

# Director's Report 2011-12

**Presented to Annual General Body Meeting  
21st February 2013**



**THE INSTITUTE OF HEALTH SYSTEMS**

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# The Institute of Health Systems.

## Director's Report, 2011-12

Ladies and Gentlemen,

On behalf of the faculty and staff of the Institute, I welcome you all to this seventeenth annual general body meeting. We have been functioning with a small team of core staff, whose hard work, perseverance and support has been invaluable to the Institute. While there has been some progress in taking forward our mission, there are enormous challenges to be overcome. To stabilise the Institute's financial position, we made some progress by expanding scope and increasing the volume of public services activity. Although, we could complete all pending research projects, we have not had much success in securing funding for new projects. We also put in the required effort to nurse some of the long term programs which are likely to fructify in the near future. I gratefully acknowledge the support given by members of the Board, the Executive Council, and the General Body in sustenance of the Institute. I would like to use this opportunity to specially acknowledge the guidance of the IHS Chairman, Dr. G.N.Rao and continued contribution of Dr. Prasanta Mahapatra, President of the Institute as a supporter and mentor in all aspects.

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

### Institute's Faculty and Human Resources:

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

**Table-1: IHS Faculty and Human Resources Position, 2012**

Category of Personnel	As on 31/3/12					As on 01/02/13				
	Emp	Stipnd	Fee	Vol.	Tot	Emp	Stipnd	Fee	Vol.	Tot
<b>Faculty &amp; Coordinators</b>										
Full Time Faculty	2	0	0	0	2	2	0	0	0	2
Consultants	0	0	3	0	3	0	0	3	0	3
Voluntary / Visiting Fac.	0	0	0	2	2	0	0	0	2	2
<b>Research &amp; Lab Personnel</b>										
Res. Associates	0	0	0	0	0	0	0	0	0	0
Res. Assistants	0	0	0	0	0	0	0	0	0	0
Microbiologists	0	1	0	0	1	0	2	0	0	2
Res/Field. Investigators	0	1	0	0	1	0	1	0	0	1
WQTL Investigators	1	5	0	0	6	1	4	0	0	5
Lab Technicians	2	2	0	0	4	0	3	0	0	3
<b>Fellows, Interns &amp; Appr.</b>										
Research Fellows	0	0	0	0	0	0	0	0	0	0
Interns	0	2	0	0	2	0	2	0	0	2
<b>General Sup. Personnel</b>										
Project Manager	1	0	0	0	1	0	0	0	0	0
Accountant	0	1	0	0	1	0	1	0	0	1
Front Office Staff	1	0	0	0	1	1	1	0	0	2
<b>Ser. Provider Personnel</b>										
Security	0	2	0	0	2	0	0	2	0	2
Sanitation	0	2	0	0	2	0	0	2	0	2
<b>All</b>	<b>7</b>	<b>16</b>	<b>3</b>	<b>2</b>	<b>28</b>	<b>4</b>	<b>14</b>	<b>7</b>	<b>2</b>	<b>27</b>

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

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

Annexure-1 provides more details about the current faculty and personnel profile of the Institute. Our faculty and staff participated in several workshops, seminars and conferences, details of which are provided in Annexure-2. During the current year, the IHS Director has attended health policy formulation event “ Publicly Financed Emergency Response and Patient Transport System in India” organised by NHSRC, MoHFW, GoI on 6-7th Aug 2012. A list of outgoing faculty and personnel is given in Annexure-3. All of you are aware that the academic programs have been suspended as we do not have adequate space. Hence, there was no scope to receive the visiting faculties during the reported year.

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

### Reporting Period (2011-12) Events and Activities:

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

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

#### A. Research and Consultancy:

Three research projects and one consultancy project were completed during the reporting period as shown in Table-2. A brief summary of each of these projects is given in Annexure-4.

Table 2: Research & Consultancy Projects Completed in 2011-12

Sl	Project	Sponsor	Start Year
<b>Research</b>			
1	Review of EMRI Model of Emergency Response Services in Andhra Pradesh.	NHSRC, MoH&FW.	2011-12
2	Behavioral Tracking Survey (BTS) of High Risk Groups in the districts of Guntur and Srikakulam.	HLFPPT. Hyderabad	2011-12
3	Andhra Pradesh Civil Registration System Study.	Planning Department, GoAP.	2010-12
4	Cause of Death Coding for CHAMPION Trial.	Naandi Foundation	2008-11

The first two research projects were taken up in the reporting period and completed. The third and fourth projects were started in earlier years and completed in the reporting period.

## B. Academic Programs:

### 1. Masters in Public Health (MPH)

#### a. Statute and Board of Studies for International Programme:

Given the paucity of institutional mechanisms to develop public health manpower with multidisciplinary and interdisciplinary skills, and our long term objective to develop a college of public health, the Institute has striven to consolidate its efforts in public health capacity building and developing a masters level programme in public health. The Advanced Studies in Public Health programme builds on the Institute's past work and represents our future aspirations for improved public health capacity in the country. The program aims to create deeply committed public health professionals, well equipped with essential public health competencies in such areas as health care management, policy analysis and health systems research.

The Institute supported the University in preparing the statutes for recognizing a school of public health and affiliating the Masters in Public Health Programme. The statutes have been approved by the Board of Studies and has received assent of the Chancellor of the University. Subsequently we followed up with NTRUHS for amendment of the Statute to incorporate certain errata and for constitution of separate Board of Studies for International Courses. We received the assent and amendments to the statutes of Masters in Public Health course vide G O Ms. No 127, dated 19/05/2010.

