

Acknowledgement

Operationalisation of First Referral Units (FRUs) is an important component under the Reproductive and Child Health (RCH) program. The working group on health care for women and children for tenth five-year plan had identified establishment of fully functional and operational FRUs as the priority area for the provision of Emergency Obstetric and New Born Care.

The Executive Committee of NRHM in its meeting held on Aug. 30, 2013 decided that the evaluation study of FRUs for identifying gaps in the existing health facilities be carried out with the assistance of SIFPSA. In compliance to the EC decision, Director General (Family Welfare), Uttar Pradesh through office letter no MCH/FRU/2013-14/4903 dated 3rd September, 2013 requested SIFPSA to provide assistance in gap analysis of 206 FRUs in the State as per the checklist provided by NRHM.

Collecting filled-in formats based on FRU checklist from 75 districts was a big challenge. With the support of Divisional PMU & concerned DPMUs all filled-in schedules were collected and data was entered in the format prepared and managed by FPIS division of SIFPSA.

Analysis of the data that had been compiled at the State, Division and FRU levels was carried out. The entire facilities offered by the FRUs were divided into 12 Sections namely (i) Physical Infrastructure, (ii) Functional and clean labor room, (iii) operation theatre, (iv) Human resource, (v) training status of HR, (vi) Equipment, (vii) Essential Drugs and supplies, (viii) Laboratory services, (ix) Record maintenance, (x) Referral linkages, (xi) IEC display and (xii) additional support services and an attempt was made to analyze the gap in services offered by the FRUs. Each section presents the State level as well as Divisional level status. The sections also describe the Gaps in FRUs (DWH/DCH/CHC/SDH).

SIFPSA, a joint endeavour of GOI, GoUP and USAID, was originated in the year 1994 for implementing the USAID supported IFPS project which was operational from 1992 to 2013 with the broad objective of increasing access, improving quality and promoting demand of RCH services, the primary goal of SIFPSA was to assist the state of U.P. in reducing the rate of population growth to a level consistent with its social and economic objectives.

GOUP, GOI and USAI agreed that based on vast experience in the sector, SIFPSA should build on its expertise and transform into a vibrant and sustainable Technical Consultancy Organization, meant to play a role of an Advisory Body to GOUP in supporting the actions of Govt./NRHM or for non-govt. organizations working in health sector. Leveraging on its legacy it should focus on its core competencies i.e. Reproductive Health with effective Programme Management.

Recognizing the technical and management strength of SIFPSA, the Governing body recently approved SIFPSA's new role as a State Technical Support Unit for RCH (STSU-RCH), to play a leadership role in extending technical assistance and project management support to NRHM and other government programs in the area of RCH with a focus on Family Planning.

The GAP analysis in 206 FRUs situated in State was assigned to SIFPSA. On behalf of our organization, we take this opportunity to express our gratitude to the Director General- Family Welfare (U.P.), particularly Dr. Baljit Singh Arora for entrusting us with this important assignment.

Thanks are also due to Dr. Neera Jain, GM (MH) SPMU-NRHM and Dr. Vijay Laxmi, AD (MCH), DoFW for their inputs. Our appreciation also goes to the health officials in the districts for sending filled checklist.

We hope that Gap analysis would be quite useful and facilitate Family Welfare Directorate/SPMU-NRHM in fine tuning the functionality of FRUs in Uttar Pradesh.

November, 2013

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