പതിനാലാം കേരള നിയമസഭ പത്താം സമ്മേളനം

നക്ഷത്രചിഹ്നമിടാത്ത ചോദ്യം നമ്പർ. 4897

23.03.2018-ൽ മറുപടിയ്ക്ക്

പാലക്കാട് ജില്ലയിലെ മൊബൈൽ ആരോഗു കേന്ദ്രങ്ങൾ

ചോദ്യ	ο.	മറുപടി:	
ശ്രീ. െ	ക. കൃഷ്ണൻകുട്ടി	പ്പടിക	.കെ.ബാലൻ ജാതി പട്ടികവർഗ്ഗ പിന്നാക്ക സമുദായക്ഷേമവും വും സാംസ്കാരികവും പാർലമെന്ററികാര്യവും വകുപ്പു
(എ)	പാലക്കാട് ജില്ലയിൽ പട്ടികജാതി വകപ്പിന്റെ എത്ര മൊബൈൽ ആരോഗ്യ കേന്ദ്രങ്ങൾ പ്രവർത്തിക്കുന്നുവെന്നും ആരാണ് ഇവരുടെ മേൽനോട്ടം വഹിക്കുന്നതെന്നും വൃക്തമാ ക്കമോ;		പാലക്കാട് ജില്ലയിൽ പട്ടികജാതി വകപ്പിന്റെ ആഭിമുഖൃത്തിൽ ഹിന്ദുസ്ഥാൻ ലാറ്റെക്ല് ഫാമിലി പ്ലാനിംഗ് പ്രൊമോഷൻ ട്രസ്റ്റിന്റെ സഹകരണത്തോടെ മൊബൈൽ മെഡിക്കൽ യൂണിറ്റ് 2016-17 സാമ്പത്തിക വർഷം വിജയകരമായി നടപ്പാക്കിയിരുന്നു.
(ബി)	ഉറപ്പ് വരുത്താൻ എന്തൊക്കെ നടപടികളാണ് സ്വീകരിച്ചിട്ടുള്ളത്;		ജില്ലാ പട്ടികജാതി വികസന ഓഫീസർ/ബ്ലോക്ക് പട്ടികജാതി വികസന ഓഫീസറുമായി ബന്ധപ്പെട്ട് പദ്ധതി മോണിറ്റർ ചെയ്തിട്ടുള്ളതാണ്.
(സി)	ഇവരുടെ യാത്ര ഷെഡ്യൂളിന്റെ പകർപ്പ് സമർപ്പിച്ച റിപ്പോർട്ടുകൾ എന്നിറ ലഭ്യമാക്കാമോ;		റിപ്പോർട്ടിന്റെ പകർപ്പ് ഉള്ളടക്കം ചെയ്യുന്നു. മറ്റു മാസങ്ങളിലെ റിപ്പോർട്ട് ലഭ്യമല്ല.
(ഡി)	ഇതിനായി കഴിഞ്ഞ സാമ്പത്തിക വർഷ എത്ര രൂപ ചെലവാക്കിയെന്നും ഇ സാമ്പത്തിക വർഷം എത്ര രൂദ വകയിരുത്തിയിട്ടുണ്ടെന്നും വിശദമാക്കാമോ?	괴	പാലക്കാട് ജില്ലയിൽ 2016-17 സാമ്പത്തിക വർഷം മൊബൈൽ മെഡിക്കൽ യൂണിറ്റ ആരംഭിക്കുന്നതിലേയ്ക്കായി 24,66,932/-രൂപ HLFPPT-ക അനുവദിക്കുകയും പദ്ധതി വിജയകരമായ പൂർത്തിയാക്കുകയും ചെയ്തിട്ടുണ്ട്. 2017-18 സാമ്പത്തിക വർഷം ടി പദ്ധതിയ്ക്കായി ഇക വകയിരുത്തിയിട്ടില്ല.

