

# ANNUAL ACTIVITY REPORT 2019-20



PANDIT RAGHUNATH MURMU  
MEDICAL COLLEGE &  
HOSPITAL, BARIPADA



HEALTH & FAMILY WELFARE DEPARTMENT  
GOVERNMENT OF ODISHA

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## Message

Health has remained one of the most priority areas for the State Government. Department of Health & Family Welfare has made continuous efforts in providing quality health care services to the people of Odisha the results of which can be seen in the National Family Health Survey Report, 2015-16 where in Odisha has improved in many critical health indicators, especially in areas of institutional delivery, post-natal care, full immunization coverage and reduction in IMR and U5 Mortality rate. These encouraging achievements may be attributed to enabling policies, programmes and sustained efforts made by the State Government over last one decade.

Schemes like BSKY, NIRAMAYA, Nidan, Sahay, SAMMPurNA, AMA Clinic, Digital Dispensaries etc. have been made operational to provide free health services across health facilities in the State. Also, provision has been made for transportation cost reimbursement to pregnant women, Sickle Cell and Thalassemia major and haemophilia patients. For school going girls (class 6<sup>th</sup> to 12<sup>th</sup>) of state, free napkin under Khusi scheme are being provided. Also, setting up of maternity waiting homes, extensive IEC/BCC campaigns in unreachable areas, management of health facilities in difficult pockets through PPP mode and detection, treatment, referrals through Mobile Health Units area being undertaken by the Department.

For strengthening the tertiary care, State has now 7 Medical colleges as 4 New Medical Colleges (Koraput, Baripada, Balasore and Bolangir) were made operational and more 7 Medical Colleges are coming up in future to cater to strengthen shortage of doctors of State.

After introduction of 5T initiative, Department of Health & FW has become more Technology-driven, transparent and accountable to provide patient-friendly treatment at health facilities.

However, we have miles to go & still a lot to achieve. I sincerely, believe that all of us must, as a team, participate in thinking, planning and executing health care activities.

I take this opportunity to congratulate the Department for successfully bringing out the publication of the Annual Activity Report 2019-20 which will prove to be a good reference for health professionals and administrators.

  
(Naba Kisore Das)



**Nikunja B. Dhal, IAS**

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## Foreword

Department of Health & Family Welfare is committed to providing accessible, equitable and affordable health care services to the people of Odisha. With this objective, the department has implemented wide range of initiatives especially in the areas of maternal & child health, communicable and non-communicable diseases, HR reforms, strengthening health infrastructure, community participation etc. As per NFHS-4, Odisha has registered the sharpest decline in Infant Mortality Rate (IMR) among the major States of the country. State's IMR has fallen below the National average for the 1st time, which is a testimony to various focussed interventions in the area of maternal & child health.

Biju Swasthya Kalyan Yojana (BSKY), which assures free health services including drugs and surgicals for all (irrespective of income, status or residence) in all State Government health care facilities is one of its kind in the country. Post BSKY, we have seen over 30 percent increase in both in patient & out patient case loads in government facilities. The State has done exceptionally well in reduction of malaria burden through Durgama Anchalare Malaria Nirakaran (DAMaN) campaign, LLIN distribution etc. More than 27 lakh people above 30 years of age have been screened for hypertension, diabetes, cancer at more than 1000 Health and Wellness Centres. 2000 posts of Assistant Surgeons, 6000 posts of Staff Nurses, 1000 posts of Lab. Technicians, 600 posts of Pharmacists and 200 posts of Radiographers have been created recently to augment the human resources for health.

Four new Medical Colleges have been made operational during the last 3 years & the number of UG (MBBS) seats has gone up to 1150 in the Government Medical Colleges. Another seven new Government Medical Colleges are in the pipeline. It has been decided to transform the iconic SCB Medical College & Hospital into a world class institution in the areas of tertiary health care, medical education & research.

With these few words, I commend the Annual Activity Report for the year 2019-20.

 3/3/2020

(Nikunja B. Dhal)



## CONTENTS

CHAPTER	DETAILS	Page No.
<b>1</b>	<b>Activities of Health and Family Welfare Department: An Overview</b>	<b>1-12</b>
<b>2</b>	<b>National Health Mission</b>	<b>13-31</b>
<b>3</b>	<b>Directorate of Health Services</b>	<b>32-44</b>
3.1	National Vector Borne Disease Control Programme (NVBDCP)	
3.2	Revised National Tuberculosis Control Programme (RNTCP)	
3.3	National Leprosy Elimination Program (NLEP)	
3.4	State Human Resource Management unit (SHRMU)	
3.5	State Drug Management Unit (SDMU)	
3.6	Health Assurance Schemes (BSKY)	
<b>4</b>	<b>Directorate of Public Health</b>	<b>45-54</b>
4.1	Integrated Disease Surveillance Programme (IDSP)	
4.2	National Iodine Deficiency Disorder Control Programme (NIDDCP)	
4.3	National Mental Health Programme	
4.4	National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)	
4.5	National Programme for Control of Blindness (NPCB) & SUNETRA	
4.6	Bio Medical Waste Management	
4.7	Vital Statistics	
<b>5</b>	<b>Directorate of Family Welfare (DFW)</b>	<b>55-74</b>
5.1	Family planning	
5.2	Maternal Health	
5.3	Child Health	
5.4	Rashtriya Bal Swasthya Karyakram (RBSK)	
5.5	Rashtriya Kishor Swasthya Karyakram (RKSK)	
5.6	Immunization Programme	
5.7	Nutrition	
5.8	Sampurnna Scheme	
5.9	Equity & Advocacy	
5.10	Strengthening Implementation of PCPNDT Act	
<b>6</b>	<b>Directorate of Food Safety</b>	<b>75-78</b>
<b>7</b>	<b>Directorate of Medical Education &amp; Training (DMET)</b>	<b>79-81</b>
<b>8</b>	<b>State Institute of Health &amp; Family welfare (SIHFW)</b>	<b>82-88</b>
<b>9</b>	<b>Directorate of AYUSH</b>	<b>89-93</b>
<b>10</b>	<b>Directorate of Nursing</b>	<b>94-97</b>
<b>11</b>	<b>Odisha State Medical Corporation Limited</b>	<b>98-102</b>
<b>12</b>	<b>Directorate Of Drugs Control</b>	<b>103-105</b>
<b>13</b>	<b>Odisha State AIDS Control Society (OSACS)</b>	<b>106-108</b>
<b>14</b>	<b>Acharya Harihara Regional Cancer Centre (AHRCC), cuttack</b>	<b>109-110</b>
<b>15</b>	<b>Strengthening Blood Services</b>	<b>111-112</b>





**CHAPTER - 1**

**Activities of Health and Family Welfare Department**

## CHAPTER - 1

# Activities of Health and Family Welfare Department

### 1.1 Introduction

Health & Family Welfare Department, Government of Odisha is committed to provide in conformity with National Health Policy, Govt. of India, affordable, accessible, equitable and quality health care services to its people with special focus on underserved and hard to reach areas of the State. The department to achieve this objective has been endeavoring to improve and enhance infrastructure development of the health facilities across the State in addition to addressing Human Resource Management, procurement of equipment & instrument, free supply of essential drugs and other logistics in all the Govt. Health facilities of the State.

Budgetary allocation for the health sector has been augmented to fill up shortage of doctors and infrastructure to deal with dispensation in the health care service delivery in the State.

#### Objectives

- To ensure adequate, qualitative, preventive & curative health care to people of the State.
- To ensure health care services to all particularly to the disadvantaged groups like scheduled tribes, scheduled castes & back ward classes.
- To provide affordable quality healthcare to the people of the State, not only through the Allopathic systems of medicine but also through the Homeopathic & Ayurvedic systems.
- To ensure greater access to primary health care by bringing medical institutions as close to the people as possible or through mobile medical health units, particularly, in the underserved & backward districts.
- To improve health care in the KBK districts of the State
- To eliminate diseases like polio & leprosy from the state & prevent as well as control other communicable diseases
- To reduce maternal, infant & neo-natal mortality rates
- To guarantee to the people of Odisha free treatment( including free medicines) for certain major communicable diseases
- To improve hospital services at the primary, secondary & tertiary levels in terms of infrastructure, drugs & personnel
- To impart training to doctors, nurses & other paramedical staff to upgrade their skills & knowledge to improve quality health care in the state and improve medical education in the State.

- To ensure that all children under the age of 2 years and pregnant women are fully immunized against seven preventable diseases under Mission Indradhanush.
- To ensure vaccination of all children against rotavirus as part of Universal Immunization programme.

## 1.2 Health care Infrastructure in the State

**Table 1-Health Infrastructure in the State**

Health Facility	Numbers
Medical College and Hospitals	7
District Hospitals (in 30 districts + Capital Hospital, BBSR & R.G.H RKL)	32
Sub-Divisional Hospitals	32
Community Health Centres	374
Urban Community Health Centres	7
Other Hospitals	54
Infectious Disease Hospitals	5
Cancer Institute	1
Training Centres	5
Primary Health Centres (N)	1233
Urban Primary Health Centres	87
Sub-Centres	6688
A.N.M. Training Schools	21
G.N.M. Training School	8
M.P.H.W.(Male) Training School	3
Ayurvedic Hospitals (not attached to College)	2
Ayurvedic College & Hospitals	3
Ayurvedic Dispensaries	619
Homoeopathic College & Hospitals	4
Homoeopathic Dispensaries	561
Unani Dispensaries	9

(Source : SHRMU, 2018)

## 1.3 Resources and Budgetary Allocation for the Year 2019-20

For the financial year 2019-20 (BE) an amount of Rs. 678284.63 Lakh had been made in the Health & Family Welfare Budget as detailed below:



**Table 1-Resource and Budgetary allocation**

Sl No.	Budget Head	B.E (in lakhs)
1	Administrative Expenditure	239508.10
2	Programme Expenditure	438776.53
	<b>Total</b>	<b>678284.63</b>

(Source: Budget Document-Health &amp; Family Welfare Department)

**\* N.B: The above Budget includes two major initiatives of State Government, i.e.****Provisions for major schemes /Programmes during 2019-20**

1	Biju Swasthya Kalayan Yojana (BSKY)	<b>NIRAMAYA</b>	<b>35687.4</b>
		<b>NIDAN</b>	<b>10500</b>
		SUNETRA	3500
		SAMMPurNA	11266.71
		Emergency Medical Ambulance Service (EMAS)	10600
		<b>Odisha State Treatment Fund (OSTF)</b>	<b>25000</b>
		<b>Strengthening of Blood Services (including Grants to SBTC)</b>	<b>3500</b>
		Odisha comprehensive Cancer Care Plan	2000
		<b>Strengthening of Casualty Emergency &amp; Trauma Centre</b>	<b>5000</b>
		Swasthya Sanjog	2191.1
		<b>Swasthya Sahaya</b>	<b>6100.31</b>
		NAT PCR Facilities	1200
		Mental Health Programme	300
		Mobile Health Unit (PPP Mode)	448.5
		SHAS Establishment and other cost (Including Pvt Hospitals)	3000
	<b>Total</b>	<b>120294.02</b>	
2	Mukhya Mantri Swasthya Seva Mission(MMSSM)	Infrastructure Development of Health Institutions (Non Res)	49500.01
		Infrastructure Development of Health Institutions (Res)	7700
		<b>Redevelopment Programme of SCB MCH</b>	
		Public Health Response	500
		Health Investment Promotion Policy	100
3	Malaria Control Programme (DAMMaN)		999.97
4	De- addiction Centre		750
5	Bio Medical Waste Management		500
6	<b>Food Safety Programme</b>		<b>440</b>
7	Dedicated Power Supply		100
8	Diet		7751.38
9	Bedding, Clothing& Linen		615.75

10	Bio- Medical Waste Management Expenses		822.23
11	KHUSHI		3000
12	Digital Health		1647.46
13	Jeevan Uphar		50
14	Tele Medicine		315
15	Liver Transplant Unit		25
16	HMIS		100
17	IEC		100
18	Sanitation expenses		1322.94
19	Corpus Fund		1100
20	Sports, Medicine and Rehabilitation Centre		100
21	Sickle Cell & Thalasemia		0.01
22	Decretal Dues (Charged)		100
23	Emergency fund	H & FW Deptt.	75
		DHS	75
24	Equipment	Medical College & Hospital	553.51
		District Head quarter Hospital	3501.8
		Drugs Controller	0.01
25	Family Welfare Scheme		37200.74
26	NIRMAL		15000
27	Training	ICU personnel & Nursing	161.37
28		Medical & Paramedical staff	88.63
29	Ayush		72.82
30	Infrastructure maintenance (PH)		1259.98
31	Family Planning Indemnity Scheme		35
32	Skill Lab( Cuttack)		-
33	EAP( Externally Added Project)		-
34	Awards to Health Professionlas /institute		-
35	Odisha Cardiac Care Programme		-
36	Other Schemes		2536.2
	<b>Total State Sector Schemes</b>		<b>258493.83</b>
	<b>Centrally Sponsored Schemes</b>		
37	Rastriya Swasthya Suraksha Yojana (60:40)		3
38	National Ayush Mission(60.40)		2000
39	Human Resource in Health & Medical Edn. (60:40) (PMSSY)		40000
40	Drugs Regulatory System (60:40)		1
41	National Health Mission (60:40)		
42	National Rural Health Mission (60:40)		133528.16

43	National Urban Health Mission (60:40)	2990
44	Tertiary Care Programme(60:40)	1
45	NMEP &NFCEP-CSP &SS of CSP (50:50)	182
	<b>Total Centrally Sponsored Schemes</b>	<b>178705.16</b>
	<b>Central Sector Schemes</b>	
46	T.B. Control Programme (Material & Equipment )	0.01
47	AYUSH (Edn. Salary) & Medicine	63.16
48	Equipment for Hom. Edn.	14.25
49	National Goiter Control Programme ( Other Contingency)	0.01
50	Materials & Equipment for Malaria eradication programme(NMEP)	0.01
51	Purchase of contraceptives, Equipments & Medicine	1500
	<b>Total Central Sector Schemes</b>	<b>1577.44</b>
	<b>GRAND TOTAL (PE)</b>	<b>438776.43</b>

## 1.4 Major Activities undertaken during 2019-20

### System Strengthening

- Equipment procurement guidelines issued.
- Drug management policy notified
- Full functioning of OSMC and free drug distribution and NiRAMAYA.
- Free services provided to patients under BSKY :
  - Free Ambulance Services, Free Dialysis Service (Sahay), Free Diagnostic Services ('Nidaan'), Free Drug Services (Niramaya), Free Blood Services, Free Cancer Care and Chemotherapy Services
- Strengthening of Ancillary Services at Public Health Facilities (Nirmal)
- Contingency increased + untied funds guidelines made for DHHs, CHC and PHCs under state and central budget.
- Comprehensive equipment maintenance programme .
- Operationalization of 1012 PHCs as Health and Wellness Centre.
- Specialist Services in Urban PHCs/CHCs (Ama Clinic)
- **Mukhya Mantri Swasthya Seva Mission:** It is a basket of schemes which includes, Infrastructure development of Public Health Institutions (Non Residential and residential), Public Health Response fund to address public health emergency, Odisha State Treatment Fund to provide financial assistance for critical health care and Health Investment Promotion Policy.

### Service delivery

- **Implementing MO Sarkar across all 32 DHH:** Under this new initiative, Hon'ble Chief Minister, Ministers and Health Officials are making calls to common citizens to seek their feedback on the kind of response and service they received when they visited the government Health facilities. 92 % of patients expressed their satisfaction.
- Implementing OeHMIS at DHH level.
- Help desks made functional at all FRUs for providing better information and services to the patients.
- Diet menu prepared for health institutions

- **Niramaya: Free drug distribution scheme :**
  - ◆ The procurement & distribution activities of. of EDL items (Essential Drug List) & programme items comprising of. of general items, surgical items, anti-cancer items, programme items and other items from Non Essential Drug List as per the recommendation of State Drug Management Committee.
  - ◆ **532 computerised Drug Distribution Centres (DDCs)** have been established across the facilities up to CHC level
  - ◆ In addition to 39 District Drug Warehouses, efforts are on to operationalise block level Drug warehouses for distribution up to PHC level
  - ◆ 49 numbers of dedicated GPS enabled transport vehicles are engaged for doorstep delivery of drugs up to PHC level.
  - ◆ Total value of procurement done towards EIFs - Rs. 120 Crs. (Approx.)
- **104 call Center :** toll- free call centre providing information and counselling, Follow up of sample beneficiaries registered under RCH for verifying service provisions.
- **Ensuring free referral transport services** Presently 512 ambulances are operational and so far more than 26 lakhs patients have been benefited from the service. Total 4,87,592 patients have availed the EMAS Ambulance Services during the year 2019-20 (up to 20th February 2020). Average response time of EMAS ambulances is 38 Minutes.
- **Integrated Lab:** Public health labs set up in all districts. CHC integrated labs set up.
- JSY- e- transfers implemented at all levels.
- **DHH, CHC and PHC grading:** based on HMIS data set, district are being graded in a performance index and shared with districts for corrective action..
- **NUHM activities rolled out:** 90 Health institutions of 36 cities are notified as Urban PHC and 7 Health institutions of 3 cities are declared as Urban CHC.
- **Ama Clinic** "launched, under which 8 services (Paediatric, O&G, Nutrition, Adolescent, Vision, Physiotherapy , Psychiatric , Geriatric ) provided at Urban PHC/CHC level.
- **Nidaan Launched:** Free Diagnostic Services at identified Public Health Facilities both through own system and PPP mode implemented.
- **Sahay Scheme:** Free dialysis services will be provided to all patients at identified Public Health Facilities both through own system and PPP mode.
- **Digital Dispensary:** Digital Dispensaries made functional through PPP mode at 4 remote areas of mining affected GPs of Joda Block in Keonjhar district and in 25 remote areas of Nabarangpur district. Under this virtual OPD and consultation with the doctors through video conferencing, basic lab tests and drugs are provided on free of cost to the patients.
- **Sunetra:** aims at providing comprehensive, accessible, affordable and equitable eye care to people of all age groups. Vision centres equipped with appropriate eye-care facilities and trained manpower will be established across the State in govt. facilities.
- **Khushi:** Scheme for providing free sanitary napkins to school girls from Class 6 to 12 in all the government and government-aided schools in the state

## Legislation

- Five Recruitment Rules passed/amended for Staff Nurse, MPH[M/F], Radiographer & Lab Technician, Clinical Establishment Act modified and implemented, VIMSAR Act, Transplantation of Human Organs Act passed

### Preventive

- Disease outbreak management for Jaundice, Dengue, Swine flu, Malaria (Tata trust, Daman, GFTAM)
- SOPs made for line deptts + for collectors for disease outbreak management
- Strengthened review (fixed day monthly meeting)
- IDSP review by collectors

### Tertiary care

- 7 new Government Medical College started with two new at Koraput and Baripada made functional from 2017-18 and Bolangir & Balasore Medical Colleges made operational from 2018-19.
- SishuBhawan construction / up-gradation has started
- AHRCC made a Centre of Excellence for Cancer Care in the eastern region and made a teaching institution with launching of PG courses.

### New schemes from state plan

- **IMR, MMR reduction strategy:** For accelerated reduction of IMR and MMR in the State, a state specific scheme - 'SAMMPurNA' has been implemented in the State since 2015-16. Major interventions include identification, referral and treatment /management of high risk pregnant women and children, provisioning of mother and baby kit, reimbursement of transport cost @ INR 1,000/- for institutional delivery of Pregnant women in notified difficult villages, provision of stretchers for transportation of patients from difficult villages, enhanced daily allowance to mother of children admitted at NRCs from INR 50/- to INR 100/- per day to incentivize the mother, organization of integrated VHND and Immunisation sessions at under-served and hard to reach areas, establishment of High Dependency Units (HDU) for management of critical obstetric cases, establishment of Paediatric Intensive Care Units (PICUs) for management of critical paediatrics cases at District Headquarter Hospitals.
- **Blood services Comprehensive multiyear action plan in place:** Government has prepared a detailed road map along with budgetary allocation to strengthen **Blood Bank services** in the State and to provide safe Blood to the patients. **The major features include :**
  - ◆ Govt. approval on set up of 4 Regional Blood Transfusion Centers (RBTC) at 3 Govt. MCHs and Capital Hospital
  - ◆ 9 Mobile Blood Collection Vans and 11 nos. of Blood Component Separation Units are being procured.
  - ◆ Nucleic Acid Amplification Polyomerase Chain Reaction (NATPCR) technology has been installed in three Govt. Medical College & Hospitals and Capital Hospital
  - ◆ Blood Banks have been linked with National Institute of Biologicals (NIB) for Haemovigilance Programme and to ensure quality in service.
  - ◆ Enhancement of refreshment cost of blood donors from Rs. 25/- to Rs. 50/- per donor and Rs. 10/- per donor for allocation of camp organizing cost.
  - ◆ 3 new day care centers have been announced at DHH Kandhmal, DHH Balasore and RGH Rourkela.
  - ◆ Transport assistance to Haemoglobinopathy patients requires blood transfusion @ Rs. 500/- per month/patient out of State budget have been ensured.
  - ◆ MOU has been signed between Government of Odisha and CSCR/CMC Vellore for implementation of a project called Control of Sickle Cell diseases and Thalassemia disorder in the State.
- **Bio medical waste management:** 1620 out of 1751 Govt Hospitals are under Authorization administration of SPCB. DHH Capital hospital got Pollution Control Excellence award in 2015 and CHC, Junagarh, Kalahandi got Pollution Control Appreciation Award for the Year 2016.

- **Mental health:** National Mental Health Programme is implemented in all 30 districts. Currently 30 DMHP (District Mental Health Programme) Units with six categories of staffs are established Free psychotropic drugs made available through 'Niramaya'.
- **Food safety programme:** Food Safety Appellate Tribunal has been established. State Food Testing Laboratory, Bhubaneswar is the approved statutory Laboratory by the FSSAI under Government of Odisha for testing & analysis of all types of food samples. One Mobile Food Testing Laboratory (MFTL) has been provided to the State by the FSSAI for ensuring spot quality testing & create awareness in different areas. 1230 number of samples have been tested in MFTL from 01.04.2018 to 31.12.2018 out of which 360 number of food samples have not conformed to standard & improvement notices have been issued to the FBOs
- **RNTCP Interventions Scaled Up :** Cartridge Based Nucleic Acid Amplification Test (CBNAAT) made operational at 38 facilities.
- **NVBDCP Interventions Scaled Up :**
  - Establishment of 67 Sentinel site laboratories for diagnosis
  - 1.13 crore LLINs have been distributed in 16 high malaria burden districts and the most vulnerable population of 4 high endemic districts.
  - For JE, For laboratory diagnosis of JE, nine sentinel site laboratories have been made functional. JE vaccination campaign implemented in the State.
  - For Dengue 38 sentinel sites are functioning across the state for dengue diagnosis
  - Diagnosis & treatment is provided free of cost
- Telemedicine + telemedicine strategy for state. Expansion to 30 districts
- Cancer screening and day care chemotherapy initiated in 28 districts
- Construction of NCD Complex at 5 District HQ Hospitals (Koraput, Malkangiri, Bolangir, Nuapada and Nabarangpur) recognized as best Practice in the country by Gol.
- ICUs have been established in 10 DHHs/Capital Hospital
- Integrated NCD clinics at 30 DHH and 62 CHC established
- Physiotherapy units have been established at 15 DHH & 39 CHC Level

### Strengthening Human Resources

- OMHS cadre was restructured with creation of 1330 number of new posts increasing the strength of cadre to 6719.
- Doctors are being posted through transparent computerized counseling process. Exit policy is also being implemented to allow doctors to be posted in Non-KBK & Non-TSP districts after completing a fixed tenure in KBK, KBK+ & TSP areas.
- A total of 1072 no. of doctors were in position in KBK districts as on 31st March'18
- **Placed Based Incentive:** The State Govt. has implemented place based incentive to Doctors who are serving in rural and remote areas with specific focus on KBK and KBK+ regions. The state Government is funding the entire expenditure of about Rs. 42.00 crore on this account out of its own resources.
- **Corpus Fund:** Rs.1 crore of corpus fund has been allotted to each KBK & KBK+ districts for human resources management.
- **Contractual doctors remuneration increased:** The State Govt. has increased the consolidated monthly remuneration of doctors engaged on contractual basis against the vacant posts of Asst. Surgeons/Specialists in different health institutions of the State. Hike of Rs. 15000 to Rs. 20000 over and above the existing remuneration.

- Remuneration of contractual faculties in Medical Colleges enhanced to 1.25 Lakhs for Professor, 1.00 Lakhs for Associate Professor and 0.50 lakhs for Assistant Professor.
- Incentives for Medical College faculties introduced. Rs.1.25 lakh for Professor, Rs.1.00 lakh for Associate Professor and Rs.50,000/ for Assistant Professor in KBK area & 30% of it in non-KBK area.
- Faculty in Clinical and Para-clinical subjects will avail Rs. 20000/- per month over and above the incentive.
- Incentive for faculty of VIMSAR, Burla in broad speciality has been allowed at the rate applicable to KBK area.
- Incentive for faculty in Super-speciality disciplines of VIMSAR has been approved Rs. 2.00 Lakhs for Professors, Rs. 1.5 Lakhs for Associate Professor & 1.00 Lakhs for Asst. Professor.

### Others

- **First Referral Unit:** 74 FRUs are providing C section services out of 94 FRUs.
- **Delivery points:** State has target of 1190 delivery points of which 530 institutions are functional .
- **Janani Surakya Yojana (JSY):** Total 68,15,420 number of beneficiaries benefitted under JSY (from 2005-06 till 2019-20- upto 3rd Quarter).
- **Janani Shisu Surakshya Karyakram(JSSK)** - 27,27,105 pregnant women and sick infants have availed free referral transport services through 102/108.
- **LaQshya :** Under this programme the LR & MOT will be standardized for providing quality care services. During the year 6 facilities (5 DHH and 1 CHC) had been certified under LaQshya at State and National level.
- **Maternity Waiting Homes (Maa Gruha):** So far 80 MWH are operational out of 106 targeted.
- **Nursing education strengthened:** Started computerized counseling for admissions into all ANM and GNM colleges, establishment of Skill Labs, Computer Labs, Library, Model ANMTC & GNMTC, Scholarship for ST & SC Students.
- 40 Special Newborn Care Units (Target: 45) and 45 New Born Stabilization Units are operational. 7 new SNCU are under process. For preventing mortality and brain damage immediately after birth, 580/1190 Newborn Care Corners are functional at Delivery Points.
- Routine immunization strengthened with introduction of IPV and Rotavirus and Mission Indradhanush, MR and JE campaign.
- **MHU:** 170 Mobile Health Units are operational under State budget to provide primary health care services at the community level in 18 districts.
- **RBSK:** 636 Mobile Health Teams formed for screening, treatment and referral of children identified with defects, deformity, development delay and diseases at schools and AWCs.
- **RKSK:** 230 AFHC (Adolescent Friendly Health Centers) clinics has been established to provide services for adolescent girls & Boys. Integrated counseling centers up to CHC DPs. 4 One Stop Crisis Centres on pilot basis (PuriDHH, SambalpurDHH, Capital hospital & MKCG Medical College) integrated with SHRADDHA clinic. Menstrual Hygiene Scheme (MHS) extended to 30 districts under NHM.
- National Urban Health Mission implemented in 36 cities to ensure availability of primary health care services through public health networks and provision of outreach health care services with focus on urban slums through ANMs, ASHAs, Mahila Arogya Samiti (MAS). Ama Clinic launched for providing specialist care in selected Urban facilities.

**Construction monitoring**

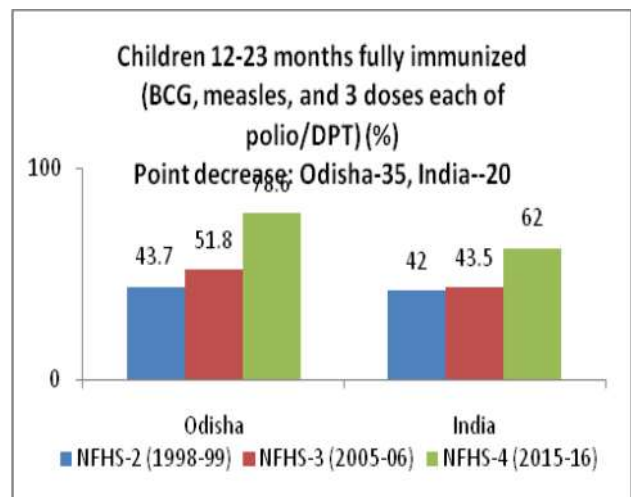
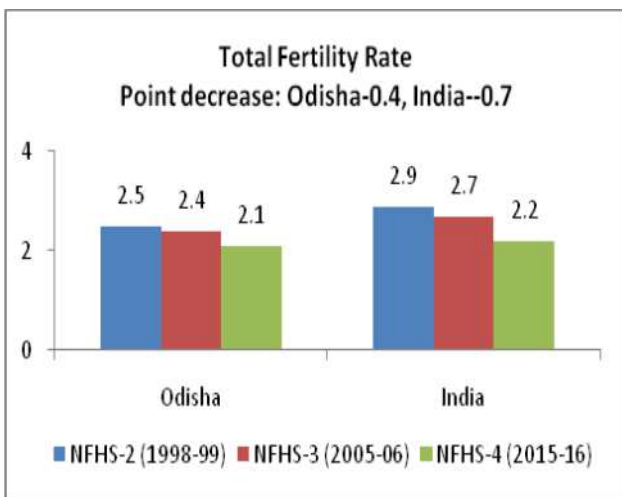
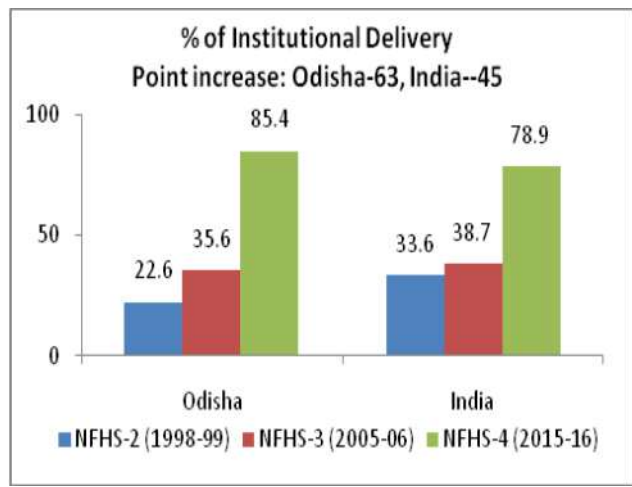
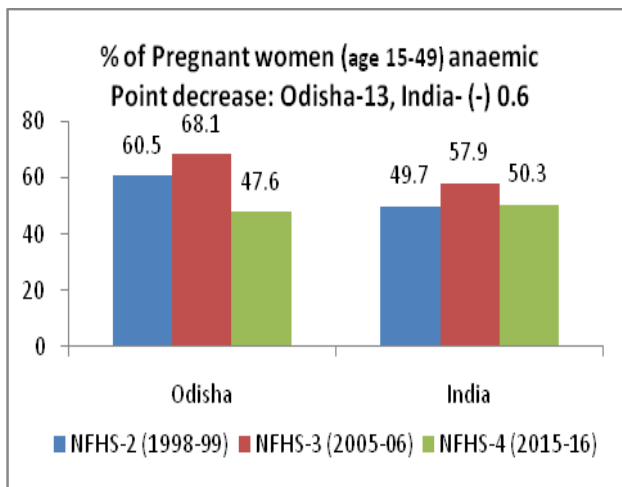
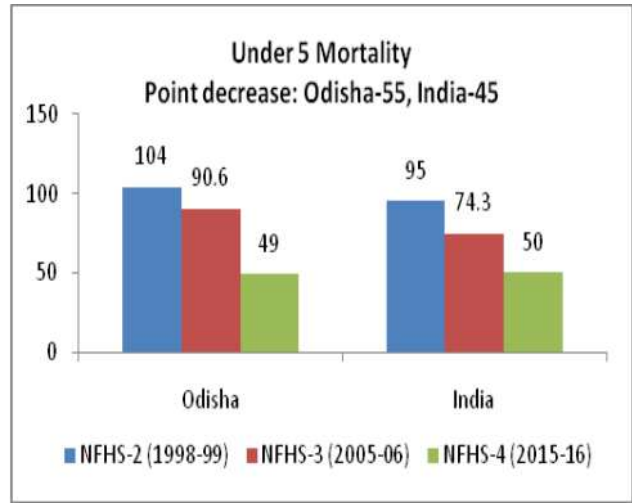
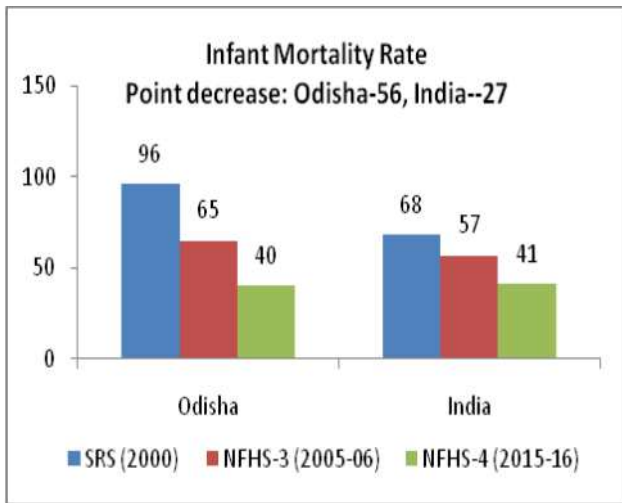
- Funds also been mobilised from State Plan under 'MO SARKAR' & Chief Minister's Swasthya Seva Mission for additional infrastructure development of all level of health institutions (Approximately Rs. 1000.00 crores + Rs. 578.00 crores in Chief Minister's Swasthya Seva Mission).
- 14 new DHH Buildings is being established at Jharsuguda, Dhenkanal, Malkangiri, Keonjhar (Ground floor), Rayagada, Baragarh, Nuapada, Deogarh, Jajpur, Bhadrakh, Kendrapada, Jeypur and Sonepur (Jharsuguda, Keonjhar (Ground floor), Rayagada, Malkangiri & Dhenkanal, Baragarh - Completed & Functional) and (Nuapada - Completed).
- Construction of 67 Maternal & Child Health Complex in District / Sub-district & Block Level of various bed strength; ranging from 125 bedded to 30 bedded is under progress (Completed & functional - 41, Progress - 9).
- Extension of Drug Ware House at DHH level - 31 Nos with a financial involvement Rs. 50.60 crore. (In progress - 3 Nos.)
- Construction of IPD & OPD complex at SDH/CHC, 80nos IPD/OPD complex has been under taken with an amount of Rs. 64.36 crore.
- 1527 sub centres buildings with a financial involvement of Rs. 463.85 crore has been constructed (752 completed & 602 under construction).
- 54 PHC N buildings with a financial involvement of Rs. 36.30 cr. constructed (14 completed & 40 under construction).

