



G.275 / WSSR – 471920 / 2020-21

**WORK STUDY TO REVIEW THE
STAFF STRENGTH AT
HEALTH UNIT/MS
CHENNAI DIVISION**

SOUTHERN RAILWAY

PLANNING BRANCH

G.275 / WSSR- 471920 / 2020-21

**WORK STUDY TO REVIEW THE
STAFF STRENGTH AT
HEALTH UNIT/ MS
CHENNAI DIVISION**

STUDIED BY

**WORK STUDY TEAM
OF
PLANNING BRANCH**

August 2020

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(i)
ACKNOWLEDGEMENT

The work study team acknowledges the valuable guidelines rendered by CMS/HU/MS (Co-ordinating Officer), CHI/HU/MS (Co-ordinating Supervisor), and other staff of HU/MS for their valuable guidelines 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 HEALT Unit / MS of CHENNAI Division.

(iv)
METHODOLOGY

The following methodology has been applied while conducting the study.

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

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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.)	No. of posts
1	Ambulance Driver	2400	1
2	Hospital Attendant	1800	1
3	House Keeping Assistant	1800	1
Total			3

Total No. of Posts: 3

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CHAPTER – I

1.0 INTRODUCTION

- 1.1 Medical Department of Southern Railway provides comprehensive health service, both preventive and curative to Railway employees, retired employees and their beneficiaries. Total number of employees presently working in Southern Railway is 81,507. 87,170 retired employees have registered in RELHS for availing health facilities. The total number of Railway beneficiaries is 1,75,544. The total bed strength of this Railway for providing inpatient care is 1135.

There are 42 Health Units and 13 lock-up dispensaries in this Railway with 190 Doctors, 20 Group-B Officers comprising ANO, AHO, AHEO and APHO and around 2065 paramedical staff consisting of 434 nursing personnel.

- 1.2 Evolution 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.
- 1.3 Based on the recommendation of Dr. E. Somasekhar, the then CMO/S.Rly, a separate cell was created under an OSD (later converted as JD and then Director / Health) an Organization 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”.
- 1.4 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.

- 1.5 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.
- 1.6 The need to maintain the organization 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.
- 1.7 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 programmes etc., and conducts medical examination for candidates and employees so as to give their best output to the Railways.
- 1.8 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.
- 1.9 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.
- 1.10 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.

1.10.1 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 (both normal & HOD) 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

