

Study on Assessment of Annual Online Indent of NHM
Specific Programmatic Medicines on e-Aushadhi Web
Portal

By

Swati Gupta

*Dissertation submitted for the partial fulfillment of the
MBA Hospital and Health Management*

Academic year, 2016-2018



The IIHMR University, Jaipur

1, Prabhu Dayal Marg, Sanganer, Airport
Jaipur 302029, Rajasthan
Ph: 0141 3924700, Fax: 3924738
Website: www.iihmr.edu.in

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TO WHOMSOEVER MAY CONCERN

This is to certify that **Ms. Swati Gupta** student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at **National Health Mission** from 5th February to 5th May, 2018.

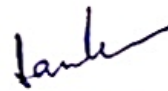
The Candidate has successfully carried out the study designated to her during internship training and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.




Dr. Ashok Kaushik
Dean, Academics and Student Affairs
The IIHMR University, Jaipur



Dr. Sameer Phadnis
Professor
The IIHMR University, Jaipur



Dr. P. V. Dave

Additional Director(Health)

NO : Drugs/FW/NHM/Dissertation Certificate/
2018-19

Commissionerate of Health Medical Services,
Medical Education & Research,
Dr. Jivraj Mehta Bhavan, Block No.5, 2nd Floor,
Gandhinagar – 382010

Ph. no. : (079) 23257948 / Fax no. : (079) 23254544

E-mail : pvdave1@rediffmail.com

Date : /05/2018

Certificate of Completion of Internship/Dissertation

The certificate is awarded to

Ms. Swati Gupta

In recognition of having successfully completed her
Internship in the department of
Drug Supply and Monitoring

She has successfully completed her Project on

**A study on Assessment of Annual Online Indent of NHM specific
Programmatic Medicines on e- Aushadhi Web Portal**

Duration - 5th February to 5th May, 2018

Organization – National Health Mission, Gujarat

She comes across as a committed, sincere & diligent person who has a
strong drive and zeal for learning



We wish her all the best for future endeavors

(Dr. P. V. Dave)

Additional Director,
Health Medical Services And Medical
Education (Health Section)
Gandhinagar

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that all ethical issues have been considered while collecting data for my dissertation titled **“A study on Assessment of Annual Online Indent of NHM Programmatic Medicines on e- Aushadhi Web Portal.”**

Swati Gupta

Signature

ACKNOWLEDGEMENT

The success and final outcome of this project required a lot of guidance and assistance from many people and I am using this opportunity to express my gratitude to everyone who supported me throughout the course of this project. I am thankful for their aspiring guidance, invaluable constructive, criticism and advice during the project work. I am sincerely grateful to them for sharing their truthful and illuminating views on a number of issues related to the project.

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I would also like to thank my Institutional mentor **Dr. Sameer Phadnis** for providing such an opportunity to do the project and always supporting & helping in successful of my project.

Ms. Swati Gupta

ABBREVIATIONS

CHC - Community Health Centre

PHC - Primary Health Centre

UHC - Urban Health Centre

SHP - School Health Programme

CMSO - Central Medical Stores Organisation

DLIMS – Drugs & Logistics Information Management System

TAB - Tablet

INJ - Injection

CDHO - Chief District Health Officer

ADHO - Additional District Health Officer

DH - District Hospital

SDH – Sub- District Hospital

IT – Information Technology

DDO – Direct Demanding Officer

RC – Rate Contract

IFA - Iron Folic Acid

NRHM - National Rural Health Mission

SC - Sub Centre

NUHM - National Urban Health Mission

GMSCCL – Gujarat Medical Services Corporation Limited

AMC – Ahmedabad Municipal Corporation

BMC – Bhavnagar Municipal Corporation

RMC – Rajkot Municipal Corporation

JMC – Jamnagar Municipal Corporation

JuMC – Junagarh Municipal Corporation

VMC – Valsad Municipal Corporation

RWH – Regional Ware House

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AIM

A study on Assessment of Annual Online Indent of NHM Programmatic Medicines on e- Aushadhi Web Portal.

OBJECTIVES

1. To understand the steps of indenting medicines on e- Aushadhi web portal.
2. To assess the knowledge level of store pharmacists regarding online indent on e- Aushadhi web portal.
3. To identify the issues regarding online indenting of programmatic medicines.
4. To suggest measures to improve the appropriate indenting of medicines on e- Aushadhi web portal.

LITERATURE REVIEW

A web-based supply chain management application e-Aushadhi has been launched by Jammu and Kashmir government at Jammu and Kashmir Medical Supplies Corporation Ltd (JKMSCL) office. The application has been prepared by Centre for Development of Advanced Computing (C-DAC) Noida, Ministry of Commerce and Information Technology, Government of India. e-Aushadhi shall help JKMSCL to improve drug warehousing and supply chain management in all government hospitals in the state. The application will keep a check on purchases, inventory management and distribution of various drugs and surgical items to various regional and district drug warehouses, district hospitals, primary health centres (PHCs) and community health centres (CHCs) .⁽¹⁾

The Uttarakhand health department will introduce a web-based supply chain management application, e-Aushadhi to improve the stock and supply of drugs and surgical equipment in the health institutions of the state. The online application, developed by the Centre for Development of Advanced Computing (C-DAC), will monitor purchase, inventory management and distribution of

various drugs, and surgical items to various drug warehouses of the state, district hospitals, primary health centres and community health centers. The software will ensure that the drug reaches the ultimate beneficiary with uncompromised quality and will also improve efficiency and effectiveness of procurement and distribution of drugs besides ensuring transparency in supply chain. The Union ministry of health and family welfare has released Rs 15 crore to the state government for procuring generic medicines for state-run healthcare facilities in the current fiscal. The software will bring transparency in supply chain management and support the state government in cutting cost of branded medicines. The government has asked the authorities of C-DAC to complete all the formalities as early as possible so that this system is adopted in the state for overall benefit of the people. ⁽²⁾