**Impact of Health Interventions in Odisha**

- Odisha has made quantum leap with 56 point decline by reducing IMR from 96 (SRS 2000) to 40 in 2015-16 (NFHS-4) which is highest point decline in the country far ahead of national average decline of 27 point.
- The Under 5 Mortality of State has also declined from 104 in 1998-99 to 49 per 1000 live births in 2015-16 (NFHS-4) which is better than all India point decline from 94.9 to 50 during the said period.
- Neonatal Mortality Rate (NMR) has been reduced from 53 (SRS 2005) to 32 (SRS 2017).
- Odisha recorded 135 points reduction in MMR from 303 (SRS 2006) to 168 (SRS 2017).
- State has already achieved the 12th Five year Plan goal w.r.t the Total Fertility Rate i.e 2.0, as per SRS 2015 & 1.9 in 2017, which is a great achievement towards population stabilization measure.
- Percentage of institutional delivery has substantially improved from 22.6 % coverage in 1998-99 (NFHS-2) to 85.4% in 2015 (NFHS-4) which is better than national average of 78.9%.
- The full immunization coverage among children aged 12-23 months children has increased substantially from 43.7% (NFHS-2) to 78.6% in 2015-16 (NFHS-4) in Odisha compared to National average of 62%.
- As per NFHS-4 (2015-16), Odisha recorded 20.5 point decrease in Pregnant women age 15-49 years who are anaemic (<11.0 g/dl) (%) from 68.1 % in 2005-06 to 47.6 % in 2015-16 and is better than all India average of 50.3%.
- There is a noticeable reduction achieved in morbidity and mortality due to Malaria.
- The success rate of TB control programme is also at desirable level (85%) as per Gol norm.
- Morbidity and mortality due to diarrhea has been remarkably reduced in past few years, due to effective preventive measures, in spite of regular natural disasters.
- No new polio case has been detected since last 5 years, due to effective immunization and surveillance activities.



Graphical comparison of NFHS data (1998-99 - 2015-16)



**CHAPTER - 2**

**National Health Mission**

## CHAPTER -2

# National Health Mission

### Introduction

The National Rural Health Mission has been in operation since June 2005 in Odisha and has been renamed as National Health Mission (NHM) after widening its service coverage to urban areas. Odisha, has shown a steady and sustained improvement in most of the key impact level indicators of health sector performance since the launch of NRHM in 2005. Odisha recorded highest IMR decline of 44 points in the country by reducing IMR from 75 in 2005 to 41 in 2017(SRS). Maternal mortality has also declined from 303 in 2006 (SRS) to 168 in 2017(SRS). The latest NFHS data shows wide improvement in all major process indicators such as ANC coverage, institutional delivery, immunization, nutritional status as against all India average. The state has shown reduction in deaths due to communicable diseases, particularly malaria as the overall TPR has come down to 0.6% in 2019 from 5.23, reported in 2017. Deaths due to malaria have come down from 24 in 2017 to 7 in 2019.

### Objective

The following are the major objectives of the National Health Mission:

- Reduction in child and maternal mortality,
- Universal access to public services for food and nutrition, sanitation and hygiene and universal access to public health care services with emphasis on services addressing women's and children's health and universal immunization,
- Prevention and control of communicable and non-communicable diseases, including locally endemic diseases,
- Access to integrated comprehensive primary health care,
- Population stabilization, gender and demographic balance,
- Revitalize local health traditions & mainstream AYUSH,
- Promotion of healthy life styles.

Major activities Undertaken:

### 2.1 Reproductive Health

Major Achievement

- 436 Health facilities are providing family planning services through FDS mode.
- Family Planning Commodity Security ensured through state specific Innovation RHCLMIS up to Sub Centre level.



- Non-clinical Contraceptives (Condom, Oral Pills & EC Pills) being provided to the Eligible Clients through 48,000 ASHAs at the community level.
- Scheme for ensuring spacing at birth: ASHA to provide counselling to newly married couples to ensure spacing of 2 years between marriage and 1st child and 3 years spacing after the 1st child for which ASHA will be provided with incentive depending on span of spacing.
- Pregnancy Testing Kits (PTK): For early detection of pregnancy and access to RCH services, it is a part of ASHA drug kit and provided to clients free of cost.
- Improved counselling through RMNCH+A counselors at District Headquarter Hospitals.
- Celebration of World Population Day and fortnight (July 11- July 24).
- Intensive IEC intervention' in selected districts undertaken
- Instituted 'awards & felicitation' for best performing surgeons & districts
- Observation of 'world vasectomy week'
- Tracking of providers & beneficiaries of IUCD services through EAISI web based application in 118 high case load sub district level facilities.

## 2.2 Maternal Health

- **First Referral Unit:** 74 FRUs are providing C section services out of 94 FRUs.
- **Delivery points:** State has target of 1190 delivery points of which 530 institutions are functional.
- **Janani Surakya Yojana (JSY):** Total 68,15,420 number of beneficiaries benefitted under JSY (from 2005-06 till 2019-20- upto 3rd Quarter).
- **Janani Shisu Surakshya Karyakram(JSSK)** - Free services which include free drug, blood, diagnosis, diet & referral services are provided to all pregnant women and sick newborn and infants (upto 1 year) through implementation of, Janani Shisu Surakshya Karyakrama at public health facilities. 27,27,105 pregnant women and sick infants have availed free referral transport services through 102/108.
- **Skilled Attendant at Birth (SAB)** training was given to the Paramedics and AYUSH doctors to augment the institutional delivery. These SAB trained staffs are posted in the identified delivery points in priority basis. During the year 2019-20 (Till-Dec 2019), 211 HW(F) & LHV and 176 Staff Nurses and 29 AYUSH doctors were trained in SAB.
- During 2019-20 (By Dec 19), 4 have been trained in LSAS & 165 doctors in Basic Emergency obstetrics care (BEmOC). Till date, in Life saving anesthesia skill (LSAS) 160 doctors have been trained, Emergency obstetrics care (EmOC) training has been given to 38 doctors, & Basic Emergency obstetrics care (BEmOC) training given 1261 nos. of Medical Officer for operationalization of L3, L2 & L1 institutions.
- Maternal death review (MDR) committees are formed at State and district level to review the maternal death
- **Safe abortion care services:** Out of 1078 targeted institutions, 338 facilities are in readiness for providing CAC service in the state.
- **Village Health & Nutrition Day:** Fixed day health & Nutrition day (VHND) is being organized every Tuesday / Friday at village Anganwadi centers. So far 429487 VHND sessions held out of 422889 planned (98%) during 2019-20 (Up to December-19).



- **Standardization of labour room.** State is taking steps for standardizing Labour room as per MNH tool kit and New labour room guidelines. Further under DAKSHATA programme 19 districts are given focused attention for improving infrastructure and practice in 222 labour rooms.
- **LaQshya :** Under this programme the LR & MOT will be standardized for providing quality care services. During the year 6 facilities (5 DHH and 1 CHC) had been certified under LaQshya at State and National level.
- **Maternity Waiting Homes (Maa Gruha)** The Maa Gruha are established near to delivery points to accommodate the expected delivery cases from difficult geographical pockets at least before 7-10 days of Expected Date of Delivery (EDD )for having safe institutional delivery. So far 80 MWH are operational out of 106 targeted.
- **Initiatives for Anaemia Control:** IFA & Calcium Supplementation - About 7 Lakhs Pregnant women covered during 2019-20. Inj. Iron sucrose & Blood transfusion services- made available at Institution level for pregnant women with severe anemia. One time de-worming of all pregnant woman ensured during pregnancy in second trimester.
- **PMSMA :** This programme focused on screening of antenatal cases by doctor preferably O&G specialist at least one during 2nd or 3rd trimester. This activity is implemented in 9th of every month on fixed day basis at the level of CHC and above facilities. The prime objective of the programme is to screen for high risk pregnancies and initiate its management as appropriate. During the year 2019-20 upto December 2019, 608092 nos. of antenatal cases have been screened and 30642 high risk pregnancies detected. These detected high risk cases are provided with Red Card as a symbol of high risk for priority treatment as per advice of doctor, which is further tracked by the service provider.

### 2.3 Child Health

Odisha has been working towards reducing its child mortality rates as a priority focus through various programmes & strategies. Major interventions undertaken through NHM are as follows:

- **New Born Care Corner (NBCC):** For preventing mortality and brain damage immediately after birth, 560 Newborn Care Corners are established at all functional delivery points. Up to Sept. 2019, 16547 newborns have been resuscitated (8% of all live births) and 11704 newborns (5% of all live births) have been referred to higher facility for further treatment.
- **New Born Stabilization Units (NBSU):** For treatment of moderately sick & low birth weight newborns and for stabilization of sick newborns prior to referral, 45 Newborn Stabilization Units are currently operational in the State. Up to Dec. 2019, out of 5486 Newborns admitted, 3328 (61%) have been treated at NBSU and 1692 (31%) have been referred to SNCU for appropriate treatment.
- **Special Newborn Care Units (SNCU):** The State has established 40 out of 45 Special Newborn Care Units (SNCU) for treatment of severely sick newborns at different medical college & hospitals, district headquarter hospitals, sub-divisional hospitals & selected CHCs based on the annual delivery load. Further, 5 new SNCUs are under process. Besides, the bed capacity of 12 existing SNCUs has been increased in view of the enhanced case load. During 2019-20 till Dec. '19, out of 49547 (99.7%) sick newborns have been treated and 74.6 % have been discharged successfully after due treatment.



SNCU MCH Koraput



SNCU DHH Bargarh

- **Kangaroo Mother Care (KMC) Units:** KMC units have been established in all 40 SNCUs adjoining the SNCU for providing Kangaroo Mother Care to low birth weight & sick newborns. About 24.3% of stable sick newborns admitted in SNCU have been provided KMC in 2019-20, till Dec. '19.



KMC Unit Capital Hospital BBSR

- **Home based new born care(HBNC):**All ASHAs have been trained for making home visits to newborns for early identification and referral of newborns with danger signs and providing counselling to caregivers on home based newborn care. During 2019-20, till Dec.'19, 4,01,185 newborns have been visited under HBNC programme, of which, 10% of newborns were reported as low birth weight (LBW) and 91% of identified high risk newborns were referred for appropriate treatment.

- **Intensified Diarrhoea Control Month (IDCM):**An intensified diarrhoea control fortnight is held every year from 2015 during the monsoons, where prophylactic ORS packet was distributed by ASHA to each household for prevention & control of diarrhoea in both adults & children. In the 2019 round, 66% under five children & 67% households were distributed with prophylactic ORS packets. Further, 99% under five diarrhoeal cases were treated with ORS and 92% adult diarrhoea cases were treated with ORS.



- **National Newborn Week (NNW):**A week of dedicated IEC activities was carried out during November 15th to 21st, 2019 for awareness generation on newborn care at home. 9264 newborns were visited by ASHA and 75238 mothers were counselled by the ASHA in group meetings.



- **India Newborn Action Plan (INAP):**

Under the India Newborn Action Plan (INAP), all newborns are to be administered with Vitamin K1 for preventing the newborn deaths occurring due to vitamin K deficiency bleeding disorders. During April to Dec. 2019, 81% of all live births in the State were administered with Vitamin K1.

Similarly, INAP also advocates administration of antenatal corticosteroids to all pregnant women identified with preterm labour, in order to prevent newborn deaths occurring due to respiratory distress syndrome. Till December 2019, mothers of 12% of all preterm newborns were administered with antenatal corticosteroids in the State.

- **Child Health Review (CDR):** Child death review has been implemented in the state during 2015-16 under which committees have been formed at State and District level for detailed review and analysis of each under five child death and taking necessary corrective actions.
- **Trainings and capacity buildings:** In view of effective and efficient services the trainings are being provided to concerned personnel at various levels such as :
  - **Skill Based training:** Facility based IMNCI training & Facility Based Newborn Care (FBNC) training for Staff Nurses and Medical Officers.
  - **Knowledge based training**
    - Knowledge based CME through VC and telemedicine hub is organized from time to time.
    - Orientation of AYUSH MOs on Community Based CDR for conducting verbal autopsy completed at State level.
    - Orientation of IMA & IAP members on their roles & scope of involvement during IDCM campaign

## 2.4 Rashtriya Bal Swasthya Karyakram (RBSK):

Rashtriya Bal Swasthya Karyakram (RBSK) is a National Flagship Programme under NHM rolled out in Odisha since March-2014 which aims to cover 1.07 crores of children from Birth till 18 years under its domain. The Programme targets at identification and treatment of 38 health conditions to be addressed through '4D' approach which includes Defect at Birth, Deficiencies, Childhood Disease and Developmental Delay & Disabilities.

### Screening of 0-18 Years children at AWC, School & +2 Junior Colleges:

- 630 number of Dedicated Mobile Health Teams are being engaged to screen 0-18 years children which consists of 4 member: 1 AYUSH MO Male, 1 AYUSH MO Female, 1 SN/ANM, 1 Pharmacist
- The team visit at least once in a year to Non-Residential Schools, Twice to AWCs & quarterly to the Residential Schools.
- Under RBSK, New Born hearing screening of all new born at District Hospital & SNCU discharge babies are initiated at DEIC.

### Early Intervention Services through District Early Intervention Centers (DEIC):

- District Early Intervention Centres (DEIC) s are functional at 29 DHH for children seeking special care (secondary & tertiary care). A team of professionals from different specialities (MO MBBS, Paed. Specialist, MO Dental, Physiotherapist, Audiologist, Optometrist, Psychologist, Special Educator, Dental technician, etc are engaged for providing special treatment and therapeutic services.

### Year wise status of screening and treatment

Year	Total Children screened	No. of Children treated
2014-15	48,97,389	4,11,784
2015-16	7985841	4,97,063
2016-17	10245369	4,90,964
2017-18	99,96,173	4,65,268
2018-19	1,01,84,658	4,07,540
2019-20	76,48,603	2,48,520

### Year wise status of major treatment:

- Under 4D approach during 2014- 2019, total 25,21,139 number of identified children have been treated under RBSK at Primary, Secondary and tertiary facilities.

Major Health Condition	Cumulative Achievement	Achievement during 2019-20	Major Treating Institutions/Partners
Neural Tube Defect	104	22	SCB MCH, SVPPGIP & AIIMS, Bhubaneswar
Down Syndrome	1456	981	District Early Intervention Center
Cleft Lip & Palate	3422	681	Six Smile train empanelled hospitals
Congenital Cataract	1511	260	LVPEI, Bhubaneswar
Retinopathy of Pre-maturity (RoP)	274	34	LVPEI, Bhubaneswar
Club Foot	1661	380	Cure International Trust
Hearing Impairment	6898	1578	Ali Yavar Jung National Institute for Hearing Handicapped, Janala & AIIMS, Bhubaneswar

Major Health Condition	Cumulative Achievement	Achievement during 209-20	Major Treating Institutions/Partners
Congenital Heart Disease (CHD) surgery	1793	781	Sri Sathya Sai Heart Hospital, Ahmadabad, Narayana Hrudayalaya Hospitals and Hospital Empanelled under OSTF
Other Surgeries	1573	311	SCB MCH, VSS MCH, MKCG MCH, SVPPGIP & AIIMS, Bhubaneswar
Severe Acute Malnutrition (SAM)	10063	1812	Treated at NRC
Cochlear Implantation	18	12	At AIIMS, BBSR
Developmental Delay	1,15,004	34624	District Early Intervention Center
Adolescent Health Issues	1,50,406	26042	District Early Intervention Center / SRADDHA Clinics

## 2.5 Rashtriya Kishor Swasthya Karyakram (RKSK)

Adolescents are young people in the age group of 10-19 years. As per Census 2011, adolescents comprise nearly one-fifth (20.9%) of India's total population. In Odisha adolescents constitutes 82.74 lakhs (20%) of total population. Thus, to address different health needs of adolescents, RKSK programme was launched in January 2014 at New Delhi.

The program approaches are as follows:

- **Adolescent Friendly Health Clinic:**

- In Odisha known as Shraddha clinic. 252 Shraddha clinics are Operational covering all 30 districts in DH, SDH and some designated CHC level.
- Total 44,866 adolescents received different adolescent health services through Shraddha clinic till up to 2nd Qtr of 2019.

- **Peer Education:**

- The PE programme aims to ensure that adolescents or young people between the ages of 10-19, years benefit from regular and sustained peer education covering nutrition, sexual and reproductive health, conditions for NCDs, substance misuse, injuries and violence (including GBV) and mental health .
- The program implemented in four districts (Dhenkanal ,Bolangir, Bhadrak & Koraput) and has been rolled out covering 5901 villages in 43 blocks. Bhadrak and Koraput added newly in 2019-20.
- Total 28620 Peer Educators targeted to select in all four districts and out of which 22820 Peer educators selected through Gaon Kalyan Samity with active involvement of key stakeholders.
- In Dhenkanal and Balangir 420 batches of 6 days Peer Educator training completed in 2018-19 & 19-20

- **Adolescent Health Day(AHD) :** Currently the program implemented in 4 districts as a pilot (Dhenkanal, Bolangir , Bhadrak & Koraput) . In ach village quarterly AHDs are organized to sensitize adolescents, parents and other stakeholders on adolescent health issues. 5070 AHDs conducted in Dhenkanal and Balangir up to 2nd Qtr.

- **Menstrual Hygiene Scheme (MHS):** To increase awareness among adolescent girls on menstrual hygiene, build self-esteem,





and empower girls for greater socialization and access to use of good quality sanitary napkins by adolescent girls in rural areas the menstrual hygiene scheme implemented in all 30 districts. The channel of interventions is mainly through social marketing of sanitary napkins by ASHA. Adolescent girls can purchase sanitary napkin (Rs.6/-pkt) from ASHA. In Odisha the sanitary napkin packet branded as "Khushi". Total sanitary napkin packet sold: 60, 50,503 pkt up to 1st qtr of 2019-20 and more than 18 lakh girls reached through the programme.

- **The Weekly Iron and Folic Acid Supplementation (WIFS)** : The IFA distributed at schools and AWCs on weekly basis. 35728 schools and 71306 AWCs targeted under the program and the consumption as per reported coverage is 31% up to 2nd qtr of 2019-20.

## ● Other Initiatives under NHM

### 2.6 Human Resource

1235 AYUSH doctors in collocation unit (Out of 1485), 2367 Staff Nurses (out of 3440), 1923 Addl. ANMs (Out of 2060), 251 Lab Technicians (Out of 392) and 503 Pharmacist (out of 636) are engaged under NHM to ensure quality of health care services at public health institutions.

### 2.7 Free Transportation Services

#### Emergency Medical Ambulance Service (EMAS)

EMAS Ambulance Service is operational in the State since 5th March 2013, to provide quality emergency care transport within the shortest possible time in an emergency free of cost from the doorstep of the patient to the appropriate care in a hospital. Presently 512 ambulances are operational and so far more than 26 lakhs patients have been benefited from the service.

- Average response time of EMAS ambulances is 38 Minutes.
- Total 4,87,592 patients have availed the EMAS Ambulance Services during the year 2019-20 (up to 20th February 2020)

#### Referral Transport Ambulance Service (Janani Express)

Referral Transport Ambulance Service (Janani Express) is operational in the State since 14th July 2014, providing free referral transport service to all pregnant women and sick infants seeking health care services at Government health facilities. Presently under this scheme, 493 out of 500 ambulances are operational and more than 25 lakhs beneficiaries have been benefited so far.

- Average response time of 102 ambulances is 37 Minutes.
- Total 3,74,264 cases have availed 102 Ambulance Services during the year 2018-19 (up to 4th February 2020)



### 104 Health Helpline

- Initially 104 Health Helpline with 10 seats was launched on 13th October 2015, for making outgoing calls for follow-up sample beneficiaries registered under RCH for availing desired services in time and to verify the services provided by service providers (ANM and ASHA) with special calls to high risk pregnant women on monthly basis and to those defaulters of services as per need. As per the mandate 104 Health Helpline has to contact 200 beneficiaries per day and 41,570 beneficiaries have been contacted during the year 2019-20 (up to 31st January 2010).
- Periodical calls are made for survey related to various indicators of services under JSSK.

- To assess level of satisfaction on the treatment & services available in the public health institutions outgoing calls are being made randomly to the patients/relations with effect from 23rd July 2019 and so far 20,625 people have been covered in the survey, with a satisfaction level of 90%.
- Subsequently the incoming call facility was introduced with effect from 15th November 2019, providing information, advice and counselling to the needy people in the areas of RMNCHA+ & related schemes implemented in the State, provide health advice, information on various facilities in their area like hospitals, Blood Bank, Pharmacies, Diagnostic services etc., besides registration of Grievances pertaining to payment related to various schemes under National Health Mission for their redressal in time, counselling services on Family Planning, HIV/AIDs, Adolescent Health and advice on First aid; Nutrition and hygiene; maternal & child health care services, besides. Till now this service has been availed by 6,225 people.



#### **Boat Ambulance Service:**

- To provide transportation to sick and injured in riverine areas in the districts of Kendrapara, Kalahandi, Koraput and Malkangiri, Govt. has sanctioned 6 (six) Boat Ambulances out of State fund, as feeder service to both Emergency Medical Ambulance Service and Referral Transport Services.
- So far only one Boat Ambulance has been operationalized in Kendrapara district since 26th February 2019.
- Another 2 Boat Ambulances have already reached their area of deployment in Malkangiri and Kalahandi districts are likely to be made operational soon.

#### **Integrated Patient Transport & Health Helpline Services:**

On expiry of the previous project period, both Emergency Medical Ambulance Service (108) and 24X7 Referral Transport Services (102) have been integrated and operational under Integrated Patient Transport & Health Helpline Services (IPTHHS) with effect from 10th November 2018, accessible with a single toll free number "108" and Health Helpline with single toll free number "104"

#### **Plan**

- Up-gradation of 28 BLS ambulances to ALS out of the existing fleet for the 15 identified districts covered in 2nd phase of Emergency Medical Ambulance Service.
- Govt. has sanctioned another 84 BLS Ambulances out of State fund, on the basis of cancelled calls and number of minimum cases each ambulance to attend,. Procurement process is likely to commence in April 2020
- Early Childhood Development programme is to be implemented by utilizing 8 Seats (for 6 ANM/Nurse/Counsellors and 2 for Medical Consultants) of 104 Health Helpline. The programme is likely to be rolled out in March 2010.

## **2.8 Community Process (ASHA)**

A. ASHAs function at grassroots level to act a bridge between the community and public health system and have established them as the first port of call for all health related and allied activities at the community level. They play an importance role in mobilizing community for adopting right health practices, maximally utilize health services and contribute thereby for achievement of health indicators. It is their facilitation support, commitment and dedication which have helped the health system to achieve the desired results. Selected from among the community, ASHAs are placed in the village to facilitate and promote health care delivery at community level both at rural and urban area. Being trained and incentivized as formal community health worker, they are playing the pivotal role in mobilizing the

community around health issues, supporting the health system for achievement of health deliverables and improvement in health indicators.

- **Positioning** : At present a total of 46,724 ASHAs are in place against the target of 47,147 in the state in both rural and urban area. The selection of ASHA is co-terminus with AWC in high-priority districts.
- **Incentive provisions:** ASHAs are paid performance based incentive against the performed activities and the scope of incentive provision has been increased to 52 activities which includes RMNCAH+N, DCP and NCD activities. As an effort to maximize and ensure a minimum assured amount, provision has been made for payment of minimum assured amount of Rs. 3500/- per month to each ASHA against 13 assured and routine activities which includes additional amount of Rs.1000/- per ASHA per month from State budget beyond the NHM PIP provision.
- **Compensation for death and permanent disability:** Provision has been made for payment of financial compensation upto Rs. 1 lakh in case death and permanent disability of a serving ASHA under ASHA Kalyan Yojana. During 2018-19, compensation towards death of ASHA @ Rs.1 lakh has been paid for 63 cases and during 2019-20 (By December, 2019) payment has been made to 57 such death cases. No permanent disability cases reported till date.
- **Benefits under Exit Policy** - ASHA who completes 62 years of age or resigns after 10 years of service as ASHA is given a lump sum of Rs. 20,000/- as a part of her exit from the health system. 21 ASHAs during 2018-19 and 11 ASHAs by end of December, 2019 have been benefited under exit policy. .
- **Maternity Benefit for ASHA:** In order to have a proper care during delivery and child birth of ASHA, provision has been made to give an amount of Rs. 1000/- per month, for a period of six months (total Rs.6000/-) i.e. from the 3rd trimester of pregnancy to her child attaining 3 months of age. As a part of initiative of ASHA Kalyan Jojana a total of 58 ASHAs have been benefited under maternity benefit by end of December, 2019.
- **ASHA Gruha:** 142 ASHA Gruhas functioning in major health institutions as a help desk for ASHAs and to provide stay at institutions while they accompany pregnant women for delivery (Target-145).
- **Support provisions for ASHA:** As part of support provision all ASHAs have been provided with Uniform (in form of saree), CUG SIM Card, Diary, Identity card and Drug Kit etc.
- **Education empowerment programme:** In order to improve the education standard and literacy level of ASHAs having low education and literacy, education empowerment programme is being implemented in collaboration with State Institute of Open Schooling (SIOS). During 2018-19, 2086 ASHAs have been enrolled under education empowerment programme.



- **Certification Programme for ASHA:** In order to provide a legal and administrative framework within which the ASHAs will be eligible for providing community level cares for a range of illnesses, ASHA certification programme is being implemented in 6 districts like Boudh, Cuttack, Bolangir, Kalahandi, Sonepur & Sundargarh in collaboration with National Institute of Open Schooling (NIOS). A total of 690 ASHAs have been accredited by NIOS during 2018-19 and 1022 ASHAs have appeared for the final examination to be accredited by NIOS during 2019-20.
- **Competency enhancement and skill development course under IGNOU:** In order to extend an opportunity to ASHAs to enhance their professional proficiency and acquire higher qualification, ASHA have been enrolled in 'Competency Enhancement and Skill Development Course' under IGNOU. During 2019-20, a total of 6849 ASHAs have been enrolled under the course.
- **Award:** ASHAs for their outstanding performance at community level are awarded at different levels like sector, block, district and state. During 2018-19, 1042 ASHAs have been awarded at block and district level for their best performance.
- **Enrollment of ASHA under PM-SYM:** With an objective to enable ASHAs to avail the benefit of pension @ Rs. 3000/- per month after 60 years of age, steps has been taken to enroll all eligible ASHAs (within 40 years of age) under pension scheme i.e. Pradhan Mantri Shram Yogi Maandhan (PM-SYM). By December, 2019 a total of 14515 ASHAs have been enrolled under the scheme.
- **Enrollment of ASHA under PMJJBY & PMSBY:** As part of social security benefit for ASHAs, steps has been taken to enroll all eligible ASHAs under social security schemes like Pradhan Mantri Jiban Jyoti Bima Yojana (PMJJBY) and Pradhan Mantri Surakhya Bima Yojana (PMSBY) to avail the benefit of insurance coverage upto two lakhs for death and disability. However, 19924 and 23827 ASHAs have been enrolled under PMJJBY and PMSBY respectively by December 2019.

## 2.9 Gaon Kalyan Samiti (GKS)

Village Health Sanitation and Nutrition Committee (VHSNC) is known as Gaon Kalyan Samiti (GKS) in the State of Odisha constituted as a part of National Health Mission (NHM) initiative. It is a revenue village level institution, constituted to facilitate activities related to health and its social determinants i.e. water, sanitation, nutrition with the participation and active involvement of the community. At present near about 46000 GKS are functional in the State.

### Annual untied fund to GKS:

Annual untied fund of Rs.10000/- is being placed to GKS in order to undertake various need based activities for addressing issues related to health and other social determinants of health. Each GKS prepares need based Village Health Plan in a consultative manner at the community level incorporating the local issues and concerns of the villages and hamlets which is the basis of untied fund expenditure. The GKS untied expenditure is 103.09% for year 2018-19.

### Exemplary activities

#### Village Health Information Centre:

Village health information centre has been set up with special effort of GKS & GP to promote healthy behavior of the community through learning on various schemes and programme related to health by the community.

#### Organizing Blood donation Camp:

Blood donation camps are being organized in order to meet the blood requirement during emergency. Near about 5000 units of blood are collected with the effort of GKS & GP in various parts of Odisha.

#### Promoting better Health & Hygiene:

Most of the GKS undertaken various need based activities in the village like setting up Dustbins, organize sensitization meeting to



boycott use of Plastic & Polythine bags in various parts of Odisha. Most of the GKS are also monitoring house to house to maintain household cleanliness and promote to use house hold toilet. Near about 30000 GKS actively involved in 11 monthly VISHWAS campaign for promoting Health, sanitation & nutritional standard of the community in the village.

#### **Integration of GKS activities with PR system:**

activities of GKS has been integrated in the Panchayati Raj System. GP Sarpanch has provided designated hall to organize GKS monthly meeting and fund also mobilized to GKS to undertake various need based activities at the community level. To develop better inter-sectoral convergence with PR system, quarterly GP level meeting is being organized at the GP level under the Chairpersonship of GP Sarpanch. Near about 5000 GP Swasthya Kantha is developed through the GP fund by effort of GKS members.

#### **Addressing health issues of the elderly:**

Health camps for older persond have been organized for screening of diabetes, TB, Eye, hypertension and other diseases in various parts of parts of Cuttack, Puri, Kandhamal etc. and also provided medicine with free of cost to the patients after completion of screening.



#### **Management of Stretcher:**

Near about 2500 GKS managed Stretcher in identified hard to reach difficult villages to promote and facilitate institutional delivery by carrying pregnant women to the Motorable point through stretcher. For wide publicity, wall painting on the stretcher provision has been made in the identified villages.

#### **Post FANI preventive Health Care Measures:**

GKS in Puri District has undertaken various need based activities i.e. mass cleanliness drive, regular meeting, disinfection of open drinking water source, to prevent open defecation etc. and also referred emergency patient to the nearby health institution for treatment aftermath of super cyclone FANI during May and June, 2019.

#### **Promoting knowledgeable community:**

In order to enhance the level of awareness on health issues GKS has organized mass awareness & sensitization meeting at the community level on various themes. This has directly or indirectly contributed towards increase in institutional delivery, reduces disease burden, improve in coverage of immunization, reduction of IMR & MMR, tackle malaria through LLIN distribution under DAMAN programme, control of Dengue, Diarrhoea through undertaking mass cleanliness drive, encourage for safe drinking water and also promote to use of household toilet etc.



#### **Gaon Swasthya Samikhya (GSS):**

Gaon Swasthya Samikhya (GSS) Programme is being implemented in 56 blocks of 15 districts under NHM support and out of State budget. Total 1138 GPs & 8807 GKS are being covered under GSS activity implementation. Swasthya Suchana Patrika (SSP) is being prepared as GKS & GP level by the BNV/ Selected Volunteers on a quarterly basis for addressing issues related to health & other social determinants of health at the community level. Jan Sunwai/Jan Sambad is also being organized with integartion of line departments in a converegence manner at the blcok level, so as to address the local specific issues. As part of GSS programme, a new programme "PRACHESTA" is being implemented at GKS level in 15 slected head quarter sub- centre under selected PHC-HWCs in 15 selected blocks to enhance the awareness of the community on functioing of HWC & availability of services.