1.10.2 Function related to Medical treatment to Railway beneficiaries.

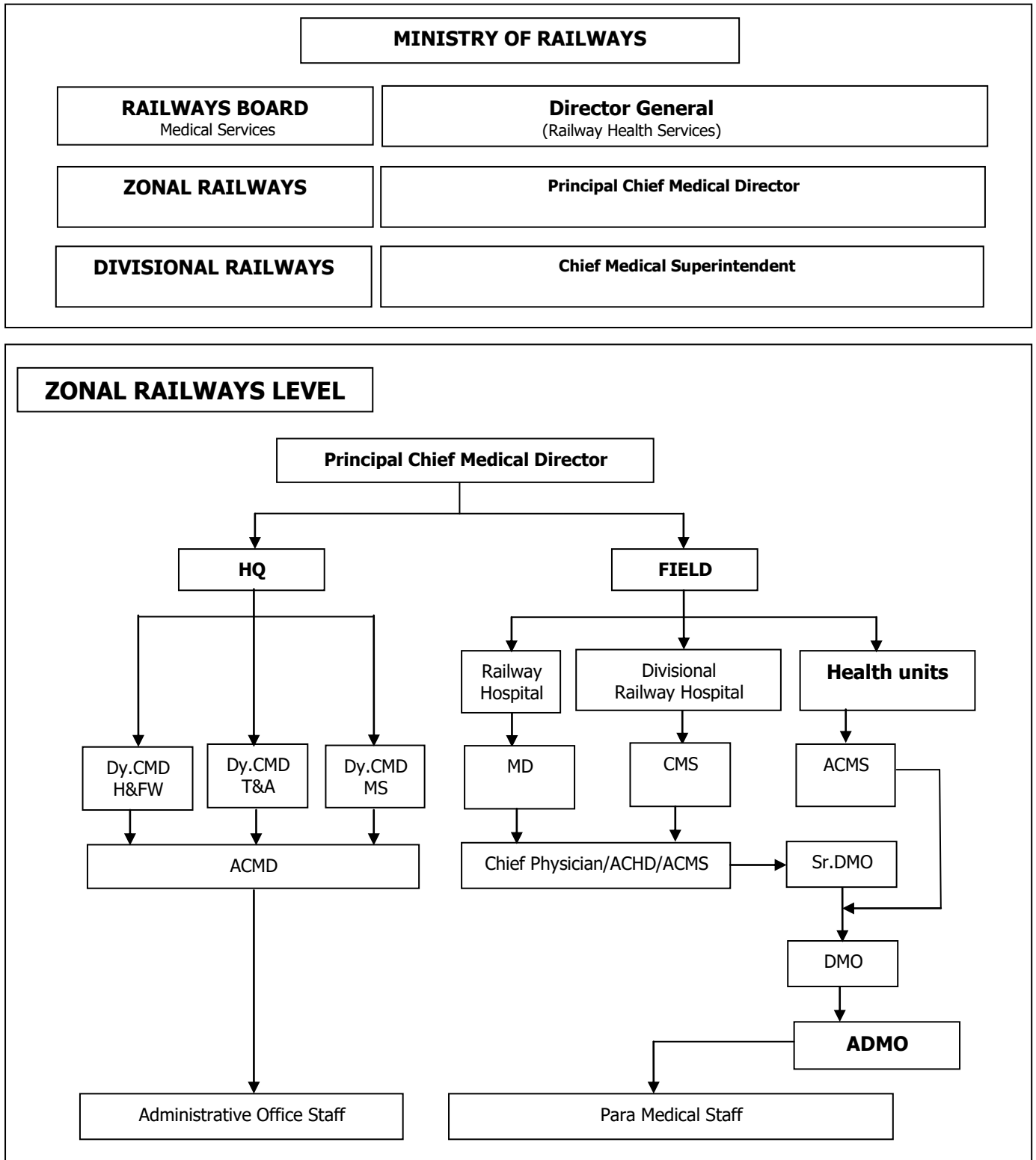
- Curative health care (Primary, Secondary and Tertiary levels)
- Preventive health care
- Promotive health care

1.11 The present trend of increasing Staff cost after implementation of the 7th Pay Commission will result the higher Operation Ratio further. Since the Staff costs alone took about 45% in the total expenditure, an urge is arise to identify the very optimum Man power in all the Units, in such a way this Work Study is conducted in the Health Unit / MS and detailed further in the following chapters.

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CHAPTER-II**2.0 PRESENT SCENARIO**

2.1 CMS is the in charge for both the Health Unit of MS.

2.2 Hierarchical set up of Medical Department in Railways

2.3 Statement of Sanction Actual Vacant & Excess in HU/MS

Sl. No	Designation	As per Division				As per Health Unit			
		S	A	V	E	S	A	V	E
1	MATRON	1	1	0	0	1	1	0	0
2	Supdt Nurse	1	1	0	0	1	1	0	0
3	Chief Pharmacist	2	1	1	0	1	1	0	0
4	Pharmacist	5	4	1	0	2	2	0	0
5	Radiographer	1	0	1	0	1	1	0	0
6	Lab supdt	1	1	0	0	1	1	0	0
7	Chief OS	1	0	1	0	0	0	0	0
8	OS	2	3	0	1	0	0	0	0
9	Sr clerk	2	0	2	0	0	0	0	0
10	Clerk	1	3	0	2	0	0	0	0
11	Dresser Gr II & III	3	3	0	0	3	3	0	0
12	Hospital Attendant	7	4	3	0	7	6	1	0
13	Safaiwala	17	21	0	4	5	4	1	0
14	Peon	4	4	0	0	0	0	0	0
15	HMI	9	9	0	0	0	0	0	0
16	Educator	1	0	1	0	0	0	0	0
17	Ambulance Driver	3	2	1	0	3	2	1	0
Total		61*	57	11	7	25	22	3	0

Note: * includes MMC office, HU/ Tbm and NGO Annex

2.4 Population availing Medical care

Sl. No	Employee /Dependents	HU/MS
1	Serving Employees	2832
2	Dependents of the Serving Employees	8496
3	Retired employees	2267
4	Dependents of the Retired Employees	2267
Total number of beneficiaries in this Unit		15,862