Supply chain automation of the drug management system in Maharashtra Public Health Department leads to 20% reduction in cost of medicine, and provides an accurate view of state of drugs warehouse and inventories across the state. Public Health Department is the nodal department for administration, decision and policy making related to public health of Maharashtra. PHD's outlined objective is to strengthen the state healthcare at primary, secondary and tertiary levels by providing greater levels of access to quality healthcare, particularly in the under-served and backward regions. The department implements various national level health programs in the state, provides trainings to its medical and non-medical staff and is responsible for improving knowledge, attitude and behavior of the community by giving health education. The organization focuses on providing an array of citizen centric services across the State with its various policies, legislation and administration. The department has formulated and executed various health programs in line with National Health Policy enabling a better administration, better health, better care, and better value for all. The department along with implementing various programs and schemes focuses on strengthening its internal setup and

enhancing its Government capabilities by adopting various e-governance practices. The drug management system in the state of Maharashtra witnessed the need to automate its supply chain in order to have better stock efficiency, improve stock visibility and gain control over drug distribution in the state. The state government realized that the computerization of drug warehouse could reap added benefits like reduction in the invoice processing cost, increasing in the supply chain capacity by reducing manual intervention to minimal levels, improvement in the working capital management and real time use of business intelligence for scaled efficiencies. ⁽³⁾

METHODOLOGY

Study Site: National Health Mission, Gujarat

Study design: Cross- Sectional Descriptive study

Study time: February 5th 2018 to May 5th 2018

Sample size: 41 (33 district pharmacists and 8 Municipal Corporation Pharmacists).

Sampling technique: All the Pharmacists that are involved in annual programmatic indent

Sample selection- The inclusion criteria will be the pharmacists that are available during the annual indent of programmatic medicines. The exclusion criteria will be those pharmacists who are not involved in online indenting of annual programmatic medicines.

Data collection method- Primary data will be collected from the pharmacists by interviewing them through close ended questionnaire and telephonic interviews. Secondary data will be collected by interacting with them and past records.

Department: Drug Supply and Monitoring

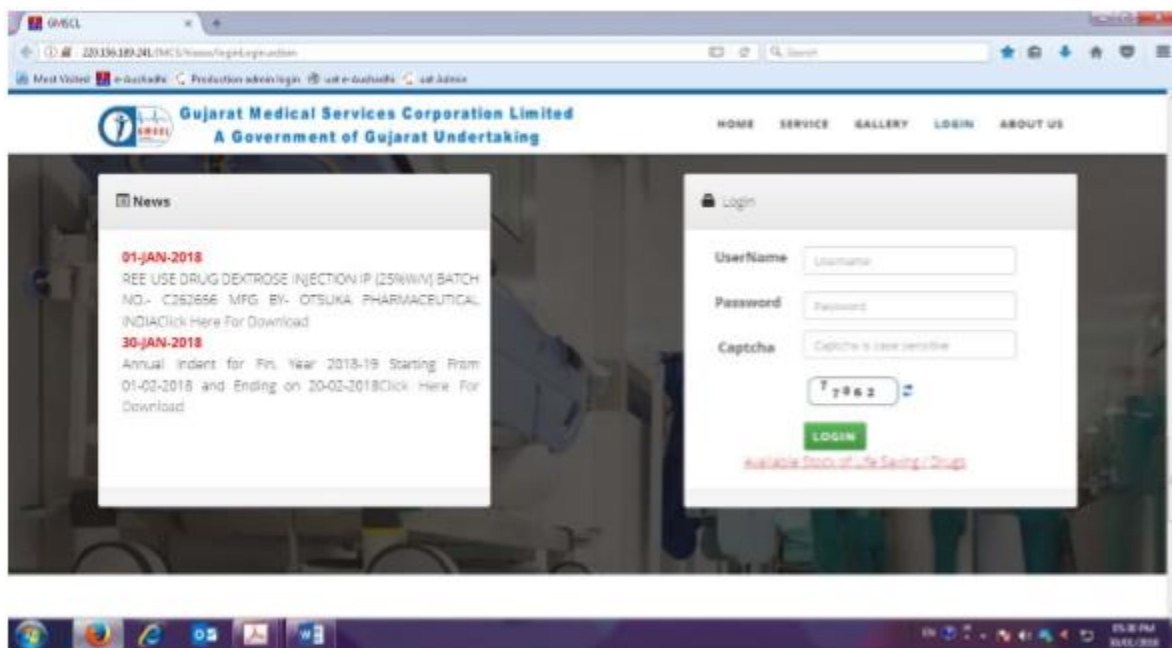
Data Collection Tool: Structured Quantitative Questionnaire

Data Analysis- Data will be analysed by Microsoft Excel

STEPS OF INDENTING MEDICINES ON E- AUSHADHI WEB PORTAL

Login Form:

Step 1:- Enter 'User Name' and 'Password', and then click on 'Login' button.
(Fig: 1.5)



Annual Purchase Demand Desk:

Step2:- Go to Path: Services->Inventory Mgmt->Demand-> Annual Purchase Demand Desk (Fig: 1.6)



Step 3:- Check your store name and other details here, and Press Go Button
(Fig: 1.7)

Annual Purchase Demand

Your Store Name → *Demand Period: 2015 - 2016
*Store Name: 1901 General Hospital Porbandar
Notification No.: 2015030010
Budget Available(Y): 0

Demand to Store → *To Store Name: Jambhagar RWH
Last Submission Date: 03-Dec-2015

Request Date → Req. Date: 03-Dec-2015

Last Date to Submit

Go (Click here)

Click here

Legend:
 * Mandatory Fields, Please click the lock icon to unlock the item and Enter the Qty.
 Searched Drug, Selected Drug, Visited Drug
 Modify, Cancel, View

Step 4:- After Click on go button you will be able to see below page (Fig: 1.8)

Annual Purchase Demand

Search using Name or code of drug

Click here to enter Qty

Selected Drug Name → Anesthetics

Enter only total number of drug (Not box/strips)

Table:

#	Code	Name	Total Available Stock(s) : 0	Req. Qty	State Program	Tot. Qty	App
2000		Supracaine HCL (For spinal Anesthesia) 0.5% w/v, 1ml Amp. (To be supplied in pre sterile pack)	0	0	0	0.00	
2010		Supracaine HCL (For spinal Anesthesia) 0.5% w/v, 1ml Amp. (To be supplied in pre sterile pack), 20ml Vial	0	0	0	0.00	
2250		Supracaine Hydrochloride in Cerebrospinal Injection 5mg + 0.5mg per ml 4 ml Amp	0	0	0	0.00	
2260		Clonidine 2mg Vial	0	0	0	0.00	
3240		Clonidine 240mg, 0.5mg	0	0	0	0.00	
2190		Glycopyrrholate 0.2mg/ml, 1ml Amp.	0	0	0	0.00	

