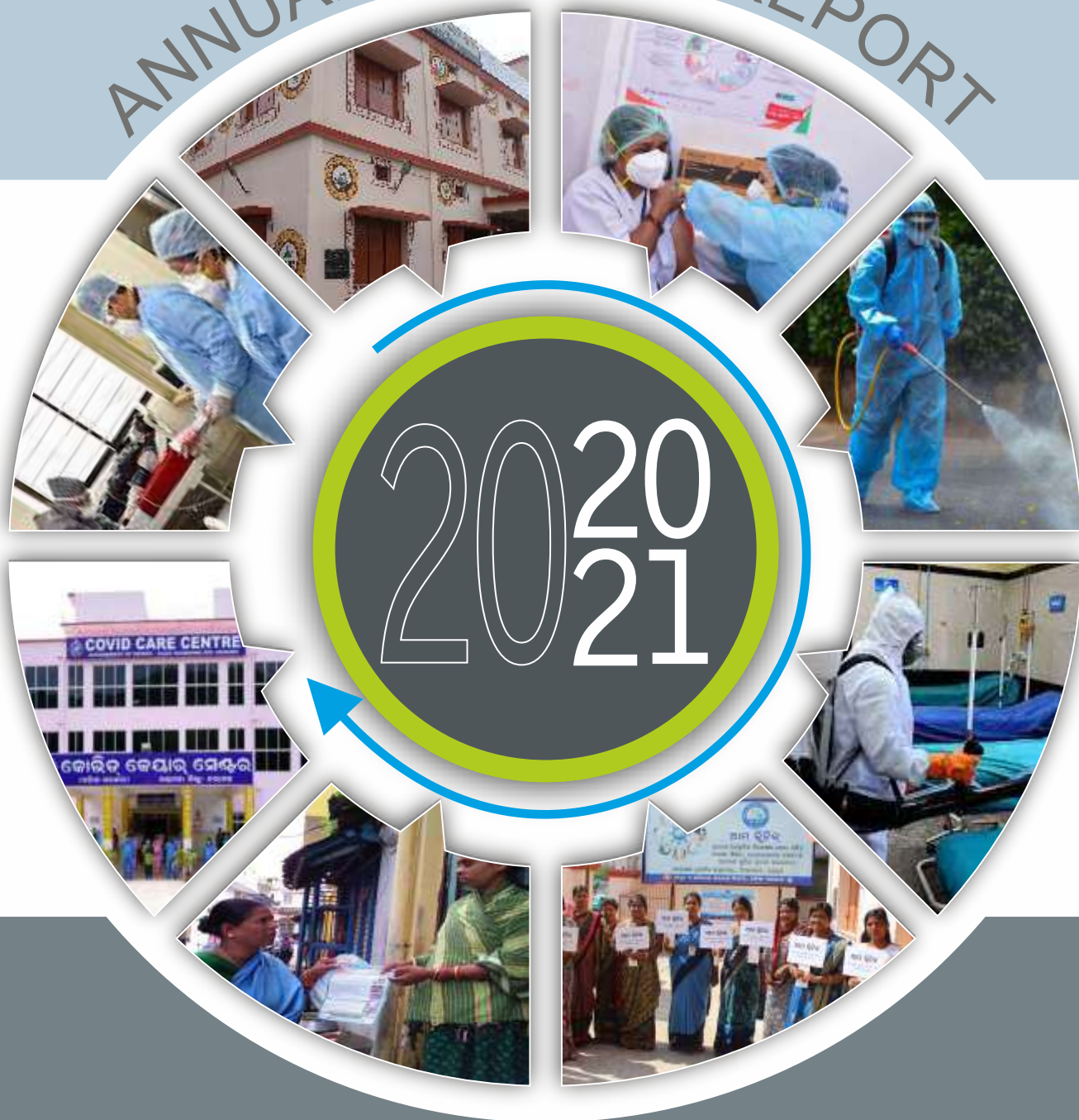


ANNUAL ACTIVITY REPORT



HEALTH & FAMILY WELFARE DEPARTMENT
GOVERNMENT OF ODISHA

NABA KISORE DAS

MINISTER
Health & Family Welfare,
Odisha



Office : 0674-2536665
EPABX : 0674-2322176
nabakishoredas@gmail.com

D.O. No...../MI1FW
BHUBANESWAR

Date :

Message

The foundation of the public health system in Odisha has been laid on the guiding principles - “Sustha Odisha, Sukhi Odisha” and “Healthcare for All – Each Life matters”. Based on these principles, Odisha is marching towards universal health coverage through ensuring universal access to equitable, affordable and quality health care services that is accountable and responsive to the people's need.

The key success factors are launching of Free and assured healthcare services at all public health facilities including empanelled private hospitals under the broad umbrella of Biju Swasthya Kalyan Yojana (BSKY); steady increase in public health financing under State Budget; cadre restructuring and incentivising doctors and paramedics; Creating promotional avenues through amendment of service rules for Paramedics such as Staff Nurses, LT, Radiographers. Besides, due to establishment of state-of-art public health infrastructure, use of medical technology like high-end pathology test, CT, MRI for improved service delivery; multi-skilling of service providers for quality of care; promotion of quality assurance standards through pursuing National Quality Assurance Standard (NQAS) & LaQshya certification for labour room & Operation Theatre are some of the major factors lead to the success. Also for providing quality health service in a transparent and timely manner Department has taken lot of incentives like promotion of healthy & hygienic hospitals through institutionalising Kayakalpa Award to public health facilities, transparency and transformation in healthcare service delivery through effective patient/ attendant feedback system as part of 'Mo Sarkar' initiative under 5Ts along with strengthening ancillary services such as Housekeeping & Cleaning Services, Linen & laundry, Security, Lift, Electrician, Plumber, Attendant and Gardening under State specific scheme NIRMAL with investment of about Rs. 2,000 Crs for five years.

During the current year, despite Covid-19 pandemic sincere efforts were made to provide non-Covid essential health services through public health system through augmenting public health system and organizing two rounds of integrated campaign for active Surveillance for COVID-19 and sensitization of vulnerable persons. Also, Active Case Finding for TB, Population Based Screening for NCD and NCD screening of all healthcare service providers, Surveillance & Sensitization for Malaria, Dengue & Diarrhoea (MDD) & Intensive Diarrhoea Control Month (IDCM), Special immunization campaign and Bottom-up planning for preparation of Gram Panchayat (GP) development plan have been taken up during the pandemic period.

I am happy to state that since 15th January, 2021, Covid Vaccination drive has been initiated in the State to vaccinate our Health care workers, Front line workers followed by above 50 years population. However, we have miles to go & still a lot to achieve. I sincerely, believe that all of us must, as a team should participate in planning & executing health care activities.

I take this opportunity to congratulate the Department for successfully bringing out the publication of the Annual activity Report-2020-21 which will prove to be a good reference for health professionals and administrators.



(Naba Kisore Das)

Mr. P.K. Mohapatra, I.A.S

Additional Chief Secretary to Government
Health & Family Welfare Deptt.
Government of Odisha



Lokaseva Bhavan
Bhubaneswar - 751001
Ph. : 0674 - 2394935 / 2536632
Fax : 0674 - 2392438 / 2395235
E-mail : orhealth@nic.in

Foreword

The Department of Health & Family Welfare has taken several reform measures for strengthening delivery of healthcare services in lines with Sustainable Development Goals and striving sincerely to achieve universal health coverage through ensuring universal access to equitable, affordable and quality health care services .

The year 2020-21 started with Covid pandemic which forced the Department to issue various guidelines & protocols for citizens and to provide public and private health facilities to prevent rapid spread of this pandemic in the State. For smooth management of Covid situation, total 17,647 numbers of Temporary Medical Camps (TMCs) with 8,26,079 beds and 178 COVID Care Centers with 21,059 beds were set up in the State to quarantine the migrants and to provide proper medical facilities to the asymptomatic peoples. All these helped to reduce the rush at the 48 dedicated COVID hospitals. State managed to test more than 78 lakh cases till 8th February, 2021 at various testing centres with more than 95% recovery rate and 0.4 fatality rate , in the country and below national average. With consistent effort by State Government COVID cases have drastically come down. Besides Covid vaccination drive has been taken up to vaccinate our Health care workers, Front line workers will be followed by above 50 years population.

Despite Covid-19 pandemic, sincere efforts were made to provide other essential health services .The State has ensured effective implementation of various citizen centric schemes like JSY, free Emergency ambulance services, Maternity waiting homes, operationalization of delivery points & First Referral Units (FRUs), labour room standardization, functioning of Newborn Care units, Nutrition Rehabilitation Centers, early detection and treatment of childhood diseases under RBSK scheme, capacity building of service providers and overall improvement in quality of care at public health facilities under Laqshya and Kayakalp schemes. Moreover, active participation of ASHAs in every village has bridged the gaps between community and service providers for utilization of public health facilities.

Under Biju Swasthya Kalyan Yojana (BSKY) provision for free health services for all in all State Government health care facilities was ensured. Provision has also been made for reimbursement of transportation cost @ Rs. 1,000/- per pregnant woman for institutional delivery in 7853 notified difficult villages and Rs.500/- per case provided for assured drop back to post delivery and sick infant cases. State has done well in Durgama Anchalare Malaria Nirakaran (DAMaN) in remote areas, LLIN distribution, MDD campaign. Under Population based screening more than 14 lakh population were screened above 30 years of age and more than 1612 Health and Wellness Centres made operational in the State. For catering to the needs of the urban population with focus on slum population, comprehensive weekly specialist services during OPD hours were implemented at 90 UPHCs in 27 cities under AMA Clinic scheme. The Day care Cancer Chemotherapy units are also functional in 28 districts and comprehensive, affordable & equitable eye care facilities were also provided to all under Sunetra scheme.

I would like to thank all the Health Directorates, field officials & National Health Mission team for bringing out this comprehensive Annual Activity Report for the year 2020-21.


(P.K. Mohapatra)

CHAPTER	DETAILS	Page No.
1	Activities of Health and Family Welfare Department: An Overview	01
2	National Health Mission	11
3	Directorate of Health Services	31
3.1	Human Resource in Health & Research	31
3.2	State Drug Management Unit	33
3.3	OeHMIS	33
3.4	Planning & Infrastructure Development	34
4	Directorate of Public Health	35
4.1	National Vector Borne Disease Control Programme (NVBDCP)	35
4.2	National Tuberculosis Elimination Programme, ODISHA	37
4.3	National Leprosy Elimination Program (NLEP), Odisha	38
4.4	Integrated Disease Surveillance Programme (IDSP), Odisha	40
4.5	National Viral Hepatitis Control Program	41
4.6	National Rabies Control Program	41
4.7	National Iodine Deficiency Disorders Control Programme (NIDDCP)	42
4.8	National Mental Health Programme	42
4.9	National programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke (NPCDCS)	43
4.10	National Programme for Health Care for Elderly (NPHCE)	44
4.11	National Programme for Prevention and Control of Deafness (NPPCD)	44
4.12	National Oral Health Programme (NOHP)	44
4.13	National Tobacco Control Programme (NTCP)	44
4.14	Odisha Comprehensive Cancer Care Programme	45
4.15	National Programme for Control of Blindness(NPCB)	45
4.16	Bio- Medical Waste Management	48
4.17	National Programme for Prevention and Control of Fluorosis (NPPCF)	49
5	Directorate of Family Welfare (DFW)	50
5.1	Reproductive Health	50
5.2	Maternal Health	51
5.3	Child Health	52
5.4	Rashtriya Bal Swasthya Karyakram (RBSK)	55
5.5	Rashtriya Kishor Swasthya Karyakram (RKSK)	56
5.6	Routine Immunization	57
5.7	Nutrition	59
5.8	Sampurnna Scheme	61
5.9	Equity & Advocacy	63
5.10	Strengthening Implementation of PCPNDT Act	64
6	Directorate of Food Safety	66
7	Directorate of Medical Education & Training (DMET)	67
8	State Institute of Health & Family welfare (SIHFW)	69
9	Directorate of AYUSH	72
10	Directorate of Nursing	74
11	Odisha State Medical Corporation Limited	76
12	Directorate Of Drugs Control	80
13	Odisha State AIDS Control Society (OSACS)	82
14	Acharya Harihara Regional Cancer Centre (AHRCC), cuttack	85
15	Strengthening Blood Services	86
16	Health Assurance Schemes	88
17	Directorate of Health Intelligence & Vital Statistics	90

1 CHAPTER

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	91
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, 2019)

1.3 Resources and Budgetary Allocation for the Year 2020-21

For the financial year 2020-21(BE) an amount of Rs. 769984.40 Lakh had been made in the Health & Family Welfare Budget as detailed below:

Table 1 - Resource and Budgetary allocation

SI No.	Budget Head	B.E (in lakhs)
1	Administrative Expenditure	257238.77
2	Programme Expenditure	512745.63
	Total	769984.40

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

* N.B: The above Budget includes two major initiatives of State Government, i.e.

Provisions for major schemes / Programmes during 2020-21

1	Biju Swasthya Kalyan Yojana (BSKY)	NIRAMAYA	50000.10
		NIDAN	21468.58
		SUNETRA	3500.00
		SAMMPurNA	2500.00
		Emergency Medical Ambulance Service (EMAS)	8102.92
		Odisha State Treatment Fund (OSTF)	3000.00
		Strengthening of Blood Services (including Grants to SBTC)	3500.00
		Odisha comprehensive Cancer Care Plan	6000
		Strengthening of Casualty Emergency & Trauma Centre	1523.37
		Swasthya Sanjog	2012.94
		Swasthya Sahaya	6166.77
		NAT PCR Facilities	1200.00
		Mental Health Programme	200.00
		Mobile Health Unit (PPP Mode)	415.86
		SHAS Establishment and other cost (Including Pvt Hospitals)	17190.57
	Total		126781.11
2	Mukhya Mantri Swasthya Seva Mission (MMSSM)	Infrastructure Development of Health Institutions (Non Res)	44500.00
		Infrastructure Development of Health Institutions (Res)	7500.00
		Redevelopment Programme of SCB MCH	5000.00
		Public Health Response	500.00
		Health Investment Promotion Policy	100.00
3	Malaria Control Programme (DAMMaN)		999.97
4	De- addiction Centre		750.00
5	Bio Medical Waste Management		550.00
6	Food Safety Programme		440.00
7	Dedicated Power Supply		100.00
8	Diet		8767.01
9	Bedding, Clothing& Linen		0.12
10	Bio- Medical Waste Management Expenses		923.33
11	KHUSHI		3000.00
12	Digital Health		1647.46
13	Jeevan Uphar		50.00
14	Tele Medicine		410.00
15	Liver Transplant Unit		25.00
16	HMIS		1728.00
17	IEC		300.00
18	Sanitation expenses		0.27
19	Corpus Fund		1100.00
20	Sports, Medicine and Rehabilitation Centre		100.00
21	Sickle Cell & Thalasemia		1500.00

22	Decretal Dues (Charged)		100.00
23	Emergency fund	H & FW Deptt.	75.00
		DHS	75.00
24	Equipment	Medical College & Hospital	2000.00
		District Head quarter Hospital	8000.00
		Drugs Controller	100.00
25	Family Welfare Scheme		41901.13
26	NIRMAL		36000.00
27	Training	ICU personnel & Nursing	161.37
		Medical & Paramedical staff	40.00
28	Ayush		73.67
29	Infrastructure maintenance (PH)		1300.00
30	Family Planning Indemnity Scheme		35.00
31	Skill Lab(Cuttack)		1514.37
32	EAP(Externally Added Project)		1000.00
33	Awards to Health Professionlas /institute		500.00
34	Odisha Cardiac Care Programme		0.01
35	Other Schemes		2554.17
	Total State Sector Schemes		302201.99
	Centrally Sponsored Schemes		
36	Rastriya Swasthya Suraksha Yojana (60:40)		3.00
37	National Ayush Mission(60:40)		2000.00
38	Human Resource in Health & Medical Edn. (60:40) (PMSSY)		40000.00
39	Drugs Regulatory System (60:40)		481.00
40	National Health Mission (60:40)		
41	National Rural Health Mission (60:40)		161725.47
42	National Urban Health Mission (60:40)		3463.17
43	Tertiary Care Programme(60:40)		1.00
44	NMEP & NFCP-CSP & SS of CSP (50:50)		182.00
	Total Centrally Sponsored Schemes		207855.64
	Central Sector Schemes		
45	T.B. Control Programme (Material & Equipment)		0.01
46	AYUSH (Edn. Salary) & Medicine		6.26
47	Equipment for Hom. Edn.		76.86
48	National Goiter Control Programme (Other Contingency)		0.01
49	Materials & Equipment for Malaria eradication programme (NMEP)		0.01
50	Purchase of contraceptives , Equipments & Medicine		1604.85
51	Human Resources Development for Emergency Medical Services		1000.00
	Total Central Sector Schemes		2688.00
	GRAND TOTAL (PE)		512745.63

1.4 Major Activities & Achievements during 2020-21

System Strengthening

- Implementing OeHMIS at DHH level and Functional Help desks at all FRUs for providing better information and services to the patients.
- 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. Based on the feedback various steps being taken to improve the service delivery and hospital amenities.
- Niramaya: Free drug distribution scheme :
 - Free Drugs provided to patients at all levels in Govt. facilities across the State under Niramaya Scheme.
 - 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.
- 104 call Center : toll- free call centre providing information and counselling , Follow up of sample beneficiaries registered under RCH for verifying service provisions.
- Equipment procurement guidelines issued.
- Drug management policy notified.
- Diet menu prepared for health institutions and free diet provided to patients.
- 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).
- Integrated Lab: Public health labs set up in all districts. CHC integrated labs set up
- Contingency increased + untied funds guidelines made for DHHs, CHC and PHCs under state and central budget.
- 41 CBNAAT machines are functioning across the State.
- NCD clinics are functioning effectively at 30 DHHs and 62 CHCs during April to December 2020.
- ICU are functioning effectively in 10 districts during April to December 2020
- Comprehensive equipment maintenance programme is in place under SEMU.
- Strengthened 1612 Health & Wellness Centres with provision of IT system and introduced wellness activities like Yoga & health promotion till February,2021.
- 100 nos. of AYUSH dispensaries have been identified for up-gradation as AYUSH Health & Wellness Center.
- 63 Malaria Sentinel site are functioning effectively during April to December 2020.
- Provision of 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.

