



Kashmir...towards a Healthier Paradise



Kashmir ...Towards a **Healthier Paradise**

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Directorate of Health Services Kashmir

Design and Compilation : KRICH & Imtiyaz Ameen

(Data Manager IDSP Kashmir)



Message

I am glad to know that the Directorate of Health, Kashmir is preparing a volume that will document the achievements of the department of health in the Kashmir Division. More than the other states of the union, delivering health related services in this geographically as well as culturally diverse state is a challenge, but the basic issues that need to be addressed have a commonality with the other parts of India. These areas of priority for which the government has initiated or is the process of initiating measures include, the deficiency of health care professionals particularly specialists and doctors in numbers that will man the ever expanding basic health care as well as the primary health care services network.

An effort has been made to Increase the availability of specialist doctors by way of increasing the capacities of the post graduate training institutions. An early start of the process of creating the basic doctor with the requisite training to serve at the primary, particularly in the context of rural health set up, is in the process. Whatever the nomenclature that these doctors will have they will hopefully be our primary caregivers at the sub-centre and the primary health centre levels.

It is also satisfying to note that among the states of the union Jammu and Kashmir has started working on the Non Communicable Diseases Programme. It is my dream that facilities for screening for these diseases as well the required infrastructure for managing these diseases is created, so that the ever increasing morbidity and mortality due to them is brought under control.



Mr Ghulam Nabi Azad
Hon'ble Union Minister
Health and Family Welfare

Gulam Nabi Azad



Message

I wish to convey my best wishes to the Directorate of Health Services, Kashmir, for coming out with their book highlighting the achievements of the Department of Health, Kashmir for the year 2011-2012. I have been made to understand that this book will also delve on the history of modern healthcare in Kashmir which will be of interest.

Among the indicators for the development of any people, Healthcare along with Education is of primary importance. To create and to maintain an effective Healthcare Delivery System has been among the priority areas of my Government. Among the new initiatives in the last year, I would like to mention the launch of the Rashtriya Swasthya Bima Yojana, which aims at making Healthcare affordable to the poorer sections of the society. Also the government has started the process of creating Public Private Partnerships in healthcare aiming at improving the manpower, technical and financial investments in our health system for a rapid improvement in the capacity of our Health care systems to fulfill the requirements and the expectations of the people.

I wish the functionaries of the Directorate of Health good luck and hope that they will be instrumental in bringing about a positive change in their working so as to realize the aspirations of the people.



Mr Omar Abdullah
Hon'ble Chief Minister, J&K

Omar Abdullah



Message

The Healthcare Delivery System in our state has made considerable progress over the course of the last few years. In tune with the national objectives, with regard to increasing the outreach of health related facilities to make healthcare accessible to all areas of the state by putting in place the necessary infrastructure as well as trained manpower, have been the areas of thrust of the government.

The National as well as the State Governments are committed to the provisioning of quality health care to the people. Efforts are being made to further increase the public spending on healthcare, which will help us to consolidate the gains made so far and also to further improve the health service delivery mechanisms. Compliance to national standards both for the Infrastructure as well as the offered services have been initiated and the process will be further expanded.

It gives me delight that the Directorate of Health Services, Kashmir is bringing out this book that will document the beginnings of the Modern Healthcare Delivery System in Kashmir and also highlight the recent achievements particularly the utilization of healthcare services by our population.

I would like complement the functionaries of the department who have worked for the compilation of this book.



Mr. Sham Lal Sharma
Hon'ble Minister

Health and Family Welfare, J&K

Sham Lal Sharma



Message

Public Healthcare Delivery System is still the major component of the Healthcare Delivery System in the state of Jammu and Kashmir accounting for almost 60% of out patient consultations and nearly 70-80% of In-patient care. This causes us to act with an increased responsibility to have a modern and an effective system in place which will come up to the expectations of the people. To achieve this objective the Government is in the process of starting new initiatives with the aim of making healthcare available at the doorsteps of the people.

It is satisfying to note that during the last few months the availability of specialized health services has improved in the Kashmir Division. This has led to an increased utilization of health care services that are being provided by the Directorate of Health, Kashmir as has been reflected upon in this book. It won't be out of place to reaffirm the Governments commitment to have in place an efficient and a motivated manpower to achieve the targets particularly those set out in the Millennium Development Goals.

I would like to congratulate the Director Health Services Kashmir and the team that have worked in compiling this book.



Mr. Javed Ahmed Dar

Minister of State
Health, Medical Education & Floriculture, J&K

Javed Ahmed Dar



Message

Commissioner Secretary Health, J&K

It gives me immense pleasure that the Directorate of Health Services, Kashmir is coming out with a book, a first of its kind, which will document the beginnings of the modern Health care delivery System in the Valley of Kashmir as well as the achievements during the last one year in terms of utilization of services.

At the present stage the Healthcare Delivery System in our state is in a process of transition. The stage of increasing the accessibility to health care is being gradually but surely being changed to the provisioning of timely and quality healthcare as is being demanded by the people. The processes for incorporating technology particularly information and communication technologies and modern managerial methods in the running of the Healthcare Delivery System have been initiated. With time the Public Health System will be made more responsive to the changing patterns of disease as well as the health related demands of the people.

I would like to felicitate the people that worked in compiling this volume.



Message

Our objective in compiling this book was to appreciate the good work of our field doctors and paramedical staff who are working round the clock, but their services are rarely acknowledged. This book will allow them to showcase their talent and also create a healthy competition among peers, which would ultimately help the entire healthcare delivery system.

We have tried to provide a glimpse of how healthcare was provided to the people of Kashmir in previous years.

We shall strive to publish this book every year so that performance for the current year can be compared vis-à-vis the previous years in every sphere of activity.

Our endeavour will be to create a healthy spirit of competition amongst healthcare professionals and also foster a sense of belonging in the Department.



Director of
Health Services, Kashmir

Dr. Saleem-ur-Rehman

Dr. Saleem-ur-Rehman



Acknowledgements

Kashmir ...towards a Healthier Paradise

This is our humble effort to track down the long journey embarked on by the Directorate of Health services, Kashmir.

This book was inspired by Dr Saleem-ur-Rehman, Director of Health Services, Kashmir. It was his idea to record this journey on paper to showcase the present day achievements of the Directorate of Health Services, Kashmir against a historical perspective. The dynamic leadership of Hon'ble Chief Minister Mr Omar Abdullah and the constant encouragement, trust and faith reposed by the Hon'ble Health Minister Mr Sham Lal Sharma inspired us to compile this **volume**. We are grateful for the continuous support and vision that they have set.

Going through volumes of historical documents available from the archives was an experience that was both painful and exhilarating. In the process, the story emerged of the challenges that many officials and staff had to face and tackle courageously to provide healthcare to the best of their abilities.

It has been a phenomenal learning process for us while we delved into the past and explored the many facets of health. Since the introduction of modern healthcare in the 1860s, we feel proud of our achievements in a State that has always set high goals for healthcare in Kashmir.

Editors



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Introduction

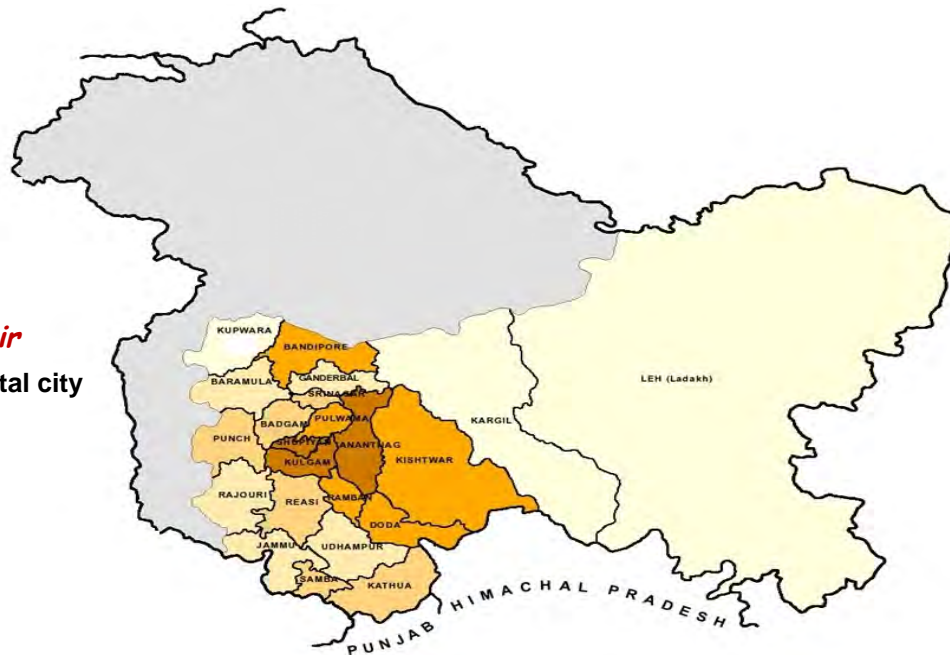
Sayings of 'Sheikh-UI-Alam Hazrat Noor-u-din Wali(RA) ' known as 'Nunda Rishi' -

*"I believe in what I do in spring and autumn
Shalt be written in my sheet- decree divine
Desirous am I to share the company of a perfectionist
Who may be the remedy to my ache and ailment."*

He is known as Taj-ul-Awliyai Kashmir. Shiekh-UI-Alam Noor-Ud-Din Noorani. Nundreshi(RA) was not only a preacher of Islam but at the same time he was a poet, philosopher, environmentalist, linguist, scientist and a traveller. Nundreshi(RA) is not revered highly only by Muslims but people from all religions. He was born in a village called Kaimuh (old name Katimusha), 7 km to the west of Bijbihara which is 60 km South east of Srinagar, in 779 A.H. = 1377 A.C, on the day of the Eid al-Adha.

Districts of Kashmir

Srinagar is the capital city



Gateway to Paradise... **Jawahar Tunnel**



In 1956, Jawahar Tunnel was bored through the mountain. The length of tunnel is around 2.5 km, and it is situated between Banihāl and Qazigund. This facilitates connectivity to Kashmir valley.

Kashmir - Land and the People

Perched securely among the lofty snow-sprinkled mighty Himalayan mountain chain, the emerald blue skies peeping through the chinks of the clouds, the tall chinar trees swaying to the rhythm of the gusts of wind, all condense into a kindly smile, forming the lovely state of Jammu and Kashmir. It is located in the northern part of the Indian sub continent in the vicinity of the Karakoram and western mountain ranges.

Kashmir is a land of beautiful places and people. The people are known for hospitality, generosity, rich cultural traditions, including its arts, handicrafts, music, folk dances and cuisines. The official language of Kashmir is Kashmiri , it being spoken in different dialects varying across the regions.

Lawrence' s quotation on the climate of Kashmir

“Every hundred feet of elevation brings some new phase of climate and the vegetation, and in a short ride of thirty miles one can pass from overpowering heat to delightfully cool”





Like elsewhere in India, the society is traditionally divided into various religious and ethnic groups. The economically deprived, and those hard-to-reach, living in distant rural terrains are the most vulnerable, and great efforts are being made to ensure accessibility to good health, education and economic security.

The wide diversity among the land and the people of Kashmir translates into diverse nature of health problems and a variety of challenges to healthcare delivery.

Sharp geographic, economic and social variations make the effective delivery of health services a daunting task.

The health system in Kashmir has been devised and continually reshaped to accommodate these differences and respond to these challenges, the ultimate goal being healthcare for all.



Rural means of transportation.
Kashmiri family sits ready for transport
in a tonga in Kupwara



Women collecting winter stocks



Gurez villagers carry firewood



Kids warm by 'Kangiri

Seasons Of Kashmir

Season	Dates	Local Terms
Spring	16 March to 15 May	Sont
Summer	16 May to 15 July	Retkol (Grisham)
Rainy Season	16 July to 15 September	Waharat
Autumn	16 September to 15 November	Harud
Winter	16 November to 15 January	Wandah
Ice Cold	16 January to 15 March	Shishur



Chinar Leaves

Lawrence quoted:

*"If one looks at the map of the territories of His Highness the Maharaja of Jammu and Kashmir one sees a white foot-print set in a mass of black mountains. This is the valley of Kashmir, known to its inhabitants as **Kashmir**"*



Tulip Flowers



Jammu and Kashmir Population - 1.25 Crore

According 2011 Census of India, Jammu and Kashmir's population has reached approximately **1.25 crore**.

Jammu and Kashmir contributes to approximately 1.04% of India's total population.



Characteristics	Kashmir (including Ladakh)	J&K State	India
Population	72.80 lakh	1.25 crore	1.26 billion
Geographical Area	15,668 sq. km	2,22,236 sq. km	3,287,263 sq. km

Literacy Rate 2011

District	Literacy rate(%)	Males(%)	Females(%)
Anantnag	64.32	74.13	54.15
Bandipora	57.82	68.41	46.24
Baramula	66.93	77.35	55.01
Budgam	57.98	68.18	46.60
Ganderbal	59.99	70.74	47.62
Kargil	74.49	86.73	58.05
Kulgam	60.35	70.59	49.74
Kupwara	66.92	77.10	54.79
Leh	80.48	89.39	64.52
Pulwama	65.00	75.41	53.81
Shopian	62.49	71.86	52.77
Srinagar	71.21	78.01	63.47

Students of 20th century



Students of 21st century



Kashmiri students –
In search of bright future



The Valley of Kashmir occupies a place of pride in being rich in its water resources, beautiful fresh water lakes, streams, springs and rivers.

The Muslims, Hindus, Sikhs, Christians and Buddhists of Kashmir have lived in relative harmony and friendliness since the 13th century when Islam first became the majority religion in Kashmir. The Sufi-Islamic way of life that ordinary Muslims followed in Kashmir complemented the rishi tradition of Kashmiri Pandits (Hindus), leading to a synergetic culture where Hindus and Muslims revered the same local saints and prayed at the same shrines.

The beauty and the salubrious climate of the valley was known even from the ancient times. The mythological traditions supported fully by the research of geologists confirm that the valley originally was a huge lake called "Satisar".

□ Diverse Culture

□ Rich Heritage



Kashmiri artisan at work



'Rof ' a Famous Folk Dance



Saffron (Kong Posh) harvest in 'Pampore'



'Buddhists' of Ladakh on a festival day



A 'Bakerwal' family

Kashmir - A Symbol of Religious Harmony



'Shankacharya' Temple located on a Takht-e-Sulaiman Hill in Srinagar



'Hazratbal' Shrine located on the banks of Dal Lake in Srinagar



'Chatti Padshai' Gurdwara located at Rainawari in Srinagar



'Shanti Stupa' , a Buddhist stupa in Leh

مسجدن, مندرن, غرجن ته دهرم سالن ته استائن
يمن ييتن غهرن اژ نك كن دروازه تهاون چهم

"Let there be a common entrance - to a Church, a Mosque and a Temple or a Gurdwara"

... Mahjoor



'Holy Family' Church located at M.A road in Srinagar



Mission Hospital in Kashmir - 1912

History of Modern Healthcare in Kashmir

"The ground work of all happiness is Health"
(James Leigh Hunt)

(The Pre-Independence Era)

The history of modern health care in the pre-independence era in Kashmir is synonymous with Christian missionary activities. While their motives were admittedly of a missionary nature, yet the pioneering role of the **Kashmir Medical Mission** cannot be denied.

Kashmir Medical Mission

The founder of the Kashmir Medical Mission was the Rev. Robert Clark. His wife, a qualified medical specialist, has the distinction of introducing the western concept of medicine in the valley. On his return from a missionary tour in Kashmir, Ladakh and Skardu, Mr Clark received support for a Medical Mission in Kashmir from a group of leading civilians and British officers, including Sir Robert Montgomery, then Lieutenant-Governor of the Punjab. A fund of fourteen thousand rupees was raised to set up a Medical Mission in Kashmir. The Lieutenant-Governor sent an invitation to the Church Missionary Society (CMS) and made a personal donation of a thousand rupees to the proposed Kashmir Medical Mission. Dr William J. Elmslie, the first medical missionary appointed by the CMS, arrived in Kashmir in 1865. He was the son of an Aberdeen cobbler and had obtained M. A. from Aberdeen University and M.D. from Edinburgh University.

During the summer of 1865, Dr Elmslie treated about 2000 patients. At that time no European was allowed to remain in the valley in the winter. On his return in 1866 Dr Elmslie was unable to obtain adequate accommodation due to strong state opposition to the missionary component of the CMS medical activities. However, displaying true Scottish never-say-die spirit he successfully treated 3365 patients in a single tent serving both as OPD and IPD. Dr Elmslie revisited the valley of Kashmir each summer till 1869 and treated thousands of patients including the victims of a widespread cholera epidemic in 1867.

In 1870 the Rev. W. T. Storrs manned the Kashmir Medical Mission. In 1872 Dr Elmslie returned to find Srinagar in the throes of another severe cholera epidemic. His own health was affected and he died on the return journey in the autumn of 1872.

Dr. Elmslie's successor, Dr Theodore Maxwell, was politically well-connected and was able to resume the activities of the Medical Mission in 1874 under favourable conditions. Official opposition was withdrawn and Maharaja Pratap Singh granted a site for a hospital at Drugjan on the Rustam Garhi hill. A small building was constructed at State expense where Dr Maxwell worked for two years till his own health broke down and he was compelled to leave India.