Remarks

Draft Save **Final Save** **Clear**

After Entering drugs details, click on Draft Save till the details are not final. You cannot change details after doing "Final Save".

e-Aushadhi | Gujarat Medical Services Corporation

Monday 06-Jul-2015 12:21

Annual Purchase Demand

*Demand Period: 2015 - 2016
 *Store Name: 0317-Burda
 Verification No.: 20150600001

Buy Dates: 06-Jul-2015
 **To Store Name: Adarsh BHSE
 Last Submission Date: 01-Jul-2015

Selected Group Name : Anaesthetics

Search Drug ID:

#	Code	Name	B/L City	Area Control Society	Order NB	Counterpart Index
Searched Name : Anaesthetics						
Total Available Items(s) > 0			Total Searched Items(s) > 0			
1	3800	Propofol 1%, 2 or general Anesthetic B/L, Sterile, amp Amp. (To be supplied in pre sterile pack)	0	31	NA	NA
2	2010	Propofol 1%, 2 or general Anesthetic B/L, Sterile, (To be supplied in pre sterile pack, 20ml Vial)	0	31	NA	NA
3	3368	Ropivacaine Hydrochloride by Dextrose Injection Amp + B/Bags and 4 ml Amp.	0	31	NA	NA
4	2260	Diazepam 2mg/ml	0	31	NA	NA
5	2249	Oxycodone 2MGML/BURB	0	31	NA	NA
6	2155	Morphine 0.2mg/ml, 1ml Amp.	0	31	NA	NA

Remarks:

[Draft Item] [Final Item] [Clear] [Back]

* Mandatory Fields , Please click the lock icon to unlock the item and Enter the Qty.
 🔒 Searched Drug 🔍 Selected Drug 🚫 Visited Drug
 ✎ Modify ✖ Cancel 👁 View

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Step2: Select appropriate Drug and enter demand quantity as per the program

Annual Demand Compilation:

Path: Services->Inventory Mgmt->Demand-> Annual Demand Compilation
(Fig: 1.10)

e-Aushadhi Gujarat Medical Services Corporation

You are logged in as C261 Admin

Monday 06-Jul-2015 12:24

Annual Demand Compilation

*Demand Period: 2015 - 2016 *Compilation Date: 06-Jul-2015

*Store Name: 0117-Buda *To Store Name: Adarsh Bhau

Notification No.: 2015070001 Last Submission Date: 01-Jul-2015

---Received : Pending Demand---

Store Name	Request No.	Request Date	Total No. of Drugs (demanded)	Total No. of Drugs (Not Demanded)
No Records Found				

Compile

Clear Back

** Mandatory Fields, Please click the lock icon to unlock the item and Enter the QTY.*

● Searched Drug ● Selected Drug ● Visited Drug

● Modify, ● Cancel, ● View

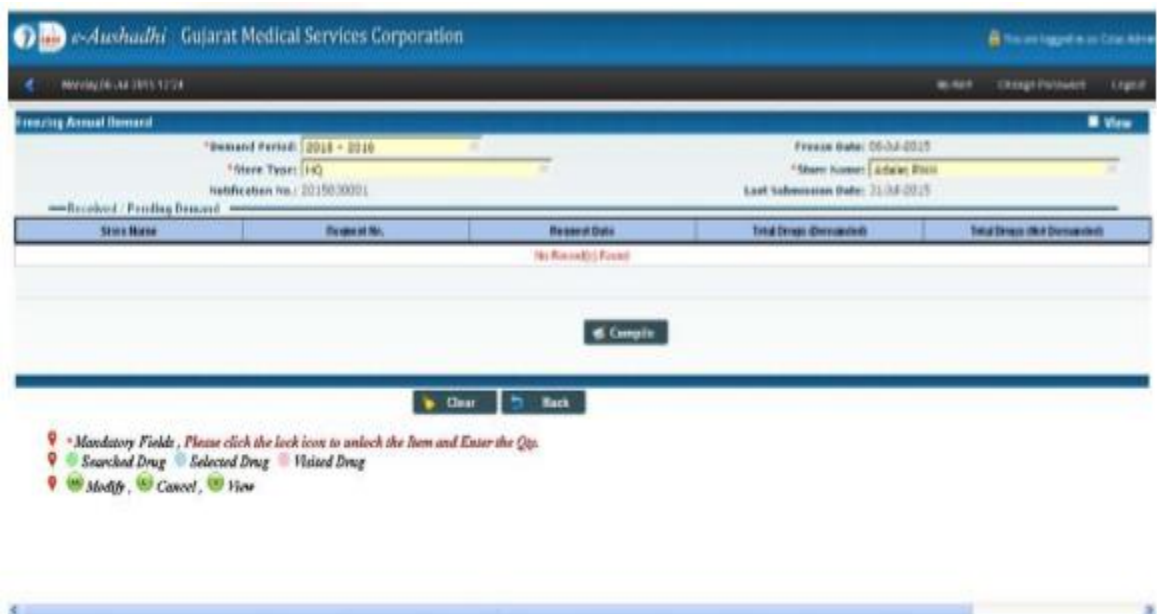
Step1: Select an appropriate warehouse of demanded drugs and then click on compile button. Details will be populated as per the warehouse hierarchy.

Step2: Click on save button after completion of the compilation process.

Freezing of Annual Demand:

This process is used to compile by the Head Quarter or role based user for final submission of demanded quantity by the RWH. Drugs are purchased by Headquarter depending on this demand.

Path: Services->Inventory Mgmt->Demand-> Freezing of Annual Demand (Fig: 1.11)



e-Aushadhi - Gujarat Medical Services Corporation

Home | Change Password | Logout

Viewing Annual Demand

Demand Period: 2018 - 2019 Freeze Date: 05-Jul-2015

Store Type: HQ Store Name: Adarsh Bhola

Notification No.: 2015030001 Last Submission Date: 21-Jul-2015

Requested / Pending Demand

Store Name	Region Id No.	Request Date	Total Drugs (Requested)	Total Drugs (Not Demanded)
No Record(s) Found				

Compile

Clear Back

* Mandatory Fields, Please click the lock icon to unlock the item and Enter the QTY.
 Searched Drug Selected Drug Waived Drug
 Modify Cancel View

Step1: Select an appropriate warehouse of demanded drugs and then click on compile button. Details will be populated as per the warehouse hierarchy.