## 2.10 NGO Collaboration Projects

Presently 35 PHC(N) management projects are operational in 16 districts. These PHC(N)s have shown remarkable improvement in major indicators like OPD, IPD, Institutional delivery and Laboratory test since they have taken over for management. Out of such 33 PHC (N)s, 6 PHC(N)s are Functional Delivery Points and 22 PHC(N)s are Promising Delivery Points.

### Achievement:

- Avg. 41 nos. per day per institution General OPD in the State.
- Avg. 17 nos. per day per institution Ayush OPD in the State.
- Avg. 36 nos. per month per institution IPD in the State.
- Avg. 1 nos. per month per institution Institutional Delivery in the State.
- Avg. 18 nos. per day per institution Lab test in the State.
- RKS: Functional in all PHC(N)s.



Sl No	Name of the NGO Projects	Nos. of operational projects	Nos. operational Districts	Annual project cost
1	PHC(N) Management	35 (Target-40)	16	Rs. 21.72 lakhs
2	Maternity Waiting Home (Maa Gruha)	78 (Target-106)	18	Rs. 12.97 lakhs
3	Arogya Plus (out of State budget)	22 (Target-22)	9	Rs. 18.10 lakhs

### Arogya Plus (MHU):

Arogya Plus is a strategically intervention for delivery of public health services at the door step of the marginalized sections of the society residing inaccessible and difficult areas through NGO partnership. Total 170 MHU & Arogya plus are operational in 18 districts and is being implemented out of the State budget. The project is being operationalised out of the State budget. The project is covering selective 3/5 GPs in a block having inaccessible and difficult to reach areas.

### Achievements:

- Total 7173 tagged villages have been covered during the period April' 19 to Jan'20.
- 3865 positive malaria cases diagnosed positive & given treatment.
- 6144 cataract cases identified and referred.
- 4542 no. of cases mobilized for male & female Sterilization (in no.)
- 4277 nos. of CC & OP distributed (nos. of cycles)
- 3809 nos. of cases facilitated for registration at HWF within 3 months of pregnancy.
- 958 immunization session organized
- 1152 nos. of delivery cases transported through vehicle to nearby institutions
- 38842 Health education sessions conducted in villages & schools.
- 225069 nos. of ORS distributed.



## 2.11 Mainstreaming of AYUSH

Activities under taken during the Year 2019-20

- Quality education is provided in 03 Govt. Ayurvedic medical colleges and 04 Govt. Homoeopathic medical colleges of the State

- Health care services are provided through 05 Govt. Ayurveda hospitals, 04 Homoeopathy hospitals, 620 Ayurvedic dispensaries, 562 Homoeopathic dispensaries and 09 Unani dispensaries in the Stat.
- At present, 02 Ayurvedic & 01 Homoeopathic Pharmacies are functioning for manufacture & supply of Ayurvedic and Homoeopathic medicines to Govt. Hospitals & Dispensaries of the State.
- Medicinal plants garden has been established at Harisankar of Bolangir district and Sirsa of Mayurbhanj district.
- Orientation training programme of 420 nos. of AMOs/HMOs/UMOs in under progress at SIHFW, Govt. of Odisha, Bhubaneswar.
- During this year construction of integrated 50 bedded AYUSH Hospital at Dhenkanal will be completed and construction of integrated 50 bedded AYUSH Hospital at Berhampur will be started.

**OPD Achievement:** During 2019-20 (till January) 5506326 patients were treated through co-located Ayush facilities.

## 2.12 Infrastructure development

- 7 new Medical College & Hospitals is being constructed at Bolangir, Koraput, Balasore, Puri, kalahandi, keonjhar & Mayurbhanja (Koraput, Balasore, Bolangir & Baripada - Completed & functional).
- 14 new DHH Buildings is being established at Jharsuguda, Dhenkanal, Malkangiri, Keonjhar (Ground floor), Rayagada, Baragarh, Nuapada, Deogarh, Jajpur, Bhadrakh, Kendrapada, Jeypur and Sonapur (Jharsuguda, Keonjhar (Ground floor), Rayagada, Malkangiri & Dhenkanal, Baragarh - Completed & Functional) and (Nuapada - Completed).
- Construction of 67 Maternal & Child Health Complex in District / Sub-district & Block Level of various bed strength; ranging from 125 bedded to 30 bedded is under progress (Completed & functional - 41, Progress - 9).
- Extension of Drug Ware House at DHH level - 31 Nos with a financial involvement Rs. 50.60 crore. (In progress - 3 Nos.)
- Construction of IPD & OPD complex at SDH/CHC, 80nos IPD/OPD complex has been under taken with an amount of Rs. 64.36 crore.
- 1527 sub centres buildings with a financial involvement of Rs.463.85 crore has been constructed (752 completed & 602 under construction).
- 54 PHC N buildings with a financial involvement of Rs.36.30 cr. constructed (14 completed & 40 under construction).
- 1349 staff quarter is being constructed for health service provider such as Doctors, Staff Nurse, Paramedics & others (848 completed & 218 under construction).
- To strengthen the infrastructure and main streaming of AYUSH - 98nos of Govt. Ayurvedic & Homeopathic Hospitals is being established (81nos completed & 14nos under construction)
- 67 UPHC/ UCHCs has been newly constructed with a financial involvement of Rs.75.00 lakhs @ per UPHC/UCHC (54 completed & 7 under construction).
- Construction of Health Wellness Centre funds to the tune of Rs.48.00 crore has been provided for construction of said units in 106 locations in the rural and difficult areas across the state.
- Establishment of health wellness Centre at PHC- 902 health wellness centres has been established by the way of up gradation/renovation of 902 PHCs with an amount of 40.40cr. (completed & functional)
- Special & Critical Child Health Care facilities like SNCU, HDU, PICU/NICU, MNCU, NCD, DEIC, NRC, Skill Lab etc. has been established and functional at different level of health institutions.
- Strengthening of chain of distribution & management of drugs 381 Drug Ware House at different level has been constructed.
- Establishment of health wellness wing at 1200 Sub Centres level with a financial involvement of Rs.84.00 crore.

**Budget sanctioned**

Year	Amount approved (Rs. In lakhs)
2017-18	25,175.41
2018-19	27,986.71
2019-20	14,771.00
2019-20 (Supplementary)	28602.05

- Funds also been mobilised from State Plan under 'MO SARKAR' & Chief Minister's Swasthya Seva Mission for additional infrastructure development of all level of health institutions (Approximately Rs.1000.00 crores + Rs.578.00 crores in Chief Minister's Swasthya Seva Mission).



100 Bedded MCH, DHH Sundargarh



50 Bedded MCH, Karanjia, Mayurbhanj



30 bedded MCH Kantabanji - Bolangir



HWC - DEBENDRAPUR, Mayurbhanj



UPHC-Kandpalipada - Bolangir



10 Bedded EYE Hospital at SDH Biramaharajpur, Sonepur



## 2.13 Hospital Development activities

This year focus was given on strengthening cleanliness and infection control practices thereby improving quality of services. NQAS Accreditation activities were taken up in all DHHs, SDH and FRU CHCs simultaneously. In the process of NQAS accreditations following activities were under taken.

### A: NQAS Implementation Status in 2018-19

#### Training & Capacity Building:

- 1 batches of State level Refresher Training on Quality assurance for SDH & 1 batch Refresher Training for Asst. Manager GKS & QA were completed. 40 participants are trained from SDH and 28 Asst. Manager GKS & QA were trained on Internal Assessment.

#### Activities for Quality Improvement:

- Assessment of all DHH, SDH & FRU CHC using NQAS checklist completed.
- Action planning for traversing the observed gaps was made and corrective action continued for closing the identified gaps, which is the only way in having a viable quality assurance programme in Public Health.
- All DHH labs conducted EQAS with NABL Accredited lab. (CMC Vellore) for monitoring Quality of tests

#### Accreditation:

**Status:** One DHH (DHH Kalahandi), one FRU CHC (CHC Ghatagaon, Keonjhar) one Non FRU CHC (CHC Mandasahi, Jagatsinghpur), 3 UPHCs of Berhampur city (UPHC Ambapua, UPHC Askaroad, UPHC Agasahi) are NQAS Certified.

#### Incentive for Certification:

- DHH/ RU CHC will get Rs.10000/- per bed per year for all functional beds of the concerned hospital.
- Non FRU CHC/PHC will get Rs. 3 lakh per year.

#### LaQshya Certification

LaQshya Certification programme launched with Aims to adopt a holistic and comprehensive approach at all levels of care to improve and strengthen Quality of Care (QoC) during intrapartum and immediate post partum periods. Here focus is on NQAS certification of Labour Room & Maternity OT by improving quality of service.

#### Activity completed so far:

- District level training completed in all the 10 DHHs of Aspirational districts.
- Internal assessment completed by the hospital team in all 95 FRUs and 3 Medical College Hospitals.
- Dedicated state level team visited for validating the score & providing handholding support.
- State assessment completed by team of Qualified Assessors as per GoI guideline and 2 DHH Dhenkanal & Kalahandi fulfill the criteria and got conditional LaQshya State Certification.

**Status:** DHH Rayagada, DHH kandhamal, DHH kalahandi, DHH dhenkanal, Capital hospital-Bhubaneswar & CHC ghatagaon, Keonjhar are LaQshya certified and External Assessment completed in DHH malkangiri for LaQshya Certification. External Assessment of Another 2 facilities for LaQshya certification will be held in March 2020.

#### Incentive for Certification:

- DHH/ FRU CHC will get Rs.3lakh per year for certification of hospital.
- FRU CHC will get Rs.2lakh per year for certification of hospital.
- Medical College will get Rs. 6 lakh per year.

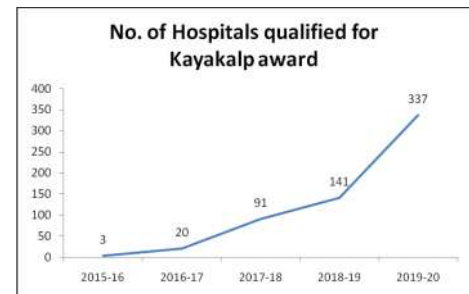


Well maintained OT

**B. Kayakalp:** Ministry of Health and Family Welfare launched "Kayakalp - Award to Public Health facilities" to promote and sustain Swachhata in public health facilities on 15th May 2015. Under this scheme, awards are given to those public health facilities that demonstrate high levels of cleanliness, hygiene and infection control focuses on promoting cleanliness in public spaces.

**Award Money:**

- DHH winner highest scorer will get Rs. 50lakh, Second highest scorer will get Rs.20lakh and all DHH securing more than 70% marks will get Rs. 3 lakh.
- In the SDH/CHC category winner will get Rs.15 lakh, 2nd highest scorer will get Rs.10 lakhs and all SDH/CHC securing more than 70% marks will get Rs.1 lakh.
- In PHC category Winners will get Rs.1 lakhs and all PHC securing more than 70% will get Rs50 thousands.



**Achievements:**

- In the year 2015-16 three DHH qualified for award 3 DHHs qualified for the award. Winner: DHH Koraput, Runners up: DHH Kalahandi, Commendation award: DHH Sambalpur.
- In the year 2016-17 twenty hospitals qualified for award. 8 DHHs and 12 SDH/CHC qualified for the award.
- In the year 2017-18 ninety one hospitals qualified for award. Total 12 DHH, 7 SDH, 28 CHC, 30 PHC and 14 UPHC qualified for the award.
- In the year 2018-19 One Hundred Fourty hospitals qualified for award. Total DHH-6, SDH/CHC-48, PHC-86, UPHC-42 qualified the award.
- In the year 2019-20 Three Hundred Thirty Seven hospitals qualified for award.



**C. Swachhata Hi Seva campaign conducted in all hospitals in a focused manner.**



**2.14 National Urban Health Mission (NUHM)**

**1. Functioning of Health Institutions**

- 90 Urban Primary Health centers of 28 cities and 7 Urban Community Health Centre are functioning in 3 cities.
- Ten Specialist services (Pediatric, O&G, Nutrition, ENT, Vision, Physiotherapy, Psychiatric, Geriatric, Dental and Skin & VD) are being provided through "Ama Clinic "at Urban PHC/CHC level.
- Ophthalmic service is being provided under SUNETRA scheme in five health institutions.



**2. Community process :**

3132 Mahila Arogya Samiti (MAS) have been formed and the groups are being graded. 1524 ASHAs are selected, 919 WKS formed, 97 RKS are formed in NUHM cities/towns. The best performing 940 MAS have been awarded and Rs.3000/- has been provided to each MAS as additional incentive.

**3. Outreach:**

Urban Health Nutrition Day (UHND) is being observed in all 36 cities/towns and 26,545 UHND sessions were held during April 2019 - December 2019. 47 outreach camps were organized in 8 towns. Out of the nine Mobile Health Units 8 MHU are operational and 1,90,022 beneficiaries have received services at MHU camp during April'2019-December2019

**4. Training:**

Five training modules have been developed for training of ULB representative, PMU staff, MAS, WKS and RKS. Training programs have been conducted for the Members of WKS, MAS, ASHA, PMU personnel, ANM and other clinical staff, Program Management staff.

**5. Strengthening of health institutions:**

- a) Construction of New building for 52 Urban PHC is completed and 11 are under progress.
- b) 66 Urban PHC have been nominated for awards under Kayakalp.



**6. Human resources**

- a) All personnel are in position at SPMU, 28 at DPMU out of 28 and 18 at CPMU out of 21 are in position.
- b) 332 ANMs, 149 Staff Nurses, 62 LTs, 41 Pharmacists, 90 Data Assistant-cum-Accountants and 32 Public Health Managers are in position under NUHM.

**7. IEC/BCC:**

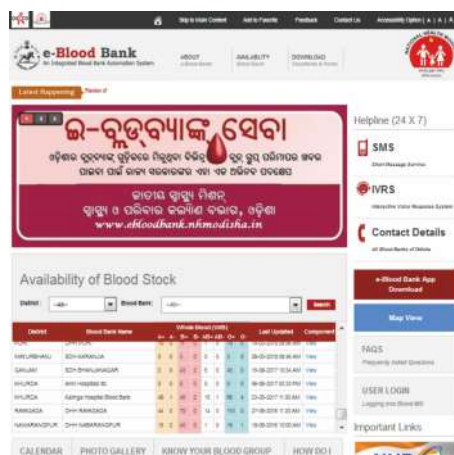
Mini & Small hoardings are installed at different strategic locations and branding of all operational UPHCs are completed. School sensitization conducted at different schools and slum sensitization programs held at slums.

**8. Budget:**

In the year 2019-20, out of the of the total allocation of 5017.25 lakhs , 76% of the budget have been utilised by December 2019.

**2.15 e-swasthya Activities**

- Odisha e-Hospital Management Information System (OeHMIS) has been implemented in all 32 DHHs, SCB MCH, AHRCC and SISHUBHAWAN. The Portal is also integrated with MoSarkar Platform where the Patient demographic data along with phone nos are shared. ([eswasthya.odisha.gov.in](http://eswasthya.odisha.gov.in))
- **e-Blood Bank-** It is a initiative of Govt. of Odisha, the first of its kind in the country, to improve management and functioning of blood banking system through a web based MIS. The system provides instant stock position of blood units through website and mobile App and also integrated with e-raktkosh of Gol. A total of 82 blood banks across the state has been linked to the system and the data of around 4.0 lakhs units of bloods are being processed every year. (<http://ebloodbankodisha.nic.in>)
- **e - Swasthya Nirman-** It is a web-enabled system, developed to track and trace the physical and financial progress of all construction activities undertaken by NHM at State, district and block level. This online application integrates all activities of construction unit such as forecasting, tender processing, work execution, monitoring of financial utilization, user tracking, allotments etc. (<http://cms.nhmodisha.in>).



- **e-Asha:** A web based application for tracking the services and claim settlements of ASHAs.
- **RCH Portal:** To monitor the provisioning of Maternal and Child care services.
- **HMIS:** A web based system for capturing facility Service delivery data on monthly basis.
- **Automation of DC Administration-** In order to automate the statutory functions of the Drug Controller Administration, Department of H & FW has developed a web based system for management of retail, whole seller and manufacturer licenses through online along with enforcement process automation. The system is having three major modules-License Management System, Pharmacist Information Management System, Enforcement System. ([www.dcodishaonline.nic.in](http://www.dcodishaonline.nic.in))
- **Integrated HRIS-** It is designed to provide an integrated platform for employees (Regular+ Contractual), their pay slip, appointment and transfers and performance appraisal. ([www.odishahrh.nic.in](http://www.odishahrh.nic.in)).
- **GKS Monitoring System-** . In order to track the physical and financial activities of each GKS, this online system has been developed to capture the information at a periodic interval. (<http://gks.nhmodisha.in>)

### Other key Initiatives

- **Nidaan Scheme:** Free Diagnostic Services at identified Public Health Facilities both through own system and PPP mode implemented. 1.42 cr. Tests done and 3.90 lakhs patients received high end pathology services.
- **Sahay Scheme:** Free dialysis services provided to all patients at 29 identified Public Health Facilities both through own system and PPP mode.
- **ANMOL:** "ANM On Line" is an android based application, developed to facilitate seamless work of ANMs as well as ensuring collection of good quality data and its digitization at its source. It has been implemented in all 30 districts. NCD App application is also loaded in the tablet for recording the enrollment and screening details by ANMs.
- **Digital Dispensary:** Efforts are being made to establish digital dispensaries in under-served and hard to reach areas, strengthening Specialist services at major hospitals, establishment of helpdesk for facilitating better patient care and sustaining motivation of ASHAs. In first phase, 30 Digital Dispensaries have been made operational in Keonjhar and Nabarangpur district and 102 additional Digital Dispensaries are being established in other districts.
- **SAMMPurNA Scheme:** Under NHM, besides Emergency Medical Ambulance Service (108/102), provision has been made for reimbursement of transportation cost @ Rs. 1,000/- per pregnant woman for institutional delivery in 7853 notified difficult villages targeting to benefit more than 60,000 pregnant women.
- **Cancer Care-cum-Chemo Units at DHH:** Cancer Chemotherapy is being started with 6-bedded Day Care Chemotherapy units in order to ensure cancer care services at 25 District Headquarter Hospitals including Cancer Chemotherapy and Palliative Care.
- **Sunetra:** aims at providing comprehensive, accessible, affordable and equitable eye care to people of all age groups. Vision centres equipped with appropriate eye-care facilities and trained manpower will be established across the State in govt. facilities.
- More than 59,900 Tuberculosis Patients received Cash incentive under Nikshay Poshan Yojana through DBT.
- Annually more than 10 lakhs slum populations are getting range of specialist healthcare services at doorstep through Ama Clinic – Specialist Services in Urban PHCs/CHCs.
- **Strengthening Blood services:** Steps taken for functionalisation of the State Blood Cell. Deos engaged for smooth functionlisation of e-blood bank system. 81 Blood Bank officials trained at National Institute of Biologicals.
- **Khusi:** Scheme for providing free sanitary napkins to school girls from Class 6 to 12 in all the government and government-aided schools in the state.



**CHAPTER - 3**

**Directorate of Health Services**

## CHAPTER - 3

## Directorate of Health Services

**3.1 National Vector Borne Disease Control Programme (NVBDCP)**

National Vector Borne Disease Control Programme (NVBDCP) addresses six vector borne diseases. They are : Malaria, Filariasis, Dengue, Chikungunya, Japanese Encephalitis and Kala-azar. Except kala-azar other five diseases are reported in Odisha. Prevalence of these five Vector Borne Diseases (VBDs) is different in different districts. Malaria poses major public health problem in the state showing its prevalence in all 30 districts. The prevention, control and management of activities of NVBDCP are implemented under the umbrella programme of National Health Mission (NHM), Odisha.

Mentioned below are the situation of different diseases in the state and activities carried out for their prevention and control:

**MALARIA:****Epidemiological Data of Odisha, 2014-2018**

Year	Popn.	BSE	Total Malaria cases	Pf cases	Death	ABER	TPR	Pf%	API
2014	43501192	6352249	395004	342249	89	14.60	6.22	86.65	9.08
2015	43833660	6608453	436850	369533	80	15.08	6.61	84.59	9.97
2016	44215630	7201271	444842	384668	77	16.29	6.18	86.47	10.06
2017	44819296	6648889	347860	293718	24	14.83	5.23	84.44	7.76
2018	44913071	6157502	66311	54042	3	13.71	1.08	81.50	1.48
2019	44913071	6550954	39557	35775	7	14.56	0.6	90.44	0.88

\* Population data is Provisional

Malaria cases have decreased in the state in the year 2019. Compared to 2018, there is 40.35% decline of malaria cases. Against a report of 66311 total malaria cases in 2018, the state has reported 39557 cases, in 2019. Plasmodium falciparum is the predominant parasite species that contributes 90% of the total malaria cases. Malkangiri with Annual Parasite Incidence (API) 12.84 is the only district in the state with API>10. State API has come down to 0.88 in 2019 from 1.48 of 2018. Annual Blood Examination Rate (ABER) is maintained at 14.56. Test positivity rate (TPR) has gone down to 0.6% from 1.08 in 2018. This is all time low in the state.

There is notable shrinking of malaria map in the state with record of 23 districts coming to the cluster of API<1 and 25 Districts with API<2. However, there are 7 deaths reported in the state due to malaria, compared to 3 deaths reported in 2018.

**This substantial decline is majorly attributed to the followings:**

- Large scale distribution of LLIN in 2017 - 1.13 crores of LLIN have been distributed in 16 most high endemic districts of Odisha with full coverage and most high burden pocket of four malaria endemic districts from the supplies of Govt. of India under Global Fund support. Around 2.04 Crore high risk population have been protected by this intensive drive.
- Enhanced use of LLIN in community by constant monitoring and supervision
- Strengthened EDCT - Hidden foci were addressed by the State specific DAMaN activities.
- Mass screening for malaria with follow up intensification of vector control activities in inaccessible areas under State specific DAMaN programme.
- Enhanced capacity building, Intricately working community process and large scale community mobilization.
- Intensive monitoring & supervision

**Control Strategies undertaken:**

**1. Early Diagnosis and Complete Treatment:**

- 47147 ASHAs and community volunteers are acting as Fever Treatment Depot (FTD) holders and are providing services on malaria diagnosis and treatment at village level.
- Rapid Diagnostic Test (RDT) kits and Anti-malaria drugs i.e. Artemisinin Combination Therapy (ACT), Chloroquin and Primaquine have been made available at village level with FTDs.
- Malaria diagnosis and treatment facilities are also available in 6688 SCs, 1168 PHCs, 377 CHCs, 29 SDHs, 32 DHHs and all Govt. Medical Colleges of the state.
- Around 600 Microscopy centres are functioning in the state for malaria blood slide examination with a well set quality assurance mechanism.
- 64 sentinel sites are functioning at DHH, SDH & CHC levels. These facilities not only diagnose the severe malaria cases but also work for tracking and monitoring of the complicated malaria cases and also for monitoring of the efficacy of the anti-malarial drugs.
- There is provision for management and treatment of severe and complicated malaria cases at CHC, SDH and DHH level apart from the facilities at all tertiary care hospitals and Govt. Medical Colleges.

**2. Integrated Vector Management (IVM):**

- Long Lasting Insecticidal Nets (LLIN): 1.13 Crores of LLIN were distributed from the supplies of Govt. of India under Global Fund support in 2017. This had protected the entire population of 16 most high endemic districts and the most vulnerable population of 4 high endemic districts.
- Further, in 2019, 26.54 lakh of LLIN has been received from Govt. of India under the DBS support. Distribution is in progress to protect the entire population of three high case reporting districts (Malkngiri, Koraput & Rayagada), and population residing in API>1 SC area of 12 districts.
- IRS is done in selectively most high burden areas to protect the most vulnerable population from malaria
- Impregnation of community owned bed nets is done during MDD campaign and also routinely through GKS.

**3. IEC, BCC, Social Mobilization & Public Private Partnership**

Following activities have been conducted:

- Observance of World Malaria day on 25th April and National Dengue Day on 16th May, 2019. Further, Anti Malaria month was done in the month of June and Anti Dengue Month campaign was done in July
- 30 days mass media campaign was conducted using both Electronics and print media.
- 1000 local school activities, 1000 Infotainment activities at village level and 1000 milking were done at village level.

- Sensitization programme conducted for Para medical staff in all blocks.
- 350 NCC cadets were sensitized.
- Sensitisation of community volunteers and GKS members has been done in more than 1700 sub-centers.
- Malaria, Dengue & Diarrhea (MDD) Campaign (July - Sept) was conducted across the state to address both vector and water borne diseases during the mid of monsoon (i.e.high transmission season).
- 2728 number of village contact drive have been conducted in the remote and inaccessible villages/hamlets under DAMaN.
- Special IEC-BCC Campaign (two major activities: village meeting by ASHA & Folk theatre at village level) have been conducted in 17 LLIN covered districts to sustain regular use of LLIN with proper maintenance



#### 4. Training:

- 45 Nos of SSMTCs have taken refresher training in two batches.
- 135 Nos of VBDSs have taken refresher training in two batches.
- 26 DEOs have taken refresher training on Data Entry & Data Analysis
- Two batches of National level refresher training has been conducted for 40 selected LTs of different states of the country
- 38 Nos of LTs have received 10 days ToT on Malaria Microscopy
- 1550 ASHA have taken refresher training at district level
- 800 HW (M &F) & 1450 MPHS (M & F) have received refresher training at district level

#### 5. Monitoring and Evaluation:

Following activities are conducted for programme monitoring:

- Analysis of epidemiological data, identifying problem areas and setting priorities for actions
- Periodical Reviews at various levels - district, state & National levels
- Regular field tours
- Sending timely directives and guidelines
- Monitoring Sentinel site activities
- Quality assurance of microscopy through crosschecking of malaria blood slides
- Conducting programme evaluation through Lot Quality Assurance Sampling (LQAS)

6. **Duragama Anchalare Malaria Nirakarana (DAMaN):** DAMaN has been implemented in 24 districts having remote and inaccessible villages/hamlets having high malaria burden and also villages/hamlets in accessible areas where incidence of Malaria is high. In 2019, a total number of 2728 no. of DAMaN camps conducted, in which 5,85,390 number of population screened and 9014 malaria positive cases have been diagnosed and treated with appropriate anti malarials. Along with malaria, various nutritional parameters of pregnant women, Lactating mothers and under five children have been assessed and necessary corrective measures taken to improve the haemoglobin status and other nutritional parameters.

7. **Public Private Partnership (PPP):** Two agencies; TATA Trusts and Malaria No More (MNM) have MoU with H&FW Dept. And are working with State VBDCP for prevention and control of Malaria in high burden areas of the State.

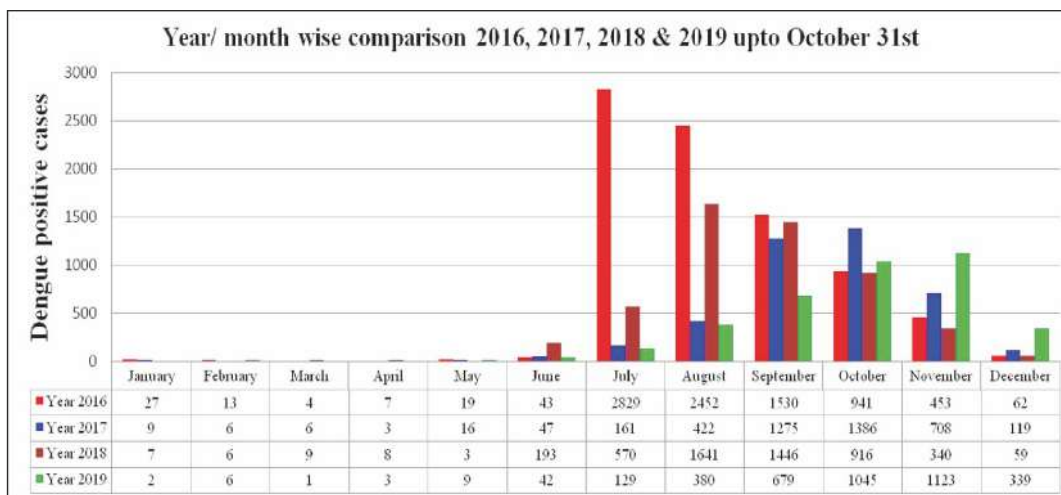
- TATA Trust is working in five blocks of Rayagada, Kandhamal and Kalahandi for control of Malaria in remote and inaccessible pockets. Their main activities are EDCT in remote/inaccessible villages/hamlets, IEC, BCC & Community Mobilization and DAMaN.



- MNM has started working in selective high burden block areas of Malkangiri and Koraput district for control of Malaria. Major activities done by MNM in 2019 are KAP study in 17 high malaria burden districts, establishment of Malaria Action Coalition (MAC) by on boarding various stakeholders to support Govt, for Malaria elimination.
  - 85,000 LLINs were donated by MNM in the post cyclone period of 'Fani'
8. **Odisha Mineral Bearing Areas Development Corporation (OMBADC):** Districts Jajpur, Keonjhar, Mayurbhanja and Sundargarh have been supported for different activities of NVBDCP under OMBADC. 45 blocks of these four districts are addressed under OMBADC for prevention and control of Malaria, Dengue and JE. Activities like GKS Sensitization, SHG sensitization, display of hoarding, wall painting, constricting of hatchery, dengue volunteer for source reduction etc. are prioritized under this important intervention along with the support of additional HR at the block and district level.

### Dengue

Dengue has become perennial in our state. There is increased screening of dengue cases due to the functionalization of sentinel site facility at DHH level in all 30 districts. In 2019, total 3758 confirmed dengue positive cases were detected in the state out of 28497, total tested. The Test positivity Rate for dengue is 13.2%. Of the total dengue cases of the state, 69 % are migratory and mostly from the states like Karnataka, Telangana, Andhra Pradesh, Maharashtra, Kolkata, Tamil Nadu & Gujrat. Cases have been reported from all 30 districts. There was an outbreak of dengue in Balasore; hence, majority of the cases were reported from Balasore. Most affected age group was from 15 to 45 year and males (86%). Four Deaths have been reported in the state due to dengue. Transmission was observed from July to November.



## 3.2 REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME; ODISHA

### Achievements

- The National Tuberculosis Elimination Programme (NTEP) is implemented in our State with the objective to eliminate TB by the year 2025.
- The programme is implemented through 31 NTEP District implementing units, 314 functional TB Units & 584 Designated Microscopy Centers (DMC). About 45000 Treatment Supporters are administering free medication to the TB patients under the programme and following them up.
- The Anti TB Demonstration & Training Centre (ATD&TC) Cuttack is functioning as the State Training Center as well as Intermediate Reference Laboratory (IRL) of NTEP and conducts External Quality Assessment (EQA) to maintain quality sputum microscopy. Training on TB detection & treatment is also provided there.

- National Reference Laboratory (NRL) for the eastern & north-eastern region of our country has been established at the Regional Medical Research Centre (ICMR), Bhubaneswar for C&DST to diagnose MDR-TB cases.
- The Rapid diagnostic Cartridge Based Nucleic Acid Amplification Test (CBNAAT) Gene Xpert machines have been installed at 40 sites mostly at the district, Medical College and SDH level to provide early diagnosis of TB in Pediatric, PLHIV, Extra Pulmonary and Sputum negative cases and to provide Universal Drug Sensitivity Test under the Programme.
- Drug Resistant TB (DR TB) Centre has also been established at SCB Medical College, Cuttack, VSS Medical College, Burla and MKCG Medical College, Berhampur to provide indoor treatment to the diagnosed DR TB patients of the State.
- All TB cases are screened for Diabetic at the DMC level.
- To further improve TB surveillance in both Private and Public sectors in India, NIKSHAY - a real time, online notification, recording and reporting system has been implemented in the State. Block level MIS-Coordinators along with STS play an important role to ensure 100% entry in this portal.
- TB Notification has been made mandatory as per Govt. of India notification and reporting of TB patients from private Sector started. The Indian Medical Association (IMA), Odisha is fully supporting our efforts.
- As per NIKSHAY report, during the year 2019, 53651 TB patients have been notified and put under treatment. During the year 2020 (till 24.02.2020) 6257 TB patients have been notified under NTEP. The Success rate for the year 2019 (for outcome assigned till 24.02.2020) is 86.5%.
- PMDT (Programmatic Management of Drug Resistant TB Cases) has been rolled out in the entire State. This programme is implemented through 2 bedded ward in every district.
- TB and HIV collaborative services have been strengthened in all districts with the State progressively increasing the proportion of TB patients tested for HIV.
- Other Sectors like ESI hospitals, Railway hospitals, CGHS hospitals, Prison, Corporate hospitals & PSU hospitals are implementing NTEP.
- "REACH" TB Call to Action project, "PATH"-PPM project and "The Union" are supporting NTEP Odisha in engaging Pharmacists, Private Practitioners and ACSM activities under NTEP.
- For active involvement of Medical colleges in NTEP, State Task Force mechanism is operational.
- State has optimally rolled out Tribal action plan in 11 notified tribal districts catering to 22.47% of tribal population of the State.
- School awareness programmes, Patient Provider interaction meeting, PRI Sensitization, Street Play & Folk Dance are conducted at district level to create awareness for early diagnosis and treatment of TB. In addition Swasthya Kantha in all villages and Print & Electronic media are being utilized to disseminate TB messages to the community.
- Pharmacy sensitization is being rolled out throughout the State to improve private sector TB case notification.
- Odisha has launched two newer drugs - Bedaquiline in April 2018 and Delamanid in November 2018. Currently 112 patients are initiated on newer drugs.
- Nutritional support for all diagnosed TB patients on treatment is given Rs.500/- per month per patient through Direct Benefit Transfer (DBT).

