District Attachment Report

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DISTATTACH_TORUL_D12.PDF (1.56M)

TIME SUBMITTED SUBMISSION ID

19-MAR-2017 07:06PM

786029201

WORD COUNT

2714

CHARACTER COUNT 14537

District Attachment Report: Mehsana, Gujarat

WST, Phase 1 2016

Part A	Role of the Superintendent of Police
Part B	Health

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Role of the Superintendent of Police

The Superintendent of Police is responsible for the law and order function of administration in a district. We studied the SP's role in Mehsana District and also visited the various branches of SP Office, a Police Station as well as the district Jail. Below are some of the key observations.

Mehsana had very good infrastructure in terms of buildings, computerization etcetera across different administrative offices including the police infrastructure and facilities.



Mehsana is a politically sensitive district and is the home district of our current Prime Minister Mr. Narendra Modi and the current Deputy CM of Gujarat, Nitin Bhai.

Also it was the hotbed of the Pattidar agitation and it is here that the entire episode started. The SP Sir was extremely kind in sharing his insights about how this law and order problem was tactfully diffused.

The powers of the SP can broadly be divided into 4 categories:

- Crime Control
- Law and Order
- Disciplinary
- Others

Accordingly his office is divided into different branches to look into the same.



Police Head Quarters, Mehsana

Various branches in SP Office:

• LOCAL INTELLIGENCE BRANCH

- Headed by an Inspector rank official
- o Deals with Passport Verification related intelligence
- Local VIP Intelligence

CONTROL ROOM

- o The 100 Police phone number
- Headed by an ASI/SI rank official
- o Complaint registration on phone
- o All calls are documented through registers
- o Crime Report Preparation on daily basis
- o All VHF sets and communication instruments controlled here

READER BRANCH

o Crime review of the district

REGISTRY BRANCH

o Handles all the internal and external dak of the office

MAHILA CELL/POLICE STATION

- o Deals with women related crimes
- Women police officers in civil dress that respond to women related crimes through a dedicated MAHILA HELPLINE NO 181

APPLICATION BRANCH

- o Where all the applications from citizens are received
- o Completely computerized branch



E-Fariyad: The Online Complaints App

DSP HEADQUARTER OFFICE

- o Responsible for Police Lines, Parades, Police Grounds
- o For the overall functioning of police headquarters

OFFICE SUPERINTENDENT

- o The administrative and clerical staff branch
- Deals with all payroll related matters
- o Accounts branch is a part of this
- Comprises 3 Head Clerks and a staff of 32

AMMUNITION STORE ROOM (SHASTRA BHANDAR)

- o Ammunition mostly comprised of INSAS and Ak47 rifles
- o Regular cleaning and maintenance of arms done

CLOTHING STORE ROOM

 All the uniform, helmets and other clothing requirements of the police constables are met through this central requisitioning



The Clothing Store

RESERVE POLICE BATALLION

- o The armored unit of the district police, under SPs direct control
- Headed by a Sub-Inspector

• SPECIAL OPERATIONS GROUP

- o Under administrative control of SP but reports into ATS (Anti Terrorist Squad)
- o Headed by an Inspector
- o Responsible for Phone Interception and CDR Analysis
- o Security of vital installations/hotels and guest houses
- Team of 2 + 15

MOUNTED BRANCH

- o 1 Batallion of Mounted force is stationed at Mehsana
- Consists of horses and camels

DOG SQUAD

o A dog squad with 2 dogs is also stationed for tracing criminals/explosives

CYBER CRIME CELL AND COMPUTER BRANCH

- Led by a police Sub-Inspector + 2 Constables
- Have undergone cyber training
- o Dedicated Cyber Suraksha Kendra



The Cyber Cell



The Mehsana Police Mobile App: Snapshots



MODUS OPERANDI BRANCH

 Tracking of crimes and to understand the modus-operandi of a crime to trace criminals and possible suspects

FORENSICS BRANCH

- o Includes the finger printing bureau
- o Also houses an FSL Unit

TRAINING CENTRE

 The police headquarter also houses a training centre where different trainings are help on specific policing areas like cyber crime, forensics etc

THE POLICE LINES

ADMINISTRATIVE SETUP: The police lines are headed by the DySP, Headquarters under the supervision of the SP. He is responsible for the overall upkeep of the lines infrastructure including its renovation, any personnel issues, quarter allocation etcetera.

POLICE WELFARE: The police welfare is also supervised by the SP through the POLICE WELFARE SOCIETY to which all the personnel regularly contribute. This fund is then used for helping any policemen in adverse circumstances or in need of financial help. These funds may also be used for scholarships etcetera of children of policemen.

DISCIPLINE ENFORCEMENT: The discipline enforcement in the policemen is also key for having a disciplined, efficient workforce. For this regular parades are held from Monday to Friday under the DySP, HQ.

