

# **ANNUAL REPORT**

## **2015-2016**



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

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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 2015-2016. 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 audited statement of the expenditure for the year 2015-2016.

*A. Kumari*

(Anchala Kumari)  
Hony. Director  
Population Research Centre  
Department of Statistics  
Patna University, Patna.

**POPULATION RESEARCH CENTRE  
DEPARTMENT OF STATISTICS  
PATNA UNIVERSITY, PATNA  
PATNA - 800005**

**ANNUAL REPORT 2015-2016**

**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, besides 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 31.3.2016 is as follows.

<b><u>Name of the Post</u></b>		<b><u>No. of Post</u></b>	<b><u>Name of the person working against the post</u></b>
1.	Additional Director	1	Vacant
2.	Joint Director	1	Dr. Dilip Kumar
3.	Research Officer	1	Vacant
4.	Social Scientist	1	Vacant
5.	Analyst/Computer	8	(1) Sri Dhanesh Kumar
			(2) Dr. Krishna Nandan Singh*
			(3) Vacant
			(4) Vacant
			(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	1		Sri Om Prakash
10.	L.D. Assistant/Typist	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

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\* Superannuated on 29.02.2016.

\*\* Mrs. Anjali is working against the vacant post of Librarian.

\*\*\* Mrs. Sumita Mukherjee is working against the vacant post of Investigator.

\*\*\*\* 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 three installments. The annual financial allocations for contingent items, besides the salary of the approved staffs, are as follows:-

<b><u>Item</u></b>	<b><u>Annual Grant</u></b>
T.A/D.A	2, 50,000.00
Data processing, stationery, printing Contingency, POL and maintenance of Vehicle, etc.	2, 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 that of the concerned Ministry; 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, Jharkhand and other states. 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 progress report is prepared at the end of the year and submitted to the Department of Family Welfare, Government of India. So far more than 325 research papers / reports / articles have been published / mimeographed by the Centre.

The progress report for the year 2015-2016 is enclosed herewith in Annexure-I.

The annual statement of receipt and expenditure during the year dully audited by a Chartered Account is appended as Annexure-II.

### **Other Activities**

1. Dr. Dilip Kumar, Joint Director of the Centre participated and presented a paper entitled 'To Assess the Role of Family Planning on Fertility in Jharkhand State: Based on NFHS Data' in the International Conference on Recent Advance in Mathematics, Statistics and Computer Science (ICRAMSCS – 2015) at Central University of South Bihar, Patna during 29-31 May, 2015.
2. Dr. Dilip Kumar, Joint Director, Sri Dhanesh Kumar and Dr. K.N. Singh, Analysts of the Centre attended Seminar on National Statistical Day Jointly organised by the Department of Statistics, Patna University and National Sample Survey Office (NSSO), GOI in the Auditorium of Geology Dept, Patna University on 29<sup>th</sup> June, 2015.
3. Dr. Dilip Kumar, Joint Director of the Centre delivered lecture for the CBHI in service orientation training programme on Health Information Management for non-medical personnel at RoHFW, GOI, Patna on 8<sup>th</sup> August 2015.
4. Dr. K.N. Singh, Analyst of the Centre delivered lecture for the CBHI in service orientation training programme on Health Information Management for non-medical personnel at RoHFW, GOI, Patna on 9<sup>th</sup> August 2015.
5. Dr. Dilip Kumar, Joint Director of the Centre participated in the workshop on "Accelerating and synchronizing actions for Nourishing Bihar's Children" hosted by UNICEF Patna and AIIMS Patna during 8<sup>th</sup> & 9<sup>th</sup> October, 2015 at Hotel Maura, Patna Bihar.
6. Dr. K.N. Singh, Analyst of the Centre deliver lecture for the CBHI in service orientation training programme on Health Information Management for non-medical personnel at RoHFW, GOI, Patna on 8<sup>th</sup> December 2015.
7. Dr. Dilip Kumar, Joint Director of the Centre deliver lecture for the CBHI in service orientation training programme on Health Information Management for non-medical personnel at RoHFW, GOI, Patna on 9<sup>th</sup> December 2015.
8. Prof. Anchala Kumari, Hon. Director along with Dr. Dilip Kumar, Joint Director of the Centre participated in the Annual Action Plan (AAP) meeting of the MoHFW, GOI, New Delhi organised by the PRC, Thiruvananthapuram at IMA Hall, Cochin during 28<sup>th</sup>-29<sup>th</sup> March, 2016.