### 3.3 National Leprosy Elimination Program (NLEP), Odisha

#### Background:

The National Leprosy Eradication Programme (NLEP) started MDT Programme in the year 1983 with the objective of achieving eradication of the disease from the country. Elimination has been achieved against this dreaded disease in 2005-06 when the leprosy recorded cases load had come down to less than 1 case for 10,000 Population at National level. Although the country has achieved elimination of leprosy as a public health problem, yet new case detection has remained about to 1.3 lacks annually.

Prior to introduction of Multi Drug Therapy, Odisha was one of the very high endemic states of the country with prevalence rate (PR) 121.4 per 10,000 population and Annual New Case Detection Rate (ANCDR) was 210 per 1,00,000 population. With introduction and successful implementation of Multi Drug Therapy (MDT) programme in the State since March, 1983, the PR as well as ANCDR of leprosy has drastically declined. Odisha achieved elimination in 2006-2007 and continued up to 2012-13. Present PR is 1.51 as on 31st January 2020

The table shows the five year data of NLEP:

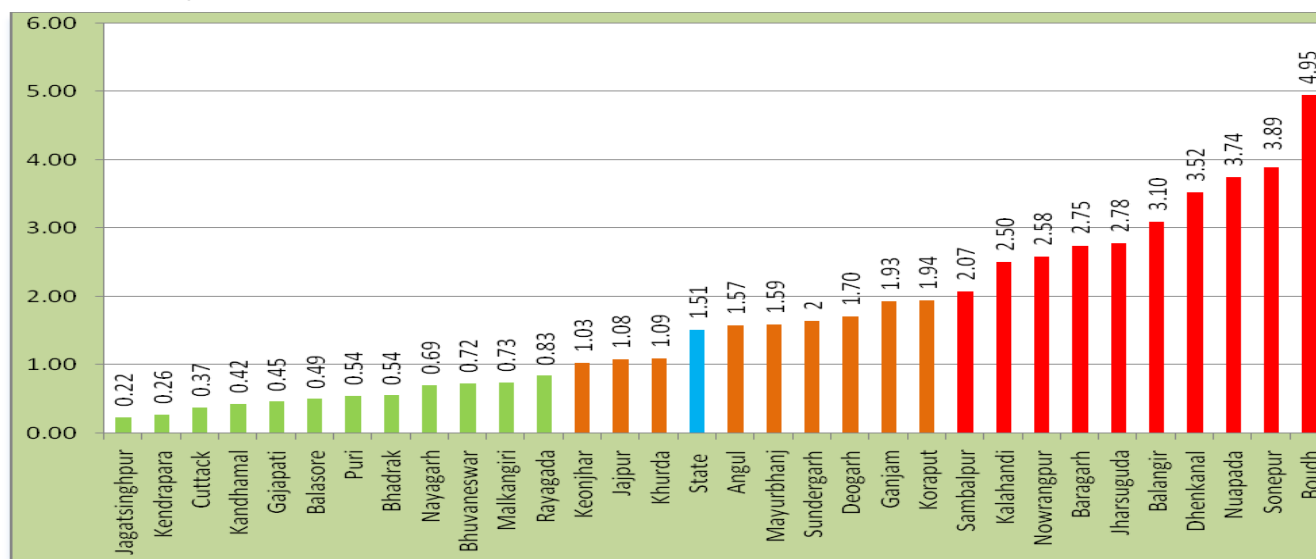
Indicator	2015-16	2016-17	2017-18	2018-19	2019-20 (Jan. 2020)
New case detected	10174	10045	9576	10786	7592
ANCDR	22.69	21.1	20.8	23.2	-
No. of cases under Treatment	6044	5383	6325	7117	7052
PR per 10000 Population	1.35	1.19	1.37	1.53	1.51
MB proportion	49.1	48.02	48.2	47.6	48.37
Female proportion	41.6	39.6	40.7	41.2	39.33
Child proportion	8.54	7.87	7.89	7.6	6.66
G2D per Million Population	13.2	11.6	10.1	7.31	3.33
G2D rate with absolute no	5.90 (593)	5.52 (527)	4.87 (466)	3.16 (341)	2.02 (154)
Child Grade-2 cases	14	12	11	08	04

Objectives of NLEP: Elimination of leprosy i.e. Prevalence Rate (PR) < 1 case/ 10,000 population in all districts of the state, Strengthening of Disability Prevention & Medical Rehabilitation (DPMR) of persons affected by leprosy and Reduction in the level of stigma associated with leprosy.

Targets By 2020:

- No child grade-II disability by 2020
- Less than one new G-2 disability case among I million population
- Zero backlog of eligible patients for RCS

As on January 2020 the PR of different districts:



**Major activities & Achievements of NLEP for 2019-20:****1. Leprosy Case Detection Campaign (LCDC):**

This year LCDC was implemented in both high and low endemic districts of the State. For rural areas LCDC implemented from 10th to 23rd September 2019 and in Urban areas from 18th to 30th Nov.2019.

Outcome of LCDC 2019-20:

- Population visually examined: 23557663
- No. of Cases confirmed: 3394
- No. of Grade-II Cases: 51
- No. of Child Cases: 225

**2. Focused Leprosy Campaign (FLC) 2019-20 (Up to January 2020) :**

The village / urban area where even a single grade II disabled case detected, house to house survey is conducted in these villages and urban areas.

**3. ASHA Based Surveillance for Leprosy Suspects (ABSULS) 2019-20 (Up to January 2020)**

- No. of suspects identified by ASHA: 50380
- No. of suspects screened by HW: 44720
- No. of suspects examined by MO: 24454
- No. of cases confirmed by MO: 4141

**4. LPEP: PEP Implemented in the state from June 2018 and it is continuing: Contacts screened: 100951 and SDR Administered : 78306****5. Capacity Building of GHC staff:**

Activities	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20
MO (AYUSH) Training	265	245	267	167	441	-	
MO (MBBS) Training	112	116	144	241	169	75	98
MPHWs Training (BNLW)	-	33	169	143	113	259	249
Physiotherapist training	-	-	-	-	20	-	40
DLC/NMS Training							29

**6. Disability Prevention and Medical Rehabilitation (DPMR):**

358 DPMR clinics have been established at Block CHCs, SDH and DHH level to provide disability care services in this clinics-

Activity	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20 (Jan.)
Reaction Management	2167	2202	1788	1548	1686	1424
Ulcer dressing / kits	8256	6822	7207	5888	5492	4082
Footwear provided	4951	4761	5539	6094	6742	5547

**7. Reconstructive Surgery (RCS): 2019-20 (up to Jan 2020):**

- 149 RCS done in 14 Govt. Hospitals and One NGO in this financial year with a provision of Rs 8000/- as loss of wages to the patients.
- Cumulative achievement is 6131 till Jan 2020.

## 8. IEC / BCC Activities:

**SPARSH Leprosy Awareness Campaign (SLAC):** Sparsh leprosy awareness campaign (SLAC) is a unique initiative under NLEP wherein state wide message on leprosy awareness was spread through various media. It was carried out in both rural and urban areas by reading out the message of concerned district Collector/DM of entire state and taking pledge for elimination of leprosy. Through this campaign State-wise Gram Sabhas were organized and oath taken for leprosy free Odisha. In urban areas, sensitization on leprosy was done through meetings in urban slums and NAC/Municipality wards, Mahila Arogya Samitis. This campaign was also covered Schools all over the state to spread awareness on leprosy among school children thereby spreading this message in the community.

- Advertisement published in Newspapers, TV & Radio channels during LCDC Programme.
- Anti leprosy day was observed on 30<sup>th</sup> January 2020 in martyrdom day of Mahatma Gandhi at all districts.

At State level, the day was observed at Rajbhawan in presence of His Excellency Governor of Odisha and other dignitaries.



State Level Anti Leprosy Day at Rajbhawan



Oath Taking at Gram Sabha during "Sparsh"

## 3.4 STATE HUMAN RESOURCE MANAGEMENT UNIT

### **Background:**

Various steps have been taken up for augmentation of Human Resources in Odisha which includes not only creation of new posts or increasing seats in medical colleges, but also appointment/engagement of regular/ad-hoc/contractual doctors and measures for retaining them as well.

### **Enhancement of no. of MBBS seats**

Steps have been taken to enhance the MBBS seats from existing 450 to 1050 by enhancing 200 more MBBS seats in existing Govt. Medical Colleges and establishing 4 no. of new Medical Colleges having 400 seats (100 seats in each Medical College). As there are 400 seats in Private Medical Colleges also, the total no. of MBBS seats in the state comes to 1450. After 3 years, 600 more doctors will pass out each year, which will meet the shortage of doctors in the state. Further, another six Medical Colleges are in pipeline.

### **Recruitment**

1. Recruitment of Medical Officers is being done on regular basis through Odisha Public Service Commission (OPSC). A total of 2733 no. of Odisha Public Service Commission (OPSC) recommended Medical Officers have been posted as Assistant Surgeons on regular basis from 2010-11 till date. Similarly, 2607 no. of Ad-hoc doctors have been posted during this period.
2. Recruitment process for 1950 doctors is under process.
3. Engagement of contractual doctors through walk-in-interview is being done every month on regular basis both at district and state level for selection and posting of MBBS and Specialist doctors. A total of 629 no. of Contractual doctors are in position as on date in the state.

**Reforms undertaken to attract and retain doctors**

1. Restructuring of Odisha Medical & Health Services Cadre (OMHS) has been done during 2016-17 with creation of 1330 new posts of doctors as per Indian Public Health Standard (IPHS) norms and requirement of the state there by increasing the total number of posts of doctors to 6719. In each CHC, 4 posts of specialists, one each in O&G, Paediatrics, Medicine and Surgery, have been created. The number of posts in Pay Band-IV has been increased from 35 to 433 thereby, increasing the promotional avenues.
2. Doctors are being posted through transparent computerized counseling process. Exit policy is also being implemented to allow doctors to be posted in Non-KBK & Non-TSP districts after completing a fixed tenure in KBK, KBK+ & TSP areas.
3. Place based incentives is given to the Medical Officers working in different difficult / remote areas in the state as per vulnerability status of the places taking into consideration certain key parameters such as difficult and backwardness of the location, tribal dominance, left wing extremism, train communication, road and transport facilities, social infrastructure and distance from state head quarter etc. All the 1751 peripheral Government Health Institutions of the State have been classified into five different categories and declared as V-0 to V-4. This incentive is applicable to contractual, ad-hoc and regular doctors. For example General (MBBS) doctors working in V4 CHCs and PHCs get Rs 40,000/- as incentive whereas a specialist working in V4 CHC gets Rs 80000/- as incentive. In the state there are 100 health institutions which are categorized as V-4 and 137 health institutions categorized as V-3.
4. Doctors working in V1 to V4 institutions are entitled for additional mark in PG entrance examination. As a result, young doctors are interested to join remote and inaccessible areas to get additional marks for selection for PG courses.
5. Incentives for Specialists have been provisioned for motivating Specialist doctors of Odisha Medical & Health Services (OMHS) cadre.  
Incentive for Doctors with Super Specialization: Rs.30,000/-  
Incentive for Doctors with Post-graduation: Rs.20,000/-  
Incentive for Doctors with Post-graduate Diploma: Rs.10,000/-
6. To create more specialist doctors in the state, MoU has been signed with College of Physicians and Surgeons of Mumbai for starting Post Graduate Diploma courses in the state. This year (2018-2019), 47 no. of doctors have already been enrolled in different specialties. This number will increase in subsequent years.
7. Bond has been introduced for the doctors who are doing post graduation. After completion of post graduation, they need to serve for two years under state govt.
8. Corpus fund has been created in KBK and KBK plus districts for optimal utilization of human resources in inaccessible areas of these districts. This fund is being utilized for filling up the gaps in the districts for human resources. Doctors and Specialists are engaged on negotiable remuneration under this scheme.  
Doctors and Specialists are also engaged under District Mineral Foundation (DMF) Fund with negotiable remuneration. A total of 55 no. of doctors are working under DMF fund as on date.
9. The remuneration of contractual doctors have been enhanced to 55,000/- for MBBS doctors and 60,000/- for Specialists with a hike of 3 % in every year on satisfactory completion of one year of contractual service w.e.f. 01.07.2018.

**Impact**

1. Due to various measures taken for posting and retaining medical officers in KBK/KBK+ districts, a total of 1072 no. of doctors were in position in these districts as on 31<sup>st</sup> March'18 in comparison to a total of 786 no. of doctors in position as on 31<sup>st</sup> March'2014.
2. There were 4805 no. of doctors in position in Odisha Medical and Health Services cadre during April 2014, whereas, total no. of doctors in position at present is 5643. The vacancy of doctors against the

sanctioned posts in peripheral institutions stands at 29% as of date. However, if contractual/Ad-hoc/DMF Fund/Corpus fund doctors are taken into consideration, the overall vacancy stands at 16%.

### 3.5 State Drugs Management Unit

Background

**The State Drug Management Unit (SDMU) was managing pooled procurement of drugs and medical consumables to ensure the rational use of drugs in all Govt. health facilities of the State.**

**But at present, Odisha State Medical Corporation Limited (OSMCL), Bhubaneswar has taken over the activities of SDMU relating to procurement, distribution and quality control of drugs.**

Activities : The SDMU(O) is carrying out the following activities:

- **Compilation of requirements for instruments, equipments & furniture (EIF) from the districts and medical colleges.**
- The requirements of EIF for 2019-20 have been compiled & rationalized quarterly at SDMU for finalisation by the State Level Equipment Management Committee (SEMC) and procurement of EIF by OSMCL.
- The annual indents of Drugs, Medical Consumables, Surgicals & Sutures for 2019-20 compiled by OSMCL have been analysed & rationalized by SDMU and finalized by State Drug Management Committee (SDMC)(on 23.07.2019) for procurement by OSMCL.
- **Essential Drug List (7<sup>th</sup> revised edition):** Essential Drug List 6<sup>th</sup> Edition which contains 359 drug molecules and 570 drug formulations in generic names has been updated and revised in consultation with all specialists of Medical Colleges and peripheral health institutions and WHO EDL model list – 2015. The steps are being taken by SDMU for the publication of 7<sup>th</sup> revised edition of Essential Drug List.
- **Standard Treatment Guidelines (STG-2018)** (the 2nd edition): Treatment protocol of the most common diseases to be followed by doctors have been published & distributed to all prescribing doctors of the State.
- **Prescription Audit:** In order to investigate the drug-use & to avoid irrational use of drugs in the health facilities, the prescription audit is being done at peripheral health institutions. These reports are submitted time to time to Govt. The Indenting Officers are being requested again & again to submit Prescription Audit in formats.
- **Clearance of pending dues:** The pending dues towards performance security, EMD, Not of Standard Quality (NSQ) dues etc. are being released to the firms for their supplies prior to functioning of OSMCL.
- **Monitoring of Not of Standard Quality (NSQ) drugs:** The quality control section of SDMU is monitoring the drugs declared as Not of Standard Quality (NSQ) by the Statutory Laboratory of the State (relating to drugs procured prior to the functioning of OSMCL).
- **Legal complications:** Legal complications arising out of Not of Standard Quality (NSQ) related drugs or firm disclaiming to comply to tender terms & conditions or any other matter relating to the functioning of SDMU prior to the functioning of OSMCL are being dealt by SDMU.
- **Compilation relating to vigilance enquiries:** Enquiries are being done relating to vigilance matters, Human Rights Commission matters etc. and compilation is being prepared.
- **RTI Matters:** Reports are being compiled relating to RTI applications.
- **Audit queries / paras:** Steps are being taken by SDMU relating to compliance of A.G Audit queries / para/IAR.
- **Assembly / Parliament questions:** Replies to Assembly / Parliament questions relating to SDMU are prepared at SDMU level.

### 3.6 Health Assurance Schemes

#### 3.6.1 Biju Swasthya Kalyan Yojana (BSKY)

To protect economically vulnerable families from falling into this poverty trap by catastrophic health expenditure, Hon. Chief Minister, Odisha has launched universal Health Assurance scheme, Biju Swasthya Kalyan Yojana (BSKY) on 15<sup>th</sup> August 2018. It has two components.

##### i. Components:

- Free health services for all (irrespective of income, status or residence) in all State Government health care facilities starting from Sub centre, PHC, CHC, Area Hospital, SDH, District Health Quarter Hospital and all Govt. Medical College Hospitals and Blood Banks.

Further under this component, as mentioned above all health services are free of cost including free drugs, free diagnostics, free dialysis, free Cancer chemotherapy, free OT, free I.C.U., free in-patient admission etc., in all government health institutions up to all Govt. MCH, for all persons. For all cashless treatment no document is required.

- Additional facility of free healthcare beyond Government hospitals level in 192 empanelled Private Hospitals for families having BKKY card, BPL card or AAY card or annual income of Rs. 50,000/- in rural and Rs. 60,000/- in urban areas which cover over 70 lakh economically vulnerable families in the State are provided with Annual Health coverage of Rs. 5 lakh per family and Rs. 10lakhs for the women members of the family. Patients having Cancer, Cardiac and Kidney related diseases can avail the above facilities even if their annual income is up to Rs. 3 lakhs. Even outside the State, all Govt. hospitals and premier health institutions are covered under BSKY.

##### ii. Coverage:

Scheme	Category	Target families	Enrolled families
BKKY Stream-I	Non-Income tax paying farmer families	25,00,000	25,61,602
BKKY Stream-II	MGNREGA	11,80,375	8,22,692
	BPL	52,47,929	35,82,209
	B&OCW	70,596	3,169
OSTF	Entitlement based scheme for families with BKKY, BPL & AAY card and low-income certificates as mentioned.		
<b>Total</b>		<b>89,98,900</b>	<b>69,69,672</b>

##### iii. Achievement:

Since its inception on 15.08.2018, the BSKY has launched a new era in Universal Health Coverage. Achievement under BSKY from 15.08.2018 to 31.01.2020.

Sl no	Biju Swasthya kalyan Yojana	Nos of claim raised	Amount of Claim raised
1	Component-I (In Govt. Hospitals)	9,29,46,211	
2	Component-II (In Private hospitals)	2,64,291	Rs. 245,45,18,739

##### iv. Grievance Redressal: Helpline Number for BSKY: 155369 (6AM to 10 PM) & 104 (24 x 7).



### 3.6.2 ODISHA STATE TREATMENT FUND SOCIETY

Odisha State Treatment Fund (OSTF) has been a source of great respite to poor patients belonging to BPL category, low income group with annual income up to Rs.50, 000/- in rural areas & Rs. 60,000/- in urban areas (For Cancer, Heart and Kidney diseases, the annual income ceiling is Rs. 3 Lakhs), Antodaya Anna Yojana, referred cases from registered Mental Asylum/Destitute Home/ Orphanage and unknown accident victims in the State for treatment of serious diseases and disorders. OSTF has been providing cashless treatment to above category patients through 41 Government Hospitals and 13 empanelled private hospitals inside the State, 04 hospitals in **Vishakhapatnam & Vijaynagaram, Andhra Pradesh**, 02 hospitals in **Raipur, Chhattisgarh** and 6 hospitals in **Surat, Gujarat** both at tertiary and multispecialty level.

Further, CDM& PHOs of Western districts like Nuapada, Kalahandi and Bolangir can now refer patients from those areas for treatment directly to private empanelled hospitals at Raipur, and Southern districts like Rayagada, Koraput, Malkanagiri and Nawarangpur can refer patients from those areas for treatment directly to private empanelled hospitals at Vishakhapatnam. In emergency cases like cardiac arrest, road accident etc, a patient may get treatment in the empanelled private hospitals directly on emergency basis without being referred.

In the year 2019-20 (as on January 31<sup>st</sup> 2020) **4749** no's of beneficiaries have availed free treatment in empanelled Private hospitals under OSTF amount to Rs. **61.59** Crore. Beneficiaries can avail free treatment in all Government hospitals irrespective of any categories under BSKY.

Further, under OSTF eligible beneficiaries can also get the free treatment by producing estimate from the concerned hospitals outside the State especially in the hospitals of National repute. In the current financial year as on 31.01.2020, 19 patients have received free treatment in hospitals of National repute outside the State.

**CHAPTER - 4**

**Directorate of Public Health**

## CHAPTER - 4

# Directorate of Public Health

### 4.1 Integrated Disease Surveillance Programme (IDSP), Odisha

#### Background

The integrated Disease Surveillance Programme is being implemented since 2005-2006 with an objective to monitor the trend of communicable disease and early detection of outbreak so as to ensure effective response in time.

It assumes the role of State Health Control Room during natural calamities like flood, cyclone and heat wave etc.

#### Outbreak response & Investigation

- State, District & Block Rapid Response Teams are in place to respond & investigate as & when situation arises for immediate containment of outbreaks at district & sub district level.
- Daily scanning of print & electronic media is being done by Media Scanning & rumor verification cell, SSU. In 2018 out of 198 rumors investigated by Block/ District/State RRT 181 (Food poisoning-58, ADD-48, Hepatitis-41, Chickenpox-19, Measles-8, Anthrax-9, Dysentery-2 & Fever-1) were confirmed and 54% were laboratory confirmed.
- The three Govt. Medical College & Hospitals of the state are functional as three State Referral Laboratories (SRLs) & 26 District Public Health Laboratories to conduct the laboratory confirmation of epidemic prone diseases such as Cholera, Viral Hepatitis, Measles, Meningitis, Diphtheria, Dengue, Chikungunya, AES/JE, Anthrax, Leptospirosis, Scrub typhus etc.
- Water Quality is being monitored through Ortho-toluidine & H<sub>2</sub>S test kits for effective routine monitoring up to sub-district level.

#### Disaster Management & Response

- State & District preparedness activities like micro-planning for Medical relief operations, manpower deployment, supply & prepositioning of drugs & disinfectants, additional mobility support, preventive disinfection of drinking water sources, intensified IEC/BCC activities were undertaken both pre cyclone & post cyclone flood period that resulted in no major outbreak in the affected area.

#### Launching of New programme under IDSP

- Integrated Health Information Platform (IHIP) has been rolled out in 17 districts. Presently the district like Boudh, Kalahandi, Nabarangapur & Puri have been entering case based data in this platform.
- National Viral Hepatitis Control Programme (NVHCP) has been launched in the State and SCBMCH, Cuttack has been declared as Model Treatment Center (MTC) and State Laboratory.

Soon we are going to start treatment centers at DHH level.

- National Programme on Containment of Antimicrobial resistance (AMR) has been rolled out in the state along with SCBMCH, Cuttack. MoU has already been signed between Director, NCDC, New Delhi with the Dean-Cum-Principal. Training of State ToT from SCBMCH has been completed.

## 4.2 National Iodine Deficiency Disorders Control Programme (NIDDCP)

### Background:

The National Iodine Deficiency Disorders Control Programme (NIDDCP) started in our state since December- 1989. It is a 100% Central Plan Scheme. As per the Survey, 17 Number of districts of our state are found to be endemic, having goiter prevalence more than 10%.

Policy: Notification on complete Ban on Sale & manufacture of Non –Iodized salt for human consumption in Odisha was issued vide Notification Letter No. 12544/Dt. 18.10.2001.

### Major Activities:

- Salt testing kit (12890 nos.) has been procurement for determining the iodine levels in household samples, the same has been distributed to ASHAs in 17 endemic districts.
- The salt samples drawn by the Food Safety Officers from various sources are tested at State Public Health Laboratory, Bhubaneswar for estimation of the iodine content.
- Global Iodine Deficiency Disorders control Day' was observed on 21<sup>st</sup> October 2019 in the state as well as at all district level.
- At school level RBSK MHT teams of the 17 endemic districts were engaged for generation of awareness regarding the programme on 'Global Iodine Deficiency Disorders control Day' was observed on 21<sup>st</sup> October 2019.
- IEC activities: On Global Iodine Deficiency Disorders control Day on 21<sup>st</sup> of October 2019 mass media activities were taken up to create awareness regarding Iodine Deficiency disorder and its preventive measures.
- Bi- annual State Advisory Committee Meeting is organized at the state office including various Departments and all stakeholders for better implementation of the programme and ' Universal Salt Iodization' on 19<sup>th</sup> July 2019 & 21<sup>st</sup> October 2019.
- The Hotel Restaurant Association of Odisha has issued a letter to all its members to use iodized salt in the hotels and restaurants vide Letter No. HRAO/ SG/ 780 Dt.28.10.17.

## 4.3 National Mental Health Programme

National Mental Health Programme (NMHP) is implemented across all the 30 districts of Odisha. The programme components includes Capacity building of MOs, PMs, ASHAs, Targeted Interventions (District Crisis Intervention Centre (DCiC) or help desk), Life Skill Education (LSE) of high school teachers, IEC/BCC activities in electric, print and outdoor display media, ASHA incentive for referral of Persons with Mental Illness, provision of free psychotropic drugs, free diagnostics made available at district and subdistrict level for persons with mental illness. The technical support is provided by COE, Mental Health Institute, SCBMCH, Cuttack established in 2010.

### Activities at District Level

- Currently 30 DMHP Units with six categories of staffs (73/138) are providing OPD/ IPD services, follow up with Counseling services, conducting IEC/BCC activities, capacity building of MOs, PMS, ASHAs, targeted Interventions activities (District Crisis Intervention Centre (DCiC) with help desk, free drugs, Life Skill Education of teachers(LSE) etc .
- 37 MOs were trained at COE, MHI, SCBMCH, Cuttack; 46 MOs enrolled with VKN-ECHO, NIMHANS, Bengaluru provide treatment, follow up care & counseling for persons with mental illness.

- Free psychotropic drugs through 'Niramaya Yojana' made available for the persons with Mental Illness across all the districts.
- COE, MHI, Cuttack provides training to MOs and other with technical support to Districts.
- Training Module for MOs (Three months course curriculum, three days MO curriculum), PMs, LSE, Standard Operative Procedures (SOP) for DCC, prototypes for Hoarding, poster, leaflet, Mental Health Treatment card, FAQs developed by State in coordination with MHI, Cuttack.
- IEC activities such as "Manasika Sachetanata Ratha", panel discussion in electronic media dos and don'ts for disease sign & symptoms given in print media to spread awareness in community.
- During 2019, 17197 new cases provided treatment, 40331 PwMI were followed up by DMHP unit staff, 1284 cases provided indoor facility treatment, 380 cases referred to tertiary care; 117 no. of screening camps held with 10999 nos of persons identified with PWMI. 648 MOs, 5173 PMs, 1749 High school teachers were sensitized and reoriented for screening, follow up of adults and children with mental illness. 9378 ASHAs trained for case detection
- 104 Help Line is established in the state for emergency call & counseling of cases.
- The programme is monitored & supervised by Secretary Health,, DPH (O), DHS (O), Collector & District Magistrates in the STTFC/DLTFC Mt to address various issues & challenges faced during the implementation of the programme.
- State Mental Health Cell is notified by Govt. of Odisha.
- State Mental Health Authority (SMHA), State Technical Task Force Committee (STTFC committee) is actively monitoring the activity of DMHP programme.
- During 2019-20, NHM & State budget is being provisioned for all 30 districts towards Preventive and curative activities such as case screening, initiation of treatment timely referral, IEC/BCC activities, capacity building of MOs & PMs, Targeted intervention, Life skill education, District Crisis Intervention center, ASHA incentives with an aim to identify persons with mental illness, provision of free drugs and spread public awareness.

#### 4.4 National programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke (NPCDCS)

NPCDCS is implemented in all 30 districts of the State. The aim of the programme is to reduce the morbidity & mortality from the above non communicable diseases by acting upon prevention, early diagnosis, and provision of free and continuous treatment to the beneficiary at the nearest health facility and also to provide rehabilitation therapy to ensure quality life.

To have a database of the patients & persons at risk for NCD, and for carrying out satisfactory service delivery Population Based Screening (PBS) activity was going on where people above 30 years of age were being screened for Hypertension, Diabetes and 3 common Cancers in seven districts namely: Cuttack, Puri, Khurda, Sambalpur, Ganjam, Kalahandi & Rayagada and from this year this has been extended to another 8 districts so as to include all Aspirational districts, i.e. Bolangir, Dhenkanal, Gajapati, Kandhamal, Koraput, Malkangiri Nawarangpur, and Nuapada, making it a total of 15 districts.

Besides this, PBS is being conducted in the Health and Wellness Centers (HWC) of the rest 15 districts of the State and patients are being given free treatment. Opportunistic Screening for these common NCDs is also being conducted in all the Health Institutions. The total people screened this year are more than 31 lakhs of which, 1, 09,540 cases of Diabetes, 1, 33,825 cases of Hypertension, 38258 cases having both Diabetes and Hypertension, 5422 cases of CVD, 1439 cases of Stroke, 605 cases of COPD, 1229



Patients provided Dialysis Services

cases CKD, 538 cases of Oral cancer, 732 cases of breast cancer, 176 cases of cervical cancer and 2347 other cancers have been put on treatment. Out of 1, 47,798 Diabetes patients 1,287 were known TB patients and are/were on ATT, 9,934 were screened for TB and 5,910 suspected TB patients among them were referred to DMC/PHI for diagnosis. The State had achieved the conditionality for screening under PBS last year in 2018-19 and this year also Odisha has already achieved the target as per the conditionality.

For care of critically ill patients, apart from the three old Medical Colleges, 6- bedded ICU/ CCUs are functioning at the DHHs of Malkangiri, Nuapada, Bolangir Nawarangpur, Koraput, Puri, Kalahandi, Mayurbhanja, Balasore and 16- bedded in Capital Hospital, Bhubaneswar. It is planned that 6-bedded ICU/ CCU at DHH Angul, Jajpur, Bargarh, Nayagarh and Khordha will be functional soon.

Capacity building of three batches of Medical officers and two batches of Staff nurses on NPCDCS has been done. A three months training on CCU/ICU of Medical Officers and Staff Nurses has been conducted at AIIMS Bhubaneswar.

Capacity building for Medical Officers on COPD is being carried out in collaboration with PHFI.

### District Comprehensive Cancer Care Programme:

Under NPCDCS, screening for common Cancers i.e. Oral, Breast and Cervical Cancer are being conducted under Population Based Screening by ANMs trained on Cancer screening at sub center level routinely on every Thursday and in campaign mode too. More than 590 Staff Nurses and ANMs are trained in VIA screening for Cervical Cancer. More than 6000 ANMs are trained in Clinical Breast Examination (CBE) and Self Breast Examination (SBE) for screening Breast Cancer and Oral Cancer screening with incandescent light, disposable spatula and examination mirror. Till date they have identified 17,000 Oral Cancer, 7000 Breast Cancer and 33,000 Cervical Cancer cases and referred them to Tertiary Centres for confirmation of diagnosis. Cancer screening and consultation camps are organized in presence of Oncologists of AHRCC, Cuttack and Dr. Dinesh Pendharkar, Sr. Oncologist, Sarvodaya Cancer Hospital, Faridabad, Delhi. Till date more than 76 camps where 4323 suspected cancers are screened and 51 cases have been identified as new cancer patients and 1831 cancer patients are provided free consultation in different districts during 2019-20.



District Day Care Cancer Chemotherapy Centers are established in 30 DHH, RGH, Rourkela and Capital Hospital, Bhubaneswar where 47504 Cancer patients are provided consultation and 23554 Chemotherapy Cycles are administered by trained Medical Officers and Staff Nurses. District Palliative Care Programme is being managed by trained Medical Officers and Staff Nurses in integration with Day care Chemotherapy Centre in 20 districts and there is dedicated Palliative Care unit in 10 district hospitals. Till date 13221 cancer patients have received Palliative Care in these facilities. These facilities providing Palliative Care are exempted from licensing for procurement, storage and dispensing Narcotic Drugs like Morphine for pain management by Drugs Controller, Odisha.

### National Programme for Prevention and Control of Deafness (NPPCD):

NPPCD programme is being implemented in all the 30 districts. Based on the WHO report that about 6.8% of population having hearing impairment of whom 50% could have been prevented if interventions could have been made in right time, provisions of sound proof rooms with services of audiologists (RBSK) are available at District Headquarters Hospitals for screening from neonatal to elderly in all 30 Districts. A mechanism of referral from remotest villages through the health care facility network is established. With assistance from Ministry of Social Justice and Empowerment hearing aids are distributed free of cost. So far till now 621 numbers of hearing aids have been distributed free of cost from 1374 having been referred for rehabilitation. A total of 27 numbers of ENT specialists, all across the state, have been trained under this programme at SCB Medical College & Hospital- the Centre of Excellence. Procurement of specialized and specific instruments for surgical maneuvers at District level is under process.

