Director's Report 2012-13

Presented to Annual General Body Meeting 21st March 2014



THE INSTITUTE OF HEALTH SYSTEMS

Table of Contents

Title	Page
I.Institute's Faculty and Human Resources:	1
II.Reporting Period (2012-13) Events and Activities:	2
A.Research and Consultancy	2
B.Academic Programs:	3
C.Training Services:	4
D.Public Services:	4
E.IHS Publications	5
III.Long Term Projects	5
A.Model PHC System Management:	5
IV. Taking Stock of the Institute's Financial Position:	5
V.Accounts and Audit Report:	7

Tables, Figures and Annexures

#	Title	Page
Та	bles	
1	IHS Faculty and Human Resources Position, 2013	1
2	Project Proposals Submitted	2
Fig	gures	
1	IHS Gross Revenue Trend Since Inception	6
2	The IHS receipts by broad area of activities	6
Ar	nexures	
1	Faculty and Personnel Profile	8
2	IHS Participation in Trg. Pgms, Workshops, & Conferences for Apr 12 - Mar13 (and till Feb. 2014)	13
3	List of Outgoing Faculty and Personnel after the Last AGM	15
4	Revenue from IHS Laboratory Services	17
5	IHS Publications in 2012-13	17
6	IHS Revenue Trends by sources and by activity	18

The Institute of Health Systems. Director's Report, 2012-13

Ladies and Gentlemen,

On behalf of the faculty and staff of the Institute, I welcome you all to this eighteenth annual general body meeting. We have been functioning with a very small team of core staff, whose hard work, perseverance and support has been invaluable to the Institute. Although, we could complete all pending research projects, we did not succeed in securing funding for new projects during the reporting period inspite of our best efforts. As a result, the Institute's financial position suffered. However, public service activity is continued with same vigour. Simultaneously, we put in the required effort to nurse some of the long term programs which are likely to fructify in the near future. I gratefully acknowledge the support given by members of the Board, the Executive Council, and the General Body in sustenance of the Institute. I would like to use this opportunity to specially acknowledge the guidance of the IHS Chairman, Dr. G.N.Rao and continued contribution of Dr.Prasanta Mahapatra, President of the Institute as a supporter and mentor in all aspects.

I first present about the Institute's faculty and human resources.

Institute's Faculty and Human Resources:

As on date we have a total of 27 persons in various categories as shown in Table-1.

Table-1: I	HS Fa				Resou	rces Po	sition,	2013		
Category of Personnel	As on 31/3/13			As on 01/03/14						
category of refsonner	Emp	Stipnd	Fee	Vol.	Tot	Emp	Stipnd	Fee	Vol.	Tot
Faculty & Coordinators										
Full Time Faculty	2	0	0	0	2	1	0	0	0	1
Consultants	0	0	3	0	3	0	0	3	0	3
Voluntary / Visiting Fac.	0	0	0	2	2	0	0	0	2	2
Research & Lab Personnel										
Res. Associates	0	0	0	0	0	0	0	0	0	0
Res. Assistants	0	0	0	0	0	0	0	0	0	0
Microbiologists	0	2	0	0	2	0	1	0	0	1
Res/Field. Investigators	0	1	0	0	1	0	0	0	0	0
WQTL Investigators	1	5	0	0	6	1	7	0	0	8
Lab Technicians	0	3	0	0	3	0	3	0	0	3
Fellows, Interns & Appr.										
Research Fellows	0	0	0	0	0	0	0	0	0	0
Interns	0	2	0	0	2	0	1	0	0	1
General Sup. Personnel										
Project Manager	0	0	0	0	0	0	0	0	0	0
Accountant	0	1	0	0	1	0	1	0	0	1
Front Office Staff	1	1	0	0	2	1	1	0	0	2
Ser. Providers' Personnel										
Security	0	0	2	0	2	0	0	2	0	2
Sanitation	0	0	2	0	2	0	0	2	0	2
All	4	15	7	2	28	3	14	7	2	26

¹ The number of service provider personnel may vary as their deployment changes according to the quantity and quality of service committeents to the Institute. The figures indicated here are based on the personnel on most days.

² Emp=Employee, i.e. Salaried; Stipnd=Stipendiary; Vol=Voluntary; Tot=total,

Annexure-1 provides more details about the current faculty and personnel profile of the Institute. Our faculty and staff participated in several workshops, seminars and conferences, details of which are provided in Annexure-2. A list of outgoing faculty and personnel is given in Annexure-3. All of you are aware that the academic programs have been suspended as we do not have adequate space. Hence, there was no scope to receive the visiting faculties during the reported year.

Now, I will give an overview of activities during the reporting period and also briefly touch upon recent developments during the current year. We will then review the time trend of the Institute's financial performance and consider possible directions for the future. Finally I will seek your comments and approval of the audited accounts of the Institute.