2.5 Working Timing in HU/MS

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

2.6 DETAILS OF HU/MS

S.No	Parameter	HU/MS
1	Bed Availability	1
2	ECG/day	25
3	No. of injections/day	10
4	No. of dressings	1
5	Camps, Seminar & Classes	20 +0 +9
6	Treatment for outsiders	Nil
7	In patients	Nil
8	Lab Technician	1
9	Out sourcing activity	Nil
10	Proposal for expansion	Nil
11	Physiotherapy & Radiography	1
12	No. of child delivery	Nil
13	Ambulance vehicle & driver	1 & 3

2.7 Out-Patient Statistics of HU/MS for the Last 5 Years

Sl no	Particulars	2015-16	2016-17	2017-18	2018-19	2019-20 (up to 30/11/19)
1	Sick and Fit certificate (Non gazetted)	1734	1868	1782	1514	944
2	Sick and Fit certificate (gazetted)	Nil	28	23	24	12
3	WCA Sick and Fit certificate	43	31	42	29	19
4	Transfer / Fit certificate	Nil	Nil	130	140	109
5	PME Sick and Fit certificate	39	27	51	17	10
6	Vendor certificate	Nil	Nil	Nil	458	278
7	Candidate medical examination (RRB, RRC etc)	386	229	335	383	839
8	Employee period medical examination (A1, A2 & A3, B1 & B2, C1, C2)	454	407	561	503	310
9	RELHS (Retired) Card Registration	152	183	168	156	114
10	OPD Census (Out patient)	31,765	31,525	36,332	36,213	23,145
11	Medical Board cases	11	22	26	Nil	Nil
12	Lab Investigation	3609	3822	8072	7252	4165
13	X-ray investigation	3874	5520	1428	1467	3054

2.8 Details of Patients referred to other Hospitals

S.No	Medical Care	HU/MS
1	RH/Perambur	74
2	Government Hospital	NIL
3	Private Hospital	NIL

No of Ambulance available = 1 working in 3 shifts

2.9 WORKLOAD STATISTICS OF PHARMACISTS at HU/MS

- Dispense review medicines in the absence of doctor for chronic Illness
- Check and refill hospital POMKA
- Refilling of FA Boxes (12 – FA Boxes)
- Attend accident calls
- Preparation of annual indent and supplementary indent for medicines
- Maintaining tools and plants, files and registers
- Maintaining stock register for medicines

Apart from the normal work load, the pharmacist has to do

- Rendering first aid in emergencies
- Maintain dispensing room in order and distribute medicines to patients
- Keep accounts of medicines, dressings, consumables and perishables received, consumed and distributed.
- Preparation of indents, condemnation of items and submission thereof.
- Receive stores from parcel / goods office or delivery clerk
- Make entries in all outdoor tickets and injury sheets
- Prepare sick and fit certificates
- Receive and process all applications for medical examination and take their weight / height and chest measurements of the candidates when required.

- Maintenance of Hospital Portable Medical Kit for Accident (POMKA) and VIP First Aid Box-Replacement of medicines.
- Issuance of various Certificates i.e Transfer Sick Certificate, WCA Sick and Fit Certificate, PMC, Food Handlers Certificate etc.

Month	2016-17	2017-18	2018-19
JAN	165	134	141
FEB	144	148	136
MAR	109	130	131
APR	115	126	148
MAY	129	158	140
JUN	133	146	142
JUL	140	128	127
AUG	144	122	120
SEP	145	130	122
OCT	121	124	145
NOV	139	131	153
DEC	144	124	143
Ave.	1628/12=136	1601/12=133	1648/12=137

2.10

Dressers

Duties of the dresser are as follows

- Attend the dressings of all types of wounds and injuries
- Sterilization of equipments
- Auto-clave of dressing materials
- Preparation and application of splints and undertake cutting and rolling of bandages.
- Any other instructions assigned by superiors' viz., staff nurse /nursing sister / matron / medical officer (Refer item No.10, Chapter – II, Vol.-I of IRMM).

2.11

Hospital Attendants

- Cleaning and Keep the ward neat and tidy
- Sponge the patients where there is no Nurse.
- Prepare beds and other arrangements for patient
- Assist Dressers, Nurses for their duty
- Take / assist temperature, pulse, respiration etc.
- Carry and transfer injured patients / sick patients
- Assist in X-ray unit, laboratories , stores, clinics and other needy areas
- Deliver letters, report to required places

2.12 **Duties of Hospital House Keeping Assistant (Safaiwalas)**

- Sweep the roads, ground, floor etc
- Frequent cleaning of the floors of the wards with wet clothes and also doors, windows, window panes etc
- Clean and bed pan, sputum cups, urinals, commodes, latrines etc
- Supply of bed pans, urine bottles to the patients and clean them after use
- Carry the patients and stretches in the hospitals and from station to hospital and back
- Carry hospital stores
- Carry out any other orders given by his / her supervisors.

