

# Annual Report

## 2023-2024



# PUSPAC

(Peoples United For Social Participation and Awareness Centre)

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weaker section, marginalized and emancipated habitant at some point of their life or their family's life. We help government to set priorities across the sector, to co-ordinate the actions of other social sector agencies and to track changes in the social well being of

## PREFACE

**PUSPAC** has completed 30 years with very remember year 2023 - 24. We are very proud in serving the people of malkangiri of odisha within this year through a lot of major things and projects which have been undertaken and initiated. As an organization of more than 30 years with so much up and done. On the day of organization foundation day I got emotional and first occasion review own contribution along with team members for social reconstruction programme. Day by day the organization is reaching more and more people still far behind from thought of total area coverage as per revenue boundary. We have to try hard. go

### **Organizational Introduction**

PUSPAC has completed 30 years of service by 2024. It is a matter of great pleasure and honor for PUSPAC and its member and staffs for their commitment and contribution in the field of health, education ,livelihood and women empowerment. In the earlier stage, effort has been made to organize the rural tribal & Dalit poor through the organizational existing network member of CBOs in the target villages of Khoirput, Korakunda, Malkangiri and Mathili Community Development Block of Malkangiri district. In the same stage, the work forces had been suffered a lot with factors as such lack of understanding to redress the issues, skill for sufficient effective display, Back ground of organization, personal qualities of members and lack of guidance. PUSPAC in its first interaction with the villagers of Govindpalli GP in Khoirput Block was traced diverse problems that draw constant action to mitigate the problems through adequate management of local resources and the efforts are still going on. Interaction with the communities and specially the tribal villagers was not very encouraging but PUSPAC did not lose patience and hope. This backdrop has evolved organizations

knowledge thereafter the activities of PUSPAC has been re-organized on due course of function. Since that time PUSPAC changes gradually in its structural position as a mature organization with human resource, programmatic changes, participation of local persons and support from different quarters. The organization started some good programme that based on need Based approach and right Based Approach.

The specific leadership in the organization was emerged confidently with the passage of social atmosphere where in, the same encourages voices of vulnerable from various invisible pockets of this locality. The hands of support for sustainable development were also raised in gradual course. After strenuous effort over the years, PUSPAC has nurtured multifold new dimension in its action and recognized itself by District Administration as premier and notable organization and in addition to that PUSPAC also have connection as active partner of various issue base state level networks. During these years of operation, PUSPAC has tried to maintain transparency at various levels both in its thought and action. This has helped in strengthening the rapport with its partner communities as well as donor partners. The policy making body of PUSPAC is conscious enough in its day to day activities and provides the required input to the concern workforce for well managed operation. By the end of year 1999, PUSPAC intended to have a re-look at its action and did a plan for next five years which focused upon initiating dialogue with the local level PRI members and this resulted to identify various programmes as well recognized the partner community from the most poorest section of the local society. During the starting of the current session PUSPAC has again made a long range plan till 2030 for both the organization as well as for the programme that to be implemented basing upon the guidance of Millennium Development Goal of UN General Council.

**Vision:** A self sustained and empowered Tribal society where everyone will have dignity in Malkangiri District by end of 2030.

**Mission:** "PUSPAC committed to empower People's Organization at the grass root level with sophisticated action in line with minimize the day to day problems and issues that perennially affected their life and livelihood through available local resources and equal facilitation".

**Goal:** PUSPAC would take care of community in organized manner and also facilitate social, economical & cultural development instruments. In fact the organization targeted that the community of Malkangiri District will access primary education, livelihood, Environment, health and sanitation as well free of food crisis by 2030.

#### **Specific Objective**

- i. To builds up a society through schemes & innovative approach, where everyone shall have Health food, decent shelter in good habitants and access to basic education as well as to higher education leading to optimum human actualization and have access to quality health, sanitation & safe drinking water services.
- ii. To build up a society through innovative approaches & development activities, where everyone shall have access to employment and self employment with self respect and dignity that leading to optimum human actualization.
- iii. To build up a society through welfare & advocacy programme, where every women, children, aged person with disability or differently able person & weaker community will be specially protected against any atrocities, abuse, repression emancipation & oppression irrespective of diversified nationality, group, class, race, place of birth & culture.
- iv. To build up a society through innovative approaches where everyone will share the enjoyment from benefit of democratic governance system irrespective of caste, class, creed, religion, place of birth & culture.
- v. To build up a society through innovative approaches, where everyone shall have harmonious as well peaceful life & have access to fair justice of caste, class, creed, religion, place of birth & culture.

