# ANNUAL REPORT 2013–2014



Population Research Centre Department of Statistics Patna University Patna-800 005 Bihar, INDIA

# ANNUAL REPORT 2013-2014



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### **FOREWORD**

As desired by the Department of Family Welfare, Ministry of Health and Family Welfare, Government of India, we hereby submit the Annual Report of the Population Research Centre, Department of Statistics, Patna University, Patna for the financial year 2013-14. The report, in short, highlights the history, the functioning and the various activities of the Population Research Centre, Patna, in broad terms. It also provides information regarding sources of funding and the audited statement of the expenditure for the year 2013-2014.

(Rama Shanker Mishra)

Hony. Director

Population Research Centre Department of Statistics Patna University, Patna

# POPULATION RESEARCH CENTRE DEPARTMENT OF STATISTICS PATNA UNIVERSITY PATNA – 800 005

### **ANNUAL REPORT 2013-14**

### **Short History and Description**

The Population Research Centre has originated out of the Demographic Research Centre which was established in the Department of Statistics, Patna University, way back in September, 1966. It was, then ranked as an undeveloped Centre and had a skeleton staff with only two senior posts, namely: Assistant Chief and Research Officer, beside a few junior posts. It was further upgraded to the rank of a fully developed Centre known as Population Research Centre in 1980. With the change in the status of the Centre financial assistance was also consequently raised. The staff position as on 31.03.2014 is as follows:

Name of the Post		No. of Post		Name of the person Working against the post		
1.	Additional Director	1		Dr. Dilip Kumar		
2.	Joint Director	1		Vacant		
3.	Research Officer	1		Dr. Ravi Ranjan Sinha		
4.	Social Scientist	1		Vacant		
5.	Analyst/Computor	8	(1)	Sri Uma Kant Sahay		
			(2)	Sri Sushil Kumar Pandey		
			(3)	Sri Dhanesh Kumar		
			(4)	Dr. Krishna Nandan Singh		
			(5)	Vacant		
			(6)	Vacant		
			(7)	Vacant		
			(8)	Vacant		
6.	Investigator	4	(1)	Vacant		
			(2)	Vacant		
			(3)	Vacant		
			(4)	Vacant		

7. Office Superintendent	1		Vacant	
8. Senior Assistant	1		Vacant	
9. U.D. Assistant	Section 1		Sri Om Prakash	
10. L.D. Assistant	1 1	(1)	Sri Arun Kumar Sinha	
		(2)	Mrs. Anjali*	
		(3)	Mrs. Sumita Mukherjee**	
		(4)	Sri Shailendu Saurabh***	
11. Librarian	1		Vacant	
12. Peon	1		Vacant	
13. Driver-cum-Peon	1		Sri Ravindra Kumar	

<sup>\*</sup> Mrs. Anjali is working against the vacant post of Librarian.

<sup>\*\*</sup> Mrs. Sumita Mukherjee is working against the vacant post of Investigator.

<sup>\*\*\*</sup> Sri Shailendu Saurabh is working against the vacant post of Investigator.

As the Ministry of Health and Family Welfare, Government of India has sponsored the Centre; it continues to provide full financial assistance in the form of grant-in-aid. The grant is release in two or three instalments. The annual financial allocations for contingent items, beside the salary of the approved staffs are as follows: -

<u>Items</u>	Annual Grant
T.A./D.A.	1,50,000.00
Data processing, stationery, Printing Contingency, POL and maintenance	
Of Vehicle, etc.	1,50,000.00
Books and Journals	40,000.00

### Recruitment of Staffs:

The staffs of the Centre are recruited by the University under the guidelines of the concerned Ministry. Senior staffs are recruited by the University as per uniform prerequisite qualification and experiences prescribed time to time by the Department of Family Welfare. The Director (E) or his nominee is directly associated with the recruitment process.

#### Benefits Available to Staff:

The employees of the PRC neither get full benefits of Patna University service conditions nor of the concerned Ministry; rather, they simply get the benefits of the CPF, gratuity and leave encashment upon superannuation from service. The benefit of Pension is not in practice on the line of Patna University employees. LTC and medical reimbursement are also not available here. There is no provision for loan/ advances for purchase of the vehicle or for the construction of house.

