



भारत सरकार / GOVERNMENT OF INDIA  
रेल मंत्रालय / Ministry of Railways  
दक्षिण रेलवे / Southern Railway

प्रधानकार्यालय/ Headquarters Office,  
Planning Branch,  
चेन्ने - 600 003/Chennai - 600 003.

No.G.275/WSSR-331920 / 2020-21

Dated: 29.12.2020.

**DRM / TPJ**

Sub : Work study to review the Staff Strength at Health Units over  
TPJ Division

Ref: (1) SDGM's D.O. letter No.G.275/Annual Prog./2019-20  
dated 22.05.2019.

(2) CMS/GOC's letter No. T/MD.108/MPP dated 27.06.2019.

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A work study on the above subject was conducted by Headquarters  
Planning Branch and a report on the same is attached.

As the report is to be finalized within eight weeks, it is requested to take  
expeditious action and advise this office in this regard.

A copy of the work study report may be given to organized labour.

This has the approval of SDGM.

**(D. JAYARAMAN)**

Dy. Chief Planning Officer  
for Senior Deputy General Manager.

Copy to: PCMD/MAS

(Encl: One copy of the study report)

The Director (E&R)/Rly.Bd/NDLS for information.

(e - copy of the study report)



**G.275 / WSSR – 331920 / 2020-21**

**WORK STUDY TO REVIEW THE  
STAFF STRENGTH AT  
HEALTH UNITS OVER TPJ DIVISION**

**SOUTHERN RAILWAY**

**PLANNING BRANCH**

**G.275 / WSSR- 331920 / 2020-2021**

**WORK STUDY TO REVIEW THE  
STAFF STRENGTH AT  
HEALTH UNITS OVER TPJ DIVISION**

**STUDIED BY**

**WORK STUDY TEAM  
OF  
PLANNING BRANCH**

**DECEMBER 2020**

( i )

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**(i)**  
**ACKNOWLEDGEMENT**

The work study team acknowledges the valuable guidance rendered by Sr.DMO/HU/TPJ(Co-coordinating Officer), Chief Pharmacist/HU/TPJ(Co-ordinating Supervisor), Medical officers, Pharmacists and other staff of Health Units/TPJ,TP,TJ,SRGM,VRI,MV,TVR and TNM for their valuable guidance in conducting the work study.

**(ii)**  
**AUTHORITY**

Annual programme of work studies approved by SDGM for the year 2019-20

**(iii)**  
**TERMS OF REFERENCE**

Work Study to review the staff strength at Health units over TPJ division

**(iv)**  
**METHODOLOGY**

The following methodology has been applied while conducting the study.

1. Collection and compilation of data.
2. Study, Indian Railway medical Manuals, Instructions and Yardsticks of Medical Department.
3. Observation of field activities and the present system of deployment.

(v)

**SUMMARY OF RECOMMENDATIONS****REVISED RECOMMENDATION**

The following posts are found excess to the requirement and the same may be surrendered and credited to the vacancy bank.

Sl. No.	Category	G. Pay	Level	No.of post
1	House Keeping Assistant	1800	L-1	2
<b>Total</b>				<b>2</b>

**CHAPTER – I****1.0 INTRODUCTION**

- 1.1 Development of Medical Department in Railways: Till 1947, the different Railway companies (numbering about 42) had their own policies, systems with regard to medico – social amenities. Some companies excluded Class IV staff from such facilities and some others the families of Railway men. Based on the recommendation of Dr. E. Somasekhar then CMO/S.Rly, a separate cell was created under an OSD (later converted as JD and then Director / Health) an Organisation with unified procedures and rules was created in 1955. Dr. H.N. Kunzru (Kunzru committee report on Railways 1963) had appreciated the Railway medical service as “being second to none in the country”.
- 1.2 The service of Railways is a continuous, round the clock service, About 14 Lakhs serving employee and nearly about retired employee scattered at various points and Places. Hence a separate medical establishment was considered as a welfare activity and it has grown into a large organization in Railways with 125 Railway hospitals (inclusive of Railway Hospital/Divisional Railway Hospital /Sub divisional Railway Hospital) and around 590 Health units.
- 1.3 Unlike other central and public sector organizations, Railways has its own fully fledged medical department to take care of the wellbeing of the employees and their dependents. The days are not far off for the Railways to have its own Medical College a multi-storied building is being built at Perambur in housing high standard facilities in par with leading private hospitals and enhanced ward capacity for in-patients, various specialties.
- 1.4 The need to maintain the organisation in a state of constant readiness to keep pace with exigencies of medical relief to passengers in the event of accidents by providing first aid to injured passengers and shift them to a nearby hospital for further treatment.

- 1.5 The Railway Medical Department also ensures maintenance of higher order of sanitation in Railway Stations and colonies. It co-ordinates with the health organization of state government with regard to prevention of communicable diseases, family welfare programme etc., and conducts medical examination for candidates and employees so as to give their best output to the Railways. With the rapid advances in medical technology in the curative field, it has become necessary to update with advancement and ensures that the services rendered at Railway hospital are second to none of their kind.

In-fact railway medical department has taken a lead over the others and in particular for treatment to cardio related diseases. The cardiology department not only treats railway employees and their wards but also attends non-railway people on nominal payment as the common public prefers treatment at Railway Hospital for the reason it is not only economical but also for the best services compared to other private hospitals.

- 1.6 Indian Railway Health care delivery system has to perform following two important functions.

- 1) Function related to Industrial medicine,
- 2) Function related to Medical treatment to Railway beneficiaries.

1.6.1 Function related to Industrial medicine

- To attend Railway Accidents & untoward Incidents
- To provide emergency medical treatment to travelling passengers
- Pre employment medical examination to allow only fit & suitable candidates to join services
- Pre medical examination (PME) of serving employee to allow fit person to continue in those job
- Medical board and other certificates of serving employee
- Control on loss of man-days on account of sickness is kept under control by medical officer



- Safe water & food supply at Railway stations
- Ensuring factories act & Workman compensation act
- Certification of dead bodies at Railway stations, Yard lines and Railway lines

#### 1.6.2 Function related to Medical treatment to Railway beneficiaries.

- Curative health care (Primary, Secondary and Tertiary levels)
- Preventive health care
- Promotive health care

1.7 The prime motto of the Planning Branch/HQ/Southern Railway is to right size the man power in all the areas of the Zone on the interest of enhancing the productivity and to make things to achieve the target operation ratio.

1.8 The present trend of increasing Staff cost after implementation of the 7<sup>th</sup> Pay Commission will result the higher Operation Ratio further. Since the Staff costs alone took about 45% in the total expenditure, an urge is to identify the very optimum Man power in all the Units, in such a way this Work Study is conducted in the Health Units over TPJ division.

- Railway Medical department is headed by a Director General Railway Health service(DG/RHS)-Railway board, New Delhi.
- At Railway Board level, the DG/RHS is assisted by Executive Director(ED/General), Executive Director (ED/Planning), Director for health &Family welfare, Director /Industrial health and other officers.

Zonal level, the operations of the medical services are headed by a Chief Medical Director who acts as the administrative head of the entire zone. The CMD is assisted by CHD. Additional chief medical Director (ACMD), Dy.CMD.

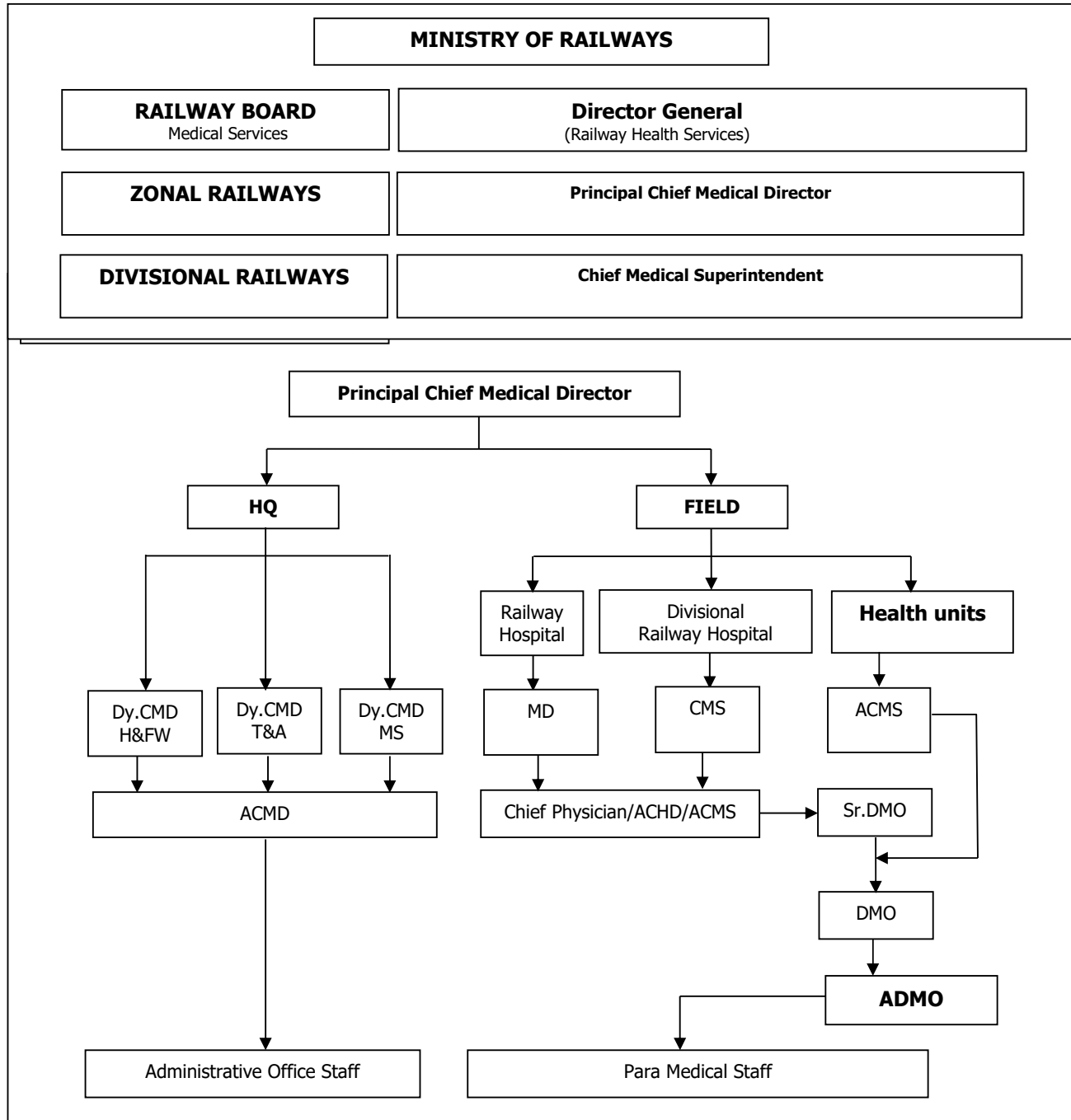
- At divisional level, the operation are headed by Chief Medical Superintendent (CMS). In some divisions, Additional Chief Medical

