



AYUSH @ IDUKKI

Health and Family Welfare & AYUSH Department
Government of Kerala

KERALA HEALTH

AYUSH @ IDUKKI

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National AYUSH Mission Kerala,
Bliss Haven, 1st Floor T.C - 82/1827 (3),
Convent Road, Vanchiyoor,
Trivandrum - 35
Ph: 04712474550
Email: namkerala@gmail.com

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**Health and Family Welfare & AYUSH Department
Government of Kerala**

KERALA.HEALTH



MESSAGE



GOVERNMENT OF KERALA

Pinarayi Vijayan

CHIEF MINISTER

No. 250/Press/CMO/26

26 February, 2026

MESSAGE

The health and well-being of the people of Kerala have always been at the centre of the Government's development agenda. Alongside the achievements of modern medicine, Kerala's strong tradition of Indian Systems of Medicine and Homoeopathy continues to play a vital role in promoting preventive, promotive, and holistic healthcare. Strengthening AYUSH services is therefore integral to our vision of inclusive, people-centred, and sustainable health systems.

The District AYUSH documentation is an important initiative that informs the status and performance of AYUSH services at the district level. By systematically presenting information on institutions, human resources, service delivery, and programme implementation, this document provides a clear understanding of how AYUSH systems contribute to improving population health, particularly in primary care, lifestyle disease management, geriatric care, and community wellness.

Kerala's public health experience demonstrates that strong outcomes are achieved through a balanced approach that combines curative care with prevention, health promotion, and community participation. AYUSH institutions, especially at the grassroots level, have been instrumental in expanding access to affordable healthcare and strengthening wellness-oriented interventions. The collective efforts of the Departments of Indian Systems of Medicine, Homoeopathy, National AYUSH Mission, and local self-governments are clearly reflected in this profile.

I am sure that this District AYUSH documentation will serve as a valuable reference for policymakers, administrators, and health professionals.

I extend my appreciation to all those who contributed to this effort and wish every success to the continued strengthening of AYUSH healthcare in Kerala.

Pinarayi Vijayan

Dr. Rajan Khobragade IAS
Addl Chief Secretary
E-mail : acskeralahealth1@gmail.com



Smt. Veena George

Minister for Health &
Family Welfare
and Woman & Child Welfare
Development
Government of Kerala

Message

The Government of Kerala remains committed to strengthening public health systems that are equitable, responsive, and people centred. Within this framework, AYUSH systems play a unique and complementary role by emphasising prevention, lifestyle modification, and long-term management of health conditions. The District AYUSH documentation represents an important step towards systematically documenting and strengthening these contributions.

This document provides a comprehensive overview of AYUSH services in the district, covering infrastructure, human resources, beneficiary utilisation, and key programmes implemented under the National AYUSH Mission. By consolidating reliable data and analytical insights, the profile supports informed planning, efficient resource allocation, and continuous improvement in service delivery.

AYUSH institutions have significantly expanded access to primary healthcare, particularly in rural and underserved areas. Interventions focusing on non-communicable diseases, geriatric care, women's and child health, school health, and wellness promotion have enhanced community engagement and reduced pressure on secondary and tertiary facilities. The integration of AYUSH services with broader health initiatives further strengthens continuity of care.

I appreciate the dedicated efforts of the state officers, district officials, programme managers, medical officers, and frontline staff of the Indian Systems of Medicine, Homoeopathy, and National AYUSH Mission in preparing this document. I urge health administrators and professionals to actively use this document for analysis, planning, and action. I am confident that this initiative will contribute meaningfully to improving the reach, quality, and impact of AYUSH services and to advancing Kerala's goal of comprehensive healthcare for all.


Veena George



Preface

The Department of Health and Family Welfare, including AYUSH, and various organizations have been taking sustained efforts to strengthen health systems through evidence-based planning, decentralised governance, and intersectoral collaboration.

In order to assess various schemes and programs implementation, their outputs and outcomes a comprehensive document series is being undertaken by the Department. This document offers a structured and comprehensive account of AYUSH services in the district, encompassing institutional infrastructure, human resources, service utilisation, and programme implementation. It highlights the role of AYUSH in preventive and promotive healthcare, management of chronic conditions, and delivery of community-based wellness interventions. By presenting standardised data and district-specific insights, the document enables comparative assessment, gap identification, and priority setting. It gives information for doing integrative medicine practice especially for NCD management, palliative care and geriatric care.

The preparation of this document required coordinated efforts from district officials, programme teams, and healthcare providers across Indian Systems of Medicine, Homoeopathy, and the National AYUSH Mission. The process itself has strengthened data validation, improved documentation practices, and reinforced the importance of using evidence for decision-making.

I am confident that the District AYUSH documentation will serve as a useful resource for administrators, planners, researchers, and practitioners. It will support informed policy dialogue, guide programme strengthening, and encourage greater integration of AYUSH within the broader public health system.

I commend the state and district teams for their commitment and hope that this initiative will contribute to further improving the quality, accessibility, and effectiveness of AYUSH services across Kerala. I also urge all to institutionalize this mechanism and annually publish District documents so as to maintain focus on achieving the priorities as per the VISION 2031 plans.

Dr Rajan Khobragade IAS

Additional Chief Secretary
Health & Family Welfare and
AYUSH Department
Govt of Kerala.

MESSAGE



The preparation of the District AYUSH Profile marks a significant step towards strengthening evidence-based planning and systematic documentation within the Govt. AYUSH sector. This comprehensive record reflects the collective efforts of the Departments of Indian Systems of Medicine and Homoeopathy, National AYUSH Mission, and the Educational institutions functioning under the Ayurveda Medical Education & Homoeopathy Medical Education.

The document provides a detailed overview of district-level AYUSH activities, infrastructure, human resources, and the programmes implemented under various components of the National AYUSH Mission (NAM). It also highlights the growing role of AYUSH in preventive, promotive, and curative healthcare, as well as its contribution to education and community well-being.

I commend the sincere efforts of all officials and district teams involved in compiling this profile. I am confident that the information contained herein will serve as a valuable tool for planning, monitoring, and strengthening AYUSH services at the grassroots level, thereby furthering Kerala's commitment to accessible, quality, and holistic healthcare for all.

Dr. D. Sajith Babu IAS

State Mission Director

National AYUSH Mission, Kerala

MESSAGE



Kerala's public health system is widely recognised for its people-centred approach, emphasis on equity, and sustained focus on preventive and promotive healthcare. The State's effective integration of community participation with institutional governance has enabled the delivery of quality health services and established Kerala as a leader in public health administration.

The Department of Indian Systems of Medicine (ISM), Government of Kerala, forms a vital component of this framework. Through its extensive institutional network, the Department upholds the classical foundations of Indian Systems of Medicine while addressing evolving health needs, ensuring accessible, affordable, and culturally appropriate healthcare services across the State.

In this backdrop, the District Profile Handbook has been developed as a comprehensive reference document reflecting the status and performance of ISM services at the district level. It provides a structured overview of institutional capacity, human resources, infrastructure, service delivery, and programme implementation, thereby supporting evidence-based planning and informed administrative decision-making.

The district profiles were prepared through systematic data generation, analysis, and consolidation using the Department's digital information systems, ensuring accuracy, uniformity, and transparency, and reinforcing a data-driven approach to governance and service improvement.

I place on record my sincere appreciation to the Joint Director and coordination team of ISM, including administrative staff, and the entire team of the National AYUSH Mission (NAM) for their dedicated efforts in drafting, reviewing, analysing, and consolidating the district profiles. Their coordinated engagement and technical competence were instrumental in ensuring the quality, reliability, and timely completion of this handbook.

It is hoped that this handbook will serve as a valuable planning and management resource for administrators, programme managers, and stakeholders, and contribute meaningfully to the continued strengthening of Indian Systems of Medicine in Kerala.

Dr. K S Preeya

Director

Department of Indian Systems of Medicine,
Government of Kerala.

MESSAGE



The Kerala model of healthcare delivery has earned global recognition for its people-centred, inclusive, and equity-driven approach to public health. Rooted in the belief that healthcare is a fundamental right of every citizen, the State has consistently demonstrated how thoughtful public action, community participation, and strong institutions can together achieve health outcomes comparable with those of many developed nations.

The Department of Homoeopathy, Government of Kerala, is proud to be an integral part of this collective journey. Through a wide network of government homoeopathic hospitals and dispensaries, the Department continues to extend accessible, affordable, and quality-assured healthcare services to diverse sections of society, while upholding the values of compassion, accountability, and professional excellence.

In this backdrop, the District Profile Handbook has been conceived as more than a compilation of statistics, it is a reflection of the people, institutions, and systems that sustain homoeopathic healthcare at the grassroot level. By presenting a structured and comprehensive overview of institutional capacity, human resources, service delivery, infrastructure, and ongoing programmes, this handbook seeks to support evidence-based planning, informed decision-making, and responsive governance.

The preparation of these district profiles has been made possible through the effective use of the department software- Ayush Homoeopathy Information Management System (AHiMS), enabling reliable, standardised, and centrally compiled data at the Directorate level. This digital integration marks an important step towards transparency, efficiency, and continuous system improvement.

I express my sincere appreciation to the District Medical Officers and the district medical office team for the timely review of the document and their valuable additions. I also extend my sincere thanks to the District Medical Officers, the medical and paramedical team, and all other district officials, including the AHiMS District Trainers, whose dedication and diligence in the timely updation of data in AHiMS helped in the prompt compilation of the District Profile document. Their collective efforts reinforce our shared commitment in strengthening healthcare in Kerala.

It is my earnest hope that this handbook will serve as a valuable planning and management resource, inspire constructive dialogue among stakeholders, and contribute meaningfully to shape a healthier and more resilient Kerala in the years to come.

Dr. M. P. Beena

Director
Department of Homoeopathy,
Government of Kerala.

Index

Introduction	19
CHAPTER 1 Idukki district - an Overview	21
1.1 Introduction	21
1.2 The People and Population	22
1.3 Idukki- Health Overview	23
1.4 AYUSH- Role in Enhancing Public Health Outcomes	24
1.5 Key Achievements in AYUSH Healthcare Development	25
CHAPTER 2 Overview of AYUSH Services	29
2.1 Overview of AYUSH Services in Idukki District	29
2.2 History and Evolution of AYUSH Services in the District	29
2.3 Administration and Governance Structure	29
2.4 Organogram – District Level Administrative Structure	30
2.5 Infrastructure Profile of the District	30
2.6 Health Facilities in Urban and Rural Areas	31
2.7 Hospital Details based on Bed Strength	32
2.8 Human resource Profile	33
2.9 Beneficiary Details	35
2.10 Public Health Programmes	37
2.11 Standardisation of Institutions	40
2.12 Digital Health	41
2.13 Laboratory & Diagnostic Facilities	41
2.14 Financial Expenditure	42
CHAPTER 3 Department of Indian Systems of Medicine Facilities and Services	43
3.1 Introduction	43
3.2 Administration	43
3.3 Infrastructure Profile of the District	47
3.4 Human Resource Profile of the District	50
3.5 Beneficiary Details	52
3.6 District Panchayath Projects	53
3.7 LSGD projects	54

3.8	Department Plan Projects	55
3.9	Standardisation of Institutions	58
3.10	Ayushman Arogya Mandir-AYUSH	61
3.11	Digital Health	61
3.12	Health Infrastructure Development	63
3.13	Laboratory & Diagnostic facilities	64
3.14	Financial Expenditure	64
3.15	Other Activities	65
3.16	Conclusion	71
CHAPTER 4	Department of Homoeopathy facilities and Services	73
4.1	Introduction	73
4.2	Administration	73
4.3	Infrastructure Profile of the District	75
4.4	Human Resource Profile of the District	79
4.5	Beneficiary Details	81
4.6	Public Health Programmes	82
4.7	Standardisation of Institutions	89
4.8	Ayushman Arogya Mandir (AYUSH)	92
4.9	Temporary Homoeo Dispensaries	92
4.10	Digital Health	93
4.11	Medicine Availability & Logistics	94
4.12	Laboratory & Diagnostic Facilities	94
4.13	Financial Expenditure	95
4.14	Conclusion	95
CHAPTER 5	National Ayush Mission Supports and Services	97
5.1	Introduction	97
5.2	Administration	103
5.3	Human Resources Profile	104
5.4	AYUSH Services- Supply of Essential Drugs	106
5.5	AYUSH Services- Health Infrastructure Development	107
5.6	AYUSH Services- Programmes & Projects - AYUSH Public Health Programmes	108
5.7	AYUSH Services- Programmes & Projects- Flexipool Projects	116

5.8	AYUSH Services- Ayush Gram	134
5.9	Quality-Related Activities	136
5.10	Ayushman Arogya Mandir - AYUSH	138
5.11	IT Initiatives	139
CHAPTER 6	Directorate of Ayurvedic Medical Education	
	Government Ayurveda College Udumbanchola, Idukki	147
ANNEXURES		
1.	Details of the Department of Indian Systems of Medicine	
2.	Details of the Department of Homoeopathy	
3.	NAM Details	

INTRODUCTION

The District AYUSH Profile has been developed to provide a comprehensive overview of the AYUSH sector within the district, covering all aspects related to the Department of Indian Systems of Medicine (ISM), Department of Homoeopathy, National AYUSH Mission (NAM) initiatives, and AYUSH educational institutions functioning under the Ayurveda Medical Education & Homoeopathy Medical Education.

This document serves as an authentic reference source reflecting the overall status of AYUSH healthcare and education in the district. It consolidates detailed information on infrastructure, human resources, healthcare facilities, educational institutions, and various programmes and schemes implemented through the ISM and Department of Homoeopathy, including activities undertaken under different components of NAM.

Structured in a systematic format, the District AYUSH Profile compiles data and analytical insights through tables, charts, and concise narratives for clarity and ease of understanding. It is intended to support evidence-based planning, programme evaluation, and strategic strengthening of AYUSH healthcare and educational systems at the district level, while identifying existing gaps and priorities for future interventions.

The preparation of this document reflects a commitment to systematic documentation and the continuous strengthening of AYUSH health and educational systems. It is envisaged that this District AYUSH Profile will serve as a valuable resource for administrators, planners, academicians, and stakeholders engaged in the promotion, integration, and advancement of AYUSH systems in the district.

Chapter 1

IDUKKI DISTRICT - AN OVERVIEW

1.1 Introduction

Idukki is a high-range district located in the central part of Kerala, known for its scenic beauty, wildlife sanctuaries, and major hydroelectric projects. It is one of the most forested and sparsely populated districts in the state, with over 95% of its population living in rural areas. The district is home to the famous Idukki Arch Dam, one of Asia's highest arch dams, and serves as a vital source of power for Kerala. Idukki's landscape is dominated by hills, rivers, and dense forests, making it a hub for eco-tourism and spice cultivation, particularly cardamom and pepper. Despite its remote terrain, Idukki has made significant strides in infrastructure, education, and healthcare, showcasing a unique blend of natural richness and human development. Idukki is one of the 14 districts of Kerala state, India, created on 26 January 1972. This beautiful High range district of Kerala is geographically known for its Mountainous Hills and Dense Forests. For the people of Kerala, Idukki is always associated with Power Generation. About 66% of the State's Power needs come from the Hydroelectric Power Projects in Idukki. The district is predominantly hilly and forested, with about 97% of the area covered by mountains and forests. Major rivers such as the Periyar, Thodupuzhayar, and Pamba originate here. Idukki experiences a cool and pleasant climate throughout the year due to its high elevation, with significant rainfall during the monsoon season. Idukki is also known as the spice garden of Kerala.



Figure :1: District Map

1.2 The People and Population

As per the 2011 Census, Idukki district in Kerala had a total population of 1,108,974, with a nearly equal gender distribution—552,808 males and 556,166 females—resulting in a sex ratio of 1,006 females per 1,000 males. The district, spanning an area of 4,356 sq. km, had a low population density of 255 persons per sq. km and recorded a negative population growth rate of -1.79% from 2001 to 2011. Idukki remains predominantly rural, with only 4.69% of its population residing in urban areas. The literacy rate stood at an impressive 91.99%, with male literacy at 94.56% and female literacy at 89.45%. Children aged 0–6 years made up 9.53% of the population, and the child sex ratio was 964 girls per 1,000 boys. The district also has a significant presence of Scheduled Castes (13.1%) and Scheduled Tribes (5.03%).

Table 1.2 Demographic details

HEALTH INDICATORS	
Population	11.08 lakhs
Actual population	1,108,974
Male	552,808

Female	556,166
Population Growth	-1.79% from 2001 to 2011
Area Sq.Km	4,356 sq. km
Density/km2	255 people per sq. km
Proportion to Kerala population	3.32%
Sex Ratio	1,006 females per 1,000 males.
Child Sex Ratio	964 girls per 1,000 boys.
Average literacy	91.99%,
Male Literacy	94.56%
Female literacy	89.45%
Urban Population	52,045

1.3 Idukki – Health Overview

Idukki district, known for its hilly terrain and rich natural environment, has a healthcare system designed to meet the challenges of its largely rural and geographically diverse landscape. The district’s health infrastructure includes a network of government hospitals, taluk and community health centres, and primary health centres that cater to populations spread across remote high-range areas. These are complemented by private hospitals, mission institutions, and charitable clinics that strengthen healthcare delivery, particularly in urban and semi-urban pockets.

Allopathic medicine serves as the foundation of healthcare in the district, providing preventive, promotive, and curative services with a focus on maternal and child health, infectious disease control, and non-communicable disease management. In addition, traditional systems under AYUSH—especially Ayurveda and Homoeopathy—play an important role in extending holistic and preventive health services. Several Ayurveda

hospitals, dispensaries, and wellness centres are located across the district, offering treatments rooted in Kerala's traditional healing practices.

Public health initiatives in Idukki are oriented towards improving accessibility and outreach, given the district's hilly geography and dispersed settlements. Programmes focusing on immunisation, nutrition, sanitation, and disease prevention are effectively implemented through coordination between the health department, local bodies, and community organisations. The district also places growing emphasis on health education and wellness promotion to address the specific needs of highland communities.

Overall, Idukki's healthcare system represents a balanced integration of modern medical facilities and traditional healing systems, working together to deliver accessible and community-centred health services across its diverse terrain.

1.4 AYUSH- Role in enhancing public health outcomes

The AYUSH system plays a vital complementary role in strengthening healthcare delivery in Idukki. The Indian Systems of Medicine (ISM) Department delivers preventive, promotive, and curative healthcare through Ayurveda and Siddha institutions with a special focus on lifestyle disorders, musculoskeletal conditions, geriatric care, occupational health issues of plantation workers, and seasonal illnesses related to climate and altitude. ISM services are particularly effective in remote and tribal areas due to their holistic approach and strong community acceptance.

The Department of Homoeopathy contributes significantly by providing accessible and cost-effective care for chronic diseases, respiratory ailments, skin disorders, allergies, and psychosomatic conditions. Homoeopathy institutions at the primary and secondary levels help extend healthcare services to hard-to-reach populations and reduce dependency on tertiary allopathic facilities.

Under the National AYUSH Mission (NAM), Kerala, several initiatives have been implemented in Idukki to strengthen AYUSH infrastructure, ensure the availability of essential medicines, deploy trained human resources, and promote integrative healthcare. NAM-supported programmes such as speciality clinics, lifestyle disease management services, geriatric care clinics, school health programmes, tribal health initiatives, and health

awareness campaigns have enhanced the reach and effectiveness of AYUSH services in geographically challenging areas.

In summary, Idukki District stands as a unique example of Kerala's natural wealth combined with strategic developmental importance. Supported by an inclusive healthcare system that integrates modern medicine with AYUSH services, the district continues to address its unique health challenges while promoting holistic well-being and sustainable development for its population.

1.5 Key Achievements in AYUSH Healthcare Development

The Government of Kerala has undertaken significant measures to strengthen Indian System of Medicine as part of its recent achievements. As part of this initiative, 82 Medical Officer posts and 162 paramedical staff positions, including 8 temporary posts, have been sanctioned to enhance service delivery and human resource capacity across ISM institutions. Further reinforcing secondary-level care, two Government Ayurveda Dispensaries have been upgraded to 10-bedded hospitals, namely Government Ayurveda Hospital, Moozhur in Kottayam district and Government Ayurveda Hospital, Pinarayi in Kannur district. These interventions reflect the State Government's commitment to improving infrastructure, expanding access to quality traditional healthcare, and ensuring better patient care through strengthened manpower and upgraded facilities.

Under the Homoeopathy Department, the Government of Kerala has achieved significant milestones in expanding access to public homoeopathic healthcare and strengthening institutional capacity. A total of 50 new homoeopathy facilities have been established across the State, ensuring that all Panchayats in Kerala are now covered with homoeopathy services, thereby achieving universal grassroots-level access. To support service expansion and improve care delivery, 50 new Medical Officer posts have been sanctioned. In line with the Government's vision to promote scientific validation and academic advancement in homoeopathy, the Department has also initiated structured research activities through Project HEART (Homoeopathy Evidence-based Advanced Research and Training). Further reinforcing research governance and ethical standards, a Scientific Advisory Board (SAB) and an Institutional Ethics Committee have been constituted under the Department. These

initiatives collectively highlight the State's commitment to evidence-based practice, capacity building, and comprehensive healthcare delivery through homoeopathy.

National AYUSH Mission is the Centrally Sponsored Scheme under Ministry of AYUSH. Government of India has launched National AYUSH Mission (NAM) during 12th plan in 2014. In Kerala, the Mission has been operational since 2015. The primary objective of the National AYUSH Mission is to promote and mainstream traditional systems of medicine—Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy—within the public health delivery system. In Kerala, the Mission's activities are implemented through the State AYUSH Health Society at the State level and District AYUSH Health Societies at the district level. The Mission focuses on infrastructure development, human resource strengthening, ensuring adequate staffing in AYUSH hospitals, implementing projects in tribal areas, and establishing Ayushman Bharat AYUSH Health and Wellness Centres (Ayushman Arogya Mandirs - AYUSH). Out of the total budget, 75% is earmarked for the AYUSH Services, AYUSH Educational institutions and Ayush Health & Wellness Centre components, and 25% for the Flexipool component.

AYUSH Services Component

a) Infrastructure Development:

Under the Upgradation of AYUSH Hospitals and Dispensaries scheme, NAM is facilitating the renovation and upgradation of AYUSH educational institutions, hospitals, and dispensaries under the Department of AYUSH.

b) Construction of Integrated AYUSH Hospitals:

Under this component, new integrated hospitals are being established. So far, approval has been granted for the construction of five 50-bedded, four 30-bedded, and one 10-bedded Integrated AYUSH Hospitals.

c) Provision of additional human resources to AYUSH institutions.

d) Supply of hospital equipment to AYUSH healthcare facilities.

e) Supply of essential AYUSH medicines to healthcare institutions.

f) Allocation of contingency funds to address urgent institutional needs.

g) Implementation of seven AYUSH Public Health Programmes across the State. 238 units of programmes has been approved and being implemented.

AYUSH Health and Wellness Centres (Ayushman Arogyamandirs - AYUSH)

These centres aim to deliver comprehensive primary healthcare through AYUSH systems, emphasizing disease prevention, health promotion, and Yoga-based lifestyle interventions. Each AYUSH HWC functions with an AYUSH Community Health Officer, Yoga Instructor, GNM-qualified Multi-Purpose Health Worker, and five ASHA workers. At present, 700 AYUSH dispensaries (420 ISM and 280 Homoeopathy) across Kerala have been upgraded to AYUSH Health and Wellness Centres.

Flexipool Component

Under the Flexipool component, **36 AYUSH public health programmes** are being implemented across the State to strengthen community-level AYUSH health promotion and wellness initiatives.

Quality improvement of AYUSH Institutions

To improve the service quality and infrastructure of AYUSH hospitals and Ayush Health & Wellness Centres, NAM is implementing NABH accreditation, Kayakalp and quality assurance programmes.

- In the first two phases, 250 AYUSH HWCs have already received NABH accreditation. An additional 250 centres have been selected for the third phase, and the process is progressing.
- Implemented AYUSH KAYAKALP award for Ayush institutions. 132 institutions got AYUSH Kayakalp award.

Training and Capacity Building

Continuous capacity building and skill enhancement of AYUSH personnel form a key component of the Mission. Training is provided on clinical and technical subjects through both offline and online modes.

A Learning Management System (LMS) has been developed to facilitate online training, with eight AYUSH-based courses already available, covering Ayurveda, Homoeopathy, Yoga, and Naturopathy.

The establishment of the National Institute of Training in AYUSH (NITIA) is underway to provide National and International -level training and capacity-building programmes for AYUSH professionals.

AYUSH Gram Programme

The AYUSH Gram initiative, implemented at the Block level, aims to combat lifestyle and non-communicable diseases through Yoga sessions and health awareness activities led by trained Yoga instructors and AYUSH medical officers. The programme is currently being implemented in 16 blocks across the State.

IT Projects initiated

With the support of Kerala Start up Mission & KELTRON, following softwares were developed for Ayush Sector in the State -

- a) AYUSH Procurement software
- b) Learning Management Software
- c) ERP software for real time monitoring civil works
- d) Payroll and Attendance Management system for NAM
- e) AYUSH payment management software

E-Sanjeevani – Telemedicine

Telemedicine services have been introduced in the AYUSH sector through the E-Sanjeevani platform. Two consultation hubs—one for Ayurveda and another for Homoeopathy—have already become operational. The State Telemedicine Hub is nearing completion.

AYUSH Yoga Clubs

Established 10,000 Ayush Yoga Clubs under the aegis of Ayush HWC to prevent and manage the NCDs and for the well-being of the people. AYUSH Yoga Club locator app has also been developed to monitor and locate the yoga clubs

Chapter 2

OVERVIEW OF AYUSH SERVICES

2.1 Overview of AYUSH Services in Idukki District

The AYUSH system of healthcare in Idukki district forms an integral component of the public health delivery framework, providing accessible and holistic healthcare through Ayurveda, Yoga & Naturopathy, Siddha, and Homoeopathy. The district has a well-distributed service delivery structure comprising government hospitals, dispensaries, specialty institutions, wellness centres, and outreach programmes, ensuring healthcare access across hilly, tribal, rural, and remote areas. AYUSH services complement the allopathic healthcare system by emphasizing preventive, promotive, curative, rehabilitative, and palliative care, with a strong focus on wellness, lifestyle modification, and management of chronic and non-communicable diseases.

2.2 History and Evolution of AYUSH Services in the District

Idukki district has a significant tradition in traditional systems of medicine, particularly Ayurveda, rooted in Kerala's rich heritage of classical treatment practices and indigenous tribal healing knowledge. Over the years, AYUSH services in the district have evolved from basic dispensary-level care into a comprehensive, government-supported healthcare network, catering especially to hilly, remote, and tribal populations. With sustained support from the State Government and the National AYUSH Mission, AYUSH institutions in Idukki have expanded to provide inpatient services, specialty clinics, lifestyle disease management, geriatric and maternal care, school health programmes, palliative care, and community outreach activities. This evolution reflects steady strengthening of infrastructure, human resources, service delivery, and integration with public health initiatives, ensuring accessible and holistic healthcare across the district.

2.3 Administration and Governance Structure

AYUSH services in Idukki district function under the Department of AYUSH, Government of Kerala, in coordination with the Directorate of Indian Systems of Medicine, Directorate of Ayurveda Medical Education, Directorate of Homoeopathy, and concerned Central AYUSH

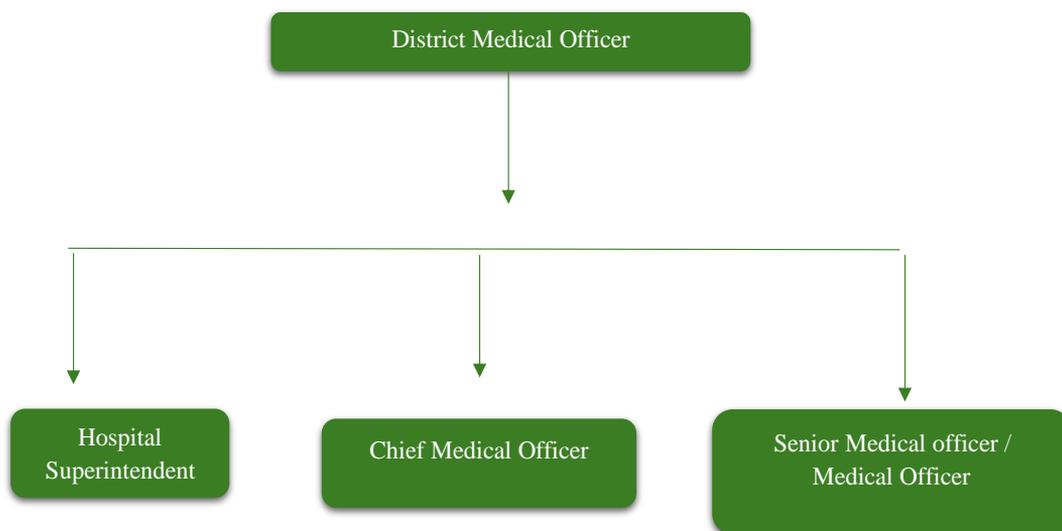
authorities. District-level governance is managed by designated officers responsible for planning, implementation, monitoring, staff deployment, programme execution, and financial management of AYUSH services, with special focus on hilly, remote, and tribal areas.

Key functions of the district administration include:

- Supervision and coordination of AYUSH hospitals, dispensaries, and wellness centres
- Ensuring adequate staffing, infrastructure, and uninterrupted medicine supply
- Implementation and monitoring of National AYUSH Mission (NAM) programmes
- Conduct of public health, school health, geriatric, tribal, and outreach activities
- Monitoring service delivery outcomes and financial utilisation

2.4 Organogram - District-Level Administrative Structure

The district-level AYUSH administrative framework in Idukki generally comprises:



2.5 Infrastructure Profile of the District

Idukki district has a well-distributed AYUSH healthcare network with a total of 133 institutions, comprising 67 ISM and 66 Homoeopathy units, reflecting balanced system development. The infrastructure includes 2 District Hospital units, 3 Government Hospitals, 41 Government Dispensaries, 43 Ayushman Arogya Mandirs, and 37 Ayush Primary Health Centres, ensuring strong primary and secondary care coverage. In addition, 7 Tribal/SCP

Dispensaries cater to the healthcare needs of vulnerable and remote populations. This extensive institutional spread highlight effective outreach and accessibility of AYUSH services across the hilly and tribal regions of Idukki district.

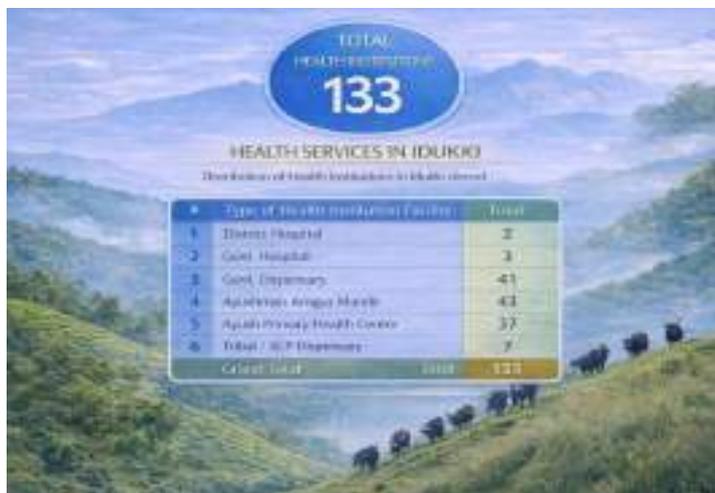


Figure 2.5: Details of Facilities

2.6 Health Facilities in Urban and Rural Areas

Idukki district has a predominantly rural AYUSH healthcare network with a total of 133 institutions, comprising 67 ISM and 66 Homoeopathy units. Of these, 130 facilities are located in rural areas and only 3 in urban areas, reflecting strong outreach to remote and hilly regions. The infrastructure includes 2 District Hospital units, 3 other hospitals, 82 Government Dispensaries including Ayushman Arogya Mandirs, 37 Ayush Primary Health Centres, 2 SCPHHCs, and 5 Government Ayurveda Tribal Dispensaries. The wide rural spread and presence of dedicated tribal institutions highlight the district's focus on accessible and inclusive AYUSH healthcare delivery.