#### **Objective and Functions of the Centre:**

The objective of the Centre is to carry out research on demographic, social and economic aspects of Population and Health status in the States of Bihar and Jharkhand. In addition, the Centre also takes up certain specific studies considered or suggested relevant and important from programme view points.

#### **Research Progress:**

The progress of research is communicated to the Ministry of Health and Family Welfare, Government of India, New Delhi in its quarterly reports. The consolidated annual report of progress is prepared at the end of the year and submitted to the Department of Family Welfare, Government of India. So far more that 297 research papers/ reports/ articles have been published/ mimeographed by the Centre.

The progress report for the year 2013-2014 is enclosed, herewith, in Annexure – I The annual statement of receipt and expenditure during the year duly audited by a Chartered Accountant is appended as Annexure – II.

### Other Activities

- Dr. Dilip Kumar, Additional Director, Dr. R.R. Sinha, Research Officer, Sri U.K. Sahay, Sri S.K. Pandey, Sri Dhanesh Kumar, Dr. K.N. Singh all Analyst, of the Centre, attended the meeting of the Indian Statistics day on the occasion of the birth anniversary of Prof. P.C. Mahalanobis organised by the NSSO in collaboration with the Department of Statistics, Patna University, Patna on 29<sup>th</sup> June 2013 in the office of the NSSO in Patna.
- 2. Dr. Dilip Kumar, Additional Director of the Centre had attended the meeting with the officials of the State Health Society for the study of PIP under NRHM in June 2013.
- 3. Dr. Dilip Kumar, Additional Director of the Centre delivered a lecture on the occasion of the seminar on World Population Day on 11<sup>th</sup> July 2013 in the Centre. The Seminar was attended by the several dignitaries of the University.
- 4. Dr. Dilip Kumar, Additional Director, Dr. R.R. Sinha, Research Officer of the Centre attended the meeting on the Evaluation of PIP under NRHM and other research issues organised by the MoHFW, GOI and NHSRC in the New Delhi during 11-13<sup>th</sup> August 2013.
- 5. Dr. Dilip Kumar, Additional Director of the Centre delivered lectures on Vital Statistics and HMIS in an Orientation Training Programme on Health Information Management at RoHFW, (GOI), Patna during 23-27<sup>th</sup> September 2013.
- 6. Dr. K.N. Singh, Analyst of the Centre delivered lecture on Statistical Measure on Central Tendency etc. in an Orientation Training Programme on Health Management among non-medical personnel at RoHFW (GOI), Patna University during 23-27<sup>th</sup> September 2013.
- 7. Dr. R.R. Sinha, Research Officer, Sri U.K. Sahay, Sri S.K. Pandey, Sri Dhanesh Kumar and Dr. K.N. Singh all Analyst of the Centre participated in the seminar on the occasion of the World population Day on 11<sup>th</sup> July 2013 in the Centre.
- 8. Dr Dilip Kumar, Additional Director, Sri S.K. Pandey and Dr. K.N. Singh both Analyst of the Centre attended the Training of Trainers (TOT) for the Dhanlakshmi Scheme study hosted by the IIPS, Mumbai at Khandala during 6-9<sup>th</sup> October 2013.
- 9. Dr. Dilip Kumar, Additional Director of the Centre participated in the seminar organised by the Population Council, New Delhi on Unmet Need for Family Planning and Safe Abortion in Bihar, Odisha and Madhya Pradesh Status and Challenges in Addressing them" at Hotel Patliputra Ashok, Patna on March 21<sup>st</sup> 2014.
- Dr. Dilip Kumar, Additional Director of the Centre participated in the Annual Action Plan (AAP), 2014-15 for the PRCs organised by the MoHFW, GOI New Delhi in PRC, Thiruvananthapuram during 27-28<sup>th</sup> March 2014.

#### Library:

The Centre has a library of its own. It has a good collection of books and journals on Demography, Statistics and other Social Sciences. The present annual grant of library is Rs.40,000.00. The current stock position of books, reprints and journals as on 31.03.2014 is as follows:

Books 4898 (Approx)

Reprints 2060 (Approx)

#### Vehicle:

The Centre was provided with a Bajaj Matador way back in April, 1980. But the vehicle in its broken conditions is dumped in the Garage. The Centre is in urgent need of a vehicle for supervision of field work and during some other official work.