- vi. To build up a strong social team through various efforts, where in the team will combat against any emergency situation.
- vii. To build up a prosperous society through adoption of appropriate technological option, where industry, agriculture & other traditional livelihoods will flourish in harmonious manner and the same shall be committed to protect the original environment irrespective of nature, status and size.
- viii. To build up a just society through innovative social instrument where every one's fundamental Right & Human Right will be protected & realized where in the society will be disseminated only maximum Gross National Happiness.
- ix. To build up a society where every woman of the district will be promoted to empower through Self-Help-Group (SHG) mechanism to that effect create an enable & institutionalization system in microfinance & disseminate the benefit thereof for poorest of poor women.
- x. To build up a society where each interaction will be for development of quality leadership among the Tribal and especially among women and youth irrespective of class, creed, cultural heritage and identity.
- xi. To build up a society where some specific interaction will be promoted economic status of tribal on the development of the entrepreneurial habit among the tribal population. Through on-farm and off-farm ventures with ultimatum to address the Food security needs.
- xii. To build up an alliance with local & global agencies through various communication and coordination, where appreciation of such agency shall be brought towards the programme undertaken by the organization.
- xiii. To build up an extension interaction of the organization to study the issues of tribal and assimilate the database that to supplement the thought process of organization so that the organization can proceed in each programme through planned development action.

## Legal Status

PUSPAC owes its origin to the urge of some dedicated youth to mainstream welfare schemes for community development through institutional process of established an organization. The organization was established in 1994. Over the years, the organization has undergone functional and operational dynamism and has grown into a leading Voluntary Organization in Malkangiri District. The organization is registered under Societies Registration Act 1860 and has subsequently been registered under FCRA in April 2000 and registered for undertaking CSR activities and the Registration number is CSR00012323 on dated 30.07.2021. In due recognition of its social service the organization has been able to get exemption under U/s 80G and 12 A of Indian Income Tax Act since 2006/07. The organization is registered under GST REG-06 with Registration Number - 21AABTP1094J1ZO.

## STRUCTURE AND MANAGEMENT

Both the General Body and the Executive Body look after activities of the organization under different programmes. The General Body meets at least once in a year to deliberate on organizational matters and to aid & advise the Executive Committee. The Executive Body consists of 7 members. The Executive Body is responsible for working out various strategies so as to help the organization realize its vision and adhere to its mission.

PUSPAC's field operations are organized under different projects in their respective areas. It has three wings; 1. Programme, 2. Finance & 3. Administration. The **Programme Wing** is supported Project Coordinators, Programme manager, and Gender coordinator, CSP, CRP and PRP. The **Finance Wing** is managed by Accounts Officer and the **Administration Wing** is supported by Administrative Officer.

These wings work in coordination with Core Committee of the Organization comprising of The Chief functionary of the Organization, Programme Coordinator, Accounts Officer and Administrative Officer. Programme Coordinator is the Convener of Core Committee. PUSPAC has Finance Committee and Gender Committee. Treasurer and Accounts Officer are the members of the **Finance Committee**. Gender Coordinator and all the female member of the organization are the members of the **Gender Committee**. Gender Coordinator is the Convener of the Committee.

The General Body meets at least once in a year, the Executive Committee at least twice in a year, the Core Committee, Gender Committee and Finance Committee at least once twice in a year. The Project Coordinators meet once every month to plan & review the progress of the projects.

PUSPAC has developed a system & procedure for monitoring and assessment of the impacts of its initiatives through holding meetings of its staffs. Project-wise monthly meetings are organized attended by the responsibility holders of the project and the chief functionary of the organization to discuss the progress and prepare the monthly plans.

### **Present Operational Area List**

#### **Malkangiri Block Livelihood Project**

**Panchayats:08**

Padmagiri, Udupa, Markapalli, B.L.Pur, Jharapalli, Serpalli Pedakonda , Tamsa

**No. of Villages: 50**

#### **Mathili Block – Maa Gruha Project-**

**Panchayats: 14**

Bhandari pangam , Mecca Nayakguda, Chaulmendi Pangam, Ambaguda , Katapalli, Bhejaguda Nayakguda,Chedenga, Dhungiaput , ,Udulibeda Dalapatiguda, Kutunipalli ,