Figure 2.6: Total AYUSH facilities in Urban and Rural Areas

SCPHHC – Special Component Plan Homoeopathy Health Centre

GATD – Government Ayurveda Tribal Dispensary

2.7 Hospital Details based on Bed Strength

Idukki district has five AYUSH Government hospitals with a total bed strength of 230, providing secondary-level inpatient care under both ISM and Homoeopathy. ISM services are available in three hospitals with 180 beds, including 30, 50 and 100 bedded institutions, ensuring graded inpatient facilities. Homoeopathy services are provided through two 25-bedded hospitals with a total of 50 beds. The presence of hospitals with varying bed capacities reflects adequate inpatient infrastructure to meet the healthcare needs of the district.

**HOSPITALS BASED ON BED STRENGTH
IN IDUKKI**

Hospital number	Hospital	Total Bed strength
Govt. Hospital (25 Bedded)	2	50
Govt. Hospital (30 Bedded)	1	30
Govt. Hospital (50 Bedded)	1	50
Govt. Hospital (100 Bedded)	1	100
Grand Total	5	230

Figure 2.7 Bed Strength in Hospitals under ISM & Homoeopathy Department

2.8 Human resource Profile

2.8.1 HR under ISM & DH

2.8.1.1 Availability of Medical Professionals

Idukki District has a total of 200 sanctioned Medical Officer posts under the Department of Indian Systems of Medicine (ISM) and Homoeopathy. Of these, 112 posts belong to the regular establishment, comprising 67 ISM and 45 Homoeopathy personnel. The regular cadre includes 2 Administrative posts (District Medical Officers), 3 Hospital Superintendents, 6 Chief Medical Officers, 99 Medical Officers, and 2 Resident Medical Officers. In addition, 88 Medical Officer posts are sanctioned under national health schemes, with 40 posts under the National Health Mission (NHM) and 48 posts under the National AYUSH Mission (NAM). The NHM posts include 16 ISM and 24 Homoeopathy Medical Officers, while the NAM posts comprise an equal distribution of 28 ISM and 20 Homoeopathy Medical Officers. Overall, ISM accounts for 111 sanctioned posts and Homoeopathy for 89 posts in the district, reflecting a balanced and comprehensive workforce supporting AYUSH healthcare delivery in Idukki.

TOTAL MEDICAL OFFICERS
200

MEDICAL OFFICERS IN IDUKKI
(Category-wise Number of Medical Officers in 2020-2021)

Sl. No.	Category	ISM	Homoeopathy	Total
1	Administrative Staff/Medical Officers	1	1	2
2	Hospital Superintendents	1	2	3
3	Chief Medical officer	2	2	4
4	Medical officer	62	37	99
5	Resident Medical officer		2	2
Total		67	42	109
1	Medical officer (DH)	16	24	40
2	Medical officer (NAM)	28	20	48
Total		44	44	88
Grand Total		111	89	200

Figure 2.8.1.1: Medical Professionals under ISM & DH

2.8.1.2 Availability of Paramedical, Administrative, Ministerial & other posts Sanctioned in ISM & DH

The sanctioned support workforce under ISM and Homoeopathy in Idukki district comprises a total of 344 posts, including 234 paramedical, 29 administrative and ministerial, and 91 other supporting staff. This staffing structure ensures adequate clinical support, efficient administration, and smooth functioning of AYUSH institutions across the district.

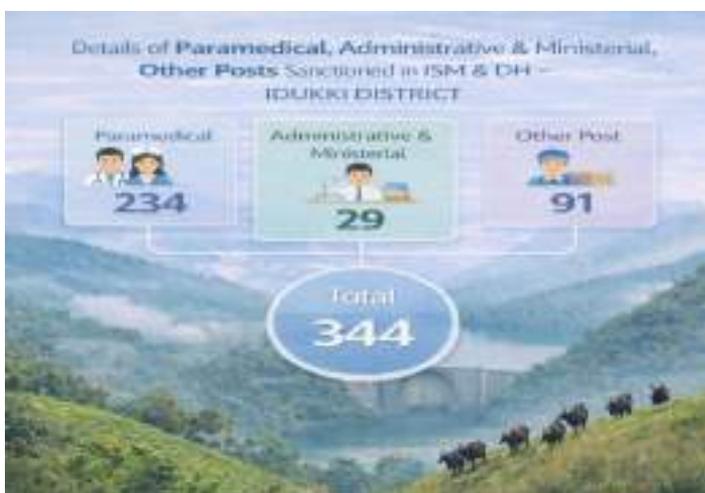


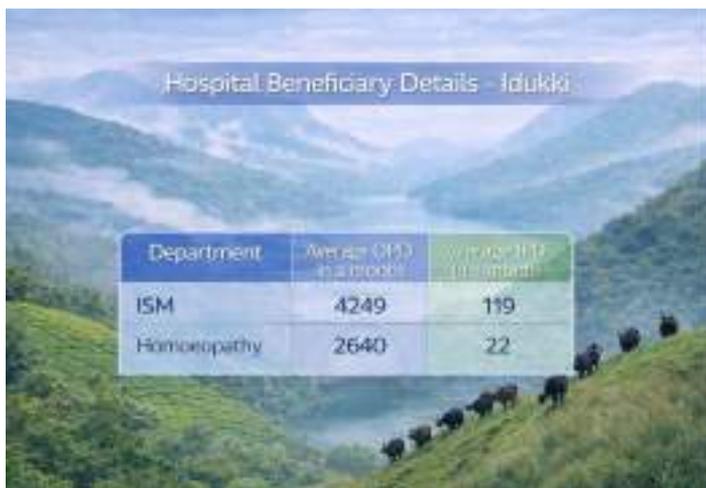
Figure 2.8.1.2 Details of Paramedical, Administrative, Ministerial & other posts Sanctioned in ISM & DH

2.9 Beneficiary Details

2.9.1 Beneficiary details under ISM & DH

2.9.1.1 Hospital beneficiary details

In Idukki district, the average monthly hospital service utilisation under AYUSH includes 4,249 outpatient visits and 119 inpatient admissions in ISM institutions, and 2,640 outpatient visits and 22 inpatient admissions in Homoeopathy institutions, reflecting substantial use of both outpatient and inpatient services.



Department	Average OPD as a month	Average IPD as a month
ISM	4249	119
Homoeopathy	2640	22

Figure 2.9.1.1 Hospital beneficiary details

2.9.1.2 Dispensary beneficiary details

In Idukki district, the average monthly outpatient attendance at AYUSH dispensaries is 1,015 in ISM institutions and 583 in Homoeopathy institutions, indicating steady utilisation of primary-level AYUSH services.



Figure 2.9.1.2 Dispensary beneficiary details

2.9.1.3 APHC beneficiary details

In Idukki district, Ayush Primary Health Centres record an average monthly OPD of 1,256 in ISM and 768 in Homoeopathy, indicating steady utilisation of primary-level AYUSH outpatient services.

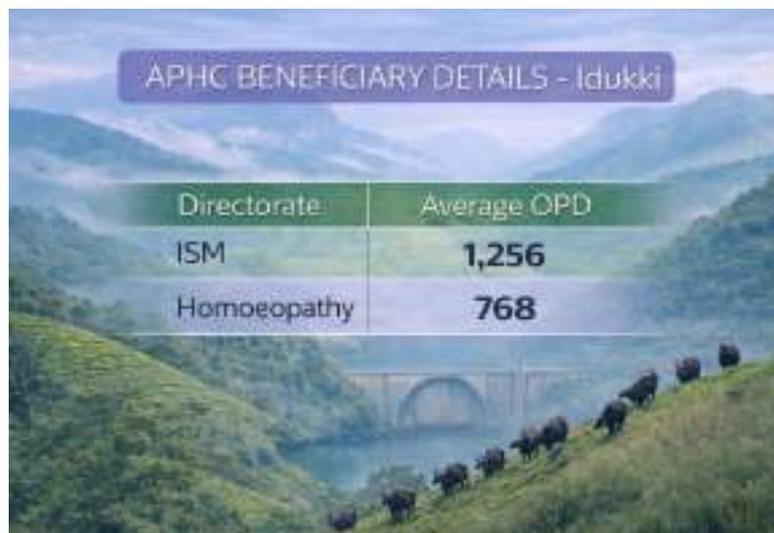


Figure 2.9.1.3 APHC beneficiary details

2.10 Public Health Programmes

2.10.1: Projects in Indian System of Medicine Department

- **Research Cell for Indian Systems of Sports Ayurveda** – Applies Ayurveda in sports medicine for injury prevention, treatment, and performance enhancement.
- **Geriatric Care Project** – Delivers comprehensive Ayurvedic care to improve the physical and emotional well-being of elderly patients.
- **Koumarabhrithya** – Offers Ayurvedic paediatric care for infections, nutritional issues, developmental problems, and post-COVID complications.
- **Prasoothithanthra** – Provides Ayurvedic gynaecology and obstetric services supporting women’s reproductive and maternal health.
- **Ksharasutra** – Specialised Ayurvedic treatment programme for piles, fissures, and fistulas with high success and low recurrence.
- **Nature Cure Hospital & Yoga Units** – Promotes drug-free lifestyle modification using yoga, naturopathy, diet, and holistic therapies.
- **Snehadhara** – A statewide Ayurvedic palliative care programme offering home-based support for bedridden and terminally ill patients.

2.10.2: Projects in Homoeopathy Department

- **Seethalayam** – A women-focused homeopathy project providing treatment and counselling, especially for domestic-violence-affected and emotionally distressed women.
- **Punarjani** – A de-addiction project offering homeopathic treatment and counselling for alcohol, drug, and tobacco dependence.
- **Janani** – An infertility care project providing holistic homeopathic management for male and female infertility with supportive diagnostics.
- **Sadgamaya** – A child and adolescent wellness project addressing behavioural, emotional, learning, and developmental challenges.

- **Ayushmanbhava** – A lifestyle-disease programme providing homeopathy-based care, counselling, and yoga support for NCD management.
- **Palliative Care** – A comprehensive home-based and institutional palliative service for bedridden, terminally ill, and chronic-disease patients.

2.10.3: Projects in National Ayush Mission

- **National Programme for Prevention & Management of Osteoarthritis & Musculoskeletal Disorders** - AYUSH-based screening, treatment, lifestyle modification and rehabilitation services for osteoarthritis and other MSDs through HWCs and AYUSH institutions.
- **Vayo Mitra – AYUSH Geriatric Healthcare Services** - Promotes healthy ageing and provides preventive, promotive and therapeutic AYUSH care for senior citizens through community and clinic-based services.
- **Ayurvediya – Healthy Lifestyle Promotion for School Children** - Creates awareness among school children on hygiene, nutrition, yoga, medicinal plants and AYUSH-based healthy living practices.
- **Snehadhara** –A statewide Ayurvedic palliative care programme offering home-based support for bedridden and terminally ill patients.
- **AYUSH Mobile Medical Unit (AMMU)** - Provides doorstep AYUSH healthcare, screening and IEC services to underserved and tribal populations in remote and inaccessible areas.
- **Karunya – AYUSH Palliative Services** - Delivers compassionate, holistic palliative and supportive care for patients with chronic and life-limiting illnesses through AYUSH interventions and home-based care.
- **Supraja – AYUSH Maternal & Neonatal Healthcare** - Ensures holistic antenatal and postnatal care using AYUSH regimens, yoga, nutrition counselling and neonatal support to improve maternal-child outcomes.

- **Ayurkarma** - Integrates Panchakarma therapies into rural Government Ayurveda Dispensaries to ensure affordable access to specialised Ayurvedic procedures.
- **Mental Health Specialty Clinics in AYUSH** - Offers Ayurveda and Homoeopathy-based mental health care for depression, anxiety, behavioural problems and women- and child-specific psychological needs.
- **Drishti – AYUSH Eye Care Programme** - Focuses on early detection and non-surgical management of eye diseases while preventing visual disorders through screening and affordable treatment.
- **Magalir Jyothi – Siddha Women’s Health Programme** - Strengthens women’s health and awareness using Siddha-based preventive, promotive and therapeutic interventions at community level.
- **Physiotherapy Units in Government AYUSH Hospitals** - Establishes physiotherapy services in AYUSH hospitals to support rehabilitation and chronic disease care.
- **Sports Ayurveda Project** - Provides Ayurveda-based injury prevention, treatment and performance enhancement support for athletes.
- **MPHW Support for Ayushman Arogya Mandirs** - Deploys trained Multi-Purpose Health Workers to strengthen AYUSH primary care, outreach, NCD care and public health services.
- **Arunima – Anaemia Eradication through Ayurveda** - Implements Ayurvedic screening, counselling and treatment programmes to reduce nutritional anaemia, especially among vulnerable populations.
- **Homoeopathy Thyroid Special Clinic** - Provides community-based screening and holistic Homoeopathic management of thyroid disorders with special focus on women.
- **Training & Capacity Building for AYUSH HR** -Enhances skills and service quality of AYUSH professionals through structured clinical, administrative and digital health training.

- **Yoga Wellness Centres** - Promotes Yoga and Naturopathy-based lifestyle modification and NCD prevention through dedicated wellness centres.
- **NCD Management through AYUSH** - Provides integrated AYUSH-based prevention, screening and management of major non-communicable diseases across the State.
- **IEC Activities & Public Awareness Initiatives** - Strengthens public awareness on AYUSH facilities, programmes and achievements through newsletters, campaigns and participation in events.
- **AYUSH Gram** - Promotes AYUSH-based lifestyle, herbal awareness, yoga and preventive healthcare practices at the village level through community-based initiatives.

2.11 Standardisation of Institutions

In Idukki district, a total of 20 AYUSH institutions have obtained NABH Entry Level Certification, comprising 12 under ISM and 8 under Homoeopathy. Additionally, 43 facilities are functioning as Ayushman Arogya Mandirs–A, reflecting progress in standardisation and quality assurance of AYUSH healthcare services.



Directorate	NABH ELC	AAMA
Homoeopathy	8	17
ISM	12	26
Total	20	43

Table 2.11: Standardisation of Institution

There isn't a full-fledged Government Ayurveda College in Idukki yet, but a new Government Ayurveda College Hospital is being developed in Udumbanchola, Idukki, with plans for OP/IP services and specialty departments, building on proposals to establish an Ayurveda hub there. Currently, key government Ayurveda colleges in Kerala are in Thiruvananthapuram, Kannur, and Tripunithura, offering BAMS and postgraduate studies, with Idukki's initiative aiming to expand access and research

2.12 Digital Health

- ISM-eHospital – A digital hospital management system currently implemented in 10 AYUSH institutions for streamlining patient care, records, and hospital services.
- AHIMS (Ayush Hospital Information Management System) – A comprehensive AYUSH health-data and service-delivery platform implemented in 42 institutions to support digital health transformation.



Table 2.12: Details of Digital Health

2.13 Laboratory & Diagnostic Facilities

Idukki district has five AYUSH laboratory and diagnostic facilities, comprising three under ISM and two under Homoeopathy, supporting essential investigations and strengthening the quality of clinical services across AYUSH institutions.



Table 2.13: Details of Laboratory facilities

2.14 Financial Expenditure

The financial performance of AYUSH programmes in Idukki district during 2023–24 and 2024–25 reflects efficient fund utilisation under both ISM and Homoeopathy. ISM recorded expenditures of ₹83.07 lakhs and ₹92.08 lakhs against releases of ₹82.87 lakhs and ₹88.76 lakhs respectively, indicating timely and effective utilisation. Homoeopathy achieved near-full utilisation with expenditures of ₹88.13 lakhs out of ₹91.56 lakhs in 2023–24 and complete utilisation of ₹78.35 lakhs in 2024–25. Overall, the high level of expenditure against released funds demonstrates sound financial management and effective implementation of AYUSH programmes in the district.



Figure 2.14: Financial Expenditure

Chapter 3

DEPARTMENT OF INDIAN SYSTEMS OF MEDICINE

FACILITIES & SERVICES

3.1 Introduction

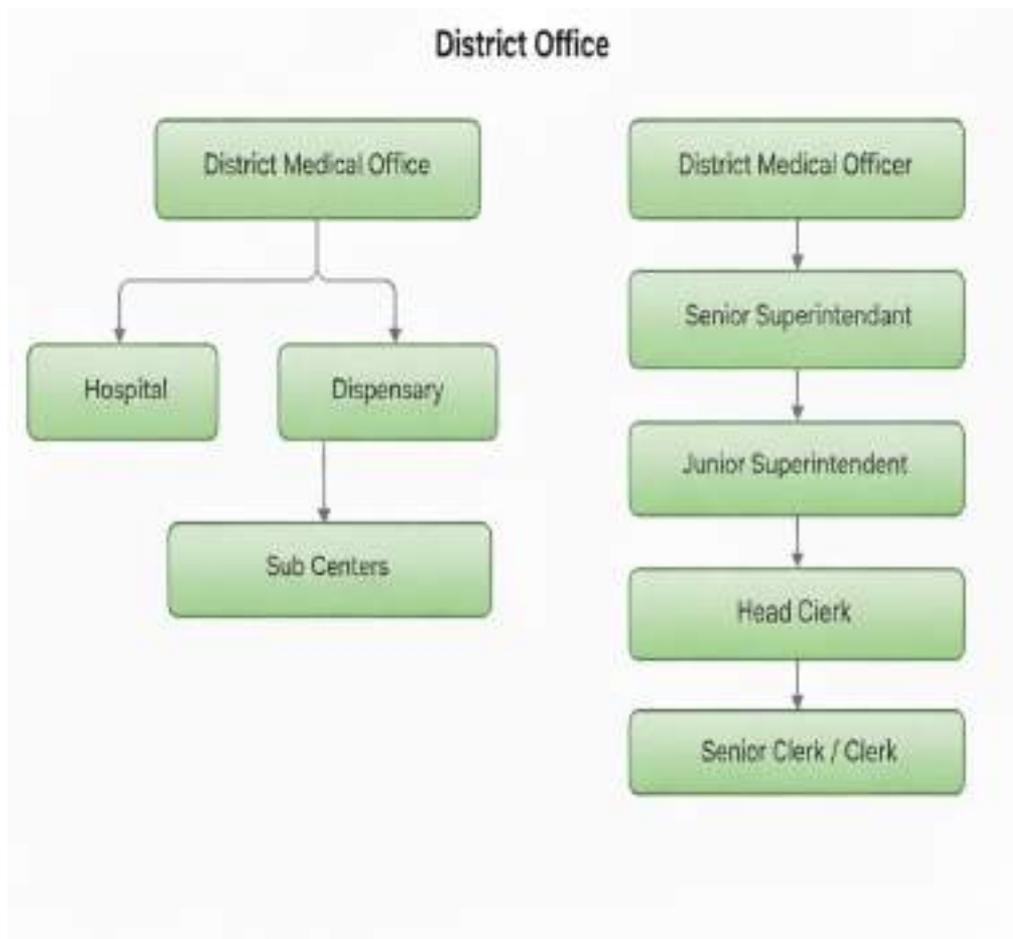
Idukki District, situated in the central high ranges of Kerala and forming an integral part of the Western Ghats, is characterized by undulating terrain, dense forest cover, rich biodiversity, and a predominantly agrarian economy centered on plantation crops such as cardamom, pepper, tea, and coffee. The district has a significant tribal and rural population, with settlements often located in remote and hilly areas, where access to conventional health services may be limited, thereby underscoring the relevance and acceptance of the Indian Systems of Medicine (ISM) including Ayurveda, Siddha, Yoga, Naturopathy, Unani, and Homoeopathy. The cool and humid climatic conditions, high rainfall, and forest-human interface contribute to district-specific health concerns such as musculoskeletal disorders, respiratory ailments, lifestyle diseases among plantation workers, vector-borne diseases, snakebite incidents, and occupational health issues, for which ISM interventions have preventive, promotive, and curative significance. Idukki is also environmentally sensitive and disaster-prone, with recurrent risks of landslides, floods, dam-related emergencies, and seismic vulnerability (moderate risk zone), necessitating resilient, community-based, and integrative healthcare approaches. The district's rich tradition of medicinal plants and indigenous healing practices further strengthens the scope for conservation, documentation, and systematic integration of Indian Systems of Medicine into public health preparedness, disaster response, and long-term health promotion strategies, in alignment with Government policies and sustainable development goals.

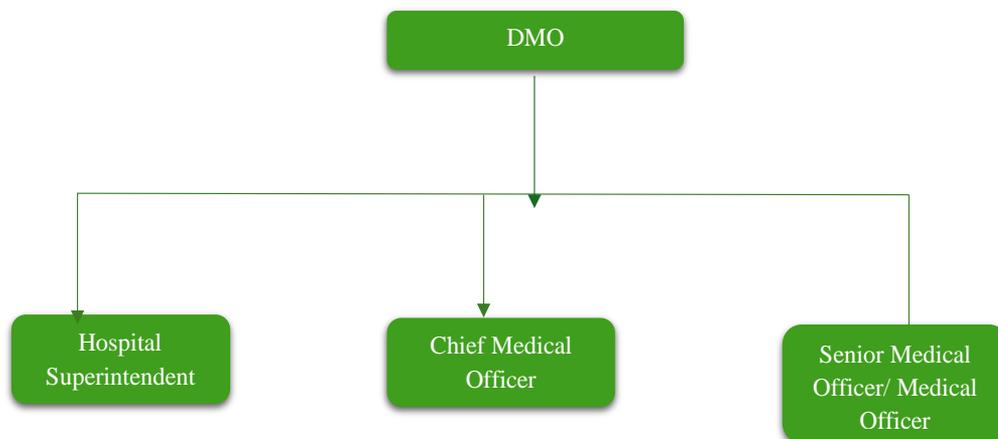
3.2 Administration

The ISM Department delivers comprehensive Ayurveda services as part of the public healthcare system, focusing on preventive, promotive and curative care through a network of government hospitals and dispensaries throughout Kerala, including Idukki district. The District Medical Officer (DMO), Idukki, is responsible for administering ISM-related health

services, including Ayurveda, Yoga and Siddha (AYUSH) facilities in the district. The DMO oversees the functioning of ISM hospitals, dispensaries and wellness centres, ensuring the delivery of quality healthcare based on traditional systems of medicine. The ISM Department administers multiple Government ISM Hospitals and Dispensaries in Idukki district, which provide general consultations, chronic disease management and traditional medicine treatments. These services include both out-patient (OP) and in-patient (IP) care for a wide range of health conditions, delivered in accordance with authentic Ayurvedic principles.

3.2.1 District Administration of the Department





3.2.2 District Medical Office Profile

Table No: 3.2.2: District Medical office Profile

Post	Office Address	Office Number	Mail id
District Medical officer	The District Medical Office, Indian Systems of Medicine, Idukki Civil Station, Kuyilimala, Painavu, Idukki-685 603	04862 232318	ismidukki@gmail.com

Source: District data

3.2.3 Structure of DMO office

The administrative staffing pattern of the District Office of Indian Systems of Medicine, Idukki comprises a total staff strength of 13 personnel, functioning under the leadership of

the District Medical Officer. The availability of clerical, typing, data entry, and support staff facilitates efficient administrative operations, systematic record maintenance, accurate data management, and essential logistical support. This staffing structure enables effective coordination, monitoring, and supervision of Indian Systems of Medicine institutions across the district.

Table 3.2.3 Structure of DMO office

Sl. No.	Designation	No. of staff
1	District Medical Officer	1
2	Senior Superintendent	1
3	Head Clerk	1
4	Senior Clerk higher grade	1
5	Senior Clerk	1
6	Clerk	2
7	Selection Grade Typist	1
8	Office Attendant	1
9	Driver Senior Grade	1
10	P T S	1
11	Data Entry Operator (PLAN)	1
TOTAL		12

Source: District data

3.3 Infrastructure Profile of the District

The Indian Systems of Medicine (ISM) infrastructure in Idukki district reflects a well-distributed public healthcare network adapted to its high-range terrain and dispersed settlements. The district has 3 ISM hospitals with 180 beds supported by a strong primary-level network comprising 45 Government Ayurveda dispensaries, 1 Government Siddha dispensary, and 5 Scheduled Tribe (ST) dispensaries, ensuring access to traditional healthcare for remote and tribal populations. In addition, services are strengthened through the National Health Mission (NHM) with 10 Ayurveda dispensaries and 3 Siddha dispensaries, while 26 AAM (AYUSH Arogya Mandir) institutions further enhance community-based care. Altogether, the district has a total of 67 ISM institutions, underscoring the significant role of Ayurveda and allied systems in delivering accessible, culturally appropriate healthcare across Idukki.

Twelve Government Ayurveda Dispensaries in Idukki district have successfully achieved NABH accreditation, and ten are under process for the same, demonstrating adherence to established quality standards in patient care, safety, and institutional management. Under the Kayakalp initiative, Four Government Ayurveda Dispensaries in Idukki district achieved evaluation scores above 90%, with GAD Kudayathoor securing first prize, reflecting high standards of service quality and institutional performance.

3.3.1 Details of Facilities

Idukki district has a total of 67 Indian Systems of Medicine health institutions, comprising hospitals, dispensaries, AYUSHMAN Arogya Mandirs, PHCs, and tribal dispensaries, ensuring comprehensive coverage of Ayurveda and Siddha services across the district, including remote and tribal areas. Ayushman Arogya Mandir (AYUSH) includes one Siddha institution.

Table No: 3.3.1: Details of ISM health facilities

Sl no	Type of Health Institution Facility	Total no: in the district
1	District Hospital	1
2	Government Ayurveda Hospital	2

5	Government Ayurveda Dispensary	20
6	Ayushman Arogya Mandir (AYUSH)	26
7	Ayush Primary Health Centre Ayurveda	10
8	Ayush Primary Health Centre Sidha	3
9	Government Ayurveda Tribal Dispensary	5
	Total	67

Source: District data

Details of ISM Facilities are attached as Annexure 3.3.1

3.3.2 Hospital Details based on Bed Strength

Idukki district has three Government ISM hospitals with a combined bed strength of 180, providing secondary-level inpatient care under the Indian Systems of Medicine framework. Siddha has an attached unit available at DAH, Thodupuzha which has 100 bed strength.

Table No: 3.3.2: Hospital Details based on Bed Strength

Sl no	Hospitals based on bed strength	Hospital number	Bed strength
1	Govt. Hospital (30 Bedded)	1	30
2	Govt. Hospital (50 Bedded)	1	50
3	Govt. Hospital (100 Bedded)	1	100
	Total No. Of Beds/ Hospitals	3	180

Source: District data

3.3.3 Health Facilities in Urban and Rural Areas

Idukki's ISM network is overwhelmingly rural, with 66 out of 67 institutions located in rural areas, reflecting the district's high-range terrain and dispersed population. Only one hospital

(D A H Thodupuzha) is located in an urban area (Thodupuzha MC). Rural coverage includes dispensaries, PHCs, AAMs, and tribal facilities, ensuring access to Ayurveda and ISM services across remote and tribal regions.

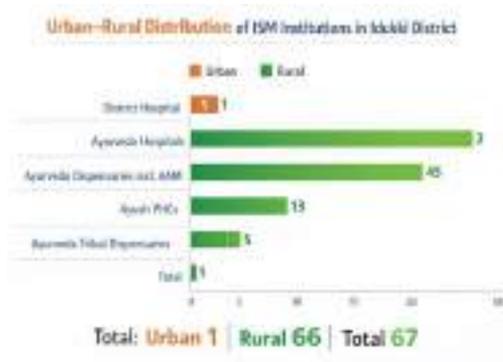


Figure 3.3.3 Health Facilities in Urban and Rural Areas

Table 3.3.3 Health Facilities in Urban and Rural Areas

Sl no	Type of Health Institution Facility	Total no: in the district	urban	rural
1	District Hospital	1	1	
2	Government Ayurveda Hospital	2		2
3	Government ISM Dispensary including Ayushman Arogya Mandir	45		45
4	Ayushman Arogya Mandir (AYUSH) SIDHA	1	0	1
5	Ayush Primary Health Centre	13		13
6	Government Ayurveda Tribal Dispensary	5	0	5
	Total	67	1	66

Source: District data

3.4 Human Resource Profile of the District

The Indian Systems of Medicine services in the district are supported by a structured workforce comprising medical, paramedical, administrative, and support staff.

3.4.1 Medical professionals under ISM

Idukki district has a total of 111 medical professionals across ISM and NHM/NAM programs. Under ISM, the workforce includes 1 District Medical Officer, 1 Hospital Superintendent, 3 Chief Medical Officers, and 62 Medical Officers. Additionally, the NHM/NAM cadre comprises 16 NHM Medical Officers and 28 NAM Medical Officers, supporting both traditional and modern public health services throughout the district.

Table 3.4.1 Medical professionals under ISM

Sl no	Category	Sanctioned	Filled	Vacant
Medical Professionals under the ISM				
1	District Medical Officer	1	1	0
2	Superintendent (Hospital)	1	1	
3	Chief Medical Officers	3	3	0
4	Medical Officer	62	54	8
	Total	67	67	0
Medical Professionals Under NAM/ NHM				
1	Medical officer (NHM)	16	16	0
2	Medical officer (NAM)	28	28	0
	Total	44	44	0
	Grand Total	111	111	

Source: District data

3.4.2 Details of Paramedical posts Sanctioned under the ISM department in the District

The supporting staff in Idukki district ISM institutions includes nurses, pharmacists, lab technicians, therapists, attendants, nursing assistants, and radiographers. Most positions are filled, ensuring smooth operation of healthcare services, patient care, and allied support functions across hospitals, dispensaries, and primary health centres.

Idukki district ISM facilities are supported by cooks, sanitation workers, and sweepers (both full-time and part-time), ensuring smooth operation of day-to-day services, maintenance of cleanliness, and hygiene across hospitals, dispensaries, and primary health centres.

Table 3.4.2.1- Details of Paramedical posts Sanctioned under the ISM department in the district

Sl no	Designation	Sanctioned	Filled	Vacant
1	Nurse	20	20	0
2	Pharmacist	55	53	2
3	Lab Technician	1	0	1
4	Therapist	12	11	1
5	Attender	52	52	0
6	Nursing assistant	14	14	0
7	Radiographer	1	1	-

Source: District data

Table 3.4.2.2- Details of Other posts Sanctioned under the ISM in the District

Sl no	Designation	Sanctioned	Filled	Vacant
1	Cook	4	4	0
2	Sanitation Worker	5	5	0
3	Full Time Sweeper	1	1	0
Other Supporting Staff				
1	Part Time Sweeper	37	37	0

Source: District data

3.5 Beneficiary Details

Understanding beneficiaries is crucial for designing effective health policies, allocating resources efficiently, and ensuring that healthcare services reach those in need. In Idukki district, all hospitals provide effective Outpatient (OPD) and Inpatient (IPD) services according to their respective bed strength. The average monthly OPD and IPD figures across district ISM hospitals are presented below.

3.5.1 ISM Hospitals

ISM hospitals in Idukki district cater to a substantial number of patients each month. D A H Thodupuzha, with 100 beds, records the highest OPD load (6,896 patients) and IPD admissions (199 patients), reflecting its central role in providing traditional healthcare. Smaller facilities like DAH Annex Paremavu and GAH Kallar also contribute significantly to accessible primary and secondary care, particularly for rural and tribal populations.

Detailed beneficiary details in the Hospitals are attached as annexure 3.5.1

3.5.2 ISM Dispensaries

In addition to the mainstream Ayurveda dispensaries, Idukki district also has GSD Pallivasal representing Siddha services and five tribal-focused institutions—GATD Champakkad, GATD Mannamkandam, GATD Kanchiyar, GATD Naliyani, and GATD Nadukani—providing

Ayurveda services to tribal populations, ensuring inclusive access to traditional healthcare across the district.

The average monthly OPD across Idukki district's ISM dispensaries ranges from 369 patients at GAD Edamalakkudy to 1,803 patients at GAD Vazhithala, reflecting both population density and accessibility. Larger dispensaries such as GAD Karimkunnam, GAD Kattappana, and GAD Kumaly record high patient loads, highlighting their central role in delivering primary traditional healthcare services to rural and tribal populations.

Detailed beneficiary details in the Dispensaries are attached as annexure 3.5.2

3.5.3 APHC dispensaries

The NHM-supported AYUSH institutions in Idukki district record a consistently high outpatient load, with average monthly OPD ranging from about 1,017 to 1,756, indicating strong community utilization of AYUSH services, particularly in Konnathady, Adimali, Udumbanchola, and Upputhara areas.

