

# State Training Status 2005-2017



**R M N C H +A**

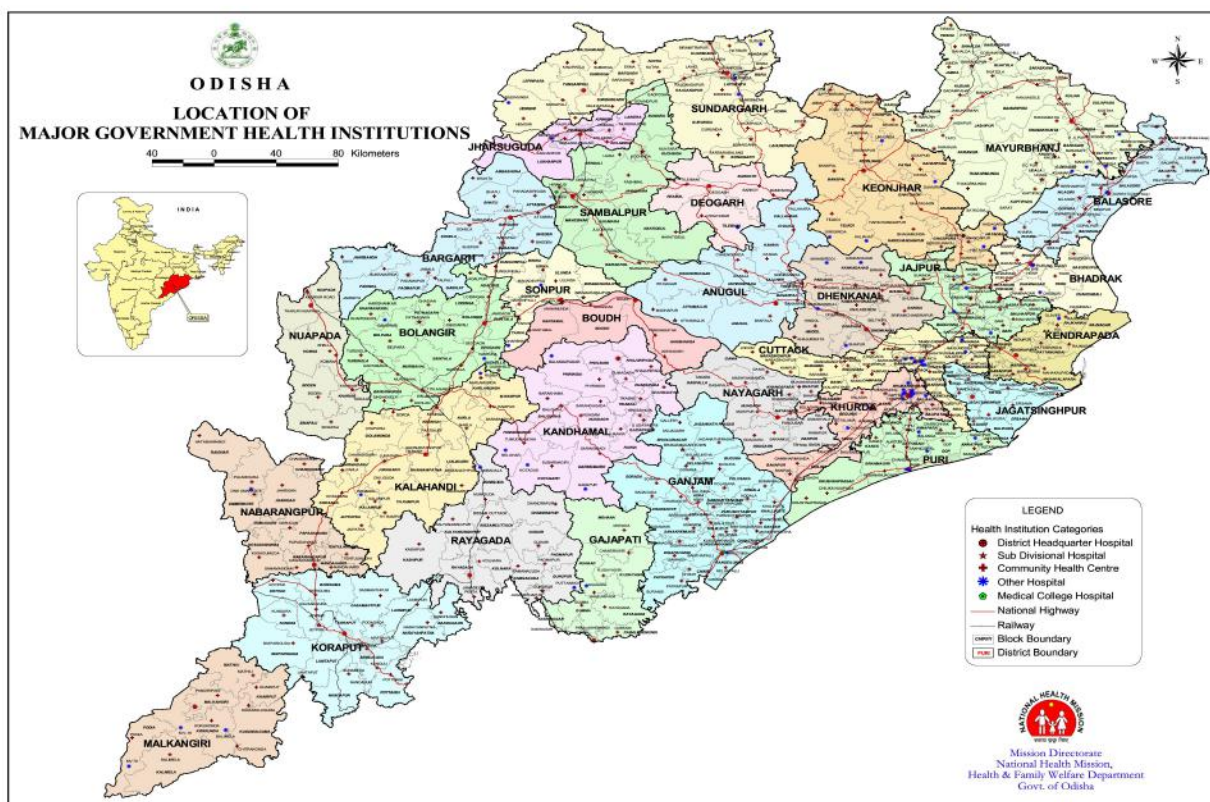
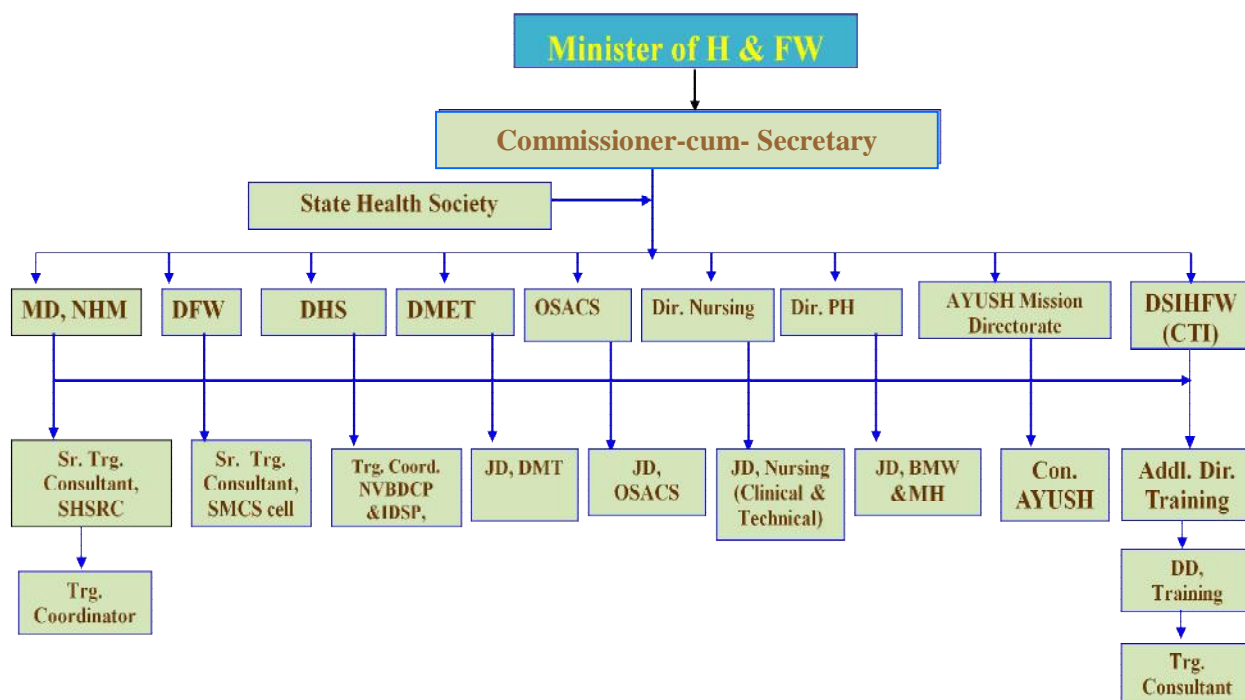


## Mission Directorate National Health Mission

Department of Health & Family Welfare  
Govt. of Odisha  
April'2017



## Training Organogram, Odisha



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<b>HEALTH INSTITUTION, DEMOGRAPHIC PROFILE &amp; HEALTH INDICATORS, ODISHA</b>		
# of Govt. Medical College & Hospitals (MCH)		5
# of District Head Quarter Hospitals (DHH)		32
# of Sub- Divisional Hospitals (SDH)		27
# of Nursing College (Govt.)		1
# of ANM Training Centre (Govt.)		19
# of GNM Training Centre (Govt.)		8
# of Functional Delivery Points (DPs)		580
# of CHCs ( FRU)		38
# of CHCs ( Non- FRU)		339
# of DHH FRUs		32
# of SDH FRUs		25
# of 24X7 PHCs/ OHs		126
# of other PHCs and other Hospitals (OHs)		1179
# of Sub- Centres		6688
Total Population (Census-2011)      M – 212,12,136 F – 207,62,082		419,74,218
Literacy Rate (Census-2011)      M – 81.59%, F – 64.01%		72.87%
Sex Ratio (NFHS-4)		1036
Child Sex Ratio (0-6 years) (Census-2011)		941
Natural Growth Rate (SRS -2015)		11.6
Crude Birth Rate (SRS -2015)		19.2
Crude Death Rate (SRS -2015)		7.6
Maternal Mortality Rate (SRS:2011-13)		222
Infant Mortality Rate (NFHS-4)		40
Neonatal Mortality Rate ( NFHS-4)		35
Under 5 Mortality Rate ( NFHS-4)		49
Total Fertility Rate (SRS -2015)		2.0
Institutional Delivery (NFHS-4)		85.4%
Early Breast feeding (NFHS-4)		65.6%
Complete Immunization coverage (NFHS-4)		78.6%

Source: HMIS



**Introduction:**

**National Rural Health Mission- NRHM** is in operation since June, 2005 in Odisha. With the initiation of **National Urban Health Mission- NUHM**, in Sept, 2013, NRHM renamed as **National Health Mission- NHM**. The objective of training is to improve the health care delivery system and health outcomes in rural & urban areas. NHM is to ensure quality health services accessible, affordable & available at different levels.

To ensure **quality health care services at health institutions**, training need is continuously increasing in Odisha. Skill up-gradation is the call of the day. In view of skill up-gradation at delivery points (DPs) and the shortage of health personnel, **the paradigm of training has been shifted from capacity building to functionalization of health institution through skill building and multi skilling**. Skill building trainings like SBA, BEmOC, RTI/STI, multi skilling of LTs and different FP trainings are conducted to ensure functionalisation of designated DPs. **Multi skilling of MBBS doctors on Life Saving Anaesthetic Skills-LSAS, Emergency Obstetric Care- EmOC, Blood Storage management training are conducted to functionalise First Referral Units (FRUs) of the State**. Skill building trainings and utilisation of skilled manpower improves the quality of health services. **Quality health services shall reduce the IMR, MMR and TFR of the State in specific and the country as a whole.**

**Major Objectives:**

- *To improve the skills of Service Providers and to enable them to provide high quality services at grass-root level.*
- *To improve the quality of services at healthcare facilities and to ensure optimal utilization of skilled HR.*
- *To enhance the management skills of specialized staff towards efficient and effective management of public health programmes.*
- *To strengthen service delivery mechanism through multiskilling of health personnel at FRU and 24x7 Institutions in the State.*

## Training under different thematic divisions:

### 1. Reproductive Health

#### Intra Uterine Contraceptive Device (IUCD):

A 5 day district level training for MO, SN, ANM/LHV and AYUSH MO. Total **9850 (63%)** personnel (MO & SN - 3711, AYUSH MO - 510 and ANM/ LHV - 5629) have been trained against the state target of **15579**.



Trainees are in IUCD training

#### Post Partum Intra Uterine Contraceptive Devices (PPIUCD):

District level training for MO and SN for duration of 3 day. Total **2515 (>100%)** MOs & SNs have been trained against the state target of **2074** personnel.



Trainees are in PPIUCD

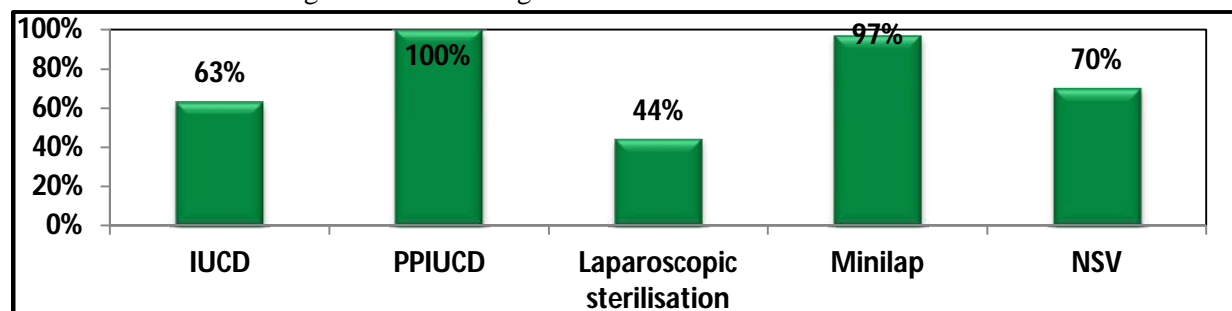
#### Laparoscopic Sterilization:

Twelve working day training for a team of three members (MO, SN and OT attendant) organized at State and Regional level. Total **222(44%)** MOs, SNs and OT attendants have been trained against the state target of **501** trainees.

