



PROJECT 003

Rural Health Facility Reality Assessment

FACILITY ASSESSMENT REPORT

Community Health Centre (CHC), Akola

Evidence-based public-interest field assessment aligned to applicable IPHS 2022 facility-level standards.

FIELD ASSESSMENT DATE	14 September 2026
FACILITY	Community Health Centre (CHC), Akola
ASSESSMENT BASIS	Indian Public Health Standards (IPHS) 2022
PREPARED BY	THE OVIE CIRCLE FOUNDATION
NATURE	Evidence-Based Public-Interest Field Assessment

ASSESSMENT PRINCIPLE

Observe without interference. Record only what is directly visible or verifiable. Use 'Not Verified' where access or records would be required. Protect patient privacy.

OBSERVE | VERIFY | DOCUMENT | RECOMMEND | COLLABORATE | IMPROVE



EXECUTIVE SUMMARY

A functioning healthcare base with specific gaps requiring focused attention.

THE OVIE CIRCLE FOUNDATION conducted a field assessment of Community Health Centre (CHC), Akola on 14 September 2026 under PROJECT 003 - Rural Health Facility Reality Assessment.

The assessment found that CHC Akola has a substantial existing healthcare service base. At the same time, three significant areas requiring Government attention were identified.

01	MD / SPECIALIST DOCTORS	At the time of field assessment, no MD Doctor or Specialist Doctor was available or appointed at CHC Akola.
02	SANITATION MANPOWER	Only 02 sweepers were available. Considering public/patient footfall, the field assessment identifies a requirement of at least 05 sweepers.
03	BUILDING CONDITION	The facility building requires renovation, necessary repairs, painting and general maintenance.

INSTITUTIONAL POSITION

These findings are documented to support administrative attention and practical improvement - not to portray the entire facility as non-functional. The Company seeks constructive Government-Company cooperation in lawful, feasible and approved areas.



01 | ABOUT THE COMPANY

Evidence first. Public interest. Constructive engagement.

THE OVIE CIRCLE FOUNDATION is a Section 8 Company undertaking evidence-based public-interest work. The Company works at the ground level through direct field observation, structured assessment, evidence-based documentation, identification of public-service gaps, institutional reporting, community participation and engagement with Government and administration.

The Company's purpose is not limited to identifying deficiencies. It seeks to contribute towards practical improvement of public services by working constructively with Government, administration, public institutions and communities.

WORKING CAPABILITY

Ground-level assessment | Evidence-based documentation | Structured reporting
Public-interest coordination | Community engagement | Follow-up assessment

02 | ABOUT PROJECT 003

Rural Health Facility Reality Assessment

PROJECT 003 assesses selected Government health facilities with reference to directly observable and verifiable conditions and, wherever applicable, the Indian Public Health Standards (IPHS) 2022.

The assessment considers healthcare service availability, human resources, infrastructure, medicines and pharmacy, diagnostics and equipment, sanitation and cleanliness, essential utilities, patient-facing conditions and the overall facility environment.

PROJECT PURPOSE

To create a reliable ground-level record that may assist competent Government authorities in understanding existing conditions, prioritising gaps and considering practical improvements.



03 | EXISTING HEALTHCARE SERVICE BASE

The assessment recognises what is already functioning.

The IPHS-aligned field assessment records the following service domains as Available at CHC Akola:

AVAILABLE	24x7 Emergency / First Response	AVAILABLE	General OPD Services
AVAILABLE	In-patient / Ward Services	AVAILABLE	Maternal / Delivery Services
AVAILABLE	Newborn / Child Health Services	AVAILABLE	Family Planning Services
AVAILABLE	NCD Screening / Management	AVAILABLE	Communicable Disease Services
AVAILABLE	Basic Laboratory / Diagnostics	AVAILABLE	Pharmacy / Essential Drugs
AVAILABLE	Referral / Ambulance Linkage		

Specialist Services (where posted) were recorded as **Not Observed** in the assessment form. Several facility-standard indicators were also recorded as functional, visible, adequate or available.

BALANCED ASSESSMENT

The deficiencies identified in this report are specific gaps requiring strengthening within an already functioning Government healthcare facility.



04 | PRIMARY CRITICAL FINDING

AKL-01 | MD / SPECIALIST DOCTOR AVAILABILITY

STATUS: NOT AVAILABLE / NONE APPOINTED

At the time of field assessment, **no MD Doctor or Specialist Doctor was available or appointed** at Community Health Centre (CHC), Akola.