Superintendent (ACMS), or Medical Superintendent (MS) in charge head the functioning of the medical department.

- At Sub-divisional or peripheral level, the operations might be headed by Additional Chief Medical Superintendent (ACMS) or Senior Divisional Medical Officers (Sr. DMO) and in some cases, by the DMO.

- **HEALTH UNIT**

It is a dispensary giving treatment for all emergency and normal sickness. It is comparatively small in size based on the population / patients, Doctors, Nurses, pharmacists, dressers available in Health Unit in a required level to give treatment for serving, retired railway men.

**2.0 PRESENT SCENARIO****2.1 Hierarchical set up of Medical Department in Railways**

## 2.2 Health Unit/ Tiruchchirappalli (TPJ)

### Statement of Sanction Actual Vacancy & Excess

S. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Chief Nursing Superintendent	9	5400	-	1	-	1
2	Senior Nursing Superintendent	8	4800	1	-	1	-
3	Chief Pharmacist	7	4600	2	2	-	-
4	Chief Lab Superintendent	7	4600	-	1	-	1
5	Lab Superintendent	6	4200	1	-	1	-
6	Sr. Pharmacist	6	4200	2	1	1	-
7	Dresser-I	5	2800	-	1	-	1
8	Dresser-II	4	2400	1	1	-	-
9	Dresser-III	2	1900	1	-	1	-
10	Hospital Attendant	1	1800	3	3	-	-
11	Housekeeping Assistant(Medical)	1	1800	3	3	-	-
<b>Total</b>				<b>14</b>	<b>13</b>	<b>4</b>	<b>3</b>

## 2.3 Details of Health Unit/ Tiruchchirapalli (TPJ)

S. No	Parameter	Details
1	Bed Availability	Nil
2	Shift	General
3	Area to be cleaned & sanitized	-
4	No. of injection	5/day
5	No. of dressings	375/Month
6	Camps, Seminar & Classes	2 per month
7	Treatment for outsiders	Nil
8	Population	Serving Employees with dependent: 4903 x 5 = 24515 Retired Employees with dependent : 1403 x2 = 2806 Total = 27321
9	In patients	Nil
10	Out Patients	Average/ year : 33150

11	Lab Technician workload	18616+510(water sample Tests)
12	Patients referred to Other Hospitals	Railway Hospital : 434 for the last 3 years
13	No. of child delivery	Not applicable
14	Out sourcing activity	Lab Investigation under Lab imprest Rs.25000
15	Disposal of wastes	Disposed as per Standard
16	Outstation duty	18 times – last 12 months by Pharmacist with Helper
17	MRV/SPART	Nil. ARME-II
18	Proposal for expansion	Nil
19	Physiotherapy & Radiography	Nil
20	Ambulance vehicle & driver	Nil

2.4 This Health unit is at kallukkuzhi colony in TPJ near TPJ Railway station. One Sr. DMO and two ADMOs are giving treatment in HU/TPJ. One Chief Nursing superintendent, Three Pharmacists (2 Chief Pharmacists + 1 Sr.Pharmacist) two Dressers, three Hospital attendant and three Housekeeping assistants are working in HU/TPJ for treating serving Railway employees, retired employees and their dependents.

➤ **Chief Nursing Superintendent.**

- Giving injection and IV fluids to the patients
- Emergency bed care
- Follow up of referred cases
- Organising seminars, camps etc..
- Antenatal care
- Non communicable disease -Registration
- Supervising Housekeeping attendants

**Chief Pharmacist-1**

- Main store in charge
- Indent, Procurement of all stores, stationeries etc..
- Annual Emergency indents Preparation

- Accountal, procure, condemnation of T&P items.
- Maintenance of Imprest cash of general, Lab, Dialysis
- Maintenance of leave and pass register
- Preparation of monthly absentees' statement

### **Chief Pharmacist-2**

- In charge for making sick list.
- Maintain sick register, WCA register
- Preparation of sick, transfer, fit certificate
- Preparation of MCDO, PCDO reports
- Maintain POMKA (Portable Medical Kit for Accidents)
- Recoupment of First aid boxes
- RELHS registration
- Availability of SPART & Augmented First aid box
- AWSE

### **Sr.Pharmacist-1**

- Dispensing of drugs to OP patients
- In charge of sub-store
- Maintenance of stock register, prescription chits
- Medical examination of employees (PME) and candidates. (Certification, preparation, Memo verification)
- Drunkenness examination (Collection, Packing of samples)
- Maintenance SPART (Self Propelled Accident Relief Train)
- Relieving(LR) duty Health Unit/TP, TJ & SRGM

### **Chief Lab Superintendent-1**

- Doing all clinical investigations
- Water sample testing
- Maintaining Lab T&P

**Dressers-1&2**

- Dressing for OPD Patients
- Preparation of bandage, gauze, cotton pads
- Sterilization of medical instruments, bins etc..
- Assists in PME
- Assists maintenance of SPART

**a) Hospital Attendent-1**

- Cleaning furniture at Doctors room
- OPD registration at reception
- Medical card registration

**b) Hospital attendant-2**

- Work in lab

**C)Hospital Attendent-3**

- Cleaning of doors, windows, furniture in all rooms.
- Engage, Assists Dressings, ECG etc.
- Collection of stores

**Housekeeping assistants-1**

- Night duty

**Housekeeping Assistants-2&3**

- Clean hospital premises
- Clean bottles, slides in lab
- Other works given by supervisor.

**2.5 Health Unit/TRICHY FORT(TP)**

S. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Chief Pharmacist	7	4600	0	1	0	1
2	Sr.Pharmacist	6	4200	1	0	1	-
3	Hospital Attendant	1	1800	1	1	0	--
4	Housekeeping Assistant (Medical)	1	1800	0	1+1*	0	1
<b>Total</b>				<b>2</b>	<b>3</b>	<b>1</b>	<b>2</b>

\*Contract Staff

Note: As per DPO Lr. Sanctioned strength of Housekeeping Assistant at HU/TP is zero. But, as per HU/TP data, sanctioned strength of house keeping assistance is three. This has to be clarified.

## **2.6 Health Unit/Trichy Fort(TP)**

This Health unit is nearby Trichy Fort(TP) railway station.

Sr.DMO is the head of the health unit.

One Chief Pharmacist, one Hospital attendant and two Housekeeping assistant are available to service the patients .

Health education classes are regularly conducted at HU/TP.

### **Some of the programs are**

- ✓ Prevention of coronary heart disease
- ✓ Hypertension health education
- ✓ Diabetes health education
- ✓ Prevention of Diabetic Nephropathy health education.
- ✓ Prevention of Alcohol health education
- ✓ Weight reduction health education
- ✓ Smoking cessation health education
- ✓ Annual wellness program

### **Workload statistics of Pharmacist**

- ✓ Dispensing and Accounting medicines
- ✓ Annual Indent preparation of medicines for HU/TP
- ✓ Preparation of indent to collect medicines from stores/RH/GOC
- ✓ Maintaining DBR for receipt of medicines& local purchase of medicine
- ✓ Maintaining register for Expiry date of medicines.
- ✓ Recoupment of first aid boxes and register maintenance
- ✓ Maintaining POMKA, Emergency tray
- ✓ T&P and expendable T&P maintenance with register
- ✓ Condemnation materials to DCOS/GOC
- ✓ Maintenance of Imprest register
- ✓ Preparation of indents for books & forms, consumables-maintaining registers
- ✓ Maintenance of Pass, PTO, EDP and Hospital permit



- ✓ Family Composition Register maintenance
- ✓ Muster roll maintenance
- ✓ Quarters particulars of staff working at HU/TP
- ✓ Leave register maintenance
- ✓ Absentees statement, NH working statement to Sr.DPO/O/TPJ
- ✓ Preparation of Sick & Fit Certificates-Maintain registers
- ✓ Preparation of vendors certificate