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CHAPTER-III**3.0 CRITICAL ANALYSIS:**

3.1 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 HU/MS renders the general Medical facilities with the available one and only CMS. The AHO conduct general clinic, general medicine, and medical examination. The patients are also moved to referral Hospital RH/PER according to the requirement of treatment.

This study is confined to the man power requirement of medical staff of HU/MS only.

**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.

The present number of Para-Medical staff actually available at HU/MS is 22 to cater the medical aid for about 15862 registered persons. **This is categories as Health unit (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 the man power has to be arrived to the Railway Health unit of MS. The requirement of man power for the Para-medical staff & assistants is detailed below:

- 3.4 As per Table 2.7 and 2.7.1 the Out Patients per day for 3 consecutive years are calculated as below:

Out Patients Details

Year	HU/MS	
	Per Year	Per Day
2016-17	1628	$1628/365=5$
2017-18	1601	$1601/365=4$
2018-19	1648	$1648/365=5$

From the above data it is very clear that the average out patients per day in HU / MS is approximately 5.

- 3.5 From the data as well as the field study conducted by the Work study team the following aspects are found in MS

S.No	Reference Table No	HU/MS
1	Average Out Patients (Table 3.4)	5
2	No. of injections (Table 2.6 S.No 3)	10
3	No. of dressings (Table 2.6 S.No 4)	1

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 instead of Yardstick of medical Manual.

- 3.7 In this contest the requirement of Paramedical staff in HU/ MS is worked out **ON NEED BASIS.**

3.7.1 Pharmacist

As per Yardstick of medical manual B.3.2.(i) (a) **One Post of Pharmacist** for a health unit.

However there is no OS/Asst clerk, the pharmacist has to do the clerical work also. So the present sanction strength of 3 may be continued.

3.7.2 Dresser

As per Yardstick of medical manual B.3.2.(i)(b) **One Post of Dresser/OT Assistant for a health unit** but the data collected as well as the field study it is found that **only 25 dressings done per month** in the unit and this can be managed with available 3 dressers.

Apart from their duties they are looking after Periodical medical examination, Counter activities, Dispensary work.

3.7.3 Hospital Attendants

As per Yardstick of medical manual B.3.2.(i)(c) **Two Posts of Hospital Attendants** for a health unit, considering the in-patients as per data and field study **six Hospital Attendant is allowed to look after the female OP, X-ray, Dental, Eye & Lab activities leaving surplus of 1 post of hospital attendant, which may be surrendered and credited to the vacancy bank.**

3.7.4 House Keeping Assistant (Safaiwala)

As per Yardstick of medical manual B.3.2.(i)(d) **Two Posts of House Keeping Assistant** for a health unit, since the OP is more than 50 as such **two House Keeping Assistant is allowed .**

Further two more house assistant may be allowed on need basis to look after the allied activities leaving surplus of one post of housekeeping assistant, which may be surrendered and credited to the vacancy bank.

3.7.5 Ambulance Driver:

Presently there is only one ambulance managed by three drivers (Two regular staff & one Re engaged staff) which may be continued. Moreover, it is suggested to outsource this activity as per IRMM and the vacant post may be surrendered and credited to the vacancy bank.

Sanction Vs Requirement:

Sl . No	Category	Sanction	Actual	Requirement	Surplus
1	MATRON	1	1	1	0
2	Supdt Nurse	1	1	1	0
3	Chief Pharmacist	1	1	1	0
4	Pharmacist	2	2	2	0
5	Radiographer	1	1	1	0
6	Lab supdt	1	1	1	0
7	Chief OS	0	0	0	0
8	OS	0	0	0	0
9	Sr clerk	0	0	0	0
10	Clerk	0	0	0	0
11	Dresser Gr II & III	3	3	3	0
12	Hospital Attendant	7	6	6	1
13	Safaiwala	5	4	4	1
14	Peon	0	0	0	0
15	HMI	0	0	0	0
16	Educator	0	0	0	0
17	Ambulance Driver	3	2	2	1
TOTAL		25	22	22	3

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.)	No. of posts
1	Ambulance Driver	2400	1
2	Hospital Attendant	1800	1
3	House Keeping Assistant	1800	1
Total			3

Total No. of Posts: 3

CHAPTER - IV**4.0 Coordinating officer's Views & Planning Branch Remarks:****Co-ordinating Officer View**

Received work study report No 471920 pertaining to staff strength a health unit , MS on 11.03.2020

It is observed that the health unit attached to Chennai division /CMS office doctors with paramedical staff such a hospital attendants , housekeeping assistants with drivers are available to manage the patients for 24 hours .

