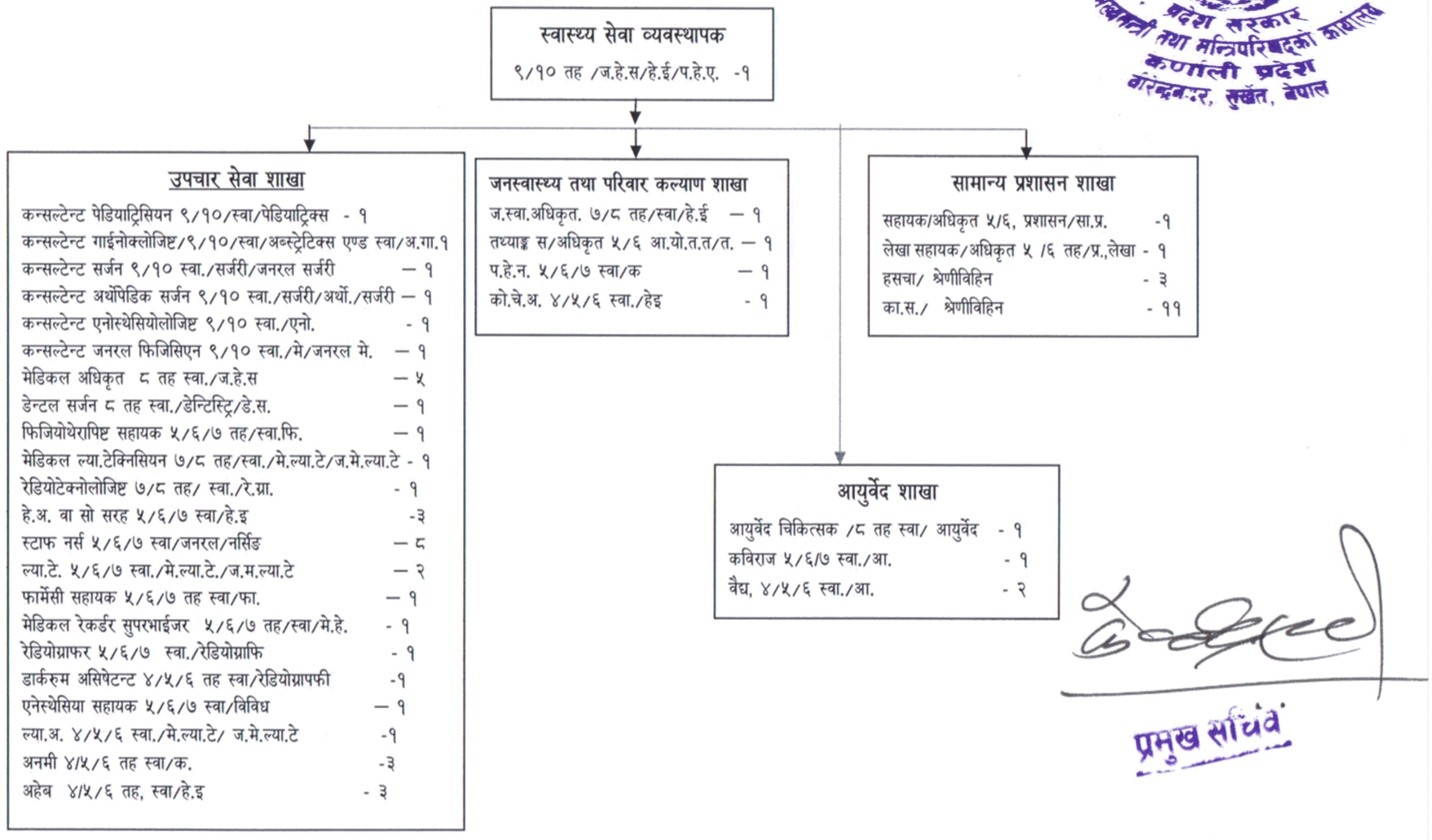
1.2. Demographic information

Indicator	2078 census (Preliminary report)	2068 census
Total population	253319	261770
Male population	121675	126990
Female population	13164	134780
Population density	198/sq km	149 /sq km

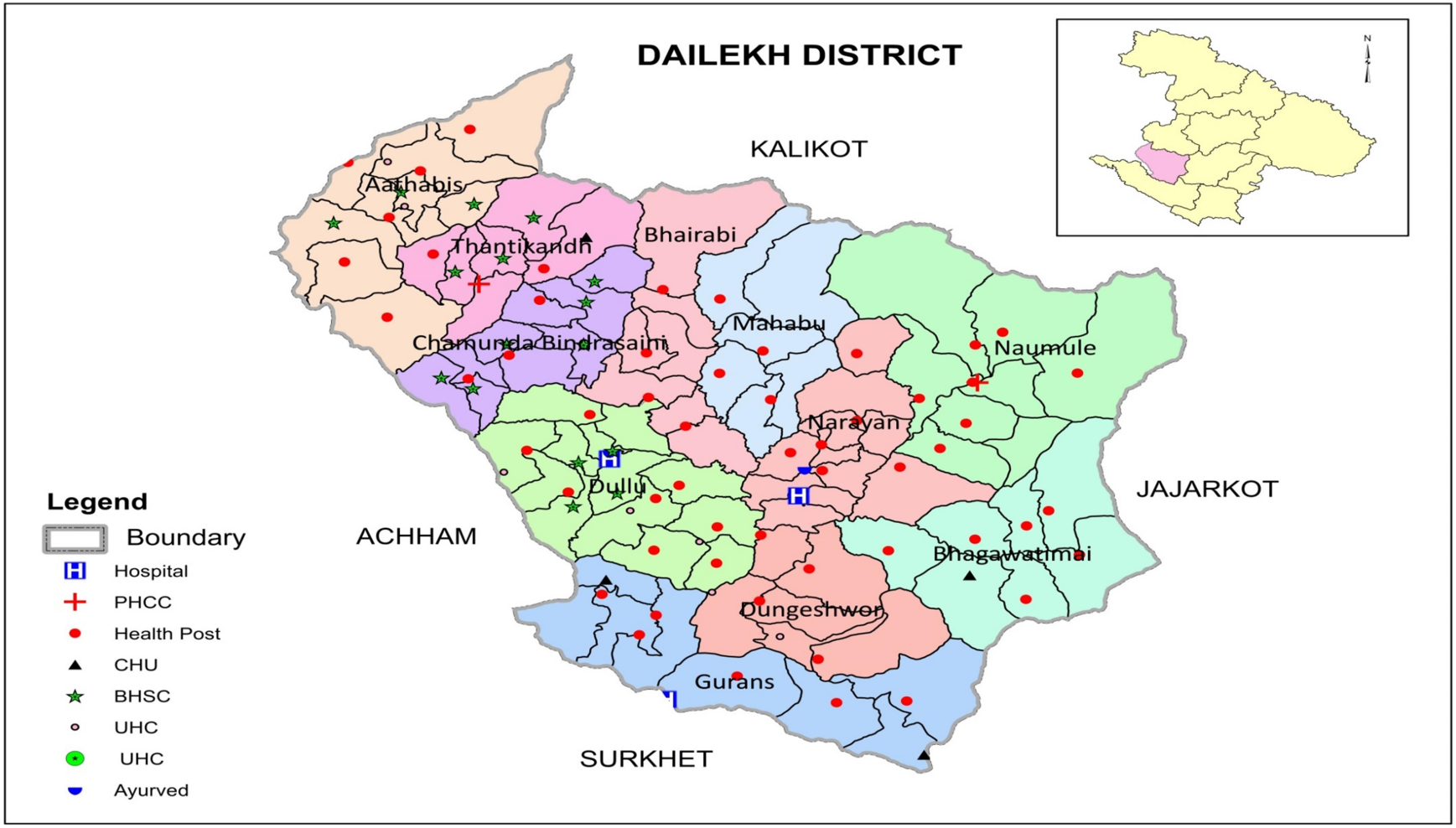
1.3. Health Demography

S.N.	Health Institution	Number
1	Hospital (1 District Hospital, 1 Dullu Hospital, 1/1 Gurns, Aathbis Basic Hospital)	4
2	Primary Health Care Centre	2
3	Health Post	55
5	PHCORC	215
6	EPI Clinic	261
7	FCHV	821
8	CEONC Centre	1
9	BEONC Centre	3
10	Birthing Centre	85
11	Urban Health Center	4
12	Community Health Unit	18
13	Basic Health Service Center	25
14	ART site (Narayan, Rakam) /ART dispensing site (Dullu)	2/1
15	Microscopic centre	7
16	CD4 centre	1
17	RT-PCR Lab.	1

1.4. Organogram of Health Service Office, Dailekh



1.5. Dailekh District map with Health facilities



2. FAMILY WELFARE

2.1. Immunization

Background

The National Immunization Programmed has a lead role in all immunization related actives at national level. The NIP works closely in coordination with other divisions of DoHS, Province Health Service Directorates and Districts. Province Health Service Directorates acts as a facilitator between the centre and the districts and carried out periodic review of district performances and conduct supportive supervision to strengthen immunization services. It is the responsibility of the HSO & Respective UM/RM to ensure that a successful immunization programmed is implemented at district and below level. PHCCs, HPs, and UHCs, CHUs, BHSUs implement immunization programmers in their respective municipalities and wards ensuring all target children receive immunization services especially marginalized and hard to reach population.

Goal

The Overall goal of the National Immunization program is to reduce child morbidity, mortality and disability associated with Vaccine preventable disease.

Objectives

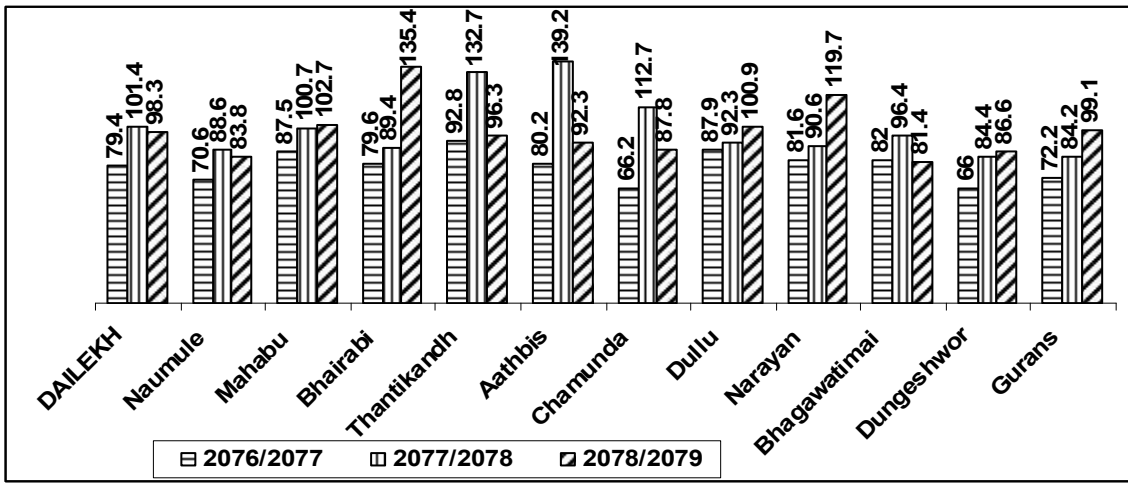
The main objectives of NIP are:

- To achieve and sustain 100% coverage.
- To maintain polio free status
- To sustain MNT elimination status,
- To initiate measles elimination,
- To expand VPDs surveillance,
- To improve and sustain immunization quality,
- To accelerate control of other VPDs through introduction of new vaccines
- To expand immunization services beyond infancy.

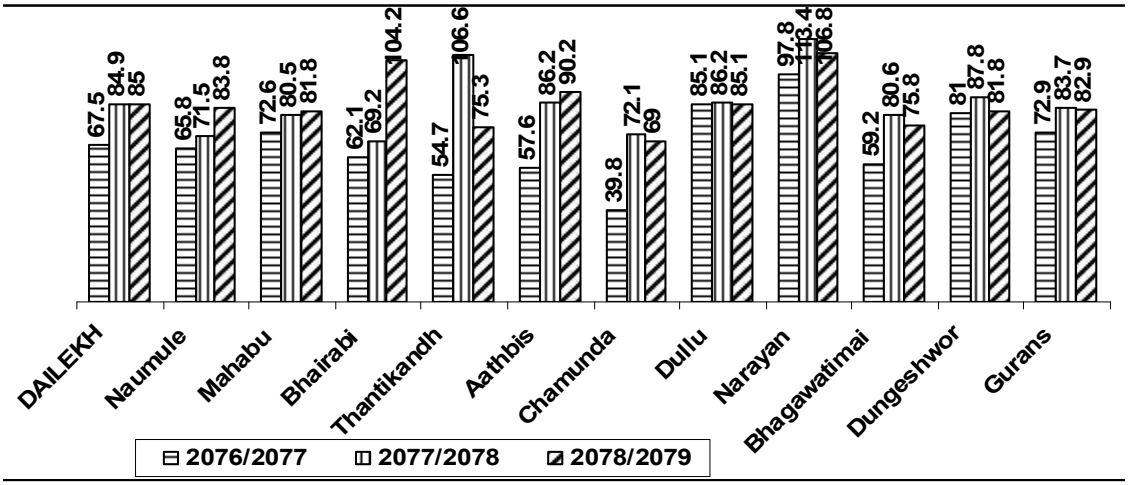
Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
% of children under one year immunized with BCG	77.2	106.3	82.7
% of children under one year immunized with DPT-HepB-Hib3	79.4	101.4	98.3
% of children under one year immunized with PCV 3	79.1	91.7	96.2
% of children under one year immunized with FIPV 2nd	75.7	96	93.4
% of children 12-23 months immunized with JE	78.3	88.6	94.3
% of children aged 12-23 months immunized with measles/rubella 2	67.5	84.9	85
% of pregnant women who received TD2 & TD2+	54.9	75.3	60.6
% of children fully immunized as per NIP schedule	66	85.2	84.1
Drop out DPT-HepB-Hib 1 vs 3	9.8	3.1	-4.1
Drop out Penta 1st Vs MR2	23.1	19.4	10.7

DPT-HepB-Hib3 Coverage



MR-2 Coverage



MUNICIPALITIES CATEGORIZATION 2078/079

Category 1 (less Problem) High Coverage (≥90%) Low Drop-Out (<10%)	**Category 2 (Problem)** High Coverage (≥90%) High Drop-out (≥10%)	**Category 3 (Problem)** Low Coverage (<90%) Low Drop-out (<10%)	Category 4 **(Problem)** Low Coverage (<90%) High Drop-out (≥10%)
Gurans, Aathbis, Narayan	Dailekh, Mahabu, Dullu, Bhairabi	Bhagawatimai, Dungeshwor, Naumule	ChamundaBi, Thantikandh

2.2. Nutrition

Background

The National Nutrition Programmed under Department of Health Services has laid the vision as "all Nepali people living with adequate nutrition, food safety and food security for adequate physical, mental and social growth and equitable human capital development and survival" with the mission to improve the overall nutritional status of children, women of child bearing age, pregnant women, and all ages through the control of general malnutrition and the prevention and control of micronutrient deficiency disorders having a broader inter and intra-sectoral collaboration, partnership among different stakeholders and high level of awareness and cooperation of population in general.

Global Nutrition Target by 2025- WHO

- Reduction of the global number of children under five who are stunted by 40 percent
- Reduction of anaemia in women of reproductive age by 50 percent
- Reduction of low birth weight by 30 percent
- No increase in childhood overweight
- Increase the rate of exclusive breastfeeding in the first six months up to at least 50 percent
- Reduce and maintain childhood wasting to less than 5 percent

Objectives

General Objectives

The general objective of the National Nutrition Programmed is to enhance nutritional well being, reduce child and maternal mortality and is to contribute for equitable human development.

Specific Objectives

- To reduce protein-energy malnutrition in children under 5 years of age and reproductive aged wome.
- To reduce the prevalence IDA of anaemia among women and children
- To eliminate iodine deficiency disorders and sustain the elimination
- To reduce the infestation of intestinal worms among children and pregnant women
- To reduce the prevalence of low birth weight
- To improve hosehold food security to ensure that all people can have adequate access, availability and utilization of food needed for healthy life.
- To promote the practice of good dietary habits to improve the nutritional status of all people
- To prevent and control infectious diseases to improve nutritional status and reduce child mortality
- To control the incidence of life-style related diseases (Coronary artery disease, hypertension, tobacco and smoke related diseases, cancer, diabetes, dyslipidaemia, etc)
- To improve health and nutritional status of school children
- To reduce the critical risk of malnutrition and life during exceptionally difficult circumstances
- To strengthen the system for analyzing, monitoring and evaluation the nutrition situation.

Targets

In order to improve the overall nutritional status of children and pregnant women, the national nutrition programmed has set the following targets:

SN	Indicators	Situation in Nepal		SDGs Target (2030) for Nepal
		2011	2016	
1	Reduction in the number of children under-5 who are stunted	40.5%	35.8%	15.0%
2	(a) Reduction fo anemia among WRA	35.0%	40.8%	10.0%
	(b) Reduction of anemia among Children>5	46.2%	52.7%	10.0%
3	Rediction of anemia weight	12.1%	12.3%	<5%
4	Ensure that there is no increase in Childhood overwight	1.4%	1.2%	<1%
5	Omcrease rate of exclusive breastfeeding in the first 5 months	69.6%	66.1%	>90%
6	Redue and maintain childhood wasting	10.9%	9.7%	<5.0%

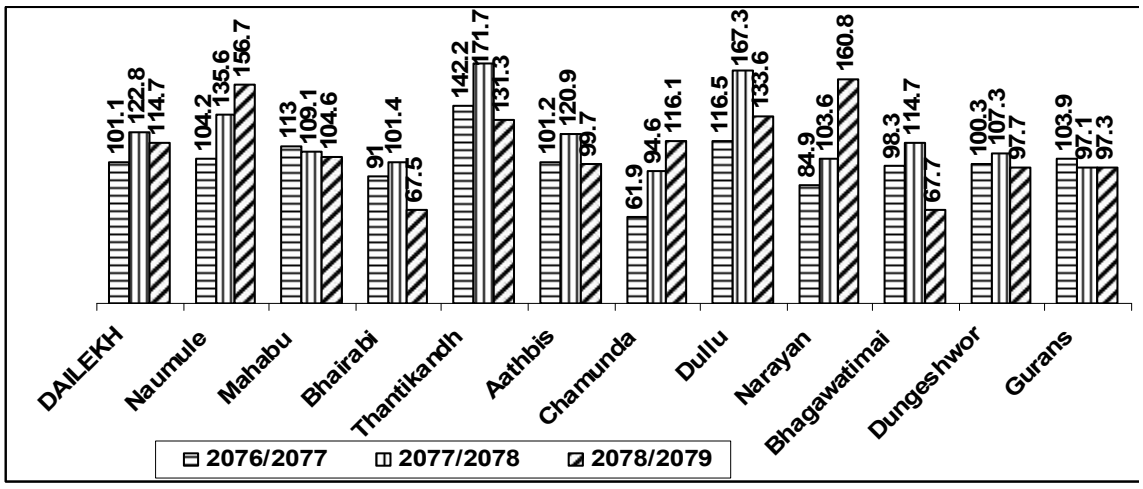
Target Population

All the children under 2 years of age and pregnant women are target population for nutrition programmed.

Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
Percentage of newborns with low birth weight (<2.5kg) among total delivery by HWs	5.6	6	6.2
Percentage of children aged 0-11 months registered for growth monitoring	101.1	122.8	114.7
Percentage of children aged 12-23 months registered for growth monitoring	39.4	44.6	65.7
Percentage of children aged 0- 6 months registered for growth monitoring who were exclusively breastfed for the first six months	71.1	85.1	81.5
Percentage of women who received a 180 day supply of Iron Folic Acid during pregnancy	61.3	75.1	69.1
Percentage of postpartum women who received Vitamin A supplementation	84.8	96.7	77
% of children 12-23 months registered for Growth Monitoring who were Underweight	6.6	4.9	6.2
Average number of visits among children aged 12-23 months registered for growth monitoring[a]	5	4.6	4.4
% of children aged 6-23 months who received 3 cycle (180 Sachets) Baal Vita (MNP)	0.61	2.6	6.9
1st Vitamin A Campaign	82.06	87.57	85.71
2nd Vitamin A Campaign	91.41	89.29	82.03
1st Deworming Campaign	77.50	85.23	81.74
2nd Deworming Campaign	86.19	85.54	79.15

% of children aged 0-11 months registered for growth monitoring



2.3. Community Based Integrated Management of Neonatal and Childhood Illnesses (CB-IMNCI)

Background

Community Based Integrated Management of Neonatal Childhood Illnesses (CB-IMNCI) Programmed is an integrated package of child survival interventions and addresses major childhood killer diseases like Pneumonia, Diarrhea, Malaria, Measles and Malnutrition in 2 months to 5 years children in a holistic way. CBIMCI also includes management of infection, Jaundice, Hypothermia and counseling on breastfeeding for young infants less than 2 months of age. With the implementation of this package children are diagnosed early and treated appropriately for major childhood diseases at the health facility and community level. At the community level FCHVs are the main vehicle of service delivery and also plays key role to increase community participation.

Vision

- Contribute to survival, healthy growth and development of under five years children of Nepal.

Goal

- Improve newborn and child survival and ensure healthy growth and development.

Targets of Nepal Health Sector Strategy (2015-2020)

- Reduction of Under-fiver mortality rate (per 1000 live births) to 28 by 2020
- Reduction of Neonatal mortality rate (per 1000 live births) to 17.5 by 2020

Targets of NENAP

- Reduction of Neonatal mortality rate (per 1000 live births) to 11 by 2035
- Reduction of stillbirths (per 1000 live births) to 13 by 2035

Objectives

- To reduce neonatal morbidity and mortality by promoting essential newborn care services
- To reduce neonatal morbidity and mortality by managing major causes of illness
- To reduce morbidity and mortality by managing major causes of illness among under 5 years children

Strategies

- Quality of care through system strengthening and referral services for specialized care.
- Ensure universal access to health care services for newborn and young infant
- Capacity building of frontline health workers and volunteers
- Increase service utilization through demand generation activities.
- Promote decentralized and evidence-based planning and programming.

Target Population

All the children under 5 years of age are target population for CB-IMNCI programme.

Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
Percentage of newborns applied chlorhexidine (CHX) gel immediately among reported live birth	94.9	95.9	98.2
% of PSBI among registered 0-2 months infant (sick baby)	20.8	18.9	21.2
% of PSBI Cases treated with first dose of gentamycin	76	80.2	88.9
% of PSBI cases received complete dose of Gentamicin	66	70.8	70.9
Incidence of ARI among children under five years (per 1000)	1351.5	1118	1174.4
Incidence of pneumonia among children under five years (per 1000)	175.5	83.2	108.5
Percentage of pneumonia cases treated with antibiotics (HF & ORC)	114	100.7	101.2
Diarrhoea incidence rate among children under five years	930	841.2	779.3
Percentage of children under five years with diarrhea treated with zinc and ORS	94.8	100.4	93.3

2.4. FAMILY PLANING

Background

The main thrust of the National Family Planning Programme is to expand and sustain adequate quality family planning services to communities through the health service network such as hospitals, primary health care (PHC) centers, health posts (HP), primary health care outreach clinics (PHC/ORC) and voluntary surgical contraception (VSC) camps. The policy also aims to encourage public private partnership. Female community health volunteers (FCHVs) are mobilized to promote condom distribution and resupply of oral pills. Awareness on FP is to be increased through various IEC/BCC intervention as well as active involvement of FCHVs and Mothers Groups as envisaged by the revised National Strategy for FCHV programme.

In this regard, family planning services are designed to provide a constellation of contraceptive methods/services that reduce fertility, enhance maternal and neonatal health, child survival and contribute to bringing about a balance in population growth and socio-economic development, resulting in an environment that will help the Nepalese people improve their quality of life.

Objectives

Within the context of reproductive health, the main objectives of the Family Planning Programme are to assist individuals and couples to:

- Space and/or limit their children
- Prevent unwanted pregnancies
- Improve their overall reproductive health

Targets

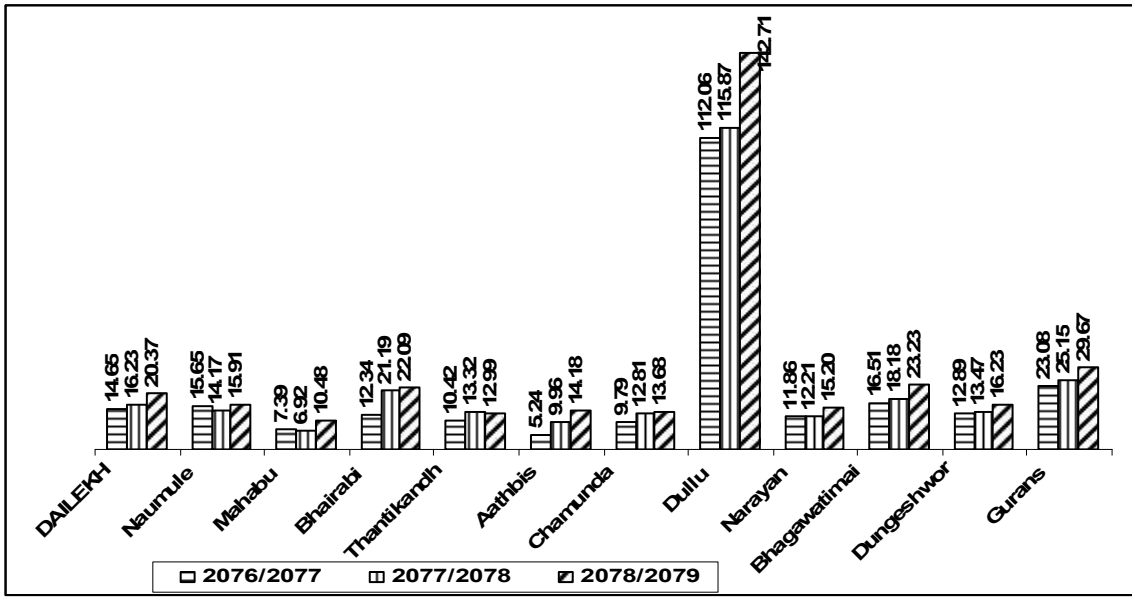
Periodic and long-term targets for the Family Planning Programme have been established as follows:

- To reduce TFR to 2 children per women by 2030
- To increase the Contraceptive Prevalence Rate (CPR) to 75 percent by 2030

Target Population

All the women of reproductive age (Female of age 15-49 years) are target population for family planning programmed.

CPR (MWRA)



2.5. Safe Motherhood

Background

The goal of the National Safe Motherhood Programme is to reduce maternal and neonatal mortalities by addressing factors related to various morbidities, death and disability caused by complications of pregnancy and childbirth. Global evidence shows that all pregnancies are at risk and complications during pregnancy, delivery and the postnatal period are difficult to predict. Experience also shows that three key delays are of critical importance to the outcomes of an obstetric emergency: (i) delay in seeking care, (ii) delay in reaching care and (iii) delay in receiving care. To reduce the risks associated with pregnancy and childbirth and address these delays, three major strategies have been adopted in Nepal:

- Promoting birth preparedness and complication readiness including awareness raising and improving the availability of funds, transport and blood supplies.
- Encouraging for institutional delivery.
- Expansion of 24 hour emergency obstetric care services (basic and comprehensive) at selected public health facilities in every district.

Goal

Safe motherhood and neonatal health aims at improving maternal and neonatal health and survival, especially of the poor and excluded. The main indicators for this include reduction in maternal mortality ratio and neonatal mortality rate.

Objectives

Within the context of reproductive health, the main objectives of the Safe Motherhood Programme are:

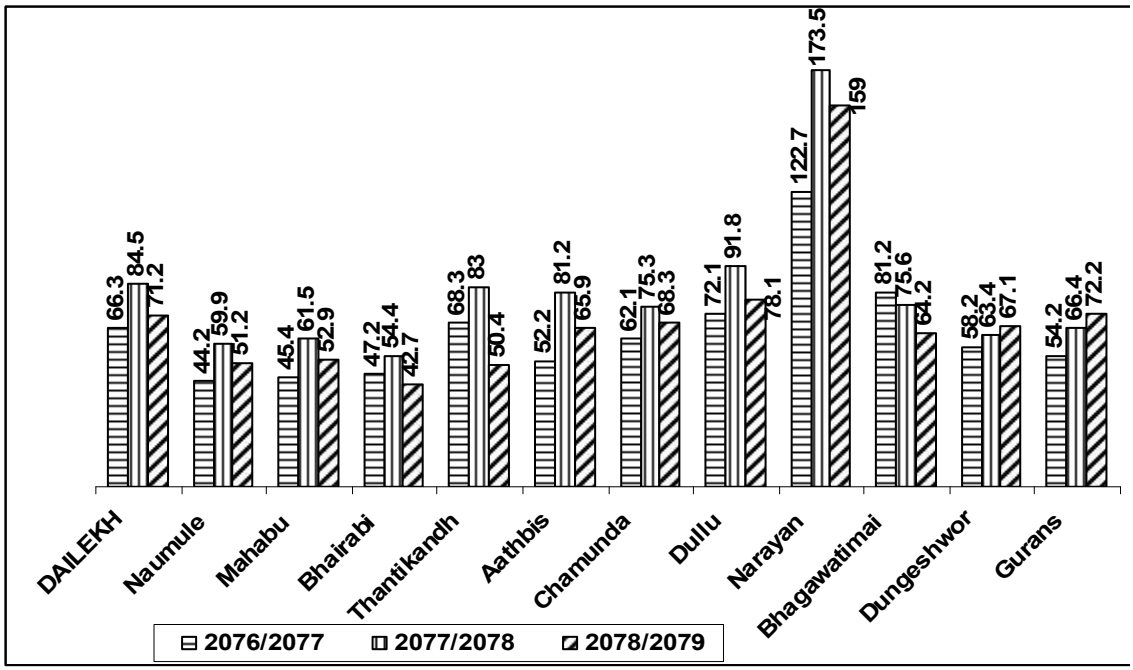
- To reduce maternal and neonatal mortality and morbidity.
- To improve maternal and neonatal health and survival, especially of the poor and excluded.
- To increase the healthy practice and utilization of quality maternal and neonatal health service by poor and excluded.
- To strengthen and expand delivery by SBA, basic and comprehensive obstetric care service including family planning.

Analysis of Achievement

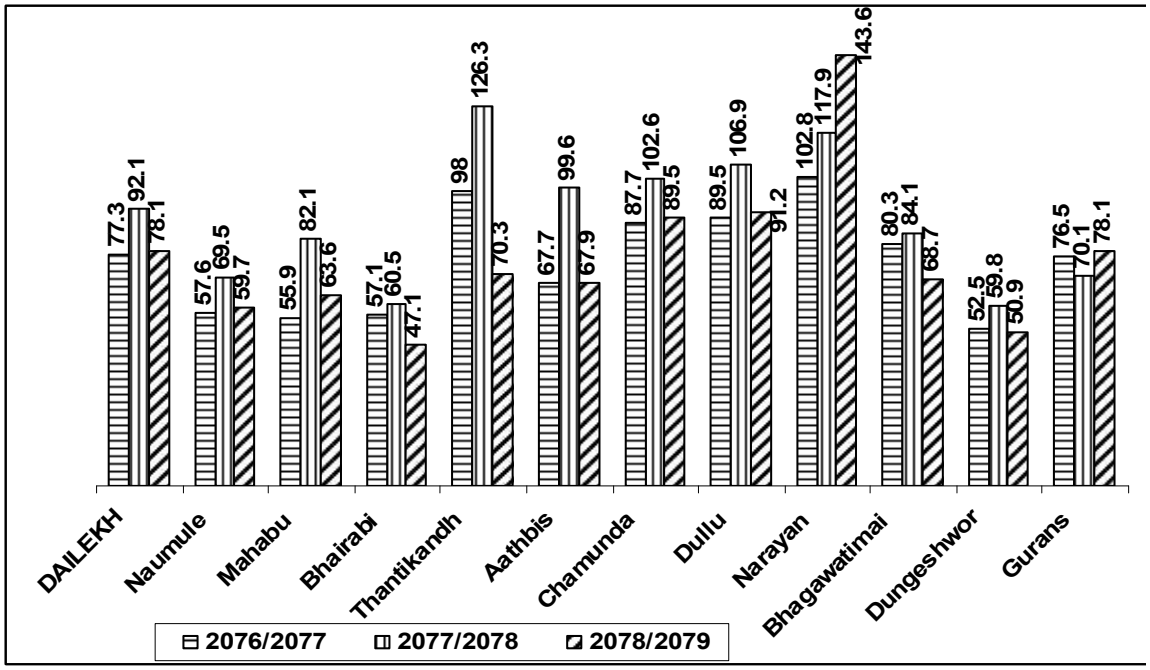
Indicators	2076/077	2077/078	2078/079
Percentage of pregnant women who had at least one ANC checkup	99.7	113.5	100.7
Percentage of pregnant women who had four ANC checkups as per protocol (4th, 6th, 8th and 9th month)	66.3	84.5	71.2
Percentage of institutional deliveries	77.3	92.1	78.1
-Home Delivery-Total Live Birth	604	619	170
Percentage of women who had 3 PNC check-ups as per protocol (1st within 24 hours, 2nd within 72 hours and 3rd within 7 days of delivery)	32.3	55.7	58.3
Percentage of births attended by a Skilled Birth Attendant (SBA)	49.9	64.2	63.2
Met need for emergency obstetric care	5	7.5	2.7
% of women receiving maternity incentives	98.2	101	99
% of women receiving ANC incentives	96.9	100.6	99

Number of women receiving safe abortion service	435	580	485
Total Maternal Deaths	0	1	5
Total Neonatal Deaths	19	22	19
Total Still Birth	74	106	64

% of pregnant women who had four ANC checkups as per protocol (4th, 6th, 8th and 9th month)



% of institutional deliveries



2.6. Female Community Health Volunteer (FCHV)

Background

The major role of the FCHVs is to promote health and healthy behavior of mothers and community people for the promotion of safe motherhood, child health, family planning and other community based health services with the support of health personnel from the HPs and PHCCs. The FCHVs re-supply pills and distribute condoms, ORS packets and vitamin A capsules; and treat pneumonia cases and refer more complicated cases to health institution. Similarly, they also distribute iron tablets to pregnant women in districts with Iron Intensification Programme.

Goal

The goal of FCHV programme is to support the national goal of health through community involvement in public health activities. This includes imparting knowledge and skills for empowerment of women, increasing awareness on health related issues and involvement of local institutions in promoting health care.

Objectives

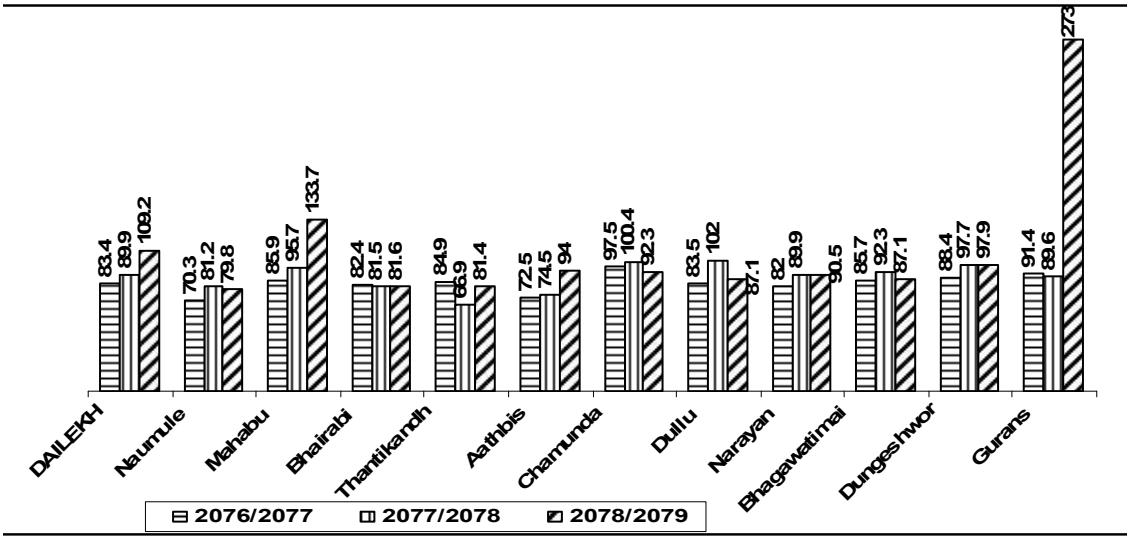
FCHV programme has the following objectives:

- To activate the women for tackling common health problems by imparting relevant knowledge and skills.
- To prepare a pool of self motivated volunteers as a focal person for bridging the health programmers with community.
- To prepare a pool of volunteers to provide services for community based health programmers.
- To increase the participation of community in improving health.
- To develop FCHV as health motivator.
- To increase utilization of health care services through demand creation.

Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
Percentage of Mother groups meeting held	83.5	89.3	89.3
Percentage of postpartum women visited by FCHVs	24.6	29	7.90

% of Mother groups meeting held



2.7. Primary Health Care Outreach Clinic (PHC/ORC)

Background

Primary Health Care Outreach Clinic (PHC/ORC) programmed was established in 1994 (BS 2051) with an aim to improve access to some basic health services including family planning and safe motherhood services for rural households. PHC/ORC clinics are extension of PHCCs, HPs at the community level. The primary responsibility for conducting the PHC outreach clinics lies with AHWs, and ANMs. At PHCC and HP level, ANMs, AHWs are responsible for conducting the PHC outreach services. HA, other health staff of HP/PHCCs also helps in conducting the PHC outreach clinics. Female Community Health Volunteers (FCHVs) and other local NGOs/CBOs support service providers in conducting PHC/ORC clinics and also for recording/reporting and other support activities. AHWs and ANMs provide basic PHC services (FP and ANC services/Health Education/Minor treatment) to a pre-arranged place close to communities on a predetermined day once in a month. According to PHC/ORC strategy, following services are provided by PHC/ORC.

1. Family Planning
2. Safe Motherhood and New Born Care
3. Prevention and Management of Complication of Abortion
4. RTI/STI and Infertility
5. RH Intervention
6. Child Health
7. Minor Treatment
8. Communicable Disease
9. IEC/BCC Activities

3. EPIDEMIOLOGY AND DISEASE CONTROL

3.1. Malaria

Background

The high risk of getting the disease is attributing to the abundance of vector mosquitoes, mobile and vulnerable population, relative inaccessibility of the area, suitable temperature, environmental and socio-economic factors. Currently malaria control activities are carried out All 11 municilipality risk of malaria.

Objectives

The specific objectives of NMSP (2014 -2025, Revised) are as follows:

- Strengthen surveillance and strategic information on malaria for effective decision making.
- Ensure effective coverage of vector control intervention in the targeted malaria risk areas.
- Ensure universal access to quality assured diagnosis and effective treatment for malaria.
- Develop and sustain support from leadership and communities towards malaria elimination.
- Strengthen programmatic technical and managerial capacities towards malaria elimination.

Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
Annual blood examination rate (ABER) of malaria in high risk districts	0.16	0.08	0.13
Percentage of imported cases among positive cases of malaria	100	0	66
Percentage of Plasmodium Falciparum (PF) cases in high risk districts	12.5	0	0
Slide positivity rate (SPR) of malaria in high risk districts	1.7	0	0.81

3.2. Tuberculosis

Background

Tuberculosis (TB) is a major public health problem in Nepal. About 45 percent of the total population is infected with TB, of which 60 percent are adult. Every year, 40,000 people develop active TB, of whom 20,000 have infectious pulmonary disease.

Treatment by Directly Observed Treatment Short course (DOTS) has reduced the number of deaths: however 5,000-7,000 people still die per year from TB. Expansion of this cost effective and highly successful treatment strategy has proven its efficacy in reducing the mortality and morbidity in Nepal.

The Directly Observed Treatment Short Course (DOTS) has been implemented throughout the country since April 2001. NTP has adopted the global End TB Strategy and the achievement of the SDGs as the country's TB control strategy.

Vision:

Nepal free of tuberculosis.

Long term goal:

End the tuberculosis epidemic by 2050.

Short term goal:

Reduce TB incidence by 20% by 2021 compared to 2015 and increase case notifications by a cumulative total of 20,000 from July 2016 to July 2021.

Objectives:

- Increase case notification through improved health facility-based diagnosis.
- Maintain the treatment success rate at 90% of patients (for all forms of TB) through to 2021.
- Provide drug resistance diagnostic services for 50% of persons with presumptive drug resistant TB by 2018 and 100% by 2021 and successfully treat at least 75% of diagnosed drug resistant patients.
- Further expand case finding by engaging the private sector.
- Strengthen community systems for the management, advocacy, support and rights of TB
- patients in order to create an enabling environment to detect and manage TB cases in 60% of
- all districts by 2018 and 100% of districts by 2021.
- Contribute to health system strengthening through TB human resource management, capacity development, financial management, infrastructure, procurement and supply management.
- Develop a comprehensive TB surveillance, monitoring and evaluation system
- Develop a plan to continue NTP services in the aftermath of natural disasters and public health emergencies.

SDG3 global targets:

- By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.

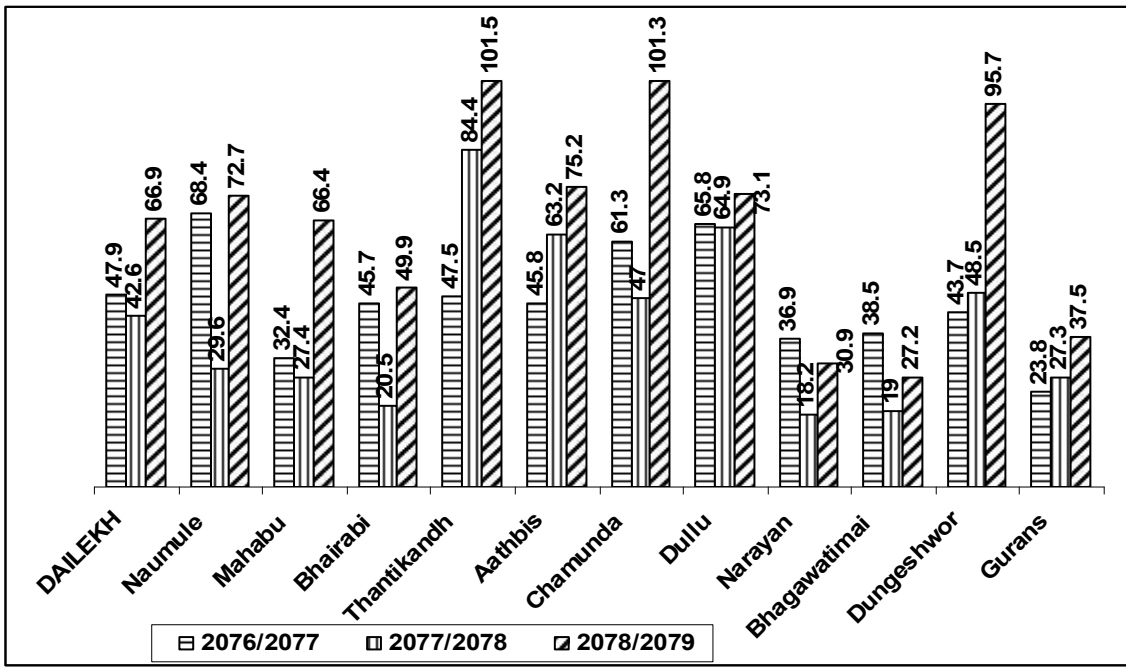
SDG and End TB Strategy related targets:

- Detect 100% of new sputum smear-positive TB cases and cure at least 85% of these cases.
- By 2050, eliminate TB as a public health problem (threshold of <1 case per million population).

Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
TB - Case notification rate	47.9	42.6	66.9
TB - Treatment Success Rate (New and Relapse)	95.2	94.3	92.6
Total TB cases (All form of TB cases)	128	142	170

Case notification rate



3.3. Leprosy

Background

Leprosy has existed in Nepal since immemorial and was recognized as a major public health problem. It has been a priority of the government of Nepal. Thousands of people have been affected by this disease and many of them had to live with physical deformities and disabilities.

Goal

Reduce further the burden of leprosy and to break channel of transmission of leprosy from person to persons by providing quality service to all affected community.

Objectives

- To eliminate leprosy (prevalence rate below 1 per 10,000 population) and further reduce disease burden at district level
- To reduce disability due to leprosy
- To reduce stigma in the community against leprosy
- Provide high quality service for all persons affected by leprosy

Strategies

- Early case detection and prompt treatment of cases
- Enable all general health facilities to diagnose and treat leprosy
- Ensure high MDT treatment completion rate
- Prevent and limit disability by early diagnosis and correct treatment

- Reducing stigma through information, education and advocacy by achieving community empowerment through partnership with media and community
- Sustain quality of leprosy service in the integrated set up.

Analysis of Achievement

Indicators	2076/077	2077/078	2078/079
Incidence of leprosy per 10,000 population	**0.27**	**0.4**	**0.24**
Total Leprosy New cases	**8**	**12**	**6**
Percentage of new leprosy cases presenting with a grade-2 disability	**25**	**0**	**0**

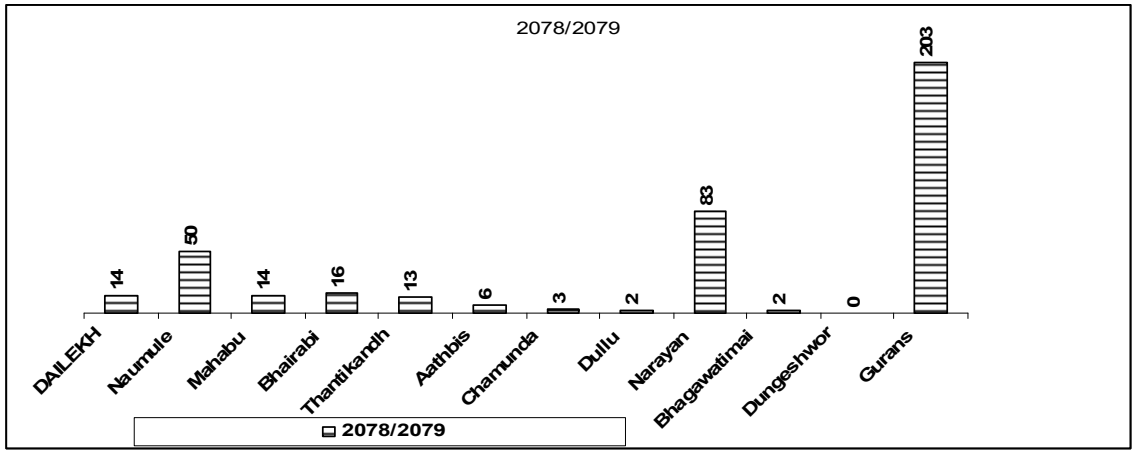
3.4. HIV/AIDS and STI

Background

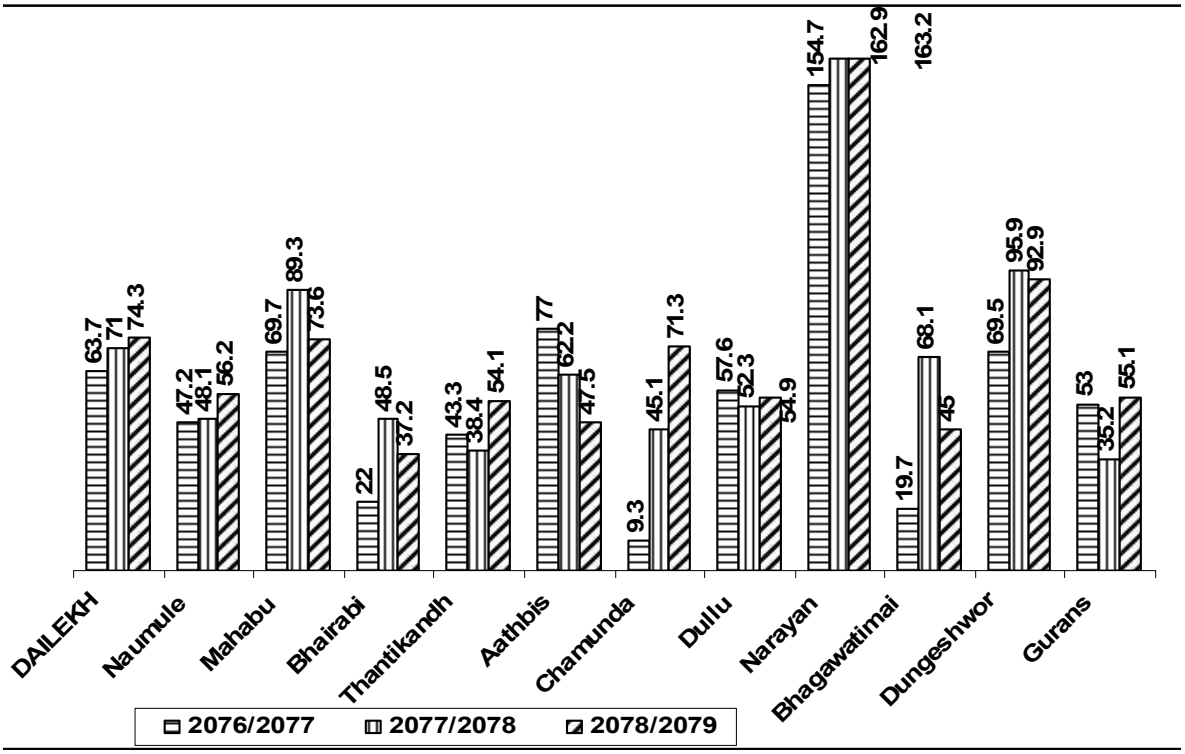
History of Nepal's response against HIV/AIDS began with the launching of first National Prevention and Control Programme in 1988. Nepal started its policy response to the epidemic of HIV through its first national policy on ac1uired immunity deficiency syndrome (AIDS) and Sexually Transmitted diseases (STDs) control, 1995 (2052 BS). Taking the dynamic nature of the epidemic of HIV into consideration, Nepal revisited its first national policy on 1995 and endorsed the latest version: National Policy on HIV and Sexually Transmitted Infections (STIs), 2011. A New National HIV Strategic Plan 2016-2021 has been launched to achieve global goals of 90-90-90 by 2020, 90% of all people living with HIV (PLHIV) will know their HIV status by 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy will have viral suppression.

SDG-3 target related to HIV:
Eliminate HIV, TB and malaria and other tropical diseases, and water borne diseases by 2030.
Dailekh is among top districts in contribution to HIV cases of Nepal. Aathbis, Dullu municipality of dailekh shares for more than half of all cases of the district and is a neighbouring municipality to Accham district which is the district with most cases of HIV in Nepal.

Analysis of Achievement
No. of Persopn Receiving ART



% of pregnant women who tested for HIV at an ANC checkup



3.5. Covid-19 Status till (2079-05-19)

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			म.	पु.	जम्मा	म.	पु.	जम्मा			
१	दै.जि.अस्पताल/ (नारायण न.पा).	६५१७	८८०	१२३३	२११३	८३२	११९३	२०२५	१५७०	४०४	२५०४
२	दुल्लु न.पा.	१५७३	३३	१३७	१७०	३९	१४४	१८३	२४०३	३०५	२६३०
३	चामुण्डाबि. न.पा.	६३७	५	१९	२४	५	२१	२६	१११	४०	१७३८
४	आठबिस न.पा.	९६०	१८	६७	८५	१८	६७	८५	८०	२८	४८८
५	ठाटीकाँध गा.पा.	३७६	३	२८	३१	३	२८	३१	९७	४८	५७१
६	भैरवी गा.पा.	३६६	२	३४	३६	७	४१	४८	२५१	१०३	१८६५
७	महाबु गा.पा.	१३११	२५	१७३	१९८	२४	१७१	१९५	११३	३६	८१९
८	नौमूले गा.पा.	७९२	७	१५०	१५७	५	१४८	१५३	२४३	१३४	२८६
९	भगवतीमाई गा.पा.	३९१	५	२३	२८	३	२१	२४	१०८	४०	२७३
१०	डुङ्गेश्वर गा.पा.	६५८	१०	७२	८२	७	७२	७९	१४०	५२	५७९
११	गुराँस गा.पा.	४३१	१०	३३	४३	११	३४	४५	९५	३५	१४८९
जम्मा		१४०१२	९९८	१९६९	२९६७	९५४	१९४०	२८९४	५२११	१२२५	१३२४२
		म.: ३०९४ पु.:१०९२१							म.:२२७६ पु.: ३११४	म. ५४४ पू.: ५७३	म.:६९३ पु.:१२५४९

4. CURATIVE SERVICES

Background

Government of Nepal is committed to improve the health status of rural and urban people by delivering high quality health services throughout the country. Curative (out-patient, in-patient and emergency) services are highly demanded component of health services by the people. The policy is aimed at providing prompt diagnosis and treatment and referral of cases through the health network from PHC outreach clinics to the specialized hospitals.

Objectives

The overall objectives of curative services is to reduce morbidity, mortality and to provide quality health services by means of early diagnosis, adequate as well as prompt treatment and appropriate referral, if necessary.

Target Group

All patients attending at health facilities.

Dailekh District Hospital Status of the major indicators-2078-79

Indicators	2076/77	2077/78	2078/79
% of Monthly Repoort (HMIS/LMIS)	100	100	100
Number of maternity beds	6	6	6
Infection rate among surgical cases	0.41	0	0
Surgery related death rate	0	0	0
Average number of radiographic images per day	21.7	23.5	25.2
Average number of laboratory tests per day	144.8	149.1	196.9
Average number of Ultrasound per day	11.6	13.1	13.8
Hospital Deaths	7	2	6
Hospital death rate after 48 hours of admission	0.18	0.04	0.04
Hospital death rate within 48 hours of admission	0.07	0.04	0.18
Percentage of inpatients who were referred out	6.6	5.8	4.9
Total Emergency Services	2909	2767	3611
Total Number of Deliveries	531	573	569
Total CAC Services	126	232	211
Total PAC services	255	261	217
Total C/S Delivery	80	73	99
Total Minor Surgery	154	241	157
Total inpatients discharge	2661	2581	2444
Percentage of inpatients who were referred in	1.1	0.46	15.4
Percentage of inpatients who were referred out	6.6	5.8	4.9

Dailekh District Hospital Reporting Status- 2078-079

बार्षिक प्रगती प्रतिवेदन								
उमेर समूह	नयाँ सेवाग्राहीको सँख्या		जम्मा (नयाँ/ पुराना) सेवाग्राही सँख्या		कार्यक्षेत्र भित्र पर्ने निकाय	संचालन/ प्रतिवेदन हुनुपर्ने (संख्या)	संचालन/ प्रतिवेदन भएको (संख्या)	सेवा पाएका जम्मा सेवाग्राहीको संख्या
	म.	पु.	म.	पु.	गाउँघर क्लिनिक	0	0	0
०-९ बर्ष	1099	1462	1175	1534	खोप क्लिनिक	12	12	488
१०-१९ वर्ष	1287	700	1338	753	खोप सेसन	24	24	
२०-५९ बर्ष	7518	2432	8126	2613	म. स्वा. स्व. से.	0	0	0
≥ ६० बर्ष	1240	1087	1345	1222				

Dailekh District Hospital Summary Dataset- 2078-079

Hospital Level Monthly Reporting Form									
Hospital Services					Emergency Services		Number of Beds	Sanctioned	15
Age Group	New Clients Served		Total Clients Served		Total Clients Served			Operational	600
	Female	Male	Female	Male	Female	Male	Total Patients Admitted		2711
0 - 9 Years	1099	1462	1175	1534	315	436	Total Inpatient Days		5616
10 - 19 Years	1287	700	1338	753	289	191			
20 - 59 Years	7518	2432	8126	2613	1076	794	Diagnostic/ Other Services	Unit	Number
≥ 60 Years	1240	1087	1345	1222	263	247	X-ray	Number	4188
							Ultrasonogram (USG)	Number	5057
							Electrocardiogram (ECG)	Number	1294
							Total Laboratory service Provided	Persons	722

Referrals	Referral In	Referred Out		
		Outpatient	In-patient	Emergency
Female	384	273	91	110
Male	33	171	43	169

District Hospital Summary of Indoor Services

A. Inpatient Outcome

Age Group	Recovered/Cured		Not Improved		Referred Out		DOR/LAMA/DAMA		Absconded		Death < 48 Hours		Death ≥ 48 Hours	
	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male
≤ 28 Days	171	229	0	0	7	6	8	2	0	0	1	1	0	0
29 Days - 1 Year	111	165	0	1	6	9	20	11	0	1	0	0	0	1
01 - 04 Years	75	134	0	0	2	4	31	15	0	0	0	0	0	0
05 - 14 years	38	47	0	0	3	4	10	6	0	0	0	0	0	0
15 - 19 Years	124	16	0	0	4	1	4	7	0	0	0	0	0	0
20 - 29 Years	499	41	1	0	24	2	21	31	4	0	1	0	0	0
30 - 39 Years	125	28	0	0	9	1	3	16	0	1	0	0	0	0
40 - 49 Years	32	22	0	0	5	1	7	7	0	0	0	0	0	0
50 - 59 Years	25	22	0	0	3	2	8	7	0	0	0	1	0	0
≥ 60 Years	110	59	0	1	7	6	19	17	0	0	0	1	0	0

Neonate Form		Gestational Weeks			
		22 - 27	28 - 36	37 - 41	≥ 42
Primi		1	23	233	26
Multi		3	11	206	15
Grand Multi		0	3	28	6
Maternal Age(Years)	<20	0	12	83	5
	20-34	3	22	362	35
	>=35	0	2	9	4

Type of Surgeries		Number of Surgeries		Post Operative Infection
		Female	Male	
Major		71	1	
Minor	Outpatient	3	3	
	Inpatient	3	1	
	Emergency	63	84	
Plaster		100	109	

Death Information		Female	Male
Hospital Death	Early Neonatal	0	0
	Late Neonatal	0	
	Maternal (All)	0	
	Post-operative*	0	0
	Other		
Brought Dead		5	8
Postmortem Done		24	33

Free health service summary		
Cost Exemption	No. of Patients	Total Exempted cost(NRS)
Partially	181	133908
Completely	60	80599

Free Health Services and Social Security Programme							
Patients at	Ultra Poor/ Poor	Helpless/ Destitute	Disabled	Sr. Citizens > 60 Years	FCHV	Gender Based Violence	Others
Outpatients	54	62	8	85	14	5	1
Inpatients	4	4	3	2	0	0	0
Emergency	2	0	0	5	0	0	16
Referred Out	42	34	1	37	0	1	13

5. SUPPORTING PROGRAMS

5.1. Heatlh education, information and communication

GOAL

The goal of the NHEICC program is to contribute to attaining the district health program goals and objectives by providing support for all health services and programs.

OBJECTIVES

The general objective of the NHEICC program is to raise the health awareness of the people as a means to promote positive health status among all citizen and to prevent disease through the efforts of the people themselves and through full utilization of available resources. The specific objectives of the IEC/BCC programs are to:

- Increase awareness and knowledge of the people on health issues and promote desired behaviour change on EHCS and beyond.
- Create demand for quality EHCS among all castes and ethnic groups, disadvantaged and hard to reach populations.
- Advocate for required resources (human and financial) and capacity development for effective communication programs and interventions to achieve the NHSS goals.
- Increase access to new information and technology on health programs.
- Increase positive attitudes towards health care.
- Increase healthy behaviour.
- Increase participation of the people in the health intervention programs at all levels of health services.
- Intensify and strengthen action against tobacco use (in all forms), excessive use of alcohol, unhealthy diets and physical inactivity.
- Promote environmental health, hygiene and sanitation.
- Control the tobacco and alcohol and Non-Communicable Diseases(NCDs)

5.2. Logistic Management

Objective

To plan and carry out the logistics activities for the uninterrupted supply of essential medicines, vaccines, contraceptives, equipment, HMIS/LMIS forms and allied commodities (including repair and maintenance of bio-medical equipment) for the efficient delivery of healthcare services from the health institutions of government in the district.

5.3. Management

Objectives

- Monitor program implementation status and carryout periodic performance reviews
- Support quality improvement in the health sector
- Manage Health Management Information System (HMIS)
- Manage and Co-ordinate for construction and maintenance of buildings and other infrastructures of Health Institutions.
- Process for approval of establishment of private and non-government health institutions
- Make arrangements for capacity building of human resources in public health management Division processes documents for approval to private health facilities.

6. DEVELOPMENT PARTNERS IN DAILEKH DISTRICT

Strengthening System for Better Health (SSBH) Activity, Dailekh Achievements (FY 2078/79)

USAID's Strengthening Systems for Better Health Activity (SSBH) is a five-year (January 2018 to January 2023) program designed to support the government of Nepal in their efforts to improve health outcomes, particularly for the country's most marginalized and disadvantaged groups. USAID, in collaboration with the Government of Nepal, designed the activity to advance Nepal's health gains, while addressing critical barriers to sustainable, equitable delivery of quality services. SSBH leverages the catalytic potential of federalism to improve health governance and health systems.

Improvements in health outcomes will be achieved by improving access to and quality of maternal, newborn and child health and family planning (MNCH/FP) services, with special focus on newborn care. The Activity is also strengthening data driven planning and governance of the decentralized health system, which in turn will increase utilization of equitable, accountable, and quality health services. SSBH is implemented in all 79 municipalities of Karnali Province and in 59 municipalities in Bardiya, Banke, Dang, Kapilvastu, Rupandehi and Nawalparasi districts of Lumbini province. It has three major outcomes:

1. Improved access to and utilization of equitable health care services.
2. Improved quality of health services at facility and community level.
3. Improved health system governance, within the context of federalism.

In this regard, SSBH has been supporting GoN health system in Dailekh since 2018, the beginning of the project. It has been working in the following sub results under the three outcomes mentioned above.

Sub-Result 1.1: Conduct onsite coaching and mentoring at HF level.
Sub-Result 1.2: Increased Utilization of Services by Addressing Social, Cultural, and Financial Barriers
Sub-Result 2.1: Quality Approaches Further Developed, Strengthened, and Institutionalized
Sub-Result 2.2: Quality Services Delivered by Facilities and Providers in the Public and Private Sectors.
Sub-Result 2.3: Improved Patient Experience of Care
Sub-Result 3.1: Improved Governance and Accountability at Subnational Levels
Sub-Result 3.2: Annual Planning and Budgeting Systems Established and/or Strengthened at the Provincial and Municipal Levels
Sub-Result 3.3: Strengthen Management and Performance Improvement Processes
Sub-Result 4.1: Private Sector Engagement
Sub-Result 4.2: Gender Equality and Social Inclusion
Sub-Result 4.3: Data-driven and Evidence-based Programming

After accomplishing the activities mentioned above, we seek to see the following results in our project area: -

1. Significant increase in the number of health facilities in targeted geographical areas that offer a full range of high quality, client centered, health services particularly the MNCH services.

2. Reduce financial and social barriers to accessing health care, including functional referral mechanism to appropriate in public and/or private facilities.
3. Expanded and improved community outreach to enhance coverage and reach priority services.
4. Improved capacity of managers and providers to address quality challenges through institutionalized system for evidence-driven quality improvement.
5. Engaged facility management teams that routinely incorporate community input on service availability and quality into planning and budget execution process.
6. Empowered communities that demand quality services and hold facilities HFOMC and municipalities accountable and
7. A stronger more resilient health system that addresses the root causes of underperformance, uses data to drive management decisions towards improved access to and use of MNCH/FP services.

In the fiscal year 2078/79, we have supported technically and financially in carrying out the following specific activities in Dailekh district.

The major activities accomplished in the fiscal year 2078/79 by SSBH were as follows: -

1. Supported the annual health review meetings in all 11 municipalities.
2. Supported the HSO to organize District level Annual Health Review Meeting.
3. Supported in organizing HFOMC orientation training in 19 HFs.
4. Supported the municipalities to formulate Health Act, Health Policy, and guidelines.
5. Conducted clinical onsite coaching and mentoring in 61 HFs.
6. RMNCAH Guideline reorientation has been conducted in 7 Municipalities out of 11 Municipalities and covered 35 health facilities out of 58.
7. Supported the municipalities in data entry, correction, and analysis in DHIS-2.
8. Supported Dullu Municipality to organize HMIS training.
9. Supported the staff of the HFs to participate DHIS-2 training.
10. Supported three nursing staff of Thatikandh, Aathbis, Gurans and Bhagabatimai to participate in Implant training.
11. Conducted RDQA in 18 HFs.
12. Conducted onsite coaching and mentoring for HMIS/DHIS -2/LMIS in the HFs.
13. Supported to update the web-based health profile of all municipalities.
14. Supported in assessing private sector and sensitized them for mainstreaming into health care delivery system.
15. Supported the municipalities for planning and budgeting for FY 2078/79.
16. Supported in organizing social development committee orientation in Aathbis UM, Chamunda Bindrasaini UM and Thatikandh RM.
17. Supported in organizing policy consultation meeting in Chamunda Bindrasaini UM and Bhagwatimai RM.
18. Initiated clients exit interview in Seriwada HF of Gurans RM.
19. Supported all municipalities in preparation of annual workplan and budget of FY 2078/79.
20. Supported in preparation of operational plan of FY 2078/79.
21. Supported in developing health guideline of Narayan UM by organizing meeting with social development committee.

22.HFOMC members are sensitized and empowered through HFOMC training and initiated some exemplary practices such as supporting to build placenta pit in Bindhawasini HF of Narayan Municipality, involvement on cleaning surroundings of Lakandara PHC of

Thatikandh Rural Municipalities and made decision in HFOMC meeting on provision of water in Tolijaisi HF jointly to be supported by HFOMC and school to total amount of NPR 30,000.00

23. Supported annual workplan and budget based on seven steps planning according to government guideline helped in conceptual clarity among chief of local government and sensitized on investment in health sector.

24. Through social development orientation, it has been effectively established health as a development agenda and need of multisectoral collaboration and coordination in overall quality service delivery.

25. In systematically maintaining health commodities, basic health logistic management, procurement and forecasting training were provided to focal person of store, chief administrative officers, accountant including chief of local government of all municipalities.

26. GESI longer and shorter version trainings were provided to major actors of municipalities in mainstreaming GESI into policy, plan, budgeting, implementation, monitoring and evaluation.

Technical Support in Health Emergency Response (HER) component

- Health waste care management (HCWM) Training in all Palika's Health coordinator, Health workers Nursing staffs and Support staffs (222) of the Health facilities (60)
- Pediatric Essential Critical Care Training (PECCT)-4 Doctors, 4 Nurses
- Infection Prevention and Control (IPC) Training to -60 HFs, 134 Health workers and 70 Support staffs
- IPC training related health equipment to all health facilities of the Dailekh district
- COVID 19 Sample collection, storage & transportation to Lab health worker-24
- **Technical, Financial and Equipment Support on RT-PCR Lab & HFs strengthening Such as**

    - ✓ Buckets 3 colors (Red-Blue-Green- 12Pcs set) - 56 Set
    - ✓ PPE Sets and Cleaning Sets - 56 Set
    - ✓ Mope Metal Stick - 56 Set
    - ✓ Needle Cutter - 18 Pkt+ 1 PKt (1 carton contains- 6pcs =108 Pcs+ 1 carton= 4pcs= 112Pcs)
    - ✓ (Temperature regulated micro centrifuge,
    - ✓ Spinner, Laminar Flow,
    - ✓ Biosafety Cabinet,
    - ✓ Vortex,
    - ✓ Power back-up unit ,
    - ✓ 20° C Freezer , 80° C Freezer,
    - ✓ Oxygen Cylinder,
    - ✓ Infusion Pump,
    - ✓ Fully automatic RNA extraction machine with reagents,
    - ✓ Oxygen Concentrator

- Support on Vaccination against COVID 19
- Support on Preparing and submitting the Health Emergency Disaster Preparedness Plan (HE&DPRP) to respective Rural/Municipal of the district
- Support on Periodic COVID19 performance Review
- Support on daily recording and reporting update on COVID19 of District

सुआहारा-२ (एकिकृत पोषण) कार्यक्रम, दैलेख
बार्षिक प्रगति प्रतिवेदन (आ.व २०७८/७९)

परिचय :

कार्यक्रमको लक्ष्य : सुनौलो १००० दिनका आमा, बच्चा र किशोरीहरुको पोषण स्थितिमा सुधार ल्याउने ।

कार्यक्रमको उद्देश्यहरु :

१) घरायसी पोषण, खानेपानी तथा सरसफाई र स्वास्थ्य अभ्यासहरुमा सुधार गर्ने ।

२) १००० दिने महिला र २ वर्षमुनिका बालबालिकाकाहरूको गुणस्तरीय पोषण तथा स्वास्थ्य सेवाको उपयोगमा अभिवृद्धि गर्ने ।

३) घरधुरीको विविध पोषणयुक्त खानेकुराहरुमा पहुँच अभिवृद्धि गर्ने र

४) सबलीकृत स्थानीय सुशासन मार्फत बहुक्षेत्रीय पोषण योजना दोस्रोको प्रभावकारी कार्यान्वयनमा सुदृढिकरण गर्ने ।

स्थानिय सेवा प्रदायक सस्था : एभरेष्ट क्लव (Everest Club-EC) दैलेख ।

साझेदार संस्था : HKI-Nepal, CARE-Nepal, FHI360, ENPHO, DB-EAN, NTAG आदि ।

बजेट खर्च भएको क्रियाकलापहरुको प्रगति विवरण :

क्र. स	क्रियाकलाप	एकाई	बार्षिक लक्ष्य	बार्षिक प्रगति	लभान्वित वर्ग			बजेट खर्च (रु)
					पुरुष	महिला	जम्मा	
नतिजा-१ : घरायसी पोषण, खानेपानी तथा सरसफाई र स्वास्थ्य सुधार								
१	महिला सामुदायीक स्वास्थ्य स्वयम् सेविकाहरुलाई ३ दिने वृहत पोषण प्याकेज तालिम सञ्चालन	जना	७७	७६	–	७६	७६	१,८३,८८८
२	मध्यम शिघ्र कुपोषित बालबालिकाहरुको पहिचान तथा व्यवस्थापनका लागि परामर्श	जना	२१७	२१७	११९	९८	२१७	८६,८००
३	सहयोगी सहजकर्ताहरुलाई १ दिने पुनर्ताजकीय तालिम सञ्चालन	जना	५०	५०	–	५०	५०	३२,४३५
४	स्वास्थ्य आमा समुहमा पोषिलो खाना (Food Demo) को प्रदर्शनी कार्यक्रम सञ्चालन	वटा	४६०	४६२	८३८५	३८५	८७७०	२,३०,९८०
५	जीवनका महत्वपुर्ण अवसरहरु (KLEs) मनाउने	वटा	२३००	२३०५	१३०४१	१८५६	१४८९७	४५९४००
६	पालिका स्तरीय पोषण कार्यक्रमको समिक्षा तथा कार्ययोजना तयारी	पटक	२	२	११	४१	५२	७८,०६०
७	पोषण कर्नर स्थापना, पोषण सम्बन्धि राष्ट्रिय दिवस तथा सप्ताह र असल खानपान सम्बन्धी गतिविधिहरु संचालनमा सहयोग	पटक	१	१	–	–	–	६४,६५५
८	स्वास्थ्य संस्थामा खानेपानी, सरसफाई र स्वच्छता सम्बन्धीत सेवा सुविधाहरुमा सहयोग	स्वा संस्था	१२	१२	६२	६७	१२९	९६,२१५
९	स्वास्थ्य संस्थामा खानेपानी, सरसफाई तथा स्वच्छता सम्बन्धीत प्राप्त उपलब्धीहरु बारेमा छलफल तथा अन्तरक्रिया	स्वा संस्था	१५	१५	८३	७६	१५९	३५,७६५
१०	पूर्ण सरसफाई अभियानलाई बढावा दिन पालिकासँग समन्वय र पैरवी	पटक	२	२	८	३२	४०	३०,३४५

क्र. स	क्रियाकलाप	एकाई	बार्षिक लक्ष्य	बार्षिक प्रगति	लभान्वित वर्ग			बजेट खर्च (रु)
					पुरुष	महिला	जम्मा	
११	पानी शद्धिकरण र हातधुने व्यवहारमा सुधार गर्न स्थानीय सरकारसँग समन्वय र पैरवी	पटक	१	१	४	१०	१४	१८,२४५
१२	खानेपानी सरसफाई तथा स्वच्छता सम्बन्धी दिवस तथा अभियानमा सहयोग	पटक	१	१	–	–	–	६,७२०
नतिजा-२ : महिला तथा बालबालिकामा गुणस्तरीय पोषण तथा स्वास्थ्य सेवाहरूको उपभोग दरमा बृद्धि गर्ने								
१	MAM/OTCs/NRH का प्रमुख र फोकल व्यक्तिहरुसँग सेवा सुदृढ गर्न समिक्षा बैठक	पटक	२	२	३२	२४	५६	३,०३,४१७
२	पोषण कार्यक्रमको प्रशिक्षकहरु (Coaches) तयार गर्नको लागि २ दिने अभिमुखिकरण गोष्ठी सञ्चालन	पटक	१	१	६	१२	१८	९९,८२५
३	स्वास्थ्य संस्थाहरुमा MIYCN/FP, IMAM, CB-IMNCI, recording & reporting, equipment status आदिको सुधारका लागि Onsite coaching कार्यक्रम सञ्चालन	स्वा संस्था	३०	३०	२२४	७७	२०१	१,१८,७८०
४	पोषण तथा स्वास्थ्य सम्बन्धी अभिलेख तथा प्रतिवेदनको गुणस्तर सुधारको लागि चस्तब कार्यक्रम सञ्चालन	स्वा संस्था	१२	१२	६५	४२	१०७	३३,१३०
५	स्वास्थ्य संस्थाहरुमा सामुदायिक स्वास्थ्य प्राप्ताङ्क बोर्ड (CHSB) को समिक्षा तथा अनुगमन कार्यक्रम सञ्चालन	स्वा संस्था	७	७	७८	१०	८८	९०,००५
नतिजा-३ : महिला तथा बालबालिकाको पोषणयुक्त र विविध खानेकुराहरूको पहुँचमा सुधार गर्ने								
१	कृषि र पशु सेवा प्राविधिकहरुका लागि पोषण संवेदनशील कृषि कार्यक्रम सम्वन्धि २ दिने तालिम सञ्चालन	पटक	१	१	१	२०	२१	१,७८,९९३
२	ग्रामिण नमुना कृषक, स्थानिय स्रोत व्यक्ति तथा १००० दिनका आमालाई बिउ बितरण	घरधुरी	१४८४	१४८४	१४७२	१२	१४८४	१५,०००
३	ग्रामिण नमूना कृषक सञ्जाल बैठक सञ्चालन	बैठक	२	२	६	२२	२८	४५,३१०
४	उत्थानशील खाद्य प्रणाली साथै जिविकोपार्जनका लागि जलवायु मैत्री कृषि प्रविधि र अभ्यास सम्वन्धि अभिमुखिकरण र प्रर्वद्धनका लागि सहयोग	पटक	१	१	३	२१	२४	१,५४,६२५
नतिजा-४ : स्थानीय तहमा सुशासन सुदृढीकरण गर्दै बहुक्षेत्रीय पोषण योजनालाई विस्तार गर्ने								
१	पालिका स्तरीय पोषण तथा खाद्य सुरक्षा निर्देशक समितिको बैठक संचालन गर्न सहयोग	बैठक	७	३	२२	४४	६६	७३,१२०
२	पोषणमैत्री स्थानीय शासन अभियान र पोषणमैत्री स्वास्थ्य संस्था घोषणा	पटक	१	१	९	१६	२५	३५,०००

क्र. स	क्रियाकलाप	एकाई	बार्षिक लक्ष्य	बार्षिक प्रगति	लभान्वित वर्ग			बजेट खर्च (रु)
					पुरुष	महिला	जम्मा	
	कार्यक्रममा सहयोग							
किशोरकिशोरी लक्षित एककिकृत कार्यक्रम								
१	SHN र किशोरी IFA वितरण सम्बन्धि १ दिने समिक्षा तथा योजना तर्जुमा कार्यक्रम सञ्चालन	पालिका	११	११	१४१	३१५	४५६	५,०२,५९३
लैङ्गिक समानता तथा समाजिक समाबेशीकरण								
१	GESI Champions को नेतृत्वको समिक्षा बैठक	जना	१९	१७	–	१७	१७	१६,५००
२	महिला हिंसा विरुद्धको १६ दिने अभियान र अन्तर्राष्ट्रिय महिला दिवस मनाउनमा सहयोग	पटक	१	१	–	–	–	२०,०००
कोभिड १९ विरुद्दको खोप अभियानमा सहयोग								
१	कर्मचारी अभिमुखीकरण कार्यक्रम सञ्चालन	पटक	१	१	५	५	१०	३३,७३६
२	पालिका स्तरीय १ दिने परामर्श बैठक सञ्चालन	पालिका	११	११	७८	१९२	२७०	३,७२,६५७
३	स्वा. संस्थामा FCHVs को अन्तरक्रिया कार्यक्रम	पटक	६०	७२	८९९	३९	९३८	५,७०,९७९
४	वडा/समुदाय स्तरीय १ दिने अन्तरक्रिया कार्यक्रम	पटक	६०	६१	१३०३	३९७	१७००	३,०३,९७०
५	पालिका फोकल व्यक्तिका लागि DHIS2 र QR Code सम्बन्धि Booster Session तालिम सञ्चालन	पटक	१	१	२	१३	१५	६०,१४०
६	कभरेज बढाउन FCHVs परिचालनमा सहयोग	जना	८२१	८२१	–	८२१	८२१	९,७१,६००

बजेट खर्च नभएको क्रियाकलापहरुको प्रगति विवरण :

क्र. स	क्रियाकलाप	बार्षिक लक्ष्य	बार्षिक प्रगति	क्र. स	क्रियाकलाप	बार्षिक लक्ष्य	बार्षिक प्रगति
क) घरधुरी तहमा							
१	१००० दिने आमाको घरभेट र परामर्श	३४८०	**३५८९**	१४	FCHVs सँग हात घुने र पानी शुदिकरण गर्ने बिधि बारे छलफल	४१०	**४४७**
२	१००० दिने घरधुरीमा टेलिफोन मार्फत परामर्श गरेको	६९६०	**६८३४**	१५	६ देखि ५९ महिनाको बच्चाहरुको पाखुराको मापन गरेको	६९००	**५१९२**
३	ग्रामिण नमुना कृषकको अनुगमन चेकलिष्टबाट फलो अप गरेको	१२१	**७९**	१६	कडा शीघ्र कुपोषित बच्चाको जम्मा संख्या	छैन	**४४**
४	ग्रामिण नमुना कृषकलाई टेलिफोन मार्फत परामर्श गरेको	२१६	**२९२**	१७	मध्यम कुपोषित बच्चाको संख्या	छैन	**४८९**
५	कृषि गुरु एर्पको डाउनलोड र प्रर्वधन	छैन	**३१५**	१८	मध्यम कुपोषित बच्चा फलोअप	४८९	**२१९**
ख) समुदाय तहमा				**ग) पालिका र वडा तहमा**			
१	FCHVs सँग घरभेट वा टेलिफोन परामर्श गरेको	८२१	**८२१**	१	वडा स्तरिय पोषण समितिको बैठक सञ्चालनमा सहयोग	३३	**२९**

क्र. स	क्रियाकलाप	बार्षिक लक्ष्य	बार्षिक प्रगति	क्र. स	क्रियाकलाप	बार्षिक लक्ष्य	बार्षिक प्रगति
२	HMGs बैठक सञ्चालनमा सहयोग	८२१	**८१०**	२	स्वास्थ्य शाखासँग समन्वय	२७६	**३९६**
३	नयाँ गर्भवती महिलाको पहिचान	छैन	**१४७०**	३	कृषि र पशु शाखासँग समन्वय	२७६	**२२७**
४	२ वर्षमुनिका नयाँ बच्चा पहिचान	छैन	**१८७५**	४	महिला बाल शाखासँग समन्वय	१३२	**९९**
५	नयाँ १००० दिनका आमा पहिचान गरी सहयोग पद्दतिमा ल्याएको	छैन	**२२४४**	५	अण्डाको विक्रि वितरणमा पहल र प्रबर्धन गरेको पसलहरुको संख्या	४४	**२१२**
६	सहयोगी सहजकर्तासंग अन्तरक्रिया	५०	**५०**	**घ) प्रेषित गरिएको अवस्था**			
७	HMGs समुहको सदस्यलाई भेटेको	छैन	**२६२४**	१	कडा शीघ्र कुपोषित बच्चा	छैन	**२६**
८	खोप केन्द्र सञ्चालनमा सहयोग गरेको	५७६	**४७८**	२	मध्यम कुपोषित बच्चाको संख्या	छैन	**१४६**
९	गाउँघर क्लिनिक सञ्चालन सहयोग	५५२	**४८५**	३	झाडापखाला लागेको बच्चा	छैन	**६६**
१०	स्वास्थ्य संस्था भेट तथा सहयोग गरेको	५५२	**५०२**	४	निमोनिया समस्या भएका बच्चा	छैन	**४०**
११	FCHVs लाई वासको अनुशिक्षण	८२१	**७१२**	५	ज्वरोबाट ग्रसित भएका बच्चा	छैन	**३०**
१२	जेसी च्याम्पियनको फलोअप/कोचिङ	१९	**१९**	६	कम तौल भएका बच्चाको संख्या	छैन	**४२**
१३	राष्ट्रिय भिटामिन ए अभियान सञ्चालनमा सहयोग	२	**२**	७	खतरा लक्षण भएका गर्भवतीको जम्मा संख्या	छैन	**८**

वित्तीय प्रगति : जम्मा स्वीकृत बजेट रु. १,६३,८२,०३७ र जम्मा बजेट खर्च : रु. १,५६,०१,०९८ (९५%)

कृतज्ञता : जिल्ला समन्वय समिति, स्वास्थ्य सेवा कार्यालय, ११ वटै गाउँ/नगरपालिका, स्वास्थ्यकर्मी, महिला सामुदायीक स्वास्थ्य स्वयम् सेविका, साझेदार संघ/संस्थाहरु र सुआहारा-२ केन्द्रिय कार्यालय/हेलन केलर इन्टरनेशनल, ललितपुर

प्रतिवेदक : ईन्द्र आउजी, बरिष्ठ कार्यक्रम संयोजक/सुआहारा-२ कार्यक्रम सबअफिस, दैलेख

Health and Hygiene Activity
SWACHCHHATA, Dailekh
August 22, 2022 – August 21, 2024

1. Background

The USAID-funded five-year (2016-2024) Health Hygiene Activity (HHA), called *Swachchhata* in Nepali, aims to contribute to Nepal's Country Development Cooperation Strategy goal of a healthier and well-nourished population. With the overall purpose of improving community health status by improved integration of hygiene in health services, the Project utilizes an integrated approach with a dual focus on improving quality of health service delivery and hygiene and is implemented jointly by SNV USA with technical support from a private consulting firm Sustainable Infrastructure Development Foundation (SIDeF). The Project's target areas are seven districts, 6 of which lie in Karnali Province. These comprise of one mountain district, Dolpa; and three 5 districts, Dailekh, Surkhet, Jajarkot, Salyan, and the western part of the previous Rukum district (West Rukum). The eastern part of the previous Rukum district (East Rukum) now lies in Lumbini province and is administratively a separate district.

According to the project's Intermittent Results (IRs), Swachchhata will have new or improved small scale safe drinking water with maintenance systems, and functional sanitation systems that are sensitive to people with special needs, such as pregnant women and people with disabilities. In addition to the infrastructure investments in these health facilities, the Project will work extensively with all stakeholders at the village/HF, RM/M, and sub-national levels to build community ownership; strengthen governance structures; and establish a solid base for project sustainability. *Swachchhata* will provide a series of intensive trainings, which target health workers and management staff at the health facilities along with members of various community-based committees, covering a range of topics including proper facility maintenance procedures; systems development for sanitation, hygiene and IP at the facilities; and the development of best practices for effective and consistent engagement in BCC.

As of August 2022, the activities have been awarded 2 Years extension (August 22, 2022, to August 21, 2024). The extension is applied to 50 additional health facilities in Dailekh and Surkhet.

2. General Introduction

Funding Agency: USAID/Nepal

Implementing Partners: DevWorks International (SNVUSA) and technical support from private consulting firm- Sustainable Infrastructure Development Foundation (SIDeF).

Project Duration: 2 years until August 2022

Purpose: To improve community health status by improved integration of hygiene in health service delivery.

Intermediate result:

1. Improved quality of health service delivery
2. Improved hygiene practices

3. Key achievement of project in Dailekh (Feb 2021-Aug 2022)

- WASH Infrastructure Construction and Improvements works in 15 HFs of Dailekh district. Namely, Awalparajul, Dandaparajul, Seri, Jaganath, Chauratha, Rawatkot, Bhairikalikathum, Badalamji, Malika, Kalbhairab, Sattala, Sigaudi, Tilepata, Rakamkarnali and Pipalkot Health Post.
- Conducted 2 days Site Supervisor Training, 5 days VMW Training and 2 days Standard Operating Procedure (SOP) Training for sustainable development of constructed WASH Infrastructure in the Health Post. Training was focused to Health Facility Operation and Management Committee (HFOMC), Water User and Sanitation Committee (WUSCs) member and support staff of above mentioned 15 HF.
- Provided 5 days Infection Prevention/Provider Behavior Change Communication (IP/PBCC) TOT in district level to participation with HF In-charge, ANM/AHW and RM/M Health Coordinator in 25 HFs of Dailekh.
- Provided 2 days Whole-site Orientation on Infection Prevention/Provider Behavior Change Communication (IP/PBCC) in 25 HFs HFOMC member, Health Workers, and Support staff.
- IP material, WASH hoarding board, Soap Poster, and WASH Lamp-shade distribution in 25 HFs of Dailekh.
- Provided 5 days training on community WASH-BCC to HF In-charge and AHW/ANM in 15 HFs of Dailekh.
- Provided 2 days training on community WASH-BCC to FCHVs in 15 HFs of Dailekh.
- Support to conduct HFOMC meetings in WASH construction targeted 15 HFs of Dailekh.
- Support to conduct Public Audit, Self-Assessment and Functionality Assessment in 15 HFs of Dailekh.