#### Minilap:

Twelve working day training for Assistant Surgeon posted at L2 & L3 institutions. Total **592(97%)** Medical Officers have been trained against the state target of **608**MOs.

**Non Scalpel Vasectomy(NSV):** It is a five working day Training for Medical Officers. Total **301(70%)** MOs have been trained against the state target **428** MOs.



Training 2005-2017	State load	Ach.	Percentage (%)
5 days IUCD training for MO,SN, AYUSH MO & ANM/LHV	15579	9850	63
3 days PPIUCD training for MO & SN	2074	2515	>100
12 working days Laparoscopic sterilization for teams (3 members : MO, SN, Attendant)	501	222	44
12 working days Minilap training for MO	608	592	97
5 days NSV training for MO	428	301	70

## 2. Maternal Health:

**Skilled Attendant at Birth (SAB):** In view of high IMR & MMR, NHM, Dept. of H & FW, Govt. of Odisha launched 21 day hands on training to create Skilled Birth Attendants (SBA) at Sub- Centre (SC), PHC, CHC, SDH and DHH level. Total **13213** (Staff Nurses - 4242, ANMs & LHV's -7414 and AYUSH doctors-1557) have been trained against the state target of **17417**.



**SAB TOT at State level**

**Basic Emergency Obstetric Care (BEmOC):** It is a hands on training programme for MBBS doctors of delivery point. Total **980 (91%)** MBBS doctors have been trained against the state target of **1076** till Mar'17.

**Emergency Obstetric Care (EmOC):** Is a 16weeks hands on training programme for MBBS doctors only. Total **38 (67%)** MBBS doctors have been trained against the state target of **57** till Mar'17.



### **BEmOC training at SCB MCH**

**Life Saving Anaesthetic Skills (LSAS):** It is a multiskilling training for MBBS doctors (Asst. Surgeon). Started since October 2007 in three Medical Colleges of Odisha. It is a 18 weeks training programme, out of which 12 weeks at Govt. Medical Colleges and 6weeks at DHHs. Total **155 (100%)** MBBS doctors have been trained till March'17 against the state load of **155** and providing anesthesia for C.S cases.



**LSAS training at SCB MCH**

**Blood Storage Unit (BSU) management training:** A 3day training programme for MBBS doctors and LTs of FRUs. Total **490 (100%)** MBBS doctor and LTs have been trained till Mar'17 against the state target of 490 (cum. target).

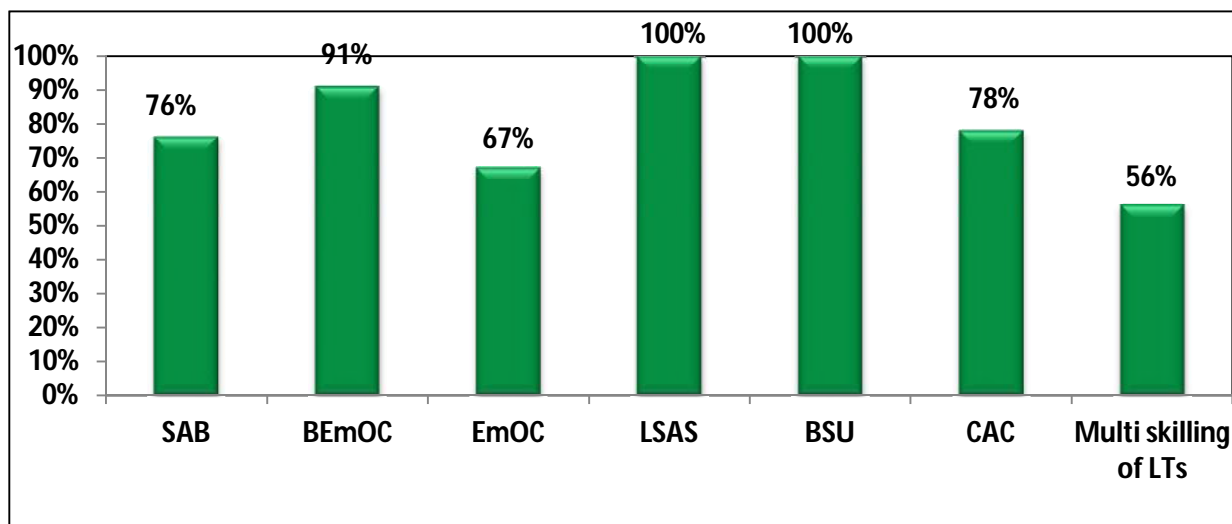
**Multi skilling training of LT:** It is a 10days training programme for LTs of DHH and SDHs. Total **202 (56%)** Jr. LTs have been trained till March'17 against the state target of **362**.



**Trainees are in BSU training**

**Comprehensive Abortion Care (CAC):** CAC is 12 day training programme for OG specialists, MBBS doctors and SNs. Total **529 (78%)** MBBS doctor and SNs have been trained against the state target of **680** till Mar'17





Training 2005-2017	State load	Ach.	Percentage (%)
21 days SAB training for SN, ANM/LHV & AYUSH MO	17417	13213	76
10 days BEmOC training for MBBS doctor	1076	980	91
16 weeks EmOC training for MBBS doctor	57	38	67
18 weeks LSAS training for MBBS doctor	155	155	100
3 days BSU training for MO & LT	490	490	100
12 days CAC training for MO & SN	680	529	78
10 days Multi skilling training of Jr. LTs	362	202	56

### 3. New born & Child Health

#### Integrated Management of Neonatal and Childhood Illness (IMNCI):

IMNCI is a 8days training programme for ANM, LHV, AYUSH doctors and AWW to ensure early identification and neo-natal and childhood illness management and timely referral by the community based Health worker (HW). Till March'17 total **41721** (ANM, LHV, AYUSH and AWW ) community level HW have been trained against the state target of **57861**.



IMNCI training at District level

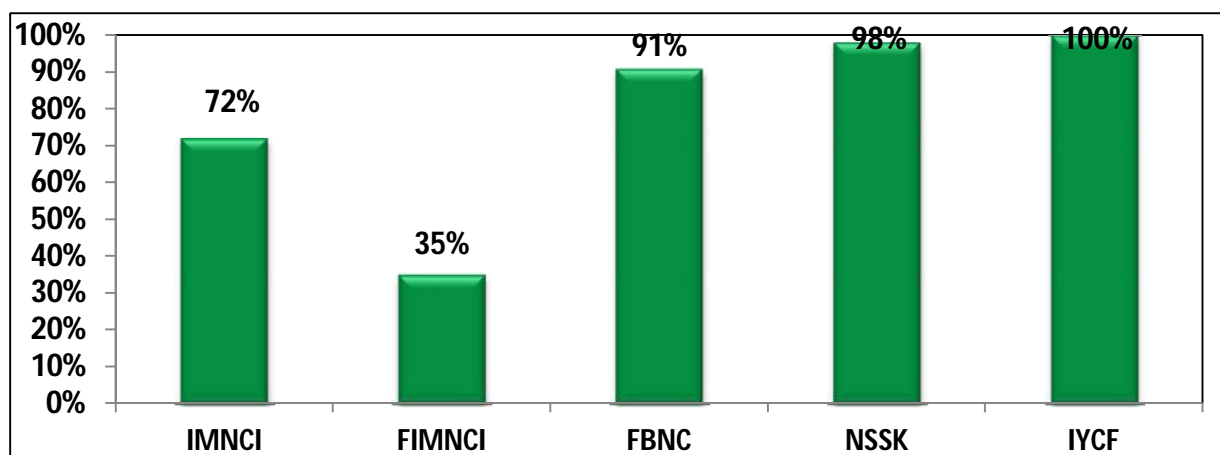


F-IMNCI training at State level

#### Facility Based Integrated Management of Neo natal Childhood Illness ( F-IMNCI):

F-IMNCI is the integration of the Facility based Care package with IMNCI package, to empower the Health personnel with the skills to manage new born and childhood illness at the community level as well as at facility. F-IMNCI provides a continuum of quality care for severely ill newborns and children from the community to the facility. Total **1287(35%)** have been trained against the state target of **3690**.





Training 2005-2017	State load	Ach.	Percentage (%)
8 days IMNCI training for ANM/LHV & AWW	57861	41721	72
11 days FIMNCI training for MO & SN	3690	1287	35
4 days FBNC training for MO & SN	898	817	91
2 days NSSK training for MO & SN/ANM	9609	9417	98
2 days IYCF training for HW(F)	11045	11045	100



Trainees are in FBNC Training

**Facility Based Newborn Care (FBNC) :** Newborn Stabilization Units are functional in different CHCs and SDHs for stabilization of sick newborn before referral to SNCUs and management of less sick newborns. Paediatricians and staff nurses working in NBSUs are trained in Facility Based Newborn Care. Total **817(91%)** MOs- 212 and SNs- 605 have been trained against the state target of **898**.

#### Infant and Young Child Feeding (IYCF):

The objective of IYCF training is to enhance the knowledge and skill of ANM & SNs on proper feeding and care practices for under 5 children and to provide better counselling skills for mother and care giver of children admitted at Paediatric OPD. Total **11045 (100%)** have been trained against the state target of **11045**.