HUMAN RESOURCE ISSUES: Training of new recruits is also done in the police lines. Also leave and other matters are dealt with by the administrative setup here.

INFRASTUCTURE: Quarters are maintained via PWD and built by the Gujarat Police Housing Board.

POLICE STATION- THANA

We visited the Mehsana Taluka Police Station headed by SHO H R Goswami (Police Inspector). The infrastructure of the Thana was fairly good in terms of

- Waiting rooms (called SWAGATH KAKSH)
- ❖ NAGRIK SUVIDHA KENDRAS
- Toilets including separate Women's toilets
- Proper lighting and fan facilities
- Gender Diversity: of the 64 personnel at the thana, there was 1 female Sub-Inspector and 4 Lady Constables

REGISTERS MAINTAINED IN THANA:

- STATION DIARY
 - o For crime registration and complaint registration
 - $\circ\quad$ On an average the thana has 1 or 2 FIRs registered per day
- FIR REGISTERS
 - o The FIRs are divided into 3 categories and have 3 FIR register types

- Part 1: Serious Crimes
- Part 2:Less Serious Crimes
- Part3:Prohibition Cases
- LOCKUP REGISTER and ARREST REGISTER
 - o Two separate arrest registers are maintained for judicial arrests and others
- PUBLIC NON COGNISABLE OFFENCES REGISTER
- POLICE NON COGNISABLE OFFENCES REGISTER
- HISTORY CHEATERS REGISTER
- JANWAJU REGISTER
 - When information is received and the police investigates whether a crime was committed or not
- ACCIDENTAL DEATH REGISTER
- LOCAL INTELLIGENCE BRANCH REGISTER
 - One HC/ASI is assigned to this desk in every thana
 - His primary responsibility is passport verifications and he reports to the IB Branch in SP Office
- SUMMONS, WARRANTS and NOTICE REGISTER
 - One Head Constable is on duty to serve court summons and warrants in the thana's jurisdiction
- VILLAGE CRIME NOTE
 - o Registers 1,2,3,4
- ARMS and AMMUNITION REGISTER
- EXPLOSIVES REGISTER
- RTI REGISTER
- DEADSTOCK REGISTER
- PUBLIC ARMS REGISTER
- DAY BOOK REGISTER
 - For Thana's accounts maintenance
- RECOVERY REGISTER
- ATTENDANCE REGISTER
- RECORD DESTROY REGISTER
- TELEPHONE INCOMING OUTGOING REGISTER
- HOSPITAL VARDHI REGISTER
- MOTOR VEHICLE ACT 207 REGISTER
- RTO MEMO REGISTER
- GUJARAT (BOMBAY) POLICE ACT NC REGISTER
- JANVA JOG REGISTER
- LOCAL APPLICATION REGISTER
- ACCUSED ATTENDANCE REGISTER
- M CASE REGISTER
- CHARGESHEET RAVANGI REGISTER

MUDDAMAL REGISTER

FIR LODGING PROCESS

The FIR Lodging register is diagrammatically represented below:



CRIMES

- Major cases are of accidents on Highway
- Other cases usually include 307/302/392/395

The number of SC/ST Atrocity Complaints registered in last three years is as under:

Year	No of cases
2014	04
2015	08
2016	08

ISSUES IN COORDINATION WITH JUDICIARY

The policemen were more or less satisfied with their relation with judiciary. However they felt that the Courts should take stricter action and understand how hard a job it is to curb crime and catch criminals. Also the Duty Magistrates should cooperate and not show distrust. It pains them greatly when after a lot of hard work they catch a criminal and the Duty Magistrate accuses them of lying or suspects them of being in cahoots with the criminals.

ANALYSIS and CONCLUSION

The Police administrative setup in Mehsana was fairly organized and some of its positives included the high level of computerization, the friendly and non-intimidating environment and the women friendly practices. Even the district Jail was in good condition and had a very good hospital. However there were also a few points where there was scope of improvement- and this was mostly linked to the personnel issues. For example, the Cyber-cell was very impressive but there was only 1 trained and 1 undertraining constable in the entire cell. The Jail hospital had clearly had no doctor visit for atleast a few weeks.

In conclusion, the visit with the police in Mehsana was very insightful and gave us a sneak peek into the everyday challenges faced by the Police. It sensitized us to the needs of coordination amongst the police and civil administration. It will also be useful in relating our Law lessons to practical work in the field. It also helped us again understand how the human element is perhaps the most important part of administration- and technology and infrastructure, though important, are only enablers.

Health Administration

As part of the Health function, we visited the District Hospital of Mehsana, Gujarat which was easily one of the best run government facilities I have ever witnessed. The dedication and personal oversight of the CMO had done wonders for the patients and staff alike. Through small incremental changes, the hospital had been made a role model in sanitation, waste disposal, patient privacy etcetera.