The Mission Hospital at Drugjan

Dr Maxwell was succeeded by an Indian Christian doctor, John Williams, and then by Dr Edmund Downes in 1877. Dr. Downes, who had resigned from the Royal Artillery for medical missionary work, worked tirelessly for six years till he in turn was forced by ill-health to retire in 1882. By personal contributions and donations from friends in England, Dr. Downes erected the **Mission Hospital** with facilities for more than a hundred in-patients. He also obtained permission to stay in Kashmir in winter.



Boat for transferring patients

From 1877-1879 Kashmir was afflicted by a severe famine.

Dr Arthur Neve arrived in Kashmir in March 1882 followed in 1883 by the Rev. J. H. Knowles. In 1886 Dr. Arthur Neve was joined by his brother, Dr. Ernest F. Neve in Kashmir. Later their sister, Miss Nora Neve, became Superintendent of Nurses at the Mission Hospital.



Patients at the Mission Hospital

In the year 1899, 35,000 visits had been registered at the hospital, besides patients seen in the villages while trekking through the countryside. Nineteen years after his arrival, the Kaisar-i-Hind gold medal was conferred on Dr. Arthur Neve for Public Service. During this period a number of catastrophes, both natural and man-made, hit Kashmir. In 1885 a great earthquake occurred and five serious cholera epidemics with at least forty thousand deaths each year occurred in 1888, 1892, 1900, 1907 and 1910.

At that time practically the whole population of Kashmir contracted smallpox in childhood. It was described by Dr. Neve as the most frequent cause of total incurable blindness. He wrote that from smallpox and other causes, fifty per cent of children in Kashmir were said to die in infancy.

An epidemic of plague with over 95 per cent mortality was reported in 1903. The disease gradually died out, after lingering in some isolated villages near the Wular Lake.

Kashmir Medical Mission, 1893. (average of past five years) Mission Hospital Srinagar (Eighty beds), 8,688 out-patients and 853 in-patients, 2,086 minor surgical operations and 503 major surgeries Temporary winter branch, (two months), 1,469 new patients in a total of 2,022. Villages (90 days total) 5,167

Church of England Zenana Missionary Society (CEZMS)

CEZMS efforts were started in Kashmir in 1886 by Mrs. Rallia Ram as an honorary worker of the society. Dr. Fanny Butler was the first student enrolled at the London School of Medicine for Women and in 1880, the first woman medical missionary sent to India. She had been inspired to travel to India as a medical missionary by an appeal for medical women issued by Dr. Elmslie just before his death.

In May 1888, Dr. Butler reached Srinagar at Dr. Neve's request. The CEZMS rented a dispensary in the city and named it the "**Zenana Shifa Khana**". Five patients were treated on August 5th, 1888, the opening day. By the end of the year five thousand patients had been treated with thirty-five in-patients admitted in a makeshift hospital in the adjoining house. Impressed by the CEZMS activities, Mrs. Isabella Bishop (nee Bird) donated 500 pounds to build a new thirty-bedded women's hospital as a memorial to her husband. In June 1890 the **John Bishop Memorial Hospital** was opened by the Bishop of Lahore at the Mandir Bagh. Next year the flooded Jehlum damaged the hospital and its work had to be transferred to temporary premises near the Dal Gate.



Patients at John Bishop Memorial Hospital

In 1892 a second flood wrecked the John Bishop Memorial Hospital completely and it was rebuilt in the town of Anantnag on land donated by the Maharaja at the request of Lord Frederick Roberts, Commander-in-Chief of the British Army. The first in-patient was admitted in June 1902. The doctor in charge was Miss. Minnie Gomery, M.D and her Nursing Sister colleague was Miss. Kate Nownham. The **Church of England Zenana Missionary Society Hospital** was established at Rainawari in 1908. Elizabeth Mary Newman was bestowed the title of the 'Florence Nightingale of Kashmir' by Tyndale-Biscoe for her work at this hospital. The CEZMS Hospital underwent extensive upgradation in 1936.

In 1891, a separate **State Leper Hospital** was established by the State under the management of the Church Missionary Society. About twelve acres of land on a peninsula projecting into the Nagin Lake and £300 for a thirty-bed hospital and one year's maintenance were granted by the Maharajah. By 1911 the number of patients had reached one hundred.

In 1891 the Maharajah of Kashmir also donated land and a sum of Rs. 1500 for setting up a **Visitors Cottage Hospital** exclusively for white people at the foot hills of the Shankaracharya Hill.



Visitors Cottage Hospital

The **St. Joseph's Mission Hospital** was established in the mid 1930s in Baramulla by the Mill Hill Missionaries.

State Medical Service

Possibly as an indirect result of the work of the Kashmir Medical Mission, the first **Kashmir State Dispensary** was started in the late 1860's. This was to be the forerunner of the **State Medical Service**.

Possibly as an indirect result of the work of the Kashmir Medical Mission, the first **Kashmir State Dispensary** was started in the late 1860's. This was to be the forerunner of the **State Medical Service**.

In 1895, Walter Lawrence reported that the State maintained "one excellent hospital in Srinagar and six dispensaries, three of which are situated in the districts".

The **State Hospital**, situated at Hazuri Bagh, was managed by Rai Bahadur Dr A. Mitra as its first Chief Medical Officer. He later served as Public Works Minister on the Maharajah's State Council. It was initially known as the Maharaja's Hospital and later as the Sadar or State Hospital. British Residency Surgeons acted as Superintending Surgeons to this Hospital.

In 1891-92, the State Medical Services treated 122,960 out-patients and 615 in-patients 2,188 surgical operations were performed, of which 283 were major surgeries.

Of the diseases treated in the State Hospital and the dispensaries, the following were the most common: fevers, syphilitic diseases, rheumatic affections, nervous system diseases, eye diseases, respiratory diseases, dyspepsia, diseases of the digestive system, connective tissue and skin diseases. Venereal diseases formed 25 per cent of the surgical cases.

Walter Lawrence also reported that excellent surgical instruments were being manufactured in Kashmir, and many instruments in use in the State Hospital were locally manufactured.

In 1892-93, 146 lunatics were treated at an asylum connected with the Srinagar Jail.

The **Diamond Jubilee Zenana Hospital** at Nawakadal was built in 1897 to celebrate 60 years of Queen Victoria's reign. Obstetrics & Gynecology Services were shifted here from the State Hospital. At present Govt Girls College for Women Nawakadal Srinagar stands at the riverside location of the erstwhile Diamond Jubilee Zenana Hospital.

An X-ray plant was installed in the State Hospital in 1913-14 and a dental wing was opened in January 1930.

In 1929 a sanatorium for patients suffering from Tuberculosis was set up in Tangmarg.

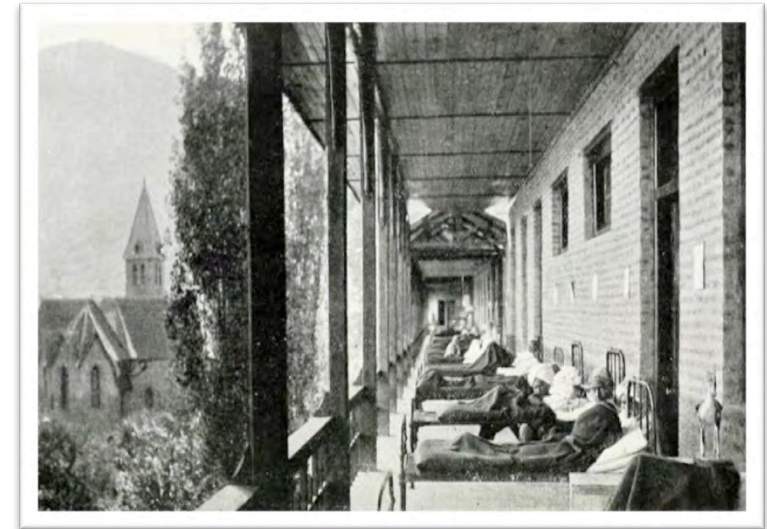
In 1940 several important schemes to provide better health care facilities were introduced in Kashmir, including the construction of a major hospital comparable with the best medical institutions. The estate of Hadow Mills Carpet Factory was acquired for the purpose, and the foundation stone of **the State (SMHS) Hospital** was laid by the Marquis of Linlithgow, the then Viceroy of India on October 15, 1940. The hospital was inaugurated by his successor, Lord Wavell on 11th of October 1945. Even today old-timers refer to SMHS Hospital as 'Hadwun' Hospital.



The foundation stone of old JLNm hospital erstwhile Mission Hospital was laid by the REV CANON C.E. TYNDAL BISCO. Dated: Oct 17th 1908.



The entrance of old JLNm hospital, situated in rainawari, srinagar



Mission Hospital's upper verandah downes ward



Old Building of JLNm hospital (erstwhile Mission hospital)

(Post-Independence Era)

In 1947 the State Medical Services comprised 2 hospitals and 87 dispensaries. By 1964, there were 32 hospitals, 429 dispensaries. The total bed strength improved from 600 to over 3000 beds.

Prior to the 1960s, the State was granting loans to 40-50 medical students every year to study at other medical colleges in India. The first medical college was started at HazuriBagh on the banks of river Jhelum at the site of the present LalDed Hospital in 1959.

The State Health Service was split into the Health Services and Medical Education.



Missionary Health Activities

In the post-independence era, missionary health activities were confined to the **John Bishop Memorial Hospital** in Anantnag and the **St. Joseph's Mission Hospital** in Baramulla.

In the late 1950's the first educated Kashmiri girl student was enrolled as a trainee nurse in John Bishop Memorial Hospital. A nursing school was started by Sister Grace Butt. In 1957 electric light was supplied to the hospital. Until then all night work had carried on by the light of hurricane lanterns in the wards and a petromax lamp in the theatre.

In 1970 management of the John Bishop Memorial Hospital was transferred to the **Church of Northern India**.

Medical Education

The **Government Medical College Srinagar** was later shifted to the present day location at Karan Nagar and was inaugurated by Bakshi Ghulam Mohammed, the then Prime Minister of the State of Jammu and Kashmir on 25th August 1961. The first principal of the Institution was Dr. (Col.) G. V. S. Murti. The first principal from the valley was Dr. Syed Naseer Ahmed Shah.

The State Hospital was named **SMHS Hospital** at Karan Nagar became the flagship Associated Hospital of hospital of the **Government Medical College Srinagar**. The **Mission Hospital** at Drugjan was converted into the present day **Government Chest Diseases Hospital**.

The former **State Hospital** building at HazuriBagh was converted into 100 Bed specialized Obstetrics & Gynaecology hospital named the **Lal Ded Hospital**. It has been the main maternity hospital of Kashmir since the Obstetrics & Gynaecology services in SHMS Hospital were shut down in the 1970's.

A **Government Hospital for Children** was set up adjacent to the Lal Ded Hospital.

Government Psychiatric Diseases Hospital was started at the site of the old asylum near the Srinagar Central Jail.

In the 1980's Orthopaedic services were shifted from SMHS Hospital to the new **Bone & Joint Hospital** at Barzulla.

The **Government Dental College** at Srinagar was started in 1980.



All district hospitals, sub-district hospitals, primary health centres and other peripheral health institutions were taken over by the **Directorate of Health Services** in the post-independence era.

The CEZMS Hospital at Rainawari evolved into the **Jawaharlal Nehru Memorial Hospital** under the management of the **Directorate of Health Services**. This multi-speciality institution became the flagship hospital of the Directorate.



The **Sher-i-Kashmir Institute of Medical Sciences** was set up in 1982 by Sheikh Mohammed Abdullah, the Chief Minister of J&K, as a tertiary health care institute focused on research, post graduate medical education and advanced patient care. By an act of Legislature on 19th August 1983, SKIMS was granted a deemed University status.

The state government took over the private **Jehlum Valley College of Medical Sciences** in 1998 as the under-graduate medical college of the SKIMS Soura. It is now known as the **SKIMS Medical College**.

The management of the **State Leper Hospital** was also taken over by the **Directorate of Health Services**. The **Visitors Cottage Hospital** was managed for a period by the Sher-i-Kashmir National Medical Institute Trust till it was taken over by **Directorate of Health Services** in 2003 as the **Govt. Kashmir Nursing Home**.

(The 21st Century)



The **Jawaharlal Nehru Memorial Hospital** is being developed as a super-speciality apex hospital of the **Directorate of Health Services**.

The **Directorate of Health Services** manages 10 District Hospitals and other major institutions, xxx Subdistrict Hospitals (CHC) and hundreds of Primary Health Centres and smaller health institutions across the length and breadth of Kashmir. Specialized institutions like Trauma Hospitals are also being developed along the national highway.

All District Hospitals are being significantly upgraded. A prototype District Hospital design conforming to international hospital-design guidelines has been developed by **K-RICH**, an in-house modernization team. Construction based on the prototype design has already started in the district headquarters of Bandipora and Kargil.



Chashma Shahi Garden was built by the Mughal governor Ali Mardan Khan under the emperor Shah Jahan in 1632-1633. Chashma Shahi ("Royal Spring") received its name from its water source, a spring located on its uppermost terrace. It is one of the three major Mughal Gardens in Srinagar. The garden is situated at the foothills of zabarwan_range.



A Vision

Directorate of Health Services, Kashmir



All for a cause of quality healthcare

The Directorate of Health Services, Kashmir has set for itself aims and goals.

INITIATIVES -

- Need-based and output-based deployment of scarce health department manpower.
- A sustained and continuous supervision of the work done output reporting at all levels of health administration.
- A self monitoring and self correcting system working on modern managerial principles.
- Prioritizing and implementing institutional audits, (medical, social needs)
- New hospital designs for District Hospitals at Bandipora, Kargil, Kulgam and other smaller institutions, have taken into account the lacunae in earlier designs and have been designed to have minimum land coverage.

- Planning for a modern office structure for the offices of the Directorate of Health, Kashmir, Directorate of Indian System of medicine, NRHM Divisional Offices in a single structure to be located at Bemina. The land for this construction has been reclaimed from encroachers by the Directorate.

- Exploring feasibility of DNB courses in the major institutions of DHSK.

- Use of Information and Communication Technologies will be initiated. Stress will be placed on tele-medicine in particular tele- cardiology and tele-radiology.

- Hospital based ambulances will be fitted with Remote tracking Devices.

- PPP models in high technology and capital intensive projects with the aim of local capacity building and manpower training are in the process of being implemented.

- Strengthening of all first referral hospitals, with Baramulla and Anantnag being the priority, so as to make them capable of handling casualties and medical emergencies in a scientific and a Protocol defined manner.

- Keeping in view the difficult terrain of the state and for timely response to emergencies particularly the far off and difficult to access areas, the Directorate is also conducting feasibility, and cost-effectiveness studies for having a heli -ambulance service.

- A high speed river ambulance service between the major district hospitals and some of the Tertiary hospitals of the city is envisaged.

- Efforts will be made to address the issues of the workforce at all stages be it manpower planning, manpower deployment, trainings, skill up-gradation, working atmospheres, supportive supervision, continuous job appraisals, and grievance redressal.

Health Infrastructure

“To keep the body in good health is a duty, otherwise we shall not be able to keep our mind strong and clear”
(Buddha)

Health Structure

Kashmir health setup is designed in a two-tier fashion.

The primary tier has three types of health care institutions namely, a Sub-centre(SC), Primary Health Centre(PHC) and Community Health Centre/Urban Health Centre(CHC/UHC).