**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. The current stock position of books, reprints and journals as on 31.3.2016 is as follows:

Books	-	4949	(Approx)
Reprints	-	2091	(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, 2015-March, 2016**

#### **(A) Projects/Research Papers completed at the Centre during 2015-16**

##### **(1) Evaluation of Programme Implementation Plan (PIP) under NRHM in Deoghar district of Jharkhand State (K. N. Singh and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the other records were used for the information collection from the Deoghar District Hospital, Madhupur FRU, Mohanpur PHC and Gopibandh HSC during the assigned period of May 6, 2015 to May10, 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** The District Hospital, Madhupur FRU, Mohanpur PHC and Gopibandh HSC all are working from its own building. No regular power back reported at Mohanpur PHC and Gopibandh HSC. Shortages of Human Resources are reported at the health facilities. All essential drugs and equipments are reported available and functional at the health facilities. There are no functional newborn stabilization unit and the functional sick newborn care unit (SNCU) reported in the district hospital. Vitamin-A distribution was found nil at all facilities. Government Referral transport services are reported not properly functional as per requirement at any monitored health facilities.

**Recommendations:** Shortage of Human Resources should be fulfilled to get a better quality of health services. More emphasis should be given on training component at all considered facilities.

##### **(2) Evaluation of Programme Implementation Plan (PIP) under NRHM in Nalanda District of Bihar State (Dilip Kumar and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the other records were used for the information collection from the district sadar hospital, Hilsa FRU, Ekangarsarai PHC and Kela Bigha HSC level health functionaries in Nalanda district of Bihar State during the period of 6<sup>th</sup> July to 10<sup>th</sup> July 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** There is acute shortage of medical and paramedical staff at all the health centres. The trainings on Skilled Birth Attendant (SBA) and immunization have been conducted in the district. There is requirement of more ambulances up to the PHC level. There is lack of coordination among health & ICDS workers. There is no micro birth planning for the anaemic pregnant women at the district level. The district hospital and the selected FRU and PHC used to burn the waste material in the open space and bury some of the wastes in the campus of the health centre.

**Recommendations:** It is essential to fill in the regular vacancies of medical and para medical staff to overcome the routine works of the health facilities. The functioning of the AYUSH needs to be strengthened. There should be frequent visits of senior officials at the health facilities. The importance of ARSH clinic should be highlighted among the health functionaries and among the villagers also.

### **(3) Evaluation of Programme Implementation Plan (PIP) under NRHM in Godda district of Jharkhand State (K. N. Singh and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the other records were used for the information collection from Godda District Hospital, Mahagama FRU, Sunderpahari PHC and Rampur HSC of Jharkhand State during the assigned period of 26 July 2015 to 30 July 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** Godda district hospital, Mahagama FRU, Sunderpahari PHC and Rampur SC all are functioning in Govt. building. FRU, PHC and HSC all are situated in its new building. Problem of irregular supply of electricity and water supply are reported at Rampur HSC. Shortages of human resources are reported at the health centres. Most of the essential equipments are reported available and functional. Unavailability of majority of drugs is reported at Mahagama FRU. New born care corner (functional radiant warmer with neo-natal ambu bag) is found to be functional at the health facilities. Health Management Information System (HMIS) is improving day by day in Godda district.

**Recommendations:** Facilities of staff quarter should be improved at Godda district sadar hospital and in the Sunderpahari PHC. Problem of regular supply of electricity and water supply should be shorted out at Rampur HSC. Shortage of Human Resources should be fulfilled to get a better quality of health services. More emphasis should be given on training component at all considered facilities. Shortage of equipments at DH Godda should be fulfilled to provide proper health services. Shortage of majority drugs should be fulfilled at Mahagama FRU. New born stabilization unit should be made functional at district hospital of Godda and PHC Sunderpahari. Newborn Care Unit (SNCU) should be made functional at Godda DH and Mahagama FRU.

### **(4) Evaluation of Programme Implementation Plan (PIP) under NRHM in West Champaran district of Bihar State (Dilip Kumar and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the other records were used for the information collection from West Champaran district sadar hospital, Lauriya FRU, Chanpatiya PHC and Indira Nagar HSC level health functionaries in the West Champaran district of Bihar State during the period 9<sup>th</sup> September to 13<sup>th</sup> September 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** District sadar hospital is located in the MJK hospital which requires proper maintenance and monitoring of all of the services on the regular basis. Lauriya FRU is located in very old building without the proper maintenance and care. The supplies of essential and regular medicines are inadequate for the last three months. There is a demand of more ambulances in the district sadar hospital, FRU and the PHC. Health centres are overloaded with the patients and these lacks to provide the beds to all of the patients in the IPD. Ultimately patients used to rest on the open floor also with their all the belongings. There is acute shortage of other medical specialists also at all the health centres. The access of the information on Adolescent Reproductive & Sexual Health (ARSH) through services at the FRU and HSC level is poor.

**Recommendations:** At Lauriya FRU, there are substantial gaps in terms of infrastructure particularly the building, manpower, essential drugs and consumables. All the health centres should be provided more beds for the patients. The permanent position of medical and para medical staff should be filled in on urgent basis.