## 2.7 Details Of Health Unit/ TRICHY FORT(TP)

Sl. No	Parameter	Details
1	Bed Availability	Nil
2	Shift	General
3	Area to be cleaned & sanitized	Health Unit premises
4	No. of injection	0.13/day
5	No. of dressings	15/Month or 0.5 /day
6	Camps, Seminar & Classes	Once in a month
7	Treatment for outsiders	Nil
8	Population	(2875+404)=3279 (Serving Emp + Dependents, Rtd. Emp + Dependents)
9	In patients	Nil
10	Out Patients	25084 last 5 years. Or 418/month 418/26 days=16 /day
11	Lab Technician workload	Nil
12	Patients referred to other hospitals.	Not maintained.
13	No. of child delivery	Nil
14	Out sourcing activity	Lab test carried out by outside.
15	Proposal for expansion	Nil
16	Physiotherapy & Radiography	Nil
17	Out station Duties	Nil
18	MRV/SPART	Nil. ARME-II
19	Ambulance vehicle & driver	Nil

## 2.8 HealthUnit/Srirangam(SRGM)

S. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Chief Pharmacist	7	4600	0	1	0	1
2	Sr.Pharmacist	6	4200	1	0	1	-
3	Hospital Attendant	1	1800	1	1	0	--
4	Housekeeping Assistant (Medical)	1	1800	6	1+1*	5	-
<b>Total</b>				<b>8</b>	<b>3</b>	<b>6</b>	<b>1</b>

\*Contract staff

### Note:

As per DPO Statement, Sanctioned strength of Housekeeping Assistant at HU/SRGM is six. But, as per HU/SRGM data, sanctioned strength of housekeeping assistant is three. This has to be clarified.

This Health unit is nearby SriRangam railway station.

ADMO is the head of this Health Unit.

One Chief Pharmacist, One Hospital attendant, One Housekeeping assistant and one contract housekeeping assistant are serving the patients in this Health Unit.

Injection is giving to female patients by Medical officer and male patients by hospital attendant.

Dressing is done by Hospital attendant (Average 25/Month)

Sl. No	Parameter	Details
1	Bed Availability	Two for observation purpose
2	Shift	General
3	Area to be cleaned & sanitized	-
4	No. of injection	3 – 4 / day
5	No. of dressings	20 – 25 / Month
6	Camps, Seminar & Classes	1 or 2 per month
7	Treatment for outsiders	Nil

8	Population	(780+210) =990 (Serving Emp +Dependents, Rtd. Emp +Dependents)
8	In patients	Nil
9	Out Patients	18.4/ Day (2014) 17.3/ Day (2015) 18.2/ Day (2016) 21.1/ Day (2017) 19.5/ day (2018) Average 19/Day
10	Lab Technician workload	Nil
11	Out sourcing activity	Based on CGHS rate laboratory investigations are done outside Lab.
12	Proposal for expansion	Nil
13	No. of child delivery	Nil
14	Physiotherapy & Radiography	Nil
15	Patients referred to other hospitals	Nil
16	Disposal of wastes	To hand over Municipality van &As per standard norms
17	Out station Duties	Nil
18	MRV/SPART	Nil. ARME-II
19	Physiotherapy & Radiography	Nil
20	Ambulance vehicle & driver	Nil

## 2.9 Health Unit/Thanjavur(TJ)

Sl. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Chief Nursing Superintendent	8	4800	1	1	0	-
2	Chief Pharmacist	7	4600	1	1	0	-
3	Sr. Pharmacist	6	4200	1	0	1	-
4	Dresser-I	5	2800	0	1	0	1
5	Dresser-II	4	2400	1	0	1	-
6	Hospital Attendant	1	1800	1	1	0	-
7	Housekeeping Assistant(Medical)	1	1800	2	1	1	-
<b>Total</b>				<b>7</b>	<b>5</b>	<b>3</b>	<b>1</b>

**Note:**

As per DPO Statement, Sanctioned strength of Housekeeping Assistant at HU/TJ is two. But, as per HU/TJ data, sanctioned strength of housekeeping assistant is three. This has to be clarified.

This Health Unit is situated nearby the second entry of TJ station.

ACMS is the head of this Health Unit.

One Chief nursing superintendent, One Chief Pharmacist, One Dresser, One hospital attendant, One house keeping assistant are available and serving patients in this Health Unit.

One contract housekeeping assistant staff was in HU/TJ and he quit the job. So, One House Keeping Assistant is available in day only. If any leave required for housekeeping assistant, HI/TJ deputed staff to HU/TJ.

**Chief Nursing Superintendent:**

- ✓ Giving injections and IV fluids to the patients
- ✓ Taking ECG
- ✓ POMKA maintenances
- ✓ Family welfare activities
- ✓ Organizing Camps & Seminars
- ✓ Attending Health Camp at HU/MV, HU/TVR
- ✓ Maintaining Non – communicable Disease Register
- ✓ Supervising Group D Staff

**Chief Pharmacist :**

- ✓ Main Store In-charge
- ✓ Sub Store In-charge
- ✓ Dispensing medicines to OPD patients
- ✓ Preparing Sick & Fit Certificate
- ✓ Duty Certificate
- ✓ WCA Reports

- ✓ Vendor certificate preparation

### **Dresser I :**

- ✓ Dressing for OPD Patients
- ✓ Preparation of Bandage, Gauze and cotton pads.
- ✓ Assisting in PME
- ✓ Sterilized Medical instruments, Dressing materials
- ✓ Assisting in Health Camp activities
- ✓ Medical Card Registration for employees and Retired employees

### **Hospital Attendant :**

- ✓ Cleaning furniture, Doors, Windows of Doctor Room, OP Veranda, Dispensary Room, Injection Room, PME Room, Store Room
- ✓ OPD Registration
- ✓ Medical Card Registration
- ✓ Assisting in PME
- ✓ Collection of materials from RH/GOC
- ✓ Assisting in Doctor Room in OP case
- ✓ Accompanying Doctor – on line duty

### **House keeping Assistant:**

- ✓ Night duty
- ✓ Cleaning of Hospital premises in and out
- ✓ Cleaning of Bathroom, Toilets & Urine Bottles
- ✓ Collecting medicines from Stores/RH/GOC and materials from ACOS/GSD/GOC
- ✓ Accompanying Pharmacist

<b>S. No</b>	<b>Parameter</b>	<b>Details</b>
1	Bed Availability	Nil
2	Shift	General
3	Area to be cleaned & sanitized	Premises of HU
4	No. of injection	5 to 10/ day
5	No. of dressings	125 /Month

6	Camps, Seminar & Classes	Monthly once
7	Population	Serving Employees with dependent: 1150 x 5 = 5750 Retired Employees with dependent : 922 x2 = 1844 Total = 7594
8	In patients	Nil
9	Out Patients	19883/year or 63/day
10	Lab Technician workload	Not applicable
11	Patients referred to Other Hospitals	Railway Hospital : 107(GOC)+272(PER)=379 for the last 3 year
12	No. of child delivery	Not applicable
13	Out sourcing activity	Rs. 5000/month for lab investigation Rs.20,000/month for Dialysis imprest
14	Disposal of wastes	Disposed as per Standard
15	Treatment to Outsiders	Nil
16	MRV/SPART	Nil. ARME-II
17	Proposal for expansion	Nil
18	Physiotherapy & Radiography	Nil
19	Outstation duty if any	32 times pharmacist with helper
20	Ambulance vehicle & driver	Nil

## 2.10. Health Unit/Thiruvannamalai (TNM)

S. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Sr.Pharmacist	6	4200	1	1	0	
2	Hospital Attendant	1	1800	1	1	0	
3	Housekeeping Assistant(Medical)	1	1800	5	2	3	
<b>Total</b>				<b>7</b>	<b>4</b>	<b>3</b>	<b>-</b>

### Note:

As per DPO S.A.V.E. Statement, Sanctioned Strength of House Keeping Assistant (Medical) is 5, but as per Health Unit/TNM is 3, clarification required.

S. No	Parameter	Details
1	Bed Availability	2
2	Shift	General
3	Area to be cleaned & sanitized	Premises of HU
4	No. of injection	1 to 2/day
5	No. of dressings	5 /Month
6	Camps, Seminar & Classes	Nil
7	Treatment for outsiders	Nil
8	Population	Serving Employees with dependent: 477 x 3 = 1431 Retired Employees with dependent : 89 x2 = 178 Total = 1609
9	In patients	Nil
10	Out Patients	3554 (2014-15) 4163 (2015-16) 3671 (2016-17) 3983 (2017-18) 2656 (2018-19) Average 3605/year or 300/month or 10/day
11	Lab Technician workload	Not applicable
12	Patients referred to Other Hospitals	Railway Hospital : 65 for the last 3 year
13	No. of child delivery	Not applicable
14	Out sourcing activity	Rs. 5000 for lab investigation
15	Disposable of wastes	Disposed as per Standard
16	MRV/SPART	Nil. ARME-II
17	Proposal for expansion	Nil
18	Physiotherapy & Radiography	Nil
19	Outstation duty if any	Nil
20	Ambulance vehicle & driver	Nil

This Health Unit is nearby the entrance of the TNM railway station.

ADMO is the head of HU/TNM. One Pharmacist, One hospital attendant, two housekeeping assistants are available for giving good service at HU/TNM.