### **RESEARCH ACTIVITIES**

### Progress of work done during April, 2013 - March, 2014

- (A) Projects/Research Papers completed at the Centre during 2013-2014.
- 1. Evaluation of Programme Implementation Plan (PIP) under NRHM in Jamui and Purnia Districts of Bihar State (Dr. Dilip Kumar, Sri B. B. Sinha and Sri Kishor Kumar)

It is the rapid evaluation of the PIP under the National Rural Health Mission (NRHM). The research team had visited in the selected districts to interview the health functionaries in the district hospital, PHCs and Health Sub Centres (HSCs) to assess the availability of infrastructure facilities, human resources, programme management etc. Some of the strong and weak points found in the study are as given below:

Strong points: The district hospital has the facilities of the labour room, laboratory, OPD room, JSY maintained records and etc. The trainings on Skilled Birth Attendant (SBA), immunisation and IMNCI have been conducted in the district. Operationalisation of Mobile medical units (MMUs) is under progress at the district level. The staffs are familiar with the HMIS records.

Weak points: There is no full strength of the medical officers in the district hospital and in the selected PHCs for the study. There is shortage of gynecologists and obstetricians to provide maternal health services at PHC level. Some of the essentials equipments like; X-ray machine, anesthesia machine and emergency drugs, contraceptive pills and laboratory-testing equipments are lacking in the Barhat and Khaira PHCs. There is no suggestion/ complain box in the PHCs. The access of the information on Adolescent Reproductive & Sexual Health (ARSH) through services at District Hospital, PHCs & HSC level is poor. There is lack of coordination among health & ICDS workers for report returns & MIS. The Global positioning system (GPS) in MMUs is not available. There is no proper checklists exist for monitoring.

2. Evaluation of Programme Implementation Plan (PIP) under NRHM in Bokaro and Deoghar Districts of Jharkhand State (Dr. Dilip Kumar, Dr. R. R. Sinha and Sri Dhanesh Kumar)

It is the rapid evaluation of the PIP of National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from districts, PHCs and HSCs level health functionaries in Bokaro district during 14-20<sup>th</sup> April 2013 and in Deoghar district during 15-22<sup>nd</sup> April 2013 in Jharkhand State. Some of the strong and weak points found in the study are as given below:

<u>Strong points</u>: The newborn care corner is functioning in the hospital. The cleanliness of labour room, ward, compound and the premises was good. The MTP services are provided at the FRUs /CHCs level. The ASHA, AWW and ANM hold meeting with Mahila Mandals in AWCs.

Weak points: There is no full strength of the medical officers in the district hospital and in the selected PHCs for the study. Most of the essential drugs like; iron syrup, IFA tablets, Vitamin A, measles vaccine etc. and equipments like; oxygen cylinder, OT table, x-ray machine, surgical equipments etc. were not available at the PHC level. There was no newborn care corner in the selected PHCs. Delayed payment of Sahiyya incentives is a great hurdle for Sahiyya work performance. There is no access to information on Adolescent Reproductive & Sexual Health (ARSH) through services at PHC and HSC level. There is in no awareness levels on adolescent health issues as such. The IMNCI

activities are at the CHC level. There is inadequate training to ANMs /doctors on operating baby warmer machines. There is a lack of monitoring and supervision in district

3. Evaluation of Programme Implementation Plan (PIP) under NRHM in Katihar and Sheohar Districts of Bihar State (Dr. Dilip Kumar, Sri Dhanesh Kumar and Dr. K. N. Singh)

It is the rapid evaluation of the PIP of National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from districts, PHCs and HSCs level health functionaries in the selected districts namely; Katihar and Sheohar during 23<sup>rd</sup> to 29<sup>th</sup> May 2013 in Bihar State. Some of the strong and weak points found in the study are as given below:

Strong points: The district hospital is situated in a spacious and clean building at Katihar city while the Sub divisional hospital was upgraded into Sadar hospital in Sheohar district. The mobile clinic is working with the facilities of medicine, oxygen cylinder, one trained manpower with stretcher facility for carrying the patient in Katihar district. Creating awareness about maternal health through Mahila Mandals day is the one of the major activities in Katihar district.