Detailed beneficiary details in APHC are attached as annexure 3.5.3

3.6 District Panchayath Projects

3.6.1 Vayonidhi

Designed for geriatric care (above 60 years) through ISM and District Panchayath aiming at the wellbeing and improving the quality of life. Project implemented in 2025-26. Project allocation- Rs. 30,00,000/-. Project Running institutions- 60 (2 Hospitals & 58 Dispensaries)

3.6.2 Mathruvandanam

Mathruvandanam is a special project conducted in Idukki District by Idukki District Panchayath, under Indian Systems of Medicine Department since 2014. Aim of the project is to develop a healthy future generation by giving special antenatal care to pregnant ladies through Ayurveda. Postnatal care for healthy motherhood and neonatal care also included in the project. Through this project importance of nutrition, healthy lifestyle, exercise and emotional wellbeing during antenatal and postnatal periods are also taken care. The project is implemented through ISM and NHM dispensaries in all 52 Grama Panchayat region in Idukki except in Thodupuzha and Kattappana Municipalities. Activities include detailed case

taking, examinations, treatments, antenatal care, starting from first trimester and postnatal care upto 45 days. Medicines given to neonates up to 28 days. Mathruvandanam is not merely giving medicine to a pregnant lady, it gives physical mental and social support to the family.

Details of Matruvandanam projects are attached as Annexure 3.6.2

3.7 LSGD Projects

LSGD-supported projects in Idukki district demonstrate a strong focus on women, senior citizens, tribal populations, and lifestyle disease management. Significant investments were made in tribal outreach, including mobile clinics, ST colony medical camps, and Sidha/Tribal Dispensary-based interventions. Large-scale initiatives such as Sthreeshakti, COVID-19 response projects, and senior citizen care programmes reflect effective decentralised planning and sustained financial commitment by Local Self Government Institutions to strengthen AYUSH and ISM service delivery across rural and tribal areas of the district.

LSGD-supported AYUSH projects were implemented across multiple institutions from 2020–21 to 2024–25, demonstrating sustained local-body investment in promotive, preventive, and curative healthcare. These initiatives strengthened grassroots health services by funding a mix of community outreach, facility upgrades, capacity building, and patient-care activities, helping to broaden access to traditional medicine, support wellness programs, and address local health needs over the five-year period.

A wide range of thematic projects—such as Hridyam, Janani, Swasthyam, Streeroga Chikitsa, Thenum Vayambum, tribal medical camps, mobile tribal clinics, women- and senior citizen-focused programmes, yoga training, lifestyle disease control, palliative care (Arike), and post-COVID interventions—have been executed through Government Ayurveda Dispensaries (GADs), District Ayurveda Hospitals (DAH), annex hospitals, and NHM-supported institutions. Funding levels vary by project scope and year, with major allocations seen for tribal health programmes, COVID-19 special projects, Sthreeshakti, mobile clinics, and senior citizen initiatives, while several recurring community-level projects demonstrate consistent annual support. Overall, the table highlights the strategic role of LSGDs in strengthening decentralized AYUSH healthcare delivery, addressing local health priorities,

and ensuring inclusive coverage for vulnerable groups such as women, senior citizens, tribal populations, and post-COVID patients.

Details of LSGD projects are attached as Annexure 3.7

3.8 Department Plan Projects

The Department of ISM conducts a broad spectrum of public health programmes and speciality clinics aimed at addressing diverse health needs within the community. The support of the National AYUSH Mission is also on hand for these projects.

3.8.1 Research Cell for Indian Systems of Sports Ayurveda

This project applies Ayurvedic principles in sports medicine, focusing on injury prevention, management, rehabilitation, and performance enhancement. Implemented through Sports Ayurveda Research Cell (SARC) units and KISAR, it supports state and national-level sports persons and improves endurance, strength, and recovery.

Table 3.8.1: Research Cell For Indian Systems of Sports Ayurveda Annual Report (2022-2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	8.63L	1267
2	2023-24	7.14L	1742
3	2024-25	4.04L	2043

Source: District data

3.8.2 Snehadhara

Snehadhara is a palliative care programme implemented across all districts, providing home-based Ayurvedic nursing care for bedridden and terminally ill patients. The project significantly improves physical comfort, psychological health, and overall quality of life while reducing financial burden on families.

Table 3.8.2: Snehadhara Annual Report (2022-2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	5.16 L	440
2	2023-24	6.83 L	475
3	2024-25	6.38 L	907

Source: District data

3.8.3 Geriatric Care Center

This project addresses health issues of the elderly population (60+) through Ayurvedic management, physiotherapy, yoga, counselling, and supportive care. It aims to reduce morbidity, improve mobility, manage comorbidities, and enhance physical, mental, and emotional well-being.

Table 3.8.3: Geriatric Care Project Annual Report (2022-2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	8.49L	1397
2	2023-24	7.10 L	1450
3	2024-25	6.09L	1723

Source: District data

3.8.4 Koumarabhrithya

Koumarabhrithyam provides comprehensive Ayurvedic paediatric care, including management of infections, nutritional deficiencies, developmental disorders, and post-COVID conditions. The project has shown high treatment adherence and significant improvement in children's health and quality of life.

Table 3.8.4: Koumarabhrithya Annual Report (2022–2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	7.31 L	1295
2	2023-24	6.12 L	1619
3	2024-25	4.94 L	1730

Source: District data

3.8.5 Prasoothithantha

This project offers specialized Ayurvedic gynaecology and obstetric services, including antenatal, postnatal, menstrual, menopausal, and reproductive health care. It has demonstrated effective outcomes in women's health, postnatal recovery, menstrual disorders, and menopausal symptoms.

Table 3.8.5: Prasootithantha Annual Report (2022–2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	9.24 L	2107
2	2023-24	7.56 L	2216
3	2024-25	7.16 L	2323

Source: District data

3.8.6 Ksharasutra

Ksharasutra units provide effective Ayurvedic treatment for anorectal disorders such as piles, fissures, and fistulas. The project is known for low recurrence, minimal complications, cost-effectiveness, and high patient satisfaction, including successful management of complex and recurrent cases.

Table 3.8.6: Ksharasutra Annual Report (2022–2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	1.67 L	344
2	2023-24	1.79 L	640
3	2024-25	2.13 L	985

Source: District data

3.8.7 NATURE CURE and YOGA Units

These units promote drug-free lifestyle management through yoga, naturopathy, diet regulation, and lifestyle modification. Implemented statewide, the project has shown significant improvement in non-communicable diseases, musculoskeletal disorders, metabolic conditions, and mental health.

Table 3.8.7 Nature Cure Hospital and Yoga Units Annual Report (2022–2025)

Sl No	Year	Expenditure	No. of patients
1	2022-23	3.67L	4176
2	2023-24	2.92L	4356
3	2024-25	2.99L	4436

Source: District data

3.9 Standardisation of Institutions

3.9.1 NABH - Entry-level Accreditation

National Accreditation Board for Hospitals & Healthcare Providers (NABH) provides a standardized quality framework to enhance patient safety and service excellence in healthcare institutions. NABH standards are being adopted in ISM institutions to strengthen clinical governance, documentation, and patient-centric service delivery, thereby improving

overall quality of care.

A total of 22 Government Ayurveda Dispensaries in Idukki district are engaged in the NABH accreditation process, reflecting a strong commitment to quality assurance and patient safety. Of these, 12 institutions have successfully achieved NABH accreditation, indicating compliance with prescribed standards of service delivery, infrastructure, and clinical practices. The remaining 10 dispensaries are currently under the ongoing stage of accreditation, demonstrating continuous efforts toward quality improvement. This progressive expansion of NABH-accredited facilities highlights the district's systematic approach to strengthening institutional standards within the Indian Systems of Medicine and enhancing the overall quality of public Ayurveda healthcare services.

Table.1 : List of the NABH-accredited facilities

Sl. No	Name of Facility	NABH Level	Status
1	GAD Vazhithala	I Phase	Achieved
2	GAD Karimannoor	I Phase	Achieved
3	GAD Kodikulam	I Phase	Achieved
4	GAD Munnar	I Phase	Achieved
5	GAD Rajakkad	I Phase	Achieved
6	GAD Vathikudy	I Phase	Achieved
7	GAD Alakode	II Phase	Achieved
8	GAD Kattappana	II Phase	Achieved
9	GAD Kudayathoor	II Phase	Achieved
10	GAD Pachady	II Phase	Achieved
11	GAD Pooppara	II Phase	Achieved
12	GAD Udumbannoor	II Phase	Achieved
13	GAD Kanthalloor	III Phase	Ongoing

14	GAD Karimkunnam	III Phase	Ongoing
15	GAD Marayoor	III Phase	Ongoing
16	GAD Mlamala	III Phase	Ongoing
17	GAD Peruvanthanam	III Phase	Ongoing
18	GAD Puthuppariyaram	III Phase	Ongoing
19	GAD Ezhallor	III Phase	Ongoing
20	GAD Arakkulam	III Phase	Ongoing
21	GAD Upputhode	III Phase	Ongoing
22	GAD Chelachuvad	III Phase	Ongoing

Source: District data

3.9.2 Kayakalp

The Kerala AYUSH Kayakalp Award is a state-level initiative under National AYUSH Mission Kerala, designed to promote cleanliness, hygiene, and quality improvement in AYUSH healthcare institutions. The program recognizes hospitals and dispensaries that maintain high standards in sanitation, waste management, infection control, and patient safety.

Under the Kayakalp programme, four Government Ayurveda Dispensaries in Idukki district demonstrated outstanding performance in cleanliness, hygiene, and quality of care. GAD Kudayathoor secured the First Prize with a score of 92.50%, while GAD Alakodu (91.25%), GAD Vazhithala (90.83%), and GAD Kodikkulam (90.83%) received commendation awards, reflecting sustained institutional efforts toward maintaining high standards of public Ayurveda healthcare services.

Table 3.9.2 : List of Institutions which have received the Kayakalp award.

Sl. No.	Facility Name	Category (Dispensary/Hospital)	Prize
1	GAD Kudayathoor	Dispensary	First prize-1 lakh
2	GAD Alakodu	Dispensary	Commendation-30000/-
3	GAD Vazhithala	Dispensary	Commendation-30000/-
4	GAD Kodikkulam	Dispensary	Commendation-30000/-

Source: District data

3.10 Ayushman Arogya Mandir - AYUSH

Ayushman Arogya Mandir – AYUSH (AAM-A) have been established to strengthen comprehensive primary healthcare delivery through the AYUSH systems of medicine, in alignment with national health priorities. With the assistance of the National AYUSH Mission (NAM), Kerala, existing Government Dispensaries institutions are being upgraded as AAM to provide promotive, preventive, and curative healthcare services. These centres focus on wellness-based interventions, lifestyle modification and Yoga adoption into the public health system. The initiative aims to enhance accessibility, quality, and continuity of AYUSH healthcare services at the community level, while ensuring standardised service delivery across the State.

List of Institutions upgraded as Ayushman Arogya Mandir (AAM-A) are attached as Annexure 3.10

3.11 Digital Health

3.11.1 NextGen e-Hospital and ABDM activities

NextGen e-Hospital system is implemented by the Department of Indian Systems of Medicine (ISM), Government of Kerala, as part of the state's digital governance and

healthcare reform initiatives. Introduced to address long-standing challenges such as overcrowding, manual workflows, and patient waiting time in government AYUSH institutions, the system represents an upgraded, cloud-based Hospital Management Information System fully compliant with the Ayushman Bharat Digital Mission (ABDM).

The NextGen e-Hospital integrates key digital modules including OPD/IPD management, ABHA-based registration, Scan & Share self-registration, e-prescriptions, billing, laboratory and pharmacy services, inventory management, and real-time data capture. Its implementation has significantly improved service efficiency, transparency, coordination among departments, and accuracy of patient records, while reducing registration time from 40–50 minutes to approximately 5 minutes. As of the study period, 240 ISM institutions were operational on the platform, with others in advanced stages of onboarding, and several institutions recognised nationally as ABDM model facilities. The NextGen e-Hospital system has been implemented across multiple districts with varying degrees of coverage. The NextGen e-Hospital system has been implemented across multiple districts with varying degrees of coverage. Idukki has 49 institutions, with 10 functioning as e-Hospitals.



Figure 3.11 NextGen e Hospital

3.12 Health Infrastructure Development

Health infrastructure development under the ISM Department in Idukki focuses on upgrading institutions and improving service delivery across centres providing traditional and indigenous healthcare. Priority areas include strengthening buildings, enhancing outpatient and inpatient facilities, modernising therapy and procedure rooms, and improving overall patient amenities—especially considering the district’s hilly terrain and widely dispersed population. These initiatives are supported through funding from NAM, LSGD, and MLA/MP LAD schemes, enabling better-equipped centres and more accessible ISM services throughout Idukki.

The following works highlight key infrastructure development initiatives undertaken in ISM institutions of Idukki district with support from MLA, NAM, and LSGD funds, aimed at strengthening service delivery, research, and wellness facilities:

Between 2016 and 2018, new OP buildings were constructed at Government Ayurveda Dispensary Rajakkad and Government Ayurveda Dispensary Karimkunnam, and a dedicated OP ward for children was added at District Ayurveda Hospital, Thodupuzha, all with MLA fund support, and subsequently inaugurated between 2020 and 2024. In 2023, the establishment of a Sports Ayurveda Research Cell at District Ayurveda Hospital, Thodupuzha under the NAM fund marked a significant step toward integrating Ayurveda with sports medicine and research.

More recently, during 2024–25, multiple institutions benefitted from NAM and LSGD-supported infrastructure upgrades, particularly the construction of yoga halls at Upputhode, Chelachuvad, Munnar, and Puthuppariyaram, enhancing facilities for preventive and promotive health services. Additional improvements, including a new pharmacy counter and car porch, were completed at Government Ayurveda Dispensary Alakode using LSGD funds. All listed projects have been successfully completed and inaugurated, reflecting sustained investment in upgrading physical infrastructure and expanding service capabilities across Ayurveda institutions in the district

Details of completed and ongoing works in ISM department are attached as annexure 3.12.

3.13 Laboratory & Diagnostic Facilities

Clinical laboratory services play a vital role in supporting accurate diagnosis, treatment planning, and patient monitoring in ISM institutions. In Idukki District, laboratory facilities are made available through a combination of institution-owned laboratories and associated external laboratories to ensure continuity of clinical services.

Out of the total ISM institutions in Idukki, 3 hospitals are equipped with in-house laboratory facilities, enabling timely diagnostic services and improving the quality of patient care. While a limited number of institutions maintain in-house Laboratory facilities, the majority of institutions are supported through functional laboratory linkages, enabling access to essential diagnostic investigations. Regular ISM demonstrate comparatively higher laboratory availability, whereas APHC-level institutions primarily rely on associated laboratory services. This arrangement ensures that patients receive necessary diagnostic support despite infrastructural limitations, thereby strengthening service delivery at the institutional level.

3.14 Financial Expenditure

The financial performance of the ISM Department in Idukki district over the last two financial years reflects effective fund utilisation and steady expansion of service delivery.

During 2023–24, an allocation of ₹121.77 lakh was provided, against which ₹82.87 lakh was released. The department recorded an expenditure of ₹83.07 lakh, demonstrating efficient utilisation of available resources to support healthcare services and institutional development.

In 2024–25, the allocated amount increased to ₹132.83 lakh, with ₹88.76 lakh released and an expenditure of ₹92.08 lakh, indicating enhanced financial commitment and accelerated implementation of healthcare programmes and infrastructure improvements.

Overall, the trend shows progressive growth in budget allocation and consistent expenditure performance, underscoring the department's strong financial management capacity and its commitment to strengthening Indian Systems of Medicine services across the district.

Table 3.14: Details for Financial Expenditure

Year	Allocated amount (in Lakhs)	Released Amount(in Lakhs)	Expenditure
23-24	121.7659	82.87356	83.07356
24-25	132.82504	88.7581	92.07856

Source: District data

3.15 Other Activities

3.15.1 Ayurveda Day celebration

A one-week celebration for 10th Ayurveda Day was held from September 23 to September 30, 2025. The program was inaugurated, followed by a rally to raise awareness. A series of competitions were organized, including Photography, Short Rhyme Writing, Ayur Chef, and Ayurvedya Project Herbal Gard competition (School Level Video), encouraging creative participation in promoting Ayurvedic principles. For professional up skilling, a Shalakyatantra Class with a live demonstration was conducted for Medical Officers. Furthermore, two medical camps were successfully held: a Prasooti Camp at New Man College, where educational classes were given on crucial women's health topics such as PCOD, Menstrual Hygiene, and Endometriosis. An additional outreach class was conducted at the Thodupuzha Block Panchayat focusing on Post-Menopausal Syndrome and its Management, underscoring the commitment to community health education through the lens of Ayurveda.



Figure 3.15.1 Ayurveda Day celebrations

3.15.2 NABH ELC Staff Recognition Ceremony

A recognition ceremony for the staff of the institutions that achieved the prestigious NABH Entry-Level Certification (ELC) was held on July 15 at the Collectorate Conference Hall, Painavu. The event was formally inaugurated by the District Collector, Smt. V. Vighneshwari IAS, who highlighted the significance of the institution's commitment to upholding national standards of quality healthcare and patient safety. The ceremony honoured the collective efforts of the staff whose dedication made this achievement possible.



Figure 3.15.2 NABH ELC Staff Recognition Ceremony on July 15 at the Collectorate Conference Hall, Painavu

A training program aimed at achieving the Kaya Kalpa Award for AYUSH institutions was successfully conducted on February 5 at the Collectorate Conference Hall, Painavu. The session specifically targeted Multipurpose Health Workers (MPHWs) and Attenders, acknowledging their crucial role in maintaining the highest standards of cleanliness, hygiene, and sanitation.

This focused training equipped the support staff with essential knowledge and practical skills required to follow the rigorous protocols of the Kaya Kalpa initiative. The program plays a vital role in ensuring a safe, clean, and patient-friendly environment within the institution.

3.15.3 Snehadhara -Palliative Care Hospital Inauguration

The Palliative Care Hospital, an integral component of the Snehadhara project, was officially inaugurated on April 24, 2025. This vital new facility, dedicated to delivering compassionate and holistic palliative care, is located at the DAH Annex, Paremavu. The inauguration marks a significant milestone in strengthening the district's palliative care services, ensuring enhanced support, comfort, and dignity for patients requiring specialized end-of-life care under the Snehadhara initiative.



Figure 3.15.3 Snehadhara -Palliative Care Hospital Inauguration

3.15.4 Siddha Day Celebration

The Siddha Day Celebration was observed on February 3, 2025, at the SNDP Hall, Arikuzha. The event aimed to promote and raise awareness about the Siddha system of medicine, one of India's oldest and most respected traditional healing systems.

A medical camp and awareness session were conducted as part of the program, focusing on sensitizing the community to the holistic principles of Siddha—covering healthcare, disease prevention, and overall wellness.



Figure 3.15.4 Siddha Day Celebration at the SNDP Hall, Arikuzha

3.15.5 International Yoga Day - Highlights

The International Yoga Day Celebration on June 23 at Pappootty Hall, Thodupuzha featured a Yoga seminar, practical demonstration, and competitions including a Yoga Competition for Instructors and a Yoga Photography Contest for AYUSH Yoga Club Members. The event effectively promoted Yoga practice and holistic well-being.



Figure 3.15.5 International Yoga Day Celebration on June 23 at Pappotty Hall, Thodupuzha

3.15.6 Antimicrobial Resistance Campaign

In connection with World Antimicrobial Resistance (AMR) Awareness Week 2025, a series of awareness activities were conducted across Idukki district from 18 November to 27 November 2025. All institutions under the Department of Indian Systems of Medicine actively participated in the observance. As part of the campaign, posters and banners on AMR awareness were displayed in all health facilities. Institutions also organized the AMR Awareness Pledge, along with awareness classes aimed at educating the public on the importance of responsible antimicrobial use and infection prevention. In addition to health facilities, various community spaces such as Anganwadis, AYUSH Yoga Clubs, workplaces under employment guarantee schemes, and schools also conducted awareness sessions and related activities.



Figure 3.15.6 Antimicrobial Resistance Campaign

3.15.7 Sukhadam Medical Camp

The Sukhadam Medical Camp was a successful collaborative initiative between the Vocational Higher Secondary Education (VHSE) and the Indian Systems of Medicine (ISM) Department. This joint program was specifically organized to conduct comprehensive medical camps for students, ensuring their well-being and promoting preventive healthcare. The camps provided an opportunity for students to receive general health check-ups, consultations with ISM practitioners, and educational sessions on maintaining a healthy lifestyle, effectively merging modern educational frameworks with traditional medical knowledge for the benefit of the student community.



Figure 3.15.7 Sukhadam Medical Camp

3.15.8 Epidemic prevention activities

All ISM institutions conduct monthly **Pakarchavyadhi** (Epidemic) camps focused on public screening, awareness, and preventive care. This outreach included **56 Medical Camps and Awareness Classes**, supplemented by **12 other activities** such as leaflet/kit distribution and poster displays, forming a comprehensive strategy for epidemic prevention.

3.16 Conclusion

The district profile of the Department of Indian Systems of Medicine (ISM), Idukki, presents a comprehensive picture of a resilient, inclusive, and community-oriented healthcare system that is uniquely adapted to the district's high-range geography, tribal demographics, and dispersed settlement pattern. The extensive network of 67 ISM institutions, supported by hospitals, dispensaries, primary health centres, tribal facilities, Ayushman Arogya Mandirs, and NHM-supported units, ensures that authentic Ayurveda and allied healthcare services are accessible even in the most remote and environmentally sensitive regions of the district.

The strength of the system lies not only in its infrastructure but also in its committed human resource base, with full staffing of medical professionals and strong paramedical and support services that enable continuous, high-quality patient care. The consistently high beneficiary turnout across hospitals, dispensaries, APHCs, and tribal institutions reflects strong public trust in ISM services for preventive, promotive, curative, and rehabilitative healthcare, particularly for chronic diseases, maternal and child health, geriatric care, and lifestyle disorders.

The district has demonstrated exemplary progress in institutional quality improvement through widespread adoption of NABH accreditation, outstanding performance under the Kayakalp initiative, and the systematic expansion of Ayushman Arogya Mandirs, thereby strengthening patient safety, service standards, and facility management. Digital transformation through the NextGen e-Hospital system and integration with the Ayushman Bharat Digital Mission has significantly improved efficiency, transparency, and patient experience across ISM facilities in Idukki.

Strategic investments under NAM, LSGD, MLA and other development funds have led to sustained improvements in infrastructure, including new buildings, OP wards, research facilities, yoga halls, and upgraded treatment spaces—enhancing service capacity while addressing the district’s unique terrain-related challenges. The wide spectrum of district-level, LSGD-supported, and ISM departmental projects—spanning geriatric care, maternal health, tribal outreach, lifestyle disease control, sports medicine, palliative care, paediatrics, women’s health, and epidemic prevention—illustrates a holistic and decentralised approach to public health.

Through sustained community engagement, awareness programmes, professional capacity building, and health observance campaigns, the ISM sector in Idukki continues to reinforce its role as a cornerstone of the district’s public health system. Overall, Idukki stands as a model district in integrating traditional systems of medicine with modern governance, digital innovation, quality assurance, and inclusive healthcare delivery—fully aligned with the vision of sustainable, resilient, and people-centred health development envisioned by the Government of Kerala.

Chapter 4

DEPARTMENT OF HOMOEOPATHY FACILITIES & SERVICES

4.1 Introduction

Idukki District, situated in the ecologically sensitive Western Ghats of Kerala, is the second largest district in the State in terms of geographical area while having the lowest population density. The district is characterized by vast forest reserves, with more than half of its total area under forest cover, and a distinct settlement pattern in which urban pockets are relatively dense while rural and tribal villages remain sparsely populated and geographically dispersed. Renowned as the “Spice Garden of Kerala,” Idukki’s economy and occupational profile are closely linked to plantation agriculture, forest-based livelihoods, and hill-region activities.

The district’s hilly terrain, extensive forest cover, plantation work, and remoteness of several habitations give rise to unique public health challenges, including limited physical accessibility to healthcare, occupational health issues among plantation workers, nutritional concerns in tribal and remote communities. In addition, Idukki is prone to climate-sensitive and disaster-related health risks such as landslides, floods, and dam-related emergencies, particularly during the monsoon season, which can disrupt healthcare access and increase disease vulnerability.

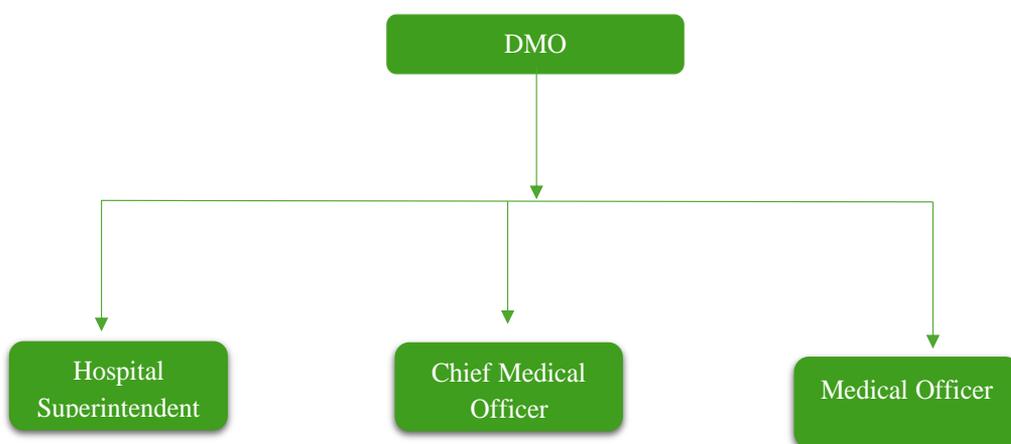
In this context, the Department of Homoeopathy in Idukki District plays a crucial role in delivering holistic, preventive, and community-oriented healthcare services tailored to the district’s geographical and demographic realities. Through individualized treatment, disease prevention programmes, outreach services, and preparedness for disaster-related health needs, Homoeopathy contributes significantly to strengthening public health resilience and ensuring continuity of care in one of Kerala’s most geographically challenging districts

4.2 Administration

In Idukki District, the Department of Homoeopathy administration plays a crucial role in managing and supervising all homoeopathic institutions functioning under the department, including dispensaries, hospitals, and specialised units. The administrative framework

prioritises coordinated healthcare delivery, staff supervision, availability of medicines, and maintenance of infrastructure and equipment. Continuous assessment of service delivery, implementation of government programmes, and compliance with quality and safety guidelines are integral to administration. Regular inspections, performance evaluations, and necessary corrective actions are undertaken to improve patient care, operational efficiency, and service accessibility. Through these ongoing administrative measures, the department seeks to enhance homoeopathic healthcare services across the district

4.2.1 District Administration of the Department



4.2.2 District Medical Office Profile

Table No: 4.2.2: District Medical office Profile

Post	Office Address	Office Number	Mail id
District Medical officer	District Medical Office (Homoeo) Tharaniyil Building, Thodupuzha PO, Idukki – 685 584	04862-227326 Mob :9072615306	dmohomoeoidk@kerala.gov.in

Source: District data

4.2.3 Structure of DMO office

Table No: 4.2.3: Structure of DMO office

Sl no	Post	Number
1	District Medical officer	1
2	Senior Superintendent	1
3	Clerk	3
4	Office Attendant	1
5	Part Time Sweeper	1
6	Typist	1

Source: District data

4.3 Infrastructure Profile of the District

In Idukki District, the Department of Homoeopathy operates a total of 66 government health institutions, forming a strong and accessible homoeopathic healthcare network. The district has 2 Government Homoeopathy Hospitals with a sanctioned bed strength of 50 providing inpatient and outpatient services. Additionally, 21 Government Homoeopathy Dispensaries offer primary homoeopathic care across various urban and rural areas. The service delivery is further strengthened by 17 Ayushman Arogya Mandirs, 24 Ayush primary health Care Centres and 2 SCPHHC, which focus on improving healthcare access for underserved and vulnerable populations.

SCPHCH – Special Component Plan Health Care Centres (Homoeopathy) are formulated to provide accessible and affordable healthcare services to marginalized communities residing in Scheduled Caste colonies. These centres function through Homoeopathy dispensaries established specifically to address the healthcare needs of vulnerable population groups. The programme is implemented with financial support from the Scheduled Caste Development Department, ensuring sustained service delivery, improved healthcare access, and targeted interventions for the socio-economically disadvantaged sections of society. At present, two SCPHCH Homoeopathy dispensaries are functioning in the district, contributing significantly

to improve healthcare outreach among Scheduled Caste communities. Through this extensive institutional network, the Department of Homoeopathy ensures comprehensive, equitable, and community-oriented healthcare services throughout Idukki District. Through this extensive institutional network, the Department of Homoeopathy ensures comprehensive, equitable, and community-oriented healthcare services throughout Idukki District.

Out of these, 7 institutions are NABH-accredited and 14 have been upgraded to Government Model Homoeopathy Dispensaries. Digital transformation has been achieved in 42 institutions through AHiMS 2.0.

4.3.1 Details of Homoeopathic health facilities

Table No: 4.3.1: Details of Homoeopathic health facilities

Sl no	Type of Health Institution Facility	Total no: in the district
1	District Hospital	1
2	Govt. Homoeopathy Hospital	1
2	Govt. Homoeo Dispensary	21
3	Ayushman Arogya Mandir	17
4	Ayush Primary Health Centre	24
5	SCPHHC	2
	Total	66

Source: District data

Details of Homoeopathic facilities are attached as Annexure 4.3.1

4.3.2 Health Facilities in Urban and Rural Areas

Out of the 66 homoeopathic health facilities functioning in the district, 2 are located in urban areas and 64 in rural areas, indicating strong rural outreach. The District Homoeopathic Hospital and other one Hospital are situated in rural area., Among primary-level institutions

(Government Homoeo Dispensaries and Ayushman Arogya Mandirs) 2 are situated in urban areas, 36 are situated in rural areas. All 24 AYUSH Primary Health Centres & all SCPHHC are located in rural areas. This distribution highlights the department's focus on ensuring accessible homoeopathic healthcare services, particularly in rural regions.

Table No: 4.3.2: Health Facilities in Urban and Rural Areas

Sl no	Type of Health Institution /Facility	Total no: in the district	Urban	Rural
	District Hospital	1	0	1
	Govt. Homoeopathy Hospital	1	0	1
	Govt. Homoeo Dispensary including Ayushman Arogya Mandir (AYUSH)	38	2	36
	Ayush Primary Health Centre	24	0	24
	SCPHHC	2	0	2
	Total	66	2	64

Source: District data

4.3.3 Hospital Details based on Bed Strength

District has a total of two government hospitals with an overall bed strength of 50 beds. This includes two 25 bedded hospital distributed across the district. While each hospital functions with moderate capacity, together they play a significant role in ensuring the availability of inpatient homoeopathic care. These hospitals collectively support the delivery of essential healthcare services, improving access to treatment and strengthening the district's public homoeopathic healthcare system.

Table No: 4.3.4: Health Facilities in Urban and Rural Areas

Sl no	Hospitals based on bed strength	Hospital number	Bed strength
1	Govt. Hospital (25 Bedded)	2	50
	Total No. Of Beds/ Hospitals	2	50

Source: District data

4.4 Human Resource Profile of the District

The Department of Homoeopathy in Idukki District is supported by a well-structured human resource framework comprising medical, paramedical, administrative, and Class IV staff across Government Homoeopathy institutions, ensuring effective delivery of healthcare services. The majority of sanctioned medical and paramedical posts in Government institutions, including Hospital Superintendents, Chief Medical Officers, Medical Officers and supporting staff, are fully maintained, enabling uninterrupted clinical services. Additional human resources with support from the National AYUSH Mission (NAM) through contractual appointments and programme-based staffing support are being utilized for effective health care service delivery through the hospitals. Though key operational posts such as pharmacists, nursing staff, and support personnel are largely in position, a limited number of vacancies persist in selected categories, particularly in nursing and Class IV cadres. Overall, the existing human resource availability are optimally utilized to provide a strong foundation for service delivery, with continued efforts underway to address remaining gaps and strengthen institutional efficiency and patient care.

AYUSH Primary Health Centres (AYUSH PRIMARY HEALTH CENTRES) function with a single Medical Officer deployed by the National Health Mission (NHM) on a contract basis, with supporting staff provided by the respective Local Self Government Institutions (LSGIs).

4.4.1 Availability of Medical Professionals

A total of 45 government medical professional posts have been sanctioned in the district, and 41 posts are filled. This includes administrative, supervisory, and clinical positions such as

District Medical Officer, Hospital Superintendents, Chief Medical Officers, Medical Officers, and Resident Medical Officers.