THE INSTITUTIONAL ARRANGEMENT



General Hospital, Mehsana, Gujarat

- DISTRICT LEVEL: The District Health Society was supervised by the Civil Surgeon in its medical related role and the Chief District Health Officer in its Health related functions. Thus the primary interface for the patients remained the Civil Surgeon.
- **BLOCK LEVEL:** At the Block level, the health function is under the Taluka Health Officer. Here the chief focus is on primary health care and preventive care.

- + HSC LEVEL: Led by the Medical Officer and the focus is preventive care through Community Health Centers.
- VILLAGE LEVEL: At the village level, the institution is the Primary Health Centre of a Sub-centre with focus on Preventive health Care, Institutional Deliveries, Immunization etcetera. This setup is run by the ASHA and Anganwadi workers at village level.

PROGRAMMES BEING IMPLEMENTED

- · National Health Mission
- Rashtriya Swasthya Bima Yojana
- National AIDS Control Programme
- National Programme for Control of Blindness
- National Tuberculosis Control Programme
- Screening for Lifestyle diseases like Diabetes

Status of Service Delivery and Programme Implementation at District Hospital/PHC

- 140 bedded hospital with a generic medicine store.
- Doctor and staff availability was adequate with no vacancies. This is an advantage of being in the district head quarter and being highly accessible.
- Facilities included a plastic surgeon, 10 dialysis machines (donated or CSR sponsored)



Dialysis Machines

- Ambience was patient friendly and the cleanliness levels fairly good.
- 4 super specialization OTs are under construction
- For privacy, curtains have been given even in general wards



The General Ward with Curtains

The New born child care unit is very well equipped. Besides permanent pediatricians, consultant super-specialists also visit the unit.



The New Born Care Unit

- There is a dedicated ART system. The hospital caters to 2500-plus HIV+ patients. They are given regular consultations and if they don't come, they are called on phone to come.
 - They are also paid a sum of money on every visit and the programme has had great positive benefit for the patients. Over all, the number of patients has decreased and the number of registered patients has increased.
 - Also counseling sessions are held for community sensitization and control of transmission of AIDS.
- Disposal is segregated through easy colour-coding



Segregation of Waste

- Regular OPD is about 700-800 patients a day. Besides the regular staff, Consultants are regularly visiting the hospital.
- The hospital has a separate 24-hour Trauma Centre supervised by an MO and also a dedicated ICU.
- The OPD Registration is free. This has helped reduce the queues and enhance patient's experience.
- Cricket League is organized for the staff members
- The Rogi Kalyan Samiti members are quite active and they do regular rounds and give feedback
- Special Camps and NCD Screening are organized regularly:
 - Regular camps are organized for cleft lip and cleft palette
 - Cancer Screening Camps are also regularly done in which mammography and papsmear tests are done
 - A Hemophilia Club for psychological support and discussions
 - Dedicated Area Screening targets are given to CHCs and PHCs for diabetes and other lifestyle diseases screening
- A Memorandum of Understanding (MoU) has been signed with Sakhi Mandal for the welfare of Hospital Nurses
- * The Generic medicines pharmacy was another eye-opener

- Here we saw how the same drugs are being supplied by as low as 10% of the branded drugs by the same reputed companies as generics
- This has drastically helped reduce out-of-pocket expenditure for a lot of patients
- It has also reduced government's outgo on medicines being supplied free of cost to patients
- This is clearly an idea whose time has come



The Generic Medicine Pharmacy

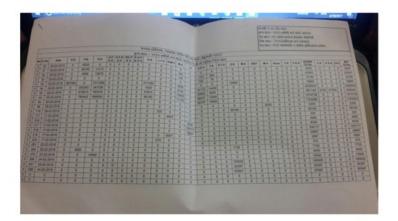
- * The hospital is also using innovative methods for Additional Funding
 - Pay and park facility earning approx. Rs 40000 per month
 - CSR and Sponsor donations- usually taken in kind to avoid lengthy procedures
 - RSBY- has earned an income of 87 Lakhs in last 5 years
 - Additional private rooms with good facilities and high rents are under construction
 - Rogi Kalyan Samiti Funds for renovations