Weak points: The hospital lacks the full strength of permanent doctors, nurses, lab technician, pharmacist /dresser and store keeper. There is shortage of gynecologists and obstetricians to provide maternal health services at the health facilities. There is inadequate training to ANMs on operating baby warmer machines. There are no regular health camps at gram Panchayats and village level. The access of the information on Adolescent Reproductive & Sexual Health (ARSH) through services at District Hospitals, PHCs & HSC level is poor.

4. Trend Analysis of Safe Delivery and Institutional Delivery across the districts of Bihar (1998-99 and 2007-08) (Dr. K. N. Singh and Sri R. B. Mehta)

The study is mainly based on the three survey results. Some of the findings are given below: A significant improvement in safe delivery was observed during the period, 1998-99 to 2007-08, among women of the state. About 30 out of 37 districts of Bihar showed significant improvement in safe delivery during the period of DLHS-1 (1998-99) to DLHS-2 (2002-04).

On the basis of DLHS-2 and DLHS-3 out of fifteen major states of India, Bihar is at the 12<sup>th</sup> rank according to the institutional delivery performance. A significant improvement in institutional delivery at the state level was observed from the period, it may be mentioned here that the institutional delivery had increased from 15 percent in DLHS-1 (1998-99) to 23 percent in DLHS-2 (2002-04) and around 28 percent in DLHS-3 (2007-08) in Bihar.

As far as districts are concerned, more than two-third districts of Bihar showed significant improvement in institutional delivery from DLHS-1 (1998-99) to DLHS-2 (2002-04). However, during the same period, there was no significant improvement in institutional delivery in twelve districts out of 37 districts of Bihar.

5. A Study on Dhanlakshmi Girl Child Scheme in Bihar and Jharkhand States (Prof. A. Mishra and et. al)

The study was undertaken on the request from the International Inst. for Population Sciences (IIPS), Mumbai to evaluate the ongoing Dhanlakshmi girl child scheme of GOI in the selected blocks in Bihar State (Jamui block) and Jharkhand State (Tisri block in Giridih district and Markochar block in Kodarma district). The fieldwork had been completed in the months of December 2013 and January 2014. The data entry has been completed by the Centre and the complete set of softcopy and filled in

information of quantitative and qualitative schedules have been dispatched to the IIPS, Mumbai for further analysis and report writing as per the terms of agreement.

## 6. Evaluation of Programme Implementation Plan (PIP) under NRHM in Gaya District of Bihar State (Dr. Dilip Kumar and Sri S. K. Pandey)

It is the rapid evaluation of the PIP of National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from the district hospital, Sherghati FRU, Belaganj PHC and Kanhil HSC level health functionaries in the Gaya district of Bihar State during the assigned period of 28<sup>th</sup> January to 1<sup>st</sup> February 2014. The Key Conclusions and the recommendations are as follows:

**Key Conclusions**: It was found that Rogi Kalyan Samiti plays a crucial role in managing the affairs of the hospital. The trainings on Skilled Birth Attendant (SBA), immunization and IMNCI have been conducted in the district. Operationalisation of Mobile Medical Units (MMUs) is under progress at the district as well as the PHC level. The MMUs are overloaded with the patients and difficult to carry all of the patients from all of the places. There is a demand of more MMUs from district hospital to the PHC. The Global positioning system (GPS) in MMUs is not available. There is no proper checklists exist for monitoring. There is no full strength of the medical officers in the district hospital and in the selected FRU and PHC. There is shortage of gynecologists and obstetricians to provide maternal health services at PHC level also. The access of the information on Adolescent Reproductive & Sexual Health (ARSH) through services at PHC & HSC level is poor.

**Recommendation:** The substantial gaps in terms of infrastructure, manpower, equipments, drugs and consumables at the health institutions should be removed immediately. The functioning of the AYUSH needs to be strengthened. Health, an on-line computer based data management system for the acquisition, retrieval, analysis and storage of information for the care and treatment of patients of health care delivery institution should be designed to make timely accurate information available as required by the administrators, research scientists, and other professionals taking part in the health care and evaluation.