Subsequently the Institute has requested the Government for permission to start the program. The Government has directed the University to conduct an inspection and certify our preparedness to offer the programme. Given our limited resources we had an understanding with LV Prasad Eye Institute, whose Chairman Dr. G.N Rao has graciously offered the use of LVPEI facilities at Kismetpur for the program. The Inspection committee of Dr NTR University of Health Sciences, recommended the case of the Institute and suggested for constitution of a separate board of studies for international courses. Accordingly, Govt has given permission in GOMs.No.173 dated 19-8-2009 to start Masters in Public Health (MPH) provided that, the institute shall produce a document from L V Prasad Eye Institute assuring permission to use their premises in Kismetpur for 5 years or till IHS acquires another premises whichever is earlier and subject to affiliation by the Dr. NTR UHS..

Further, IHS has supported the University in preparing the draft ordinance for constitution of Board of Studies for International Program (BoS-IP) and sent to them on 19/06/2010 with a request to place before the Executive Committee for consideration. The NTRUHS has informed in its letter dated 10/07/2012 that their executive council has resolved in its meeting held on 29/02/2012 to have UHS Registrar for international programs.

#### b. Fixation of Fee and Seat Matrix:

NTRUHS has given approvals for tuition fee and seat matrix as detailed below in its letters dated: 10/07/2012 and 07/12/2012.

Course fee for the academic year 2013-14			
Category		Fee for 1st Year	Fee for 2nd Year
A	AP Reserved Seats	Rs 363,000	Rs 399,300
D	Domestic - All India, including students from AP over and above the reserved seats.	Rs 605,000	Rs 665,500
I	International - Foreign Nationals & NRIs	\$19,360	\$21,296

Seat Matrix for MPH Admissions - 15 Students

Student Origin		SC (15%)	ST (7.5%)	Others	Sub Total #	Sub Total %
Domestic	AP Locals	0.45	0.22	2.33	3	20
	Resident Indians	0.9	0.45	4.65	6	40
	Sub Total	1.35	0.67	6.98	9	60
International		0	0	6	6	40
Total Student Intake		1.35	0.67	12.98	15	100
Rounded Intake		1	1	13	15	100

## c. Affiliation for MPH Course:

NTR UHS has requested IHS to furnish Govt permission to start MPH course to grant provisional affiliation as the earlier permission given by Govt in GOMs.No.173 dated 19-8-2009 is only an essentiality certificate. Hence, the IHS has requested the Govt in the letter dated 4/1/13 to reconfirm the permission granted to IHS for starting the Master in Public Health. We are yet to receive the permission from Govt. Once, the permission is received, an application will be filed with NTR UHS for provisional affiliation

## d. MPH Grant Proposal:

To start the MPH program, we need to have initial investment to meet the expenditure on faculty and infrastructure. As given in the previous para, the expenditure for 5 years is coming to INR 49,62,55,816. The revenue generation based on the fee proposed as per the students intake and the faculty cost on research is estimated to be INR 41,25,70,000. As per the estimation, there is revenue shortfall for the first four years which comes to INR 12,11,14,984. Hence a grant proposal has been prepared with the title as "Developing Public Health capacity and Human Resources for health". As informed earlier, the concept note was submitted to the Ford Foundation and there was no response. We explored other source like Japan International Cooperation Agency (JICA) through the consultants Nippon Koei India Pvt Ltd. They discussed with JICA about the possibility of funding the project through Japan Government ODA but informed that, grant or loan is available only for Indian governmental organizations but in case of NGO, it is limited to 70 lacs for constructions. Other sources need to be explored to start the course.

## e. IHS Land and Campus Development Plan:

Members are aware that, the state Government has allotted an extent of Ac16.00 in favor of Institute to build a world class College of Public Health and campus on payment of Rs 10.00 lakhs per acre. But there is a Public Interest Litigation (PIL) case before the Hon'ble High Court of AP. The Institute has approached a reputed advocate to represent its case. Advocate Sri Prakasha Reddy has kindly offered to represent the IHS case, pro bono. The IHS has to bear the incidental costs and the fees of Junior Advocate Sri P.Radheev Reddy. So far, Govt, the first respondent has not filed their counter affidavit and hence, the case has not come up for hearing in the court. Mr.Radheev Reddy suggested that, IHS may file the counter, once the Govt files their counter affidavit. While the PIL case is still pending in the court, parallelly, we pursued for change of land use from recreational use zone to institutional use zone. HMDA has issued public notification on 20/09/2010 for calling objections for change of land use and there were no objections. Subsequently, HMDA requested IHS to pay Rs. 32, 37, 600/- as development charges<sup>1</sup>. But, we requested HMDA to

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

exempt the payment of development charges. In response, HMDA asked IHS to furnish the financial statements for the latest three years to consider the exemption proposals. IHS submitted the details to HMDA on 18/05/2011. On processing our request, MAUD<sup>2</sup> informed that the Govt. has considered to grant exemption upto 50% of the development charges. Subsequently, HMDA has raised fresh demand in its letter dated 21/12/2011 for Rs 38,84,855 and requested to pay Rs 19,62,428 after 50% exemption. Now, IHS need to pay Rs19,62,428/- towards the development charges for which we are exploring the financial sources.