Service of Medical Officers under NHM and NAM are also being utilized for the health care delivery in the district.

Table No: 4.4.1: Details of Medical Professionals under the DH /NAM/NHM in the District

Sl no	Category	Sanctioned	Filled	Vacant
Medical Professionals under the DH				
1	Administrative (District Medical officer)	1	1	0
2	Hospital Superintendent	2	2	0
2	Chief Medical officer	3	2	1
3	Medical officer	37	35	2
4	Resident Medical officer	2	1	1
	Total	45	41	4
Medical Officers Under NAM/ NHM				
1	Medical officer (NHM)	24	24	0
2	Medical officer (NAM)	18	18	0
3	PG Medical officer (NAM)	2	2	0
	Total	44	44	0
	Grand Total	89	85	4

Source: District data

4.4.2 Number and Distribution of Health Care Professionals

The district demonstrates **strong manpower coverage across core service areas**, though **strategic recruitment is required in nursing, pharmacy and certain support roles** to further strengthen service delivery and operational efficiency.

Table 4.4.2.1- Details of Paramedical posts Sanctioned under the DH in the District

Sl no	Designation	Sanctioned	Filled	Vacant
	Nurse	6	3	3
	Nursing Assistant	5	5	0
	Pharmacist	34	32	2
	Dispenser	6	5	1
	Attender	24	23	1
	Lab Attender	2	2	0
	Laboratory technician	2	1	1

Source: District data

Table 4.4.2.2- Details of Administrative & Ministerial posts Sanctioned under the Department of Homoeopathy in the District

Sl no	Designation	Sanctioned	Filled	Vacant
1	Senior Superintendent	1	1	0
2	Clerk	4	3	1
3	Clerk Typist	1	0	1
4	Typist	1	1	0

Source: District data

Table 4.4.2.3- Details of Class IV posts Sanctioned under the DH in the District

Sl no	Designation	Sanctioned	Filled	Vacant
1	Office Attendant	10	6	4
2	Cleaner	2	1	1
3	Cook	2	2	0
4	Sweeper Cum Peon	5	5	0
5	Watcher cum sweeper	1	1	0
6	Store Attender	1	1	0
Other Supporting Staff				
1	Part Time Sweeper	23	15	8

Source: District data

4.5 Beneficiary Details

The following tables present the beneficiary coverage of Homoeopathy health facilities, categorised into Hospitals and Dispensaries. The data reflects the average patient load handled by each institution over a month, indicating service utilisation and capacity.

4.5.1 Hospital

Muttom District Homoeo Hospital and Pushpakandam Government Homoeo Hospital continue to play an important role in providing homoeopathic healthcare services to the community. Muttom District Homoeo Hospital manages an average monthly OPD attendance of 3,210 patients and 13 IPD admissions, supported by a total bed strength of 25. Pushpakandam Government Homoeo Hospital caters to an average of 2,070 OPD patients and 31 IPD admissions per month, with an equal bed strength of 25. These figures reflect the steady utilisation of services and highlight the trust of the public in the homoeopathic system of care.

Details of the Beneficiary in Hospitals are attached as Annexure 4.5.1

4.5.2 Dispensaries

The Government Homoeopathy dispensaries in the district demonstrate a steady and reliable outpatient service pattern, indicating consistent community utilization of

Homoeopathy care. Across 38 dispensaries, average monthly OPD attendance generally ranges between 300 and 1,000 patients. Even dispensaries located in remote and hilly areas maintain regular OPD attendance, underscoring the accessibility and acceptance of Homoeopathy services among the population. Overall, the data reflects the important role of Government Homoeo Dispensaries in delivering decentralized primary healthcare, particularly in rural and geographically challenging regions, while contributing significantly to the district's preventive and curative health services.

Details of Beneficiary in Govt Homoeo Dispensaries are attached as annexure 4.5.2

4.5.3 AYUSH PRIMARY HEALTH CENTRE dispensaries & SCP dispensaries

The Ayush Primary Health Centres (APHCs) and SCPHHCs in the district exhibit a strong and sustained outpatient service performance, highlighting their importance in delivering accessible AYUSH-based primary healthcare. Across 26 institutions, average monthly OP attendance is generally robust, with several centres recording over 1,000 patients. Overall, the data underscores the critical role of APHCs and SCPHHCs in strengthening decentralized healthcare delivery, ensuring preventive, promotive, and curative services reach diverse and hard-to-access populations across the district.

Details of Beneficiary in Ayush Primary Health Centre dispensaries & SCP dispensaries are attached as annexure 4.5.3

4.6 Public Health Programmes

The Department of Homoeopathy conducts a broad spectrum of public health programmes and speciality clinics aimed at addressing diverse health needs within the community. The support of the National AYUSH Mission is also on hand for these projects.

4.6.1 Gender Based Projects- Women - Seethalayam

Seethalayam is the first gender-based project of the Department of Homeopathy. Launched in 2010, the project aims to ensure the mental, physical, and emotional health of women especially domestic violence victims and suggest solutions for the difficulties they face. A unique feature of this project is that all staff members are women. It provides homeopathic treatment along with individual and family counseling.

Since its inception, Seethalayam has gained immense popularity through its unique

operational style, awareness classes, and medical camps. It offers treatment for women facing marital issues, workplace problems, domestic violence, sexual exploitation, anxiety, suicidal tendencies, and depression. Services are also extended to other family members. The project collaborates with the Social Justice Department, Women's Cell, Women's Commission. Monthly visits are conducted to women's prisons and destitute homes.

Objectives:

- To ensure the mental, physical, and emotional security of women.
- To provide knowledge regarding women's rights and laws.
- To facilitate rehabilitation for the destitute and the neglected.

Table 4.6.1: Beneficiary details of Seethalayam project

	Op			Counselling		
	New	Old	Total	New	Old	Total
2023-24	175	738	913	191	232	423
2024-25	234	768	1002	173	97	270

Source: District data

4.6.2 Punarjani

Punarjani is a de-addiction treatment clinic that has been functioning since 2012 as a sub-clinic of the Seethalayam project. It was established after observing that many women seeking help at Seethalayam were suffering from domestic violence and mental stress caused by substance abuse (alcohol and drugs) among the men in their families. The project provides homoeopathic treatment and counselling for patients addicted to alcohol, drugs and smoking.

Objectives:

- To treat patients with addiction.
- To conduct awareness classes for adolescents and youth regarding health issues and social crises caused by substance abuse.

- To utilize a treatment method that minimizes withdrawal symptoms
- To extend counseling to other family members of patient

Table 4.6.2: Beneficiary details of Punarjani project

	New	Old	Total
2023-24	69	179	248
2024-25	79	276	355

Source: District data

4.6.3 Janani

The **Janani** project by the Department of Homeopathy offers hope in the field of infertility treatment with simple, side-effect-free medicines. The project effectively treats both male and female infertility, including conditions like PCOD, menstrual disorders, Fallopian tube blocks, hypothyroidism, uterine fibroids, and low sperm count/motility. Diagnostic tools like ultrasound and follicular studies are also being utilised.

Table 4.6.3: Beneficiary details of Janani project

	New Case	Old Case	Cumulative Pregnancy	Cumulative Child Birth
2023-24	78	400	207	158
2024-25	108	599	232	165

Source: District data

4.6.4 Sadgamaya

Sadgamaya is the child and adolescent-centric project of the Department of Homoeopathy. It aims at attaining overall wellness encompassing physical, mental, emotional, and social aspects, with specific attention to issues related to behavioural, cognitive, or educational challenges.

Objectives

- Identify behavioural, scholastic, psychological and physical problems of children and adolescents.
- Impart awareness for parents, children, teachers and the general public on learning disabilities and behavioural problems.
- Provide homoeopathy treatment for behavioural and learning disabilities.
- Service of special education teachers is available in each unit, who train the patients in special learning methodologies.
- Provide behavioural management, treatment and counselling for children and adolescents.

Beneficiaries

- Neurodevelopmental & Behavioural Disorders
 - Autism Spectrum Disorders
 - Attention Deficit Hyperactivity Disorder (ADHD)
 - Learning Problems and Learning Disabilities (e.g., dyslexia, slow learning)
 - Developmental Delays
 - Behavioral disorders (e.g., oppositional, conduct issues)
 - Impulsive and conduct-related behaviours
- Cognitive, Emotional & Psychiatric Issues
 - Depressive disorders / Persistent Depressive Disorder
 - Anxiety, fears and emotional dysregulation
 - Obsessive-Compulsive Disorder (OCD)
 - Speech and language disorders
 - Scholastic backwardness / difficulties in reading, writing, calculation
- Other Challenges Addressed
 - Social withdrawal and lack of concentration
 - Substance abuse and addictive behaviours (including gadget addiction)
 - Sexual abuse and related emotional trauma
 - Behavioural issues like kleptomania
 - Mental stress and maladaptive coping behaviours
 - Mild to moderate intellectual challenges
 - Social media addiction and game addictions

Table 4.6.4: Beneficiary details of Sadgamaya project

Year	New	Old	Total
2023-24	407	1932	2339
2024-25	418	1639	2057

Source: District data

4.6.5 Ayushmanbhava

Non-communicable diseases (NCDs)/ lifestyle diseases are becoming a major health concern in society, and the World Health Organization has issued warnings to all nations regarding this issue. In response, various committees established by the government have decided to utilize the potential of all medical systems to address the social breakdown caused by NCDs, across the country and particularly in Kerala.

Objectives

- Providing treatment for NCDs through homoeopathy and consultation of naturopathy for healthy life style through dietary regulations along with yoga practice.
- To offer treatment for complications arising from lifestyle diseases and to empower individuals to overcome disabilities caused by these complications.
- Creating awareness among the population about preventive and promotive healthcare.
- Making treatment affordable and accessible to the public.

Table 4.6.5: beneficiary details of Ayushmanbhava project

Year	New Cases	Old Cases	Grand Total
2023-24	678	5214	6480
2024-25	397	3234	3480

Source: District data

4.6.6 Palliative Care

Introduction

The global demand for palliative care is rising due to the increasing number of patients with chronic and terminal illnesses. In India, approximately 2% of patients fall within the scope of palliative care. Kerala was the first state in India to implement a 'Pain and Palliative Policy' in 2008. Following this initiative, the Kerala State Department of Homoeopathy launched the Pain & Palliative Project in 2016-2017, based on various government directives and circulars.

Need for Palliative Care

The rising burden of chronic, incurable conditions such as cancer, degenerative disorders, and geriatric illnesses underscores the need for comprehensive palliative care services. The Palliative Project of Department of Homoeopathy is designed to alleviate suffering among patients and their families by addressing physical, mental and psychosocial challenges while enhancing overall quality of life. The program emphasizes the delivery of effective, side effect free and cost - efficient health care through Homoeopathy, with a focus on relief from pain and other distressing physical symptoms associated with chronic diseases. Integrated efforts with volunteer organizations and allied departments support community awareness initiatives and coordinated geriatric - palliative care services. The project provides home visits, as well as medical and nursing care for bedridden patients.

Implementation Approach

Implementation operates at two levels:

Primary Palliative Care through home visits delivered by primary palliative care centres functioning in Dispensaries/ Ayush Primary Health Centres

Secondary Palliative Care through weekly Palliative Outpatient services , Inpatient Care and home visits delivered by secondary centres in district hospital

Table 4.6.6: beneficiary details of Ayushmanbhava project

Year	OP-New	OP Follow up	IP	No Of Home care visits-Primary	No Of Home care patients-Primary	No Of Home care visits-Secondary	No Of Home care patients-Secondary
2023-24	93	393	6	514	3499	61	385
2024-25	247	208	15	3380	0	187	1267

4.6.7 Projects and Institutions

Table 4.6.7: Table of details of Plan Projects

Sl. No.	Programme Name	Implementing Institution	Days of Operation	Remarks
1	Ayushman Bhava	Dist. Homoeo Hospital Muttom	Monday to Saturday	
2	Sadgamaya	Dist. Homoeo Hospital Muttom	Monday to Saturday	
3	Seethalayam	Dist. Homoeo Hospital Muttom	Monday to Saturday	
4	Janani	Dist. Homoeo Hospital Muttom	Monday to Saturday	
5	Arike- Pain & Pallivative	Dist. Homoeo Hospital Muttom	Wednesday & Friday	
6	Punarjani	Dist. Homoeo Hospital Muttom	Saturday	

Source: District data

4.6.8 District-Specific Initiatives

Table 4.6.8: District-specific initiative

Sl. No.	Name of the Programme	Institution Where Implemented	Days of Operation	Remarks
1	Speciality Mobile Clinic Pambaranar	GHD. Pampanar	Monday to Saturday	
2	Thyroid	Dist. Homoeo Hospital Muttom	Monday to Saturday	Field Visits - Every Tuesday

Source: District data

4.7 Standardisation of Institutions

4.7.1 NABH - Entry-level certification

National Accreditation Board for Hospitals & Healthcare Providers (NABH) provides a standardized quality framework to enhance patient safety and service excellence in healthcare institutions. In Idukki District, NABH standards are being adopted in homoeopathy institutions to strengthen clinical governance, documentation, and patient-centric service delivery, thereby improving overall quality of care.

Table 4.7.1: Table of NABH entry-level certified institutions

Sl no	Name of Institution
1	GHD Pazhayarikandam
2	GHD Churuly
3	GHD Chillithode
4	GHD Rajakumari
5	GHD Koalani

6	GHD Pazhayarikandam
7	GHD Churuly
8	GHD Chillithode

Source: District data

4.7.2 Kayakalp

The Kerala AYUSH Kayakalp Award is a state-level initiative under the Department of AYUSH, Government of Kerala, designed to promote cleanliness, hygiene, and quality improvement in AYUSH healthcare institutions. The program recognizes hospitals and dispensaries that maintain high standards in sanitation, waste management, infection control, and patient safety.

It encourages AYUSH facilities to adopt sustainable and eco-friendly practices while providing a clean, safe, and healing environment for patients. The award also supports the objectives of the Swachh Bharat Mission and enhances the overall image and service quality of AYUSH institutions across Kerala.

Table 4.7.2: List of Institutions which have received the Kayakalp award

Sl.No	Facility Name	Category	Status
1	DHH Idukki	District Hospital	Commendation
2	GHH Pushpakandom	Sub District Hospital	Commendation
3	DHH Idukki	District Hospital	Commendation
4	GHH Pushpakandom	Sub District Hospital	Commendation

5	GHD Pazhayarikandom	AHWC	1st Prize
6	GHD Churuli	AHWC	Commendation
7	GHD Chillithode	AHWC	Commendation
8	GHD Konnathady	AHWC	Commendation

Source: District data

4.7.3 Model Dispensary

Model dispensaries serve as an effective mechanism for standardizing healthcare service delivery across homoeopathy institutions. Dispensaries with a consistently high volume of Outpatient (OP) attendance are identified and selected for upgradation as Model Dispensaries, ensuring optimal utilization of resources and maximum public benefit. The upgradation is implemented in a phased manner, focusing on improvements in infrastructure, manpower support, service delivery systems, and patient amenities. This initiative is supported through consistent financial assistance from the Plan budget, enabling sustained quality enhancement and uniform service standards across selected institutions.

Table 4.7.3: List of institutions upgraded as model dispensary

SI No	Name of Institution
1	Govt Homoeo Dispensary Kattapana
2	Govt Homoeo Dispensary Rajakumari
3	Govt Homoeo Dispensary Pazhayarikandam
4	Govt Homoeo Dispensary Nediyaassala
5	Govt Homoeo Dispensary Pampanaar
6	Govt Homoeo Dispensary Aloor
7	Govt Homoeo Dispensary Chillithode
8	Govt Homoeo Dispensary Kottikkulam
9	Govt Homoeo Dispensary Moozhikkal
10	Govt Homoeo Dispensary Vannapuram
11	Govt Homoeo Dispensary Churuli

12	Govt Homoeo Dispensary Kolani
13	Govt Homoeo Dispensary Narakakkanam
14	Govt Homoeo Dispensary Vazhathoppe

Source: District data

4.8 Ayushman Arogya Mandir (AYUSH)

Ayushman Arogya Mandir (AYUSH) represents a people-centred initiative aimed at strengthening accessible, affordable, and holistic primary healthcare services across the community. These centres integrate the principles and therapeutic strengths of Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy to promote wellness, disease prevention, and comprehensive care.

Functioning as the first point of contact for individuals and families, Ayushman Arogya Mandirs provide outpatient care, health promotion, lifestyle counselling, management of common ailments, and support for chronic disease management through AYUSH systems. The focus remains on preventive and promotive healthcare, encouraging healthy living practices and early intervention to reduce the burden of disease.

By combining traditional knowledge with organized public health delivery, Ayushman Arogya Mandir (AYUSH) contributes significantly to the national vision of Universal Health Coverage. These centres play a key role in extending quality AYUSH healthcare to rural and urban populations alike, ensuring continuity of care while preserving India's rich heritage of holistic healing. 17 Govt Homoeopathy Dispensaries have been upgraded as Ayushman Arogya Mandir (AYUSH).

List of Institutions upgraded as Ayushman Arogya Mandir (AYUSH) are attached as Annexure 4.8

4.9 Temporary Homoeo Dispensaries

Temporary Homoeo Dispensaries are established during major festival seasons. The unit which operate in Idukki district is during Mukkuzhi Mandala - Makaravilakku.

4.10 Digital Health

4.10.1 AHiMS - AYUSH Health Information Management System

The Ayush Homoeopathy Information Management System (AHiMS) is the official Information Management System implemented by the Department of Homoeopathy to digitize and streamline the clinical, administrative, and institutional functions of Homoeopathy healthcare facilities across the State.

AHiMS Version 1 (AHiMS 2.0) was introduced in 2019 as the foundational digital platform. This version primarily focused on the collection and consolidation of numerical and institutional data related to core operations such as OP/IP statistics, asset management, medicine indenting, Plan and Non-Plan fund management, basic reporting, and institutional profile data. AHiMS 1.0 established a standardized digital workflow across Homoeopathy institutions and enabled centralized data availability for effective monitoring, reporting, and policy-level decision-making. The software received Second Prize in the eHealth – e Medicine category of the State e-Governance Awards for the years 2019–20 and 2020–21, recognizing its contribution to digital health governance.

AHiMS Version 2 (AHiMS 2.0), launched in 2023, represents a significantly enhanced and expanded phase of the system. In addition to strengthening the unique Homoeopathy Hospital Management System—the only such digital solution in the country covering more than 1,100 Homoeopathy institutions—Version 2 introduced advanced administrative and governance-oriented modules. A major addition is the comprehensive Establishment / HR module, which covers employee service details, recruitment, probation, service history, disciplinary proceedings, and document management. The upgraded version also supports improved internal governance, better data integrity, and expanded operational modules including accounts, stock management, institutional administration, and system-level controls. Overall, AHiMS 1.0 laid the digital foundation, while AHiMS 2.0 evolved the platform into a comprehensive, integrated management system, supporting both healthcare service delivery and administrative efficiency in the Homoeopathy sector.

All the Government Homoeopathy institutions in Idukki District are actively delivering digital health services through the AHiMS. Key functional areas including patient

registration, clinical documentation, and service reporting are being carried out digitally across institutions. Medicine stock management in both Government Homoeopathy institutions and AYUSH Primary Health Centres (AYUSH PRIMARY HEALTH CENTRES) has been fully digitalised, ensuring accurate tracking of stock availability, consumption, and distribution. The medicine procurement process is now 100% online, enabling transparent monitoring of indents, purchase orders, supply status, and delivery timelines. These digital processes are supported by real-time dashboards accessible to the District Medical Officer (DMO), facilitating effective oversight, data-driven decision-making, and improved efficiency in medicine supply chain management.

4.10.2 ABDM activities

In connection with ABDM activities in Idukki District, **100% Health Facility Registry (HFR) creation has been achieved**, with all **66 health facilities successfully registered**. In addition, **26 Health Professional Registries (HPRs)** have been created out of **90 eligible health professionals (29%)**, reflecting substantial progress in onboarding healthcare providers onto the ABDM ecosystem. Continuous efforts are underway to complete the remaining HPR registrations to ensure full compliance and seamless digital health data exchange across the district.

4.11 Medicine Availability & Logistics

LSGD has allocated Rs. 6135600/-for medicine purchases specifically for homoeopathy institutions in Idukki district. This allocation falls under LSGD's health sector initiatives, enabling timely purchases

4.12 Laboratory & Diagnostic Facilities

Clinical laboratory services play a vital role in supporting accurate diagnosis, treatment planning, and patient monitoring in homoeopathy institutions. In Idukki District, laboratory facilities are made available through a combination of institution-owned laboratories and associated external laboratories to ensure continuity of clinical services.

Table 4.12: Laboratory facilities in Institutions

SL No	Name of Institution
1	Govt Homoeo Hospital, Muttom
2	Govt Homoeo Hospital, Pushpakandam

Source: District data

4.13 Financial Expenditure

The district was allocated ₹91.56 lakhs in 2023-24, with the full amount released and ₹88.13 lakhs expended, achieving approximately 96.2% utilization. In 2024-25, allocation stood at ₹78.35 lakhs, fully released and expended, reflecting 100% utilization. These figures underscore efficient fund management amid Idukki's network of 38 government Homoeopathy dispensaries and additional NHM facilities.

Table 4.13: Financial Expenditure

District	Year	Allocated amount (in Lakhs)	Released Amount(in Lakhs)	Expenditure
Idukki	2023-24	91.56069	91.56069	88.12908
Idukki	2024-25	78.34823	78.34823	78.34823

Source: Plan space

4.14 Conclusion

This chapter comprehensively outlines the **infrastructure, human resources, service delivery, public health programmes, standardisation initiatives, digital transformation, and financial management** of the Department of Homoeopathy in Idukki District. Despite the district's challenging geographical terrain, sparse population distribution, and large forest cover, the homoeopathy sector has established a **strong, predominantly rural-oriented healthcare network** with 66 institutions ensuring wide coverage and accessibility. The consistent OPD and IPD utilisation across hospitals,

dispensaries, APHCs, and SCPHHCs reflects **public trust and reliance on homoeopathic care**, particularly in remote, tribal, and underserved areas. Targeted public health programmes addressing women's health, child and adolescent mental health, infertility, lifestyle diseases, palliative care, de-addiction, and disaster-related health needs demonstrate the department's **community-responsive and inclusive approach**. Initiatives such as NABH accreditation, Kayakalp awards, model dispensary upgradation, Ayushman Arogya Mandirs, and full-scale implementation of digital platforms like **AHiMS and ABDM** highlight a strong commitment to quality, accountability, and modernization. Efficient fund utilisation and sustained support from LSGD, NHM, and NAM further strengthen service delivery. Overall, the Department of Homoeopathy in Idukki District plays a **vital role in strengthening public health resilience**, promoting holistic and preventive healthcare, and ensuring equitable access to quality services in one of Kerala's most geographically and socially complex districts.

Chapter 5

NATIONAL AYUSH MISSION

Supports and Services

5.1 Introduction

National AYUSH Mission is a Centrally Sponsored Scheme under the Ministry of AYUSH. The government of India launched National AYUSH Mission (NAM) during the 12th plan in 2014. In Kerala, NAM started activities in 2015. The aim of NAM is to mainstream AYUSH Systems into health care services, to develop evidence-based AYUSH management protocol through scientific documentation and to ensure the accessibility of quality AYUSH services. Regarding the funding pattern, 60% share is provided by the Central Government and 40% is provided by the State Government.

The vision is to provide cost-effective, equitable, and accessible AYUSH healthcare across the country by strengthening service delivery systems and improving access to quality care. It emphasizes the integration of preventive and promotive healthcare approaches within primary health services, while promoting a holistic wellness model grounded in AYUSH principles and practices. In addition, the vision seeks to enhance AYUSH educational institutions to ensure the delivery of high-quality education and the development of competent professionals to support the growth of the AYUSH sector.

The objective is to ensure the availability of AYUSH healthcare services across the country by strengthening and improving AYUSH healthcare infrastructure and service delivery. It aims to establish a holistic wellness model through AYUSH Health and Wellness Centres with a strong focus on preventive and promotive healthcare based on AYUSH principles and practices, thereby reducing disease burden and out-of-pocket expenditure. The approach also seeks to provide informed choices to the public through the co-location of AYUSH facilities at Primary Health Centres, Community Health Centres, and District Hospitals, promoting medical pluralism. Further, it emphasizes the role of AYUSH in public health in alignment with the National Health Policy (NHP) 2017.

5.1.1 National Ayush Mission – Funding Approval Analysis

The analysis highlights the financial growth pattern, approval efficiency and year-wise variations to support planning, monitoring and future programme strategy formulation.

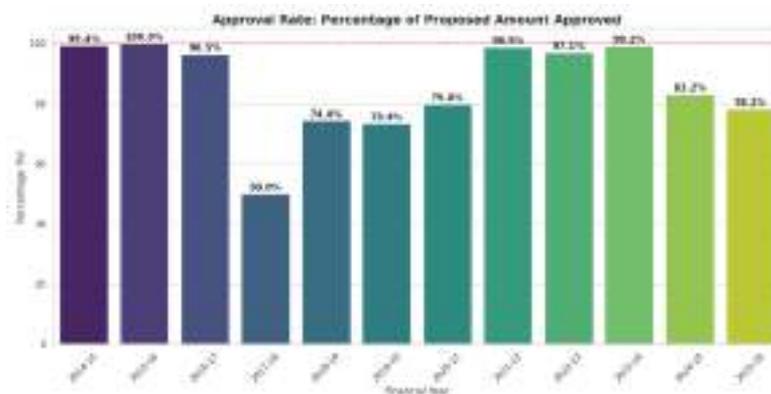


Figure 5.1.1.1 Funding Approval Analysis

Figure 5.1.1.1 illustrates the year-wise comparison of Resource Envelope, Amount Proposed and Amount Approved under the National AYUSH Mission. The chart indicates a progressive increase in financial allocations over the years, reflecting expansion of programme scope and implementation scale.

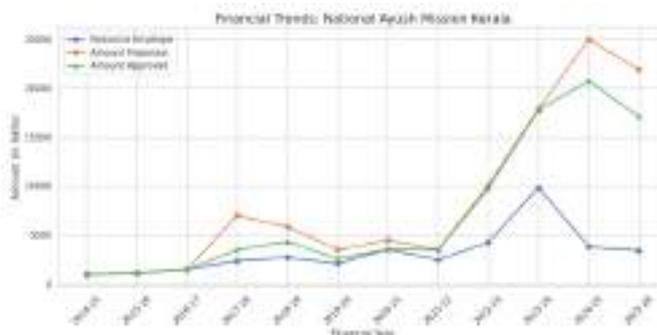


Figure 5.1.1.2 Trend Analysis of Funding Approval Analysis

Figure 5.1.1.2 depicts the approval efficiency trend, highlighting the percentage of proposed funds approved each year. The consistently high approval rate demonstrates effective planning, quality proposal preparation and strong institutional coordination with the approving authorities.

5.1.2 Approved Amount for Engineering Construction Works Under NAM

The following graphical representation presents a comprehensive trend analysis of the approved financial outlay for Engineering Construction Works executed under the National AYUSH Mission (NAM) across multiple SAAP years. The analysis examines sector-wise movement, total funding behaviour, priority shifts and percentage contribution patterns over time.

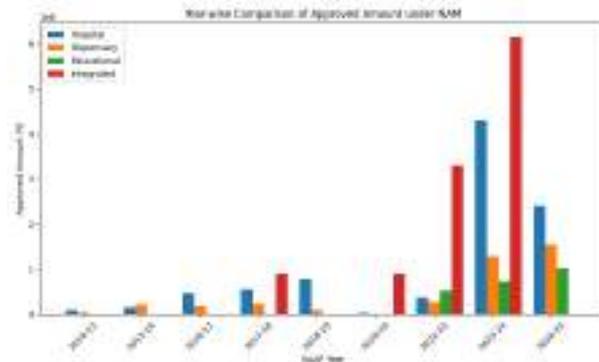


Figure 5.1.2.1 Analysis of Approved Amount for Engineering Construction Works Under NAM

Figure 5.1.2.1 presents the SAAP year-wise approved financial outlay for Engineering Construction Works under the National AYUSH Mission. The trend reflects periodic increases aligned with infrastructure strengthening priorities, including hospitals, dispensaries and academic institutions.

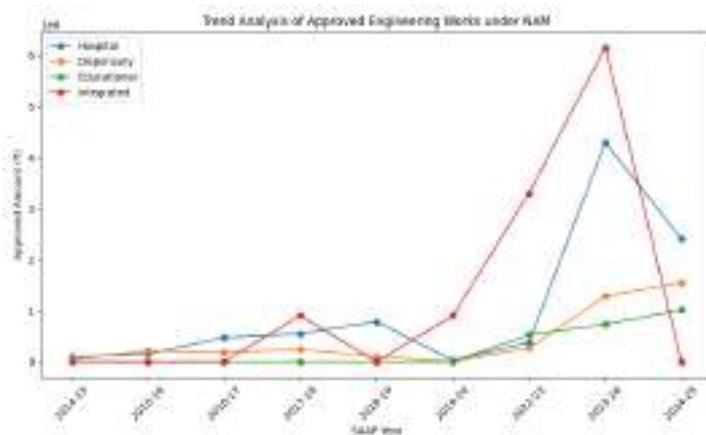


Figure 5.1.2.2 Trend Analysis of Approved Amount For Engineering Construction Works Under NAM

Figure 5.1.2.2 highlights the proportional distribution and trend movement of engineering works funding across SAAP years. Variations indicate strategic prioritisation of construction activities based on programme needs and infrastructure gaps.

5.1.3 Flexipool Projects Approved in The State – Trend Analysis Report

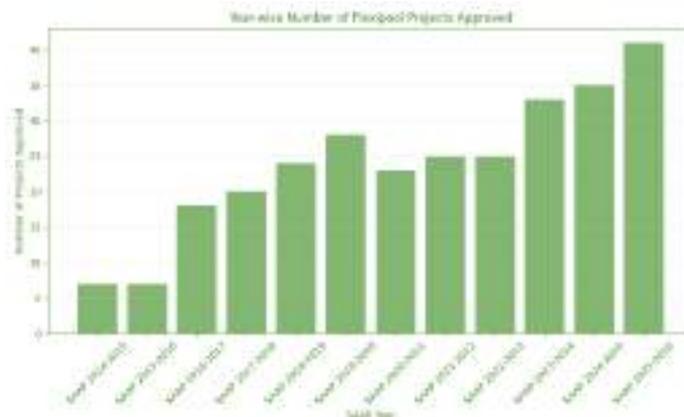


Figure 5.1.3.1 Analysis of Flexipool Project Approved in the State

Figure 5.1.3.1 illustrates the number of Flexipool projects approved under the National AYUSH Mission across SAAP years. The upward trend indicates increased utilisation of the Flexipool component to address State-specific and innovative healthcare needs.

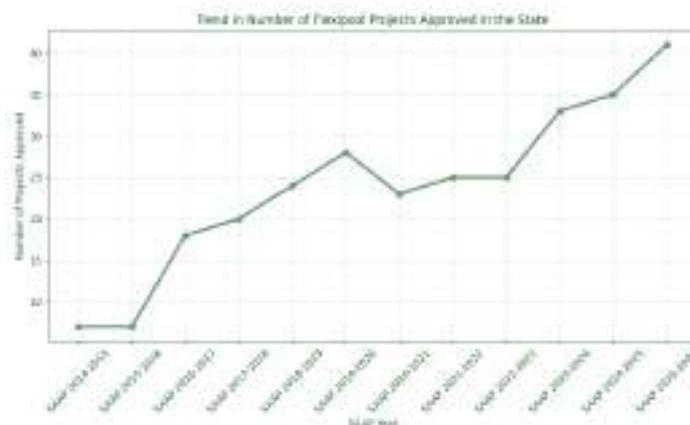


Figure 5.1.3.2 Trend Analysis of Flexipool Project Approved in the State

Figure 5.1.3.2 presents the comparative trend analysis, showing periods of accelerated project approvals. This reflects improved planning capacity and greater emphasis on flexible, need-based interventions.

5.1.4 National Ayush Mission - Public Health Programmes – Kerala – Funding Approval Analysis

The SAAP year-wise data and trend analysis of Public Health Programmes implemented in Kerala.