# 7. Evaluation of Programme Implementation Plan (PIP) under NRHM in Purnia District of Bihar State (Dr. K. N. Singh and Sri U. K. Sahay)

It is the rapid evaluation of the PIP under the National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from the Purnia District Hospital, Dhamdaha FRU, Kirtiyaanand nagar PHC and Gokulpur HSC level health functionaries in the Purnia district of Bihar State during the assigned period of 1st February 2014 to 4<sup>th</sup> February 2014. The Key Conclusions and the recommendations are as follows:

**Key Conclusions:** The District Hospital, Dhamdaha FRU, Kirtiyaanand nagar PHC and Gokulpur HSC all having own building. However district hospital building needs repairing and Kirtiyaanand nagar PHC having shortage of space due to heavy load of patient. There are heavy shortages of all kind of Human Resources in the district hospital, Dhamdaha FRU, Kirtiyaanand nagar PHC. Most of the equipment and essential drugs was available at district hospital, Dhamdaha FRU, Kirtiyaanand nagar PHC and Gokulpur HSC. There are regular supplies of EC pills, OCPs and IUCDs in the district hospital. The large number of IUCD insertion and tubectomy are reported in district hospital, Dhamdaha FRU, Kirtiyaanand nagar PHC.

Recommendation: District hospital building needs repairing and Kirtiyaanand nagar PHC having shortage of space due to heavy load of patient require extension of building. Gap of HR should be

fulfilled to get a better quality of health services. Number of Maternal death and still birth have been increased between two quarter must be investigated.

## 8. Evaluation of Programme Implementation Plan (PIP) under NRHM in Sitamarhi District of Bihar State (Dr. Dilip Kumar and Sri S. K. Pandey)

It is the rapid evaluation of the PIP of National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from the district sadar hospital, Mejorgunj FRU, Mejorgunj PHC and Dumri Khurd HSC level health functionaries in the Sitamarhi district of Bihar State during the assigned period of 14<sup>th</sup> February to 18<sup>th</sup> February 2014. The Key Conclusions and the recommendations are given below:

Kev Conclusions: The Mejorgunj FRU is located in the huge compound with a setup of big building without the proper maintenance and care. The functioning of the Mejorgunj FRU is not normal due to lack of equipments, medicine, medical and para medical staff. The MMUs are overloaded with the patients and difficult to cover all of the patients from all of the places. There is a demand of more MMUs from district sadar hospital to the PHC. The Global positioning system (GPS) in MMUs is not available. There is no proper checklists exist for monitoring. There is shortage of gynecologists and obstetricians to provide maternal health services at PHC level also.

Recommendation: At the Mejorgunj FRU, there are substantial gaps in terms of infrastructure, manpower, equipments, drugs and consumables. The Mejorgunj PHC should be shifted to the Mejorgunj FRU's campus for the effective functioning in the locality. More MMUs should be provided to the district sadar hospital and Mejorgunj PHC to carry more of the patients from the remote areas for effective treatment in the health centres.

## 9. Evaluation of Programme Implementation Plan (PIP) under NRHM in Kishanganj District of Bihar State (Dr. K. N. Singh and Sri U. K. Sahay)

It is the rapid evaluation of the PIP under the National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from the Kishanganj District Hospital, Chattargach FRU, Kishanganj PHC and Kulamani HSC level health functionaries in the Kishanganj district of Bihar State during the assigned period of 4<sup>th</sup> February 2014 to 7<sup>th</sup> February 2014. The Key Conclusions and the recommendations are given below:

**Key Conclusions:** The District Hospital, Chattargach FRU, Kishanganj PHC and Kulamani HSC all having own building .Chattargach FRU is running in a very small building, So it require a big building as because there is shortage of place for work. There are heavy shortages of all kind of Human Resources in the district hospital, Chattargach FRU, Kishanganj PHC. Trained staffs for Basic Emergency Obstetric and newborn Care (BeMOC) were available at district hospital but no such trained staff found at Chattargach FRU. No trained staff on F.P. services reported from Chattargach FRU. The still births were also increased between 1<sup>st</sup> and 2<sup>nd</sup> quarters respectively in the district hospital and Chattargach FRU.

Recommendation: District hospital building needs repairing and Chattargach FRU having shortage of space due so it requires extension of building. Gap of HR should be fulfilled to get a better quality of health services. ARSH clinic importance should be highlighted. More emphasis needs IEC component. Frequent visit of senior official require to strengthening NRHM.