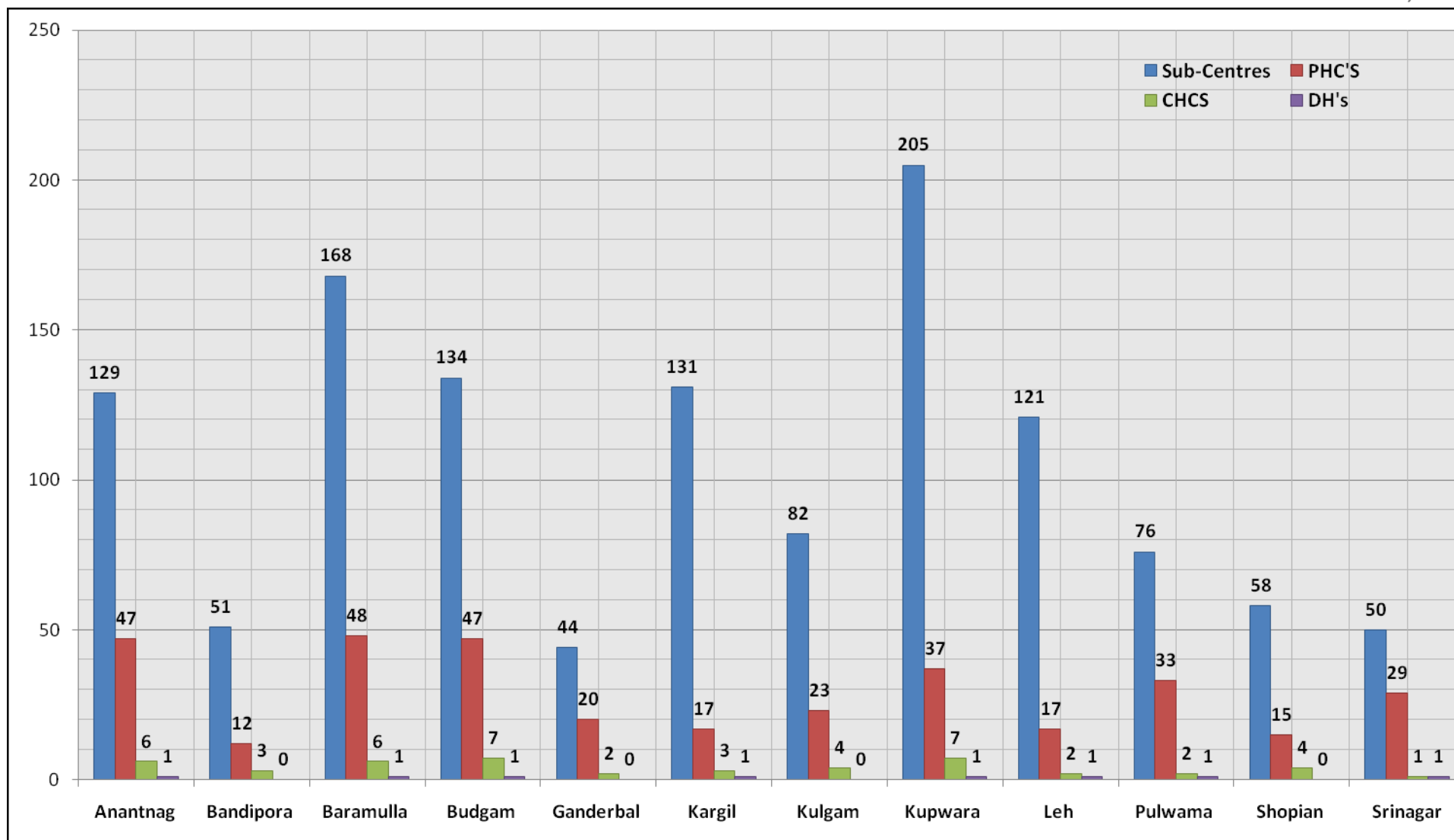


PHC facility at S.R Gunj



District Hospital at Rainawari

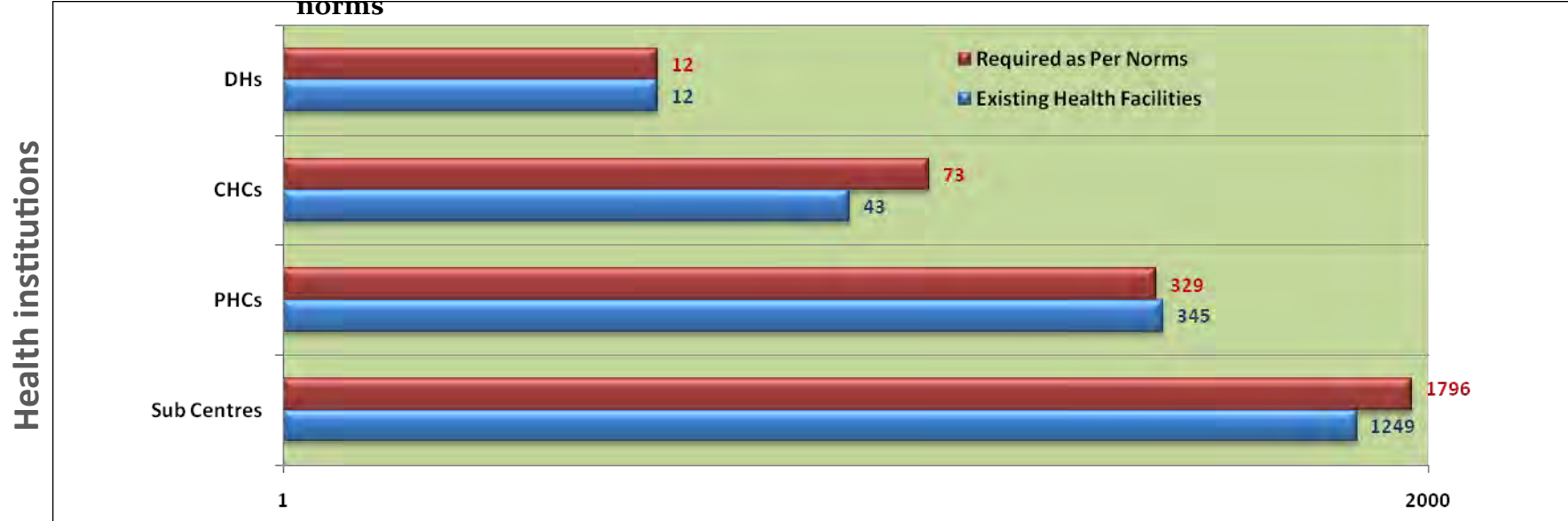
The District hospital functions as the secondary tier of care for the urban and rural population.



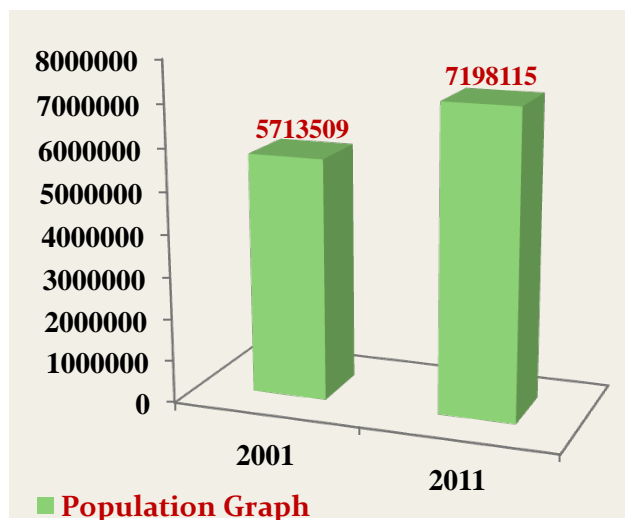
PHC-primary health centre
 CHC-community health centre
 DH-district hospital
 SC-sub centre

Existing Healthcare Facilities in District Head Quarters - 2011

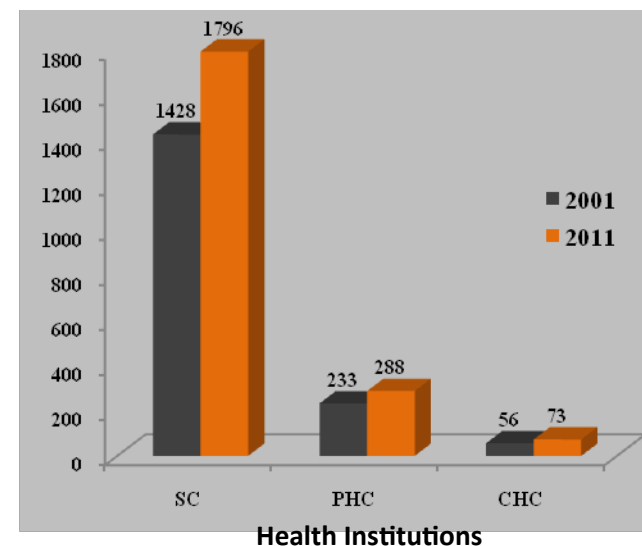
Bar chart(below) shows Existing Health institutions versus Required as per norms



Requirement of Health Institutions as per Norms (Graph-2) with respect to Population decadal growth (Graph-1) in Kashmir Period [2001 & 2011]



Graph-1



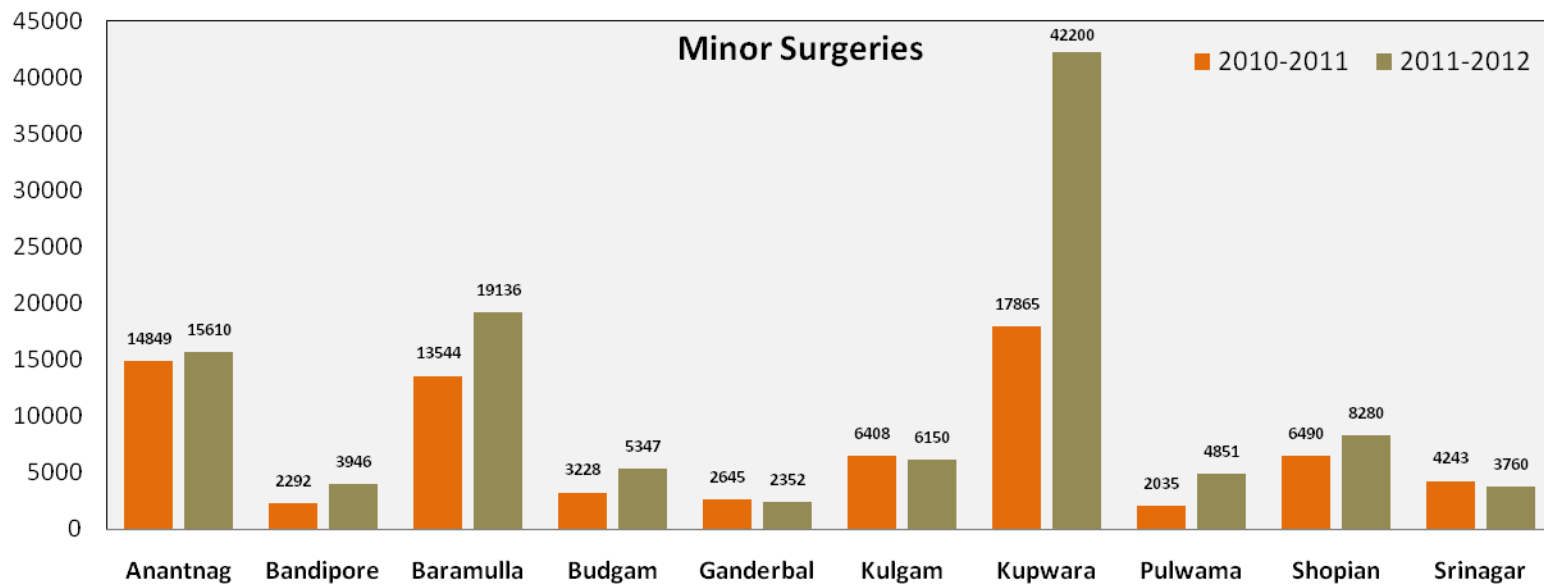
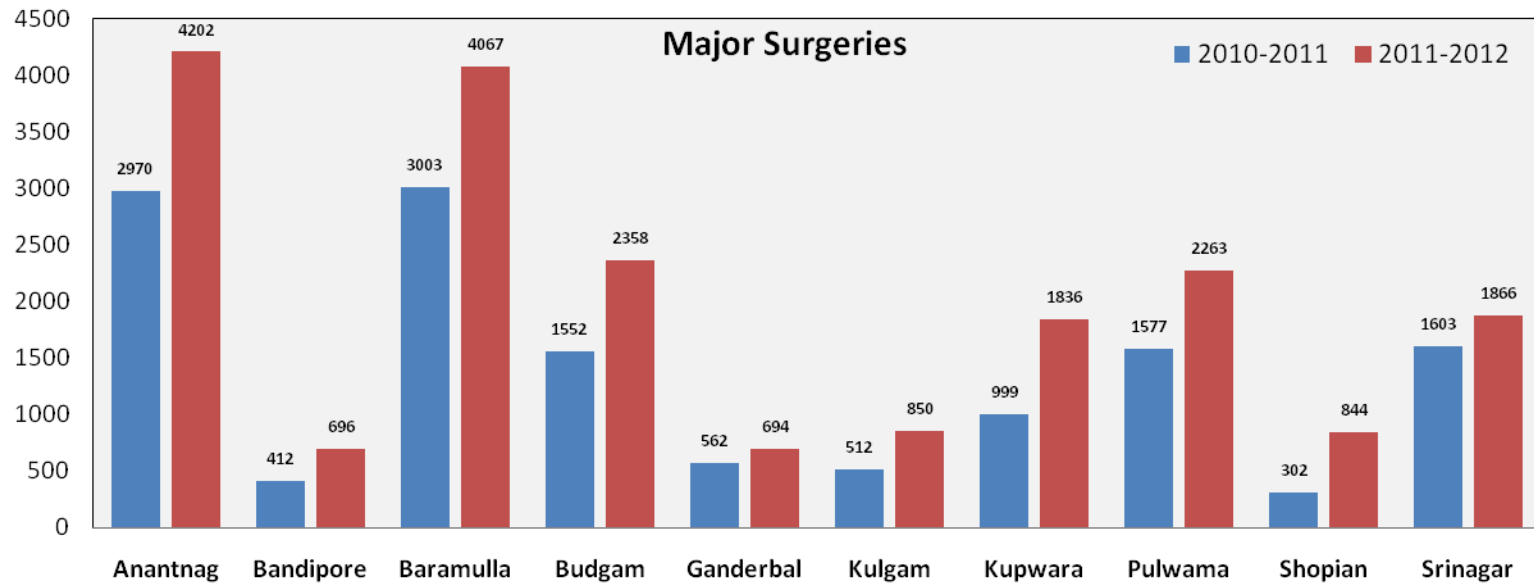
Graph-2



Pahalgam is the most popular hill resort in the Kashmir valley. Pahalgam is situated at the junction of the Aru and Sheshnag Rivers and surrounded by soaring, fir-covered mountains with bare, snow-capped peaks rising behind them. Besides, Lidder River adds to its beauty.