Particularly the present scenario due to covid-19, medical emergency period needed more health workers with doctors. It is difficult to manage medical treatment render to the employees and ward with present para-medical staff. As for a driver concern one driver is present and he is on absent since lockdown announced . Existing 2 vacancies of driver post has not yet filled up . Driver duty will be managed from other stations like AVD, TBM and moreover the ambulance available is in process of condemnation and the driver post may be surrendered after condemnation. The importance and essentiality service of paramedical staff justification given by DMO /HU/MS letter herewith enclosed for your reference.

Hence no post of Hospital Attendant , Housekeeping assistant and Driver recommended for surrender.

Planning Branch remarks :

Since the ambulance is in a position of condemnation and keeping driver post is not required. Hence the driver post may be surrendered and CO remarks not agreeable.

The present available staff of hospital attendant and housekeeping attendant are enough to manage the present situation. Hence the Hospital attendant post and housekeeping attendant post may be surrendered and CO-remarks not agreed to.

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	No. of post	Money Value (Rs)	Annual Financial Savings (Rs.)
1	Ambulance Driver	2400	1	62,361	7,48,332
2	Hospital Attendant	1800	1	43,817	5,25,804
3	House Keeping Assistant	1800	1	43,817	5,25,804
Total			3		17,99,940

SOUTHERN RAILWAY

Office of the
Asst. Health Officer
Chennai Division, Egmore
Chennai-600008
Dated: 22.06.2020

Dy.CPLO

Sub: Surrender of post reg.

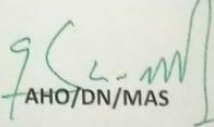
Ref: 1. Work study report No.G.275/WSSR 471920/2019-20
2. DMO/HU/MS Dt.16.06.2020

Received work study report No.471920 pertaining to staff strength at Health Unit, MS on 11.03.2020.

It is observed that the Health unit attached to Chennai Division/CMS Office, Doctors with paramedical staff such as Hospital Attendants, House Keeping Assistants with Drivers are available to manage the patients for 24 hours.

Particularly the present scenario due to COVID-19, Medical Emergency period needed more Health workers with Doctors. It is difficult to manage medical treatment render to the employees and wards with present Paramedical staff. As for as Driver concern at present 1 Driver available who is on absent since lockdown announced. Existing 2 vacancy of Driver post has not yet filled up. Driver duty will be managed from other stations like AVD, TBM and moreover Ambulance now available is in the process of condemnation and the Driver post may be surrendered after the condemnation of Ambulance. The importance and essentiality service of Paramedical staff justification given by DMO/HU/MS letter herewith enclosed for your reference.

Hence no post of Hospital Attendant, House Keeping Assistant and Driver recommended for surrendered now.


AHO/DN/MAS

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Design	Sta	San	4ef
MAFICAM	MS	1	1
Support Nurse	"	1	1
CH Pharmacist	"	2	1.7 (03)
Pharmacist	"	5	4
Pharmacologist	"	1	1
Lab Support	"	1	1 [contract]
Educator	"	1	1
CHOS	"	1	NIL
DS	"	2	3
Svc Clerk	"	2	1
Clerk	"	1	3
Dressmaker	"	3	3
Hospital Admin	"	7	4
Sagawala	"	17	21
Hgmi	"	9	9
Person	"	4	4
clean males 20/0/15	"	—	—

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Average OP from 2017- 2019 at HU/MS

	JAN	FEB	MAR	APRL	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
2017	165	144	109	115	129	133	140	144	145	121	139	144	
2018	134	148	130	126	158	146	128	122	130	124	131	124	
2019	141	136	131	148	140	142	127	120	122	145	153	143	