- 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

Service delivery

- Ensuring free referral transport services : 500 Ambulances are functioning effectively under 102 & 4,04,255 cases have availed services during April to December 2020. Under emergency ambulances 596 under 108 are functioning effectively in the State. (56 ALS & 540 BLS) & 4,52,230 cases have availed services during April to December 2020.
- BSKY: Strengthening of Free Health Care Services at Public Health facilities from Sub Centres to Medical Colleges & Hospitals. More than 3.51 crores instances of Free & cashless treatment availed from April to December 2020. Additional cashless treatment assistance for women members of BSKY enhanced from 2 lakhs to 5 Lakhs, enabling women members to avail up to 10 lakh as sum assurance. 20818 BSKY beneficiaries provided cashless treatment amounting to Rs. 28,40,85,020/- from 1st of April to 31st December, 2020. Around 197 Pvt. Hospitals have been empanelled for provisioning of free health care services to economically vulnerable families
- Continue screening of 30+ year's population for Non Communicable Diseases (NCDs). More than 14.56 Lakh 30 + years population screened for NCD from April to December 2020.
- Strengthening of Free Diagnostic Services (Nidaan) in all Public Health Facilities up to Sub Centre Level. More than 1.24 crores tests done under Free Diagnostic Services (Nidaan) for patients attended public health facilities from April to December 2020.
- Strengthening of High End Pathology Services under Free Diagnostic Services (Nidaan) in all DHHs in PPP mode. 39,500 Patients received High End Pathology Services (More than 1.4 Lakhs Tests done) in 32 DHHs under Free Diagnostic Services (Nidaan) from April to December 2020.
- Strengthening of Free Dialysis Services (Sahay) in PPP mode. More than 1.28 lakh Free Dialysis sessions conducted for the patients from April to December 2020 out of which 1.16 lakh were done through PPP mode.
- More than 1,17,190 patients received the Free CT scan services from April to December 2020 out of which 77,760 lakh were done through PPP mode.
- Strengthening of Day Care Chemotherapy Centres at DHH Level. More than 13,589 free chemo cycles in 32 centres operational at DHHs were done from April to December 2020.
- Expansion of Universal Free Blood Services in all Govt. Blood Banks (BBs) & Blood Storage Units (BSUs). More than 2,80,868 free Blood Units given to patients during April to December 2019.
- Ensured effective implementation of Cash Incentives @500/- per month for Blood Disorder Patients for continuing treatment.
- Ensured effective implementation of Niskhya Poshan Yojana for provisioning of Cash assistance @500/- per month per TB patient. More than 24,169 new Patients received Cash incentive through DBT from April to December 2020.
- 14 DHHs and 1 Private Hospital equipped to conduct re-constrictive surgery. 6054 reconstructive surgeries done till November-2020.
- 30,388 TB patients put under treatment during April to December 2020 with 86.24 % Treatment success rate.
- 19,455 cataract operations conducted and 10 Mobile Vision Centres established during April to October-2020.
- 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, MPHW[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)
- Guidelines and protocols issued to all districts on Covid-19 pandemic
- SOPs made for line depts + 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.
- Sishu Bhawan 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.
- Two new Medical College & Hospitals at Jajpur & Phulbani has been taken up under MO SARKAR.
- Extension of Capacity of 5 Medical College & Hospitals from 500 to 650 seat (Balasore, Baripada, Bolangir, Koraput & Puri) under MO SARKAR announcement.

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.

Bio medical waste management: Currently all 1787 hospitals are under the Authorization administration of SPCB, Odisha. Liquid waste management system is established at 32 DHH, 30 SDH and 280 CHCs. 337 hospitals have received kayakalpa award in 2019-20.

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.

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.
- 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.

Others Key RCH Intervention

- 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 Suraksha Yojana (JSY): Total 69,37,702 number of beneficiaries benefitted under JSY (from 2005-06 till 2020-21- upto 3rd Quarter).
- Janani Shisu Suraksha 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. . By 2nd Quarter of 2020-21, 9 nos. of OTs and 9 LRs have been certified from State and National Level.
- Maternity Waiting Homes (Maa Gruha): So far 93 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.
- 43 Special Newborn Care Units (Target: 45) and 46 New Born Stabilization Units are operational. For preventing mortality and brain damage immediately after birth, 757 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.

- RSKS: 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 (Puri DHH, Sambalpur DHH, 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

- 7 new Medical College & Hospitals is being constructed at Bolangir, Koraput, Balasore, Puri, kalahandi, keonjhar & Mayurbhanja (Koraput, Balasore, Bolangir & Baripada – Completed & functional).
- Major Health Infrastructure developments are being taken up in premier institutions like SVPPGIP, Capital Hospital, AHRCC under MO SARKAR Announcement.
- Construction of Cardiac Care Hospital at Jharsuguda, Cancer Hospital at Baragarh, LINAC Building at AHRCC and comprehensive infrastructure development of SCB Medical College & Hospital also been taken up under MO SARKAR Announcement.
- 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 – 44, Progress - 13*).
- 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).

Ayush & Public Health System

- 1190 Independent AYUSH dispensaries (Ayur-620, Homoeo - 561, Unani - 9) are functional in the State. Apart from these 796 Ayurvedic Clinics, 680 Homoeopathy Clinics and 09 Unani Clinics have been co-located with allopathic health facilities (PHCs & CHCs).
- Regular Ayush Doctors under State : 930/1293
- Contractual Ayush Doctors under NHM : 1231/1485
- One Pachakarma unit is functioning at DHH, Kendrapara & two more Panchakarma unit will be made functional at DHH, Bargarh and Keonjhar.
- Two Ayurvedic hospitals are functional in the State.
- 7 AYUSH Medical Colleges are existing in the State (Ayur – 3, Homoeo – 4)
- Essential AYUSH drugs are being provided to all AYUSH co-located clinics at PHCs & CHCs of the State.
- Process has been started to procure Homoeopathic Medicines through OSMCL, Bhubaneswar.

Impact of Health Interventions in Odisha

- Odisha has recorded the highest 35 points decline in IMR from 75 in 2005 to 40 in 2018 (SRS).
- 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.
- Odisha recorded 135 points reduction in MMR from 303 (SRS 2006) to 150 (SRS 2016-18).

- State has already achieved the 12th Five year Plan goal w.r.t the Total Fertility Rate i.e 2.0, in 2015 and 1.9 in 2018 as per SRS, 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%.
- Due to effective implementation of TB Programme in the State, the overall State ranking of the composite TB index has been improved from 27 rank in 3rd quarter of 2018 to 10th rank in 3rd quarter of 2019 among all states in the country.
- Odisha's model in sharpest decline in Malaria has been acknowledged Globally by WHO, as Odisha has recorded the path breaking decline over 80% in reported malaria cases and death between 2016 to 2018.
- As per the 75th round of NSSO report (2017-18), about 75.1 % in Rural & 55.5 % in urban patients availed IPD services at public health facilities, which is 2nd highest in country followed by Assam. Likewise, 72.2% patients availed OPD services at public health facilities
- As per patient satisfaction survey conducted by 104 health helpline, over 92% of patients are satisfied on the healthcare services at public health facilities.
- There is a marked reduction in out of pocket spending (OOPS) in public health system.
- 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.

2 CHAPTER

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 45 points in the country by reducing IMR from 75 in 2005 to 40 in 2018(SRS). Maternal mortality has also declined from 303 in 2006 (SRS) to 150 in 2018(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 0.7 in 2020 from 5.23, reported in 2017. Deaths due to malaria have come down from 24 in 2017 to 9 in 2020.

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

The focus during 2020 was on strengthening availability of integrated Reproductive health services by regular review through existing mechanisms as well as by providing supportive supervision and mentoring support through technical agencies but due to covid-19, the focus was shifted to improve outreach services like home delivery of contraceptives and improving availability of Family planning commodities across the health facilities and ASHAs.

Review of Family Planning program was conducted across all districts with the help of online platforms along with separate online reviews of the status of logistics availability as well as FPLMIS operationalization. Community mobilization and improving service uptakes especially for newer contraceptives was done through reorientation and sensitization of Public Health Extension Officers throughout the State. Availability

of contraceptives was routinely reviewed by conducting telephonic interviews of randomly selected ASHAs in aspirational districts.

During the pandemic, special focus was given towards ensuring uninterrupted supply of contraceptives to the health facilities and ASHAs. As the movement of vehicles was prohibited during initial phases of lockdown, courier services of India Post were widely utilized for transportation of FP commodities throughout the State. During the lockdown phase i.e. March to August 2020, a total of 332 consignments were sent through the postal services. Because of this intervention stock availability was increased to 95% during 2020 as compared to 73% for 2019. The lead time also decreased to 7 days from 9 days during 2020. Indenting through FPLMIS was also increased to 524 indents in 2020 as compared to 247 indents during 2019.

Periodic reviews and commodity availability improved the utilization of reversible methods like Condoms (50% increase), Chaya (108% increase) and Mala-N (9.5% increase) during the months of June to August 2020. Similar improvement was also seen in the PPIUCD acceptance rates in the 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 550 institutions are functional.
- **Janani Suraksha Yojana (JSY):** Total 69,37,702 number of beneficiaries benefitted under JSY (from 2005-06 till 2020-21- upto 3rd Quarter).
- **Janani Shisu Suraksha 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 Suraksha Karyakrama at public health facilities. 2,50,951 pregnant women have received various JSSK entitlements during the First 2 Qtrs of 2020-21.
- **Skilled Attendant at Birth (SAB)** training was given to the Paramedics and AYUSH doctors to augment the institutional delivery (Public Facilities) and Home Deliveries in hard to reach areas. During the period, 255753nos. of Deliveries have been conducted/assisted by SAB trained staffs
- **LSAS & EmOC :** Out of 94 FRUs, 72 FRUs are having 69 nos. of LSAS trained doctors & 6 nos. of EmOC trained doctors are providing Comprehensive Emergency & Obstetrics care services.
- **Maternal death review (MDR)** committees are formed at State and district level to review the maternal death. During 2020-21, 327 nos. of maternal death have been reported by August 2020 (MDR Report) and out of that 207 nos. of death are reviewed by CDM&PHOs of the district.
- **Comprehensive Abortion Care (CAC) :** In the State 267 facilities are providing Comprehensive Abortion Care services where trained doctors are available for providing services along with counseling & scope of post abortion contraceptive services.
- **Village Health & Nutrition Day:** Fixed day health & Nutrition day (VHND) is being organized every Tuesday / Friday at village Anganwadi centers. So far 98% sessions held against planned during 20-21 (upto September-20)
- **LaQshya :** Under this programme the LR & MOT will be standardized for providing quality care services. By 2nd Quarter of 2020-21, 9 nos. of OTs and 9 LRs have been certified from State and National Level.
- **Obstetric HDU & Hybrid ICU :** For providing critical care for obstetrics cases, 3 High Dependency Units are functional in 3 DHH(Kandhamal, Kalahandi & Keonjhar district) and 2 Hybrid ICUs in MCH MKCG, Berhampur & MCH SCB Cuttack are operational.



- **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. Out of 106 MWH, 93 MWH are operational.
- **Initiatives for Anaemia Control:** IFA & Calcium Supplementation - About 4 Lakhs Pregnant women covered during 2020-21 (Upto Sept 2020). Inj. Iron sucrose, Inj. FCM & Blood transfusion services are 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. During the year 2020-21 all registered ANC and PNC cases are provided with IFA & Calcium. Also the ANC Cases in 2nd trimester are given Deworming tablets.
- **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. During the year 2020-21 upto December 2020, 43283 nos. of antenatal cases have been screened. 73 nos. of volunteers are providing services in the PMSMA clinic days in different government health institutions and 4012 nos. of high risk cases has been detected who were given Red Card.

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, 530 Newborn Care Corners are established at all functional delivery points.
- **New Born Stabilization Units (NBSU):** For treatment of moderately sick & low birth weight newborns and for stabilization of sick newborns prior to referral, 43 Newborn Stabilization Units are currently operational in the State. Up to Sep. 2020, out of 4374 Newborns admitted in NBSU, 2922 newborns have been treated at NBSU and 1166 have been referred to SNCU for appropriate treatment.
- **Special Newborn Care Units (SNCU):** The State has established 43 out of 45 Special Newborn Care Units (SNCU) for treatment of severely sick newborns at different medical college & hospitals, DHH, SDH and certain CHCs.
- **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.
- **Intensified Diarrhoea Control Month (IDCM):** In the 2020 round, the campaign was integrated with COVID-19 screening, NCD screening, TB campaign, etc. 73.4% under five children were distributed with prophylactic ORS packets. Further, 99.7% under five diarrhoeal cases were treated with ORS.



- **National Newborn Week (NNW):** A week of dedicated IEC activities was carried out during November 15th to 21st, 2020 for awareness generation on newborn care at home. Besides, all newborns are screened at delivery points and medical colleges and home visits to all newborns by ASHAs. 55265 newborns were visited by ASHA and 2633 nos of SNCU discharged newborn followed by the ASHA..
- **Home Based Care for Young Children (HBYC) :** All ASHAs have been trained for making home visits to all young children for early identification and referral of newborns with danger signs/ development delays/ SAM and providing counselling to caregivers on home based care of young children, appropriate feeding practices, ORS & Zinc therapy and IFA supplementation.
- **Childhood Pneumonia Management Programme: Social Awareness and Action to Neutralize Pneumonia Successfully (SAANS)**

SAANS programme was rolled out in 2020-21 on 12th November, 2020 by the Additional Chief Secretary, H&FW Deptt., Govt. of Odisha. Under this programme, all doctors and Staff nurses are being trained on standard facility based management protocols for management of childhood pneumonia. Besides, an extensive IEC campaign has been planned in all the districts till the end of February, 2021. All ASHAs and ANMs are also being trained on early identification and prompt management of childhood pneumonia cases.
- **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.

2.4 Rashtriya Bal Swasthya Karyakram (RBSK):

Rashtriya Bal Swasthya Karyakram (RBSK) rolled out in Odisha by Honourable CM at Baripada on 1st March-2014 .The objective of the programme is to screen the children at early stage and provide complete treatment. Under this programme, 38 identified health conditions to be addressed through '4D' approach which includes Defect at Birth, Deficiencies, Childhood Disease and Developmental Delay & Disabilities. Under this programme, 636 number of Mobile Health Teams are functional for screening of 0-18 years children.

Screening of Children at AWC & Schools:

During the Year 2020-21 Screening by MHT under RBSK has been deferred due to COVID-19 pandemic situation and closure of AWC & Schools.

Screening of New Born at Delivery Points:

- New born screening of visible birth defects by service providers is conducted at Delivery Points. From April to September 2020, 2, 82,479 numbers of new born have been screened at delivery points and 4015 number of children have been identified with visible & functional birth defects.



- Required equipment & HR for new born hearing screening are provided to DEICs. New Born Hearing screening for early identification of Congenital Deafness is initiated in 29 DEICs.
- To prevent blindness related to retinopathy of Prematurity, RoP screening is conducted in 8 health institutions and during the year 2020-21, 2140 number of sick new born are screened and 406 numbers of identified children are provided laser therapy to prevent blindness.

Early Intervention & Therapeutic services at District Early Intervention Centers :

For Early treatment & Therapeutic intervention for birth defect & children with CP, Autism, ADHD, Mental retardation, Neuro motor impairment and Speech impairment, DEIC is operational in 32 District Head Quarter Hospitals. During the period, 30905 children have been treated at DEIC.

Treatment Achievement:

Under 4D approach during 2014- 2020, total 24, 24,640 number of identified children have been treated under RBSK at Primary, Secondary and tertiary facilities.

Major Health Condition	Cumulative Achievement	Achievement during 2020-21	Treating Institution / Partnership
Neural Tube Defect (Surgery)	146	10	SCB MCH & SVPPGIP
Club Foot Correction & Surgery	3240	243	At DEIC with support of Cure International Trust
Cleft Lip & Palate surgeries	4041	320	Six Smile train empanelled hospitals
Eye Surgeries	3124	104	LVPEI
Cardiac Heart Surgeries	2257	110	SCB MC&H, Sathya Sai Cardiac Institute, Ahmadabad, Narayana Hrudayalaya & OSTF empanelled Hospitals
Provisioning of Digital Hearing aid to HI children	6090	212	DEIC
Cochlear Implantation surgery	24	02	AIIMS, BBSR
Retinopathy of Prematurity	846	406	LVPEI
Other Surgeries	2176	68	SCB MCH, VSS MCH, MKCG MCH , SVPPGIP & AIIMS, Bhubaneswar
Developmental Delay Children	1,46844	15,489	DEIC

2.5 Rashtriya Kishor Swasthya Karyakram (RKSK)

Rashtriya Kishor Swasthya karyakram (RKSK) expands the scope of preceding ARSH programme, through identification of six priority areas viz. Nutrition, Mental Health, Substance abuse, Injuries and Violence, Prevention of Non-Communicable diseases and Sexual and Reproductive Health. Capacity building of service providers in these six thematic areas is vital for effective and successful implementation of RKSK programme.

The program focuses on adolescents belongs to age groups 10-14 years and 15-19 years with universal coverage, i.e. males and females; urban and rural; in school and out of school; married and unmarried; and vulnerable and under-served.



The program implemented under RKSK are as follows:

- **Peer Education:** The peer education program aims to ensure that target adolescents benefit from regular and sustained peer education sessions covering the six identified health issues (nutrition, sexual and reproductive health, conditions for NCDs, substance misuse, injuries and violence including gender based violence and mental health). This is eventually expected to improve life skills, knowledge and aptitude of adolescents.

The programme implemented in 4 districts (Dhenkanal, Bolangir, Koraput & Bhadrak). Peer Education program has been rolled out covering 5901 villages in 43 blocks and 28620 Peer Educators identified. In 2020-21 Total **996 batches of 6 days** training organized keeping COVID-19 norms in view for Peer Educators at sub block level and more than 15000 Peer Educators and 3500 ASHAs trained by ANMs, HW (M) & PHEOs.

- **Adolescent Health Day(AHD) :** AHDs organised by ANMs with the help of ASHA, AWW & PEs focusing on activities like sharing Information on Nutrition,SRH,Mental Health,GBV & NCDs, provision of Commodities like Sanitary Napkins,IFA,Albendazole & contraceptives and different Services like General health check?up, (BMI& anemia),Referral to SHRADHA clinics (for counseling and clinical services).Currently the program implemented in 4 districts (Dhenkanal, Bolangir, Bhadrak & Koraput) and up to September 2020 , 4984 AHDs conducted at village level.

- **Menstrual Hygiene Scheme (MHS):** The MHS program aimed at promotion of menstrual hygiene among adolescent girls aged (10-19 years) in rural areas to increase awareness among adolescent girls on menstrual hygiene, to increase access to and use of high quality sanitary napkins by adolescent girls in rural areas, and to ensure safe disposal of sanitary napkins in an environment friendly manner. Currently the program 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 466414 out of school adolescent girls targeted under the programme and distributed sanitary napkins through AHSA.

- **The Weekly Iron and Folic Acid Supplementation (WIFS)** program involves the administration of supervised Weekly Iron-folic Acid Supplements of 100mg elemental iron and 500ug Folic acid using a fixed day approach for school and non school going adolescents respectively, screening of target groups for moderate/severe anemia and referring these cases to an appropriate health facility, biannual de-worming (Albendazole 400mg) for control of helminthes infestation, information and counseling for improving dietary intake and for taking actions for prevention of intestinal worm infestation. The IFA distributed at schools and AWC on weekly basis. 35728 schools and 71306 AWCs targeted under the program and the consumption as per reported coverage is 31.72 % up to November 2020.

- **Adolescent Friendly Health Clinic:** The facility level interventions are mainly linked to strengthening of adolescent friendly health clinics (designated as Shraddha clinics in Odisha). The shraddha clinics provides counseling and curative services at primary, secondary and tertiary levels of care on fixed days and fixed time with due referral linkages. The three key functions of the clinics are availability of commodities (WIFS tablet, albendazole, sanitary napkins, non-clinical contraceptives and medicines), information sharing and counseling on six indentified health issues of adolescents through behavior change communication tools and curative services.



251 Shraddha clinics are Operational covering all 30 districts in DH, SDH and some designated CHC level. At District Hospitals the Shraddha clinics clubbed with Integrated Counseling Centre. Total 43360 adolescents received different adolescent health services through Shraddha clinic till September 2020.

- **School Health Programme Under AYUSHMAN Bharat:**

School Health programme is a joint initiative of Department of Health and Family Welfare and Department of School & Mass Education. Under the programme two teachers, preferably one male and one female, in every school designated as "Health and Wellness Ambassadors" and will be trained to transact health promotion and disease prevention information in the form of interesting activities for one hour every week in schools. In Odisha 10 aspirational districts are targeted to implement the programme with a target to cover 8456 schools in 101 blocks of 10 districts.