**(5) Evaluation of Programme Implementation Plan (PIP) under NRHM in Jalpaiguri District of West Bengal State (Dilip Kumar and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the Jalpaiguri district hospital, Mayanaguri FRU, Churabhandar PHC and Jhajangi HSC level health functionaries in the Jalpaiguri district of West Bengal State during 10<sup>th</sup> October to 14<sup>th</sup> October 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** The health facilities used to outsource ambulance through PPP mode. At present, there is no mobile clinic at the health facilities. No proper checklists exist for monitoring among themselves. The Adolescent Reproductive & Sexual Health (ARSH) is known as Adolescent Friendly Health Clinic provides services to adolescents at the health centres barring the Churabhandar PHC and Jhajangi HSC. The district hospital has arranged to dispose the waste materials through NGO but other health centres used to burn the waste material in the open space and bury some of the wastes in the campus.

**Recommendations:** It is essential to ensure all medical and para medical staff should be trained on the regular basis to enhance the work activities. The blood storage unit (BSU) training should be given to the staff of Mayanaguri FRU as the BSU is non-functional due to the lack of training of the staff. The contractual positions of the medical and para medical staff should be made permanent. It is essential to upgrade data entry process and MCTS follow up. The importance of ARSH clinic should be highlighted at the Churabhandar PHC and Jhajangi HSC.

**(6) Evaluation of Programme Implementation Plan (PIP) under NRHM in Birbhum District of West Bengal State (Dilip Kumar and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the Birbhum district hospital, Bolpur FRU, Sattore-Kasba PHC and Mala HSC level health functionaries in the Birbhum district of West Bengal state during the period of 14<sup>th</sup> December to 18<sup>th</sup> December 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** The District Health Society is monitoring the progress on the regular basis at the PHC for assessing the achievements at the Gram Sabhadhipati level. The district hospital has no availability of government vehicle services for patients and it is provided by the Nischay Yan of the NGO if required. There is lack of coordination among health and ICDS workers. Birbhum district hospital and Bolpur FRU have arranged to dispose the waste materials through Sameranky NGO but other health centres used to burn the waste material in the open space and bury some of the wastes in the campus.

**Recommendations:** From the premises of the district hospital, local shops, other vehicles etc. should be removed. The cleanliness and maintenance of the campus of health facilities are essential. The capacity of the wards is required to be enhanced to accommodate many of the patients at the district hospital. The dilapidated staff quarter should be repaired soon at Sattore-Kasba PHC. The staff quarters should be surrounded by the boundary wall.

**(7) Evaluation of Programme Implementation Plan (PIP) under NRHM in Uttar Dinajpur (North Dinajpur) district of West Bengal State (K. N. Singh and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the other records were used to collect information from the Uttar Dinajpur (North Dinajpur) district hospital, Karandighi FRU, Bangalbari PHC and Arajai Kashimpur HSC during the assigned period of 25<sup>th</sup> December 2015 to 29<sup>th</sup> December 2015. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** Uttar Dinajpur (North Dinajpur) district hospital, Karandighi FRU, and Bangalbari PHC all are functioning in their own old buildings. Physical conditions of the district hospital, FRU, PHC and HSC buildings are not good. Shortages of Human Resources are reported at the District Hospital, Karandighi FRU, Bangalbari PHC and Arajai Kashimpur HSC. Majority of essential equipments are reported to be available and functional at Karandighi FRU, Bangalbari PHC and Arajai Kashimpur HSC. All of the essential drugs are reported to be available at district hospital of Uttar Dinajpur (North Dinajpur) and Karandighi FRU. New born care corner (functional radiant warmer with neo-natal ambu bag) and new born stabilization unit are reported to be functional at district hospital of Uttar Dinajpur (North Dinajpur), Karandighi FRU, and Bangalbari PHC.

**Recommendations:** Physical condition of the DH, FRU, PHC and HSC building including staff quarter should be improved. Shortage of Human Resources should be fulfilled to get a better quality of health services. More emphasis should be given on training component at all considered facilities. Shortage of some essential equipment should be fulfilled to provide proper health services at FRU, PHC and HSC. Shortage of drugs & supplies should be fulfilled at the health facilities. Sick Newborn Care Unit (SNCU) should be made functional at FRU.