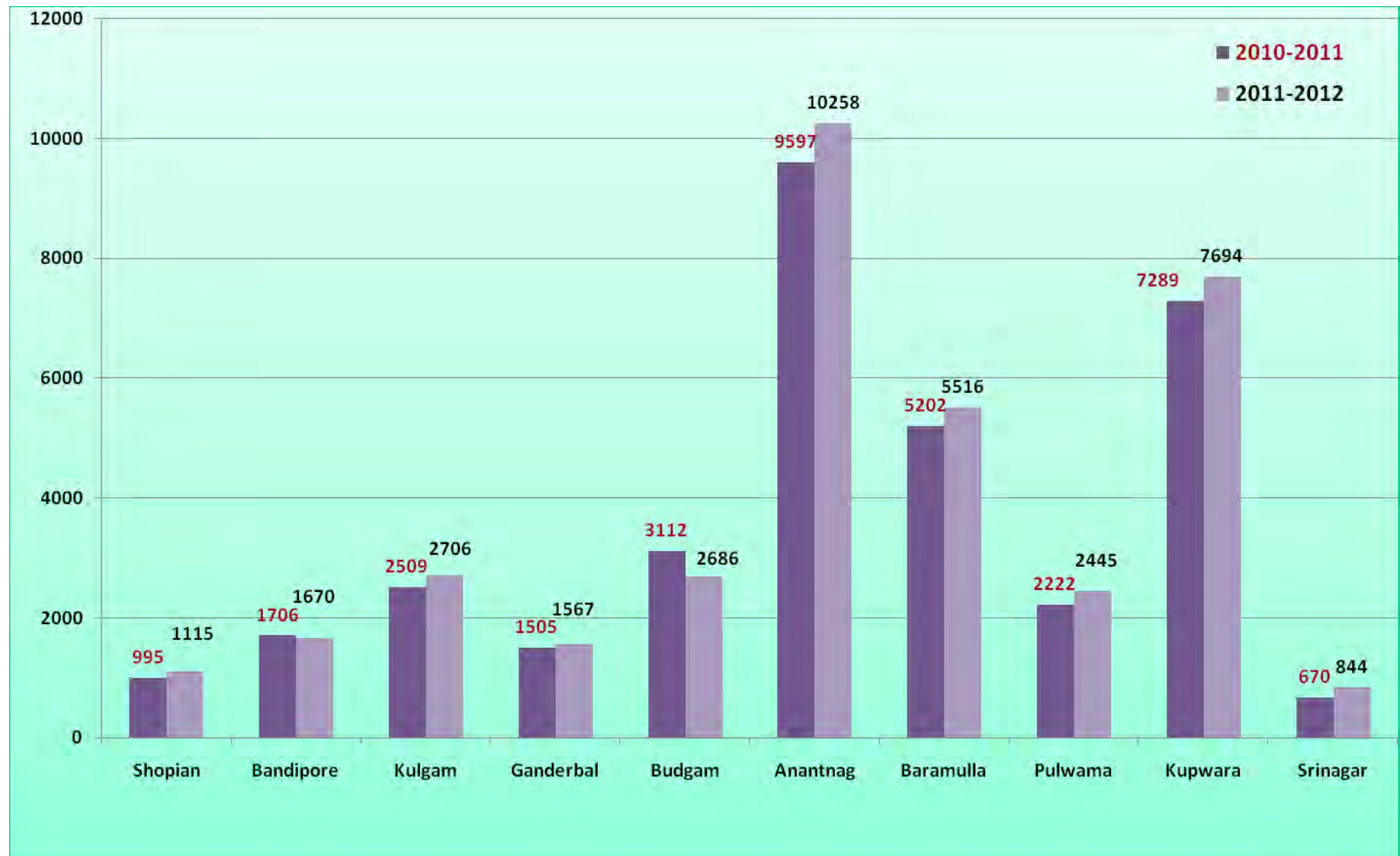
Health Achievements

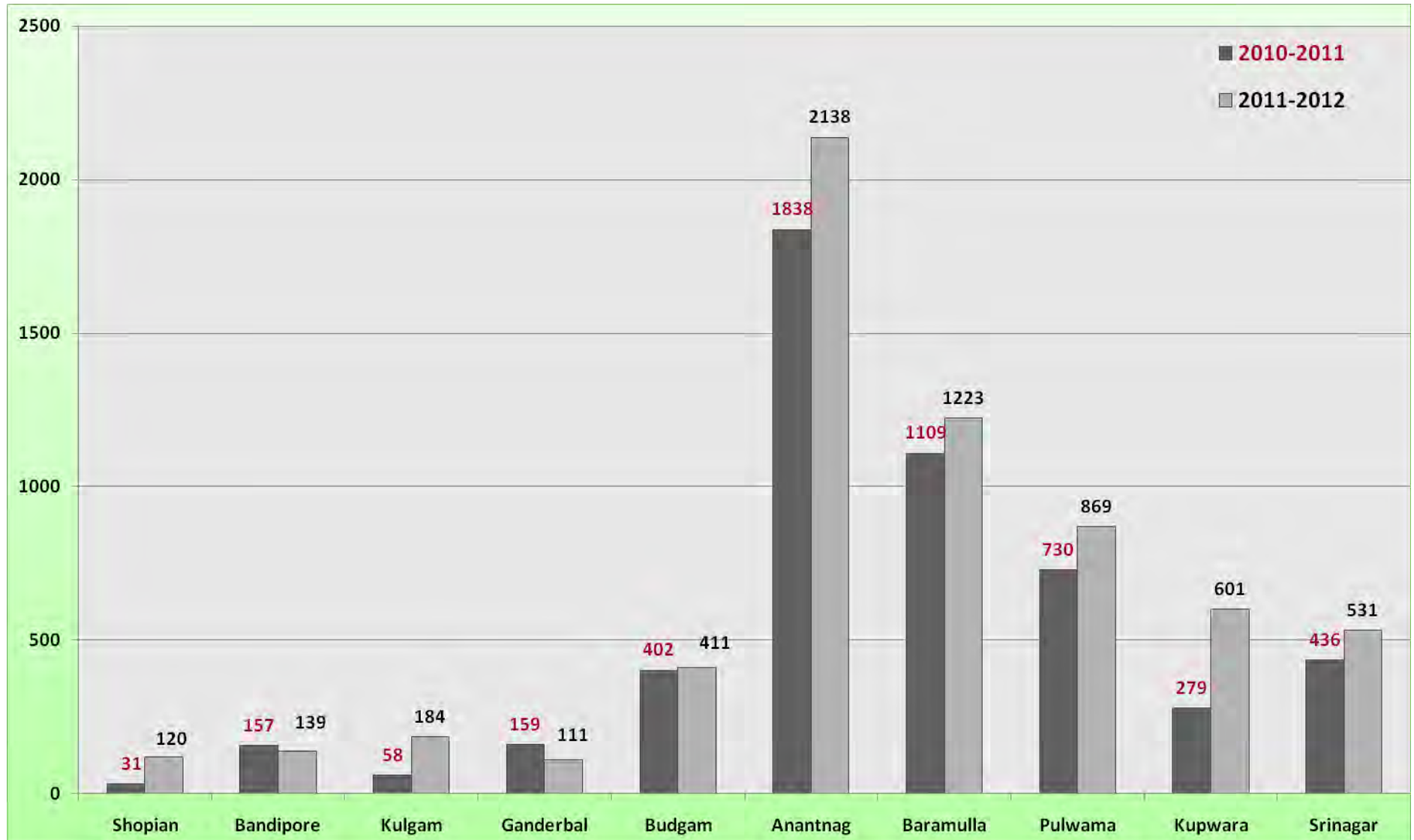
“Life is not merely being alive, but being well.”
(Valerius Martialis)



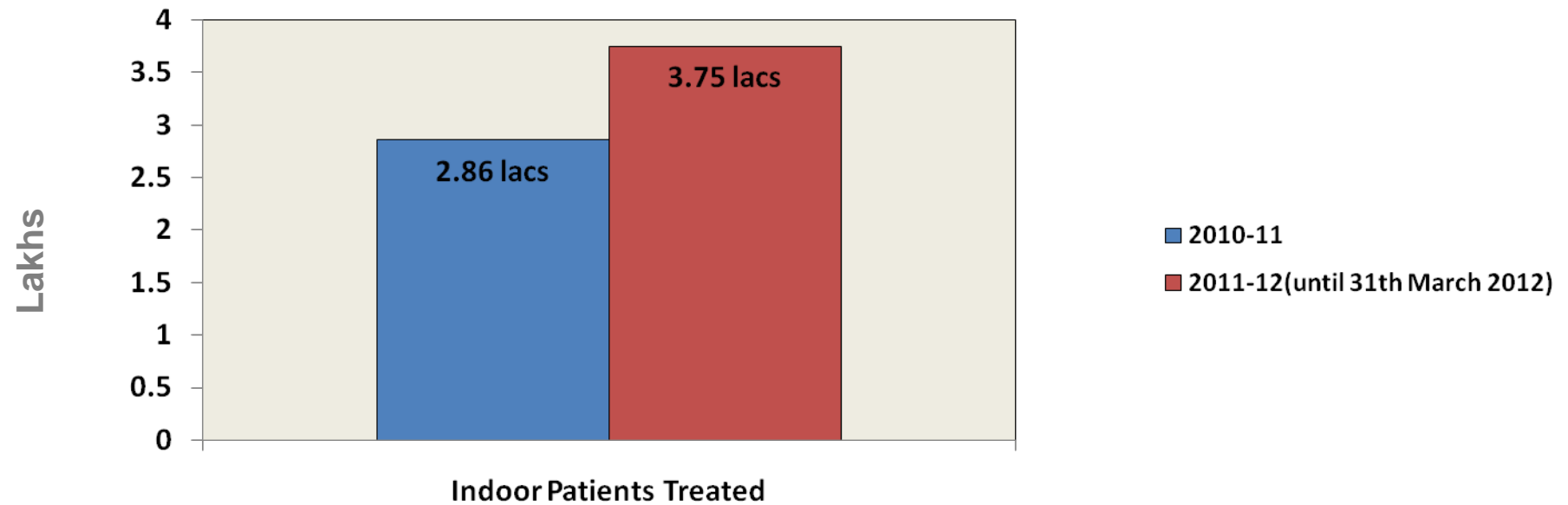
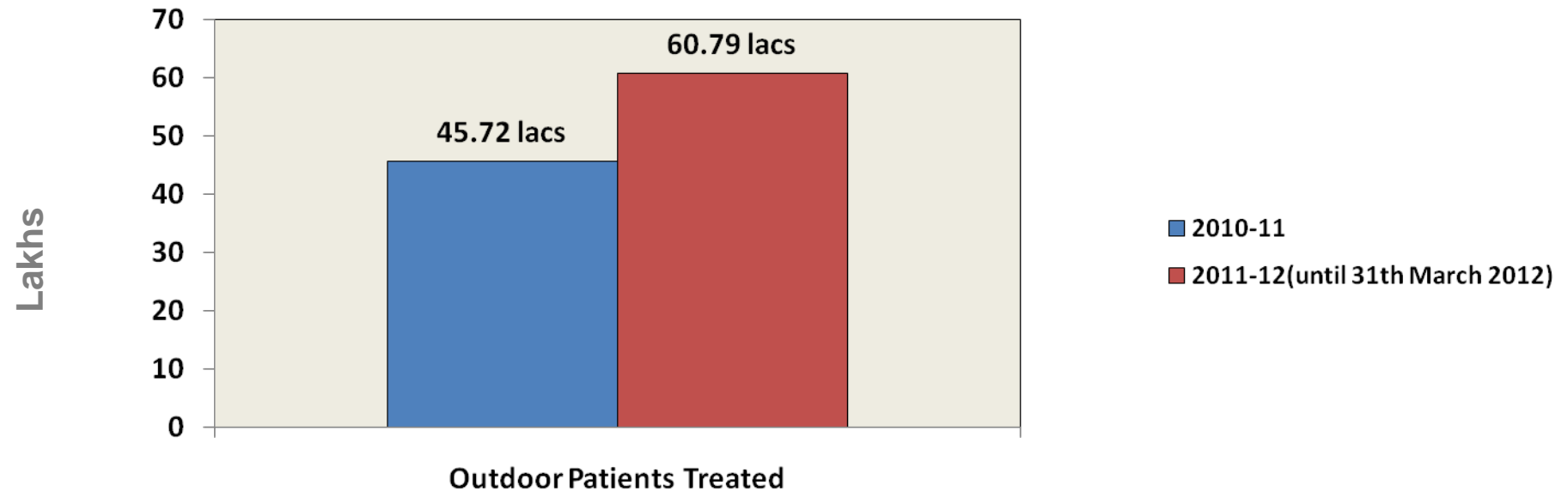
A District wise report on number of Deliveries

Directorate of Health Services, Kashmir



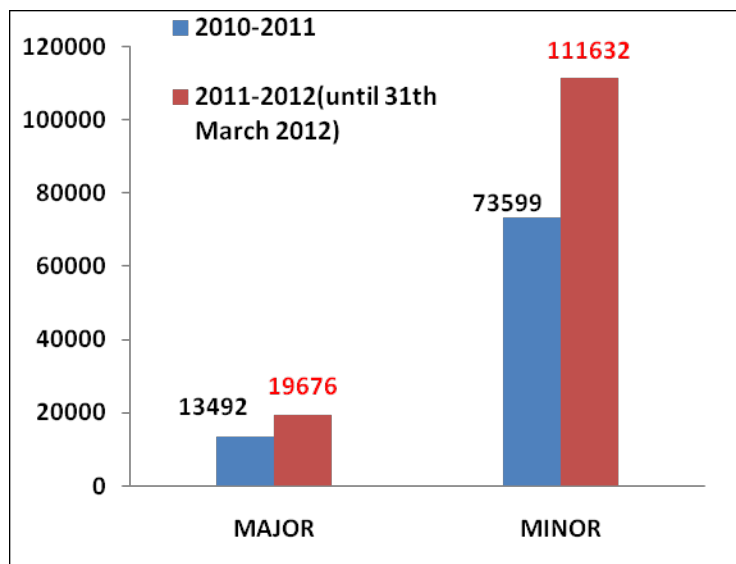
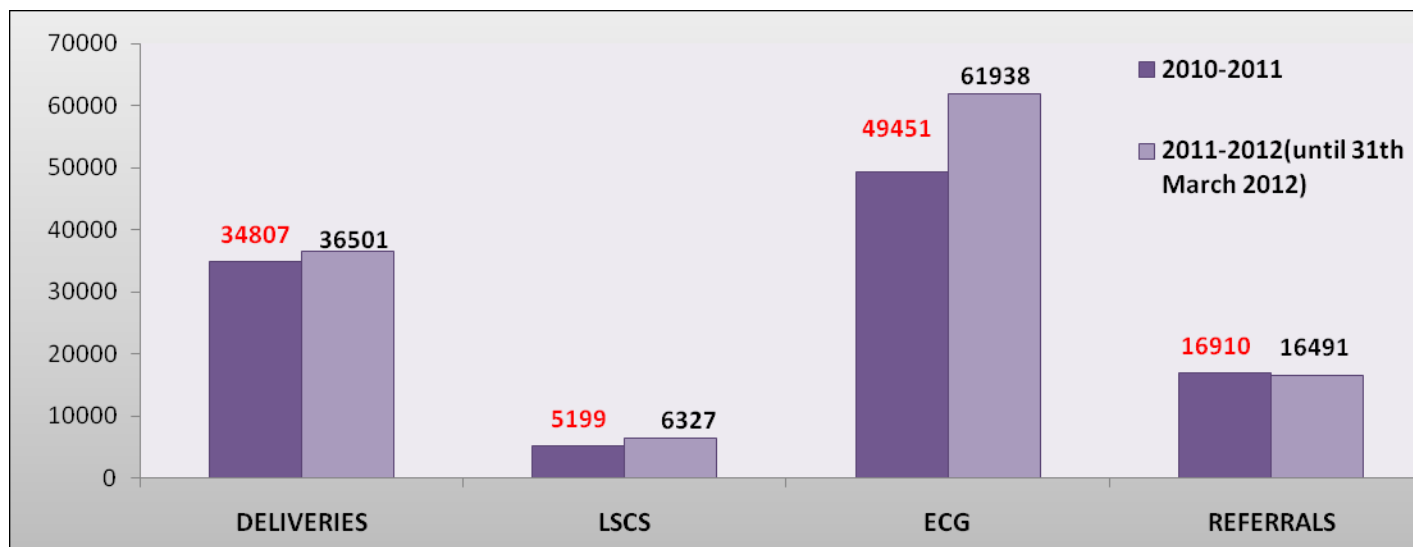


A Cumulative report on Number of **OUTDOOR & INDOOR PATIENTS** Treated

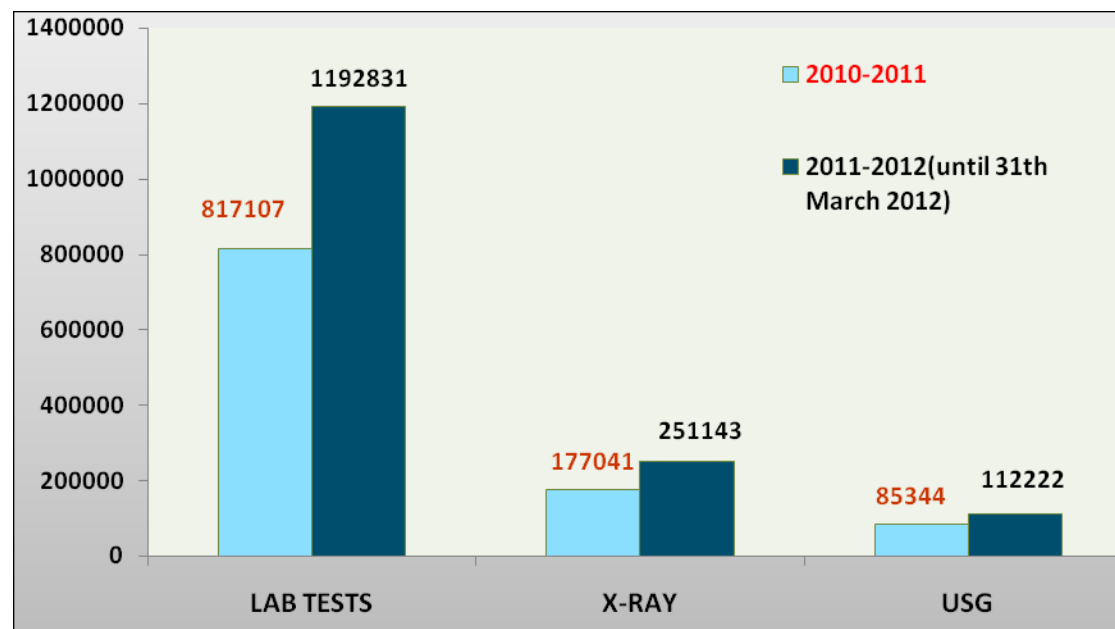


Cumulative Health Achievements – Kashmir Division

Directorate of Health Services, Kashmir



Surgeries





Tulip Garden, is asia's biggest tulip garden, situated in Srinagar. It holds thousands of flowers, impart a mesmerising ambience to this 90-acre tourist attraction in the Valley. Nearly 1.3 million tulip bulbs comprising 70 varieties of various colours have been grown ,overlooking the Dal lake. Located close to the famous Mughal gardens of Chashma Shahi, Nishat and Shalimar.

Communicable and Non Communicable Diseases

Efficient Health Information
is
key to Healthy and Prosperous World



I.D.S.P for Prevention of Communicable Disease

...towards ensuring quality management of Health information

Inside Integrated Disease Surveillance Project - Kashmir

Epidemiology Division

The Division of Epidemiology functions as the leading office for disease epidemiology, prevention and control activities for general infectious, chronic and disease outbreaks.

Computerized Data Management Section

The section takes care of IDSP data which is received from different Districts/blocks of Kashmir division. The data is analyzed and uploaded to Central Surveillance database system. The data is constantly monitored by the data management support staff at State and Central Head Quarters.



Entrance of IDSP HeadOffice, Barzulla



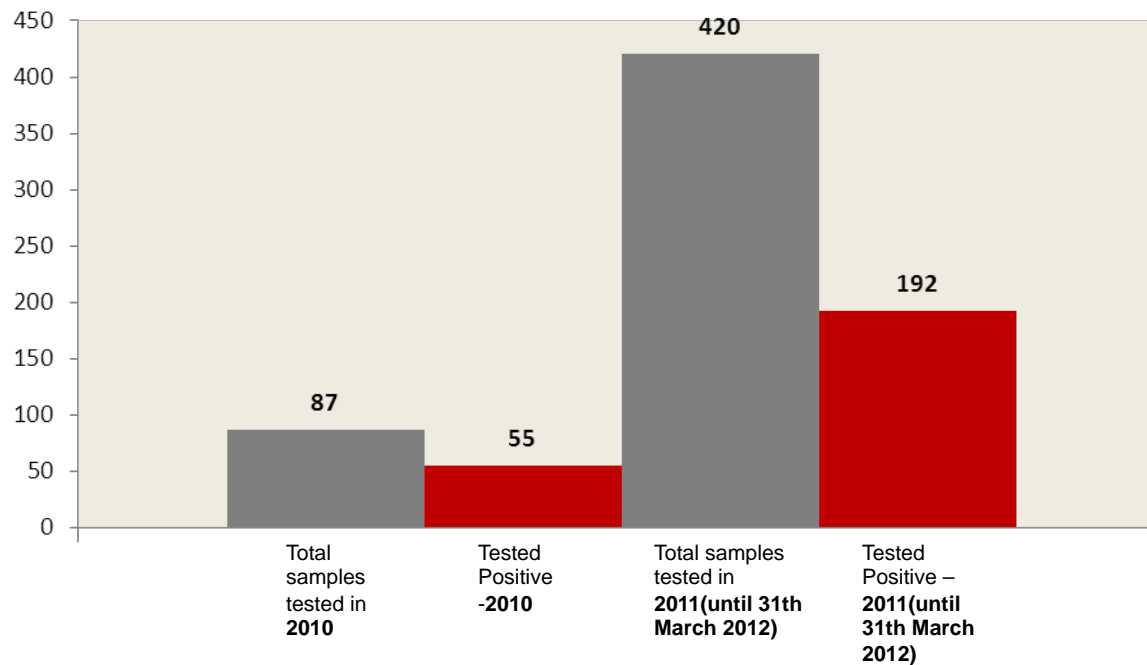
Computerized Data Management Section



SSO IDSP with support staff



Public Health Lab -I



IDSP Public Health Lab.