Progress under the programme:

1. State level Committee on School Health formed.
2. Joint secretary letter communicated to all concerned for implementation.
3. 8456 Head Masters and all district and block health & education team oriented virtually.
4. 564 batches of 5 days training of Health and Wellness Ambassadors (Teachers) planned and 50 batches are completed. The training is going on and all teachers will be trained by March 2021.

2.6 Free Transportation Services

Integrated Patient Transport & Health Helpline Services:

Emergency Medical Ambulance Services (108), Boat Ambulances and 24X7 Referral Transport Services (102) have been now integrated and operationalised under single Integrated Patient Transport & Health Helpline Service (IPTHHS) with effect from 10th November 2018. These services would be accessible with a single toll free number "108" and Health Helpline with single toll free number "104".

A. Emergency Medical Ambulance Service (EMAS: 108 Ambulance):

EMAS has been made 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. As of now, 596 (108 ambulances) covering 540 BLS and 56 ALS ambulances have been operationalised and more than 31 lakh patients have been benefited by this Emergency Medical Ambulance Services. Of these, 84 new BLS ambulances have been flagged off by Hon'ble CM of Odisha on 1st Jan, 2021 to boost the reach and scale of emergency medical ambulance care in the state.



- Average response time of EMAS ambulances is 28 Minutes (Target-30 Min)
- Total 4,52,330 patients have availed the EMAS Ambulance Services during the year 2020-21 (up to December 2020)

B. Boat Ambulance Service:

- To provide transportation to sick and injured in the riverine areas of 4 districts namely Kendrapara, Kalahandi, Koraput and Malkangiri, the government has sanctioned 6 (six) Boat Ambulances out of State fund, as feeder services to both Emergency Medical Ambulance Services and Referral Transport Services.
- As of now, 6 Boat Ambulances have been operationalized in 4 districts of the state (Kendrapada : 2, Koraput : 1, Malkangiri : 2 & Kalahandi : 1) since 26th February 2019 in phases.



C. Referral Transport Ambulance Service (Janani Express)

Referral Transport Ambulance Service (Janani Express) has been made operational in the State since 14th July 2014 with a purpose of providing free referral transport services to all pregnant women and sick infants seeking health care services at government health facilities. Currently, 500 ambulances under this scheme are being made operational. As such, more than 29 lakhs beneficiaries have been benefited through this referral transport service system.

- Average response time of Referral transport ambulances is 28 Minutes (Target-35 Min).
- Total 4,04,255 cases have availed these Referral transport Ambulance Services during the year of 2020-21 (up to December 2020).

D. 104 Health Helpline

Initially, 104 Health Helpline with 10 seats was launched on 13th October 2015, for making outgoing calls for following-up with the sample beneficiaries who were registered under RCH for availing desired services in time and to verify the services provided by service providers (ANM and ASHA) by calling the high risk pregnant women on monthly basis and to those defaulters of services. As per the mandate, 104 Health Helpline is supposed to contact at least 200 beneficiaries per day.

- Subsequently the incoming call facility was introduced with effect from 15th November 2019 and that has been rendering information, advice and counselling support to the people on RMNCHA+ & related health schemes that are being implemented in the State. It also includes health advices & counselling, facility related information pertaining to hospitals, Blood Bank, Pharmacies, Diagnostic services etc. Through this helpline services, the public is benefited by registering grievances for redressal.
- Periodical calls are made for survey related to various indicators of services under JSSK.
- For assessing the satisfaction level of the patients who are accessing the public health facilities for services and treatment, outgoing calls are being made randomly to those patients or their relatives since 23rd July 2019. So far, 22,377 people have been covered through this survey, and more than 90% of respondents have shown their satisfaction relating to the services they have received so far.



- Since the Covid-19 pandemic situation of March, 2020, 104 Health Helpline has been functioning as the designated State level Health Helpline for COVID-19 to address all public queries, grievances and to disseminate the required information and to provide counseling support services relating to the Covid-19 situation of the state.

Plan

- In order to address the emergency requirement due to the spreading of COVID-19, 28 ALS (Ventilator Ambulances) are to be made operational by the state (through MP/MLA lad and CSR fund support) by the end of February, 2021.
- 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.
- 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 soon.

2.7 Community Process (ASHA)

A. ASHA

ASHAs function at grassroots level to act a bridge between community and public health system. 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. Their precious contribution towards the improvement of health situation of the State is acknowledged in different forums and occasions. In the State of Odisha total 47,209 ASHAs are in place to facilitate and promote health care delivery at community level both at rural and urban area (Target-48,455). The selection of ASHA is co-terminus with AWC in high-priority districts.



B. Incentive Provision for ASHA:

ASHAs are paid performance-based incentive against the activities performed during a month. Incentive provisions have been made for 53 activities (13 assured activities and 40 activities under RMNCH+A, DCP, NCD and others) during 2020-21. Provision has also been made for payment of Rs. 3500/- to all ASHA as minimum assured incentive per month.

C. Welfare Schemes under ASHA Kalyan Yojana :

- Monthly assured incentive provision:** As an effort to maximize and ensure a minimum assured amount, provision has been made for getting minimum assured incentive amounting to Rs. 3500/- per month by an ASHA (@ Rs. 2500/- towards performance against set of 13 PIP approved activities and Rs. 1000/- from state fund) on conditional basis.
- Compensation for death and permanent disability:** Provision has been made for payment of financial compensation upto Rs. 1 lakh in case of death and permanent disability of a serving ASHA under ASHA Kalyan Yojana. During 2020-21, compensation towards death of ASHA @ Rs. 1 lakh has been paid for 52 cases (By December, 2020).
- Exit Policy:** Exit policy for ASHA is an initiative to ensure the community is having the presence of an effective and vibrant ASHA in the village and at the same time to pay respect to the ASHA who has served for the community and health system for long period of time with sincerity and commitment on

attainment of 62 years of age. As a part of financial benefit under exit policy, ASHA exiting from the health system on attainment of 62 years of age or leaves the position after serving minimum 10 years as ASHA is entitled to get lump sum honorarium of Rs.20,000/-. A total of 34 ASHAs have been benefited under exit policy by end of December, 2020.

- iv) **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 i.e. from the 3rd trimester of pregnancy to her child attaining 3 months of age. One ASHA is entitled to get the benefit up to two children. As a part of the initiative under ASHA Kalyan Jojana a total of 54 ASHAs have been benefited under maternity benefit scheme during 2020-21 (By end of December, 2020).
- v) **Enrollment under PNJBY & PMSBY:** In order to avail the benefit of insurance coverage upto two lakhs for death and disability provision has been made to enroll all eligible ASHAs under social security schemes like Pradhan Mantri Jiban Jyoti Bima Yojana (PMJJBY) and Pradhan Mantri Suraksha Bima Yojana (PMSBY). A total of 27985 and 33254 ASHAs have been enrolled under PMJJBY & PMSBY respectively by the end December, 2020.



B. Other support provisions for ASHA:

- i) **ASHA Gruha:** 142 ASHA Gruhas are functioning in major health institutions as a help desk for ASHAs and to provide stay at institutions while they accompany pregnant women for delivery.
- ii) **Weightage to ASHAs for admission into ANM & GNM Course:** ASHA who fulfill the eligibility criteria for admission into ANM/GNM will be given 2% extra marks for each completed year of service as ASHA, subject to a maximum of 20% additional marks. ASHA will be allowed to pursue the course both in Govt. and Pvt. Nursing Institutions.
- iii) **Weightage to ASHAs during selection of ANM:** For selection of ANM, additional weightage of 1% mark for each year of service for eligible ASHAs, subject to a ceiling of 15% additional marks in the ANM recruitment process.
- iv) **ASHA Uniform:** ASHAs are paid an amount of Rs. 700/- every year towards provision of uniform.
- v) **CUG SIM Card:** ASHAs have been provided free CUG SIM Card for better connectivity and sharing of information.
- vi) **Diary and ID card:** Diary is being provided to all ASHAs on annual basis to record their daily activity performance. Similarly, Identity Card is provided to all ASHAs.
- vii) **Drug Kit:** ASHAs have been provided Drug Kit (with items like Paracetamol, ORS, Zinc, drugs for malaria and contraceptives) and Home Based Newborn Care Kit (with kit items like weighing scale, digital thermometer and digital watch) have been provided to all ASHAs.

C. 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 7 districts like Boudh, Bolangir, Cuttack, Kalahandi, Sambalpur, Sonapur & Sundargarh in collaboration with National Institute of Open Schooling (NIOS). The programme is intended to enhance the competency and professional credibility of ASHAs and allow them to use a set of drugs. A total of 782 ASHAs have been enrolled under certification course by December, 2020.



D. Reward & recognition to ASHA:

To acknowledge and appreciate the contribution of ASHAs in providing health service delivery at community level and to sustain their motivation to perform better, ASHA convention organized in all districts of the state. The district level convention has created a platform for facilitating peer learning process and experience sharing among ASHAs and also to share and learn from each other's experience of activity implementation. On the occasion of convention, 1032 ASHAs awarded at block and district level for their better performance at community level during 2019-20.

**E. ASHA SATHI (ASHA Facilitator):**

As part of supportive supervision structure of ASHA programme, ASHA SATHIs are providing monitoring, mentoring support, hands on training and onsite assistance to ASHAs to maximize their functional effectiveness especially for the low/poor performing ones. The best performing ASHAs are selected as ASHA SATHI who acts as the companion, supporter, facilitator and peer leader to other ASHAs in her assigned area. After delinking the role of ASHA & ASHA SATHI, a total of 717 ASHA SATHIs are in position in the State.



The state is committed to provide all support to ASHAs and thereby monitoring their contribution to improve the health condition of the state.

2.8 Gaon Kalyan Samiti (GKS)

Village Health Sanitation and Nutrition Committee (VHSNC) popularly known as Gaon Kalyan Samiti (GKS) in the State of Odisha is a National Health Mission (NHM) initiative. It is a revenue village level institution constituted involving the community members acts as a simple and effective management structure to facilitate for improvement of health, nutrition and sanitation situation of the village. 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 each 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 becomes the basis of untied fund expenditure. The GKS untied expenditure is 102.11 % during 2019-20 and total expenditure by November, 2020 is 46.49%.

Additional fund to GKS under CMRF for COVID-19 management:

As the Pandemic situation of COVID-19 started from March, 2020, GKS was assigned to undertake various awareness and sensitization activities at the village level for management and prevention of COVID-19 at the community level. To undertake various COVID-19 activities at the village level, additional fund of Rs.10000/- is placed to each GKS under the Chief Minister Relief Fund (CMRF). GKS acted as the COVID management committee at the village level.



Active involvement in COVID-19 management at the village level:

Most of the GKS have undertaken various need based activities i.e. mass cleanliness drive, regular meeting, set up hand washing corner, organize mass rally, create awareness to maintain social distancing, avoid to organize social function, wall painting of messages related to COVID-19, distribution mask and support management of COVID care home etc. as part of COVID-19 management.

Examples of Excellence.

Implementation of VISHWAS activity to promote healthy behavior of the community:

VISHWAS- is a 11 monthly initiative is being implemented across the State to promote health, water, sanitation and nutritional condition of the local community through demonstration, rally, sensitization meeting, awareness generation, mass cleanliness drive, wall painting of the messages and award provision etc. at the village level. All the activities of VISHWAS are being implemented under the overall guidance of GKS at the community level.

Active involvement in People's plan campaign:

Village Health Plan (VHP) of GKS is the basis of GKS untied fund expenditure. GKS is actively involved in the people's plan process to prepare GKS fund expenditure plan for the year 2020-21 and Annual Health plan for 2021-22. In order to streamline GKS activity through Gram Panchayat, Gram Panchayat Development Plan for 2021-22 is also prepared by consolidating Village Health Plan of GKS as part of People's plan campaign.

Integration of GKS activities with PR system:

As a supportive activity, GP Sarpanch has provided designated hall in districts like Cuttack & Puri to organize GKS monthly meeting and to develop Village Health Information Centre. To develop better inter-sectoral convergence with PR system for effective implementation of GKS activity at the community level, quarterly GP level meeting is being organized at the GP level under the Chairpersonship of GP Sarpanch and near about 5800 GP Swasthya Kantha (Health information board of GP) are made from the GP fund.

Towards healthy living:

Gaon Kalyan Samiti (GKS) plays an important role to provide quality of public health care services at the village level. In order to ensure better health care services at the door steps of the local community, GKS actively involved to organize TB, Malaria, adolescent screening camps, eye check up camps, old age screening camps etc. at the village level in various parts of Odisha.

The above efforts undertaken by GKS have made it as a vibrant institution to facilitate activity related to health and other social determinants.

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 consolidation of the information to addressing issues related to health and other social determinants of health. As part of GSS programme, a programme "PRACHESTA" is being implemented in all GKS of 15 selected PHC- HWC area in 15 selected blocks to enhance the awareness of the community on functioning of HWC & availability of services.



2.9 NGO Collaboration Projects

Presently 39 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 39 PHC (N)s, 6 PHC(N)s are Functional Delivery Points and 23 PHC(N)s are Promising Delivery Points.



Achievement:

- 13 nos. of PHC (N) facilities received Kayakalpa award & 4 Health & Wellness Centers under PPP received ISO certification.
- 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. one IPD case per day per institution in the State.
- Avg. 7 nos. per month per institution Institutional Delivery in the State.
- Avg. 18 nos. per day per institution Lab test in the State.
- Rogi Kalyana Samities are functional in all PHC (N)s.

SI No	Name of the NGO Projects	Nos. of operational projects	Nos. of operational districts
1	PHC(N) Management	39	16
2	Maternity Waiting Home (Maa Gruha)	93	17
3	Arogya Plus (out of State budget)	21	8

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 21 Arogya plus projects in 8 districts are operational. 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 12396 tagged villages have been covered during the period April' 20 to Jan'21.
- 1322 positive malaria cases diagnosed positive & given treatment.
- 781 cataract cases identified and referred.
- 2516 no. of cases mobilized for male & female Sterilization (in no.)
- 2045 nos. of CC & OP distributed (nos. of cycles)
- 2255 nos. of cases facilitated for registration at HWF within 3 months of pregnancy.
- 2056 nos. of ANC Cases given TT.
- 362 nos. of delivery cases transferred through MHU Vehicle to nearest Lo/L1/L2/ L3 institutions.
- 555 immunization sessions organized.
- 5025 Health education sessions conducted in villages & schools.
- 36106 nos. of ORS distributed.



2.10 Mainstreaming of AYUSH

Institution wise sanction of Contractual Ayush Doctor

- 314 Ayush positions are sanctioned at CHC level.
- 1162 Ayush positions are sanctioned at PHC (N).
- For Unani Stream- DHH -3, CHC-3, PHC-3 position are sanctioned.

Services rendered by Ayush Doctors during COVID-19

During the present COVID-19 Pandemic their services are most commended. They worked in Rapid Response Teams, contact tracing of Covid positive cases, Covid Care Centres (CCCs).

2.11 Infrastructure development

- 7 new Medical College & Hospitals is being constructed at Bolangir, Koraput, Balasore, Puri, kalahandi, keonjhare & Mayurbhanja (Koraput, Balasore, Bolangir & Baripada - Completed & functional).
- Two new Medical College & Hospitals at Jajpur & Phulbani has been taken up under MO SARKAR.
- Extension of Capacity of 5 Medical College & Hospitals from 500 to 650 seat (Balasore, Baripada, Bolangir, Koraput & Puri) under MO SARKAR announcement.
- 12 DHH Buildings have been proposed for construction of new buildings of 300 bed capacity under MO SARKAR announcement (Bhadrak, Boudh, Deogarh, Sonapur, Koraput, Kendrapara, Puri, Jajpur - 300 bedded & Nawarangpur, Nayagarh, kalahandi, Anugul - 200/110/100 bed strength) under MO SARKAR announcement.
- Major Health Infrastructure developments are being taken up in premier institutions like SVPPGIP, Capital Hospital, AHRCC under MO SARKAR Announcement.
- Construction of Cardiac Care Hospital at Jharsuguda, Cancer Hospital at Baragarh, LINAC Building at AHRCC and comprehensive infrastructure development of SCB Medical College & Hospital also been taken up under MO SARKAR Announcement.
- 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 - 44, Progress - 13).
- Extension of Drug Ware House at DHH level - 31 Nos with a financial involvement Rs. 50.60 crore. (In progress - 15 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 (Completed -2 & Progress-9).
- 574 sub centers buildings with an approximate financial involvement of Rs.189.42 crore are being constructed (29 completed & 147 under construction).
- 95 PHC N buildings with an approximate financial involvement of Rs.52.80 cr. constructed (2 completed & 7 under construction).
- 812 staff quarter is being constructed for health service provider such as Doctors, Staff Nurse, Paramedics & others (189 completed & 44 under construction).
- Strengthening of infrastructure of GAD/ GHD Buildings in main streaming of AYUSH - 57nos of Govt. Ayurvedic & Homeopathic Hospitals are being taken up and all are under progress.
- 63 UPHC/ UCHCs has been newly constructed with a financial involvement of Rs.75.00 lakhs @ per UPHC/UCHC (56 completed & 7 under construction).
- 523 Nos of Sub Center buildings converted to Health Wellness Centre with a financial involvement of Rs.36.61 crore (Completed - 261 & Progress - 358)
- Establishment of health wellness wing at 1200 Sub Centres level with a financial involvement of Rs.84.00 crore.

- 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.

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
2020-21	20714.72

- Funds also been mobilized from State Plan, OMBADC, DMF, CSR grant, MO SARKAR Announcement & Chief Minister's Swasthya Seva Mission for additional infrastructure development of all level of health institutions.



Health Wellness Centre Chichinda, Baragarh



HWC at SC Baniapanka, Keonjhar



30 Bedded MCH at CHC Salipur, Cuttack



30 bedded MCH Building Khandapada, Nayagarh



50 Bedded MCH Building at SDH Titlagarh, Bolangir



30 Bedded MCH Building at CHC Kantabanji, Bolangir

2.12 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, FRU CHCs, PHC, UPHCs Simultaneously. In the process of NQAS accreditations following activities were under taken.

A. NQAS Implementation Status in 2020-21

Training & Capacity Building:

- One batch State level Refresher Training on Quality assurance for Asst. Manager GKS & QA, One batch Internal Assessors Training on QA for 26 Non FRU CHC/PHCs were completed. One batch virtual training on IA cum SPT conducted for all DHHs, SDHs where 160 participants were trained.

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 CMC Vellore for Biochemistry laboratory and EQAS with AIIMS Delhi for Hematology laboratory for monitoring Quality of tests



Accreditation:

Status: One DHH (DHH Kalahandi), one FRU CHC (CHC Ghatagaon, Keonjhar) one Non FRU CHC (CHC Mandasahi, Jagatsinghpur), 4 UPHCs of Berhampur city (UPHC Ambapua, UPHC Askaroad, UPHC Agasahi), UPHC bhawanipatna, kalahandi 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 lakhs per year.
- UPHC will get @ Rs. 2.00 lakhs 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 intra-partum 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 30 districts.
- Internal assessment completed by the hospital team in all 94 FRUs and 4 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 Gol guideline and DHH Nabarangpur fulfill the criteria and got LaQshya State Certification.



Well maintained OT

Status: DHH Dhenkanal, DHH Kandhamal, DHH Rayagada, DHH kalahandi, Capital Hospital, Bhubaneswar, DHH Malkangiri, DHH Gajapati and BBMCH Bolangir and CHC Ghatagaon-Keonjhar are LaQshya certified.

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.