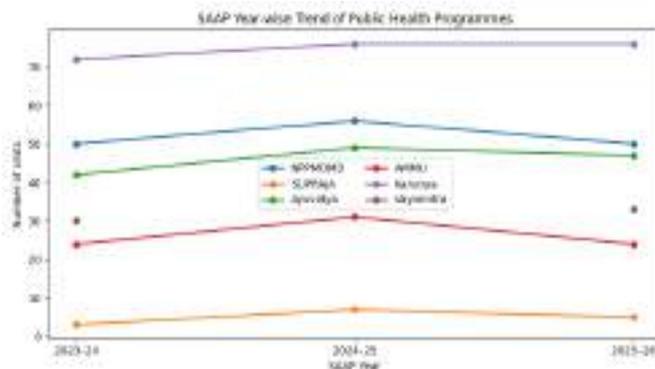


Figure 5.1.4.1 Trend Analysis of Public Health Programmes established

- National Program for Prevention and Management of Osteoarthritis & other Musculoskeletal disorders (NPPMOMD) shows sustained implementation across all SAAP years, reflecting continued focus on musculoskeletal disorder management.
- Karunya consistently records the highest number of units, indicating wide beneficiary coverage.
- SUPRAJA and AMMU show expansion during 2024–25, highlighting emphasis on maternal health and outreach services.
- Ayurveda demonstrates a stable trend.
- Vayomitra shows strengthening in 2025–26, reflecting enhanced geriatric care services.

Table No 5.1.4.1 Details of Approved Public Health Programs

SI NO	Name of Public Health programs	Number of Units
1	NPPMOMD	50
2	SUPRAJA	3

3	Ayuvidya	42
4	AYUSH Mobile Medical Unit	24
5	Vayomitra	30
6	Karunya	72

Table Source: NAM SAAP-2025-26

5.1.5 Ayushman Arogya Mandir (Aam-Ayush) – Kerala

This graphical representation presents the SAAP year-wise details and trend analysis of 700 Ayushman Arogya Mandir (AAM-AYUSH) / AYUSH Health & Wellness Centres (AHWC) established in Kerala

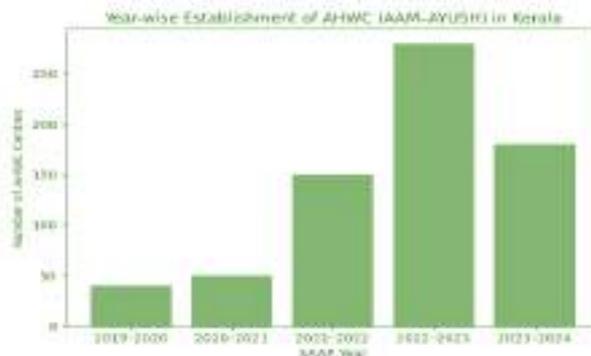


Figure 5.1.5.1 Graph representation of AAM AYUSH established in Kerala

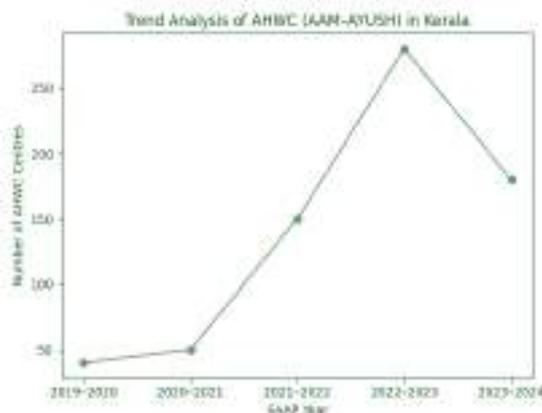


Figure 5.1.5.2 Trend Analysis of AAM AYUSH established in Kerala

Figure 5.1.5 depicts the SAAP year-wise establishment of Ayushman Arogya Mandir (AAM–AYUSH) / AYUSH Health & Wellness Centres in Kerala. The chart shows a steady expansion from 2019–20 onwards, with significant scale-up during 2021–22 and 2022–23. This trend highlights Kerala’s sustained commitment to strengthening AYUSH-based comprehensive primary healthcare services at the grassroots level.

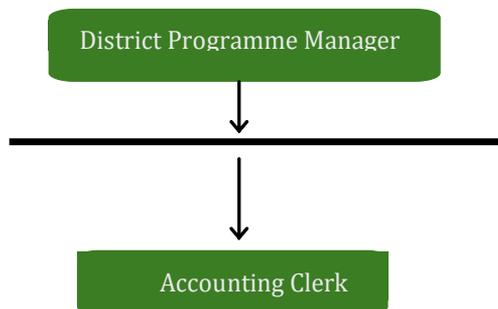
5.2 Administration

In the State of Kerala, the National AYUSH Mission (NAM) operates through a specialized administrative framework to manage its extensive network of healthcare services and public health initiatives. The mission is governed by a State AYUSH Mission Society, which provides the strategic and financial oversight necessary for mainstreaming traditional medicine into the state's public health infrastructure. This decentralized approach ensures that services like Ayurveda and Homoeopathy are effectively integrated from the state level down to the local communities

At the district level, the District Programme Management and Supporting Unit (DPMSU) serves as the operational hub, acting under the direct instructions and guidance of the State Mission Office (SPMSU). This unit is the primary body responsible for the localized management and implementation of AYUSH services within each district.

The administrative setup within the DPMSU includes one District Programme Manager (DPM) and one Accounting Clerk. This team is responsible for coordinating, monitoring, and implementing various programmes and activities under the District AYUSH society, ensuring effective execution and timely reporting of all project components to the state level. This structure allows for the smooth management of local health needs, including the operationalization of AYUSH Health and Wellness Centres and the execution of specialty-focused public health projects.

5.2.1 Structure of District Programme Management and Supporting Unit Office



5.2.2 District Programme Management and Supporting Unit Profile

Table No5.2.2 presents the contact and office details of the District Programme Management and Supporting Unit (DPMSU), including the District Programme Manager responsible for coordinating and implementing NAM activities at the district level.

Table No: 5.2.2: District Programme Management and Supporting Unit Profile

Post	Office Address	Office Number	Mail id
District Programme Manager	District Ayurveda Hospital Mangattukavala Road, Karikode, Thodupuzha, Idukki - 685585	9778426344	dpmnamidk@gmail.com

Source: District data

5.3 Human Resources Profile

The National AYUSH Mission provides human resources to both the Indian Systems of Medicine (ISM) and Department of Homoeopathy in Kerala through its major functional components, namely AYUSH Services (Medical Officers and supporting staff), Public Health Programmes, Flexipool Projects, and Ayushman Arogya Mandir (AYUSH). In addition, the

Mission deploys personnel for programme management and administrative support to enable effective planning, implementation, monitoring, and financial management of AYUSH activities. This integrated human resource framework ensures efficient healthcare delivery and sustained institutional support across the State.

Ayush Services (HR) under NAM refers to the provision of Medical Officers and supporting staff to both ISM and Department of Homoeopathy, ensuring the availability of skilled manpower for effective healthcare service delivery.

Flexipool Projects enable the State to implement innovative and state-specific projects and programmes, providing flexibility to address local health priorities and emerging needs.

Ayushman Arogya Mandir (AAM-AYUSH) functions as the primary AYUSH healthcare delivery point, ensuring accessible, affordable and quality services while supporting preventive, promotive, curative and rehabilitative care with strong community outreach.

AYUSH Public Health Programmes are national initiatives aimed at addressing priority health conditions through disease prevention, health promotion, awareness generation and strengthened healthcare delivery, contributing to holistic community wellness and improved public health outcomes.

District Programme and Management Unit(DPMSU) provides governance, coordination, monitoring, financial management and reporting support through the deployment of two staff members

Table No 5.3.1 shows the distribution of Medical Officers and Supporting Staff across ISM, Homoeopathy, and DPMSU under the National AYUSH Mission in the district

Table No 5.3.1 Department-wise Component HR Strength under NAM

Department	Component	Medical Officers	Supporting staffs	Total
ISM	Ayush Services HR	12	21	129

	Flexipool Projects	10	23	
	Ayushman Arogya Mandir(hwc)	0.	53	
	Public Health Programme	6	4	
HOMOEOPATHY	Ayush Services HR	8	11	125
	Flexipool Projects	4	6	
	Ayushman Arogya Mandir	0	79	
	Public Health Programme	8	9	
DPMSU	Admin	1	1	2
Total HR		256		

Source: District data

The details of medical and paramedical posts sanctioned in the district in Department-wise Component HR Strength under NAM which includes the category of posts, number of positions approved across various health institutions, are attached as annexure 5.3.2

5.4 AYUSH Services- Supply of Essential Drugs

Supply of Essential Drugs to Government AYUSH Hospitals and Dispensaries

- ₹4.00 lakhs per annum for essential drugs for AYUSH Hospitals
- ₹2.00 lakhs per annum for essential drugs for AYUSH Dispensaries

Table No5.4 presents the number of institutions sanctioned under the National AYUSH Mission along with the amount approved for each institution. The financial support ensures uniform strengthening of AYUSH facilities and improved service delivery across all approved centres.

Table No 5.4 Number of institutions sanctioned under the supply of essential drugs

Sl. No.	Institution	No. of sanctioned institution	Amount Sanctioned for each institution Amount
1	Hospital	4	₹4.00 lakhs
2	Dispensaries	46	₹2.00 lakhs

Source: District SAAP data

5.5 AYUSH Services- Health Infrastructure Development

5.5.1 Upgradation of Exclusive / Standalone Government AYUSH Hospitals/ AYUSH Dispensaries

During the SAAP period from 2015–16 to 2022–23 in Idukki district, several construction and upgradation work of Homoeopathy and ISM institutions were successfully completed.

In the Homoeopathy sector, the dispensaries at Kolanni (₹30.43 lakh) and Chakkupallam (₹7.20 lakh), along with the District Homoeopathy Hospital, Muttom (₹75.00 lakh), were completed.

Under ISM, completed works include the Government Ayurveda Dispensary, Kudayathoor (₹15.00 lakh), Government Ayurveda Hospital, Paremavu (₹72.00 lakh), and the District Ayurveda Hospital, Thodupuzha (₹100.00 lakh). These projects reflect a significant strengthening of AYUSH healthcare infrastructure in the district.

During the SAAP period 2022–23 to 2024–25 in Idukki district, several construction and upgradation works of Ayurveda, Homoeopathy, Tribal Ayurveda, and Integrated AYUSH institutions are in progress through agencies including M/s KHRWS, M/s KSCC, and M/s SILK.

Key projects include the construction of new Ayurveda Dispensaries at Irattayar, Puthuppariyaram, Veliyamattom, and Peruvandanam; a Tribal Ayurveda Dispensary at Kuruthikkalam; Homoeopathy Dispensaries at Muniyara and Uppukunnu; upgradation of the Government Ayurveda Hospital, Kallar; and a 30-bedded Integrated AYUSH Hospital at Rajakumari.

The details of completed & ongoing infrastructure development works under the National AYUSH Mission (NAM) for Ayurveda and Homoeopathy institutions in the district across various financial years are attached as Annexure 5.5.1.

5.5.2 Setting up of up to 10/30/50 bedded integrated AYUSH Hospital

This table presents the details of Integrated AYUSH Hospital projects sanctioned under the National AYUSH Mission (NAM) in Kerala, including the State Annual Action Plan (SAAP) year, district, name of the project, and the amount approved as per the scheme.

Table No 5.5.2 Integrated AYUSH Hospital Projects under NAM Kerala

Integrated AYUSH Hospital Projects under NAM Kerala				
SL No.	SAAP Yr	District	Name of Work	Amount Approved as per scheme
1	2023-24	Idukki	Construction of 30 Bedded Integrated AYUSH Hospital Rajakumari	₹ 105.000.000,00

Source: District SAAP data

5.6 AYUSH Services- Programmes & Projects- Ayush Public Health Programmes

The AYUSH Public Health Programmes aim to strengthen India's public health system through preventive, promotive, curative, and rehabilitative healthcare using traditional systems of medicine. In the context of increasing chronic diseases, ageing population, and lifestyle-related disorders, AYUSH systems offer safe, cost-effective, and evidence-based healthcare options. Under the National AYUSH Mission (NAM), structured programmes have been launched focusing on musculoskeletal disorders (especially osteoarthritis), non-communicable diseases, maternal and neonatal care, mobile medical services, geriatric and

palliative care, and school health promotion. These are implemented through existing NAM frameworks at state and district levels with emphasis on evidence-based interventions, capacity building, and IT-enabled monitoring.

5.6.1 National Programme for Prevention and Management of Osteoarthritis & Other Musculoskeletal Disorders in brief

Musculoskeletal disorders (MSDs), including osteoarthritis, are a major cause of disability and reduced productivity globally and in India, affecting around 20% of the population.

Need for AYUSH Intervention: There is no dedicated programme in India for MSDs. AYUSH therapies, including herbal medicines, yoga, diet, and lifestyle modifications, offer effective and safe management options. Integrating these interventions supports the goals of the National Health Policy (2017) and Sustainable Development Goal 3.

Objectives:

- a. Manage osteoarthritis and other MSDs through AYUSH-based integrative approaches.
- b. Promote self-care and awareness through Information, Education and Communication (IEC) activities.

Implementation Strategy:

Populations are categorised by risk levels for targeted intervention. Activities are implemented through AYUSH Health and Wellness Centres, dispensaries, and affiliated institutions. Major components include screening, preventive awareness, yoga, diet and lifestyle advice, clinical consultations, rejuvenation therapies (Rasayana), cleansing (Shodhana), Varma therapy, medicated oil applications, and follow-up care.

The following institutions are providing services under this project

1. DAH Annex Paremavu
2. DHH Muttom
3. GHH Pushpakandam

Table No 5.6.1 shows the Beneficiary details of NPPMOMD programme in Ayurveda and Homoeopathy

Table No 5.6.1 Beneficiary Details of NPPMOMD

Sl. No.	Department	Old	New	Total
1	Ayurveda	728	1030	1758
2	Homoeopathy	2042	1008	3050

Source: District data



Figure 5.6.1 Awareness Camp

5.6.2 VAYO MITRA: AYUSH Geriatric Healthcare Services – in brief

With India's ageing population rising and the old-age dependency ratio increasing, ensuring the health, dignity, and wellbeing of senior citizens has become vital. The *Vayo Mitra* initiative under the National AYUSH Mission focuses on promoting healthy ageing through preventive, promotive, and therapeutic AYUSH approaches. Traditional practices like *Swasthavritha* (maintenance of health), *Rasayana* (rejuvenation), *Panchakarma*, and *Tadbiri-i-Shaykhukhat* (Unani geriatric care) form the basis of AYUSH geriatric healthcare.

Objectives:

- Create awareness about healthy ageing and ways to reduce morbidity in old age.
- Provide specialised AYUSH healthcare for the elderly through the existing AYUSH network.

- Promote community recognition of the value and potential of healthy elderly individuals.

Implementation Strategies:

- **Preventive & Promotive Care:**

Encourages healthy routines (*Dinacharya, Ritucharya*), yoga, stress management, balanced diet, and proper lifestyle habits. Trained health workers conduct domiciliary visits, health assessments, and weekly AYUSH clinics for the elderly.

- **Information, Education & Communication (IEC):**

Health education through mass and folk media promotes physical fitness, stress reduction, and awareness on AYUSH geriatric care. Elderly clubs and health camps will be organised, and IEC materials and media campaigns will spread messages on healthy ageing and available AYUSH services.

The following institutions are providing services under this project

1. DAH Annex , Paremavu, Idukki
2. Government Homoeopathy Hospital, Pushpakandam, Idukki.

Table No 5.6.2 provides gender-wise and total beneficiary coverage under the Vayo Mitra geriatric care project.

Table No 5.6.2 beneficiary details

Units	Old	New	Total	Male	Female
IDK	255	453	708	292	416

Source: District data



Figure 5.6.2 Vayo Mitra Medical Camp

5.6.3 AYURVIDYA: Promotion of Healthy Lifestyle through AYUSH for School Children – in brief

The AYURVIDYA programme aims to promote healthy lifestyles and awareness about AYUSH principles among school children, focusing on hygiene, diet, yoga, and the use of medicinal plants and home remedies. The initiative targets schools in regions with poor health indicators, especially aspirational districts, to instill lifelong healthy habits from an early age.

Objectives:

- To encourage school children to adopt healthy lifestyles and diets based on AYUSH principles.
- To create awareness about the importance of medicinal plants and simple home remedies.
- To educate children about yoga for fitness, wellbeing, and stress management.

Implementation Strategy:

- The programme will cover up to 300 schools per year, with an AYUSH doctor and multipurpose worker catering to up to 25 schools monthly.
- Block-level teams including AYUSH professionals, headmasters, and NGOs will conduct AYUSH and nutrition education sessions.
- Teaching methods will use interactive tools such as videos, quizzes, posters, slogans, and street plays for effective learning.
- Activities include health and hygiene campaigns, yoga camps, medicinal herb plantations, and early health screening for common conditions.
- Teachers will be trained to identify medicinal plants and teach home remedies.
- Referral linkages with AYUSH hospitals and colleges will ensure follow-up care, and IEC materials will be distributed for awareness.

The following blocks and institutions are covered under this programme

1. DHH Muttom
2. DPMSU Thodupuzha

Table No 5.6.3 presents the number of awareness sessions conducted and beneficiaries reached under AYURVIDYA

Table No 5.6.3 showing the beneficiary details under the project

No Of Awareness Session	No Of Beneficiaries
9	301

Source: District data



Figure 5.6.3 Ayurvedic Training to kids

5.6.4 AYUSH Mobile Medical Unit - in brief

AYUSH Mobile Medical Units (AMMUs) aim to deliver healthcare to unserved and underserved, particularly tribal, populations facing a triple disease burden—malnutrition and communicable diseases, rising non-communicable diseases, and mental health issues. These mobile units bring preventive, promotive, and curative AYUSH healthcare to remote regions, improving accessibility and continuity of care.

Objectives:

- Provide doorstep AYUSH healthcare services in remote and tribal areas through outreach activities.
- Screen and manage common communicable and non-communicable diseases, provide basic OPD care, and ensure referral linkages to higher AYUSH facilities.

Implementation Strategy:

The programme will operate in across unserved tribal regions. Each mobile unit—staffed by a medical officer and multipurpose worker. Villages will be mapped to identify inaccessible clusters and referral sites. Activities include community mobilisation, disease screening, follow-up visits, medicine distribution, and proper record maintenance. The AMMUs will also conduct IEC/BCC activities to promote awareness on AYUSH interventions for malnutrition, de-addiction, and yoga, along with capacity-building programmes to improve health-seeking behaviour among tribal populations.

Table 5.6.4 showing the details of AYUSH Mobile Medical Unit Name of the Block/Sub-division/ District/ of the proposed Public Health Program

1. Devikulam Block, Idukki
2. Elamdesam Block, Idukki
3. Idukki Block, Idukki
4. Azhutha Block, Idukki

Table 5.6.4.1 showing the details of Beneficiary

	New Cases				Old Cases			Grand Total		IEC Awareness Classes	Beneficiary Count
	Male	Female	Children	Total	Male	Female	Children	Total			
2024-2025	240	380	191	811	650	985	434	2069	2880	14	450
2025- including dec 25	330	473	211	1014	667	1150	249	2066	3080	100	1263

Source: District data



Figure 5.6.4 Ayush Mobile Medical Unit Awareness Classes

5.6.5 KARUNYA: AYUSH Palliative Services – in brief

The KARUNYA initiative aims to provide compassionate, holistic palliative care through AYUSH systems of medicine, focusing on improving the quality of life of patients with life-limiting illnesses and supporting their families. Palliative care addresses physical, emotional, social, and spiritual needs, particularly for patients with conditions such as cancer, neurological disorders, organ failure, autoimmune diseases, HIV/AIDS, and age-related illnesses.

The programme emphasises home-based care, considering it cost-effective and comforting, and integrates supportive care into AYUSH dispensaries, Health & Wellness Centres, and hospitals. Early initiation of palliative care, from the time of diagnosis, helps ensure better symptom management and family preparedness.

Objectives:

To provide quality, integrated supportive care for patients suffering from chronic, lifestyle-related, geriatric, and psychiatric conditions.

Implementation Strategy:

- Home visits by AYUSH medical officers and trained health workers for patient assessment and basic care.

- Relief from pain and other symptoms through AYUSH treatments, along with psychosocial counselling.
- Use of AYUSH HWCs for community mobilisation and awareness.
- Conducting training and sensitisation programmes for healthcare professionals.
- Regular monitoring and evaluation of services.

The following blocks and institutions are covered under this programme

1. DAH Annex Paremavu- Idukki Block
2. DHH Muttom- Thodupuzha Block
3. GHH Pushpakandom- Nedumkandam Block(Work arrangement at GHD Chakkupallam)

Table No 5.6.5. Beneficiary details of KARUNYA

Department	New Cases	Old Cases	Grand Total
Homoeopathy	286	983	1269
Ayurveda	145	315	460

Source: District data



Figure 5.6.5.1 Karunya Treatment

5.7 AYUSH Services- Programmes & Projects- Flexipool Projects

The Flexipool project is a component that allows States to utilise up to 25% of the actual SAAP (State Annual Action Plan) amount to implement innovative or state-specific projects

and programmes. It provides flexibility for the State to design and execute activities based on local health priorities and emerging needs that may not be covered under mandatory components of NAM guidelines.

5.7.1 Allergy & Asthma Special Clinic (Homoeopathy)

The project is a statewide Homoeopathy initiative aimed at addressing allergy, asthma, and chronic respiratory diseases (CRDs) such as chronic obstructive pulmonary disease (COPD) and chronic bronchitis through outpatient and inpatient services in all District Homoeopathy Hospitals in Kerala. The initiative seeks to provide comprehensive Homoeopathic treatment, reduce morbidity and mortality, and lessen the financial, physical, and emotional burden on patients and their families.

The programme includes outpatient and inpatient care, community outreach activities, medical camps, and health education programmes, supported by a structured monitoring and evaluation system using baseline data, patient registries, electronic medical records (EMRs), review meetings, and impact assessments. Special clinics are established in district hospitals with patient-friendly facilities and appointment systems, supported by patient mobilisation through referrals, awareness sessions, information, education and communication (IEC) activities, and medical camps, with inpatient care provided wherever clinically indicated.

Table No 5.7.1 provides year-wise gender-wise and total beneficiaries treated under the Homoeopathy Allergy & Asthma Special Clinics

Table No 5.7.1 Number of Beneficiaries

	New Cases			Old Cases			Grand Total
	Male	Female	Total	Male	Female	Total	
2024-2025	309	404	713	1283	1432	2715	3428
2025- April to Nov 2025	152	228	380	867	1085	1952	2332

Source: District data



Figure 5.7.1.1 Patient Consultation

5.7.2 Ayurkarma

Ayurkarma is an initiative that integrates Panchakarma therapies into Government Ayurveda Dispensaries in rural Kerala to ensure equitable access to holistic Ayurvedic healthcare. The programme enables economically weaker sections of the population to receive essential kriyā kramas such as Vamana, Virechana, Nasyam, Vasthi, and Raktamoksha through OP-based units established in selected dispensaries.

The project aims to bridge service delivery gaps by incorporating Panchakarma therapies into mainstream government healthcare. Patients are identified from the general OPD and evaluated by the Project Medical Officer, who prescribes appropriate therapies following necessary clinical examinations and informed consent procedures. Treatments are administered by trained therapists under medical supervision, with systematic documentation, monitoring of vital parameters, and post-procedure guidance to ensure safety and quality of care.

The following Government Ayurveda Dispensary is the fully operational centre in the district.

1. Government Ayurveda Dispensary Vathikkudi

Along with the existing treatment protocols at dispensaries, Panchakarma techniques significantly enhance the quality of life of the population, particularly for a large number of patients from rural areas who depend on these dispensaries and are unable to access hospital-based inpatient services for such therapies. Moreover, the initiative contributes to enhancing the social relevance and community value of these institutions.

This Table No 5.7.2 presents the total Panchakarma procedures performed under Ayurkarma in the district.

Table No 5.7.2 AYURKARMA Kriyakrama Sessions

SL NO	District	Total Pancha Karma Procedures
1	Idukki	518

Source: District data



Figure 5.7.2 Ayurkarma Treatment

5.7.3 Mental Health Specialty Clinics in AYUSH

The AYUSH systems—Ayurveda, Homoeopathy, and Yoga—offer time-tested, person-centric approaches to mental well-being, with a strong emphasis on the mind–body–spirit connection. Recent initiatives have demonstrated the potential of these systems in addressing the psychological, emotional, and behavioural dimensions of health. Ayurveda-Based Mental Health Projects

Ayurveda-Based Mental Health Projects

Harsham: These clinics focus on natural therapeutic interventions for the management of clinical depression, stress-related disorders, and lifestyle-induced emotional conditions.

Pratheeksha: This programme provides cognitive enhancement therapies and Ayurvedic interventions for children with intellectual disabilities.

Medha: The initiative supports children facing academic and attention-related challenges through Ayurvedic formulations, counselling, and dietary guidance.

Homoeopathy-Based Mental Health Projects

Seethalayam Clinics: These are gender-responsive clinics providing Homoeopathic management for mental, physical, and social health issues of women, including anxiety, depression, postnatal stress, psychosomatic disorders, and trauma resulting from abuse.

Sadgamaya Clinics: Targeted at adolescents, these clinics offer mental health support, behavioural correction, and prevention of substance abuse through Homoeopathic interventions, counselling, and outreach activities.

Homoeopathy, with its individualised remedy selection and focus on the psycho-social environment of the patient, has demonstrated effective outcomes in the management of psychosomatic disorders, mood disturbances, behavioural issues, and substance use tendencies, particularly among vulnerable population groups.

The List of Dispensaries/ Hospitals Under the Coverage of Harsham

1. GAD Kattappana
2. GAH Paremavu Annexe

3. GAH Kallar
4. GAD Kudayathoor
5. GAD Karimkunnam
6. GAD Rajakkad
7. DAH Thodupuzha

Table No 5.7.3 reflects a marked increase in both new and follow-up cases in the second reporting period, indicating expanding service coverage and improved continuity of care. The rising beneficiary numbers suggest growing acceptance and utilisation of the Harsham mental health clinics in the district.

Table No 5.7.3 -Beneficiary Details of Harsham

	New Cases	Old Cases	Grand Total
Financial Year 1: April 2024 - March 2025	166	213	379
Financial Year 2: April 2025 - November 2025	250	320	570

Source: District data



Figure 5.7.3 Harsham Awareness Camp

5.7.4 Drishti

The **Drishti Project** is a comprehensive initiative aimed at promoting eye health through early detection, effective management, and accessible treatment. The project focuses on identifying ocular diseases such as diabetic retinopathy and glaucoma at an early stage to prevent future complications. For elderly individuals and patients with conditions such as heart disease who may not be suitable candidates for cataract surgery, the project provides non-surgical management options.

Drishti also emphasises the prevention of refractive errors through regular screening programmes in schools and workplaces, helping students and employees maintain optimal vision. With cost-effective treatment protocols, the initiative ensures affordable eye care compared to other systems of medicine. Most importantly, the project provides inclusive eye care services for all age groups by utilising modern diagnostic tools and offering treatment through both outpatient and inpatient services.

Table 5.7.4.1 Details of Centers with No. of camp Beneficiaries During 2024-2025

District/Unit	Total Camps	Total Camp Beneficiaries	Total IP	Total OP	Males	Females	Child
DAH, Paremavu, Idukki	8	597	12	2228	712	740	776

Table 5.7.4.2 Details of No. of Beneficiaries During 2024-2025

	Unit	Old Cases	New Cases	Grand Total
Financial Year: April 2025 - November 2025	DAH, Paremavu, Idukki	46	6834	6880
Financial Year: April 2024 - March 2025	DAH, Paremavu, Idukki	564	1652	2216

Source: District data



Figure 5.7.4 Drishti Patient Consultation

5.7.5 Magalirjyothi- Women Care through Siddha Traditional Practices

The **Magalirjyothi Project** has made remarkable progress in improving women's health in Kerala. It promotes awareness by integrating traditional medicine, reducing healthcare costs, and empowering communities. The project supports women's health both physically and mentally.

Awareness sessions are conducted at the community level through **anganwadis**, covering vital topics such as adolescent health issues, the importance of breastfeeding among young mothers, antenatal care, pregnancy nutrition plans, the role of yoga in lifestyle disorders, and the prevention of anaemia. In addition, all significant health-related and national days are observed through awareness campaigns and quiz competitions, fostering greater community engagement and knowledge.

Table 5.7.5.1 Details of Centers with No. of Beneficiaries During 2024-2025

Sl. No.	Name of District	Total No. of Beneficiaries (OP)	Cookery Workshop	Awareness Class	Medical Camp
1	Idukki	7005	14	36	23

Source: District data



Figure 5.7.5 Magalirjyothi- Patient Consultation

5.7.6 Setting Up of Physiotherapy Unit in Government AYUSH Hospitals

In Kerala, under the State Annual Action Plans (SAAP) for 2023–24 and 2024–25, a total of 27 physiotherapy units—including 26 units in Homoeopathy Hospitals and one unit in an ISM Hospital—have been approved and operationalised, addressing a long-pending need for physiotherapy services in AYUSH hospitals.

Given the encouraging public response, the tangible health benefits observed, and the increasing burden of lifestyle-related and degenerative diseases, the expansion of physiotherapy services under AYUSH has become increasingly relevant.

Table 5.7.6. Detailed Review of the Beneficiaries Year 2024-25

Sl. No.	Unit	Total No. of Beneficiaries
1	DHH Muttom	1901
2	GHH Pushpakandam	2137

Source: District data



Figure 5.7.6 Physiotherapy Unit

5.7.7 IEC Activities- Newsletter, Day Observances, Participation in Various Events, Outreach Activities etc.

Kerala has emerged as a leading State in the AYUSH sector with nearly 2300 functioning institutions ranging from medical colleges and speciality hospitals to district and peripheral health facilities. A considerable proportion of the population relies on AYUSH systems for healthcare, and many successful treatment outcomes and health initiatives have reinforced public confidence in these systems. To further strengthen awareness regarding the facilities, programmes, activities, and achievements in AYUSH, structured IEC activities such as newsletters, day observances, participation in national and international events, exhibitions, and outreach initiatives are proposed. These initiatives will enable systematic dissemination of information to the public, policymakers, planners, healthcare professionals, and stakeholders, thereby enhancing visibility and acceptance of AYUSH systems.

During the previous year, NAM Kerala successfully implemented several IEC initiatives, including the regular publication of newsletters highlighting AYUSH activities, research achievements, and success stories, along with active observance of important AYUSH and health-related days. Participation in prestigious platforms such as the G20 further contributed to showcasing Kerala's AYUSH capabilities at global level. In the coming year, it

is proposed to continue and expand these efforts through enhanced newsletters, thematic day observances, participation in national and international forums, exhibitions, Arogyamelas, and focused outreach programmes. These activities will support mainstreaming of AYUSH, promote public engagement, improve accessibility of information, and reinforce Kerala's position as a prominent centre of AYUSH excellence.



Figure 5.7.7.1 Branding through public transportation



Figure 5.7.7.2 Newsletter

5.7.8 Sports Ayurveda Project

Sports Ayurveda is an established Ayurveda super-speciality in **Kerala** that integrates traditional Ayurvedic wisdom with modern sports medicine to enhance athletic performance, endurance, and overall well-being. It adopts a holistic approach through personalised diet and nutrition, condition-specific medicines, specialised therapeutic massages, Panchakarma therapies, and targeted rehabilitation strategies aimed at injury prevention, management of sports-related conditions, and optimisation of performance.

With a long tradition of supporting arts and sports personnel through indigenous medical systems, Kerala has demonstrated the untapped potential of Ayurveda in the field of sports medicine. The scope of Sports Ayurveda includes event-specific therapeutic interventions, pre-event conditioning, post-event recovery, off-season conditioning, energy enhancement, prevention and management of repetitive strain and other sports injuries, and specialised care for sportswomen.

Proven to be safe and effective, Sports Ayurveda addresses preventive, curative, and rehabilitative needs without post-traumatic complications. Several injuries previously recommended for surgical intervention have been successfully managed through Ayurvedic treatment, resulting in rapid recovery. The established Sports Ayurveda units have benefited numerous national and international athletes, many of whom have achieved podium finishes, and continue to attract sports professionals from across India due to their reliable, holistic, and performance-enhancing outcomes.