3. Key Targets in Dailekh (August 22, 2022, to August 21, 2024):

- **25 HFs for WASH infrastructure** – drinking water supply and toilet construction support in Health Facilities.
- **Infection prevention and Providers BCC in 33 health facilities** in Dailekh district.
- FCHVs capacitate in communities linked to 25 HFs and supported by ANMs for **outreach to mothers' groups on critical WASH behaviours**.
- **Strengthen 25 HFOMCs** for specific procedures and responsibilities for proper maintenance of drinking water supply and toilet maintenance including infection prevention and safety in drinking water.

4. Operational Modality:

- Coordinate with the government organizations (Health and drinking water and sanitation) and USAID supported organizations at province, district and community level.
- Work closely with HFOMC, M/RM, HFs and relevant partners for successful intervention.
- Address sustainability issues from the very beginning of program intervention.
- 2% O&M fund, minimum 15% contribution, water source registration, water quality test and provision of VMW in drinking water supply schemes.

5. WASH Infrastructure Approaches:

- Prioritize and select health facilities based on selection criteria.
- Coordination with RM/MUs –before dialogue with HFOMC.
- Infrastructure Planning
- **1st Dialogue**: Site verification, project introduction.

- **2nd Dialogue**: Financial and non-financial commitment.
- **3rd Dialogue:** sign implementation agreement with HFOMC, and RM/M.
- Public Audit, Post Assessment and Sustainable Operation and Maintenance of HF Infrastructure.

6. IP and PBCC Approaches:

- 4 days preparatory workshop on IP/PBCC
- 5 days ToT on IP/PBCC
- 2 days whole site orientation
- Strengthen HFOMC/HFQIC
- Joint monitoring visit from province, RM/Ms HC visit
- Onsite coaching and mentoring visits by project staffs
- Self-assessment by HFQIC
- IEC material support

7. BCC-GESI Approaches:

- Capacity enhancement (Health worker, FCHV).
- MToT for health workers (ANM/HW) 5 days.
- Client counselling.
- Training of Facilitators (FCHV) 2 days.
- MG meetings, Vit. A campaign, HH visit.
- WASH message dissemination through local FMs/radio

- **5 Key WASH messages of Swachchhata through BCC campaign:**

- *Hygienic use of latrine*
- *Handwashing with soap at critical times*
- *Safe disposal of child feces*
- *Household treatment of drinking water*
- *Menstrual hygiene*

7. Annexes

7.1. SDG Target and Indicator for Nepal (2014-2030)

Traget with Proposed indicators, current status and future projection

Traget and Indicators	2014	2017	2020	2022	2025	2030
Target 2.1 by 2030, end hnger and ensure access by all people, in particular the poor and people in vulnerable situation, including in fants to save, nutritious and sufficient food all for all year round						
2.1 a Households with in educate food consumption (%)	36.1[a]	29.52	22.94	18.55	11.97	1
2.1 b Population spending more than two thirds of total consumption on food (%)	20[b]	16.4	12.88	10.50	6.94	1
2.1c per capita food grain production (kg)	341[c]	373	404	426	457	510
Target 2.2 by 2030, end all forms of malnutrition, including achieving by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age and addressing the nutritional needs of adolescent girls, pregnant and lactating women and older persons						
2.2a Prevalence of underweight children <5 years (-2 SD)(%)	30.1[d]	24.64	19.19	15.55	10.09	1
2.2b Stunted children <5 years (-2 SD)(%)	37.4[d]	30.58	23.75	19.20	12.38	1
2.2c Prevalence of wasted children <5 years -2 SD	11.3[d]	9.37	7.44	6.15	4.22	1
2.2d Proportion of population below minimum level of dietary energy consumption	22.8[d]	18.71	14.63	11.90	7.81	1
2.2e Prevalence of anaemia among women of literary age adults and girl percent	38.5[e]	31.47	24.44	19.75	12.72	1
2.2f prevalence of anaemia among children under 5 years of age (%)	46[e]	37.56	29.13	23.5	15.06	1
Target 3.1 by 2030, reduce the global maternal mortality ration to less then 70 per 100000 live births						
3.1. Maternal mortality ratio (per 1000, Live births)	258[a]	151	127	116	99	70
Target 3.2 by 2030, end preventable deaths of newborns and children under 5 years of age,						
3.2a Neonatal mortality rate	23[c]	17[b]	14[b]	11.3	8.5	1
3.2b Under-fivemortality rate	38[c]	28[b]	23[b]	18.4	13.8	1
Target 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						
Target 3.3a by 2030 end the epidemic of AIDS						

Traget and Indicators	2014	2017	2020	2022	2025	2030
3.3a.1 HIV Prevalence for the overall population, 15-49 Years (%)	0.2[d]	0.163	0.125	0.1	0.063	0
3.3a.2 HIV Prevalence among men and women population, 15-49 Years (%)	0.03[e]	0.015	0.009	0.006	0	0
3.3a3 proportion of population with advanced HIV infection receiving antiretroviral combination therapy (%)	38.8[e]	50.28	61.75	69.4	80.88	100
Target 3.3b by 2030, end the epidemics of Tuberculosis						
3.3b Tuberculosis incidence per 1000 population	211	171	12	106	66	0
Target 3.3c by 2030, end the epidemics of malaria						
3.3c Confim malaria case (Number)	1674[g]	1360	1046	837	523	0
Target 3.3d by 2030, end the epidemics of neglected tropical disease						
3.3d1 register prevalence rat (per 10000 population) for leprosy	0.83[h]	0.67	0.52	0.42	0.26	0
3.3d2 Kala-azar cases (Number)	325[g]	264	203	163	102	0
3.3d3 Average prevalence of lypphatic filariasis (%)	13[i]	10.56	8.13	6.5	4.06	0
3.3d4 cases of Dengue	728[j]	592	455	364	228	0
3.3d5 People die annually due to rabies (Number)	100[j]	81	63	50	31	0
3.3d6 Active trachoma cases (Number)	136[j]	111	85	68	43	0
3.3d7 Average prevalence of soil transmitted helminthes among school going children (%)	15[j]	12.19	9.38	7.5	4.69	0
Target 3.3e by 2030 cobat hepatitis						
3.3e1 Confim case of hepatitis A (Number)	174[j]	141	109	87	54	0
3.3e2 Confirm case of B (Number)	101[j]	82	63	51	32	0
3.3e3 Caises of unspecified viral hepatitis (Number)	173[j]	141	108	86.5	54	0
Target 3.3f by 2030 combat water borne diseases						
3.3f1Annual incidence of diarrhea (per 1000 under 5 years children)	578[j]	470	361	289	181	0
3.3f2 Children under age 5 years with diarrhoeal in the last 2 weeks (%)	12[j]	10	8	6	4	0
3.3f3 Causes of typhoid (Number)	9549[j]	7759	5968	4775	2984	0

Traget and Indicators	2014	2017	2020	2022	2025	2030
3.3f4 Causes of Cholera (Number)	33[j]	27	21	16.5	10	0
Target 3.3 g by 2030, combat number other communicable diseases						
3.3g1 confirm cases of Japanese encephalitis (JE) (Number)	118[g]	96	74	59	37	0
3.3g2 confirm cases of Influenza H191 (Number)	204[g]	166	128	102	64	0
Target 3.4 by 2030 reduced by one third premature mortality from non communicable disease in cities through prevention and treatment and promote mental health and wellbeing						
Target 3.4a by 2030 reduced by one third premature mortality form non communicable disease						
3.4a1 Death (aged 30-70) from cardiovascular disease (CVDs), Cancer, chronic respiratory disease and diabetes (%)	22.0[k]	19.2	16.5	14.7	11.9	7.3
3.4a2 Death from NCDs out of all deaths (%)	43.7[l]	38.2	32.8	29.1	23.6	14.5
3.4a3 Death form CVDs out of all deaths (%)	22.3[l]	19.5	16.7	14.9	12.1	7.4
3.4a4 Death from cancers out of all deaths (%)	7.0[l]	6.1	5.2	4.7	3.8	2.3
3.4a5 Death form chronic obstructive pulmonary disease out of all deaths (%)	4.9[l]	4.3	3.7	3.3	2.6	1.6
3.4a6 Death form diabetes out of all deaths (%)	1.7[l]	1.5	1.3	1.1	0.9	0.5
Target 3.4b 2030 reduced by one third premature mortality form non communicable disease through prevention and treatment						
3.4b1 People (aged 15-69 years) with rised total cholesterol	22.7[m]	19.9	17.0	15.1	12.3	7.5
3.4b2 People (aged 15-69 years) with rised blood pressure level (%)	88.3[m]	77.3	66.2	58.9	47.8	29.4
3.4b3 People (aged 15-69 years) not engaging in vigorous activities (%)	53.6[m]	46.9	40.2	35.7	29.0	17.8
3.4b4 People (aged 15-69 years) who are overweight (%)	21.6[m]	18.9	16.2	14.4	11.7	7.2
3.4b5 People (aged 15-69 years) who currently drink or drank alcohol in the past 30 days (%)	17.4[m]	15.2	13.1	11.6	9.4	5.8
3.4b6 People (aged 15-69 years) who smoke tobacco daily (%)	15.8[m]	13.8	11.8	10.5	8.5	5.2
Target 3.4c by 2030, promote mental health and wellbeig						
3.4c1 Mental health problem precent	14.0[l]	12.26	10.51	9.35	7.6	4.7
3.4c2 Suicide rate per (100000 population)	25[n]	20	16	13	8	1
3.4c3 Women (aged 15-24 years who are very or some what satisfied with their life (%)	80.8[c]	83.5	86.1	87.9	90.6	95

Traget and Indicators	2014	2017	2020	2022	2025	2030
Target 3.5 strengthen the prevention and treatment of substance abuse including drug abuse and harmful use of alcohol						
3.4 hard drug users estimated number	91534[o]	78662	65790	57209	44337	22884
Target 3.6 by 2020, halve the number of gold Global death and injuries from road traffic accidents						
Target 3.6a by 2020, halve the number gold Global death from road traffic accidents						
3.6a1 Road Traffic accident mortality (per 10000 population)	33.7[p]	25.25	16.8	-	-	-
Target 3.6b by 2020, halve the number of injuries form road traffic accidents						
3.6b1 Serious injuries (per 100000 population)	71.7[p]	538	35.9[b]			
3.6b2 Slight injuries (per 100000 population)	163.7[p]	122.8	81.9[b]			
3.7 by 2030 Ensure Universal access to sexual and reproduction reproductive health care service including for family planning information and education and intergration of reproductive health international strategy and programs						
3.7a Contraceptive Prevalence rate modern method (%)	49.6[c]	54.4	59.1	62.3	67.1	75
3.7b proportion of birth attended by SBA (%)	55.6[c]	62.1	68.5	72.8	79.3	90
3.7c Adolescent fertility rate (birth per 1000 women age 15-19 years)	71[c]	63.3	55.6	50.5	42.81	30
3.7d antenatal care (ANC) coverage at least 4 vigit (%)	59.5[c]	65.2	70.9	74.75	80.5	90
3.7e Institutional delivery (%)	55.2[c]	61.73	70	74.35	80.88	90
3.7f Postnatal care (PNC) for mother (%)	57.9[c]	63.92	70	74.01	80.03	90
3.7g Unmet need for family planning (%)	25.2[c]	22.4	19.5	17.6	14.75	10
3.7h proportion of demand satisfied for family planning (%)	-	-	-	-	-	-
3.7i TOtal Fertility rate (TFR) (births per women)	2.3[c]	2.3	2.20	2.16	2.106	2
3.7j Household within 30 minute travel time to a health facility (%)	61.8[q]	67.09	85	86	87.5	90
3.7k prevalence of uterine prolapse among women of reproductive age (15-49) (%)	7[r]	5.7	4.4	3.6	2.25	01
Target 3.8 Achieve Universal health coverage, including financial risk protection, access to quality essential Health-care service and access to safe, effective, quality and affordable essential medicine and action for all						
3.8a Government health expenditure as % of GDP	5.3[s]	5.81	6.31	6.65	7.16	8
3.8a Health facilities meeting minimum standard of quality of care (%)	-	-	-	-	-	-
3.8 Children is 12-20 months who received all vaccinations (%)	84.5[c]	87.41	90.31	92.25	95.16	100

Traget and Indicators	2014	2017	2020	2022	2025	2030
3.9 2030, substantially reduce the number of death and illness from hazardous chemicals and air, water and soil pollution and contamination						
3.9a daeths form hazardous chemicals (toxic substances, etc.) Number	22[j]	18	14	11	7	0
3.9b Illness form hazardous chemicals toxic substance, etc. (Number)	1205[j]	998	791	653	445	100

Sources: aWHO et al 2015,[b] MOHP,2015,[c]CBS,2014a,[d]MOHP2014a,[e]MOHP2014a,[f]MOHP2014c,[g]MOHP2014d,[h]MOHP2014a,[i]MOHP 2012a,[j]MOHP2013a,[k]WHO2012,[l]MOHP/WHO2014,[m]NHRC,2013,[n]WHO,2014,[o]MOHP,2014a,[P]Thpa2013,[q]CBS,2011,[r]MOHP,2006a, [o]MOHP,2009c.

Sources: SDG 2016-2030 National (Preliminary) Report

7.2. Dailekh's Estimated Target Population Fiscal Year 2078/079

Palika/ Word	Poulation	Exp. Live Births	0 to 11 Months	02 to 11 Months	12 to 23 Months	0 to 23 Months	06 to 23 Months	0 to 35 Months	0 to 59 Months	06 to 59 Months	12 to 59 Months	0 to 14 Years	10 to 19 Years	Male 10 to 19 Years	Female 10 to 19 Years	Female 15 to 44 Years	WRA 15 to 49 Years	MWRA 15 to 49 Years	ExpectedPregnancy	60+ Years
Dailekh	254012	5757	5826	4855	5780	11611	8690	17409	29161	26249	23334	88454	54836	26091	28745	64081	70078	57088	7310	21995
Naumule	20646	464	479	398	473	952	713	1427	2394	2154	1916	7221	4343	2031	2312	5136	5608	4573	589	1772
1	3576	82	83	69	82	165	123	247	415	373	332	1250	765	353	412	915	999	815	104	307
2	3217	70	75	62	74	148	111	223	373	336	298	1125	656	313	343	763	833	679	90	276
3	2688	61	62	52	62	124	93	185	312	281	249	940	571	282	289	640	699	570	77	231
4	3136	70	73	61	72	145	108	217	364	327	291	1097	658	314	344	765	836	682	89	269
5	1617	37	38	32	37	74	55	112	188	169	150	566	349	161	188	416	454	370	47	139
6	2221	48	51	43	51	102	77	154	257	232	206	776	448	198	250	555	606	494	61	191
7	1738	40	41	33	40	80	60	120	202	181	161	608	373	178	196	434	474	386	50	150
8	2453	56	57	47	56	113	84	169	284	256	228	858	523	232	292	647	707	576	71	210
Mahabu	18083	415	414	347	411	827	618	1238	2066	1860	1651	6239	3968	1874	2094	4791	5217	4255	528	1612
1	2871	65	66	55	65	131	98	196	328	295	262	990	627	275	352	805	877	715	83	256
2	2609	62	60	50	59	119	89	179	298	268	239	900	590	271	319	731	796	649	79	232
3	3866	90	89	74	88	177	132	265	442	397	353	1334	855	395	460	1054	1147	935	114	345
4	2744	59	63	53	63	126	94	187	314	283	250	947	570	269	301	689	749	611	76	244
5	2576	63	59	49	59	118	88	176	294	265	235	888	599	305	295	674	735	599	80	230
6	3417	76	78	65	77	156	117	234	390	352	312	1179	726	359	367	839	913	745	97	305
Bhairabi	18033	424	412	343	409	822	615	1231	2060	1854	1647	6307	4090	1954	2135	4674	5100	4136	540	1534

Palika/ Word	Poulation	Exp. Live Births	0 to 11 Months	02 to 11 Months	12 to 23 Months	0 to 23 Months	06 to 23 Months	0 to 35 Months	0 to 59 Months	06 to 59 Months	12 to 59 Months	0 to 14 Years	10 to 19 Years	Male 10 to 19 Years	Female 10 to 19 Years	Female 15 to 44 Years	WRA 15 to 49 Years	MWRA 15 to 49 Years	ExpectedPregnancy	60+ Years
1	2295	50	52	44	52	105	78	157	263	236	209	803	480	218	262	574	626	508	63	195
2	2031	52	47	39	46	93	69	139	232	209	185	710	505	239	266	583	636	516	67	173
3	3983	95	91	76	90	182	136	272	455	409	364	1393	916	432	484	1060	1156	937	121	339
4	2748	67	62	52	62	125	94	187	314	283	251	961	649	316	333	730	796	646	86	233
5	2722	62	62	52	62	124	93	185	311	279	248	952	594	283	312	682	744	603	78	232
6	1907	44	44	36	43	87	65	130	218	196	175	667	422	204	218	476	520	422	56	162
7	2347	55	54	45	53	107	80	160	268	242	214	821	524	264	260	570	622	504	70	199
Thantikandh	18726	481	484	402	481	965	721	1449	2433	2191	1949	7235	4399	2060	2338	4509	4892	3893	608	1337
1	3413	87	89	74	88	176	131	265	444	400	355	1319	794	376	419	808	877	698	110	244
2	2824	69	73	60	73	145	109	218	367	330	294	1091	636	303	333	642	696	554	88	202
3	3550	91	92	76	91	183	137	275	461	415	369	1371	828	383	444	857	929	739	114	254
4	2894	73	75	62	75	149	112	224	376	338	302	1118	672	311	361	695	755	601	93	207
5	3012	80	78	65	78	155	116	233	391	352	313	1163	730	336	393	758	823	655	101	215
6	3033	81	78	65	77	156	117	235	394	355	316	1172	740	351	388	749	812	646	102	216
Aathbis	31936	784	792	659	788	1581	1185	2377	4000	3604	3211	12286	7435	3579	3856	7625	8321	6696	992	2332
1	4595	110	114	95	114	228	170	343	576	519	462	1768	1048	503	546	1079	1178	947	140	336
2	2982	77	74	62	74	148	110	221	373	337	300	1147	722	362	360	711	776	625	96	218
3	3319	85	82	68	82	164	123	247	416	375	333	1277	809	378	431	850	928	747	108	242
4	4165	106	104	86	102	206	155	310	521	470	419	1602	1002	465	537	1063	1159	932	134	304
5	3591	85	89	74	89	177	134	267	450	405	361	1381	799	383	415	822	897	722	107	262
6	4237	100	10	87	105	209	157	316	530	478	426	1631	955	446	509	1007	1099	885	128	310

Palika/ Word	Poulation	Exp. Live Births	0 to 11 Months	02 to 11 Months	12 to 23 Months	0 to 23 Months	06 to 23 Months	0 to 35 Months	0 to 59 Months	06 to 59 Months	12 to 59 Months	0 to 14 Years	10 to 19 Years	Male 10 to 19 Years	Female 10 to 19 Years	Female 15 to 44 Years	WRA 15 to 49 Years	MWRA 15 to 49 Years	ExpectedPregnancy	60+ Years
			5																	
7	3208	80	80	67	79	159	119	239	402	362	322	1234	757	372	385	762	832	669	101	234
8	3396	85	85	70	84	168	126	253	425	384	341	1307	804	403	400	791	864	696	107	248
9	2442	57	60	50	60	121	91	181	306	275	246	940	539	267	272	539	587	473	72	178
Chamunda Bindrasaini	26659	659	666	554	661	1325	994	1993	3351	3019	2687	10064	5976	2835	3140	6298	6889	5543	832	2072
1	2567	66	64	53	64	127	96	192	323	291	259	969	597	285	312	625	684	550	83	200
2	2975	70	74	62	74	148	111	223	374	337	299	1123	637	298	339	680	743	598	89	231
3	2638	64	66	55	65	131	98	198	332	299	266	996	580	267	314	628	687	553	81	205
4	3402	82	85	71	84	169	127	254	427	385	343	1284	741	363	378	757	828	667	103	264
5	3469	89	87	72	86	173	130	259	436	393	350	1309	810	383	427	856	936	753	113	270
6	3702	88	92	77	92	184	138	277	465	419	373	1398	792	365	427	857	937	755	111	288
7	3073	74	77	64	76	153	115	229	386	348	309	1161	671	322	349	700	765	616	93	239
8	2949	77	74	61	73	146	110	220	371	334	297	1113	691	331	360	722	791	636	96	229
9	1884	50	47	39	47	93	70	141	237	213	190	711	456	220	236	473	517	416	63	147
Dullu	39684	896	888	741	879	1770	1325	2651	4437	3993	3548	13468	8521	4078	4443	10185	11150	9113	1136	3867
1	2507	57	56	47	56	112	84	167	280	252	224	851	537	256	281	644	705	577	71	245
2	2769	63	62	52	61	124	92	185	310	278	248	940	604	299	305	698	764	625	81	270
3	3153	68	70	59	70	141	105	210	352	318	282	1070	652	311	341	781	855	699	87	307
4	2763	66	61	51	61	123	93	184	309	278	247	938	631	315	316	724	793	648	84	269
5	3467	78	78	64	77	155	115	232	387	349	310	1177	744	373	371	851	932	761	100	338
6	3848	91	86	72	85	171	129	258	430	387	344	1306	861	420	441	1011	1106	904	115	375

Palika/ Word	Poulation	Exp. Live Births	0 to 11 Months	02 to 11 Months	12 to 23 Months	0 to 23 Months	06 to 23 Months	0 to 35 Months	0 to 59 Months	06 to 59 Months	12 to 59 Months	0 to 14 Years	10 to 19 Years	Male 10 to 19 Years	Female 10 to 19 Years	Female 15 to 44 Years	WRA 15 to 49 Years	MWRA 15 to 49 Years	ExpectedPregnancy	60+ Years
7	1712	34	39	32	38	76	57	114	192	172	153	580	316	146	170	390	426	349	43	167
8	4041	89	90	75	89	180	135	270	452	407	362	1371	848	404	444	1017	1115	911	113	394
9	3284	74	73	61	72	147	109	219	367	331	294	1114	702	341	361	828	907	741	93	320
10	2742	63	61	51	61	122	92	183	307	276	245	930	602	273	330	755	827	676	80	267
11	3264	76	73	61	72	146	109	218	365	328	292	1107	725	343	382	876	959	784	97	318
12	2588	56	58	48	58	116	87	173	289	260	231	879	527	235	292	670	733	599	70	252
13	3545	81	80	66	79	158	119	237	396	356	317	1203	773	363	410	939	1028	841	103	346
Narayan	25861	489	503	419	500	1002	747	1498	2498	2245	1993	7635	4930	2364	2567	6966	7731	6445	626	2543
1	4186	77	81	68	81	162	121	243	404	363	322	1236	783	403	379	1030	1144	953	99	411
2	1836	33	36	30	35	71	53	107	177	159	141	542	330	154	176	478	531	442	42	181
3	1941	39	38	31	38	76	56	112	187	169	149	573	395	188	207	561	622	519	50	191
4	2415	45	47	39	46	94	70	140	233	210	186	713	459	215	245	664	737	614	58	238
5	1851	36	36	30	36	71	53	107	178	160	142	546	368	176	191	519	576	480	47	182
6	2901	54	56	47	56	113	84	168	280	252	224	857	545	256	289	786	872	727	69	286
7	2331	44	46	38	45	91	67	135	225	202	180	688	439	206	233	632	702	585	56	229
8	1650	31	32	27	32	64	48	95	159	144	127	487	315	148	167	454	504	420	40	162
9	2179	43	42	35	42	84	63	126	211	189	168	644	432	201	230	625	694	579	55	215
10	1971	37	39	32	38	76	57	114	191	171	152	582	373	187	186	505	560	467	47	193
11	2599	49	50	42	50	101	75	150	251	226	200	767	492	229	262	712	790	659	62	256
Bhagawatimai	18417	417	438	366	433	872	652	1304	2170	1951	1730	6498	4007	1930	2076	4670	5030	4066	531	1569
1	2505	57	60	50	59	119	89	177	295	266	235	884	549	262	287	647	697	564	72	213
2	2322	53	56	47	55	110	82	164	274	246	218	820	517	248	269	605	651	526	68	198
3	3016	67	72	59	71	143	106	214	356	319	283	1064	647	310	337	758	816	660	86	257

Palika/ Word	Poulation	Exp. Live Births	0 to 11 Months	02 to 11 Months	12 to 23 Months	0 to 23 Months	06 to 23 Months	0 to 35 Months	0 to 59 Months	06 to 59 Months	12 to 59 Months	0 to 14 Years	10 to 19 Years	Male 10 to 19 Years	Female 10 to 19 Years	Female 15 to 44 Years	WRA 15 to 49 Years	MWRA 15 to 49 Years	ExpectedPregnancy	60+ Years
4	2586	58	62	51	61	122	91	183	304	273	243	912	555	271	284	639	688	557	74	220
5	2207	51	52	44	52	104	78	156	260	234	208	779	494	241	253	568	611	494	66	188
6	3185	72	76	64	75	151	113	226	376	338	300	1124	693	337	356	800	862	697	92	271
7	2595	57	62	52	61	123	92	184	306	275	244	915	552	262	290	653	704	568	73	221
Dungeshwor	14631	292	297	248	296	592	444	887	1480	1331	1183	4460	2832	1327	1506	3873	4257	3529	373	1392
1	2809	57	57	48	57	114	85	170	284	256	227	857	549	259	290	747	821	681	72	267
2	2980	63	61	50	60	120	90	181	301	271	241	908	608	290	318	818	899	745	80	284
3	1817	34	37	31	37	74	55	110	184	165	147	554	330	155	175	450	494	409	44	173
4	2205	46	45	38	45	89	67	134	223	201	178	672	448	216	232	596	655	542	59	210
5	2022	40	41	34	41	82	62	122	204	184	163	616	384	175	209	537	590	490	51	192
6	2800	53	57	47	57	113	85	170	283	255	226	853	514	232	282	726	799	662	67	266
Gurans	21337	435	452	378	450	903	677	1354	2271	2047	1819	7039	4335	2059	2276	5353	5884	4839	556	1966
1	2123	44	45	37	44	90	68	135	226	203	181	700	443	211	232	544	598	492	56	195
2	2774	55	59	49	59	117	88	176	295	266	236	915	550	250	300	707	777	639	70	256
3	2611	52	55	46	55	111	83	166	278	251	223	861	519	236	283	667	733	602	67	241
4	3328	68	70	59	70	141	106	211	355	319	283	1098	674	322	353	829	912	750	86	306
5	3456	68	74	61	73	147	110	219	368	331	294	1141	685	322	363	854	939	772	88	319
6	2816	59	60	50	60	119	89	179	299	270	240	930	590	289	302	709	780	641	76	259
7	1905	39	40	34	40	81	61	121	203	183	163	628	390	193	197	462	508	418	50	175
8	2324	49	49	41	49	99	73	148	247	223	198	766	483	236	247	581	638	525	62	214

7.3. Analyzed Data (2078-079)

Reporting Status

Organisation unit / Data	Average no. of People Served FCHV (reporting Period)	Average no. of People Served ORC (Per Clinic)	Average no. of People Served from Immunization Clinic (Per Clinic)	Percentage of Reporting Status (EPIC)	Percentage of Reporting Status (FCHV)	Percentage of Reporting Status (PHCORC)	Total Emergency Services
DAILEKH	**17.3**	**19.9**	**15.6**	**96.7**	**97.8**	**90.7**	**4977**
Naumule RM	**13.3**	**13.7**	**10.3**	**100**	**98.7**	**99.3**	**0**
Mahabu RM	**18.7**	**25.7**	**17.5**	**100**	**96.6**	**91.7**	**0**
Bhairabi RM	**22.7**	**20.4**	**19.8**	**100**	**97.9**	**71.1**	**0**
Thantikandh RM	**23.1**	**27.7**	**21.8**	**91.7**	**90.7**	**92.4**	**0**
Aathbis Mun.	**28**	**22.1**	**23.3**	**91.7**	**98.8**	**67.1**	**0**
Chamunda Bin.Mun.	**14.6**	**19.7**	**30.1**	**91.7**	**100**	**81.4**	**0**
Dullu Mun.	**16.8**	**16.5**	**13.4**	**93**	**96.6**	**92.6**	**1136**
Narayan Mun.	**14.5**	**23.9**	**11.6**	**99**	**99.3**	**98.9**	**3649**
Bhagawatimai RM	**8.8**	**14.8**	**10.6**	**100**	**98.9**	**99.6**	**0**
Dungeshwor RM	**18.4**	**20.3**	**12.3**	**100**	**98.8**	**97.9**	**0**
Gurans RM	**16.7**	**24.3**	**13**	**100**	**98.3**	**96.6**	**192**

Bhairabi RM	Mahabu RM	Naumule RM	DAILEKH	Organisation unit / Data
102.4	97.1	75.8	87.9	% of rota 1st
111.1	98	68.6	87.7	% of rota 2nd
-31.4	-11.2	-32.9	-17.5	Drop out BCG vs Measles
-14.1	-2.4	-1.8	-4.1	Drop out DPT-HepB-Hib 1 vs 3
-2.7	7.2	-18.7	-3.2	Drop out DPT-HepB-Hib1 vs measles/rubella 1 dropout rate
15.3	13	15.4	13.4	Drop out Measles/rubella 1 vs 2
13.1	19.2	-0.51	10.7	Drop out Penta 1st Vs MR2
425	336	397	4902	No. of children fully immunized as per NIP schedule
119.6	94.9	90.5	94.3	% of children 12-23 months immunized with JE
104.2	81.8	83.8	85	% of children aged 12-23 months immunized with measles/rubella 2
121.8	93	97.7	97.4	% of children aged 9-11 months immunized with measles/rubella 1
103.2	81	82.7	84.1	% of children fully immunized as per NIP schedule
104.2	81.8	83.8	84.8	% of children fully immunized (Fully Immunized in GESI by Population of children 12-23 months)
92.5	83.4	73.3	82.7	% of children under one year immunized with BCG
118.7	100.2	82.3	94.4	% of children under one year immunized with DPT-HepB-Hib1
134	101.2	84.2	98.4	% of children under one year immunized with DPT-HepB-Hib2
135.4	102.7	83.8	98.3	% of children under one year immunized with DPT-HepB-Hib3
133.3	101	85.4	93.4	% of children under one year immunized with FIPV 2nd
118.7	100.2	83.1	94.3	% of children under one year immunized with PCV 1
134.5	101.2	84.4	98.8	% of children under one year immunized with PCV 2
120.1	92.5	97.7	96.2	% of children under one year immunized with PCV 3
113.6	100.2	82.9	95.5	% of children under one year immunized with Polio 1
123.3	101.2	85.8	99.8	% of children under one year immunized with Polio 2
122.3	102.7	84.8	98.6	% of children under one year immunized with polio 3
-35.4	-2.7	16.3	1.7	% of children under one year not immunized against DPT-Hep B-Hib3
31.8	26.8	29.9	33.1	% of pregnant women who received TD2
62.5	42.7	52.3	60.6	% of pregnant women who received TD2 & TD2+
30.7	15.9	22.4	27.5	% of pregnant women who received TD2+
338	226	308	4429	Total pregnant women who received TD2 & TD2+
91.1	91.6	93.8	91.4	Wastage Rate BCG
29.9	60.6	62.1	47.4	Wastage Rate DPT-Hep B-Hib
59.3	71.7	72.1	66.9	Wastage Rate JE
57	69.3	73	64.9	Wastage Rate Measles/Rubella
25.7	40.7	48.6	37.8	Wastage Rate PCV
28.5	60.3	62.3	46.9	Wastage Rate Polio (OPV)
32.3	48.7	57.3	45.3	Wastage Rate Polio(FIPV)
59.2	74.2	81.3	66.4	Wastage Rate TD

Dullu Mun.	Chamunda Bin.Mun.	Aathbis Mun.	Thantikandh RM	Organisation unit / Data
91.5	83.1	82	94.4	% of rota 1st
93.2	80.3	78.2	91.5	% of rota 2nd
-12.6	-11.1	1.9	-18.2	Drop out BCG vs Measles
0.44	-1.2	0.81	-7.6	Drop out DPT-HepB-Hib 1 vs 3
-0.44	-0.17	3.3	-13.8	Drop out DPT-HepB-Hib1 vs measles/rubella 1 dropout rate
17.2	21.2	0.28	26.5	Drop out Measles/rubella 1 vs 2
16.8	21.1	3.5	16.4	Drop out Penta 1st Vs MR2
748	443	712	363	No. of children fully immunized as per NIP schedule
98.3	78.7	91.4	90.5	% of children 12-23 months immunized with JE
85.1	69	90.2	75.3	% of children aged 12-23 months immunized with measles/rubella 2
101.8	86.9	90	101.9	% of children aged 9-11 months immunized with measles/rubella 1
84.3	66.5	89.8	74.8	% of children fully immunized as per NIP schedule
85.1	67	90.2	75.3	% of children fully immunized (Fully Immunized in GESI by Population of children 12-23 months)
90.2	78	91.6	86	% of children under one year immunized with BCG
101.4	86.8	93.1	89.5	% of children under one year immunized with DPT-HepB-Hib1
108.1	92	92.6	92.8	% of children under one year immunized with DPT-HepB-Hib2
100.9	87.8	92.3	96.3	% of children under one year immunized with DPT-HepB-Hib3
98.8	66.4	86	88	% of children under one year immunized with FIPV 2nd
101.8	87.8	91.9	88.2	% of children under one year immunized with PCV 1
107.6	92.9	93.7	94	% of children under one year immunized with PCV 2
98.1	83.2	92.3	101.2	% of children under one year immunized with PCV 3
105.4	91.9	91.6	94.4	% of children under one year immunized with Polio 1
111.7	93.2	94.2	104.9	% of children under one year immunized with Polio 2
102.6	83.6	94.1	110.1	% of children under one year immunized with polio 3
-0.9	12.2	7.7	3.7	% of children under one year not immunized against DPT-Hep B-Hib3
33.3	31.3	29.7	24.7	% of pregnant women who received TD2
63.9	52.9	68.8	53.9	% of pregnant women who received TD2 & TD2+
30.6	21.6	39.1	29.3	% of pregnant women who received TD2+
727	440	683	328	Total pregnant women who received TD2 & TD2+
92.4	81.6	86.6	87.2	Wastage Rate BCG
48	35.7	36.7	41.8	Wastage Rate DPT-Hep B-Hib
69.8	57.6	52.6	67	Wastage Rate JE
68.5	39.5	50.8	59	Wastage Rate Measles/Rubella
37.6	34	26.9	43.1	Wastage Rate PCV
47.1	32.6	35.7	41.6	Wastage Rate Polio (OPV)
43.5	21.1	31.7	53.3	Wastage Rate Polio(FIPV)
70.5	56.3	48.1	68.8	Wastage Rate TD

Gurans RM	Dungeshwor RM	Bhagawati mai RM	Narayan Mun.	Organisation unit / Data
89.8	83.3	67.1	102.1	% of rota 1st
86.7	75.3	74.6	109.4	% of rota 2nd
-33.1	-33.7	-15.8	-27.7	Drop out BCG vs Measles
-8.2	1.1	-9.1	-9.3	Drop out DPT-HepB-Hib 1 vs 3
-0.97	2.7	-7	-10.3	Drop out DPT-HepB-Hib1 vs measles/rubella 1 dropout rate
10.8	4.3	6.3	12.3	Drop out Measles/rubella 1 vs 2
9.9	6.9	-0.3	3.3	Drop out Penta 1st Vs MR2
373	243	329	533	No. of children fully immunized as per NIP schedule
88.2	92.9	77.2	120.2	% of children 12-23 months immunized with JE
82.9	81.8	75.8	106.8	% of children aged 12-23 months immunized with measles/rubella 2
92.5	85.2	79.8	120.9	% of children aged 9-11 months immunized with measles/rubella 1
82.5	81.5	74.8	106	% of children fully immunized as per NIP schedule
82.9	81.8	75.8	106.8	% of children fully immunized (Fully Immunized in GESI by Population of children 12-23 months)
69.3	63.6	68.7	94.4	% of children under one year immunized with BCG
91.6	87.6	74.5	109.5	% of children under one year immunized with DPT-HepB-Hib1
98.5	82.6	76.6	114.9	% of children under one year immunized with DPT-HepB-Hib2
99.1	86.6	81.4	119.7	% of children under one year immunized with DPT-HepB-Hib3
94.5	85.9	81.1	119.7	% of children under one year immunized with FIPV 2nd
90.5	87.6	74.8	109.5	% of children under one year immunized with PCV 1
99.1	82.6	76.6	114.9	% of children under one year immunized with PCV 2
89.4	84.9	79.5	120.9	% of children under one year immunized with PCV 3
91.8	87.6	74.1	109.5	% of children under one year immunized with Polio 1
99.1	82.6	76.8	114.9	% of children under one year immunized with Polio 2
98.9	86.2	82	119.7	% of children under one year immunized with polio 3
0.88	13.4	18.6	-19.7	% of children under one year not immunized against DPT-Hep B-Hib3
41.1	43.7	26	50.9	% of pregnant women who received TD2
68.3	68.6	47.5	78.7	% of pregnant women who received TD2 & TD2+
27.2	24.9	21.5	27.8	% of pregnant women who received TD2+
379	256	252	492	Total pregnant women who received TD2 & TD2+
93.9	94.5	94	92.2	Wastage Rate BCG
52.3	56.5	56.1	41.1	Wastage Rate DPT-Hep B-Hib
71.9	72.1	73.6	65.5	Wastage Rate JE
70.9	73.8	73	66.6	Wastage Rate Measles/Rubella
44.9	41.7	48.7	29.4	Wastage Rate PCV
52	56.1	55.9	41	Wastage Rate Polio (OPV)
53.9	56.6	54.4	44.2	Wastage Rate Polio(FIPV)
72.6	65	69.2	50.9	Wastage Rate TD

Community Based Integrated Management of Neonatal and Childhood Illnesses (CB-IMNCI) Programme

Organisation unit / Data	Mahabu RM	Naumule RM	DAILEKH
% of dehydration among U5 yrs registered diarrhoeal cases (facility & outreach)	31	12.8	15.2
% of PSBI among registered 0-2 months infant (sick baby)	0	9.1	21.2
% of PSBI Cases treated with first dose of gentamycin		99.7	88.9
% of PSBI cases among expected live births	0	0.21	1.4
% of PSBI cases received complete dose of Gentamicin		0	70.9
% of death rate of SAM cases	0	0	0.17
% of defaulter rate of SAM cases	24.9	24.9	32.3
% of newborns with low birth weight (<2.5KG)	0.48	0.86	5.2
% of recovery rate of SAM cases	75	75	52.6
Diarrhoea incidence rate among children under five years	704.3	965.8	779.3
Incidence of ARI among children under five years (per 1000)	1025.7	865.6	1174.4
Incidence of Pneumonia among children under five years (per 1000) (HF & Outreach)	69.7	27.6	57.8
Incidence of pneumonia among children under five years (per 1000)	130.2	73.1	108.5
% of Pneumonia among U5 years New ARI registered children (HF & ORC)	21.3	10.9	15.4
% of children U5 years with Pneumonia treated with antibiotics (Amoxicillin)	84.7	100	91.3
% of children under five years with diarrhea suffering from Severe dehydration	0.35	0	0.34
% of children under five years with diarrhea suffering from Some dehydration	30.8	12.9	14.9
% of children under five years with diarrhea suffering from dysentery (blood in stool)	0	2.5	2.9
% of children under five years with diarrhea treated with zinc and ORS	94.7	101	93.3
% of children under five years with diarrhoea treated with IV fluid	0	0	0.14
% of newborns who initiated breastfeeding within 1 hour of birth	4.2	12.2	19.7
% of pneumonia cases treated with antibiotics (HF & ORC)	91.7	100	101.2
% of severe Pneumonia among new cases	0.19	0	0.27
Pneumonia treated with antibiotics total	132	66	1707
Total Incidence of Diarrhea	1455	2313	22723
Total incidence of Pneumonia	144	66	1685

Aathbis Mun.	Thantikandh RM	Bhairabi RM	Organisation unit / Data
4.4	30.3	17.9	% of dehydration among U5 yrs registered diarrhoeal cases (facility & outreach)
13.8	34.4	66.5	% of PSBI among registered 0-2 months infant (sick baby)
87.3	69.8	99.7	% of PSBI Cases treated with first dose of gentamycin
1	4.1	0.94	% of PSBI cases among expected live births
87.3	44.9	24.9	% of PSBI cases received complete dose of Gentamicin
0	0	0	% of death rate of SAM cases
72.4	40.9	26.6	% of defaulter rate of SAM cases
5.2	11.8	5.4	% of newborns with low birth weight (<2.5KG)
21.7	56.6	41.7	% of recovery rate of SAM cases
864.1	677.1	793	Diarrhoea incidence rate among children under five years
1147.9	792.5	872.7	Incidence of ARI among children under five years (per 1000)
38.5	68.6	11.2	Incidence of Pneumonia among children under five years (per 1000) (HF & Outreach)
99.7	149.5	64.6	Incidence of pneumonia among children under five years (per 1000)
11.7	23	8.4	% of Pneumonia among U5 years New ARI registered children (HF & ORC)
85.1	96.4	95.7	% of children U5 years with Pneumonia treated with antibiotics (Amoxicillin)
0	0.94	0	% of children under five years with diarrhea suffering from Severe dehydration
4.4	29.4	17.9	% of children under five years with diarrhea suffering from Some dehydration
2.3	4.4	0	% of children under five years with diarrhea suffering from dysentery (blood in stool)
98.9	88.1	81.4	% of children under five years with diarrhea treated with zinc and ORS
0	1	0	% of children under five years with diarrhoea treated with IV fluid
4.9	9	10.7	% of newborns who initiated breastfeeding within 1 hour of birth
100	98.8	100	% of pneumonia cases treated with antibiotics (HF & ORC)
0.07	0.52	0.06	% of severe Pneumonia among new cases
154	165	23	Pneumonia treated with antibiotics total
3459	1648	1632	Total Incidence of Diarrhea
154	167	23	Total incidence of Pneumonia