### 10. Evaluation of Programme Implementation Plan (PIP) under NRHM in Sheohar District of Bihar State (Dr. Dilip Kumar and Sri S. K. Pandey)

It is the rapid evaluation of the PIP of National Rural Health Mission (NRHM). The framed schedules and personal observation apart from the other records were used for the information collection from the district sadar hospital, Piprahi PHC and Singahi HSC level health functionaries in the Sheohar district of Bihar State during the assigned period of 19<sup>th</sup> February to 24<sup>th</sup> February 2014. The Key Conclusions and the recommendations are given below:

Key Conclusions: The district sadar hospital and Piprahi PHC have a limited chronic diseases control programme which needs more facilities for the effective treatment of the chronic diseases. The Piprahi PHC is located in the campus which has not the good condition of the boundary wall. The functioning of the Piprahi PHC is 24x7 and it has the facilities of a few equipments and medicine and it needs more number of medical and Para medical staff. There is a demand of more MMUs from district sadar hospital to the PHC. The Global positioning system (GPS) in MMUs is not available.

Recommendation: The district sadar hospital should be shifted in the newly constructed building for more of the space with the other facilities to the patients. There is no FRU in the Sheohar district at present. It needs to be opened up. The building of the Piprahi PHC is very old. It needs to be modernised and to be equipped with all of the facilities for the treatment of the patients. The Piprahi PHC needs more number of medical doctors.

### 11. Evaluation of Programme Implementation Plan (PIP) under NRHM in Jamui District of Bihar State (Dr. R.R. Sinha and Sri Dhanesh Kumar)

It is the prompt evaluation of the PIP under the National Rural Health Mission (NRHM). The technical staff had visited the DH, FRU, PHC and HSC to assess the availability of infrastructure facilities, human resources, programme management, etc. The framed checklists and personal observations apart from the other available records were utilized in collecting the required information from Jamui DH, Jhajha FRU, Sono PHC (24x7) and Paira Matihana HSC during the assigned period of 1<sup>st</sup> March to 5<sup>th</sup> March 2014. The Key Conclusions and the recommendations are given below:

<u>Key Conclusions</u>: It was found that RKS has been established at the DH, FRU and PHC levels. There is no full strength of health personnel in all the health facilities. There is shortage of gynaecologists and obstetricians to provide maternal health services at all the health centres. There is no provision of the blood storage unit in the PHC. There is no birth planning for the anaemic pregnant women at the district level. The maternal death review is also lacking.

**Recommendations:** Ensure all of specialists are posted in PHCs or higher centre. The district should be able to directly recruit staff nurses from nursing schools outside the state till vacancies are not filled in. Training regarding health programmes should be reviewed and strengthened. Incentive for working in remote area is to be developed.

### (B) Project/ Studies in Progress of the Centre during April 2013-March 2014

- Evaluation of Programme Implementation Plan (PIP) under NRHM in Araria district of Bihar State.
   (R.R. Sinha and Dhanesh Kumar)
- Evaluation of Programme Implementation Plan (PIP) under NRHM in Katihar district of Bihar State.
   (R.R. Sinha and Dhanesh Kumar)
- Evaluation of Programme Implementation Plan (PIP) under NRHM in Saharsa district of Bihar (K. N. Singh and U. K. Sahay)
- 4. Analysis of ANC Coverage and JSY Beneficiaries in Bihar based on HMIS data. (Dilip Kumar and S. K. Pandey)
- Trend Analysis of current user of Family Planning Methods across the different districts of Bihar with special reference of HMIS data. (K. N. Singh and S. K. Pandey)
- 6. Utilization Pattern of Antenatal and Delivery Care Services in Bihar. (R. R. Sinha)
- 7. Trend Analysis of current user of Family Planning Methods across the different districts of Jharkhand with special reference of HMIS data.
  (K. N. Singh, U. K. Sahay and Dhanesh Kumar)
- An analysis of dropouts during ANC checkups in 2007-08 & their associated determinants with special reference of MCTS impact in Bihar.
   (A. Mishra and K. N. Singh)

### **AUDITOR'S REPORT**

On Account Of

## M/S POPULATION RESEARCH CENTRE, DEPARTMENT OF STATISTICS, PATNA UNIVERSITY, PATNA – 800005

### RECEIPT & PAYMENT ACCOUNT FOR THE YEAR ENDED ON 31-03-2014

It is certified that we have audited the annexed receipt and payment account for the year ended on 31st March 2014, of Population Research Centre, trough electronic fund transfer with the book of accounts, vouchers, bank statement and other relevant documents produced before us.