**No. of Villages: 150**

#### **Mathili Block (Maa Gruha/Arogya Plus)**

**Project-Panchayats: 6**

Mahupadar , Salimi Temurupalli,Kianga Kamarpalli, Kartanpalli

**No. of Villages: 80**

#### **Chitrakonda/Korakunda Block**

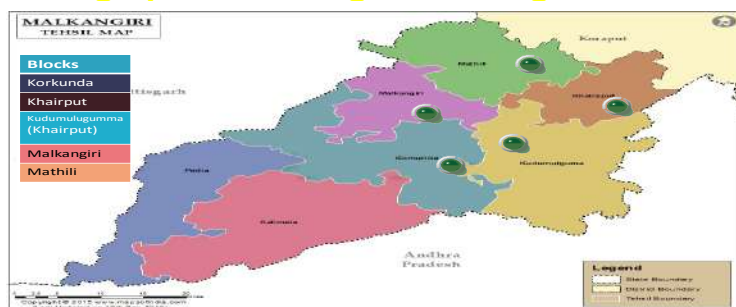
**PHC(N)/Maa Gruha Panchayats: 14**

Doraguda , Paparmetla, Nuaguda,Dhuliput Gunthawada , Papulur, Badapadar, Gajalmamudi Tunnel camp,Kapatuti, Kurmanoor Mariwada, Chitrakonda, Tumsapalli

**No. of Villages: 192**

## **OPERATIONAL AREA OF PUSPAC**

### **Geographical Coverage in Malkangiri district**



### **List of Present governing body members:-**

SN	Name of the members/ trustee	Designation	Address	Profession / Occupation	Qualification & Experience
1	Mr. Kishore Chandra Maharana	Chairman	Education Colony, N A C , Malkangiri. PIN - 764045	Retired Govt. Servant	B.A ( B Ed. )
2	Mrs. Pratima Panigrahi	Vice-Chairman	At - Sambayaguda. P O / Dist - Malkangiri. PIN - 764045	Social Work	+2 Arts
3	Basanta Kumar	Secretary	At – Mallikeswar Colony	Social Work	+3 Arts.

	Lenka		PO / Dist – Malkangiri PIN – 764045		(Hons.)
4	Swarnalata Mishra.	Treasurer	At - Samabayaguda P O / Dist – Malkangiri Pin – 764045	Social Work	+2 Arts
5	Ramesh Halba.	E. Member	At – Medical Colony PO / Dist - Malkangiri, PIN -764045	Social Work	+2 Arts.
6	Sakuntala Muduli	E. Member	At- RSC - 4, P O- Doraguda , Dist – Malkangiri. PIN – 764052	Social Work	+2 Arts with ANM
7	Dhabulu Khila	E. Member	At – K . Atalguda P O - Khairput Via - Baipariguda Dist - Malkangiri, PIN – 764043	Social Work	+2 Arts

## Project at a glance

### Primary Health Care

Public private partnership (PPP) has emerged as one of the important stages for health sector reform in Odisha. Initiatives have been taken by NHM and Health and Family welfare Dept. Govt. of Odisha to undertake different PPPs in meeting the growing needs for health services and of the national health programmes. With the Support of NHM, PUSPAC is managing a PHC(N) at Janbai Which is remote area of Malkangiri Dist.

### **PHC (N) Janbai Project:-**

The OPD is functioning 24x7 hours with alternative support of the Allopathic Doctor, Ayush Doctor and other staffs. Every day more than 32 patients from nearby villages are visiting to this hospital for treatment. We also refer serious patients to SDH, Chitrakonda. We conducted regular monthly review meeting of all the Project staffs.



World Sickle cell Day



Malaria Day Celebration



State Team Visit



State Team Review



Dist. Team Visit



KMC Services



## Achievement- April - 2023 to March - 2024

Month	General OPD	Ayush OPD	Institutional Delivery	Lab Test	KMC	NCD	Referral to CKD	HB Test	Malaria Test
April-23	1811	1151	30	954	4	9	15	149	256
May-23	2004	1265	26	1100	4	5	25	180	291
June-23	1831	1248	34	1094	8	10	11	180	285
July-23	1867	1145	32	1318	5	5	9	209	305
Aug-23	1992	1272	38	1327	7	2	21	207	445
Sept-23	2013	1099	39	1345	9	5	14	252	391
Oct-23	1567	1221	37	1048	9	3	10	202	278
Nov-23	1423	1034	34	1176	4	4	25	254	224
Dec-23	1471	1119	38	969	3	4	11	201	185
Jan-24	1512	1082	54	1148	5	3	26	225	162
Feb-24	1509	1063	46	962	9	4	10	221	168
Mar-24	1571	864	56	1051	9	6	30	209	193
<b>Total</b>	<b>20571</b>	<b>13563</b>	<b>464</b>	<b>13492</b>	<b>72</b>	<b>60</b>	<b>207</b>	<b>2489</b>	<b>3083</b>

### KMC Services Photographs-



KMC Services by ANM, PHC (N)



