

Ministry of Health & Family Welfare
Statistics Division
Definition and Guidelines of Data Elements in DHQ Monthly Format

Item Code	Data Element
Part A	Monthly Inventory details
H	<p>Stock Position (During the Month)</p> <p>Balance from Previous month: Balance remaining in the store on last day of the previous month.</p> <p>Stock received: Stock received from 1st to last day of the reporting month.</p> <p>Unusable stock: The stock, which becomes unusable due to any reason during the reporting month. Unusable Stock can occur due to a variety of reasons like breakage, expiry, Wastages etc. and this quantum/number is to be recorded. Recording this is necessary to arrive at the Total Stock in Hand.</p> <p>Stock Distributed: Stock distributed to the health facilities in the district during the reporting month.</p> <p>Total Stock: Stock balance in the store on the last day of the reporting month.</p>
M 1	Family Planning
1.1.	IUD 380 A
1.2.	IUD 375 A
1.3.	Condoms
1.4.	Oral Contraceptive
1.5.	Emergency Contraceptive Pills
1.6.	Centchroman weekly pills
1.7.	Injectable Contraceptive MPA (Vials)
1.8.	Tubal rings
1.9.	Pregnant testing Kits (Nischay Kits)

Item Code	Data Element
M2	Other Items
2.1.	Gloves
2.2.	MVA Syringes
2.3.	Tab. Fluconazole
2.4.	Blood Transfusion sets
2.5.	Gluteraldehyde 2%
2.6.	IFA tablets (Red)
2.7.	IFA - Blue (Adolescent 10-19 yrs)
2.8.	IFA- Pink (Junior 6-10 yrs)
2.9.	IFA Syrup (Paediatric)
2.10.	Amoxicillin (Paediatrics Antibiotics)
2.11.	Injectable Gentamicin
2.12.	Vit A syrup
2.13.	ORS
2.14.	RTI /STI colour coded syndromic kits (I to VII)
2.15.	Zinc 20 mg tablet
2.16.	Albendazole 400 mg tablet
2.17.	Calcium Tablets
Part B	Other Programmes
M 3	Death Reviews (MDR/ CDR) Done
3.1.	Data Element: Total Maternal Deaths Reviewed (MDR) by CMO

Item Code	Data Element
	<p>Definition: Total no. of Facility and Community maternal deaths reviewed by Chief Medical Officer (CMO) during the reporting month.</p> <p>Guidelines: The Chief Medical Officer (CMO) is mainly responsible for the Maternal Death Reviews at the District level. Both facility and community based reviews from rural and urban areas would be taken up at this level. DNO (District Nodal Officer) will brief the members on community and facility reports, action taken on action points of last meeting etc. The committee will meet once a month. The monthly meetings at Block and District level should also be used as a platform for sensitization of frontline workers and other health functionaries on the objectives of the MDSR process and for reviewing the implementation of the process in the District/ Block.</p> <p>Data source: MPCSDR portal</p>
3.2.	<p>Data Element: Total Maternal Deaths Reviewed (MDR) by DM</p> <p>Definition: Total no. of facility and community maternal deaths reviewed by the District Magistrate (DM) during the reporting month.</p> <p>Guidelines: All the Maternal Death Reports compiled by the District MDSR Committee will be put up to the District Collector, who will have the option of reviewing a sample of these deaths, which will be representative of deaths occurring at home, at facilities or in transit. In the urban areas, District Collector/Commissioner, MC/CEO, Zilla Parishad/ Deputy Commissioner will conduct the maternal death review. The CMO with support from DNO would identify the sample of cases to be reviewed by DC. While selecting cases, the preference could be to choose those instances where deficiencies correctable by interdepartmental coordination are required. The MDSR meetings with the District Collector would happen on a quarterly basis.</p> <p>Data source: MPCSDR portal</p>

Item Code	Data Element
3.3.	<p>Data Element: Number of maternal deaths reviewed through Community based Maternal Death Review (CBMDR)</p> <p>Definition: No. of maternal deaths reviewed through CBMDR (Community based maternal deaths review) during the reporting month</p> <p>Guidelines: Community based MDSR is a method of identifying personal, family or community factors that may have contributed to the death by interviewing people such as family members or neighbours who are knowledgeable about the events leading to the death. interview is done by using a verbal autopsy format.</p> <p>Community based reviews must be taken up for all deaths that occur in the specified geographical area, irrespective of the place of death, be it at home, facility or in transit. District Nodal Officer (DNO) will ensure that all the maternal deaths reported by facilities will be investigated at community level also.</p> <p>Data source: MPCSDR portal</p>
3.4	<p>Data Element: Total number of Child Deaths Reviewed by CMHO Level</p> <p>Definition- The total number of Child deaths reviewed by CMHO/ CMO in the current month are to be reported here.</p> <p>Guideline: Child Death Review (CDR) is a strategy to understand the geographical variation in causes of child deaths and thereby initiating specific child health interventions. Analysis of child deaths provides information about the medical causes of death, helps to identify the gaps in health service delivery and social factors that contribute to child deaths. This information can be used to adopt corrective measures and fill the gaps in community and facility level service delivery.</p> <p>As per Child Death Review Guideline, the CMO Reviews the child deaths monthly in the DCDRC meeting and minutes are sent to SNO .</p>