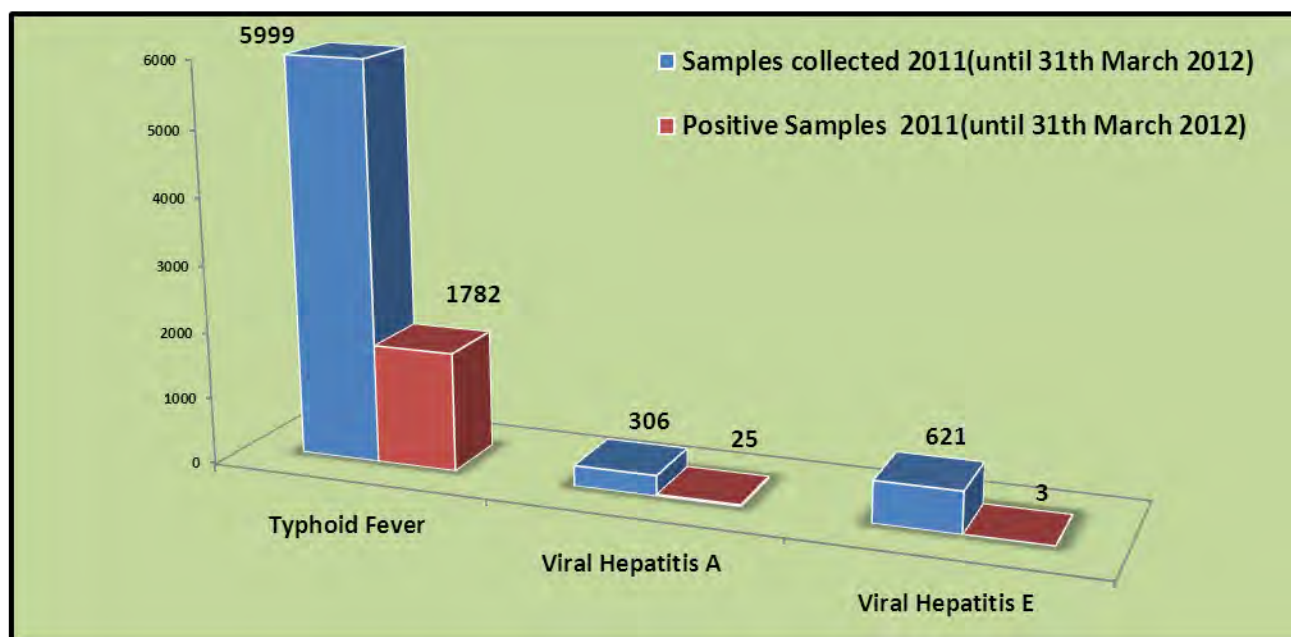
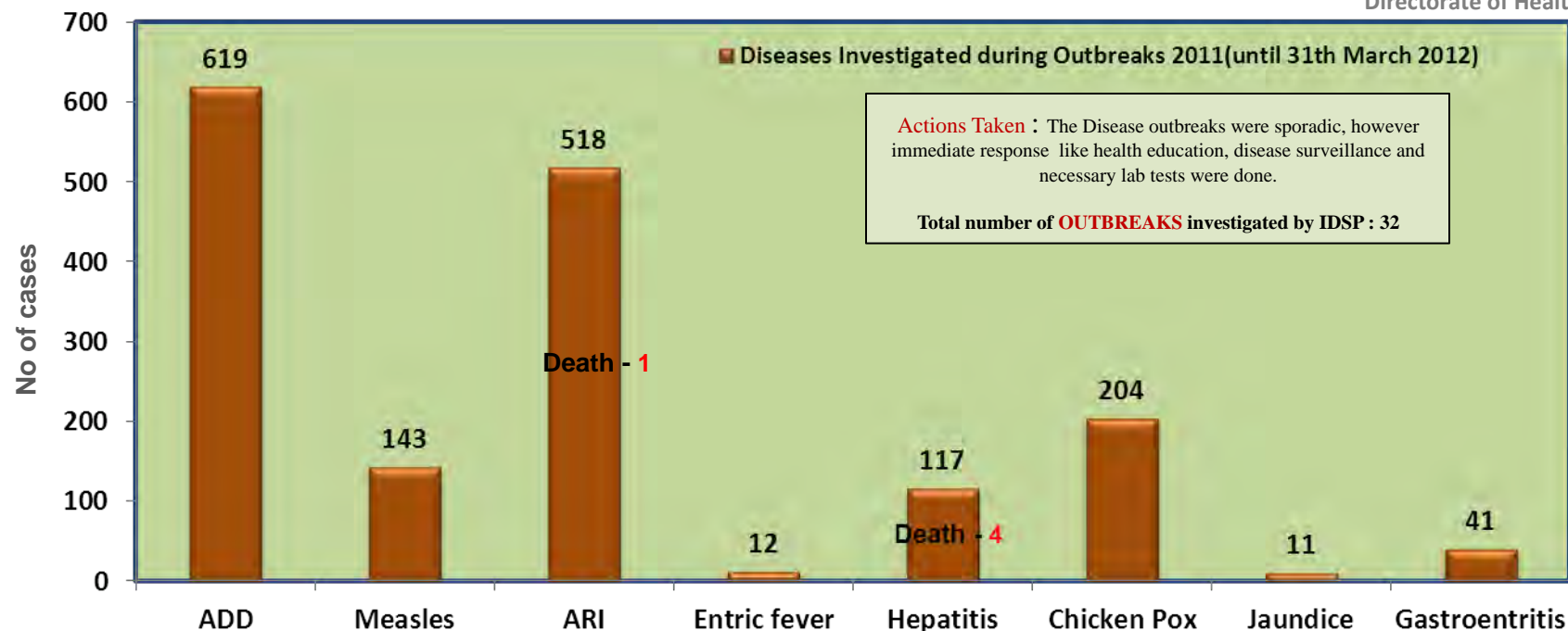
Barzulla, Directorate of Health Services, Kashmir



Public Health Lab -II

Investigated Water Sample Report

The samples are collected from different districts of Kashmir and tested in IDSP PHL, Barzulla Srinagar.. *Period 2010 & 2011(until 31th March 2012)*



Lab confirmed Blood Sample Report
The samples are collected from different districts. Tested in IDSP PHL, Barzulla and other Laboratories in Kashmir

IDSP 's Rapid Response Team in action...

Disease Surveillance conducted of Larnoo District Anantnag - Nov 2011 (pictures on right side)

The State Surveillance Unit conducted an investigation of the District and collected 185 blood samples and were tested in PHL Barzulla.

Lab Reports :- 5 Samples of Patients were tested HBsAg positive.

Action: The RRT gave necessary education to the inhabitants of the village regarding the preventive measures of Hepatitis B, and also local Imams of the mosque were informed to convey the preventive measures to the locals.



RRT investigating the outbreak of RTI in Shonush, District Anantnag dated: 8/02/2012 (Above)

IDSP RRT during outbreak of Viral Hepatitis on 10th Feb 2012 District Shopian

Investigation of Outbreak of Viral Hepatitis at Khudpora Memendar

Report : Cases were presented with chief complaints of fever, loss of appetite, malaise and jaundice. Some patients had got their serum bilirubin done at various labs which was above normal. The cases are in the age group of 9 yrs to 55 yrs., and both sexes are affected.

The people consume tap water however some inhabitants also consume water from local Nalah.

The tap water is supplied through a filtration plant and sometimes directly from the Nala without filtration.

19 blood samples (14 samples from the cases and 05 samples from pregnant ladies) and 02 water samples (one from the filtration plant and another from the user end) were taken on 16th Feb 2012 by the microbiologist for lab tests.



Blood sample collection at Khudpora Shopian



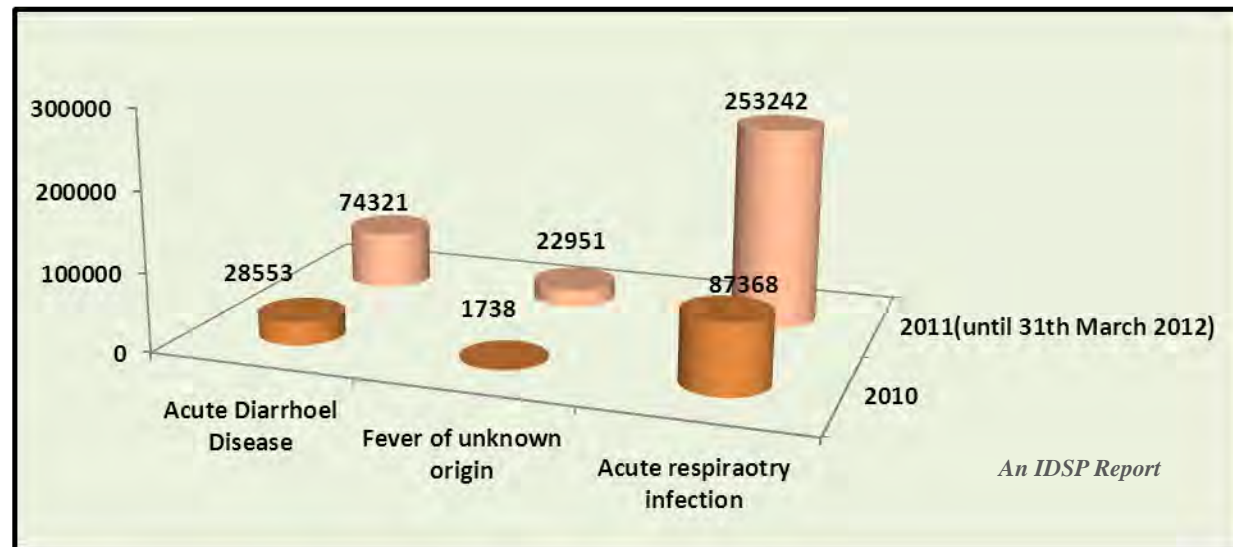
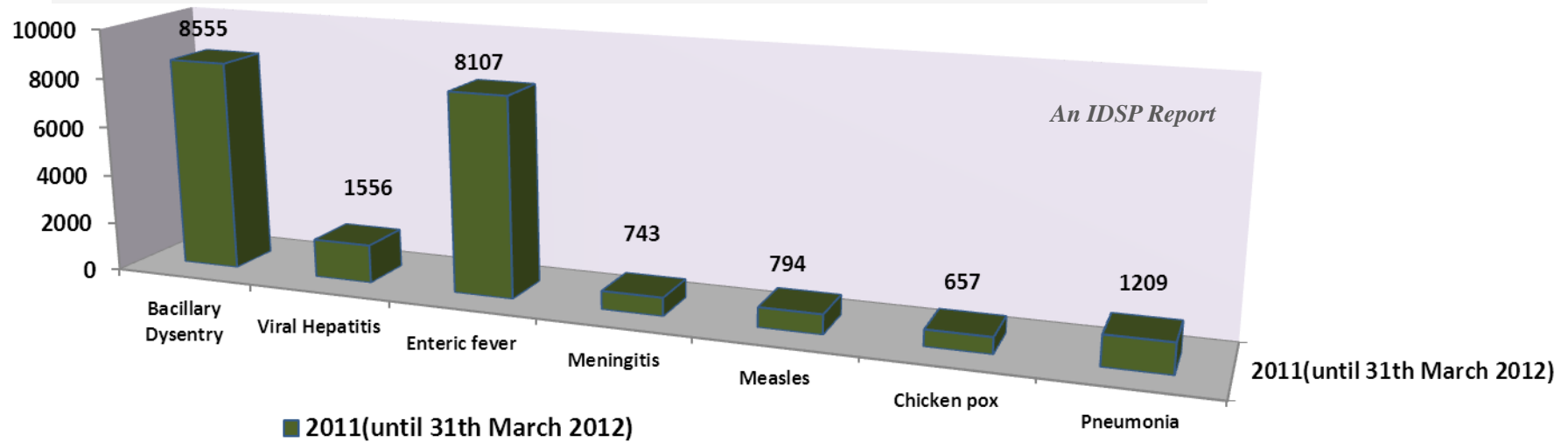
Water Supplied directly from the Nalah at Khudpora Shopian

**Area of
Contamination**

Consolidated Report of Diseases which were Clinically diagnosed

Directorate of Health Services, Kashmir

Year 2011[until 31th March 2012]



■ 2010

■ 2011(until 31th March 2012)

Epidemiological Investigation in District Leh and Kargil

Epidemiologist on a Measles Outbreak in Leh and Kargil.

The Outbreak of Measles was reported and subsequent Epidemiological investigation were carried out.

Sampling for Measles Virus and later confirmed by National Institute of Virology, Pune, India as **D4 Strain of Measles Virus***.

*** Molecular Epidemiology of Measles.**
Journal of Infectious Diseases. 2011:204



PHC Tangtse, Leh



Epidemiologist taking the Throat swab of the pregnant patient with Measles in Leh



An outbreak of Measles affecting Higher Age Groups

Total Number of Cases 736

Age	Number of Cases
1-5 yrs	327
5-10 yrs	128
10-15 yrs	127
15-20 yrs	99
20-25 yrs	25
25 yrs and Above	30

Pregnant women aged 28 yrs in her third trimester (33rd week of gestation) was also affected. 20% of the cases were randomly selected from different age groups for serological confirmation. 147 blood samples and throat swabs of different age groups were sent for serological confirmation and genotyping to NIV(National Institute of Virology) Pune, India. 83 samples were reactive for IgG and IgM antibodies to measles virus in serum by ELISA(Enzyme linked immuno assay), 64 cases were non reactive and **D4 strain of measles virus was isolated**. The need for early measles vaccination of infants at 9 months of age and a repeat dose (18-30 years) might be necessary at a higher age group to prevent adult measles as is being followed by some developed countries in the west.



Child with Rash on her Cheeks in District Kargil

- Reviving the Healthcare
- To revive the Hope

Outreaching Health...

...Improving Outreach

School Health Programme in TANGDAR



A farthestmost hospital in District Kupwara. It was hit by 2005 earthquake and was later rebuild.



School Health Survey



School kids in Tangdar



Water contamination

(shown in the picture above with yellowish water in a test tube as positive and the other as negative)

Test tubes showing water is contaminated by coli forms.

Method used: MPN

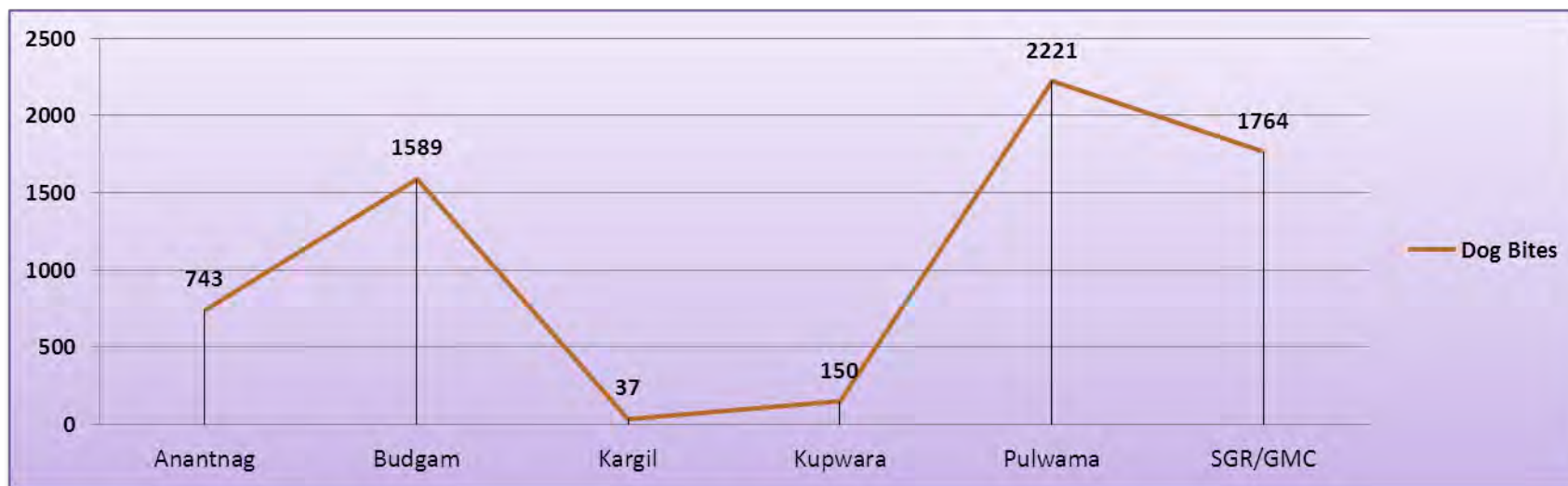


Kashmir's Mansar Lake



Photograph of an IDSP Public Health Lab. Barzulla, Srinagar

District Wise Report of Dog Bites for Year 2011(until 31th March 2012) – Kashmir Division



NCD Programme in Kashmir

Package of services

Institutional framework for the implementation of NPCDCS

Activities under NPCDCS at various levels.