B. Kayakalp:

Ministry of Health and Family Welfare launched "Kayakalp - Award to Public Health facilities" to promote and sustain Swachhta 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.
- In the year 2020-21 the assessment is still going on.



2.13 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.
- Construction of 56 Urban Primary Health centers has been completed.



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 20,950 UHND sessions were held during April 2020 - November 2020. Out of the nine Mobile Health Units all 9 MHUs are operational and 72,147 beneficiaries have received services at MHU camp during April'2020- November 2020.



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:

- Construction of New building for 54 Urban PHC is completed and 9 are under progress.
- 85 Urban PHC have been completed peer assessment for Kayakalp during 2020-21.

6. Human resources

- All personnel are in position at SPMU, 28 at DPMU out of 28 and 18 at CPMU out of 21 are in position.
- 332 ANMs, 149 Staff Nurses, 62 LTs, 41 Pharmacists, 87 Data Assistant-cum-Accountants and 32 Public Health Managers are in position under NUHM.

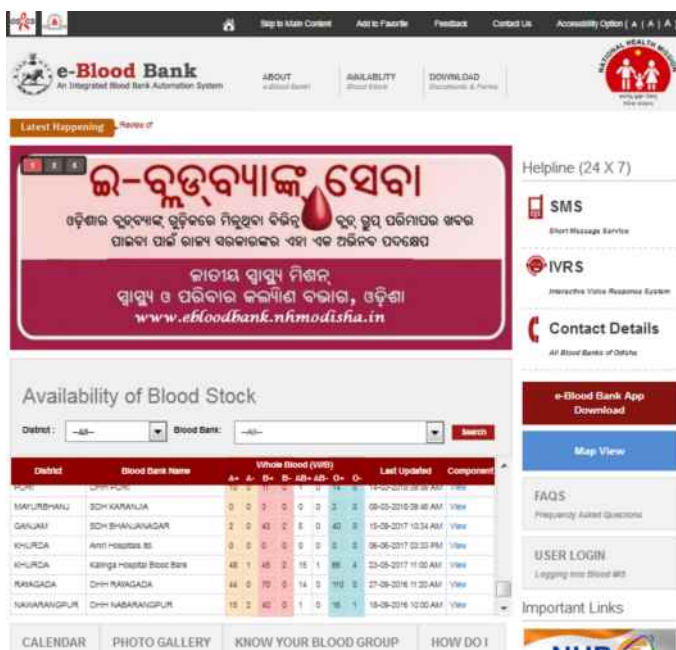
7. IEC/BCC:

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.



2.14 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)
- 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/ANMOL: To monitor the provisioning of Maternal and Child care services.
- HMIS: A web based system for capturing facility Service delivery data on monthly basis is being done in newly introduced IHIP portal since April 2020 onwards..
- 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)



- 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).
- 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.
- 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 functionalisation 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.

3 CHAPTER

Directorate of Health Services

In three-tier system of administration (I. Administrative Deptt II. Heads of Deptt & III. District Offices and Subordinate Offices there to), Heads of Deptt plays a key role between the Administrative Deptt of Govt. and District Offices and Subordinate Offices thereto. Director of Health Services, Orissa being the Heads of Deptt under the administrative control of Health & F.W. Deptt of Government of Orissa occupies a distinct position with following major activities.

Major Activities

3.1. Human Resource in Health & Research

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 / contractual doctors and measures for retaining them as well.

Recruitment

1. Recruitment of Medical Officers is being done on regular basis through Odisha Public Service Commission (OPSC). A total of 1403 no. of Odisha Public Service Commission (OPSC) recommended Medical Officers have been posted as Assistant Surgeons on regular basis in the year 2020-21. Requisition has already been sent to OPSC for recruitment of 2452 Asst. Surgeon and 82 no, of Dental Surgeon. Requisition and recruitment of 6432 Staff Nurses, 600 Pharmacist and 200 Radiographers initiated through Staff Selection Commission.
2. 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.

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. Place based incentives (PBI) 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.

3. 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.
4. 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/-

5. To create more specialist doctors in the state, MoU has been signed with College of Physicians and Surgeons of Mumbai (CPS) 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. Process has already been initiated to start DNB courses.
6. The Govt. of Odisha has identified 17 institutions (14 district hospitals and 3 newly opened medical colleges), 13 different subjects and a total of 205 mentors including teachers & asst. teachers from the respective institutions and subject domains. In the above 17 identified institutions a total of 93 units were identified, in which 186 students can be enrolled under the PG Diploma courses
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.

Recruitment & career path for various posts.

- Regular monitoring for filling up of vacancies of paramedics at district level.
- About 1000 doctors have been promoted under DACP scheme.
- Under the Vision 2020 of National Programme for Control of Blindness (NPCB) the training courses for Ophthalmic Asst has been resumed.
- A comprehensive cadre rule of Ophthalmic Asst is prepared and submitted to government for approval.

Research

Research & Ethical Committee has been constituted to examine different Research proposal and to encourage various professional, individuals to submit research proposal for benefit of the State. In 2020-21 a total of 54 no of proposals were received out of which 51 proposals were approved by Research & Ethical Committee.

3.2. State Drug Management Unit

The SDMU(O) mainly deals with Compilation & rationalization of requirements for instruments, equipments & furniture (EIF) and Drugs, Medical Consumables, Surgical & Sutures from the districts and medical colleges. The Essential Drug List has been updated and revised in consultation with all specialists of Medical Colleges and peripheral health institutions containing 496 molecules & 750 dosage forms is in the stage of Printing. Process is already initiated to prepare Essential Drug List for Super Specialty department. Standard Treatment Guidelines (STG-2018) have already been published & distributed to all prescribing doctors of the State. In addition Prescription Audit is being done to investigate the drug-use & to avoid irrational use of drugs in the health facilities.

3.3. OeHMIS

The aim is to customize the clinical data according to each department, laboratory etc. and ease workload on doctors and other medical staffs for fast & reliable information storage, querying and retrieval and access to help managing resources, costs and margins.

Present Status

i. SCB MCH

- Patient Registration Module – Ophthalmology, Cardiology, Biochemistry.
- Investigation Module – Biochemistry

ii. Capital Hospital

- Patient Registration – All Departments
- Emergency Registration – All Departments
- OP Doctor Desk – ENT, Medicine
- ADT – All Departments
- Billing – All Departments
- Investigation – All Departments.

iii. AHRCC

- Patient Registration – All Departments
- ADT – All Departments

iv. SVPPGIP

- Patient Registration – All Departments
- Emergency Registration – All Departments
- ADT – All Departments

v. District Headquarter Hospitals

- OPD Registration module in all 32 DHHs (30 districts + RGH Rourkela + Capital Hospital)
- Contact Numbers of patients being collected through the OPD Registration Module of OeHMIS are being successfully transferred to the Mo Sarkar Portal.

3.4. Planning & Infrastructure Development

Planning & Infrastructure development section functions as a key section of DHS, to provide new health infrastructure to the state and also maintaining, upgrading the existing one. During the current financial year 2020-21 large number of infrastructural activity is also going on under “MO SARKAR” umbrella.

Achievement.

- i) Under MO SARKAR initiative construction work of Attendant rest sheds, govt quarters for health service providers in the state are going on.
- ii) Approval of 5 (Five) Nos. of new DHH equipped with fully modernized instruments at Boudh, Deogarh, Jeypore, Bhadrak & Sonepur.
- iii) Initiation of 100 bedded Trauma Centre in DHH Angul, Nayagarh, Kalahandi & Post Graduate Department in Capital Hospital, Bhubaneswar.
- iv) 300 bedded new DHH, Puri.
- v) Under the CSR activity a modular OT in Capital Hospital & upgradation of CHC Niali, Cuttack are under process in support of Air Port Authority of India.
- vi) Mordenisation of Combined Health Directorate building is going on.
- vii) Maintenance work in all the Districts is going on. More upcoming Projects are now on process.

4 CHAPTER

Directorate of Public Health

4.1 National Vector Borne Disease Control Programme (NVBDCP)

National Vector Borne disease Control Programme addresses six diseases : Malaria, filariasis, dengue, chikungunya Japanese Encephalitis and Kala-azar. Except Kala-azar, all five diseases are prevalent in Odisha. Malaria and filariasis are under the drive of elimination in the state whereas dengue, chikungunya and Japanese Encephalitis are prioritized for their prevention and control.

Malaria

Epidemiological data of Malaria for the last five years (2016 – 2020)

Year	BSE	+ve	PF	Death	ABER	TPR	Pf%	API
2016	7201271	444842	384668	77	16.29	6.18	86.47	10.06
2017	6648889	347860	293718	24	14.83	5.23	84.44	7.76
2018	6157502	66311	54042	3	13.71	1.08	81.50	1.48
2019	6552293	39556	35772	9	14.50	0.60	90.43	0.88
2020	5997858	41738	38139	9	13.16	0.70	91.38	0.92

Malaria cases have substantially reduced in the state after interventions of large scale LLIN and state's initiative DAMaN in 2017. There was 81% decline of cases in 2018 compared to 2017 and the decline was 84% compared to 444842 cases of 2016 which was the highest no. of cases the state had recorded, ever since the systematic case reporting started in the state. Further, there was 40% decline in 2019, compared to 2018. Deaths also have come down, compared to 24 deaths reported in 2017 and 77 malaria deaths in 2016. There is drastic reduction in Annual Parasite incidence (API) of the state which has come down from 10.06 in 2016 to 7.76 in 2017 to as low as 0.88 in 2019. This is all time low in the state.

However, from beginning of 2020, the state experienced case rise compared to the corresponding months of 2019. Most of the malaria control activities and monitoring got affected due to COVID pandemic scenario of the state. Due to subsequent intensive actions, the cases started declining from the month July onward. However, the year 2020 ended with reporting of 41738 cases which shows 5.5% increase over 39665 cases of 2019.

Following activities are carried out for control and elimination of malaria in the state.

- 48455 ASHAs have been trained to conduct Early Diagnosis and Complete Treatment (EDCT) at the village level. They have been provided with RDT and Anti Malaria Drugs.
- 1000 alternate FTDs have been engaged under OMBADC and NGO/PPP support in the remote and inaccessible villages/hamlets.
- 1.13 crore Long Lasting Insecticidal Nets (LLINs) have been distributed to protect around 2 crore most vulnerable population from malaria in 19 malaria endemic districts. This is from Global fund support.

- From DBS support another 42 lakh LLIN have been distributed in 2020 to protect around 80 lakh most vulnerable population from malaria.
- In most high burden pockets, combo approach has been followed to include Indoor Residual Spray along with LLIN to protect the population from malaria.
- 62 Sentinel sites for malaria have been functioning in DHH, SDH and selected CHCs.
- Massive social mobilization and Behaviour Change Communication programme have been conducted in all malaria burden districts for up-scaling the use of LLIN.
- Paramedical staffs of all 314 blocks of the State have been sensitized on malaria control programme.
- 2827 DAMaN Camps have been conducted in the remote and inaccessible villages / hamlets of 23 districts. Around 6.89 lakh population have been provided with services of Malaria and other nutritional parameters through DAMaN Camps.
- Capacity building of Doctors (600), ASHAs (2900), HWs, MTS (90), LTs (100), SSMTc (10), Spray workers (3500), Ayush Doctor (375), Paramedics (2500), Drug Administrator (14000), FLA (30), members of IMA/IAP (525) private practitioners (400)
- Regular monitoring and supervision visit to the districts by the Officers and consultants for improvement of the programme.

Dengue

- 496 dengue cases have been detected in 2020 compared 3758 cases of 2019.
- Surveillance has come down in 2020 due to COVID pandemic. 28497 blood samples were for dengue in 2019 where as in 2020, only 5582 samples were tested.
- All 38 sentinel sites in the State are functioning for ELISA based diagnosis of Dengue cases, both by NS1 and IgM test kits, used as required.
- Diagnosis and treatment of Dengue as well as ICU facilities have been made free in all 30 District Head Quarter Hospitals and Govt. Medical Colleges.

Japanese Encephalitis (JE):

- 09 sentinel sites laboratories (SSL) in the State have been made functional for diagnosis of JE cases.
- In all JE SSL, free diagnosis is being provided by trained Lab. Technician / Microbiologists.
- Treating physicians have been trained on clinical management of JE cases by AIIMS Bhubaneswar.
- Clinical management of all AES/JE cases are available in all DHHs/SDHs/MCHs.
- JE vaccination undertaken in 24 districts as routine immunization.

Elimination of Lymphatic Filariasis(ELF):

- Mass Drug Administration (MDA) round of 2020 will be conducted in 17 districts (Angul, Balasore, Bhadrak, Bargarh, Cuttack, Dhenkanal, Ganjam, Keonjhar, Kandhamal, Sundergarh, Sonepur, Sambalpur, Jharsuguda, Mayurbhanj, Nuapada, Khurda & Nayagarh) along with NDD in February 2021 and also the morbidity management and disability prevention activities will be intensified.
- 10 districts are now under elimination of Lymphatic Filariasis.

4.2 National Tuberculosis Elimination Programme, ODISHA

The National Tuberculosis Elimination Programme is implemented in the state with the objective to eliminate TB by the year 2025.

Achievement

- TB Forums established in all 31 NTEP districts
- Delamanid in paediatric age group (>6Yrs) rolled out.
- State Technical team trained on All Oral Longer Regimen
- 15 TruNAAT machines procured from DMF/OMBADC fund by Mayurbhanj and Sundargarh districts.
- Employer Led Model rolled out in 5 industrial districts and 25 Letter of Intents (LOIs) signed among the industrial houses and Zilla Swasthya Samiti
- Integrated House to House campaign conducted from June 16th to July 31st for active case finding activities for TB. 2016 TB cases diagnosed through this house to house TB screening activity.
- Bi-directional TB COVID screening guidelines shared to all districts and districts are being reviewed continuously
- Bi-directional TB comorbidity screening activities (TB screening among diabetics, HIV, Nutrition, Tobacco users) are being given focus and same is being instructed to districts.
- TB patients notified under NTEP get financial incentive under “NIKSHAY POSHAN YOJANA” (NPY).

Year wise Achievement

Year	Total TB Notification	Total Success Rate	Expenditure (%) f.y (Apr-Mar)
2018	48847	87.7%	43.65
2019	53389	88.7%	83.15
2020	45121	86.9%	39.46

Major priorities for the year 2021-22

- Case Finding – Sunday ACF, ASHA as informant for negative cases,
- Setting up/strengthening of DMCs – strengthening of TB activities in 565 model HWCs
- Improve private sector engagement- PPSA implementation for private sector notification improvement, Liaising with private bodies of IMA, IAP, FOGSI etc
- PMDT – Establishment of C&DST Laboratory in MKCG Medical college, Berhampur.
- TB Comorbidity – Coordination with NCD, Nutrition, OSACS, Tobacco cell
- Increase utilization of CBNAAT and TruNAAT for improvement in TB diagnosis and UDST
- Active Case finding – Qualitative Routine bi-annual ACF rounds among vulnerable population, Sunday ACF
- TPT for PLHIV and household contacts of children < 6 yrs – LTBI pilot in 2 districts of Boudh & Deogarh
- Involvement of TB champion in community engagement activities – Selection, orientation and review of TBCs
- Increase visibility of NTEP program through IEC and ACSM
- Incentive for beneficiaries, treatment supporter, private providers, tribal patients
- Nikshay Poshan Yojna (NPY)
- Ensure supply chain of anti TB drugs
- “TB Harega Desh Jeetega” campaign
- Sensitizing Media for improved mass media awareness

4.3 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 new leprosy case 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 at 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. At present the PR is 0.89 per 10,000 population as on 31st December 2020

The table shows the five year data of NLEP:

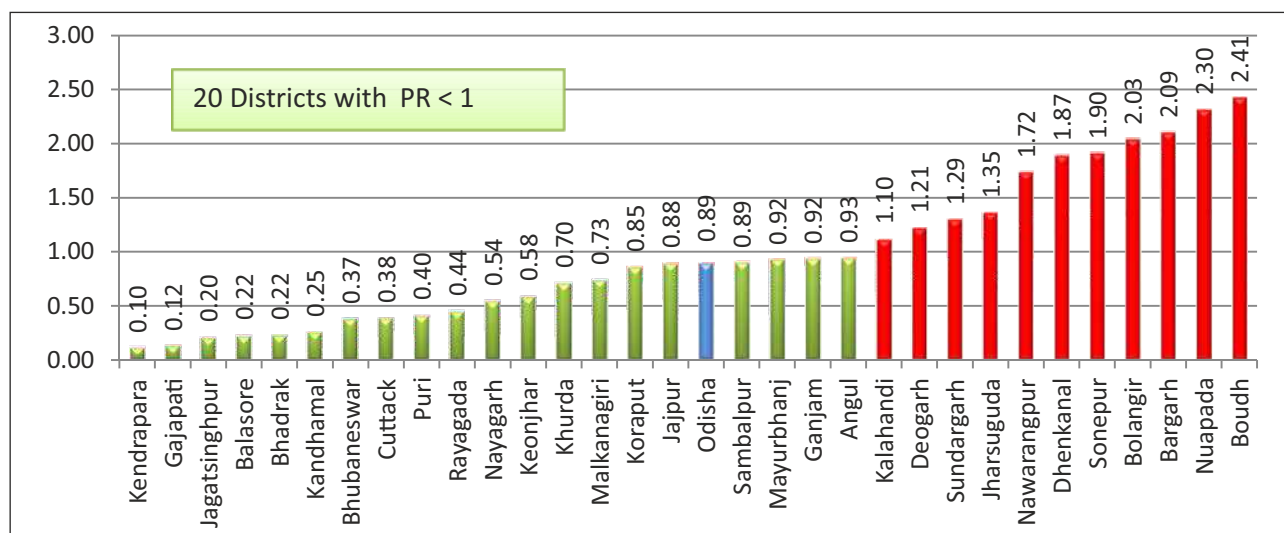
Indicator	2016-17	2017-18	2018-19	2019-20	2020-21 (Dec.2020)
New case detected	10045	9576	10786	10077	3396
ANCDR	21.1	20.8	23.2	21.3	-
No. of cases under Treatment	5383	6325	7117	6845	4251
PR per 10000 Population	1.19	1.37	1.53	1.45	0.89
MB proportion	48.02	48.2	47.6	48.8	54.75
Female proportion	39.6	40.7	41.2	39.2	36.35
Child proportion	7.87	7.89	7.6	6.75	6.18
G2D per Million Population	11.6	10.1	7.31	4.0	2.07
G2D rate with absolute no	5.52 (527)	4.87 (466)	3.16 (341)	2.0 (200)	2.91 (99)
Child Grade-2 cases	12	11	08	04	03

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) services for persons affected by leprosy
- Reduction in the level of stigma associated with leprosy

Targets:

- No child grade-II disability
- Less than one new G-2 disability case among 1 million population
- Zero backlog of eligible patients for RCS

The Prevalence Rate (PR) of different districts as on December 2020:**Major activities & Achievements of NLEP for 2020-21:****1. Special Leprosy Case Detection Drive (SLCDD)**

From 18th to 30th January 2020-21, the State is going to implement Special Leprosy Case Detection Drive (SLCDD) in 208 High Endemic blocks in 28 Districts to detect all hidden cases in the community and treat them with MDT.

2. Focused Leprosy Campaign (FLC):

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 with a view to detect hidden cases.