Narayan Mun.	Dullu Mun.	Chamunda Bin.Mun.	Organisation unit / Data
5.5	11	35.4	% of dehydration among U5 yrs registered diarrhoeal cases (facility & outreach)
39.5	17.5	4.5	% of PSBI among registered 0-2 months infant (sick baby)
104.1	89.2	99.7	% of PSBI Cases treated with first dose of gentamycin
4.7	2.1	0.15	% of PSBI cases among expected live births
91	84	99.7	% of PSBI cases received complete dose of Gentamicin
0	0	0	% of death rate of SAM cases
18.6	10	6	% of defaulter rate of SAM cases
9.6	6.8	5.7	% of newborns with low birth weight (<2.5KG)
73.3	86.7	78.8	% of recovery rate of SAM cases
1229.8	625.6	568.6	Diarrhoea incidence rate among children under five years
1733.4	1333.2	986.9	Incidence of ARI among children under five years (per 1000)
111.5	100.3	44.2	Incidence of Pneumonia among children under five years (per 1000) (HF & Outreach)
89.8	130.5	110.1	Incidence of pneumonia among children under five years (per 1000)
13.8	24.5	11.1	% of Pneumonia among U5 years New ARI registered children (HF & ORC)
80.6	93	98.6	% of children U5 years with Pneumonia treated with antibiotics (Amoxicillin)
1.1	0	0	% of children under five years with diarrhea suffering from Severe dehydration
4.4	11	35.5	% of children under five years with diarrhea suffering from Some dehydration
0.29	7.4	4	% of children under five years with diarrhea suffering from dysentery (blood in stool)
99.6	74.9	98.5	% of children under five years with diarrhea treated with zinc and ORS
0.63	0	0.08	% of children under five years with diarrhoea treated with IV fluid
105.4	1.6	2.7	% of newborns who initiated breastfeeding within 1 hour of birth
100	104.3	100	% of pneumonia cases treated with antibiotics (HF & ORC)
1.2	0.24	0.09	% of severe Pneumonia among new cases
278	466	148	Pneumonia treated with antibiotics total
3067	2775	1906	Total Incidence of Diarrhea
278	445	148	Total incidence of Pneumonia

Gurans RM	Dungeshwor RM	Bhagawatimai RM	Organisation unit / Data
9.2	0.54	12.7	% of dehydration among U5 yrs registered diarrhoeal cases (facility & outreach)
12.5	11.1	5.9	% of PSBI among registered 0-2 months infant (sick baby)
99.7	99.7	0	% of PSBI Cases treated with first dose of gentamycin
0.92	0.68	0.24	% of PSBI cases among expected live births
74.8	49.9	0	% of PSBI cases received complete dose of Gentamicin
0	2	0	% of death rate of SAM cases
37.9	8.1	0	% of defaulter rate of SAM cases
1.6	1.7	3.6	% of newborns with low birth weight (<2.5KG)
4.2	89.8	0	% of recovery rate of SAM cases
439.6	599.3	1189.8	Diarrhoea incidence rate among children under five years
1028.2	1460.8	1700.6	Incidence of ARI among children under five years (per 1000)
35.2	61.5	41	Incidence of Pneumonia among children under five years (per 1000) (HF & Outreach)
65.6	145.9	132.2	Incidence of pneumonia among children under five years (per 1000)
12	14.9	9.5	% of Pneumonia among U5 years New ARI registered children (HF & ORC)
90	95.6	104.5	% of children U5 years with Pneumonia treated with antibiotics (Amoxicillin)
0	0	0	% of children under five years with diarrhea suffering from Severe dehydration
9.2	0.54	12.7	% of children under five years with diarrhea suffering from Some dehydration
2.7	0.54	2.6	% of children under five years with diarrhea suffering from dysentery (blood in stool)
96.5	88.1	97.7	% of children under five years with diarrhea treated with zinc and ORS
0	0	0	% of children under five years with diarrhoea treated with IV fluid
0	4.8	0.7	% of newborns who initiated breastfeeding within 1 hour of birth
115	95.6	107.9	% of pneumonia cases treated with antibiotics (HF & ORC)
0.09	0	0.03	% of severe Pneumonia among new cases
92	87	96	Pneumonia treated with antibiotics total
998	887	2583	Total Incidence of Diarrhea
80	91	89	Total incidence of Pneumonia

Nutrition Programme

Organisation unit / Data	% of children 0-11 months registered for Growth Monitoring (New) who were Underweight	% of children 12-23 months registered for Growth Monitoring who were Underweight	% of children aged 0-23 months registered for Growth Monitoring (New) who were Underweight	% of children aged 6-23 months who received 3 cycle (180 Sachets) Baal Vita (MNP)	% of children aged 6-23 months who received at least one cycle (60 Sachets) Baal Vita (MNP)	Average number of visits among children aged 0-11 months registered for growth monitoring[a]	Average number of visits among children aged 0-23 months registered for growth monitoring[a]	Average number of visits among children aged 12-23 months registered for growth monitoring[a]	No. of children aged 6–8 months registered for growth monitoring who received solid, semi-solid or soft foods	Number of cases admitted at outpatient therapeutic centers (OTPs)	% of cases admitted at OTPs with moderate acute malnutrition (MAM)	% of children aged 0- 6 months registered for growth monitoring who were exclusively breastfed for the first six months	% of children aged 0-11 months registered for growth monitoring	% of children aged 0-23 months registered for growth monitoring	% of children aged 12-23 months registered for growth monitoring	% of children aged 6–8 months registered for growth monitoring who received solid, semi-solid or soft foods	% of newborns who initiated breastfeeding within 1 hour of birth	% of newborns with low birth weight (<2.5kg) among total delivery by HWs
DAILEKH	4.1	6.2	4.9	6.9	35.1	4.2	4.3	4.4	4266	644	236.3	81.5	114.7	90.3	65.7	73.2	19.7	6.2
Naumule RM	3.1	3.4	3.2	1.4	100.3	3.2	3.3	3.5	505	32	84.4	146	156.7	116.3	74.7	105.2	12.2	1.4
Mahabu RM	1.8	3	2.2	4.5	15.5	3.6	3.7	3.8	91	5	860	22.7	104.6	80.5	56.4	21.9	4.2	0.76
Bhairabi RM	6.1	8.7	7.1	8.6	15.7	6.2	5.7	5	140	67	144.8	34	67.5	54.7	42.2	34	10.7	11.7
Thantikandh RM	5.2	6.7	5.6	1.4	53.7	3.8	4.2	5.1	309	70	707.1	52.8	131.3	95.2	58.3	63.7	9	14.2
Aathbis Mun.	6.6	7.2	6.8	3.3	35.7	4	3.9	3.7	617	137	237.2	76.4	99.7	87.8	75.5	77.8	4.9	6.6
Chamunda Bin.Mun.	4.9	10.3	6.5	0.2	52	2.5	2.6	2.8	387	87	41.4	66.4	116.1	82.5	48.3	58.1	2.7	6.3
Dullu Mun.	1.7	3.1	2.1	3.2	3.2	3.9	4	4.2	1076	54	72.2	152.9	133.6	94.5	55.5	121.3	1.6	6.8
Narayan Mun.	5.7	9.5	7.4	41.3	42	5	5	5	556	78	216.7	111.3	160.8	147.9	135.1	110.5	105.4	6.7
Bhagawatimai RM	1.7	0	1.2	4.1	22.8	4.9	5	5.2	217	0	0	46.6	67.7	49.5	30.9	49.3	0.7	5
Dungeshwor RM	9.6	1.7	6.7	17.5	39.5	5.6	5.5	5.3	170	53	158.5	54.4	97.7	78	57.6	57	4.8	3.4
Gurans RM	1.4	6.6	3.8	0	19.9	7.6	7	6.3	198	61	332.8	51.1	97.3	90.5	84.2	43.8	0	2.1

Female Community Health Volunteer (FCHV) Programme

Organisation unit / Data	Number of mothers group meetings held	Percentage of Mother groups meeting held	Percentage of postpartum women visited by FCHVs	Percentage of pregnant women visited by FCHVs
DAILEKH	**10526**	**109.2**	**7.9**	**230.5**
Naumule RM	**747**	**79.8**	**20**	**159.9**
Mahabu RM	**945**	**133.7**	**8**	**233.6**
Bhairabi RM	**527**	**81.6**	**7.1**	**359.1**
Thantikandh RM	**452**	**81.4**	**20.4**	**218.9**
Aathbis Mun.	**858**	**94**	**9.2**	**207.4**
Chamunda Bin.Mun.	**687**	**92.3**	**5**	**195.2**
Dullu Mun.	**1394**	**87.1**	**6.1**	**173.7**
Narayan Mun.	**873**	**90.5**	**0.61**	**322.4**
Bhagawatimai RM	**837**	**87.1**	**2.4**	**217.1**
Dungeshwor RM	**662**	**97.9**	**7.5**	**309.7**
Gurans RM	**2544**	**273**	**1.4**	**256.8**

Family Planning Programme

Organisation unit / Data	Condom users(qty/150)	Contraceptive prevalence rate (unadjusted) among women of reproductive age (WRA)	Depo New Users Total	FP Methods New acceptor among as % of MWRA	IUCD New Users Total	Implant New Users Total	Pills New Users Total
DAILEKH	**2148.1**	**19.3**	**4905**	**16.9**	**80**	**667**	**1850**
Naumule RM	**125.5**	**23.3**	**396**	**16.9**	**0**	**79**	**173**
Mahabu RM	**193.2**	**16**	**403**	**19.1**	**2**	**38**	**178**
Bhairabi RM	**104.4**	**12.8**	**339**	**12.6**	**0**	**6**	**71**
Thantikandh RM	**142.1**	**21.5**	**322**	**15.6**	**10**	**33**	**100**
Aathbis Mun.	**192.6**	**14.4**	**460**	**12.5**	**0**	**41**	**142**
Chamunda Bin.Mun.	**95.4**	**16.7**	**551**	**17.4**	**2**	**64**	**250**
Dullu Mun.	**218.6**	**15.3**	**996**	**18.1**	**2**	**63**	**372**
Narayan Mun.	**585.2**	**35.4**	**654**	**27.5**	**62**	**172**	**300**
Bhagawatimai RM	**137.5**	**17.3**	**266**	**12.7**	**0**	**21**	**91**
Dungeshwor RM	**244.1**	**21.5**	**217**	**16.6**	**1**	**24**	**101**
Gurans RM	**109.4**	**18.5**	**301**	**12.6**	**1**	**126**	**72**

Mahabu RM	Naumule RM	DAILEKH	Organisation unit / Data
100	100	99	% of women receiving ANC incentives
99.7	99.7	99	% of women receiving maternity incentives
286.2	320.1	4870.7	ANC 1st visit Total
220	238	4112	ANC 4th visit Total
264	277	4494	Institutional Deliveries Total
0	0	2.7	Met need for emergency obstetric care
0	0	6	Number of blood units used for treating obstetric complications
0	0	28	Number of women treated for abortion complications
0	0	41	Number of women treated for haemorrhage
0	0	12	Number of women treated for prolonged/ obstructed labor
0	0	55	Number of women treated for retained Placenta
0	0	0.65	% of assisted (Vaccum or Forceps) deliveries
39.3	41.2	63.2	% of births attended by a Skilled Birth Attendant (SBA)
24.3	18.5	14.9	% of births attended by a health worker other than SBA
		70.1	% of clients received post abortion contraceptives
0	0	2.2	% of deliveries by caesarean section
63.6	59.7	78.1	% of institutional deliveries
100	100	97.2	% of normal deliveries
61.9	67.5	77	% of postpartum women who received Vitamin A supplementation
59.5	59.7	77.6	% of postpartum women who received a 45 day supply of IFA
63.6	59.7	78.1	% of postpartum women who received a PNC check-up within 24 hours of delivery
0	0	6	% of pregnancies >=20yrs terminated by induced procedure at health facility
0	0	6.6	% of pregnancies terminated by induced procedure at health facility
0	0	1.8	% of pregnancies terminated by induced procedure at health facility- surgical
69.2	69.2	84.9	% of pregnant women who had First ANC checkup as protocal
86.5	81.5	100.7	% of pregnant women who had at least one ANC checkup
52.9	51.2	71.2	% of pregnant women who had four ANC checkups as per protocol
		4.1	% of women treated for an obstetric complication who received a blood transfusion
57.3	56.3	58.3	% of women who had 3 PNC check-ups as per protocol
53	51.3	71.4	% of women who had four ANC check-ups as per protocol
51.1	53.2	69.1	% of women who received a 180 day supply of Iron Folic Acid during pregnancy
0	0	4.9	%of pregnancies terminated by induced procedure at health facility -Medical
		10.1	Proportion of <20 yrs women receiving abortion service
		4.3	Proportion of LARC among post abortion contraception used
0	0	485	Total Abortion service received
0	0	99	Total C/S Delivery
0	0	485	Total CAC Services
264	277	4494	Total Delivery
0	2	5	Total Maternal Deaths
0	1	19	Total Neonatal Deaths
264	277	4366	Total Normal delivery
0	0	243	Total PAC services
0	0	29	Total vacuum/forceps delivery

Aathbis Mun.	Thantikandh RM	Bhairabi RM	Organisation unit / Data
100	96	100	% of women receiving ANC incentives
99.7	98	99.7	% of women receiving maternity incentives
627.3	330.1	257.3	ANC 1st visit Total
519	243	182	ANC 4th visit Total
533	338	200	Institutional Deliveries Total
1.3	2.4	0.16	Met need for emergency obstetric care
0	0	0	Number of blood units used for treating obstetric complications
0	3	0	Number of women treated for abortion complications
15	12	1	Number of women treated for haemorrhage
0	0	0	Number of women treated for prolonged/ obstructed labor
1	23	10	Number of women treated for retained Placenta
0	0	0	% of assisted (Vaccum or Forceps) deliveries
55.7	50.3	37.9	% of births attended by a Skilled Birth Attendant (SBA)
12.2	20	9.2	% of births attended by a health worker other than SBA
	0		% of clients received post abortion contraceptives
0	0	0	% of deliveries by caesarean section
67.9	70.3	47.1	% of institutional deliveries
100	100	100	% of normal deliveries
70.6	75.7	51.5	% of postpartum women who received Vitamin A supplementation
67.8	70.1	47.1	% of postpartum women who received a 45 day supply of IFA
67.9	70.3	47.1	% of postpartum women who received a PNC check-up within 24 hours of delivery
0	1.8	0	% of pregnancies >=20yrs terminated by induced procedure at health facility
0	1.8	0	% of pregnancies terminated by induced procedure at health facility
0	0	0	% of pregnancies terminated by induced procedure at health facility- surgical
80.1	68.8	60.7	% of pregnant women who had First ANC checkup as protocal
104.6	87.7	76.2	% of pregnant women who had at least one ANC checkup
65.9	50.4	42.7	% of pregnant women who had four ANC checkups as per protocol
0	0	0	% of women treated for an obstetric complication who received a blood transfusion
66.5	62.4	41.6	% of women who had 3 PNC check-ups as per protocol
66.1	50.5	42.8	% of women who had four ANC check-ups as per protocol
60.6	49.9	40.5	% of women who received a 180 day supply of Iron Folic Acid during pregnancy
0	1.8	0	%of pregnancies terminated by induced procedure at health facility -Medical
	0		Proportion of <20 yrs women receiving abortion service
	0		Proportion of LARC among post abortion contraception used
0	11	0	Total Abortion service received
0	0	0	Total C/S Delivery
0	11	0	Total CAC Services
533	338	200	Total Delivery
1	1	0	Total Maternal Deaths
1	10	4	Total Neonatal Deaths
533	338	200	Total Normal delivery
0	4	0	Total PAC services
0	0	0	Total vacuum/forceps delivery

Bhagawatimai RM	Narayan Mun.	Dullu Mun.	Chamunda Bin.Mun.	Organisation unit / Data
100	100	97.1	100	% of women receiving ANC incentives
99.7	99.7	97	99.7	% of women receiving maternity incentives
300.2	775.9	866.6	535.5	ANC 1st visit Total
267	778	702	452	ANC 4th visit Total
285	701	817	591	Institutional Deliveries Total
0.32	25.4	0.74	0.1	Met need for emergency obstetric care
0	6	0	0	Number of blood units used for treating obstetric complications
0	25	0	0	Number of women treated for abortion complications
1	2	8	1	Number of women treated for haemorrhage
0	11	1	0	Number of women treated for prolonged/ obstructed labor
0	3	18	0	Number of women treated for retained Placenta
0	4.1	0	0	% of assisted (Vaccum or Forceps) deliveries
48	140.6	72.8	89.5	% of births attended by a Skilled Birth Attendant (SBA)
20.7	3.1	18.4	0	% of births attended by a health worker other than SBA
	75.5	107.4		% of clients received post abortion contraceptives
0	14.1	0	0	% of deliveries by caesarean section
68.7	143.6	91.2	89.5	% of institutional deliveries
100	81.7	100	100	% of normal deliveries
71.8	143.9	70.6	92.1	% of postpartum women who received Vitamin A supplementation
69.4	143.6	90.8	89.5	% of postpartum women who received a 45 day supply of IFA
68.7	143.6	91.2	89.5	% of postpartum women who received a PNC check-up within 24 hours of delivery
0	59.4	2.1	0	% of pregnancies >=20yrs terminated by induced procedure at health facility
0	65.9	2.4	0	% of pregnancies terminated by induced procedure at health facility
0	20.8	0	0	% of pregnancies terminated by induced procedure at health facility- surgical
72.5	159.4	97	81.4	% of pregnant women who had First ANC checkup as protocal
79.5	192	109	95.2	% of pregnant women who had at least one ANC checkup
64.2	159	78.1	68.3	% of pregnant women who had four ANC checkups as per protocol
0	12.2	0	0	% of women treated for an obstetric complication who received a blood transfusion
21.7	75.4	58.7	72.4	% of women who had 3 PNC check-ups as per protocol
64.3	159.4	78.3	68.5	% of women who had four ANC check-ups as per protocol
60.2	159.4	75.4	68.2	% of women who received a 180 day supply of Iron Folic Acid during pregnancy
0	45.1	2.4	0	%of pregnancies terminated by induced procedure at health facility -Medical
	10	11.1		Proportion of <20 yrs women receiving abortion service
	1.9	48.1		Proportion of LARC among post abortion contraception used
0	412	27	0	Total Abortion service received
0	99	0	0	Total C/S Delivery
0	412	27	0	Total CAC Services
285	701	817	591	Total Delivery
0	0	1	0	Total Maternal Deaths
0	0	0	0	Total Neonatal Deaths
285	573	817	591	Total Normal delivery
0	217	14	8	Total PAC services
0	29	0	0	Total vacuum/forceps delivery

Gurans RM	Dungeshwor RM	Organisation unit / Data
98.5	100	% of women receiving ANC incentives
98.3	99.7	% of women receiving maternity incentives
348	223.4	ANC 1st visit Total
314	197	ANC 4th visit Total
339	149	Institutional Deliveries Total
0	0.46	Met need for emergency obstetric care
0	0	Number of blood units used for treating obstetric complications
0	0	Number of women treated for abortion complications
0	1	Number of women treated for haemorrhage
0	0	Number of women treated for prolonged/ obstructed labor
0	0	Number of women treated for retained Placenta
0	0	% of assisted (Vaccum or Forceps) deliveries
39.6	49.5	% of births attended by a Skilled Birth Attendant (SBA)
38.5	1.4	% of births attended by a health worker other than SBA
	0	% of clients received post abortion contraceptives
0	0	% of deliveries by caesarean section
78.1	50.9	% of institutional deliveries
100	100	% of normal deliveries
76.5	51.5	% of postpartum women who received Vitamin A supplementation
75.6	50.9	% of postpartum women who received a 45 day supply of IFA
78.1	50.9	% of postpartum women who received a PNC check-up within 24 hours of delivery
0	8	% of pregnancies >=20yrs terminated by induced procedure at health facility
0	9.4	% of pregnancies terminated by induced procedure at health facility
0	0	% of pregnancies terminated by induced procedure at health facility- surgical
80.4	76.5	% of pregnant women who had First ANC checkup as protocal
89.2	79.9	% of pregnant women who had at least one ANC checkup
72.2	67.1	% of pregnant women who had four ANC checkups as per protocol
	0	% of women treated for an obstetric complication who received a blood transfusion
76.3	22.5	% of women who had 3 PNC check-ups as per protocol
72.4	67.2	% of women who had four ANC check-ups as per protocol
65	66.2	% of women who received a 180 day supply of Iron Folic Acid during pregnancy
0	9.4	%of pregnancies terminated by induced procedure at health facility -Medical
	14.3	Proportion of <20 yrs women receiving abortion service
	0	Proportion of LARC among post abortion contraception used
0	35	Total Abortion service received
0	0	Total C/S Delivery
0	35	Total CAC Services
339	149	Total Delivery
0	0	Total Maternal Deaths
2	1	Total Neonatal Deaths
339	149	Total Normal delivery
0	0	Total PAC services
0	0	Total vacuum/forceps delivery

Tuberculosis Programme

Organisation unit / Data	CNR PBC Relapse cases	CNR PBC new cases	New TB agewise	No of TB cases treatment completed	No. of new TB cases registered	TB - Case notification rate	TB - Case notification rate (New and Relapse cases)	TB - Treatment Success Rate (New and Relapse)	TB - cured rate	Total Agewise(new+relapse) TB cases	Total NEW and Relapse TB Cases	Total Number of TB Relapse cases agewise	Total Relapse caeses	Total TB cases (All form of TB cases)
DAILEKH	2.7	28.3	157	38	157	66.9	65	92.4	73.4	165	165	8	8	170
Naumule RM	4.8	29.1	13	3	13	72.7	67.8	100	100	14	14	1	1	15
Mahabu RM	0	27.7	12	2	12	66.4	66.4	100	100	12	12	0	0	12
Bhairabi RM	0	33.3	9	2	9	49.9	49.9	80	66.7	9	9	0	0	9
Thantikandh RM	5.3	32	17	7	17	101.5	101.5	93.8	88.9	19	19	2	2	19
Aathbis Mun.	0	31.3	24	4	24	75.2	75.2	88.9	86.7	24	24	0	0	24
Chamunda Bin.Mun.	7.5	37.5	23	4	23	101.3	93.8	100	20	25	25	2	2	27
Dullu Mun.	7.5	40.3	26	9	26	73.1	73.1	96.6	88.9	29	29	3	3	29
Narayan Mun.	0	15.5	8	1	8	30.9	30.9	100	100	8	8	0	0	8
Bhagawatimai RM	0	10.9	5	0	5	27.2	27.2	50	50	5	5	0	0	5
Dungeshwor RM	0	34.2	12	2	12	95.7	82	77.8	42.9	12	12	0	0	14
Gurans RM	0	9.4	8	4	8	37.5	37.5	85.7	33.3	8	8	0	0	8

Leprosy Programme

Organisation unit / Data	Female Proportion among New Leprosy cases	Incidence of leprosy per 10,000 population	Leprosy-Patient at the end of this month-Multi Bacillary (Female)	Leprosy-Patient at the end of this month-Multi Bacillary (Male)	Leprosy-Patient at the end of this month-Pauci Bacillary (Male)	Leprosy-Total registered in this month-Multi Bacillary (Female)	Leprosy-Total registered in this month-Multi Bacillary (Male)	Leprosy-Total treated in this month-Pauci Bacillary (Male)	New case detection rate of leprosy	% of leprosy cases released from treatment (RFT)	% of new leprosy cases that are MB	% of relapse cases of leprosy	Prevalence of leprosy per 10,000 population	Total Leprosy New cases
DAILEKH	33.3	0.24	16	96	5	16	101	6	2.4	4.9	100	0	0.24	6
Naumule RM	0	0.48	0	18	0	0	19	0	4.8	5.3	100	0	0.48	1
Mahabu RM	0	0.55	0	4	0	0	4	0	5.5	0	100	0	0.55	1
Bhairabi RM		0	0	0	0	0	0	0	0				0	0
Thantikandh RM		0	0	12	0	0	12	0	0	0		0	0	0
Aathbis Mun.	0	0.63	0	14	5	0	15	6	6.3	9.5	100	0	0.63	2
Chamunda Bin.Mun.		0	12	12	0	12	12	0	0	0		0	0	0
Dullu Mun.	100	0.5	4	32	0	4	34	0	5	5.3	100	0	0.5	2
Narayan Mun.		0	0	4	0	0	5	0	0	20		0	0	0
Bhagawatimai RM		0	0	0	0	0	0	0	0				0	0
Dungeshwor RM		0	0	0	0	0	0	0	0				0	0
Gurans RM		0	0	0	0	0	0	0	0				0	0

HIV/AIDS and STI Programme

Organisation unit / Data	% of pregnant women who tested for HIV at an ANC checkup	% of Sex Workers who received an HIV test (e.g. through an outreach service, drop-in centre or sexual health clinic)	% of PWIDs who received an HIV test (e.g. through an outreach service, drop-in centre or sexual health clinic)	% of diagnosed Sexually Transmitted Infections (STIs) treated	% of diagnosed Sexually Transmitted Infections (STIs) treated- <14 Yrs	% of high risk groups who received an HIV test (e.g. through an outreach service, drop-in centre or sexual health clinic)	% of male labor migrants who received an HIV test (e.g. through an outreach service, drop-in centre or sexual health clinic)	% of men who have sex with men who received an HIV test (e.g. through an outreach service, drop-in centre or sexual health clinic)	% of women screened for syphilis at an antenatal care (ANC) check-up	% of women who tested positive for syphilis at an ANC check-up and were treated
DAILEKH	74.3	0	0	100	100	0	0	0	0	0
Naumule RM	56.2	0	0	0	0	0	0	0	0	0
Mahabu RM	73.6	0	0	0	0	0	0	0	0	0
Bhairabi RM	37.2	0	0	0	0	0	0	0	0	0
Thantikandh RM	54.1	0	0	0	0	0	0	0	0	0
Aathbis Mun.	47.5	0	0	0	0	0	0	0	0	0
Chamunda Bin.Mun.	71.3	0	0	0	0	0	0	0	0	0
Dullu Mun.	54.9	0	0	0	0	0	0	0	0	0
Narayan Mun.	163.2	0	0	100	100	0	0	0	0	0
Bhagawatimai RM	45	0	0	0	0	0	0	0	0	0
Dungeshwor RM	92.9	0	0	0	0	0	0	0	0	0
Gurans RM	55.1	0	0	0	0	0	0	0	0	0

Malaria Programme

Organisation unit / Data	Annual blood examination rate (ABER) of malaria in high risk districts	Case fatality rate of malaria	Malaria annual parasite incidence (per 1000 population in high risk districts)	% of Plasmodium Falciparum (PF) cases in high risk districts	% of imported cases among positive cases of malaria	Slide positivity rate (SPR) of malaria in high risk districts	Total Malaria Indigenous Cases	Total Malaria PF cases	Total Malaria PF indigenous	Total Malaria positive Cases	Total Maternal Deaths	Total malaria PF Imported	Total malaria Slide collection	Total malaria cases (sum of classification)	Total malaria positive (sum of test methods)	Total malaria slide examination
DAILEKH	0.13		0.01	0	66.7	0.81	1	0	0	3	5	0	371	3	3	371
Naumule RM	0.04		0			0	0	0	0	0	2	0	7	0	0	7
Mahabu RM	0		0				0	0	0	0	0	0	0	0	0	0
Bhairabi RM	0		0				0	0	0	0	0	0	0	0	0	0
Thantikandh RM	0		0				0	0	0	0	1	0	0	0	0	0
Aathbis Mun.	0.09		0			0	0	0	0	0	1	0	29	0	0	29
Chamunda Bin.Mun.	0.03		0			0	0	0	0	0	0	0	8	0	0	8
Dullu Mun.	0.12		0			0	0	0	0	0	1	0	56	0	0	56
Narayan Mun.	0.76		0.06	0	50	0.79	1	0	0	2	0	0	254	2	2	254
Bhagawatimai RM	0		0				0	0	0	0	0	0	0	0	0	0
Dungeshwor RM	0.05		0.05	0	100	10	0	0	0	1	0	0	10	1	1	10
Gurans RM	0.03		0			0	0	0	0	0	0	0	7	0	0	7

OPD Services

Organisation unit / Data	% of OPD New Visits among total population	Total New OPD Visits	Total New OPD Visits Female	Total New OPD Visits Male
DAILEKH	87.1	221818	133951	87867
Naumule RM	99.2	20536	12280	8256
Mahabu RM	75.9	13756	8138	5618
Bhairabi RM	48.3	8742	5357	3385
Thantikandh RM	67.4	12656	7633	5023

Organisation unit / Data	% of OPD New Visits among total population	Total New OPD Visits	Total New OPD Visits Female	Total New OPD Visits Male
Aathbis Mun.	85.9	27513	15041	12472
Chamunda Bin.Mun.	53.6	14316	8927	5389
Dullu Mun.	78.3	31156	18434	12722
Narayan Mun.	162.3	42079	26736	15343
Bhagawatimai RM	89.2	16465	9286	7179
Dungeshwor RM	116.8	17138	10821	6317
Gurans RM	81.6	17461	11298	6163

7.4. Raw Data (2078-079)

Reporting Status

बार्षिक प्रगती प्रतिवेदन

उमेर समूह	नयाँ सेवाग्राहीको सँख्या		जम्मा (नयाँ/ पुराना) सेवाग्राही सँख्या		रेफर गरिएका जम्मा सेवाग्राही		कार्यक्षेत्र भित्र पर्ने निकाय	संचालन/ प्रतिवेदन हुनुपर्ने (संख्या)	संचालन/ प्रतिवेदन भएको (संख्या)	सेवा पाएका जम्मा सेवाग्राहीको संख्या
	म.	पु.	म.	पु.	म.	पु.	गाउँघर क्लिनिक	2573	2334	46335
०-९ बर्ष	23299	25448	25955	28342	19	10	खोप क्लिनिक	3141	3037	47454
१०-१९ वर्ष	26098	19508	28892	21398	20	13	खोप सेसन	3107	2994	
२०-५९ बर्ष	85690	36033	100418	39895	60	26	म. स्वा. स्व. से.	9852	9635	167340
≥ ६० बर्ष	16918	15137	19193	17045	21	3				

Naumule RM	DAILEKH	Organisation unit / Data
397	4915	EPI Prog.-Children Immunized-MR-12-23 Months
469	5678	EPI Prog.-Children Immunized-MR-9-11 Months
4	102	EPI Prog.-Vaccine Type-Children Immunized-3 dose completion of DPT-HepB-Hib&OPV after 1 year
353	4834	EPI Prog.-Vaccine Type-Children Immunized-BCG Doses
429	5456	EPI Prog.-Vaccine Type-Children Immunized-JE
176	2421	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2
132	2008	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2+
395	5503	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-1st
404	5738	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-2nd
402	5731	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-3rd
389	5292	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-1st
410	5447	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-2nd
398	5566	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-1st
412	5818	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-2nd
407	5751	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-3rd
399	5499	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-1st
405	5760	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-2nd
469	5610	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-3rd
365	5139	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-1st
330	5128	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-2nd
5680	55950	EPI Prog.-Vaccine Type-Dose-Expended-BCG Doses
3170	32270	EPI Prog.-Vaccine Type-Dose-Expended-DPT-HepB-Hib
1870	19630	EPI Prog.-Vaccine Type-Dose-Expended-FIPV Doses
1535	16459	EPI Prog.-Vaccine Type-Dose-Expended-JE
3205	30210	EPI Prog.-Vaccine Type-Dose-Expended-MR
3230	32246	EPI Prog.-Vaccine Type-Dose-Expended-OPV
2477	27106	EPI Prog.-Vaccine Type-Dose-Expended-PCV
1203	15735	EPI Prog.-Vaccine Type-Dose-Expended-Rota Doses
2660	21396	EPI Prog.-Vaccine Type-Dose-Expended-TD(Pregnant Women)
5680	55950	EPI Prog.-Vaccine Type-Dose-Received-BCG Doses
3170	32310	EPI Prog.-Vaccine Type-Dose-Received-DPT-HepB-Hib
1870	19643	EPI Prog.-Vaccine Type-Dose-Received-FIPV Doses
1535	16524	EPI Prog.-Vaccine Type-Dose-Received-JE
3205	30280	EPI Prog.-Vaccine Type-Dose-Received-MR
3230	32246	EPI Prog.-Vaccine Type-Dose-Received-OPV
2477	27106	EPI Prog.-Vaccine Type-Dose-Received-PCV
1203	15735	EPI Prog.-Vaccine Type-Dose-Received-Rota Doses
2660	21461	EPI Prog.-Vaccine Type-Dose-Received-TD(Pregnant Women)
190	2755	EPI-TD-Pregnant Women-1

Thantikandh RM	Bhairabi RM	Mahabu RM	Organisation unit / Data
363	425	336	EPI Prog.-Children Immunized-MR-12-23 Months
494	502	386	EPI Prog.-Children Immunized-MR-9-11 Months
0	16	0	EPI Prog.-Vaccine Type-Children Immunized-3 dose completion of DPT-HepB-Hib&OPV after 1 year
418	382	347	EPI Prog.-Vaccine Type-Children Immunized-BCG Doses
436	488	390	EPI Prog.-Vaccine Type-Children Immunized-JE
150	172	142	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2
178	166	84	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2+
434	489	416	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-1st
450	552	420	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-2nd
467	558	426	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-3rd
395	498	409	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-1st
427	549	419	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-2nd
458	468	416	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-1st
509	508	420	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-2nd
534	504	426	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-3rd
428	489	416	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-1st
456	554	420	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-2nd
491	495	384	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-3rd
459	423	404	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-1st
445	459	408	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-2nd
3260	4300	4120	EPI Prog.-Vaccine Type-Dose-Expended-BCG Doses
2320	2280	3200	EPI Prog.-Vaccine Type-Dose-Expended-DPT-HepB-Hib
1760	1547	1613	EPI Prog.-Vaccine Type-Dose-Expended-FIPV Doses
1320	1200	1380	EPI Prog.-Vaccine Type-Dose-Expended-JE
2090	2155	2355	EPI Prog.-Vaccine Type-Dose-Expended-MR
2570	2070	3180	EPI Prog.-Vaccine Type-Dose-Expended-OPV
2418	2070	2057	EPI Prog.-Vaccine Type-Dose-Expended-PCV
1535	1200	1460	EPI Prog.-Vaccine Type-Dose-Expended-Rota Doses
1590	1340	1790	EPI Prog.-Vaccine Type-Dose-Expended-TD(Pregnant Women)
3260	4300	4120	EPI Prog.-Vaccine Type-Dose-Received-BCG Doses
2320	2280	3200	EPI Prog.-Vaccine Type-Dose-Received-DPT-HepB-Hib
1760	1547	1613	EPI Prog.-Vaccine Type-Dose-Received-FIPV Doses
1320	1200	1380	EPI Prog.-Vaccine Type-Dose-Received-JE
2090	2155	2355	EPI Prog.-Vaccine Type-Dose-Received-MR
2570	2070	3180	EPI Prog.-Vaccine Type-Dose-Received-OPV
2418	2070	2057	EPI Prog.-Vaccine Type-Dose-Received-PCV
1535	1200	1460	EPI Prog.-Vaccine Type-Dose-Received-Rota Doses
1590	1340	1790	EPI Prog.-Vaccine Type-Dose-Received-TD(Pregnant Women)
168	209	236	EPI-TD-Pregnant Women-1

Narayan Mun.	Dullu Mun.	Chamunda Bin.Mun.	Aathbis Mun.	Organisation unit / Data
533	748	456	712	EPI Prog.-Children Immunized-MR-12-23 Months
608	903	579	714	EPI Prog.-Children Immunized-MR-9-11 Months
13	36	27	2	EPI Prog.-Vaccine Type-Children Immunized-3 dose completion of DPT-HepB-Hib&OPV after 1 year
476	802	521	728	EPI Prog.-Vaccine Type-Children Immunized-BCG Doses
600	864	520	721	EPI Prog.-Vaccine Type-Children Immunized-JE
318	379	260	295	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2
174	348	180	388	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2+
551	899	578	738	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-1st
578	959	613	734	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-2nd
602	895	585	732	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-3rd
551	895	520	661	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-1st
602	876	442	682	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-2nd
551	935	612	726	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-1st
578	991	621	747	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-2nd
602	910	557	746	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-3rd
551	903	585	729	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-1st
578	954	619	743	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-2nd
608	870	554	732	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-3rd
515	814	555	652	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-1st
552	829	536	622	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-2nd
6070	10620	2830	5440	EPI Prog.-Vaccine Type-Dose-Expended-BCG Doses
2940	5290	2760	3480	EPI Prog.-Vaccine Type-Dose-Expended-DPT-HepB-Hib
2065	3134	1219	1965	EPI Prog.-Vaccine Type-Dose-Expended-FIPV Doses
1740	2864	1225	1520	EPI Prog.-Vaccine Type-Dose-Expended-JE
3420	5240	1710	2900	EPI Prog.-Vaccine Type-Dose-Expended-MR
2935	5360	2655	3450	EPI Prog.-Vaccine Type-Dose-Expended-OPV
2462	4370	2663	3016	EPI Prog.-Vaccine Type-Dose-Expended-PCV
1627	2457	1380	1470	EPI Prog.-Vaccine Type-Dose-Expended-Rota Doses
1761	3925	1680	1940	EPI Prog.-Vaccine Type-Dose-Expended-TD(Pregnant Women)
6070	10620	2830	5440	EPI Prog.-Vaccine Type-Dose-Received-BCG Doses
2940	5330	2760	3480	EPI Prog.-Vaccine Type-Dose-Received-DPT-HepB-Hib
2065	3144	1219	1965	EPI Prog.-Vaccine Type-Dose-Received-FIPV Doses
1740	2914	1225	1520	EPI Prog.-Vaccine Type-Dose-Received-JE
3420	5310	1710	2900	EPI Prog.-Vaccine Type-Dose-Received-MR
2935	5360	2655	3450	EPI Prog.-Vaccine Type-Dose-Received-OPV
2462	4370	2663	3016	EPI Prog.-Vaccine Type-Dose-Received-PCV
1627	2457	1380	1470	EPI Prog.-Vaccine Type-Dose-Received-Rota Doses
1761	3950	1680	1940	EPI Prog.-Vaccine Type-Dose-Received-TD(Pregnant Women)
372	429	295	324	EPI-TD-Pregnant Women-1

Gurans RM	Dungeshwor RM	Bhagawatim ai RM	Organisation unit / Data
373	243	329	EPI Prog.-Children Immunized-MR-12-23 Months
418	254	351	EPI Prog.-Children Immunized-MR-9-11 Months
4	0	0	EPI Prog.-Vaccine Type-Children Immunized-3 dose completion of DPT-HepB-Hib&OPV after 1 year
314	190	303	EPI Prog.-Vaccine Type-Children Immunized-BCG Doses
397	276	335	EPI Prog.-Vaccine Type-Children Immunized-JE
228	163	138	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2
151	93	114	EPI Prog.-Vaccine Type-Children Immunized-TD(Pregnant Women)-2+
414	261	328	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-1st
445	246	337	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-2nd
448	258	358	EPI Prog.-Vaccine Type-Dose-Children Immunized-DPT-HepB-Hib-3rd
386	264	324	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-1st
427	256	357	EPI Prog.-Vaccine Type-Dose-Children Immunized-FIPV-2nd
415	261	326	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-1st
448	246	338	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-2nd
447	257	361	EPI Prog.-Vaccine Type-Dose-Children Immunized-OPV-3rd
409	261	329	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-1st
448	246	337	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-2nd
404	253	350	EPI Prog.-Vaccine Type-Dose-Children Immunized-PCV-3rd
407	249	296	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-1st
393	225	329	EPI Prog.-Vaccine Type-Dose-Children Immunized-Rota-2nd
5120	3460	5050	EPI Prog.-Vaccine Type-Dose-Expended-BCG Doses
2740	1760	2330	EPI Prog.-Vaccine Type-Dose-Expended-DPT-HepB-Hib
1763	1199	1495	EPI Prog.-Vaccine Type-Dose-Expended-FIPV Doses
1415	990	1270	EPI Prog.-Vaccine Type-Dose-Expended-JE
2720	1895	2520	EPI Prog.-Vaccine Type-Dose-Expended-MR
2730	1740	2326	EPI Prog.-Vaccine Type-Dose-Expended-OPV
2288	1303	1982	EPI Prog.-Vaccine Type-Dose-Expended-PCV
1417	760	1226	EPI Prog.-Vaccine Type-Dose-Expended-Rota Doses
2230	1090	1390	EPI Prog.-Vaccine Type-Dose-Expended-TD(Pregnant Women)
5120	3460	5050	EPI Prog.-Vaccine Type-Dose-Received-BCG Doses
2740	1760	2330	EPI Prog.-Vaccine Type-Dose-Received-DPT-HepB-Hib
1766	1199	1495	EPI Prog.-Vaccine Type-Dose-Received-FIPV Doses
1415	990	1285	EPI Prog.-Vaccine Type-Dose-Received-JE
2720	1895	2520	EPI Prog.-Vaccine Type-Dose-Received-MR
2730	1740	2326	EPI Prog.-Vaccine Type-Dose-Received-OPV
2288	1303	1982	EPI Prog.-Vaccine Type-Dose-Received-PCV
1417	760	1226	EPI Prog.-Vaccine Type-Dose-Received-Rota Doses
2260	1100	1390	EPI Prog.-Vaccine Type-Dose-Received-TD(Pregnant Women)
231	125	176	EPI-TD-Pregnant Women-1

Community Based Integrated Management of Neonatal and Childhood Illnesses (CB-IMNCI) Programme

Organisation unit / Data	DAILEKH	Naumule RM
CBIMCI <2Months-Classification-Jaundice Cases	7	0
CBIMCI <2Months-Classification-LBI Cases	118	5
CBIMCI <2Months-Classification-Low Weight/Feeding Problem 29-59 days Facility	21	0
CBIMCI <2Months-Classification-Low Weight/Feeding Problem ≤28 days Facility	29	1
CBIMCI <2Months-Classification-PSBI Cases	83	1
CBIMCI <2Months-Facility-Treatment-Other Antibiotics	11	3
CBIMCI <2Months-Follow-Up	38	0
CBIMCI <2Months-Refer Cases	12	1
CBIMCI <2Months-Total Cases	391	11
CBIMCI <2Months-Treatment-Amoxicillin Paediatrics	73	3
CBIMCI <2Months-Treatment-Ampicillin Paediatrics	6	0
CBIMCI <2Months-Treatment-Gentamycin 1st Dose	74	1
CBIMCI <2Months-Treatment-Gentamycin Complete dose	59	0
CBIMCI-(2-59Months)-Classification-ARI-No Pneumonia	9286	540
CBIMCI-(2-59Months)-Classification-ARI-Pneumonia	1593	66
CBIMCI-(2-59Months)-Classification-ARI-Severe Pneu/Very Severe Disease	92	0
CBIMCI-(2-59Months)-Classification-Anaemia	2	0
CBIMCI-(2-59Months)-Classification-Diarrhoea-Dysentery	167	14
CBIMCI-(2-59Months)-Classification-Diarrhoea-No Dehydration	4791	481
CBIMCI-(2-59Months)-Classification-Diarrhoea-Prolonged Diarrhoea	17	0
CBIMCI-(2-59Months)-Classification-Diarrhoea-Severe Dehydration	19	0
CBIMCI-(2-59Months)-Classification-Diarrhoea-Some Dehydration	842	71
CBIMCI-(2-59Months)-Classification-Ear Infection	900	43
CBIMCI-(2-59Months)-Classification-Measles	4	0
CBIMCI-(2-59Months)-Classification-Other Fever	6070	577
CBIMCI-(2-59Months)-Classification-Severe Malnutrition	130	10
CBIMCI-(2-59Months)-Follow-Up	862	8
CBIMCI-(2-59Months)-Other	4513	220
CBIMCI-(2-59Months)-Refer-ARI	35	0
CBIMCI-(2-59Months)-Refer-Diarrhoea	19	0
CBIMCI-(2-59Months)-Refer-Others	35	4
CBIMCI-(2-59Months)-Total Sick Children	28204	2012
CBIMCI-(2-59Months)-Treatment-Amoxicillin	1538	66
CBIMCI-(2-59Months)-Treatment-Antehelminthes	411	4
CBIMCI-(2-59Months)-Treatment-IV Fluids	23	0
CBIMCI-(2-59Months)-Treatment-ORS & Zinc	5353	560
CBIMCI-(2-59Months)-Treatment-Other Antibiotics Facility	167	0
CBIMCI-(2-59Months)-Treatment-Vit A	34	1