ML
Chief Pharmacist
HU/MS

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SICK COUNTER PHARMACIST WORK LOAD DETAILS

S.NO.	PARTICULARS	2015-16	2016-17	2017-18	2018-19	2019-20 (UP TO 20-11-19)
1	SICK & FIT CERTIFICATE (NON-GAZETTED)	1734	1868	1782	1514	944
2	SICK & FIT CERTIFICATE (GAZETTED)	-	28	23	24	12
3	WCA SICK & FIT CERTIFICATE	43	31	42	29	19
4	TRANSFER /FIT CERTIFICATE	-	-	130	180	109
5	PME SICK & FIT CERTIFICATE	39	27	51	17	10
6	VENDOR CERTIFICATE	-	-	-	458	278
7	CANDIDATE MEDICAL EXAMINATION (RRB, RRC etc.)	386	229	335	383	839
8	EMPLOYEE PERIOD MEDICAL EXAMINATION (A1, A2, A3, B1, B2, C1, C2)	454	407	561	503	310
9	RELHS (RETIRED) CARD REGISTRATION	152	183	168	156	114
10	OPD CENSUS (OUT-PATIENT)	31765	31525	36332	36213	23145
11	MEDICAL BOARD CASES	11	22	26	-	-

OTHER SICK COUNTER PHARMACIST WORK:

- All office work of Health Unit is done by sick counter pharmacist (Like Absentees statement, NH statement, etc.)
- Preparations of Medical Board file for Employee.
- Alcohol/Drunkenness sending sample to Government Forensic Laboratory and after result send to respective department.
- Monthly returns (MCDO) preparation and submit to CMS/MAS.
- Maintain Sick register patients, transfer sick, WCA sick and Daily sick report (DSR).
- Preparing Training camp certificate, Maternity certificate, IMC (Interim) Certificate & PMC (Duty Certificate).
- Filing of all official letter received, maintained incoming letter register.
- Despatching of all Official letter, certificates etc.

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SICK COUNTER PHARMACIST WORK LOAD DETAILS

S.NO.	PARTICULARS	2015-16	2016-17	2017-18	2018-19	2019-20 (UP TO 20-11-19)
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- Monthly returns (MCDO) preparation and submit to CMS/MAS.
- Maintain of Sick register patients, transfer sick, WCA sick and Daily sick report (DSR).
- Preparing Training camp certificate, Maternity certificate, IMC (Interim) Certificate & PMC (Duty Certificate).
- Filing of all official letter received, maintained incoming letter register.
- Despatching of all Official letter, certificates etc.

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1. Medical Staff Strength at HUIMS-MAS Division

	Pharmacist	Nurses: HEA staff Nursing Assistant	Sanitary Cleaner	Dresser	Ambulance Driver	Heavy Attender Assistant	Lao Assistant	Radiology technician
Sanction	15	2	5	3	3	7	1	1
Actual	3	2	4	3	2	6	1	1
Vacancy	Nil	Nil	Nil	Nil	1	1	Nil	Nil
Excess	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil

2. Staff Distribution for various locations activities in each shift or in general shift

Dresser I	Up keeping dressing room & counter and drug assigned by ACMS
Dresser II	Preparing dressing materials Antiseptic instruments filling PME room and duties assigned by ACMS
Dresser III	Assisting ACMS in PME room and duties assigned by ACMS
Ambulance Driver	Morning 6:00-14:00 hrs: Cleaning ambulance & accompanied the patient to RH PER. Helping in Pharmacy Evening 14:00-22:00 hrs: Attending emergency cases, filling letters in pharmacy attending phone calls & ambulance calls. Night 22:00-6:00 hrs: Attending emergency cases & Assisting night duty Doctor on duty
Lao Attending general duty	Up keeping laboratory washing test tubes, water sample bottles, destroying needles & syringes
Pharmacy	Ambulance driver will help morning and evening duty in the Pharmacy doctor in PH
Dental	Assisting dental instruments maintaining cleanliness Antiseptic instruments working and cleaning instruments
X-ray	Assisting X-ray technician in dark room for developing X-rays and maintaining cleanliness in X-ray room
FDP	Cleaning work
Attender	Assisting doctors in examination General examination of female patients and cases Duties assigned for duration by superior the duties assigned by ACMS

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3 No. of different units in HUIMS

- Eye department
- Dental department
- Laboratory department
- X-ray Department

4 No. of beds available for service only one bed for observation at casualty

5 Nil

6 Outpatient statistics for the past 5 years. — particulars enclosed

7 No. of population - 2832
Retired - 2267
Serving employees with their family - $2834 \times 4 = 11328$

8 - (particulars enclosed)