3. ASHA Based Surveillance for Leprosy Suspects (ABSULS) (April-December 2020)

- No. of suspects identified by ASHA : 53804
- No. of cases confirmed : 2441

4. Leprosy post-exposure prophylaxis (LPEP): LPEP has been implemented in the state from June 2018. During 2020-21 43561 contacts screened and 30171 persons administered single dose of Rifampicin.**5. Disability Prevention and Medical Rehabilitation (DPMR):** 358 DPMR clinics have been established at Block CHCs, SDH and DHH level to provide disability care services to persons affected with leprosy (PAL)

Activity	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Reaction Management	2202	1788	1548	1686	1854	1007
Ulcer dressing / kits provided to PAL	6822	7207	5888	5492	6979	3890
Footwear provided	4761	5539	6094	6742	5422	4275

6. Reconstructive Surgery (RCS):

- This year 50 RCS done in 13 Govt. Hospitals and One NGO with a provision of Rs 8000/- as loss of wages to the patients. The Cumulative achievement is 6181 till December 2020.

7. IEC / BCC Activities: IEC activities have been carried out throughout the State through print and electronic media. During various campaign activities messages on leprosy are extensively broadcasted in TV channels and published in newspapers. Posters, leaflets, flipbooks, wall paintings used to educate the people.



Training on SLCD



Reconstructive Surgery camp (RCS)

4.4 Integrated Disease Surveillance Programme (IDSP), Odisha

Background:

Integrated Disease Surveillance programme aim is to strengthen/maintain decentralized laboratories-based IT enabled disease surveillance system for epidemic prone diseases to monitor disease trends and to detect and respond to outbreaks in early rising phase through trained Rapid Response Team (RRTs).

It is intended to detect Early Warning Signals of impending outbreaks and help to initiate an effective response in a timely manner. IDSP monitors core diseases/health events of public health importance. It assumes the role of State Health Control Room during natural calamities like flood, cyclone and heat wave etc.

Programme Components:

- Use of Information Communication Technology for collection, collation, compilation, analysis and dissemination of data.
- Strengthening of public health laboratories.
- Inter sectoral Co-ordination for zoonotic diseases

Activities undertaken

IDSP data is collected on epidemic prone diseases on weekly basis. The information is collected on three specified reporting formats, namely “S” (suspected cases), “P” (presumptive cases) and “L” (laboratory confirmed cases) filled by Health Workers, Clinicians and Laboratory staff respectively. The weekly data gives information on the disease trends and seasonality of diseases.

- In 2020, completeness of weekly reporting with respect of Form S (Health Worker) 86% & Form P (Health Institution & Medical Officer) between 91% and Form L (Laboratories) 90%.
- Daily scanning of print & electronic media is being done by Media scanning & rumor verification cell, SSU. In 2020 out of 59 rumors investigated by Block/ District/State RRT 43 (Food poisoning-20, ADD-8, Hepatitis-4, Chickenpox-9, and Anthrax-2, were confirmed and 80% were laboratory confirmed.
- The trend of communicable disease is being monitored regularly to timely response of unusual health events. The trained Rapid Response Teams (RRT) is ready at state as well as sub-district level to control the outbreak.
- The trend of acute diarrheal disease cases & deaths substantially declined from 2010 to 2020 due to effective surveillance at district & sub district level due to early case detection & prompt management, up scaled community awareness through IEC activities and timely diagnosis of outbreak prone diseases at District Public Health Laboratories (DPHL).

- The three Govt. Medical College & Hospitals of the state are functional as three State Referral Laboratories (SRLs) & 30 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.
- During Covid-19, total 377070 nos. of persons from different point of entry have been put under active surveillance by the State Integrated Disease Surveillance Programme Control Room. The prevention measure were undertaken through aggressive spreading of advisories and guidelines on standard precautions, Do's & Don'ts, work place advisory, School advisory, guidelines on ambulance transportation through IEC/BCC. Guidance for cleaning and disinfection of Public Transport, offices & workplaces has been issued. Airport Authorities & Railway Authorities have been asked to follow the standard guidelines and precautions. Presently the COVID 19 positivity rate has come down from 11.5 to 1.1 since January, 2021.
- The hepatitis outbreaks at urban municipality & rural areas were investigated by state & district Rapid Response Team and successfully contained with inter-sectoral coordination.
- For prevention of these outbreaks special MDD (Malaria, Dengue & Diarrhoea) campaign is conducted across the state through various media for a period of two months.
- Water quality monitoring was being conducted regularly in the vulnerable areas of different blocks to prevent water borne diseases. The results are shared with RWSS & PHEO Deptt. for effective coordination to contain outbreaks.
- Inter-sectoral convergence with related Deptt. of Govt. such as PRI, WCD, RD, H&UD, Industry, SC&ST, School & Mass, Works, ARD, Forest & Environment & Private Medical Colleges for better coordination of surveillance of communicable diseases & containment measures during outbreaks.

4.5 National Viral Hepatitis Control Program

- Hepatitis-B and Hepatitis- C are two silent killer diseases which if remain untreated end up in Cirrhosis / Hepato-cellular Carcinoma.
- Screening tests are being conducted at district level of all High Risk Groups like Pregnant women, Female sex workers, Transgender, Intra-venous drug users, migrants, truckers etc for both Hepatitis- B and Hepatitis- C.
- Free Drugs as well as free treatment facility has been made available at Treatment Centers of all district headquarter hospitals.
- It has been proposed to extent the services to Govt. Medical Colleges during coming financial year 2021-22.

4.6 National Rabies Control Program

- Rabies is a 100 % fatal disease which is totally preventable.
- Currently Anti Rabies Vaccine is available in all District Head Quarter Hospitals and Sub-divisional Headquarters Hospital.
- A total numbers of 166888, 177404 and 136729 dog bite cases have been managed in the years of 2018, 2019 and 2020 respectively
- It has been proposed to extent the Anti Rabies Vaccine services up to all Community Health Center level during coming financial year 2021-22.

4.7 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 in FY 20-21:

- IEC activities: 72000 nos. of Posters for Anganwadi Centres and 48000 nos. of handouts for ASHA has been distributed throughout the state (FY 2018-19).
- Salt testing kit are being procured for determining the iodine levels in salt samples at household levels/ AWC/ schools, the same is distributed to 24358 ASHAs in 17 endemic districts (Angul/ Bargarh/ Cuttack/ Dhenkanal/ Gajapati/ Ganjam/ Kandhamal/ Keonjhar/ Khurda/ Koraput/ Malkangiri/ Nawrangpur/ Nuapada/ Puri/ Rayagada/ Sambalpur/ Sundargarh).
- Under this programme there ASHA incentive has been provisioned for testing the household salt samples in the 17 endemic districts @ 50p/sample tested for 2 months.
- The salt samples drawn by the Food Safety Officers from various sources are tested at State IDD laboratory set up at State Food Testing Laboratory, Bhubaneswar for estimation of the iodine content in salt samples.
- Global Iodine Deficiency Disorders control Day' was observed virtually on 21st October 2020 in the state level with the district level officials of H&FW, WCD, S&ME & S.T. & S.C. Dept.
- To increase awareness at the community level in the 17 endemic districts, posters and wall paintings were taken up on the week preceding and week following the day at the PHC-HWC level in the 17 endemic districts
- To generate awareness across the state, IEC BCC activities were taken up on Global IDD prevention day.
- Bi-annual State Advisory Committee Meeting is organized at the Directorate of Public Health, including various Departments and all stakeholders for better implementation of the programme and ' Universal Salt Iodization', this was conducted on 21st October 2020.

4.8 National Mental Health Programme

- National Mental Health Programme (NMHP) was implemented in the state across 30 districts under the umbrella of NHM. 28/30 District Mental Health Programme (DMHP) units are functional.
- Total OPD cases -16825, follow up cases-43950, IPD cases-981 seen & 134 cases referred by the DMHP units in the previous year (2019-2020).
- Mobile Mental Health Unit across 30 districts for counseling, doorstep delivery of psychotropic drugs, rescue of wandering PwMI and upscaling public awareness in the community. It is moving in 25/30 districts.
- 26/30 Outbound call centre functional at DMHP unit to follow up, counsel and provide psychosocial support to the COVID positive/cured and discharged persons. Total 73287 persons were counseled by the DMHP team.
- One Inbound call centre at COE, MHI, SCBMCH, Cuttack to provide psychosocial care and specialized services of Psychiatric Spl(18003457288)

- Additional funds 1.5 Cr provided to 30 districts for procurement of Psychotropic Drugs over and above free drugs supplied to prevent interruption in the services.
- Posters, Brochures, FAQs developed in Odiya for public awareness.
- 37 Webinars conducted for MOs, SNs, Counselors of other schemes, DMHP staffs..
- Ten core teams @3 districts formed to provide psychosocial counseling to the Persons with Mental Illness or any other mental health issues in the community.
- 24/30 districts conducted Tele-monitoring and tele-consultation by DMHP team Total 9116 persons with mental illness were counselled by the DMHP units.
- ASHA/Relatives and NGOs of district distributed psychotropic drugs during lock down and shut down period to the PwMI.
- DMHP teams rescued of PwMI - one at Bhadrak, one at JS pur and another at Nuapada district
- Tele-monitoring of persons with COVID symptomatic/cured/discharged done by State Mental Health Cell as a part of COVID Control Room Duty. Total no. of tele-calls 984.
- Total 1505 no. of SH/TMC/QF/HI visited by DMHP units & total 38643 migrant people counseled by DMHP units.
- The training programme for DMHP Staffs on 'Child and Adolescent Training' initiated by NIMHANS, Bangaluru & 'Standard Treatment guideline for substance use disorder training' by NDDTC, AIIMS, New Delhi to be continued.
- The mobile numbers of Psychiatric Spl and CPs also shared with Telemedicine Centres operational at District Head Quarters for referral of calls of PwMI those who need Specialised Care.
- Panel discussion on Mental Health Issues conducted on Doordarshan for upscaling public awareness (4 Episodes).
- New Activity Proposed for the current year:
 1. Training & Incentive for ASHAs at Sector level
 2. Training of Integrated Counsellors at MHI, SCBMCH, Cuttack
 3. Training of Community Health Officers at District level
 4. Training of PHC/HWC Medical Officers at District level

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

National Programme for Control of Cancer, Diabetes, Cardiovascular diseases & Stroke (NPCDCS)

NPCDCS:

National Programme for Cancer Diabetes CVD and Stroke (NPCDCS) is being implemented since 2008 in Odisha which was initially implemented in Nuapada district and expanded to all 30 districts across the State. This is being implemented with support of Grant in Aid from Govt. of India through NHM PIP. Following important activities are undertaken under this programme.

1. Population Based Screening (PBS) for Diabetes, Hypertension and Three common Cancers (Oral, Breast and Cervical) among all 30 plus population in Odisha. It is being carried out by trained ANMs with help of ASHA enumerated by house to house visit for screening of diseases under PBS and their Risk Factors like Tobacco Use, Alcohol Abuse, Obesity, Excessive Salt intake, Stress, Lack of Exercise, Family History etc.

2. Odisha Govt is providing Free Diagnostics and Free Drugs under NIRAMAYA and NIDAN scheme for all NCDs. Around 43 types of NCD Drugs and 89 types of Anti-Cancer Drugs are being supplied Free of cost to all beneficiaries. All PHC-HWCs are provided Refrigerators for storage of essential medicines like Insulin under Free Drug Distribution System.
3. Under NPCDCS, 10 ICU / CCUs are established apart from 3 Medical Colleges at SCB MCH- Cuttack, MKCG MCH- Berhampur and VIMSAR- Burla. Five more ICU/ CCUs are under process to be established soon.
4. Till now more than 65.00 lakh 30 plus individuals have been screened for NCD through PBS. Among them 145292 with Hypertension, 112840 with Diabetes, 6425 with CVD, 1598 with Stroke, 927 with COPD, 1439 with CKD, 936 with Oral Cancer, 487 with Breast Cancer and 229 with Cervical Cancer are diagnosed and put under treatment.
5. Under People's Plan Campaign, Fit Health Workers' Campaign is being implemented across the State. All categories of Health Workers including Medical Officers, Paramedical Staff, Health Workers in the field and frontline workers like ASHA and ANMs are being screened for common NCDs like Diabetes, Hypertension and Common Cancers (Oral, Breast & Cervical). Till date 1,07,391 Health Workers have been screened for NCDs.

4.10 National Programme for Health Care for Elderly (NPHCE):

Under National Programme for Health Care for Elderly (NPHCE) is being implemented in all districts across the State with provision of Elderly friendly Health System addressing to their problems and diseases common in old age. Dedicated 10 bedded Geriatrics Ward is established in each District Head Quarters Hospital. (32 Facilities @ Rs. 32.00 lakhs each). During COVID-19 Pandemic these Old age people were provided protection, specialised health care by dedicated OPD and IPD for them at health facilities considering their vulnerability.

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

Under National Programme for Prevention and Control of Deafness (NPPCD) for both congenital and Acquired screening of children and adults for diagnosing and identifying the reasons, Audiometry facilities are established at District Head Quarters Hospitals (32 facilities). Trained ENT Specialists and Audiologists are working delivering Specialised ENT care at these facilities. Free correctional ENT Surgeries like Myringoplasty, Mastoidectomy and other Micro surgical procedures are being undertaken at these facilities and Hearing Aids are being provided to the beneficiaries in collaboration with SS&EPD Department, Govt of Odisha.

4.12 National Oral Health Programme (NOHP):

National Oral Health Programme (NOHP) is being implemented under NHM with support from Govt of India for screening of dental ailments by Dental Surgeon and supervision for Oral Hygiene, deranged denture, infection, scurvy, pyorrhoea, gingivitis and Oral Cancers. Dental prostheses are also provided if required. As State Govt initiative, 353 Dental Surgeons are working at CHC level apart from Dental Surgeons at DHH and District Early Intervention Centres (DEIC). Dental chairs and instruments are also supplied to these facilities appointed with Dental Surgeons. Under Shoo Health programme, Dental Check ups and treatment is being provided by RKSK and RBSK schemes.

4.13 National Tobacco Control Programme (NTCP):

National Tobacco Control Programme is being implemented in Odisha since 2013 across the state with following components with objectives of Health Promotion and monitoring of Cigarette and Other Tobacco Products Act (COTPA):

1. Health promotion

- School Awareness Programme (Tobacco Free Educational Institutions)
- Advocacy and Trainings
- IEC

2. Monitoring of Tobacco Control Laws

- Movement of Enforcement Squads

3. Tobacco Cessation Centres (TCC)

- Tobacco Cessation Counselling
- Pharmacotherapy (Nicotine Replacement Therapy)

4.14 Odisha Comprehensive Cancer Care Programme:

As exclusive State Govt initiative Comprehensive Cancer Care Programme is being implemented in 32 facilities with establishment of District level Day Care Cancer Chemotherapy Centres (DCCCs).

- These dedicated facilities are equipped with six bedded Day Care Chemotherapy Ward, Anti-Cancer Drugs, Digital Monitors, Trained Medical Officers and Staff Nurses, Refrigerators for storage of Anti-Cancer Drugs. Cancer.
- Cancer screening and consultation camps are held periodically in supervision of Specialist Oncologists from AHPGIC, Cuttack and outside.
- District Palliative Care Centres are established as co-located facilities with additional 10 beds in 10 districts (Balasore, Baragarh, Capital Hospital, Bhubaneswar, Kalahandi, Kandhamal, Koraput, Puri, Sundergarh, Nawarangpur, Mayurbhanj) and in rest other districts it is being implemented in integrated manner.
- Till date 47,471 chemotherapy cycles have been administered in these DCCCs as Distributed Cancer Care model.

4.15 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. India is the first country in the world to launch the National Programme for Control of Blindness (NPCB) in the year 1976 with the commitment to reduce the burden of avoidable and treatable blindness 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.

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.

Coverage area:

- Cataract surgery
- Spectacles to school children
- Treatment/management of other eye diseases
- Cornea collection for transplantation
- Presbyopic correction



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.

Year	Annual Target	Achievement
2019-20	276853	125207
2020-21 (upto Nov'20)	276853	28180

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
2019-20	200000	37508
2020-21(upto Nov'20)	100000	615

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	Target	No. of Eyes Collected	No. of Eyes Utilised
2019-20	1300	1348	1008
2020-21 (upto Nov'20)	1300	223	200

4) Presbyopic correction (spectacles for near vision)

Year	Annual Target	Achievement
2019-20	200000	50985
2020-21(upto Nov'20)	120000	6607

5) Capacity building:

Vision Centre at CHCs: 183 nos. of Vision Centres have been functioning at CHCs level in the state for providing eye care services to rural people.

Tele Ophthalmic Network/Mobile Ophthalmic Unit:

- 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 Mobile Ophthalmic Unit is functioning at DHH, Sundargarh
- 10 nos. of Mobile Ophthalmic Unit- steps are being taken to mobilize vans to deliver eye care service in underserved areas of the State.

Retina Centre: One Retina Centre is functioning at Capital Hospital, Bhubaneswar.

Eye Banks/Eye Donation Centres:

- At present six nos. of Eye Banks (3- old Govt. MCHs & 3-NGO/Pvt.) are functioning in the State
- Another six Eye Banks one each at RGH, Rourkela & PRM MCH, FM MCH, SLN MCH, BB MCH & Capital Hospital- 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.
- 55 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 established at DHH, Ganjam
- Two nos. of 10 beded Eye Ward/OT (SDH, Biramaharajpur, Sonapur & SDH, Rairakhole, Sambalpur) are established.
- One no. of 20 beded Eye Ward/OT is to be established at DHH, Boudh
- Expansion of Eye Ward/OT in progress at DHH, Sundargarh

IEC:

- Every year Eye Donation Fortnight (from 25th August to 8th September) is being organised in the districts having eye banks to enhance eye donation activity and public awareness in the community.
- World Sight Day (2nd Thursday of October) is being done at state and district level.
- World Glaucoma Week (3rd 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.



Mobile Tele-ophthalmology Network at MKCG MCH, Berhampur

4.16 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 equipments 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 autoclaves and shredder machines are 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. But during 2019-20 & 2020-21 an amount of Rs.945 lakhs was 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. All 1787 have got authorization.
- Further 313 MOs, 1992 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 30 DHH, Capital Hospital BBSR, RGH RKL
- A dedicated Group-D staffs has been engaged through outsourcing at 32 SDH and 374 CHCs.
- Liquid waste management: Liquid waste management system is established at 32 DHH, 30 SDH and 280 CHCs.
- Two new CBWTF are functioning now, one at Sheragada of Ganjam district and one at Amasaranga of Sundergarh district.
- DPRs of 27 districts one Leprosy Home and two SDH i.e, Jeypore and Rairangpur have already been received from Odisha Water Supply and Sewerage Board for construction of integrated STP & ETP.

Awards & Recognition:

- 337 hospitals have received kayakalpa award in 2019-20.
- 186 hospitals have received kayakalpa award in 2018-19.
- 91 hospitals have received kayakalpa award in 2017-18.
- 20 hospitals have received kayakalpa award in the 2016-17.

4.17 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.

5 CHAPTER

Directorate of Family Welfare

5.1 Reproductive Health

The focus during 2020 was on strengthening availability of integrated Reproductive health services by regular review through existing mechanisms as well as by providing supportive supervision and mentoring support through technical agencies. Although a third party was finalized for the supportive supervision services, the visits could not be done because of outbreak of the covid-19 pandemic. Hence the focus was shifted to improve outreach services like home delivery of contraceptives and improving availability of Family planning commodities across the health facilities and ASHAs.

Review of Family Planning program was conducted across all districts with the help of online platforms along with separate online reviews of the status of logistics availability as well as FPLMIS operationalization. Community mobilization and improving service uptakes especially for newer contraceptives was done through reorientation and sensitization of Public Health Extension Officers throughout the State. Availability of contraceptives was routinely reviewed by conducting telephonic interviews of randomly selected ASHAs in aspirational districts.