**(8) Evaluation of Programme Implementation Plan (PIP) under NRHM in Dakshin Dinajpur (South Dinajpur) district of West Bengal State (K. N. Singh and Dhanesh Kumar)**

It is the rapid evaluation of the PIP under National Rural Health Mission (NRHM). The framed schedules and personal observations apart from the other records were used to collect information from the Dakshin Dinajpur (South Dinajpur) district hospital, Tapan FRU, Rampara Chenchara PHC and Bishnupur HSC during the assigned period of January 30, 2016 to February 3, 2016. The Key Conclusions and recommendations are as given below:

**Key Conclusions:** The district hospital of Dakshin Dinajpur (South Dinajpur) is functioning from its own building. Physical condition of building in Tapan FRU is not good. No staff quarter for ANM are being reported at Bishnupur HSC. Shortage of human resources is found at Rampara Chenchara PHC. The new born care corner (functional radiant warmer with neo-natal ambu bag) is working at Rampara Chenchara PHC. Health Management Information System (HMIS) is improving day by day in Dakshin Dinajpur (South Dinajpur) district. MCTS is followed up and data entry is also upgraded.

**Recommendations:** The boundary wall and other part of Tapan FRU building particularly roof of staff quarter should be repaired. Staff quarter should be build up at Rampara Chenchara PHC and at Bishnupur HSC. Shortage of human resources should be fulfilled to get a better quality of health services. More emphasis should be given on training component at Rampara Chenchara PHC. Newborn stabilization unit should be made available and functional in the Rampara Chenchara PHC.

**(9) Trend of Sex Ratio across the different districts of Bihar** (Anchala Kumari and K. N. Singh)

The study provided the information regarding trends of sex ratio across the different districts in Bihar State. A comparison of State sex ratio with reference to India is also analysed. The change in attitude of mothers with respect to time is also examined particularly in context of State and country as a whole. It is mainly based on the data taken from different issues of Census of India. Supportive sets of data have been taken from different issues of research reports based on different survey findings of the National Family Health Surveys. The child sex ratio is of great concern for the state and the country as well. It is an alarm to take necessary steps in implementation of the policy decisions for the survival of the girl child. Sex ratio of Bihar was near to 1000 and above during period 1901-1961 and it was above the national sex ratio during same period. Sex ratio of Bihar started declining after 1961 and reached below the national sex ratio in 1991 and still it is lying below the national sex ratio. Sex ratio of majority districts of Bihar concentrated in the range of 900-949 in 2001 and 2011.

**Recommendations:** All the states should be directed to strengthen implementation of the Act to prevent illegal sex determination and dowry system. An effort should be made to decline IMR of female child in Bihar. A motivational effort should be made to give equal importance to the female child to decline son preference.

**(10) To Assess the Role of Family Planning on Fertility in Jharkhand State: Based on NFHS Data**  
(Dilip Kumar)

In the present study an attempt has been made to assess the role of family planning on fertility in Jharkhand State through the Prevalence Model. With the emergence of the National Family Health Survey (NFHS: 2005-06) to monitor family planning and health activities, this method becomes a useful tool. Of the total births averted in Jharkhand State by programme contraception, 80 percent of births were averted by Sterilization users in 2005-06 while the spacing methods users contributed to about 20 per cent of the birth prevention. The spacing methods need to be strengthening for the greater use. With regard to the births averted by non-programme contraception /natural methods, the main contribution was made by the users of Rhythm of about 45 percent, which was followed by the users of Withdrawal of 43 percent and by the other methods of 13 percent. Of the total birth averted in Jharkhand State, the contribution of programme contraception and non-programme contraception/ natural methods is about 85 percent and 15 percent respectively in 2005-06.

**Recommendation:** The programme contraception plays dominance role to control fertility however the non-programme contraception/natural methods used should also be enhanced at the places where accessibility of programme contraception is poor.

**(11) High Fertility Trend and Maternal Health in India: A Review of Progress** (Dilip Kumar)

Fertility and family planning have received a serious attention in India since 1996 when the reproductive and child health approach was introduced under the Family Welfare Programme. India has been undertaking several initiatives to reduce the total fertility rate at the replacement level of 2.1 children per woman and to improve the health of mothers and children since beginning; but the progress has been slow in Empowered Action Group (EAG) states, particularly in Bihar, Uttar Pradesh and Jharkhand. According to the NFHS results, a large proportion of married women in India (77 percent) prefer to regulate their

fertility: 26 percent do not want another child, 31 percent (or their husbands) were sterilized, and 20 percent want to postpone their next birth. If there were no unwanted births in India, its TFR would be lowered by nearly three quarters.

**Recommendations:** The Family Welfare Program should pay greater attention to temporary methods of family planning. India needs to develop a system to accurately record all births and deaths. Reliable data about fertility and mortality can be used for improving programme inputs and to know the trends in growth rates over time up to the district level.

#### **(12) Study on the quality of beds available in the Health Centres in Gopalganj and Siwan districts of Bihar State (Dilip Kumar and Dhanesh Kumar)**

This study is based on the primary source of data collection from the two districts namely; Gopalganj and Siwan of Bihar State. Apart from the observations, interview of health functionaries and beneficiaries in the district hospital, FRUs and PHCs were made to assess the availability of infrastructures, human resources, programme management, quality of beds etc.

