



Government of Rajasthan  
Directorate of Medical, Health & Family Welfare Services  
Swasthya Bhawan, Tilak Marg, Jaipur-302005

S.No. NRHM/R4H-II/JSY/11/2076

Dated: January 23, 2011

To

All Collectors

Rajasthan aims to achieve MMR 148 per 1 lac live births and IMR 32 /1000 live births as per the set goals of 11<sup>th</sup> plan. Timely availability of required clinical support is the key to achieve this target. Due to the non availability of the specialized services in remote & out reach areas , the patient is to be referred to higher centers without delay to prevent miss happenings..

Therefore to reduce the commutation time of patient and facilitate their referral to higher centers **referral transport system** is to be established all over state. Under this system mobility support will be provided to all pregnant who are referred to the higher center for the sake of effective management.

**Guidelines for Referral Transport at Village level:**

1. ANM, with support of ASHA and AWW would prepare village wise list of basic data of vehicle availability in her area.
2. Data would include list of
  - a) vehicles available in the village (jeep, truck, tractor, tempo/ bullock cart/ camel cart)
  - b) Driver's/ Owner's and resource person to be contacted in case of emergency- (ASHA Sahayogini/ AWW/ JMC/ Dai/ PRI) with their name, address & phone number.
3. Overall supervision is to be done by PHC Incharge and the database will be compiled at Block level within 15 days by block ASHA facilitator under the supervision the BCMO in next 5 days.
4. Meeting of Drivers, Vehicle Owners and Resource persons will be held at Block level to sensitize them about-
  - a) Maternal Health
  - b) Causes of Maternal Mortality
  - c) Complications of Home Delivery
  - d) Benefits of Institutional Delivery
5. Districts will work out & conclude to a common rate, agreement will be made accordingly and a monthly financial payment will be made from PIP (F.Y. 2010-11) Head FMR Code A.1.2. - Referral Transport
6. Block wise Master list will be submitted at District level within 15 days
7. Monitoring of referral transport will be done by a person identified from the Medical Dept preferably DPM and will assist the CM&HO
8. Every block will have an independent control room which will be strengthened with additional manpower, computerized call processor and required stationery
9. Then the Database is to be then compiled at district level and submitted at State Level and also made available at CM&HO Control room

10. All the relevant information about referral transport, phone numbers and the control room will be advertised by posters/ pamphlets, meetings using the VHC budget and distributed to the families of the pregnant women
11. The women/ pregnant woman in need of referral transport can contact the control room or call the driver and give the details- address name and contact number
12. The driver would be responsible for transportation of the woman from home to the nearest health facility.
13. No referral transport incentive under JSY will be paid to the beneficiary/ ASHA.
14. In case the beneficiary is referred to the higher facility, it is the responsibility of the facility in charge to arrange for the transport and payment.
15. A log book to record the details will be made available to the driver. The entry would be made from the place of pickup of the woman and the Medical Officer In charge (at CHC or PHC) would verify at the facility. The log book will be timely verified and signed by the CHC In charge to ensure timely payment to the driver.
16. The monthly information related to the referral transport will be sent in the following format to the and the undersigned and email to nojsy.raj@gmail.com:

Name of the District:

Name of the concerned officer Incharge:

S.No	Name of the village (place of start)	Name of the facility (DH/ CHC/ PHC) taken to	Total Number of beneficiaries that used the transport facility	Total Expenditure

**Action points:-**

- Instruction to CEOs to ensure data collection and compilation with formation of Block level control rooms within stipulated time.
- Rate contract finalization.
- Instruction to health facilities to initiate the activity as per the decided the rate contract and guideline.

  
(B.N.Sharma)

Principal Secretary, Health

Dated: January 27, 2011

S.No. NRHM/RCH-II/JSY/11/2011

**Copy to:**

1. PS to PHS, Medical & Health Services, Rajasthan
2. PS to MD NRHM
3. Director RCH
4. Additional Director RCH
5. All Joint Directors
6. All CEOs
7. All CM&HOs
8. All Block CM&HOs
9. All DPMs
10. Central Server room for the needful

  
Director RCH