Activities under the NCD programme in Kashmir Division

- Glucometers were dispatched to the district.
- Training of ANM in use of Glucometers was done by representative from Abbott Labs on 17-09-2011 in Leh.
- Total of 76 ANM trained in Leh.
- Glucometers were dispatched to sub centres and as of now screening for diabetes is being conducted there.
- 10 sc are without Glucometers as are 85 Medical Aid Centers.
- Inauguration of NCD Clinic and Geriatric ward on 04-02-2012 by the DC.
- Procurement of equipment for CCU----orders placed.
- Patients admitted in Geriatric ward.
- Interviews of candidates for NPCDCS and NPHCE on 14-02-2012.



Activities under NCD programme in Leh, Kashmir



Training for screening of Diabetes, Hypertension & Smoking under NCD programme in District Kupwara, Kashmir



Sl No	District	No. of persons screened	PERSONAL HISTORY		% of users of Tobacco		SUSPECTED FOR DIABETES	% OF DIABETES SUSPECTED	HYPERTENSION	% OF HYPERTENSION
			SMOKING	CHEWABLE	Smoking %	Chewables %	>140MG /DL			
1	Kupwara	15218	2543	3582	16.71 %	23.53 %	1103	7.24%	1669	8.03%

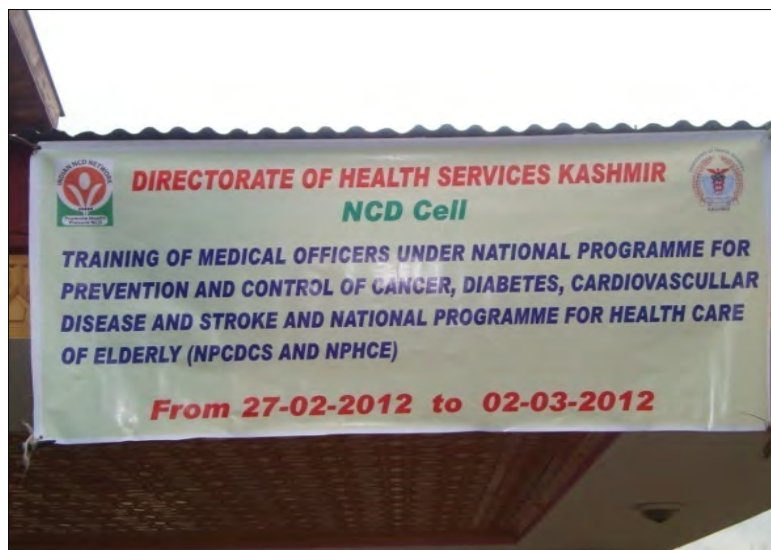


Screening of Patients in Kupwara under NCD Programme

Directorate of Health Services, Kashmir

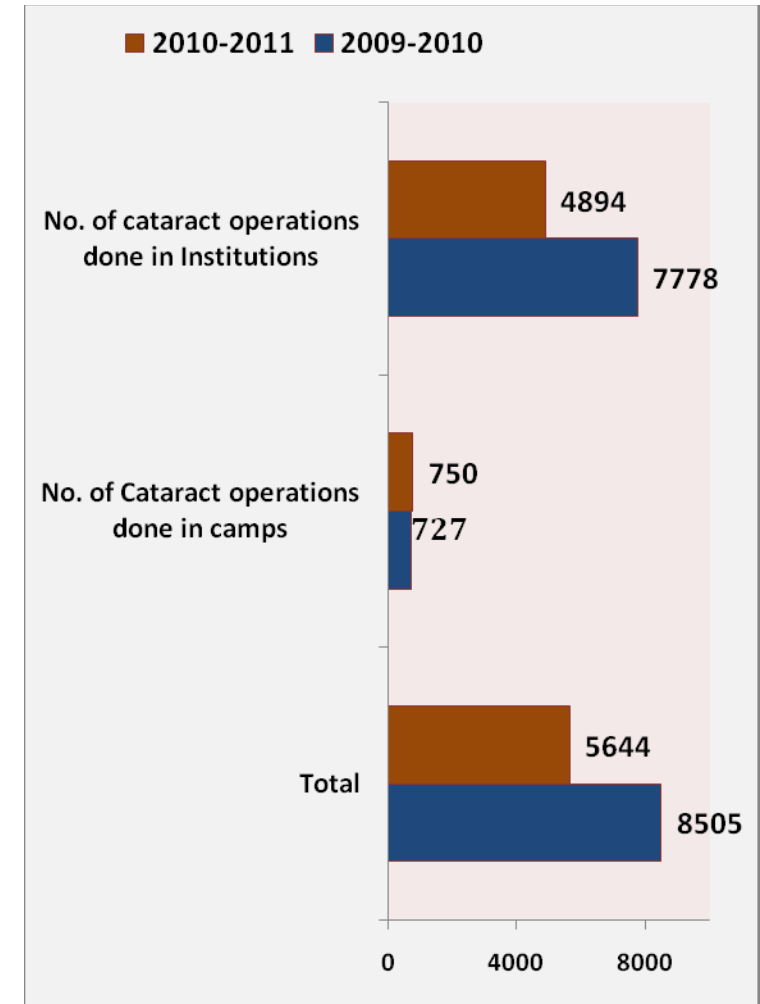
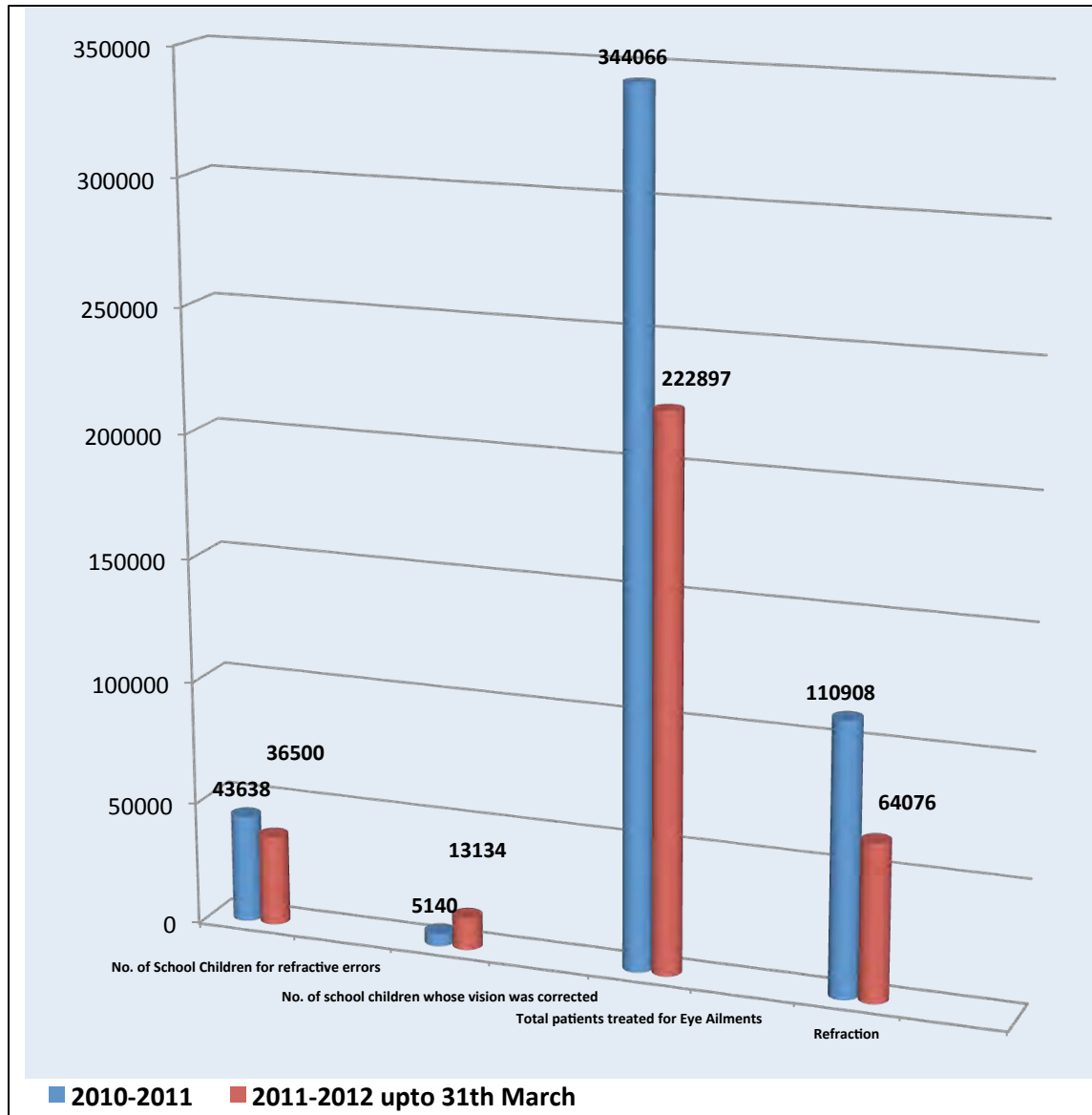


Recently conducted training of Medical officers under NCD at RIHFW, Dhobiwan



Activities conducted in NPCB

(2009-10), (2010-11) & (2011-2012 Ending September 2011)





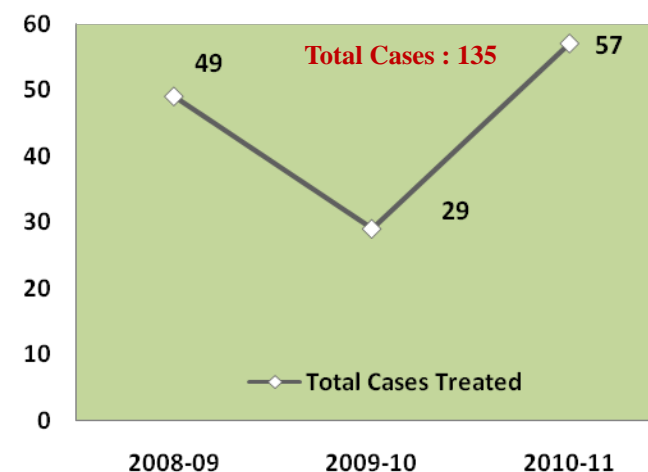
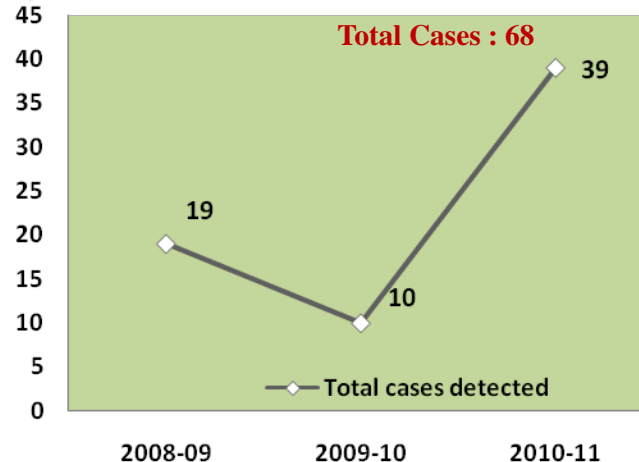
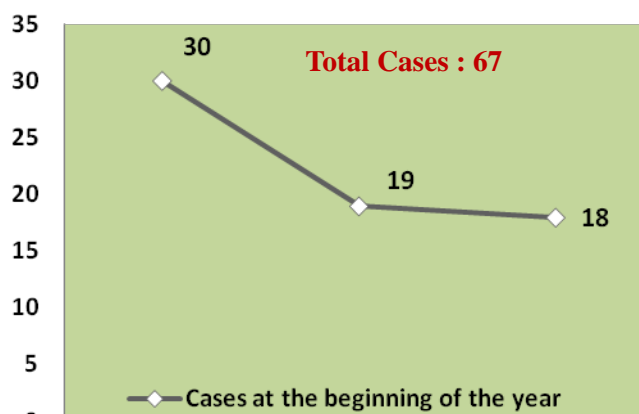
"Leprosy work is not merely medical relief; it is transforming frustration of life in to joy of dedication, personal ambition into selfless service"

...by Mahatma Gandhi



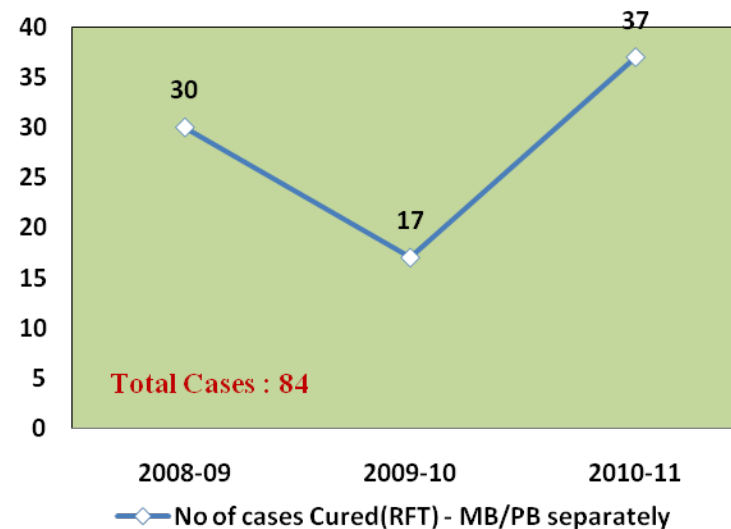
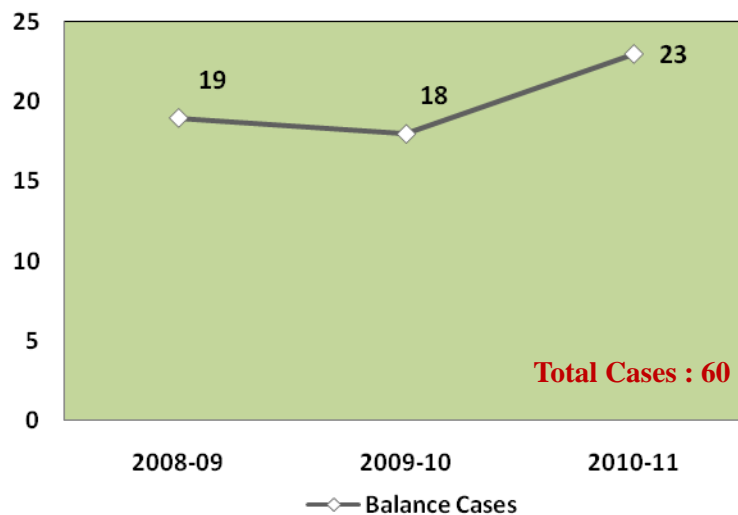
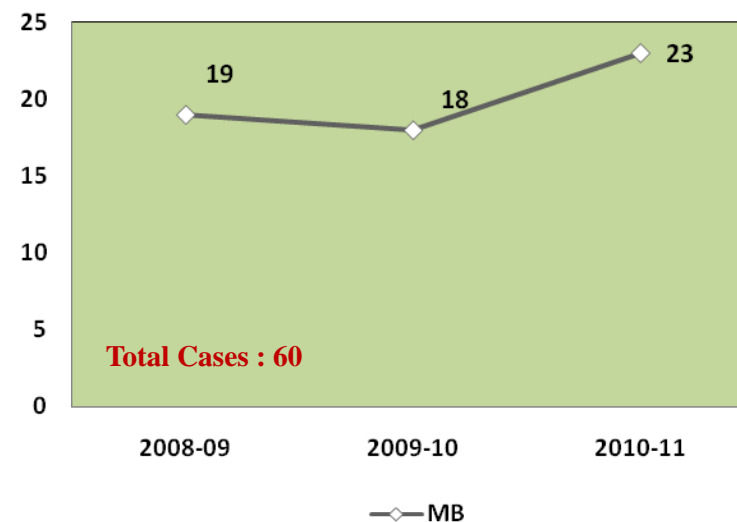
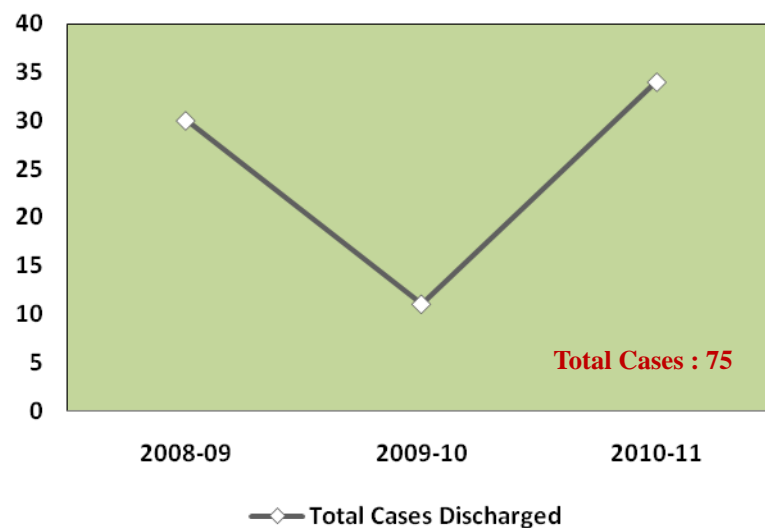
As early as 1915 - when Mahatma Gandhi returned to India from South Africa and spent a year travelling across his country to understand it- he had visited almost every existing leprosy home in India.