This Table No 5.7.8.1 shows the availability of specialty, general and mobile Sports Ayurveda units in the district.

Table No5.7.8.1 District-wise Distribution of Sports Ayurveda Units in Kerala

District	Specialty Unit	General Unit	Mobile Support
Idukki	Yes	No	No

Source: District data

This Table No5.7.8.2 indicates a substantial expansion of Sports Ayurveda activities in the second reporting period, with a sharp increase in OP services, on-field support days, and beneficiary coverage. This reflects strengthened integration of AYUSH sports medicine into athletic events and growing reliance on Sports Ayurveda for performance support, injury management, and awareness generation.

Table No5.7.8.2 District -Wise Beneficiaries

APRIL 2025 TO SEPTEMBER 2025						
Sl. No .	Total Beneficiaries -OP	Total Beneficiaries -IP	Number of Days of On field Duties	On field Beneficiaries	Number of Awareness Class Taken	Number of Awareness Class Beneficiaries
1	1874	130	34	2037	8	686

Source: District data



Figure 5.7.8 Sports Ayurveda Treatment

5.7.9 MPHWS for 700 Functional Ayushman Arogya Mandirs (AYUSH)

Multi-Purpose Health Workers (MPHWs) are qualified healthcare professionals trained in General Nursing and Midwifery (GNM) or higher nursing qualifications. They play a vital role in delivering comprehensive primary healthcare services and in promoting AYUSH systems through preventive, promotive, curative, and rehabilitative interventions.

In Ayushman Arogya Mandirs, MPHWS support clinical services, public health programmes, geriatric and palliative care, emergency response, and digital health activities, while also assisting with administrative functions. They serve as a crucial link between community-based health services and institutional care, ensuring comprehensive service delivery, continuity of care, and effective programme implementation.

5.7.10 Arunima- Anemia Eradication Programme through Ayurveda

The **Arunima – Anaemia Eradication Programme through Ayurveda** is a focused public health initiative aimed at addressing the high burden of nutritional anaemia through safe, affordable, and culturally acceptable Ayurvedic interventions. Building on its successful implementation across Integrated Child Development Services (ICDS) units and nearly **6,000 schools**, the programme has strengthened awareness generation, screening, treatment support, and community participation.

To further consolidate these gains, the programme seeks to expand its reach to vulnerable populations such as tribal communities, coastal areas, urban slums, and other high-prevalence pockets.

5.7.11 Telemedicine- Strengthening and Expansion

The AYUSH Telemedicine initiative in Kerala, implemented through the National e-Sanjeevani platform, has established a State-level Telemedicine Hub with dedicated consultation consoles for Ayurveda and Homoeopathy. The initiative enables both Patient-to-Doctor and Doctor-to-Doctor teleconsultations across the State. Training has been provided to AYUSH doctors in all 14 districts, ensuring operational readiness and facilitating the phased expansion of telemedicine services to remaining facilities

5.7.12 Thyroid Special Clinic (Homoeopathy)

This project is a comprehensive, community-based **Homoeopathy Thyroid Care Initiative** aimed at early detection, effective management, and reduction of thyroid-related morbidity across Kerala, with special focus on women of reproductive age and high-burden districts. The project strengthens district-level thyroid specialty clinics by providing dedicated human resource support, diagnostic facilities, medicines, technological tools, and structured follow-up mechanisms.

Through systematic screening, outpatient and inpatient treatment, laboratory monitoring, community outreach activities, medical camps, and integration with maternal health services such as Janani, the programme seeks to reduce complications including infertility, miscarriage, associated comorbidities, and long-term health risks. This initiative aims to ensure affordable care, reduce out-of-pocket expenditure, and significantly improve the quality of life of thyroid patients, thereby establishing a robust public health response to the growing burden of thyroid disorders in the State.

This Table No 5.7.12.1 presents the number of IEC activities conducted and beneficiaries reached under the Thyroid programme

Table No 5.7.12.1 Beneficiaries Reported at Various Centres during 2024-25

	New Male	New Female	New Total	Old Male	Old Female	Old Total
2024-2025	24	177	201	139	1519	1658
2025- including Nov 25	16	117	133	141	1326	1467

Source: District data

This Table No 5.7.12.2 presents the number of IEC activities conducted and beneficiaries reached under the Thyroid programme.

Table No 5.7.12.2 Beneficiaries during 2024-25 (New Case)

Sl. No	District	Total No. of activities conducted	Total IEC Beneficiary count
1	Idukki	4	512

Source: District data



Figure 5.7.12 Awareness Class Medical Camp Thyroid Special Clinic (Homoeopathy)

5.7.13 Training to AYUSH HR

The State proposes a comprehensive Training and Capacity Building Programme for AYUSH Human Resources. The initiative aims to enhance the knowledge, skills, and professional competence of AYUSH Medical Officers, teaching faculty, administrative personnel, and paramedical staff across Kerala. Through structured training modules covering clinical care, hospital administration, digital health systems, public health programming, research methodology, medico-legal aspects, and patient communication, the programme seeks to strengthen service delivery, improve programme implementation efficiency, and ensure preparedness for emerging health challenges.

Training will be delivered through a blended approach comprising offline residential sessions and online platforms, ensuring equitable participation from all districts. By training approximately 5,000 personnel, the initiative is expected to significantly contribute to improving the quality and effectiveness of AYUSH services statewide.



Figure 5.7.11 HR Training

5.7.14 Yoga Wellness Centers

Yoga Wellness Centres are facilities that provide Yoga and Naturopathy services to promote physical, mental, and social well-being, with a focus on the prevention and management of lifestyle-related diseases. The programme aims to raise public awareness, encourage lifestyle modification, and promote Yoga and Naturopathy as effective tools for managing non-communicable diseases.

Implementation includes the deployment of Medical Officers and Yoga Instructors at AYUSH Arogya Mandirs, with Local Self Government Institutions (LSGIs) identifying outreach areas. Medical Officers oversee therapeutic management and coordinate Yoga and Naturopathy outreach activities to ensure effective service delivery.

This Table No 5.7.14.1 provides gender-wise, outreach and total beneficiaries served through Yoga Wellness Centres

Table No 5.7.14.1 Details of Centres with Number of Beneficiaries during 2024-25

Sl. No	District	Name of the Center	Male	Female	Children	Outreach	Total
1	Idukki	DAH Annexue Paremavu	1761	1246	152	5130	8289

Source: District data

5.7.15 Non-Communicable Disease (NCD) Management through AYUSH

The Integrated NCD Care Programme is a multidisciplinary initiative that provides holistic prevention, early diagnosis, and advanced management of non-communicable diseases such as diabetes, hypertension, dyslipidaemia, thyroid disorders, stroke, and cancer through dedicated Ayurveda, Siddha, Unani, and Homoeopathy units supported by Yoga-based lifestyle interventions. With **14 Ayurveda units, 14 Homoeopathy units, two Siddha units, and two Unani units** functioning across the State, the programme aims to reduce the prevalence and morbidity of non-communicable diseases, strengthen complication care, promote lifestyle and behavioural modification, and reduce out-of-pocket expenditure by offering accessible and standardised traditional medicine services.

Implementation includes health promotion activities, high-risk screening, early diagnosis, and comprehensive clinical management of major non-communicable diseases and their complications through integrative treatment protocols at district-level advanced care centres.

Table No 5.7.15.1 summarises new registrations, follow-ups, yoga sessions and IEC activities under the NCD management programme

Table No5.7.15.1 Detailed Review of the Year 2024-25 Patient Services

Sl. No	Unit	New NCD Patients Registered	Follow-up Visits	Yoga Sessions Conducted
1	Idukki (Ay)	6710	8935	967

Source: District data

Table No 5.7.15.2 presents disease-wise distribution of new NCD patients registered.

•

Table No5.7.15.2 Disease-wise Details (New Cases Registered)

Sl. No	Unit	Diabetes Mellitus	Hypertension	Dyslipidemia	Thyroid Disorders	Others
1	Idukki (Ay)	1342	1516	1104	1761	987

Table No5.7. 15.3 Disease Wise Break Up of Beneficiaries Who Availed NCD Management Clinical Services During 2024-2025

Table No5.7.15.3 Disease Wise Break Up of Beneficiaries

District	Diabetes Mellitus	Hypertension	Dyslipidemia	Obesity	Cardio Vascular Disorders	Cancer	Renal Disorders	COPD	Other Diseases
Idukki	1123	331	222	107	11	11	26	29	73

Source: District data

5.8 AYUSH Services- AYUSH Gram

AYUSH Gram is a concept wherein villages will be selected for adoption of principles and practice of AYUSH way of life and interventions of health care in villages and providing the services at grass root level. AYUSH based lifestyles are promoted through behavioural change communication, training of village health workers towards identification and use of local medicinal herbs and provision of AYUSH health services. It also include promotion of cultivation of endemic medicinal herbs and conservation of those already present in those areas. The elected village representatives are sensitized towards the concept so that there is also active participation from the community. It is a wholesome concept wherein convergence of AYUSH systems and other Govt. departments for the welfare of public is the ultimate aim.

Yoga sessions will be provided free of cost for the public at their convenient place and time with the motive of making it a part of their routine activity with constant practice.

Objectives

- To spread awareness within the community for practice of dietary habits and life styles as described in AYUSH Systems of Medicine which help in preventing disease and promoting health.
- To advice people about common ailments and its cure through use of herbs found in their localities.
- To raise campaign against communicable diseases like Malaria, Tuberculosis, Diarrhoea etc and measures for their prevention and treatment.
- Promotion of preservation and cultivation of medicinal plants.
- Prevention of Lifestyle Diseases
- Promotion of Yoga



Figure 5.8.1 Tree planting and follow up maintenance at Malankara medicinal tree park

The Table No5.8.1 presents month-wise activities and beneficiaries under the AYUSH Gram initiatives

Table No 5.8.1 AYUSH Gram activities

Sl. No.	BLOCK	NUMBER OF YOGA SESSIONS CONDUCTED								TOTAL
		Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	
1	THODUPUZHA	24	25	25	20	25	20	16	16	171
NUMBER OF MEDICAL CAMPS CONDUCTED										
1	THODUPUZHA			1			1			2
NUMBER OF MEDICAL CAMP BENEFICIARIES										
1	THODUPUZHA			75			45			120
NCD CLINIC BENEFICIARIES										
1	THODUPUZHA	183	138	158	219	134	226	162	191	1411

Source: District Data

5.9 Quality-Related Activities

5.9.1 NABH (National Accreditation Board for Hospitals)

The State Quality Assurance Wing under the **National AYUSH Mission, Kerala**, has been consistently committed to promoting a structured and sustainable Quality Assurance Programme across AYUSH healthcare institutions. The overarching objective is to ensure that services delivered under the AYUSH system provide genuine satisfaction and positive patient experience, thereby contributing significantly to overall well-being.

In the context of the growing global emphasis on healthcare quality, it has become imperative to align AYUSH services with nationally recognised quality standards, particularly through accreditation frameworks such as **National Accreditation Board for Hospitals and Healthcare Providers (NABH)** and the **National Quality Assurance Standards (NQAS)**.

Progress So Far

Kerala has emerged as a pioneer in quality healthcare delivery, with significant progress made in the accreditation of AYUSH Health and Wellness Centres (AHWCs). Out of 700 operational AHWCs in the State, 250 centres have already achieved NABH Entry-Level Certification. This initiative has not only strengthened the operational systems of AHWCs but has also enhanced public confidence and satisfaction in AYUSH services.

Impact of NABH Certification in AHWCs

The NABH Entry-Level Certification of 250 AHWCs in Kerala has significantly elevated the standard of AYUSH services across the state. It has led to:

- Uniform implementation of quality protocols.
- Enhanced infection control and patient safety.
- Improved staff competence through continuous training.
- Streamlined biomedical waste management.
- Improved documentation, defined SOPs, and enhanced accountability.
- Increased patient satisfaction and public trust.
- Enhanced prospects for insurance coverage under recognized schemes.

These outcomes underline the importance of extending the quality certification programme to the hospital sector to ensure consistent delivery of high-quality AYUSH care across all tiers.

The certification process will follow a structured approach, including internal and external assessments, quality-specific training, preparation of documentation, and submission of applications to **National Accreditation Board for Hospitals and Healthcare Providers (NABH)**. Gap-closure activities related to infrastructure, equipment, and process improvements will be partially supported through additional sources such as Local Self Government Institution (LSGI) funds, Corporate Social Responsibility (CSR) contributions, MLA/MP funds, and upgradation components under the **National AYUSH Mission (NAM)**, as per institutional eligibility.

Implementation Strategy

To effectively implement and monitor the certification process, the following strategic mechanisms and committees have been established:

- State-Level Steering Committee. Assessment Management Committee. and Documentation Committee for oversight.
- District Quality Teams and Quality Committees in all districts.
- District Nodal Officers and Facilitators to coordinate implementation activities.
- State-Level Orientation and Training Programs for institution heads. LSG representatives. and quality teams.
- Self-assessments by institution heads using NABH checklists to identify institutional gaps.
- Development of the AHWC NABH-ELC Implementation Handbook.
- District-Level Internal Assessments and State-Level External Assessments through a trained pool of assessors.
- Procurement of essential biomedical equipment and furniture where required.

5.9.2 Kayakalp

The **Kerala AYUSH Kayakalp Award** is a State-level initiative under the **Department of AYUSH, Government of Kerala**, designed to promote cleanliness, hygiene, and quality improvement in AYUSH healthcare institutions. The programme recognises hospitals and dispensaries that maintain high standards in sanitation, waste management, infection control, and patient safety.

The initiative encourages AYUSH facilities to adopt sustainable and eco-friendly practices while providing a clean, safe, and healing environment for patients. The award also supports the objectives of the **Swachh Bharat Mission** and enhances the overall image and service quality of AYUSH institutions across **Kerala**.

5.10 Ayushman Arogya Mandir (AAM- AYUSH)

Ayushman Arogya Mandir (AAM-AYUSH) are established to provide comprehensive, people-centred primary healthcare through AYUSH systems.

In Ayushman Arogya Mandir (AAM-AYUSH), National Ayush Mission AYUSH provides service delivery by providing one full time Yoga Instructor and one GNM qualified Multi-Purpose Health Worker, with an expenditure of ₹4.57 lakhs incurred for implementation.

They aim to transform existing AYUSH dispensaries and sub-centres into holistic wellness centres delivering preventive, promotive, curative, rehabilitative and palliative care. AAM-Ayush emphasise wellness promotion, lifestyle counselling, Yoga-based interventions, management of common and chronic illnesses, maternal and child health services, elderly care and referral support. Implementation is supported through the National AYUSH Mission with defined financial norms for infrastructure development, human resource support, training, IT systems and essential AYUSH medicines. Institutional mechanisms at national, state and district levels ensure planning, capacity building, convergence with NHM programmes, monitoring and evaluation to improve accessibility and quality of AYUSH-based primary healthcare.

5.11 IT Initiatives

5.11.1 AYUSH Yoga Club Locator Mobile App

The AYUSH Yoga Club Locator Mobile App is designed to help citizens easily discover and connect with government-approved AYUSH Yoga Clubs across Kerala. Using GPS-based real-time location services, the app enables users to identify nearby yoga centres, view available facilities, session timings, trainers. It promotes accessibility by ensuring that authentic and verified centres are brought within reach of every citizen, eliminating confusion regarding credibility. The platform also enhances transparency in public health service delivery by publishing verified information, performance records, and contact details of registered clubs. By simplifying access to yoga resources, the app encourages community participation, supports preventive healthcare, improves wellness awareness, and strengthens the reach of the National AYUSH Mission's health promotion initiatives.

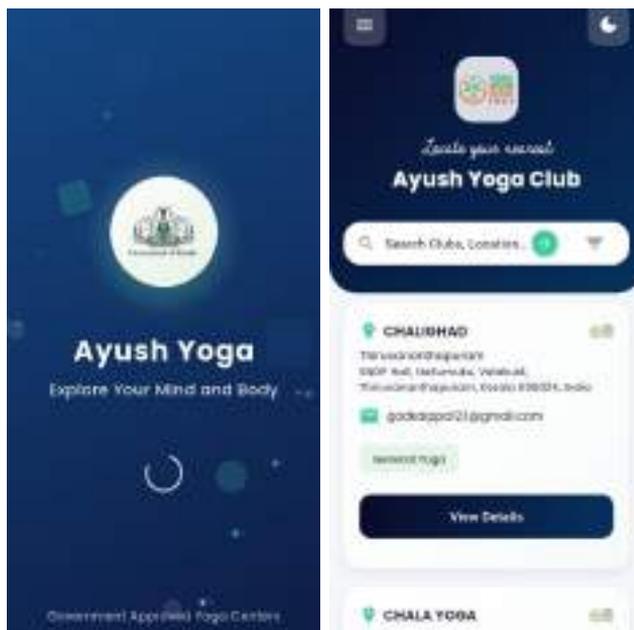


Figure 5.11.1 Screenshots of Mobile App

5.11.2 Civil ERP Software

Civil works constitute a major component under the National AYUSH Mission, and ensuring timely completion, transparency, and accountability is critical in the execution of Government infrastructure projects. Traditional monitoring and coordination methods often resulted in delays, inefficiencies, and lack of structured documentation, which necessitated the development of a dedicated Civil ERP Software to digitally integrate and streamline all aspects of civil work management from planning to completion. The platform functions as a comprehensive, centralised system accessible to administrators and technical teams, facilitating real-time supervision and effective governance. It enables systematic project planning and approval through online submissions and structured workflows, supports continuous execution monitoring through stage-wise milestone tracking, and allows uploading of photographic evidence with GPS coordinates to authenticate site progress. Additionally, it incorporates robust financial tracking features, including budget allocation, utilisation monitoring, payment milestone integration, and complete visibility of fund flow,

thereby ensuring financial discipline, transparency, and accountability across all civil infrastructure activities under the Mission.



Figure 5.11.2.1 Screenshot of ERP Software Home Screen



Figure 5.11.2.2 Screenshot of ERP Software dashboard

5.11.3 AYUSH Medicine Procurement Software

The AYUSH Medicine Procurement Software was developed to meet the growing need of the National AYUSH Mission, Kerala, for a modern and reliable digital system to streamline medicine procurement operations across hospitals and dispensaries, replacing earlier manual processes that caused delays, duplication, lack of real-time stock visibility, and data

inaccuracies. This comprehensive end-to-end digital platform enables institutions to generate and submit indents online, while District Medical Officers, District Programme Managers, and higher authorities can review, approve, or revise requests through a structured workflow. Integrated master data ensures consistency, while timely alerts support pending approvals, stock shortages, and delivery tracking. Detailed dashboards and analytics provide meaningful insights into procurement trends and utilisation patterns, supporting informed decision-making. Secure role-based login ensures data safety and clarity of responsibilities, while automated processes help maintain essential stock levels, eliminate manual errors, and ensure transparency. The system strengthens coordination between hospitals, district authorities, and Oushadhi, supports real-time monitoring, facilitates timely replenishment, and ensures compliance with government norms, ultimately creating a transparent, efficient, and audit-ready digital ecosystem for AYUSH medicine management in Kerala.

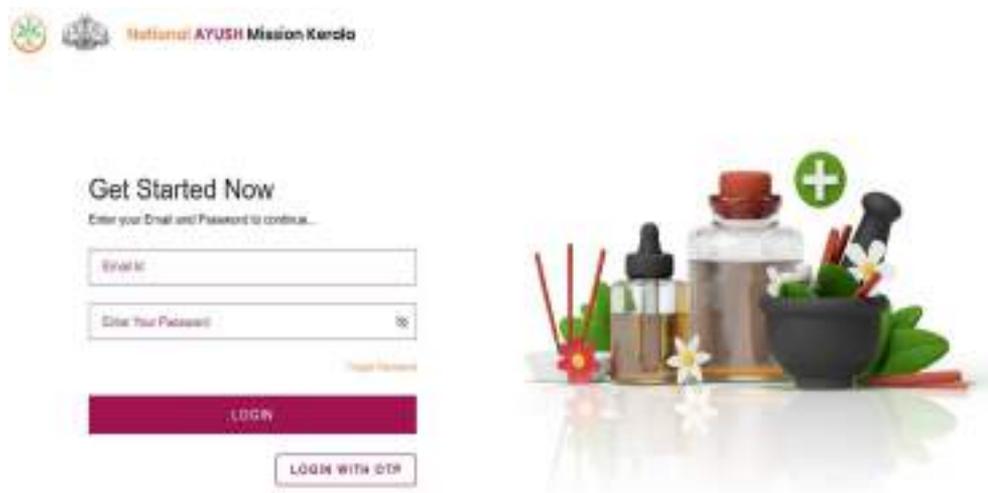


Figure 5.11.3.1 Screenshot of Login Page in AYUSH Medicine Procurement Software



Figure 5.11.3.2 Screenshot of Home Page in AYUSH Medicine Procurement Software

5.11.4 NAM HR & Payroll Software

The National AYUSH Mission, Kerala, recognised the need for a robust and reliable system to efficiently manage attendance and payroll processes across its centres, as conventional methods were largely manual, time-consuming, prone to errors, and lacked real-time verification and transparency. To overcome these challenges and ensure accuracy, accountability, and operational efficiency, the NAM HR & Payroll Software was developed as a comprehensive digital solution. The system facilitates real-time attendance tracking with accurate time records, supported by geo-tagged attendance to ensure location-based verification and prevent proxy entries. It allows flexible shift assignment, offers an integrated online leave management workflow, and enables fully automated payroll processing with single-click salary generation based on verified attendance and leave data, supported by multi-level verification for compliance and financial discipline. By simplifying attendance management, ensuring digitally documented records, reducing administrative workload, and enhancing transparency in salary processing, the software significantly strengthens efficiency, governance, and accountability across all AYUSH centres.

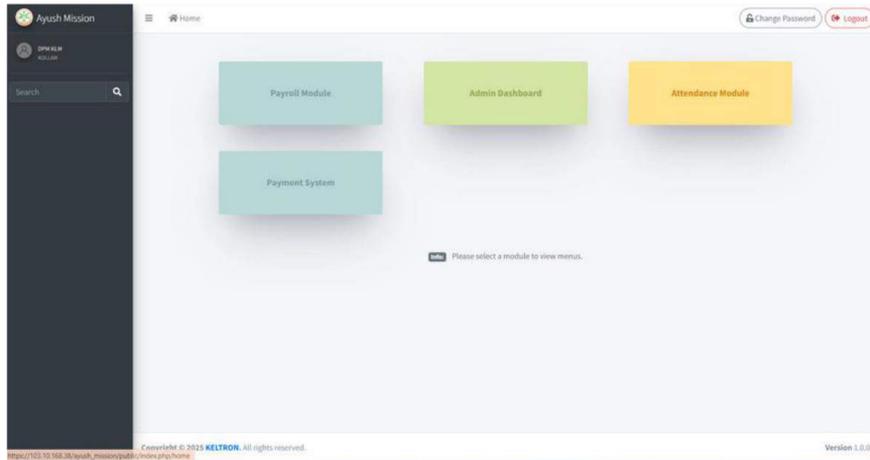
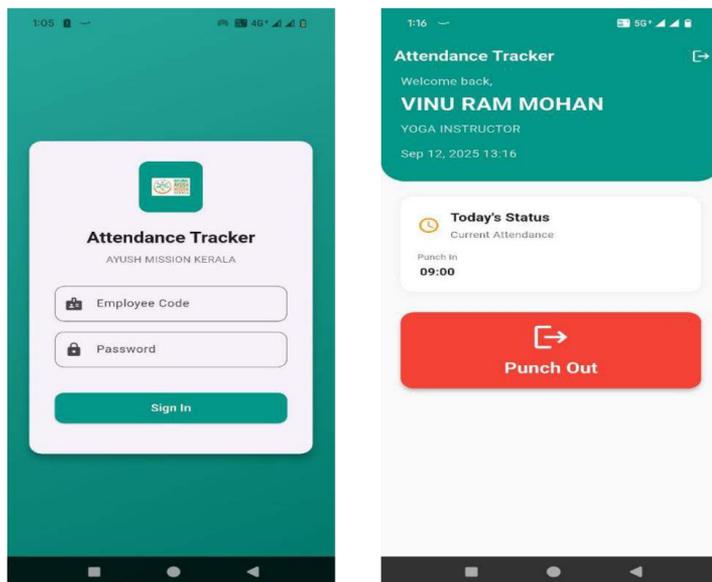


Figure 5.11.4.1 1 Screenshot of Home Page in AYUSH Payroll software



5.11.4.2 Figure : NAM HR & Payroll Software in mobile app

5.11.5 AYUSH Payment Monitoring System

The AYUSH Payment Monitoring System is a comprehensive web-based financial governance platform under the National AYUSH Mission (NAM), designed to enhance transparency,

accountability, and efficiency across all payment-related processes. It manages the complete financial workflow, including fund allocation, expenditure tracking, bill submission, verification, approval, and final disbursement, while also supporting vendor management, automatic TDS processing, configurable dashboards, and detailed financial reporting for smooth and error-free transactions. The system maintains precise district-wise financial records, ensures component-wise fund control, and effectively monitors project-wise unspent balances, providing a complete end-to-end digital trail that strengthens audit readiness and governance compliance. It tracks real-time balances, flags idle or unutilised funds, enforces automated financial controls to prevent overspending, and supports multi-level user access, workflow automation, scalable architecture, and clear segregation of agency-wise and component-wise expenditures. Leveraging AI capabilities, the platform enables real-time validation checks to prevent errors and fraud, predictive analysis of fund utilisation trends, and intelligent alerts with actionable recommendations, thereby ensuring a unified, transparent, and reliable financial monitoring ecosystem for AYUSH across multiple implementing agencies.

5.11.6 Learning Management System

The AYUSH sector faces several training-related challenges, including difficulty in reaching rural and remote regions, lack of standardised and trackable certification processes, high expenditure on physical training workshops, and the absence of a unified system for maintaining centralised training and certification records. To address these gaps, a dedicated Moodle-based Learning Management System (LMS) has been developed exclusively for AYUSH, serving as a centralised online platform where students, practitioners, and professionals can enrol in Government-recognised certification courses, access structured digital learning materials, interact with trainers and peers, and receive verifiable digital certificates upon completion. Deployed on a secure cloud environment, the LMS ensures reliability, scalability, and continuous availability, supported by trained administrators, user manuals, ongoing technical assistance, and provisions for future enhancements such as AI-driven recommendations and analytics dashboards. Highly scalable and accessible, the software enables thousands of learners, including rural practitioners, to benefit from uniform, standardised training while significantly reducing the costs associated with

physical training programmes. It ensures transparency through automated, verifiable certification, enhances convenience through a user-friendly mobile-compatible design, and guarantees data security through secure hosting and role-based access controls, thereby strengthening capacity building, governance, and the digital transformation of AYUSH training in alignment with the Digital India vision.



Figure 5.11.6.1 Screenshot of Home Page



Figure 5.11.6.2 Screenshot of Course details explained

Chapter 6

DIRECTORATE OF AYURVEDA MEDICAL EDUCATION

Government Ayurveda Medical College & Hospital — Udumbanchola, Idukki

The Government of Kerala has made a landmark intervention in strengthening traditional healthcare and medical education in **Idukki district** by approving the establishment of a **Government Ayurveda Medical College & Hospital at Udumbanchola**. This initiative marks a major milestone in expanding access to quality Ayurvedic healthcare and education in the high-range region, addressing a long-standing public demand where Ayurveda remains a preferred system of treatment.

In **August 2025**, the State Government accorded **administrative sanction of ₹2.20 crore** for initiating the hospital operations of the medical college. To ensure the early commencement of patient care, initial clinical services were started from the community hall premises provided free of cost by the Udumbanchola Grama Panchayat.

The sanctioned funds were utilized for establishing essential infrastructure and procuring equipment, including furniture, computers, office stationery, medical equipment, instruments, and consumables. This enabled the hospital to begin functioning with **outpatient (OP) services**. The hospital was planned with an initial **50-bed capacity, eight specialty OP units**, and supporting facilities such as reception and registration, emergency and casualty services, diagnostics, rehabilitation, physiotherapy, yoga, and dispensary services. The activities required to operationalize the 50-bedded IP section, along with all supporting facilities, in a leased building near the OP section are in the final stage.

Further strengthening the project, the **Idukki Development Package** provided additional investments, including **₹10 crore for the construction of a dedicated OPD complex**, along with budgetary approvals with additional fund for boundary wall and entrance infrastructure, reflecting the Government's sustained commitment to the completion of the full-fledged medical college campus. The construction works were initiated by WAPCOS, the consultant for the Ayurveda Medical College development.

The Government Ayurveda Medical College & Hospital is being developed on a **20.85-acre site at Mattuthavala, Udumbanchola**, with construction of academic and administrative

blocks progressing steadily. Upon completion, the institution is expected to significantly strengthen specialized Ayurvedic healthcare, medical education, preventive care, and research in Idukki district and nearby regions, while emerging as a model institute for medical tourism offering authentic traditional Ayurveda.

The **Hospital OP services and the construction works were formally inaugurated on 26th October 2026 by the Hon'ble Minister for Health, Smt. Veena George.** With the commencement of **eight specialty units and a casualty unit**, attached to the medical college hospital, this initiative stands as a notable achievement of the Government of Kerala in advancing AYUSH infrastructure in the district.