Trainees are in IYCF Training



Trainees are in NSSK Training

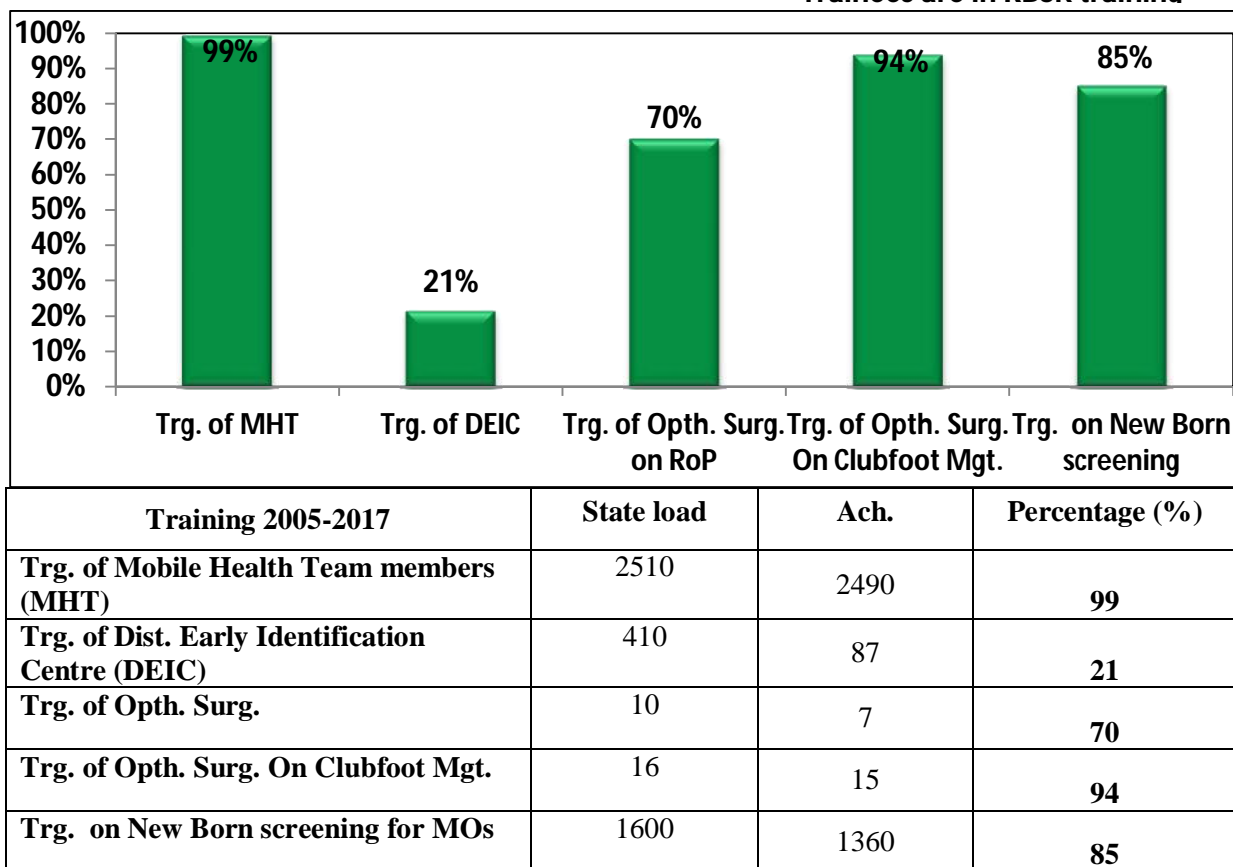
**Navjat Sishu Surakshya Karyakram (NSSK):** 2days training for Doctors, Staff nurses and ANMs working in Delivery Points.

Total **9417 (98%)** Medical and paramedical personnel (Medical officers- 1705 & paramedical- 7712) have been trained against the state target of **6609**.

**4. Rastriya Bal Swasthya Karyakram (RBSK):** Government of India under National Health Mission has launched **Rastriya Bal Swasthya Karyakram** in order to improve the overall quality of life and to provide comprehensive care. This programme involves screening of children from birth to 18 years of age for 4Ds - Defects at birth, Diseases, Deficiencies and Development delays including disabilities.



Trainees are in RBSK training

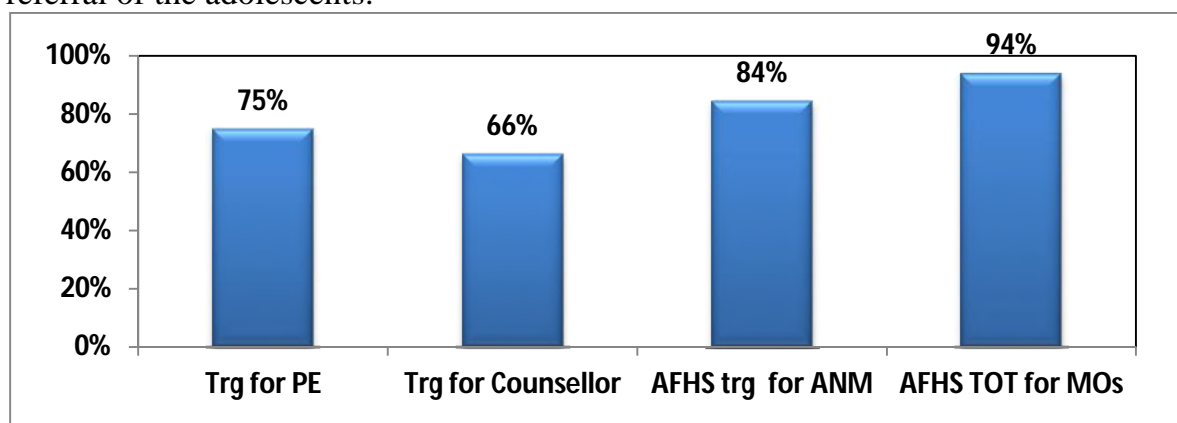


### 5. Rastriya Kishore Swasthya Karyakram (RKSK):

Government of India has launched **Rashtriya Kishor Swasthya Karyakram (RKSK)** in 2014, for adolescents in the age group of 10-19 years, to promote behaviour change in adolescents & to prevent NCDs including diabetes. RKSK training is provided to create demand among adolescents and to ensure timely referral of the adolescents.



Dist. Level AFHS training



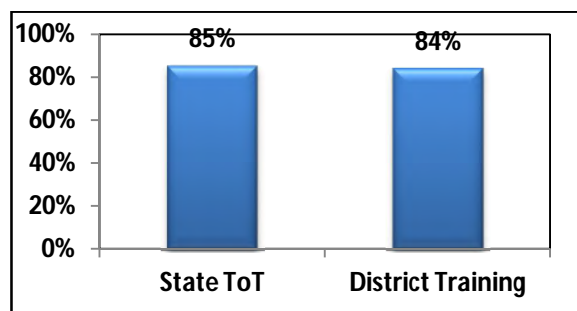
Training 2005-2017	State load	Ach.	Percentage (%)
<b>RKSK trg for PE</b>	1180	881	<b>75</b>
<b>RKSK trg for Counsellor</b>	180	119	<b>66</b>
<b>AFHS trg for ANM</b>	3340	2814	<b>84</b>
<b>AFHS TOT for MOs</b>	300	281	<b>94</b>

### 6. Trauma & Emergency Medical Care Training (TEMC):

It is important to stabilize the trauma victims. TEMC training is mandatory as per the **order of the Road Safety Committee of Hon'ble Supreme Court**. In view of the above requirement NHM, Odisha has initiated TEMC training during 2015-16 for DHH & SDH. DHH & SDH are being strengthened to provide quality TEMC services for trauma victims. During 2015-16, state TOT organised at AIIMS, BBSR. Three Medical College & Hospitals (MCHs) are designated as 'Regional Training Centre' for district and sub-district level training. After TOT 3 Govt MCHs have conducted training of the service providers at Dept. of Anaesthesiology. Training achievement during 2015-17 under TEMC is as follows:



ToT at AIIMS, Bhubaneswar



Training 2015-17	State Load	Ach.	%
2 days state ToT on TEMC	20	17	85
2 days dist. trg on TEMC	308	258	84

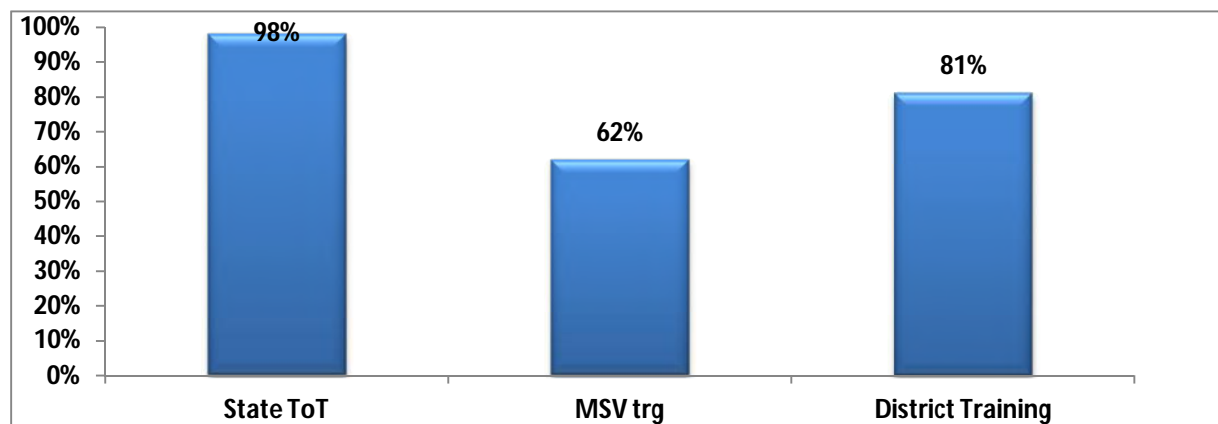
## 7. Dakshata:

Dakshata training is to improve the quality of maternal health services at high case load ( $\geq 50$  per month) facilities through OSCE (Objective Structured Clinical Examination) which includes-

1. Rapid assessments and periodic assessments through standardized formats, in order to identify and address resource gaps, and to track improvements.
2. Focused and customized skill based trainings, through a pool of trained master trainers and a series of State, Regional and district level trainings.
3. Strategy for transfer of learning through intense mentoring and support visit to improve labour room standards and clinical skills through on site mentoring.
4. Improved monitoring accountability, strengthening data recording, reporting systems and ensuring use of standard checklists.



**Trainees are in Dakshata training**



Training 2005-17	State Load	Ach.	Percentage (%)
State ToT on DAKSHATA	120	117	98
Trg. On Monitoring and Supervision visit (MSV)	99	61	62
District level trg on DAKSHATA	1380	1113	81



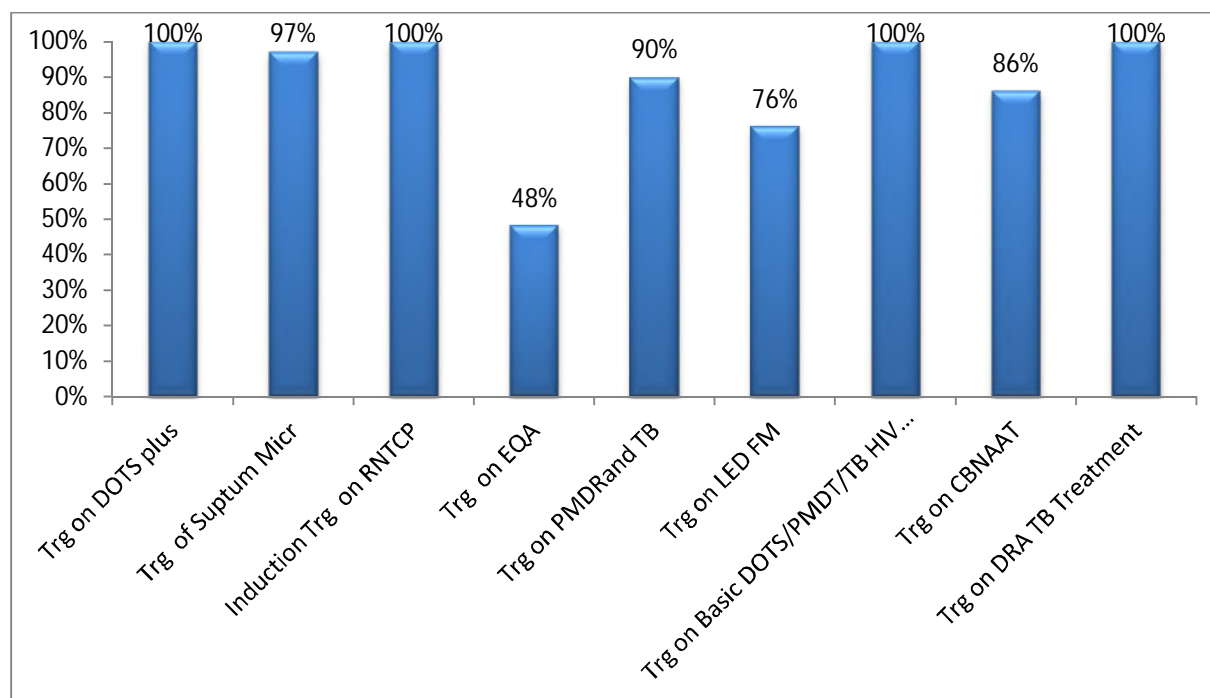
## 8. Revised National Tuberculosis Control Program (RNTCP):