Aathbis Mun.	Thantikandh RM	Bhairabi RM	Mahabu RM	Organisation unit / Data
0	2	0	0	CBIMCI <2Months-Classification-Jaundice Cases
10	14	2	2	CBIMCI <2Months-Classification-LBI Cases
2	12	0	0	CBIMCI <2Months-Classification-Low Weight/Feeding Problem 29-59 days Facility
1	16	0	0	CBIMCI <2Months-Classification-Low Weight/Feeding Problem ≤28 days Facility
8	20	4	0	CBIMCI <2Months-Classification-PSBI Cases
0	2	0	0	CBIMCI <2Months-Facility-Treatment-Other Antibiotics
6	4	2	2	CBIMCI <2Months-Follow-Up
0	1	3	0	CBIMCI <2Months-Refer Cases
58	58	6	3	CBIMCI <2Months-Total Cases
9	10	1	2	CBIMCI <2Months-Treatment-Amoxicillin Paediatrics
0	5	0	0	CBIMCI <2Months-Treatment-Ampicillin Paediatrics
7	14	4	0	CBIMCI <2Months-Treatment-Gentamycin 1st Dose
7	9	1	0	CBIMCI <2Months-Treatment-Gentamycin Complete dose
1166	558	251	531	CBIMCI-(2-59Months)-Classification-ARI-No Pneumonia
151	157	22	140	CBIMCI-(2-59Months)-Classification-ARI-Pneumonia
3	10	1	4	CBIMCI-(2-59Months)-Classification-ARI-Severe Pneu/Very Severe Disease
0		0	0	CBIMCI-(2-59Months)-Classification-Anaemia
19	29	0	0	CBIMCI-(2-59Months)-Classification-Diarrhoea-Dysentery
755	442	110	197	CBIMCI-(2-59Months)-Classification-Diarrhoea-No Dehydration
3	1	0	0	CBIMCI-(2-59Months)-Classification-Diarrhoea-Prolonged Diarrhoea
0	6	0	1	CBIMCI-(2-59Months)-Classification-Diarrhoea-Severe Dehydration
35	187	24	88	CBIMCI-(2-59Months)-Classification-Diarrhoea-Some Dehydration
102	182	20	49	CBIMCI-(2-59Months)-Classification-Ear Infection
0		0	0	CBIMCI-(2-59Months)-Classification-Measles
853	984	140	273	CBIMCI-(2-59Months)-Classification-Other Fever
57	4	9	1	CBIMCI-(2-59Months)-Classification-Severe Malnutrition
172	59	4	69	CBIMCI-(2-59Months)-Follow-Up
732	495	105	127	CBIMCI-(2-59Months)-Other
0	1	1	0	CBIMCI-(2-59Months)-Refer-ARI
0		0	0	CBIMCI-(2-59Months)-Refer-Diarrhoea
14		0	2	CBIMCI-(2-59Months)-Refer-Others
3613	3081	650	1431	CBIMCI-(2-59Months)-Total Sick Children
131	161	22	122	CBIMCI-(2-59Months)-Treatment-Amoxicillin
48	239	3	10	CBIMCI-(2-59Months)-Treatment-Antehelminthes
0	10	0	0	CBIMCI-(2-59Months)-Treatment-IV Fluids
778	596	131	228	CBIMCI-(2-59Months)-Treatment-ORS & Zinc
23	4	1	10	CBIMCI-(2-59Months)-Treatment-Other Antibiotics Facility
1	2	0	9	CBIMCI-(2-59Months)-Treatment-Vit A

Bhagawatimai RM	Narayan Mun.	Dullu Mun.	Chamunda Bin.Mun.	Organisation unit / Data
0	5	0	0	CBIMCI <2Months-Classification-Jaundice Cases
4	26	13	17	CBIMCI <2Months-Classification-LBI Cases
1	2	0	1	CBIMCI <2Months-Classification-Low Weight/Feeding Problem 29-59 days Facility
0	8	2	0	CBIMCI <2Months-Classification-Low Weight/Feeding Problem ≤28 days Facility
1	23	19	1	CBIMCI <2Months-Classification-PSBI Cases
0	4	0	2	CBIMCI <2Months-Facility-Treatment-Other Antibiotics
0	6	13	0	CBIMCI <2Months-Follow-Up
0	6	0	0	CBIMCI <2Months-Refer Cases
17	58	108	22	CBIMCI <2Months-Total Cases
4	26	13	1	CBIMCI <2Months-Treatment-Amoxicillin Paediatrics
0	1	0	0	CBIMCI <2Months-Treatment-Ampicillin Paediatrics
0	24	17	1	CBIMCI <2Months-Treatment-Gentamycin 1st Dose
0	21	16	1	CBIMCI <2Months-Treatment-Gentamycin Complete dose
848	1730	1370	1186	CBIMCI-(2-59Months)-Classification-ARI-No Pneumonia
88	224	431	145	CBIMCI-(2-59Months)-Classification-ARI-Pneumonia
1	54	14	3	CBIMCI-(2-59Months)-Classification-ARI-Severe Pneu/Very Severe Disease
0	0	0	0	CBIMCI-(2-59Months)-Classification-Anaemia
12	3	55	28	CBIMCI-(2-59Months)-Classification-Diarrhoea-Dysentery
392	990	613	430	CBIMCI-(2-59Months)-Classification-Diarrhoea-No Dehydration
0	1	0	6	CBIMCI-(2-59Months)-Classification-Diarrhoea-Prolonged Diarrhoea
0	12	0	0	CBIMCI-(2-59Months)-Classification-Diarrhoea-Severe Dehydration
57	46	76	237	CBIMCI-(2-59Months)-Classification-Diarrhoea-Some Dehydration
84	69	85	166	CBIMCI-(2-59Months)-Classification-Ear Infection
0	0	0	4	CBIMCI-(2-59Months)-Classification-Measles
241	1281	463	759	CBIMCI-(2-59Months)-Classification-Other Fever
1	2	32	6	CBIMCI-(2-59Months)-Classification-Severe Malnutrition
5	127	289	0	CBIMCI-(2-59Months)-Follow-Up
269	455	806	659	CBIMCI-(2-59Months)-Other
0	31	2	0	CBIMCI-(2-59Months)-Refer-ARI
0	14	2	0	CBIMCI-(2-59Months)-Refer-Diarrhoea
0	11	0	0	CBIMCI-(2-59Months)-Refer-Others
1991	4643	4069	3771	CBIMCI-(2-59Months)-Total Sick Children
93	224	414	146	CBIMCI-(2-59Months)-Treatment-Amoxicillin
6	21	5	14	CBIMCI-(2-59Months)-Treatment-Antehelminthes
0	12	0	1	CBIMCI-(2-59Months)-Treatment-IV Fluids
413	1036	605	642	CBIMCI-(2-59Months)-Treatment-ORS & Zinc
3	54	50	2	CBIMCI-(2-59Months)-Treatment-Other Antibiotics Facility
0	3	11	0	CBIMCI-(2-59Months)-Treatment-Vit A

Gurans RM	Dunges hwor RM	Organisation unit / Data
0	0	CBIMCI <2Months-Classification-Jaundice Cases
13	12	CBIMCI <2Months-Classification-LBI Cases
3	0	CBIMCI <2Months-Classification-Low Weight/Feeding Problem 29-59 days Facility
1	0	CBIMCI <2Months-Classification-Low Weight/Feeding Problem ≤28 days Facility
4	2	CBIMCI <2Months-Classification-PSBI Cases
0	0	CBIMCI <2Months-Facility-Treatment-Other Antibiotics
5	0	CBIMCI <2Months-Follow-Up
0	1	CBIMCI <2Months-Refer Cases
32	18	CBIMCI <2Months-Total Cases
1	3	CBIMCI <2Months-Treatment-Amoxicillin Paediatrics
0	0	CBIMCI <2Months-Treatment-Ampicillin Paediatrics
4	2	CBIMCI <2Months-Treatment-Gentamycin 1st Dose
3	1	CBIMCI <2Months-Treatment-Gentamycin Complete dose
588	518	CBIMCI-(2-59Months)-Classification-ARI-No Pneumonia
78	91	CBIMCI-(2-59Months)-Classification-ARI-Pneumonia
2	0	CBIMCI-(2-59Months)-Classification-ARI-Severe Pneu/Very Severe Disease
1	1	CBIMCI-(2-59Months)-Classification-Anaemia
6	1	CBIMCI-(2-59Months)-Classification-Diarrhoea-Dysentery
198	183	CBIMCI-(2-59Months)-Classification-Diarrhoea-No Dehydration
6	0	CBIMCI-(2-59Months)-Classification-Diarrhoea-Prolonged Diarrhoea
0	0	CBIMCI-(2-59Months)-Classification-Diarrhoea-Severe Dehydration
20	1	CBIMCI-(2-59Months)-Classification-Diarrhoea-Some Dehydration
70	30	CBIMCI-(2-59Months)-Classification-Ear Infection
0	0	CBIMCI-(2-59Months)-Classification-Measles
239	260	CBIMCI-(2-59Months)-Classification-Other Fever
5	3	CBIMCI-(2-59Months)-Classification-Severe Malnutrition
62	67	CBIMCI-(2-59Months)-Follow-Up
175	470	CBIMCI-(2-59Months)-Other
0	0	CBIMCI-(2-59Months)-Refer-ARI
3	0	CBIMCI-(2-59Months)-Refer-Diarrhoea
1	3	CBIMCI-(2-59Months)-Refer-Others
1382	156 1	CBIMCI-(2-59Months)-Total Sick Children
72	87	CBIMCI-(2-59Months)-Treatment-Amoxicillin
48	13	CBIMCI-(2-59Months)-Treatment-Antehelminthes
0	0	CBIMCI-(2-59Months)-Treatment-IV Fluids
198	166	CBIMCI-(2-59Months)-Treatment-ORS & Zinc
20	0	CBIMCI-(2-59Months)-Treatment-Other Antibiotics Facility
7	0	CBIMCI-(2-59Months)-Treatment-Vit A

Naumule RM	DAILEKH	Organisation unit / Data
176	750	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
30	66	IYCF & BVCPP-Age(12-17 Month)-First time-HF
0	2498	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
0	39	IYCF & BVCPP-Age(12-17 Month)-Second time-HF
210	747	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
22	29	IYCF & BVCPP-Age(18-23 Month)-First time-HF
0	2135	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
0	14	IYCF & BVCPP-Age(18-23 Month)-Second time-HF
10	584	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
0	15	IYCF & BVCPP-Age(18-23 Month)-Third time-HF
204	1370	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
73	95	IYCF & BVCPP-Age(6-11 Month)-First time-HF
505	4266	IYCF-Complimentary Feeding
701	4753	IYCF-Exclusive Breast Feeding
0	73	IYCF-Fortified Flour Distribution-Children Number
0	12	IYCF-Fortified Flour Distribution-Postpartum Mother
0	22	IYCF-Fortified Flour Distribution-Pregnant Women
2891	43302	Nutrition-< 5yr Children Receiving-Deworming Tab
2891	43230	Nutrition-< 5yr Children Receiving-Vitamin A-12-59 Months
466	7235	Nutrition-< 5yr Children Receiving-Vitamin A-6-11 Months
277	4464	Nutrition-PP Mother Receiving-45 Iron Tab
277	4282	Nutrition-PP Mother Receiving-Vitamin A cap
247	3977	Nutrition-Pregnant Women Receiving-180 Iron Tablets
358	5513	Nutrition-Pregnant Women Receiving-Deworming Tablets
366	5612	Nutrition-Pregnant Women Receiving-Iron Tablets at 1st time
21	201	Nutrition-Registered for GM-New Visit 0-11 Months - Moderate
729	6412	Nutrition-Registered for GM-New Visit 0-11 Months - Normal
2	75	Nutrition-Registered for GM-New Visit 0-11 Months - Severe
12	188	Nutrition-Registered for GM-New Visit 12-23 Months - Moderate
342	3564	Nutrition-Registered for GM-New Visit 12-23 Months - Normal
0	48	Nutrition-Registered for GM-New Visit 12-23 Months - Severe
30	598	Nutrition-Registered for GM-Revisit 0-11 Months - Moderate
1646	21021	Nutrition-Registered for GM-Revisit 0-11 Months - Normal
8	166	Nutrition-Registered for GM-Revisit 0-11 Months - Severe
38	601	Nutrition-Registered for GM-Revisit 12-23 Months - Moderate
843	12394	Nutrition-Registered for GM-Revisit 12-23 Months - Normal
4	136	Nutrition-Registered for GM-Revisit 12-23 Months - Severe
973	2353	Nutrition-Students Received Deworming Tablets-Boys
1191	2814	Nutrition-Students Received Deworming Tablets-Girls
4	172	-Nutritional & Metabolic Disorder-Anaemia/Polyneuropathy Cases
3	167	Nutritional & Metabolic Disorder-Avitaminoses & Other Nutrient Deficiency Cases
2	320	Nutritional & Metabolic Disorder-Diabetes Mellitus (DM) Cases
0	20	Outpatient Morbidity-Nutritional & Metabolic Disorder-Goitre,Cretinism Cases
15	236	Outpatient Morbidity-Nutritional & Metabolic Disorder-Malnutrition Cases
0	3	Outpatient Morbidity-Nutritional & Metabolic Disorder-Obesity Cases
3	142	Outpatient Morbidity-Nutritional & Metabolic Disorder-Polyneuritis Cases

Bhairabi RM	Mahabu RM	Organisation unit / Data
13	18	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
23		IYCF & BVCPP-Age(12-17 Month)-First time-HF
40	21	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
0		IYCF & BVCPP-Age(12-17 Month)-Second time-HF
4	29	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
0		IYCF & BVCPP-Age(18-23 Month)-First time-HF
9	22	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
0	1	IYCF & BVCPP-Age(18-23 Month)-Second time-HF
53	28	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
0		IYCF & BVCPP-Age(18-23 Month)-Third time-HF
57	48	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
0	1	IYCF & BVCPP-Age(6-11 Month)-First time-HF
140	91	IYCF-Complimentary Feeding
140	94	IYCF-Exclusive Breast Feeding
0		IYCF-Fortified Flour Distribution-Children Number
0		IYCF-Fortified Flour Distribution-Postpartum Mother
0		IYCF-Fortified Flour Distribution-Pregnant Women
3476	3019	Nutrition-< 5yr Children Receiving-Deworming Tab
3576	2801	Nutrition-< 5yr Children Receiving-Vitamin A-12-59 Months
671	652	Nutrition-< 5yr Children Receiving-Vitamin A-6-11 Months
200	247	Nutrition-PP Mother Receiving-45 Iron Tab
200	246	Nutrition-PP Mother Receiving-Vitamin A cap
172	212	Nutrition-Pregnant Women Receiving-180 Iron Tablets
280	291	Nutrition-Pregnant Women Receiving-Deworming Tablets
307	292	Nutrition-Pregnant Women Receiving-Iron Tablets at 1st time
16	8	Nutrition-Registered for GM-New Visit 0-11 Months - Moderate
261	426	Nutrition-Registered for GM-New Visit 0-11 Months - Normal
1	0	Nutrition-Registered for GM-New Visit 0-11 Months - Severe
8	7	Nutrition-Registered for GM-New Visit 12-23 Months - Moderate
157	225	Nutrition-Registered for GM-New Visit 12-23 Months - Normal
7	0	Nutrition-Registered for GM-New Visit 12-23 Months - Severe
44	11	Nutrition-Registered for GM-Revisit 0-11 Months - Moderate
1390	1109	Nutrition-Registered for GM-Revisit 0-11 Months - Normal
22	1	Nutrition-Registered for GM-Revisit 0-11 Months - Severe
73	20	Nutrition-Registered for GM-Revisit 12-23 Months - Moderate
597	642	Nutrition-Registered for GM-Revisit 12-23 Months - Normal
16	0	Nutrition-Registered for GM-Revisit 12-23 Months - Severe
0	0	Nutrition-Students Received Deworming Tablets-Boys
0	0	Nutrition-Students Received Deworming Tablets-Girls
11	1	-Nutritional & Metabolic Disorder-Anaemia/Polyneuropathy Cases
17	28	Nutritional & Metabolic Disorder-Avitaminoses & Other Nutrient Deficiency Cases
0	3	Nutritional & Metabolic Disorder-Diabetes Mellitus (DM) Cases
0	0	Outpatient Morbidity-Nutritional & Metabolic Disorder-Goitre,Cretinism Cases
0	2	Outpatient Morbidity-Nutritional & Metabolic Disorder-Malnutrition Cases
0	0	Outpatient Morbidity-Nutritional & Metabolic Disorder-Obesity Cases
11	14	Outpatient Morbidity-Nutritional & Metabolic Disorder-Polyneuritis Cases

Aathbis Mun.	Thantik andh RM	Organisation unit / Data
131	113	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
10	3	IYCF & BVCPP-Age(12-17 Month)-First time-HF
1964	76	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
1	6	IYCF & BVCPP-Age(12-17 Month)-Second time-HF
156	109	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
2	4	IYCF & BVCPP-Age(18-23 Month)-First time-HF
2007	62	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
1	4	IYCF & BVCPP-Age(18-23 Month)-Second time-HF
39	7	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
0	3	IYCF & BVCPP-Age(18-23 Month)-Third time-HF
116	156	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
9	4	IYCF & BVCPP-Age(6-11 Month)-First time-HF
617	309	IYCF-Complimentary Feeding
606	256	IYCF-Exclusive Breast Feeding
0	43	IYCF-Fortified Flour Distribution-Children Number
0	5	IYCF-Fortified Flour Distribution-Postpartum Mother
0	9	IYCF-Fortified Flour Distribution-Pregnant Women
5509	3861	Nutrition-< 5yr Children Receiving-Deworming Tab
5508	3778	Nutrition-< 5yr Children Receiving-Vitamin A-12-59 Months
856	532	Nutrition-< 5yr Children Receiving-Vitamin A-6-11 Months
532	337	Nutrition-PP Mother Receiving-45 Iron Tab
533	332	Nutrition-PP Mother Receiving-Vitamin A cap
476	240	Nutrition-Pregnant Women Receiving-180 Iron Tablets
773	369	Nutrition-Pregnant Women Receiving-Deworming Tablets
768	374	Nutrition-Pregnant Women Receiving-Iron Tablets at 1st time
42	30	Nutrition-Registered for GM-New Visit 0-11 Months - Moderate
739	604	Nutrition-Registered for GM-New Visit 0-11 Months - Normal
10	3	Nutrition-Registered for GM-New Visit 0-11 Months - Severe
33	14	Nutrition-Registered for GM-New Visit 12-23 Months - Moderate
553	262	Nutrition-Registered for GM-New Visit 12-23 Months - Normal
10	5	Nutrition-Registered for GM-New Visit 12-23 Months - Severe
132	64	Nutrition-Registered for GM-Revisit 0-11 Months - Moderate
2239	1682	Nutrition-Registered for GM-Revisit 0-11 Months - Normal
41	21	Nutrition-Registered for GM-Revisit 0-11 Months - Severe
98	56	Nutrition-Registered for GM-Revisit 12-23 Months - Moderate
1466	1100	Nutrition-Registered for GM-Revisit 12-23 Months - Normal
39	13	Nutrition-Registered for GM-Revisit 12-23 Months - Severe
0		Nutrition-Students Received Deworming Tablets-Boys
0		Nutrition-Students Received Deworming Tablets-Girls
130		-Nutritional & Metabolic Disorder-Anaemia/Polyneuropathy Cases
		Nutritional & Metabolic Disorder-Avitaminoses & Other Nutrient Deficiency Cases
6	5	Nutritional & Metabolic Disorder-Diabetes Mellitus (DM) Cases
		Outpatient Morbidity-Nutritional & Metabolic Disorder-Goitre,Cretinism Cases
71	7	Outpatient Morbidity-Nutritional & Metabolic Disorder-Malnutrition Cases
	1	Outpatient Morbidity-Nutritional & Metabolic Disorder-Obesity Cases
36	31	Outpatient Morbidity-Nutritional & Metabolic Disorder-Polyneuritis Cases

Dullu Mun.	Chamunda Bin.Mun.	Organisation unit / Data
0	180	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
0	0	IYCF & BVCPP-Age(12-17 Month)-First time-HF
50	0	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
10	4	IYCF & BVCPP-Age(12-17 Month)-Second time-HF
0	133	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
0	1	IYCF & BVCPP-Age(18-23 Month)-First time-HF
0	1	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
0	0	IYCF & BVCPP-Age(18-23 Month)-Second time-HF
35	0	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
8	2	IYCF & BVCPP-Age(18-23 Month)-Third time-HF
37	203	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
5	2	IYCF & BVCPP-Age(6-11 Month)-First time-HF
1076	387	IYCF-Complimentary Feeding
1356	442	IYCF-Exclusive Breast Feeding
23	0	IYCF-Fortified Flour Distribution-Children Number
0	0	IYCF-Fortified Flour Distribution-Postpartum Mother
0	0	IYCF-Fortified Flour Distribution-Pregnant Women
6319	5830	Nutrition-< 5yr Children Receiving-Deworming Tab
6557	5896	Nutrition-< 5yr Children Receiving-Vitamin A-12-59 Months
1298	975	Nutrition-< 5yr Children Receiving-Vitamin A-6-11 Months
814	591	Nutrition-PP Mother Receiving-45 Iron Tab
626	591	Nutrition-PP Mother Receiving-Vitamin A cap
676	450	Nutrition-Pregnant Women Receiving-180 Iron Tablets
943	591	Nutrition-Pregnant Women Receiving-Deworming Tablets
967	598	Nutrition-Pregnant Women Receiving-Iron Tablets at 1st time
15	29	Nutrition-Registered for GM-New Visit 0-11 Months - Moderate
1165	735	Nutrition-Registered for GM-New Visit 0-11 Months - Normal
5	9	Nutrition-Registered for GM-New Visit 0-11 Months - Severe
13	29	Nutrition-Registered for GM-New Visit 12-23 Months - Moderate
473	286	Nutrition-Registered for GM-New Visit 12-23 Months - Normal
2	4	Nutrition-Registered for GM-New Visit 12-23 Months - Severe
59	75	Nutrition-Registered for GM-Revisit 0-11 Months - Moderate
3403	1109	Nutrition-Registered for GM-Revisit 0-11 Months - Normal
2	10	Nutrition-Registered for GM-Revisit 0-11 Months - Severe
45	58	Nutrition-Registered for GM-Revisit 12-23 Months - Moderate
1533	505	Nutrition-Registered for GM-Revisit 12-23 Months - Normal
1	8	Nutrition-Registered for GM-Revisit 12-23 Months - Severe
0	426	Nutrition-Students Received Deworming Tablets-Boys
0	600	Nutrition-Students Received Deworming Tablets-Girls
4	0	-Nutritional & Metabolic Disorder-Anaemia/Polyneuropathy Cases
48	0	Nutritional & Metabolic Disorder-Avitaminoses & Other Nutrient Deficiency Cases
29	26	Nutritional & Metabolic Disorder-Diabetes Mellitus (DM) Cases
0	19	Outpatient Morbidity-Nutritional & Metabolic Disorder-Goitre,Cretinism Cases
45	2	Outpatient Morbidity-Nutritional & Metabolic Disorder-Malnutrition Cases
2	0	Outpatient Morbidity-Nutritional & Metabolic Disorder-Obesity Cases
1	0	Outpatient Morbidity-Nutritional & Metabolic Disorder-Polyneuritis Cases

Bhagawatimai RM	Narayan Mun.	Organisation unit / Data
42	0	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
0	0	IYCF & BVCPP-Age(12-17 Month)-First time-HF
28	231	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
18	0	IYCF & BVCPP-Age(12-17 Month)-Second time-HF
37	0	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
0	0	IYCF & BVCPP-Age(18-23 Month)-First time-HF
15	0	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
8	0	IYCF & BVCPP-Age(18-23 Month)-Second time-HF
27	307	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
0	2	IYCF & BVCPP-Age(18-23 Month)-Third time-HF
70	314	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
0	1	IYCF & BVCPP-Age(6-11 Month)-First time-HF
217	556	IYCF-Complimentary Feeding
205	560	IYCF-Exclusive Breast Feeding
0	0	IYCF-Fortified Flour Distribution-Children Number
0	0	IYCF-Fortified Flour Distribution-Postpartum Mother
2	0	IYCF-Fortified Flour Distribution-Pregnant Women
2870	4127	Nutrition-< 5yr Children Receiving-Deworming Tab
2804	4127	Nutrition-< 5yr Children Receiving-Vitamin A-12-59 Months
423	661	Nutrition-< 5yr Children Receiving-Vitamin A-6-11 Months
288	701	Nutrition-PP Mother Receiving-45 Iron Tab
296	701	Nutrition-PP Mother Receiving-Vitamin A cap
250	778	Nutrition-Pregnant Women Receiving-180 Iron Tablets
337	936	Nutrition-Pregnant Women Receiving-Deworming Tablets
347	936	Nutrition-Pregnant Women Receiving-Iron Tablets at 1st time
2	30	Nutrition-Registered for GM-New Visit 0-11 Months - Moderate
293	763	Nutrition-Registered for GM-New Visit 0-11 Months - Normal
3	16	Nutrition-Registered for GM-New Visit 0-11 Months - Severe
0	46	Nutrition-Registered for GM-New Visit 12-23 Months - Moderate
134	610	Nutrition-Registered for GM-New Visit 12-23 Months - Normal
0	18	Nutrition-Registered for GM-New Visit 12-23 Months - Severe
17	30	Nutrition-Registered for GM-Revisit 0-11 Months - Moderate
1147	3239	Nutrition-Registered for GM-Revisit 0-11 Months - Normal
8	1	Nutrition-Registered for GM-Revisit 0-11 Months - Severe
31	29	Nutrition-Registered for GM-Revisit 12-23 Months - Moderate
534	2648	Nutrition-Registered for GM-Revisit 12-23 Months - Normal
2	4	Nutrition-Registered for GM-Revisit 12-23 Months - Severe
0	228	Nutrition-Students Received Deworming Tablets-Boys
0	250	Nutrition-Students Received Deworming Tablets-Girls
3	19	-Nutritional & Metabolic Disorder-Anaemia/Polyneuropathy Cases
0	51	Nutritional & Metabolic Disorder-Avitaminoses & Other Nutrient Deficiency Cases
0	236	Nutritional & Metabolic Disorder-Diabetes Mellitus (DM) Cases
0	1	Outpatient Morbidity-Nutritional & Metabolic Disorder-Goitre,Cretinism Cases
0	28	Outpatient Morbidity-Nutritional & Metabolic Disorder-Malnutrition Cases
0	0	Outpatient Morbidity-Nutritional & Metabolic Disorder-Obesity Cases
3	24	Outpatient Morbidity-Nutritional & Metabolic Disorder-Polyneuritis Cases

Gurans RM	Dungeshwor RM	Organisation unit / Data
44	33	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
	0	IYCF & BVCPP-Age(12-17 Month)-First time-HF
13	75	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
	0	IYCF & BVCPP-Age(12-17 Month)-Second time-HF
39	30	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
		IYCF & BVCPP-Age(18-23 Month)-First time-HF
19		IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
		IYCF & BVCPP-Age(18-23 Month)-Second time-HF
	78	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
	0	IYCF & BVCPP-Age(18-23 Month)-Third time-HF
52	113	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
	0	IYCF & BVCPP-Age(6-11 Month)-First time-HF
198	170	IYCF-Complimentary Feeding
231	162	IYCF-Exclusive Breast Feeding
7		IYCF-Fortified Flour Distribution-Children Number
7		IYCF-Fortified Flour Distribution-Postpartum Mother
11		IYCF-Fortified Flour Distribution-Pregnant Women
3280	2120	Nutrition-< 5yr Children Receiving-Deworming Tab
3172	2120	Nutrition-< 5yr Children Receiving-Vitamin A-12-59 Months
469	232	Nutrition-< 5yr Children Receiving-Vitamin A-6-11 Months
328	149	Nutrition-PP Mother Receiving-45 Iron Tab
331	149	Nutrition-PP Mother Receiving-Vitamin A cap
282	194	Nutrition-Pregnant Women Receiving-180 Iron Tablets
402	233	Nutrition-Pregnant Women Receiving-Deworming Tablets
384	273	Nutrition-Pregnant Women Receiving-Iron Tablets at 1st time
3	5	Nutrition-Registered for GM-New Visit 0-11 Months - Moderate
434	263	Nutrition-Registered for GM-New Visit 0-11 Months - Normal
3	23	Nutrition-Registered for GM-New Visit 0-11 Months - Severe
23	3	Nutrition-Registered for GM-New Visit 12-23 Months - Moderate
354	168	Nutrition-Registered for GM-New Visit 12-23 Months - Normal
2	0	Nutrition-Registered for GM-New Visit 12-23 Months - Severe
119	17	Nutrition-Registered for GM-Revisit 0-11 Months - Moderate
2737	1320	Nutrition-Registered for GM-Revisit 0-11 Months - Normal
39	13	Nutrition-Registered for GM-Revisit 0-11 Months - Severe
125	28	Nutrition-Registered for GM-Revisit 12-23 Months - Moderate
1831	695	Nutrition-Registered for GM-Revisit 12-23 Months - Normal
42	7	Nutrition-Registered for GM-Revisit 12-23 Months - Severe
726	0	Nutrition-Students Received Deworming Tablets-Boys
773	0	Nutrition-Students Received Deworming Tablets-Girls
0		-Nutritional & Metabolic Disorder-Anaemia/Polyneuropathy Cases
20		Nutritional & Metabolic Disorder-Avitaminoses & Other Nutrient Deficiency Cases
8	5	Nutritional & Metabolic Disorder-Diabetes Mellitus (DM) Cases
0		Outpatient Morbidity-Nutritional & Metabolic Disorder-Goitre,Cretinism Cases
16	50	Outpatient Morbidity-Nutritional & Metabolic Disorder-Malnutrition Cases
0		Outpatient Morbidity-Nutritional & Metabolic Disorder-Obesity Cases
0	19	Outpatient Morbidity-Nutritional & Metabolic Disorder-Polyneuritis Cases

Family Planning Programme

Organisation unit / Data	DAILEKH	Naumule RM	Mahabu RM
Family Planning Program-Implant-Set Qty	851	133	42
Family Planning Program-Permanent FP Method-Current Users at Public Facility	42	12	0
Family Planning Program-Temporary FP Method-Condom-Pieces Qty	322219	18828	28982
Family Planning Program-Temporary FP Method-Depo-Current User	4402	382	284
Family Planning Program-Temporary FP Method-Depo-Discontinued/Removed	7697	599	726
Family Planning Program-Temporary FP Method-Depo-Doze Qty	15985	1316	1080
Family Planning Program-Temporary FP Method-Depo-New Users <20 Years	324	63	12
Family Planning Program-Temporary FP Method-Depo-New Users ≥20 Years	4581	333	391
Family Planning Program-Temporary FP Method-IUCD-Current User	867	29	11
Family Planning Program-Temporary FP Method-IUCD-Discontinued/Removed	37	1	0
Family Planning Program-Temporary FP Method-IUCD-New Users <20 Years	5	0	1
Family Planning Program-Temporary FP Method-IUCD-New Users ≥20 Years	75	0	1
Family Planning Program-Temporary FP Method-IUCD-Set Qty	91	0	2
Family Planning Program-Temporary FP Method-Implant-Current User	3445	505	279
Family Planning Program-Temporary FP Method-Implant-Discontinued/Removed	429	64	7
Family Planning Program-Temporary FP Method-Implant-New Users <20 Years	8	4	0
Family Planning Program-Temporary FP Method-Implant-New Users ≥20 Years	659	75	38
Family Planning Program-Temporary FP Method-Pills-Current User	1586	97	63
Family Planning Program-Temporary FP Method-Pills-Cycle Qty	17520	858	727
Family Planning Program-Temporary FP Method-Pills-Discontinued/Removed	2718	324	246
Family Planning Program-Temporary FP Method-Pills-New Users <20 Years	114	26	2
Family Planning Program-Temporary FP Method-Pills-New Users ≥20 Years	1736	147	176

Chamunda Bin.Mun.	Aathbis Mun.	Thantikandh RM	Bhairabi RM	Organisation unit / Data
64	59	54	6	Family Planning Program-Implant-Set Qty
18	12	0	0	Family Planning Program-Permanent FP Method-Current Users at Public Facility
14315	28895	21320	15660	Family Planning Program-Temporary FP Method-Condom-Pieces Qty
495	458	467	219	Family Planning Program-Temporary FP Method-Depo-Current User
528	1002	801	483	Family Planning Program-Temporary FP Method-Depo-Discontinued/Removed
1306	1931	1874	748	Family Planning Program-Temporary FP Method-Depo-Doze Qty
17	32	21	29	Family Planning Program-Temporary FP Method-Depo-New Users <20 Years
534	428	301	310	Family Planning Program-Temporary FP Method-Depo-New Users ≥20 Years
12	3	46	5	Family Planning Program-Temporary FP Method-IUCD-Current User
5	1	4	0	Family Planning Program-Temporary FP Method-IUCD-Discontinued/Removed
	0	1	0	Family Planning Program-Temporary FP Method-IUCD-New Users <20 Years
2	0	9	0	Family Planning Program-Temporary FP Method-IUCD-New Users ≥20 Years
1	0	9	0	Family Planning Program-Temporary FP Method-IUCD-Set Qty
164	259	244	140	Family Planning Program-Temporary FP Method-Implant-Current User
75	48	6	53	Family Planning Program-Temporary FP Method-Implant-Discontinued/Removed
0	0	1	0	Family Planning Program-Temporary FP Method-Implant-New Users <20 Years
64	41	32	6	Family Planning Program-Temporary FP Method-Implant-New Users ≥20 Years
192	156	59	66	Family Planning Program-Temporary FP Method-Pills-Current User
1124	1457	804	610	Family Planning Program-Temporary FP Method-Pills-Cycle Qty
330	201	156	103	Family Planning Program-Temporary FP Method-Pills-Discontinued/Removed
1	10	6	5	Family Planning Program-Temporary FP Method-Pills-New Users <20 Years
249	132	94	66	Family Planning Program-Temporary FP Method-Pills-New Users ≥20 Years

Dungeshwor RM	Bhagawatimai RM	Narayan Mun.	Dullu Mun.	Organisation unit / Data
25	16	186	80	Family Planning Program-Implant-Set Qty
0	0	0	0	Family Planning Program-Permanent FP Method-Current Users at Public Facility
36610	20629	87785	32787	Family Planning Program-Temporary FP Method-Condom-Pieces Qty
345	313	580	512	Family Planning Program-Temporary FP Method-Depo-Current User
578	329	889	1074	Family Planning Program-Temporary FP Method-Depo-Discontinued/Removed
1287	1126	1926	2008	Family Planning Program-Temporary FP Method-Depo-Doze Qty
21	40	40	24	Family Planning Program-Temporary FP Method-Depo-New Users <20 Years
196	226	614	972	Family Planning Program-Temporary FP Method-Depo-New Users ≥20 Years
10	0	530	96	Family Planning Program-Temporary FP Method-IUCD-Current User
1	2	21	2	Family Planning Program-Temporary FP Method-IUCD-Discontinued/Removed
0	0	3	0	Family Planning Program-Temporary FP Method-IUCD-New Users <20 Years
1	0	59	2	Family Planning Program-Temporary FP Method-IUCD-New Users ≥20 Years
1	0	76	1	Family Planning Program-Temporary FP Method-IUCD-Set Qty
237	211	610	539	Family Planning Program-Temporary FP Method-Implant-Current User
14	6	56	89	Family Planning Program-Temporary FP Method-Implant-Discontinued/Removed
0	1	2	0	Family Planning Program-Temporary FP Method-Implant-New Users <20 Years
24	20	170	63	Family Planning Program-Temporary FP Method-Implant-New Users ≥20 Years
123	96	462	167	Family Planning Program-Temporary FP Method-Pills-Current User
1119	1028	6389	2124	Family Planning Program-Temporary FP Method-Pills-Cycle Qty
215	107	548	284	Family Planning Program-Temporary FP Method-Pills-Discontinued/Removed
9	6	29	15	Family Planning Program-Temporary FP Method-Pills-New Users <20 Years
92	85	271	357	Family Planning Program-Temporary FP Method-Pills-New Users ≥20 Years

Organisation unit / Data	Family Planning Program-Implant-Set Qty	Family Planning Program-Permanent FP Method-Current Users at Public Facility	Family Planning Program-Temporary FP Method-Condom-Pieces Qty	Family Planning Program-Temporary FP Method-Depo-Current User	Family Planning Program-Temporary FP Method-Depo-Discontinued/Removed	Family Planning Program-Temporary FP Method-Depo-Doze Qty	Family Planning Program-Temporary FP Method-Depo-New Users <20 Years	Family Planning Program-Temporary FP Method-Depo-New Users ≥20 Years	Family Planning Program-Temporary FP Method-IUCD-Current User	Family Planning Program-Temporary FP Method-IUCD-Discontinued/Removed	Family Planning Program-Temporary FP Method-IUCD-New Users <20 Years	Family Planning Program-Temporary FP Method-IUCD-New Users ≥20 Years	Family Planning Program-Temporary FP Method-IUCD-Set Qty	Family Planning Program-Temporary FP Method-Implant-Current User	Family Planning Program-Temporary FP Method-Implant-Discontinued/Removed	Family Planning Program-Temporary FP Method-Implant-New Users <20 Years	Family Planning Program-Temporary FP Method-Implant-New Users ≥20 Years	Family Planning Program-Temporary FP Method-Pills-Current User	Family Planning Program-Temporary FP Method-Pills-Cycle Qty	Family Planning Program-Temporary FP Method-Pills-Discontinued/Removed	Family Planning Program-Temporary FP Method-Pills-New Users <20 Years	Family Planning Program-Temporary FP Method-Pills-New Users ≥20 Years
Gurans RM	186	0	16408	347	688	1383	25	276	125	0	0	1	1	257	11	0	126	105	1280	204	5	67

FP Current Users-2079 Aser

Organisation unit / Data	Family Planning Program-Permanent FP Method-Current Users at Public Facility	Family Planning Program-Temporary FP Method-Depo-Current User	Family Planning Program-Temporary FP Method-IUCD-Current User	Family Planning Program-Temporary FP Method-Implant-Current User	Family Planning Program-Temporary FP Method-Pills-Current User	Family Planning Program-Permanent FP Method-Current Users at Public Facility	Family Planning Program-Temporary FP Method-Depo-Current User	Family Planning Program-Temporary FP Method-IUCD-Current User	Family Planning Program-Temporary FP Method-Implant-Current User	Family Planning Program-Temporary FP Method-Pills-Current User
DAILEKH	30	4396	864	3433	1578	30	4396	864	3433	1578
Naumule RM	0	382	26	502	97	0	382	26	502	97

Organisation unit / Data	Family Planning Program-Permanent FP Method-Current Users at Public Facility	Family Planning Program-Temporary FP Method-Depo-Current User	Family Planning Program-Temporary FP Method-IUCD-Current User	Family Planning Program-Temporary FP Method-Implant-Current User	Family Planning Program-Temporary FP Method-Pills-Current User	Family Planning Program-Permanent FP Method-Current Users at Public Facility	Family Planning Program-Temporary FP Method-Depo-Current User	Family Planning Program-Temporary FP Method-IUCD-Current User	Family Planning Program-Temporary FP Method-Implant-Current User	Family Planning Program-Temporary FP Method-Pills-Current User
Mahabu RM	0	284	11	279	63	0	284	11	279	63
Bhairabi RM		216	5	140	66		216	5	140	66
Thantikandh RM		467	46	244	59		467	46	244	59
Aathbis Mun.	12	458	3	259	156	12	458	3	259	156
Chamunda Bin.Mun.	18	495	12	164	192	18	495	12	164	192
Dullu Mun.	0	512	96	539	167	0	512	96	539	167
Narayan Mun.	0	580	530	610	462	0	580	530	610	462
Bhagawatimai RM	0	313	0	211	96	0	313	0	211	96
Dungeshwor RM		345	10	237	123		345	10	237	123
Gurans RM		344	125	248	97		344	125	248	97