FPC / KMC Services by Staffs



FPC / KMC Service by Staffs

## SWASTHYA SAMPARK

### Introduction

Providing Comprehensive Primary Health Care (CPHC) services at the door steps is one of the important objectives of health care system delivery. To enable to do that all health sub centers are being transformed into Health Wellness Centre (HWC) under PHC (N) Janbai. The sub centre HWC is to serve as the first part of call to provide a range of primary health care services covering preventive, promotive, curative, rehabilitative and palliative care. It is also expected to focus on collective community level action to address public health issues and issues related social and environmental determinants of health by promoting social accountability and community feedback process for ensuring quality health care services as well as health promotion activity. Providing CPHC through HWC in difficult to reach areas still remains as challenge, needs all out efforts to address it. Community holds the key to the success of any programme. The Jan Arogya Samiti (JAS) is being formed at the SCHWC level to serve as institutional platform to promote community participation in its management, governance and ensuring accountability with respect to provision of health care services and amenities. Strengthening JAS and promoting community engagement in the functioning of HWC is one of the priority areas to ensure effective functioning of HWC.

To provide basic health care services to the local community in hard to reach and vulnerable areas, PUSPAC has been given the responsibility of running the PHC (N) Janbai in partnership mode. This PHC are mostly located in difficult area of the Malkangiri of Odisha state which needs special attention.

It is intended to accelerate community engagement in the functioning of HWC, strengthen community based platform, community level groups and thereby maximize delivery of health services and promote health and wellness among people.

**OBJECTIVE of the Programme:**

- Promote community support ecosystem for the effective functioning of SCHWC.
- Accelerate community involvement and action in the implementation of Health and Wellness activities.



GKS Meeting at Badapada



Sector Meeting



Yoga Class at Anganwadi Centre



**ACTIVITIES:**

**AROGYA PLUS (MHU)**

**Introduction**

To address the health issues of the vulnerable groups, especially the mobile population by providing preventive and curative health care services at their doorsteps on routine manner and thereby creating an enabling environment through social mobilization for improved health seeking behavior towards public health , one Mobile Health Unit (MHU) is running since Jan' 2015 in the remote areas of Mathili Block by PUSPAC with the support of National Health Mission (NHM) Its covers 88 villages 6 GP of Mathili Block. Near about 25,000 populations covered.

To bridge this gap in infrastructure, various interventions such as Mobile Health Units ( MHUs ) have been introduced.

In this background, it has been through for special strategy for delivery of a set of public health services in these inaccessible and conflict areas having strong presence of Left Wing Extremists (LWE

). This strategy is being conceptualized as **Project Arogya** – successfully implemented on pilot basis in Salimi of Mathili block under Malkangiri District.

### Objectives:

- To provide primary, preventive, curative and primitive health care services and referral health services to the people in the designated area.
- To co-ordinate the district local public health system to achieve MMR and IMR etc.
- Prevention and control of communicable diseases.
- To build up the capacities of the GKS and establish community level monitoring system for effective management of the programme.

### Achievement so far - 2023/24

Activities (Treatment)	General Public	School Health clinic
ARI	1334	15
Diarrhea	621	10
Skin disease	34880	115
Suspected Malaria	59	8
Other diseases	16140	524
Total no of cases treated	21637	661
No of cases treated (Adult Male)	6443	
No of cases treated (Adult Female)	9080	
No of cases treated (Below 18 years)	6114	
No of cases referred	119	
No of fever case attended	60	
No of them diagnosed positive and treatment	60	
RDK test done( for no of cases)	60	
No of cases treated	7	
No of TB suspected cases and referred	10	
No of cataract cases identified and referred	4	
No of Leprosy cases detected and referred	1	
No of Cases mobilized for male sterilization	7	
No of Cases mobilized for female sterilization	36	
School health clinic	69	
No of tagged villages	69	
No of treatment point	69	
No of ANC cases given TT/IFA	628	
No of PNC cases attended	544	
No of Delivery cases transport through MHU	119	
Health Education session conducted in no of villages	110	87



School Visit



A W C visit by team



Mosquito Net demonstration





**School Programm by Arogya**



**Child Referral to NRC**



**School level health camp**



**Village health camp**



**A N C Mother check up**



**Health Check up camp**

## **Maa Gruha (Maternity Waiting Home)**

**Back ground:** Geographical barrier and Lack of communication hinders transportation of expectant Mothers to hospital in the last stage of labour or in emergency. Suitable place & cost factors involved in staying outside before delivery is also not up to their reach because of their poor economic status. So, in spite of provision given under JSY, institutional delivery is not reported to have increased. These problems can be approached through establishing Maa Gruha (Maternity Waiting Home) especially for people living in most difficult pockets. In this context PUSPAC got a chance for implementation of Maa Gruha project in Mathili Block and Chitrakonda Block under Malkangiri Dist. with the funding support of NHM, Malkangiri.