**2.11. Health Unit/Thiruvapur (TVR)**

Sl. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Sr.Pharmacist	6	4200	1	1	0	-
2	Dresser-I	5	2800	0	0	0	-
3	Dresser-II	4	2400	1	0	1	-
4	Dresser-III	3	2000	0	1	0	1
5	Hospital Attendant	1	1800	1	1	0	-
6	House keeping Assistant(Medical)	1	1800	3	3	0	-
<b>Total</b>				<b>6</b>	<b>6</b>	<b>1</b>	<b>1</b>

S. No	Parameter	Details
1	Bed Availability	2 emergency beds for observation
2	Shift	General
3	Area to be cleaned & sanitized	Health unit premises
4	No. of injection	1-2/day
5	No. of dressings	3-5/day & 80 to 130/Month
6	Camps, Seminar & Classes	1 per month
7	Treatment for outsiders	Nil
8	Population	Serving with dependent-3750 Retired with dependent-950 Total=4700
9	In patients	Nil
10	Outpatients	10483 (2014-15) 10538 (2015-16) 9468 (2016-17) 8362 (2017-18) 6444 (2018-19) Average 9060 per year or 755/month - 25/day
11	Patients referred to other hospitals in last 3 years	Railway hospital-350 Govt. hospitals - 10-15 Private hospitals-3
12	Lab Technician workload	Not applicable
13	Out sourcing activity	Lab Investigation under Lab imprest Rs.5000,(Tie up with 2 Private medical centres), General imprest Rs.10000



14	Proposal for expansion	Nil
15	Physiotherapy & Radiography	Nil
16	No. of child delivery	Nil
17	Outstation duty if any	Nil
18	Disposal of wastes	Disposed as per Standard
19	MRV/SPART	Nil. ARME-II
20	Ambulance vehicle & driver	Nil

This Health unit is nearby TVR railway station and headed by ADMO.

One Chief Pharmacist, One Dresser, One Hospital attendant, Three Housekeeping Assistants are there in HU/TVR

## 2.12 Health Unit/Mayiladuthurai(MV)

S. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Sr.Pharmacist	6	4200	1	1	0	
2	Dresser-I	5	2800	0	1	0	1
3	Dresser-II	4	2400	1	0	1	
4	Hospital Attendant	1	1800	1	1	0	
5	Housekeeping Assistant(Medical)	1	1800	2	2	0	
<b>Total</b>				<b>5</b>	<b>5</b>	<b>1</b>	<b>1</b>

### Note:

As per DPO statement, Sanctioned strength of Housekeeping Assistant is two but, as per data given by HU/MV is three. This has to be clarified.

### Superannuation

1 Dresser- January 2020

1 Hospital attendant, 1 Housekeeping Assistant-May 2020

Sl. No	Parameter	Details
1	Bed Availability	Nil
2	Shift	General
3	Area to be cleaned & sanitized	Health unit premises
4	No. of injection	2 to 5/day

5	No. of dressings	150/Month or Average 5 daily
6	Camps, Seminar & Classes	2 per month
7	Treatment for outsiders	Nil
8	Population	Serving employees $805 \times 4 = 3220$ RELHS $421 \times 2 = 842$ Total $= 4062$
9	In patients	Nil
10	Outpatients	10370 (2013-14), 10330 (2014-15), 10979 (2015-16), 9639 (2016-17), 9857 (2017-18), 10878 (2018-19) Average 33/day
11	Patients referred to other hospitals last 3 years	Nil
11	Lab Technician workload	Nil
12	Out sourcing activity	Lab Investigation under Lab imprest Rs.5000 Medicine imprest-Rs.10000 Accident Rs.5000 Dialysis imprest Rs.20000
13	Proposal for expansion	Nil
14	Physiotherapy & Radiography	Nil
15	No. of child delivery	Nil
16	Outstation duty if any	Nil
17	Disposal of wastes	Disposed as per Standard
18	Treatment to Outsiders	Nil
19	MRV/SPART	Nil. ARME-II
20	Ambulance vehicle & driver	Nil

Health Unit/MV is nearby Mayiladuthurai railway station and headed by ADMO. One Pharmacist, One Dresser, One Hospital attendant and One House keeping Assistant are there for attending patients at HU/MV.

2.13 **HU/VRI**

Sl. No	Designation	Level	G.Pay (Rs)	S	A	V	E
1	Sr.Pharmacist	6	4200	1	1	0	
2	Dresser-II	4	2400	1	0	1	
3	Hospital Attendant	1	1800	1	1	0	
4	Housekeeping Assistant(Medical)	1	1800	2	2	0	
<b>Total</b>				<b>5</b>	<b>4</b>	<b>1</b>	

**Note:**

As per DPO S.A.V.E. Statement, Sanctioned Strength of House Keeping Assistant (Medical) is 2, but as per Health Unit/VRI is 3, clarification required.

**Duties of Pharmacists:**

1. Indent, Procurement of all Stores (Drugs, Stationeries)
2. Annual, Emergency Indents preparation
3. Accountal, Procurement, condemnation of T&P items
4. Imprest Cash of General, Lab, dialysis maintenance
5. Maintenance of Leave, Pars Register
6. Preparation of monthly absentees statement
7. Maintenance of Sick Register and WCA Register
8. Preparation of Sick, Transfer, Fit Certificates
9. Maintenance of POMKA
10. Recoupment of First Aid Boxes
11. RELHS Registration
12. Dispensing of drugs to OP Patients
13. Maintenance of Stock Register
14. Drunkenness Examination (Collection, Packing of samples)
15. Maintenance of ARME-Scale II (Accident Relief Medical Equipment)
16. Issuing Hospital Passes its maintenance
17. Records for outsourcing of Lab investigation
18. Female Welfare Activities like conducting camps
19. Supervision of Group D staff
20. Preparation of NH Statement, MCDO, PCDO reports

**Duties of Hospital Attendant:**

1. Cleaning furniture in all rooms
2. OPD registration
3. Medical Card Registration
4. Assist in PME
5. Collection of materials from RH/GOC, ACOS/GOC
6. Assist with Doctor in OP case
7. On line duty, Accompany with Doctor

**Duties of House Keeping Assistants:**

1. Cleaning Hospital premises
2. Bathrooms, Wash rooms neatness
3. Miscellaneous works given by Supervisors

S. No	Parameter	Details
1	Bed Availability	2 Emergency beds
2	Shift	General
3	Area to be cleaned & sanitized	Inside and Outside premises of HU
4	No. of injection	2 to 3/day in presence of Doctor
5	No. of dressings	75-125 /Month
6	Camps, Seminar & Classes	1 per month
7	Treatment for outsiders	Nil
8	Population	Serving Employees with dependent: 890 x 5 = 4450 Retired Employees with dependent: 510x2 = 1020
9	In patients	Nil
10	Out Patients	10193 (2014-15) 11304 (2015-16) 10845 (2016-17) 10441 (2017-18) 14566 (2018-19) 956 per month or 32/day
11	Lab Technician workload	Imprest Amount Rs.5000/month
12	referred to Other Hospitals	Railway Hospital : 485 Government Hospital: 10-20(Snakebite, Chest Pain, Fractures)

13	Deliveries	Not applicable
14	Out sourcing activity	General Imprest Rs.10000 & Dialysis Imprest Rs.20000(Only one patient is available now) with private lab
15	Disposable of wastes	Bio-degradable : Contract Non Bio-degradable : Disposed as per Standard
16	Treatment to Outsiders	Nil
17	MRV/SPART	Nil. ARME-II
18	Proposal for expansion	Nil
19	Physiotherapy & Radiography	Nil
20	Ambulance vehicle & driver	Nil

Health Unit/VRI is at Railway colony area.

One Chief Pharmacist, One hospital attendant, two Housekeeping Assistants are there for attending patients. One Dresser post is in vacant. It may be filled

### **Working Timing**

<b>OP Timings</b>	
08.30 -12.30 Hrs and 15.30 – 17.30 Hrs	Monday to Friday
08.30 -12.30 Hrs	Saturday
Holiday	Sunday

**CHAPTER-III****3.0 CRITICAL ANALYSIS:**

- 3.1 The 7<sup>th</sup> Pay Commission implementation going to hit in the current year also. The staff cost in the part of Medical Department is about 4% in the total expenditure. Though medical department of Indian Railways was considered as a non-core activity department by Malhotra and Rakesh Mohan Committee reports on Railway reforms, the policy initiated for health insurance & privatization of Health Department system for Railway men, Government of India and Ministry of Railways has not accepted due to the complexity of the issues. Instead, the optimum utilization of man power is initiated in medical department as like in other departments, which is carefully analyzed here for Health Units over TPJ division.

To arrive man power requirement, the criteria considered are;

1. Railway Board Yard stick – Man power requirement for Medical Department
  2. Observing the present deployment and arrive optimum Manpower on need basis
- 3.2 Health Unit Over TPJ division renders the general Medical facilities with the available Sr.DMO, ACMS, ADMO etc. The Medical Directors conduct general clinic, general medicine, and medical examination. The patients are also moved to referral Hospital GH/TPJ, DRH/TPJ, RH/PER and also to Private hospitals according to the requirement of treatment

**This study is confined to the man power requirement of Para-medical staff of Health Units over TPJ Division.**

**3.3 Man Power Requirement as per Yardstick of ED/Health (P)/RB  
Ir.No.2013/H/14/5/1/Policy Dt. 11.03.2013**

The yardstick elaborately proposes the Man power requirement for Indian Railway Medical Department based on functional Unit under job requirement. In the Chapter C.2.3 of Executive Director, Health (P)/RB No.2013/H/14/5/1/Policy, Dt.: 11.03.2.013, the paramedical staff requirement is arrived from various factors like level of the Hospitals, no of beds, OPD & IPD statistics, availability of ICUs, No. of Clinics conducted, type of Laboratory units, Area of the buildings etc.,

**Categories in Health units are described in Chapter B (From B.1 to B.3.2) of Executive Director, Health (P)/RB No.2013/H/14/5/1/ Policy, Dt.: 11.03.2.013.)**

As per the yardstick and need base the man power has been arrived Railway Health units over TPJ division.