Physical Achievements of NLEP in Kashmir (2008-2009), (2009 -2010) & (2010-2011)



Physical Achievements of NLEP in Kashmir (2008-2009), (2009 -2010) & (2010-2011)

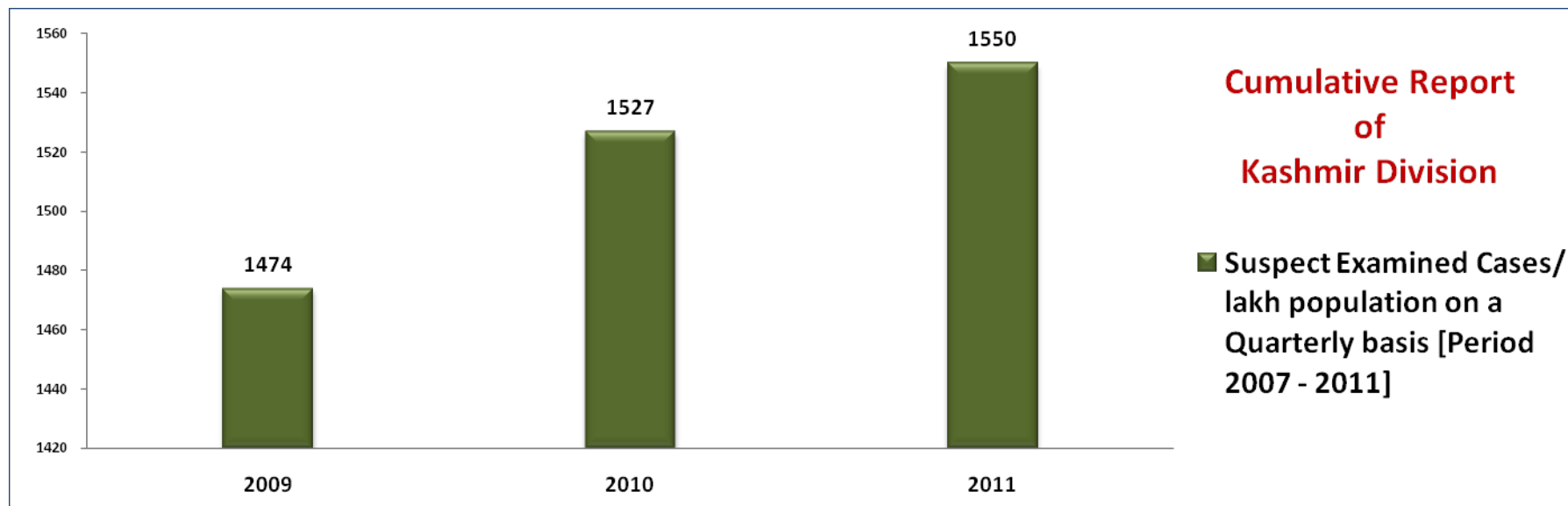
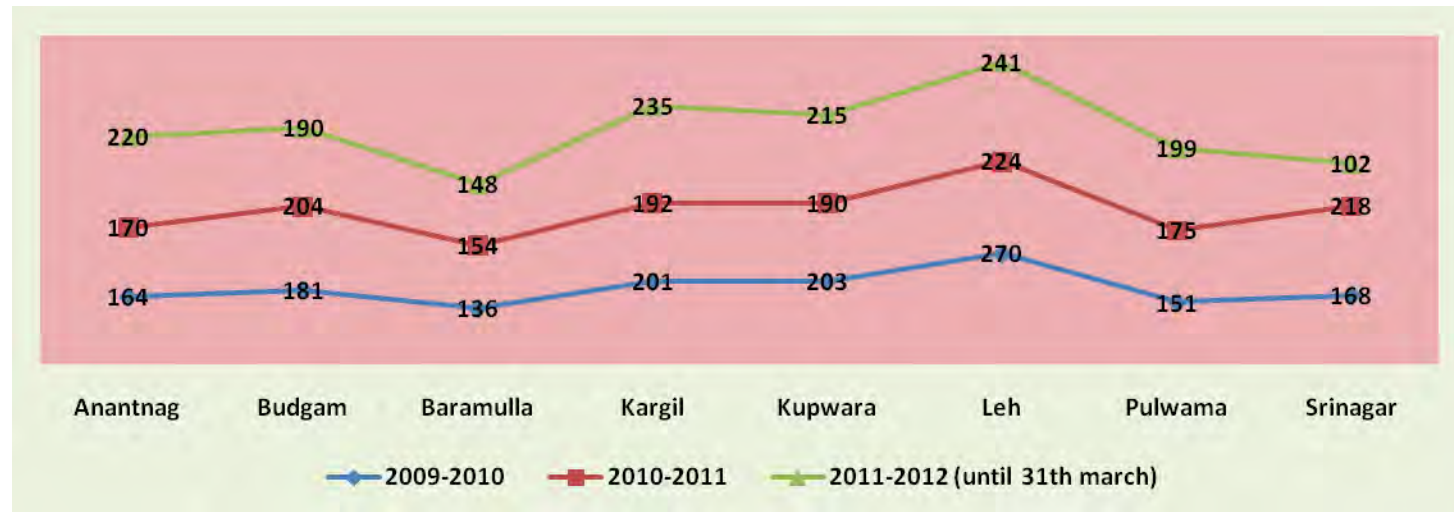
Directorate of Health Services, Kashmir



“With proper care and treatment TB patients can be cured and the battle against TB can be won.”

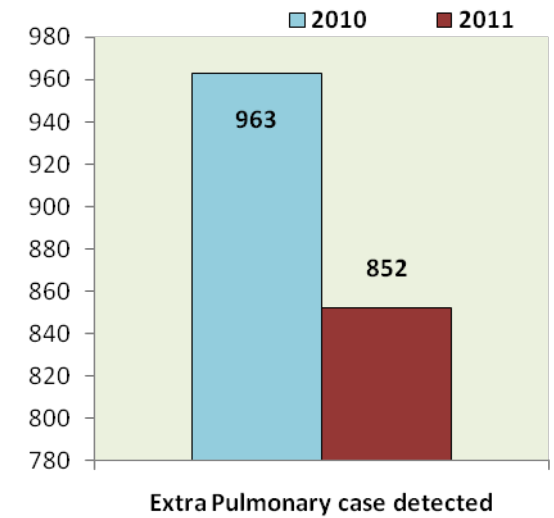
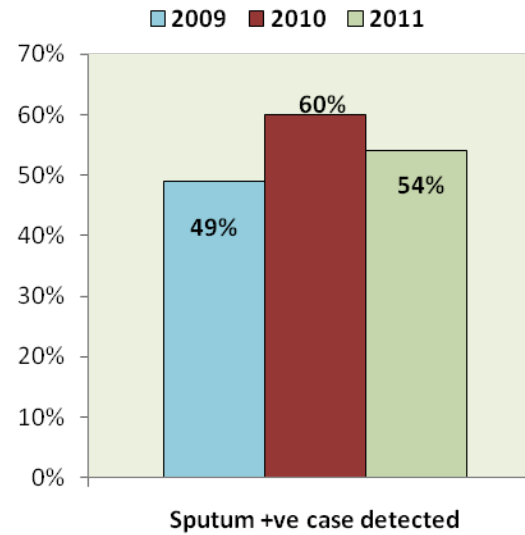
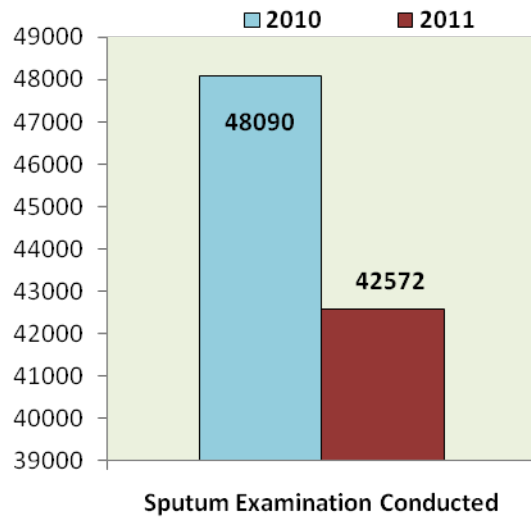
*A District wise
Report on Suspect
Examined Cases/
lakh population on
a Quarterly basis*

Period 2009 - 2011

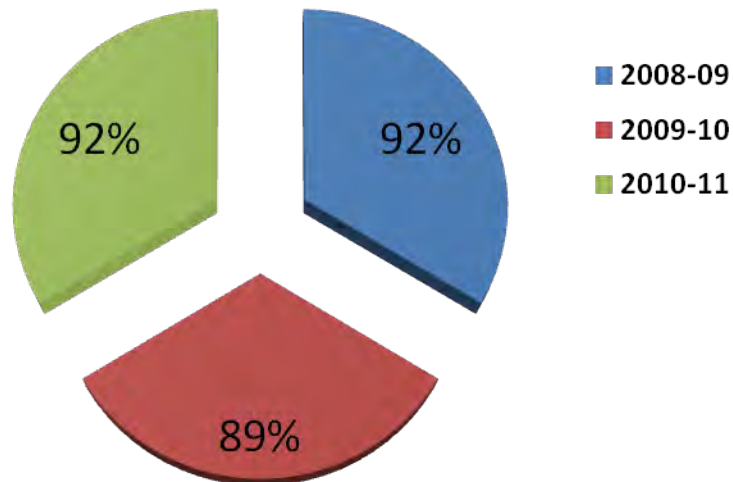


Physical achievements in RNTCP

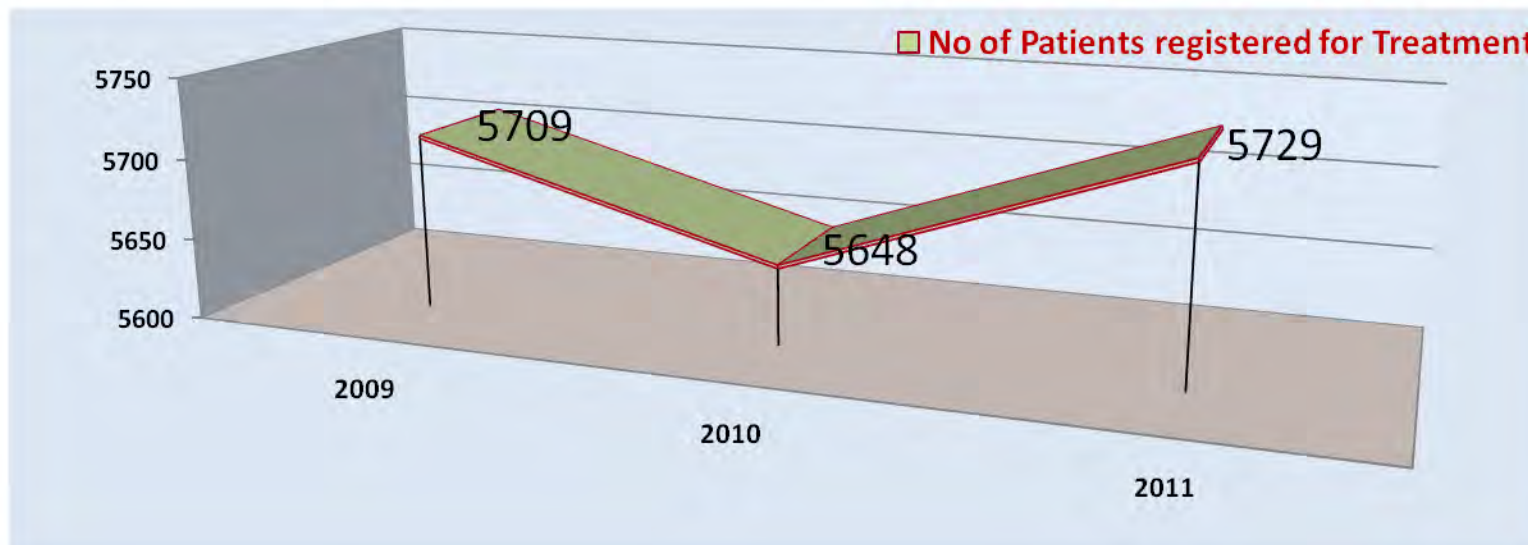
Directorate of Health Services, Kashmir



Annualized success rate of NSP



DOT Centre situated on highest roadway at Khardong in Leh



RNTCP Scenario in Kashmir

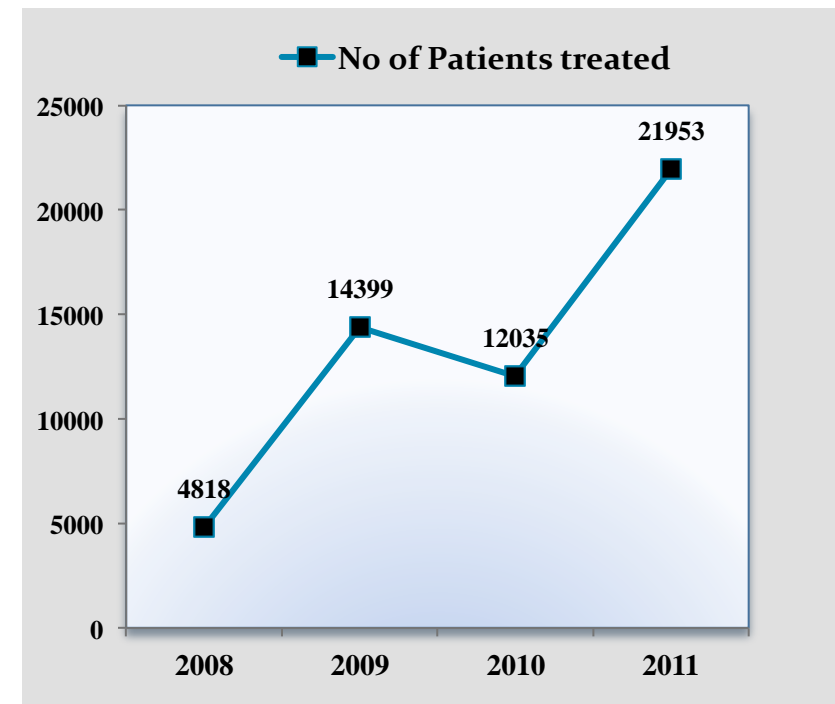
1. **25** TB Units have been established in 12 Districts to provide effective supervision at Sub District level.
2. **92** Designated Microscopic Centres(DMCs) have been established for conducting free of cost Sputum Examinations of the people who present with cough for two or more weeks.
3. **1325** DOT Centres have been established where 1640 DOT providers provide free of cost DOTS to T.B patients at affordable distance.
4. **287829** Sputum Examinations have been conducted since 2004 when the programme was launched in Kashmir till end of Jan 2012.
5. **30723** T.B patients have been detected in Kashmir since 2004 till end of Jan 2012.
6. **21443** T.B patients have completed the treatment by end of Jan 2012.
7. **2308** patients were taking DOTS in Kashmir at the end of Jan 2012.