### **Objectives:**

- To establish alternative support infrastructure for addressing communication problems in difficult and inaccessible pockets for ensuring institutional delivery.
- To increase institutional delivery in the difficult and inaccessible pockets ultimately minimizing maternal & newborn mortality & morbidity.
- Maa Gruha it is a temporary home for expectant mothers where they can wait for safe delivery preferably 7 to 10 days before EDD. On onset of labour, they are to be shifted to nearby to nearby health facility having at least BeMOC facilities for delivery. No post-partum cases will be allowed to stay at this Home. It was located within campus of Mathili CHC and chitrakonda CHC.

### **Major activities-**

- Community mobilization through village meeting and stake holder meeting
- Counseling to pregnant mothers about safe delivery, immunization, family planning, health, Nutrition & sanitation etc.
- Free transportation facility for pregnant mother.
- Regular health check-up.
- Health education sessions through IPC & Audiovisual aids.
- Act as client friendly environment & support.
- Submission of monthly & quarterly report in time to time.
- Attend VHND, Immunization camp, Review Meeting and sector meeting.
- Home Visit by staffs

## Key Deliverables:

- Under observation of pregnant mother before EDD.
- Ensure 100% institutional delivery of cases of refers to Maa Gruha.
- Minimization of unsafe & Home delivery in the project area.

## Achievement so far – MWH - Mathili

SN	Month	No of PW Admitted	Category			Institutional Delivery			Target Area	Non Target Area	Avarage days stay
			ST	SC	Others	ST	SC	Others			
1	April-23	36	28	5	3	18	5	2	33	3	14.33
2	May-23	30	23	5	2	22	4	1	25	4	14.26
3	June-23	27	22	2	3	30	1	2	25	2	15.13
4	July-23	36	29	3	4	27	4	3	33	3	12.00
5	Aug-23	33	28	4	1	25	4	3	29	4	11.61
6	Sept-23	40	32	6	2	28	3	1	37	3	11.63
7	Oct-23	34	28	5	1	32	5	1	28	5	12.10
8	Nov-23	27	20	5	2	23	3	2	24	3	11.96
9	Dec-23	48	37	5	6	37	4	4	43	5	14.29
10	Jan-24	37	26	9	2	28	11	2	34	3	8.97
11	Feb-24	54	42	7	5	35	7	3	46	8	14.10
12	Mar-24	43	30	7	6	24	7	6	35	7	12.61
	<b>Total</b>	<b>445</b>	<b>345</b>	<b>63</b>	<b>37</b>	<b>329</b>	<b>58</b>	<b>30</b>	<b>392</b>	<b>50</b>	<b>12.75</b>

## Achievement so far - MWH - Chitrakonda

SN	Month	No of PW Admitted	Category			Institutional Delivery			Target Area	Non Target Area	Avarage days stay
			ST	SC	Others	ST	SC	Others			
1	April-23	26	22	3	1	23	2	0	26	0	8.63
2	May-23	26	22	4	0	25	2	0	26	0	6.77
3	June-23	26	16	7	3	14	7	2	25	1	8.57
4	July-23	33	28	5	0	27	4	1	28	3	8.16
5	Aug-23	31	22	7	2	17	5	0	27	3	10.32
6	Sept-23	27	20	5	0	23	7	0	23	2	9.77
7	Oct-23	30	28	2	0	25	2	0	27	2	9.26
8	Nov-23	24	18	3	3	18	3	3	21	3	8.10
9	Dec-23	35	30	1	4	21	2	3	34	0	9.74
10	Jan-24	24	19	4	1	19	5	2	20	2	8.87
11	Feb-24	31	20	9	2	18	9	2	30	0	8.41
12	Mar-24	32	25	2	5	21	2	4	30	0	7.55
	<b>Total</b>	<b>345</b>	<b>272</b>	<b>52</b>	<b>21</b>	<b>251</b>	<b>50</b>	<b>17</b>	<b>317</b>	<b>16</b>	<b>8.68</b>