### 3.4 The Bare Minimum Requirement Para medical staff for Health Unit

Yard stick Reference No.	Pharmacist	Dresser	Hospital Attendant		House Keeping Assistant (Safaiwala)
			Male	Female	
B.3.2.(i)(a)	1	-	-	-	-
B.3.2.(i)(b)	-	1	-	-	-
B.3.2.(i)(c)	-	-	1	1	-
B.3.2.(i)(d)	-	-	-	-	1
<b>Total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>

### 3.5 From the data as well as the field study conducted by the Work study team the following aspects are found in Health units over TPJ division

Sl. No	Reference Table No	TPJ	TP	SRGM	TJ	TNM	TVR	MV	VRI
1	Average Out Patients /Day	92	16	19	55	10	25	33	32
2	No. of injection/ day	5	0.13	4	5	1-2	1-2	2-5	2
3	No. of dressings /Month	375	15	25	125	5	90	150	75
4	Clinical investigation / month	1594	--	--	--	--	--	--	--
5	In patients	--	--	--	--	--	--	--	--
6	Child Delivery	--	--	--	--	--	--	--	--

Keeping in mind about the right sizing of man power by optimum utilization of resources, the required paramedical staff distribution has been calculated on Need basis and Yardstick of medical Manual.

### 3.6 **Health Unit/TPJ**

#### **Nursing Superintendent –**

If more than 50 patients per day one Staff Nurse is required (3.2.ii a). Average Out patient is 92 per day. Hence one Nursing superintendent is allowed to continue.

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13

After performing all these activities, one post of pharmacist can do the work of dispensing medicines up to 50 OPD patients per day.

If OPD attendance is more than 50 patients per day, additional post of Pharmacist is required for every 100 additional patients per day or part thereof. (B.3.2.ii.b). Average OPD in HU/TPJ,92/day.

Hence, two pharmacists are required against the sanctioned strength of four. But, Studying Work load of Pharmacists at HU/TPJ on field visit by Work study team one more Pharmacist is allowed on need base for maintaining the HU/TPJ. Remaining one post (1Pharmacist) is to be surrendered and credited to the vacancy bank.

#### **Dresser-**

As per yard stick B. 3.2.(b) one post of Dresser is required for HU/TPJ, because, average 375 dressings are done per month. i-e average 15 per day.

In addition to that, if required hospital attendant may also be utilized for assisting to dresser. Hence, One Dresser is sufficient and one Dresser may be surrendered against the sanctioned strength of 2.

#### **Lab superintendent -**

Considering work load of Lab Superintendent (18616+510 water samples per year) the existing one post is allowed to continue on need base.

#### **Hospital Attendant –**

For OPD registration, Medical ID card registration at reception, assisting in Laboratory, dressing, ECG, Collection of stores, Accompany with Medical officers. On need base the existing three Hospital attendants are allowed to continue.



### Housekeeping assistant –

Cleaning bottles, slides in lab, cleaning of hospital premises and time to time work given by the supervisor.

As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit.

On need base, totally two housekeeping assistants are allowed and one House keeping assistant may be surrendered and credited in to vacancy bank.

### Sanction Vs Requirement- HU/TPJ

Category	Sanction	Actual	Requirement	Excess
Chief Nursing Superintendent	0	1	0	0
Senior Nursing Superintendent	1	0	1	0
Chief Pharmacist	2	2	2	0
Senior Pharmacist	2	1	1	1
Chief Lab Superintendent	0	1	0	0
Lab Superintendent	1	0	1	0
Dresser-I	0	1	0	0
Dresser-II	1	1	1	0
Dresser-III	1	0	0	1
Hospital Attendant	3	3	3	0
House Keeping Assistant	3	3	2	1
Total	14	13	11	3

### Recommendation-1

One post of Sr. Pharmacist in G.P.4200/-(Level-6) may be surrendered and credited to the vacancy bank

### Recommendation2

One post of Dresser-III in G.P.2000 /-(Level-3) may be surrendered and credited to the vacancy bank.

### Recommendation-3

One post of House Keeping Assistant in G.P.1800 /-(Level-1) may be surrendered and credited to the vacancy bank

Sanction	Actual	Requirement	Excess
14	13	11	3

### 3.7 Health Unit/ Trichy Fort(TP)

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13. After performing all these activities, one post of pharmacist can do the work of dispensing medicines upto 50 OPD patients per day. Average OPD in Health Unit/TP is 16 per day. Hence, the existing strength of one Pharmacist is allowed to continue.

#### **Hospital Attendant-**

Average OPD is 16 per day, Average dressing per month is 15. Hence, the existing one Hospital Attendant is allowed to continue.

#### **Housekeeping Assistant-**

One department staff and one contract staff are available in this HU/TP. As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit. On need base, two Housekeeping Assistants are allowed.

#### **Sanction Vs Requirement-HU/TP**

Category	Sanction	Actual	Requirement	Excess
Chief Pharmacist	0	1	0	-
Sr. Pharmacist	1	0	1	-
Hospital Attendant	1	1	1	--
Housekeeping Assistant(Medical)	0	1+1*	2	-
Total	2	3+1*	4	-2

\*Contract Staff

**Note:** Division may initiate to enhance sanctioned strength of Housekeeping assistant at HU/TP

Sanction	Actual	Requirement	Excess
2	3+1*	4	-2

### 3.8 Health Unit/Srirangam (SRGM)

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13.

After performing all these activities, one post of pharmacist can do the work of dispensing medicines upto 50 OPD patients per day. Average OPD in Health Unit/SRGM is 19 per day. Hence, the existing strength of one Pharmacist is allowed to continue.

#### **Hospital Attendant-**

Average OPD is 19 per day, Average dressing per month is 20-25(Average 1 per day). Injection 3-4 per day. (Medical Officer & Hospital attendant are looking after the patients). Hence, the existing one Hospital Attendant is allowed to continue.

**Housekeeping Assistant-** One department staff and one contract staff are available in this HU/SRGM.

As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit.

On need base, One more staff is allowed.

#### **Sanction Vs Requirement-HU/SRGM**

Category	Sanction	Actual	Requirement	Excess
Chief Pharmacist	0	1	0	-
Sr.Pharmacist	1	0	1	-
Hospital Attendant	1	1	1	--
Housekeeping Assistant (Medical)	6	1+1*	2	4
Total	8	3+1*	4	4

\*Contract Staff

#### **Recommendation-4**

Four posts of HouseKeeping Assistant in G.P.1800/-(Level-1) may be surrendered and credited to the vacancy bank

Sanction	Actual	Requirement	Excess
8	3+1*	4	4

### 3.9 Health Unit/Thanjavur (TJ)

**Nursing Superintendent**-If more than 50 patients per day one Staff Nurse is required (3.2.ii a). Average Out patient is 63 per day. Hence one Nursing superintendent is allowed to continue.

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13.

After performing all these activities, one post of pharmacist can do the work of dispensing medicines up to 50 OPD patients per day.

If OPD attendance is more than 50 patients per day, additional post of Pharmacist is required for every 100 additional patients per day or part thereof. (B.3.2.ii.b). Average OPD in HU/TJ, 63/day.

Hence, two pharmacists are allowed against the sanctioned strength of two on need base.

#### **Dresser-**

As per yard stick B. 3.2. (b) one post of Dresser is required for HU/TJ, because, average 125 dressings are done per month. Hence, one post of Dresser is allowed to continue.

#### **Hospital Attendant –**

For OPD, Medical ID card registration at reception, Collection of stores, accompany with Medical officer while outstation duties, the existing Hospital attendant is allowed to continue.

#### **Housekeeping assistant-**

Cleaning bottles, cleaning of hospital premises and time to time work given by the supervisor.

As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit. On need basis, two Housekeeping assistants are allowed.

### Sanction Vs Requirement-HU/TJ

Category	Sanction	Actual	Requirement	Excess
Chief Nursing Superintendent	1	1	1	-
Chief Pharmacist	1	1	1	-
Sr. Pharmacist	1	0	1	-
Dresser-I	0	1	0	-
Dresser-II	1	0	1	-
Hospital Attendant	1	1	1	-
Housekeeping Assistant(Medical)	2	1	2	-
Total	7	5	7	-

Sanction	Actual	Requirement	Excess
7	5	7	-

### 3.10 Health Unit/Thiruvannamalai (TNM)

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13.

After performing all these activities, one post of pharmacist can do the work of dispensing medicines upto 50 OPD patients per day. Average OPD in Health Unit/TNM is 10per day.

Hence, the existing strength of one Chief Pharmacist is allowed to continue.

#### **Hospital Attendant-**

Average OPD is 10 per day, Average dressing per month is 5. Injection 1-2 per day. Hence, the existing one Hospital Attendant is allowed to continue.

#### **Housekeeping Assistant-**

Two Housekeeping assistants are available at HU/TNM. Considering Pilgrimage Centre & Workload defined, existing staff strength of two Housekeeping assistants are allowed to continue.

### Sanction Vs Requirement-HU/TNM

Category	Sanction	Actual	Requirement	Excess
Sr. Pharmacist	1	1	1	-
Hospital Attendant	1	1	1	-
Housekeeping Assistant(Medical)	5	2	2	3
Total	7	4	4	3

**Recommendation-5**

Three posts of House Keeping Assistant in G.P.1800 /-(Level-1) may be surrendered and credited to the vacancy bank

Sanction	Actual	Requirement	Excess
7	4	4	3

**3.11 Health Unit/Thiruvarur (TVR)**

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13.