**National Programme for Health Care of Elderly (NPHCE):**

**NPHCE** has been implemented in all the 30 districts. Provisions have been made at each District Headquarters for a special Geriatric Ward of 10 beds strength. At 7 places the wards are complete, 2 districts sites identified, in 6 districts under construction, in two districts separate wards earmarked and in 2 districts planned in integration of new construction and at other places construction/renovation is under process. Procurement of elder friendly and assisting equipments and furniture are under process. Appliances for elderly people have been given to 47 numbers. A total of 3,27,314 numbers have been provided treatment at Geriatric OPDs and from them 15,726 have availed IPD services with 46,747 numbers of laboratory services and 605 numbers of health cards distributed.

At each District Headquarters Hospital a Physiotherapy unit with trained physiotherapist has been established to provide physiotherapy assistance for ensuring quality life to elderly people. A total of 1,63,777 people have given physiotherapy services. Services offered to 60,556.

**Status and Achievement of National Tobacco Control Programme (NTCP) in Odisha:**

NTCP is being implemented in all 30 districts in Odisha. The main activities of tobacco control programme is Capacity building at Community and Institution level to create awareness about the harmful effects of tobacco use and Tobacco Control Laws, those who are using Tobacco, the cessation facilities is also available at district headquarter hospital. For creating greater awareness to general public hording & display Tobacco Awareness board has been made at district level. Various publicity campaigns have been organized at district level which includes awareness and screening of Tobacco users. The "Observation of World No Tobacco Day" has been organized in state and all 30 districts which includes rallies, street play, Workshop, awareness through traffic student volunteers etc.

Patient counseling for quitting of Tobacco use has been developed through Integrated Counseling Centre. In year 2019 more than 27000 tobacco users were counseled with a quit rate 10%. For better monitoring of Tobacco Control Laws State and district level coordination committee constituted and the Standard operating procedure for enforcement of Tobacco Control laws has been provided to all districts. Under Cigarette and Other Tobacco Product Act (COTPA) 2003 more than 5000 violators with fine realized more than 5.5 lakhs were fined for violation of COTPA in the year 2019.

Regular school and college anti tobacco awareness programme were organized at Districts with essay, debate, art, competition and creating Tobacco free school. Medical officer from districts (Dentist, Pulmonologist, NCD Medical officer) were trained at SCB Dental College, Cuttack on Tobacco Cessation. More than 3 counselors from each districts also trained on tobacco cessation.

**IEC/BCC:** IEC activities have been observed by observing the specified days for various diseases in addition to continuous efforts to create awareness by IPC and use of print & electronic media. Panel discussions were held in "Doordashan" on Diabetes, Hypertension and Cancer with experts. Also, Radio talks have been conducted on common NCDs for extensive awareness generation among all.

**4.5 National Programme for Control of Blindness(NPCB)**

Blindness is a major public health problem in India with an estimated 12 million blind persons in the country. To tackle this problem, National Program for Control of Blindness was launched in 1976 with the goal to reduce the prevalence of blindness from 1.4% (1974) to 0.3% by the year 2020 by developing eye care infrastructure human resources, improving accessibility quality of eye care services. As per the survey of 2007, level of prevalence of blindness has come down to 1.0%.

Cataract is the dominant cause of blindness as it accounts for nearly two third of blind population. The purpose of cataract surgery is to restore vision of the affected person through provision of package of services that can enable the person to gain sight and return to his normal working as before. Refractive errors, childhood blindness, glaucoma, diabetic retinopathy, low vision, ocular injury, age-related macular degeneration, Retinopathy of Prematurity [ROP] and corneal blindness are other important causes of blindness.

**Main Causes of blindness**

Cataract (62.6%) Refractive Error (19.70%) Corneal Blindness (0.90%), Glaucoma (5.80%), Surgical Complication (1.20%) Posterior Capsular Opacification (0.90%) Posterior Segment Disorder (4.70%), Others (4.19%) Estimated National Prevalence of Childhood Blindness /Low Vision is 0.80 per thousand.

**1) Cataract Surgery:**

- Cataract surgeries have been done in Govt. & NGO sector by trained Eye Surgeons out of which more than 99% are micro surgery with IOL implantation.
- Free corrective glasses have been provided to the operated patients as per need.

Year	Annual Target	Achievement
2016-17	248290	132084
2017-18	276853	132887
2018-19	276853	148982
2019-20 (upto Dec)	276853	88250

**2) School Eye Screening**

School Eye Screening programme is carried out by PMOAs posted in blocks and also by Eye Specialists at SDH/DHH level. Also children having defective vision detected by basic health workers in biannual screening programme are examined by Ophth. Assts. and referred to Eye Specialist in SDH/DHH whenever needed for better treatment.

Year	Free spectacles provided to school students	
	Target	Achievement
2016-17	34610	51245
2017-18	50000	90242
2018-19	100000	60243
2019-20 (upto Dec)	200000	25180

**3) Eye Donation**

Eye Donation activities is gradually improving in our state due to extensive community awareness activities done at state / district level and also due to good co-ordination and remuneration to NGOs.

Year	Free spectacles provided to school students	
	Target	Achievement
2016-17	34610	51245
2017-18	50000	90242
2018-19	100000	60243
2019-20 (upto Dec)	200000	25180

**4) Presbyopic correction (spectacles for near vision)**

Year	Annual Target	Achievement
2016-17	116104	70920
2017-18	116104	69992
2018-19	100000	116231
2019-20 (upto Dec)	200000	26188



## 5) Capacity building:

### Institutions:

- 183 nos. of Vision Centres have been functioning at CHCs level in the state for providing eye care services to rural people.
- One Tele-Ophthalmology Network is functioning at MKCG, Berhampur, Ganjam to provide specialist and super specialist eye care service at door step in remote areas.
- One Retina Centre is functioning at Capital Hospital, Bhubaneswar.
- One Mobile Ophthalmic Unit is functioning at DHH, Sundargarh
- 10 nos. of Mobile Ophthalmic Unit- purchase of Vans in process
- Six nos. of Eye Banks(3-Govt. & 3-NGO) are functioning in the state
- Another two Eye Banks one each at RGH, Rourkela & PRM MCH, Baripada- establishment in process
- Six nos. of Eye Donation Centres (2-Govt. & 4-NGO) are functioning in the state

### **Manpower:**

- 03 nos. of contractual Eye Surgeons are engaged.
- 50 nos. of contractual Ophthalmic Assistants have been posted in established vision centres at CHCs.
- 9 nos. of Eye Donation Counselors have been posted in DHHs (having Eye Banks & Eye Donation Centres) at Cuttack, Ganjam, Khurda & Sambalpur for carrying out Eye Donation activities.

### **Training:**

- Ophthalmic Surgeons have been sent inside and out side the State for training in sub-specialty in micro surgery like Phaco, Glaucoma, SICS, ECCE, Oculoplasty surgery and Retina etc.
- Refresher training is being imparted at zonal level to the Ophthalmic Assistants & Staff Nurses for providing better service.

### **Civil Work:**

- One 20beded Eye Ward/OT functioning at DHH, Ganjam
- Two nos. of 10 beded Eye Ward/OT (SDH, Biramaharajpur, Sonapur & SDH, Rairakhole, Sambalpur) are established.

### **IEC:**

- Every year Eye Donation Fortnight (from 25<sup>th</sup> August to 8<sup>th</sup> September) is being organised in the districts having eye banks to enhance eye donation activity and public awareness in the community.
- World Sight Day (2<sup>nd</sup> Thursday of October) is being done at state and district level.
- World Glaucoma Week (3<sup>rd</sup> week of March) is being observed every year.
- The above three event are being observed to aware the general public regarding various eye problem, its eradication and Govt. free services available.

## **SUNETRA: UNIVERSAL EYE HEALTH PROGRAMME**

Universal Eye Health Programme, SUNETRA is a state sponsored programme. The duration of the programme is for 5 years from 2018-19 to 2022-23.

The vision of this programme is to reduce preventable blindness and visual impairment by provision of better eye care service for all and by strengthening infrastructure and skill development of human resources.

**Objectives:**

Universal Eye Health Programme (UEHP) has the objective to provide comprehensive eye care to all the people of Odisha with following components

**Components/Activities**

- **School Eye Health:** All the students of Govt. schools have been undergone eye screening for refractive error and other eye problems and total no. of 41,775 students with refractive error have been provided with free spectacles.
- **Free spectacles for all:** All the people with refractory errors will also be supplied with free spectacles and 57,385 no. of free spectacles have been provided to elderly persons up to February 2020 in the state.
- **Fixed Vision Centres (Equipment):** For better eye health care delivery, Fixed Vision Centres have been established and up-graded at CHC level in a phased manner. During the F.Y.2019-20, 50 FVC are being up-graded with equipment/instruments.
- **Fixed Vision Centres (Civil construction):** For civil construction of 100 new fixed vision centres at CHCs level funds have been released to concerned districts during the F.Y.-2018 -2019 and 2019-20.
- **Mobile Vision Centres (MVC):** To provide eye care in hard to reach areas 10 mobile vision centers have been established in 10 districts with instruments and equipments in vehicles during 2018-19. In FY 2019-20, 6 new Mobile Vision Centres in 6 districts are functional in Sundergarh, Jharsuguda, Ganjam, Baragarh, Sonepur and Khorda.
- **Ophthalmic Allied Personnel Courses:** To strengthen the ophthalmic human resources of the state, 2 years Certified Ophthalmic Asst. (COA) and Certified Surgical Asst. (CSA) course have been started from 2018-19 in 4 Govt. (SCBMCH, MKCGMCH, VIMSAR, Capital Hospital) and 1 private (LVPEI, BBSR) institution and 174 nos. of students (84 nos. in 2018-19 and 90 nos. in 2019-20) are undergoing COA/CSA training.
- **Odisha Eye Disease Survey (ODESY):** Pilot study has been conducted in Khorda district in the month of August 2020 19.

**4.6 Bio- Medical Waste Management**

Biomedical Waste (M&H) Rules 1998 was implemented in Odisha since the year 2000. From March 2016, New BMW (Management) Rules, 2016 is being implemented across 1787 Hospitals (MCHs/DHH/SDH/CHC/PHC/OH). State Govt. provides funds for outsourcing of BMWM, logistics and consumables, training, Immunization, equipments & instruments (autoclaves, shredder & Microwaves), liquid waste management and outsourcing of dedicated HR at DHH, SDH, CHC for BMW work.

- Bio-medical Wastes are segregated into colour coded bins as per protocols of BMW Rules 2016 at DHH, SDH and CHCs& PHCs at the point of generation by handlers.
- BMW equipment's such as autoclaves and shredder are placed at 60 destinations (30 DHH, 27 SDH, 3 IDH) for management of biomedical waste as per protocol of SPCB in 2016. Now 1739. Biomedical Autoclave vertical (40 Litres), 1753 shredder machines (25 kg /hr), 14 horizontal autoclaves, 4 microwaves are getting supplied by OSMCL to all the HCFs.
- Dedicated outsourcing agencies at districts level collect, transport, treat & dispose the waste as per protocols laid down by BMW rules 2016 at DHH or SDH level where in autoclave and shredder machine is available.
- The OS agencies responsible for Bio-medical waste management obtain authorization from the SPCB, Odisha.
- State Govt. provides funds for out sourcing of BMWM, logistics and consumables, training, Immunization, liquid waste management and outsourcing of dedicated HR at SDH and CHC for BMW work. During 2018-19 Rs 500 lakhs have been provided.
- The solid general waste from the hospitals at DHH/SDH level is managed by municipality and NAC. However solid general waste CHC/ PHC are managed by compost pit or Gram Panchayats.

- Currently 1787 hospitals are under the Authorization administration of SPCB, Odisha. 1754 got authorisation, 33 applied for authorization.
- Further 313 MOs, 4554 Health staffs have been trained on BMWM. Annual Report and training Manual, SOP developed for BMWM as per protocol.
- HR & outsourcing of BMW: The Biomedical Waste Management is outsourced at all 30DHH, Capital Hospital BBSR, RGH Rourkela.
- A dedicated Group-D staff has been engaged through outsourcing at 27 SDH and 377 CHCs.
- Liquid waste management: Low coast Liquid waste management system is established at 32 DHH, 30 SDH and 280 CHCs.
- This year 2019-20 the budget has been raised from Rs.500lakhs to Rs.945 lakhs.

#### **Awards & Recognition:**

- 16 hospitals received kayakalpa award in 2016.
- 91 hospitals (12 DHH, 7 SDH, 26 CHC, 17 PHC, 11 UPHC) have received kayakalpa award from GOI during the year 2017.
- 182 hospitals have been awarded in the year 2018.
- SPCB, Odisha awarded Excellence award for bio- waste management to Capital Hospital BBSR and CHC Junagarh, Kalahandi for Bio-waste management.
- During 2019 Sisu Bhavan, Cuttack has been awarded with Excellence Award by SPCB.

#### **4.7 National Programme for Prevention and Control of Fluorosis (NPPCF)**

- National Programme for prevention and control of fluorosis(NPPCF) has been implemented in a phased manner in three districts namely Nayagarh, Angul&Nuapada since 2008-09.
- 1 Consultant (Nayagarh) & 1 LT (Angul) are in place.
- Surveys for detection of dental and skeletal fluorosis cases conducted in different selected villages. Free Drugs and treatment are being given for these identified cases.
- Lab services made available at district level to detect the flouride content of water and urine. IEC/BCC activities conducted in the villages/blocks of the district to upscale awareness in the community.
- Inter-sectoral convergence done with related departments like RD, H & UD & PRI etc.

#### **4.8 Vital Statistics**

Odisha is having 314 Rural Registration Units & 107 Urban Registration Units for Registrations of Birth & Death are functioning in Odisha. The Medical Officer, I/C of 314 Registration Units and the Health Officer/Executive Officer in Urban registration units area are declared as Registrars of Births & Deaths. The Medical Officers of PHCs, Area Hospitals, SDMOS, ADMO (Medical) and the Medical Superintendent/Associate Professors of 3 Medical Colleges are declared as Sub-Registrar of Births & Deaths in Odisha.

#### **Current Status:-**

Every event, i.e., Live Birth, Death, Still Birth and Infant Death occurred in the State of Odisha are registered according to the place of occurrence. Our State is having 314 Rural Registration Units & 107 Urban Registration Units. There are 314 nos. of Rural Registration Units & 107 nos. of Urban Registration Units are registering the births & deaths events through ONLINE. There are 6, 76,542 nos. of Birth events & 3, 28,799 nos. of Death events are registered during the year, 2018. And also 5, 72,493 nos. of Birth Certificates and 1, 98,774 nos. of Death certificates are provided to the beneficiaries. Further, 6,519 nos. of Still Births and 11,618 nos. of Infant Deaths are recorded during the year, 2018.

During the year, 2019 there are 4, 92,167 nos. of Birth events and 2, 58,014 nos. of Death events are registered. And also 4, 61,253 nos. of Birth Certificates and 1, 76,222 nos. of Death certificates are provided to the beneficiaries. Further, 4,075 nos. of Still Births and 6,952 nos. of Infant Deaths are recorded during the year, 2019.(The figures are provisional)

**CHAPTER - 5**

**Directorate of Family welfare**

## CHAPTER - 5

# Directorate of Family welfare

### 5.1 Reproductive Health

Odisha has made good progress under the family planning programme as per the NFHS-IV data. The Total Fertility Rate of 2.1 was achieved and has further come down to 1.9 as per the SRS 2017.

However, the total unmet need for contraception continues to be high at 13.6 percent. The modern contraceptive prevalence rate (mCPR) has plateaued during the past decade and the use of modern contraceptives among currently married women aged 15-49 years is stagnant at 45.4 percent (NFHS-IV).

The Work Plan in 2019-20 plans to cater to the needs of young people through appropriate planning and facilitation for service delivery, strengthen delivery of newer contraceptives particularly MPA/Antara and extend support towards strengthening monitoring and review mechanism in the State.

#### I. Planned activities during 2019

The government's budget for the Family Planning programme for the financial year 2018-19 is about USD 7.7 million. Funds have been provisioned for quality assurance, procurement of equipment, IEC, organizing various kinds of training programmes including skill-based training of health care providers and training of front-line workers and ASHAs. The major objectives of the work plan for 2019-20 are as follows:

1. Strengthen quality assurance mechanism for family planning services
2. Promote informed choices and access to family planning information and services with focus on young people

#### II. Details of Activities undertaken during the year 2019

During the year 2019-20 several capacity building programs have been undertaken under the NHM PIP in the State as well as the districts. These trainings includes technical trainings on Sterilizations (Induction, ToT and refresher) and comprehensive IUCD (IUCD, PPIUCD & PAIUCD) as well as trainings on Newer Contraceptives, Post-Partum Family Planning, Post Abortion Family Planning etc. Apart from the regular trainings several other trainings have been conducted which were done through SFW Cell, DFW (O) which complemented the requirements of the State with respect to the FP program. Some of these trainings are as follows:

##### A. Orientation of Statistical Investigators on Family Planning Indemnity Scheme and Supreme Court Directives on Sterilization Operation

Statistical Investigators and Dealing Assistants play an important role in collection and compilation of monthly and quarterly reports pertaining to family planning services. They are key district level

functionaries dealing with indemnity claims with respect to failure/complications/deaths due to sterilization.

They also facilitate in reporting compliance to Supreme Court's directives and settlement of Family Planning Indemnity claims. So, in order to facilitate and strengthen the process of indemnity claim settlements and improving the quality of FP quarterly reporting a one-day review cum reorientation of Statistical Investigators/Statistical Assistants was held on 22<sup>nd</sup> Feb 2019.

#### Outputs of the Workshop

The orientation of Statistical Investigators and Statistical Assistants has resulted in the following outputs:

- Quicker settlement of Indemnity related claims in districts.
- Better documentation practices.
- Increase in the number of claims settled.
- Increase in frequency of DQAC/DISC and SISC meetings, both at District and State level.



*Reporting of Deaths, Complications and Failures have increased*

#### **B. Training of PHEOs as trainers on FP for frontline functionaries with emphasis on promoting basket of choices and addressing needs of young people**

ASHAs are an important resource to reach out to the community including young and newly married people. The State government under the NHM PIP has planned to train ASHAs on newer contraceptives during sector meeting. However, they need mentoring support and it was felt that a pool of trainers needs to be created who can subsequently train the ASHAs on promoting basket of choices. Public Health Information and Education Officer (PHIEO)s were selected for the same as they can provide counseling service to women needing family planning services at the block/CHC level and they can be useful in provide training and mentoring support to ASHAs and other frontline health functionaries. Along with the PHIEOs, ADPHCOs, DPHCOs and DMRCHs were also oriented on newer contraceptives as well as basket of choices in family planning programme.

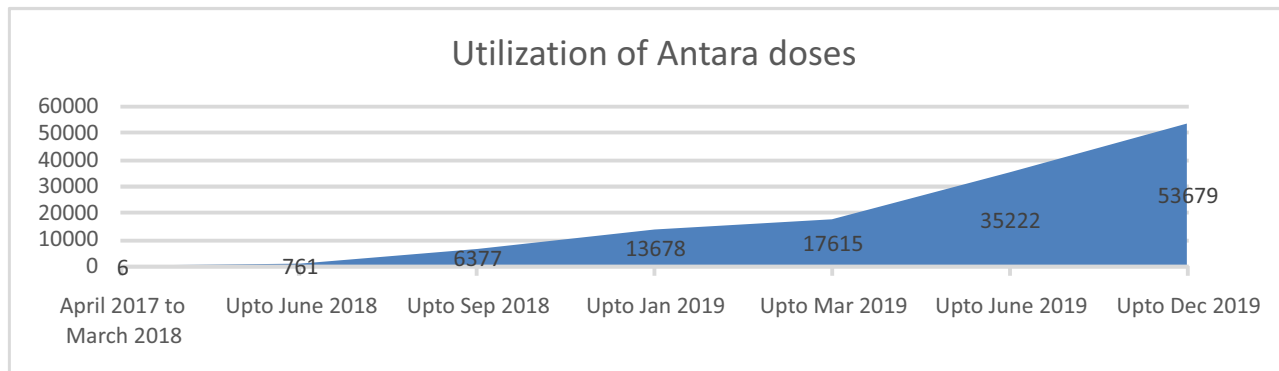
In the eight batches of ToT, a total of 372 participants were trained on newer contraceptives and basket of choice for family planning especially for young couples. Consultants from aspirational districts also attended the ToT. With the help of Community Process cell of NHM Odisha, block level roll out of the ASHA trainings was also planned immediately after the completion of the ToTs.

#### **Outputs of the Training Workshops**

The PHEIOs who having been left out of most of the scheduled trainings under NHM PIP were greatly benefitted from the trainings as shared by the participants themselves during the feedback sessions. The analysis of Post-test and Pre-Test questionnaires showed remarkable improvement in the knowledge levels of the participants. The improvement in knowledge levels as per the Pre post analysis showed improvement of the magnitude of 27(lowest-Batch No 3) to 42(Highest -Batch No 7), with an average improvement of 37 points overall.

It has also been planned that the one day out of the five-day training program for ASHAs during the year 2019-20 will be utilized for orientation on newer contraceptives where the trained PHEOs, ADPHCOs, DPHCOs, and Asst Manager ASHA will be resource persons for the entire State. Overall it was seen that

the ToTs enabled in roll out of Newer contraceptives to the community level through the ASHAs which will result in significant improvement in awareness levels as well as uptake of newer contraceptives, especially among the young couples as it is shown in the graph 1.1 below.



The ToTs had a major impact in utilization of newer contraceptives across the State as well as helping in the increase of the overall contraceptive footfall.

**C. Sensitization and observation of Family Welfare Days in urban facilities of Cuttack and Bhubaneswar for young people and MAS members**

In order to strengthen the family planning services in the urban facilities of Cuttack & Bhubaneswar and ensure the roll out of the newer contraceptives, the Directorate had organised Family Welfare Day cum sensitization workshops for young couple and mass members on Family planning services. Family Welfare Day cum sensitization workshops were held at 14 facilities in the UCHCs and UPHCs across Bhubaneswar and Urban cities. The facilities were selected on the basis of family planning achievement and community outreach of the facilities. In these one-day workshops ADUPHOs of both cities, Consultants and members of respective City Programme Management Units were present. The following is the activity plans for the sensitization workshops.



**D. Supportive Supervision and mentoring support for strengthening quality of Family Planning services**

In order to strengthen the service delivery of family planning programs, In 2019, it was planned by Directorate of Family Welfare, Odisha and UNFPA, Odisha to conduct supportive supervision visits at public health facilities and simultaneously providing mentoring support to the service providers by third party technical agencies, addressing the gaps through rounds of follow up visits and hand holding support.

The assessment and supportive supervision were planned to synergist in roll out of newer contraceptives in public facilities, provide support for supply chain management and generates evidence on quality of family planning services. The assignment aimed at providing inputs for sustained use of modern contraceptives and strengthening the family planning program to a higher level.

During the assignment a total of 9 districts were covered namely Keonjhar, Dhenkanal, Deogarh, Bhadrak, Balasore, Cuttack, Ganjam, Malkangiri and Rayagada. From each district two Community Health Centre (CHC) or higher-level health facility were selected randomly. The selection of facility was based on the distance i.e. one from the near and the other far from the headquarter hospital in consultation with the district authorities. Two Primary health Centres (PHCs) from each CHC was selected randomly for PHC level assessment. Two Sub-centers (SCs) from each PHC was selected randomly for SC level assessment. Thus, from each district 2 CHCs or higher-level facilities, 4 PHCs and 8 SCs were covered. In total 28 DHH/SDH/CHCs, 35 PHCs and 62 SCs were covered.

The supportive supervision visits were carried out in three phases. In Phase I baseline information was collected regarding the ongoing family planning services, specifically on four major aspects i.e. facility audit, quality of family planning services, KAP of the service providers, and functioning of the District Quality Assurance Committee (DQAC). Phase II was intended to monitor and mentor the shortcomings in the provision of family planning services found in the phase I through advocacy and providing handholding support to the service providers. In Phase III the improvement in the quality of family planning services was assessed along with providing necessary support to bridge gaps if any.

#### **E. Dissemination of Standard Operating Procedures for prevention and management of complication post sterilization operation**

A one day dissemination workshop of Standard Operating Procedure for operating surgeons on management of post-operative sterilization complications was organised by this Directorate at Hotel Kalinga Ashoka on 9<sup>th</sup> December 2019 at 11: 00 A.M under the chairmanship of Dr Samir Kumar Das, DFW (O), and in presence of Prof. Dr Purna Chandra Mohapatra, Former HOD O &G, SCB MCH, Cuttack, Dr Ajit Kumar Mohanty, DPH (O), Dr Deepa Prasad, State Programme Co-ordinator, UNFPA. Forty-five empanelled operating surgeons from 29 districts of Odisha participated in this workshop.



The brief overview and objective of the SOP dissemination workshop is shared by Dr. Deepa Prasad, SPC, UNFPA. In the first technical session Dr Ajit Kumar Mohanty, DPH(O) discussed on the need for SOP, General guiding principles, Essential tasks at Admission, Pre-operative Procedures, Discharge and Follow up, Complications and PIMR (Prevention Identification Management Referral) protocols and highlighted on reasons behind complications based on the analysis of death audit reports, outlined accountability and appropriate actions to be taken during complications.

The second technical session taken by Dr Purna Chandra Mohapatra, former HOD O &G, SCB MCH, Cuttack. Dr. Mohapatra discussed about the complications during Sterilization operation, Complication Management and preventions and precautions to be taken to avoid complications. Followed by the technical sessions an open house session was held and key issues pertaining to quality of sterilization operations and management were discussed.



**F. Other activities: IEC/BCC activities during Population Fortnights and strengthening of Supply chain system.**

During 2019 a number of resource and communication materials have been developed and printed for supply to the facilities to be used for IEC/BCC activities. These materials were used during the population fortnights and during Family Welfare Days. Apart from the posters and banners sterilization consent forms, registers, cards, case sheets and Family Welfare Bulletins have been developed and printed for wider use.



**5.2 MATERNAL HEALTH**

- **First Referral Unit: 74 FRUs** are providing C section services out of 94 FRUs. **Specialist manpower with Blood Banks (51)** and **Blood Storage Units (44)** are also operational.
- **Delivery points:** State has target of 1190 delivery points of which **530** institutions are functional and steps have been taken for functionalizing remaining DPs.
- **Janani Surakya Yojana (JSY):** Total **68,15,420** number of beneficiaries benefitted under JSY (from 2005-06 till **2019-20- upto 3<sup>rd</sup> Quarter**). Due to JSY the institutional delivery has increased from 28.8 % in 2005-06 to 85% in 2015-16 as per NFHS-4.
- **Janani Shisu Surakshya Karyakram(JSSK)** – Free services which include free drug, blood, diagnosis, diet & referral services are provided to all pregnant women and sick newborn and infants (upto 1 year) through implementation of, Janani Shisu Surakshya Karyakrama at public health facilities. **27,27,105** pregnant women and sick infants have availed free referral transport services through 102/108.
- **Skilled Attendant at Birth (SAB)** training was given to the Paramedics and AYUSH doctors to augment the institutional delivery. These SAB trained staffs are posted in the identified delivery points in priority basis. During the year 2019-20 (Till-Dec 2019), 211 HW(F) & LHV and 176 Staff Nurses and 29 AYUSH doctors were trained in SAB.
- During 2019-20 (By Dec 19), **4** have been trained in LSAS & **165** doctors in Basic Emergency obstetrics care (BEmOC). Till date, in Life saving anesthesia skill (LSAS) **160** doctors have been trained, Emergency obstetrics care (EmOC) training has been given to **38** doctors, & Basic Emergency obstetrics care (BEmOC) training given **1261** nos. of Medical Officer for operationalization of L3, L2 & L1 institutions.
- **Maternal death review (MDR) committees** are formed at State and district level to review the maternal death. During 2019-20, **471** nos. of maternal death have been reported by October 2019 and out of that **204** nos. of death are reviewed by Collector cum DM and **381** nos. of death reviewed by CDM&PHOs of the district.

- **Safe abortion care services:** Out of 1078 targeted institutions, **338** facilities are in readiness for providing CAC service in the state. During 2019-20 Till December 2019 :
  - ♦ 12 days certification training given to **33** doctors and **33** staff nurses.
  - ♦ 3 days refresher training given to **28** doctors and **26** staff nurses.
  - ♦ 3 days TOT (master trainer) given to **5** doctors and **2** staff nurses.
- **Village Health & Nutrition Day:** Fixed day health & Nutrition day (VHND) is being organized every Tuesday / Friday at village Anganwadi centers. So far **429487 VHND sessions** held out of 422889 planned (98%) during 2019-20 (Up to December-19).
- **Standardization of labour room.** State is taking steps for standardizing Labour room as per MNH tool kit and New labour room guidelines. Further under DAKSHATA programme 19 districts are given focused attention for improving infrastructure and practice in 222 labour rooms. After Dakshata initiative it is observed that the skill and knowledge of service providers of Labour Room have improved.
- **LaQshya :**Under this programme the LR & MOT will be standardized for providing quality care services. This will put focus on improvement of infrastructure providing respectful maternity care and ensuring regular supplies to labour room & Maternity OT. The target is set to standardize all Medical Colleges & FRUs as prospective target. During the year 6 facilities (5 DHH and 1 CHC) had been certified under LaQshya at State and National level.
- **Maternity Waiting Homes (Maa Gruha)** The Maa Gruha are established near to delivery points to accommodate the expected delivery cases from difficult geographical pockets at least before 7-10 days of Expected Date of Delivery for having safe institutional delivery. Maa Gruha not only provides facilities of temporary rest shed but also a home with counseling services to mothers on personal hygiene, family planning measures and new born care etc. So far **80** MWH are operational out of **106** targeted.
- **Initiatives for Anaemia Control:** IFA & Calcium Supplementation - About 7 Lakhs Pregnant women covered during 2019-20. Inj. Iron sucrose & Blood transfusion services- made available at Institution level for pregnant women with severe anemia. One time de-worming of all pregnant woman ensured during pregnancy in second trimester.
- **PMSMA :** This programme focused on screening of antenatal cases by doctor preferably O&G specialist at least one during 2<sup>nd</sup> or 3<sup>rd</sup> trimester. This activity is implemented in 9<sup>th</sup> of every month on fixed day basis. PMSMA also encourages participation of private practitioner. All the facilities in the level of CHC and above are implementing this programme as per mandate. The prime objective of the programme is to screen for high risk pregnancies and initiate its management as appropriate. During the year 2019-20 upto December 2019, **608092** nos. of antenatal cases have been screened and **30642** high risk pregnancies detected. These detected high risk cases are provided with Red Card as a symbol of high risk for priority treatment as per advice of doctor, which is further tracked by the service provider.



### 5.3 Child Health

Odisha has been working towards reducing its child mortality rates as a priority focus through various programmes & strategies. The neonatal mortality rate in Odisha remains to be a major concern. As per the latest Sample Registration System reports, the neonatal mortality rate of Odisha is 32 per 1000 live births and that of India is 23 per 1000 live births. Similarly, infant mortality rate (IMR) of Odisha is 41 per 1000 live births (2017) and that of India is 33 per 1000 live births; and the U5MR is 47 per 1000 live births against the National U5MR of 37. Keeping that in view, it is also observed that the rate of reduction of IMR in the State is highest in the country.

Major interventions undertaken through NHM for the reduction of infant and under-five mortality in the State are as follows:

- New Born Care Corner (NBCC):** For preventing mortality and brain damage immediately after birth, 560 Newborn Care Corners are established at all functional delivery points, i.e. Labor rooms & OTs to provide essential newborn care & resuscitation immediately after birth (Progressive Target: 1190). Up to Sep. 2019, 16547 newborns have been resuscitated (8% of all live births) and 11704 newborns (5% of all live births) have been referred to higher facility for further treatment.
  - New Born Stabilization Units (NBSU):** For treatment of moderately sick & low birth weight newborns and for stabilization of sick newborns prior to referral, 45 Newborn Stabilization Units are currently operational in the State, which are being upgraded to Special Newborn Care Units (SNCU) in a phased manner, based on the case load. The State has planned to upgrade 3 such NBSUs into SNCUs within 2019. Up to Dec. 2019, out of 5486 Newborns, 3328 (61%) have been treated at NBSU and 1692 (31%) have been referred to SNCU for appropriate treatment.
  - Special Newborn Care Units (SNCU):** The State has established 40 out of 45 Special Newborn Care Units (SNCU) for treatment of severely sick newborns at different medical college & hospitals, district headquarter hospitals, sub-divisional hospitals & selected CHCs based on the annual delivery load. Further, 5 new SNCUs are under process. Besides, the bed capacity of 12 existing SNCUs has been increased in view of the enhanced case load. During 2019-20 till Dec. '19, out of 49547 (99.7%) sick newborns have been treated and 74.6% have been discharged successfully after due treatment.
- 
- SNCU**
- Kangaroo Mother Care (KMC) Units:** KMC units have been established in all 40 SNCUs adjoining the SNCU for providing Kangaroo Mother Care to low birth weight & sick newborns, i.e. for maintenance of warmth and promotion of early initiation of breastfeeding through skin-to-skin contact with special focus on preterm, LBW and sick newborns. 24.3% of stable sick newborns admitted in SNCU have been provided KMC in 2019-20, till Dec. '19.
  - Home based new born care (HBNC):** All ASHAs have been trained for making home visits to newborns for early identification and referral of newborns with danger signs and providing counselling to caregivers on home based newborn care. During 2019-20, till Dec. '19, 4,01,185 newborns have been visited under HBNC programme, of which, 10% of newborns were reported as low birth weight (LBW) and 91% of identified high risk newborns were referred for appropriate treatment.
  - Intensified Diarrhoea Control Month (IDCM):** An intensified diarrhoea control fortnight is held every year from 2015 during the monsoons, where prophylactic dose of ORS is distributed to each under five child in order to prevent any death due to

childhood diarrhoea. However, during 2018, the campaign was modified to cover each household and a prophylactic ORS packet was distributed by ASHA to each household for prevention & control of diarrhoea in both adults & children. During the campaign, ASHA made home visits to each household in her area and counselled the mother/caregiver on preparation of ORS with demonstration, danger signs and when to seek help in case of an incidence of Diarrhoea. Besides, ORS corners are established at all facility level to address any diarrhoeal case as well as counsel parents/caregivers on ORS preparation & treatment and a special zinc awareness campaign was taken up to increase the utilisation of zinc during diarrhoea. In the 2019 round, 66% under five children & 67% households were distributed with prophylactic ORS packets. Further, 99% under five diarrhoeal cases were treated with ORS and 92% adult diarrhoea cases were treated with ORS.