Mothers meeting



StateTeam Visit

PWs Yoga Class



CDMO visit to Maa Gruha

ADMO visit to Maa Gruha



NGO Secretary visit to Maa Gruha

## Ambulance Services Project-

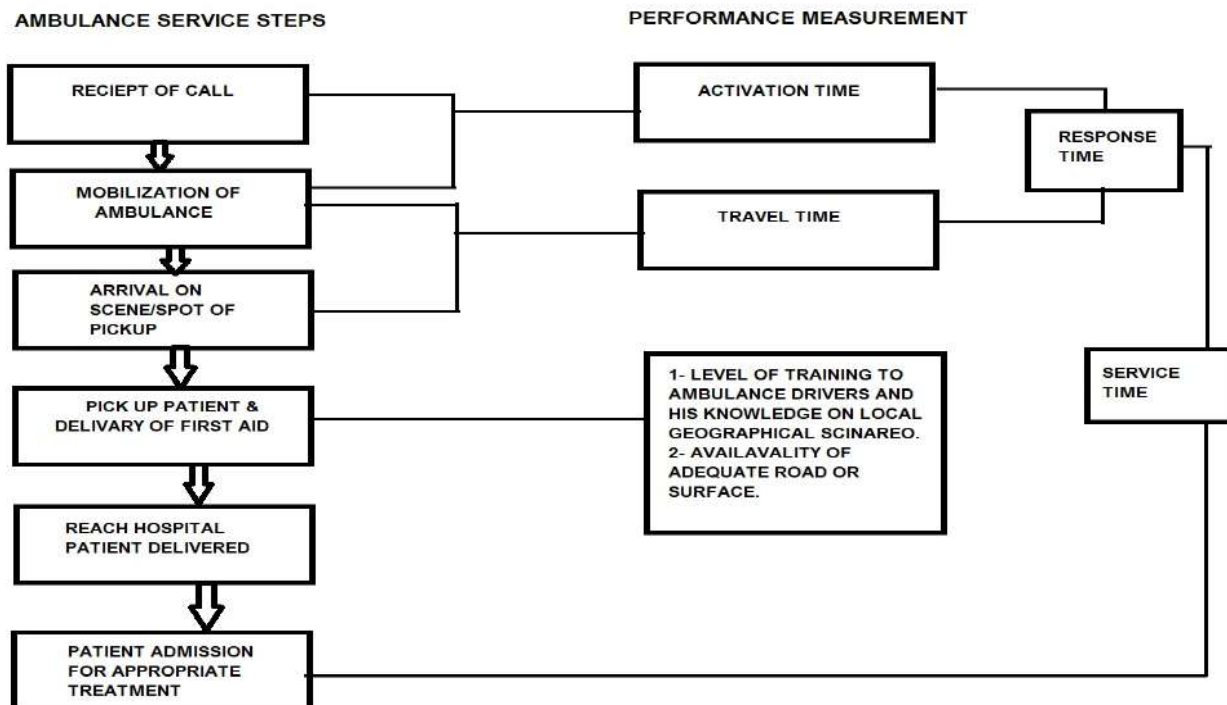
PUSPAC organization mobilized a CSR funding name is **SBI Life insurance Company Ltd., Bhubaneswar** those were given support for vehicle for **Ambulance Services**.

**Ambulance Service-** Ambulance for providing treatment of life-threatening medical emergencies to the remote location of Chitrakonda Block of Malkangiri district in Odisha. Ambulance is the key instrument that reduce block in health service chain.

### A. Project Objectives:

Objectives	Activities
Health care Availability in the interior locations	Ambulance service within the block of Malkangiri district of Odisha for transportation of patients to health care institution.
Reduction of pregnancy linked Mortalities	Provide transportation to maternity expectants to health care in right time to reduce crude mortality of children ( new born)
Community Development	Facilitation of Ambulance as a health care platform at community level and generating awareness at community levels

## AMBULANCE SERVICE AND PERFORMANCE INDICATORS



### MECHANISED DSR“PROMOTION OF IMPROVED PACKAGE OF PRACTICES”

100 nos. Farmer’s cultivated “Mechanized Direct Seeded Rice (DSR)” under the state sector sub scheme “Promotion of improved package of practices” during the year 2023 – 24 in 2 Gram Panchayat of Malkangiri Block such as; Markapalli and B. L. Pur G P in Malkangiri Dist. There is 100 Hectors of Land cultivated in 100 farmer’s area during Kharif season. The Programme will be implemented in a cluster approach in 2 GPs. This area of patch mostly accessible to the road and at the strategic location. It is visible to a large section of farmers. All 100 nos. of farmers cultivated 1 Hecter each in their suitable land. All farmers given willingness to us are giving suitable land conditions for Mechanized DSR under this programme. All farmers applied in a prescribed format for availing assistance under the scheme with having Farmer’s ID, Aadhar No, Bank Account Details and Contract Number. Concern Krushak Sathis were supported the agency and programme with engaged in Mechanized DSR. Mechanized DSR is less labour intensive and free of drudgery making it more appealing to young people and female farmers. It also opens up new job opportunity. This highlight the needs for a comprehensive and Scientifics strategy to make direct seeded rice ecological and socio economical viable.

Benefits of Mechanized D S R: it has certain benefits including reduce labour requirements, water requirement and labour intensivement. Early crop maturity, cheap production cost, improves soil physical condition for succeeding crops reduce methane emission and greater options for being the best in various cropping systems.