**Key Conclusions:** Barring Phulwariya FRU in Gopalganj district, all the selected health facilities in both of the districts provided the services for the births deliveries, family planning and etc. Phulwariya FRU is likely to provide the services in full fledge after completion of the repairing of building within a year. Shortage of staff was observed in the health facilities due to which doctors were unable to attend to all patients within duty hours. Sometimes number of patients admitted is more than the sanctioned strength and due to increased arrival of patients during some seasons and camps of family planning; some patients are even placed on the benches and have to stay in the corridor also. The health facilities do not have the proper facilities to clean and dry linen due to which patients sometimes get soiled linen. The staffs handle food without wearing aprons, caps, and gloves. The provision for water through a water purifier is lacking in some of the health facilities.

**Recommendations:** The contractual positions of the medical and para medical staff should be made permanent. The socio-economic conditions of the villagers are low. They need more awareness about ante natal, intra natal and particularly post natal care which needs to be generated through continuous effort by ANM, AWW and ASHA. Some folding cots and mattresses should be preserved to counter pressure due to increased patients. The food distributor must wear gloves and covered his hairs properly. The provision of potable drinking water through water purifier must be provided in all of the health facilities.

#### **(13) Awareness and utilization of the AYUSH facilities in Giridih and Kodarma districts of Jharkhand State (Dilip Kumar and Dhanesh Kumar)**

This study is based on the primary source of data collection from the two districts namely; Giridih and Kodarma of Jharkhand State. In the selected districts, apart from observational analysis, interview of health functionaries, beneficiaries and non-beneficiaries in the district hospital, FRUs and PHCs have been made to assess the availability of infrastructure facilities, human resources, programme management, quality of AYUSH etc.

**Key Conclusions:** The human resource at the hospital does not meet IPHS requirements for sanctioned staff at the health facilities. There is lack of clarity regarding individual roles and responsibilities which affects the efficacy of treatment from the AYUSH systems. There is lack of orientation training of Allopathic doctors to AYUSH systems as such the initiatives for mainstreaming AYUSH is lacking. At registration counters, they do not specify where the patients should go for the consultation and treatment. Patients generally use their judgment to visit doctors and as such they fail to spot the AYUSH consultation. The health facilities have

inadequate seating arrangements to handle the large number of patients and visitors. There are insufficient numbers of wheelchairs and trolleys in the OPD to carry the needy patients.

**Recommendations:** A rational system of deployment of health functionaries for the AYUSH systems should be followed with their appropriate roles and responsibilities. The health facilities should have sufficient number of functional wheelchairs and trolleys to carry the needy patients. In the remote areas, there is no functional unit of the AYUSH systems as such it becomes difficult to get the proper treatment, medicines and support of the AYUSH practitioners. The AYUSH network of Ayurveda, Unani and Homeopathy dispensaries in the districts should have the adequate staffs with regular reorientation training in their own systems, so that they can serve the patients properly. More AYUSH centres must be opened.

#### **(B) Projects/ Studies in Progress of the Centre during 2015-16**

All the assigned projects/studies during FY 2015-16 have been completed in the same FY 2015-16.

## **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 31-03-2016**

It is certified that we have audited the annexed receipt and payment account for the year ended on 31<sup>st</sup> March 2016, of Population Research Centre, through RTGS 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.72,01,002/-(Rupees Seventy Two Lac One Thousand Two Only) were paid from March 2015 to Feb 2016.
- B. Bank Folio charges, SMS charges & Cheque Book issue charges Rs 384/- is included in contingency expenses.
- C. During the financial year a Grant-in-Aid of Rs 83,35,980.00/-(Rupees Eighty Three Lac Thirty Five Thousand Nine Hundred Eighty Only) in three Installments taken in Receipt and Payment Account, which was released by the Ministry as recurring grant-in-aid for the financial year 2015-16.
- D. During the Financial year a Grant-in-Aid of Rs. 1,52,000.00/-(Rupees One Lac Fifty Two Thousand Only) by Ministry as Non-Recurring to Population Research Centre as additional TA/DA for PIP Monitoring of NRHM for financial year 2015-16.

**F. 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.
- 2. 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 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.

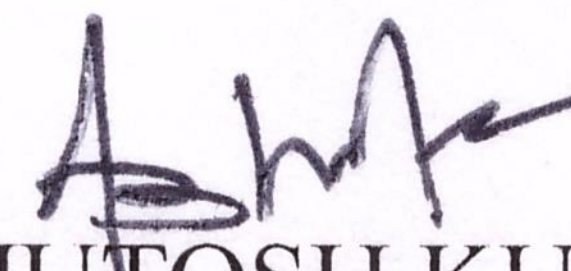
And on the basis of information & explanations provided to us, in our opinion they exhibit a true and fair view of the state of the affairs of the above named society in respect of

- A. Receipt and Payment Account for the year ended on 31 .03 2016

DATE: 05-06-2016

PLACE: PATNA

for SHAILENDAR RASTOGI & CO.