- **National Newborn Week (NNW):**

A week of dedicated IEC activities was carried out during November 15<sup>th</sup> to 21<sup>st</sup>, 2019 for awareness generation on newborn care at home. Besides, ASHAs, ANMs and AYUSH MOs made visit to newborns and counselled caregivers on newborn care. 9264 newborns were visited by ASHA and 75238 mothers were counselled by the ASHA in group meetings.

- **India Newborn Action Plan (INAP):**

Under the India Newborn Action Plan (INAP), all newborns are to be administered with Vitamin K1 for preventing the newborn deaths occurring due to vitamin K deficiency bleeding disorders. During April to Dec. 2019, 81% of all live births in the State were administered with Vitamin K1.

Similarly, INAP also advocates administration of antenatal corticosteroids to all pregnant women identified with preterm labour, in order to prevent newborn deaths occurring due to respiratory distress syndrome. Till December 2019, mothers of 12% of all preterm newborns were administered with antenatal corticosteroids in the State.

- **Child Health Review (CDR):** Child death review has been implemented in the state during 2015-16 under which committees have been formed at State and District level for detailed review and analysis of each under five child death and taking necessary corrective actions. During 2019-20, till Oct. '19, 8835 child deaths were reported and reviewed at district level for taking corrective actions.

- **Trainings and capacity buildings:** In view of effective and efficient services the trainings are being provided to concerned personnel at various levels.

- Skill Based training-
  - ♦ State, District & Sub District level NDD training completed and implementation started.
  - ♦ Facility based IMNCI training & Facility Based Newborn Care (FBNC) training conducted at State level for Staff Nurses and Medical Officers.
- Knowledge based training
  - ♦ Knowledge based CME through VC and telemedicine hub is organized from time to time.
  - ♦ Orientation of AYUSH MOs on Community Based CDR for conducting verbal autopsy completed at State level.
  - ♦ Orientation of IMA & IAP members on their roles & scope of involvement during IDCM campaign

#### 5.4 Rashtriya Bal Swasthya Karyakram (RBSK):

**Rashtriya Bal Swasthya Karyakram (RBSK)** is a National Flagship Programme under NHM rolled out in Odisha since March-2014 which aims to cover 1.07 crores of children from **Birth till 18** years under its domain. The Programme targets at identification and treatment of 38 health conditions to be addressed through '4D' approach which includes **Defect at Birth, Deficiencies, Childhood Disease and Developmental Delay & Disabilities**.

**Screening of 0-18 Years children at AWC, School & +2 Junior Colleges:**

- 630 number of **Dedicated Mobile Health Teams** are being engaged to screen 0-18 years children which **consists** of 4 member : 1 AYUSH MO Male, 1 AYUSH MO Female, 1 SN/ANM, 1 Pharmacist
- The team **visit** at least once in a year to Non-Residential Schools, Twice to AWCs & quarterly to the Residential Schools.
- Under RBSK, New Born hearing screening of all new born at District Hospital & SNCU discharge babies are initiated at DEIC.

#### **Early Intervention Services through District Early Intervention Centers (DEIC):**

- District Early Intervention Centres (DEIC) s are functional at 29 DHH for children seeking special care (secondary & tertiary care). A team of professionals from different specialities (MO MBBS, Paed. Specialist, MO Dental, Physiotherapist, Audiologist, Optometrist, Psychologist, Special Educator, Dental technician, etc are engaged for providing special treatment and therapeutic services. During 2019-20, total 76,48,603 **Children screened and 2,48,520 treated**.
- **Under 4D approach during 2014- 2019**, total 25,21,139 number of identified children have been treated under RBSK at Primary, Secondary and tertiary facilities.

### **5.5 Rashtriya Kishor Swasthya Karyakram (RKSK)**

Adolescents are young people in the age group of 10-19 years. As per Census 2011, adolescents comprise nearly one-fifth (20.9%) of India's total population. In Odisha adolescents constitutes 82.74 lakhs (20%) of total population. Thus, to address different health needs of adolescents, RKSK programme was launched in January 2014 at New Delhi.

The program approaches are as follows:

#### **Adolescent Friendly Health Clinic:**

- In Odisha known as Shraddha clinic. 252 Shraddha clinics are Operational covering all 30 districts in DH, SDH and some designated CHC level. Total 44,866 adolescents received different adolescent health services through Shraddha clinic till up to 2<sup>nd</sup> Qtr of 2019.

#### **Peer Education:**

- The PE programme aims to ensure that adolescents or young people between the ages of 10-19, years benefit from regular and sustained peer education covering nutrition, sexual and reproductive health, conditions for NCDs, substance misuse, injuries and violence (including GBV) and mental health .
- The program implemented in four districts (Dhenkanal , Bolangir, Bhadrak & Koraput) and has been rolled out covering 5901 villages in 43 blocks. Bhadrak and Koraput added newly in 2019-20.
- Total 28620 Peer Educators targeted to select in all four districts and out of which 22820 Peer educators selected through Gaon Kalyan Samity with active involvement of key stakeholders.
- In Dhenkanal and Balangir 420 batches of 6 days Peer Educator training completed in 2018-19 & 19-20

#### **Adolescent Health Day(AHD) :**

- Currently implemented in 4 districts as a pilot (Dhenkanal, Bolangir , Bhadrak & Koraput) . In each village quarterly AHDs are organized to sensitize adolescents, parents and other stakeholders on adolescent health issues. 5070 AHDs conducted in Dhenkanal and Balangir up to 2<sup>nd</sup> Qtr.
- Menstrual Hygiene Scheme (MHS): The channel of interventions is mainly through social marketing of sanitary napkins by ASHA. Adolescent girls can purchase sanitary napkin (Rs.6/-pkt) from ASHA. In Odisha the sanitary napkin packet branded as "Khushi". Total sanitary napkin packet sold: 60, 50,503 pkt up to 1st qtr of 2019-20 and more than 18 lakh girls reached through the programme.
- **The Weekly Iron and Folic Acid Supplementation (WIFS) :** The IFA distributed at schools and AWCs on weekly basis. 35728 schools and 71306 AWCs targeted under the program and the consumption as per reported coverage is 31% up to 2nd qtr of 2019-20.

## Routine Immunization

Immunization is one of the most cost effective interventions for disease prevention. Traditionally, the major thrust of Immunization services has been the reduction of infant and child morbidity and mortality. Vaccines in Routine Immunization are one of the most cost-effective health investments. The benefit of quality vaccination is not only in the prevention of diseases and disabilities but also the opportunity for a healthier & a more productive life. To maintain the quality of vaccination efficient supply chain management & Cold chain management is highly essential to ensure that cold chain equipment is functional, storage temperatures are correctly maintained & recorded and that adequate stock of vaccines & logistics are available & issued in time.

The State of Odisha has 1 State Vaccine Store, 9 Regional Vaccine stores & 32 District Vaccine stores & 1141 Cold chain points all across the State which targets to 9,24,501 Pregnant women & 7,88,805 infants through Routine Immunization. Every year, 3,52,082 numbers of sessions are being conducted every year to vaccinate the target beneficiaries.

The State is providing immunization services to children & pregnant women to prevent 11 vaccine preventable diseases i.e. as per immunization schedule Govt. of India, through fixed immunization day approach (In Wednesday). In addition to this, integrated VHND & RI sessions are being conducted in identified hard to reach villages under SAMPURNA strategy.

Odisha's Full immunization coverage as per different surveys.

- Annual Health Survey 2010-11 – 55 %
- Annual Health Survey 2011-12 – 62.3 %
- Annual Health Survey 2012-13 – 68.8 %
- National Family Health Survey 2015-16 – 78.6 %
- Integrated Neonatal & Childhood Survey 2016 – 83.8%

### Measles Rubella (MR) Vaccination Campaign –

- MR vaccination campaign was conducted from 29<sup>th</sup> January 2018 to 6<sup>th</sup> April 2018 in the State to vaccinate children in the age group of 9 months to 15 years. During the campaign, 1,10,34,348 (98.3%) children were vaccinated against a target of 1,12,25,176.

### Special Mission Indradhanush drive in 388 villages of 25 districts under GSA:

Spl. IMI drive was conducted in 388 villages of 25 districts from **April to June 2018**

- No of children targeted : 3489
- No of children vaccinated: **3365 (96.4%)**
- No of pregnant women Vaccinated: **386**

### Mission Indradhanush drive in 10 Aspirational districts under Extended GSA:

Spl. IMI drive was conducted in GSA & Non-GSA villages of 10 districts

from **July to September 2018**

- No of children targeted : **116,748**
- No of children vaccinated: **1,17,789 (100.8%)**
- No of pregnant women Vaccinated: **29,753**

### Intensified Mission Indradhanush (IMI) 2.0 Drive in Six Districts from Dec`2019 to March`2020.

- No of children targeted : **10,560**
- No. of Children Fully Immunized : 3573
- No. of Children Completely Immunized : 4289



**Activities under taken for success of Mission Indradhanush drive:**

- Steering committee meeting was conducted before each mission Indradhanush drive under the chairmanship of the Chief Secretary
- State Task Force meeting was conducted before each round of MI drive under the chairmanship of the Commissioner-cum-Secretary
- District task Force meeting was held for each round under the chairmanship of the District magistrate
- VC with Collectors was done prior to the campaign
- Adequate IEC activities were conducted for success of the drive.

**Japanese Encephalitis Vaccination Campaign in 7 Districts 11<sup>th</sup> Nov to 21<sup>st</sup> Dec 2019**

JE Vaccination Campaign was conducted in 7 districts i.e, Angul, Bargarh, Bhadrakh, Boudh, Balangir, Jagatsinghpur & Nayagarh & 1943415 children in the age group of 1 year to less than 15 years were vaccinated. Immediately after the campaign JE Vaccine was being included in Routine Immunization Programme in those 7 districts. Presently JE Vaccination is being given in 24 districts of the State.

**Electronic Vaccine Intelligence Network (eVIN) –**

- eVIN has been rolled out in all cold chain points of Odisha since January 2017. Now State is managing vaccine logistics supply chain till last mile & able to minimize stock out instances, wastage rate & able to manage the temperature in all the cold chain equipments of the State.

**Effective Vaccine Management Assessment (EVM)**

- EVM was conducted 30th October to 3rd November 2018 in SVS (1), RVS (8), DVS (32) and Cold Chain Points (62). Training of assessors was done from 25th to 29th October 2018. 32 teams were formed involving National level officials from NCCVMRC, State/District officials, Govt. Medical College, AIIMS, Bhubaneswar and Development partners.

**Td Vaccination week**

- Td vaccination week was conducted from 1<sup>st</sup> September to 15<sup>th</sup> September (7 working days) in all the districts to vaccinate children aged 10 year & 16 year. In the said campaign 6,66,127 nos. of 10 year children & 6,19,631 nos. of 16 year children have been vaccinated.

**Coverage report of 2019-20(April 2019- December 2019)**

Antigen	Achievement
TT/Td (pregnant women)	68.6 %
BCG	80.2 %
OPV 3 <sup>rd</sup> dose	83 %
Pentavalent	82.2 %
MR	83.1 %
IPV	77.5 %
Rota Virus Vaccine	77 %
Full Immunization	83 %

**Source HMIS**

## 5.6 NUTRITION

The state has been adopting diverse Nutrition program interventions are as mentioned below :

**I. Promotion of Infant and Young Child Feeding practices** for preventing under-5 child death (through community & facility based interventions by – Capacity building of ANMs/ASHA/AWW on IYCF/Mothers' Counselling on Breast feeding & Complementary feeding)

Facility /Community level initiative for various training and IEC activities on:

- Initiation of Breast feeding within one hour of Birth
- Exclusive Breast feeding up to six months
- Complimentary feeding practices and age appropriate diverse foods from six months of age
- Continuation of Breast Feeding up to 2 years or more.

### Coverage :

#### Under MAA Programme

- 148 Master trainers are trained on MAA in 7 days state level TOT .
- 137 batches of MAA training in 30 districts is completed till July. 2019, in which 1051 doctors, 140 counsellors 2010 SNs and 346 ANMs trained of Infant and Young Child Feeding practices and improved counseling skills.
- A programme on improving IYCF with special focus on complementary food and feeding practices started in 4 focused districts (Rayagada, Koraput, Nabarangpur, Keonjhar)

#### **II. National Iron Plus Initiatives (Anaemia Control Programme)**

National Iron Plus Initiative (NIPI) programme, an anaemia control programme, has been implemented across the state by Health and Family Welfare Dept. in coordination with School and Mass Education Dept. (S&ME Dept.), Women & Child Development Dept (WCD Dept) and ST & SC Development Dept.

#### **1. This programme is catering to the following beneficiaries:**

- Children 6 months to 5 years age group: IFA syrup (1 ml contains 20 mg elemental iron and 100 mcg Folic Acid) are administered by ASHA bi-weekly (Tuesday & Friday).
- Children 6 to 10 years age group: WIFS Junior (Pink Tablets), IFA tablets (45 mg elemental iron and 400 mcg Folic Acid) are administered on Monday by teachers to children in class 1 to 5 at all Govt. & Govt. Aided schools.
- Adolescents (10 to 19 years age group):
  - For School going Adolescents: WIFS (Blue Tablets), IFA tablets (100 mg elemental iron and 500 mcg Folic Acid) are administered on Monday by teachers to adolescents in class 6 to 10 at all Govt. & Govt. Aided schools.
  - For Out of School Adolescent Girls: WIFS (Blue Tablets), IFA tablets (100 mg elemental iron and 500 mcg Folic Acid) are administered on Saturday to adolescents girls at Anganawadi Centres by AWWs.

#### **State Coverage:**

Year	In School	Out of School	Total
2016-17	41.95%	43.93%	42.62%
2017-18	40.54%	48.61%	42.44%
2018-19	27.71%	36.72%	29.83%



### III. NRC / Facility based Interventions for management of Severely Acute Malnutrition (SAM) Children

- A Nutrition Rehabilitation Centre (NRC) is a unit for the management of severely acute malnourished children- Children admitted with defined admission criteria who are referred by from VHND and RBSK teams
- Children kept under observation and provided with medical and therapeutic care
- Focus on improving the skills of mothers on complete care and feeding.

#### State Coverage

Year	No. of NRC Functional	No. of Admission	Discharge with 15% weight gain	% of Recovery
2015-16	45	6765	5292	78%
2016-17	54	8864	7332	83%
2017-18	60	8371	7218	86%
2018-19	64	9576	8352	87%

### IV. Vitamin-A supplementation

Children of age group 9 months-5 years receive Vitamin – A supplementation biannually along with Routine Immunization in total of 9 doses are administered to the children <5.

#### State Coverage:

Year	1 <sup>st</sup> Round	2 <sup>nd</sup> Round
2017	91.4%	92.5%
2018	95.5%	97.8%
2019	94.3%	94%

Vit-A programme is going on from 5<sup>th</sup> February -2020. Vit-A solution shall be administered at all R.I. session sites and Special VHNDs during the campaign month (February-2020)

### V. National Deworming Day(NDD):

- Administered with Albendazole at AWC and Schools.
- It is a fixed day approach with a mop up day to cover left outs due to absenteeism or sickness
- Started since February, 2016 & conducted biannually in February and August every year

#### State Coverage:

Year	1 <sup>st</sup> Round	2 <sup>nd</sup> Round
2017	87%	90.5%
2018	92.41%	93.34%
2019	93.76%	94.66%

NDD-February-2020 round held on 10<sup>th</sup> February – 2020 and MoP Up day observed on 17<sup>th</sup> February – 2020 in 27 districts except 3 LF MDA districts (Angul, Ganjam, Bhadrak)

**Odisha State Strategy for accelerated reduction of Maternal & Infant Mortality “SAMPURNA”**

❖ **Background :**

Reduction in maternal and infant mortality is one of the major challenges of the health system in Odisha. With several efforts from the State under the RMNCH+A programme, it has been observed from the Sample Registration System (SRS), that there has been a decline in the State Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR) over the years. However, the current decline is not sufficient to achieve the 12<sup>th</sup> five year goals. Hence, to ensure the survival of mothers and children in the State, the State Government designed to develop a focused strategy for accelerated reduction of MMR & IMR i.e. “SAMMPurNA”. The State aims to achieve an additional 30% decline from the current rate of decline. There are 15 focused districts Identified considering various indices like the districts of KBK , KBK+, Tribal districts and also high API in Malaria . The districts are Bolangir, Boudh, Deogarh, Gajpati, Kalahandi, Kandhamal, Keonjhar, Koraput, Malkanagiri, Mayurbhanj, Nawarangpur, Nuapada, Raygada, Sonapur and Sundergarh. The following strategies are being undertaken under the domain of “SAMMPurNA”



❖ **Objective:**

- The State aims to achieve an additional 30% decline in State Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR) from the current rate of decline.
- Provision of good quality care to pregnant women & children for their survival by identifying high risk cases, referral and management.

❖ **Strategy :**

**1. Special VHND & Routine Immunisation :**

Special VHND and R.I sessions are conducted at difficult areas. This being a potential platform where different health services are provided to Pregnant Women and children along with identification of high risk pregnant women and high risk children and referral to higher institution for better care.

**Total No. of session planned during 2019-2020 :11138& held-10830 upto Dec 2020**

**2. Red Card:**

**Identification of high risk (high risk due to geographical & also clinical)** Any pregnant mother or kid belonging to such areas is declared as “**high risk**” and enjoy the facility of transportation and provision of red card. If clinically declared high risk, apart from admission, mechanism exists for referral to higher institution as deemed fit for better management of the case.

Red card issued to high risk mother during **2019-2020:- 6022 upto Dec 2020**

Red card issued to high risk children during **2019-2020:- 7636 upto Dec 2020**

### 3. Difficult to reach villages:

Identification of difficult villages i.e which villages are not accessible by 102 or 108 or any four wheeler vehicles. Identification of such difficult villages are to be done by the concerned district every year with approval of the Collector & DM of the respective district.

- Nos of difficult villages identified in the state during 2018-19 **6303** & during 2019-20 -- **5859** Nos.

### 4. Joint Home Visit:

All identified high risk pregnant woman will be the target beneficiaries those will be given home visit as per the contact schedule. High risk cases mean all the clinical and geographical high risk cases. Follow up of pregnancies through home visits is one the challenging activities at the community level which is to be done jointly by HW (F) along with MPHS (F)/(M). **27,559** Nos of Joint Home visit conducted upto Dec 2020



Difficult to Reach Area

### 5. Birth preparedness:

Birth preparedness plan and couple counseling are done with the help of the couple counseling booklet supplied to all 30 districts of the State.

### 6. Alternative Transportation facility:

- a. **Stretcher:** Light weight stretcher being one of the alternative means of transportation to carry the pregnant mother from a difficult village to nearest motor able points from where she can be transported to the appropriate facility or maternity waiting home. **4813** No. of stretchers provided to Gaon Kalyan Samiti (GKS) : & **402** Nos. of pregnant mother availed stretcher facility .
- b. **Bike Ambulance:** Provision of bike ambulance is being implemented for transportation of pregnant women where four wheeler are not accessible.



**7. Free diet:**

Free diet to pregnant mother including one attendant, who reside at Maternal waiting home, before their E.D.D to facilitates safe confinement. Also diet for children below five years of age.

**8. Reimbursement of transportation cost to pregnant women from difficult villages:**

Provision for reimbursement of Rs. 1000/- (Rupees one thousand) only per pregnant woman from difficult villages towards transportation cost to nearest motorable point/ hospital. **5331 Nos.** of pregnant women received transportation cost upto Dec 2020.

**9. Drop back services:**

Free drop back transport services to pregnant women and sick infant. DBT (Cash incentive) of Rs 500/- is to be given to pregnant women after institutional delivery and sick infant treated at public facilities. **230982 Nos.** of pregnant & **9796 Nos.** of Sick Children women received Drop back services upto Dec 2020.

**10. Non-pneumatic anti shock garment** to prevent PPH to be provided both at FRU and Ambulances. **100 Nos.** of supplied to 15 SAMMPurNA District upto Dec 2020.

**11. Establishment of High Dependency Unit ( HDU ) & Paediatric Intensive Care Unit ( PICU ):**

a. **High dependency unit** is an area in a hospital where patients can be cared more extensively than in a normal ward, but not to the point of intensive care. So it is also known as intermediate care unit. Presently 3 Nos. of HDU at VIMSAR Burla, SCB MCH ,Cuttack & DHH Kandhmal is functional .

b. **Paediatric Intensive Care Unit(PICU):** Paediatric Intensive Care Unit (PICU) is a specialized area of the Hospital specifically designed, staffed, located, furnished, equipped and dedicated to the management of critically sick patients, injuries or complications. . Presently 5 Nos. of PICU at VIMSAR Burla, MKCG MCH , Berhampur & DHH Kandhmal, Capital Hospital Bhubaneswar, SVPIG Cuttack is functional

**12. Provision of disposable delivery kit** to S.Cs having more than 20% home delivery for safe home delivery.

**13. Provision of resuscitation Kit** to SBA & NSSK trained ANM for management of birth asphyxia in home delivery setting. **1253 Nos.** of resuscitation Kit supplied to SAMMPurNA District.

**14. IEC-BCC :**

a. Branding of VHND sites and pickup points

b. Development of flip books for group counseling at VHND session.

**15. Disposable draw sheets & gowns:** Disposable draw sheets & gowns are indispensable for maintaining clean surface for delivery whereas disposable gown for pregnant women helps in maintaining personal hygiene during delivery. Both items are supplied and utilized in the labour room.

## 5.7 EQUITY & ADVOCACY

### Gender Based Violence & Child Protection

**Gender-Based Violence** means acts of physical, sexual & psychological violence or any injury to reputation & property of individuals or groups of individuals on the basis of their gender. It includes violence such as rape, sexual assault, domestic violence & dowry related violence etc. committed against women and girls.

The roll out workshop on Comprehensive Health Sector Response to Gender Based Violence was organized at Bhubaneswar on 29<sup>th</sup> November 2014.

Standard Operating Procedures (SOP) for coordinated response to address Gender Based Violence (GBV): Received Gazette Notification issued vide notification no.25175 dated 28.11.2016.

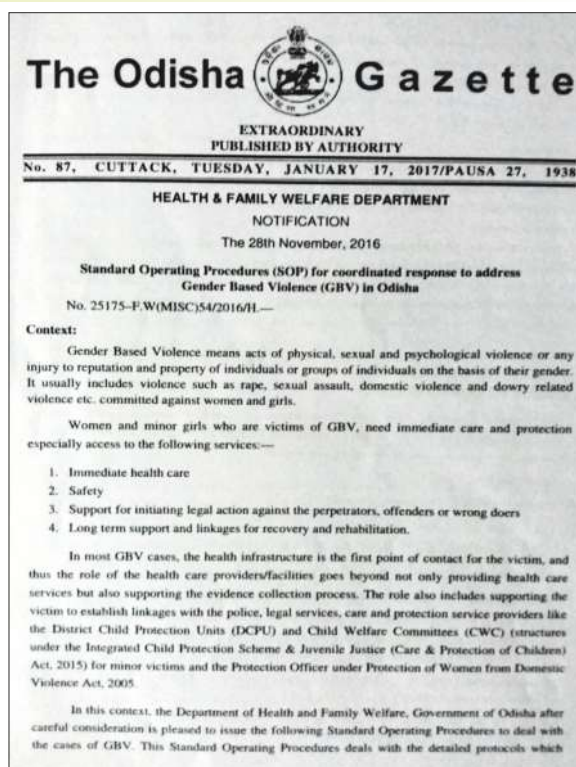
SOP deals with detail protocols / guidelines which the health care providers have to follow to deal with cases of GBV & information on the key stakeholders such as the Police, District Legal Services Authority, District Child Protection Unit, Child Welfare Committee with whom the health care providers have to work in coordination.

Training of ADMPHOs on Protocols and Proformae for Medico-Legal Examination of Survivors/Accused of Sexual Violence Sexual Assault Forensic Evidence (SAFE) Kit was conducted on 28<sup>th</sup> January 2019.

They will roll out the training at the district level.

- 5 One Stop Centres are functional in Odisha:- SAKHI-One Stop Centre at Capital Hospital, Bhubaneswar functional since Oct 1, 2015. DHH Sambalpur on June 28, 2018. Sayeed Lakhani Nayak Medical College, Koraput on Aug 3, 2018. MKCG Medical College & Hospital on Oct 1, 2018. RGH Rourkela on Nov 18, 2018.
- 36 Doctors trained from 16 districts of Odisha, on the new Protocols and Proformae for Medico-Legal Examination of Survivors/Accused of Sexual Violence/Assault & Evidence Collection Kit at Delhi by Ministry of Home Affairs.
- The state of Odisha has 30 districts and currently each district has one, One Stop Centre each so in the state total 30 One Stop Centres have been established.
- Sensitization on Dissemination of SOP on Coordinated Response to Address Gender Based Violence has been conducted for 3 Private Medical Colleges and 4 Govt. Medical Colleges.
- 47 thousand ASHAs have been trained in Gender Based Violence.
- All government counselors of the Department of Health & Family Welfare have received training on GBV
- All Hospital Managers of 30 District Hospitals have been trained on GBV.
- All DMRCHs of 30 District Hospitals have been trained on GBV.
- TOT of 7 Govt. Medical Colleges has been completed.

**Way forward: Training of health care providers of 6 Govt. Medical Colleges is under process.**



## Strengthening Implementation of PC & PNDDT ACT

Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDDT) Act, 1994 with Rules made thereunder is an act of the Parliament of India enacted to safeguard the girl child, to stop female foeticides and arrest the declining sex ratio in India. The act banned prenatal sex determination. The Courts have at all material times and in all possible manners delivered judgments indicating therefore that the PC-PNDDT Act is actually a whip to penalize those indulging in sex determination and to serve as a deterrent to others. The recent judgments of the Courts are also supportive of the strict implementation of the PC-PNDDT Act.

Strengths and Opportunities: In Odisha, the SRB that was recorded at 902 in 2011 has seen a remarkable improvement of 948 in 2017 (Niti Aayog Health Report). As per Indicator 1.1.5 - Sex Ratio at Birth of 21 larger States of the Niti Aayog Report, Odisha ranks third highest after Chhattisgarh (963) and Kerala (959).

The contributing interventions made by the State PC PNDDT Cell have been manifold such as –

- Strengthen institutional mechanisms:** The Odisha Government has put in place institutional mechanisms for strengthening the PC & PNDDT act implementation. Statutory bodies like State Supervisory Board, Advisory Committees are in place and reconstituted every three years. The State Supervisory Board (SSB) was reconstituted vide notification No. 417/H dated 05.01.2018. The SSB meeting after reconstitution was held on 25.05.2018. State Advisory Committee is in place and has been reconstituted in 2019. The last State Advisory Committee Meeting was held on 4th December 2019, under the Chairpersonship of Mission Director, National health Mission.
- To establish processes for improved monitoring of PC and PNDDT act implementation through backstopping the State Appropriate Authority (SAA) –** Online FORM A, B, C, F have been introduced in Odisha to streamline the record maintenance under the PC & PNDDT Act without foregoing the hardcopy that could be used as evidence in case of any violations of the provisions of the PC&PNDDT Act and Rules by any service provider. The state is gearing upto start online registration and renewal of USG Centre thus streamlining the registration process. Training of District Nodal Officers (in 2 batches) has been completed on Online Registration of Ultrasound Centres under PC PNDDT through NIC
- Supply Side interventions:** All 30 Collector(s)-cum- District Appropriate Authorities (DAAs) have been notified to regulate ultrasound machines. and Sub Collectors as Sub- District Appropriate Authorities since 2007. They are regularly updated on action to be taken at their end to check sex selection practices and for attention towards schemes and programs for girl child and women. (c) 1092 ultrasound centres have been registered in Odisha since the inception of the PC-PNDDT Act. (d) The state proposes to undertake the informers' incentive in Odisha and a guideline has been moved to government for approval. (e) All districts have updated the PC PNDDT Account in the official designation of the District Appropriate Authority for online registration and renewal of USG clinic. The Government has made online payment of registration and renewal fees applicable for all USG facilities. (f) In 2019, 290 inspections and monitoring visits was conducted in the state. 70



State Advisory Committee Meeting held on 04.12.19 under the Chairpersonship of MD, NHM, Odisha

court cases are ongoing in the state and 5 appeals have been disposed. 7 Criminal Proceedings Quashed by Hon'ble High Court of Odisha & 2 SLP filed before the Hon'ble S.C and one proposal processed for filling of SLP Appeal filed challenging the order of acquittals). 5 convictions secured and 2 convictions have been confirmed in the court of the District and Session Judge (Jharsuguda and Cuttack). 1 appeal filed before the District and Session Judge Court, Khordha.

- **Efforts To Improve Sex Ratio:** Government has taken several steps to ascertain improvement in Child Sex Ratio (CSR) for girl child, post implementation of the Act. Some of the efforts are – (a) from the data of census 2011, mapping of CSR up to Revenue villages has been done for advocacy and action; (b) Annual Save the Girl Child Campaign using folk media; (c) Analysis of SRB data from Civil Registration System (CRS) data; (d) 100 villages in Angul, Bhadrak, Dhenkanal, Nayagarh and Puri with dipping CSR and falling sex ratio at birth – SRB (with a population of >1000) have been selected for intervention in 19 - 20; (d) Girl child task force constituted under the chairmanship of the Chief Secretary, Odisha; As compliance to Hon'ble Supreme Court Judgement dated 8.11.16, SRB figures are being analyzed from CRS and Health Management Information System (HMIS) data. The trend in SRB for the last 5 years have been 929 (2014), 929 (2015), 920 (2016), 930 (2017) and 930 (2018).

Year	2014	2015	2016	2017	2018
Odisha	929	929	920	930	930

SIHFW has been entrusted the responsibility of development of IEC / BCC materials. Jingles are being aired on All India Radio. A dedicated Website of PC & PNDDT is in place- [www.pndtorissa.gov.in](http://www.pndtorissa.gov.in)

- **Advocacy with key stakeholders** to address demand side issues & promote debate, discussions and actions – Intervention in villages in 14-15 and 15-16, has boosted the state SRB to 948 in 2017 as compared to 910 in 2012. The State has been engaging with community for consensus building and action to curb sex selection through dissemination of information to the family members of pregnant female through ASHAs and AWWs on social and legal issues of sex selection.

The State PC PNDDT cell is also engaged in establishing networks among key stakeholders such as the State Police Academy, Odisha Judicial Academy, Director of Public Prosecution, Gopabandhu Academy of Administration and others for creating an enabling environment for the effective implementation of the Act. Sensitization Programmes are being organized for Judges, Public Prosecutors, Addl. Public Prosecutors, Asst. Public Prosecutors, Programme Officers, Dealing Persons, MCH students, Inspection and Monitoring Team, USG Manufacturers, Suppliers and Dealers, ADPHCOs, etc. on improving sex ratio and implementation of PC & PNDDT Act.

- **Communication Materials:** IEC materials have been developed and disseminated to all districts. Radio Jingles on Save the Girl child have been aired on All India Radio and replayed during 'Observation week – Parents for Daughters' in 30 districts during 18th – 24th Jan' 2019. State wide Advertisement floated at the district level in different newspapers (Sambad, Dharitri, Times of India, Prameya, etc.) appealing the community to inform regarding the existence of unregistered ultrasound machine and centres.



**CHAPTER - 6**

**Directorate of Food Safety**



## CHAPTER - 6

# Directorate of Food Safety

### BACKGROUND

The Food Safety & Standards Act, Rules & Regulations thereunder have come into operation throughout India with effect from 5<sup>th</sup> August, 2011 including in Odisha vide Health & Family Welfare Department Notification No.19346/H, dated.25.07.2012.