#### TRAINING ON MECHANISED DSR

Date	Place	No of Participants	Resource person	Village covered
08.11.23	Podabhata	46	Firoj Ku Bidika, AAO	Podabhata,Bhatlaguda
09.11.23	Amkund	46	Firoj Ku Bidika, AAO	Amkund, Ranginigida, Butiguda Batriatal, Sindhibhata
10.11.23	Kamalapadar Colony	44	Firoj Ku Bidika, AAO	Kamalapadar colony,



				Podaghat Colony ,Podaghat
11.11.23	Ganjeibahal	45	Firoj Ku Bidika, AAO	Ganjaibahal, Kendukund, Patraguda, B.L.Pur
13.11.23	Ranginiguda	48	Firoj Ku Bidika, AAO	Ranginiguda, B.L.Pur, Khadikajodi

### Beneficiaries covered in Target Areas

SN	Village	G.P	No of Farmers	Total Land ( In Hector)	Production in Quintal (Per Acre)
1	Amkund	B.L.Pur	8	8 Hts	20
2	B.L.Pur	B.L.Pur	10	10 Hts	19
3	Ganjaibahal	B.L.Pur	11	11 Hts	22
4	Kendukund	B.L.Pur	12	12 Hts	21
5	Ranginiguda	B.L.Pur	15	15 Hts	19
6	Sindhibhata	B.L.Pur	3	3 Hts	19
7	Khadikajodi	B.L.Pur	1	1 Hts	18
8	Kamalapadar	Markapalli	12	12 Hts	19
9	Markapalli	Markapalli	7	7 Hts	20
10	Podabhata	Markapalli	11	11 Hts	20
11	Takanbhata	Markapalli	8	8 Hts	21
12	Thapaguda	Markapalli	2	2 Hts	20
	<b>Total</b>	<b>2</b>	<b>100</b>	<b>100 Hectors</b>	

For Mechanized D S R project the Chief Dist. Agriculture Officer team in collaboration with PUSPAC NGO introduce Mechanized Direct Seeded Rice ( DSR ) in Kharif across in 2 GPs of Malkangiri Block of Malkangiri Dist on a cluster approach for mass awareness and adoption. This was followed by Mechanized sowing of non – rice corps in Rabi season along with high yielding varieties and hybrids and best management practices.

Service provider's progressive farmers women and the youth were trained under the project on technological and business management aspects.

Best on CDAO,MKG experience in scaling such technologies through service providers. The project assessed the capacity development needs and engaged with him on various agricultural extension activities such as hands on training on the seeding machine field day exposure visit and public harvests.

### Advantage:

1. Water saving because the first irrigation (apart from the pre showing rain) and DSR is necessary only 21days after showing.
2. Less requirement of labour.
3. Reduction in methane emission and global warming potentials.
4. Little disturbance to soil structure.
5. Enhanced section production

### Photo galary







### **Monthly Staffs Review:**

Implementation of different project and conducting all activities without proper review does not mean sense. In order to streamline different activities and to know the outcome of all such project and what are the bottle necks if any etc. We conducted regularly monthly review meeting of all project staffs where each workers activities of the last month was examined minutely and after analysis necessary guidance was given to prepare the next month action plan. The review meeting provided ample opportunity to everyone to learn from each ones positive or negative. The minute is being recorded in the concern project review register.