Reporting Period (2012-13) Events and Activities:

As you are all aware, the Institute pursues five broad type of activities towards improvement of public health. These are;

Research and Consultancy Academic Programmes Training Services Public Services, and Publications

A. Research and Consultancy:

Inspite of our best efforts we did not succeed in securing any new research funding during the reporting period. One proposal, namely "Effect of Atmospheric Pollution on Respiratory Morbidity of School Children in Hyderabad" was accepted by the ICMR with a slightly reduced budget. However, the Principal Investigator (PI) Dr. Satish Kumar had left the Institute, by the time ICMR approval was received. After detailed review of the faculty position and discussions with the President, we informed ICMR to consider the project for the year 2014-15 so that we can recruit PI to start the project in April 2004. The communication is yet to receive from ICMR.

In Jan 2014, we could respond and filed a proposal to the Earth Institute, Columbia University to conduct a study on "Gap Analysis in Rural Health Care Institutions in Mahabubnagar District" where Government is implementing the strategy of Reproductive, Maternal, New born, Child illness and Adolescent (RMNCH+A). The Earth Institute considered and commissioned IHS, and we completed the study and submitted the report on 22/2/2014. The report was accepted by them.

Barring the above, we could not get any response from the funding agencies. The list of proposals made and the response is given in the Table-2 for information, further discussion and guidance.

Sl	Project	Potential Sponsor	Status/Remark
1	Oral Hygiene & Dental Problems of Primary and Higher Class Children Studying in Government Schools	Rajiv Vidya Mission	Under Correspondence
2	Assessment of Health Status and Nutritional Condition of School Children in Andhra Pradesh	Rajiv Vidya Mission	Under Correspondence



Table-2 [.]	Projec	t Proposal	ls Submittee	h
		LI IUpusa		ч.

Sl	Project	Potential Sponsor	Status/Remark
3	Baseline Survey of Knowledge, Attitude, Behaviour, Belief and Practices (KABBP) of Electors in Andhra Pradesh State	Genl. Adm. (Elections) Department, GoAP	Selected agency's (CESS) financial estimate lower than that of IHS.
4	Expression of Interest for Consultancy Services for Conducting "Study on Demography, Livelihood Scenario and Access to Schemes and Entitlements among the Yanadi Communities in Nellore District.	Society for Elimination of Rural Poverty	Contacted several times. No definite reply. Stopped follow-up.
5	Factors Affecting Contamination of Drinking Water between Source & Point-of-use and Associated Risk of Gastroenteritis in Slum Areas of Hyderabad City	Ministry of Environment and Forests (MoEF), GoI	No response. Did not follow-up, as the PI has left IHS.
6	Burden of Disease Estimation Methodologies for District Health Planning.	NHSRC	Variation in scope & inadequate allocation
7	Evaluation of District Plans which have made Efforts at Integrating NCDs and CDs		by the NHSRC. Hence, not awarded.
8	Exploratory Study on the Existing Knowledge & Empow- erment of Health Workers in Tribal Health Care Setting	ICMR	Not accepted. Objects not clear.
9	Expression of interest for documentation of good practices (in the form of a compendium) of municipal / city level water supply and sanitation projects in Indian cities.	National Institute of Urban Affairs, New Delhi	Under correspondence.
10	Incidence of Post Source Contamination of Drinking Water in Old City of Hyderabad (Suo-Motto Proposal)	Planning Commission	No response. Stopped follow-up.
11	Impact of Hand Washing Education on Prevalence of Bacterial Infection among the Children in Anganwadi Centers.		
12	Investigation of Cause of Death Among the Deceased/Claimants Covered under DRDA-IKP Scheme	Society for Elimination of Rural Poverty	Unreasonably low scale of funding by SERP. Hence stopped follow-up.
13	An Assessment Study of Integrated Management of Neonatal and Childhood Illnesses (IMNCI) in 20 Districts of Odisha	UNICEF, Odisha	Preferred local org. Hence, not considered.

B. Academic Programs:

1.Masters in Public Health (MPH)

As informed in the last Annual General Body meeting, NTR UHS has given the approvals on course fee and seat matrix for MPH course vide its letters dated 10/07/2012 and 07/12/2012. NTR UHS has also granted consent for affiliation for starting Master of Public Health Course in its letter dated 07/05/2012. The University has also informed IHS that, the permission earlier given by Govt in GOMs.No.173 dated 19-8-2009 is only an essentiality certificate and hence need reconfirmation from Govt to grant provisional affiliation. Accordingly as per the advise of NTR UHS, IHS has requested the Govt in the letter dated 4/1/13 to reconfirm the permission granted to IHS for starting the Master of Public Health Course. In response to this, Govt sought clarification from IHS on the course fee and seat matrix. IHS clarified and also requested the Govt to include the approvals on course fee and seat matrix while giving permission to start MPH course. On this, Govt sought remarks/views from Andhra Pradesh Fee Regulation Committee (AFRC) in its letter dated 31/10/2013 on the feasibility for course fee fixation for Master of Public Health Course. We are yet to receive the permission from Govt.

a. MPH Grant Exploration:

Since last general body meeting, there is no development in raising of grants for MPH Course to meet the estimated gap in revenue.