സെക്ഷൻ ഓഫീസർ



MONTHLY PROGRESS REPORT February 2017

MOBILE MEDICAL UNIT PROJECT - PALAKKAD Strengthening the Primary Health Services in SC Colonies

<u>Submitted To</u> Scheduled Caste Development Department Govt. Of Kerala

Submitted by



Hindustan Latex Family Planning Promotion Trust
(A Trust Promoted by HLL Lifecare Ltd.)
W: www.hlfppt.org

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1. PROJECT SUMMARY

Project Goal	The goal of the project is to contribute to improving the integrated comprehensive primary health care services in S.C Colonies in Palakkad district.
	 To improve the access of the S.C population living in S.C Coloniès in Palakkad district of Kerala to the primary health care
Project Objectives	 To develop positive health seeking behaviour amongst the target population
Duration	12 months with an option for renewal on an annual basis
Specific Location	40 S.C Colonies in Palakkad district
	Primary Responsibility: HLFPPT Secondary Responsibility: Scheduled Caste Development Department
Owner / Co - Owner	About HLFPT: Hindustan Latex Family Planning Promotion Trust (HLFPPT) is a not-for-profit trust registered in 1992 under the Travancore-Cochin Literacy, Scientific and Charitable Societies' Registration Act, 1955. It is promoted by HLL Lifecare Limited, a Government of India enterprise under the Ministry Health & Family Welfare (MoHFW). HLFPPT has been recognized widely for its contribution to the national health goals and population programmes. HLFPPT works primarily on maternal and child health, family planning, HIV/AIDS, adolescent health, reproductive and sexual health across the country. The vision of the organization is "Touching lives with quality care, compassion and emerge as a globally credible organization". Our mission is to "Offer Innovative, Affordable and Sustainable Reproductive Health
	Solutions".
	1. Screening/Diagnosis
MMU Services	2. Treatment with focus on primary care, maternal and child health
	Awareness with focus on maternal and child health Referrals & Follow up
Team Composition	1. Project Coordinator 2. Doctor 3. Nurse 4. Pharmacist

2. PROJECT PROGRESS/ACTIVITIES OF THE MONTH

2.1 Regular OPD:

The provision of primary healthcare and counselling services is going properly during the month of February 2017, about 848 patients were served and 03 were referred to nearest government hospital for various tests. In addition to this, 124 children were assessed to examine their immunisation status, malnutrition etc. All patients received consultation, free medicines and counselling services. A quantitative summary of the outputs are given below:

Output summary Table:

No. of Van Days	Village /Colony Covered	No. of Health Camps	No. of Patient Treated	Referred Cases	Counseling
30	29	29	848	102	848

#	Date	Name of Settlement	Total OPD	Male	Female	Pregnant women	Lactating mothers	Referral
1	16-01-17	Papparambu	28	05	23			02
2	17-0117	Kongappadam	22	05	17	02	01	04
3	18-01-17	Maruthakode	16	03	13			01
4	19-01-17	Medicine List Preparation, Arrange ments And Sorting.						
5	20-01-17	MMU INAGUARATION At Chiltur						
6	23-01-17	Sarkarpathy	26	06	20			03
7	24-01-17	Muthuswamiputhur	23	06	17	01	01	02
8	25-01-17	Meenakshipuram Laksham Veedu Colony	38	04	34			03
9	26-01-17	Kizhakethara	41	9	32			4
10	27-01-17	Oorappadam	34	9	25	1		5
11	28-01-17	Kallamthode	23	8	15	1	3	5
12	29-01-17	Madachippadam	48	18	30	1	<u> </u>	5

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	Date	Name of Settlement	Total OPD	Male	Female	Pregnant women	Lactating mothers	Referral
	30-01-17	Payattamkunnu	20	5	15			2
	31-01-17	Moongilmada	31	10	21			5
1	01-02-17	Kanakanpara	30	6	24			5
() 6	02-02-17	Ems Colony	24	7	17		1	3
7	03-02-17	Ellakkad	28	2	26			2
8	05-02-17	Pappanchalla	38	5	33			1
9	06-02-17	Valiyachalla	14 27	3	24		1	4
0	07-02-17	Karipelichalla Malayandi Koudanur	40	11	29		2	3
21	09-02-17 10-02-17	Sanjay Nagar	38	12	26		1	5
22 23		The second secon	54	10	44		2	5
24	<u> </u>		36	9	27		1	4
	3	*Kambilichungam	23	5	18			4
20			38	9	29		1	6
2	7 15-02-15		22	9	13		2	
2	8 20-02-1	Colony Four Cent Colony	23	7	16			5
	21-02-1		30	8	22		2	3
0.7	30 22-02-1	7 Sarkarpathy	33	5	28	43	1 6	19 1
		Total	8	48 2	05 6	40		