### **C. Training Services:**

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

### **D. Public Services:**

1. **Public Health Laboratory:** The members are well aware that, since, March 2004, the Institute is monitoring water quality at various points of water distribution system operated by the HMWSSB. These include mostly testing for residual chlorine and bacteriological contamination tests on water samples collected at reservoir points, tanker collection points, selected slum area, eateries and restaurants. IHS personnel also record their observations during the course of their sample collection, that could impact on water quality such as water leakages, damages to the distribution pipes, sewerage overflows with exact addresses and informs the HMWSSB for correction. Focus Group Discussions (FGD) are also being conducted in one or two randomly selected slums in a week to educate the residents about good hygiene practices and measures to prevent water contamination. In addition the laboratory is also collaborating with other research institutions by providing water quality testing services. Water quality testing services are also made available to general public. The laboratory has significantly increased its output and has also been a major source of revenue for the Institute during the current year. An overview of revenue from IHS laboratory services is in Annexure-5.

Recently the HMWS&SB wanted to know the reason for IHS to follow DPD method and whether IHS is willing to take up 2500 additional samples per day for RC testing. In this connection, Director explained to the GM, QAT wing of MWB on adopting the DPD method as other method-OTO is carcinogenic. In respect of additional samples, and after discussions with QAT wing, IHS submitted proposals to cover 1000 additional samples per day. The response from MWB is yet to receive.

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

### **E. Publications:**

List of IHS publications in the reporting year are given in Annexure-6. I am happy to inform that, NMJI in its July / August 2012 edition has published the article, "Availability of doctors at primary health centres of Andhra Pradesh, India" authored by Dr. Prasanta Mahapatra

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<sup>2</sup> MAUD Ltr. No. 3695/11/2009 dated 11/07/2011

with three others Dr. CK George, Dr. Dayakar Thota, and Mr NS Reddy. IHS personnel gave invited presentations, details of which are given in Annexure-7.

## Current Year (2012-13) Developments

### A. Research and Consultancy:

We are putting our best efforts to prepare as many proposals as feasible. Unfortunately, none of them have yielded any funded project. The proposals submitted and their status are given in Table-3.

Table-3: Project Proposals Submitted

Sl	Project	Potential Sponsor	Status/Remark
<b>Research</b>			
1	Pre-Proposal on Policy Analysis on Public and Private Role in Health Professional Production / Employment	Asia Pacific Action Alliance on Human Resource for Health	Not awarded.
2	Pre-Proposal on Policy Mapping and Analysis on Rural Retention Policy	Asia Pacific Action Alliance on Human Resource for Health	Not awarded.
3	Integrated Behavioral and Biological Assessment (IBBA)-Round 3 in the states of Tamil Nadu (Salem and Coimbatore) and Andhra Pradesh (Guntur)	National Aids Research Institute	Not awarded.
4	Role of Community and Government Organisations in key areas of Water, Sanitation & Health and its Convergence with ICDS Program.	Ministry of Women and Child Development	Filed in July 12. Waiting for response.
5	A Study of Health Profile of Children aged 0-6 Years and their Nutritional Status Assessment in Urban Slums of Hyderabad.	Ministry of Women and Child Development	Filed in July 12. Waiting for response.
6	Evaluation Study on the utilisation of Untied Funds released under NRHM to the Primary Health Centers, Sub-Centers and Village Health Sanitation & Nutrition Committees in Andhra Pradesh	NRHM & CFW, Andhra Pradesh	Not awarded.
7	Increase Access to Clean Drinking Water to BoP Households in Selected Villages and Urban Slums in Bhopal District, Madhya Pradesh - <i>A Baseline Research</i>	PSI, New Delhi	Not awarded.
8	'Effect of Atmospheric Pollution On Respiratory Morbidity of School Children in Hyderabad	ICMR	Concept note cleared by ICMR in Apr' 12. Detailed proposal submitted by IHS in May' 12 is currently in review with subject experts. Waiting for further response.
9	Short listing for the training programs under Human Resource Development for Health Research	Department of Health Research	Not awarded.

## B. Model PHC (Primary Health Care) System Management:

The members are aware that, IHS has proposed to take up the development of model Primary Health Care Systems in rural, remote and high mortality areas of Andhra Pradesh under Public Private Partnership (PPP). IHS conducted feasibility study and made a proposal to develop the health care institutions covered in Kodangal and Achampet clusters in Mahabubnagar district as a model.

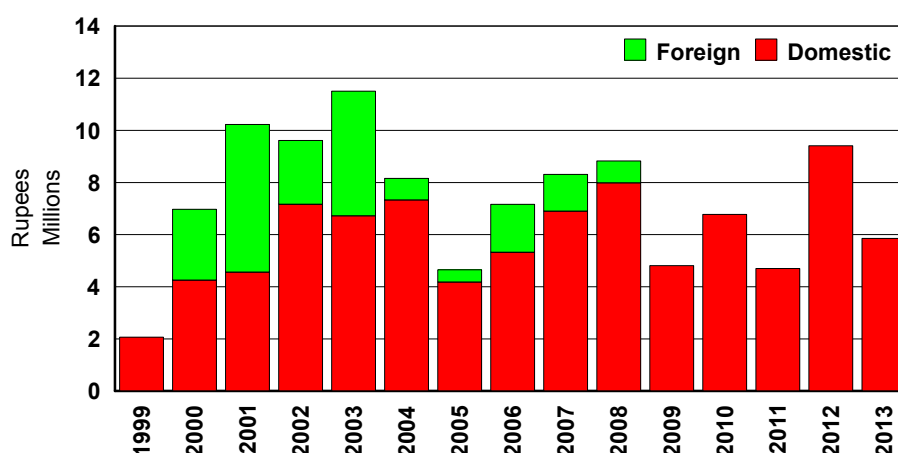
The DM&HO, Mahabubnagar has sent a Letter of Intent<sup>3</sup> that the Collector agreed for two institutions viz. (i) Achampet Civil Hospital & (ii) Padara PHC to be taken up by IHS for management as a model. Subsequently the IHS team conducted the Bench Mark Survey and made an assessment of the infrastructure facilities, staff position, materials and supplies etc., in Achampet Civil Hospital and Padara PHC. Then the grant - in - aid required is estimated under three broad categories (a) Salary component, (b) Non salary component and (c) Building maintenance and filed an application with DM&HO on 14/12/2011. The District Collector, Mahabubnagar in his letter dated: 21/01/2012 has recommended IHS application / proposal to the Director of Health (DH) and Commissioner Health & Family Welfare (CFW) for consideration.