  
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 RTGS from time to time in 2015-2016 for meeting regular expenditure through letters as below :-

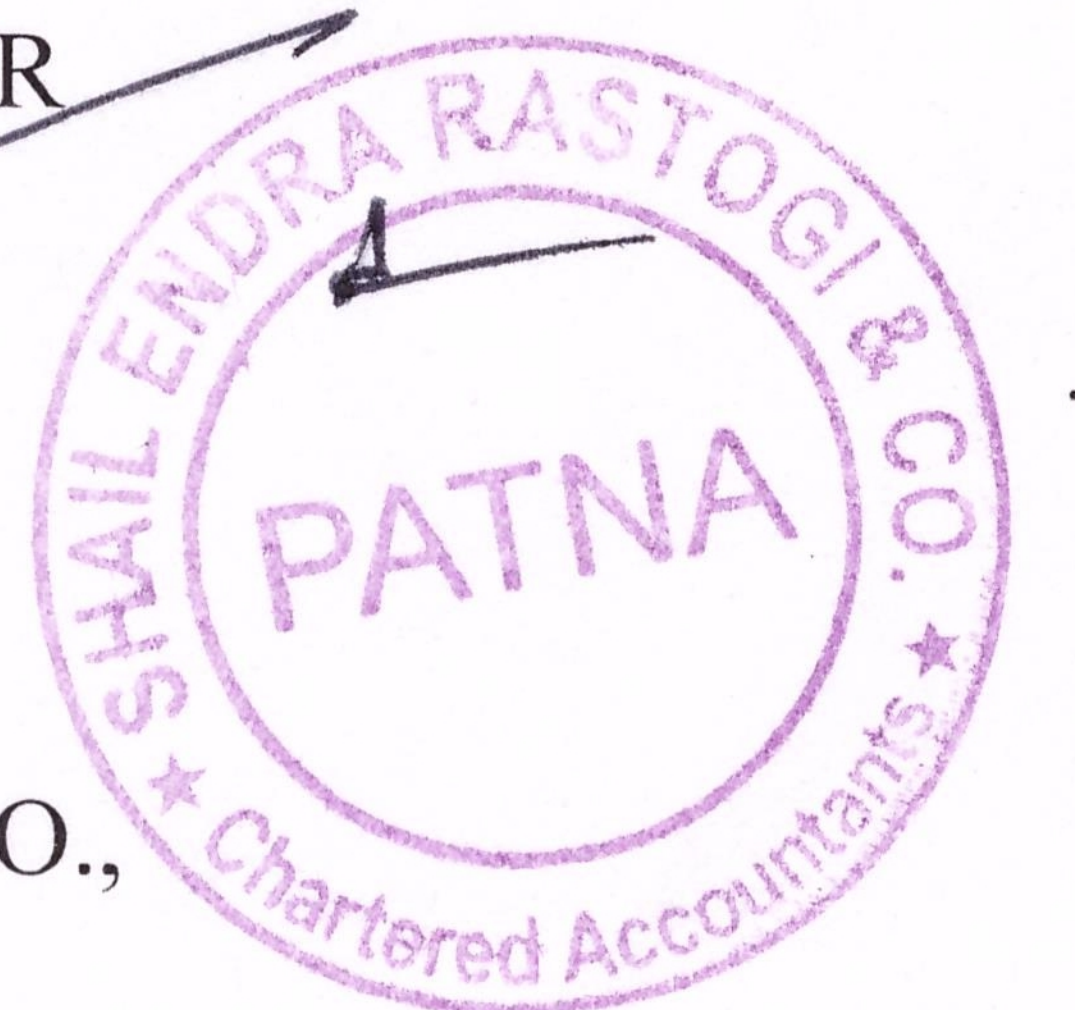
1. Letter No. G.20011/11/2015 Stats (PRC) dated 1.06.2015,  
1<sup>st</sup> Installment of Recurring grant –in-aid for the year 2015-16 Rs.44,35,000.00
2. Letter No. G.20011/11/2015 Stats (PRC) dated 23.12.2015,  
2<sup>nd</sup> Installment of Recurring grant –in-aid for the year 2015-16. Rs. 32,23,000.00
3. Letter No. G.20011/11/2015 Stats (PRC) dated 3.03.2016,  
3<sup>rd</sup> Installment of Recurring grant-in-aid for the year 2015-16. Rs. 6,77,980.00