2.2 Assessments, and Referrals Output summary Table:

ANC (No. cases	Cases Drop outs Identified & Served
SL No	Maintingicaluis	6	0
1	Screening of hyper tension, anemia, diabetes	6	0
2	T.T immunisation	 	
3	Identification & Referral of HR Pregnancy		
4	Diagnosis of pregnancy	<u> </u>	<u> </u>

2. Neo natal & Infant health(0 to 1 year age)

SI. No		No. cases screened	Cases/Drop outs Identified & Served
1	Examination of children weight	16	0
	Examination of children to early identification of congenital anomalies, other disabilities and		
2	appropriate referral		
.3	Assessing immunisation status	16	0

3. 1 to 2 year age

SI. No	Major indicators	No. cases screened	Cases/Drop outs Identified & Served
1	Examination of children weight	37	0
	Examination of children to early identification of congenital anomalies, other disabilities	,	
2	andappropriate referral		
3	Assessing immunisation status	37	0

4. Toddler (2 to 3 year age)

SI. No	Major indicators ♣	No. cases screened	Cases/Drop outs Identified & Served
1	Examination of children weight		
2	Examination of children to early identification of congenital anomalies, other disabilities and appropriate referral		
3	Assessing immunisation status		

5. Pre School (4 to 5 year age)

SI. No	Major indicators	No. cases screened	Cases/Drop outs Identified & Served
1	Examination of children weight	38	0
2	Examination of children to early identification of congenital anomalies, other disabilities and appropriate referral		
3	Assessing immunisation status	38	0

6. School Age(6 to 12 year age)

1 Exar	nination of children weight	scree	 Identii	O TOWNS OF STREET	Action Control	. 1771
1 .		33] 0		. :	
of co	nination of children to early identification ngenital anomalies, other disabilities and opriate referral					

		Assessing immunisation status		
	3		33	0
7.	Sumr	nary of Adolescent Heath	বিভাগ বিষয়ে হৈছিল বিশ্বস্থিত	Cases/Drop outs
 .	SI.		No. cases screened	Identified & Served
	No	Major indicators	screened	
		Number of Growth Monitoring	35	0
	_1	assessment done		7
ļ., <u>.</u>	2	No. of de worming done	35	0
_		Screening to identify acute malnutrition		
Ŀ	4	Anemia screening		
<u>8.</u>	27. 25 1	nia Screening	No. cases	No. of cases
	S1. No	Major indicators	screened	identified and served
	1	Number of adolescent girls screened		
-	1.1	Severe Anemia (7 or less than 7)		
r	1.2	Moderate Anemia (7.1 to 9.9)		
	1.3	Mild Anemia(10 to 11.9)		
	2	Number of pregnant women		
	2.1	Severe Anemia		<u> </u>
	2.2	Moderate Anemia		
	2.3	Mild Anemia		
T	3	Other women		
T	3.1	Severe Anemia		
T	3.2	Moderate Anemia	<u> </u>	
ļ	3.3			<u> </u>
9	. Su	nmary of NCD Activities		Ng. of cases
	S1		No. cases screened	identified and served
	No	Major indicators	Successive Control	200 - 100 -
Ì	1			
		Number of HT cases		
	3	Number of Diabetic cases		
		No. of pre diabetic cases identified		
		Number of pre HT cases detected		<u>.: </u>
		mmunicable Diseases	No. cases	No. of identified and
	S	o Major indicators	screened	served
			Chromatic and Company of the Company	
		· · · · · · · · · · · · · · · · · · ·		
	<u> </u>			
	<u> </u>	torry		
	<u> </u>			
	<u></u>	5 Any other		



11. Thematic Heath Camp

Name of camp

Number of people availed services

Details regarding diagnosis

the camp day.

: ECDC(Early Cancer Detection Camp)

: 19

: 19 Persons were registered and served during

Selected 3 person's samples for further test and result waiting.