Director IHS had met CFW on 1/3/2012, 15/06/2012 and 28/07/2012 and apprised him on the management model. The state level committee meeting was also scheduled once on 18/06/2012 but was postponed. The CFW informed that the state level committee will be convened along with the representative of Karuna Trust as they got some issues to understand on the PHC management model. Subsequently in Aug 2012, the Director of Public Health (DH) has requested IHS, the information on Burden of Disease. IHS furnished all relevant publications to DH including the material on the recent BoD related work on APCRS and Air Pollution & Cause of Death Studies. On 7/12/2012, it was scheduled to give presentation by IHS on the Burden of Disease, but it was postponed due to some other reasons. We hope to get clearance for this project in 2013 which may coincide with the starting of MPH course.

## Taking Stock of the Institute's Financial Position:

Classification of the Institute's revenue from domestic and foreign sources as well as by activity is given in Annex-8. In Figure-1 the gross revenue generated by the Institute from the date of its inception has been summarized.

Figure-1: IHS Gross Revenue Trend Since 1999



Estimate for 2012-13 is based on year to date and anticipated receipts.

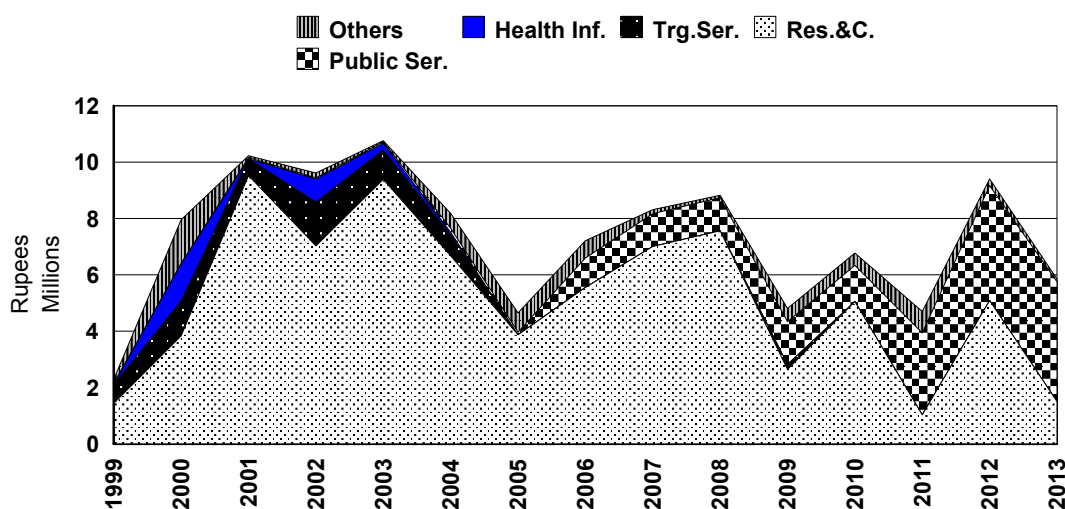
<sup>3</sup> DM&HO Ltr. Dated 22/11/2011

The Institute witnessed a phenomenal growth in revenue during the period between 1999-2000 and 2002-03. The trend reversed in 2003-04 with a steep decline in receipts in 2004-05. Since then there has been a steady growth of receipts till 2008 but seen decline again in 2009. But there is an increasing trend in 2010. The receipts again appears to be in decreasing trend in 2011. But there is phenomenal increase in receipts in 2012 after 2003. But again the anticipated receipts for the year 2013 appears to be decreasing. The share of foreign sources in the total receipts of the Institute has been around 10% for the years 2003-04 and 2004-05. In the year 2005-06, share of foreign sources was about 25%. In 2006-07 the share of foreign sources declined to about 15% of the total receipts. Since 2009, there are no receipt of foreign sources.

As is evident from Figure-2, most of our revenue has been contributed by Research and Consultancy. In recent years, receipts from public services has been increasing mainly on account of water quality testing services. Current year, public services account for about 43% of the Institute's revenues.

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

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



Estimate for 2012-13 is based on year to date and anticipated receipts.

## Accounts and Audit Report:

The audited accounts of the Institute for the year 2011-12 have been enclosed. I now request you to consider the same and give your approval with suggestions if any.

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

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

Date: 01/02/2013

G Surendra  
Director

## **Annex -1**

### **Faculty and Personnel Profile**

#### **Full Time Faculty**

##### **G Surendra, Director**

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

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

##### **Satish Kumar Kannapa, Faculty**

Dr. Satish Kumar K holds a PhD in Environmental Biology from the Osmania University. Dr. Satish is currently working as a Faculty at the Institute of Health Systems (IHS), a nonprofit health systems research organization since August 2010. Earlier also, he worked at the IHS from May 2000 to April 2006 as a Faculty in Environmental Health. He worked as a Program Manager: Communication & Knowledge Management at India HIV/AIDS Alliance, Andhra Pradesh which works to build and link existing capacity and expertise in HIV/AIDS prevention and care within the NGO sector in Andhra Pradesh. Prior to that he was part of the Research & Development initiative at the Byrraju Foundation. Before that, he was with MARCH (Marketing Consultancy & Research), an affiliate of ICFAI as Domain Head, Health care & Pharma Research Division. He was awarded a Gold

Medal for best scientific paper presentation titled "Respiratory Effects of Air Pollution" at the 24th AP State TB & Chest Diseases Worker's Conference in 1997.