Aims to widen the scope for providing standardized good quality treatment and diagnostic services to all TB patients in a patient-friendly environment. Major training programmes are as follows-



CBNAAT training at SCB MCH,Cuttack

Training 2005-17	State load	Ach.	Percentage (%)
Training on DOTS plus	750	753	100
Trainng of Suptum Microscopy	260	251	97
Induction training on RNTCP	812	812	100
Training on External Quality Assessment	139	67	48
Training on Programatic Management of Drug Resistant and TB	481	434	90
Training on Light Emitting Diod Floriseul Microscopy	195	148	76
Training on Basic DOTS/PMDT/TB HIV Intensified Package	210	210	100
Training on CBNAAT	469	402	86
Training on Daily Regimen Anti TB Treatment	344	356	>100

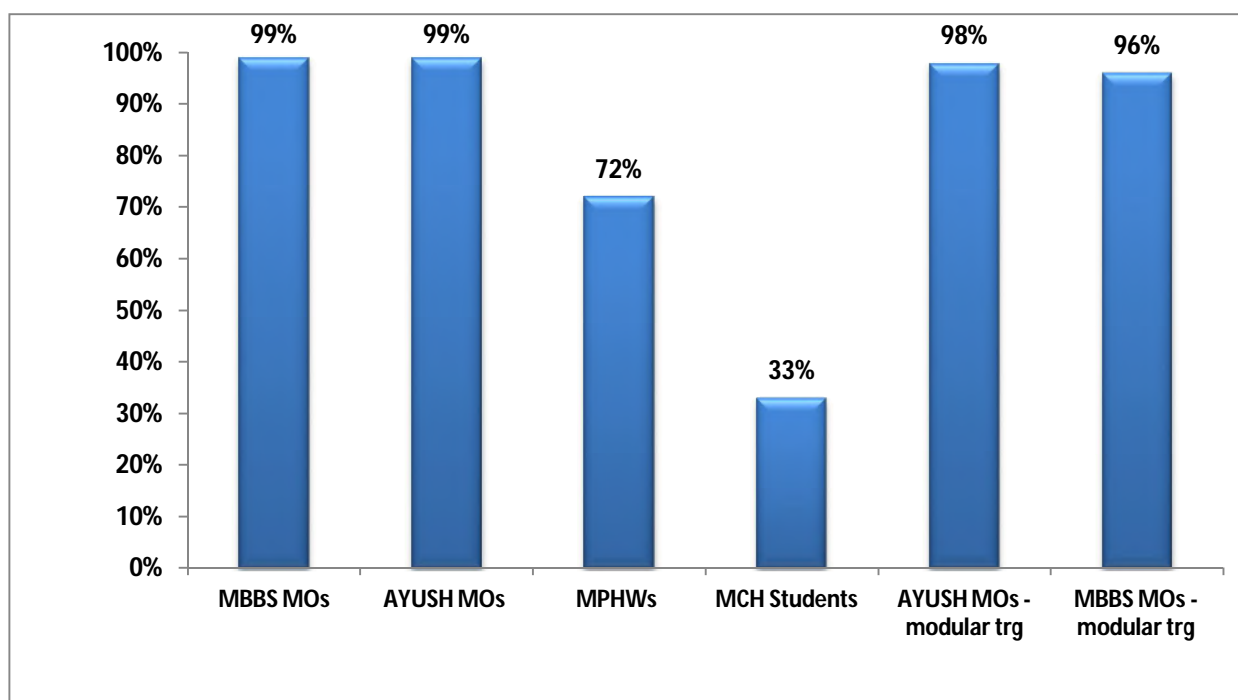




Trainees are in NLEP training

**9. National Leprosy Eradicated Program (NLEP):** Leprosy bacilli have very weak potential of causing the disease and it multiplies very slowly as compared to most other bacteria. In order to strengthen the process of elimination in the community, MBBS MOs, AYUSH MOs, MPHs are trained in phased manner.

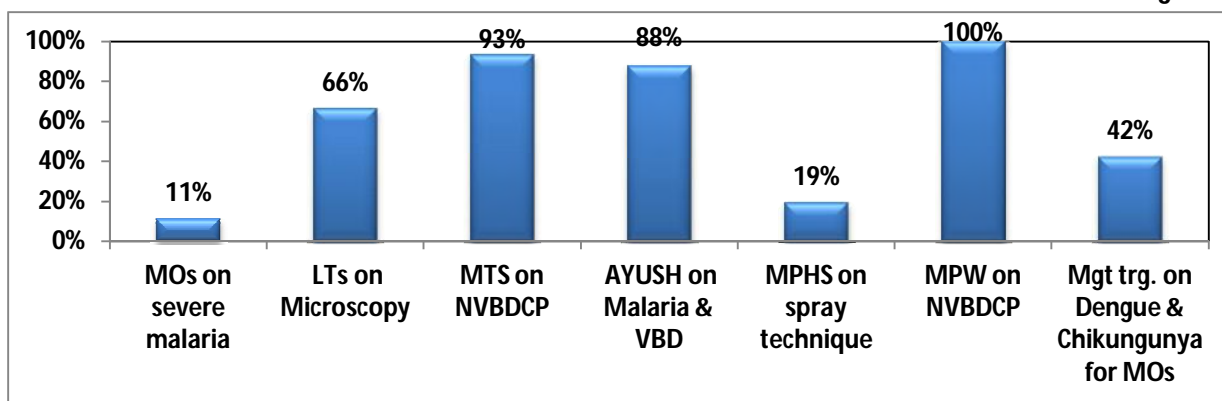
Training 2005-17	State Load	Ach.	Percentage (%)
MOs on Leprosy	1850	1840	99
AYUSH MOs on Leprosy	780	777	99
MPHWs on Leprosy	390	279	72
Training for MC & H students on Leprosy	400	130	33
AYUSH MOs modular training on Leprosy	170	166	98
MBBS MOs modular training on Leprosy	250	241	96



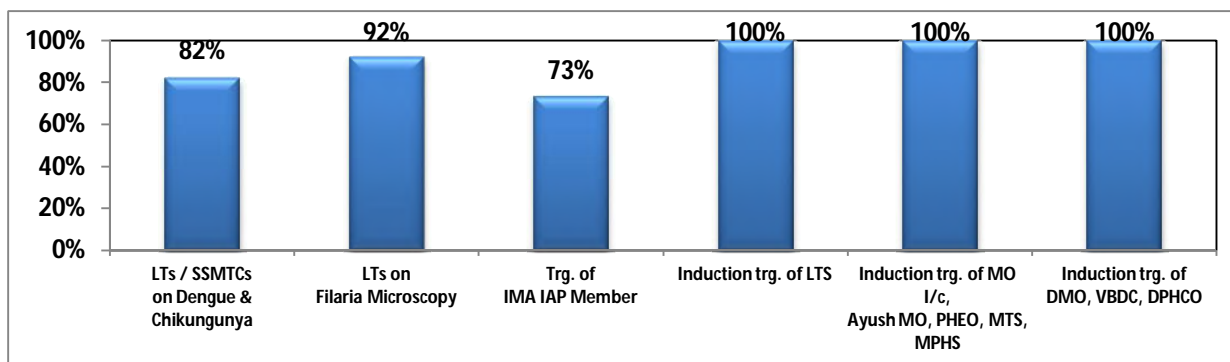
**10. National Vector Borne Disease Control Programme (NVBDCP):** National Vector Borne Disease Control Programme (NVBDCP) is for prevention and control of vector borne diseases like Malaria, Dengue, Lymphatic Filariasis, Kala-azar. Major training programmes are as follows-



Trainees are in NVBDCP training



Training 2005-17	State Load in person	Ach.	Percentage (%)
Training for MOs on treatment of severe malaria	3461	372	11
Training for LTs on Microscopy	415	274	66
State ToT on NVBDCP	210	195	93
Training for AYUSH on Malaria & VBD	1488	1310	88
MPHS training on spray technique	2659	500	19
Training of MPW on NVBDCP	3103	3100	100
Management training on Dengue & Chikungunya for MOs	691	293	42
Trg. Of LTs / SSMTCs on Dengue & Chikungunya	90	74	82
Training of LTs on Filaria Microscopy	150	138	92
Trg. Of IMA & IAP Member	30 batch	22 batch	73
Induction trg. Of LTS	5 batches	5 batches	100
Trg. Of MO I/c, Ayush MO, PHEO, MTS, MPHS	375	375	100
Trg. Of DMO, VBDC & DPHCO	30	30	100



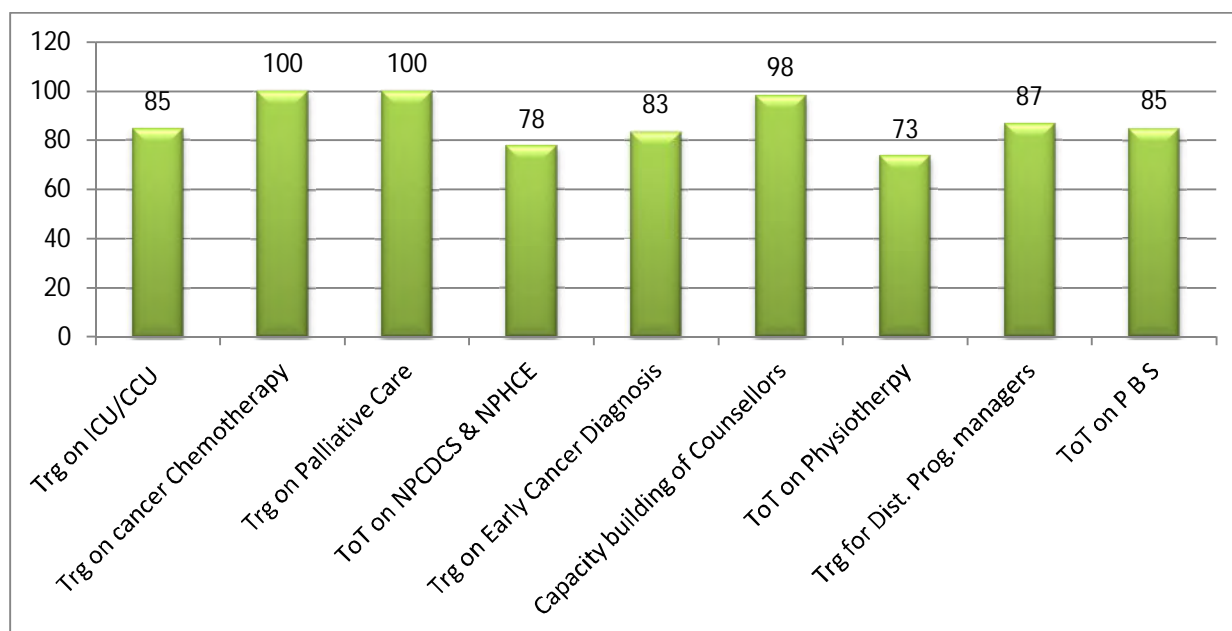
### 11. Training on Non- Communicable Diseases (NCD):