- b. IHS Land and Campus Development Plan:
 - 1. High Court Case: Members are aware that, the state Government has allotted an extent of Ac16.00 in favor of Institute to build a world class College of Public Health and campus on payment of Rs 10.00 lakhs per acre. The members are also aware that there is Public Interest Litigation (PIL) case before the Hon'ble High Court of AP. Since last AGM, there are no further updates on this issue as the case did not come up for hearing. The case was last posted on 3/6/13. The matter will be pursued with the Advocate. However, on clearance of the court case, we need to pay Rs 160 lakhs towards the land cost.
 - 2. IHS Land and Campus Development Plan: While the PIL case is still pending in the court, parallely, we pursued for change of land use from recreational use zone to institutional use zone. HMDA, after following statutory obligations, approved the land use change and requested IHS to pay Rs. 19,62,428/- as development charges¹ after considering 50% exemption. Though we requested HMDA to allow IHS to pay until the end of May 2014, they permitted to pay before March 2014 along with 10% interest from the date of demand. We need to explore the sources for payment of the above development charges.

C. Training Services:

While training services continue to be a core area of activity of the Institute's long term plans, we have deferred taking up training programmes for the time being. Training services require additional financial supplementation. Further, our infrastructure and human resources are committed to the research and consultancy projects in hand.

D. Public Services:

1. Public Health Laboratory: Drinking Water Quality Testing Services: Since last two years, the laboratory has significantly increased its output and has also been a major source of revenue i.e around Rs 50 lakhs per annum. An overview of revenue from IHS laboratory services is in Annexure-4. The annexure shows that, the major revenue is being generated from HMWSSB for monitoring water quality at various points of water distribution system operated by them. The revenue from other sources like general public and other instituions is very low. However, it has been realsied that, depending on one source like HMWSSB for revenue generation is not a healthy sign for the institute for long term sustenance and hence, we need to focus on general public and other institutions for extending water quality testing services. On an average, we are able to generate about Rs 7,000/- per month by servicing to public. Efforts are being made to improve this area and need suggestion from the members. It is to be mentioned here that, during 2013-14, we are able to generate revenue of about Rs 1.32 lakhs from research agencies / NGOs like (a) Center for World Solidarity under Sustainable Ground Water Management (SuGWM) Project and (b) World Vision India for planning RO Water plants in the inaccessible areas.

¹ HMDA Ltr. No. 2805/MP!/Plg/H/2009 dated 14-12-2010.

2. Library: The IHS is making continued efforts to build its library services to support the Institutes academic programmes and serve the wider community with state of the art literature on various aspects of public health. However, in recent years the scope for proactive acquisition of bibliographic resources has been limited due to financial constraints. In addition, lack of space and a full time librarian is a key constraint in developing the library services.

E. Publications:

List of IHS publications in the reporting year are given in Annexure-5. I am happy to inform that, NMJI in its July / August 2012 edition has published the article, "Availability of doctors at primary health centres of Andhra Pradesh, India" authored by Dr. Prasanta Mahapatra with three others Dr. CK George, Dr. Dayakar Thota, and Mr NS Reddy.

Long Term Projects:

A. Model PHC (Primary Health Care) System Management:

- 1. The members are aware that, IHS has proposed to take up the development of model Primary Health Care Systems in rural, remote and high mortality areas of Andhra Pradesh under Public Private Partnership (PPP). After conducting the feasibility study in Mahabubnagar district, we made a proposal to develop the health care institutions covered in Kodangal and Achampet clusters covering Civil Hospitals and PHCs which are in remote and tribal areas. After examining the proposal, the District Collector agreed for (i) Achampet Civil Hospital & (ii) Padara PHC to be taken up by IHS for management as a model. Subsequently the IHS team conducted the Bench Mark Survey and made an assessment of the infrastructure facilities, staff position, materials and supplies etc., and filed an application on 14/12/2011. The District Collector after examining, forwarded the application with his recommendations to the Director of Health and Commissioner of Family welfare (CFW) on 21/01/12 for consideration. Since then, there is no development on the IHS porposal inspite of continuous efforts by IHS team.
- 2. Recently in January 2014, the CFW advised IHS to modify the proposal to take up management of Kodangal cluster as there was some development in Achampet Cluster in the recent past. As per the suggestion, we again made an assessment of the grant in aid required, modified the proposal to cover Kodangal cluster and filed with CFW. In Kodangal cluster, the area and scope is to cover (a) one Civil Hospital at Kodangal, (b) three PHCs Bomraspet, Angadi Raichur and Doulatabad (c) all the 27 sub centers covered in the PHCs. After examining the revised proposal, the CFW has forwarded to Govt in the last week of Feb 2014 for consideration.

Taking Stock of the Institute's Financial Position:

Classification of the Institute's revenue from domestic and foreign sources as well as by activity is given in Annex-6. In Figure-1 the gross revenue generated by the Institute from the date of its inception has been summarized.