- A. The salary of staff and other benefits of Rs.81,12,845/-(Rupee Eighty One Lacs Twelve Thousand Eight Hundred Forty Five only) was paid from March 2013 to December 2013.
- B. During the financial year P.R.C has taken loan from RHS-RCH fund of PRC amounting to Rs.16,08,198.00 for making payment of salary.
- C. Bank Folio charges & Cheque Book issue charges Rs 420/- is included in contingency expenses.
- D. During the financial year a Grant-in-Aid of Rs 67,36,000.00 taken in receipt and payment account ,which was released by the ministry as recurring grant-in-aid for the financial year 2013-14.

#### E. It is further stated that :-

- 1. These financial statements are the responsibility of the management of the organization. Our responsibility is to express an opinion on these financial statements based on our audit.
- We conducted our audit in accordance with auditing standards generally accepted in India, those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining on a test basis evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principle used and significant estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that our audit provided a reasonable basis for our opinion.

And on the basis of information & explanations provided to us, in our opinion they exhibit a true and fair view of the state of the affairs of the above named society in respect of

A. Receipt and Payment Account for the year ended on 31 .03 2014

PLACE: PATNA

DATE: 15/07/2014

for SHAILENDAR RASTOGI&C

ASHUTOSH KUMAR

**PARTNER** 

### **UTILISATION CERTIFICATE**

Certified that out of total amount of the grant-in-aid received from the Director (Statistics Division) Ministry of Health and Family Welfare, Govt. of India, New Delhi released through electronic fund transfer from time to time in 2013-2014 for meeting regular expenditure through letters as below:

1. Letter No. G/20011/4/2013 Stats (PRC) dated 12.11.2013, 1st Installment of Recurring grant -in-aid for the year 2013-14.

Rs. 67,36,000.00

PLACE: Patna

DATED: 15/07/2014

For SHAILENDRA RASTOGI

ASHUTOSH KUMAR

**PARTNER** 

Addl. Director Pop. Res. Centre, PU

Population Research Centre

P.U., Patna

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#### POPULATION RESEARCH CENTRE

DEPARTMENT OF STATISTICS, PATNA UNIVERSITY, PATNA - 800005

### RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED ON 31-03-2014

RECEIPTS			Amount (Rs.)	PA	YMENTS	Amount (m.)
То	Opening balance b/d:- 1.Allahabad Bank (a) Opening balance (P.R.C)	657,154.81	, 1	Ву	Salary of Staff & Other benefits Other increment to the staff; (March 2013 to Dec 2013)	Amount (Rs.) 8,112,845 00
		657,154.81	657,154.81			
To	Loan RHS-RCH fund of PRC		1,608,198.00			
То	Grant-In-Aid :-					
fi rg _ f =	Received from the Under Secretary (C&G), Ministry of Health and Family Welfare, Govt of India New Delhi,			Ву	TA. & DA :(P.R.C)	74,970.00
	realesed through electronic fund trans from time to time in 2013-14, for regula			Ву	Contingency expensess (P.R.C) (IncludingData Processing, Stationary printing, Contingency, POL and maint. of vehicle &bank charges etc.)	144,665.000
	1. Letter No. G. 20011/4/2013 Stats (PRC) dt. 12.11.2013 as 1st installment of recurring			Ву	Books and journals (P.R.C)	39,573,00
	grant-in-aid for the year 2013-14		6,736,000.00			

Closing balance c/d By Allahabad Bank Closing balance (P.R.C)

629,299.81

9,001,352.81

9,001,352.81

DATE: 15/07/2014 PLACE: PATNA

RYSTOGI&CO

PARTNER (M NO:402498)

Hony. Director Population Research Centre P.U., Patna

Addl. Director Pop. Res. Centre, PU