Nadmule PM	DAILEKH	Organisation unit / Data
261	3357	SM Prog.-3 PNC Visits as per Protocol
223	3590	Aama Program-Incentive-ANC-No of Women Eligible
223	3556	Aama Program-Incentive-ANC-Number of Women Receive
277	4494	Aama Program-Incentive-Transport-No of Women Eligible
277	4461	Pregnant Women Received Incentive on Transportation
117	1140	Antenatal Checkup-First ANC Visit (any time)< 20 Years
261	4657	Antenatal Checkup-First ANC Visit (any time)≥ 20 Years
105	955	Antenatal Checkup-First ANC Visit as per Protocol< 20 Years
216	3929	Antenatal Checkup-First ANC Visit as per Protocol≥ 20 Years
52	696	Antenatal Checkup-Four ANC Visits as per Protocol< 20 Years
186	3416	Antenatal Checkup-Four ANC Visits as per Protocol≥ 20 Years
4	265	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)
0	21	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)Asphyxia
272	4167	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)
0	38	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)Asphyxia
0	11	SM Prog.-Birth Weight-Very low (< 1.5 kg)
0	3	Birth Weight-Very low (< 1.5 kg)Asphyxia
0	6	Blood Transfusion-Number
0	6	Blood Transfusion-Unit
275	4442	SM Prog.-CHX applied in Cord
276	4484	SM Prog.-Delivery Outcome-Mother Single
1	10	SM Prog.-Delivery Outcome-Mother Twin
274	4426	SM Prog.-Delivery Outcome-live Births Single
2	17	SM Prog.-Delivery Outcome-live Births Twin
86	855	SM Prog.-Delivery Service-Non-SBA Health Workers Facility
191	3639	SM Prog.-Delivery Service-Skilled Birth Attendants (SBA)Facility
0	5	SM Prog.-Maternal Death-Neonatal death at Health Facility
2	26	SM Prog.-Number of Still Births-Fresh
0	35	SM Prog.-Number of Still Births-Macerated
0	28	SM Prog.-Obstetric Complications-Abortion Complication
0	1	SM Prog.-Obstetric Complications-Antepartum Haemorrhage
0	1	SM Prog.-Obstetric Complications-Eclampsia
0	1	SM Prog.-Obstetric Complications-Ectopic Pregnancy
0	2	SM Prog.-Obstetric Complications-Other Complications
0	40	SM Prog.-Obstetric Complications-Postpartum Haemorrhage
0	2	SM Prog.-Obstetric Complications-Preg.-Induced Hypertension
0	12	SM Prog.-Obstetric Complications-Prolonged labour
0	3	SM Prog.-Obstetric Complications-Puerperal Sepsis
0	55	SM Prog.-Obstetric Complications-Retained Placenta
0	2	SM Prog.-Obstetric Complications-Severe/Pre-Eclampsia
277	4494	SM Prog.-PNC Visits within 24 hours
0	40	Safe Abortion Service-Number of Women < 20 Years-Medical
0	9	Safe Abortion Service-Number of Women < 20 Years-Surgical
0	315	Safe Abortion Service-Number of Women ≥ 20 Years-Medical
0	121	Safe Abortion Service-Number of Women ≥ 20 Years-Surgical
0	243	Safe Abortion Service-Post Abortion Care (PAC) This facility-Medical
0	19	Safe Abortion Service-Post Abortion FP Methods Long Term-Medical
0	2	Abortion Service-Post Abortion FP Methods Long term-Surgical
0	204	SSafe Abortion Service-Post Abortion FP Methods Short Term-Medical
0	115	SSafe Abortion Service-Post Abortion FP Methods Short term-Surgical
0	3	SM Prog.-Type of Delivery-C/S Breech
0	96	SM Prog.-Type of Delivery-C/S Cephalic
0	36	SM Prog.-Type of Delivery-Spontaneous Breech
277	4330	SM Prog.-Type of Delivery-Spontaneous Cephalic
0	29	SM Prog.-Type of Delivery-Vaccum/Forcep Cephalic

Bhairabi RM	Mahabu RM	Organisation unit / Data
177	238	SM Prog.-3 PNC Visits as per Protocol
159	214	Aama Program-Incentive-ANC-No of Women Eligible
159	214	Aama Program-Incentive-ANC-Number of Women Receive
200	264	Aama Program-Incentive-Transport-No of Women Eligible
200	264	Pregnant Women Received Incentive on Transportation
69	70	Antenatal Checkup-First ANC Visit (any time)< 20 Years
255	289	Antenatal Checkup-First ANC Visit (any time)≥ 20 Years
54	54	Antenatal Checkup-First ANC Visit as per Protocol< 20 Years
204	233	Antenatal Checkup-First ANC Visit as per Protocol≥ 20 Years
38	34	Antenatal Checkup-Four ANC Visits as per Protocol< 20 Years
144	186	Antenatal Checkup-Four ANC Visits as per Protocol≥ 20 Years
23	2	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)
0	0	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)Asphyxia
173	262	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)
0	0	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)Asphyxia
0	0	SM Prog.-Birth Weight-Very low (< 1.5 kg)
0	0	Birth Weight-Very low (< 1.5 kg)Asphyxia
0	0	Blood Transfusion-Number
0	0	Blood Transfusion-Unit
196	264	SM Prog.-CHX applied in Cord
200	264	SM Prog.-Delivery Outcome-Mother Single
0	0	SM Prog.-Delivery Outcome-Mother Twin
196	264	SM Prog.-Delivery Outcome-live Births Single
0	0	SM Prog.-Delivery Outcome-live Births Twin
39	101	SM Prog.-Delivery Service-Non-SBA Health Workers Facility
161	163	SM Prog.-Delivery Service-Skilled Birth Attendants (SBA)Facility
1	0	SM Prog.-Maternal Death-Neonatal death at Health Facility
2	0	SM Prog.-Number of Still Births-Fresh
2	0	SM Prog.-Number of Still Births-Macerated
0	0	SM Prog.-Obstetric Complications-Abortion Complication
0	0	SM Prog.-Obstetric Complications-Antepartum Haemorrhage
0	0	SM Prog.-Obstetric Complications-Eclampsia
0	0	SM Prog.-Obstetric Complications-Ectopic Pregnancy
0	0	SM Prog.-Obstetric Complications-Other Complications
1	0	SM Prog.-Obstetric Complications-Postpartum Haemorrhage
0	0	SM Prog.-Obstetric Complications-Preg.-Induced Hypertension
0	0	SM Prog.-Obstetric Complications-Prolonged labour
0	0	SM Prog.-Obstetric Complications-Puerperal Sepsis
10	0	SM Prog.-Obstetric Complications-Retained Placenta
0	0	SM Prog.-Obstetric Complications-Severe/Pre-Eclampsia
200	264	SM Prog.-PNC Visits within 24 hours
0	0	Safe Abortion Service-Number of Women < 20 Years-Medical
0	0	Safe Abortion Service-Number of Women < 20 Years-Surgical
0	0	Safe Abortion Service-Number of Women ≥ 20 Years-Medical
0	0	Safe Abortion Service-Number of Women ≥ 20 Years-Surgical
0	0	Safe Abortion Service-Post Abortion Care (PAC) This facility-Medical
0	0	Safe Abortion Service-Post Abortion FP Methods Long Term-Medical
0	0	Abortion Service-Post Abortion FP Methods Long term-Surgical
0	0	SSafe Abortion Service-Post Abortion FP Methods Short Term-Medical
0	0	SSafe Abortion Service-Post Abortion FP Methods Short term-Surgical
0	0	SM Prog.-Type of Delivery-C/S Breech
0	0	SM Prog.-Type of Delivery-C/S Cephalic
3	1	SM Prog.-Type of Delivery-Spontaneous Breech
197	263	SM Prog.-Type of Delivery-Spontaneous Cephalic
0	0	SM Prog.-Type of Delivery-Vaccum/Forcep Cephalic

Aathbis Mun	Thanukandh RM	Organisation unit / Data
522	300	SM Prog.-3 PNC Visits as per Protocol
401	249	Aama Program-Incentive-ANC-No of Women Eligible
401	239	Aama Program-Incentive-ANC-Number of Women Receive
533	338	Aama Program-Incentive-Transport-No of Women Eligible
533	332	Pregnant Women Received Incentive on Transportation
190	96	Antenatal Checkup-First ANC Visit (any time)< 20 Years
631	326	Antenatal Checkup-First ANC Visit (any time)≥ 20 Years
141	74	Antenatal Checkup-First ANC Visit as per Protocol< 20 Years
488	257	Antenatal Checkup-First ANC Visit as per Protocol≥ 20 Years
87	42	Antenatal Checkup-Four ANC Visits as per Protocol< 20 Years
432	201	Antenatal Checkup-Four ANC Visits as per Protocol≥ 20 Years
35	45	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)
6	8	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)Asphyxia
493	291	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)
9	17	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)Asphyxia
0	3	SM Prog.-Birth Weight-Very low (< 1.5 kg)
0	1	Birth Weight-Very low (< 1.5 kg)Asphyxia
0		Blood Transfusion-Number
0		Blood Transfusion-Unit
528	339	SM Prog.-CHX applied in Cord
533	336	SM Prog.-Delivery Outcome-Mother Single
0	2	SM Prog.-Delivery Outcome-Mother Twin
528	335	SM Prog.-Delivery Outcome-live Births Single
0	4	SM Prog.-Delivery Outcome-live Births Twin
96	96	SM Prog.-Delivery Service-Non-SBA Health Workers Facility
437	242	SM Prog.-Delivery Service-Skilled Birth Attendants (SBA)Facility
1	1	SM Prog.-Maternal Death-Neonatal death at Health Facility
2	0	SM Prog.-Number of Still Births-Fresh
3	1	SM Prog.-Number of Still Births-Macerated
0	3	SM Prog.-Obstetric Complications-Abortion Complication
0	1	SM Prog.-Obstetric Complications-Antepartum Haemorrhage
0		SM Prog.-Obstetric Complications-Eclampsia
0		SM Prog.-Obstetric Complications-Ectopic Pregnancy
2		SM Prog.-Obstetric Complications-Other Complications
15	11	SM Prog.-Obstetric Complications-Postpartum Haemorrhage
0		SM Prog.-Obstetric Complications-Preg.-Induced Hypertension
0		SM Prog.-Obstetric Complications-Prolonged labour
0		SM Prog.-Obstetric Complications-Puerperal Sepsis
1	23	SM Prog.-Obstetric Complications-Retained Placenta
0		SM Prog.-Obstetric Complications-Severe/Pre-Eclampsia
533	338	SM Prog.-PNC Visits within 24 hours
0		Safe Abortion Service-Number of Women < 20 Years-Medical
0		Safe Abortion Service-Number of Women < 20 Years-Surgical
0	11	Safe Abortion Service-Number of Women ≥ 20 Years-Medical
0		Safe Abortion Service-Number of Women ≥ 20 Years-Surgical
0	4	Safe Abortion Service-Post Abortion Care (PAC) This facility-Medical
0		Safe Abortion Service-Post Abortion FP Methods Long Term-Medical
0		Abortion Service-Post Abortion FP Methods Long term-Surgical
0		SSafe Abortion Service-Post Abortion FP Methods Short Term-Medical
0		SSafe Abortion Service-Post Abortion FP Methods Short term-Surgical
0		SM Prog.-Type of Delivery-C/S Breech
0		SM Prog.-Type of Delivery-C/S Cephalic
3	2	SM Prog.-Type of Delivery-Spontaneous Breech
530	336	SM Prog.-Type of Delivery-Spontaneous Cephalic
0		SM Prog.-Type of Delivery-Vaccum/Forcep Cephalic

Dullu Mun.	Chamunda Bin Mun	Organisation unit / Data
526	478	SM Prog.-3 PNC Visits as per Protocol
696	455	Aama Program-Incentive-ANC-No of Women Eligible
676	455	Aama Program-Incentive-ANC-Number of Women Receive
817	591	Aama Program-Incentive-Transport-No of Women Eligible
795	591	Pregnant Women Received Incentive on Transportation
149	139	Antenatal Checkup-First ANC Visit (any time)< 20 Years
828	489	Antenatal Checkup-First ANC Visit (any time)≥ 20 Years
133	117	Antenatal Checkup-First ANC Visit as per Protocol< 20 Years
736	420	Antenatal Checkup-First ANC Visit as per Protocol≥ 20 Years
96	90	Antenatal Checkup-Four ANC Visits as per Protocol< 20 Years
606	362	Antenatal Checkup-Four ANC Visits as per Protocol≥ 20 Years
50	36	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)
4	1	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)Asphyxia
757	554	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)
5	3	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)Asphyxia
5	1	SM Prog.-Birth Weight-Very low (< 1.5 kg)
2	0	Birth Weight-Very low (< 1.5 kg)Asphyxia
0	0	Blood Transfusion-Number
0	0	Blood Transfusion-Unit
812	591	SM Prog.-CHX applied in Cord
814	589	SM Prog.-Delivery Outcome-Mother Single
3	2	SM Prog.-Delivery Outcome-Mother Twin
809	587	SM Prog.-Delivery Outcome-live Births Single
3	4	SM Prog.-Delivery Outcome-live Births Twin
165	0	SM Prog.-Delivery Service-Non-SBA Health Workers Facility
652	591	SM Prog.-Delivery Service-Skilled Birth Attendants (SBA)Facility
0	0	SM Prog.-Maternal Death-Neonatal death at Health Facility
6	0	SM Prog.-Number of Still Births-Fresh
2	2	SM Prog.-Number of Still Births-Macerated
0	0	SM Prog.-Obstetric Complications-Abortion Complication
0	0	SM Prog.-Obstetric Complications-Antepartum Haemorrhage
0	0	SM Prog.-Obstetric Complications-Eclampsia
0	0	SM Prog.-Obstetric Complications-Ectopic Pregnancy
0	0	SM Prog.-Obstetric Complications-Other Complications
8	1	SM Prog.-Obstetric Complications-Postpartum Haemorrhage
0	0	SM Prog.-Obstetric Complications-Preg.-Induced Hypertension
1	0	SM Prog.-Obstetric Complications-Prolonged labour
0	0	SM Prog.-Obstetric Complications-Puerperal Sepsis
18	0	SM Prog.-Obstetric Complications-Retained Placenta
1	0	SM Prog.-Obstetric Complications-Severe/Pre-Eclampsia
817	591	SM Prog.-PNC Visits within 24 hours
3	0	Safe Abortion Service-Number of Women < 20 Years-Medical
0	0	Safe Abortion Service-Number of Women < 20 Years-Surgical
24	0	Safe Abortion Service-Number of Women ≥ 20 Years-Medical
0	0	Safe Abortion Service-Number of Women ≥ 20 Years-Surgical
14	8	Safe Abortion Service-Post Abortion Care (PAC) This facility-Medical
13	0	Safe Abortion Service-Post Abortion FP Methods Long Term-Medical
0	0	Abortion Service-Post Abortion FP Methods Long term-Surgical
15	0	SSafe Abortion Service-Post Abortion FP Methods Short Term-Medical
1	0	SSafe Abortion Service-Post Abortion FP Methods Short term-Surgical
0	0	SM Prog.-Type of Delivery-C/S Breech
0	0	SM Prog.-Type of Delivery-C/S Cephalic
4	6	SM Prog.-Type of Delivery-Spontaneous Breech
813	585	SM Prog.-Type of Delivery-Spontaneous Cephalic
0	0	SM Prog.-Type of Delivery-Vaccum/Forcep Cephalic

Bhagawati mai PM	Narayan Mun	Organisation unit / Data
90	368	SM Prog.-3 PNC Visits as per Protocol
230	547	Aama Program-Incentive-ANC-No of Women Eligible
230	547	Aama Program-Incentive-ANC-Number of Women Receive
285	701	Aama Program-Incentive-Transport-No of Women Eligible
285	701	Pregnant Women Received Incentive on Transportation
70	101	Antenatal Checkup-First ANC Visit (any time)< 20 Years
260	836	Antenatal Checkup-First ANC Visit (any time)≥ 20 Years
63	90	Antenatal Checkup-First ANC Visit as per Protocol< 20 Years
238	688	Antenatal Checkup-First ANC Visit as per Protocol≥ 20 Years
25	127	Antenatal Checkup-Four ANC Visits as per Protocol< 20 Years
242	651	Antenatal Checkup-Four ANC Visits as per Protocol≥ 20 Years
14	45	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)
1	1	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)Asphyxia
266	636	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)
0	0	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)Asphyxia
0	1	SM Prog.-Birth Weight-Very low (< 1.5 kg)
0	0	Birth Weight-Very low (< 1.5 kg)Asphyxia
0	6	Blood Transfusion-Number
0	6	Blood Transfusion-Unit
280	682	SM Prog.-CHX applied in Cord
283	701	SM Prog.-Delivery Outcome-Mother Single
2	0	SM Prog.-Delivery Outcome-Mother Twin
276	682	SM Prog.-Delivery Outcome-live Births Single
4	0	SM Prog.-Delivery Outcome-live Births Twin
86	15	SM Prog.-Delivery Service-Non-SBA Health Workers Facility
199	686	SM Prog.-Delivery Service-Skilled Birth Attendants (SBA)Facility
0	0	SM Prog.-Maternal Death-Neonatal death at Health Facility
3	5	SM Prog.-Number of Still Births-Fresh
4	14	SM Prog.-Number of Still Births-Macerated
0	25	SM Prog.-Obstetric Complications-Abortion Complication
0	0	SM Prog.-Obstetric Complications-Antepartum Haemorrhage
0	1	SM Prog.-Obstetric Complications-Eclampsia
0	1	SM Prog.-Obstetric Complications-Ectopic Pregnancy
0	0	SM Prog.-Obstetric Complications-Other Complications
1	2	SM Prog.-Obstetric Complications-Postpartum Haemorrhage
0	2	SM Prog.-Obstetric Complications-Preg.-Induced Hypertension
0	11	SM Prog.-Obstetric Complications-Prolonged labour
0	3	SM Prog.-Obstetric Complications-Puerperal Sepsis
0	3	SM Prog.-Obstetric Complications-Retained Placenta
0	1	SM Prog.-Obstetric Complications-Severe/Pre-Eclampsia
285	701	SM Prog.-PNC Visits within 24 hours
0	32	Safe Abortion Service-Number of Women < 20 Years-Medical
0	9	Safe Abortion Service-Number of Women < 20 Years-Surgical
0	250	Safe Abortion Service-Number of Women ≥ 20 Years-Medical
0	121	Safe Abortion Service-Number of Women ≥ 20 Years-Surgical
0	217	Safe Abortion Service-Post Abortion Care (PAC) This facility-Medical
0	6	Safe Abortion Service-Post Abortion FP Methods Long Term-Medical
0	2	Abortion Service-Post Abortion FP Methods Long term-Surgical
0	189	SSafe Abortion Service-Post Abortion FP Methods Short Term-Medical
0	114	SSafe Abortion Service-Post Abortion FP Methods Short term-Surgical
0	3	SM Prog.-Type of Delivery-C/S Breech
0	96	SM Prog.-Type of Delivery-C/S Cephalic
0	10	SM Prog.-Type of Delivery-Spontaneous Breech
285	563	SM Prog.-Type of Delivery-Spontaneous Cephalic
0	29	SM Prog.-Type of Delivery-Vaccum/Forcep Cephalic

Gurans RM	Dungeshw or RM	Organisation unit / Data
331	66	SM Prog.-3 PNC Visits as per Protocol
273	143	Aama Program-Incentive-ANC-No of Women Eligible
269	143	Aama Program-Incentive-ANC-Number of Women Receive
339	149	Aama Program-Incentive-Transport-No of Women Eligible
334	149	Pregnant Women Received Incentive on Transportation
89	50	Antenatal Checkup-First ANC Visit (any time)< 20 Years
298	184	Antenatal Checkup-First ANC Visit (any time)≥ 20 Years
73	51	Antenatal Checkup-First ANC Visit as per Protocol< 20 Years
276	173	Antenatal Checkup-First ANC Visit as per Protocol≥ 20 Years
60	45	Antenatal Checkup-Four ANC Visits as per Protocol< 20 Years
254	152	Antenatal Checkup-Four ANC Visits as per Protocol≥ 20 Years
7	4	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)
0	0	SM Prog.-Birth Weight-Low (1.5 to < 2.5 kg)Asphyxia
321	142	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)
3	1	SM Prog.-Birth Weight-Normal (≥ 2.5 kg)Asphyxia
0	1	SM Prog.-Birth Weight-Very low (< 1.5 kg)
0	0	Birth Weight-Very low (< 1.5 kg)Asphyxia
0	0	Blood Transfusion-Number
0	0	Blood Transfusion-Unit
328	147	SM Prog.-CHX applied in Cord
339	149	SM Prog.-Delivery Outcome-Mother Single
0	0	SM Prog.-Delivery Outcome-Mother Twin
328	147	SM Prog.-Delivery Outcome-live Births Single
0	0	SM Prog.-Delivery Outcome-live Births Twin
167	4	SM Prog.-Delivery Service-Non-SBA Health Workers Facility
172	145	SM Prog.-Delivery Service-Skilled Birth Attendants (SBA)Facility
2	0	SM Prog.-Maternal Death-Neonatal death at Health Facility
5	1	SM Prog.-Number of Still Births-Fresh
6	1	SM Prog.-Number of Still Births-Macerated
0		SM Prog.-Obstetric Complications-Abortion Complication
0		SM Prog.-Obstetric Complications-Antepartum Haemorrhage
0		SM Prog.-Obstetric Complications-Eclampsia
0		SM Prog.-Obstetric Complications-Ectopic Pregnancy
0		SM Prog.-Obstetric Complications-Other Complications
0	1	SM Prog.-Obstetric Complications-Postpartum Haemorrhage
0		SM Prog.-Obstetric Complications-Preg.-Induced Hypertension
0		SM Prog.-Obstetric Complications-Prolonged labour
0		SM Prog.-Obstetric Complications-Puerperal Sepsis
0		SM Prog.-Obstetric Complications-Retained Placenta
0		SM Prog.-Obstetric Complications-Severe/Pre-Eclampsia
339	149	SM Prog.-PNC Visits within 24 hours
0	5	Safe Abortion Service-Number of Women < 20 Years-Medical
0	0	Safe Abortion Service-Number of Women < 20 Years-Surgical
0	30	Safe Abortion Service-Number of Women ≥ 20 Years-Medical
0	0	Safe Abortion Service-Number of Women ≥ 20 Years-Surgical
0	0	Safe Abortion Service-Post Abortion Care (PAC) This facility-Medical
0	0	Safe Abortion Service-Post Abortion FP Methods Long Term-Medical
0	0	Abortion Service-Post Abortion FP Methods Long term-Surgical
0	0	SSafe Abortion Service-Post Abortion FP Methods Short Term-Medical
0	0	SSafe Abortion Service-Post Abortion FP Methods Short term-Surgical
0	0	SM Prog.-Type of Delivery-C/S Breech
0	0	SM Prog.-Type of Delivery-C/S Cephalic
6	1	SM Prog.-Type of Delivery-Spontaneous Breech
333	148	SM Prog.-Type of Delivery-Spontaneous Cephalic
0	0	SM Prog.-Type of Delivery-Vaccum/Forcep Cephalic

Primary Health Care Outreach Clinic (PHC/ORC) Programme

Organisation unit / Data	PHC/ORC-Antenatal Checkup	PHC/ORC-Blood Slide Collection	PHC/ORC-Defaulter Tracing (TB)	PHC/ORC-Deworming Tablets	PHC/ORC-Exclusive Breast Feeding	PHC/ORC-FP Method-Condom-Piece	PHC/ORC-FP Method-Depo-Number	PHC/ORC-FP Method-Pills-Cycle	PHC/ORC-FP Method-Pills-Number	PHC/ORC-General Treatment	PHC/ORC-GM-0-11 Month-Low	PHC/ORC-GM-0-11 Month-Normal	PHC/ORC-GM-0-11 Month-Very Low	PHC/ORC-GM-12-23 Month-Low	PHC/ORC-GM-12-23 Month-Normal	PHC/ORC-GM-12-23 Month-Very Low	PHC/ORC-Iron Tablet Distribution-New pregnant	PHC/ORC-Iron Tablet Distribution-Postpartum	PHC/ORC-Iron Tablet Distribution-Repeated	PHC/ORC-Mothers Group Attend	PHC/ORC-Postnatal Checkup	PHC/ORC-Timely Introduction of Complementary Feeding	PHC/ORC-Vit A for Postpartum
DAILEKH	997	21	11	333	4863	14097	1463	486	482	6372	538	18611	285	555	10374	76	394	91	797	2942	185	5256	259
Naumule RM	60	0	5	5	528	949	119	24	24	657	32	1702	8	36	849	2	14	2	69	437	8	443	0
Mahabu RM	63	0	0	49	255	1884	56	43	44	408	14	956	10	25	504	0	47	34	46	140	40	287	31
Bhairabi RM	21	0	0	3	158	104	78	0	0	328	47	1417	7	76	723	2	3	2	36	203	29	163	0
Thantikandh RM	76		6	47	335	2449	129	63	66	607	87	1579	99	70	1021	15	39	11	48	61	11	425	25
Aathbis Mun.	45	0	0	1	338	288	29	8	19	487	90	1108	42	72	624	18	5	0	12	53	12	376	5
Chamunda Bin.Mun.	144	0	0	72	268	510	29	15	17	242	55	964	25	29	411	3	79	5	75	69	23	252	1
Dullu Mun.	265	0	0	94	1606	2422	274	115	100	689	68	3684	45	67	1551	1	112	10	143	578	27	1936	152
Narayan Mun.	16	13	0	2	472	2079	109	106	106	884	26	2775	13	14	1843	0	32	0	76	425	2	473	0
Bhagawatimai RM	106	0	0	24	239	1989	122	28	25	513	33	1253	3	31	611	2	21	20	84	193	20	247	45
Dungeshwor RM	114	0	0	21	150	325	309	15	12	671	12	982	10	25	650	3	25	4	87	78	5	161	0
Gurans RM	87	8	0	15	514	1098	209	69	69	886	74	2191	23	110	1587	30	17	3	121	705	8	493	0

Female Community Health Volunteer (FCHV) Programme

Mahabu RM	Naumule RM	DAILEKH	Organisation unit / Data
4	7	182	FCHV -IMAM-MUAC-Screening-Red-SAM
1315	1358	21703	-CBIMCI-(2-59)Months-No Pneumonia cases
1702	2759	22337	CBIMCI-(2-59)Months-ORS Expenditure(pkt)
1099	1669	16333	-CBIMCI-(2-59)Months-Total Diarrhoea Cases
1444	1467	23274	CBIMCI-(2-59)Months-Total cases ARI
135	100	948	CBIMCI-(2-59)Months-Treated with Cotrim
1083	1683	15158	-CBIMCI-(2-59)Months-Treated with ORS & Zinc
9290	16050	135340	CBIMCI-(2-59)Months-Zinc Exp(tab)
0	2	66	CBIMCI-Below 2 Months-Sick Baby-29-59 days
0	0	34	CBIMCI-Below 2 Months-Sick Baby-≤28 days
0	0	22	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-29-59 days
0	0	15	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-≤28 days
0	0	2	FCHV Program-Death-2-59 Months
0	0	2	FCHV Program-Death-29-59 days
0	1	14	FCHV Program-Death-≤28 days
0	1	4	FCHV Program-Maternal Death-Antepartum
0	1	1	FCHV Program-Maternal Death-Intrapartum
11	36	149	-Distribution of PP Vit A
0	0	5	-Home Delivery-Birth Asphyxia Management
11	34	880	-Home Delivery-Breast Feeding<1 hour of Birth
11	36	151	-Home Delivery-Chlorhexidine applied in cord
0	0	2	-Home Delivery-Low Birth Weight
10	36	159	-Home Delivery-Skin to Skin Contact after Birth
11	36	170	-Home Delivery-Total Live Birth
1	0	3	-Home Delivery-Total Still Birth
11	31	151	-Home Delivery-visit-newborn& PP Mothers- 3rd day of Birth
11	32	152	-Home Delivery-visit-newborn& PP Mothers- ≤24 hours of Birth
11	30	152	-Home Delivery-visit-newborn& PP Mothers-7th day of Birth
945	747	10526	-Meetings Held of Mothers Group
7044	4810	101825	-No. of Condoms Pieces Distribution
314	462	4883	-Pills Cycles Distribution
716	549	6035	-Pregnant Women given Iron Tablets
1236	942	16858	-Visits Made to Pregnant Women
951	1834	29413	FCHV-IMAM -MUAC-Screening-Green-Normal
43	27	1522	FCHV-IMAM -MUAC-Screening-Yellow-MAM
0	0	3	FCHV-IMAM-HH visit & Monitoring-Red-Absent of Defaulting
0	0	18	HH visit & Monitoring-Red-Cured Children After Treatment
0	0	15	HH visit & Monitoring-Red-Stagnating or Decreased Weight
		40	FCHVs Received Free Health Services in OPD
13255	12459	167340	Health Facilities within Catchment Area-FCHVs-People Served
18	176	750	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
21	0	2498	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
29	210	747	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
22	0	2135	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
28	10	584	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
48	204	1370	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
732	948	9852	Total FCHVs within Catchment Area
707	936	9635	Total no.of FCHVs Report submitted

Aathbis Mun.	Thantikandh RM	Bhairabi RM	Organisation unit / Data
39	61	8	FCHV -IMAM-MUAC-Screening-Red-SAM
3027	997	1411	-CBIMCI-(2-59)Months-No Pneumonia cases
3777	1078	1795	CBIMCI-(2-59)Months-ORS Expenditure(pkt)
2614	976	1481	-CBIMCI-(2-59)Months-Total Diarrhoea Cases
3275	1204	1522	CBIMCI-(2-59)Months-Total cases ARI
43	217	83	CBIMCI-(2-59)Months-Treated with Cotrim
2589	824	1183	-CBIMCI-(2-59)Months-Treated with ORS & Zinc
23253	7704	11040	CBIMCI-(2-59)Months-Zinc Exp(tab)
21	13		CBIMCI-Below 2 Months-Sick Baby-29-59 days
3	15	1	CBIMCI-Below 2 Months-Sick Baby-≤28 days
11	10		CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-29-59 days
2	6	1	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-≤28 days
0	1		FCHV Program-Death-2-59 Months
0			FCHV Program-Death-29-59 days
0	9	3	FCHV Program-Death-≤28 days
1	1		FCHV Program-Maternal Death-Antepartum
0		0	FCHV Program-Maternal Death-Intrapartum
21	32	19	-Distribution of PP Vit A
0	3	1	-Home Delivery-Birth Asphyxia Management
26	31	21	-Home Delivery-Breast Feeding<1 hour of Birth
20	29	21	-Home Delivery-Chlorhexidine applied in cord
1	1		-Home Delivery-Low Birth Weight
24	32	21	-Home Delivery-Skin to Skin Contact after Birth
26	33	21	-Home Delivery-Total Live Birth
0	1	1	-Home Delivery-Total Still Birth
24	32	8	-Home Delivery-visit-newborn& PP Mothers- 3rd day of Birth
24	32	17	-Home Delivery-visit-newborn& PP Mothers- ≤24 hours of Birth
24	34	5	-Home Delivery-visit-newborn& PP Mothers-7th day of Birth
858	452	527	-Meetings Held of Mothers Group
9713	3581	15056	-No. of Condoms Pieces Distribution
295	159	687	-Pills Cycles Distribution
735	538	1143	-Pregnant Women given Iron Tablets
2059	1331	1943	-Visits Made to Pregnant Women
5932	8634	1925	FCHV-IMAM -MUAC-Screening-Green-Normal
325	495	97	FCHV-IMAM -MUAC-Screening-Yellow-MAM
3			FCHV-IMAM-HH visit & Monitoring-Red-Absent of Defaulting
0	15		HH visit & Monitoring-Red-Cured Children After Treatment
1	10		HH visit & Monitoring-Red-Stagnating or Decreased Weight
			FCHVs Received Free Health Services in OPD
25631	12844	14679	Health Facilities within Catchment Area-FCHVs-People Served
131	113	13	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
1964	76	40	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
156	109	4	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
2007	62	9	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
39	7	53	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
116	156	57	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
924	612	660	Total FCHVs within Catchment Area
913	555	646	Total no.of FCHVs Report submitted

Narayan Mun.	Dullu Mun.	Chamunda Bin.Mun.	Organisation unit / Data
18	9	4	FCHV -IMAM-MUAC-Screening-Red-SAM
2315	3951	1750	-CBIMCI-(2-59)Months-No Pneumonia cases
2407	1793	1365	CBIMCI-(2-59)Months-ORS Expenditure(pkt)
1900	1936	1194	-CBIMCI-(2-59)Months-Total Diarrhoea Cases
2315	4099	1974	CBIMCI-(2-59)Months-Total cases ARI
11	83	225	CBIMCI-(2-59)Months-Treated with Cotrim
1900	1361	1192	-CBIMCI-(2-59)Months-Treated with ORS & Zinc
18710	6668	10565	CBIMCI-(2-59)Months-Zinc Exp(tab)
0	7	13	CBIMCI-Below 2 Months-Sick Baby-29-59 days
1	0	12	CBIMCI-Below 2 Months-Sick Baby-≤28 days
0	0	1	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-29-59 days
0	0	6	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-≤28 days
1	0	0	FCHV Program-Death-2-59 Months
0	1	0	FCHV Program-Death-29-59 days
0	0	0	FCHV Program-Death-≤28 days
0	1	0	FCHV Program-Maternal Death-Antepartum
0	0	0	FCHV Program-Maternal Death-Intrapartum
1	7	17	-Distribution of PP Vit A
0	0	1	-Home Delivery-Birth Asphyxia Management
719	13	16	-Home Delivery-Breast Feeding<1 hour of Birth
1	8	17	-Home Delivery-Chlorhexidine applied in cord
0	0	0	-Home Delivery-Low Birth Weight
1	13	13	-Home Delivery-Skin to Skin Contact after Birth
1	13	17	-Home Delivery-Total Live Birth
0	0	0	-Home Delivery-Total Still Birth
1	21	10	-Home Delivery-visit-newborn& PP Mothers- 3rd day of Birth
1	13	13	-Home Delivery-visit-newborn& PP Mothers- ≤24 hours of Birth
1	21	10	-Home Delivery-visit-newborn& PP Mothers-7th day of Birth
873	1394	687	-Meetings Held of Mothers Group
15636	12504	4491	-No. of Condoms Pieces Distribution
704	783	189	-Pills Cycles Distribution
414	835	343	-Pregnant Women given Iron Tablets
2015	1975	1624	-Visits Made to Pregnant Women
6238	379	769	FCHV-IMAM -MUAC-Screening-Green-Normal
169	39	36	FCHV-IMAM -MUAC-Screening-Yellow-MAM
0	0	0	FCHV-IMAM-HH visit & Monitoring-Red-Absent of Defaulting
3	0	0	HH visit & Monitoring-Red-Cured Children After Treatment
0	0	0	HH visit & Monitoring-Red-Stagnating or Decreased Weight
14	26		FCHVs Received Free Health Services in OPD
14011	26988	10888	Health Facilities within Catchment Area-FCHVs-People Served
0	0	180	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
231	50	0	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
0	0	133	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
0	0	1	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
307	35	0	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
314	37	203	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
972	1656	744	Total FCHVs within Catchment Area
965	1600	744	Total no.of FCHVs Report submitted

Gurans RM	Dungeshwor RM	Bhagawatimai RM	Organisation unit / Data
27	5	0	FCHV -IMAM-MUAC-Screening-Red-SAM
1595	1428	2556	-CBIMCI-(2-59)Months-No Pneumonia cases
1227	1151	3283	CBIMCI-(2-59)Months-ORS Expenditure(pkt)
740	701	2023	-CBIMCI-(2-59)Months-Total Diarrhoea Cases
1666	1553	2755	CBIMCI-(2-59)Months-Total cases ARI
0	20	31	CBIMCI-(2-59)Months-Treated with Cotrim
726	614	2003	-CBIMCI-(2-59)Months-Treated with ORS & Zinc
6580	5450	20030	CBIMCI-(2-59)Months-Zinc Exp(tab)
10		0	CBIMCI-Below 2 Months-Sick Baby-29-59 days
2		0	CBIMCI-Below 2 Months-Sick Baby-≤28 days
0		0	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-29-59 days
0		0	CBIMCI-Below 2 Months-Treated with Cortim & referred to HF-≤28 days
0		0	FCHV Program-Death-2-59 Months
0		1	FCHV Program-Death-29-59 days
0	1	0	FCHV Program-Death-≤28 days
0		0	FCHV Program-Maternal Death-Antepartum
0		0	FCHV Program-Maternal Death-Intrapartum
1	2	2	-Distribution of PP Vit A
0		0	-Home Delivery-Birth Asphyxia Management
0	7	2	-Home Delivery-Breast Feeding<1 hour of Birth
0	7	1	-Home Delivery-Chlorhexidine applied in cord
0		0	-Home Delivery-Low Birth Weight
0	7	2	-Home Delivery-Skin to Skin Contact after Birth
0	10	2	-Home Delivery-Total Live Birth
0	0	0	-Home Delivery-Total Still Birth
0	10	3	-Home Delivery-visit-newborn& PP Mothers- 3rd day of Birth
0	5	4	-Home Delivery-visit-newborn& PP Mothers- ≤24 hours of Birth
6	7	3	-Home Delivery-visit-newborn& PP Mothers-7th day of Birth
2544	662	837	-Meetings Held of Mothers Group
9547	6693	12750	-No. of Condoms Pieces Distribution
580	396	314	-Pills Cycles Distribution
250	109	403	-Pregnant Women given Iron Tablets
1425	1155	1153	-Visits Made to Pregnant Women
1820	852	79	FCHV-IMAM -MUAC-Screening-Green-Normal
203	84	4	FCHV-IMAM -MUAC-Screening-Yellow-MAM
0		0	FCHV-IMAM-HH visit & Monitoring-Red-Absent of Defaulting
0		0	HH visit & Monitoring-Red-Cured Children After Treatment
3	1	0	HH visit & Monitoring-Red-Stagnating or Decreased Weight
			FCHVs Received Free Health Services in OPD
15611	12493	8481	Health Facilities within Catchment Area-FCHVs-People Served
44	33	42	IYCF & BVCPP-Age(12-17 Month)-First time-FCHV
13	75	28	IYCF & BVCPP-Age(12-17 Month)-Second time-FCHV
39	30	37	IYCF & BVCPP-Age(18-23 Month)-First time-FCHV
19		15	IYCF & BVCPP-Age(18-23 Month)-Second time-FCHV
	78	27	IYCF & BVCPP-Age(18-23 Month)-Third time-FCHV
52	113	70	IYCF & BVCPP-Age(6-11 Month)-First time-FCHV
948	684	972	Total FCHVs within Catchment Area
932	676	961	Total no.of FCHVs Report submitted

Manabu RM	Naumule RM	DAILEKH	Organisation unit / Data
12	13	157	TB-Age group-All New
	1	8	TB-Age group-All Relapse
	1	5	TB-Age group-Others
3	3	56	TB-Case Registration-EP (New)
	0	1	TB-Case Registration-EP (Relapse)
5	6	72	TB-Case Registration-PBC (New)
	0	1	TB-Case Registration-PBC (OPT)
	1	7	TB-Case Registration-PBC (Relapse)
	0	1	TB-Case Registration-PBC (TAF)
	1	3	TB-Case Registration-PBC (TALF)
4	4	29	TB-Case Registration-PCD (New)
	1	19	TB-DST-Xpert MTB/RIF (New)
		3	TB-DST-Xpert MTB/RIF (Retreatment)
		3	TB-PT-Adult (Investigated)
		16	TB-PT-Adult (Members)
		4	TB-PT-Child (Members)
		3	TB-PT-Child (investigated)
		2	TB-PT-Eligible for TBPT
		2	TB-PT-Enrolled in TBPT
		6	TB-PT-Index cases
		1	TB-PT-TB Diagnosed
		2	TB-Presumptive-Diagnosed (DSTB)
		2	TB-Presumptive-Enrolled (DSTB)
		23	TB-Presumptive-Screened (Symptoms)
			TB-Presumptive-Screened (X-Ray)
		24	TB-Presumptive-Total Cases
		1	TB-Referred-EP (Contact investigation)
1		35	TB-Referred-EP (Private)
2	3	21	TB-Referred-EP (Self)
		1	TB-Referred-PBC (Community)
		4	TB-Referred-PBC (Contact investigation)
4		30	TB-Referred-PBC (Private)
1	8	49	TB-Referred-PBC (Self)
2	1	15	TB-Referred-PCD (Private)
2	3	14	TB-Referred-PCD (Self)
6	9	102	TB-Regimen-Adult (2HRZE+4HR)
		6	TB-Regimen-Adult (2HRZE+7HRE)
	2	14	TB-Regimen-Adult (6HRZE)
6	4	48	TB-Regimen-Child (2HRZE+4HR)
	3	880	TB-Sputum Microscopy-Negative
	0	123	TB-Sputum Microscopy-Positive
12	15	157	TB-TBHIV-Negative
		3	TB-TBHIV-Positive
	0	3	TB-TBHIV-on ART
	4	14	TB-Tobacco-Currently smoking
12	15	164	TB-Tobacco-Registered
	0	97	TB-Xpert MTB/RIF-MTB Invalid/Error/No Result
	1	77	TB-Xpert MTB/RIF-MTB detected
	0	1552	TB-Xpert MTB/RIF-MTB not detected
	0	5	TB-Xpert MTB/RIF-RIF detected
	0	2	TB-Xpert MTB/RIF-RIF indertminate
	1	73	TB-Xpert MTB/RIF-RIF not detected

Aathbis Mun.	Thanukan db RM	Bhairabi RM	Organisation unit / Data
24	17	9	TB-Age group-All New
0	2		TB-Age group-All Relapse
			TB-Age group-Others
12	10	2	TB-Case Registration-EP (New)
0	1		TB-Case Registration-EP (Relapse)
10	6	6	TB-Case Registration-PBC (New)
0			TB-Case Registration-PBC (OPT)
0	1		TB-Case Registration-PBC (Relapse)
0			TB-Case Registration-PBC (TAF)
0			TB-Case Registration-PBC (TALF)
2	1	1	TB-Case Registration-PCD (New)
	4		TB-DST-Xpert MTB/RIF (New)
			TB-DST-Xpert MTB/RIF (Retreatment)
			TB-PT-Adult (Investigated)
	5		TB-PT-Adult (Members)
			TB-PT-Child (Members)
			TB-PT-Child (investigated)
			TB-PT-Eligible for TBPT
			TB-PT-Enrolled in TBPT
	2		TB-PT-Index cases
			TB-PT-TB Diagnosed
			TB-Presumptive-Diagnosed (DSTB)
			TB-Presumptive-Enrolled (DSTB)
	17		TB-Presumptive-Screened (Symptoms)
			TB-Presumptive-Screened (X-Ray)
	17		TB-Presumptive-Total Cases
			TB-Referred-EP (Contact investigation)
8	11	2	TB-Referred-EP (Private)
4			TB-Referred-EP (Self)
			TB-Referred-PBC (Community)
			TB-Referred-PBC (Contact investigation)
4	7	3	TB-Referred-PBC (Private)
6		3	TB-Referred-PBC (Self)
2	1	1	TB-Referred-PCD (Private)
			TB-Referred-PCD (Self)
17	7	7	TB-Regimen-Adult (2HRZE+4HR)
3	1		TB-Regimen-Adult (2HRZE+7HRE)
	1		TB-Regimen-Adult (6HRZE)
4	10	2	TB-Regimen-Child (2HRZE+4HR)
29	75		TB-Sputum Microscopy-Negative
4	1	1	TB-Sputum Microscopy-Positive
24	19	9	TB-TBHIV-Negative
			TB-TBHIV-Positive
0			TB-TBHIV-on ART
2	2	2	TB-Tobacco-Currently smoking
24	19	9	TB-Tobacco-Registered
0			TB-Xpert MTB/RIF-MTB Invalid/Error/No Result
	2		TB-Xpert MTB/RIF-MTB detected
1	3	1	TB-Xpert MTB/RIF-MTB not detected
0	1		TB-Xpert MTB/RIF-RIF detected
0			TB-Xpert MTB/RIF-RIF indertminate
1	4		TB-Xpert MTB/RIF-RIF not detected