The Institute witnessed a phenomenal growth in revenue during the period between 1999-2003. The trend reversed in 2003-04 with a steep decline in receipts in 2004-05. Since then there has been a steady growth of receipts till 2008 but seen decline again in 2009. But there is an increasing tend in 2010. The receipts again appears to be in decreasing trend in 2011. But there is phenomenal increase in receipts in 2012 after 2003. But again the anticipated receipts for the year 2013 and 2014 appears to be decreasing. The share of foreign sources in the

total receipts of the Institute has been around 10% for the years 2003-04 and 2004-05. In the year 2005-06, share of foreign sources was about 25%. In 2006-07 the share of foreign sources declined to about 15% of the total receipts. Since 2009, there are no receipt of foreign sources.

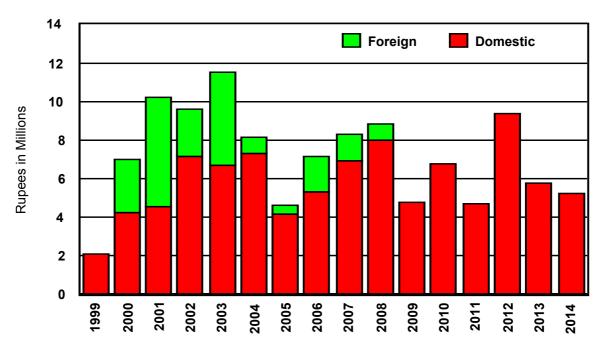


Figure-1: IHS Gross Revenue Trend Since 1999

As is evident from Figure-2, most of our revenue has been contributed by Research and Consultancy till 2012. In recent years, receipts from public services has been increasing mainly on account of water quality testing services.

We are in a crucial phase of the Institute's development. If we get all clearances, MPH course need to be announced to start in the academic year 2014-15 or early 2015 for which we need some initial investment. Govt has also allotted an extent of 16.00 acres for which we need to pay about Rs 160.00 lakhs excluding registration charges and Rs. 19.62 lakhs for development charges. However, lack of human resources, infrastructure and corpus funds for development are major constraints. I look forward for your guidance in addressing these important issues.



Estimate for 2013-14 is based on year to date and anticipated receipts.

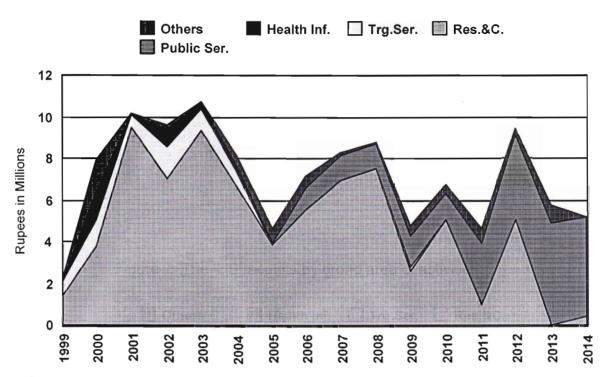


Figure-2: The IHS receipts by broad area of activities

Estimate for 2013-14 is based on year to date and anticipated receipts.

Accounts and Audit Report:

The audited accounts of the Institute for the year 2012 -13 have been enclosed. I now request you to consider the same and give your approval with suggestions if any.

Finally I thank you for having spared the time to participate in this meeting. Your presence is a great inspiration to me, and my colleagues.

I would now request you to consider this report and give your valuable advise and guidance for further development of the Institute. We would like to assure you that we will do our best to translate your ideas and suggestions into action.

1

Date: 12/03/2014

G Surendra Director

The Institute of Health Systems, HACA Bhavan, Hyderabad, AP 500004, India.

Annex -1

Faculty and Personnel Profile Full Time Faculty

G Surendra, Director

Mr G.Surendra holds a Post Graduate Degree in Statistics from Sri Venkateswara University, Tirupati. His first stint was in Vital Statistics (improvement of Registration of Births and Deaths) as a statistician in Public Health dept. After serving 27 yrs in Govt of Andhra Pradesh, he took VRS in the cadre of Director in Bureau of Economics and Statistics and accepted the challenging position in L V Prasad Eye Institute (LVPEI) as Associate Director and Chief Technology Officer. He implemented Health Informatics and Information Infrastructure projects like Tele-Education, Tele-Medicine. He implemented Tele-Ophthalmology in Primary and Secondary eye care centers in LVPEI Health Eye Pyramid. As part of Health Informatics, he evaluated Electronic Medical/Health records and recommended suitable product for implementation besides his contribution to Bio-Medical Equipment Technology and developing Standard Operating Procedures (SOP) for accreditation under NABH (National Accreditation Board for Hospitals). Then he moved to the Institute of Health Systems (IHS) and working for the last two years. At IHS, he acquired skills in health financing and health accounts by developing MTEF for HMFW dept, AP for the years 2008-09 to 2012-13. He also attended the task of health budget & expenditure tracking exercise for the states of AP, MP and Kerala. Further, he is involved in the health systems research like (1) Assessment of Doctor Availability in Primary Health centers and provide inputs for Human Resource Planning for Health and (2) Andhra Pradesh Civil Registration System Study. As Joint Director, Bureau of Economics and Statistics, he conducted Socio Economic Surveys in different areas. He handled a major survey called "Multipurpose House hold Survey (MPHS)" in the year 1995, wherein he was instrumental in designing the survey, field study, data acquisition and building database of all families in State of Andhra Pradesh for use by Govt for various programmes.

