Village health action plan

 PROBABLE ACTION PLANS TO BE IMPLEMENTED

NAME OF THE BLOCK : SEKMAI/HAORANG SABAL BLOCK

NAME OF THE PHSC : Phumlou PHSC

Name of the village : Koutruk (8 km from PHCs)

VILLAGE POPULATION : 552

NUMBER OF HOUSEHOLD :112

NAME OF THE ASHA :Ranjita

TEAM OF THE VISITORS : BPMU with PHC finance

Formation of planning team:

1. member of the village as a chairman
2. ASHA as a convenor
3. member of the VH & SC
4. secretary of local club
5. Meirapaibi secretary

**Koutruk**

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| --- | --- |
| Indicators | Value/Percentage/Ratio |
| TT HH Covered by during the survey | 112 |
| TT HH Head | 78 (M - 87, F - 25) |
| TT Population | 552 (M - 267, F - 281) |
| Sex ratio  | 1:1 |
| Type of House | 27% - P, 58% - SP, 15% - K  |
| Toilet Facility inside house | 44% - Y, 56% - N |
| Main source of light | 90% - Electric, 10% - K |
| Main fuel type | 31% - Wood, 48% - G |
| Occupation | 83% - Farmer, 43% - Govt, 12% - others |
| Mode of transport | 72% - Cycle, 33% - 2Wh |
| Own TV | 86% - Y, 14% - N |
| Own Radio | 100% - Y |
| Infant 0 - 1 yr |  M - 2, F - 10 |
| Child 0 - 5 yr | M -22 , F - 36 |
| Age of Marriage | 11 - <18yrs, 43 - >18yrs  |
| No. of currently PW | 2 |
| Maternal Death | 0 |
| Asthma | 0 |
| TB | 0 |
| Malaria | 3 |
| Jaundice | 9 |

**Koutruk**

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| DiseasesMonth | JAN | FEB | MAR | APR | MAY | JUNE | JULY | AUG | SEPT | OCT | NOV | DEC |
| Diarrhoea |  |  |  |  |  |  |  |  | ….. | … |  |  |
| Cold fever |  |  | .. | … |  |  |  |  |  |  | … |  |
| Jaundice |  |  |  |  |  |  |  | .. | .. | …. |  |  |
| Malaria |  |  |  |  |  |  |  | .. |  |  |  |  |
| Fever |  |  |  |  | …….. | …….. | …….. | …….. | …….. | …….. |  |  |
| Measles |  | .. |  |  |  | .. | … | .. |  |  |  |  |

PROBABLE ACTION PLANS TO BE IMPLEMENTED

Koutruk

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| Issues | Causes | Proposed activities | Responsibility  | Timeline  | Source of budget |
| Seasonal disease like , diarrhoea, Fever, Conjunctivitis, Skin Disease ,Jaundice ect | Unreached area of Health care service | Awareness programme and health talk | VHC | 1st ,2nd and 4th Quater | Untied fund |
| No proper source of drinking water | Unavailability of safe drinking water supply | Provision of safe drinking water | VHC | 1st Quater | PHED |
| Lack of overall health care services | Non availability of ASHA | Selection of ASHA | SHMS | NA | NA |
| Lack of awareness on Maternal & Child care | Village not easily accessible  | General Health camp  | DHMS | Every 2 Months. | DHMS |
| Transportation | Lack of Public transport system , No taxi service | Identification of assured vehicle for transportation  | DHMS | On a regular basis | DHMS |