2.3 Age wise Output summary Table:

1	Total population covered	848
1.1	Male	205
1.1.1	Adult (19 - 60 yrs)	74
1.1.2	Old age (>60 yrs)	62
1.1.3	Infant (0 - 3 yrs)	23
1.1.4	Child (4 – 12yrs)	* 33
1.1.5	Adolescent (13 - 18 yrs)	, 13
2	Female	643
2.1	Adult (19 – 60 yrs)	413
2.2.1	Old age (>60 yrs)	140
2.2.2	Infant (0 - 3 yrs)	30
2.2.3	Child (4 – 12 yrs)	38
2.2.4	Adolescent (13 – 18 yrs)	22
2.2.5	Pregnant women	06
2.2.6	Lactating mothers	19
2.2.7	No: of ANC check uo	06
2.2.8	No: of PNC check up	05

2.4 Community Meetings and Home Visits

Community meetings are held to raise the awareness about various health issues. The MMU outreach team conducted group & one to one meeting at various platforms like village level, Anganwadi centre etc. The objective of the meeting was to involve the community in Health Camp and providing information intimating the community about the MMU operation communicable diseases, & Health Camp Schedule. Output summary table as shown below

Output summary Table:

Sl. No	Nature of Activity	Coverage
1	Home visits	03
2 ,,	Health education/ IEC activity	03
	Community Meetings	848
4	Counselling Counseling on family planning	05

Photo Gallery





MONTHLY PROGRESS REPORT

September 2017

MOBILE MEDICAL UNIT PROJECT - District: Palakkad Strengthening the Primary Health Services in SC Habitats with special focus on Vulnerable Group

Submitted To
Scheduled Caste Development Department
Govt. of Kerala

Submitted by



Hindustan Latex Family Planning Promotion Trust
(A,Trust Promoted by HLL Lifecare Ltd.)
W: www.hlfppt.org

1. PROJECT SUMMARY

Project Goal	The goal of the project is to contribute to improving the integrated comprehensive primary health care services in SC habitats in Palakkad district.
Project Objectives	 To improve the access of the SC population living in SC habitats in Palakkad district of Kerala to the primary health care services To develop positive health seeking behaviour amongst the target population
Duration	12 months with an option for renewal on an annual basis
Specific Location	SC habitats in Palakkad district with special focus on vulnerable SC communities
	Primary Responsibility: HLFPPT Secondary Responsibility: Scheduled Caste Development Department
Owner / Co - Owner	About HLFPT: Hindustan Latex Family Planning Promotion Trust (HLFPT) is a not-for-profit trust registered in 1992 under the Travancore-Cochin Literacy, Scientific and Charitable Societies' Registration Act, 1955. It is promoted by HLL Lifecare Limited, a Government of India enterprise under the Ministry Health & Family Welfare (MoHFW). HLFPPT has been recognized widely for its contribution to the national health goals and population programmes HLFPPT works primarily on maternal and child health, family planning HIV/AIDS, adolescent health, reproductive and sexual health across the country. The vision of the organization is "Touching lives with quality care compassion and emerge as a globally credible organization". Our mission it o "Offer Innovative, Affordable and Sustainable Reproductive Health
	Solutions".
MMU Services	 Screening/Diagnosis Treatment with focus on primary care, maternal and child health Awareness with focus on maternal and child health
I MINITED VICES	to the second and child health

/	
	1. Project Coordinator
Team Composition	2. Doctor
	3. Nurse
	4. Pharmacist

2. PROJECT PROGRESS/ACTIVITIES OF THE MONTH

2.1 Regular OPD:

The provision of primary healthcare and counselling services is going properly during the month of September 2017, about 789 patients were served and 57 were referred to nearest government hospital for various tests. In addition to this, 99 children were assessed to examine their immunisation status, malnutrition etc. All patients received consultation, free medicines and counselling services. One eye check-up conducted on 23/09/17 at Oorappadam.76 members were served and 15 patients referred for cataract surgery and 11 opticals given for vision problem.