During his current stint at the IHS, Dr. Satish has completed a research project titled "The Effect of Air Pollution on Cause of Death Profile in Hyderabad" sponsored by the Ministry of Environment & Forests. He is currently working on Hindustan Latex Family Planning Promotion Trust commissioned study "Behavioural Tracking Survey" among HIV/AIDS High Risk Groups viz., female sex workers (FSW) and men having sex with men (MSM) in Guntur & Srikakulam districts of Andhra Pradesh. During his earlier term at the IHS, he had carried out research and consultancy projects in the areas of environmental health, demography, and road traffic crashes. He coordinated a District Family Health Survey, undertaken to estimate IMR, MMR & Fertility Rates at the district and sub district levels. Dr. Satish was Co-Investigator in the "Indoor Air Pollution Exposure Atlas" study, designed to develop a methodology for predicting quantitative exposures to IAP from qualitative information on fuel use and housing characteristics to construct an exposure atlas. He was the Principal Investigator for the "Health Effects Analysis & Economic Valuation" components of the Integrated Environmental Strategies (IES) India Project, initiated by the USAID & US EPA. He was also Principal Investigator for a research study titled "Epidemiology of Road Traffic Accidents in Hyderabad City", sponsored by the ICMR and was designed to understand the epidemiology of risk factors associated with high level of road traffic accidents in Hyderabad. He served as a Resource Person for Several Training Programs conducted by IHS. He has published several research papers in peer reviewed journals. Dr. Satish attended a special workshop on "International Air Pollution & Energy Climate Policy Collaboration" held at the University of British Columbia, Vancouver, Canada in August 2002. He attended an International Symposium on "Socioeconomic Factors & Air Pollution Health Effects" held at Perth, Australia in September 2003. He also attended a Training Session on Air Pollution & Public Health and a Training Workshop on Co-benefits Analysis, held at Beijing, China in November 2003. He served as Advisory Committee Member for Indian Council of Medical Research (ICMR) on "Assessment of Burden of Non-Communicable Diseases".

## Consultants:

### Dr Sai Shankar Pratap

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

### Dr K V Satyanarayana Murty

Dr Satyanarayana Murty holds a MD degree in Social & Preventive Medicine from University of Health Sciences, Andhra Pradesh. He is currently working as Professor of Social & Preventive Medicine, Gandhi Medical College, Hyderabad. As a consultant to ICDS when it was still a central program, Dr Murty has done field evaluation, analysis and reporting of ICDS activities in Kurnool district in 1992 - 1993. He has been a trainer in Universal Immunization

Program for PHC Medical Officers of Kurnool and Anantapur Districts in 1992. Dr Murty has investigated several outbreaks of diseases like Japanese Encephalitis (Anantapur district 1993), Fevers of unknown origin (East Godavari Tribal belt 1996), Guillain Barre syndrome (West Godavari district, 2003 - 2004) and Gastro enteritis outbreak (Bholarapur, Hyderabad (2009)). He has contributed substantially to the AP Gastroenteritis Manual published by IHS. Dr Murty was the Lead evaluator of world Bank funded NPCB in one tribal district of Madhya Pradesh in 1999. He also worked as consultant to UNICEF in Border District Cluster Strategy (Adilabad District) in 2001- 2002. He was a member of Thesis committee of Osmania Medical College, Hyderabad from 2000 to 2002. Dr Murty has guided more than a dozen theses submitted by doctoral students in Social & Preventive Medicine. He is currently involved in IGNOU project guidance for students of PG Diploma in Maternal & Child Health and also in verbal autopsy of cause of death studies being done by IHS.

### **B L Srikanthi**

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

## **Voluntary & Visiting Faculty:**

### **Prasanta Mahapatra**

Dr. Prasanta Mahapatra, President of the Institute is a physician civil servant. He is a Takemi Fellow in International Health and has a doctorate in International Health and Economics from the Harvard School of Public Health. He is currently the Principal Secretary to Govt.(Primary Education), GoAP. Dr. Mahapatra established, for government of AP, the first University of Health Sciences (APUHS) in India, at Vijayawada and became its first Registrar. As Registrar of the APUHS and Director Medical Education, he was responsible for state wide co-ordination and management of tertiary hospitals and medical education services. He was Commissioner, Commissionerate of Medical Services (AP Vaidya Vidhana Parishad), Joint/Addl Secretary Health in Govt. of AP. The health system development projects in various states funded by the World Bank based on the work done by Dr.

Mahapatra in Andhra Pradesh. As collector of Nellore, he introduced a collectors office manual, streamlined the public grievance redressal system, conceived and implemented land development projects integrating cadastral survey with soil conservation concepts. He has experience in disaster distress relief management, rural development, general administration and information technology applications in government. Between 1991-1993 he was an International Health Policy Program Fellow and a Takemi Fellow at the Harvard School of Public Health. His research work, during this period, included measurement of public hospital performance, accreditation systems for health care organisations, traditional and herbal medicine etc. Dr. Mahapatra has been a member of the Harvard Burden of Disease Unit from its inception and contributed to the Global Burden of Disease estimates published in the World Bank's World Development Report, 1993. As a faculty in the Administrative Staff College of India, he started a study to estimate burden of disease in AP. He has written books and published articles in research journals. His work include, the book on Estimating National Burden of Diseases, Structure and Dynamics of Private Health Sector, Malaria and GE Manuals, research papers on Cause of Death Reporting System, Health State Valuation, Summary Measures of Population Levels, Health Systems Performance Assessment and Patient Satisfaction Survey. He teaches, mathematics, biostatistics, epidemiology, research methodology, health care management, and health informatics.