During his tenure in District Rural Development Agency (DRDA) as Project Economist, he wrote an Approach Paper on Land Development Projects (LDP) along with Dr Prasanta Mahapatra and submitted a project Report on LDPs to Govt, got sanctioned and implemented. As General manager in APTS, he implemented Information Infrastructure projects. He gave IT Consultancy to Govt of Goa for developing software for 10 departments. As a member of consultancy team he studied and submitted a report on reorganisation of Revenue Dept to Govt of Orissa sponsored under DFID. As Project Manager in HMDA, he got rated HMDA by Fitch Ratings, raised Rs 500 Cr Ioan for ORR Phase-I.

Consultants:

Dr Sai Shankar Pratap

Dr. Sai Shankar Prathap holds an MD in Community Medicine from Guntur Medical College. He is currently an Associate Professor in Community Medicine. Earlier he worked with the World Health Organization (WHO) as Surveillance Medical Officer in the National Polio Surveillance Project; AP State AIDS Control Society (APSACS) as Monitoring and Evaluation Officer for PPTCT (Prevention of Parent to Child Transmission of HIV/AIDS) Program under the Global Fund for AIDS, TB and Malaria - Round II (GFATM-Round II); and Byrraju Foundation led Andhra Pradesh Initiative as a Research Manager. He has carried out research studies on verbal autopsy and rational use of drugs. He also served as a resource person for building capacity in PSBH (Problem Solving for Better Health), safe injection and waste disposal practices and verbal autopsy. He is currently involved in cause of death studies at IHS.

Dr K V Satyanarayana Murty

Dr Satyanarayana Murty holds a MD degree in Social & Preventive Medicine from University of Health Sciences, Andhra Pradesh. He is currently working as Professor of Social & Preventive Medicine, Gandhi Medical College, Hyderabad. As a consultant to ICDS when it was still a central program, Dr Murty has done field evaluation, analysis and reporting of ICDS activities in Kurnool district in 1992 - 1993. He has been a trainer in Universal Immunization Progran for PHC Medical Officers of Kurnool and Anantapur Districts in 1992. Dr Murty has investigated several outbreaks of diseases like Japanese Encephalitis (Anantapur district 1993), Fevers of unknown origin (East Godavari Tribal belt 1996), Gullian Barre syndrome (West Godavari district, 2003 - 2004) and Gastro enteritis outbreak (Bholakpur, Hyderabad (2009). He has contributed substantially to the AP Gastroenteritis Manual published by IHS. Dr Murty was the Lead evaluator of world Bank funded NPCB in one tribal district of Madhya Pradesh in 1999. He also worked as consultant to UNICEF in Border District Cluster Strategy (Adilabad District) in 2001-2002. He was a member of Thesis committee of Osmania Medical College, Hyderabad from 2000 to 2002. Dr Murty has guided more than a dozen theses submitted by doctoral students in Social & Preventive Medicine. He is currently involved in IGNOU project guidance for students of PG Diploma in Maternal & Child Health and also in verbal autopsy of cause of death studies being done by IHS.

B L Srikanthi

B.L.Srikanthi holds a Masters Degree in Food Science and Nutrition from Sri Sathya Sai Institute of Higher Learning (Deemed University), Anantapur. She was recipient of Gold Medal for securing highest percentage of marks in her graduation. A part of her post graduation thesis entitled "Effect of mulberry leaves (Morus Indica L) therapy on plasma and erythrocyte membrane lipids in patients with Type II diabetes" was awarded the best paper of the year by Indian Pharmacological Society in the year 2000. She has 8 years of Teaching and Research Experience. She has successfully coordinated different qualitative and quantitative research studies in different parts of Andhra Pradesh, focusing on maternal and child health, reproductive health, HIV/AIDS among vulnerable populations. She worked with several National and International Agencies like CARE INDIA, Population Council, International Center for Research on Women (ICRW). Important research studies which she successfully coordinated include "Strategic Impact Inquiry" of CARE India's intervention program on sex workers at East Godavari District. This was a Global Study conducted simultaneously in six countries, centrally coordinated by CARE ATLANTA with technical support from ICRW and the Indian study was coordinated by her. She also handled similar studies like "Understanding Sex Workers' Reproductive Health Rights, their Access to Services", "Outcome Evaluation of Frontiers HIV/AIDS Prevention Program in India ": She has earlier worked with Institute of Health Systems, Academy for Nursing Studies, Osmania University College for women and CARE Visakhapatnam in various capacities involving in academics, research studies and intervention programs. Her research areas of & Health surveys, psychological and social factors related to HIV/AIDS among interest include Nutrition women and children.