During the pandemic, special focus was given towards ensuring uninterrupted supply of contraceptives to the health facilities and ASHAs. As the movement of vehicles was prohibited during initial phases of lockdown, courier services of India Post were widely utilized for transportation of FP commodities throughout the State. During the lockdown phase i.e. March to August 2020, a total of 332 consignments were sent through the postal services. Because of this intervention stock availability was increased to 95% during 2020 as compared to 73% for 2019. The lead time also decreased to 7 days from 9 days during 2020. Indenting through FPLMIS was also increased to 524 indents in 2020 as compared to 247 indents during 2019.

During the pandemic, the mobility of clients to health facilities had been severely affected which directly impacted the health seeking behaviour and accessibility to FP services. So, special emphasis was given to make reversible methods of contraception available for the clients through ASHAs. Periodic reviews and commodity availability improved the utilization of reversible methods like Condoms (50% increase), Chaya



Delivery of contraceptives



New IEC on Basket of choices

(108% increase) and Mala-N (9.5% increase) during the months of June to August 2020. Similar improvement was also seen in the PPIUCD acceptance rates in the facilities.

Although the reversible methods except MPA had seen improvements, services like sterilization and Antara had seen a considerable decrease during the year. Male sterilization services have also been badly affected by the pandemic. During 2021, it is therefore planned to stimulate the services like sterilization through community mobilization drives through PHEOs, local NGOs and by mass media. Also, decrease in follow up doses of MPA will be addressed through a pilot intervention of using MIS for automated messaging for follow up doses. Overall efforts will be taken to bring services to levels better than pre-pandemic stage and at the same time giving special focus on increasing male participation in RH services.

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) available.
- **Delivery points:** State has target of 1190 delivery points of which 550 institutions are functional and steps have been taken for functionalizing remaining DPs. Alongwith that another 4 Medical Colleges are also providing Delivery Services.
- **Janani Surakya Yojana (JSY):** Janani Surakya Yojana (JSY): Total 69,37,702 number of beneficiaries benefitted under JSY (from 2005-06 till 2020-21- upto 3rd 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 Suraksha 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 Suraksha Karyakrama at public health facilities. 2,50,951 pregnant women have received various JSSK entitlements during the First 2 Qtrs of 2020-21.
- **Skilled Attendant at Birth (SAB)** training was given to the Paramedics and AYUSH doctors to augment the institutional delivery (Public Facilities) and Home Deliveries in hard to reach areas. During the period, 255753nos. of Deliveries have been conducted/assisted by SAB trained staffs
- **LSAS & EmOC :** Out of 94 FRUs, 72 FRUs are having 69 nos. of LSAS trained doctors & 6 nos. of EmOC trained doctors are providing Comprehensive Emergency & Obstetrics care services.
- **Maternal Death Review (MDR) Committees** are formed at State and district level to review the maternal death. During 2020-21, 327 nos. of maternal death have been reported by August 2020 (MDR Report) and out of that 207 nos. of death are reviewed by CDM&PHOs of the district.
- **Comprehensive Abortion Care (CAC) :** In the State 267 facilities are providing Comprehensive Abortion Care services where trained doctors are available for providing services along with counseling & scope of post abortion contraceptive services.
- **Village Health Sanitation & Nutrition Day:** Fixed day health & Nutrition day (VHSND) is being organized every Tuesday / Friday at village Anganwadi centers. So far 98% of VHSND Sessions have been organized against the target during 2020-21 (Up to September-20). Also in hard to reach areas special VHSND and RI Sessions are held to address all left out and drop out cases.
- **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. By 2nd Quarter of 2020-21, 9 nos. of OTs and 9 LRs have been certified from State and National Level.

- **Obstetric HDU & Hybrid ICU :** For providing critical care for obstetrics cases, 3 High Dependency Units are functional in 3 DHH(Kandhamal, Kalahandi & Keonjhar district) and 2 Hybrid ICUs in MCH MKCG, Berhampur & MCH SCB Cuttack are operational.
- **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. Out of 106 MWH, 93 MWH are operational.
- **Initiatives for Anaemia Control:** IFA & Calcium Supplementation - About 4 Lakhs Pregnant women covered during 2020-21 (Upto Sept 2020). Inj. Iron sucrose, Inj. FCM & Blood transfusion services are 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. During the year 2020-21 all registered ANC and PNC cases are provided with IFA & Calcium. Also the ANC Cases in 2nd trimester are given Deworming tablets.
- **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. 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 2020-21 upto December 2020, 43283 nos. of antenatal cases have been screened. 73 nos. of volunteers are providing services in the PMSMA clinic days in different government health institutions and 4012 nos. of high risk cases has been detected who were given Red Card.



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 31 per 1000 live births and that of India is 23 per 1000 live births. Similarly, infant mortality rate (IMR) of Odisha is 40 per 1000 live births (2018) and that of India is 32 per 1000 live births; and the U5MR is 44 per 1000 live births against the National U5MR of 36.

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, 530 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. 2020, 17751 newborns have been resuscitated (8% of all live births) and 10371 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, 43 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 already upgraded 4 such NBSUs into SNCUs during 2020 and one NBSU is yet to be upgraded. Up to Sep. 2020, out of 4374 newborns admitted in NBSU, 2922 newborns have been treated at NBSU and 1166 have been referred to SNCU for appropriate treatment.

- **Special Newborn Care Units (SNCU):**

The State has established 43 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, 2 new SNCUs are under the process of establishment. During 2020-21 till Sep. '20, out of 29583 sick newborns admitted in the SNCU, 22778 newborns have been discharged successfully after due treatment.



- **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% of stable sick newborns admitted in SNCU have been provided KMC in 2020-21, till Sep. '20.



- **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 2020-21, till Sep. '20, 262514 newborns have been visited under HBNC programme, of which, 24551 (9%) of newborns were reported as low birth weight (LBW) and 7658 (3%) newborns were identified as high risk. Of the identified high risk newborns, 91% 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 2020 round, the campaign was integrated with COVID-19 screening, NCD screening, TB campaign, etc. 73.4% under five children were distributed with prophylactic ORS packets. Further, 99.7% under five diarrhoeal cases were treated with ORS.



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

A week of dedicated IEC activities was carried out during November 15th to 21st, 2020 for awareness generation on newborn care at home. Besides, all newborns are screened at delivery points and medical colleges and home visits to all newborns by ASHAs. 55265 newborns were visited by ASHA and 2633 nos of SNCU discharged newborn followed by the ASHA.

- **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 Sep. 2020, 85% 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 Sep 2020, mothers of 11% of all preterm newborns were administered with antenatal corticosteroids in the State.

- **Home Based Care for Young Children (HBYC)**

All ASHAs have been trained for making home visits to all young children for early identification and referral of newborns with danger signs/ development delays/ SAM and providing counselling to caregivers on home based care of young children, appropriate feeding practices, ORS & Zinc therapy and IFA supplementation. During 2020-21, till Sep. '20, 184513 children in 14 districts have been visited under HBYC programme, of which, 4% of children are identified as sick & from them, 83% have been referred for appropriate treatment. In the rest 16 districts, trainings of ASHAs are under process.

- **Childhood Pneumonia Management Programme: Social Awareness and Action to Neutralize Pneumonia Successfully (SAANS)**

SAANS programme was rolled out in 2020-21 on 12th November, 2020 by the Additional Chief Secretary, H&FW Deptt., Govt. of Odisha. Under this programme, all doctors and Staff nurses are being trained on standard facility based management protocols for management of childhood pneumonia. Besides, an extensive IEC campaign has been planned in all the districts till the end of February, 2021. All ASHAs and ANMs are also being trained on early identification and prompt management of childhood pneumonia cases.

- **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 2020-21, till July '20, 4498 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-**

- NSSK training is imparted to all medical officers of delivery points for resuscitation of sick newborns at labour rooms within the first golden minute.
 - 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 district and block level programme managers on HBYC
 - Orientation of district and block level programme managers and service providers on SAANS

5.4 Rashtriya Bal Swasthya Karyakram (RBSK)

Rashtriya Bal Swasthya Karyakram (RBSK) rolled out in Odisha by Honourable CM at Baripada on 1st March-2014. The objective of the programme is to screen the children at early stage and provide complete treatment. Under this programme, 38 identified health conditions to be addressed through '4D' approach which includes Defect at Birth, Deficiencies, Childhood Disease and Developmental Delay & Disabilities. Under this programme, 636 number of Mobile Health Teams are functional for screening of 0-18 years children.

Screening of Children at AWC & Schools:

During the Year 2020-21 Screening by MHT under RBSK has been deferred due to COVID-19 pandemic situation and closure of AWC & Schools

Screening of New Born at Delivery Points:

- New born screening of visible birth defects by service providers is conducted at Delivery Points. From April to September 2020, 2, 82,479 numbers of new born have been screened at delivery points and 4015 number of children have been identified with visible & functional birth defects.
- Required equipment & HR for new born hearing screening are provided to DEICs. New Born Hearing screening for early identification of Congenital Deafness is initiated in 29 DEICs.
- To prevent blindness related to retinopathy of Prematurity, RoP screening is conducted in 8 health institutions and during the year 2020-21, 2140 number of sick new born are screened and 406 numbers of identified children are provided laser therapy to prevent blindness.

Early Intervention & Therapeutic services at District Early Intervention Centers :

For Early treatment & Therapeutic intervention for birth defect & children with CP, Autism, ADHD, Mental retardation, Neuro motor impairment and Speech impairment, DEIC is operational in 32 District Head Quarter Hospitals. During the period, 30905 children have been treated at DEIC.

5.5 Rashtriya Kishor Swasthya Karyakram (RKSK)

Rashtriya Kishor Swasthya karyakram (RKSK) expands the scope of preceding ARSH programme, through identification of six priority areas viz. Nutrition, Mental Health, Substance abuse, Injuries and Violence, Prevention of Non- Communicable diseases and Sexual and Reproductive Health. Capacity building of service providers in these six thematic areas is vital for effective and successful implementation of RKSK programme.

The program focuses on adolescents belongs to age groups 10-14 years and 15-19 years with universal coverage, i.e. males and females; urban and rural; in school and out of school; married and unmarried; and vulnerable and under-served.

The program implemented under RKSK are as follows:

- **Peer Education:**

Community based interventions that focus on peer education for establishing direct communication platforms such as (quarterly adolescent health day, weekly and monthly adolescent health sessions and establishing convergence with other programs) with target adolescents on regular basis. The peer education program aims to ensure that target adolescents benefit from regular and sustained peer education sessions covering the six identified health issues (nutrition, sexual and reproductive health, conditions for NCDs, substance misuse, injuries and violence including gender based violence and mental health). This is eventually expected to improve life skills, knowledge and aptitude of adolescents.

The programme implemented in 4 districts (Dhenkanal, Bolangir, Koraput & Bhadrak). Peer Education program has been rolled out covering 5901 villages in 43 blocks and 28620 Peer Educators identified. In 2020-21 Total 996 batches of 6 days training organized keeping COVID-19 norms in view for Peer Educators at sub block level and more than 15000 Peer Educators and 3500 ASHAs trained by ANMs, HW (M) & PHEOs.

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

AHDs organised by ANMs with the help of ASHA, AWW & PEs focusing on activities like sharing Information on Nutrition, SRH, Mental Health, GBV & NCDs, provision of Commodities like Sanitary Napkins, IFA, Albendazole & contraceptives and different Services like General health check-up, (BMI& anemia), Referral to SHRADHA clinics (for counseling and clinical services).

Currently the program implemented in 4 districts (Dhenkanal, Bolangir, Bhadrak & Koraput) and up to September 2020 , 4984 AHDs conducted at village level.

- **Menstrual Hygiene Scheme (MHS):**

The MHS program aimed at promotion of menstrual hygiene among adolescent girls aged (10-19 years) in rural areas to increase awareness among adolescent girls on menstrual hygiene, build self-esteem, and empower girls for greater socialization, to increase access to and use of high quality sanitary napkins by adolescent girls in rural areas, and to ensure safe disposal of sanitary napkins in an environment friendly manner. Currently the program 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 466414 out of school adolescent girls targeted under the programme and distributed sanitary napkins through AHSA.

- **The Weekly Iron and Folic Acid Supplementation (WIFS)**

The IFA distributed at schools and AWC on weekly basis. 35728 schools and 71306 AWCs targeted under the program and the consumption as per reported coverage is 31.72 % up to November 2020.

- **Adolescent Friendly Health Clinic:**

The facility level interventions are mainly linked to strengthening of adolescent friendly health clinics (designated as Shraddha clinics in Odisha). 251 Shraddha clinics are Operational covering all 30 districts in DH, SDH and some designated CHC level. At District Hospitals the Shraddha clinics clubbed with Integrated Counseling Centre. Total 43360 adolescents received different adolescent health services through Shraddha clinic till September 2020.



- **School Health Programme Under AYUSHMAN Bharat:**

School Health programme is a joint initiative of Department of Health and Family Welfare and Department of School & Mass Education. Under the programme two teachers, preferably one male and one female, in every school designated as “Health and Wellness Ambassadors” and will be trained to transact health promotion and disease prevention information in the form of interesting activities for one hour every week in schools. In Odisha 10 aspirational districts are targeted to implement the programme with a target to cover 8456 schools in 101 blocks of 10 districts.



Progress under the programme:

- State level Committee on School Health formed.
- Joint secretary letter communicated to all concerned for implementation.
- 8456 Head Masters and all district and block health & education team oriented virtually.
- 564 batches of 5 days training of Health and Wellness Ambassadors (Teachers) planned and 50 batches are completed. The training is going on and all teachers will be trained by March 2021.

5.6 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 & 1222 Cold chain points all across the State which targets to 9,38,249 Pregnant women & 8,01,352 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%

Special Immunization drive in Low performing 135 Blocks of 28 Districts and all UPHC of 5 Municipal Corporation.

Spl. Imm. drive is conducted in 135 low performing Blocks of 28 Districts and all UPHC of 5 Municipal Corporation from November 2020 to February 2021.

In November round the achievement is.

No. of Children Vaccinated :- 12713

No. of PW Vaccinated. :- 1251.

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.

COVID – 19 Upcomming Vaccination Programme.

- Training from State to All District Completed in virtual mode.
- Various level of training at District Level are completed.
- Operational Guideline for COVID-19 Vaccination has been communicated to all District.
- Training has been given to manage AEFI arising out of COVID-19 Vaccination.
- All Cold Chain point assessment has been done for preservation of vaccine.
- State has received 24 no of Large ILR and 41 no of Deep Freezer Large.
- Dry Space in all district has been identified (SVS, RVS, DVS and Cold Chain Points).
- Supply of New Cold Chain Equipment (WIF/WIC/ILR/DF) has been finalized and sites are ready for installation of WIC/WIF.
- Data regarding Health Worker Vaccinator and session site has been shared with Gol.
- State has received COVISHIELD 742500 doses and COVAXIN 20000 doses

Phase 1 vaccination was launched on 16-01-2021 state wide and being continuing.

Dedicated Power Supply under Routine Immunization Programme – 2020-21

For effective quality Immunization Programme Cold Chain Management plays a very vital role for quality vaccination and in order to maintain same the following points are highly essential in this regard uninterrupted electricity supply and POL for Genset and effective transport mechanism is highly essential for 1222 cold Chain Points across the state for safe vaccination to PWs and infants.

- Uninterrupted power supply to 32 District Vaccine Store (DVS). 9 Regional Vaccine Store (RVS). State Vaccine Store (SVS) with power backup and 1222 Cold Chain Point.
- Maintenance of proper Cold Chain System.
- Proper Vaccine and logistics supply chain management.
- Maintenance and repair of vaccine van.
- **Strategies :** Funds is being placed to the districts to ensure timely payment of electricity bill, procurement of Genset for SVS, RVS, DVS and Cold Chain Points , procurement of double battery inverter for Cold Chain Point and DOL charges of Genset. Repair and maintenance of vaccine van etc.
- **Outcome :** Proper Cold Chain equipment maintenance for proper storage of vaccine till it reaches upto to the beneficiaries level. To ensure uninterrupted power supply at Cold Chain Points, payment of electricity charges , recurring expenditure for vaccine van etc to be on road.
- **Achievement :** One genset for State Vaccine Store, four nos. Genset for RVS and 31 Nos. of genset for DVS, 286 inverter and 154 Generators for Cold Chain Points, four servo voltage stabilizer for RVS and 380 low voltage stabilizer for Cold Chain point have been purchased and installed respectively and on going expenditure of electricity charges. Maintenance and repair of Vaccine Van, DOL for generator & AMC for repair of Generator will met for activities from this fund as when required in every year.
- The money has been utilized for upgradation Cold Chain points for incoming COVID-19 vaccination.

Coverage report of 2020-21 (April 2020- November 2020)

Routine Immunization Coverage April 2020- November 2020	
Antigen	Achievement in %
Td (pregnant women)	73.4
BCG	79.5
OPV 3 rd dose	80.1
Pentavalent	80.2
MR	80.8
IPV	78.4
Rota Virus Vaccine	80.7
Full Immunization	84.8

Source HMIS

5.7 Nutrition

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

- 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 are going on Under MAA Programme

- 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 :

- 148 Master trainers are trained on MAA in 7 days state level TOT.
- Till August 2020, 1490 doctors, 140 counsellors 3124 Staff Nurses, 7938 ANMs and 12949 ASHAs were trained of Infant and Young Child Feeding practices and improved counseling skills.

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
2018-19	27.71%	36.72%	29.83%

In 2019-20 –
 6-59 month – 26.9%
 5-9 years (1-5 class) IFA Pink – 32.9%
 10-19 years (6-12 class) IFA Blue – 33.5%

Govt. of India – 2019-20 –
 6-59 month – 14.5%
 5-9 year – 28.3%
 Adolescent – 10-19 year – 33.5%

(The above data collected from AMB dash board)

2. Coverage of IFA supplements in quarter 4 (January'20 -March'20) for FY 2019-20 in Odisha(AMB data):

IFA syrup= 24.7%

IFA pink tablet (for children from class 1-5)= 30.2%

IFA Blue tablet (for children from class 6-12)= 30.7%

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
2019-20	64	11207	8971	88%
2020-21	66	2144	1628	81%

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 st Round	2 nd Round
2019	94.3%	94%
2020	96% (Feb. Round)	97% (Sep. Round)

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 st Round	2 nd Round
2019	93.76%	94.66%
2020	95.6% (Feb. Round)	97% (Sep. Round)

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

Back ground : 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 12th 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.

- Objective:**

The State aims to achieve an additional 30% decline of 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:**

- Special VHND & Routine Immunisation:** 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.

- a. Total 6707 nos of Special VHND & RI sessions were conducted during the period from April 2020 to September 2020.
- b. 113024 nos of Children were attended & treated in Integrated VHND & RI session during the period from April 2020 to September 2020 & 25913 nos of Children were vaccinated.
- c. 21959 nos of Pregnant Women were attended & provided with necessary services in Integrated VHND & RI session from April 2020 to September 2020.

2. Red Card: Identification of high risk pregnancies (High risk due to geographical & also clinical High risk) & distribution of red card to all high risk pregnant women and children residing in geographically hard to reach area, which will be carried by the beneficiaries during the visit the health institution as well as VHND along with MCP card. This will be used for keeping record of the treatment and management of her health condition.

- a. 3601 nos. of pregnant woman issued with red card from April 2020 to September 2020.
- b. 5094 nos. of children issued with red card from April 2020 to September 2020.