### HUMAN RESOURCE:

- ❖ For ensuring effective & proper monitoring of food safety activities in the State, one post of Commissioner, one post of Director, one post of Additional Commissioner, one post of Joint Commissioner, and 38 (Thirty-eight) Food Safety Officer have been created by Government of Odisha.
- ❖ The District Public Health Officer of the District & Health Officer of the six ULBs (i.e. Municipal Corporation, Bhubaneswar/ Cuttack/ Berhampur/ Rourkela/ Sambalpur & Puri Municipality) have been declared as Designated Officer (Food Safety) vide Government Notification No.1795/H, dated.20.01.2018.
- ❖ The Additional District Magistrate (ADM) of the District has been declared as Adjudicating Officer of Food Safety for efficient implementation of the Act & Rules in Odisha.

### ACHIEVEMENTS:

- (1) **Online Food Licensing & Registration System (FLRS):** The online FLRS started in Odisha from 21<sup>ST</sup> December, 2016. The e-payment of all fees and dues relating to Food Safety & Standards started from 7th June, 2017. The FBOs can deposit their fees/ dues through Net-Banking/ Debit Card/ over the counter in any of the e-Treasury attached Bank.
- (2) **Enforcement:**
  - a. Recently 12 No. of FSOs are empanelled for new recoupment. Additional requirement of man power and requisites is under the process in Gem procedures.
  - b. To facilitate FSS activity recently mobility support is also provided to all the district and ULBs

### STATE FOOD TESTING LABORATORY (SFTL)

- (I) The State Food Testing Laboratory, Bhubaneswar headed by one Deputy Director -cum- Food Analyst is functioning under administrative control of Commissioner of Food Safety, Odisha.

- (ii) Three High end equipment's have been installed and inaugurated by Honourable Minister Health & FW on 18<sup>th</sup> December, 2019 for NABL accreditation.
- c. **Sample Collection & Testing:** The Food sample (both Legal & Surveillance) are being collected regularly by the Food Safety Officers to check the quality & standard of the Food products.

Sl. No.	Year	Sample Category	Nos. of Sample Received
1.	2019-20 (From 01.04.2019 to 24.02.2020)	Regulatory	588
		Surveillance	1547
		Chhatua	6434
		Pvt. And others	1725
		Railways	62
		Aahar and MDM	29
		<b>TOTAL</b>	<b>10385</b>

d. **Revenue Collection(After online FLRS):**

From 21.12.2016 to 31.03.2018 In Rs	From 01.04.2018 to 31.03.2019 In Rs	From 31.03.2019 to 31.01.2020 In Rs	Total In Rs
3,22,67,800	2,18,29,320	2,50,01,980	7,90,99,100

- e. One **Mobile Food Testing Laboratory(MFTL)** provided by FSSAI has been inaugurated on 14th March, 2018 by the Hon'ble Minister Health & Family Welfare,. The MFTL has already covered 30 districts and 6 ULBs of Odisha, 1390 number of food and water samples have been tested in MFTL from 01.04.2019 to 31.01.2020.
- f. **Training and Other Activities.**
- Food Safety Training & Certification program) Training have been conducted in Odisha to ensure safe and hygienic food to the consumers. Till Now 1375 Food Business Operators are trained in different parts of Odisha.
  - Digital Mitra Training: To increase the online FLRS a training was conducted on 29.01.20 where applicants were trained to help the FBOs for filing online applications.
  - Street Food Vendor Training:** Another thousand Street food vendors will be trained earlier 1000 (One thousand) Street Food Vendors have been trained in 19 sessions from 4<sup>th</sup> October-3<sup>rd</sup> November, 2018 to improve the capacity of the Street Food Vendors and ensure hygienic food to the public.
    - Bhubaneswar-509, Cuttack-241, Puri-250
  - RATHYATRA (CAR FESTIVAL)** was managed by deploying Eight (08) Food Safety Officers from different districts/ULBs to Puri from 13.06.19 to 16.07.19 .The FSOs checked many restaurants, Bakery & water units etc and created awareness amongst FBOs and Public.

- (v) **FaniCyclone:** FSOs (Food Safety Officers) were alerted in all affected districts. To strengthen surveillance 3 FSOs diverted to the worst hit District of Puri. Mobile Food Testing Lab utilized for food and water testing and creation of awareness. On the spot sampling done for water and food: 219. Food in relief camps tested thrice a day by a team of 2 FSOs.
- (vi) **Different newer initiatives have been started regarding Food Safety i.e.**
- a. Clean Street Food Hub- will be implemented in Khaogali, Bhubaneswar from 1<sup>st</sup> of April, 2020.
  - b. Eat Right Campus – Going to be established in Food academics, Treatment & business establishment in capital.
  - c. BHOG- 3 temples (SaniMandir, Kali Mandir, SaiMandir at Bhubaneswar) are chosen to be established.
  - d. SNF- Different Fortification procedures and RUCO for restrictive use of overcooked oil initiatives have started to function.
  - e. Share Food- Under this initiative surplus foods are distributed at the hunger point through NGO.
  - f. One website for Food Safety activities has been created for easy accessibility by public to all act/Rules/ Regulations & other important information.

#### WAY FORWARD:

- One Programme Management Unit (PMU) will be set up to:
  - Have all data/information relating to Food Business Operators.
  - To monitor the legal cases & food items not conforming to the standards.
  - To create awareness amongst public & FBO relating to safe and wholesome food.
  - To conduct training for different categories of Food Business Operators, Food Safety Officer & Designated Officers.
- Government is considering the Cadre rule of Food Safety Officers and for creation of additional 67 (Sixty-seven) posts of Food Safety Officer, so that more number of FSO can be posted in Urban Local Bodies & Districts having more Food Business Operators for effective implementation of Food Safety activities in the state.
- The State Food Testing Laboratory is being upgraded with more technical manpower & equipments for obtaining NABL accreditation so that all types of quality testing of Food Items can be carried out in specified time period.

**CHAPTER - 7**

**Director of Medical Education and Training**

## CHAPTER - 7

# Director of Medical Education and Training

- 250 number of MBBS seats in SCB Medical College, Cuttack has been recognized during the academic session 2018-19 and 250 MBBS seats at MKCGMCH, Berhampur has been renewed for the academic session 2019-20.
- MBBS course in two New Medical College & Hospitals of the State i.e. at Pandit Raghunath Murmu MCH, Baripada & Saheed Laxman Nayak MCH, Koraput has been renewed for the 3<sup>rd</sup> batch during 2019-20.
- In order to meet the demands of Doctors of the State, MBBS course has been started from the academic session 2018-19 in two new Medical Colleges and hospitals of the state, i.e. at Fakir Mohan Medical College & Hospital Balasore & Bhima Bhoi Medical College & Hospital Balangir and construction work of the new Medical College at Puri and Keonjhar are under process.
- Steps have been taken for strengthening of all 7 Govt. Medical Colleges & enhancement of P.G seats in different disciplines and three Govt. Medical Colleges, i.e. at SCBMC Cuttack, MKCGMC Berhampur & VIMSAR Burla.
- One New Super Specialty Course has been started in Department of Endocrinology at MKCG MCH Berhampur.
- Online Registration of Clinical Establishment has already been started.
- Improvement and renovation of water supply, sewerage and sanitation works of Medical College & Hospitals, SVPPGIP, Cuttack & AHRCC, Cuttack has been made.
- Establishment of Tertiary Cancer Centre at MKCG MCH, Berhampur & VIMSAR, Burla are under process.
- Steps are being taken for functional of Liver Transplantation Unit at SCB MCH, Cuttack. EOI has been invited and the process is not completed.



- SOTTO has coordinated 4 Nos. of Cadaveric Kidney Transplantations during 2019-20 i.e. 1 no. at SCB MCH, Cuttack, 2 nos. at Apollo Hospital, Bhubaneswar and 1 no. at AMRI Hospital, Bhubaneswar.
- 17 Nos. of Kidney transplantations has been conducted at SCB MCH, Cuttack during 2019-20.
- More than 180 Nos. of Open Heart Surgery have been conducted at SCB MCH, Cuttack during 2019-20.
- 8 no. of Trauma Care Facilities units are functioning. The EFC for further 25 no. of TCFs has been approved by Govt. Till date 151 Doctors, Nurses and Pharmacists have been trained. All the trauma patients received in Govt. institutions up to DHH are already made free. Free treatment in private hospitals for first 48 hours for Trauma Victims has already been taken in 3 Private Hospitals.
- 9 Nos. of candidate in Psychiatric Nursing, 8 Nos. of candidate in M. Phil in Clinical Psychology & 5 Nos. of candidate in M. Phil in Psychiatric Social Work has taken admission during the academic session 2019-20.
- Steps are being taken to establish De-Addiction Centre at Cuttack under the supervision of Director -cum-Medical Superintendent, MHI Cuttack.
- Infrastructure development work are under way in 3 (Three) Medical College & Hospitals, SVPPGIP, Cuttack & AHRCC, Cuttack.
- High- End Instruments & Equipments are being procured in accordance with the requirements of the patients & Medical Students.
- In the Year 2019-20 Rs.61,59,01,577/- has been sanctioned in favor of 4749 Nos. of beneficiaries from OSTF till date.
- Free Cancer Drugs are being distributed in AHRCC, Cuttack under NIRAMAYA Scheme.
- 91 Nos. of Junior Resident, 323 Nos. of Senior Resident / Tutor, 121 Nos. of Assistant Professor, 6 nos. of Associate Professors and 01 No. of Professor in different discipline have been appointed in different Medical College & Hospitals i.e. SCBMCH Cuttack, MKCG MCH Berhampur, VIMSAR Burla, PRM MCH, Baripada, SLN MCH, Koraput, FM MCH, Balasore & BB MCH, Bolangir during 2019-20.
- Govt. of India provided grants to establish SOTTO in SCB, MCH, Cuttack and recruitment of HR has been completed for functional.
- Purchase of Books & Journals to the tune of Rs. 3,70,75,000/- (Rupees Three Crore Seventy Lakhs Seventy Five Thousands) for all Govt. Medical Colleges of the State including SCB Dental College & Hospital, Cuttack & SVPPGIP, Cuttack during 2019-20 has been provided.
- Multi Disciplinary Research Unit work in 3 (Three) Govt. Medical Colleges of the State is under process.
- Strengthening of the Super Specialty Department under PMSSY Phase-IV in 3 (Three) Govt. Medical Colleges of the State are under process.
- During the academic session 2019-20, 05 Nos. of DMLT & 05 Nos. of Physiotherapy Institutions (New) have been given permission to start the course.
- 6 Under Graduate and 11 certificate courses have been introduced as Allied medical Science Courses apart from the Medical and Paramedical Courses in the Govt./University/Private Health Institutions of the state with the constitution of a Council as a registering and recommending body for such courses and a Board for the examination systems in order to generate sufficient nos. of Allied Medical Personnel in the state to cater the essential Allied medical Services.

**CHAPTER - 8**

**State Institute of  
Health & Family welfare**

## CHAPTER - 8

# State Institute of Health & Family welfare

### Background

State Institute of Health & Family Welfare (SIHFW), Odisha started in 1984 as Centre for Information, Education and Communication under Directorate of Family Welfare. However, in 1994 it was converted to a fully fledged directorate of State Institute of Health and Family Welfare, dealing with two major components such as Training & Communication. In April'1998 it got the status of Collaborative Training Institute (CTI) of NIHFW. One more feather was added to the cap of SIH&FW in the year 2009, when it was declared as a Centre of Excellence for Communication (CoE).

### Activity conducted by CoE, SIH&FW from April 2019 to Jan'2020

- CoE, SIH&FW designs all most all IEC/BCC activities for the Department of Health & Family Welfare which has been implemented across the State to create mass awareness and to bring positive health behaviour change among the citizen. The IEC/BCC strategies & Prototypes designed by COE, SIH&FW are mainly implemented through three platforms i.e. Mass Media, Mid Media & Inter Personal Communication, out of which state level observation of different days and all most all mass media activities are dealt by CoE, SIH&FW itself.
- **World Health Day:** World health day Observed across the State and at District & at block level. Theme for the year was Universal health coverage: everyone, everywhere. State Level day observation held at SIH&FW on 7<sup>th</sup> April 2019. Different IEC activities such as State Level Meeting, Signature Campaign, Art Exhibition were conducted to mark the occasion.
- **Safe Motherhood Day:** A state level meeting was organised at capital hospital, Bhubaneswar. In this meeting PNC mothers and ANM TC student along with care givers of mothers were also participated along with the State Level officials. A quiz competition among them was also organised and prizes were distributed among the winners.
- **World Hypertension Day:** State Level Awareness activity on World Hypertension day was organised at SIH&FW, Odisha. Joining the function different high-level officials of H&FW, Department advised to adopt a healthy life style to avoid these diseases largely contributed by sedentary lifestyle.
- **No Tobacco Day:** State Level Observation of No Tobacco Day was observed on 31<sup>st</sup> May 2019 at SIH&FW, (O) and different mass media activities are conducted. Distribution of T Shirt with slogan on Not to consume Tobacco has been given to the traffic volunteers to create mass awareness. State Level Function with signature campaign and selfi-stand was displayed.



- **IEC Activities on Heat Stroke:** Different awareness activities such as display of Hoardings, posters, Swasthya Kantha upgradation, IPC counselling sessions were conducted along with dissemination of advertisement through mass media to create awareness among the community.
- **Awareness Activities during FANI:** In order to create awareness during cyclone FANI different mid media and mass media activities were conducted such as dissemination of leaflet, display of Banner, updation of swasthya kantha, awareness through miking, TVspot advertisement through news paper & electronic media were also carried out.
- **Zinc Awareness Week:** Zinc Awareness week prototypes are developed and shared with different districts to create awareness across the State through organising function, Display of Banners, hoardings, posters & Leaflets on use of zinc from 3<sup>rd</sup> June to 8<sup>th</sup> June 2019.
- **MDD Campaign:** In order to create Awareness on different water & vector Borne diseases across the State during the monsoon a three month long communication campaign from 17th June to 16th September 2019 has been organized under the tile of Malaria, Dengue & Diarrhoea Campaign. All the prototypes are designed at SIH&FW. The following activities are going to be organised during this phase.
  - Dissemination of BCC Messages on Malaria, Dengue & Diarrhoea through Mass media (TV Spot, Panel discussion/Phone in Programmes, Radio Jingle, Radio Spot through AIR & FM, Advertisement through Local Dailies were conducted at state level was organised.
- **World Population Day:** World Population Day was observed for a month long period i.e. from 27<sup>th</sup> June to 10<sup>th</sup> July as “Population Mobilisation Fortnight” & 11th -24th July 2019 as “Population Stabilisation Fortnight” with a specific theme, the Theme for this year campaign is “PARIBARA NIYOJANA KARI TULANTU DAITWA; MAA O'SIHU SWATHYA PAIN RUHANTU SAMPURNA PRASTUTA”. Different prototypes are shared with the District with Guideline; Awareness through dissemination of Poster, Leaflet, Hoarding, Standee, Movement of IEC van and Banner for IEC van also given also Banner for SC is planned and activity is going on across the state.
- **National Deworming Day:** Preparatory meeting for observation of national Deworming day was organised and communication plan prepared and shared with DFW, Odisha. The prototypes banner, Poster, Miking, Prabhata feri etc are shared with Identified 25 numbers of districts.
- **Observation of World Breast feeding Week:** World breastfeeding Day has been celebrated at state level on 6th August at Bharatpur Urban slum area. Different IEC activities were conducted such as Community level meeting at Community hall -8, Bharatpur involving the stakeholder, community level organisations, miking and rally etc conducted by the Directorate. Advertisement through different mass media channels was aired to create awareness among the proper Breastfeeding practises and its benefit for both mother & child.
- **Inauguration of Digital display board:** In order to create awareness among community Hon'ble Minister, H&FW Department Sri.N.K.Das inaugurated LED Display at Capital Hospital Bhubaneswar & another 11 Health Facilities through web-link on 9th Aug'2019.
- **Review cum Orientation programme:** State Level Two Days Review cum Orientation Meeting of ADPHO(FWs), DPHCOs & ADPHCOs was conducted from 19<sup>th</sup> to 27<sup>th</sup> August 2019. Orientation on this year's communication PIP and review of last year activities were conducted during this two days phase wise programme.
- **National Eye Donation Fortnight:** A sensitization workshop has been conducted on 6<sup>th</sup> September at SIH&FW, during the observance of National Eye Donation Fortnight. Resource persons working in the field shared their objective and inspired to donate eyes. Benefit of eye donation as well as challenges were discussed. Awareness through mass media has been

conducted.

- **International Day for Elderly on 1<sup>st</sup> October:** This year the State level observance of international day for elderly was observed on 1<sup>st</sup> October 2019 at Urban Primary Health Centre, Jharapada, Bhubaneswar with active involvement of senior citizens and front line workers along with staff of H&FW department. Different entertaining activities such as competition among the senior citizens in various segments such as recitation, Joke, song, epigram/ ode etcetera were organised following the state level meeting. Joining the meeting senior officials of Department of Health & Family welfare were participated and advised the elderly people to live life to the fullest with care and also shared about various health schemes and entitlements available for them and interact with elderly persons attending the programme of the day. The winners of different activities were also felicitated during the function. Different awareness activities were conducted through mass media to create awareness among the community.
- **World Sight Day 10<sup>th</sup> October:** A state level observance day has been organised at Conference hall of SIH&FW, on 10<sup>th</sup> of October 2019 to celebrate the benefits of Eye care this year. During the observance meeting resource persons working in the field describe the importance of eye care through power point presentation and also shared the objective & inspired all to donate eyes.
- **World Stroke Day 29<sup>th</sup> October:** : State level orientation cum observation of World Stroke Day was organised at paediatric conference hall of Capital Hospital, Bhubaneswar on 29<sup>th</sup> October 2019. Nursing Students, community members and staff of H&FW department participated in the programme. During the Resource persons described the importance of precautionary measures and advised to adopt healthy lifestyle as well as to take healthily food to keep away from Stoke and its related problems. Different awareness activities were conducted through mass media to create awareness regarding world stroke day.
- **World Diabetes day 14th November:** World Diabetes Day was observed on 14<sup>th</sup> November at SIH&FW, Bhubaneswar. This year the theme was Role of Family in Prevention & Control of Diabetes. A state Level Sensitisation Meeting along with Signature campaign and inauguration of Mobile IEC van by Special Secretary to create awareness has been conducted. The state level meeting was chaired by the Special Secretary Deptt. of Health & Family Welfare , Dr. H.P. Pattanaik, DHS, DFW, DPH, and other senior officials of Department of Health & Family welfare were participated and advised to control the food habit & adopt a healthy lifestyle also focused on yoga & physical exercise to control diabetes.
- **NSV Fortnight: “Samaya Abe Purushankara Pribara Niyojana Re Hebe Bhagidara”** was the Theme of this year's Non Scalpel Vasectomy Fortnight, and it was observed across the State in the month of November. A State level orientation cum observation of Non Scalpel Vasectomy Fortnight was organised at Urban Primary Health Center, Sikharachandi, Bhubaneswar on 23<sup>rd</sup> November with active involvement of community members and potential Stakeholder. A mobile IEC van moved across the slum areas to create awareness in the presence of other senior officials of Health & Family Welfare Department & development partners along with a mass Rally. A folk show was also organized during the state level observance to create awareness among the community during the programme.
- **Inauguration of IPPI IEC Van:** with the objective to create awareness among the community members especially living in the urban slum areas a mobile IEC van was inaugurated on 17<sup>th</sup> Jan'2020 by Director SIH&FW, Odisha. This van equipped with audio Aid to create awareness with printed IEC materials mounted across the vehicle to create awareness among community members. Telecast of scrolling message, Broadcast of radio spot in AIR & FMs for community awareness.

- **National Girl Child Day Observation:** State Level National Girl child day with the Theme of “Kanya Shakti Abarnaneeya abong Adamyā” Girls are unscripted and unstoppable. A creative working was conducted at Dhauli Art college Bhubaneswar, on 21<sup>st</sup> Jan' following a State level observation on 24<sup>th</sup> Jan at UPHC, Pokhariput and a folk show (Ghoda nachha) at Kargil Basti disseminating the message of the National Girl Child Day.
- **Observation of World Cancer Day:** State level observation of World Cancer Day on the Theme “I am & I will” was organised at Acharya Harihar Regional Cancer Centre, Cuttack on 4<sup>th</sup> Feb'2020. Banner, poster & standees were displayed, quiz competition among MBBS, BDS and Nursing students were organised and winners were felicitated at State Level observance. Also a CME session was organised at AHRCC following the day observation meeting.
- **Health Awareness on N-CORONA virus Infection:** In order to create awareness to reduce risk of CORONA virus infection, awareness message both in English & Odia were prepared and disseminated at different forums. Standees & Banners were displayed at Biju Pattnaik International Airport, Bhubaneswar, All Social Media handles has been utilised effectively and prototypes of different leaflet, banner, poster, hoardings were distributed with all 30 districts. Leaflets & poster in Odia & English Language are prepared for educational & other institutions at Sate level. Advertisement on different precautionary measures of N-CORONA Virus were displayed through different News Papers (27 numbers of advt. Published till this date), scrolling messages through News Channles of all local TV channels were displayed, radio spots through All India Radio (3times per day) and other FM channels (2 times per day) were disseminated.
- **Health Awareness Exhibition & Republic Day tableaux:** Three State level health awareness exhibition were conducted one during Kalinga Book fair & another during 2nd State level Book fair from 6th December to 15th December 2019 and Adivasi Mela at Exhibition ground, unit-III Bhubaneswar. Prototypes depicting health awareness messages on High Blood Pressure, Stroke, Oral Cancer, Cervical Cancer, Breast Cancer and Diabetes were displayed. Also republic Day tableaux displaying the services at district level hospitals were displayed.
- **Mass Media Activities:** Advertisements through different news papers, DD & Local Television Channels, All India Radio, FM Channels are disseminated from State. During this period total 462 numbers of TV spots, 6944 numbers of radio spots and 1,82,682 sq. cm news paper advertisements were displayed. Detail of Mass media activities conducted from April 2019 to Jan'2020 is as follows.
- **Different training activities are carried out by DSIHFW as mentioned below**
- **Training Conducted for the Financial Year 2019-20**

Sl. No.	Name of the Training	Tar.	Ach.	Remarks
<b>NHM PIP 2019-20</b>				
1.	30 days Induction Training of Newly Appointed Medical Officers	3	2(45 nos.)	
2.	Laparoscopic Sterilization Training of doctors (teams of doctor, SN and OT Asst)	5	2	
3.	Management Development Programme (MDP) for Sr. Health Administration (MOIC, ADMOs, SDMOs and Addl. Director) at reputed institution	1	1	Completed
4.	Post Graduate Diploma in Public Health Management (PGDPHM) Course of MBBS doctors (1 Year)	40	30	

5.	Review of training Management Information System (TMIS) completed with all district of the State through video conferencing at Telemedicine Centre, SIH&FW, Odisha	1	1	Completed
6.	Preparation and submission of Quarterly training achievement report of State under NHM PIP FY 2019-20 & other training programme of Govt. to NIH&FW & MoHFW	2	2	Completed
7.	Distribution of State plan budget to different training Institutions like 3 Govt. Medical College & 3 Regional training venues of the State.	12	12	Completed
8.	10 nos. of contact sessions conducted for certificate course in Evidence based Diabetes Management and Certificate Course in Management of Hypertension at 10 regional venues.	12	11	
9.	Financial settlement of Teachers & Asst Teachers of CPS PG Diploma Course month wise distribution	12	8	
10.	Developed a proposal on training activities related to health sector for 2 years on the occasion of celebration of 150th birth ceremony of Father of Nation amounting of Rs. 66.83 lakh	1	1	Completed
11.	2 days Training on RTI/STI for Medical Officers - one batch (18 nos. of participants) completed	1	1	Completed
12.	2 days Training on RTI/STI for Laboratory Technician - one batch (10 nos. of participants) completed	2	2	Completed
13.	Training monitoring & supportive supervision to Dist. Mayurbhanj & Kandhamal for preparatory support on the view of CRM visit			Completed
14.	Six days computer refresher training for communication officers	1	1	Completed

**NIHFW – 2019-20**

## Skill development courses in Joint Collaboration with IGNOU

1.	Home Health Assistance	20	15	Fund already placed to RCIGNOU, BBSR, Course started.
2.	General Duty Assistance	20	19	
3.	Geriatric Care Assistance	20	10	
4.	Phlebotomy Assistance	20	14	

**Other Govt. Training**

1.	3 days Orientation Training of AYUSH Doctors	5	5	
2.	Certificate course in Evidence based Diabetes Management and Certificate Course in Management of Hypertension	10	10	168 MOs were continuing course at 10 regional venues
3.	Teachers & Asst Teachers of CPS PG Diploma Course	41	41	41 nos. Participants trained in the 11 venues
4.	Certificate Course of Post Graduate Diploma for AD-II	60	35	
5.	One day Orientation Workshop on e-ICU	1	1	44 nos. trained.

30 Days Induction Training for Medical Officers(MBBS) started since 14.11.2019 (20 nos. of participant are attending the training)

Draft copy of State Training Policy is prepared and submitted to Govt.

10 nos. of contact sessions conducted for certificate course in Evidence based Diabetes Management and Certificate Course in Management of Hypertension at 10 regional venues.

Process of State Training PIP for the FY-2020-21 has been started. Nodal Officers of the state have been contacted for submitting various training activities for the PIP.

Planning meeting of training under the state plan Additional fund was conducted.

Communication made to 31 nos. of participants (Medical Officers) for 1 Year Post Graduation

Diploma in Public Health Management (PGDPHM) for the FY-2019-20 and they have been instructed to attend the course at IIPH, BBSR from 2<sup>nd</sup> December 2019.

Financial settlement of Teachers & Asst Teachers of CPS PG Diploma Course.

30 Days Induction Training for Medical Officers(MBBS) completed 13.12.2019 (20 nos. of participant have attended the training)

11 nos. of contact sessions conducted for certificate course in Evidence based Diabetes Management and Certificate Course in Management of Hypertension at 10 regional venues.

Process of State Training PIP for the FY-2020-21 has been completed

Planning meeting of training under the state plan Additional fund was conducted and execution of the activity initiated.

30 no. of participants (Medical Officers) for 1 Year Post Graduate Diploma in Public Health Management (PGDPHM) for the FY-2019-20 joined and they have been attending the course at IIPH, BBSR since 2<sup>nd</sup> December 2019.

Financial settlement of Teachers & Asst Teachers of CPS PG Diploma Course.

2<sup>nd</sup> batch of Capsular course for Additional Director – II (CCPHM) has inaugurated by Director, SIHFW (O) with 17 nos.of participants.

3 days state level Refresher ToT on Taranga SBCC completed with 28 nos participants.

Third batch of Induction Training for Medical Officers (MBBS) has been started from 21.01.2020 in which 27 nos.of medical officers are participating in the training.

10 nos. of contact sessions conducted for certificate course in Evidence based Diabetes Management and Certificate Course in Management of Hypertension at 10 regional venues.

Two batches of 3 days refresher training of PHEOs on health communication were completed.(54 participants)

SBCC (Tarang) training for MPHWF were completed in 2 districts i.e. Dhenkanal, Kandhmal and continuing in Rayagada & Koraput Districts and going to be started in Malkanagiri & Gajapati district in February 2020).

30 no. of participants (Medical Officers) are continuing the 1 Year Post Graduate Diploma in Public Health Management (PGDPHM) course at IIPH, BBSR since 2<sup>nd</sup> December 2019.

Financial settlement of Teachers & Asst Teachers of CPS PG Diploma Course.

2<sup>nd</sup> batch of Capsular course for Additional Director – II (CCPHM) has been going on with 17 nos of participants.

One day review of district officials and 3 medical college hospitals on implementation status of TMIS through video conferencing.

Facilitated the exposure visit of GDMO under CGHS for 8 nos.of doctors from 13/01/2020 to 18/01/2020

**CHAPTER - 9**

**Directorate of AYUSH**

## CHAPTER - 9

## Directorate of AYUSH

Government of Odisha have recognized Ayurveda, Unani & Homoeopathy systems of medicines and these systems have gained community acceptance and continue to cater health care services to a larger number of people of the State. The major AYUSH activities in Odisha for the year 2019-20 are as under.

**AYUSH Education:** Quality education is provided in 03 (three) Government Ayurvedic Colleges and 04 (four) Homoeopathic Medical Colleges of the State. Steps have been taken to fulfil the minimum standard requirement norms of the CCIM and CCH for Ayurveda and Homoeopathy Colleges respectively.

Sl. No.	Name of Govt. AYUSH Educational Institution	Year of Establishment	Course imparted	Annual out turn of graduate & post graduate doctors		
				Earlier	Achieved during 2019-20	Total
1	Gopabandhu Ayurveda Mahavidyalaya, Puri	1949	Degree Course	30	-	30
			P.G. Course (5 subject)	15	-	15
2	Government Ayurveda College, Bolangir	1984 (taken over by Govt.)	Degree Course	60	-	60
			P.G. Course (2 subject)	08	-	08
3	KavirajAnantaTripathy Sharma Ayurveda College, Ankushpur, Berhampur, Ganjam	1994 (taken over by Govt.)	Degree Course	60	-	60
<b>Total Ayurveda</b>			<b>Degree Course</b>	<b>150</b>	<b>-</b>	<b>150</b>
			<b>P.G. Course</b>	<b>23</b>	<b>-</b>	<b>23</b>
1	Dr. Abhina Chandra Homoeopathy Medical College & Hospital, Bhubaneswar	1969	Degree Course	50	13	63
			P.G. Course (one subject)	03	-	03
2	BijuPattanaik Homoeopathy Medical College & Hospital, Berhampur	1994 (taken over by Govt.)	Degree Course	25	-	25
3	Odisha Medical College of Homoeopathy & Research Sambalpur	1994 (taken over by Govt.)	Degree Course	25	6	31
4	Utkalmani Homoeopathic Medical College & Hospital, Rourkela	1994 (taken over by Govt.)	Degree Course	25	6	31
<b>Total Homoeopathy</b>			<b>Degree Course</b>	<b>125</b>	<b>25</b>	<b>150</b>
			<b>P.G. Course</b>	<b>03</b>	<b>-</b>	<b>03</b>

- ❖ **AYUSH Health care facilities:** Health care services are provided through 05 Government Ayurveda Hospitals, 04 Homoeopathy Hospitals, 620 Ayurvedic Dispensaries, 562 Homoeopathic Dispensaries and 09 Unani Dispensaries in the State. Apart from the above, 796 AYUSH Clinics (Ay), 680 AYUSH Clinics (Hom) and 09 AYUSH Clinics (Unani) co-located in PHCs, CHCs and DHHs are also functioning under NHM, Odisha. During the year 2019-20, steps are being taken for appointment of 66 numbers of HMOs and 158 numbers of AMOs in Government Homoeopathic and Ayurvedic Dispensaries respectively. Besides, the Odisha Staff Selection Commission, Odisha has conducted the examination for filling up of 878 numbers of post of AYUSH Assistants in the State.

#### **Services rendered in Govt. AYUSH Hospitals**

Sl. No.	Name of Govt. AYUSH Hospitals	No. of Indoor Bed Strength	Services rendered
1	Govt. Ayurveda Hospital attached to Gopabandhu Ayurveda Mahavidyalaya, Puri	150	Hospitals have been providing general & specialized treatments of Ayurveda to the patients in OPDs & IPDs
2	Govt. Ayurveda Hospital attached to Government Ayurveda College, Bolangir	150	
3	Govt. Ayurveda Hospital attached to KavirajAnantaTripathy Sharma Ayurveda College, Ankushpur, Berhampur, Ganjam	100	
4	Govt. Ayurveda Hospital , Bhubaneswar	43	
5	Govt. Ayurveda Hospital , Paikamal, Dist-Bargarh	25	
<b>Total Indoor beds in Ayurveda Hospitals</b>		<b>468</b>	
6	Govt. Homoeopathic Hospital attached to Dr. Abhina Chandra Homoeopathy Medical College & Hospital, Bhubaneswar	60	Hospitals have been providing general & specialized treatments of Homoeopathy to the patients in OPDs & IPDs
7	Govt. Homoeopathic Hospital attached to BijuPattanaik Homoeopathy Medical College & Hospital, Berhampur	25	
8	Govt. Homoeopathic Hospital attached to Odisha Medical College of Homoeopathy & Research Sambalpur	25	
9	Govt. Homoeopathic Hospital attached to Utkalmani Homoeopathic Medical College & Hospital, Rourkela	25	
<b>Total Indoor beds in Homoeopathy Hospitals</b>		<b>135</b>	
<b>Total Indoor Beds in 9 AYUSH Hospitals</b>		<b>603</b>	

- ❖ **Government AYUSH Pharmacies:** The State Government have established 02 (two) Ayurvedic and 01 (one) Homoeopathic Pharmacies to manufacture and free distribution of Ayurvedic and Homoeopathic medicines in Govt. AYUSH Hospitals and Dispensaries of the State.

Sl. No.	Name of the Pharmacy	Jurisdiction for supply of medicines
1	Govt. Ayurvedic Pharmacy, Bolangir	Supply of Ayurvedic medicines to 5 Govt. Ayurvedic Hospitals and 352 Govt. Ayurvedic dispensaries for free distribution to patients.
2	Govt. Ayurvedic Pharmacy attached to Govt. Ayurvedic Hospital, Bhubaneswar	Supply of Ayurvedic medicines to Govt. Ayurvedic Hospital, Bhubaneswar and 268 Govt. Ayurvedic dispensaries for free distribution to patients..
3	Homoeopathic Pharmacy of Dr. A.C.H.M.C & Hospital, Bhubaneswar	Supply of Homoeopathic medicines to 04 Govt. Homoeopathic Hospitals and 562 Govt. Homoeopathic dispensaries for free distribution to patients.