Voluntary & Visiting Faculty:

Prasanta Mahapatra

Dr. Prasanta Mahapatra, President of the Institute is a physician civil servant. He is a Takemi Fellow in International Health and has a doctorate in International Health and Economics from the Harvard School of Public Health. Very recently he retired from the Government service as Special Chief Secretary to Govt, Genl. Adm. Dept. & Director General for Dr.Marri Chenna Reddy Human Resource Development (MCRHRD) Institute in Hyderabad. Dr. Mahapatra established, for government of AP, the first University of Health Sciences (APUHS) in India, at Vijayawada and became its first Registrar. As Registrar of the APUHS and Director Medical Education, he was responsible for state wide co-ordination and management of tertiary hospitals and medical education services. He was Commissioner, Commissionerate of Medical Services (AP Vaidya Vidhana Parishad), Joint/Addl Secretary Health in Govt. of AP. The health system development projects in various states funded by the World Bank based on the work done by Dr. Mahapatra in Andhra Pradesh. As collector of Nellore, he introduced a collectors office manual, streamlined the public grievance redressal system, conceived and implemented land development projects integrating cadastral survey with soil conservation concepts. He has experience in disaster distress relief management, rural development, general administration and information technology applications in government. Between 1991-1993 he was an International Health Policy Program Fellow and a Takemi Fellow at the Harvard School of Public Health. His research work, during this period, included measurement of public hospital performance, accreditation systems for health care organisations, traditional and herbal medicine etc. Dr. Mahapatra has been a member of the Harvard Burden of Disease Unit from its inception and contributed to the Global Burden of Disease estimates published in the World Bank's World Development Report, 1993. As a faculty in the Administrative Staff College of India, he started a study to estimate burden of disease in AP. He has written books and published articles in research journals. His work include, the book on Estimating National Burden of Diseases, Structure and Dynamics of Private Health Sector, Malaria and GE Manuals, research papers on Cause of Death Reporting System, Health State Valuation, Summary Measures of Population Levels, Health Systems Performance Assessment and Patient Satisfaction Survey. He teaches, mathematics, biostatistics, epidemiology, research methodology, health care management, and health informatics.

Prof. (Lt. Col.) Dayakar Thota

Prof. Thota, who is the Chief Consultant of the Institute is a medical doctor by profession and served in the Indian Armed Forces in various capacities from April 1971 to Sept. 1994. He graduated in medicine from Kakatiya Medical College, Warangal (Osmania University) in 1968 and was in a Private Medical Practice at Peddapalli (AP) till Apr '71. He did his M. Sc. (Defence Sciences) from Madras University in 1981 and post graduation in Hospital Administration (MHA) from University of Poona in 1986. He passed from Defence Services Staff College (D S S C), Wellington and has undergone training as Lead Quality Assessor from A Q A, Hyderabad. After taking voluntary retirement from Army in 1994, he had held many important Medico-administrative appointments such as M S of Nizam's Institute of Medical Sciences, Hyderabad, CEO, Lokmanya Hospital, Chinchwad, Pune, Additional Director, Dhirubnai Ambani Hospital, Coimbatore etc. He was Professor & Head of the department of Hospital Administration at NIMS, Hyderabad and MAHE, Manipal and Director, The Institute of Health Systems He also serves as a P G examiner in Hospital

Administration for AIIMS, AFMC, MAHE, NIMS, DNBE and IGNOU. He is a life member of a number of professional bodies and was a member of academic Board of School of Health of IGNOU and Board of Specialties in Hospital & Health Administration of National Board of Examinations.

Research and Lab Personnel

G. Amrutha, Microbiologist

Ms. G.Amrutha did her Masters with specialization in Microbiology from Sri Sarada PG College, which is affiliated to Osmania University. Her Graduation, from St.Pious Degree and PG College with specialization in Genetics, Biochemistry and Chemistry. She was a Gold Medalist and Cash award Winner for standing as college topper during her entire Post graduation. She also won various shields and prizes during her Graduation and Post Graduation. Presently working as Microbiology Intern from October 12, 2011, till date.

Research / Field Investigators: None Water Quality Investigators:

G. Jayakrishna, B.Tech is on full time with IHS

Fellows & Interns

Name	Qualifications	Project / Learning Area
A.Giri	B.Sc	Systems Administration
D.Vidisha	BA	Front Office Management
S.Gopal	B.Sc,(B.Z.C)	Water Quality Testing
J.Lakshmi	B.Pharm	Water Quality Testing
Vijaya Kumari	B.Pharm	Water Quality Testing
K.Prabhakar	Intermediate	Water Quality Investigation
V.Mahesh Kumar	B.Sc (MLT)	Water Quality Investigation
Abdul Rahman	Intermediate	Water Quality Investigation
D.Suresh Kumar	B.Com	Water Quality Investigation
Shaik Shadab Md	Intermediate	Water Quality Investigation
Abdul Aslam	SSC	Water Quality Investigation
Abdul Moize	Intermediate	Water Quality Investigation

General Support Personnel:

J.Satyanarayana, Accountant

He has completed his MBA (Finance) from Jodhpur National University. Earlier, he worked on 'Billing Area' in Murali Krishna Transports. He Graduated from Modern Academy, Vijayawada with specialization in Taxation. Presently, he is working as an Accounting Intern at The Institute of Health Systems.