3. Joint Home Visit: Joint home visits by MPH (F) and MPHS (F)/(M) to high risk cases to monitor the health of the mother. Total 13769 nos of high risk pregnant women were covered under Joint home visits by MPH (F) and MPHS (F)/(M) from April 2020 to September 2020.

4. Incentive for ASHA for survival of high risk PW & Children: Incentive (@ Rs.500 per case) is being provided to ASHA on survival of high risk pregnant woman up to 42 days after delivery and high risk child up to 18 months of age.

8015 nos of ASHAs were paid incentive for survival of high risk pregnant woman up to 42 days after delivery and high risk child up to 18 months of age from April 2020 to September 2020.

5. 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 motorable points from where she can be transported to the appropriate facility or maternity waiting home.
 - i. 3901 nos. of (Three thousand Nine hundred One) stretchers have been procured & supplied to Gaon Kalyana Samiti for transportation of pregnant women from difficult villages to motorable points.
- b. Bike Ambulance: Implementation of bike ambulance for transportation of pregnant women where four wheeler are not accessible. 21 nos of bike ambulances are operated in remote areas in the districts.

6. Free diet: Free diet to pregnant mother including one attendant those who reside at maternal waiting home, also for children below five years.

7. Reimbursement of transportation cost to pregnant women from difficult villages: Provision of reimbursement of Rs.1000/- (Rupees one thousand) per pregnant woman from difficult villages towards transportation cost to nearest motorable point / nearby public health facility. (Implemented from 23/09/2017)

2596 nos. of pregnant women were provided with transportation cost from difficult villages to motorable points from April 2020 to September 2020.

8. Drop Back incentive package to pregnant women & sick infant: Provisions of Rs.500/- towards assure drop-back Transport Services for Pregnant Women after Institutional Delivery & Sick Infants treated at Public Health Facilities. (Implemented on Sept- 2018)

- 116074 nos. of pregnant women were provided with drop back cost after Institutional Delivery from April 2020 to September 2020.
- 6586 nos of Sick Infants were provided with drop back cost for treated at Public Health Facilities from April 2020 to September 2020.

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

a. High dependency unit (HDU)-

High dependency Unit (HDU) at VIMSAR Burla, SCB MCH Cuttack, DHH Keonjhar and DHH Kandhamal is functional. High dependency Unit (HDU) at DHH Malkanagiri, SLN MCH Koraput, Capital Hospital, DHH Dhenkanal, DHH Kalahandi & DHH Dhenkanal are under process & will be functional soon.

b. Paediatric Intensive Care Unit (PICU):-

Paediatric Intensive Care Unit (PICU) is functional at VIMSAR Burla, SVVPIG Cuttack, MKCG MCH Berhampur, DHH, Kandhamal & Capital Hospital, Bhubaneswar. Paediatric Intensive Care Unit (PICU) at RGH Rourkela, SLN MCH Koraput, DHH Malkanagiri & DHH Kalahandi are under process & will be functional soon.

- 10. Wage Compensation to Mother for admission sick children in NRCs:** Provision of Additional Rs. 50/- per day to Mothers for admission of SAM Children at NRCs approved in SAMMPurNA budget. Total 1233 nos of SAM children admitted & 15913 nos of days stay in NRCs from April 2020 to Sept 2020 & wage compensations were given to mother.
- 11. Additional Incentive to LSAS & EmOC Doctors:** Provision of incentive (maximum upto Rs.30000/-) to LSAS & EmOC Doctors for performing C-Section at DHH, SDH, CHC FRUs approved in SAMMPurNA budget. Total 9092 nos of C-Section done by LSAS & EmOC Doctors from April 2020 to September 2020 & incentive given to doctors.
- 12. Total 1253 nos** of Resuscitation Kits were supplied to Districts for ANMs in SC having more than 20% Home delivery in 15 SAMMPurNA District.
- 13. 36 nos** of Non pneumatic anti shock garment for FRUs and 64 nos for 108 ambulances of PPH management in 15 SAMMPurNA District upto December 2020.

5.9 Equity & Advocacy

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 29th 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 Proforma for Medico-Legal Examination of Survivors/Accused of Sexual Violence Sexual Assault Forensic Evidence (SAFE) Kit was conducted on 28th January 2019.

They will roll out the training at the district level.

- 30 One Stop Centers (SAKHI) are functional in Odisha as one in each district.
- 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.
- Sensitization on Dissemination of SOP on Coordinated Response to Address Gender Based Violence has been conducted for 3 Private Medical Colleges and 7 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.

5.10 Strengthening Implementation of PC & PNDT ACT

Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act, 1994 with Rules made there under 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 state Government has recently decided to cover PC & PNDT Act under the Odisha Right to Public Services Act.

Institutional Mechanism:

The Odisha Government has put in place institutional mechanisms for strengthening the PC & PNDT 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. Director Family Welfare (O) has been notified as State Appropriate Authority in 2007. Girl Child Task Force constituted under the Chairpersonship of Chief Secretary. Executive Magistrates have been designated as Authorized Officers of District Appropriate Authorities

Multi-member State Appropriate Authority have been notified vide notification no.21019 dated 16.08.2007 under PC & PNDT Act. District Advisory Committee (DAC) reconstituted in all districts. Collectors have been declared as District Appropriate Authorities vide notification no.19077 dated 27.07.2007. District Collectors and Sub – Collectors have been notified as Appropriate Authorities 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.

State PC PNDT Cell is operating in the office of the Director of Family Welfare, Odisha since 2009. District PNDT Cell established in all districts. In pursuance to the directions of the Hon'ble Supreme Court, a PC PNDT Website had been created as www.pndtorissa.gov.in, since 2009 – 10 and has been hosted on the NIC server. The state proposes to undertake the informers' incentive in Odisha and a guideline has been moved to government for approval.

Online FORM A, B, C, F have been notified under Odisha Right to Public Services Act by Government, to streamline registration, renewal process and record maintenance under the PC & PNDT Act without foregoing the hardcopy that could be used as evidence in case of any violations of the provisions of the PC&PNDT 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 3 batches) has been completed on Online Registration of Ultrasound Centres under PC PNDT through NIC.

Implementation of the PC & PNDT Act –

As on 31.12.2020, 1158 facilities Registered since the inception of the Act including 28 Genetic Counselling Centres/ Genetic Laboratories/ IVF centres. 68 registrations and 44 renewals have been provided in 2020. In 2020, 234 monitoring visits have been undertaken by District team and 2 by State team. 7 applications for registration have been suspended or rejected by District Appropriate Authorities. 53 District Advisory Committee Meetings have been held in 2020.



Total 70 cases have been filed for violation of PC & PNDT Act. Four criminal proceedings quashed by the Hon'ble High Court of Odisha. Challenging the order of the Hon'ble SC, 2 special leave petition was filed before the Hon'ble SC of India. One appeal has been disposed by the Commissioner –cum- Secretary, H & FW Dept. Four appeals disposed by the Multi-member State Appropriate Authority. One appeal filed before the District and Session Judge Court, Khordha challenging the order of acquittal of the higher court. Six convictions secured and 2 convictions have been confirmed in the court of the District and Session Judge (Jharsuguda and Cuttack).

In compliance to Hon'ble Supreme Court Judgement dated 8.11.16, Sex Ratio at Birth (SRB) figures is being analyzed from Civil Registration System (CRS) and Health Management Information System (HMIS) data. There has been a steady improvement in SRB. District Wise SRB being submitted by Director of Health Intelligence and Vital Statistics and has been floated on the PC PNDT Website from 2012 to 2016. SRB of last 6 years is as below .

Year	2014	2015	2016	2017	2018	2019
SRB	929	929	920	930	930	929

SCB MCH - Cuttack, VSS MCH - Burla, MKCG MCH – Berhampur & IGH, Rourkela , the MCI recognized institutes have been notified as accredited institutions for six months training on Ultrasonography. Six Months' Training on USG is continuing in the state in pursuance to the Judgement dated 8th November 2016 of the Hon'ble Supreme Court of India in WP no. 349 of 2006. Two batches of Competency Based Evaluation (CBE) completed in the state by 31st January 2017, as per the PC PNDT Six Months' Rule.

Awareness Programmes and IEC / BCC Materials

National girl child week with the theme – **“Girl Force – Unscripted and unstoppable”** - was celebrated in all 30 districts as national recognition for the young ladies and to address disparity about girl child which incorporates numerous territories like imbalance in instruction, nourishment, lawful rights, restorative care, security, respect, girl child marriage.

IEC materials were developed and disseminated to all districts. Radio Jingles on the theme was aired on All India Radio and replayed during 'Observation week' in 30 districts during 18th – 24th Jan' 2020.

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. Advertisement were done on TV and Local Channels, through FM Channels & Community Radio Theme –Kanya Shakti: Avarnaniya Evam Adamya.. on January 18, 2020, State Appropriate Authority, PC & PNDT and Director, SIHFW participated in Doordarshan Panel Discussion on the theme. A Painting Competition was held on 21.1.2020 in Dhauli Art College. Hoardings were displayed at State Headquarter - Capital Hospital, AIIMS, Airport, Railway Station, Bus Stand . Change of Flex Material was done at district & at 5 Municipal corporation (Bhubaneswar, Cuttack, Berhmapur, Rourkela and Sambalpur).

6 CHAPTER

Directorate of Food Safety

Human Resource

- For ensuring effective & proper monitoring of food safety activities in the State, 37 new posts of Designated Officers were created.
- Recently 35 No. of FSOs are empanelled for new recruitment.
 - 1) FOSCOS(Food Safety and Compliance System) The online FOSCOS was first started in Odisha among all larger states from 1st March ,2020 and all license and registrations are issued at the earliest for ease of doing business.
 - 2) To facilitate FSS activity recently mobility support is also provided to all the district and ULBs

Upgradation in Food Testing Facility

- 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.
- Kalyani Laboratory, Bhubaneswar is now utilized for quick checking surveillance Food samples for effective enforcement.
- Regional/District Food Testing Laboratory are already in process of setup under OMBADC in Sukinda, Keonjhar, Sundargarh and Mayurbhanj.
 - a. 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. 3584 Food samples were tested from 1.4.2020 to 31.12.2020
 - b. One Mobile Food Testing Laboratory(MFTL) MFTL is regularly covering 30 districts and 6 ULBs of Odisha, 1300 number of food and water samples have been tested in MFTL from 1.4.2020 to 31.12.2020.

Enforcement:

- Number of Licenses issued during 1.4.2020 to 31.12.2020 is 6780
- Number of Registrations issued during 1.4.2020 to 31.12.2020 is 8056
- Use of IT enabled inspection techniques of Food Businesses Unit through FoSCoRIS(Food Safety Compliance through Regular Inspection and Sampling System)

Training and Other Activities

- i) (Food Safety Training & Certification program) Training have been conducted in Odisha to ensure safe and hygienic food to the consumers. Till Now more than 38,000 Food Business Operators are trained in different parts of Odisha.
- ii) Digital Mitra Training: To increase the online FOSCO trainings were conducted where applicants were trained to help the FBOs for filing online applications for ease of doing business.
- iii) PAN India survey conducted on Oil, Paneer, Khoya, Milk and Milk products conducted in all districts
- iv) Different newer initiatives have been started regarding Food Safety i.e.
 - a. Clean Street Food Hub- will be implemented in Kharagali, Bhubaneswar
 - b. Eat Right Campus – Going to be established in Food academics, Treatment & business establishment in capital.
 - c. BHOG- 3 temples (Sani Mandir, Kali Mandir, Sai Mandir 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.

7 CHAPTER

Director of Medical Education and Training

ACTIVITIES UNDER TAKEN

- 250 number of MBBS seats in SCB Medical College, Cuttack has been recognized during the academic session 2018-19 and 250 MBBS seats at MKCG MCH, Berhampur has been renewed for the academic session 2018-19.
- 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 4th batch during 2020-21.
- 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 Bolangir and first renewal done during 2020-21.
- 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.
- All the Medical Colleges of the states have been equipped with RTPCR facilities and VRDL for COVID testing and to tackle any future Epidemic.
- One New Super Specialty Course has been started in Department of Endocrinology at MKCG MCH, Berhampur during session 2018-19.
- One New Super Specialty Course has been started in Department of Pulmonary Medicine at SCB MCH, Cuttack during session 2020-21.
- 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 functionalisation of Liver Transplantation Unit at SCB MCH, Cuttack. EOI has been invited and is under process.
- 89 Nos. of Kidney transplantation has already been conducted at SCB MCH, Cuttack till date. .
- More than 180 Nos. of Open Heart Surgery have been conducted at SCB MCH, Cuttack during 2019-20 (up to December 2019).
- SOTTO has co-ordinate 4 nos. of Cadaveric Kidney Transplantation during 2019-20 i.e. 1 no. at SCB MCH, Cuttack, 2nos. at Apollo Hospital, Bhubaneswar and 1 nos. at AMRI, Hospital, Bhubaneswar.

- 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 Doctor, Nurse 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.
- High- End Instruments like Anatomage table and others Equipments have already been procured for 7 Govt. Medical Colleges of the state along with AHPGIC, Cuttack in accordance with the requirements of the patients & Medical Students. High-end mannequins for skill labs are under the process of procurement.
- During last 5 years (2016-17 to 2020-21 up to December, 2020), Rs. 351.00 Cr has been sanctioned in favor of 76,599 Nos. of beneficiaries from OSTF till date. 15 numbers of Institutions outside states are empanelled under OSTFS.
- Free Cancer Drugs are being distributed in AHPGIC, Cuttack under NIRAMAYA Scheme.
- 22 Nos. of Junior Resident, 90 Nos. of Senior Resident, 71 nos. of Tutor, 58 Nos. of Assistant Professor, 1 nos. of Associate Professors and 01 No. of Professor in different discipline have been appointed in different Medical College & Hospitals of the state during 2020-21.
- 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. 4, 85, 75,000/- (Rupees Four Crore Eighty Five Lakh Seventy Five Thousand) only for all Govt. Medical Colleges of the State including SCB Dental College & Hospital, Cuttack & SVPPGIP, Cuttack during 2020-21 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 2020-21, 02 Nos. of Physiotherapy Institutions (New) have been given permission to start the course.
- 19 nos. of ALS Ambulance have been procured under CSR activities for 7 Govt. Medical Colleges of the state AHPGIC, Cuttack & Capital Hospital, BBSR.
- During the academic session 2019-21 & 2020-21, 23 Nos. of Allied Medical Science Institutions (New) have been given permission to start the courses.
- Establishment of Sports Medicine and Rehabilitation Centre in Govt. MCHs is under process.
- In principle, it has been decided to upgrade the SCB MCH, Cuttack to AIIMS PLUS institution for which the land acquisition has already been started.

8 CHAPTER

State Institute of Health & Family Welfare

Year 2020-21 started with the huge Covid pandemic. Covid-19 has paralysed the entire world and at this crucial time only prevention and awareness generation has been the only focus of the Department. Thus voluminous IEC materials were produced covering more than 115 themes. TV spots, Radio spots/jingles, paper advertisements, Prototypes of display materials were prepared and shared with almost every platform. Social Media handles, Cartoons Shows through You Tube, New papers, Television, All India Radio, FMs, Community radios, Bus terminals, Airports, almost all possible areas which ever can be utilised to create awareness during this time were covered with various awareness messages. Simultaneously, capacity building training of different service providers following a complete new i.e. virtual medium was also equally challenging during this year.

Activity conducted by Center of excellence for communication COE, SIH&FW Health Awareness on COVID-19 pandemic : 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. Different mass media platforms has been extensively utilised to sensitize the community through all available platforms.

A temporary office arrangement was made at Gita Govinda Sadan for the entire Communication Team of SIH&FW to work under the Chief Spokes Person, of Covid-19 management programme GOO, Mr. Subato Bagchhi till end of June 2020. Various messages were designed & disseminated in four phases i.e. at the time of Lockdown, The shut down, Return of Migrants & The new normal phase. Messages covering more than 115 different themes were disseminated through different channels, newspapers, radios & social platforms. 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 30 districts.



Printing & dissemination of IEC Materials: IEC materials on Work Place Advisory (General Awareness), Work Place Advisory (Using Lift / Staircase), Work Place Advisory (Returning from Office/Market) & Work Place Advisory (Prevention of COVID) both in Odia & English language were designed and printed at SIH&FW Printing press and disseminated with other Govt. Departments to create awareness on Covid-19.

Covid Vaccination: Videos of influencers belonging to the Department of Health & family welfare receiving Covid vaccination has been prepared to disseminate among the community to eliminate unwanted fear and hesitancy towards vaccination. Video clips, animation and messages in other audiovisual format were also prepared & transmitted through news channels, social media and LED display boards across the State.

Observance of NSV fortnight: In order to raise male sterilisation acceptance in the community different IEC/BCC activities were conducted at various level. This fortnight was conducted from 21st Nov' to 4th Dec' 2020. During this period, different IEC&BCC activities such as dissemination of Poster, Leaflet, Displaying of Hoarding, Standee, Banners & Miking through IEC Awareness van at block & sub centre level, Wall writing through Swasthya Kantha in the revenue villages, Village meeting involving all male members and PRI Members, IPC Sessions, were organised to create awareness on NSV during this period across State.

SAANS Campaign: On the occasion of World Pneumonia Day i.e. on 12th Nov'2020, Social Awareness and Action to Neutralise Pneumonia Successfully (SAANS) campaign for reducing the overall burden of childhood pneumonia in the State was launched through virtual platform involving stakeholders from all level. A canopy carrying awareness messages on pneumonia was placed at each DHH along with different other IEC sets to create awareness at community level. Displaying banners, posters, stickers, hoardings were also taken up. In order to make effective home base counselling to parents of Under Five children separate folder for frontline workers were designed and shared with districts. This campaign will continue till 28th Feb'2021.

LLIN distribution documentation: To reduce prevalence & death due to malaria LLINs are distributed in malaria prone districts of the state, a separate documentary of entire process is being prepared through an hired agency. Also Sensitisation meeting with ADPHCOs, DPHCOs, VBDs, ADMPHO (VBD), DPMs, were organised through virtual mode regarding documentation of LLIN distribution in their respective areas.

Global Hand washing Day Campaign-2020: Global hand washing day was observed on 15th of October 2020. As an initiative to fight against COVID-19 pandemic in Odisha an Orientation program involving all communication officers were organised on 13th October by SIH&FW in partnership with AIIMS, BBSR in the virtual mode. On the global hand washing day different Communication activities such as dissemination of awareness messages, display of banners and posters were made across the state.

Orientation on Health & Wellness Centre Activity: In order to sensitize the field level staff regarding conducting the earmarked activities as per timeline & in time report submission to GOI was the focus of the orientation. This meeting was organised by SIH&FW through virtual mode on 17th October. District as well as block level communication officers, other DPMu & BMPU staff along with Medical officers participated in this meeting.

Other IEC/BCC Activities: Though the department is fighting hard against Covid pandemic in order to ensure health service to all, other activities gained momentum by mid of May adhering to Covid-19 restrictions. Different communication activities were implemented during observation of designated days following the Covid-19 restrictions. State Level observations of almost all designated days were carried out through virtual platform. Dissemination of awareness messages through mass media at state level, different IEC activities such as display of hoardings, banners & posters and writing messages on Swasthya Kanhass, movement of IEC vans, Dissemination of Folders etc in district & block level were conducted.

The designated days namely World Breast feeding Week from 1st to 7th of August, World Eye Donation Day on 25th August, International Safe Abortion Day on 28th September, World Heart Day on 29th September, International Day for Older Person on 1st October, World Sight Day on 8th October, World Mental Health Day on 10th October, Global Iodine Deficiency Disorder Prevention Day on 21st October (17 districts), World Stroke Day 29th October, World New Borne care Week 15th to 21st November.