The “National Programme for Prevention and Control of Cancer, Diabetes, Cardio Vascular Diseases (CVDs) and Stroke” (NPCDCS) & “National Programme for Health Care of Elderly” (NPHCE) were launched in April 2011. Major training programme under NCD are as follows-



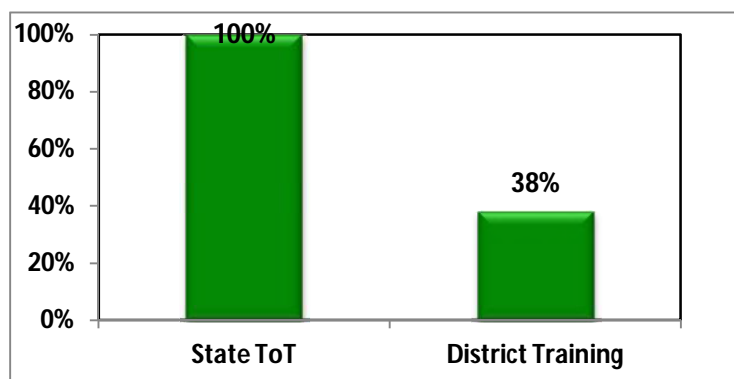
Trainees are in NPCDCS & NPHCE training

Training 2005-17	State load	Ach.	Percentage (%)
3 months training on ICU/CCU case management	136	115	85
Training on cancer Chemotherapy	75	75	100
Training on Palliative Care	20	20	100
State level ToT on NPCDCS & NPHCE	240	186	78
Training on Early Cancer Diagnosis	30	25	83
State level Capacity building of Counsellors	55	54	98
State level ToT on Physiotherapy	15	11	73
State level training for Dist. Programme managers	30	26	87
State level ToT on Population Based Screening (PBS)	180	153	85





**12. Syphilis:** As per approve PIP, Odisha State AIDS Control Society (OSACS) organised TOT and district level training for screening on syphilis. Training achievement till March'17 are as follows:



Trainees are in Syphilis Training

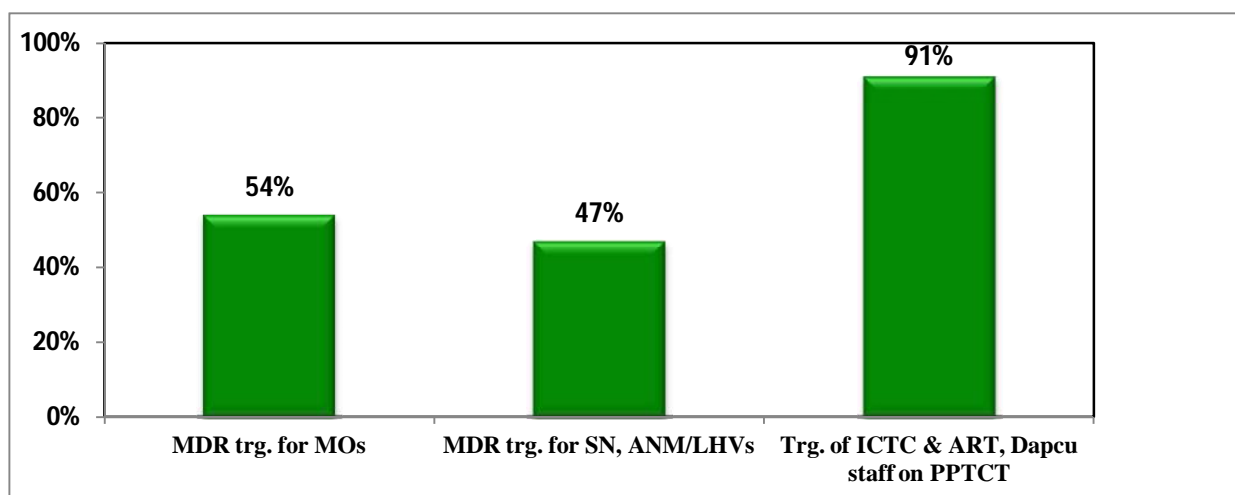
Training 2005-17	State Load	Ach.	Percentage (%)
State ToT on syphilis	60	58	97
District training on Syphilis	2000	750	38

**13. Positive Parent to Child Transmission (PPTCT):**

Training 2005-17	State Load	Ach.	%
Training for MOs on Multi Drug Regimen (MDR)	1264	840	33
MDR training for SN, ANM/LHVs	3418	1620	40
Training of ICTC & ART, DAPCU staff on PPTCT	265	241	91



PPTCT training at State level

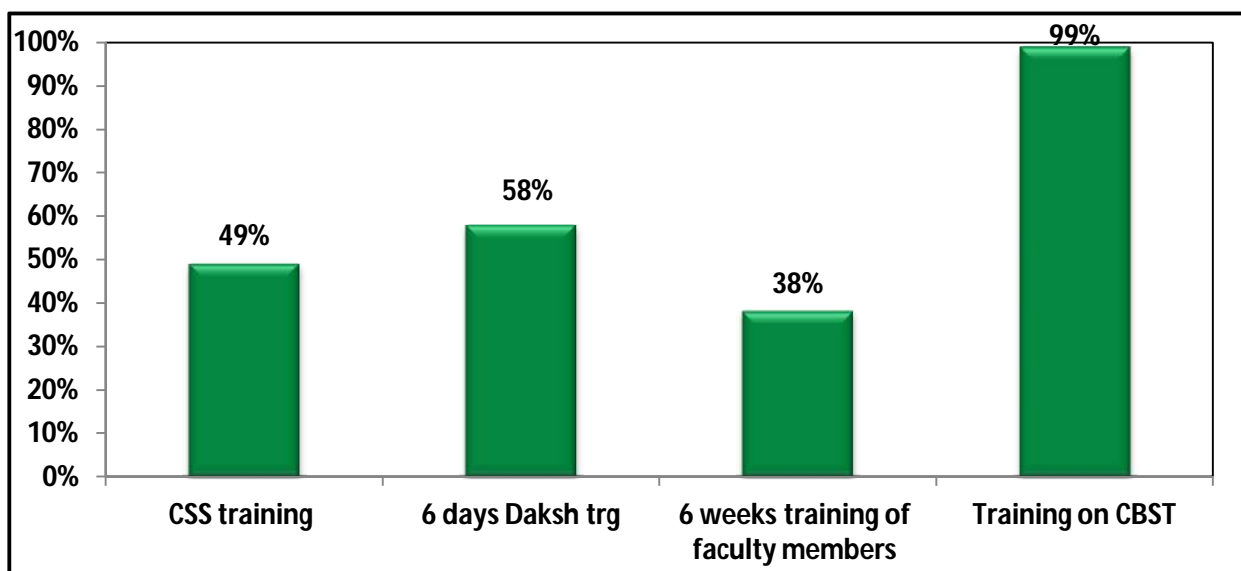


#### 14. Nursing Training:

As per the Govt. of India order no- 7(45) 2014- NRHM 1, 19<sup>th</sup> January'2015 and approved PIP: 2015-16, NHM Odisha, has organised skill assessment training to assess the skills of newly recruited SN & ANMs. After TOT, Master Assessors' conducted skill assessment session for newly recruited SN & ANM at district level. This training is conducted following **Objective Structured Clinical Examination (OSCE)** training methodology to ensure the quality and uniformity of assessment. The achievement of major training programme are as follows:



6 weeks training at State Nodal centre



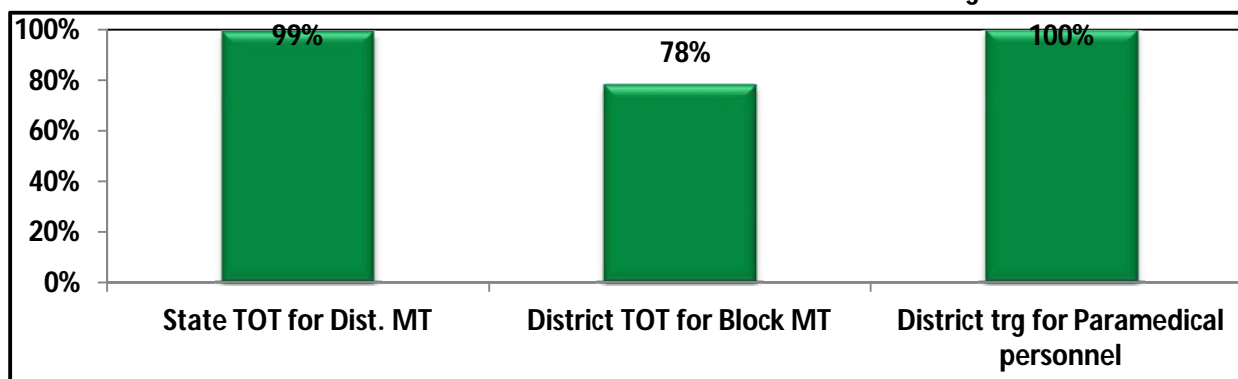
Training 2005-17	State Load	Ach.	Percentage (%)
Clinical Skill Standardization (CSS) training for Doctors, SNs & faculties from Nursing institutions	213	105	49
6 days ToT of Nurse Trainers on Skill Lab	248	145	58
6 weeks training of faculty members form ANM/GNM schools at National/ State Nodal Centre (NNC/SNC)	248	95	38
Training on CBST	330	328	99

**15. Bio Medical Waste (BMW) Management**

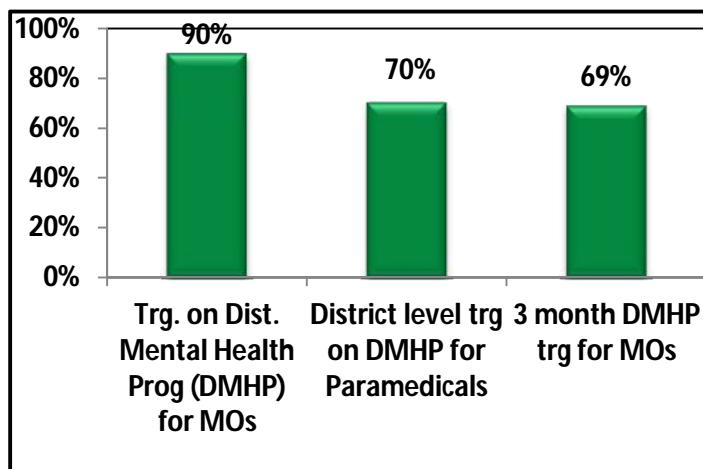
**training:** BMW under IMEP is an important training to ensure segregation of Bio Medical waste at source, Treatment, storage and proper disposal following the norms of State Pollution Control Board (SPCB). Major achievements under BMW training are as follows.