D Krishna Veni, Front Office Executive Assistant

Ms. Krishna Veni has a degree in Bachelors of Science from Osamania University. At the Institute she serves as the Personal Assistant to the Director and is responsible for management of library services including Front Office Management.

Service Provider Personnel:	
Provider	Service
Parteesh	Sanitary Services
Metro Management Security Agency	y Security, House Keeping and Sanitary Services

Service Provider Personnel



Annexure-2

IHS Participation in Training Programs, Workshops, Seminars and Conferences for April 2012 - March 2013 (and till Feb. 2014)

Dr. Prasanta Mahapatra, Hon. President:

Course/Workshop Title	Institution	Dates
Scientific and Technical Advisory Meeting, AHPSR, WHO Hqrs. Geneva.	WHO - Alliance for Health Policy and Systems Research	3 - 4th May 2012
Second Global Symposium on Health Systems Research, Beijing, China.	WHO - Alliance for Health Policy and Systems Research	31st Oct - 3rd Nov 2012.
Scientific and Technical Advisory Meeting, AHPSR, WHO Hqrs. Geneva.	WHO - Alliance for Health Policy and Systems Research	2013 Apr 10-15
Scientific and Technical Advisory Meeting, AHPSR, WHO Hqrs. Geneva.	WHO - Alliance for Health Policy and Systems Research	2013 01-04 Oct

G Surendra, Director

Course/Workshop Title	Institution	Dates
National Workshop on "Critical Appraisal of Emergency Response and Patient Transport Systems in India".	National Health Systems Resource Center (NHSRC), Ministry of Health and Family Welfare, Govt. Of India.	6 & 7th Aug 2012.
Health Systems Global: Mapping a path for the future of health systems research in India and globally (via webinar) by Dr. Sara Bennett, Johns Hopkins Bloomberg School of Public Health (USA)	Public Health Foundation of India (PHFI)	18th Apr 2013
LabVIEW and Data Acquisition Seminar	National Instruments	28th Jun 2013
Workshop on Plastic Waste Management	Environment Protection Training and Research Institute (EPTRI), Hyderabad	18th Nov 2013

Satish Kumar Kannapa, Faculty

Course/Workshop Title	Institution	Dates
Family Planning Summit: CSO Consultation Workshop	Hindustan Latex Family Planning & Promotion Trust (HLFPPT), Hyderabad	29th May 2012

G. Amrutha, Microbiologist, & Head, IHS WQTL.

Course/Workshop Title	Institution	Dates
Impact of ground water quality in Hyderabad and importance of rain water harvesting	Joint Action of Water (JAW), Hyderabad	23rd May 2012
Symposium on challenges of building complexes and integrated systems across industries and application areas and their products	National Instruments	9th Nov 2012



E. Ashwini, Microbiologist

Course/Workshop Title	Institution	Dates
Impact of ground water quality in Hyderabad and importance of rain water harvesting	Joint Action of Water (JAW), Hyderabad	23rd May 2012
Symposium on challenges of building complexes and integrated systems across industries and application areas and their products	National Instruments	9th Nov 2012



Annex - 3

Outgoing Faculty & Personnel in 2012-13 & 2013-14 (Ytd) Research & Lab Personnel:

Name	Designation	Join date	Leave date	Remarks
2012-13				
D.Abhilash	Lab Technician	01/01/2011	18/05/2012	Resignation
M.Sona	Lab Technician	01/07/2011	24/12/2012	Resignation
2013-14				
Dr.Satish Kumar K	Faculty	03/08/2010	04/08/2013	Resignation
Research Investig	ators & Field Inves	stigators:		
Name	Designation	Join date	Leave date	Remarks
2013-14				
E.Dinesh	Field Investigator	05/04/2010	03/08/2013	Resignation
Project Interns:				
Name	Designation /project	Join date	Leave date	Remarks
2012-13	1 5			
Abdul Haseeb	Water Quality Investigator Trainee	15/09/2012	06/10/2012	Termination
Syed Samee	Water Quality Investigator Trainee	05/04/2012	03/12/2012	Resignation
L.Kamalakar	Water Quality Investigator Trainee	01/12/2011	10/12/2012	Termination
N.PraveenKumar	Lab Technician Trainee	12/10/2012	31/03/2013	Resignation
2013-14				
G.Suresh	Water Quality Investigator Trainee	22/02/2013	23/04/2013	Termination
M.Prasanna	Lab Technician Trainee	10/05/2013	16/05/2013	Termination
K.Murali	Lab Technician Trainee	10/05/2013	20/06/2013	Resignation
P.Deepthi	HCSD Intern	10/03/2010	30/06/2013	Term Completion
E.Aswini	Microbiology Intern	30/10/2012	30/06/2013	Resignation