PUBLIC-INTEREST SIGNIFICANCE

This represents a significant human-resource gap. Where specialist medical care is unavailable locally, patients requiring such care may need to depend upon referral or travel to higher healthcare facilities. For rural and surrounding populations, specialist availability at the CHC level has direct relevance to accessible healthcare delivery.

RECOMMENDATION

The competent Government/Health Department authority may review the sanctioned/required specialist positions and actual deployment position at CHC Akola and take appropriate action in accordance with applicable Government norms.

The Company does not seek to determine Government appointments or deployment. The purpose of this finding is to place an important field-level healthcare gap before the competent authority for consideration.



05 | KEY FINDING

AKL-02 | BUILDING CONDITION

STATUS: RENOVATION REQUIRED

The facility building requires **renovation, necessary repairs, painting and general maintenance.**

PUBLIC-INTEREST SIGNIFICANCE

Healthcare infrastructure is not merely a matter of appearance. The physical condition of a public health facility contributes to patient experience, cleanliness, safety and the working environment of healthcare personnel.

RECOMMENDATION

A competent technical assessment of the building may be undertaken to determine the exact nature and extent of required repairs, renovation, painting, maintenance and other infrastructure improvements.

06 | KEY FINDING

AKL-03 | SWEEPER / SANITATION STAFF

STATUS: INSUFFICIENT STAFF

Available: 02 Sweepers

Field-Assessed Requirement: At least 05 Sweepers

Only two sweepers were available. Considering the public/patient footfall at CHC Akola, the field assessment considers the present sanitation manpower insufficient.

PUBLIC-INTEREST SIGNIFICANCE

A healthcare facility requires sustained sanitation across patient areas, public spaces and operational sections. Insufficient sanitation manpower can make it difficult to maintain the frequency and level of cleaning expected in an active healthcare environment.

RECOMMENDATION

The competent authority may review sanitation manpower with reference to patient/public footfall, facility size, cleaning frequency, infection-prevention needs and applicable staffing or outsourcing arrangements.



07 | OVERALL FACILITY ASSESSMENT

Strengthen what works. Address what is missing.

The assessment does not indicate that CHC Akola is an entirely non-functional healthcare facility. Multiple essential healthcare services were recorded as available.

At the same time, three important areas require focused attention: medical human resources, sanitation manpower and physical infrastructure.

PRIORITY	ISSUE	PROPOSED ADMINISTRATIVE CONSIDERATION
I	MD / Specialist availability	Review sanctioned/required specialist positions and actual deployment; consider appropriate posting/appointment measures under applicable rules.
II	Sanitation manpower	Review adequacy of existing sanitation manpower and strengthen deployment according to actual facility requirements.
III	Building renovation & maintenance	Conduct technical assessment and consider necessary renovation, repairs, painting and maintenance.

ASSESSMENT POSITION

The presence of functioning services should not prevent genuine deficiencies from receiving administrative attention; equally, identified deficiencies should not erase the services already being delivered.



08 | PROPOSED GOVERNMENT-COMPANY COOPERATION

From identification to improvement.

THE OVIE CIRCLE FOUNDATION respectfully expresses its willingness to cooperate with Government and competent Health Department authorities in addressing feasible deficiencies identified at CHC Akola.

Subject to Government approval, applicable law, available resources and mutually agreed responsibilities, cooperation may be explored in the following areas:

SANITATION & CLEANLINESS

Support for approved cleanliness and sanitation improvement initiatives.

FACILITY UPKEEP

Participation or resource mobilisation for approved public-facing maintenance and improvement initiatives.

INFRASTRUCTURE SUPPORT

Exploration of lawful support/resource mobilisation for approved renovation or facility-improvement work.

COMMUNITY PARTICIPATION

Public-health awareness and community participation initiatives connected with the facility.

DOCUMENTATION & FOLLOW-UP

Evidence-based documentation of identified issues, observable improvements and periodic reassessment.

RESOURCE MOBILISATION

Exploration of appropriate CSR, philanthropic, institutional or other lawful resources for Government-approved public-interest interventions.



09 | CLEAR DIVISION OF RESPONSIBILITY

Support Government action - do not substitute Government authority.

THE OVIE CIRCLE FOUNDATION recognises that creation or sanction of Government posts, appointment of Government doctors, transfer and deployment of Government personnel, administrative control of Government healthcare facilities and other statutory Government functions remain within the jurisdiction of competent Government authorities.