Item Code	Data Element
	Data Source – District Child Death Report
3.4	<p>Data Element: Total number of Child Deaths Reviewed by DM Level</p> <p>Definition- The total number of Child deaths reviewed by DM in the current month are to be reported here.</p> <p>Guideline: As per Child Death Review Guideline, selected deaths are reviewed by the DM monthly in the presence of 2 family members of the deceased Child</p> <p>Data Source – District Child Death Report</p>
M4	National Ambulance Services (ALS- Advance Life Support & BLS- Basic Life Support)
4.1.	<p>Data Element: Average response time (call to scene) for all BLS Ambulances in the district during the month</p> <p>Definition: The average response time in hh:mm:ss for all the BLS Ambulances (Basic Life Support) in the district during the month is to be reported here.</p> <p>Guideline: The Average Response Time is the standard measure of time consumed by a BLS ambulance to attend the patients at the site where trauma, accident has occurred or requiring immediate medical attention.</p> <p>It is calculated as the</p> $\frac{\text{Sum of response time for total number of trips for a month for all the BLS ambulances}}{\text{Total number of trips}}$ <p>Data Source: EMT ambulance register</p>
4.2.	Data Element: Average response time (call to scene) for all ALS Ambulances in the district during the month

Item Code	Data Element
	<p>Definition: The average response time in hh:mm:ss for all the ALS Ambulances (Advanced Life Support) in the district during the month is to be reported here.</p> <p>Guideline: The Average Response Time is the standard measure of time consumed by the ALS ambulance to attend the patients at the site where trauma, accident has occurred or requiring immediate medical attention.</p> <p>It is calculated as the</p> $\frac{\text{Sum of response time for total number of trips for a month for all the ALS ambulances}}{\text{Total number of trips}}$ <p>Data Source: EMT ambulance register</p>
4.3.	<p>Data Element: Average number of trips per day by all ALS Ambulances in the district during the month</p> <p>Definition: The Average number of trips per day by all ALS Ambulances in the district during the month is to be reported here.</p> <p>Guideline: This is the total number of trips made per day by an ALS ambulance in the area served. One trip is calculated as a complete journey from one point (for example: from the area of deployment) to another (such as site of accident) and then reporting back to public health facility to provide emergency treatment.</p> <p>It is calculated as the</p> $\frac{\text{Total number of trips made by all ALS ambulances during the month}}{\text{Total number of days in the month}}$ <p>Data Source: EMT ambulance register</p>
4.4.	<p>Data Element: Average number of trips per day by all BLS Ambulances in the district during the month</p>

Item Code	Data Element
	<p>Definition: The Average number of trips per day made by all BLS Ambulances in the district during the month are to be reported here.</p> <p>Guideline: This is the total number of trips made per day by a BLS ambulance in the area served. One trip is calculated as a complete journey from one point (for example: from the area of deployment) to another (such as site of accident) and then reporting back to public health facility to provide emergency treatment.</p> <p>It is calculated as the</p> $\frac{\textit{Total number of trips made by all BLS ambulances during the month}}{\textit{Total number of days in the month}}$ <p>Data Source: EMT ambulance register</p>
4.5.	<p>Data Element: Average kilometres travelled by all ALS Ambulances in the district during the month</p> <p>Definition: The Average kilometres travelled by all ALS Ambulances in the district during the month (Kms) are to be reported here</p> <p>Guideline: It is calculated by adding total distance (in km) travelled every day by ALS for a month divided by the number of days in the month.</p> <p>It is calculated as the</p> $\frac{\textit{Total kilometres travelled by all ALS ambulances during the month}}{\textit{Total number of days in the month}}$ <p>Data Source: EMT ambulance register</p>
4.6.	<p>Data Element: Average kilometres travelled by all BLS Ambulances in the district during the month</p>

Item Code	Data Element
	<p>Definition: It is calculated by adding total distance (in km) travelled per day by BLS for a month to the number of days in the month.</p> <p>It is calculated as the</p> $\frac{\textit{Total kilometres travelled by all BLS ambulances during the month}}{\textit{Total number of days in the month}}$ <p>Data Source: EMT ambulance register</p>
M5	NLEP
5.1.	<p>Data Element: No. of new leprosy cases found during monthly survey</p> <p>Data Definition: Total no. of confirmed case of leprosy, previously never treated with MDT in the reporting month.</p> <p>Data Source: Patient card filled at PHC/ CHC/Block</p>