Mental Health Activities (Period 2008 - 2011)

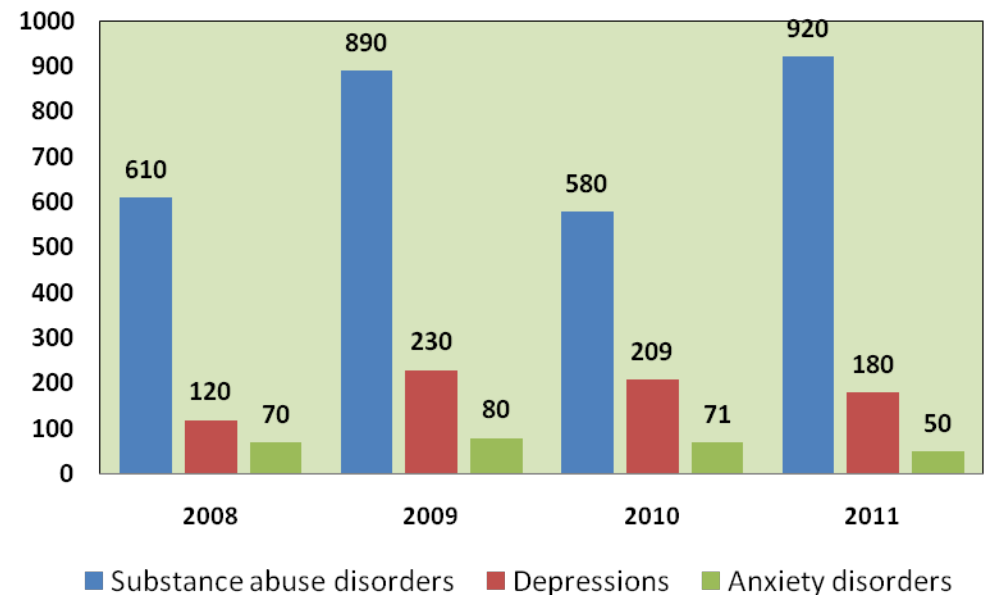
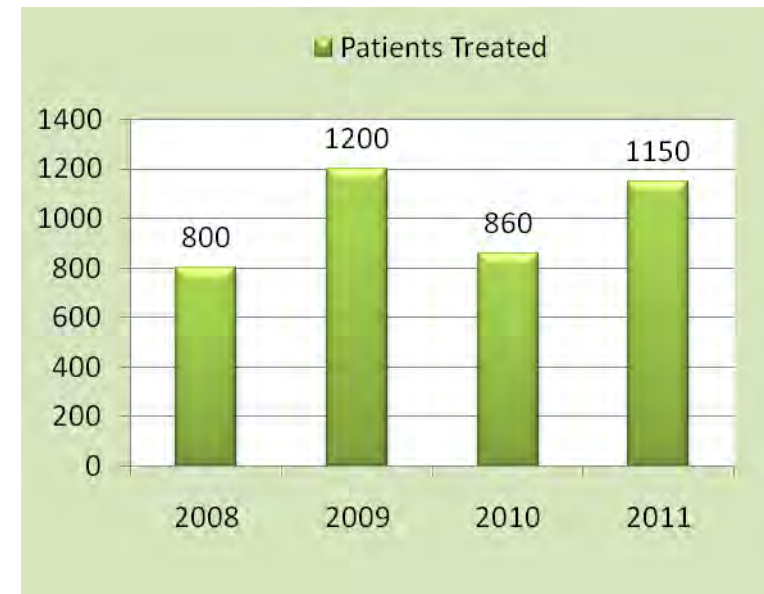
District Mental Health Programme (DMHP) in Kashmir Division

District Mental Health programme was launched in Kashmir Division in July 2008 as part of National Mental Health programme (NMHP) 16 Doctors who have been trained in mental health for three months from Govt Medical college srinagar and NIMHANS Bangalore are treating patients in various rural hospitals of Kashmir valley, Besides three trained psychiatrist are also running mental health clinics in District hospital of Kulgam,& Pulwama and SDH Sopore and chadoora. Also two doctors who have been trained in mental health from NIMHANS Bangalore are working in SNM Hospital Leh & PHC Chogal Kupwara following mental health activities have been performed during 2008-09-10 & 2011.



Mental Health Activities (Period 2008 - 2011)

Directorate of Health Services, Kashmir



Diagnostic break up of Patients treated



Gulmarg, is the country's premier ski resort in the winter. Originally called 'Gaurimarg' by shepherds, its present name was given in the 16th century by Sultan Yusuf Shah, who was inspired by the sight of its beauty. Horse riding/Hiking Cable car ,Golf playing & Snow Skiing during winter months are its attractions.

Disaster Preparedness

“Without health, life is not life; it is only a
state of languor and suffering”

(Francois Rabelais)

Emergency Medical Services in Kashmir

Emergency Care, Risk & Disaster Management.

After all, it's the question of life, that too quality life.....

Today injuries are the most serious health problem facing us, whether measured in rupees costs, hospital visits, premature deaths, or lost productive years of life. Available means for preventing many injuries and reducing the resulting disability or death are often ignored. In addition to the direct costs of injuries and deaths, the increase in the number of vehicles has other serious health implications as well as wider social, economic and environmental impacts. These “hidden epidemics” receive relatively little attention of policy makers and society. The epidemic of road traffic injuries is still in its early stages, but it threatens to grow exponentially unless there is swift action to counter it.

The trend of injuries have changed in last few years the Road traffic accidents has over taken militancy related injuries ,we had more deaths and injuries due RTA than militancy acts.

Developing countries already bear the brunt of 90% of the disability-adjusted life years (DALYs) lost to road traffic injuries and deaths. The problem is so severe that, by 2020, road crash injuries are likely to represent the third leading cause worldwide of DALYs lost. Injuries account for approximately one-third of the acute patient load in many hospitals, and of all trauma admissions road traffic injuries constitute the majority of such admissions.



International Trainer Dr Eric bernes in a Session

EMS Mock drills in Kashmir

- Twenty Specialist doctors imparted International level training as Training of trainers (TOTs) in “BLS & Stabilization techniques “
- More than 3000 health professionals trained in BLS ,Stabilization techniques and first Aid in short span of time –4 months and process still continues by TOTs.
- NABH guidelines adopted for the first time to prepare for accreditation of all major hospitals.
- NBC-2005 guidelines incorporated for the first time in designs and re designing of new and upcoming hospitals .
- State of the art ambulances services (108) to be introduced soon in State. Project at final stage confirming to International Norms.





President of India Mrs Pratibha Bedi and Union Health Minister Mr Ghulam Nabi Azad taking part in pulse polio immunization programme.

Workshop on Integrating Hospitals Safe from Disaster.
Organized by Ministry of Health Govt. of Jammu & Kashmir.

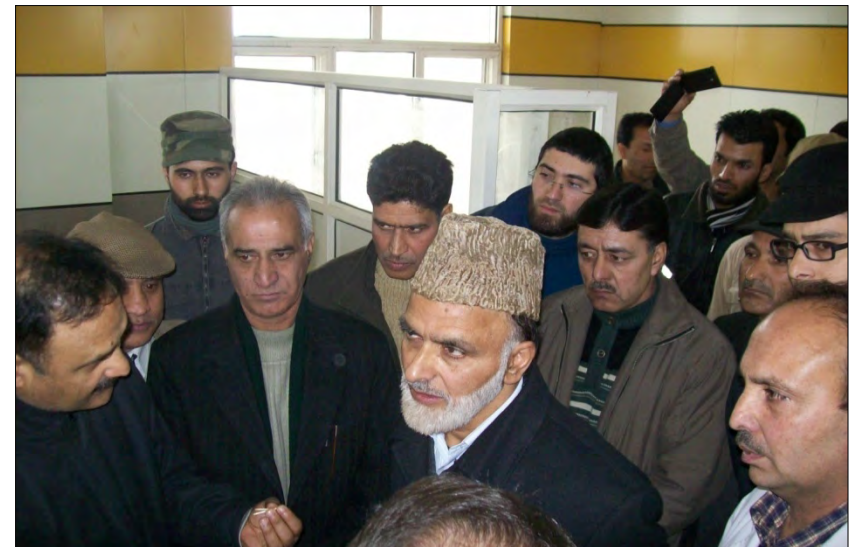


The workshop on “Integrating hospitals safe from disasters” was organized jointly by Ministry of health, Govt. of Jammu and Kashmir and Department of Hospital Administration, All India Institute of Medical Sciences, New Delhi in collaboration with National Disaster Management Authority, Govt. of India, Delhi, world Health Organization and Geo Hazards Society, India.

Hon' ble CM Mr Omar
Abdullah



Hon' ble minister Mst. Sakina Itoo on Pulse Polio Immunization day.



Hon' ble Minister Mr Ali Mohammed Sagar in JLN Hospital on Pulse Polio Immunization day

Health Minister at District HQ's Anantnag



An awareness campaign to create general awareness among the common masses regarding various components of NRHM. The sammelan was attended by more than 3000 people which included health care service providers, Prominent Citizens and the recently elected Panchs and sarpanchs of the District.

Minister for Health, Horticulture and Floriculture Sh. Sham Lal Sharma was the chief guest on the occasion.



Anuradha Gupta Joint Secretary MOHFW, GOI



P K Pradhan Secretary Health & FW GOI



Dr Kabir Dar ,Director ISM and Dr Madhu Khullar Director Health Services Jammu



Director DSK in meeting with Medical officials on Leprosy at RFPTC bldg, Barzulla



Medical officers felicitated by Director Dr Saleem-ur-rehman on the conclusion day of NCD training programme.



Visit of former MOS, Smt. Panabaka Lakshmi to Regional Inst. Of Health and FW, Dhobiwan, Kashmir



Cardio Pulmonary Resuscitation Training (CPR) in RIHFW, Dhobiwan



AICC president Sonia Gandhi shares the dias with Union Health Minister Ghulam Nabi Azad and Chief Minister Omar Abdullah.

Achievements

Directorate of Health Services, Kashmir

2009 to 2010

- **39** Health Buildings Completed.
- **65** Ambulances procured.
- **Web Site** for Health Department was launched..
- **63.99 lac** patients - treated in outdoor.
3.16 lac patients – treated in indoor.
- **47854** institutional deliveries and **16878** major surgeries.

Procurements:

- **14** X-Ray Plants(10 No's of 100 MA & 04 No's of 300 MA)
- **02** USG Machines, 03 Defibrillators cum Multi Para Monitor
- **08** Anesthesia Machines
- **20** ECG Machines
- **20** Hydraulic Dental Chair Mount Unit..
- **H1N1** disease check posts were established at International Airports of Srinagar and Leh and at Lower Munda, Qazigund.

About **2,43,938** persons were screened for **H1N1**, among which **50** persons were found positive. **02** deaths took place due this disease during the reference period.

2010 to 2011(Ending Mar 2011)

- **7** health institutions viz E H Qazigund, OPD Block SDH Tral, PHC Babanagri, MO's qtr at SDH Dawar, Gurez, PHC Budrokalan, PHC Marhama and PHC Gulmarg made functional.
- **4** Hi-Tech, Ultra Sonography Machines have been installed at DH Kulgam, DH Handwara, CHC Gousia & PHC Manigam. Installation of two CT Scan machines are in the pipeline.
- **1** Ventilator has been installed at DH Anantnag.
- Orders for procurement of **05** CT Scan Machines have been placed and shall be installed shortly at JLN Hospital, Rainawari, DH Anantnag, DH Baramulla, DH Handwara and DH Pulwama.
- **65.36** lacs patients - treated in outdoor.
- **3.57** lacs patients in indoor.
- **54830** institutional deliveries.
- **20469** major operations
- **108078** minor operations.

2011 to 2012 (Ending Dec 2011)

- **25** ambulances.
- **4** District Hospitals have been upgraded Viz DH Anantnag, JLN Hospital Srinagar, SDH Chadoora and DH Baramulla.
- Kashmir Nursing Home has been made functional & is providing specialized health care facilities in cardiology, Nephrology, orthopedics, Onco surgery.
- **250** FMPHW have been engaged .
- **60.79** lacs OPD Patients have been treated.
- **3.75** lacs indoor patients have been treated .
- **42828** institutional deliveries.
- **19676** major operations
- **111632** minor operations .
- **16** posts under different categories have been created for PHC Marhama (Dist Budgam)
- **3** posts of B-grade specialists for CHC Hajin.

Doodh-e-Patheri. Doodh-e-patheri is a bowl shaped valley about 42 kms from Srinagar. A flowing river resounds with soft wind passing through the pine trees of the enclosures of the valley. It is also called as a "VALLEY OF MILK" because it produces rich milk in a large quantity. It is said that the cattle grazing in the meadows of Doode e Patheri, produces rich milk in large quantity , this reason it is called the "valley of milk" Doodh e Patheri.



The Way Forward...

The Way Forward...

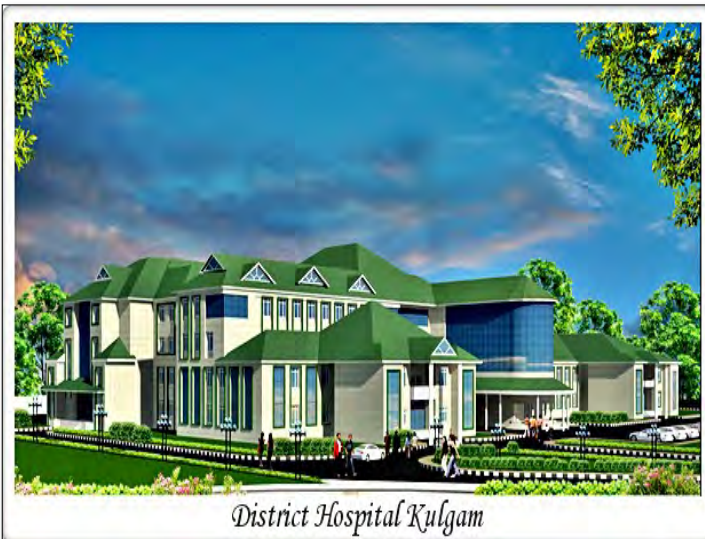
The integrated approach to health in Kashmir region over the years has helped in achieving many milestones in enhancing the quality of life of the people, especially the deprived and the marginalized. Yet, there are many more challenges to be faced, milestones to be achieved, and a long way to go to reach the goals set by **Directorate of Health Services Kashmir.**

Dr Jahangir Bakshi Topic

REFORMS & INNOVATIONS in

HEALTHCARE*(An initiative of the Directorate of Health Services Kashmir)*

PROJECT 1: Redesign and Repurposing of DHSK institutions as per NABH (National Accreditation Board for Hospitals) and other global standards. Major Hospitals like District Hospitals of Bandipora, Kargil, Kulgam and Ganderbal along with a large number of smaller hospitals like trauma hospital at Bijbehara among others have been redesigned in tune with the latest international standards. Besides a number of existing or under-construction hospitals have been made more standards-compliant and user friendly with the addition of ramps, wheelchair access, sub-waiting spaces, additional toilet and attendant facilities.



PROJECT 2: Prototype CHC and PHC as per NABH (National Accreditation Board for Hospitals) and other global standards. Earlier health institutions were being designed and built in an arbitrary fashion without regard to scientific planning. All new institutions will be based on Prototype DH, CHC and PHC designs which have been created as per NABH (National Accreditation Board for Hospitals) and other global standards.



District Hospital Kargil

PROJECT 3: New Health Secretariat

A new Health Secretariat building has been designed to be built on land repossessed from Land-grabbers in Bemina. This building will house Directorate of Health and other directorates like Family Welfare, ISM, NRHM etc. It has a corporate-based design with all modern public and business amenities including a 500-seat Auditorium.

PROJECT 4: Kashmir Simulation Laboratory (KSL) Project A state-of-the-Art Simulation Laboratory is being set up at RIHFW Dhobiwan to enhance patient safety and the quality of medical care through the use of innovative and high impact simulated training and research.

PROJECT 5: Modern Drug Warehouse

Modern Drug Warehouse for scientific storage, management and distribution of medicines has been designed for construction at Bemina.

PROJECT 6: ALS/BLS Training for all employees of DHSK in a phased manner.

A core team of BLS Trainers has been trained by Dr Eric Bernes, world-renowned expert from International Committee of the Red Cross (ICRC). These trainers will provide BLS training to all health employees in a phased manner. ALS sensitization programmes have also been initiated and ALS certification programmes are on the anvil.

PROJECT 7: Facilitation of Comprehensive Emergency Pre-hospital Ambulance Transfer (108) Service (EMS) and Helpline (104) Service. J-KATS Project is in the Second Stage. World class 108 (EMS) and 104 (Helpline) services will soon be just one phone call away. First-of-its-kind River Ambulance to avoid traffic bottlenecks is also under active consideration.

PROJECT 8: Creation of First Referral Centres for 108 Ambulance Service

Creation of two 24X7 fully-equipped and staffed J-KATS First Referral Centres (ATLS & ACLS) at DH Anantnag and DH Baramulla for optimal deployment of 108 Ambulance Service. More J-KATS First Referral Centres will be added to the project in a phased manner.

PROJECT9:In Kashmir nursing home and JLNH hospital (PPP) Projects Proposals for setting up Advanced Cardiac Care centre, Advanced Dialysis and Nephrology Center, and Cancer Palliative Centre have been submitted to the Administrative department for approval.

PROJECT 10: Smart-Card based biometric employee attendance systems are being introduced in DHSK institutions and SDH Kupwara has already taken the lead.

PROJECT 11: Proposals for Colour-coded aprons and QR-Code based ID Cards are being evaluated.



Aerial view of upcoming District Hospital Bandipora



Construction based on the prototype SDH (CHC) design has also started at a number of sites across the valley.

REFORMS:

Comprehensive plans are being drawn up in the thrust areas of:

A. Logical HealthCare

Logical deployment of Healthcare manpower and resources.

B. Quality HealthCare

Accreditation of our facilities by QCI [Quality Council of India]

via NABH [National Accreditation Board for Healthcare]

ADMINISTRATIVE REFORMS:

- Web Site for Health Department has been launched.
- Institutionalization of Administrative Audit Inspection.
- Computerizations of OPD tickets at District Hospitals and even in some Sub-District Hospitals and the process is still going on.



PROTOTYPE DISTRICT HOSPITAL in KASHMIR



PROTOTYPE SUB-DISTRICT HOSPITAL (CHC) in KASHMIR

Play *Sports* Stay *Healthy*

Polo match in action, Ladakh



Ice Skiing, Gulmarg



White water rafting in Kashmir



Golf in Kashmir



**“ To Serve is Beautiful, but only if it is done
with
Joy and a whole heart and a free mind”**



Autumn in Kashmir - The onset of Autumn, perhaps Kashmir's loveliest season, is towards September, when green turns to gold and then to russet and red. The highest day temperatures in September are around 23 deg. C and night temperatures dip to 10 deg. C by about October, lower by November when heavy woollens are essential.

BACK COVER

and the journey towards a Healthier Paradise continues...

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