Step2: Click on save button after completion of the process.

DATA ANALYSIS

Table 1.4: This table is showing the distribution according to the respondents for e- Aushadhi id/ password:

Response	Frequency	Percentage (%)
Yes	28	75.68
No	9	24.32
Total	37	100

PHARMACISTS HAVING ID/ PASSWORDS OF e- AUSHADHI

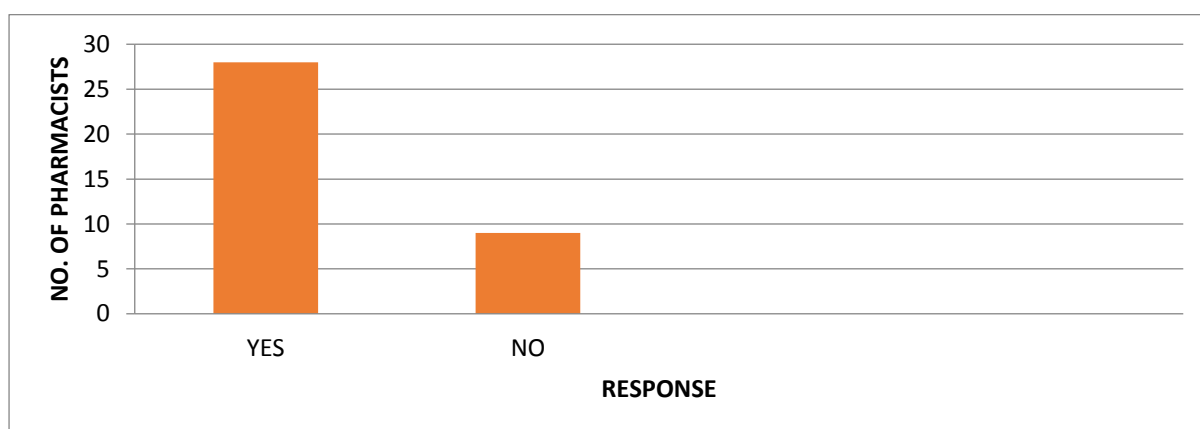


Fig: 1.12

Table 1.5: This table is showing the distribution according to the respondents for ease on updating demand on e- Aushadhi:

Response	Frequency	Percentage (%)
Yes	35	94.60
No	2	5.40
Total	37	100

CONVINIENCE IN e- AUSHADHI DEMAND UPDATE

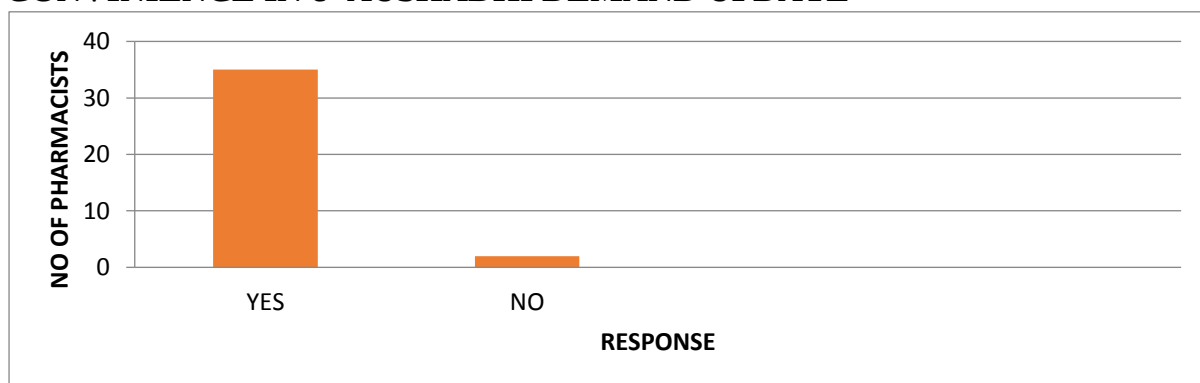


Fig: 1.13

Table 1.6: This table is showing the distribution according to the respondents for opening the online indent for 10 days:

Response	Frequency	Percentage (%)
Yes	34	91.89
No	3	8.11
Total	37	100

NO. OF DAYS SUFFICIENT FOR OPENING INDENT

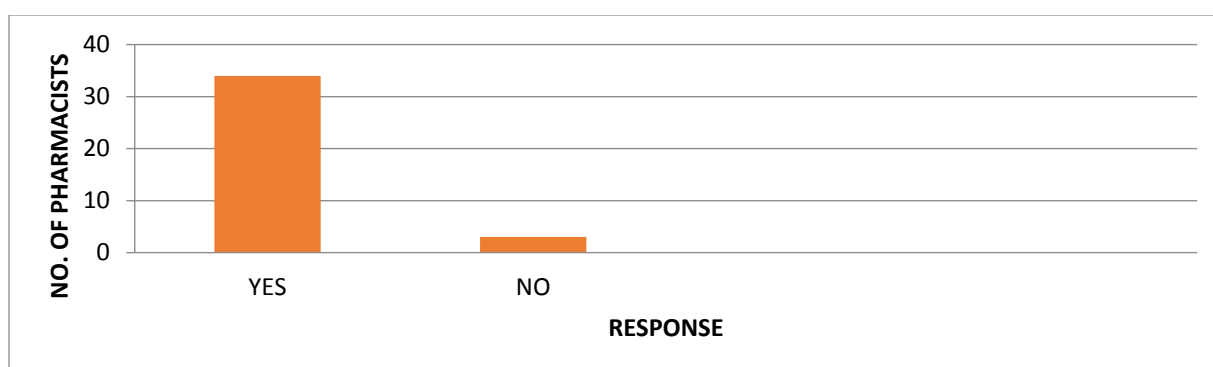


Fig: 1.14

Table 1.7: This table is showing the distribution according to the respondents for query handling by GMSCL:

Response	Frequency	Percentage (%)
Yes	33	86.49
No	05	13.51
Total	37	100

QUERIES REGARDING e- AUSHADHI SOFTWARE SOLVED BY GMSCL

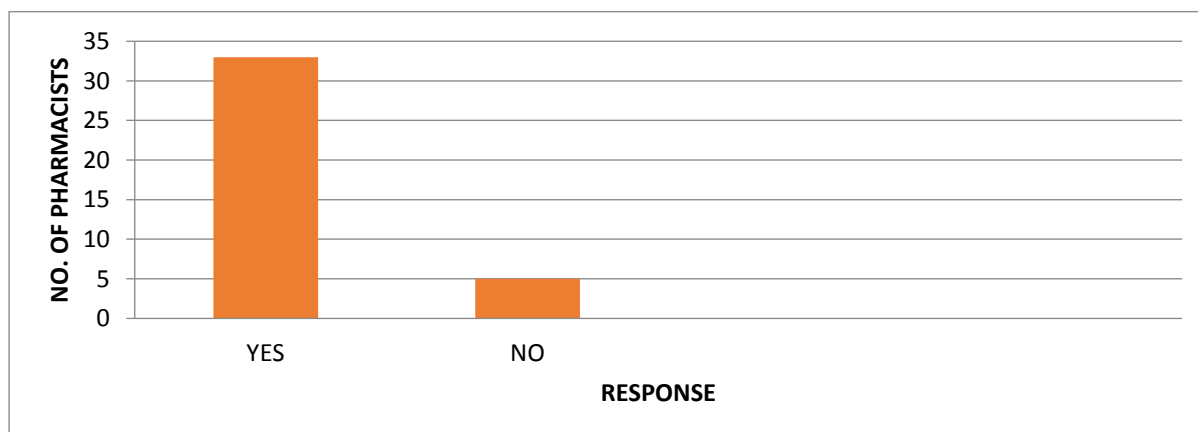


Fig: 1.15

Table 1.8: This table is showing the distribution according to the respondents for the basis on which the quantity of drugs is updated:

Response	Frequency	Percentage (%)
No. of Boxes	7	18.92
No. of unit of medicines	30	81.08
Total	37	100

BASIS ON WHICH QUANTITY OF DRUGS ARE INDENTED

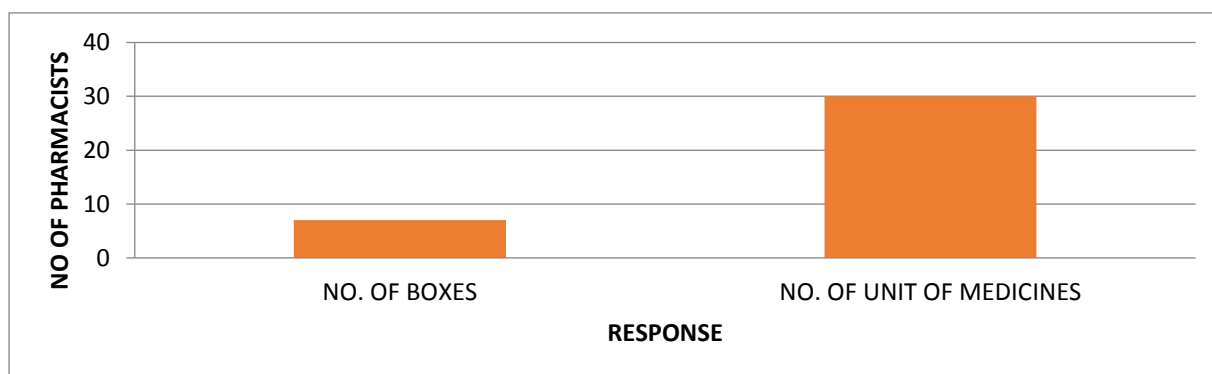


Fig: 1.16

Table 1.9: This table is showing the distribution according to the respondents for confusion amongst medicines of different programmes:

Response	Frequency	Percentage (%)
Yes	5	13.51
No	32	86.49
Total	37	100

CONFUSION AMONGST MEDICINES OF DIFFERENT PROGRAMMES

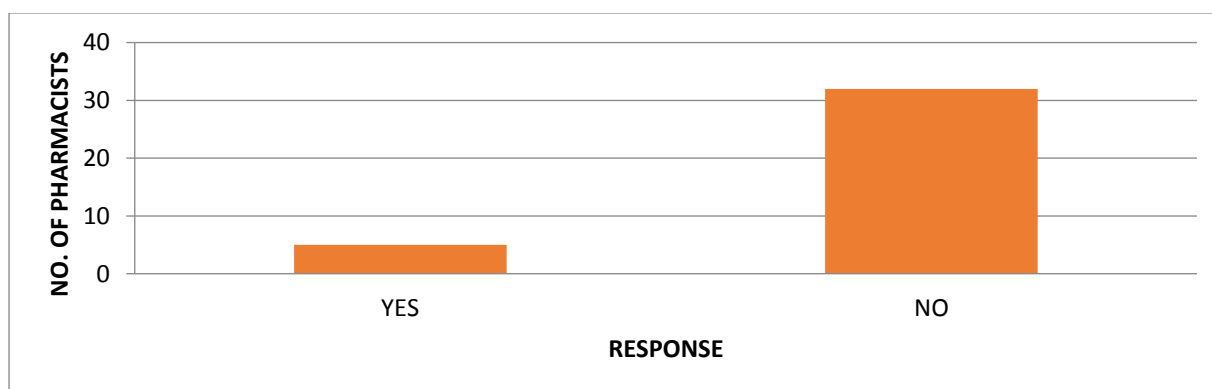


Fig: 1.17

Table 2.0: This table is showing the distribution according to the respondents for regular training regarding e- Aushadhi:

Response	Frequency	Percentage (%)
Yes	26	70.28
No	11	29.72
Total	37	100

TRAINING KEPT REGULARLY REGARDING e- AUSHADHI SOFTWARE

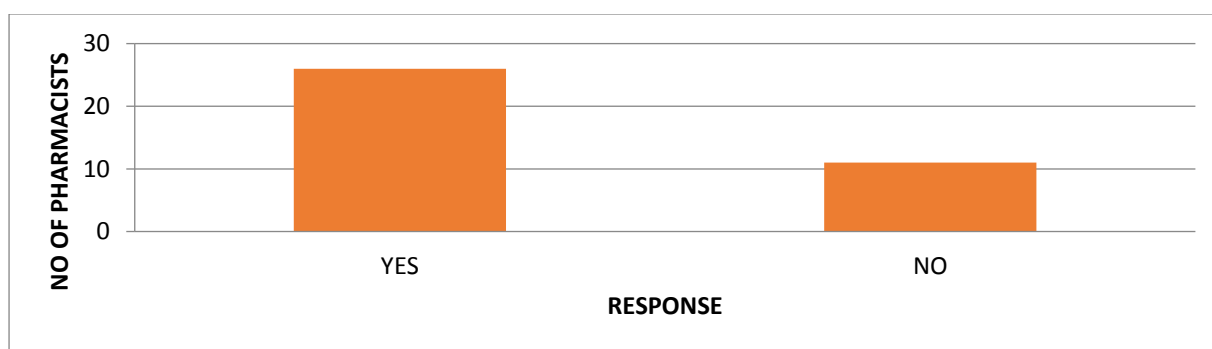


Fig: 1.18

Table 2.1: This table is showing the distribution according to the respondents for software being user-friendly:

Response	Frequency	Percentage (%)
e- Aushadhi	30	81.08
DLIMS	7	18.92
Total		

SOFTWARE THAT IS MORE USER FRIENDLY

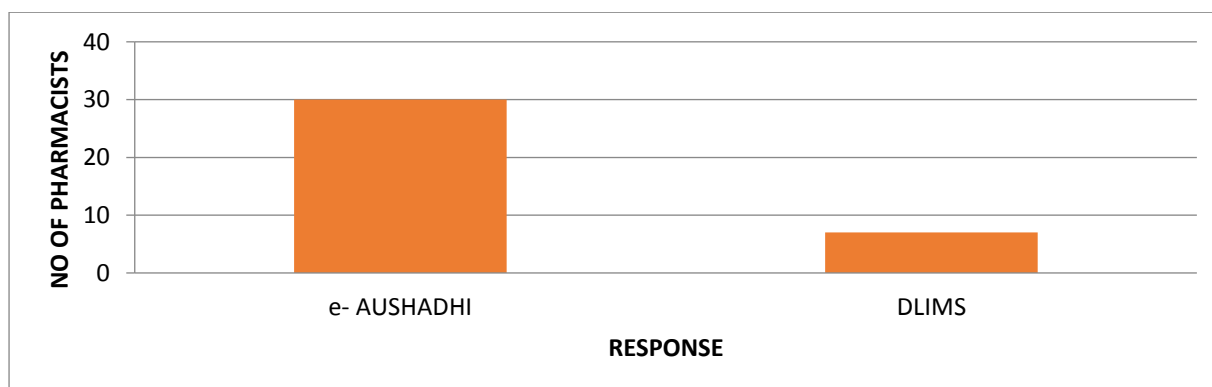


Fig: 1.19

Table 2.2: This table is showing the distribution according to the respondents for frequency of the indent to be open:

Response	Frequency	Percentage (%)
Quarterly	12	32.43
Every 6 months	15	40.54
Yearly	10	27.03
Total	37	100

FREQUENCY TO INDENT ONLINE

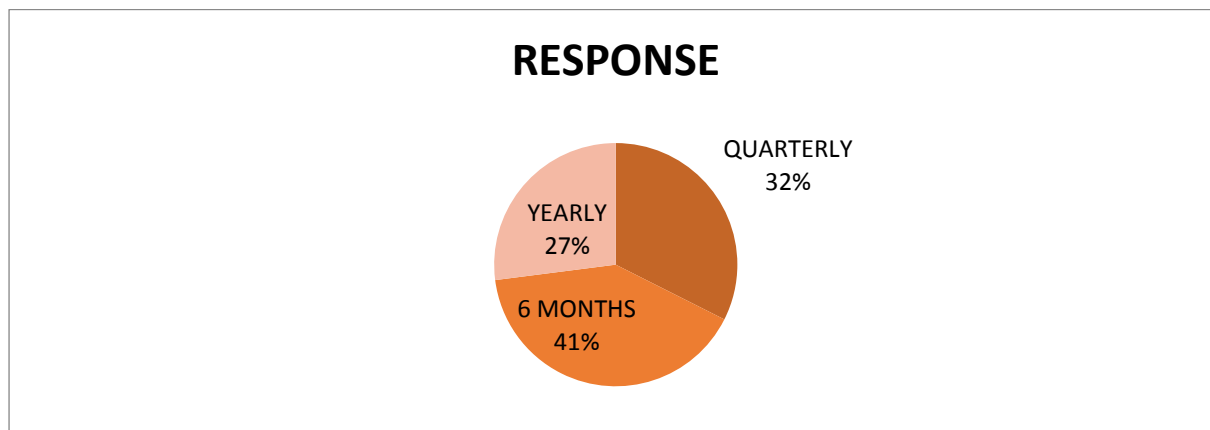


Fig: 1.20

Table 2.3: This table is showing the distribution according to the respondents for preference of language for e- Aushadhi software:

Response	Frequency	Percentage (%)
Gujarati	4	10.81
Hindi	1	2.70
English	32	86.49
Total	37	100

PREFERENCE OF LANGUAGE FOR USING SOFTWARE

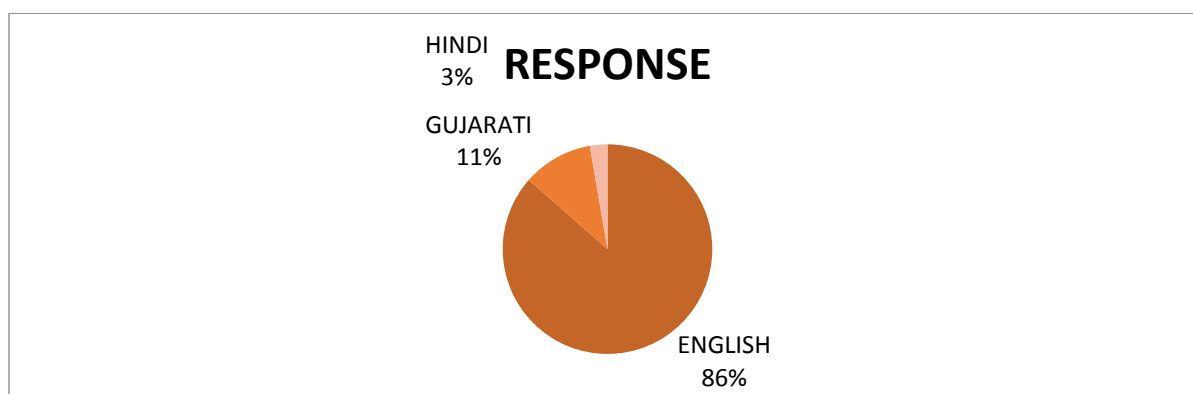


Fig: 1.21

Table 2.4: This table is showing the distribution according to the respondents for the basis on which indent is entered:

Response	Frequency	Percentage (%)
Calculation as per population	30	81.08
Ask Public Health Facility Doctor	03	8.11
On last year basis	04	10.81
Total	37	100

BASIS ON WHICH THE REQUIREMENT OF INDENT IS ENTERED

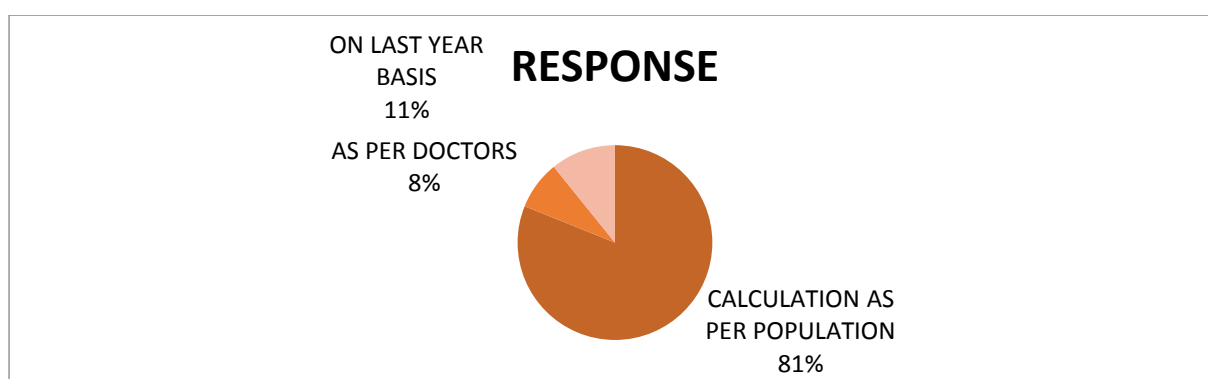


Fig: 1.22

Table 2.5: This table is showing the distribution according to the respondents for other programmes having same days of Indent:

Response	Frequency	Percentage (%)
Yes	36	97.3
No	1	2.70
Total	37	100

OTHER PROGRAMMES HAVING SAME DAYS OF INDENT AS NHM PROGRAMMATIC INDENT

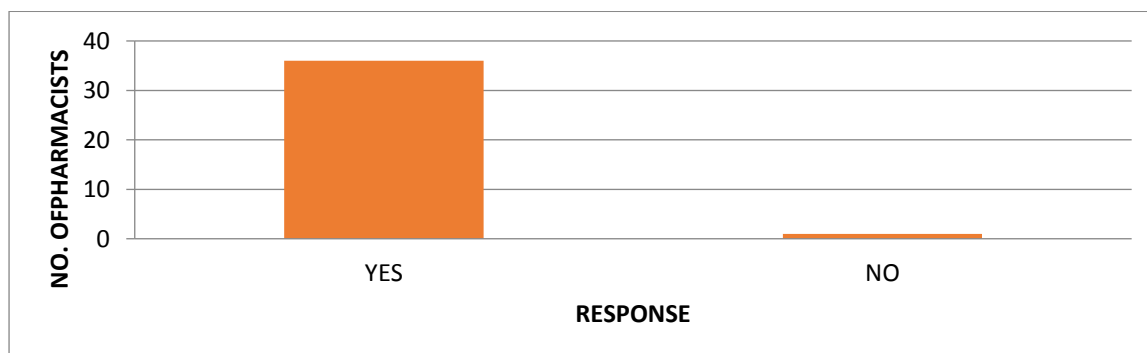


Fig: 1.23

MAJOR ISSUES IN ONLINE INDENT ON e- AUSHADHI WEB PORTAL

- E- Aushadhi id and password forgot or unavailable for Health Facilities of a District.
- Lack of clarity in calculating the number of drugs required in a particular district.
- Complicated Process.
- Few Pharmacists do not understand English.
- Ten days are not enough for updating the indent.
- GMSCS staff does not receive calls/ replies to mails for handling the queries.
- Pharmacists confuse that whether number of boxes or number of medicines per unit should be indented.
- Pharmacists prepare the draft but forget to upload the requirement on e- Aushadhi web portal.
- District Pharmacists confuse NHM programmatic indent with other indents (School Health Programme, Epidemic, NPCDCS, NMHP or Malaria).

OTHERS

- Previous software (DLIMS) required inputs in number of boxes and not in number of drugs in unit.
- In Previous software (DLIMS), indent was done in every six months while on e- Aushadhi, indent is carried out annually.
- If CDHO is unavailable then indent remains pending as access is provided only to them.