- ❖ **The Medicinal Plants Garden:** Government have established medicinal plants garden one at Harisankar in the District of Bolangir and another at Sirsa in the District of Mayurbhanj for cultivation of raw plant drugs in manufacture of Ayurvedic Medicines in Govt. Ayurvedic Pharmacy. Besides, herbal gardens have been established in 03 Govt. Ayurveda and 04 Homoeopathy Medical Colleges of the State for demonstration and research purpose of the students and teachers of the colleges.

Sl. No.	Name of Herbal Garden	Controlling Officer	Total area
1	Govt. Herbal Garden, Harisankar, Bolangir	Supdt., Govt. Ayurvedic Pharmacy, Bolangir	10.97 acre
2	Govt. Herbal Garden, Sirsa, Mayurbanj	DAMO, Balasore	20 acre
3	Govt. Herbal Garden, Govt. Ayurvedic Hospital Campus, Bhubaneswar	Dy. Supdt., GAH, Bhubaneswar	03 acre
4	Medicinal Plants Garden, Gopabandhu Ayurveda Mahavidyalaya, Puri	Principal, GAM, Puri	05 acre
5	Medicinal Plant Garden, Govt. Ayurveda College, Bolangir	Principal, GAC, Bolangir	05 acre
6	Medicinal Plants Garden, KavirajAnantaTripathy Sharma Ayurveda College, Ankushpur, Berhampur, Ganjam	Principal, KATS Ayurveda College, Ankushpur	03 acre
7	Medicinal Plants Garden, Dr. A.C.H.M.C & Hospital, Bhubaneswar	Principal, Dr.ACHMC&H, Bhubaneswar	03 acre
8	Medicinal Plants Garden, Utkalmani Homoeopathic Medical College & Hospital, Rourkela	Principal, UHMC&H, Rourkela	03 acre
9	Medicinal Plants Garden, Odisha Medical College of Homoeopathy & Research Sambalpur	Principal, OMCH&R, Sambalpur	02 acre

- ❖ **Drug Testing Laboratory:** The Government have established one State Drug Testing and Research Laboratory (ISM) in Bhubaneswar for test /analysis of Ayurveda, Siddha & Unani drugs . Besides, one Drug Testing Laboratory for test/analysis of Homoeopathy Drugs is going to be set up in the campus of Dr. A.C.H.M.C & Hospital, Bhubaneswar duly funded under National AYUSH Mission.
- ❖ **Panchakarma Treatment:** Specialized treatment like 'Panchakarma' is being provided to the patients in Government Ayurveda Hospital, Bhubaneswar, Puri and Berhampur. Besides, one Panchakarma unit has been set up at DHH, Kendrapara to provide specialized treatment of Panchakarma. Further, Govt. is taking step to set up one Panchakarma unit at DHH, Bargarh.
- ❖ **Training & Capacity building of AYUSH Personnel:** Following trainings are being imparted to AYUSH Medical officers in the State.

Sl. No.	Name of the Training
1	21 days SBA training for AYUSH doctor at district level
2	3 days District Level Refresher Training on SBA of AYUSH MOs
3	10 days hands on training on SBA for AYUSH doctors of DPs
4	7 days additional hands on SAB training at district level
5	6 days IUCD training at district level
6	2 days NSSK training at district level

7	6 days Induction training at State level
8	MDP for AYUSH Officials at outside the State
9	6 days induction training of Regular AYUSH Doctor working in standalone Dispensaries
10	6 days Clinical Skill Development Training for Ayush Doctors working in Co-located units under NHM
11	1 day training of Regular AYUSH Doctors on IDSP
12	3 days HWC & NCD training for AYUSH MOs
13	One day training for AYUSH doctors on injectable Contraceptives and oral pills at District level
14	PGDPHM Course of AYUSH (Regular)Drs (1yr course)



During the year 2019-20 the training programmers under NHM PIP 2019-20 is going on.

- ❖ **IEC / BCC activities:** The following IEC/BCC activities have been conducted for propagation of AYUSH in the State.
  - (i) Public health outreach activities
  - (ii) AYUSH grama
  - (iii) School health programme
  - (iv) Integrated AYUSH health camp
- ❖ **Construction activities:** As per the norms of CCIM and CCH, funds have been provided for up gradation of UG and PG AYUSH Educational Institutions in the State.
- ❖ State Programme Management Unit under National AYUSH Mission has been established during 2019-20.

**CHAPTER - 10**

**Directorate of Nursing**

## CHAPTER - 10

## Directorate of Nursing

- Admissions for ANM and GNM Courses, across public and private nursing institutions in Odisha, were successfully conducted through Online Counseling for the fourth consecutive year. This included admission of GNM students in 8 Govt., 68 Private Institutions and ANM students in 21 Govt. and 104 Private Institutions for the academic session 2018-19.

#### Status report of Offline admission for Basic B.sc, P.B.B.sc & M. sc Nursing for the Academic Year 2018-19

Sl. No.	Name of the Course	Total No. of applications received offline	Admission status at Govt. Institutions	Admission status at Private Institutions
1	Basic BSc Nursing	2274	190	601
2	Post Basic BSc Nursing	475	65	102
3	MSc Nursing	254	42	68

#### Status report of online admission ANM & GNM Nursing for the Academic Year 2018-19

Sl. No.	Name of the Course	Total No. of applications received
1	ANM	16129
2	GNM	10975

- Odisha Nurses and Midwifery Examination Board (ONME&B) conducted GNM and ANM examinations and the results were published on time. The brief of the results is mentioned in the table below.

Nursing result details of GNM			
Year	No of student appeared	No. of student passed	% students passed
1st year	2631	2252	85.59%
2nd year	2612	2519	96.43%
3rd year	2582	2445	94.69%

Nursing result details of ANM			
Year	No of student appeared	No of student passed	% students passed
1st year	2972	2374	79.87%
2nd year	2807	2541	90.52%

The State Nodal Center at College of Nursing Berhampur is continuing with capacity building activities for the faculty of nursing institutions in Odisha.

- The comprehensive skill labs at Capital Hospital Bhubaneswar and GNM School of Nursing at Sundergarh have been made operational and 6 Days' Training (Daksh) of 15 batches has been completed at both the places.
- Training infrastructure has been improved across nursing training institutions: as on March 2018, Skills lab is operational across 25 public nursing institutions, additional and updated books for library provided to all institutions and computer labs established at all Govt. ANMTCs & GNMTCS.
- Four batches of Skills lab Induction training have carried out (2 batch each at Comprehensive Skills lab of SNC Berhampur & Capital Hospital Bhubaneswar). In these four batches 55 participants (including faculty members, nurse trainers and training consultants) have been trained from 19 nursing institutions. This training will help in effective use of nursing laboratories and help faculty in imparting competency based education for students.
- Total 84 candidates (both Staff Nurses & Ayurvedic doctors) have successfully completed 6 months Bridge Course training by clearing the Term End Examination conducted by IGNOU in the month of June'2018. 56 candidates (both Staff Nurses & Ayurvedic doctors) have appeared the Term End Examination conducted in the month of Dec'2018 by IGNOU. Total 71 Staff Nurses have taken admission for the academic session Jan'2019. Posting order issued to all the candidates with an additional incentive as approved by Govt.
- Three Technical Advisory Group (TAG) meetings under the Chairperson of Mission Directorate, NHM Odisha and members being Senior Representatives from Different Departments of Health and Family Welfare, Technical Partners and other stakeholders were held during the year 2018-19. These meetings were intended to drive the strengthening of Nursing-Midwifery activities in the state.
- Technical committee has been established under the chairmanship of Director Nursing to recommend the Govt. on Nursing related issues.
- Process initiated for introducing Competency Based Examinations in Nursing Curriculum of ANM, GNM & BSc Nursing courses. This will ensure the skill as well as the competency of passed out students.
- Reward & recognition given to meritorious students and institutions for excellence at Conference hall of NHM, Odisha.
- A health worker named Ms. Anita Kumari Parida of Malkangiri District has bagged the prestigious Florence Nightingale award 2018 on the occasion of International Nurses Day from President of India during a function at Rastrapati Bhawan on 12.5.2018 for her dedicated service for mankind during the outbreak of Japanese Encephalitis .
- Candidates have taken admission at two newly established Govt. College of Nursing a SCBMCH, Cuttack & VSSMCH, Burla & two newly established Govt. ANMTC at ANMTC, Malkangiri & ANMTC, Gajapati.



**Students at Skill lab**

Special Initiative: Steps are being taken to upgrade all GNM Schools of Nursing to the Collage of Nursing from the year 2021-22. In this context evaluation of the requirement of individual institutions have been undertaken and gaps identified to fill the same before 2021-22.

**CHAPTER - 11**

**Odisha State  
Medical Corporation Limited**

## CHAPTER - 11

# Odisha State Medical Corporation Limited

The “Odisha State Medical Corporation Limited” (OSMCL) has been established under the companies Act, 1956 as a wholly owned Government of Odisha undertaking vide Government Resolution No. 8844-Sch-I-Med.-264/2013 (Pt.), dated 26th June 2013.

Odisha State Medical Corporation Limited (OSMCL) is the nodal agency of the Department of Health and Family Welfare, Government of Odisha for procurement of (a) Drugs, Surgical & Medical Consumables, (b) Equipment, Instrument & Furniture (EIF) Services.

### **Objectives :**

The key objectives of OSMCL include timely procurement of quality medicines for “Niramaya” - free medicine distribution scheme, medical consumables, surgical, equipments, instruments, furniture etc. through fair, transparent and competitive bidding process.

- Timely procurement of quality medicines, surgical and EIF (Equipment Instrument and Furniture) centrally adhering to a fair, transparent and competitive tendering process.
- Manage central drug warehouses to ensure smooth flow of supply to health facilities through a centralised online inventory management system.
- Monitor drug distribution counter to be set up across health facilities centrally and track prescription practices and disease pattern.
- Procurement and maintenance of medical equipment across health facilities.
- Management of Central Drug Warehouses at district level to ensure smooth supply to health facilities.
- Management of logistics up to block/CHC level.
- Provide equipment management support at periphery and tertiary health institutions.
- Provide integrated IT system for Inventory Management.





## 1. DRUGS & SURGICAL DIVISION –

### Procurement & distribution of drugs & consumables as per the recommendation of the State Drug Management Committee (SDMC):

- a. The procurement & distribution activities of. of EDL items (Essential Drug List) & programme items comprising of. of general items, surgical items, anti-cancer items, programme items and other items from Non Essential Drug List as per the recommendation of State Drug Management Committee.
- b. **Sufficient number of counter: 532 computerised Drug Distribution Centres (DDCs)** have been established across the facilities up to CHC level to distribute medicines at OPD counter.
- c. **Sufficient number of drug warehouses:** In addition to 39 District Drug Warehouses, efforts are on to operationalise **block level Drug warehouses** for distribution up to PHC level from block drug warehouses.
- d. **Supply of drugs to the warehouses in time:** 49 numbers of **dedicated GPS enabled transport vehicles** are engaged for doorstep delivery of drugs up to PHC level.
- e. **Management of stock out positions:** The Stock out position is analysed at regular interval for replenishing the stock by reallocation from Central Drug Store or other Drug Warehouses and plan for local procurement at institutional level. An ordering plan has been finalized for availability of sufficient quantity of drugs and avoids stock out.

## 2. EQUIPMENT DIVISION –

The Equipment Division of OSMCL is carrying out the procurement of EIFs since 2015 and also looking after maintenance of medical equipments. The division procures EIF as per indents approved by the State Equipment Management Committee (SEMC).

### The objectives for Equipment Procurement of OSMCL are:

- To procure modern era optimum quality Equipment at competitive rates and to follow transparent procedures.
- To meet the Equipment Purchase and Maintenance requirements of different primary, secondary and tertiary healthcare institutions.
- To follow quality parameters for diagnosis, technology and research to provide best healthcare services in Odisha.

### Achievements & new initiatives

Total value of procurement done towards EIFs – Rs. 120 Crs. (Approx.)

### Centralised Biomedical Equipment Maintenance

To strengthen the public health system in the State with a vision to minimise the downtime of the biomedical equipments available in the hospitals especially in remote locations, the centralised Biomedical Equipment Maintenance Program (BEMP) has been rolled out across the state with effective from 01.01.2020 through M/s Kirloskar Technologies Pvt. Ltd., as the third party service provider for all the Government Health care delivery institutions down to the level of PHC under the H & FW Dept. (O) supported by 24x7 call centre.

### 3. QUALITY ASSURANCE DIVISION

Drug, items and batches received in Quality Assurance cell, sent to 20 nos. of NABL accredited empanelled laboratories for test and analysis and test report received for the period from 1st Apr' 2019 to 17th Feb '2020 as below.

	No. of items	No. of batches
<b>Received</b>	<b>359</b>	<b>7277</b>
<b>Sent for testing</b>	<b>357</b>	<b>7234</b>
<b>Report received</b>	<b>350</b>	<b>6937</b>

### 4. IT CELL (e-Niramaya)

**Real time monitoring of all aspects of the scheme to avoid dislocation in indenting, procurement & distribution:** The new software “e-Niramaya” was launched on 01.04.17 for managing the entire drugs supply chain and distribution process. The e-Niramaya software has been designed to streamline free drug distribution from Warehouse to Health facilities. Further, improvements in the software are in process. The software has following features.

- i. Elaborate indenting module for giving indents for items by Medical College/Institutions/DHH sub-stores, Sub-Division Level Hospitals (SDHs), CHCs and PHCs.
- ii. Information like shelf life of items, “near expiry status” and “supplier's internal test report” are uploaded in the software.
- iii. Reports on stock position in Drug Warehouses (DWHs), Sub-stores, SDHs, CHCs and PHCs.
- iv. Consolidated reports on delivered quantity and quality clearance of each batch for early processing of payments.
- v. Help desk queries & complaint modules for different Warehouses/Facilities, for immediate resolution of complaints.
- vi. Elaborate Quality Assurance Module for random selection of labs for Quality testing, sending samples to labs and receiving reports.

### 5. KHUSHI PROGRAMME

Menstrual hygiene and the awareness regarding use of sanitary napkins among the adolescent girls is one of the important areas under preventive health management initiative. In a bid to better the health of adolescence girls and to ensure reproductive health of women the programme of KHUSHI will bring major breakthrough. The expansion of the Menstrual Hygiene Scheme KHUSHI to cover all girl students of class 6th h to 12th by way of supply of free beltless sanitary napkins is a flagship scheme of Government of Odisha and involves large scale expenditure.

The details as given below have been obtained from the concerned Departments. The schools covered include all Government/Government aided schools under S & ME Department, schools under SS & EPD Department, ST & SC Development & MBC related schools and Central schools.

Department	Nos. of girl students ( 6th to 12th class)	Nos. of schools
S & ME Dept. (Received from OPEPA)	15,72,581	28,262
ST & SC Dept.	1,35,841	1,196
SSEPD Dept.	401	65
Central (Received from OPEPA)	17,905	99
Total	17,26,728	29,622

Basing upon the requirement given by the concerned Dept. yearly 36,49,03,056 will be procured through OSMCL through open tender. The supplier will supply the napkins to the Storage Point identified in different blocks and Municipal Corporation and Collector/Municipal Commissioners will select transporter to supply Sanitary Napkins from Block Storage Point to different schools.

For smooth distribution of Sanitary Napkins to girl students of the schools, one lady teacher has been identified as Nodal Teacher, who will remain in charge of receipt & distribution of Sanitary Napkins.

For this Financial Year, 3 Purchase Orders (P.O.) have been issued to the selected bidder through open tender system, out of which supply of Sanitary Napkins for 2 P.O.s has already been completed and supply for the 3rd P.O. is going on. For Financial Year 2020-21, the procurement process has been started through GeM Portal.



**Heavy Duty Racking at Drug Ware House**



**Engagement of Vehicle for Supply of Drugs & Consumables**

**CHAPTER - 12**

**Directorate of Drugs Control**

## CHAPTER - 12

# Directorate of Drugs Control

- **DEVELOPMENT OF SOFTWARE AND DIGITIZATION OF FILES-** License Management System has been made functional in order to provide services to the citizen in respect of issuance of Drug Licences in a Time bound process and without any hassles.
- **CONSTRUCTION OF DRUG TESTING LABORATORY AT SAMBALPUR-** Under the scheme Strengthening of Drugs Regulatory System, setting up of Drug Testing Laboratory at Sambalpur has been inaugurated to facilitate testing of 3000 Drug Sample per annum to ensure the quality of drugs. For the said purpose, the Govt. of Odisha, Health & F.W Deptt. have sanctioned sum of Rs. 1161.59 Lakhs under 60:40 share (i.e. Central and State). Out of which Rs. 833.33 Lakhs have already been transferred to Executive Engineer, Sambalpur, Division-II, Sambalpur for construction of laboratory.
- **CONSTRUCTION OF OFFICE-CUM-RESIDENCE BUILDING-** 18 (eighteen) Nos. of Office-cum-Residence Buildings for Drugs Inspectors and zonal Deputy Drugs Controllers in the state have already been constructed and occupied by respective Drugs Inspectors and Deputy Drugs Controllers and 05 (five) Nos. of Buildings are under process/construction.
- **CENTRAL DRUGS & COSMETIC TESTING LABORATORY-** The Govt. of Odisha have provided land at free of cost for construction of the Central Drug & Cosmetic Testing Laboratory at Gothapatna, Bhubaneswar under Centrally Sponsored Plan Scheme. The laboratory is under construction.
- **PRICE MONITORING RESOURCE UNIT-** A society has been registered named as PMRU Society in the State of Odisha vide registration No. 77/1820/800067 of 2018-19 to monitor the price of formulations including medical devices as notified by NPPA, New Delhi and detection of violation of the provision of DPCO. The PMRU (Price Monitoring Resource Unit) is likely to be started functioning soon.
- **CREATION OF SPECIAL COURT-** 05 (Five) nos. of special designated court have been created by Govt. in Health & F.W. Deptt. for trial of offences relating to Adulterated / Spurious drugs in pursuance of Sub-Section (1) of Section 36-AB of D & C Act 1940.
- **NOTIFICATION OF DRUGS CONTROL OFFICERS UNDER PARA 30 OF DPCO 2013 -**  
The Drug Enforcement officers of Drugs Control Admin. Under Para 30 of Drugs (Price Control) order 2013 have been notified to Excises their power conferred under the said clause.

● **ENFORCEMENT ACHIEVEMENT:**

- i. All Drug Inspectors have been notified to exercise power under the Drugs (Price Control) order 2013. Accordingly, 83 numbers of drug price have been verified and Cases have been detected for violation of overcharging of price during the inspection and reported to Chairman, NPPA, New Delhi for necessary action against the erring firms.
- ii. All Drugs Inspector of the state have been notified as Medical Device Officer as per Govt. notification No. 1902/H dt. 21.01.2019 and Drugs Controller, Odisha has been notified as Licensing Authority for Medical Devices of Class-A and Class-B as per Govt. notification No. 23292/H dt. 11.09.2018 in the year 2018-19.
- iii. Strengthening of Blood Services in the State-

A special drive for licensing of Blood Banks in the state was undertaken in last 01 (one) year, after which

- 14 Nos. of Blood Bank Licences were updated till now.
- Renewal application for 09 (nine) Nos. of Blood Banks have been recommended to Drugs Control General (India)
- Inspection of remaining Blood Bank have been completed and their renewal are under process.

Blood Storage Unit

- 11 (Eleven) Blood Storage Unit have updated their licences.
- 63 (Sixty three) Nos. of Blood Storage Unit are now under process for renewal.

- 5243 Nos. of Inspection and 627 Nos. of Raid have been conducted to verify the compliance of conditions manufacturing and sales drug licences and to check movement of Spurious/Not of Standard Quality drugs. On basis of inspection and raid reports, Show Cause Notices have been issued to the sales medicine stores for violation of D & C Rules' 1945 and the Drug licences have been suspended for non-compliance of conditions of their licences.
- During the raid, 21 Nos. of Seizures have been made for violation of D & C Act & Rules thereunder and 69 Nos. of Prosecution have been lodged against the offenders in the Hon'ble Court after investigation of previous year and current year for non-compliance of conditions of licences and other provisions of the Drugs & Cosmetics Act.
- 2153 Nos. of sample have been drawn for Test and Analysis to ascertain the quality of drug, out of which 2142 Nos. of Allopathic, 01 Nos. of Cosmetic and 10 Nos. of Homoeopathic drugs.
- The SDT & RL (O), Bhubaneswar have received 3060 Nos. of samples for Test and Analysis and have Tested 2584 Nos. of samples, out of which 2531 Nos. of samples have been declared as Standard Quality and 49 Nos. of samples have been declared as "Not of Standard Quality" & 6 Nos. sample declared as Spurious. The SDT & RL (O), Bhubaneswar have also Tested 2977 Nos. of Excise samples. Action against the offenders has been taken in respect of all declared Not of Standard Quality & Spurious drugs.
- 1352 Nos. of Retail and Wholesale Drug licences have been granted.
- Fines amounting to Rs. 2,38,141/- have been collected from the offender due to enforcement of COTPA-2003.
- Revenue amounting to TRS. 7308 have been collected from licence fees and fines.

**CHAPTER - 13**

**Orissa State AIDS Control Society  
(OSACS)**

## CHAPTER - 13

# Orissa State AIDS Control Society (OSACS)

### Background:

National HIV/AIDS control Programme was operational in Odisha state since 1992. The first phase of National AIDS Control Programme (NACP-I) from 1992-97 was directly implemented through Director of Health Services and NACP Phase –II (1997-2004) in the name of State AIDS Cell (SAC) and NACP Phase-II (2004-2006) under the department of Health & Family Welfare, Govt. Orissa. Since July, 2004, Orissa State AIDS Control Society (OSACS) was formed and registered under Society Registration Act of 1860. NACP-I was from 1994-99, NACP-II was from 1999-2006, NACP-III was from 2006-2012 and NACP-IV in place with the objectives of

- Objective 1: Reduce new infection by 50%(2007 Baseline of NACP-III)
- Objectives2: Comprehensive care, support and treatment to all persons living with HIV/AIDS

### Highlights

Districts have been categorized as 'A' to 'D' according to HIV Sentinel Surveillance 2006

- 'A' Category districts – 4 (Angul, Bolangir, Bhadrak, Ganjam)
- 'B' Category districts - 3 ( Baleswar, Khordha, Koraput)
- Rest of the districts is under 'C' & 'D' Categories.

In Odisha **50,485** clients have been detected HIV positive in different Integrated Counseling & Testing centers (ICTC) as on January, 2020. Out of these detected cases **31,261** are male and **19,224** are female. The reported number of deaths is 8465.

Out of the total detections 77% are within the age group of 25 to 49 years and 88% of infection is through sexual route as per the clients' information. Ganjam is having the highest number of HIV/AIDS affected people which accounts about 32% of the total HIV detection in the state.

### HIV specific Services in Odisha:

- Counseling and testing in 228 stand alone, 17 PPP mode and 329 Facility Integrated Counseling & Testing Centers (ICTC). Prevention of HIV transmission from Parent to Child (PPTCT) has been integrated in the ICTC since 2007.
- The clients after detection for HIV in the ICTC, the clients undergo Pre ART registration, CD4 count and Ante Retroviral Treatment in 15 Anti Retroviral Therapy Centers (ART) and 19 Link ART centers
- 40 number of “Surakhya clinics” for syndromic treatment of Sexually Transmitted Infection (STI) and color coded drug kit distribution and RPR test in Designated STI RTI clinics (DSRC).
- Provision safe blood through 84 Blood banks in Odisha out of which 56 are Govt. blood banks. Out of the total blood banks; 12 Blood Component Separation Units (BCSU) are functioning to provide blood products.
- 9 Community Support Centres are functional in the State.
- TI Projects: There are 10 exclusive FSW, 2 MSM, 19 composite FSW and MSM TI Projects, 6 IDU, 9 destination migrant, 2 trucker and 9 transit migrant TI projects are working in Odisha.



- Partnership with NGO for migration intervention in 9 transit points in 9 railway stations ie. Berhampur, Jajpur Keonjhar Road, Balasore, Khariar Road, Titlagarh, Kesinga, Rourkela, Koraput, Khurda Road.
- Link workers scheme is going on in the vulnerable villages in 6 districts. The High risk people from the rural area are indentified with the help of key persons and linked or referred to ICTC and to TI Projects.
  - Ganjam, Khurda, Nuapada, Cuttack, Sundergarh, Kalahandi
- District AIDS Prevention & Control Unit (DAPCU) are functioning in 7 A & B category districts of Anugul, Ganjam, Koraput, Khurda, Balasore, Bolangir, Bhadrak.
- 4 Opid Substiutitional Therapy (OST) centers have been opened in Puri, Cuttack, Bargarh and Khurda to reduce the positivity rate among the Injecting Drug Users (IDUs) and harm reduction strategy is being implemented by NACO through OST centers.

### Highlights of OSACS April 2018 to March 2019:

1. 92% of registered ANC clients are screened for HIV i.e 6.7 lakhs pregnant women counseled & tested after consent and 226 were found HIV positive, received post ANC care as per the guideline.
2. 99% of general client are tested for HIV as per the annual target, i.e. 6.19 lakhs of general clients were undergone counseling & testing; 3273 were found positive.
3. Test & Treat policy was introduced in the state, 91% detected positives are registered in Anti Retroviral Therapy (ART) care, receiving free treatment.
4. 3.85 lakhs of blood units was collected in the blood banks of Odisha and 78% were voluntary collection in comparison to 74% in the year 2018.
5. 49 NGOs are working in the state covering High Risk Group population through their Targeted Intervention Projects. Total population covered 10810 FSW, 4300 MSM, 2250 IDU, 10000 truckers, 92000 destination migrants were covered during the year.
6. 923 Vulnerable villages are covered under Link Worker Scheme, High risk population identified and link to HIV services.
7. 2.35 lakhs patients were treated for STI RTI in the 40 designated STI RTI Centers of Odisha and color coded drug kits were given to the patients for treatment.

### Information Education and Communication (IEC):

1. HIV/AIDS awareness programme telecasted through Doordarshan Kendra and awareess message broadcasted through All India Radio.
2. Hoarding installed in different health facilities and during Car festiva, Puri hoardings on HIV/AIDS awareness erected in different crowded areas.
3. Awareness message published through print media during different events in form of advertisements.
4. 615 nos. of cultural programs were undergone through Song and Drama division by different folk forms of Odisha.
5. Branding of HIV/AIDS message in 80 nos. of OSRTC buses for rural areas. Besides this 7 nos. of branded bus moved in 7 nos. of high prevalence districts and covered 315 villages.
6. 10 lakh awareness messages were sent to BSNL consumers.
7. World AIDS Day observed in State level as well as in the 30 districts.

### New activities for FY 2019-20

- Expanding Community level HIV screening (Saturated in 4 districts, rest 26 districts to be covered)
- 2 New ART centre to be established in PRM Medical College BariPada, DHH Kalahandi.
- Implementation HIV ACT in the state.

### NHM is providing following support in convergence with NACP-NHM

1. Additional incentive of Rs.1000 (Rs500/-to ASHA & Rs500/-to HIV+ve mother)
2. Engagement of contractual Medical Officers for all designated STD clinics. Provision of STI drug kits (Kit-1 to Kit-7) and RPR kit for Syphilis screening to 438 NHM STI care facilities in the state.
3. NHM also supported intensive IEC campaign and health camps with provision of manpower and Mobile health units at 54 places in 11 districts with high volume of source migrants.

CHAPTER - 14

**Acharya Harihara Regional cancer Centre  
(AHRCC)**

## CHAPTER - 14

# Acharya Harihara Regional cancer Centre (AHRCC)

- Acharya Harihar Regional Cancer Centre has been renamed as “**Acharya Harihar Post Graduate Institute of Cancer**”, (AHPGIC).
- The Foundation Stone has been laid by Hon'ble Minister of Health & Family Welfare for construction of bunkers for new Radiotherapy Unit on 09.08.2019.
- The adjacent land of around four acres housing quarters of Industry, DTET and GA department handed over to AHPGIC for expansion as per master plan of Tata Trust (OCCF).
- Ten no. of beds have been added to Paediatric Oncology Unit with existing ten beds and the total bed strength has become twenty.
- A ten bedded separate Pain & Palliative Care unit has been started.
- Both upper-GI and lower-GI endoscopy services has been started by video endoscope systems.
- Oro-pharyngo-laryngoscopy has been started by Rigid Hopkin's video endoscope.
- An MOU has been signed with CDAC, Noida for implementation of O-eHMIS Project as per the decision of Health & FW Department on 08.11.2019.
- Third batch of M.Ch. student in Surgical Oncology and Gynaecological Oncology have joined for the session 2019-20.
- The OT Technician course (5 seats) will be started as per the recognition of State Board for Allied Sciences.
- An MOU has been signed with Sambalpur University for initiating the Internship course in Medical Physics in collaboration with AHPGIC.
- A state level CME on **Cancer Awareness** was organized for paramedical and nursing students on the occasion of National Cancer awareness Day in AHPGIC on 07.11.2019.
- A CME on **Good Clinical Practice** was conducted in collaboration with ICMR-RMRC, Bhubaneswar on 23.11.2019 as per the New Drugs and Clinical Trials Guidelines.
- The State level **World Cancer Day** was celebrated on 04.02.2020 at AHPGIC where Sri M. Balakrishnan, IAS (Retd.), Chief Advisor, CMO and Chief Advisor, Special Initiatives was the Chief Guest.
- 21 no. of Cancer Screening and Awareness Camps have been organised in different districts of Odisha by faculties from AHPGIC.
- **Clinical Parameters**

Particulars	2015-16	2016-17	2017-18	2018-19	2019-2020(Jan)
Total No. of OPD Registrations:	36461	56128	71925	80539	76052
Total No. of Admission:	22834	25093	25098	28328	237770
Total No. of Pathological Investigations:	189419	233206	278876	358335	353569
Total No. of Radiological Investigations:	2519	3890	7205	12569	12757
Total No. of OT Procedures:	1671	2389	2731	3077	2823
Total No. of Chemotherapy Cycles:	6996	10042	10275	34546	30486
Total No. of Radiotherapy Treatments:	4296	4388	4818	5028	4262

**CHAPTER - 15**

**Strengthening of Blood Services**

## CHAPTER - 15

# Strengthening of Blood Services

## Blood Bank

- A total 83 no. of blood banks are functioning in the State including Govt. /Red Cross/ Private Sector/ Public Sector/ Charitable Trust.

## BCSU (Blood Component Separation Unit)

- 16 Blood Component Separation Units are functioning in the State (Govt. - 7, Private-9).

## Achievement of Blood Donation Movement in 2019

Year (Jan to Dec)	Total Blood collection	Blood Collection from Voluntary sources	Blood Collection from Exchange sources	Voluntary percentage	Number of Voluntary Blood Donation camps	Blood Collection from Camp
2019	438700	280412	158288	63	3260	208000

## NAT-PCR (Nucleic Acid Amplification-Polymerase Chain Reaction) Technology:

- Nucleic Acid Amplification-Polymerase Chain Reaction** Method has been adopted at 4 major blood banks along with 2 connected blood banks in the State for screening of Transfusion Transmitted Infection of recent technology on pilot basis i.e. SCB Medical College Hospital, Cuttack, MKCG Medical College Hospital, Berhampur, VSS Medical College Hospital Burla and Capital Hospital Bhubaneswar along with connected BB i.e. BMC Hospital Bhubaneswar & Central Red Cross Blood Bank Cuttack.

Sl. No	Month	Total Blood Tested in NAT technology	NAT Yield (Positive)
1	Apr-2018 to March-2019	150550	468

- Govt. Odisha has signed MoU with CMC Vellore for implementation of programme i.e. “Control of Sickle Cell and Thalassemia Diseases in the State of Odisha” in Collaboration with CMC Vellore. This programme is initially to be implemented at 2 Districts Odisha i.e. Koraput and Sambalpur on Pilot basis and latter it will be expanded with all 30 Districts.
- 314289 units of blood has been provided to patients treated at Govt., Hospitals at free of cost from Feb-2019 to till now.
- 17215 nos of beneficiaries have been benefitted from transport assistance to Haemoglobinopathy patients till now.
- 9 (Nine) no of Mobile blood collection vans are provided to Seven Medical College and Hospitals, DHH Bargarh and RGH Rourkela.
- Blood bags, kits and reagents have been procured centrally and provided to various Govt., Blood Banks and CRCBB, Cuttack. Expenditure of amount of Rs. 6.00 crores has been incurred for this purpose.
- 15 Nos of Medical Officers and 15 Nos Lab Technicians in the state has already been imparted training about various blood banking technologies.



**NATIONAL HEALTH MISSION**  
**HEALTH & FAMILY WELFARE DEPARTMENT**  
**GOVERNMENT OF ODISHA**