## List of Staffs -2023/24

SN	Name of the Staff	Address	Designation	Qualification	Project
1	Basanta Ku Lenka	Malkangiri	Programme Manager	+3 Arts (Hons)	Central
2	Satyabrata Dey	Malkangiri	Account Officer	B.Com with Tally	Central
3	Dr. Asish Kumar Giri	Jasipur , Mayurbhanj	Ayush Doctor ( M O )	BAMS,PGDCA	Arogya Plus
4	Sanjay Kumar Sahoo	Kianga	Pharmacist	D Pharma	Arogya Plus
5	Mrs. Manjula Gadaba	Balimela	Health worker (F)	+2 Arts with ANM	Arogya Plus
6	Jagannath Bhumia	Kianga	Attendant	8 <sup>th</sup> pass	Arogya Plus
7	Mrs.Sunita Mohanty	Mathili	ANM cum Coordinator	+2 Arts with ANM	Maa Gruha, Mathili
8	Mrs.Padmini Madkami	Tangguda	L H A	+3 Science	Maa Gruha
9	Maheswari Pujari	Mathili	L H A	+3 Science	Maa Gruha
10	Rashmita Machha	Mathili	L H A	+2 Arts with GNM	Maa Gruha
11	Lachhamani Nayak	Mathili	L H A	+2 Arts with GNM	Maa Gruha
12	Mrs.Sanjukta Pal	Khairput	Cook cum Attendant	10 <sup>th</sup>	Maa Gruha
13	Mrs. Surama Solman	Chittrakonda	ANM cum Coordinator	+2 Arts with ANM	Maa Gruha, Chittrakonda
14	Sakuntala Muduli	RSC - 4, CKD	ANM cum Coordinator	+2 Arts with ANM	Maa Gruha
15	Kabita Patra	Khairput	L H A	+3 Arts	Maa Gruha
16	Tulusa Khara	Badapadar	L H A	+3 Arts	Maa Gruha
17	Ranjita Dora	RSC – 4,CKD	L H A	+2 Arts with GNM	
18	Mrs. Daimati Gouda	Chittrakonda	Cook cum Attendant	8 <sup>th</sup>	Maa Gruha
19	Dr.Praveen ku Sahu, Dr.Abhijit Satapathy, Dr.Prem Chand Pradhan	Chittrakonda	Allopathic Medical officer	MBBS	PHC (N) Janbai
20	Dr. Dillip Ku Panda	Bhubaneswar	Ayush Doctor	BAMS	PHC (N) Janbai
21	Bandita Sahoo	Malkangiri	Staff Nurse	+2 Sci. with GNM	PHC (N) Janbai
22	Swarna Kumari Panda	Balimela	ANM	ANM	PHC (N) Janbai
23	Dibya Ranjan Sahoo	Chittrakonda	Pharmacist	D. Pharma	PHC (N) Janbai
24	Kora Immanuel	Kalimela	Lab Technician	DMLT,PGDCA	PHC (N) Janbai
25	Debendra Kumar Rout	K Gumma	Project Coordinator	Post Graduate in Sociology	Swasthya Sampark
26	Rabi Khara	Badapada	Attendant cum Sweeper	9 <sup>th</sup> pass	PHC (N) Janbai

## CONCLUSION

**PUSPAC** has broadened and deepened in its engagement with the partner community and the activities of the organization during the year provide a testimony. Emphasis on the health and livelihood as well on governance has been the crux of the organizations programmatic interventions. The strategic interventions has been following and nurturing people's organizations entitlement education and streamlining government schemes with rights based approach.

In the coming year the organization plans for further strengthening of its engagement .Peoples and child education, Health for all ,facilitation of securing entitlement, creation of livelihood options and opportunity will be focus of the organization.

## **FUTURE PLAN By 2030**

- Ensure child education for eligible children of operational areas.
- Ensure primary mother and child health care for all in operational areas.
- Ensure food security and availability in all villages of operational areas.
- Ensure sustainable livelihood in 100 villages of operational areas.
- No starvation and malaria death in our operational areas.
- Ensure properly rehabilitation for disability persons.
- Ensure reduce 100 % IMR and MMR.
- Ensure 100% Institutional deliveries.
- Ensure higher yields and increased cropping intensity.
- Ensure for using advances mechanization for production.
- Ensure better involve primary care in each patient's health. Greater focus on patient's behavior.
- Disease identification, treatment planning, and overall patient care.

## **LEGAL ENTITY**

<b>DATE OF FORMATION-</b>	<b>24-10-1994</b>
<b>DATE OF REGISTRATION &amp; NUMBER</b>	754 / 94-95 dtd-9-11-1994 (REGD. Under the Societies Registration Act of XXI of 1860)
<b>FCRA NUMBER-</b>	104830037 on dated- 6-3-2000
<b>PAN Number</b>	AABTP1094J
<b>TAN Number-</b>	BBNP02384E
<b>12A(2) of the I.T ACT 1961</b>	<b>AABTP1094JE20214/28.05.2021</b>
<b>Regd. U/S 80G of the I.T ACT 1961</b>	<b>AABTP1094JF20214/28.05.2021</b>
<b>Niti Aayog Registration Number</b>	OR/2018/0218404
<b>CSR Registration Number</b>	<b>CSR00012323</b>
<b>GST Number</b>	<b>21AABTP1094JIZO</b>

**OUR DONORS:** National Health Mission (NHM), Chief Dist. Agriculture Officer, Malkangiri,

SBI Life Insurance (CSR Funding)

We gratefully acknowledge their support and confidence in us.

## **STATUTORY INFORMATION**

1. **Our Auditor:** Mr. Jayesh Rathod  
Jayesh Rathod & co., Chartered Accountants  
Jamal street , Main Road, Jeypore, Koraput, Odisha.
2. **Our Bankers:** SBI, Pangam & Malkangiri, ICICI Malkangiri, Union Bank of India, Malkangiri. SBI, Main Branch, New Delhi (FCRA Account)
3. **Internal Auditor** Mr. Bhagaban Rout, (Near Glocal Hospital) Jeypore,

**Secretary, PUSPAC,  
MALKANGIRI.  
Odisha, India**

**The End**