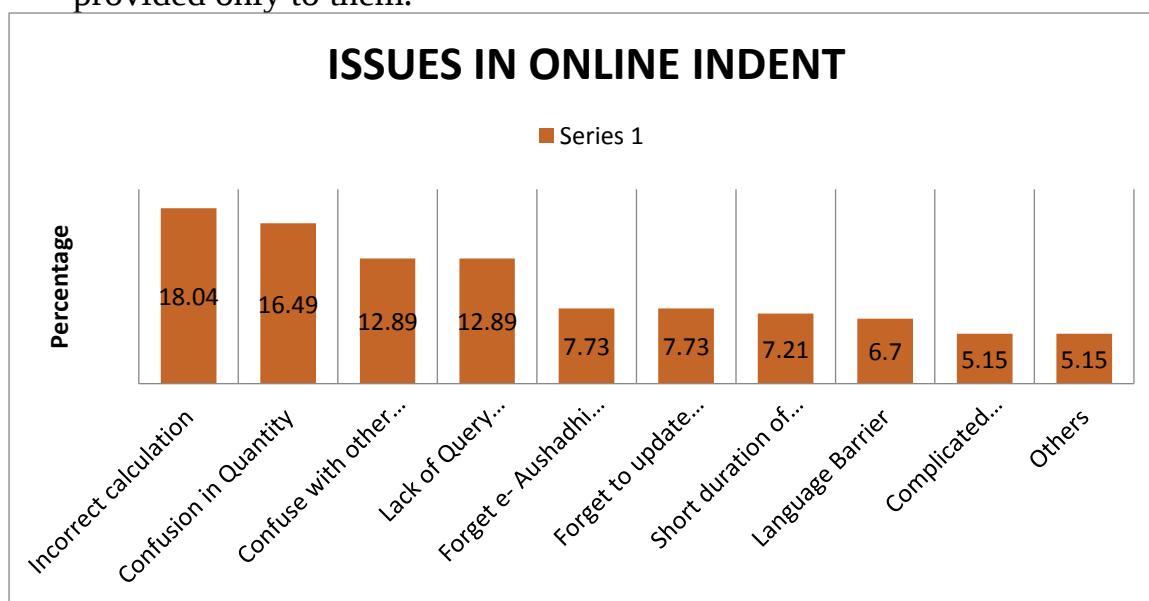


Fig: 1.24

SUGGESTIONS TO IMPROVE ONLINE INDENT ON e- AUSHADHI WEB PORTAL

- ID and Passwords of each facility should be provided to them before opening the online indent. It should be generated timely if not available.
- A letter should be done to all the District Pharmacists to intimate them about the annual Programmatic NHM indent of medicines.
- Regular training of Store Pharmacists should be kept for updating them regarding the functioning of e- Aushadhi web portal and how to fill the quantity in the software.
- E- Aushadhi should be available in local languages (Gujarati) for the understanding purpose of Store Pharmacists.
- Reminder mails and calls should be done from the State level to District Pharmacists for timely indenting the medicines online.
- Indent should open two times in a year so that the requirements are updated accordingly and over stock or stock outs can be avoided.
- Access for online indent should be made available to other person as well apart from CDHO (Districts) and MOH (Municipal Corporation).
- Indent of other programmes apart from NHM should not be open on the same days as the District Pharmacists gets confuse as few drugs are same in different programmes.
- GMSCL should be informed to solve the queries regarding the software within the given timeline.
- Store Pharmacists should be trained to calculate the requirement of the drugs according to their District's population.

RESULTS

Total number of Pharmacists included were 41 pharmacists (33 district pharmacists and 8 Municipal Corporation Pharmacists).

Out of 41 pharmacists:

- 35 pharmacists had some issues in online Indent on e- Aushadhi web portal.
- 2 pharmacists had no issues in online Indent on e- Aushadhi web portal.
- 4 pharmacists were not available for the response.

Issues in online Indent on e- Aushadhi web portal:

Out of 41 pharmacists (33 district pharmacists and 8 Municipal Corporation Pharmacists), 35 Pharmacists had issues in online Indent on e- Aushadhi web portal due to some reasons:

- Incorrect calculations of drugs required - 18.04%
- Confusion in quantity of medicines to be entered online - 16.49%
- Lack of Query handling by GMSCL - 12.89%
- Confusion with other programmatic drugs - 12.89%
- Short Duration of Indent - 7.21%
- Language Barrier - 6.70%
- Forgot/ no ID Password of e- Aushadhi - 7.73%
- Forgot to update online - 7.73%
- Complicated process - 5.15%
- Others - 5.15%

Regular Trainings should be conducted at Regional level for all the District Pharmacists and Municipal Corporation Pharmacists so that they are aware about the functioning of e- Aushadhi web portal.

The indent of different Programmatic Medicines should be open at separate timings so as to avoid confusion as there are similar medicines in different Programmes.

ANNEXURE: QUESTIONNAIRE

S.NO.	QUESTIONS	REMARKS
1.	Do you have ID/ Password of e- Aushadhi?	YES- 28 NO- 9
	a. YES b. NO	
2.	Do you find updating the demand on e- Aushadhi easy?	YES- 35 NO- 2
	a. YES b. NO	
3.	Are 10 days enough for opening the annual online indent?	YES- 34 NO- 3
	a. YES b. NO	
4.	Are the queries regarding the e- Aushadhi software solved by GMSCL ?	YES- 33 NO- 5
	a. YES b. NO	
5.	On what basis you enter the quantity of drugs?	No. of boxes - 7 No. of unit of medicines - 30
	a. No. of boxes b. No. of unit of medicines	
6.	Do you get confused amongst medicines of different programmes while indenting?	YES- 5 NO- 32
	a. YES b. NO	
7.	Are the trainings kept regularly regarding e- Aushadhi software?	YES- 26 NO- 11
	a. YES b. NO	
8.	Which software was more user friendly?	e- Aushadhi - 30 DLIMS - 7
	a. e- Aushadhi b. DLIMS	
9.	How frequently should the indent be open? a. Quarterly b. Every 6 months c. Yearly	Quarterly - 12 Every 6 months - 15 Yearly - 10

S.NO	QUESTIONS	REMARKS
10.	Should the access be opened at more than one level for indent?	YES- 5 NO- 32
	a. YES b. NO	
11.	Which language is comfortable for using e- Aushadhi software? a. Gujarati b. Hindi c. English	Gujarati - 4 Hindi - 1 English - 32
12.	Does any other programme has same days of indent as NHM Programmatic Indent?	YES – 36 NO - 1
	a. YES b. NO	
13.	On what basis you enter the requirement of medicines that are indented?	Calculation as per the population - 30 Ask Public health facilities doctors - 3 On last year basis - 4
	a. Calculation as per the population b. Ask Public health facilities doctors	
	c. On last year basis	

REFERENCES

- (1) e-Aushadhi- Jammu and Kashmir, https://www.cdac.in/index.aspx?id=pk_itn_spot987
- (2) Uttarakhand e-Aushadhi- https://www.cdac.in/index.aspx?id=hi_dms_aushadi
- (3) <http://www.pcquest.com/maharashtra-public-health-department-e-aushadhi-scm-system>