BMW training at State level



Training 2005-17	State Load	Ach.	Percentage (%)
State TOT on BMW for Dist. level MTs	182	181	99
District TOT on BMW for Block level MTs	7502	586	78
District trg on BMW for Paramedical personnel	1800	1980	>100

**16. Mental Health:**

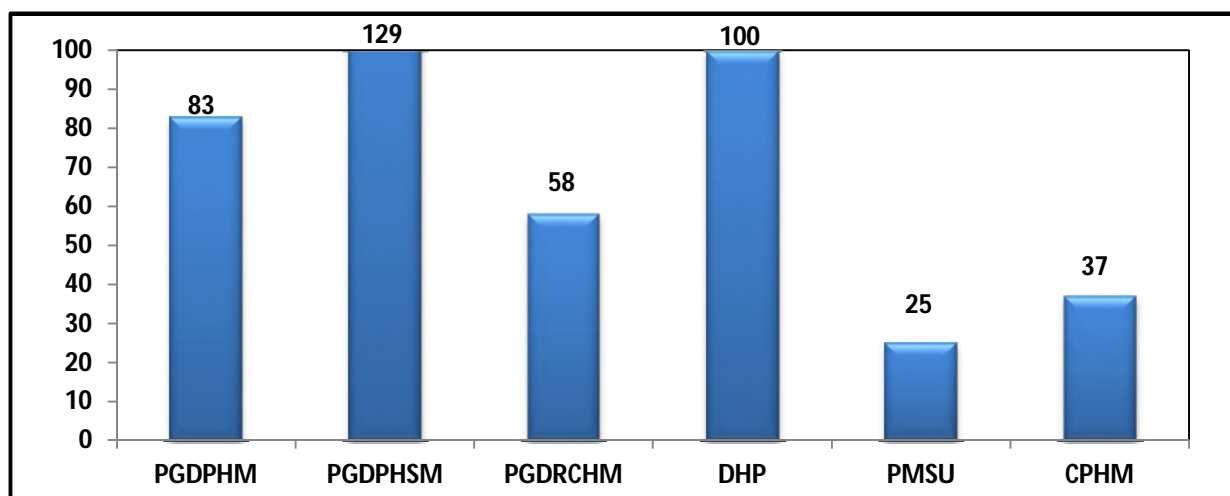
Training 2005-17	State Load	Ach.	%
Training on Dist. Mental Health Prog (DMHP) for MO	33	30	90
District level trg on DMHP for Para medicals	18600	12943	70
3 month DMHP trg for MOs	45	31	69

**17. Public Health Management Course:**

Human Resource (HR) development in public health is the requirement of NHM. To ensure quality implementation and rational use of resources for better health output at community level, quality public health management at district and block level is the need of the State. To achieve the above objective NHM, Odisha is providing 1 year e- Learning course (distance education) i.e CPHM, PGDPHSM, DHP, PMSU, PGDMRCH, PGDPHM to create public health manpower in health system. The skill of trained personnel will be utilized for quality implementation of RMNCH+A activities as per approved PIP.



**Contact programme on Diploma in HP at SIHFW (O)**



Course Name	SPMU Personnel	DPMU Personnel	BPMU Personnel (BPM)	Total
Post Graduate Diploma in Public Health Management (PGDPHM)	83 MBBS doctor			83
Post Graduate Diploma in Public Health Service Management (PGDPHSM)	21	50	58	129
Post Graduate Diploma in RCH Management (PGDRCHM)	00	00	58	58
Diploma in Health Promotion (DHP)	11	32	57	100
Program Management Support Unit (PMSU)	00	16	09	25
Certificate in Public Health Management (CPHM)	15	22	00	37
<b>Total</b>	<b>47</b>	<b>203</b>	<b>182</b>	<b>432</b>

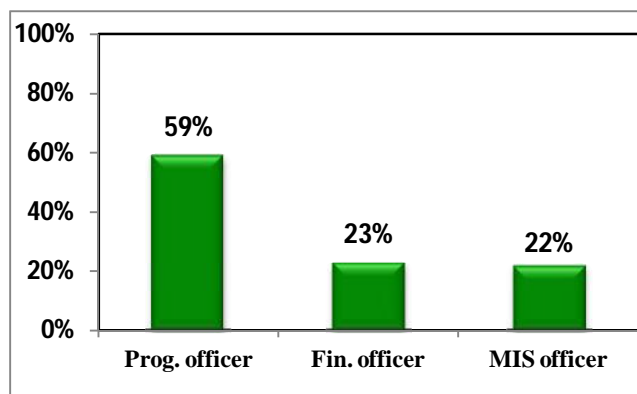


### 18. Management Development Program (MDP) in reputed institutions:

As per approved PIP, NHM officials from State, District and Block have attended Management Development Programme to enhance management skill at different reputed institutions like IRMA, Gujrat, IIMMR, Jaipur, Rajasthan, ASCI & ESCI, Hyderabad, NIHF, New Delhi, TISS, Mumbai etc. The achievement in MDP is as follows:



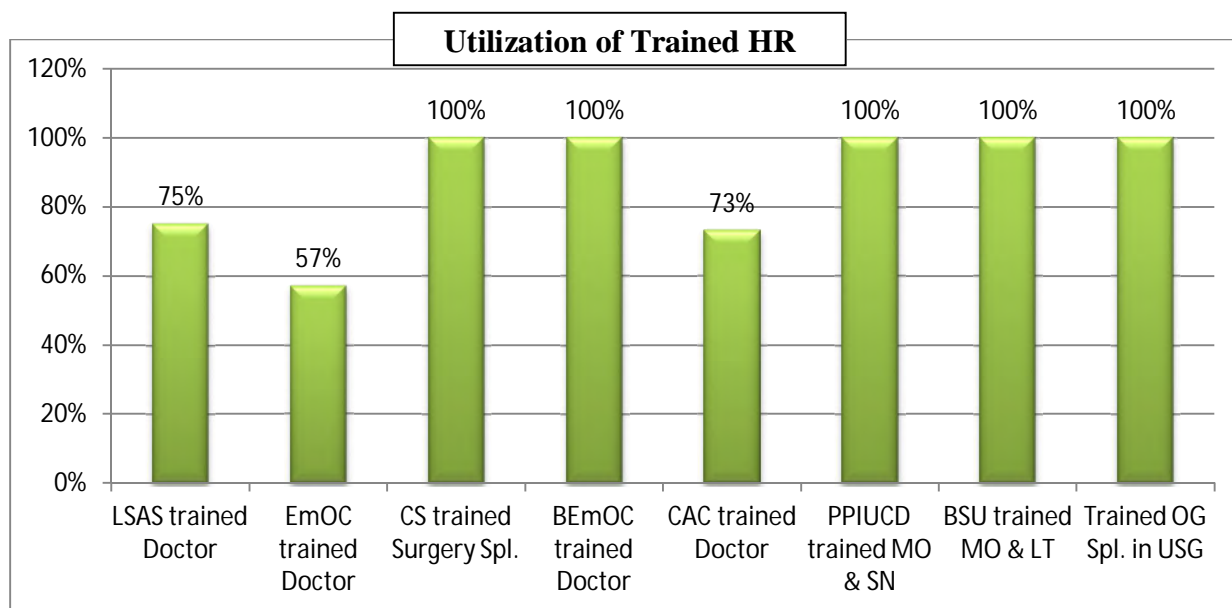
IMEP training at ESCI, Hyderabad



MDP	Prog. officer	Fin. officer	MIS officer
Target	510	424	394
Ach	299	97	87
%	59%	23%	22%

### 19. Utilization of Trained HR:

Training 2005-2017	Total Trained	Posted at FRU	Performing HR out of total posting	
			No	Percentage (%)
18 weeks LSAS training for MBBS doctors	155	72	54	75
16 weeks EmOC training for MBBS Doctors	38	7	4	57
4weeks CS training for Surgery Specialist	12	8	8	100
10 days BEmOC training for MBBS Doctors	980	872	872	100
Comprehensive Abortion Care (CAC)	529	529	386	73
3 days PPIUCD training for MO & SN	2515	2213	2213	100
3 days BSU Training for MO & LT	490	490	490	100
10days Confidential building training of OG spl.	22	22	22	100



## 20. Trained LSAS Doctor at FRU



**21. Training Review Mechanism**

Level of review	Chair person	Periodicity
State level quarterly RMNCH+A review meeting of ADMO, FW and Dy. MRCH.	DFW, Odisha	Quarterly
District level monthly review meeting of RMNCH+A with special focus on training.	CDMO	Monthly
Monthly review (VC & Tele medicine) of training from State	Director SIH&FW	Monthly
Quarterly review meeting of training nodal person at State level	Director SIH&FW	Quarterly
Physical achievement report by district as per approved training PIP.	Submitted to NHM & SIHFW	Monthly
Monthly financial report through FMR	Submitted to NHM	Monthly

**22. Monitoring Mechanism:**

- **State Integrated Monitoring team (SIMT):**

It is a multi disciplinary team consisting of Program, Finance, HMIS, Civil and technical person from NHM and Dept. of H&FW. Total 10 teams are covering 30 Districts. As per the order, each team is to visit at least one District for 3days excluding travel days/month. After visit, meeting with the Collector and District Magistrate along with CDMO is mandatory. Follow-up letter from MD, NHM issued to the District Collector, along with observation report. Action taken report from District and review on action taken report during next visit are structured activities under SIMT visit. Visit report is available in NHM website.

- **State Technical supervisory team (STST):**

Is the team consisting of the State Master Trainers and SIHFW personnel. STST makes visit to monitor different training programmes as per the training need at District and Block level.

- **District technical supervisory team (DTST):**

DTST is comprising of District Master Trainers, Programme Officers and Managers. DTST monitors the training quality at District and Block level during training.

**23. Innovation in Training:**

- Performance Based Incentive (PBI) for LSAS and EmOC trained doctors
- Professional indemnity bond for LSAS and EmOC trained doctors.
- Training bond for LSAS trainee doctors

**24. Directorate wise Nodal Officer / Consultants for Training**

Nodal Directorate	Nodal Officer/ Consultant	Designation	Cont. Number
NHM	Dr. A. Mahapatra	Consultant	9439994841
	Dr. R N Panda	Consultant CH	9439994825
	Dr. B. Modak	Sr. Consultant Trg. SHSRC	9439994820
	Anuja Behera	Consultant NGO	9439990049
	Santosh Kumar Nayak	Consultant PPP	9439994886
	Pratap Kumar Das	Consultant Tribal Health	9439990064
	Malaya Kumar Panigrahi	SFM, NHM	9439994829
	Chandanesh Mishra	Consultant RKSK	9439990022
	Nihar Ranjan Swain	Consultant RBSK	9439990046
	Prakash Kumar Mallick	BM Engineer	9439994885
	Bibudha Bijayalaxmi	Consultant, Pre -Service Nursing	9439991203
SIH&FW	Dr. B. C Sarangi	Consultant O&G	9437858587
	Ashok Kumar Samal	Training Consultant, SIHFW	9439990079
	Ritesh Sisu	S C M (COE, SIHFW)	9439987245
DFW	Dr. K. K. Das	JD, CH cum Nodal Off. Sampurna	9437022468
	Dr. Ajit Ku. Mohanty	JD, Family Welfare	9439991228
	Dr. Mrutyunjaya Mishra	Sr. Manager, MH (Tech), SM Cell	9439996497
	Dr. Nirmala Dei	Consultant RMNCH+A ( Tech)	9437230809
	Dr. Banani Samal	Consultant Equity & Gender	9439991146
	Soumya Mahapatra	Consultant MH	9439994828
	Mrutyunjaya Rath	Sr. Trg. Coordinator, SM Cell	9439990218
	Anindita Pattnaik	Mgt. Consultant CH	9439994839
	Srabani Das	Consultant PCPNDT	9439991147
OSACS	Dr. S. K Swain	Joint Director- OSACS	8763118786
DPH	Dr. Pramila Baral	Joint Director- PH	9439994866
	Mihir Kumar Panda	Consultant BMW	9439994890
	Dr. Niranjana Das	Consultant NDCP	9437094672
Nursing	Dr. Lingaraj Mishra	JD, Nursing (Edu)	9439991238
	Dr. Riyazat Ali	JD, Nursing (Clinical)	9439991216
	P. J Reddy	Cons.Tech	9439991205
	B. Mishra	Cons. Mgt., Nursing	9439991210
	Balachandran B L	Cons. Clinical Nursing	9439991188
AYUSH	Dr. Asit Mohanty	AYUSH Consultant	9439990078