A quantitative summary of the outputs are given below:

Output summary Table:

No. of Van Days	,	No. of Health Camps	No. of Patient Treated	Referred Cases	Counseling
24	24	24	789	57	789

#	Date	Name of Habitat	Total OPD	Male	Female	Preg nant wom en	Lactatin g mothers	Referral
1	26-08-17	Thottassery	28	7	21		1	3
2	28-09-17	Kizhakkethara	41	10	31			2
3	29-08-17	kallanthodu	20	9	11		1	
4	31-08-17	Ambitampathi	37	17	20	Control of the second		4
5	5-09-17	Kamaraja colony	37	12	25		etropic	3
6	6-09-17	alampallam	33	11	12			2

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7	Date	Name of Habitat	Total OPD	Male	Female	Preg nant wom en	Lactatin g mothers	Referral
	un un recommendo processo constitución de la consti		garage (garage) des de participate esta e e	g pepergenerapidanajan in adibelah a	ga in makanan menenggan B	Commission of the Commission o	farman eri den enemente i de	
7.	7-09-17	New alampallam	20	9	11		1	1
8	8-09-17	kanakkampara	27	9	18			1
9	9-09-17	karakarakulambu	24	11	13	Control of the Contro		3
10	10-09-17	chandanapuram	17	9	8			1
11	11-09-17	kambilichungam	51	17	34		1	3.
12	12-09-17	kundumulli	46	15	31			1
13	13-09-17	Malayandi koundanoor	34	11	23	na più a mana Ambaratana	1	1
14	14-09-17	Amman colony	30	9	21			ext property
15	15-09-17	moongilmada	28	11	17		1	1
16	16-09-17	EMS colony	29	10	19		1	1
-	17-09-17	Govt: premetric hostel	36		36		. ,	1
17		kozhinjapara	a planta to provide the second to the second	(c. 0, 200 c.		-		The state of the s
							*	
18	18-09-17	madachipadam	24	6	18		1	3
19	19-09-17	New kamaraja colony	16	6	10			1
20	20-09-17	papparambu	15	3	12			2
21	21-09-17	Govt. postmetric hostel kannadi	54		54			1
22	22-09-17	meenakshipuram	37	4	33			
23	23-09-17	Eye checkup camp	76	30	46			15

#	Date	Name of Habitat	Total			Preg	Lactatin	year the many control of the same
24 21	and the state of the	Market Linding	OPD	Male	Female	nant wom		Referral
24 25	>-09-17	kizhakkethara	29	⁷ 14	15	en		5
		Total	789	240	F40			
The second section of the second	and the second of the second o	M. The transfer was the state of the state o		240	549	0	8	57

2.2 Assessments, and Referrals Output summary Table:

1. ANC Care

il. No	Major indicators	No. cases	Cases/Drop outs
1	Screening of hyper tension, anemia, diabetes	screened	Identified & Served
2	T.T immunisation	0	
3	Identification & Referral of HR Pregnancy		
	Diagnosis of pregnancy atal & Infant health(0 to 1 year age)	<u> </u>	•

2. Neo natal & Infant health(0 to 1 year age)

No	Major indicators	No. cases	Cases/Drop outs
1	Examination of children weight	screened	Identified & Served
		7	0
	Examination of children to early identification		
	or congenital anomalies other dischilles		
	mainumium and appropriate referral	7	
	Assessing immunisation status	+	10
Chil	d (1 to 2 year age)	<u> </u>	0

No	Major indicators	No. cases	Cases/Drop outs
1	Examination of children weight	screened	Identified & Served
		<u> 10</u>	2
ľ	Examination of children to early identification of congenital anomalies, other disabilities,		
	malnutrition and appropriate referral Assessing immunisation status	10	2
Tod	dler (2 to 3 year age)	10	0

SI,	<u>- 40, </u>		100
No Major indicators 1 Examination of children weight	No. cases screened	Cases/Drop outs Identified & Served	
or emiden weight	19	5	

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ġ		Examination of children to	early identification	n					· · · · ·
1		of congenital anomalies, of	ther disabilities,						
ا .	. 2	malnutrition and appropri	iate referral		19		5		: ' .
	3	Assessing immunisation s	tatus	- -	19		0		

5. Pre School (4 to 5 year age)

S1. No	Major indicators	No. cases screened	Cases/Drop outs Identified & Served				
1	Examination of children weight	15	6				
', 2	Examination of children to early identification of congenital anomalies, other disabilities, malnutrtion and appropriate referral	15	6				
3	Assessing immunisation status	15	0				

6. School Age(6 to 12 year age)

SI. No Major indicators		No. cases screened	Cases/Drop outs Identified & Served			
1	Examination of children weight	33	9			
2	Examination of children to early identification of congenital anomalies, other disabilities, malnutrition and appropriate referral	33	9			
3	Assessing immunisation status	33	0			