Name	Designation /project	Join date	Leave date	Remarks
B.Venkatesh	Trainee Accountant	04/01/2012	12/07/2013	Resignation
B.Nagaraju	Water Quality Investigator Trainee	28/05/2013	03/08/2013	Resignation
Abdul Hadi	Water Quality Investigator Trainee	01/09/2013	24/09/2013	Termination
Y.Pradeep	Lab Technician Trainee	01/04/2013	03/12/2013	Resignation
K.Govardhan	Lab Technician Trainee	01/11/2013	31/12/2013	Resignation

General Support						
Name	Designation/Project	Join date	Leave date	Remarks		
2012-13						
G.S.Pattnaik	Project Manager	30/09/2009	04/08/2012	Resignation		

Notes:

¹ Join date is the first day of the current spell of personal affiliation with Institute. However, the nature of initial affiliation might have been different from the status at the time of exit. For example, a person may join as an intern or apprentice and may then be employed by the Institute at the end of internship. Similarly, the designation of those employed may change from the date of entry to the date of exit.



Annexure-4

	Revenue from IHS Laboratory Services						
Year			Total				
-	HMWSSB ResPj-EM ResPj-IM Public						
2006-07	1,280,650	212,521	0	20,575	1,513,746		
2007-08	1,263,000	450,000	0	34,465	1,747,465		
2008-09	1,178,680	412,670	0	45,913	1,637,263		
2009-10	1,519,475	100,800	0	75,375	1,695,650		
2010-11	3,057,846	203,500	0	96,325	3,357,671		
2011-12	3,966,215	8,400	0	92,700	4,067,315		
2012-13	4,832,964	0	0	89,775	4,922,739		
2013-14 Ytd	3,670,530	132,750		80,000	3,883,280		

¹ HMWSSB = Hyd Metro Water Supply & Sewerage Board - monitoring of residual chlorine in reservoirs, and slum area; ResPJ-EM = Water quality testing services for research projects in other (extramural) agencies, ResPj-IM = Water quality testing services for research projects in IHS, Public = Over the counter, water quality testing services to general public.

Annexure-5

IHS Publications in 2012-13

Reports:

- RP 59/2013 Andhra Pradesh Civil Registration System Study
- RP 60/2013 Drinking Water Quality Monitoring in Service Reservoirs & Urban Slums in Hyderabad (2010-13) A Report

Articles:

Based on	Availability of doctors at primary health centers of Andhra Pradesh, India
the Critical	Mahapatra P.; Thota D.; George CK, and Reddy NS.
Gaps study	National Medical Journal of India. Jul/Aug 2012.

Working Papers:

NIL

Books:

NIL

Annex-6

			evenue Trei	nds by sour				
Fin.	Gross revenue by sources			Gross revenue by activity Res. & C. Trg. Ser. Health Inf. Public Ser. Othe				
Yr. ¹	Domestic	Foreign	Total	Res. & C.	Trg. Ser.	Health Inf.	Public Ser.	Others
1991	0	0	43,905					
1992	0	424,088	424,088					
1993	50,000	380,000	430,000					
1994	275,042	774,568	1,049,610					
1995	445,517	403,604	849,121					
1996	160,186	768,447	928,633					
1997	835,250	103,612	938,862					
1998	305,100	599,266	904,366					
1999	2,066,525	0	2,066,525	1,440,625	665,900	7,500	42,542	134,053
2000	4,249,243	2,720,925	6,970,168	3,834,275	1,237,020	1,318,650	21,569	1,547,08
2001	4,560,092	5,668,363	10,228,455	9,527,906	596,257	0	36,152	68,140
2002	7,162,946	2,451,095	9,614,041	7,029,835	1,556,105	822,950	37,236	167,91
2003	6,718,690	4,784,857	11,503,547	9,389,693	1,043,050	240,000	53,384	39,99
2004	7,329,734	826,363	8,156,097	6,676,243	744,408	90,750	142,190	529,53
2005	4,180,215	470,160	4,650,375	3,872,674	0	0	98,175	679,52
2006	5,319,507	1,845,761	7,165,268	5,555,979	0	0	1,045,095	612,519
2007	6,898,526	1,414,996	8,313,522	7,010,918	0	0	1,164,000	138,604
2008	7,985,882	840,277	8,826,159	7,564,690	0	0	1,174,555	86,91
2009	4,808,436	0	4,808,436	2,647,624	175,000	0	1,515,120	470,692
2010	6,774,122	0	6,774,122	5,054,076	0	0	1,285,368	434,67
2011	4,699,440	0	4,699,440	1,030,706	0	0	2,907,903	760,83
2012	9,408,422	0	9,408,422	5,088,933	0	0	4,077,380	242,10
2013	5,809,751	0	5,809,751	0	0	0	4,922,964	886,78
2014 ²	5,232,980	0	5,232,980	454,500	0	0	4,778,480	

¹ Institute's financial years are from April to March. Here each financial year is represented by the calendar year in which the financial year ends. For example; 1991 = FY 1990-91.

² Figures for current financial year (2013-14) is an estimate based on year to date + anticipated receipts.

³ Res.&C=Research & Consultancy, Trg. Ser.=Training Services, Health Inf. = Health Informatics,

Ser.=Services

Date: 12/03/2014

Sw G Surendra Director

-