NCD	Dr. P.K.B Pattanaik	JD cum State Nodal Officer, NCD	9439991164
	Dr. Niranjan Das	State Epidemiology, NCD	9437094672
	Dr. Jyotshna Pattnaik	State Program Co., NPCDCS	9437558974
TB	Dr. Sanjukta Sahoo	Joint Director- TB	9437211688
Malaria	Dr. Madan Mohan Pradhan	Joint Director- NVBDCP	9439991178

## 25. Training Institution/venue at different level:

Sl. No	National level		
1	NIHFW, New Delhi		
2	IIPH, New Delhi		
3	IIHMR, Jaipur, Rajasthan		
4	PGIMER, Chandigarh		
5	TISS, Mumbai		
6	CINI, Kolkatta		
7	ASCI, Hyderabad		
8	ESCI, Hyderabad		
	<b>State level Govt. Trg. Venues</b>		
9	State Institute of Health & Family Welfare, Odisha		
10	AIIMS, Bhubaneswar		
11	Sishu Bhaban, Cuttack		
12	Gopabandhu Academy of Administration, Bhubaneswar		
13	Madhusudan Das Regional Academy of Financial Management, Bhubaneswar		
	<b>Regional level</b>		
14	SCB Medical College & Hospital, Cuttack		
15	MKCG Medical College & Hospital, Berhampur		
16	VSS Medical College & Hospital, Burla		
17	Capital Hospital, Bhubaneswar		
18	Regional Health & Family Welfare Centre (RHFWC), Cuttack		
19	Regional Health & Family Welfare Centre (RHFWC), Jagatsingpur		
20	Regional Health & Family Welfare Centre (RHFWC), Sambalpur		
	<b>District level</b>		
21	District Training Unit (DTU) at District HQ -30		
22	ANM Training Centre (ANMTCs, Govt.) -19		
23	GNM Training Centre (GNMTCs) -08		
24	College of Nursing, Berhampur, Ganjam -01		
25	Lady Health Visitor Training Centre(LHVTC), -01 Berhampur		

	<b>Private Trg. venues</b>
26	KIMS- Kalinga Institution of Medical Sciences
27	KSPH- Kalinga School of Public Health
28	IIPH, Bhubaneswar
29	AIPH, Bhubaneswar
30	KIIT University - School of Management
31	Centre For Youth & Social Development (CYSD)
32	Xavier Institute of Management, Bhubaneswar (XIMB)
33	Institute of Management & Advance Global Excellence(IMAGE)
34	Indian Medical Association (IMA), Bhubaneswar

## 26. Major Training programmes under NHM, Odisha

Sl. No.	Training	Duration	Batch size in person	Category of trainees
<b>Reproductive Health (RH)</b>				
1	Laparoscopic Sterilization	12days	03	Doctor, Staff Nurse, OT Assistant
2	Minilap training	12days	03	Medical Officers
3	Non Scalpel Vasectomy (NSV)	5days	04	Medical Officers
4	Intra Uterine Contraceptive Devices (IUCD)	5days	10	Medical Officers, AYUSH Doctor, SNs, ANM, LHV
5	Post Partum Intra Uterine Contraceptive Devices (PPIUCD)	3 days	10	Medical Officers, SNs
6	Injectable & Oral Pills	1day	30	Medical Officers, SNs,
<b>Maternal Health (MH)</b>				
1	Skill Attendant at Birth (SAB) at district	21 days	03 Avg.	SN, ANM/LHV & Ayush MO
2	Emergency Obstetric Care(EmOC) training	16 weeks	08	MBBS Doctors
3	Life Saving Anaesthesia skills (LSAS)	18 weeks	06	Medical Officers
4	CAC certification training	12 days	08	MO(12 days), SN (6 days)
5	RTI/STI training	2 days	25	Medical Officers & LTs
6	BEmOC training	10days	08	MBBS Doctor of L2 & L3
7	Dakshata training	3days	15	MO & SN
8	Syphilis screening during pregnancy	2 days	30	MO, SN, ANM, LHV, O&G spl
9	Diagnosis & Mgt. of Gestational Diabetes Mellitus	3 & 2 days	30	OG Spl, MO & PMs & SN,ANM,LHV,LT
10	Orientation on Screening of Hypothyroidism	1day	50	Prof. & Asso. Prof.
11	CS training for Surgery Specialist	27 days	2	Surgery spl
12	Maternal Near Miss review (MNM-R)	1day	40	Nodal Officers & Consultants, 3/MCH, Asst. & Asso. Prof
13	Training on PPTCT / EID	2 days	30	MBBS Doctors, SNs,ANMs,LHVs
14	BSU training	3days	20	MO & LT

<b>New Born &amp; Child Health</b>				
1	Integrated Management of Neonatal and Childhood Illness (IMNCI)	8 days	24	HW(M&F) ,LHV, AWWs, ICDS-LS, CDPO, AYUSH Doctors
2	Facility Based Integrated Management of Neo natal Childhood Illness	11 days	24	MOs and SNs
3	Training on NRC	3 days	30	ANM & Nutrition counselor
4	Navjat Sishu Surakhya Karyakram (NSSK)	2 day	16	Medical Officers, SNs, ANMs of DPs
5	Facility Based Newborn Care (FBNC)	4days	24	MOs and SNs
6	Infant & Young Child Feeding (IYCF)	3days	30	MO, ICDS(Sup.),DMRCH& ANM
7	Family centered care (FCC)	2 day	30	SN of SNCU
8	RBSK Trg. on Clubfoot Mgt.	3days	30	Opt. Surg.
9	RBSK Trg. on MHT	5days	30	MHT staff
<b>Adolescent Health</b>				
1	Adolescent Friendly Health Service (AFHS)	5days	30	MOs, ANM/LHV & Counsellors
2	Training of Peer Educators	6days	40	Peer Educators
3	WIFS trainings	1day	40	ANMs & ASHAs

**27. Public Health Management Training**

<b>Training/ Course</b>	<b>Duration</b>	<b>Institution</b>	<b>Total HR trained</b>	<b>Participants</b>
<b>Post Graduate Diploma in Public Health Management</b>	1 year full time course	IIPH, BBSR	83	MBBS doctor-83
<b>Post Graduate Diploma in Health Quality Management</b>	1 yr course	TISS, Mumbai	06	SPMU Personnel-04 SPMU Personnel-02
<b>Diploma in Health Promotion (DHP)</b>	1 yr course (including 2 contact sessions)	NIHFW, New Delhi	100	SPMU Personnel-11 DPMU Personnel-32 BPMU Personnel-57
<b>Post Graduate Diploma in Public Health Service Management (PGDPHSM)</b>	1 yr course (including contact sessions)	IIPH, BBSR	129	SPMU Personnel-21 DPMU Personnel-50 BPMU Personnel-58
<b>Post Graduate Diploma in Reproductive &amp; Child Health Management (PGDRCHM)</b>	E-Learning 1 yr e-course with 3day contact session	IIPH, New Delhi	58	BPMU Personnel-58
<b>Certificate course on Public Health Mgt (CPHM)</b>	1 year course (Week end class)	AIPH, BBSR	27	SPMU Personnel-15 DPMU Personnel-12
<b>Program Management Support Unit (PMSU)</b>	E-Learning 1 yr e-course	SIHFW(O)	25	DPMU Personnel-16 BPMU Personnel-09

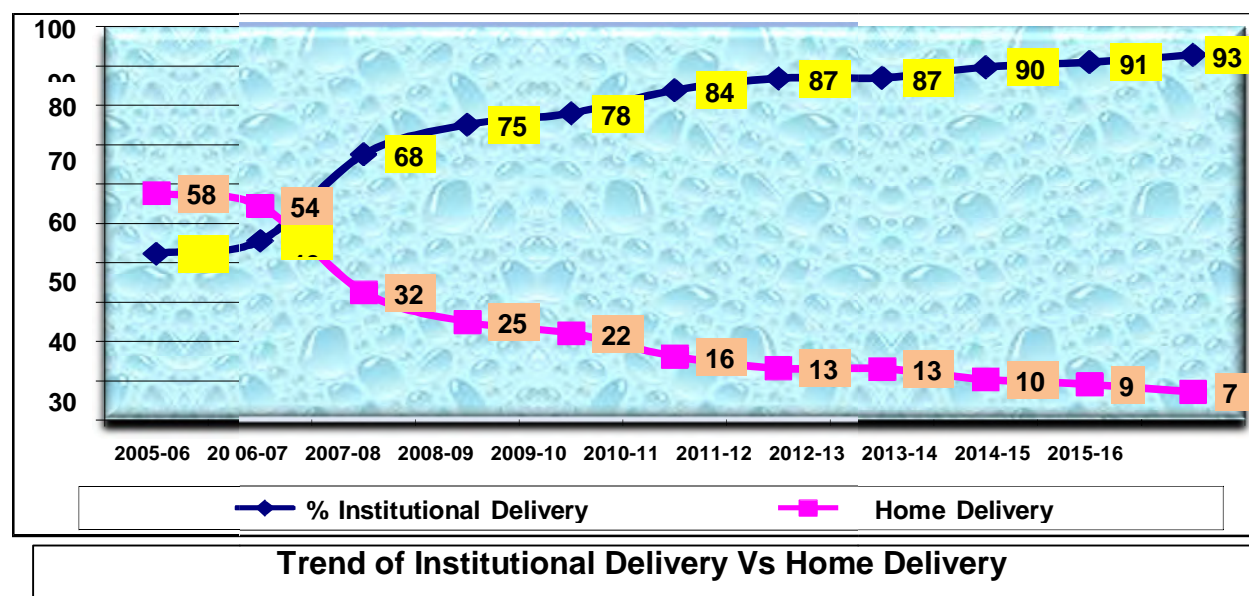
**28. Management Development Programme at Reputed Institutions**

<b>Training/ Course</b>	<b>Institution</b>	<b># of staff completed</b>	<b>Participants</b>
Management Development Programme (MDP)	IRMA, Anand, Gujrat,	77	Programme Officers -31 Finance Officers -46
	IIHMR, Jaipur, Rajasthan,	136	Programme Officers -136
	ASCI, Hyderabad,	51	Finance Officers -51
	ESCI, Hyderabad	91	MIS Officers -61 State Prog. Officer -30
	NIHFW, New Delhi	158	Programme Officers -132 MIS Officers -26