DATED : 05-06-2016

PLACE : PATNA

ASHUTOSH KUMAR

PARTNER



For SHAILENDRA RASTOGI & CO.,

*Dilip Kumar*  
14/6/16  
**Joint Director**  
Population Research Centre  
Department of Statistics  
Patna University, Patna

*A. Kumar*  
21.6.16  
**Hony. Director**  
Population Research Centre  
P.U., Patna

*Insia*  
23/7/16  
**REGISTRAR**  
PATNA UNIVERSITY  
PATNA-800005

*Abh*  
14/6/16  
*Anurag*  
14/6/16

**POPULATION RESEARCH CENTRE**  
**DEPARTMENT OF STATISTICS, PATNA UNIVERSITY, PATNA 800005**

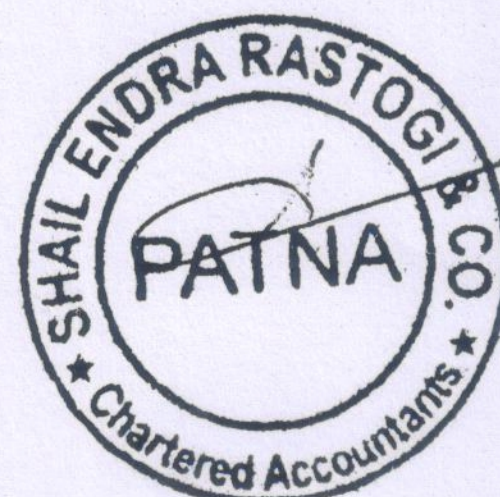
GFR 19 – A  
(See Rule 212 (1))

**Form of Utilization Certificate for Recurring Expenses**

S.No.	Letter No. and Date	Amount (Rs.)
1.	G.20011/11/2015- -Stats (PRC Patna) dated :- 01.06.2015.	44,35,000.00
2.	G.20011/11/2015- -Stats (PRC Patna) dated :- 23.12.2015.	32,23,000.00
3.	G.20011/11/2015- -Stats (PRC Patna) dated :- 03.03.2016.	6,77,980.00
4.	Interest Received in Saving Account	68,447.00
	Total	84,04,427.00

Certified that out of Rs.83,35,980.00 (Eighty Three Lac Thirty Five Thousand Nine Hundred Eighty only) of Grants-in-aid sanctioned during the year 2015-16 in favour of PRC, and interest received in saving account Rs 68,447.00 ( Sixty Eight Thousand Four Hundred Forty Seven ) Patna under the Ministry of Health and Family Welfare letter No. given in the margin and Rs4,24,068.81 (Four Lac Twenty Four Thousand Sixty Eight and Eighty One Paise Only), on account of unspent balance of the previous year . During the year PRC has spent, a sum of Rs.75,66,272.00 (Seventy Five Lac Sixty Six Thousand Two Hundred Seventy Two Only) which includes bank charges (Rs.384.00) for the purpose of which it was sanctioned and that the balance of Rs.12,62,223.81.(Twelve Lac Sixty Two Thousand Two Hundred Twenty Three and Eighty One Paise only ), remaining unutilized at the end of the year has been surrendered to Government (vide No. Nil dated. Nil) will be adjusted (payable to PRC Patna Rs.12,62,223.81) towards the grants -in-aid payable during the next year 2016-17.

1. Certified that I have satisfied myself that the conditions on which the grants in aid was sanctioned have been duly fulfilled / are being fulfilled and that I have exercised that following checks to see that the money was actually utilized for the purpose for which it was sanctioned.



Kinds of checks exercised.

1. The agency's statement of accounts for the year 2015-16.  
Duly audited by the Chartered Accountant have been obtained and sanctioned.

Signature :



**Designation: CHARTERED ACCOUNTANT**

2. The utilization certificate and Audit Reports for the prescribed year.
3. It has been ensured that the physical and financial performance of the PRC has been according to the requirements as prescribed in the guidelines issued by the Govt. of India / State Government.
4. Any other

**Dated: 05-06-2016**

**Note: During the financial year P.R.C has received Grant Rs.83,35,980.00 ( Eighty Three lac Thirty Five Thousand Nine Hundred Eighty Only ) Out of which Salary paid to staff & other benefits other increment to the staff Rs.72,01,002.00 ( Seventy Two Lac One Thousand Two Only),TA & DA (P.R.C) Rs.1,58,178.00 ( One Lac Fifty Eight thousand One Hundred Seventy Eight only ),Data Processing (P.R.C.) Rs.1,93,471.00 (One Lac Ninety Three Thousand Four hundred Seventy One only) And Books and Journals (P.R.C.) Rs. 13,621.00 (Thirteen Thousand Six hundred Twenty One only).**