After performing all these activities, one post of pharmacist can do the work of dispensing medicines up to 50 OPD patients per day.

If OPD attendance is more than 50 patients per day, additional post of Pharmacist is required for every 100 additional patients per day or part thereof. (B.3.2.ii.b).

Average OPD in HU/TVR is 25 per day. Hence, existing one pharmacists allowed to continue.

**Dresser-**

As per yard stick B. 3.2. (b) one post of Dresser is required for HU/TVR, because, average 130 dressings are done per month. Hence, One Dresser is allowed to continue.

**Hospital Attendant –**

For OPD, Medical ID card registration at reception, Collection of stores, Accompany with Medical officer while outstation duties, the existing one Hospital attendant is allowed to continue.

**Housekeeping assistant-**

Cleaning bottles, cleaning of hospital premises and time to time work given by the supervisor.

As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit. Duly considering, keeping in mind of housekeeping Assistant workload, On need base, two housekeeping Assistants are allowed and one Housekeeping Assistant post may be surrendered against sanctioned strength of three.

### Sanction Vs Requirement - HU/TVR

Category	Sanction	Actual	Requirement	Excess
Sr. Pharmacist	1	1	1	-
Dresser-II	1	0	1	-
Dresser-III	0	1	0	-
Hospital Attendant	1	1	1	-
Housekeeping Assistant(Medical)	3	3	2	1
Total	6	6	5	1

### Recommendation-6

One post of HouseKeeping Assistant in G.P.1800 /-(Level-1) may be surrendered and credited to the vacancy bank

Sanction	Actual	Requirement	Excess
6	6	5	1

### 3.12 Health Unit/Mayiladuthurai (MV)

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13.

After performing all these activities, one post of pharmacist can do the work of dispensing medicines upto 50 OPD patients per day.

If OPD attendance is more than 50 patients per day, additional post of Pharmacist is required for every 100 additional patients per day or part thereof. (B.3.2.ii.b). Average OPD in HU/MV is 33 per day. Hence, existing one **pharmacist** is allowed to continue.

#### **Dresser-**

As per yard stick B. 3.2. (b) one post of Dresser is required for each Health Unit. Average 150 dressings are done per month. Hence, One Dresser is allowed to continue.

**Hospital Attendant –**

For OPD, Medical ID card registration at reception, Collection of stores, accompany with Medical officer while outstation duties, the existing one Hospital attendant is allowed to continue.

**Housekeeping assistant-**

Cleaning bottles, cleaning of hospital premises and time to time work given by the supervisor.

As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit.

On need base, Two Housekeeping assistant are allowed.

**Sanction Vs Requirement-HU/MV**

Category	Sanction	Actual	Requirement	Excess
Sr. Pharmacist	1	1	1	-
Dresser-I	0	1	0	-
Dresser-II	1	0	1	-
Hospital Attendant	1	1	1	-
Housekeeping Assistant(Medical)	2	1	2	-
Total	5	4	5	-

Sanction	Actual	Requirement	Excess
5	4	4	-

**3.13 Health Unit/Vriddhachalam (VRI)**

**The Pharmacist** in health unit has to do duties & responsibilities as given in IRMM 2000 in para 203/13.

After performing all these activities, one post of pharmacist can do the work of dispensing medicines up to 50 OPD patients per day.

If OPD attendance is more than 50 patients per day, additional post of Pharmacist is required for every 100 additional patients per day or part thereof. (B.3.2.ii.b). Average OPD in HU/VRI is 32 per day. Hence, existing one pharmacist is allowed to continue.



**Dresser-**

As per yard stick B. 3.2. (b) one post of Dresser is required for each Health Unit. 75 Average dressings are done per month; One Dresser is allowed as per sanctioned strength.

**Hospital Attendant –**

For OPD, Medical ID card registration at reception, Collection of stores, Assisting Medical officer in OP, the existing one Hospital attendant is allowed to continue.

**Housekeeping assistant-**

Cleaning bottles, cleaning of hospital premises and time to time work given by the supervisor.

As per yard stick B.3.2.i(d), one Safaiwala (Housekeeping Assistant) is required for each Health unit.

On need base, Two Housekeeping assistants are allowed.

Category	Sanction	Actual	Requirement	Excess
Sr. Pharmacist	1	1	1	-
Dresser-II	1	0	1	-
Hospital Attendant	1	1	1	-
Housekeeping Assistant(Medical)	2	2	2	-
Total	5	4	5	-

Sanction	Actual	Requirement	Excess
5	4	5	-

**Total Sanction Vs Requirement of Health Units over TPJ Division**

Sanction	Actual	Requirement	Excess
54	42	45	9

### **SUMMARY OF RECOMMENDATIONS**

The following posts are found excess to the requirement and the same may be surrendered and credited to the vacancy bank.

Sl. No.	Category	Grade pay (Rs.)	Level	No. of posts
1	Sr.Pharmacist	4200	6	1
2	Dresser III	2000	3	1
3	House Keeping Assistant	1800	1	7
<b>Total</b>				<b>9</b>

**Total No. of Posts = 09**

**CHAPTER - IV****4.0 PLANNING BRANCH REMARKS ON CO-ORDINATING OFFICER'S****VIEWS:****CO-ORDINATING OFFICER'S VIEWS**

- Pharmacist posts are Headquarters controlled post. The work study has considered the Divisional Book of sanction for the study, which varies from the figures obtained from Headquarters. On verifying with PCMD office, the sanctioned post of Pharmacists for TPJ Division is 29. Presently, 29 Pharmacists are employed at various places in TPJ Division, viz., 16 at RH GOC, 3 at SDH VM, 3 at HU TPJ and 1 each at HUs TP, SRGM, VRI, TNM, TJ, MV, TVR. Sr.DPO also has been advised to update necessary changes in Book of Sanction.

Place of Hospital/ HU in TPJ Division	Sanction as per Division -BOS (pinpointing)	Sanction as per HQ	Difference
HU TPJ	4	3	Vacant 1
HU TP	1	1	
HU SRGM	1	1	
HU VRI	1	1	
HU TNM	1	1	
HU TJ	1	1	
HU MV	1	1	
HU TVR	1	1	
SDH VM*	3	3	
RH GOC*	15	16	Excess 1
<b>TOTAL</b>	<b>29</b>	<b>29</b>	<b>NO VACANCY</b>

Note: \* SDH VM and RH GOC were not studied during this Work Study.

- There is no pinpointing of Pharmacist posts within the division. CMS TPJ operates the post at different locations based on demand of work and patient load.
- Recommendations of Work study mentions there are 4 Pharmacist post at Health Unit, TPJ, and has recommended for three posts of Pharmacists and surrender of One vacant post of Pharmacist from Health Unit, TPJ. But actually there is no excess post of Pharmacist at Health Unit, TPJ and also there is no excess post of Pharmacists in TPJ Division, against total sanction of 29.
- Pharmacists in Health units are multi skilled persons – distribute drugs

(primary job) and also involved in Annual Wellness Camps, Family Welfare Camps, General Clerical Duties (No clerks posted at HU), Responder for Train Calls and Siren calls, Trained First aid Providers, assist in Medical Examination/PME, Replenishment of First aid boxes, and General Administration.

**CONCLUSION:** The recommendation of Work study to surrender one vacant post of Pharmacist is technically incorrect and hence, not agreed upon.

**SUGGESTIONS:**

Cadres, which are not pin-pointed to the place of posting to be studied as a whole, e.g. Pharmacists of TPJ Division.

### **PLANNING BRANCH REMARKS**

Pharmacist posts are controlled by HQ for appointment and promotion purpose. Scale Check is maintained by Division. Hence, Sanction, Actual, Vacancy and Excess statement issued by DPO/TPJ is taken in this work study.

#### **Pharmacist Category**

SDH/VM	SANCTION	ACTUAL
	3	3
RH/GOC	15	16

Separate studies are there for SDH/VM and RH/GOC.

Sanctioned strength of pharmacist in HU/TPJ is 4.

Average OPD in HU/TPJ is 92/day. (i-e. Less than 150).

Hence, two pharmacists are required.

But, Work study team analyses and considers the place and importance of HU/TPJ, one more Pharmacist is allowed.

(Total 3 instead of 2). work study report Chapter III para 3.6.

Place of HU in TPJ Division	Sanction as per Division	Actual	Requirement	Excess
<b>TPJ</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>1</b>
TP	1	1	1	--
SRGM	1	1	1	-
VRI	1	1	1	---
TNM	1	1	1	-
<b>TJ</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>-</b>
MV	1	1	1	-
TVR	1	1	1	-
<b>TOTAL</b>	<b>12</b>	<b>10</b>	<b>11</b>	<b>1</b>

As reiterated by Co-ordinating officer, Actual staff strength in pharmacist category 3 staff agreed and allowed. Variation in Pharmacist category sanctioned strength to the actual in RH/GOC and HU/TPJ pointed out by Co-ordinating Officer, necessary correction in Sanctioned strength in HU/TPJ may be initiated.

## COORDINATING OFFICER'S VIEWS

There is no pinpointing of Dresser posts within the division. CMS TPJ operates the post at different locations based on demand of work and patient load.

- Recommendations of Work study mentions there are 2 Dressers post at Health Unit, TPJ, and have recommended surrender of one dresser post based on the work performance of 375 dressings per month. The Work study has ignored the role of Dressers of HU TPJ in Rail Disaster Management and Safety.
- Dressers are multi-skilled employees and are involved in Daily Dressings, Autoclave procedures, assisting in Medical Examination & PME, and maintaining Self Propelled Accident Relief Train (SPART) and Portable Medical Kit for Accidents (POMKA).
- Health unit TPJ cannot be compared with other Health units of the Division due to its Hq position and presence of **SPART**. SPART has an Emergency Operation theatre to perform emergency Surgeries and an Inbuilt Autoclave also. Health Unit, TPJ is responsible for maintenance of SPART and POMKA, as well One Augmented First Aid Box at TPJ station.