Bhagawati mai RM	Narayan Mun	Dullu Mun	a	Organisation unit / Data
5	8	26	23	TB-Age group-All New
	0	3	2	TB-Age group-All Relapse
			2	TB-Age group-Others
2	3	6	5	TB-Case Registration-EP (New)
	0	0	0	TB-Case Registration-EP (Relapse)
2	4	16	10	TB-Case Registration-PBC (New)
	0	0	1	TB-Case Registration-PBC (OPT)
	0	3	2	TB-Case Registration-PBC (Relapse)
	0	0	0	TB-Case Registration-PBC (TAF)
	0	0	1	TB-Case Registration-PBC (TALF)
1	1	4	8	TB-Case Registration-PCD (New)
2	3	5		TB-DST-Xpert MTB/RIF (New)
			2	TB-DST-Xpert MTB/RIF (Retreatment)
		3		TB-PT-Adult (Investigated)
	6	5		TB-PT-Adult (Members)
	2	2		TB-PT-Child (Members)
	1	2		TB-PT-Child (investigated)
	1	1		TB-PT-Eligible for TBPT
	1	1		TB-PT-Enrolled in TBPT
	1	3		TB-PT-Index cases
		1		TB-PT-TB Diagnosed
		2		TB-Presumptive-Diagnosed (DSTB)
		2		TB-Presumptive-Enrolled (DSTB)
		6		TB-Presumptive-Screened (Symptoms)
				TB-Presumptive-Screened (X-Ray)
		6		TB-Presumptive-Total Cases
			1	TB-Referred-EP (Contact investigation)
2	2	5	1	TB-Referred-EP (Private)
	1	1	3	TB-Referred-EP (Self)
	1			TB-Referred-PBC (Community)
		3	1	TB-Referred-PBC (Contact investigation)
	2		10	TB-Referred-PBC (Private)
2	1	16	3	TB-Referred-PBC (Self)
1		1	6	TB-Referred-PCD (Private)
	1	3	2	TB-Referred-PCD (Self)
3	5	21	21	TB-Regimen-Adult (2HRZE+4HR)
	1		1	TB-Regimen-Adult (2HRZE+7HRE)
		4	4	TB-Regimen-Adult (6HRZE)
2	2	4	1	TB-Regimen-Child (2HRZE+4HR)
	655	111	0	TB-Sputum Microscopy-Negative
0	27	88	1	TB-Sputum Microscopy-Positive
5	8	24	24	TB-TBHIV-Negative
		2	1	TB-TBHIV-Positive
	0	2	1	TB-TBHIV-on ART
		1	2	TB-Tobacco-Currently smoking
4	7	28	27	TB-Tobacco-Registered
	97	0	0	TB-Xpert MTB/RIF-MTB Invalid/Error/No Result
2	64	2	1	TB-Xpert MTB/RIF-MTB detected
	1546	0	0	TB-Xpert MTB/RIF-MTB not detected
	4	0	0	TB-Xpert MTB/RIF-RIF detected
	2	0	0	TB-Xpert MTB/RIF-RIF indertminate
2	57	1	1	TB-Xpert MTB/RIF-RIF not detected

Gurans RM	Dungesh wor RM	Organisation unit / Data
8	12	TB-Age group-All New
		TB-Age group-All Relapse
	2	TB-Age group-Others
3	7	TB-Case Registration-EP (New)
		TB-Case Registration-EP (Relapse)
2	5	TB-Case Registration-PBC (New)
		TB-Case Registration-PBC (OPT)
		TB-Case Registration-PBC (Relapse)
	1	TB-Case Registration-PBC (TAF)
	1	TB-Case Registration-PBC (TALF)
3		TB-Case Registration-PCD (New)
1	3	TB-DST-Xpert MTB/RIF (New)
	1	TB-DST-Xpert MTB/RIF (Retreatment)
		TB-PT-Adult (Investigated)
		TB-PT-Adult (Members)
		TB-PT-Child (Members)
		TB-PT-Child (investigated)
		TB-PT-Eligible for TBPT
		TB-PT-Enrolled in TBPT
		TB-PT-Index cases
		TB-PT-TB Diagnosed
		TB-Presumptive-Diagnosed (DSTB)
		TB-Presumptive-Enrolled (DSTB)
		TB-Presumptive-Screened (Symptoms)
		TB-Presumptive-Screened (X-Ray)
	1	TB-Presumptive-Total Cases
		TB-Referred-EP (Contact investigation)
2	1	TB-Referred-EP (Private)
1	6	TB-Referred-EP (Self)
		TB-Referred-PBC (Community)
		TB-Referred-PBC (Contact investigation)
		TB-Referred-PBC (Private)
2	7	TB-Referred-PBC (Self)
		TB-Referred-PCD (Private)
3		TB-Referred-PCD (Self)
2	4	TB-Regimen-Adult (2HRZE+4HR)
		TB-Regimen-Adult (2HRZE+7HRE)
	3	TB-Regimen-Adult (6HRZE)
6	7	TB-Regimen-Child (2HRZE+4HR)
7		TB-Sputum Microscopy-Negative
1		TB-Sputum Microscopy-Positive
7	10	TB-TBHIV-Negative
		TB-TBHIV-Positive
		TB-TBHIV-on ART
	1	TB-Tobacco-Currently smoking
8	11	TB-Tobacco-Registered
		TB-Xpert MTB/RIF-MTB Invalid/Error/No Result
1	4	TB-Xpert MTB/RIF-MTB detected
1		TB-Xpert MTB/RIF-MTB not detected
		TB-Xpert MTB/RIF-RIF detected
		TB-Xpert MTB/RIF-RIF indertminate
2	4	TB-Xpert MTB/RIF-RIF not detected

Leprosy Programme

Organisation unit / Data	Leprosy-Cohort of New registered Patients-Currently in Treatment-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-PB after 9 Month	Leprosy-Cohort of New registered Patients-Total Registered-MB after 18 Month	Leprosy-Cohort of New registered Patients-Total Registered-PB after 9 Month	Leprosy-Deformity Status-Patient Type-Grade 0-Released from Treatment (RFT)	Leprosy-Deformity Status-Patient Type-Grade 1-New Cases	Leprosy-Deformity Status-Patient Type-New Cases-Grade 0	Leprosy-Patient at the End of last Month-Multi Bacillary	Leprosy-Patient at the End of last Month-Pauci Bacillary	Leprosy-Smear +ve Cases among Smear Examined-Multi Bacillary	Leprosy-Smear examined Cases Among New Cases-Multi Bacillary	Leprosy-Total Additions-New Cases Never Registered earlier-Multi Bacillary	Leprosy-Total Deducted-Patients Released from Treatment-Multi Bacillary	Leprosy-Cohort of New registered Patients-Currently in Treatment-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-PB after 9 Month	Leprosy-Cohort of New registered Patients-Total Registered-MB after 18 Month	Leprosy-Cohort of New registered Patients-Total Registered-PB after 9 Month	Leprosy-Deformity Status-Patient Type-Grade 0-Released from Treatment (RFT)	Leprosy-Deformity Status-Patient Type-Grade 1-New Cases	Leprosy-Deformity Status-Patient Type-New Cases-Grade 0	Leprosy-Patient at the End of last Month-Multi Bacillary	Leprosy-Patient at the End of last Month-Pauci Bacillary	Leprosy-Smear +ve Cases among Smear Examined-Multi Bacillary	Leprosy-Smear examined Cases Among New Cases-Multi Bacillary	Leprosy-Total Additions-New Cases Never Registered earlier-Multi Bacillary	Leprosy-Total Deducted-Patients Released from Treatment-Multi Bacillary
DAILEKH	6	5	2	5	2	6	1	5	111	6	1	1	6	5	6	5	2	5	2	6	1	5	111	6	1	1	6	5
Naumule RM	0	1	0	1	0	1	1	0	18	0	1	1	1	1	0	1	0	1	0	1	1	0	18	0	1	1	1	1
Mahabu RM								1	3	0			1									1	3	0			1	
Bhairabi RM																												
Thantikandh RM									12														12					
Aathbis Mun.	0	3	1	3	1	2	0	2	13	6	0	0	2	1	0	3	1	3	1	2	0	2	13	6	0	0	2	1
Chamunda Bin.Mun.	0	0	0	0	0	0	0	0	24		0	0	0	0	0	0	0	0	0	0	0	0	24		0	0	0	0

Organisation unit / Data	Leprosy-Cohort of New registered Patients-Currently in Treatment-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-PB after 9 Month	Leprosy-Cohort of New registered Patients-Total Registered-MB after 18 Month	Leprosy-Cohort of New registered Patients-Total Registered-PB after 9 Month	Leprosy-Deformity Status-Patient Type-Grade 0-Released from Treatment (RFT)	Leprosy-Deformity Status-Patient Type-Grade 1-New Cases	Leprosy-Deformity Status-Patient Type-New Cases-Grade 0	Leprosy-Patient at the End of last Month-Multi Bacillary	Leprosy-Patient at the End of last Month-Pauci Bacillary	Leprosy-Smear +ve Cases among Smear Examined-Multi Bacillary	Leprosy-Smear examined Cases Among New Cases-Multi Bacillary	Leprosy-Total Additions-New Cases Never Registered earlier-Multi Bacillary	Leprosy-Total Deducted-Patients Released from Treatment-Multi Bacillary	Leprosy-Cohort of New registered Patients-Currently in Treatment-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-MB after 18 Month	Leprosy-Cohort of New registered Patients-RFT-PB after 9 Month	Leprosy-Cohort of New registered Patients-Total Registered-MB after 18 Month	Leprosy-Cohort of New registered Patients-Total Registered-PB after 9 Month	Leprosy-Deformity Status-Patient Type-Grade 0-Released from Treatment (RFT)	Leprosy-Deformity Status-Patient Type-Grade 1-New Cases	Leprosy-Deformity Status-Patient Type-New Cases-Grade 0	Leprosy-Patient at the End of last Month-Multi Bacillary	Leprosy-Patient at the End of last Month-Pauci Bacillary	Leprosy-Smear +ve Cases among Smear Examined-Multi Bacillary	Leprosy-Smear examined Cases Among New Cases-Multi Bacillary	Leprosy-Total Additions-New Cases Never Registered earlier-Multi Bacillary	Leprosy-Total Deducted-Patients Released from Treatment-Multi Bacillary
Dullu Mun.	6	1	0	1	0	2	0	2	36	0	0	0	2	2	6	1	0	1	0	2	0	2	36	0	0	0	2	2
Narayan Mun.	0	0	0	0	0	1	0	0	5	0	0	0	0	1	0	0	0	0	0	1	0	0	5	0	0	0	0	1
Bhagawatimai RM	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0	0	0	0	0	0	0	0			0	0
Dungeshwor RM			1		1												1		1									
Gurans RM																												

Malaria Programme

Organisation unit / Data	Malaria-Blood Slide Collection-ACD	Malaria-Blood Slide Collection-PCD	Malaria-Confirmed Uncomplicated Cases	Malaria-Diagnosis & Result-Both (M+R) +ve Result	Malaria-Diagnosis & Result-Both (M+R)-Examined	Malaria-Diagnosis & Result-Microscopy only-Examined	Malaria-Diagnosis & Result-RDT Only-Examined	Malaria-Treatment-Confirmed Uncomplicated	Malaria-Treatment-Total Cases	Malaria-Type-Plasmodium Vivax-Imported	Malaria-Type-Plasmodium Vivax-Indigenous
DAILEKH	35	336	3	3	13	78	280	3	3	2	1
Naumule RM	0	7	0	0	0	2	5	0	0	0	0
Mahabu RM	0				0	0	0		0		
Bhairabi RM											
Thantikandh RM											
Aathbis Mun.	23	6	0	0	0	0	29	0	0	0	0
Chamunda Bin.Mun.	0	8	0	0	0	0	8	0	0	0	0
Dullu Mun.	0	56	0	0	1	0	55	0	0	0	0
Narayan Mun.	5	249	2	2	6	76	172	2	2	1	1
Bhagawatimai RM	0	0									
Dungeshwor RM		10	1	1	6		4	1	1	1	
Gurans RM	7						7				

Social Inclusion

Organisation unit / Data	Disaggregation by Sex & Caste/Ethnicity-Abortion Cases	Disaggregation by Sex & Caste/Ethnicity-Enroll in CBIMCI Programme	Disaggregation by Sex & Caste/Ethnicity-Gender Based Violence	Disaggregation by Sex & Caste/Ethnicity-Inpatient Cases	Disaggregation by Sex & Caste/Ethnicity-Institutional Delivery	Disaggregation by Sex & Caste/Ethnicity-New HIV+ Cases	Disaggregation by Sex & Caste/Ethnicity-New Leprosy Cases	Disaggregation by Sex & Caste/Ethnicity-New TB Cases	Disaggregation by Sex & Caste/Ethnicity-Outpatient Cases	Disaggregation by Sex & Caste/Ethnicity-Underweight Children (<2 Year)	Fully Immunized Children-GESI
DAILEKH	850	26037	302	2754	4418	1	5	108	209949	1881	4902
Naumule RM	0	1676	0	5	277	0	1	8	20638	98	397
Mahabu RM	0	1055	0	0	243	0	1	4	13180	51	336
Bhairabi RM	0	581	0	0	200	0	0	5	8940	93	425
Thantikandh RM	11	2990		1	336		1	11	9830	170	363
Aathbis Mun.	0	3671	0	0	533	0	2	22	24412	414	712
Chamunda Bin.Mun.	114	3533	0	0	591	0	0	27	13176	349	443
Dullu Mun.	166	3641	0	322	779	0	0	17	30435	180	748
Narayan Mun.	524	4428	302	2405	722	1	0	2	45440	138	533
Bhagawatimai RM	0	1672	0	0	273	0	0	3	14368	26	329
Dungeshwor RM	35	1577	0	0	149	0	0	4	15449	23	243
Gurans RM	0	1213	0	21	315	0	0	5	14081	339	373

अनुसूची-२

७.५. आ.व.२०७८।०७९ मा सञ्चालित कार्यक्रमहरुको बार्षिक प्रगति लक्ष्य प्रगति विवरण

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]

सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	जिल्ला अस्पताल दैलेखको भवन निर्माण	१२०००००००.०	१	२५.०	२७२२९९५४.०	२२.६९
२	गाडी मोटरसाइकल स्कुटर	२७५०००.०	१	१००.०	२७४९००.०	९९.९६
३	कम्प्युटर ल्यापटप फोटोकपी प्रिन्टर जेनेरेटर क्यामेरा मोबाइल स्क्यानर इन्भर्टर सोलार	२५००००.०	१	१००.०	२५००००.०	१००.०
४	स्वास्थ्य सम्बन्धी उपकरण खरिद	१०००००.०	१	१००.०	९९९२२६.०	९९.९२
५	कार्यालयको लागी फर्निचर तथा फिक्चर्स खरीद	३००००.०	१	१००.०	२९९७८९.०	९९.९३
६	पुराना भवनहरूको मर्मत तथा संरचनात्मक सुधार	४००००.०	१	१००.०	३९९९१०.०	९९.९८
जम्मा		**१२२२२५०००.०**		**८७.५**	**२९४५३७७९.०**	**२४.१०**

(ख) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३३]

सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	अधिकृत स्तर नवौ दशौ	५८०८०००.०	१	१४.३	२९६२७०.०	५.१०

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
२	अधिकृत स्तर सातौ/ आठौ	७०७२०००.०	१	१००.०	६००२८३७.०	८४.८८
३	अधिकृत स्तर पाचौ/ छैटौ/ सातौ	१५६६३०००.०	१	१००.०	५००२६२४.२०	३१.९४
४	सहायक/ अधिकृत चौथौ/पांचौ/छैटौ	७१२२०००.०	१	१००.०	७११२४९३.३०	९९.८७
५	ह.स.चा. प्रथम स्तर	१५७५०००.०	१	१००.०	८८०४०.०	५.५९
६	का. स. पाँचौं स्तर	५७७५०००.०	१	१००.०	३३७७२८०.०	५८.४८
७	निजामती कर्मचारीहरुको पोशाक खर्च	६५०००.०	१	१००.०	३६०००.०	५५.३८
८	सदरमुकाम र ६ कोष भित्र (क वर्ग)	३१२०००.०	१	१००.०	३०५१७२१.०	९७.८१
९	स्थायी कर्मचारीको महंगी भत्ता	१५६०००.०	१	१००.०	९५२४१०.०	६१.०५
१०	कर्मचारीहरूको लागि कर्णाली प्रोत्साहन भत्ता	९५४७०००.०	१	१००.०	४७३७८९४.०	४९.६३
११	चिकित्सक भत्ता	१५४०००.०	१	१००.०	१४७३४०.०	९५.६८
१२	प्रयोगशाला कर्मचारीको जोखिम भत्ता	३६०००.०	१	१००.०	३६०००.०	१००.०
१३	पाले पहरा भत्ता	३०००.०	१	१००.०	३०००.०	१००.०
१४	प्रसुती स्याहार भत्ता	२०००.०	१	१००.०	५०००.०	२५.०
१५	धाराको महशुल	६०००.०	१	१००.०	६०००.०	१००.०
१६	बिद्युत महशुल	३६०००.०	१	१००.०	३५९९९२.०	१००.०
१७	ईमेल/ इन्टरनेट/वेवसाइट महसुल	३००००.०	१	१००.०	२५२०५५.०	८४.०२
१८	डीजेल-चारपांग्रे सवारी साधन र जेनेरेटर	२१६०००.०	१	१००.०	२१६०००.०	१००.०
१९	पेट्रोल- दुई पाङ्ग्रे	६६०००.०	१	१००.०	६५९५४.०	९९.९३
२०	दुई पाङग्रे र चारपाङग्रे सवारी साधन मर्मत	१८००००.०	१	१००.०	१८००००.०	१००.०

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
२१	सवारी साधन बीमा	७००००.०	१	१००.०	५३५६६.०	७६.५२
२२	कम्प्यूटर/प्रिन्टर/अस्पताल मेशिन उपकरण/जेनेटर लगायतका सामाग्री मर्मत सम्भार	५००००.०	१	१००.०	४९०५०.०	९८.१०
२३	कार्यालय व्यवस्थापन खर्च	३९६०००.०	१	१००.०	३९५१४७.०	९९.७८
२४	सवारी साधन बाहेकका मेसिनरी औजारमा प्रयोग हुने इन्धन खर्च	३२०००.०	१	१००.०	३११००.०	९७.१९
२५	सुचना तथा सन्देशमुलक सामाग्री प्रकाशन	९००००.०	१	१००.०	९००००.०	१००.०
२६	कार्यालयका विभिन्न फर्मेट तथा सुचनामुलक सामाग्री छपाई	१५००००.०	१	१००.०	१४९६९१.०	९९.७९
२७	पत्रपत्रिका तथा पुस्तिका (कार्यालय सामान तथा सेवा)	५००००.०	१	१००.०	४९५००.०	९९.००
२८	कार्यालयको वार्षीक प्रगति पुस्तिका प्रकाशन	५००००.०	१	१००.०	४९७१९.०	९९.४४
२९	सरसफाइ सम्बन्धी प्रयोग हुने सामान	१०००००	१	१००.०	९९९४५.०	९९.९५
३०	विभिनन पदमा करार सम्झाैता भइ कार्य गर्ने कर्मचारिको लागि	९६०००.०	१	१००.०	९५२७८०.०	९९.२५
३१	HMIS, DHIS र LMIS तथ्यांक प्रविष्टी तथा ब्यवस्थापनको लागि कम्प्युटर जनशक्ति करार	३८४०००.०	१	१००.०	३८१९३०.००	९९.४६
३२	स्वास्थ्य जिवनशैली र स्वस्थ्य वानी व्यवहार सम्बन्धि विधालय तथा समुदायमा अभियान	४०५०००.०	१	१००	४०५०००	१००.०
३३	कोल्डरुम तथा भ्याक्सिन सुरक्षाको लागि ईन्धन	९००००.०	१	१००.०	९००००.०	१००.०
३४	पत्रकार अन्तरक्रिया	३००००.०	१	१००.०	२५५०००.०	८५.०
३५	स्थानीय तहका जनप्रतिनिधि, प्रशासकीय अधिकृत, स्वास्थ्य संयोजकसंग स्वासथ्य सम्बन्धी समन्वय बैठक, समीक्षा र योजना तर्जुमा	३५००००.०	१	१००.०	३४९७००.०	९९.९१
३६	महामारी व्यबस्थापनको लागी बफर स्टक सामाग्री खरीद	५००००.०	१	१००.०	४९८३३१.०	९९.६७

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
३७	कर्णाली प्रदेश सरकारको सुत्केरी पोषण कोषेली कार्यक्रम	१२००००.०	१	१००.०	११३२०००.०	९४.३३
३८	HMIS तथ्यांक भेरिफिकेशन तथा फलोअप मिटिंग	२००००.०	१	१००.०	२००००.०	१००.०
३९	लामो अवधिका परिवार नियोजन साधन शिविर	२००००.०	१	१००.०	१९९९८७.०	९९.९९
४०	भ्याक्सिन स्टोर तथा सब स्टोर तथा कोल्ड चेन व्यवस्थापन	९०००.०	१	१००.०	९०००.०	१००.०
४१	जिल्ला स्टोरहरूवाट स्थानिय तह सम्म अोषधी तथा औषधी जन्य समाग्री अभिलेख प्रतिवेदन फारम ढुवानी वितरण र रिप्यांग व्यवस्थापन समेत	३००००.०	१	१००.०	२९९९९३.०	१००.०
४२	स्थानिय रैथाने (Local food) पोषक खाद्ध बस्तु प्रबर्धन कार्यक्रम (बहुक्षेत्रीय पोषणका अन्य क्रियाकलाप)	२००००.०	१	१००.०	२००००.०	१००.०
४३	VIA र अब्स्टेट्रिक फिस्टुलाका लागी स्क्रिनिङ्ग क्याम्प	१५०००.०	१	१००.०	१२५५२०.०	८३.६८
४४	TB/HIV-CABA संक्रमित वालवालिका हरूका लागि पोषण वापतको सहयोग	२००००.०	१	१००.०	१८३२००.०	९१.६०
४५	अस्पतालमा विशेषज्ञ तथा विशेष सेवा व्यवस्थापन	१५००००.०	१	१००.०	१४९६२५०.०	९९.७५
४६	पाठेघरको मुखको क्यान्सर जाँचको लागि VIA set, Silicon ring pessary खरिद	३००००.०	१	१००.०	२९९९५८.०	९९.९९
४७	अस्पताल सुरक्षा कार्यक्रम	३००००.०	१	१००.०	३००००.०	१००.०
४८	७० बर्ष माथिका जेष्ठ नागरीकहररूलाइ अस्पतालमा सवै खालका स्वास्थ्य सेवा निशुल्क व्यवस्थापन सहयोग	३००००.०	१	१००.०	२९२०००.०	९७.३३
४९	एकीकृत जनस्वास्थ्य अभियान तथा बिशेषज्ञ स्वास्थ्य शिविर	४५०००.०	१	१००	४५००००	१००.०
५०	नर्सिङ्ग कर्मचारीहरु MNH क्लनिकल तालीम	३००००.०	१	१००.०	१९६९००.०	६५.६३
५१	Stabalisation Center/ Nutrition Rehabilitation Home व्यवस्थापन	१००००.०	१	१००.०	९९०१५.०	९९.०२

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
	सचालन					
५२	स्वास्थ्य सम्बन्धी कृयाकलापहरूको एकिकृत कार्यस्थल अनुशिक्षण, सुपरिवेक्षण, अनुगमन, मुल्यांकन	२००००.०	१	१००.०	१९५४६०.०	९७.७३
५३	स्वास्थ्य शिक्षा सामग्री उत्पादन, वितरण र प्रसारण	३००००.०	१	१००.०	२९९५००.०	९९.८३
५४	प्रकोप महामारी नियन्त्रणका लागि प्रदेश र जिल्लामा आरआरटी परिचालन	३००००.०	१	१००.०	३००००.०	१००.०
५५	आँखा सेवा विस्तार तथा ब्यवस्थापन	४९९०००.०	१	१००.०	४९९०००	१००.०
५६	प्रेशण व्यवस्थापन कार्यक्रम	१००००.०	१	१००.०	१००००.०	१००.०
५७	अस्पतालजन्य फोहोरमैला व्यवस्थापन कार्यक्रम	४५०००.०	१	१००.०	४४६५००.०	९९.२२
५८	मातृ तथा शिसु स्वास्थ्य सम्बर्धनात्मक कार्यक्रम सञ्चालन	५०००.०	१	१००.०	५०००.०	१००.०
५९	महामारी तथा संक्रामक रोगहरुको रोकथाम नियन्त्रण व्यवस्थापन तथा सचेतना कार्यक्रम	४००००.०	१	१००.०	२६१९०५.०	६५.४८
६०	अस्पतालहरूमा फिजियोथेरापि युनिट सञ्चालन	३००००.०	१	१००.०	२९५९१८.०	९८.६४
६१	महिनावारी स्वास्थ्य तथा सरसफाई अभियान	३००००.०	१	१००.०	३०००००	१००.०
६२	बाल तथा मातृ मृत्युदर न्युनीकरणका लागि गाउँपालिकाहरूमा बर्थिङ सेन्टरहरूको क्षमता विकास तथा बिशेष स्वास्थ्य शिविर सञ्चालन	१५०००००	१	१००.०	१५०००००	१००.०
६३	स्वास्थ सम्बन्धि विभिन्न दिवसहरु	६०००.०	१	१००.०	६०००.०	१००.०
६४	अनुगमन तथा सुपरीवेक्षण	३१२०००.०	१	१००.०	३११९७५.०	९९.९९
६५	सरुवा तथा दैनिक भ्रमण भत्ता	१८०००.०	१	१००.०	१७८७८०.०	९९.३२
६६	कर्मचारीहरूको लागि आन्तरिक भ्रमण खर्च (सरकारबाट घोषित पर्यटन भ्रमण काजको लागि मात्र)	९७५०००.०	१	०	०	०

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
६७	चिया खाजा	२००००.०	१	१००.०	२००००.०	१००.०
६८	बिरामिका लागि रासन सिदा	१८००००.०	१	१००.०	१३११६९७.०	७२.८७
६९	क्यान्सर रोग्का विपन्न विरामीहरूलाइ यातायात खर्च	४८०००.०	१	१००.०	४००००.०	८३.३३
७०	नि:शुल्क स्वास्थ्य सेवाका लागि औषधि खरिद	१५००००.०	१	१००.०	१४९२९८६.०	९९.५३
७१	कार्यालयको घर भाडा	३००००.०	१	१००.०	२९८८००.०	९९.६०
जम्मा		**७९६११०००.०**		**९७.४**	**५०६२५७१३.५**	**६३.५९**
(ग) क्षयरोग नियन्त्रण (संघ शसर्त अनुदान) [३५०९११२७३]						
१	स्थलगत अनुशिक्षणा तथा अनुगमन र विश्व क्षयरोग दिवस मनाउने	१४९०००.०	१	१००.०	१४९०००.०	१००.०
२	जिल्लास्तर क्षयरोग कोहर्ट विश्लेषण तथा समीक्षा गोष्ठी	१९०००.०	१	१००.०	१९०००.०	१००.०
३	क्षयरोग आधारभूत तथा पुनर्ताजगी तालिम	२१५०००.०	१	१००.०	२१५०००.०	१००.०
४	पुनः उपचारमा दर्ता भएका एवं असहाय तथा गरीब बिरामीहरुलाई उपचार अवधिभर पोषण भत्ता	७२०००.०	१	१००.०	३०००.०	४.१७
जम्मा		**६२६०००.०**		**१००.०**	**५५७०००.०**	**८८.९८**
(घ) कोभिड-१९ महामारी नियन्त्रण कार्यक्रम [३५००२१०१३]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	एम्बुलेन्स/ गाडि मर्मत सम्भार	४५०००.०	१	१००.०	४५०००.०	१००.०
२	विशेषज्ञ सेवा तथा कोभिड जनशक्ति व्यवस्थापन	२१००००.०	१	१००.०	२०९०४६०.०	९९.५५

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
३	कोभिड १९ को लागि थप जनशक्ति ब्यवस्थापन	८००००.०	१	१००.०	७८८०००.०	९८.५०
४	COVID-19 को लागि PPE Mask Sanitizer Spray खरिद	८००००.०	१	१००.०	७९९९८३.०	१००.०
५	एन्टिजेन कीट खरिद	१०००००.०	१	१००.०	९९७०००.०	९९.७०
६	प्रयोगशाला परीक्षणका लागि अत्यावश्यक सामग्रीको खरिद (VTM, Reagent, RDT etc.) तथा PCR ल्याब व्यवस्थापन खर्च	८००००.०	१	१००.०	८००००.०	१००.०
७	आइसोलेसन तथा होल्डिङ सेन्टर संचालन तथा व्यवस्थापन खर्च	५००००.०	१	१००.०	५००००.०	१००.०
८	यातायातको व्यवस्थापन (इन्धन, भाडामा लिने तथा मर्मत सम्भार)	२००००.०	१	१००.०	१९९९६४.०	१००.०
९	चिकित्सकीय तथा बिशेषज्ञ सेवा संचालन व्यवस्थापन	८००००.०	१	१००.०	७८९६३०.०	९८.७०
१०	अक्सिजन ग्यास/ सिलिन्डर व्यवस्थापन	१२००००.०	१	१००.०	११९९९००.०	१००.०
११	महिला स्वास्थ्य स्वयंसेविकाद्वारा कोभिड-१९ सम्बन्धी जनचेतना अभिबृद्दी कार्यक्रम	६००००.०	१	१००.०	६००००.०	१००.०
१२	कोभिड-१९ सम्वन्धि जनचेतनामुलक सामाग्री प्रकाशन	५००००.०	१	१००.०	५००००.०	१००.०
१३	ल्याव सामाग्री, भिटिएम, फिल्टर टियुभ, पिसिआर स्ट्रिप तथा रिएजेन्ट खरिद	८००००.०	१	१००.०	८००००.०	१००.०
१४	कोभिड १९ रोकथाम तथा प्रतिकार्यका लागि Telemedicine तथा EHR सेवा संचालन तथा व्यवस्थापन	१०००००.०	१	१००.०	९९८६६५.०	९९.८७
१५	प्रेषण सेवा तथा केन्द्र स्थापना तथा संचालन	३००००.०	१	०.०	०	०
१६	कोभिड उपचारमा प्रयोग हुने औषधि तथा औषधि जन्य सामाग्रीहरु	१३००००.०	१	१००.०	१२९९२५७.०	९९.९४
जम्मा		**१३१५०००.०**		**९३.८**	**१२८१२८५९.०**	**९७.४४**
(ङ) कोभिड-१९ महामारी नियन्त्रण कार्यक्रम [३५००२१०१४]						

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	शबवाहन खरिद	१२०००००	१	१००	१२०००००	१००
२	COVID-19 महामारी ब्यवस्थापनका लागि एम्बुलेन्स खरिद	२०००००	१	१००	१९९९९७०	१००
३	अस्पतालमा अक्सिजन प्लान्ट व्यवस्थापन	१०००००	१	१००	९९९५९३	९९.९६
जम्मा		**४२००००.०**		**१००.०**	**४१९९५६३.०**	**९९.९९**
(च) राष्ट्रिय स्वास्थ्य शिक्षा, सूचना तथा संचार केन्द्र (संघ शसर्त अनुदान) [३५०९११३२३]						
१	स्वास्थ्य दिवसहरू मनाउने कार्यक्रम	६००००	१	१००	६००००	१००
२	पत्रकार अन्तरक्रिया	७५०००	१	१००	७५०००	१००
३	विद्यालय स्वास्थ्य शिक्षा कार्यक्रम	१०००००	१	१००	१०००००	१००
४	स्थानीय आम सञ्चार माध्यमबाट सन्देश प्रसारण (केवुल टेलिभिजन, अनलाइन, एफएम, पत्रपत्रिका)	२५००००	१	१००	२४९९०६	९९.९६
५	अनुगमन तथा सुपरिवेक्षण	५००००	१	१००	५००००	१००
जम्मा		**५३५०००.०**		**१००.०**	**५३४९०६.०**	९९.९८
(छ) नर्सिङ तथा सामाजकि सुरक्षा सेवा कार्यक्रम (संघ शसर्त अनुदान) [३५०९११३५३]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	राष्ट्रिय महिला सामुदायिक स्वास्थ्य स्वयमसेविका कार्यक्रम संचालन (आधारभुत तथा पुनर्ताजगि तालिम संचालन र ससम्मान बिदाई समेत)	४४४९०००.०	१	१००.०	३२६७४६४.०	७३.४४
२	दैलेख अस्पतालमा आधारित सामाजिक सेवा एकाई र एकद्धार संकट व्यवस्थापन केन्द्र संचालन कार्यक्रम	२७०००००	१	१००.०	२५९९३७५.०	९६.२७
जम्मा		७१४९०००.०		१००.०	५८६६८३९.०	८२.०७
(ज) स्वास्थ्य ब्यवस्थापन कार्यक्रम (संघ शसर्त अनुदान) [३५०९११३१३]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	प्रदेश स्तरमा आर्थिक प्रशासन तथा आन्तरिक नियन्त्रण, विभिन्न प्रकारका क्लिनिकल तालिम लगायतका अन्य क्रियाकलापहरु	१३२५०००.०	१	१००.०	११२४६०८.०	८४.८८
२	तथ्यांक गुणस्तर सुधारकालागि स्वास्थ्य कार्यालयबाट स्थानीय तह एवं स्वास्थ्य संस्थाहरुमा LMIS,HMIS र DHIS2 सम्बन्धी अनसाइट कोचिङ	२२५०००.०	१	१००.०	५५३००.०	२४.५८
३	स्वास्थ्य कार्यालय मार्फत स्थानीय तहहरू साथै स्वास्थ्य संस्थामा डाटा इन्ट्रि गर्ने कर्मचारीहरुलाई LMIS,HMIS फारमहरुका बारेमा ओरियण्टेशन	४५०००.०	१	१००.०	४५०००.०	१००.०
४	स्वास्थ्य कार्यालय मार्फत स्थानीय तहहरूको डाटा भेरिफिकेशन एवं गुणस्तर सुधार, मासिक बैठक, चौमासिक एवं बार्षिक समिक्षा साथै बार्षिक प्रतिवेदन तयारी समेत	५५०००.०	१	१००.०	५४९०१९.०	९९.८२
जम्मा		२५५०००.०		१००.०	२१७८९२७.०	८५.४५

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
(झ) उपचारात्मक सेवा कार्यक्रम (संघ शसर्त अनुदान) [३५०९११३४३]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	प्रादेशिक अस्पतालको व्यवस्थापनको लागि अस्पताल व्यवस्थापक अधिकृत (Hospital management Officer) करार सेवामा नियुक्ति (५० शैया वा सो भन्दा माथिका प्रादेशिक अस्पतालका लागि) तालिम संचालन	६३२०००.०	१	०.०	०	०
२	जिल्लाबाट संचालन हुने उपचारात्मक सेवा अन्तर्गतका कार्यक्रम (न्युनतम सेवा मापदण्ड, आँखा,नाक,कान,घांटी तथा मुख स्वास्थ्य सम्वन्धि अभिमुखीकरण तथा आधारभूत स्वास्थ्य सेवा सम्वन्धि अभिमुखीकरण कार्यसंचालन निर्देशिकामा उल्लेख भए बमोजिम उल्लेखित कार्यक्रमहरु संचालन गर्ने)	१०००००.०	१	१००.०	९८९७१०.०	९८.९७
	जम्मा	**१६३२०००.०**		**५०.०**	**९८९७१०.०**	**६०.६४**
(ञ) एकीकृत महिला स्वास्थ्य तथा प्रजनन स्वास्थ्य कार्यक्रम (संघ शसर्त अनुदान) [३५०९११२९३]						
१	कुपोषण व्यवस्थापनको लागि पोषण पुनर्थापना गृह संचालन	४०००००.०	१	१००.०	३९९९९९३.०	१००.०
२	वडा अनुसार घरधुरी सर्वेक्षण, पूर्णखोप घोषणा तथा दिगोपनाको लागि कार्यक्रम	१२७६०००.०	१	०.००	०	०
३	स्वास्थ्य कार्यालय मार्फत मातृ तथा नवशिशु कार्यक्रम सन्चालन	४४००००.०	१	१००.००	४२००००.०	९५.४५

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
४	नियमित खोपमा टाईफाईड खोप शुरुवात कार्यक्रम- अभियानको समिक्षा र नियमित खोपमा टाईफाईड खोप शुरुवात र सरसफाई प्रबद्र्धनको लागि योजना गोष्ठि, खोप तथा खोप सामाग्री वितरण र ढुवानी, अनुगमन तथा सुपरिवेक्षण	५५८०००.०	१	१००.००	५५८०००.०	१००.०
५	जिल्लाबाट पालिका तथा स्वास्थ्य संस्थास्तरमा खोप, सरसफाई प्रवद्र्धन कार्यक्रम तथा पूर्ण खोप भेरिफिकेसन र दिगोपनाको लागी सहजीकरण, सुपरिवेक्षण एवम् पूर्ण खोप घोषणा सभा व्यवस्थापन खर्च	५२५०००.०	१	१००.००	५०९२८१.०	९७.०१
६	आमा सुरक्षा कार्यक्रम सेवा प्रदान शोधभर्ना, यातायात खर्च, गर्भवती तथा सुत्केरी उत्प्रेरणा सेवा (4th ANC), आमा सुरक्षा कार्यक्रमको लागि रक्तसंचार सेवा, निशुल्क गर्भपतन सेवा तथा साविकका जिल्ला अस्पताल र सो भन्दा तलका सरकारी स्वास्थ्य सस्थाहरुमा प्रसूति हुने सुत्केरी तथा नवजात शिशुलाई न्यानो झोला (लुगा सेट)	६५०००००	१	१००.००	६१०९९६४.०	९४.०
७	परिवार नियोजन किशोर किशोरी तथा प्रजनन् स्वास्थ्य कार्यक्रम	२२१७०००.०	१	८०.००	१२५५७४१.०	५६.६४
८	बिरामी नवजात शिशु निशुल्क उपचार सोधभर्ना तथा सुद्रिढिकरण कार्यक्रम	२००००००	१	१००.००	१९२१५३८.०	९६.०८
९	गुणस्तरीय खोप सेवा संचालन तथा सरसफाई प्रवद्र्धनमा संलग्न स्वास्थ्यकर्मीको दक्षता बृद्धि गर्न नयाँ तथा खोप तालिम नलिएका स्वास्थ्यकर्मीहरुलाई खोप, कोल्डचेन व्यवस्थापन ,ए.ई.एफ.आई., सर्भिलेन्स र सरसफाई प्रवद्र्धन सम्वन्धि आधारभुत ४ दिने तालिम -१२० ब्याच, ३००० जना_	४५००००	१	१००.००	४४९६९५.०	९९.९३

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१०	खोप तथा पूर्ण खोपको बारेमा जनचेतना बढाई खोप उपयोग बृद्धिको लागि स्थानिय भाषामा शैक्षिक सामाग्रि उत्पादन, स्थानिय रेडियो, एफ.एम बाट सुचना प्रशारणलगायत अन्य संचारका कृयाकलाप संचालन ७७ जिल्ला	१५००००.०	१	१००.००	१५००००.०	१००.०
११	अस्पताल मार्फत मातृ तथा नवशिश कार्यक्रम सन्चालन	७००००.०	१	१००.००	५६८०००.०	८१.१४
१२	खोप कार्यक्रम-नियमित खोप तथा अभियानहरु_ संचालन गर्दा संक्रमण रोकथाम तथा स्वास्थ्यकर्मीको सुरक्षा र सरसफाई प्रबद्धन कक्षा संचालन समेतको लागी सर्जिकल मास्क, हयाण्ड सेनिटाइजर र हात धुने साबुन, खरिद तथा वितरण खर्च, ७७ जिल्ला मार्फत कार्यक्रम संचालन	७००००.०	१	१००.००	६९९५०३.०	९९.९३
१३	सिबिआईएमएनसिआई कार्यक्रम (कोच तयारी र समता तथा पहुँच अभिमुखीकरण, कोचिङ्ग, FBIMNCI क्षमता अभिवृद्धि, ब्यबहार परिबर्तन, सुद्रिढिकरण आदि) (निर्देशिका बमोजिम)	१७००००.०	१	१००.००	१७००००.०	१००.०
१४	कोभिड १९ खोप अभियान संचालन तथा व्यवस्थापन खर्च-ए.ई.एफ.आई. व्यवस्थापन र टिम परिचालन, बैठक, अभिमुखिकरण, जनशक्ति परिचालन, प्रचार प्रसार तथा सामाजिक परिचालन, सुपरिवेक्षण अनुगमन, खोप तथा कोल्डचेन सामाग्री वितरण तथा ढुवानी आदी	१६३८४०००.०	१	१००.००	१११४५५०५.०	६८.०३
१५	खोप कोल्डचेन व्यवस्थापनको लागि ईन्धन तथा विधुत महशुल भुक्तानि प्रदेश आपूर्ती व्यवस्थापन केन्द्र र स्वास्थ्य कार्यालयहरुको लागि_	१५६०००.०	१	१००.००	१५६०००.०	१००.०
१६	खोपको पहुंच बढाई छुट वच्चालाई खोप दिलाई पूर्णखोप सुनिश्चित गर्न वैशाख महिनालाइ खोप महिना संचालन गर्ने तथा पालिकास्तरमा योजना निर्माण समेत	१५००००.०	१	१००.००	१४९७००.०	९९.८०

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१७	खोपकोल्डचेन सामाग्रिको मर्मत र आकष्मिक व्यवस्थापन, रेफ्रिजिरेटर भ्यान समेत, प्रादेशिक भ्याक्सिन स्टोर, जिल्ला भ्याक्सिन स्टोर -\प्रदेश आपूर्ती व्यवस्थापन केन्द्र र स्वास्थ्य कार्यालयहरुको लागि_	१०९०००.०	१	१००.००	१०९०००.०	१००.०
१८	प्रदेश तथा जिल्लास्तरमा अभियानहरुको समिक्षा, पूणखोप घोषणा र दिगोपना एवं सरसफाई प्रवद्धन कार्यक्रमको निरन्तरताको लागि समिक्षा र सुक्ष्म योजना तयारी गोष्ठि २ दिन ७ वटै प्रदेश र ७७ वटै जिल्लामा प्रदेश स्वास्थ्य निर्देशनालय र स्वास्थ्य कार्यलय मार्फत	७५००००	१	१००.००	७४८९७०.०	९९.८६
१९	नियमित खोप सेवा र आकस्मिक अबस्थामा प्रदेश तथा जिल्लाबाट भ्याक्सिन तथा खोप सामग्रीको ब्यवस्थापन, वितरण तथा ढुवानी खर्च प्रदेश आपूर्ती व्यवस्थापन केन्द्र र स्वास्थ्य कार्यालयहरुको लागि_	१३९६०००.०	१	१००.००	१३९४४५५.०	९९.८९
२०	जिल्ला स्तर टाईफाइड खोप अभियान संचालन तथा नियमित खोपमा टाईफाइड खोप शुरुवातको साथै नियमित खोप सुदढीकरण र सरसफाई प्रबन्धनको लागि व्यवस्थापन खर्च -अभिमुखिकरण तथा योजना गोष्ठि, स्वास्थ्यकर्मी र स्वयंमसेवक तालिम, विद्यालय शिक्षक अभिमुखिकरण तथा विद्यालयमा कक्षा संचालन, जनशक्ति परिचालन, सुपरिवेक्षण अनुगमन र अभियान संचालन	६७८७०००.०	१	१००.००	६२८२३३९.०	९२.५६
२१	CEONC सेवा शुरूवात/नियमितताको लागि जनशक्ति, मर्मत सुधार तथा नयाँ साइटमा प्रचारप्रसार	५०००००	१	१००.००	४९९१३३.०	९९.८३
२२	पोषण कार्यक्रमको अनुगमन तथा सुपरिवेक्षण	१२००००	१	१००.००	१२००००	१००.०
जम्मा		**५१५२८०००.०**		**९४.५**	**४२७२६८१७.०**	**८२.९२**