*Dilip Kumar*  
14.6.16  
**Joint Director**  
Population Research Centre  
Department of Statistics  
Patna University, Patna

*A. Kumar*  
21.6.16  
**Hony. Director**  
Population Research Centre  
P.U., Patna

*Surinder*  
23/7/16  
**REGISTRAR**  
PATNA UNIVERSITY  
PATNA-800005

*Anshu*  
14/6/16  
*Anshu*  
14/6/16

**POPULATION RESEARCH CENTRE**  
DEPARTMENT OF STATISTICS , PATNA UNIVERSITY , PATNA - 800005  
**RECEIPTS AND PAYMENT ACCOUNT FOR THE YEAR ENDED ON 31-03-2016**

RECEIPTS	AMOUNT(Rs.)	PAYMENT	AMOUNT (Rs.)
To Opening balance b/d		By Salary of Staff & Other benefits	
Allahabad bank		(March 2015 to Feb 2016)	7,201,002.00
(a) Opening balance (P.R.C)	424,068.81		
	424,068.81	By T.A & D.A	158,178.00
To Interest received in savings a/c with Allahabad bank	68,447.00	BY Data Processing (PRC)	193,471.00
To Grant-in-Aid:-		( including POL	
Received from the Under Secretary (C & G) , Ministry of Health and Family Welfare, Govt. of India, New Delhi, released through RTGS from time to time in 2015-16, for regular		and maint. Of vehicles & bank charges etc.)	
		By Books and Journals (PRC)	13,621.00
1. Letter No. G.20011/11/2015 Stats (PRC) dt.01.06.2015 as 1st installment of recurring grant-in-aid for the year 2015-16	4,435,000.00		
2. Letter No. G.20011/11/2015 Stats (PRC) dt.23.12.2015 as 2nd installment of recurring grant-in-aid for the year 2015-16	3,223,000.00		
3. Letter No. G.20011/11/2015 Stats (PRC) dt.03.03.2016 as 3rd installment of recurring grant-in-aid for the year 2015-16	677,980.00	Closing balance c/d By Allahabad Bank Closing balance (PRC)	1,262,223.81
	8,828,495.81		8,828,495.81

DATE: 05-06-2016

PLACE: PATNA

FOR: SHAILENDAR RASTOGI & CO.

ASHUTOSH KUMAR

PARTNER (M.NO:402498)



*Dilip Kumar*  
Joint Director  
Population Research Centre  
Department of Statistics  
Patna University, Patna

*A. Kumar*  
Hony. Director  
Population Research Centre  
P.U., Patna

*23/7/16*  
REGISTRAR  
PATNA UNIVERSITY  
PATNA-800005

**POPULATION RESEARCH CENTRE**  
DEPARTMENT OF STATISTICS, PATNA UNIVERSITY, PATNA 800005  
**INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED ON 31-3-2016**

EXPENDITURE	AMOUNT(Rs.)	INCOME	AMOUNT(Rs.)
By Salary of Staff & Other benefits other increment to the staff (March.2015 to Feb. 2016)	7,201,002.00	To Interest received in savings a/c with Allahabad bank To <u>Grant-in-Aid:-</u> Received from the Under Secretary (C & G) , Ministry of Health and Family Welfare, Govt. of India, New Delhi, realeased through RTGS from time to time in 2015-16, for regular expenditure Vide	68,447.00
By T.A & D.A	158,178.00		
BY Data Processing ( including POL and maint. Of vehicles & bank charges etc.)	193,471.00		
By Books and Journals (PRC)	13,621.00	1. Letter No. G.20011/11/2015 Stats (PRC) dt.01.06.2015 as 1st installment of recurring grant- in-aid for the year 2015-16	4,435,000.00
To Excess of Income over Expenditure	-	2 Letter No. G.20011/11/2015 Stats (PRC) dt.23.12.2015 as 2nd installment of recurring grant- in-aid for the year 2015-16	3,223,000.00
		3 Letter No. G.20011/11/2015 Stats (PRC) dt.03.03.2016 as 3rd installment of recurring grant- in-aid for the year 2015-16	677,980.00
	8,404,427.00		8,404,427.00

DATE: 05-06-2016

PLACE: PATNA

For : SHAILENDAR RASTOGI & CO.

ASHUTOSH KUMAR

PARTNER (M NO:402498)



*D. Lipkewar*  
14.6.16  
**Joint Director**  
Population Research Centre  
Department of Statistics  
Patna University, Patna

*A. K. Singh*  
21.6.16  
**Hony. Director**  
Population Research Centre  
P.U., Patna

*[Signature]*  
23/7/16  
**REGISTRAR**  
PATNA UNIVERSITY  
PATNA-800005

*[Signature]*  
14/6/16

*[Signature]*  
14/6/16