### **Prof. (Lt. Col.) Dayakar Thota**

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

## **Research and Lab Personnel**

### **G. Amrutha, Microbiologist**

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

## Research / Field Investigators:

### E. Dinesh, Field Investigator

Mr.E.Dinesh holds a Post Graduation in MA (Social Work) from DNR College Bhimavaram affiliated by Andhra University. During academics, he participated in research studies like “A Study on Socio-Economic Conditions of Pedanindrukolanu Village People”. He also contributed for “Situational Analysis of Mental Health Problems in Coastal Districts of Andhra Pradesh” through Byrraju Foundation, and he presented a paper in 27th Annual National Conference of ISPSW (Indian Society of Professional Social Workers) along with Dr. N.Sreerama Murthy, Reader, Department of Social Work, DNR College. He also conducted two more research studies such as “A Study On The Implementation of Educational Sponsorship Programme of Arthika Samatha Mandal in Andhra Pradesh”. Another study conducted by him is “Situational Analysis of Child Labour in Quarries of Visakhapatnam District” through SGVS (Society of Gramina Vikasa Saradi). As an Assistant Coordinator, he worked in ChildLine 1098 place at Police Control Room in collaboration with Divya Disha Organization for 6 months. Currently he is working in The Institute of Health Systems from April 2010. As a Research Investigator, he was involved in research studies like (1) Assessment of Doctor Availability in Primary Health Centers (2) Andhra Pradesh Civil Registration System Study (3) Review of EMRI Model of Emergency Responsive Services in Andhra Pradesh. Now he is pursuing activities in Water Quality Testing Laboratory at Institute of Health Systems.

## Water Quality Investigators:

### G. Jayakrishna, Intermediate.

### Lab-Technician:

### M. Sona

Ms.M.Sona has completed B.Sc in Medical Laboratory Technology from of Preventive Medicine at Narayanguda. She did a School Health Project which includes detection of Anaemia and Parasitic identification. Currently she is working for Water Quality Lab at Institute of Health Systems as a Lab Technician.

## Fellows & Interns

Name	Qualifications	Project / Learning Area
A.Giri	B.Sc	Systems Administration
P Deepthi	B Tech	Health Care Software Development
D.Vidisha	B A	Front Office Management
E.Ashwini	M.Sc.(Microbiology)	Water Quality Testing
S.Gopal	B.Sc,(B.Z.C)	Water Quality Testing
J.Lakshmi	B.Pharm	Water Quality Testing
K.Prabhakar	S.S.C	Water Quality Investigation
L.Kamalakar	B.Com	Water Quality Investigation
V.Mahesh Kumar	B.Sc (MLT)	Water Quality Investigation
Abdul Rahman	Intermediate	Water Quality Investigation
D.Suresh Kumar	Intermediate	Water Quality Investigation
Syed Samee	Intermediate	Water Quality Investigation

## General Support Personnel:

### **B.Venkatesh, Accountant**

He has completed his MBA (Master of Business Administration) from Avanthi Institute of Engineering And Technology, which is affiliated to Jawaharlal Nehru Technological University Kakinada. He Graduated from Konatala Arts and Science college with specialization in B.com Computers from Andhra University. Presently, he is working as an Accounting Intern at The Institute of Health Systems.

### **D Krishna Veni, Front Office Executive Assistant**

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

## Service Provider Personnel:

Provider	Service
Padma & Gousia Begum	Sanitary Services
Parteesh	Sanitary Services
Metro Management Security Agency	Security Services

## Annexure-2

### IHS Participation in Training Programs, Workshops, Seminars and Conferences for April 2011 - March 2012 ( and till Nov. 2012)

#### Dr. Prasanta Mahapatra, Hon. President:

Course/Workshop Title	Institution	Dates
Scientific and Technical Advisory Meeting, AHPSR, WHO Hqrs. Geneva.	WHO - Alliance for Health Policy and Systems Research	30 - 31st May 2011
Scientific and Technical Advisory Meeting, AHPSR, WHO Hqrs. Geneva.	WHO - Alliance for Health Policy and Systems Research	26 - 27th Oct 2011
Scientific and Technical Advisory Meeting, AHPSR, WHO Hqrs. Geneva.	WHO - Alliance for Health Policy and Systems Research	3 - 4th May 2012
Second Global Symposium on Health Systems Research, Beijing, China.	WHO - Alliance for Health Policy and Systems Research	31st Oct - 3rd Nov 2012.