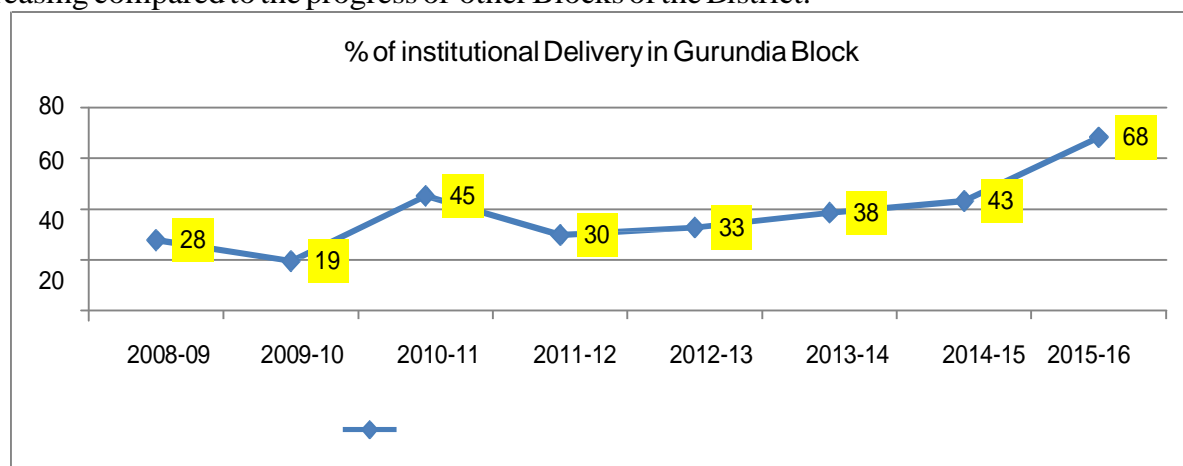
## 29. Success Story

### Impact of SBA training

**Sundargarh** a tribal populated District of Odisha with 17 Community Development Blocks. A decade ago, there was reluctance for institutional delivery at community level. The interventions of **National Health Mission**, continuous training, skill up-gradation of service providers and facility readiness have contributed significantly towards increased institutional delivery. The increasing trend of institutional delivery and diminishing trend of home delivery of Sundargarh is depicted below.



**Gurundia** is one of the interior blocks of Sundargarh District, Located in hilly terrains, with poor connectivity and lack of community awareness. Due to shortage of Doctors and skilled service providers in the health facility, people lost confidence and was not interested to visit Gurundia CHC. As a consequence, institutional delivery was decreasing compared to the progress of other Blocks of the District.





In the long-run, Gurundia CHC lost the status of Delivery Point (DP) due to low institutional Delivery. Human resources and other DP related facilities were withdrawn. In this juncture, **Ms. Dipti Bharati , a staff Nurse of Gurundia CHC** appointed under NHM and trained with Skilled Birth Attendant (SBA) and PPIUCD training at Bonai Sub-Divisional Hospital. After training, she conducted deliveries. People were reluctant to bring the delivery cases to this hospital due to non-availability of Doctors. She continued to provide delivery services round the clock and stayed in the hospital campus. **The commitment, skilled services and good behaviour of Smt. Dipti Bharati with the people, institutional Delivery of Gurundia CHC increased significantly and resumed its Delivery Point Status during FY:2015-16.**



Ms. Dipti Bharati, S N at Gurundia CHC

Ms. Dipti Bharati is confident to conduct normal Delivery, partograph, AMTSL, resuscitation and provides family planning services. **She says, “I am very glad that people have confidence on me and I am proud to provide services to the people”.** Ms. Basanti Lakra , ASHA SATHI, Gurundia Sector says, “ Mothers are interested to come to Gurundia CHC for delivery, since they have faith on Ms. Dipti Bharati”. All the other staff of the institution are motivated by the improved services, and they are working together to ensure quality health care.

#### **Lessons learnt:**

1. Adequate skills, knowledge and motivation help the service providers to deliver the quality services efficiently.
2. Identification of skilled manpower and their posting at strategic locations yield better result.

## The skill that saves Maternal Death

**Archana Sahani** lives with her family in Gopalpur Village under Naiguan Sub-centre of CHC Astarang, Puri. **Ajay Sahani, her husband** and her family members were taking care during her pregnancy. She had received 2 Antenatal checkups at CHC Astaranga and two check ups at VHND session. At the time of delivery she was admitted at CHC Astarang on 30<sup>th</sup> Sept'15 at 6.15 A.M. Astarang is 70 kms away from Puri. There is no OG Spl. against the sanctioned post. **Her condition was normal at the time of admission and cervix was not fully dilated.**



After admission she was kept under observation. When Archana was in active labour, Partograph was maintained by Pinkilata Behera Staff Nurse and treatment continued as per the advice of the treating doctor. As per the Partograph the progress of delivery was normal. **In absence of Doctor, Archana delivered a baby at 7.50 A.M. and the delivery was conducted by the Staff Nurse.** SN conducted Active Management of 3rd Stage of Labour (AMTSL) by giving Inj. Oxytocin 10 units (Intramuscular). She massaged uterus properly after delivery of placenta. **But after delivery Archana had severe PPH due to atonic uterus and perennial tear. As a result her pulse became feeble & leading to impending shock.**

Immediately she gave Inj. Oxytocin 10 IU I.M. and continued uterine massage. 20 IU of Oxytocin was added to 500 ml of Ringer Lactate (RL) and infused at the rate of 40-60 drops / minute and uterine massage was continued by Pinkilata Behera, Staff Nurse, who received SAB training for 21 days at DHH, Puri during FY: 2014-15. **The PPH was managed by timely interventions and saved the life of Archana.** Staff Nurse was very happy and thanked **National Health Mission** for providing her **21 days training on Skilled Birth Attendant (SBA).** After SBA training she is more confident in her work. She (Pinaki lata, SN, Astaranga CHC, Puri) said that, **with SBA skills I feel more confident to save the life of expected mothers at labour room.**



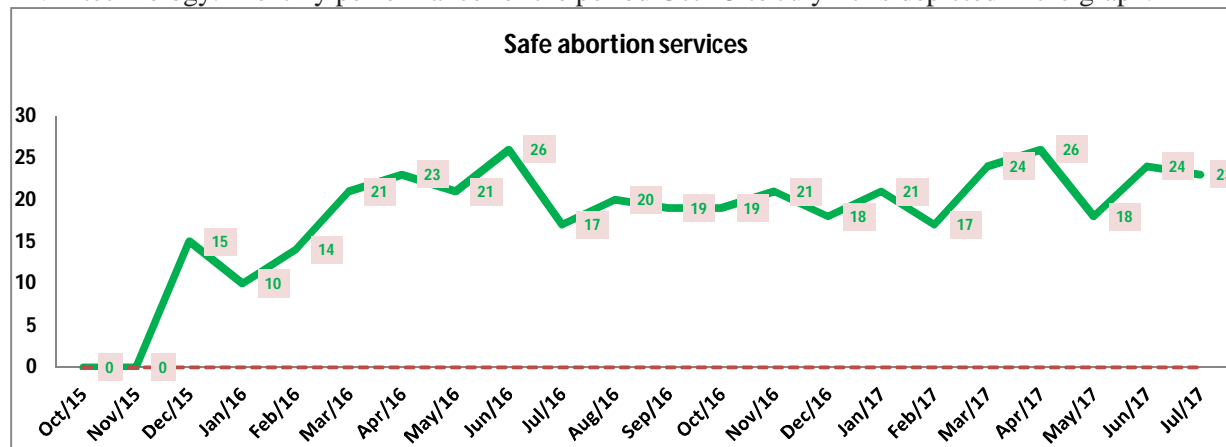
There is only one Medical Officer posted at CHC, Astaranga, Puri and he is busy in administrative work. Staff Nurse has to manage most of the labour cases. Ms. Pinaki-lata, SN has conducted 130 deliveries in CHC and has managed 3 PPH cases during her tenure of 1 year and 4 months of service at CHC Astarang.

## Compressive Abortion Care; A success at CHC, Purunakatak

According to **WHO fact sheet; published in January 2012**, there is 29 abortions per 1,000 women aged between 15–44 years in developing countries in 2008. Nearly half of all abortions worldwide are unsafe, and nearly all unsafe abortions (98%) occur in developing countries. In developing world, 56% of all abortions are unsafe, **against just 6% in the developed world. In 2013, Ipas India reported that death of one woman for every two hours in India (approximately 4,000 deaths a year) is due to unsafe abortion.** According to 2011 Census, institutionalized abortion varied among Indian States from 32 per cent in Chhattisgarh to 73.9 per cent in Assam. The women of rural India, rarely have access to safe abortion services.



**Community Health Center (CHC), Purunakatak, Boudh** is located in a remote area & catering the health needs of 77932 population distributed in 141 villages. The CHC, Purunakatak initiated Comprehensive Abortion Care (CAC) Services in December 2015. **The Medical Officer In-charge Dr. Rabinaryan Paramanik attended 12-days MTP certification training from 23<sup>rd</sup> November to 4<sup>th</sup> December 2015**, facilitated by Ipas Development Foundation at DHH Phulbani. Dr. Paramanik started providing CAC services at CHC using safe technology of **Manual Vacuum Aspiration (MVA)** and maintained all documents as per MTP Act. . Being a single doctor at CHC, he faced many challenges at his work place. **In January 2016, Dr. Saroj Kumar Acharya, OB-GYN joined in CHC Purunakatak and started providing MTP services using Electrical Vacuum Aspiration (EVA).** Dr. Paramanik trained Dr. Acharya on MVA. Subsequently Dr. Acharya took training on MVA at MKCG Medical College and Hospital at Berhampur, Ganjam Training Center from 26<sup>th</sup> October to 28<sup>th</sup> October, 2016. After training both the doctors conducting MTP using MVA technology. Monthly performance for the period Oct'15 to July'17 is depicted in the graph.



It is observed from the graph, that within 8 months (Nov'15 to July'16) the performance raised from '0' to 26 cases / month due to the willingness & skills of both the doctors and the effectiveness of MVA technology.



# P H O T O   G A L L E R Y

## Reproductive Health



## Adolescent Health



## RMNCH +A



## Maternal Health



## Neonatal & Child Health



## Impact of training

- 54 LSAS trained doctors are performing in functional FRUs.
- 40 BSUs are functional due to BSU management training.
- 22 trained OG Specialists are providing Ultrasonography service on PMSMA (Pradhan Mantri Surakshit Matritva Abhiyan) observation day.
- 12 Surgery Specialists are providing Caesarian Section (CS) service at FRUs
- 386 trained doctors are providing CAC services.
- PPIUCD is provided by 2515 MOs and SNs.
- 55 NRCs are functional due to training of Nutritionists.
- 30 SNCUs are functional due to training of 212 MOs and 605 SNs in FBNC
- 49 NBSUs are functional due to FBNC training of 817 MOs & SNs.
- 737 NBCC are functional due to NSSK training.
- 980 BEmOC trained MBBS doctors are providing BEmOC services.
- 508 AYUSH doctors are conducting delivery after SAB training.





# Mission Directorate

## National Health Mission

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