As per Safety plan, whenever there is siren call, one team with doctor, pharmacist and dresser will move to SPART with on duty HKA:

Second team will move by road to accident site with POMKA with doctor, pharmacist and Dresser:

Third team will report to HU with doctor, Nurse and HA. Actually, one more Dresser is need in the third team too. For this safety related issue, Health Unit, TPJ has 3 doctors, 3 pharmacists and two dressers. The role of Two Dressers in HU TPJ has been well emphasized.

CONCLUSION: The recommendation of Work study to surrender one vacant post of Dresser is not possible due to the roll in SPART and Disaster Management and hence, **NOT** agreed upon.

## PLANNING BRANCH REMARKS

Agreed to. The Work study has considered all the datas given by the coordinating supervisor regarding duties of Dresser in all Health Units and brought in the report. In Health units, every employee is a multi- skilled person in their day to day performances. So, with adequate people can do more work.

Dresser's importance and necessity are felt in this COVID Pandemic; and so two Dressers are allowed instead of one against the sanctioned strength of two in HU/TPJ.

### **COORDINATING OFFICER'S VIEWS**

There is no pinpointing of House Keeping Assistant (HKA) posts within the division. CMS TPJ operates the post at different locations based on demand of work and patient load.

- Work study has assessed the cleaning and sanitation works of HKA in Health units only.
- HKA are multi-skilled employees and are involved in Sanitation of Health units, first responder for emergency calls and Accident Siren calls, Segregation of Biomedical Waste and Disposal and also attending to the needs of patients in observation wards/Lab sample collection.
- Health units function between 8.00 to 13.00 hrs and 15.00 to 18.00 hrs. During the other hours, there will be only single HKA available at Health units, round the clock on all days of the year. HKA is the entry grade employee in Railways in Medical Department. Whenever there is an emergency within the Railway Colony, Traveling Passenger in Train, Drunkenness Certification, or Siren call, the only available HKA – is the first responder for all emergencies in Health Units.
- HKA works in EI roster, of 10 hours duty – staying outside quarters. If two HKA are provided, Health unit will be unmanned for four hours compromising on Disaster Preparedness. Third HKA in health units is compulsorily needed to man the Health unit, 24X7. Also, third HKA will enable to prepare inbuilt LR and RG for HOER Roster preparation.
- Also during times of Breakdown like Covid emergency, the work nature of HKA increases multifold, due to repeated sanitization of floors and bathrooms.
- Practical Difficulty, we encounter these days is most of HKA are from North and they avail leave/absence for more than one month. Then only one HKA will be there and management of sanitation becomes very difficult.
- HKA are the most essential staff of any unit, more so in Hospitals. Hence, minimum strength of 3 HKA are compulsorily required at Health units at all times, including Corona lockdown periods and future diseases to come.

Place of Hospital/HU in TPJ Division	Sanction as per Division -BOS (No pinpointing)	Actual requirement.
HU TPJ	3	3
HU TP	0	3
HU SRGM	6	3
HU VRI	2	3
HU TNM	5	3
HU TJ	2	3
HU MV	2	3
HU TVR	3	3
RH GOC & SDH VM	-	-
TOTAL	23	24

- Necessary corrections in Book of Sanction has already been intimated to Sr.DPO/TPJ.  
CONCLUSION: The recommendation of Work study to surrender SEVEN post of HKA (with 2 HKA in each HU) is not possible as they are vital staff for cleanliness and minimum three per HU is essential, as discussed above and hence, **NOT** agreed upon.

#### PLANNING BRANCH REMARKS

Agreed partially.

Railway Board as advised all zones that the Yard stick/ norms of various O & M activities across all departments on the Railways stand reduce by 15% on as is where basis as an interim measure w.e.f .01.07.2020.(Annexure-III in this Work study report)

As per the Railway Board guidelines, the revised Yardstick for Staff nurse and Pharmacists will be as follows,

Category	Yardstick	Revised Yardstick
Staff Nurse	1 Staff Nurse for more than 50 Patients.	1 Staff Nurse for more than 58 Patients.
Pharmacist	1 Pharmacist for 50 OPD, Additional 1 Pharmacist for every 100 OPD.	1 Pharmacist for 58 OPD, Additional 1 Pharmacist for every 115 OPD.

However ,the manpower requirement in this work study is arrived on need basis keeping the present situation prevailing in the country on account of COVID-19 pandemic.

As per yard stick described in Chapter III, para 3.4 in this Work study report, each health unit requires one Housekeeping Assistant. But, the study team has felt while conducting their field study to improve the health Units, two House Keeping Assistant per Health Unit are allowed. A display may be placed in the entrance of each health unit with name, address, mobile numbers of staff working in it to call them if any emergency by patients or their related persons.

At present, Sanctioned strength of Housekeeping Assistants in Health units over TPJ division is 23.

Actual strength available is 14

Requirement arrived and allowed by Work study team is 16

But, the present situation of nation, to fight against COVID -19 (Pandemic), Work study team is allowing five more Housekeeping Assistants. Now, requirement of total Housekeeping Assistants is 21 against the sanction strength of 23. CMS may suitably place them wherever necessary.

#### **Requirement of House Keeping Assistant in Health Units over TPJ division**

Sanction	Actual	Requirement	Surplus
23	14	16+5=21	2

Hence, two vacant posts of House Keeping Assistant may be surrendered and credited in to the vacancy bank.



**CHAPTER - V****5.0 FINANCIAL SAVINGS**

5.1 If the recommendations made in the study report are implemented, the annual recurring financial savings will be as under:

Sl.No.	Category	G.Pay	Level	No.of posts	Money Value (Rs)	Annual Financial Savings (Rs)
1	House Keeping Assistant	1800	1	2	43,817	<b>10,51,608</b>
<b>Total</b>				<b>2</b>		<b>10,51,608</b>

## ANNEXURE - I

## SAVE POSITION IN HEALTH UNIT - MEDICAL DEPARTMENT (TPJ DIVISION)

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603485	HU/MV	Sr.PHARMACIST	6	1	1	0	
0603485	HU/MV	DRESSER.I	5	0	1	0	1
0603485	HU/MV	DRESSER.II	4	1	0	1	
0603485	HU/MV	HOSPITAL ATTENDANT	1	1	1	0	
0603485	HU/MV	HOUSE KEEPING ASSISTANT(MEDICAL)	1	2	2	0	

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603483	HU/SRGM	CHIEF PHARMACIST	7	0	1	0	1
0603483	HU/SRGM	Sr.PHARMACIST	6	1	0	1	
0603483	HU/SRGM	HOSPITAL ATTENDANT	1	1	1	0	
0603483	HU/SRGM	HOUSE KEEPING ASSISTANT(MEDICAL)	1	6	1	5	

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603485	HU/TJ	CHIEF NURSING SUPERINTENDENT	8	1	0	1	
0603485	HU/TJ	CHIEF PHARMACIST	7	1	1	0	
0603485	HU/TJ	Sr.PHARMACIST	6	1	0	1	
0603485	HU/TJ	DRESSER.I	5	0	1	0	1
0603485	HU/TJ	DRESSER.II	4	1	0	1	
0603485	HU/TJ	HOSPITAL ATTENDANT	1	1	1	0	
0603485	HU/TJ	HOUSE KEEPING ASSISTANT(MEDICAL)	1	2	1	1	

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603491	HU/TNM	Sr.PHARMACIST	6	1	1	0	
0603491	HU/TNM	HOSPITAL ATTENDANT	1	1	1	0	
0603491	HU/TNM	HOUSE KEEPING ASSISTANT(MEDICAL)	1	5	2	3	

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603483	HU/TP	CHIEF PHARMACIST	7	0	1	0	1
0603483	HU/TP	Sr.PHARMACIST	6	1	0	1	
0603483	HU/TP	HOSPITAL ATTENDANT	1	1	1	0	
0603483	HU/TP	HOUSE KEEPING ASSISTANT(MEDICAL)	1	0	1	0	1

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603485	HU/TVR	Sr.PHARMACIST	6	1	1	0	
0603485	HU/TVR	DRESSER.I	5	0	0	0	
0603485	HU/TVR	DRESSER.II	4	1	0	1	
0603485	HU/TVR	DRESSER.III	3	0	1	0	1
0603485	HU/TVR	HOSPITAL ATTENDANT	1	1	1	0	
0603485	HU/TVR	HOUSE KEEPING ASSISTANT(MEDICAL)	1	3	3	0	

FOR DIVI PERSO...

