**Performance Measurement System of NRHM Contractual Staff**

(The best option will be to introduce a proper Community Monitoring System as envisaged under NRHM. In the absence of it in the State, it is felt that while formulating a system for measuring performances of NRHM contractual staffs, it is mandatory to involve the Community Representatives. The simple reason for this is that, the community knows whether the staffs posted in their area attend to the health facilities regularly or not. Having said this, the community may not be aware about the technical activities to be performed by them. Hence, the present system formulated will be a combination appraisal both by the community and other technical authority.

Only key performance indicators will be used for the purpose.

To make the system more effective, it is felt that the monthly honorarium of the staffs should be given considering the level of performance)

1. ANMs at HSCs

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Office Attendance | Chairman, VHSC | Quarterly; Report to be submitted confidentially to CMO through concerned MO i/c PHC/CHC |
| 2 | Home visits |
| 3 | Holding MVHNDs |
| 4 | Organizing VHSC Meetings |
| 5 | Institutional Delivery | Health Asstt (F) of concerned PHC | Monthly; Report to be submitted to MO i/c PHC/CHC |
| 6 | Home Delivery |
| 7 | Immunization Services |
| 8 | Timely Monthly Report |

2. ANMs at 24\*7 PHCs/UHC/CHCs

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Holding MVHNDs | Chairman, RKS | Quarterly; Report to be submitted confidentially to CMO through concerned MO i/c PHC/CHC |
| 2 | Home visits |
| 3 | Organizing VHSC Meetings |
| 4 | Institutional Delivery | MO i/c concerned | Monthly; Report to be submitted CMO |
| 5 | Home Delivery |
| 6 | Timely Monthly Report |
| 7 | Immunization services |
| 7 | Office Attendance |

3. ANMs of Tribal Health Mobile Camps

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Holding Mothers’ meetings | Chairmen/ Village Chiefs of villages included in Tribal He Health Project | Quarterly; Report to be submitted confidentially to DD (Tribal Health through concerned MO i/c |
| 2 | No. of hamlets/villages covered |
| 5 | Home Delivery | MO i/c Tribal Health | Monthly; Report to be submitted DD (Tribal Health) |
| 6 | Other MCH services |
| 7 | Timely Monthly Report |
| 8 | Office Attendance |

4. GNMs at PHC/CHC

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Institutional delivery | MO i/c PHC/CHC | Monthly; Report to be submitted to CMO |
| 2 | Home delivery |
| 5 | Outreach camps/MMU |
| 6 | School Health activity |
| 7 | ANC Clinic services |
| 8 | Office attendance |

5. PHNs at CHC

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Field supervisory visits | MO i/c CHC | Monthly; Report to be submitted to CMO |
| 2 | Outreach camps/DMMU |
| 3 | School Health activity |
| 4 | Office attendance |

6. MBBS Doctors at PHC/CHC

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Office attendance | MO i/c PHC/CHC | Monthly; Report to be submitted to CMO |
| 2 | Institutional delivery |
| 3 | Home delivery |
| 4 | Refresher courses attended |
| 5 | Supervisory Field visits |
| 6 | Schools visited |
| 7 | Health camps atteded |

7. MBBS Doctors of MMU

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Remote villages visited Vs planned | Concerned MO i/c PHCCHC | Monthly; Report to CMO |
| 2 | MCH services provided |
| 3 | Timely reporting |
| 4 | Office attendance at non-MMU days |

8. AYUSH Doctors at PHC/CHC

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Office attendance | MO i/c PHC/CHC | Monthly; Report to be submitted to CMO |
| 2 | Clinics opened |
| 4 | Refresher courses attended |
| 5 | Supervisory Field visits |
| 6 | Schools visited |
| 7 | Health camps attended |

9. Pharama/ LT/ XR Techs at UHC/CHC/MMU

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Key Performance Indicators | Who will appraise | How frequently |
| 1 | Office attendance | MO i/c PHC/CHC | Monthly; Report to be submitted to CMO |
| 2 | Orders executed |
| 4 | Refresher courses attended |
| 6 | Schools visited |
| 7 | Health camps attended |