#### G Surendra, Director

Course/Workshop Title	Institution	Dates
Workshop on Water Quality in South Central Railway facilities	South Central Railways, Secunderabad	20th April 2011
Seminar on Nursing Human Resources Information System	Director of Medical Education, Govt of Andhra Pradesh in collaboration with Center for Disease Control and Prevention, FHI	16th & 17th June 2011
Two Day National seminar on Water Quality (NSWQ-2011)	Center for Environment, Institute of Science & Technology, Jawaharlal Nehru Technological University, Hyderabad in association with Hyderabad Metropolitan Water Supply and Sewerage Board, Hyderabad.	15th & 16th July 2011
Rajiv Aarogyasri Health Scheme Evaluation Workshop	Rajiv Arogyasri Health Care Trust, Hyderabad	17th Jan 2012
Seminar on "Critical Professionals for Maternal and Newborn Care: Time to Think of Midwives"	Academy for Nursing Studies and Women's Empowerment Research Studies (ANSWERS) in collaboration with Society of Midwives, India (SOMI) and the Centre for Advanced Midwifery Training (CAMT).	27th Feb 2012
National Workshop on "Critical Appraisal of Emergency Response and Patient Transport Systems in India".	National Health Systems Resource Center (NHSRC), Ministry of Health and Family Welfare, Govt. Of India.	6 & 7th Aug 2012.

#### Satish Kumar Kannapa, Faculty

Course/Workshop Title	Institution	Dates
Rajiv Aarogyasri Health Scheme Evaluation Workshop	Rajiv Arogyasri Health Care Trust, Hyderabad	17th Jan 2012
Family Planning Summit: CSO Consultation Workshop	Hindustan Latex Family Planning & Promotion Trust (HLFPPT), Hyderabad	29th May 2012

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

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

### E. Ashwini, Microbiologist

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

**Annex - 3****Outgoing Faculty & Personnel after the last AGM  
(21/01/2012)****Research & Lab Personnel:**

Name	Designation	Join date	Leave date	Remarks
M.Sailaja	Microbiologist	01/10/2010	31/12/2011	Resignation
D.Abhilash	Lab Technician	11/12/2009	18/05/2012	Resignation
G.Srikanth	Water Quality Investigator	21/04/2010	22/12/2011	Termination
T.Narender	Water Quality Investigator	20/07/2011	22/12/2011	Termination

**Research Investigators & Field Investigators:**

Name	Designation	Join date	Leave date	Remarks
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**Project Interns:**

Name	Designation /project	Join date	Leave date	Remarks
T.Shiva Prasad	Water Quality Investigator Trainee	12/01/2012	04/02/2012	Termination
C.Suryanarayana	Water Quality Investigator Trainee	17/02/2012	01/03/2012	Expired
A.Bhaskar	Water Quality Investigator Trainee	13/12/2011	19/01/2012	Resignation

**General Support**

Name	Designation/Project	Join date	Leave date	Remarks
G.S.Pattnaik	Project Manager	29/05/2003	04/08/2012	Resignation
N.Saritha Kumari	Front Office Management trainee	04/08/2010	29/02/2012	Resignation
R.S.Appala Naidu	Accountant Trainee	15/12/2010	17/01/2012	Resignation

**Notes:**

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

## **Annexure-4**

### **Projects Completed in the Reporting Period**

#### **A. Review of EMRI Model of Emergency Response Services (ERS) in Andhra Pradesh:**

To promote EMRI model as a preferred option for providing ERS across most of the states in India, and its increasing support under the NRHM, the Ministry of Health & Family Welfare, Govt. of India, in November 2009, commissioned a review of EMRI scheme in three selected states - Andhra Pradesh, Gujarat and Rajasthan. The second phase of the Study in three selected districts of AP was commissioned by NHSRC to IHS in June 2011 to do Primary data collection in the form of interviews of people using the EMRI services or other available ambulance services to reach either public or private facilities which are sampled from government and private facilities through structured questionnaire designed by NHSRC. The objectives of the second phase of the study were to (i) Estimate the Efficiency and Effectiveness of Emergency Response Services (ERS), (ii) Pattern of use, (iii) Quality of Care, (iv) Equity of Access etc. The interviews were conducted in selected Government Hospitals (Medical College Hospitals, Dist. Hospitals & FRUs at the sub divisional and block level) and Private Hospitals (Hospitals > 30 Beds, Maternity & Nursing Homes). The study was completed and report submitted in August 2011.

#### **B. Behavioral Tracking Survey (BTS) Among High Risk Groups in Guntur & Srikakulam:**

HLFPPT has commissioned the IHS to conduct Behavioral Tracking Survey (BTS) as part of the BMGF sponsored Avahan project that implements HIV prevention program focusing on HRGs and their clients. The BTS covers two coastal districts of Andhra Pradesh viz., Guntur and Srikakulam covering 800 FSW and 400 MSM groups. BTS provides a unique opportunity to measure the change in degree of community mobilization among HRGs. The main purpose of BTS is to track behavior change in key populations over time and inform on the community mobilization and advocacy efforts of Avahan. The behavioral outcomes of interest are those related to sexual practices, condom use, drug injecting practices, program exposure and community mobilization and advocacy, which have a bearing on the prevention of HIV and other STIs. The study was completed and report submitted. Dissemination workshop was also conducted on the findings.

#### **C. Andhra Pradesh Civil Registration Study: Department of Planning, Govt. Of Andhra Pradesh**

Good public-health decision making is dependent on reliable and timely statistics on births and deaths (including the medical causes of death). All high-income countries, without exception, have national civil registration systems that record these events and generate regular, frequent, and timely vital statistics. By contrast, these statistics are not available in many low-income and lower-middle-income countries, even though it is in such settings that premature mortality is most severe and the need for robust evidence to back decision making most critical. Though the Registration of Births and death Act, 1969 came into force in India, the level of registration of births and deaths has continued to be far from satisfactory in several States/UTs. The level of registration of births varies considerably across the states and Andhra Pradesh falls into the range of 40 to 60 percent. The objectives of the study are (a) To document the development of the vital statistics system in Andhra Pradesh until date (b) To evaluate the

vital statistics system using WHO assessment framework for Vital Statistics developed by the Monitoring of Vital Events (MoVE) writing group of the Health Metrics Network (HMN) (c) Recommend policy options for comprehensive development of the vital statistics system in Andhra Pradesh.