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
(ट) महामारी तथा रोग नियन्त्रण कार्यक्रम(संघ शसर्त अनुदान)[३५०९११३०४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	ICU/PICU/HDU/Ventilator/Oxygen Plant/Tank खरिद तथा जडानको सृजित दायित्वको भुक्तानी कार्यक्रम	३५४६५०००.००	१	१००.००	३२७९२७६४.००	९२.४७
जम्मा		३५४६५०००.००		१००.००	३२७९२७६४.००	९२.४७
(ठ) एड्स तथा यौन रोग नियन्त्रण (संघ शसर्त अनुदान)[३५०९११२८३]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	ART कन्सुलरको तलब,ए आर टि संचालन खर्च समेत	४३८०००.०	१	१००.०	४३५५६५.०	९९.४४
२	ART मा रहेका व्यक्तिको ल्याव जाच सोधभर्ना, अस्पतालका लागि	१४००००.०	१	१००.०	१३९११३.०	९९.३७
जम्मा		५७८०००.०		१००.०	५७४६७८.०	९९.४३
(ड) महामारी तथा रोग नियन्त्रण कार्यक्रम (संघ शसर्त अनुदान) [३५०९११३०३]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
१	केशबेसका आधारमा जोखिम भत्ता लगायत कर्मचारी ब्यवस्थापन र सोसंग सम्बन्धित औषधी एवं औषधीजन्य सामाग्री समेत ब्यवस्थापन	१५८२०००.०	१	१००.०	१५०६२४०.०	९५.२१

(क) स्वास्थ्य सेवा कार्यालयहरु [३५००२०१३४]						
सि.न.	कार्यक्रम/क्रियाकलाप	बार्षिक बजेट रु.	बार्षिक भौतिक प्रगति		बार्षिक खर्च	
			परिमाण	प्रतिशत	रकम रु.	प्रतिशत
२	राष्ट्रिय औलो उपचार निर्देशिका को बारेमा सरकारी तथा गैर सरकारी अस्पताल तथा स्वास्थ्य प्रदायक संस्थाहरुलाई जानकारी दिने, औलो नियन्त्रण कार्यको लागी आवश्यक विभिन्न सामानहरु (प्रयोगशालालाई तथा औलो फाँटको लागी आवश्यक अन्य सामानहरु) खरीद गर्ने, समुदायमा आधारित परीक्षणको लागि Selectced FCHVs / AHW / ANM लाई तालिम, मोबाइल टोली द्वारा Intensified Case Dete	१००००.०	१	१००.०	१००००.०	१००.०
३	विश्व औलो दिवस मनाउने, किटजन्य रोगहरूको परिमार्जित निर्देशिका बमोजिम प्राबिधिकहरूबाट अनुगमन तथा अनसाईट कोचिङ	१००००.०	१	१००.०	१००००.०	१००.०
४	अस्पतालहरूमा Early Warning and Reporting System (EWARS) सम्बन्धि अभिमुखिकरण, सेन्टिनल साईटहरुको संचालन खर्च	१२५०००.०	१	१००.०	१२५०००.०	१००.०
५	अभिमूखिकरण/अन्तरक्रिया, कालाजारका रोगीको उपचार तथा केस बेस सर्भिलेन्स, कालाजार बिरामीको उपचारका लागि प्रादेशिक तथा जिल्ला अस्पतालहरूमा आउने बिरामीहरूको यातायात र निदान खर्च बापत सोधभर्ना (बिरामीको यातायात खर्च रू.२००० र निदानका लागि सोधभर्ना रू. ५०००)	१००००.०	१	१००.०	९५८००.०	९५.८०
६	मानसिक रोग सम्बन्धि औषधी खरिद	३००००.०		१००.०	३००००.०	१००.०
जम्मा		२३०७०००.०		१००.०	२२२७०४०.०	९६.५
कुल जम्मा (क+ख+ग+घ+ङ+च+छ+ज+झ+ञ+ट+ठ+ड) =		३२१५५६०००.०		९४.१	१८५५४०५९५.५०	५७.७०
चालु कुल जम्मा (ख+ग+घ+च+छ+ज+झ+ञ+ठ+ड) =		१५९६६६०००.०		९३.६	११९०९४४८९.५०	७४.५९
पूजीगत कुल जम्मा (क+ङ+ट) =		१६१८९०००.०		९५.८	६६४४६१०६.००	४१.०४

७.६. यस जिल्लाका पालिका स्वास्थ्य संयोजकहरुको नाम र सर्म्पक नम्बर

क्र.सं.	स्थानीय तहको नाम	नाम, थर	मोबाईल नं.
१	नारायण न.पा.	श्री नगेन्द्र ब. हमाल	९८४८०४२२४९
२	दुल्लु न.पा.	श्री देब बहादुर थापा	९८६६७६१११९
३	आठविस न.पा	श्री देवराज तिमिल्सेना	९८४०५७७१७१
४	चामुण्डाबिद्रासैनि न.पा.	श्री मान कुमारी शाही	९८५११९०८८२
५	ठाटीकाँध गा.पा.	श्री रबिन्द्र भण्डारी	९८६८१६००९९
६	नौमूले गा.पा.	श्री भुपेन्द्र शाही	९८१५५०२०४५
७	भैरवी गा.पा.	श्री ध्रुव कुमार आचार्य	९८४८०६४३०८
८	महावु गा.पा.	श्री रमेश कुमार दशौदी	९८५८०५०४६६
९	भगवतीमाई गा.पा.	श्री टीकाराम बिष्ट	९८४४८०८०१९
१०	डुङगेश्वर गा.पा.	श्री दल बहादुर नेपाली	९८०४५००२३२
११	गुराँस गा.पा.	श्री निर भण्डारी	९८४८०६५०३७

७.७. दैलेख जिल्लाका सरकारी कार्यालयहरुको सर्म्पक नम्बरहरुको विवरण

क्र.सं.	कार्यालय/संघ संस्थाको नाम	सम्पर्क नम्बर
१	दैलेख जिल्ला अदालत, दैलेख	०८९–४२०१२१/१२४
२	जिल्ला प्रशासन कार्यालय, दैलेख	०८९–४२०११२/१२६
३	जिल्ला समन्वय समितिको कार्यालय, दैलेख	०८९–४१००२९
४	कालिदत्त गुल्म कांडाचौर व्यारेक दैलेख	०८९–४२०२३४
५	जिल्ला प्रहरी कार्यालय, दैलेख	०८९–४२०१२५
६	राष्ट्रिय अनुसन्धान जिल्ला कार्यालय, दैलेख	०८९–४१००६३
७	इलाका प्रशासन कार्यालय,दुल्लु,दैलेख	०८९–४११०३४
८	सशस्त्र प्रहरी बल आश्रित गुल्म, दैलेख	०८९–४११२५५
९	स्वास्थ्य सेवा कार्यालय, दैलेख	०८९–४१०११७/१२७/११५/१५७
१०	कृषि विकास कार्यालय, दैलेख	०८९–४२०१४५
११	डिभिजन वन कार्यालय, दैलेख	०८९–४२०१३२
१२	पशु अस्पताल तथा पशु सेवा कार्यालय, दैलेख	०८९–४१०१४८
१३	जिल्ला हुलाक कार्यालय, दैलेख	०८९–४२०१४९
१४	कोष तथा लेखा नियन्त्रक कार्यालय,दैलेख	०८९–४१०११७
१५	सामाजिक विकास कार्यालय, दैलेख	०८९–
१६	जिल्ला सरकारी वकील कार्यालय, दैलेख	०८९–४१०१२३
१७	जिल्ला मालपोत कार्यालय, दैलेख	०८९–४१०१७७
१८	शिक्षा विकास तथा समन्वय इकाई, दैलेख	०८९–४१०१५०
१९	सिचाई, उर्जा तथा खानेपानी कार्यालय, दैलेख	०८९–४१०१०६
२०	नापी कार्यालय, दैलेख	०८९–४११०६०
२१	जिल्ला निर्वाचन कार्यालय, दैलेख	०८९–४१०१११

२२	पूर्वाधार विकास कार्यालय, दैलेख	०८९–४२०१५३
२३	कारागार कार्यालय, दैलेख	०८९–४१०१६४
२४	उद्योग तथा उपभोक्ता हित संरक्षण कार्यालय, दैलेख	०८९–४२०१३६
२५	कृषि विकास वैंक उपशाखा, दैलेख	०८९–४१०१५२
२६	राष्ट्रिय वाणिज्य वैंक लिमिटेड,दैलेख	०८९–४२०११९
२७	वागवानी अनुसन्धान केन्द्र, दैलेख	०८९–४२०१५६
२८	नेपाल टेलिकम शाखा, दैलेख	०८९–४२०१२२
२९	खाद्य व्यवस्था तथा व्यापार कम्पनी लि., दैलेख	०८९–४२०१९१
३०	नेपाल विद्युत प्राधिकरण शाखा कार्यालय, दैलेख	०८९–४१०१३०
३१	जिल्ला खेलकुद विकास समिति, दैलेख	०८९–४२००८२
३२	शिक्षाको लागि खाद्य इकाई, दैलेख	९८४३२२३९६८
३३	जिल्ला ट्राफिक प्रहरी कार्यालय, दैलेख	९८६११४१८५५
३४	पुष्पलाल (मध्यपहाडी) राजमार्ग योजना कार्यालय, दैलेख	०८९–४१०१०१
३५	पहाडी साना किसानका लागि अनुकुलन आयोजनाको का. दैलेख	०८९–४२०६६१
३६	श्री ईलाका प्रशासन कार्यालय, दुल्लु दैलेख	०८९–४११०३४
३७	प्रधानमन्त्री कृषि आधुनिकरण आयोजना, सुन्तला जोन, दुल्लु, दैलेख	०८९–५२५१७८
३८	नयाँ साना शहरी विकास आयोजना व्यवस्थापन कार्यालय राकमकर्णाली, दैलेख	०८९–
३९	सुरक्षा आ.बि.वेश डाव, दैलेख	०८९–४१०२५५
४०	उद्योग वाणिज्य संघ	०८९–४२०१७०
४१	प्रदेश लेखा इकाई कार्यालय, दैलेख	९८५८०६४०१४
४२	मालपोत कार्यालय, दुल्लु दैलेख	९८५८०७७१११

७.८. स्वास्थ्य सेवा कार्यालय दैलेखमा कार्यरत कर्मचारीहरुका सर्म्पक नम्बरहरु

क्र.सं.	कार्यालय/शाखा		सर्म्पक नम्बर
१	दैलेख जिल्ला अस्पताल	इमरजेन्सी शाखा	०८९-४१०१८५
२	दैलेख जिल्ला अस्पताल	इण्डोर शाखा	९८६८०२७२८२
३	स्वास्थ्य सेवा कार्यालय	कार्यालय प्रमुख	०८९-४१०११७ मो. ९८५८०२८११७/९८५८०४५१२७
४	स्वास्थ्य सेवा कार्यालय	सूचना अधिकारी	९८५८०८०१५७
५	स्वास्थ्य सेवा कार्यालय	कर्मचारी प्रशासन शाखा	०८९-४१०१२७
६	स्वास्थ्य सेवा कार्यालय	स्टोर शाखा	०८९-४१०१५७
७	स्वास्थ्य सेवा कार्यालय	लेखा शाखा	०८९-४१०११५
८	स्वास्थ्य सेवा कार्यालय	पोषण पुनस्थापना केन्द्र	०८९-४१०१९८
९	स्वास्थ्य सेवा कार्यालय	अस्पताल क्यान्टीन, दैलेख	०८९-४१०२२३

स्वास्थ्य सेवा कार्यालय दैलेखको स्थायी/अस्थायी/सेवा करार कर्मचारी विवरण

क्र.स.	नाम, थर	पद	सम्पर्क नम्बर
१	थीर प्रसाद रेग्मी	नि. स्वास्थ्य सेवा व्यवस्थापक	९८५८०४५१२७
२	डा. अविलासा नगरकोटी	MDGP	९८६२४३७०३३
३	डा. रेश्मा श्रेष्ठ	मेडिकल अधिकृत	९८४३३९८४४१
४	डा. विवेक सुवेदी	मेडिकल अधिकृत	९८४००१६६२२
५	डा. पुर्जा आचार्य	मेडिकल अधिकृत	९८६३३१२८८१
६	डा. प्रयास विक्रम सिजापति	मेडिकल अधिकृत	९७४२५००७१९
७	डा. डिकेन्द सञ्जाल	मेडिकल अधिकृत	९८४८१०७९६८
८	डा. समिक्षा कडेल	मेडिकल अधिकृत	९८४४७८३५१४
९	डा. सुशीला कटुवाल	मेडिकल अधिकृत	९८४३६०९५६९
१०	डा राजन चौधरी कुर्मी	डेन्टल सर्जन	९८४४७८३५१४
११	यज्ञराज शाही	मेडिकल ल्याव टेक्नोलोजिष्ट	९८६६२३६७३७
१२	धना खड्का	फिजियोथेरापी सहायक	९८६८०३२५१६
१३	प्रेम बहादुर बिष्ट	नायब सुब्बा	९८४८०६९८९३
१४	रेशम बहादुर मल्ल	लेखा अधिकृत	९८५८०४२२०२
१५	मोतिराम रोकाया	तथ्याक अधिकृत	९८४८०३८९३८
१६	नन्द लाल जैसी	ज.स्वा.नि.	९८५८०८०१५७
१७	नमराज सुवेदी	ज.स्वा.नि.	९८४४८७१३५४
१८	नविन कुमार ढकाल	क्षयकुष्ठ निरीक्षक	९८६८०३२५५८
१९	नैना कुमारी गुरूङ	स्टाफ नर्स	९८४८०६३६२५
२०	प्रतिमा गौली	स्टाफ नर्स	९८६८१२२३१३
२१	बिना चौधरी	स्टाफ नर्स	९८६८१२२३१३
२२	लक्ष्मी कुमारी बिष्ट	स्टाफ नर्स	९८६८९८३५११
२३	गिता बडुवाल	स्टाफ नर्स	९८६२९०२३५९
२४	भगवती खड्का	स्टाफ नर्स	९८६९७५९१४३
२५	कुसुम के.सी.	स्टाफ नर्स	९८६८१२२३२५
२६	सुनिता खत्री	स्टाफ नर्स	९८२५५०९४६२
२७	पार्वती रेग्मी	स्टाफ नर्स	९८४४४९४४४६
२८	अन्जना भण्डारी	पब्लिक हेल्थ नर्स निरीक्षक	९८४३५२०४७२
२९	धनमाया गुरुङ्ग	ल्याब टेक्निसियन	९८२२४१३५५७
३०	रंजिता गिरी खड्का	ल्याब टेक्निसियन	९८४१६६३६८४
३१	दिपेन कोइराला	फार्मेसी सहायक	९८६९६८९५१८
३२	डील कुमारी अधिकारी	फार्मेसी सहायक	९८२५५९३०६९

क्र.स.	नाम, थर	पद	सम्पर्क नम्बर
३३	दिपक कार्की	रेडियोग्राफर	९८४८०४८२०२
३४	नरेश लम्साल	डार्करूम असिस्टेन्ट	९८४८२०७८१२
३५	टक बहादुर भण्डारी	ल्याब असिस्टेन्ट निरीक्षक	९८४८०४९९४५
३६	नगेन्द्र बहादुर रावल	ल्याब असिस्टेन्ट	९८६८०३२५७२
३७	कमला भट्टराई	अ.न.मी.	९८४८००७८८२
३८	गिता कुमारी खड्का	अ.न.मी.	९८६४९४२३०६
३९	कुसुम बस्नेत	अ.न.मी.	९८२२४६८९६१
४०	भरत कुमारी सिजापती	अ.न.मी.	९८४८१०००१५
४१	प्रगती शाही	अ.न.मी.	९८४८४३८१४८
४२	लक्ष्मी गिरी	अ.न.मी.	९८४८४३८१४८
४३	साबित्रा खड्का	अ.न.मी.	९८४८०६४४७०
४४	प्रमिला खड्का क्षेत्री	अ.न.मी.	९८१२४०८७७०
४५	राधा खत्री	अ.न.मी.	९८६८९१०५७०
४६	लक्ष्मी कुमारी केसि	अ.न.मी.	९८६८२७६९४७
४७	मिना बिष्ट	अ.हे.ब.	९८६४९४७७४०
४८	बिमल कुमार बुढा	अ.हे.ब.	९८६८०५८८६०
४९	द्वारीका कुमारी थापा	अ.हे.ब.	९८४८०५८८७१
५०	इन्द्रा रावल	अ.हे.ब.	९८४८२७७७२८
५१	पुष्पा कुमारी भण्डारी	अ.हे.ब.	९८४८०९०४३०
५२	अस्मीता के.सी.	अ.हे.ब.	
५३	कुमार खत्री	अ.हे.ब.	९८६७४२१५००
५४	डिल कुमारी वोगटी	अ.हे.ब.	९८२५५९३०६९
५५	जानकी शाही	OCMC सहजकर्ता	९८६८१७५८९९
५६	ज्ञानु थापा	OCMC सहजकर्ता	९८४८१००२२६
५७	पुर्ण बहादुर बस्नेत	ह.स.चा.	९८६०८९२३१४
५८	अर्जुन कुमार शाही	ह.स.चा.	९८६८१६५६८२
५९	मिन बहादुर श्रेष्ठ	कार्यालय सहयोगी	९८४८०५९०९४
६०	डिल बहादुर थापा	कार्यालय सहयोगी	९८४८२८४१८३
६१	मदन बहादुर रावत	कार्यालय सहयोगी	९८४८०६४२७२
६२	याम बहादुर थापा	कार्यालय सहयोगी	९८४८२४१९००
६३	डम्बर बहादुर शाही	कार्यालय सहयोगी	९८४८३९९५४०
६४	गणेश बहादुर रोकाय	कार्यालय सहयोगी	९८१५५६५४०७
६५	विष्णु बोहोरा	कार्यालय सहयोगी	९८१५५६१०४४

क्र.स.	नाम, थर	पद	सम्पर्क नम्बर
६६	लोक बहादुर बोहोरा क्षेत्री	कार्यालय सहयोगी	९८६३१८९०६९
६७	कमला बोहरा	कार्यालय सहयोगी	९८६८१७५८८८
६८	कमल प्रसाद कोइराला	कार्यालय सहयोगी	९८४८१४१७०२
६९	राम बहादुर रावल	कार्यालय सहयोगी	९८१८४९९०१०
७०	बिन्द्रा शाही	कार्यालय सहयोगी	९८४४८९२२५५
७१	जनकलाल सुनार	कार्यालय सहयोगी	९८०४५७२१७३
७२	मन्जु नेपाली	कार्यालय सहयोगी	९८२५५६१७३८
७३	पुष्पा सुनार	कार्यालय सहयोगी	९८०२५६९१४९
७४	रत्ना खत्री	कार्यालय सहयोगी	
७५	मिन बहादुर खत्री	कार्यालय सहयोगी	९८४४८९९०६२
७६	देवी श्रेष्ठ	कार्यालय सहयोगी	९८१६५६८४६२
७७	बम बहादुर रावल	कार्यालय सहयोगी	९८१४५९७०४१
७८	जीत बहादुर रावल	कार्यालय सहयोगी	
७९	राजेश खत्री	कार्यालय सहयोगी	९८६८१२२८८०
८०	पद्मा शाही	कार्यालय सहयोगी	९८१२५७७४३८
८१	नन्द्रा खत्री	कार्यालय सहयोगी	९८४८२४२४८६
८२	हरि कला बोगटी	कार्यालय सहयोगी	९७४८०३४०७७
८३	प्रकाश शाही	कम्प्युटर अपरेटर	९८४८०७८६०९
८४	दुर्गा राम सुनार	ए.आर.टी. काउन्सीलर	९८४९५०५५२८
८५	मन कुमारी शाही	कम्प्युटर अपरेटर	९८४८२११६०२
८६	प्रेम नेपाली	सहजकर्ता	९८४८३९९५३७
८७	शुशिला कुमारी भण्डारी	सहजकर्ता	९४८४१४१७३८
८८	उपेन्द्र कुमार के.सी.	बायोमेडिकल टे.	९८४८१६७९०१

७.९. दैलेख जिल्ला अन्तरगत रहेको स्वास्थ्य संस्थाहरुको सम्पर्क नम्बरहरु

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
१. नारायण नगरपालिका						
१	कुइकाना आधारभुत स्वास्थ्य सेवा केन्द्र	१	तेजेन्द्र बहादुर थापा	अ.हे.ब.	९८४८२५२९५५	९८५८०४३०६२
२	नारायण स्वास्थ्य चौकी	२	इन्द्र बहादुर थापा	सि.अ.हे.ब.	९८४८०४७२७३	९८५८०४३०५६
३	बेलासपुर स्वास्थ्य चौकी	३	सिता शर्मा	सि.अ.हे.ब.	९८६८१८२१३२	९८५८०४३०५५

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
४	सोत आधारभुत स्वास्थ्य सेवा केन्द्र	४	भवना थापा	अ.हे.ब.	९८४६६८८९७२	९८५८०४३०६३
५	देउलकाडा सामुदाकि स्वास्थ्य केन्द्र	४	रेश्मी थापा	अ.हे.ब.	९८६६८६०६२६	९८५८०४३०६१
६	त्रिवेणी स्वास्थ्य चौकी	५	सदानन्द जैसी	ज.स्वा.नि.	९८४८२४२४०९	९८५८०४३०५४
७	बिजौरा आधारभुत स्वास्थ्य सेवा केन्द्र	६	पदम कुमारी बुढा	सि.अ.हे.ब.	९८४८१२१८०७	९८५८०४३०६४
८	काडाचौर शहरी स्वास्थ्य केन्द्र	६	भगवती खड्का	हे.अ.	९८४१०७७२०५	९८५८०४३०५९
९	बसन्तमाला स्वास्थ्य चौकी	७	प्रेम बहादुर बिसुन्के	ज.स्वा.नि.	९८४४८३१७५९	९८५८०४३०५७
१०	स्वास्थ्य सेवा कार्यालय/दैलेख जिल्ला अस्पताल	८	थीर प्रसाद रेग्मी	नि.का.प्र.	९८५८०४५१२७	०८९-४१०११७
११	सिमडा शहरी स्वास्थ्य केन्द्र	८	शान्ती गिरी	अ.हे.ब.	९८६८१६६०९७	९८५८०४३०६०
१२	साडु आधारभुत स्वास्थ्य सेवा केन्द्र	९	भुपेन्द्र शर्मा	अ.हे.ब.	९८४३३३१४८३	९८५८०४३०६५
१३	भवानी स्वास्थ्य चौकी	१०	टिका कुमारी थापा	ज.स्वा.नि.	९८४८०७६२२५	९८५८०४३०५३
१४	बिन्ध्यावासीनि स्वास्थ्य चौकी	११	चन्द्र बहादुर वि.क.	सि.अ.हे.ब.	९८४८०६८९४७	९८५८०४३०५८
२. **चामुण्डाबिन्द्रासैनि नगरपालिका**						
१५	सिमसेर आधारभुत स्वास्थ्य सेवा केन्द्र	१				
१६	पाल्त शहरी स्वास्थ्य केन्द्र	१	तपेन्द्र बहादुर सिंह	अ.हे.व.	९८४४७४९६०७	
१७	चाल्ने आधारभुत स्वास्थ्य सेवा केन्द्र	२				
१८	सिरौल शहरी स्वास्थ्य केन्द्र	२				
१९	चामुण्डा स्वास्थ्य चौकी	३	खगेन्द्र बहादुर शाही	अ.हे.व.	९८६८२६६००९	
२०	गंगले शहरी स्वास्थ्य केन्द्र	३				
२१	रोसनीडाडा आधारभुत स्वास्थ्य सेवा केन्द्र	४	इन्द्रा कुमारी शाही	अ.हे.व.	९८४९३६२८७१	
२२	छडेखोला आधारभुत स्वास्थ्य सेवा केन्द्र	५	राधा शाही	अ.हे.व.	९८४५८०१७५१	
२३	जम्बुकाँध स्वास्थ्य चौकी	६	जर्मा कुमारी शाही	सि.अ.हे.ब.	९८६८०७१८२२	

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
२४	मस्टामाण्डु आधारभुत स्वास्थ्य सेवा केन्द्र	७	सुनिता शाही	अ.हे.व.	९८६१६८०६५२	
२५	पालेताडा शहरी स्वास्थ्य केन्द्र	७				
२६	लयाटिबिन्द्रासैनि स्वास्थ्य चौकी	८	हिक्मत भण्डारी	हे.अ.	९८४८२९००५५	
२७	अमकोट शहरी स्वास्थ्य केन्द	९	संगिता शाह	अ.हे.व.	९८६९५१७५४६	
२८	रिङरोड आधारभुत स्वास्थ्य सेवा केन्द्र	९	रविना उपाध्याय	अ.हे.व.	९८६४७९२१७१	
२९	खार शहरी स्वास्थ्य केन्द्र	९				
३. दुल्लु नगरपालिका						
३०	देउतीचौर आधारभुत स्वास्थ्य सेवा केन्द्र	१	मदन कुमार खड्का	अ.हे.ब.	९८६४३३३२६८	
३१	नाउँलेकटुवाल स्वास्थ्य चौकी	२	खेमराज थापा	हे.अ.	९८४८०६९५४९	
३२	नेपा स्वास्थ्य चौकी	३	अमृत वि.क.	हे.अ.	९८५८०८९९९९	
३३	डाँडाआवत आधारभुत स्वास्थ्य सेवा केन्द्र	४	ओम प्रसाद उपाध्याय	अ.हे.ब.	९८४४८७०६४२	
३४	रिजु आधारभुत स्वास्थ्य सेवा केन्द्र	५	तारा खड्का	अ.हे.ब.	९८६४७३४४८७	
३५	दुल्लु अस्पताल	५	डा. राजन नारायाण नकर्मि	एम.डि.जि.ि प.	९८४९१३०४४४	
३६	छिउँडीपुसाकोट स्वास्थ्य चौकी	६	दिप बहादुर खड्का	सि.अ.हे.ब. अ.	९८४८०३०११४	
३७	बाहुनगाँउ आधारभुत स्वास्थ्य सेवा केन्द्र	७	लक्ष्मी दहित आचार्य	हे.अ.	९८६८२०७१९६	
३८	बडलम्जी स्वास्थ्य चौकी	८	मान बहादुर थापा	सि.अ.हे.ब.	९८६८२६६२२३	
३९	पादुका स्वास्थ्य चौकी	९	इन्द्रमणि रोकाया	सि.अ.हे.ब.	९८६८६४७९८९	
४०	गमौडी स्वास्थ्य चौकी	१०	नविन खड्का	हे.अ.	९८५८०३६५४०	
४१	कालभैरव स्वास्थ्य चौकी	११	महेश्वरी पन्त	सि.अ.न.मि.	९८४८१२०२२१	
४२	गौरी स्वास्थ्य चौकी	१२	यज्ञराज भण्डारी	सि.अ.हे.ब.	९८५८०५०३०९	
४३	मालिका स्वास्थ्य चौकी	१३	बखत बहादुर शाही	सि.अ.हे.ब. अ.	९८६६९७६१८१	

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
४. आठबिस नगरपालिका						
४४	सात्तला स्वास्थ्य चौकी	१	ध्रुवराज बिष्ट	अ.हे.ब.	९८५८०५१४३३	
४५	सिंगौडी स्वास्थ्य चौकी	२	लोकेन्द्र बहादुर सिंह	अ.हे.ब.	९८६८६५६३६६	
४६	निमायल आधारभुत स्वास्थ्य सेवा केन्द्र	३	डबेन्द्र जैसी	अ.हे.ब.	९८४८१६२५५१	
४७	राकमकर्णाली स्वास्थ्य चौकी	४	करण बहादुर साउदमाझी	अ.हे.ब.	९८६८०००४४६	
४८	पिपलकोट स्वास्थ्य चौकी	५	प्रकाश के.सी.	अ.हे.ब.	९८६४७३४२९८	
४९	सिंहासैन स्वास्थ्य चौकी	६	बिनोद कठायत	अ.हे.ब.	९७४२८०९१५४	
५०	आमेकाना आधारभुत स्वास्थ्य सेवा केन्द्र	७	पवित्रा बोगटी	अ.हे.ब.	९८६८००१३८९	
५१	तिलेपाटा स्वास्थ्य चौकी	८	रेश्मा विश्वकर्मा	अ.न.मी.	९८४८११७२५४	
५२	छेपाडी आधारभुत स्वास्थ्य सेवा केन्द्र	९	प्रशान्त सिजापति	अ.हे.ब.	९८६६२३०४९०	
५. ठाटीकाँध गाउँपालिका						
५३	लकान्द्र प्राथमिक स्वास्थ्य केन्द्र	१	डा. सनम घले	मे.अ.	९८४९७५५४२६	
५४	प्याडुली आधारभुत स्वास्थ्य सेवा केन्द्र	२	बिपेन थापा	अ.हे.व.	९८४५०१७७१५	
५५	बिशाला स्वास्थ्य चौकी	३	हस्ता बुढा	अ.हे.व.	९८४४८६२४८६	
५६	बिशाला सामुदायीक स्वास्थ्य ईकाइ, बहाँकोट	४	अन्जिर कुमार शाही	अ.हे.व.	९८४५२६५१५८	
५७	गैरागाँउ आधारभुत स्वास्थ्य सेवा केन्द्र	५	शम्सेरबाबु कठायत	अ.हे.व.	९८६७८७१९७१	
५८	तोलीजैसी स्वास्थ्य चौकी	६	बसन्त प्रसाद संज्याल	अ.हे.व.	९८६६२२३४९९	
५९	अंगालडाँडा आधारभुत स्वास्थ्य सेवा केन्द्र	७	धर्मराज रोकाया	अ.हे.व.	९८६३८३९३४५	
६०	नागरिक आरोग्य सेवा केन्द्र	८	शान्ति उपाध्याय	बैद्य	९८४५२१८३३५	
६. डुङ्गेश्वर गाउँपालिका						
६१	बेलपाटा स्वास्थ्य चौकी	१	लक्ष्मण खत्री	ज.स्वा.नि.	९८४८००१५८९	
६२	लाँकुरी स्वास्थ्य चौकी	२	बालकृष्ण बिष्ट	ज.स्वा.नि.	९८४८०६७६७५	
६३	नागरिक आरोग्य सेवा केन्द्र	२	नगेन्द्र बहादुर	बैद्य	९८००५५४४५८	

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
			खत्री			
६४	अवलपराजुल स्वास्थ्य चौकी	३	दिपक रावत	ज.स्वा.नि.	९८६७२५७४०३	
६५	बाले सामुदायिक स्वास्थ्य इकाई	३	स्मृती हमाल	अ.हे.ब.	९८०४८४१०८९	
६६	बाहुन्नेचौर सामुदायिक स्वास्थ्य इकाई	४	जगत बि.सी.	सि.अ.हे.ब.	९८४८०७६३८३	
६७	डाँडापराजुल स्वास्थ्य चौकी	५	राम प्रसाद न्यौपाने	सि.अ.हे.ब.अ.	९८४८१५९०२५	
६८	डुङ्गेश्वर सामुदायिक स्वास्थ्य इकाई	६	चेतन बस्नेत	अ.हे.ब.	९८४८११६५१६	
७. नौमूले गाउँपालिका						
६९	तोली स्वास्थ्य चौकी	१	नमराज शर्मा	सि.अ.हे.ब.	९८१२५००९४३	
७०	राईली सामुदायिक स्वास्थ्य इकाई	१	अशोक शाही	अ.हे.ब.	९८२२५९६८०६	
७१	कागते सामुदायिक स्वास्थ्य इकाई	२	बसन्त सापकोटा	अ.हे.ब.	९८१२५५०००९	
७२	बालुवाटार स्वास्थ्य चौकी	२	सन्देश चन्द	हे.अ.	९७४९२७४९१७	
७३	द्वारी स्वास्थ्य चौकी	३	जगत प्रसाद कोइराला	अ.हे.ब.	९८१५५४९८१५	
७४	भाडे सामुदायिक स्वास्थ्य इकाई	३	बिर बहादुर रावत	अ.हे.ब.	९८६६८२१७५१	
७५	बराहाथान सामुदायिक स्वास्थ्य इकाई	३	गणेश बहादुर गुरुङ	अ.हे.ब.	९८४९८३४१२०	
७६	कालिका स्वास्थ्य चौकी	४	मिन बहादुर गुरुङ	सि.अ.हे.ब.	९७४८०९५६७६	
७७	चेप्टे सामुदायिक स्वास्थ्य इकाई	४	अस्मिता थापामगर	अ.हे.ब.	९८१२५०७५०७	
७८	नौगाउँ सामुदायिक स्वास्थ्य इकाई	५	गंगा कुमारी थापामगर	अ.हे.ब.	९८२२५८३९२२	
७९	नौमूले प्राथमिक स्वास्थ्य केन्द्र	५	डा. यामराज शर्मा	मे.अ.	९८०८५८९१२७	
८०	सल्लेरी स्वास्थ्य चौकी	६	गणेश गौतम	सि.अ.हे.ब.	९८४४८५००१	
८१	पैति आधारभुत स्वास्थ्य सेवा केन्द्र	७	सरीता बिष्ट	अ.हे.ब.	९८६८२१२४९४	
८२	चौराठा स्वास्थ्य चौकी	८	धन बहादुर चन्द	ज.स्वा.नि.	९८२२४६८५८२	
८. महाबु गाउँपालिका						

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
८३	खरिगैरा स्वास्थ्य चौकी	१	करिस्मा थापा	हे.अ.	९८६८०२७०८६	
८४	बडाखोला स्वास्थ्य चौकी	२	राम बहादुर थापा	सि.अ.हे.ब.	९८४८२८४८६२	
८५	ऐराडि सामुदायिक स्वास्थ्य इकाई	२	राधा कार्की	अ.न.मी.	९८४८१०७०३३	
८६	बाँसी स्वास्थ्य चौकी	३	प्रेम बहादुर बिष्ट	सि.अ.हे.ब.	९८४८०७८९४८	
८७	रानीवन स्वास्थ्य चौकी	४	मुकेश बहादुर बिष्ट	अ.हे.ब.	९८४८२९३९१६	
८८	नागरिक आरोग्य सेवा केन्द्र	४	अस्मिता चलाउने	बैद्य	९८७२२०९४६३	
८९	गिताचौर सामुदायिक स्वास्थ्य इकाई	४	राजेश हमाल	अ.हे.ब.	९८६८६५५५०१	
९०	काँशिकाँध स्वास्थ्य चौकी	५	कर्ण बहादुर बराल	हे.अ.	९८४९३१२९९६	
९१	टाँकुरी सामुदायिक स्वास्थ्य इकाई	६	अक्कल बहादुर शाही	अ.हे.ब.	९८५८०३०९०३	
९२	एकपाटे सामुदायिक स्वास्थ्य इकाई	६	गणेश बहादुर भण्डारी	अ.हे.ब.	९८४८१९६५२७	
९. भैरवी गाउँपालिका						
९३	रावतकोट आधारभुत स्वास्थ्य सेवा केन्द्र	१	मदन बहादुर थापा	अ.हे.ब.	९८४८००७८२३	
९४	रावतकोट स्वास्थ्य चौकी	२	शेर बहादुर कार्की	सि.अ.हे.ब.	९८४३८०८३९७	
९५	बडलम्जी आधारभुत स्वास्थ्य सेवा केन्द्र	३	प्रेम बहादुर वि.क.	अ.हे.ब.	९८४४८६२११८	
९६	जुम्लिकावाडी सामुदायिक स्वास्थ्य इकाई	४	पूर्ण बहादुर शाही	अ.हे.ब.	९८६६२१८६२७	
९७	भैरीकालिकाथुम स्वास्थ्य चौकी	४	करुणाखर खत्री	सि.अ.हे.ब.	९८४८११४९७९	
९८	डोक्रा आधारभुत स्वास्थ्य सेवा केन्द्र	५	भावना खड्का	अ.न.मी.	९८६४७०१४९३	
९९	दुईसल्ले आधारभुत स्वास्थ्य सेवा केन्द्र	६	गणैश प्रसाद अधिकारी	अ.हे.ब.	९८४८११५२४५	
१००	कुसापानी स्वास्थ्य चौकी	७	शम्सेर बहादुर बिष्ट	ज.स्वा.नि.	९८५८०७४२३०	
१०. गुराँस गाउँपालिका						
१०१	सेष्टी सामुदायिक स्वास्थ्य इकाई	१	कृष्ण बहादुर रोकाय	ज.स्वा.नि.	९८४८२२१०२९	

क्र. सं.	स्वास्थ्य संस्थाको नाम	स्वास्थ्य संस्था रहेको वडा नं.	स्वास्थ्य संस्था प्रमुखको नाम थर	पद	स्वास्थ्य संस्था प्रमुखको सम्पर्क नं.	कैफियत
१०२	पुरैनी सामुदायिक स्वास्थ्य इकाई	२	किरण के.सी.	अ.हे.ब.	९८४८०४९५५८	
१०३	सेरी स्वास्थ्य चौकी	३	प्रेम बहादुर भट्टराई	सि.अ.हे.ब.	९८४८०२५०३६	
१०४	खड्कवाडा स्वास्थ्य चौकी	३	ओम रिजाल	सि.अ.हे.ब.	९८४४८६१८८७	
१०५	सेरीवाडा स्वास्थ्य चौकी	४	निराजन बिष्ट	हे.अ.	९८४८०३८१४८	
१०६	गोगनपानी स्वास्थ्य चौकी	५	हेम बहादुर गुरुङ	ज.स्वा.नि.	९८४८०७९१२८	
१०७	गुराँस अस्पताल	५	डा. नभिता कंडेल भारती	मे.अ.	९८०२५५०५८१	
१०८	पिलाडी स्वास्थ्य चौकी	६	रण बहादुर चन्द	सि.अ.हे.ब.	९८६५३६८५२४	
१०९	लालीकाँडा स्वास्थ्य चौकी	७	नारायण बि.सी.	हे.अ.	९८६४९३६२१३	
४१०	धरमपोखार सामुदायिक स्वास्थ्य इकाई	८	जंग बहादुर मगराती	सि.अ.हे.ब.	९८४८१९५५००	
११. भगवतीमाई गा.पा.						
१११	कट्टी स्वास्थ्य चौकी	५	सर्जन गुरुङ	ज.स्वा.नि.	९८५८०८९८००	
११२	पगनाथ स्वास्थ्य चौकी	१	दुर्गा गुरुङ	सि.अ.न.मी.	९८६३१५७४०४	
११३	जगनाथ स्वास्थ्य चौकी	४	भिम ब. बि.सी.	सि.अ.हे.ब.	९८६४९४२४३६	
११४	मेहेलतोली स्वास्थ्य चौकी	३	महेन्द्र कु. भारती	सि.अ.हे.ब.	९८४८०४१६८९	
११५	रुम स्वास्थ्य चौकी	२	भविसरा शाही	सि.अ.न.मी.	९८४८०३१४३९	
११६	बडाभैरब स्वास्थ्य चौकी	७	हिक्मत खत्री	सि.अ.हे.ब.	९८४८१२१५९५	
११७	चिपिन सा.स्वा.ई.	६	शेर ब. वि.क.	अ.हे.ब.	९८६८२२५८१२	
११८	बेस्तडा सुरक्षित प्रसुती गृह	२	खम्बिरा थापा	अ.न.मी.	९८६८११३६६६	
११९	भगवतीमाई आ.अस्पताल	३	डा. प्रभाकर यादव	मे.अ.	९८६०२४०४४८	
१२०	आयुर्वेद आरोग्य सेवा केन्द्र	१	दिनेश कु. थापा	कविराज	९८६८९९७७०८	

७.१०. दैलेख जिल्ला स्थीत पालिकाका मेयर/उपमेयर/अध्यक्ष/उपाध्यक्षको नाम र सम्पर्क नम्बरहरु

नाम, थर	नाम	पद	सम्पर्क नम्बर
नारायण नगरपालिका दैलेख ज्यू,	लोमन शर्मा	मेयर	९८४८१४१५५३
	तप्ता थापा	उपमेयर	९८४८२११००९
दुल्लु नगरपालिका दैलेख	भरत प्रसाद रिजाल	मेयर	९८५१२२५९२१
	विना कार्की	उपमेयर	९८६८०३३५९३
आठबिस नगरपालिका दैलेख	तर्क बहादुर बडुवाल	मेयर	९८५८०५४०५८
	कल्पना कुमारी थापा (चन्द्र)	उपमेयर	९८४८०९७२५९
चामुण्डाबिन्द्रासैनि नगरपालिका दैलेख	गणेश कुमार शाही	मेयर	९८५८०५०६२३
	मनसरा कुमारी शर्मा	उपमेयर	९८६८०७४५५७
महाबु गाउँपालिका दैलेख	लछुमन गुरुङ्	अध्यक्ष	९८४८१४१५११
	मञ्जु कुमारी शर्मा (पाण्डे)	उपाध्यक्ष	९८४८०६२९०३
नौमूले गाउँपालिका दैलेख	छविराम सुवेदी	अध्यक्ष	९८४८२०८९१६
	गंग बहादुर शाही	उपाध्यक्ष	९८२२४१३००१
भगवतीमाई गाउँपालिका दैलेख	गणेश बहादुर थापा	अध्यक्ष	९८६८१४५४९५
	मिना कुमारी खड्का	उपाध्यक्ष	९८६८१०३३३६
डुङ्गेश्वर गाउँपालिका दैलेख	सुन्दर कुमार के.सी.	अध्यक्ष	९८४८०६८४८७
	कलावति न्यौपाने	उपाध्यक्ष	९८४८२८०४४९
गुराँस गाउँपालिका दैलेख	टोप बहादुर बि.सी.	अध्यक्ष	९८५८०७७२१२
	शिवा कुमारी खड्का	उपाध्यक्ष	९७४९२८७६४१
ठाटीकाँध गाउँपालिका दैलेख	रक्ष बहादुर शाही	अध्यक्ष	९८५८०८७९१८
	देविराम बडुवाल	उपाध्यक्ष	९८४४८१३०४४
भैरवी गाउँपालिका दैलेख	रीता कुमारी शाही	अध्यक्ष	९८५८०६८८६८
	देबी भण्डारी	उपाध्यक्ष	९८४८०७६२१२