The Company's proposed role is limited to lawful and approved areas where its field capability, documentation, community participation, resource mobilisation or other institutional support can complement Government action.

10 | REQUEST FOR CONSIDERATION

THE OVIE CIRCLE FOUNDATION respectfully places this field assessment before the competent Government/Health Department authorities for consideration.

REQUESTED FOCUS

1. Review MD/Specialist Doctor availability and deployment.
2. Review and strengthen sanitation manpower.
3. Undertake technical assessment for building renovation, repairs, painting and maintenance.
4. Preserve and strengthen services already available.
5. Consider Government-Company cooperation in suitable approved areas.

11 | CONCLUSION

A documented problem should become the starting point for constructive improvement.

The field assessment of Community Health Centre, Akola demonstrates an existing healthcare service base that deserves to be strengthened, while specific deficiencies require focused attention.

The absence of MD/Specialist medical personnel, insufficient sanitation manpower and the need for building renovation and maintenance are significant issues identified through the field assessment.

THE OVIE CIRCLE FOUNDATION believes that sustainable improvement in public healthcare is best achieved when Government capacity, responsible institutional participation and community interest work in the same direction.

The Company therefore remains willing to cooperate with competent Government authorities in feasible, lawful and mutually approved measures aimed at strengthening healthcare delivery at CHC Akola.



OUR APPROACH

**OBSERVE RESPONSIBLY.
DOCUMENT ACCURATELY.
ENGAGE CONSTRUCTIVELY.
SUPPORT IMPROVEMENT.**

Prepared by THE OVIE CIRCLE FOUNDATION | Section 8 Company

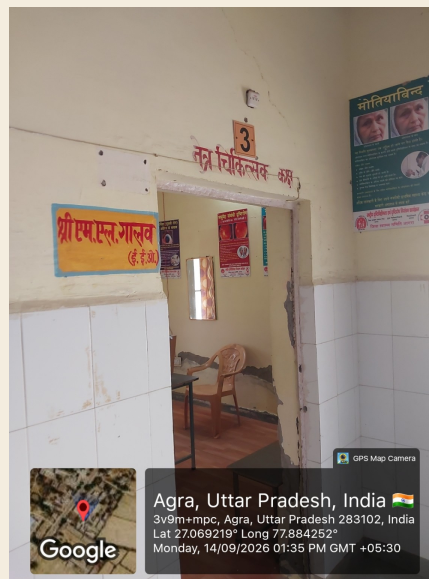
PROJECT 003 - Rural Health Facility Reality Assessment | CHC Akola | 14 September 2026



PHOTOGRAPHIC EVIDENCE

Selected Geo-Tagged Field Photographs

Field date: 14 September 2026 | GPS/date-time overlays retained as captured



Clinical/service area at CHC Akola documenting visible ageing of internal finishes.



Injection room area with visible wear to doors, walls and finishes.

Evidence note: Photographs support only conditions visibly documented at the time of field visit.



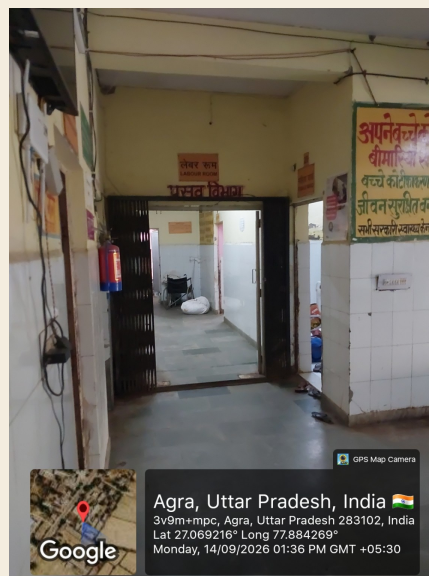
PHOTOGRAPHIC EVIDENCE

Selected Geo-Tagged Field Photographs

Field date: 14 September 2026 | GPS/date-time overlays retained as captured



Public toilet entrance area showing visible dampness/ageing on wall surfaces.



Internal corridor/service area at CHC Akola.

Evidence note: Photographs support only conditions visibly documented at the time of field visit.



PHOTOGRAPHIC EVIDENCE

Selected Geo-Tagged Field Photographs

Field date: 14 September 2026 | GPS/date-time overlays retained as captured



Ward/internal area showing deterioration and damaged wall/ceiling finishes.



Larger internal section with widespread peeling/damaged wall finish.

Evidence note: Photographs support only conditions visibly documented at the time of field visit.