Annexures

Annexure 3.3.1: Details of ISM Facilities - Hospital

Sl No	Name of Institution	Stream	Address	Village	Name of LSGD	Type of LSGD	Name of block panchayat	District panchayat division	LAC	Parliament	Urban/Rural
1	DAH Thodupuzha	ISM	Thodupuzha East P O, Idukki	Thodupuzha	Thodupuzha	MC	Thodupuzha	--	--	Idukki	Urban
2	DAH Annex Paremu	ISM	Idukki Colony PO, Idukki, 685602	Idukki	Vazhathoppe	GP	Idukki	Idukki	Idukki	Idukki	Rural
3	GAH Kallar	ISM	Balagram PO, Thiridcamp, 685553	Karunapuram	Pampadumpara	GP	Nedumkandam	Pampadumpara	Udumbanchola	Idukki	Rural

Annexure 3.3.1: Details of ISM Facilities - Dispensary

S	Name of Institution	Stream	Address	Village	Name of LSGD	Type of LSGD	Name of block panchayat	Name of district panchayat	LAC	Parliament	Urban/Rural
1	GAD Alakode	ISM	Chilavu P. O, Alakode, Thodupuzha, Idukki, 685588	Karimannor	Alakode	GP	Ilamdesam	Karimanoor	Thodupuzha	Idukki	Rural
2	GAD Anachal	ISM	Chithirapuram p. o, Idukki	Kunjithannay	Vellathooval	GP	Adimali	Adimali	Devikulam	Idukki	Rural
3	GAD Arakkulam	ISM	Moolamattom P O,	Arakkulam	Arakkulam	GP	Idukki	Moolamattom	Thodupuzha	Idukki	Rural
4	GAD Bisonvalley	ISM	Bisonvalley P O, Bisonvalley	Bisonvalley	Bisonvalley	GP	Adimaly	Rajakkad	Devikulam	Idukki	Rural
5	GAD Chelachuva du	ISM	Chelachuvadu P.O - 685606	Chelachuvadu	Idukki-kanjukkuzhi	GP	Idukki	Mullarinnad	Idukki	Idukki	Rural
6	GAD Chemmannar	ISM	Chemmannar PO, Idukki	Kathippara	Senapathi	GP	Nedumkandam	Nedumkandam	Udumbanchola	Idukki	Rural

7	Gad Chinnakana I	ISM	Chinnakanal P. O, 685613	Chinnakanal	Chinnakanal	GP	Devikulam	Devikulam	Devikulam	Devikulam	Idukki	Rural
8	GAD Devikulam	ISM	Devikulam p.o.,Idukki,685613	KDH	Devikulam	GP	Devikulam	Devikulam	Devikulam	Devikulam	Idukki	Rural
9	GAD Edamalakydy	ISM	Andavankudy, Edamalakkudy PO Munnar 685612	Edamalakydy	Edamalakydy	GP	Devikulam	Munnar	Devikulam	Devikulam	Idukki	Rural
10	GAD Erattayar	ISM	Erattayar P O 685514	Erattayar	Erattayar	GP	Kattappa na	Idukki	Udumanchola	Idukki	Idukki	Rural
11	GAD Kanchiyar	ISM	Kanchiyar	kanchiyar	Kanchiyar	GP	Kattappa na	idukki	Idukki	Idukki	Idukki	Rural
12	GAD Kanjikuzhy	ISM	Venmany P.O 685606	Venmany	Idukki-kanjukkuzhi	GP	Idukki	Mullarigad	Idukki	Idukki	Idukki	Rural
13	GAD Kanthalloor	ISM	Kanthalloor P O, Kanthalloor, 685620	Kanthalloor	Kanthalloor	GP	Devikulam	Idukki	Devikulam	Devikulam	Idukki	Rural

14	GAD karadikuzhy	ISM	55th mile, karadikuzhy p. o, pin. 685531	peerumed u	GP	Azhutha	Vandiper iyar	peerume du	Idukki	Rura l
15	Gad karimkunn am	Ism	karimkunn p. o	karimkunn am	GP	thodupu zha	karimku nnam	thodupu zha	Idukki	Rura l
16	GAD Kattappana	ISM	Kattappana PO, 685508	Kattappan a	MC	Kattappa na	Idukki	Idukki	Idukki	Urb an
17	GAD Kamakshy	ISM	Thankamany P O	Thankama ny	GP	Idukki	idukki	idukki	Idukki	Rura l
18	GAD Kodikulla m	ISM	West Kodikulam P O, Idukki	Kodikulam	GP	Elamdes am	Vannapp uram	Thodupu zha	Idukki	Rura l
19	GAD Kudayatho or	ISM	Kudayathoor.P. O	Kudayatho or	GP	Elamdes am	Moolama ttam	Idukki	Idukki	Rura l
20	GAD Kumily	ISM	Kumily po Idukki	kumily	GP	Azhutha	Vandan medu	Peerume du	Idukki	Rura l
21	GAD Marayoor	ISM	Marayoor P.O, Idukki-685620	Marayoor	GP	Devikula m	Idukki	Devikula m	Idukki	Rura l

2	GAD mlamala	ISM	Thengakkal p.o, poondikkulam, 685533	Peerumade	vandiperiyar	GP	Azhutha	vandiperiyar	Peerumade	Idukki	Rural
2	GAD Mullaringadu	ISM	Mullaringadu P O Vellakkayam, Id ukki Pin :685607	Vannappuram	Vannappuram	GP	Elamdesam	Vannappuram	Thodupuzha	Idukki	Rural
2	GAD Munnar	ISM	Ikkannagar Munnar P. O 685612	Munnar	Munnar	GP	Devikulam	Munnar	Devikulam	Idukki	Rural
2	GAD Pachady	ISM	Nedumkandam PO	Nedumkandam	Nedumkandam	GP	Nedumkandam	Nedumkandam	Udumbanchola	Idukki	Rural
2	GAD Pallivasal	ISM	Kallar-Vattiyar P O, Idukki-685 565	Anaviratti	Pallivasal	GP	Adimaly	Pallivasal	Devikulam	Idukki	Rural
2	GAD Perinjankutty	ISM	Bethel P O, Pin:685514	Vathikudy	Vathikudy	GP	Idukki	Idukki	Idukki	Idukki	Rural
2	GAD Pooppara	ISM	Pooppara P O, 685619	Pooppara	Santhapara	GP	Devikulam	Idukki	Udumbanchola	Idukki	Rural

29	GAD Puthuppariyaram	ISM	Puthupariyaram P.O, Puthupariyaram	Manakkad	GP	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rural
30	GAD Rajakkad	ISM	Rajakkad PO Rajakkad	Rajakkad	GP	Nedumk andam	Rajakkad	Udumban chola	Idukki	Rural
31	GAD Rajakumari	ISM	Rajakumari P.O, Pin 685619	Rajakumari	GP	Nedumk andam	Rajakumar i	Udumban chola	Idukki	Rural
32	GAD Udumbannoor	ISM	Udumbannoor PO	Udumbannoor	GP	Elamdes am	Udumbannoor	Thodupu zha	Idukki	Rural
33	GAD Upputhode	ISM	Upputhode. P.O	Upputhode	GP	Idukki	Mariyapuram	Painavu	Idukki	Rural
34	GAD Vandanne du	ISM	Vandanmedu PO, Idukki	Vandanmedu	GP	Kattappa na	Vandanmedu	Udumban chola	Idukki	Rural
35	GAD Varikkamuthan	ISM	Venmony P O, Varikkamuthan, Idukki-685606	Kanjikuzhy	GP	Idukki	Mullarinnad	Idukki	Idukki	Rural

3	GAD	ISM	Thoprankudy P.O, Pin: 685609	Vathikudy	Vathikudy	Vathikudy	GP	IDUKKI	Thopr am kudy	Idukki	Idukki	Rura I
6	Vathikudy	ISM	Kovilo or P. O	Vattavada	Kottakamb oor	Vattavada	GP	Devikula m	Devikula m	Idukki	Idukki	Rura I
3	GAD	ISM	Pallivasal. P. O, 2mile, Idukki 685565	Pallivasal	Pallivasal	Pallivasal	GP	Adimali	Pallivasa l	Devikula m	Idukki	Rura I
8	GSD	ISM	Ezhalloor P O Thodupuzha	Kumarama ngalam	kumarama ngalam	Kumarama ngalam	GP	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rura I
3	GAD	ISM	Karimannoor P O, Idukki	Karimannoor	Karimannoor	Karimannoor	GP	Elamdes am	Kariman noor	Thodupu zha	Idukki	Rura I
4	GAD	ISM	Wembly P O, Idukki	Kokkayar	Kokkayar	Kokkayar	GP	Azhutha	Vagam on	Peerume du	Idukki	Rura I
4	GAD	ISM	Paloor kkavup	Peruvanth anam	Peruvanth anam	Peruvanth anam	GP	Azhutha	Vagam on	Peerume d	Idukki	Rura I
4	GAD	ISM	Pannimattom P O	Velliyamat tom	Velliyamat tom	Velliyamat tom	GP	Elamdes am	Moolama ttam	Thodupu zha	Idukki	Rura I
4	GAD	ISM										
3	Velliyamat om	ISM										

4	GAD	ISM	Muttom.PO	Muttom	Muttom	GP	Thodupu zha	Karimku nnam	Thodupu zha	Idukki	Rura I
4	Muttom										
4	GAD	ISM	Vazhithala P O, Vazhithala, 685583	Purappuzh a	Purappuzh a	GP	Thodupu zha	Karimku nnam	Thodupu zha	Idukki	Rura I
5	Vazhithala										
4	GAMD	ISM	Painavu P O, Painavu	Idukki	Vazhathop e	GP	Idukki	Idukki	Idukki	Idukki	Rura I
6	Painavu										
4	GAD	ITD	Champakkad, Marayoor P.O, Idukki-685620	Kanthalloor	Kanthalloor r	GP	Devikula m	Idukki	Devikula m	Idukki	Rura I
7	Champakka d	P									
4	GATD	ITD	Kozhimala PO 685511	Kanchiyar	Kanchiyar	GP	Kattappa na	Idukki	Idukki	Idukki	Rura I
8	Kanchiyar	P									
4	GATD	ITD	Mannamkanda m PO Korangatty	Mannamka ndam	Adimaly	GP	Adimaly	Adimaly	Devikula m	Idukki	Rura I
9	Mannamka ndam	P									
5	GATD	ITD	Karippalangadu P.O, Idukki ,Pin 685601	Arakkulam	Arakkulam	GP	Idukki	Idukki	Thodupu zha	Idukki	Rura I
0	Nadukani	P									
5	GATD	ITD	Koovakandom P O, 685588	Velliyamat tom	Velliyamat tom	GP	Elamdes am	Moolama ttom	Thodupu zha	Idukki	Rura I
1	Naliyani	P									

5	NHM	NH	kochara po chettukuzhi pin685551	karunapur am	GP	Nedumk andam	idukki	udumbe nchola	Idukki	Rura I
2	Karunapur am	NH M		karunapur am	GP	Azhutha	vagam	Peerume du	Idukki	Rura I
5	NHM ,APHC,, Elappara	NH M	Vagamon PO,vagamon	vagam	GP	Chakkupall am	Chakkupall am	Peerume du	Idukki	Rura I
3	NHM APHC	NH M	Chakkupallam p o,685509	Chakkupall am	GP	Kattappa na	Vandan medu	Peerume du	Idukki	Rura I
4	Chakkupall am	NH M		Chakkupall am	GP	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rura I
5	NHM APHC	NH M	Edavetty PO, Edavetty Thodupuzha	Karikkodu	GP	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rura I
5	Edavetty	NH M		Karikkodu	GP	Azhutha	Vandan medu	Peerume du	Idukki	Rura I
6	NHM APHC Kumaly	NH M	Kumaly P O, Kumaly	Kumaly	GP	Chakkupall am	Chakkupall am	Peerume du	Idukki	Rura I
5	NHM APHC Mankulam	NH M	Mankulam PO Munipara	Mankulam	GP	Devikula m	Munnar	Devikula m	Idukki	Rura I
7	NHM APHC Mankulam	NH M		Mankulam	GP	Edavetty	Edavetty	Devikula m	Idukki	Rura I
5	NHM APHC Udumbanc hola	NH M	Kailasanad PO 685553	Parathod hola	Gp	Edavetty	Edavetty	Devikula m	Idukki	Rura I
8	NHM APHC Udumbanc hola	NH M		Parathod hola	Gp	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rura I
5	NHM APHC,Mana kkad	NH M	arikuzha p.o,manakkad 685608	manakkad	GP	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rura I
9	APHC,Mana kkad	NH M		manakkad	GP	Thodupu zha	Thodupu zha	Thodupu zha	Idukki	Rura I

60	NHM Ayush PHC Ayyappank ovil	NH M	Ayyappankovil P.O, Mattukatta- 685507	Ayyappan kovil	Konnathad y	GP	Kattappa na	Upputha ra	Peerume du	Idukki	Rura l
61	NHM Ayush PHC Konnathadi	NH M	Panickankud P.O, Panickankudi	Konnathad y	Konnathad y	GP	Adimaly	Idukki	Idukki	Idukki	Rura l
62	NHM Ayush PHC Upputhara	NH M	Upputhara P O 685505	Upputhara	Upputhara	GP	Kattapan a	Upputha ra	Peerume du	Idukki	Rura l
63	NHM AYUSH PHC,Adimal i	NH M	Adimaly P O 685561	Mannanka ndam	Adimaly	GP	Adimaly	Adimaly	Devikula m	Idukki	Rura l
64	NHM APHC, Vand iperiyar	NH M	keerikkara p o vandiperiyar 685533	manjumala	vandiperiy ar	GP	Azhutha	vandiper iyar	Peerume du	Idukki	Rura l

Annexure 3.3.1: Details of ISM Facilities - Hospital

Sl No	Institution Name	Average OPD in a Month	Average IPD in a Month	Total Bed Strength
1	DAH Thodupuzha	6896	199	100
2	DAH Annex Paremavu	3505	116	50
3	GAH Kallar	2346	43	30

Annexure 3.5.2: Table of Beneficiary details in Government ISM Dispensaries

Sl No	Name of Institution	Average OPD in a Month
1	GAD Alakodu	928
2	GAD Anachal	1062
3	GAD Arakkulam	1131
4	GAD Baisonvalley	1088
5	GAD Chelachuvadu	810
6	GAD Chemmannar	1268
7	GAD Chinnakkanal	753

8	GAD Devikulam	939
9	GAD Edamalakkudy	369
10	GAD Erattayar	1209
11	GAD Ezhalloor	995
12	GAD Kamakshy	1447
13	GAD Kanchiyar	1252
14	GAD Kanjikuzhy	706
15	GAD Kanthalloor	1222
16	GAD Karadikkuzhy	1106
17	GAD Karimannoor	1054
18	GAD Karimkunnam	1778
19	GAD Kattappana	1677
20	GAD Kodikkulam	1058
21	GAD Kokkayar	672
22	GAD Kudayathoor	868
23	GAD Kumaly	1446
24	GAD Marayoor	719
25	GAD Mlamala	901
26	GAD Mullaringad	833

27	GAD Munnar	1079
28	GAD Muttom	1376
29	GAD Pachady	994
30	GAD Painavu	503
31	GAD Pallivasal	1068
32	GAD Perinchankutty	1236
33	GAD Peruvanthanam	1031
34	GAD Pooppara	1036
35	GAD Puthuppariyaram	1165
36	GAD Rajakkadu	1342
37	GAD Rajakumary	778
38	GAD Udumbannoor	963
39	GAD Upputhodu	466
40	GAD Vandanmedu	1035
41	GAD Varikkamuthan	904
42	GAD Vathikkudy	1158
43	GAD Vattavada	512
44	GAD Vazhithala	1803
45	GAD Velliyamattom	1008

46	GSD Pallivasal	1020
47	GATD Champakkad	653
48	GATD Mannamkandam	712
49	GATD Kanchiyar	1211
50	GATD Naliyani	702
51	GATD Nadukani	707

Annexure 3.5.3: Table of Beneficiary details in APHC dispensaries

SI No	Name of Institution	Average OPD in a Month
1	NHM Adimali	1651
2	NHM Ayyappankovil	1126
3	NHM Chakkupallam	1121
4	NHM Edavetty	1110
5	NHM Elappara	1104
6	NHM Karunapuram	1091
7	NHM Konnathady	1756
8	NHM Mankulam	1017

9	NHM Udumbanchola	1488
10	NHM Upputhara	1428
11	NHM Kumaly	1130
12	NHM Manakkad	1130
13	NHM Vandipperiyar	1171

Anexure 3.5.2 Matruvandanam project details

SL No	Project name	Institution name	Year Expenditure
1	Matruvandana m	Govt. Ayurveda Dispensary Alakodu	
		Govt. Ayurveda Dispensary Anachal	<u>2020-21</u>
		Govt. Ayurveda Dispensary Arakkulam	nil
		Govt. Ayurveda Dispensary Baisonvalley	<u>2021-22</u>
		Govt. Ayurveda Dispensary Chelachuvadu	25,00,000/-
		Govt. Ayurveda Dispensary Chemmannar	<u>2022-23</u>

		Govt. Ayurveda Dispensary Chinnakkanal	25,00,000/-
		Govt. Ayurveda Dispensary Devikulam	<u>2023-24</u>
		Govt. Ayurveda Dispensary Erattayar	25,00,000/-
		Govt. Ayurveda Dispensary Ezhalloor	<u>2024-25</u>
		Govt. Ayurveda Dispensary Kamakshy	25,00,000/-
		Govt. Ayurveda Dispensary Kanchiyar	
		Govt. Ayurveda Dispensary Kanjikuzhy	
		Govt. Ayurveda Dispensary Kanthalloor	
		Govt. Ayurveda Dispensary Karadikkuzhy	
		Govt. Ayurveda Dispensary Karimkunnam	
		Govt. Ayurveda Dispensary Karimannoor	
		Govt. Ayurveda Dispensary	

		Kodikkulam	
		Govt. Ayurveda Dispensary Kokkayar	
		Govt. Ayurveda Dispensary Kudayathoor	
		Govt. Ayurveda Dispensary Kumaly	
		Govt. Ayurveda Dispensary Marayoor	
		Govt. Ayurveda Dispensary Mlamala	
		Govt. Ayurveda Dispensary Muttom	
		Govt. Ayurveda Dispensary Mullaringadu	
		Govt. Ayurveda Dispensary Munnar	
		Govt. Ayurveda Dispensary Pachady	
		Govt. Ayurveda Dispensary Pallivasal	
		Govt. Ayurveda Dispensary Perinchankutty	
		Govt. Ayurveda Dispensary Peruvanthanam	
		Govt. Ayurveda Dispensary Puthuppariyaram	

		Govt. Ayurveda Dispensary Pooppara	
		Govt. Ayurveda Dispensary Rajakkadu	
		Govt. Ayurveda Dispensary Rajakumary	
		Govt. Ayurveda Dispensary Udumbannoor	
		Govt. Ayurveda Dispensary Upputhodu	
		Govt. Ayurveda Dispensary Varikkamuthan	
		Govt. Ayurveda Dispensary Vathikkudy	
		Govt. Ayurveda Dispensary Vazhithala	
		Govt. Ayurveda Dispensary Vattavada	
		Govt. Ayurveda Dispensary Vandanmedu	
		Govt. Ayurveda Dispensary Velliyamattom	
		NHM Adimaly	

		NHM Ayyappankovil	
		NHM Chakkupallam	
		NHM Edavetty	
		NHM Elappara	
		NHM Karunapuram	
		NHM Konnathadi	
		NHM Mankulam	
		NHM Udumbanchola	
		NHM Upputhara	
		Govt. Ayurveda Hospital Kalalr	
		District Ayurveda Hospital(Annex) Paremavu	

Annexure: 3.6 LSGD project details

SL No	Project name	Institution name	Year	Expenditure
1	Hridyam	1.GAD Kudayathoor	202 0-21	200000
			202 1- 22	200000

			202 2-23	200000
			202 3 - 24	300000
			202 4 - 25	300000
		2.GAD Vazhithala	202 0-21	45000
			202 1- 22	30000
			202 2-23	50000
			202 3 - 24	50000
			202 4 - 25	25000
		3.GAD Kudayathoor	202 1-22	200000

			202 2-23	200000
			202 3 - 24	300000
			202 4 - 25	300000
2	Janani	GAD Muttom	202 0-21	100000
			202 1- 22	100000
			202 2-23	100000
			202 3 - 24	100000
			202 4 - 25	100000

3	Swasthyam	GAD Vathikudy	202 0-21	200000
			202 0-21	150000
			202 1-22	100000
			202 2-23	50000
			202 4 - 25	742515
4	Streeroga chikitsa	GAD Vazhithala	202 0-21	150000
			202 1-22	100000
			202 2-23	50000
			202 4 - 25	742515

5	Thenum Vayambum	GAD Vazhithala	202 0-21	35000
			202 1- 22	45000
			202 2-23	79500
			202 3 - 24	66600
			202 4 - 25	106600
6	Medical camps at ST colonies for women	GAD Nadukani	202 0-21	180000
			202 1- 22	180000
			202 2-23	188150
			202 3 - 24	197405
			202	199640

			4 - 25	
7	Medical camps at ST colonies for senior citizens	GAD Nadukani	202 0-21	378110
			202 1-22	388561
			202 2-23	367047
			202 3 - 24	380023
			202 4 - 25	389977
8	Mobile Tribal clinic -Camp at tribal area	DAH Annex Paremavu	202 1-22	1300000
			202 2-23	550000
			202	975000

			3 - 24	
			202 4 - 25	460000
9	Sthreeshakti	DAH Annex Paremavu	202 1-22	1500000
			202 2-23	3500000
			202 3 - 24	1000000
			202 4 - 25	1500000
10	Ayurarogyam- Senior Citizens	1.DAH THODUPUZH A	202 4-25	1000000
		2.DAH (ANNEX) PAREMAVU	202 4-25	1000000
11	Vanitha	GAD	202	100000

		ARAKKULAM	4-25	
12	Yoga Training	GAD KUMALY	202 4-25	150000
13	Sabarimala maholsavam medical camp	GAD KUMALY	202 4-25	80000
14	Vayo nilavu project	GAD PALLIVASAL	202 4-25	300000
15	Ritu	GADVAZHIT HALA	202 4-25	150000
16	Anandham	GADVAZHIT HALA	202 4-25	100000
17	Annam aharamoushadh yam	GADVAZHIT HALA	202 4-25	62000
18	Nirayamaya-control of lifestyle disease and prevention	GAD UDUMBANN OOR	202 2-23	100000
			202 4-25	100000

19	Kusumam-Yoga training for women	GAD UDUMBANN OOR	202 2-23	30799
20	Poorna	GAD VAZHITHAL A	202 3-24	50000
			202 4-25	30000
21	Magaravilakku special project	NHM KUMALY	202 2-23	30000
			202 3-24	30000
			202 4-25	30000
22	Medicine purchase for Matruvandana m	GAD KATTAPPAN A	202 1-22	45000
			202 2-23	200000
			202 3 -	200000

			24	
23	Arike special project	GAD BAISONVALL EY	202 1-22	100000
	Arike Palliative care	GAD EZHALLOOR	202 1-22	50000
	Arike-medicine purchase	GAD KAMAKSHY	202 1-22	100000
	Arike-medicine purchase	GAD KARADIKUZ HY	202 1-22	100000
			202 2-23	100000
	Arike project	GAD KUMALY	202 1-22	100000
	Arike project	GAD MARAYOOR	202 1-22	50000
	Arike project	GAD MLAMALA	202 1-22	2,00,000
	Arike special project	GAD POOPPARA	202 1-22	100000
	Arike Palliative	GADUPPUTH	202	100000

	care	ODU	1-22	
	Arike	NHM AYYAPPANK OVIL	202 1-22	50000
	Arike	NHM EDAVETTY	202 1-22	50000
	Arike	NHM KARUNAPUR AM	202 1-22	50000
	Arike	NHM KONNATHAD I	202 1-22	60000
24	Medicine for orphanage	GAD KANCHIYAR	202 2-23	50000
25	Lifestyle disease project	GAD KANTHALLO OR	202 3 - 24	100000
26	Covid 19 - Special Project	DAH THODUPUZH A	202 1-22	1000000
		DAH (ANNEX) PAREMAVU		1410000

		GAD DEVIKULAM		80000/-
		GAD ERATTAYAR		50000
		GAD EZHALLOOR		200000
		GAD KANCHIYAR		300000
		GAD KARADIKKU ZHY		200000
		GADKATTAP PANA		200000
		GAD KOKKAYAR		50000
		GAD KUMALY		165000
		GAD MUNNAR		15,00,000
		GADPACHAD Y		50000
		GAD POOPPARA		50000

		GADUPPU TH ODU		30000
		GATD KANCHIYAR		300000
27	Medicine Purchase for Post -Covid patients.	GAD PUTHUPPARI YARAM	202 1-22	76019
28	Vayokalpam	GSD PALLIVASAL	202 1-22	150000
29	Vayo janam Project	NHM CHAKKUPAL LAM	202 1-22	302778
30	Bala chikitsa project	GATD KANCHIYAR	202 2-23	100000
31	Disease control programme	GATD NADUKANI	202 2-23	50000

Annexure: 3.10: List of Institutions upgraded as Ayushman Arogya Mandir (AAM-A)

Sl no	Name of Institution
1.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Alakodu 685588
2.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Anachal 685565
3.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Arakulam 685591
4.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Bisonvalley 685565
5.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Chelachuvadu 685606
6.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Kanthalloor 685620
7.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Karimkunnam 685586
8.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Kattappana 685508
9.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Kudayathoor 685590
10.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Munnar 685612
11.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Rajakkad 685566
12.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Udumbanoor 685595
13.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Upputhodu 685604
14.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Vandanneedu 685551
15.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Vazhithala 685583
16.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Ezhalloor 685588
17.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Karimannoor 685581
18.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Kodikulam 685582
19.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Marayoor 685620
20.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Mlamala 685619
21.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Pachady 685606
22.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Peruvanthanam
23.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Pooppara 685619
24.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Puthupariyaaram
25.	AYUSHMAN AROGYA MANDIR AYUSH (AYURVEDA) Vathikudy 685515
26.	AYUSHMAN AROGYA MANDIR AYUSH (SIDDHA) Pallivasal 685612

Annexure :3.11.1 Completed & ongoing civil works

S I N O	Name of Facility	Type of Work	Financial Year	Name of Project (NAM/LSGD/M LA/MP/LAD etc)	Approved Amount	Status
1	Govt Ayurveda Dispensary Rajakkad	New OP Building	2016	MLA Fund	18,00,000	Inaugurated on 13.09.2020
2	Govt Ayurveda Dispensary Karimkunnam	New OP Building	2016	MLA Fund	30,00,000	Inaugurated on 08.11.2022
3	District Ayurveda Hospital Thodupuzha	New OP ward for Children	2018	MLA Fund	20,00,0000	Inaugurated on 15.01.2024
4	District Ayurveda Hospital Thodupuzha	Sports Ayurveda Research Cell	2023	NAM Fund	10,00,0000	Inaugurated on 29.05.2025

5	Govt Ayurveda Dispensary Upputhode	Yoga hall construction	2024-25	NAM & LSGD Fund	8,50,000	Inaugurated on 04.01.2025
6	Govt Ayurveda Dispensary Chelachuvad	Yoga hall construction	2024-25	NAM & LSGD Fund	13,90,000	Inaugurated on 08.04.2025
7	Govt Ayurveda Dispensary Munnar	Yoga hall construction	2024-25	NAM & LSGD Fund	6,00,000	Inaugurated on 25.09.2025
8	Govt Ayurveda Dispensary Puthuppariyaram	Yoga hall construction	2024-25	NAM & LSGD Fund	10,50,000	Inaugurated on 04.11.2025
9	Govt Ayurveda Dispensary Alakode	Yoga hall construction, new pharmacy counter, car porch	2024-25	LSGD Fund	8,30,000	Inaugurated on 04.11.2025

Ongoing works

S	Name of Facility	Type of Work	Financial Year	Name of Project (NAM/LSGD/MLA/MP/LAD etc)	Approved Amount	Expenditure	Status
1	Govt. Ayurveda Dispensary Erattayar	Construction of Govt. Ayurveda Dispensary Erattayar	2023-24	NAM	30,00,000	--	15% works completed
2	Govt. Ayurveda Hospital Kallar	Upgradation of Govt. Ayurveda Hospital Kallar - Idukki	2024-25	NAM Fund	1,00,00,000	--	15% works completed
3	Govt Ayurveda	Construction of Govt.	2024-25	NAM Fund	30,00,000	--	10% works

	Dispensary Puthuppari yaram	Ayurveda Dispensary Puthuppari yaram						completed
4	Govt Ayurveda Dispensary Peruvantha nam	Construction of Govt. Ayurveda Dispensary Peruvantha nam	2024-25	NAM Fund	30,00,000	--	Tender approval given	
5	Govt Ayurveda Tribal Dispensary Nadukani	Construction of Govt. Tribal Ayurveda Dispensary Nadukani	2024-25	NAM Fund	30,00,000	--	15% works completed	
6	Govt Ayurveda Dispensary	Construction of Govt Ayurveda Dispensary	2025-26	NAM Fund	30,00,000	--	DPR Under preparation	

7	Varikkamuthan Govt Ayurveda Dispensary Upputhode	Varikkamuthan Construction of New OP Area at Govt. Ayurveda Dispensary Upputhode	2025- 26	NAM Fund	30,00,0 00	--	DPR Under prepara tion
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Annexure 4.3.1: Details of Homoeopathy Facilities - Hospital

Sl No	Institution Name & Code	Stream	District	Postal Address	Village Name	Corporation/Municipality/Panchayat	Type Of Lsgd	Block Name	District Panchayat Division	Lok Sabha Constituency	Assembly Constituency	Urban/Rural
1	MUTTO M DISTRICT HOMOEOPHIT AL: 06H01	Homoeopathy	Idukki	MUTTO M MUTTO M.P.O THODUP UZHA IDUKKI			Panchayat		Idukki	Idukki	Idukki	Rural
2	PUSHPA KANDA M GOVT HOMOEOPHIT AL: 06H02	Homoeopathy	Idukki	PUSHPA KANDA M CHOTTU PARAP. O IDUKKI 685 552	Parathode	NEDUMKANDOM	Panchayat	Nedumkanda	Idukki	Idukki	Udumanchola	Rural

Annexure 4.3.2: Details of Homoeopathy Dispensary

S I N O	Instituti on Name & Code	Strea m	Di str ict	Postal Address	Village Name	Corporation/M unicipality/Pa nchayath	Type Of Lsgd	Block Name	Dist Pan chay ath Divi sion	Loks abha Cons titue ncy	Asse mblly Const ituen cy	Urba n/Ru ral
1	ALAKOD E GOVT HOMOE O DISPEN SARY : 06D01	Hom oeop athy	Id uk ki	ALAKODE ELAMDESAM BLOCK KALAYANTHANI.P.O IDUKKI		ALAKODE	Panc haya th		Iduk ki	Iduk ki	Thod upuz ha	Rural
2	ARAKUL AM GOVT HOMOE O DISPEN SARY : 06D02	Hom oeop athy	Id uk ki	ARAKULAM ARAKULAM.P.O. IDUKKI 685 591	Arakku lam	ARAKULAM	Panc haya th	Idukk i	Iduk ki	Iduk ki	Idukk i	Rural

3	ARIKKU ZHA APHC: 06N01	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMEO ARIKUZHA IDUKKI DISTRICT	Manak kad	MANAKKAD	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki	Thod upuz ha	Rural
4	AYYAPP ANKOIL APHC: 06N02	Hom oeop athy	Id uk ki	AYUSH NHM PHC(HOMEOE) ,AYYAPPANKOVIL,CH APPATH PO	Anavil asom	AYYAPPANCOIL	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Peeru made	Rural
5	BISONV ALLEY APHC: 06N03	Hom oeop athy	Id uk ki	AYUSH NHM HOMEO DISPENSARY,BISONV ALLEY, 685565	Kunjith anny	BAISONVALLEY	Panc haya th	Adim aly	Iduk ki	Iduk ki	Udum banch ola	Rural
6	CHAKK UPALLA M GOVT HOMOE O DISPEN SARY: 06D03	Hom oeop athy	Id uk ki	CHAKKUPALLAM ANAKARA.P.O KUMILY (VIA) IDUKKI	Chakk upalla m	CHAKKUPALLA M	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Peeru made	Rural
7	CHERUT HONI PERIPH ERAL UNIT:	Hom oeop athy	Id uk ki			VAZHATHOPE	Panc haya th	Idukk i	Iduk ki			Rural

06D36P 01	8	CHILLY THODE GOVT HOMOE O DISPEN SARY : 06D04	Hom oeop athy	Id uk ki	CHILLYTHODU VALARA.P.O IDUKKI 685 561	Manna mkand am	ADIMALI	Panc haya th	Adim aly	Iduk ki	Iduk ki	Iduk ki	Devik ulam	Rural
9	CHINNA KANAL APHC : 06N04	Hom oeop athy	Id uk ki	AYUSH NHIM PHC HOMOE, VILAKKU,SURIANELL I.P.O CHINNAKANAL...685 618	Chinna kanal	CHINNAKANAL	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Iduk ki	Devik ulam	Rural	
1 0	CHURUL GOVT HOMOE O DISPEN SARY : 06D05	Hom oeop athy	Id uk ki	CHURULI CHELACHUVADU.P.O ADIMALI (VIA) IDUKKI	Kanjik uzhy	IDUKKI- KANJIKUZH	Panc haya th	Idukk i	Idukk i	Idukk i	Idukk i	Idukk i	Rural	

1	DEVIKU LAM GOVT HOMOE O DISPEN SARY : 06D06	Hom oeop athy	Id uk ki	DEVIKULAM MATTUPETTY P O ECHO POINT IDUKKI 685616		DEVIKULAM	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Rural
1	DEVIKU LAM GUNDA LA EAST DIVISIO N SCPHHC :06S02	Hom oeop athy	Id uk ki	SANDOZ COLONY, PUTHUKADI DIVISION, KUNDALA(EAST), SETHUPARVATHI PURAM PO, DEVIKULAM PANCHAYATH, MUNNAR, IDUKKI DIST.	Kanna n Devan Hills	DEVIKULAM	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Rural
1	EAST KALOOR PERIPH ERAL UNIT : 06D16P 01	Hom oeop athy	Id uk ki		Kumar amang alam	KUMARAMANG ALAM	Panc haya th	Thod upuz ha	Iduk ki			Rural

1	EDAMA 4 LAKUDI APHC: 06N05	Hom oeop athy	Id uk ki	EDAMALAKUDY PO EDAMALAKUDY 685612	Kanna n Devan Hills	EDAMALAKUDY	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Rural
1	ELAPPA 5 RA APHC: 06N06	Hom oeop athy	Id uk ki	NHM AYUSH PHC HOMEIO ELAPPARA P. O, ELAPPARA	Elappa ra	ELAPPARA	Panc haya th	Azhut ha	Iduk ki	Iduk ki	Peeru made	Rural
1	ERATTA 6 YAR GOVT HOMOE O DISPEN SARY: 06D07	Hom oeop athy	Id uk ki	ERATTAYAR EETTITHOPE P.O. IDUKKI 685 510	Kalkoo nthal	ERATTAYAR	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Udum banch ola	Rural
1	KAMAK 7 SHY GOVT HOMOE O DISPEN SARY: 06D08	Hom oeop athy	Id uk ki	KAMAKSHY THANKAMANY.P.O IDUKKI	Thank amony	KAMAKSHY	Panc haya th	Idukk i	Iduk ki	Iduk ki	Idukk i	Rural