7. Summary of Adolescent Heath (12 to 18 years age)

,	-3 -1 - worldetent treath (12 to 10 years				
Sl. No	Major indicators	No. cases screened	Cases /Drop outs Identified & Served		
1	Number of Growth Monitoring assessment done	84	30		
2	No. of de worming done		5		
3	Screening to identify acute malnutrition	84	30		
4	Anemia screening	·			

8. Anemia Screening

U. AHL	ma Screening		
SI. No	Major indicators	No. cases screened	No. of cases identified and served
1	Number of adolescent girls screened		
	Severe Anemia (7 or less than 7)		
1.2	Moderate Anemia (7.1 to 9.9)		
1.3	Mild Anemia(10 to 11.9)		

2	Number of pregn	ant wo	mon				: -					: '	٠٠.			
2.1	Severe Anemia		uien				<u>. </u>	· <u> </u>	· ·	_*:		1	·. ·	' .	٠.	
2.2	Moderate Anemia					 _		· · ·		1			 :-	- -		7,
2.3	Mild Anemia	 -			<u> </u>	<u> </u>									<u></u>	-
	Other women	 :		 -				~	·	- 4	10.0					_
3.1	Severe Anemia			 -					<u>. </u>			· ·				
3.2	Moderate Anemia			 -	· · · · ·		<u> </u>	<u>.</u>	<u>. • </u>	_	- -			 -		_
3.3	Mild Anemia		<u> </u>		· :		·	<u> </u>							-	
		-			<u> </u>	<u>-</u>	<u></u>			T	_					

9. Summary of NCD Activities

Si.	Activities		
	Major indicators	No. cases	No. of cases
1	Number of H.T and Sugar test done	screened	identified and served
2	Number of HT cases	425	105
3	Number of Diabetic cases	398	80
4	No. of pre diabetic cases identified	27	6
5	Number of pre HT cases detected		3
0. Com	municable Diseases		16

No 1	Major indicators	No. cases screened	No. of identified an served
_	Number of TB test done through referral		- serveu
	Number of Leprosy screening dose	 	*
_3	Number of HIV test done	 	
_4	Number of STI cases identified	 	
5	Any other	 	

2.3 Age wise Output summary Table:

	Total population covered	^ 789	
1	Male	,	
		240	
1.1	Adult (19 - 60 yrs)		
1.1.1		100	·
	Old age (>60 yrs)	84	
1.1.2	Infant (0 – 1 yr)		
		3	
1.1.3	Child (1 – 2 yrs)		<u></u> -
1.1.4	<u> </u>	3	,
1.1.1	Toddler (2-3 yrs)	9	
1.1.5	Children - Pro School (4 5		
	Children - Pre School (4 - 5 yrs)	9	

	6	.)	- 44 - 1	: :,:		
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r	10	<u> </u>			·	

1.1.6	Children – School Age (6 – 12 yrs)	15
1.1.7	Adolescent (12 - 18 yrs)	17
2	Female	549
2.1	Adult (19 – 60 yrs)	265
2.2.1	Old age (>60 yrs)	172
2.2.2	Infant (0 - 1 yr)	4
2.2.3	Child (1 – 2 yrs)	7
2.2.4	Toddler (2 – 3 yrs)	10
2.2.5	Children - Pre School (4 - 5 yrs)	6
2.2.6	Children - School Age (6 - 12 yrs)	18
2.2.7	Adolescent (12 – 18 yrs)	67
2.3	Pregnant women	0
2.3.1	Lactating mothers	8
2.3.2	No: of ANC check up	0
2.3.3	No: of PNC check up	8

2.4 Community Meetings and Home Visits

Community meetings are held to raise the awareness about various health issues. The MMU outreach team conducted group & one to one meeting at various platforms like village level, Anganwadi centre etc. The objective of the meeting was to involve the community in Health Camp and providing information intimating the community about the MMU operation communicable diseases, & Health Camp Schedule. Output summary table as shown below

Output summary Table:

SI. No		Nature of Activity	Coverage		
-		Home visits			
			4		
	2	Health education/ IEC activity	4		
·					

Community Meetings

3 Counselling 789

4 Counseling on family planning

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