IHS has developed about eighteen schedules both for urban and rural and administered in six municipalities, six mandal and six panchayats. The field work was completed and draft report submitted to planning dept.

#### **D. Cause of Death Coding for CHAMPION Trial: Naandi Foundation**

The Naandi Foundation joined with IHS as a partner to strengthen the trials on Community Health & Medical Provisions Impact on Neonates (CHAMPION). This is a cluster randomised control trial of a package of interventions aimed at reducing neonatal mortality in 464 villages in Nagarkurnool division of Mahabubnagar district. The trial aims to substantially reduce the neonatal motility through systematic changes to the provision and promotion of health care. IHS has extended consultancy in assessing the Cause of Death (CoD), category and assigning ICD code using Verbal Autopsy Tool. IHS completed 17 lots (each lot will have around 50 schedules). The consultancy was completed in November 2011.

## Annexure-5

### Revenue from IHS Laboratory Services

Year	Source of Revenue				Total
	HMWSSB	ResPj-EM	ResPj-IM	Public	
2006-07	1,280,650	212,521	0	20,575	1,513,746
2007-08	1,263,000	450,000	0	34,465	1,747,465
2008-09	1,178,680	412,670	0	45,913	1,637,263
2009-10	1,519,475	100,800	0	75,375	1,695,650
2010-11	3,057,846	203,500	0	96,325	3,357,671
2011-12	3,966,215	8,400	0	92,700	4,067,315
2012-13 Ytd	4,245,250	0	0	76,450	4,321,700

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

## Annexure-6

### IHS Publications in 2011-12

#### Reports:

- RP 56/2011    A study of Emergency Response Services in Three Districts of Andhra Pradesh, *G Surendra*
- RP 57/2011    The Effect of Air Pollution on Cause of Death Profile in Hyderabad City, *K Satish Kumar*.
- RP 58/2011    Behavioural Tracking Survey (BTS) among High Risk Groups in Guntur and Srikakulam Districts of AP, *K Satish Kumar*

#### Articles:

NMJI            Availability of doctors at primary health centers of Andhra Pradesh , India  
Jul/Aug 2012  
edition

#### Working Papers:

NIL

#### Books:

NIL

## Annexure-7

### Invited Presentations of IHS Personnel for April 2011 - March 2012 (and till Aug. 2012)

#### A. Invited Presentations:

Presentation Title	Forum / Event	Author(s)
Drinking Water Quality Monitoring	South Central Railways, Secunderabad 20th April 2011	G. Surendra
Nursing Human Resource Information System - Best Practices	Director of Medical Education, Govt of Andhra Pradesh in collaboration with Center for Disease Control and Prevention, FHI. 16th June 2011	G. Surendra
Emergency Response Service EMRI Model - 108 System.	National Health Systems Resource Center (NHSRC), Ministry of Health and Family Welfare, Govt. Of India. 6th Aug 2012.	G. Surendra
The Effect of Air Pollution on Cause of Death Profile in Hyderabad City	Final Study Findings Presentation made to MoEF Technical Team on 23rd October 2011	Satish Kumar K

## Annex-8

### IHS Revenue Trends by sources and by activity

Fin. Yr.	Gross revenue by sources			Gross revenue by activity				
	Domestic	Foreign	Total	Res. & C.	Trg. Ser.	Health Inf.	Public Ser.	Others
1991	0	0	43,905					
1992	0	424,088	424,088					
1993	50,000	380,000	430,000					
1994	275,042	774,568	1,049,610					
1995	445,517	403,604	849,121					
1996	160,186	768,447	928,633					
1997	835,250	103,612	938,862					
1998	305,100	599,266	904,366					
1999	2,066,525	0	2,066,525	1,440,625	665,900	7,500	42,542	134,053
2000	4,249,243	2,720,925	6,970,168	3,834,275	1,237,020	1,318,650	21,569	1,547,087
2001	4,560,092	5,668,363	10,228,455	9,527,906	596,257	0	36,152	68,140
2002	7,162,946	2,451,095	9,614,041	7,029,835	1,556,105	822,950	37,236	167,915
2003	6,718,690	4,784,857	11,503,547	9,389,693	1,043,050	240,000	53,384	39,991
2004	7,329,734	826,363	8,156,097	6,676,243	744,408	90,750	142,190	529,538
2005	4,180,215	470,160	4,650,375	3,872,674	0	0	98,175	679,526
2006	5,319,507	1,845,761	7,165,268	5,555,979	0	0	1,045,095	612,519
2007	6,898,526	1,414,996	8,313,522	7,010,918	0	0	1,164,000	138,604
2008	7,985,882	840,277	8,826,159	7,564,690	0	0	1,174,555	86,914
2009	4,808,436	0	4,808,436	2,647,624	175,000	0	1,515,120	470,692
2010	6,774,122	0	6,774,122	5,054,076	0	0	1,285,368	434,678
2011	4,699,440	0	4,699,440	1,030,706	0	0	2,907,903	760,831
2012	9,408,422	0	9,408,422	5,088,933	0	0	4,077,380	242,109
2013	5,853,314		5,853,314	1,500,000			4,253,314	100,000

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

<sup>2</sup> Figures for current financial year (2012-13) is an estimate based on year to date + anticipated receipts.

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

Date: 01/02/2013

G Surendra  
Director