1	KANAYA NKAVAY AL GOVT HOMOE O DISPEN SARY : 06D09	Hom oeop athy	Id uk ki	KANAYANKAVAYAL PERUVANTHANAM.P. O IDUKKI 685 532		PERUVANTHAN AM	Panc haya th		Iduk ki	Iduk ki	Iduk ki	Peeru made	Rural
1 9	KANCHI YAR APHC : 06N07	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMEO KANCHIYAR PO LABBAKKADA KATTAPPANA , IDUKKI	Kanchi yar	KANCHIYAR	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Idukk i	Rural	Rural
2 0	KANTH ALLOOR APHC : 06N08	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMEO KOVILKADAVU KANTHALLOOR	Kantha lloor	KANTHALLOOR	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Rural	Rural
2 1	KARIKO DE GOVT HOMOE O DISPEN	Hom oeop athy	Id uk ki	GOVT HOMOEOPATHY DISPENSARY KARIKODE, THEKKUMBHAGAM P O THODUPUZHA ,IDUKKI	Karikk ode	EDAVETTY	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki	Thod upuz ha	Rural	Rural

SARY : 06D10	Hom oeop athy	Id uk ki	AUSH NHM PHC HOMEO KARIMANNOOR KARIMANNOOR P O THODUPUZHA IDUKKI DT	Karima nnoor	KARIMANNOOR	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural
2 2 2 3 3	Hom oeop athy	Id uk ki	AYUSH NHM PRIMARY HEALTH CENTRE (HOMOEOPATHY),KA RUNAPURAM GRAMAPANCHAYAT H, KOOTTAR P O- 685552, IDUKKI DISTRICT.	Karuna puram	KARUNAPURAM	Panc haya th	Nedu mkan dam	Iduk ki	Iduk ki	Udum banch ola	Rural
2 4	Hom oeop athy	Id uk ki	KATTAPANA VELLAYAMKUDI.P.O. IDUKKI 685 508	Kattap pana	Kattaappana Municipality	Mun icipa lity		Iduk ki	Iduk ki	Idukk i	Urba n

SARY : 06D11	Hom oeop athy	Id uk ki	KODIKULAM PARAPUZHA.P.O IDUKKI 685 582	Kodik ulam	KODIKULAM	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural
2 5 0 DISPEN SARY : 06D12	Hom oeop athy	Id uk ki	KODIKULAM PARAPUZHA.P.O IDUKKI 685 582	Kodik ulam	KODIKULAM	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural
2 6 0 DISPEN SARY : 06D13	Hom oeop athy	Id uk ki	KOKKAYAR KUTTIPILANGADU.P. O. IDUKKI 686 514	Kokka yar	KOKKAYAR	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Peeru made	Rural
2 7 0 DISPEN SARY : 06D14	Hom oeop athy	Id uk ki	KOLANI THODUPUZHA IDUKKI	Thodu puzha	Thodupuzha Municipality	Mun icipa lity		Iduk ki		Thod upuz ha	Urba n

2	8	KONNA THADY GOVT HOMOE O DISPEN SARY: 06D15	Hom oeop athy	Id uk ki	GHD KONNATHADY, KONNATHADY CENTRAL P.O IDUKKI 685563	Konnat hady	KONNATHADY	Panc haya th	Adim aly	Iduk ki	Iduk ki	Idukk i	Rural
2	9	KUDAYA THOOR APHC: 06N11	Hom oeop athy	Id uk ki	AYUSH PHC NHM HOMOE KUDAYATHOOR KOLAPARA PO, 7 MILE	Kuday athoor	KUDAYATHOOR	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Idukk i	Rural
3	0	KUMAR AMANG ALAM APHC: 06N12	Hom oeop athy	Id uk ki	KUMARAMANGALAM .THODUPUZHA	Kumar amang alam	KUMARAMANG ALAM	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki	Thod upuz ha	Rural
3	1	KUMAR AMANG ALAM GOVT HOMOE O DISPEN	Hom oeop athy	Id uk ki	EZHALLLOOR P O THODUPUZHA IDUKKI DIST	Kumar amang alam	KUMARAMANG ALAM	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki	Thod upuz ha	Rural

SARY : 06D16	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMOEOPATHY KUMILY P.O. KUMILY	Kumily	KUMILY	Panc haya th	Azhut ha	Iduk ki	Iduk ki	Iduk ki	Peeru made	Rural
3 2 06N13	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMOEOPATHY,MU NIPARA ,MANKULAM	Manku lam	DEVIKULAM	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Peeru made	Rural
3 4 06N15	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMOE MARAYOOR,PATHAD IPAALAM,MARAYOO R P.O,PIN- 685620,IDUKKI	Maray oor	MARAYOOR	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Peeru made	Rural
3 5 06N16	Hom oeop athy	Id uk ki	AYUSH NHM PHC HOMOEOPATHY, VIMALAGIRI P.O, MARIYAPURAM	Upput hode	MARIYAPURAM	Panc haya th	Idukk i	Iduk ki	Iduk ki	Idukk i	Peeru made	Rural
3 6 06N17	Hom oeop athy	Id uk ki	MOOZHICKAL KORUTHODU,P.O IDUKKI 686 513	Mlappa ra	PERUVANTHAN AM	Panc haya th	Azhut ha	Iduk ki	Iduk ki	Idukk i	Peeru made	Rural

DISPEN SARY : 06D17	Hom oeop athy	Id uk ki	GOVT HOMOE O DISPEN SARY : 06D18	GOVT HOMOE DISPENSARY MUNIYARA, MUNIYARA.P.O PARATHODU (VIA) IDUKKI 685 571	Konnat hady	KONNATHADY	Panc haya th	Adim aly	Iduk ki	Iduk ki	Idukk i	Rural
3 7	Hom oeop athy	Id uk ki	MUNNA RAPHC :06N17	HOMOE PHC(AYUSH NHM)GRAMA PANCHAYATH BUILDING NADAYAR ROAD MUNNAR P.O 685612	Munna r	MUNNAR	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Rural
3 9	Hom oeop athy	Id uk ki	MUNNA R GOVT HOMOE O DISPEN SARY : 06D19	GOVT. HOMOE DISPENSARY MUNNAR, MUNNAR NEW COLONY, IDUKKI 685612	Munna r	MUNNAR	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Devik ulam	Rural

4 0	NARAKAKANAM, NARAKAKANAM P.O., IDUKKI 685 602	Thank haya th	MARIYAPURAM	Panc haya th	Idukk i	Idukk i	Idukk i	Idukk i	Rural
4 1	NARAKAKANAM, NARAKAKANAM P.O., IDUKKI 685 602	Thank haya th	MARIYAPURAM	Panc haya th	Idukk i	Idukk i	Idukk i	Idukk i	Rural
4 2	GOVT. MODEL HOMEO DISPENSARY NEDIYASALA NEDIYASALA P.O, IDUKKI - 685608	Manak kad	MANAKKAD	Panc haya th	Thod upuz ha	Idukk i	Idukk i	Thod upuz ha	Rural
4 3	ATTIPPADY, KOMBAYAR P. O. THANNIMOOD. NEDUMKANDAM	Udumb anchol a	NEDUMKANDO	Panc haya th	Nedu mkan dam	Idukk i	Idukk i	Udumb anchol a	Rural

4	NELLAP ARA GOVT HOMOE O DISPEN SARY : 06D22	Hom oeop athy	Id uk ki	NELLAPARA KURINJI P.O. RAMAPURAM IDUKKI 686 576	Karimk unnam	KARIMKUNNAM	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki	Thod upuz ha	Rural
5	PALLIV ASAL GOVT HOMOE O DISPEN SARY : 06D23	Hom oeop athy	Id uk ki	PALLIVASAL KUNCHITHANNY.P.O IDUKKI 685 565	Kunjith anny	PALLIVASAL	Panc haya th	Adim aly	Iduk ki	Iduk ki	Devik ulam	Rural
	PAMPA NAR GOVT HOMOE O DISPEN SARY : 06D24	Hom oeop athy	Id uk ki	PAMBANAR, PAMBANAR.P.O IDUKKI 685 531	Peerm ade	PEERMADE	Panc haya th	Azhut ha	Iduk ki	Iduk ki	Peeru made	Rural

4	PAZHAY ARIKAN DAM GOVT HOMOE O DISPEN SARY : 06D25	Hom oeop athy	Id uk ki	GOVT HOMOE DISPENSARY PAZHAYARIKANDOM PAZHAYARIKANDOM .P.O IDUKKI 685 606	Kanjik uzhy	IDUKKI- KANJIKUZH	Panc haya th	Idukk i	Iduk ki	Iduk ki	Idukk i	Rural
5	PERUVA NTHAN AM PERIPH ERAL UNIT : 06D17P 01	Hom oeop athy	Id uk ki		Peruva nthana m	PERUVANTHAN AM	Panc haya th	Azhut ha	Iduk ki	Iduk ki		Rural
5	PONNA NTHAN AM PERIPH ERAL UNIT : 06D22P 01	Hom oeop athy	Id uk ki		Karimk unnam	KARUNAPURAM	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki		Rural

5	PURAPU ZHA	Hom oeop athy	Id uk ki	PURAPUZHA KUNJI.P.O. VAZHITHALA (VIA) THODUPUZHA IDUKKI 685 583	Purapp uzha	PURAPUZHA	Panc haya th	Thod upuz ha	Iduk ki	Iduk ki	Thod upuz ha	Rural
5												
4	RAJAKK AD APHC : 06N19	Hom oeop athy	Id uk ki	AYUSH NHM PHC (HOMOE0) RAJAKKAD, IHRDE BUILDING, RAJAKKAD.PO, IDUKKI DT , KERALA STATE	Rajakk ad	RAJAKKAD	Panc haya th	Nedu mkan dam	Iduk ki	Iduk ki	Udum banch ola	Rural
5	RAJAKU MARI GOVT HOMOE O DISPEN SARY : 06D27	Hom oeop athy	Id uk ki	RAJAKUMARY RAJAKUMARY. P.O. SANTHANPARA (VIA) IDUKKI 685 619	Rajaku mary	RAJAKUMARY	Panc haya th	Nedu mkan dam	Iduk ki	Iduk ki	Udum banch ola	Rural

5	SANTHA NPARA APHC: 06N20	Hom oeop athy	Id uk ki	MEDICAL OFFICER AYUSH NHIM PHC (HOMOEO) SANTHANPARA PO 685619	Santha npara	SANTHANPARA	Panc haya th	Devik ulam	Iduk ki	Iduk ki	Udum banch ola	Rural
5	SENAPA THY APHC: 06N21	Hom oeop athy	Id uk ki	AYUSH NHIM HOMOEO PHC SENAPATHY,SENAPA THYP.O,SENAPATHY	Kanthi ppara	SENAPATHY	Panc haya th	Nedu mkan dam	Iduk ki	Iduk ki	Udum banch ola	Rural
5	THEKKE MALA PERIPH ERAL UNIT: 06D09P 01	Hom oeop athy	Id uk ki		Peruva nthana m	PERUVANTHAN AM	Panc haya th	Azhut ha	Iduk ki	Iduk ki		Rural
5	UDAYAG IRI PERIPH ERAL UNIT: 06D08P 01	Hom oeop athy	Id uk ki		Thank amony	KAMAKSHY	Panc haya th	Idukk i	Iduk ki	Iduk ki		Rural

6 0	UDUMB ANCHOL A APHC : 06N22	Hom oeop athy	Id uk ki	AYUSH NHMPHC(HOMOEOPATHY)UD UMBANCHOLA,MAVA DI PO, MAVADI ,IDUKKI	Parath ode	UDUMBANCHOL A	Panc haya th	Nedu mkan dam	Iduk ki	Iduk ki	Iduk ki	Udum banch ola	Rural
6 1	UDUMP ANNOO R GOVT HOMOE O DISPEN SARY : 06D28	Hom oeop athy	Id uk ki	UDUMBANNOOR UDUMBANNOOR P O IDUKKI 685595	Udumb annoor	UDUMBANNOO R	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural	
6 2	UPPUKU NNU GOVT HOMOE O DISPEN SARY : 06D29	Hom oeop athy	Id uk ki	UPPUKUNNU MOOLAKADU.P.O. KARIMANNOOR(VIA) IDUKKI	Udumb annoor	UDUMBANNOO R	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural	
6 3	UPPUTH ARA GOVT HOMOE O	Hom oeop athy	Id uk ki	UPPUTHARA UPPUTHARA.P.O IDUKKI 685505	Upput hara	UPPUTHARA	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Peeru made	Rural	

DISPEN SARY : 06D30	Hom oeop athy	Id uk ki		Udumb anchol a	MARIYAPURAM	Panc haya th	Idukk i	Iduk ki					Rural
6 4 UPPU TH ODE PERIPH ERAL UNIT : 06D20P 01													
6 5 VALIYA THOVAL A GOVT HOMOE O DISPEN SARY : 06D31	Hom oeop athy	Id uk ki	VALIYATHOVALA VALIYATHOVALA.P.O IDUKKI 685 514	Pampa dumpa ra	PAMPADUMPAR A	Panc haya th	Nedu mkan dam	Iduk ki	Iduk ki	Udum banch ola			Rural
6 6 VANDA NMEDU APHC : 06N23	Hom oeop athy	Id uk ki	AYUSH NHM PHC (HOMEOPATHY) VANDANMEDU KOCHARA P O CHETTUKUZH	Anakk ara	VANDANMEDU	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Udum banch ola			Rural

6	VANDA NMEDU GOVT HOMOE O DISPEN SARY : 06D32	Hom oeop athy	Id uk ki	VANDANMEDU METTITHOZHU P O KOCHARA IDUKKI 685551	Anakk ara	VANDANMEDU	Panc haya th	Katta ppana	Iduk ki	Iduk ki	Udum banch ola	Rural
6	VANDIP ERIYAR APHC : 06N24	Hom oeop athy	Id uk ki	AYUSH PHC HOMOEOPATHY VANDIPERIYAR	Periyar	VANDIPERIYAR	Panc haya th	Azhut ha	Iduk ki	Iduk ki	Peeru made	Rural
6	VANNA PPURA M MULLA RIKKAD SCPPhc :06S01	Hom oeop athy	Id uk ki	SCP HOMOEOPATHIC HEALTH CENTER MULLARINGADU MULLARINGADU P. O	Vanna ppura m	VANNAPPURAM	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural
7	VANNA PURAM GOVT HOMOE O DISPEN	Hom oeop athy	Id uk ki	GOVT.HOMOE DISPENSARY VANNAPPURAM.VAN NAPPURAM.P.O, IDUK KI.685607.	Vanna ppura m	VANNAPPURAM	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural

SARY : 06D33	Hom oep athy	Id uk ki	VATHYKUDY MURIKKASERY.P.O IDUKKI 685 604	Vathik udy	VATHIKUDY	Panc haya th	Idukk i	Iduk ki	Idukk i	Rural
7 1 VATHYK UDY GOVT HOMOE O DISPEN SARY : 06D34	Hom oep athy	Id uk ki	VATTAVADA KOVILLOOR.P.O MUNNAR IDUKKI 685 612	Vattav ada	VATTAVADA	Panc haya th	Devik ulam	Iduk ki	Devik ulam	Rural
7 3 VAZHAT HOPPE GOVT HOMOE O DISPEN	Hom oep athy	Id uk ki	VAZHATHOPE MANIYARANKUDY.P. O IDUKKI 685 602	Idukki	VAZHATHOPE	Panc haya th	Idukk i	Iduk ki	Idukk i	Rural

SARY : 06D36	Hom oep athy	Id uk ki	VELLATHOOVAL NORTH SELLIYAMPARA.P.O IDUKKI 685563	Velliya matta m	VELLIYAMATTO M	Panc haya th	Adim aly	Iduk ki	Iduk ki	Udum banch ola	Rural
7 4 GOVT HOMOE O DISPEN SARY : 06D37	Hom oep athy	Id uk ki	VELLATHOOVAL NORTH SELLIYAMPARA.P.O IDUKKI 685563	Velliya matta m	VELLIYAMATTO M	Panc haya th	Adim aly	Iduk ki	Iduk ki	Udum banch ola	Rural
7 5 AMATT AM GOVT HOMOE O	Hom oep athy	Id uk ki	VELLIYAMATTOM VELLIYAMATTOM.P. O THODUPUZHA 685 588	Velliya matta m	VELLIYAMATTO M	Panc haya th	Elam desa m	Iduk ki	Iduk ki	Thod upuz ha	Rural

Annexure 4.5.1: Table of Beneficiary details in Hospitals

Sl No	Institution Name	Average OPD in a Month	Average IPD in a Month	Total Bed Strength
1	District Homoeo Hospital, Muttom	3210	13	25
2	Govt Homoeo Hospital, Pushpakandam	2070	31	25

Annexure 4.5.2: Table of Beneficiary details in Govt Homoeo Dispensaries

Sl No	Institution Name	Average OPD in a month
1	Alakode Govt Homoeo Dispensary : 06D01	553
2	Arakulam Govt Homoeo Dispensary : 06D02	476
3	Chakkupallam Govt Homoeo Dispensary :06D03	754
4	Chillythode Govt Homoeo Dispensary :06D04	893
5	Churuli Govt Homoeo Dispensary : 06D05	374
6	Devikulam Govt Homoeo Dispensary :06D06	314
7	Erattayar Govt Homoeo Dispensary : 06D07	493
8	Kamakshy Govt Homoeo Dispensary :06D08	606
9	Kanayankavayal Govt Homoeo Dispensary :06D09	370
10	Karikode Govt Homoeo Dispensary : 06D10	605
11	Kattappana Govt Homoeo Dispensary :06D11	783
12	Kodikulam Govt Homoeo Dispensary :06D12	1254
13	Kokkayar Govt Homoeo Dispensary : 06D13	443

14	Kolani Govt Homoeo Dispensary : 06D14	642
15	Konnathady Govt Homoeo Dispensary :06D15	497
16	Kumaramangalam Govt Homoeo Dispensary: 06D16	849
17	Moozhikkal Govt Homoeo Dispensary :06D17	303
18	Muniyara Govt Homoeo Dispensary : 06D18	452
19	Munnar Govt Homoeo Dispensary : 06D19	487
20	Narakakkanam Govt Homoeo Dispensary : 06D20	470
21	Nediyasala Govt Homoeo Dispensary :06D21	482
22	Nellapara Govt Homoeo Dispensary : 06D22	706
23	Pallivasal Govt Homoeo Dispensary : 06D23	539
24	Pampanar Govt Homoeo Dispensary : 06D24	514
25	Pazhayarikandam Govt Homoeo Dispensary : 06D25	948
26	Purapuzha Govt Homoeo Dispensary : 06D26	343
27	Rajakumari Govt Homoeo Dispensary :06D27	396
28	Udumpannoor Govt Homoeo Dispensary : 06D28	972
29	Uppukunnu Govt Homoeo Dispensary :06D29	444
30	Upputhara Govt Homoeo Dispensary : 06D30	757
31	Valiyathovala Govt Homoeo Dispensary : 06D21	356
32	Vandanmedu Govt Homoeo Dispensary : 06D22	334
33	Vannapuram Govt Homoeo Dispensary : 06D23	892
34	Vathykudy Govt Homoeo Dispensary : 06D24	1225
35	Vattavada Govt Homoeo Dispensary : 06D35	136

36	Vazhathoppe Govt Homoeo Dispensary : 06D26	661
37	Vellathooval Govt Homoeo Dispensary : 06D27	352
38	Velliyamattam Govt Homoeo Dispensary : 06D28	493

Annexure 4.5.3: Table of Beneficiary details in AYUSH PRIMARY HEALTH CENTRE & SCP dispensaries

SI No	Name Of Institution	Average Monthly Op
1	Arikkuzha Ayush Primary Health Centre	1376
2	Ayyappankoil Ayush Primary Health Centre	814
3	Bisonvalley Ayush Primary Health Centre	776
4	Chinnakanal Ayush Primary Health Centre	700
5	Edamalakudi Ayush Primary Health Centre	85
6	Elappara Ayush Primary Health Centre	889
7	Kanchiyar Ayush Primary Health Centre	835
8	Kanthalloor Ayush Primary Health Centre	587
9	Karimanoor Ayush Primary Health Centre	1211
10	Karunapuram Ayush Primary Health Centre	893
11	Kudayathoor Ayush Primary Health Centre	683
12	Kumaramangalam Ayush Primary Health Centre	649
13	Kumily Ayush Primary Health Centre	1092
14	Mankulam Ayush Primary Health Centre	732
15	Marayoor Ayush Primary Health Centre	98
16	Mariyapuram Ayush Primary Health Centre	884
17	Munnar Ayush Primary Health Centre	835

18	Nedumkandam Ayush Primary Health Centre	692
19	Rajakkad Ayush Primary Health Centre	741
20	Santhanpara Ayush Primary Health Centre	882
21	Senapathy Ayush Primary Health Centre	1006
22	Udumbanchola Ayush Primary Health Centre	791
23	Vandanmedu Ayush Primary Health Centre	919
24	Vandiperiyar Ayush Primary Health Centre	940
25	Vannappuram Mullarikkad Scphhc	539
26	Devikulam Gundala East Division Scphhc	330

Annexure 4.8: List of Institutions upgraded as Ayushman Arogya Mandir Ayush

Sl no	Name of Institution
1	Ayushman Arogya Mandir Ayush (Homoeopathy) Arakkulam 685591
2	Ayushman Arogya Mandir Ayush (Homoeopathy) Chillithodu 685582
3	Ayushman Arogya Mandir Ayush (Homoeopathy) Churuly 685609
4	Ayushman Arogya Mandir Ayush (Homoeopathy) Karikkode 685602
5	Ayushman Arogya Mandir Ayush (Homoeopathy) Kattapana 685508
6	Ayushman Arogya Mandir Ayush (Homoeopathy) Kolani 685608
7	Ayushman Arogya Mandir Ayush (Homoeopathy) Konnathady 685563
8	Ayushman Arogya Mandir Ayush (Homoeopathy) Narakakkanam 685602
9	Ayushman Arogya Mandir Ayush (Homoeopathy) Nellappara 685601
10	Ayushman Arogya Mandir Ayush (Homoeopathy) Pambar 685532
11	Ayushman Arogya Mandir Ayush (Homoeopathy) Pazherikkandam
12	Ayushman Arogya Mandir Ayush (Homoeopathy) Rajakumary 685619
13	Ayushman Arogya Mandir Ayush (Homoeopathy) Valiyathovala 685515
14	Ayushman Arogya Mandir Ayush (Homoeopathy) Vannapuram 685607
15	Ayushman Arogya Mandir Ayush (Homoeopathy) Vellathoval 685563

16	Ayushman Arogya Mandir Ayush (Homoeopathy) Velliyamattom 685588
17	

Annexure 5.3.1.1- Details of Medical & Paramedical posts Sanctioned in NAM in District

Designation	No
Specialist Medical Officer	12
Medical Officer	39
Yoga Instructor	49
Multi-Purpose Health Worker	45
Multi-Purpose Worker	28
Therapist	22
Nurse	9
Lab Technician	4
Pharmacist	4
Ayurveda Nurse	3
Data Entry Operator	3
Physiotherapist	3
Project Co-Ordinator	3
Yoga Demonstrator	3
Attender	2
Accounting Clerk	1

Cook	1
District Programme Manager	1
Nursing Assistant	1
Optometrist	1

Annexure 5.5.1 - Details of work by NAM

SL No.	SAAP yr	Institution type	Department	Institution name		
1	2017-18	Dispensary	Homoeopathy	Govt. Homoeopathy Dispensary Kolanni	30,42,951.00	
2	2017-18	Dispensary	Homoeopathy	Govt. Homoeopathy Dispensary Chakkupallam	7,20,000.00	
3	2018-19	Hospital	Homoeopathy	District Homoeopathy Hospital Muttom	75,00,000.00	
4	2015-16	Dispensary	ISM	Govt. Ayurveda Dispensary Kudayathoor	15,00,000.00	
5	2017-18	Hospital	ISM	Govt. Ayurveda Hospital Paremavu	72,00,000.00	
6	2022-23	Hospital	ISM	District Ayurveda Hospital Thodupuzha	1,00,00,000.00	
Ongoing works						
SL No.	Workname	SAAP Yr	Approval Amount	Agency	Expected date of Completion	Physical Progress
1	Construction of Govt. Ayurveda Dispensary	2023-24	₹ 3,000,000.00	M/s KHRWS	17.03.2026	5% Works Completed
2	Upgradation of Govt. Ayurveda Hospital Kallar	2024-25	₹ 10,000,000.00	M/s KHRWS	26.09.2026	Ongoing

3	Construction of Govt. Homoeopathy	2022-23	₹ 3,000,000.00	M/s KHRWS	17.03.2026	Ongoing
4	Construction of Govt. Tribal Ayurveda	2024-25	₹ 3,000,000.00	M/s KSCC	11.04.2026	Ongoing
5	Construction of Govt. Ayurveda Dispensary	2024-25	₹ 3,000,000.00	M/s KSCC	17.04.2026	Ongoing
6	Construction of Govt. Ayurveda Dispensary	2024-25	₹ 3,000,000.00	M/s KSCC	15.04.2026	Ongoing
7	Construction of Govt. Homoeopathy	2024-25	₹ 3,000,000.00	M/s KSCC	19.04.2026	Ongoing
8	Construction of Govt. Ayurveda Dispensary	2024-25	₹ 3,000,000.00	M/s KSCC	30.05.2026	Ongoing
9	Construction of 30 Bedded Integrated	2023-24	₹ 105,000,000.00	M/s SILK	14.05.2027	Ongoing

State-Level Team for Data Compilation, Analysis, and District Profile Drafting

Sl No	Name	Designation	Office	Role in Preparation	Mobile No	Email ID
1	Dr Saji P R	State Programme Manager(JS M)	SPMSU, National Ayush Mission Kerala	Coordination	94472197 50	spmayushkeralam@gmail.com
2	Dr Jayanarayanan	State Programme Manager, Homoeopathy	SPMSU, National Ayush Mission Kerala	Coordination	93883330 99	spmhom@gmail.com
3	Mr. Solshi S Nair	HMIS Manager, NAM	SPMSU, National Ayush Mission Kerala	Data Compilation/Analysis/ Drafting/ Review/ Coordination.	99478077 11	hmisnam@gmail.com

4	Dr Justin K Jose	Medical Officer (NAM)	Directorate of Homoeopathy	Data Compilation/Analysis/Drafting/Review/Coordination.	9744887574	justin.k.jose7@gmail.com
5	Dr Anand AJ	Specialist Medical officer	National Ayush Mission Kerala	Data Compilation/Analysis/Drafting/Review/Coordination.	9496370496	aayurananda@gmail.com
6	Dr Nibin T N	Medical Officer (NAM)	National Ayush Mission Kerala	Data Compilation/Analysis/Drafting/Review/Coordination.	8281563351	drnibintn@gmail.com
7	Dr Rahul R	Medical Officer (NAM)	National Ayush Mission Kerala	Data Compilation/Analysis/Drafting/Review/Coordination.	9961446722	dr.rrahul.ekm@gmail.com

					Review/ Coordination.			
8	Dr Lekshmi	Neethu	Project Coordinator - Homoeopat hy	Directorate of Homoeopat hy	Data Compilation/Analys is/ Drafting/ Review/ Coordination.	81298985 29	projectcoordinator tvm@gmail. com	
9	Mrs Sayana S R		Data Programmer - NAM	SPMSU, National Ayush Mission Kerala	Data Compilation/Analys is/ Drafting/ Review/ Coordination.	88480682 07	dataprogrammerna m@gmail.c om	

Department of Indian System of Medicine

Sl No	Name	Designation	Office	Role in Preparation	Mobile No	Email ID
1	Dr K S Preeya	Director Indian Systems of Medicine	Ism Directorate	coordination	8547102577	directorism@yahoo.com
2	Dr Sheeja V P	Joint Director ISM	Ism Directorate	coordination	9446433531	directorism@yahoo.com
3	Dr Jerome V kurian	DMO	Dmo Office-Ism, Idukki	Review of data	9447190200	drjeromkurian@gmail.com
4	Rajkumar M	Accounts Officer	Ism Directorate	coordination	9496287946	rajkumarmadathil@gmail.com
5	N. Padmakumar	Administrative Assistant	Ism Directorate	Analysis and Drafting	9895065416	dismbudgetplanning@gmail.com
6	Dr Manesh Kumar E	State Nodal Officer IT	Ism Directorate	Analysis, Review and coordination	9447091388	drmanesh.351512@kerala.gov.in

7	Dr Praveen R	State Nodal Officer IEC	Ism Directorate	Analysis, Review and coordination, Data Compilation	9447283345	drrdrpraveen198@gmail.com
8	Bijujoy	Junior Supdt.	Ism Directorate	Analysis and Drafting	9544650745	dismbudgetplanning@gmail.com
9	Shafeer. S	Senior clerk	Ism Directorate	Analysis and Drafting	9400540878	dismbudgetplanning@gmail.com
10	Shanuraj. R	Senior clerk	Ism Directorate	Analysis and Drafting	9645812764	dismbudgetplanning@gmail.com
11	Sujakumari.V S	Senior clerk	Ism Directorate	Analysis and Drafting	9446065416	dismbudgetplanning@gmail.com
12	Chandralekha B	Data Entry	Ism Directorate	Analysis and Drafting	8547361194	dismbudgetplanning@gmail.com
13	Dr Greeshma G S	State Project Coordinator (NAM)	Ism Directorate	Analysis, Review and coordination	8281559629	drgsdpcnamtvp@gmail.com

14	Dr Geena	CMO	Gah Kallar	Review of data	9446724207	kkgeena@gmail.com
15	Dr Jilson V George	MO	Gad Karimkunnam	Data compilation, drafting	9995471167	drjvgeorge@gmail.com
16	Dr Neena V S	MO	Gad Pachady	Data compilation, drafting	9744633928	neenayur@gmail.com
17	Dr Salmi Hassaynar	DPC(Ayu)	Dmo Office-Ism, Idukki	Data compilation, drafting, Analysis, coordination	9744189760	drsalmidpcidk@gmail.com
18	Roy Alex	HC	Dmo Office-Ism, Idukki	Review of data	9744706239	royalexk@gmail.com
19	Vimal kumar	Clerk	Dmo Office-Ism, Idukki	Data compilation	9946421019	ismidukki@gmail.com

20	Tintu Maria	Clerk	Dmo Office- Ism, Idukki	Data compilation	9656166077	vimalkumar1445@gmail.com
21	Athira Balakrishnan	Data entry operator (PLAN)	Dmo Office- Ism, Idukki	Data compilation	9562729954	athirabalakrishnan1008@gmail.com

Department of Homoeopathy

Sl No	Name	Designation	Office	Role in Preparation	Mobile No	Email ID
1	Dr Beena M.P	Director of Homoeopathy	Directorate of Homoeopathy	Coordination	9447170342	directorhomoeo@kerala.gov.in
2	Dr. Harilal K N	district medical officer (homoeo) idukki	District Medical Office (Homoeo) Idukki	Review	7306433263	dmohomoeoidk@kerala.gov.in
3	Ajitha Kumari G L	senior superintendent	District Medical Office (Homoeo) Idukki	Review	8921053720	dmohomoeoidk@kerala.gov.in
4	Dr Anil Sk	AHiMS nodal Officer	Directorate of Homoeopathy	Drafting, Data Compilation	9061950580	ahims.homeo@kerala.gov.in

5	Dr Justin K Jose	Medical Officer (NAM)	Directorate of Homoeopathy	Drafting, Data Compilation	9744887574	justin.k.jose7@gmail.com
6	Dr Neethu Lekshmi	Project Coordinator	Directorate of Homoeopathy	Data Compilation	8129898529	projectcoordinatorvtm@gmail.com
7	Sri. Bijuraj C	Head Clerk	Directorate of Homoeopathy	Data Compilation	9895989986	cbijuraj@gmail.com
8	Sri Noorudeen	Sr Clerk	Directorate of Homoeopathy	Data Compilation	9746766266	aknooruofficial@gmail.com

National Ayush Mission Kerala

Sl No	Name	Designation	Office	Role in Preparation	Mobile No	Email ID
1	Dr Sreedharsan KS	District Programme Manager, Idukki	DPMSU	Review	9778426344	dpmnamidk@gmail.com