9 - (particulars enclosed)

10 Nil

11 Nil

12 Nil

13 No. of injections/day average—10
ECG/day average—20 to 25
QTBS—20
BP—for all OP cases

- Maintaining T&P register looking after group D staffs, Duties, keeping of health unit

14 No. of dressings (average in month wise)

Sl. No	Month	No. of Dressing
1	January	25
2	February	30
3	March	24
4	April	20
5	May	17
6	June	18
7	July	25
8	August	20
9	September	31
10	October	20
11	November	52
12	December	25

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Attended ...
Accompanied ...
and ...

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15. Area to be cleaned & sanitized

- Inside
- Outside

16. No. of patients refer to Risper for the past 3 years - 74

- Govt. hospital - Nil

17. No. of deliveries - past five years - Nil

18.

- Campaigns - 20
- Seminars - Nil
- Classes - 9

19. ~~Provide~~ staff other than doctors - statistics - 12 months

20. Nil

21. Nil

22. No. of Ambulance - 1 nos

- Drivers - 4 nos regular - 2 Vacancy - 2

23. Nil

24. Nil

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15) Area to be cleaned & sanitized

- Inside --
- Outside --

16 No. of patients refer to RH/PER for the past 3 years - 74

- Govt. hospital - Nil

17 No. of deliveries - past five years - Nil

18.

- Campaigns - 20
- Seminars - Nil
- Classes - 9

19. *Organization duties* duty staff other than doctors - statistics - 12 months

20. Nil

21. Nil

22. No. of Ambulance - 1 nos

- Drivers -- 4 nos regular - 2 Vacancy - 2

23. Nil

24. Nil

Nursing Sister - 1
X. Kanjivaram - 1
Pharmacist - 1

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Health Unit, Egmore,
Chennai Division,
SOUTHERN RAILWAY

SOUTHERN RAILWAY

Save Statement Pharm. Drugs Dining
2 6 3 4 7 1 1

Sanction - 5 2 4 3 2 6 1 1

Actual - 4 2 4 3 2 1 1 1

Vacancy - 1 Nil 2 Nil 2 1 Nil -

Excess - Nil - - - - -

Staff Distribution for various locations,
activities in each Shift or in general Shift:

Dresser I - Dressing Room & Laundry + Duty assigned by
Attending

Dresser II - Ambulance, Preparing Dressing materials,
Instruments, Filling P.M.E. Room +
Duties assigned by Acms

Dresser III - Assisting Acms in P.M.E. Room +
duties assigned by Acms.

Ambulance

Attender morning 6-14hrs - Cleaning Ambulance &
accompanying patients to Discharge and getting them for SL.

Evening 14-24hrs - Attending Emergency cases
filling letters in Pharmacy
Attending phone calls
attending Ambulance calls

Night 22-6hrs - Attending Emergency cases

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Dental - Assisting Dentist.
 X-Ray - Assisting X-Ray tech in Dr.
 for developing X-Ray
 for cleaning over ~~bores~~
 FOP - Assisting Doctors in Exa
 General Examination of female
 Assisting of that cases. & duties asin
 for dilatation by Superior.

③ No of Different units in H/MS

- 1) Eye Department
- 2) Dental Department
- 3) Laboratory Department
- 4) (Radi) X-Ray Department.

④ No of beds available for Service
 only one bed for observation at Ca

11/2

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No of population - 2832
 Retired - 2267
 Serving Employees - 2832 * 4 = 11328
 with their family

No of injections/day Average - 10
 Average { ECU - 20 to 25
 or day { BTBS - 20
 Bp - for all op cases.

Maintaining T&P Registers.
 Looking after Army-D Shifts Duties.
 Infection of Health unit.

No of dressings - Average / month wise
 Jan - 25
 Feb - 30
 March - 24
 April - 20
 May - 17
 June - 18
 July - 25

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(15) Area to be cleaned & Sanitized
 Inside -
 Outside -

(16) No of Pts ref to RH/PER - 74
 for the past 3 yrs. Civil Hosp - 14

(17) No of deliveries - past five years - NIL

(18) Camp - 20
 Seminars - NIL
 Classes - 9

(19) on duty/outstation statistics
 Staff } for 12 months } -

(20) No of Ambulance - one
 Drivers - (3) regular - 2
 vacancy - (1)

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