- The <u>Patient Experience</u> was sought to be made comfortable through a range of small changes as listed below
 - Good and clean drinking water dispensers at a lot of places
 - Air Coolers to keep patients comfortable in the heat
 - Clear directions and signage
 - Electronic Cash Collection
 - A Health Club
 - The hospital also has an in-house library for patients
 - Music system in wards for the patients
 - RFID locks for maternity wards and for children
 - Hot food trolleys for ensuring patients get warm and fresh food
 - Yoga Shivirs are organized at regular intervals for health awareness
 - A clothes bank has been created for the needy/destitute
- For the old infirm and differentially-abled there is a dedicated department for issue of certificates.
- A rehabilitation centre has also been setup for differentially-abled individuals
- Family planning is not a large concern in the district
 - Earlier family planning was target oriented, but now there is limited government focus on thisbut targets are still followed
 - Couples are given counseling, awareness is spread
 - Operations like tubectomy are done for willing couples
 - Condoms are distributed
 - Under RMNCH (Reproductive, Maternal, Newborn, Child and Adolescent Health Care), counseling is done
- * Endemic Diseases in the district
 - Stones are quite common
 - No other endemic diseases
- Malnourishment related measures:
 - A Nutrition Rehabilitation Centre is functional in the hospital
 - Breakfast and balanced food is provided here and a target of 5-10% weight gain in 2 weeks is taken If it is not met, the child is referred to the pediatrician
 - The 108 ambulance service and helpline is widely used for this

FINANCIAL MANAGEMENT

- · The administrative wing is responsible for the financial management
- · The hospital uses a Single Entry Accounting System for its books
- All accounts are computerized including all government grants

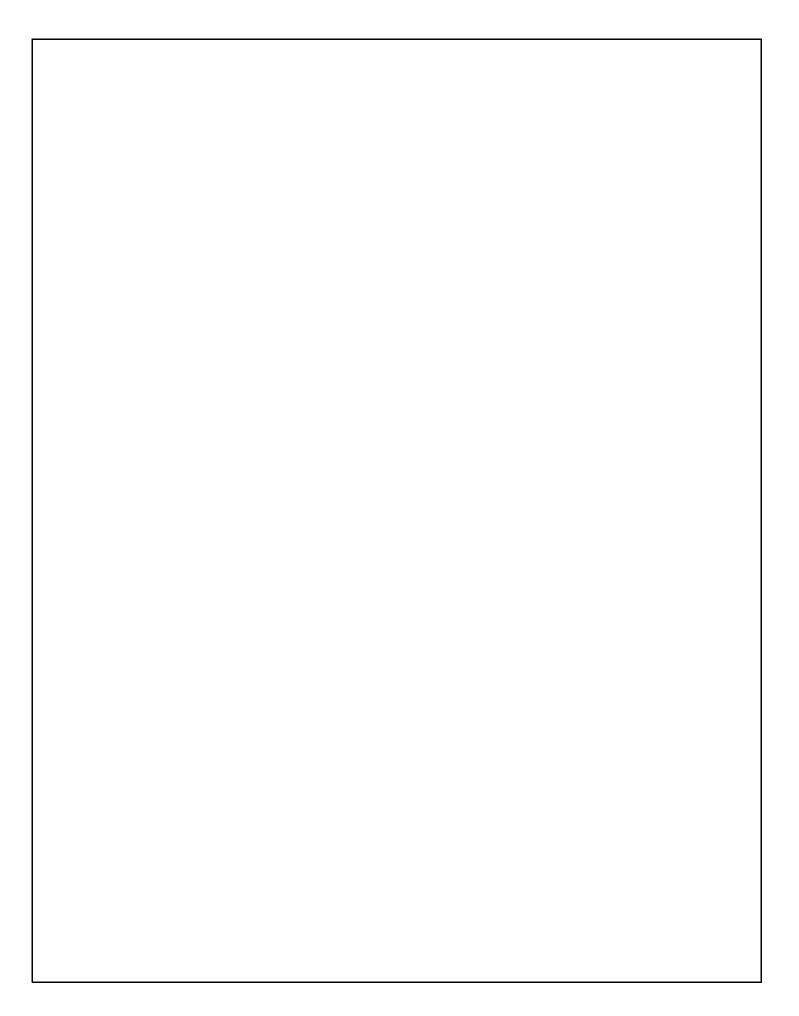
- · The hospital has about 6-7 bank accounts for different heads like
 - RSBY
 - Rogi Kalyan Samiti
 - Blood Bank
 - ICDS
 - Regular Government funding
- All accounts are with HDFC Bank
- HDFC bank also assists with cash management and cashless payments at the hospital
- · Internal audits are regularly done at the district level
- In December 2016 there was a State government audit of the hospital by the AG Rajkot
- The hospital had an income of Rs 60 lakhs in 2015-16, a tremendous achievement definitely
- These funds are used at the discretion of the local executive committee
- · The financial statement of the hospital is attached below:



ANALYSIS AND CONCLUSION

We feel fortunate to have visited a District Hospital where such an effective model of health care is being implemented. This goes on to show how the dedication and perseverance of the Medical Officer, combined with good infrastructure and latest technology can go a long way in achieving what is usually seen as an impossible in our country- a well functioning Public Health Care System that is affordable, efficient and effective.

The visit to the hospital was perhaps our greatest learning in the entire District Attachment Module. It gave us a lot of healthcare sector specific ideas besides helping us understand the need for small incremental changes in making a long term impact.



District Attachment Report

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