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603485	HU/VR	Sr.PHARMACIST	6	1	1	0	
0603485	HU/VR	PHARMACIST	5	0	0	0	
0603485	HU/VR	DRESSER.II	4	1	0	1	
0603485	HU/VR	HOSPITAL ATTENDANT	1	1	1	0	
0603485	HU/VR	HOUSE KEEPING ASSISTANT(MEDICAL)	1	2	2	0	

B_NO	STATION	CATEGORY	LEVEL	TOT	ACT	VAC	EXCESS
0603479	HU/TPJ	CHIEF NURSING SUPERINTENDENT	9	0	1	0	1
0603479	HU/TPJ	SENIOR NURSING SUPERINTENDENT	8	1	0	1	
0603479	HU/TPJ	CHIEF PHARMACIST	7	2	2	0	
0603479	HU/TPJ	CHIEF LAB SUPERINTENDENT	7	0	1	0	1
0603479	HU/TPJ	LAB SUPERINTENDENT	6	1	0	1	
0603479	HU/TPJ	Sr.PHARMACIST	6	2	1	1	
0603479	HU/TPJ	DRESSER.I	5	0	1	0	1
0603479	HU/TPJ	DRESSER.II	4	1	1	0	
0603479	HU/TPJ	DRESSER.III	2	1	0	1	
0603479	HU/TPJ	HOSPITAL ATTENDANT	1	3	3	0	
0603479	HU/TPJ	HOUSE KEEPING ASSISTANT(MEDICAL)	1	3	3	0	

*Suenter*  
 FOR DIVL. PERSONNEL OFFICE  
 TIRUCHCHIRAPPALLI JN.

CO-ORDINATING OFFICER'S REMARKS  
REMARKS-1

**ANNEXURE-II**

- Pharmacist posts are Headquarters controlled post. The work study has considered the Divisional Book of sanction for the study, which varies from the figures obtained from Headquarters. On verifying with PCMD office, the sanctioned post of Pharmacists for TPJ Division is 29. Presently, 29 Pharmacists are employed at various places in TPJ Division, viz., 16 at RH GOC, 3 at SDH VM, 3 at HU TPJ and 1 each at HUs TP, SRGM, VRI, TNM, TJ, MV, TVR. Sr.DPO also has been advised to update necessary changes in Book of Sanction.

Place of Hospital/HU in TPJ Division	Sanction as per Division - BoS (No pinpointing)	Sanction as per HQ	Difference
HU TPJ	4	3	Vacant 1
HU TP	1	1	
HU SRGM	1	1	
HU VRI	1	1	
HU TNM	1	1	
HU TJ	1	1	
HU MV	1	1	
HU TVR	1	1	
SDH VM*	3	3	
RH GOC*	15	16	Excess 1
TOTAL	29	29	NO VACANCY

Note: \* SDH VM and RH GOC were not studied during this Work Study.

- There is no pinpointing of Pharmacist posts within the division. CMS TPJ operates the post at different locations based on demand of work and patient load.
- Recommendations of Work study mentions there are 4 Pharmacist post at Health Unit, TPJ, and has recommended for three posts of Pharmacists and surrender of One vacant post of Pharmacist from Health Unit, TPJ. But actually there is no excess post of Pharmacist at Health Unit, TPJ and also there is no excess post of Pharmacists in TPJ Division, against total sanction of 29.
- Pharmacists in Health units are multi skilled persons – distribute drugs ( primary job) and also involved in Annual Wellness Camps, Family Welfare Camps, General Clerical Duties ( NO clerks posted at HU), Responder for Train Calls and Siren calls, Trained First aid Providers, assist in Medical Examination/PME, Replenishment of First aid boxes, and General Administration.

CONCLUSION: The recommendation of Work study to surrender one vacant post of Pharmacist is technically incorrect and hence, not agreed upon.

SUGGESTIONS:

Cadres, which are not pin-pointed to the place of posting to be studied as a whole, e.g. Pharmacists of TPJ Division.

REMARKS-2

There is no pinpointing of Dresser posts within the division. CMS TPJ operates the post at different locations based on demand of work and patient load.

- Recommendations of Work study mentions there are 2 Dressers post at Health Unit, TPJ, and have recommended surrender of one dresser post based on the work performance of 375 dressings per month. The Work study has ignored the role of Dressers of HU TPJ in Rail Disaster Management and Safety.
- Dressers are multi-skilled employees and are involved in Daily Dressings, Autoclave procedures, assisting in Medical Examination & PME, and maintaining Self Propelled Accident relief Train (SPART) and Portable Medical Kit for Accidents (POMKA).
- Health unit TPJ cannot be compared with other Health units of the Division due to its Hq position and presence of **SPART**. SPART has an Emergency Operation theatre to perform emergency Surgeries and an Inbuilt Autoclave also. Health Unit, TPJ is responsible for maintenance of SPART and POMKA, as well One Augmented First aid Box at TPJ station.

As per Safety plan, whenever there is siren call, one team with doctor, pharmacist and dresser will move to SPART with on duty HKA: Second team will by road to accident site with POMKA with doctor, pharmacist and Dresser: Third team will report to HU with doctor, Nurse and HA. Actually, one more Dresser is need in the third team too. For this safety related issue, Health Unit, TPJ has 3 doctors, 3 pharmacist and two dressers. The role of Two Dressers in HU TPJ has been well emphasised.

CONCLUSION: The recommendation of Work study to surrender one vacant post of Dresser is not possible due to the roll in SPART and Disaster Management and hence, **NOT** agreed upon.

REMARKS-3

There is no pinpointing of HouseKeeping Assistant(HKA) posts within the division. CMS TPJ operates the post at different locations based on demand of work and patient load.

- Work study has assessed the cleaning and sanitation works of HKA in Health units only.
- HKA are multi-skilled employees and are involved in Sanitation of Health units, First responder for emergency calls and Accident Siren calls,

Segregation of Biomedical Waste and Disposal and also attending to the needs of patients in observation wards/Lab sample collection.

- Health units function between 8.00 to 13.00 hrs and 15.00 to 18.00 hrs. During the other hours, there will be only single HKA available at Health units, round the clock on all days of the year. HKA is the entry grade employee in Railways in Medical Department. Whenever there is an emergency within the Railway Colony, Traveling Passenger in Train, Drunkenness Certification, or Siren call, the only available HKA – is the first responder for all emergencies in Health Units.
- HKA works in EI roster, of 10 hours duty – staying outside quarters. If two HKA are provided, Health unit will be unmanned for four hours compromising on Disaster Preparedness. Third HKA in health units is compulsorily needed to man the Health unit, 24X7. Also, third HKA will enable to prepare inbuilt LR and RG for HOER Roster preparation.
- Also during times of Breakdown like Covid emergency, the work nature of HKA increases multifold, due to repeated sanitisation of floors and bathrooms.
- Practical Difficulty, we encounter these days is most of HKA are from North and they avail leave/absence for more than one month. Then only one HKA will be there and management of sanitation becomes very difficult.
- HKA are the most essential staff of any unit, more so in Hospitals. Hence, minimum strength of 3 HKA are compulsorily required at Health units at all times, including Corona lockdown periods and future diseases to come.

Place of Hospital/HU in TPJ Division	Sanction as per Division - BoS (No pinpointing)	Actual requirement.
HU TPJ	3	3
HU TP	0	3
HU SRGM	6	3
HU VRI	2	3
HU TNM	5	3
HU TJ	2	3
HU MV	2	3
HU TVR	3	3
RH GOC & SDH VM	-	-
TOTAL	23	24

- Necessary corrections in Book of Sanction has already been intimated to Sr.DPO/TPJ.

**CONCLUSION:** The recommendation of Work study to surrender SEVEN post of HKA ( with 2 HKA in each HU) is not possible as they are vital staff for cleanliness and minimum three per HU is essential, as discussed above and hence, NOT agreed upon.

## Annexure-III

Please issue  
11/7/2020

SN-2

GOVERNMENT OF INDIA  
MINISTRY OF RAILWAYS  
RAILWAY BOARD

No.11-2019/SPMPS/Yardstick/2

New Delhi, dated 30.06.2020

General Managers,  
All Indian Railways/ PUs

Sub: Revision of Yardsticks/ Norms of various O&M activities on the Railways

Ref: Resolution of full Board Meeting dated

Consequent upon the directive from CRB in December, 2017, a comprehensive "Manpower Strategy Note" was issued to all Zonal Railways in May, 2018. Key component of this strategy was the revision of Yardsticks/Norms of various activities on the Railways. Board in its Meeting held on 28.12.2017 decided that manpower yardsticks for various O&M activities of all departments may be reviewed on account of technological inputs, outsourcing, changes in maintenance practices.

2.0 Accordingly, in May, 2019 Zonal Railways were advised to undertake a Zero Based Review of yardsticks for all O&M activities. Based on the inputs, the detailed views were given for concluding the revision of Yardsticks. Final view has already been given on Yardsticks for Civil Engg. (Trackmen), Medical, Accounts and Commercial Departments. However, the same in r/o Civil Engg. (Bridge & Works), S&T, Security, Stores, Operating, Personnel and other Miscellaneous Departments have not yet been finalized.

3.0 Pursuant to the decision taken by the Board in its meeting held on 29.06.2020, it has been decided that the Yardsticks/Norms of various O&M activities across all Departments on the Railways stand reduced by 15% on as is where basis as an interim measure w.e.f 01.07.2020. This will however not be applicable to Electrical, Mechanical and Accounts Departments where the revised Yardsticks have already been issued in September 2019.

4.0 The final Yardsticks/Norms for each discipline will be communicated subsequently with the approval of Board on case to case basis. This interim reduction will automatically get superseded once the final revision of Yardsticks/ Norms are issued.

5.0 The PCPO and PFA of concerned Zonal Railway/PU may accordingly revise the Yardsticks/Norms of various O&M activities across all Departments (except Electrical, Mechanical and Accounts) and communicate compliance to Planning Directorate.

This issues with the approval of full Board (ME, MTR, MRS/MMM, MST, MT, FC & CRB).

(Sudheer Kumar)  
Additional Member (Planning)  
Railway Board

Copy - CRB, ME, MT, MTR, MRS/MMM, MST, FC, DG/IR, Secy/RB, AM/Revenue

Civil Engg. Works

Sd/-