Design and Development of Content: Prototypes of different programmes, different schemes implemented by all most all the Directorates of Department of Health & family Welfare, is designed at SIH&FW. Apart from Display prototypes, brochures, booklets, folders, different guidelines etc were also designed and disseminated with the respective wings & also communicated with the districts for awareness generation & sensitisation of the care giver as well as the community.

Activity carried out by training wing, SIH&FW (O):

Training and capacity building are integral part of service delivery linking to service outcome. At Normal period & also keeping view this pandemic period SIH&FW imparted different trainings from time to time using best suitable platforms. The following trainings and related activities were carried out in the year 20-21.

- 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.
- 2 days state ToT on Skill Attendance at Birth (SAB) for district level trainers completed in which 18 nos. of participant were participated.
- 3 days refresher training for Block Programme Managers was organized in which 24 nos. of participants had attended the training.
- Two batches (6 nos) of State level 12 days laparoscopic sterilisation training for O&G Spls, Staff Nurses and OT attendant at PPP Centre, Cuttack was completed.
- Quarterly Progress report on training (Q-III) prepared and submitted to NIH&FW, New Delhi.
- State level training of Trainers on ASHA refresher Training on Integrated Campaign was conducted & 2307 persons were trained.
- State training calendar was prepared and submitted to NIH&FW, New Delhi.
- Quarterly Nodal Officers Review Meeting was conducted through online platform.
- Review meeting for Covid-19 related training of district officials, using online platform on 17/07/20 was conducted.
- Online training of doctors and Paramedics for functionalization of telemedicine centers was conducted on 18th & 19th July 2020.
- Annual Training Review meeting was conducted in the presence of district nodal officers in Mini Conference Hall of NHM, Odisha.
- All facilities of Angul & Jharsuguda District are updated with their correspondence Block to enhance the utility of TMIS up to Block level.
- Correspondence and Communication to TMIS Cell, Ministry of Health & Family Welfare, Govt. of India for providing Block level user Credential to conduct Orientation Training of TMIS for Block level Health Functionaries was made.
- Regular follow up and support to district as well as Ministry H&FW, Govt. of India for providing Block level user Credential to conduct Orientation Training of TMIS for Block level Health Functionaries.
- Execution of Virtual Training review meeting for 2nd Quarter.
- Two days state level Orientation Training on TMIS for HM, BDM, DEO and PHEO organised at the institute in four batches with Virtual mode from 17th to 27th Nov 2020.
- Communication to all CDM & PHOs for nomination of different participants for different training which will be conducted at SIH&FW, Odisha.
- 30 days induction training for MBBS doctors is going on at SIHFW (O), from 15th December'20 in which 14 no. of participants have participated.

9 CHAPTER

Directorate of AYUSH

Government of Odisha have recognized Ayurveda, Unani & Homoeopathy systems of medicine and these systems have the heritage of community acceptance, gained popularity & continues to cater Health Care Services to a larger population in the State.

ACHIEVEMENTS:

a) New appointments:

- 878 nos. of AYUSH Assistants have been selected by the Odisha Staff Selection Commission(OSSC), Bhubaneswar for filling up of the vacant posts.
- 66 Homoeopathic Medical Officers(HMOs) and 157 Ayurvedic Medical Officers(AMOs) have been appointed in Govt. Homoeopathic and Ayurvedic Hospitals/dispensaries of the State.
- 01 Professors and 05 Readers have been engaged in Govt. Homoeopathic colleges through Walk-in - interview on contractual basis.

b) Opening of new Post Graduate AYUSH courses:

- Intake capacity of Post Graduate course at Gapabanhdu Ayurveda Mahabidyalaya,Puri has been enhanced from 15 to 19.
- Intake capacity of Post Graduate course at G.A.C, Balangir has been enhanced from 08 to 10.
- Intake capacity of Post Graduate course at Dr Abhina Chandra Homoeopathic Medical College & Hospital, Bhubaneswar in the subject Materia Medica has been enhanced from 03 to 04.

c) Enhancement of the U.G seats in AYUSH:

- Intake capacity of Gapabanhdu Ayurveda Mahabidyalaya,Puri has been enhanced from 30 to 75.
- Intake capacity of KATS Ayurvedic college, Ankushpur, Ganjam has been enhanced from 60 to 75.
- Intake capacity of GAC, Balangir has been enhanced from 60 to 75.
- Intake capacity of Dr ACHMC &H, Bhubaneswar has been enhanced from 25 to 63.
- Intake capacity of UHMC &H, Rourkela ,BPHMC & H, Berhampur and OMCH &R,

d) Capacity building of AYUSH personnel's under NAM

- Orientation training programme for 19 nos. DAMOs/DHMOs and 100 nos. of AMOs/HMOs for operationalization of 100 AYUSH Health Wellness Centers.
- Skill Development training programme for 450 AYUSH doctors have been done.
- 20 nos. of AYUSH faculties have under gone training in their respective National Institutes on “Up-gradation in recent advancement on AYUSH”.
- Training programme for ASHAs completed in the Ayush Health & Wellness Centers .

e) Enhancement of stipend for AYUSH students:

- Stipend of the students of Ayurveda and Homoeopathy P.G colleges have been enhanced from Rs.12,000/- Rs.13,000/- and Rs.14,000/- to Rs.22,000/- Rs23,000/- and Rs.24,000/- respectively.

f) New initiatives:

- Guideline for accreditation of Yoga and Naturopathy Education institutions and registration of Yoga & Naturopathic Practitioners has been approved by the Govt.
- 100 nos. of AYUSH dispensaries have been identified for up-gradation as AYUSH Health & Wellness Center.
- MOU has been signed between Director AYUSH, Odisha and Director Health Services as an institutional mechanism to facilitate the implementation of health activities through ASHAs.
- Essential AYUSH drugs shall be procured through OSMCI, Bhubaneswar
- Vacant posts of lecturers of 03 Govt. Ayurvedic Colleges and 04 Govt. Homoeopathic Colleges shall be filled through OPSC, Cuttack.
- Construction of 30 new AYUSH dispensaries.
- Construction of 50 bedded integrated AYUSH Hospital at Dhenkanal will be completed and construction of 50 bedded integrated AYUSH Hospital at Berhampur and Balasore will be started.
- Operationalisation of 100 nos. of AYUSH Health Wellnes Centers.
- Drug Testing laboratory(DTL) for Homoeopathy will be started.
- “AYUSH Wing(Panchakarma)” will set up and made functional at District Head quarters Hospital, Bargarh and Keonjhar
- Medicinal Plant Garden will be set up at all AYUSH educational institutions of the State.
- School Health programme on AYUSH will be started.
- Swachhata Action Plan for AYUSH will be implemented in all AYUSH units of the State.

g) Civil Construction Work:

- Construction of 13 new AYUSH dispensaries have been done.
- Construction work of Drug Testing laboratory(DTL) for Homoeopathy in the campus of Dr ACHMC &H, Bhubaneswar has been completed.
- Construction work of Govt. Ayurvedic Hospital has been completed
- Construction of academic building of all Homoeopathic and Ayurvedic educational institutions.
- Boy's and Girls Hostel for the students has been constructed at GAC, Balangir, UHMC &H, Rourkela and OMCH& R, Sambalpur .
- “AYUSH Wing(Panchakarma)” will set up and made functional at District Head quarters Hospital, Bargarh and Keonjhar
- Medicinal Plant Garden will be set up at all AYUSH educational institutions of the State.
- School Health programme on AYUSH will be started.
- Swachhata Action Plan for AYUSH will be implemented in all AYUSH units of the State.

Training of Ayush Doctors

Various types of training & programme orientated training are being imparted to AYUSH Doctors to upgrade their knowledge & skill.

- 6 days Induction training of AMO/HMO at State level
- 6 days Clinical Skill Development Training for Ayush Doctors working in Co-located units under NHM



Training Activity During Year 2020-21

10 CHAPTER

Directorate of Nursing

- Enhancement of Govt. nursing training institutions seats in the nursing course PBBSc (45seats) & M.Sc (33 seats) at VIMASR Burla & MKCG Berhampur the admission process will start up from the academic year 2021-22.
- Awarded best performing nursing students in the final batch out students ANM/GNM/BSC/ PBBSC/MSC nursing courses best 3 topper students were awarded virtually on the occasion of International nurses day 12th may 2020.
- Opened the new Post Basic Diploma Specialty Nursing Courses 150 seats at 03 number of Govt. college of nursing at SCB Cuttack, VIMASR Burla & MKCG Berhampur will enhance the technical nursing aspect of nursing service in the state.
- Upgraded 8 Govt. GNM training school to B.Sc College of nursing at DHH Sundargarh, Dhenkanal, Kandhamal, Kalahandi, Nabarangpur & MCH Cuttack, Burla, Berhampur.
- Induction training Programme for Community Health Officer -bridge course training for staff nurses completed at NABM Prasara Bharathi Bhubaneswar. Successfully completed 10 batches and covered 286 participants. These trainings were intended to drive the strengthening of Nursing-Midwifery activities in the state.
- Provided Financial support of Rs :600/- to all nursing students undergoing training at Govt nursing institutions for attending virtual class as internet usage charges first time in the country.
- Dual role policy implemented in the nursing cadre to bridge the gap between nursing clinical and education sector in first time in the country with the support of MOH & Indian nursing council.
- 293 number of nursing officers are promoted to Deputy nursing superintendent in this year.
- The State Nodal Center at College of Nursing Berhampur is continuing with capacity building activities for the faculty of nursing institutions in Odisha. In the year 2020-21, SNC carried out 4 batches of 6 weeks pre-service education strengthening training planned and executed timely. The faculty from Govt. Nursing institutions till now 64 faculty members are successfully completed the training.
- The comprehensive skill labs at GNMTC Sundargarh & MCH Capital Hospital Bhubaneswar and have been made operational in virtual platform and 6 Days Daksh Training has been conducting at both the places via webinar series 40 batches are planned and 32 batches of training completed successfully 407 nursing personnel were trained this year.



- Infrastructure has been improved across nursing training institutions: as on March 2020, Skills lab is operational across 32 Govt. nursing institutions, additional and updated books for library provided to all institutions and computer labs established at all Govt. 21 ANMTCs & 8 GNMTCS & 03 College of nursing with the support of NHM/MOH
- Covid-19 management training conducted during March –December 2020 under Directorate of Nursing for ANMs/ Nursing officers/ Teaching faculties /Students with the support of different stake holders, Nursing training institutions/ International NGOs.



Sl. No	Name of the training	Number of batches	Number of nursing participants attended/ Beneficiaries
1	Hand on training on ICU management at SCB MCH CUTTACK	3	263
2	Active management of Covid -19 state level training	7	8500
3	Management of covid -19 activities at institution level	5	2800
4	Online training for ANM nursing students for Management of Noval Corona Covid -19	6	5300
5	Active Management of Covid -19 support of CON MKCG MCH (27 th -29 th April 2020) for faculty (Govt.& Pvt sector)	3	1200
6	Re orientation training on COVID -19 management with the support of AIIMS BBSR (16 th -22 nd June 2020) for Staff nurses working in ICU at DCH/DCH	5	6400
7	Re orientation training on COVID -19 management for staff nurses working in clinical sector working in ICU at DCH/DCHC	5	6500

- Three batches of national level E- workshops on emerging trends in nursing clinical services were conducted for the Principal, faculty members and clinical staff from 03 Public Nursing Institutions of Odisha. There were 1200 participants including state level officials who attended the E- workshop.



11 CHAPTER

Odisha State Medical Corporation

The “Odisha State Medical Corporation Ltd.” (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.), dtd. 26th June, 2013.

Odisha Medical Corporation Limited (OSMCL) is the Nodal Agency of the Department of Health & Family Welfare, Government of Odisha for procurement of (a) Drugs, Surgical & Medical Consumables, (b) Equipment, Instrument & Furniture (EIF) Service.

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 EDL items (Essential Drug List) & programme items comprising 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 finalised for availability of sufficient quantity of drugs and avoids stock out.



2. KHUSI 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 “KHUSI” will bring major breakthrough. The expansion of the Menstrual Hygiene Scheme “KHUSI” to cover all girl students of class 6th 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 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.

Basing upon the requirement given by the concerned Deptt. in the year 2019-20, 27,36,77,246 pieces of Sanitary Napkins were procured through OSMCL open tender and distributed to all the beneficiaries. For this scheme, a total expenditure amounting to Rs.70.31 Crores has already been made till 31.12.2020.

For the financial year 2020-21, tender has been finalised floated in GeM and work orders issued for procurements of 36,49,03,056 pieces of Sanitary Napkins. The suppliers will supply 9,12,25,764 pieces of Sanitary Napkins (per Quarter) on quarterly basis. 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.

3. EQUIPMENT DIVISION

- OSMCL is the central agency for procurement of Medical Equipments, Instruments & Furniture (EIF)s required across all the health facilities in Odisha .
- The division procures EIF as per indents approved by the State Equipment Management Committee (SEMC).

Achievements & new initiatives

Total Value of Procurement done towards EIFs for 2020 – 21 – Rs. 457.42 Crs. (Till Dec'2021)

Centralised Bio-medical Equipment Maintenance Programme.

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 has been rolled out across the state with effect 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. Agreement has been signed with the service provider, M/s Kirloskar Technologies Pvt. Ltd. on dtd. 29.12.2020.

PANDEMIC COVID-19

Odisha State Medical Corporation has procured all required Equipment, Instrument and furniture for establishment of dedicated COVID Hospitals and COVID Care centre across the state. OSMCL is also supplying all the required testing kits alongwith VTMs (Viral Transport Media) for carrying out uninterrupted testing during COVID-19 pandemic.

Further, a number. of BSL 2+ Laboratories (Biosafety Level 2 plus laboratory) have been set up at designated District Headquarter Hospitals for conducting the COVID -19 tests at the district level.

4. QUALITY ASSURANCE DIVISION

Various batches of Drugs and Surgical items received by Quality Assurance cell are being sent to 20 nos. of different empanelled approved NABL accredited laboratories for test and analysis through online mode and details of test reports received for the period from 1st April' 2020 to 31st December 2020 is mentioned below.

	No. of items	No. of batches
Received	370	5493
Sent for testing	367	5457
Report received	356	5200

N.B. : Following items have been sent offline for test and analysis

	No. of items	No. of batches
Sent for testing	<ol style="list-style-type: none"> 1. PPE Coverall 2. Sampurna Kit 3. Sanitary Napkin 4. Disposable Syringes 	206

5. IT Cell

e-Niramaya Software :

- Real time monitoring of all aspects of the scheme, to avoid dislocation in indenting, procurement, Quality assurance, payment & distribution: The “e-Niramaya” software 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 drugs distribution from Warehouse to Health facilities. The system would have robust disaster recovery link with State Data Center, OCAC.
- AAP i.e. Annual Demand for the current financial year 2020-21 has been obtained from the down below facilities like PHCs, UPHCs, CHCs, SDHs, DHHs, and consolidated at DWHs level via e-Niramaya software. This will help to generate demand pattern over a period of time.

- The online training on “e-Niramaya” software has been completed by OSMCL to all PHCs and PHCs (I/Cs). Training manual and concerned module process flow recording have also been provided to all the trainees.
- Regular online monitoring of DDC.

In view of the integration of e-Niramaya software with OeHMIS software and Central Dashboard of DVDMS.

(A) Drug Vaccine Distribution Management System (DVDMS):

DVDMS (Drugs and Vaccine Distribution Management System) is a software platform to automate various activities of Directorate General Medical Health, Govt. Of Odisha. It comprises of Drug and Vaccine Supply Chain Management that deals with Purchase Order, Inventory Management & Distribution of various drugs etc. Also it helps for managing receipt, Issue, Quality Control, vaccines and other health sector goods that are supplied to States under various disease control programmes. Odisha has 2nd position in the rank of central dashboard of DVDMS.

(B) Odisha e-Hospital Management Information System(OeHMIS):

Drug distribution at DDC level with respect to Prescriptions has been integrated with OeHMIS for issue of medicines to patients i.e. there is a bridge/interface in between e-Niramaya & OeHMS software. The development for integration of OeHMIS with e-Niramaya web-application has been completed & implemented in Capital Hospital SCB-MCH on pilot basis. This enables DDC counters to facilitate drug distribution (issue of medicines) as well as clinical records of patients as per the prescription prescribed by the doctors of the concerned hospitals.

(C) KHUSI software :

The “KHUSI” Web based software was inaugurated on 29.12.2020 in order to manage the storage, free distribution and supply chain of Sanitary Napkins to girl students under Govt. of Odisha flagship programme “KHUSI”. The system would have robust disaster recovery link with National Data Center, NIC.

(D) OSWAS software:

In line with 5T initiative, Odisha State Medical Corporation updated with “OSWAS” office automation software. It is a cloud ready with web responsive design recovery link with OCAC, State Data Center and National Data Center. It would have features like 24×7 secure accesses, notification and real time executive dash board. The software has principal applications like correspondence management, file management, file processing, record room, internal messaging, dash board, leave management, MIS reports.



Directorate of Drugs Control

ACHIEVEMENT

1. Online - License Management System has been made functional in order to provide services to the citizens in a transparent manner for issuance of Drug Licences in a time bound manner. Similarly Pharmacist Information Management System has also been developed for Registration & Renewal of Registration Certificates of Pharmacists & in this system dual engagement of pharmacists can be checked.
2. To ensure quality testing of drugs a new Drug Testing Laboratory at Sambalpur is being setup. This will facilitate testing of more samples 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. 1161 Lakhs have already been transferred to Executive Engineer, Sambalpur, Division-II, Sambalpur for construction of laboratory.
 - Permanent office buildings have been constructed at 18 places and construction is under progress at 04 more places.
 - To ensure quality testing of Cosmetics, a Central Drug Testing & Cosmetic Testing Laboratory at Gothapatna, Bhubaneswar under Centrally Sponsored Plan Scheme is being constructed and the same is nearing completions for which land has been provided by the State Govt.
 - A society has been registered named as Price Monitoring Resource Unit (PMRU) 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. Reports are being sent to NPPA on activity of the cell regularly.

ENFORCEMENT ACHIEVEMENT

- i. All Drug Inspectors have been notified to exercise power under the Drugs (Price Control) order 2013. Accordingly, 193 numbers of drug price cases 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 Inspectors of the state have been notified as Medical Device Officers 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 Centre Licences have been updated till now.
- Renewal application for 09 (nine) Nos. of Blood Centres have been recommended to Drugs Controller General (India)
- Inspection of remaining Blood Bank have been completed and their renewal are under process.
- Manufacturing of Convalescent Plasma at (8) Eight Blood Centres in the state from single donor has been facilitated to make it available for treatment of Covid positive patients.

Blood Storage Unit

- 12 (Twelve) Blood Storage Unit have updated their licences.
- 63 (Sixty three) Nos. of Blood Storage Unit are now under process for renewal.
- 7263 Nos. of Inspections and 428 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 the basis of inspection and raid reports, Show Cause Notices have been issued to the different erring firms for violation of D & C Rules' 1945 and the Drug licences have been suspended for non-compliance of conditions of licences.
- During the raid, 16 nos. of seizures have been made for violation of D & C Act & Rules thereunder and 63 Nos. of Prosecution have been lodged against the offenders in the different Court of law after investigation of previous year and current year for non-compliance of conditions of licences.
- 2258 Nos. of sample have been drawn for Test and Analysis to ascertain the quality of drug.
- The SDT & RL (O), Bhubaneswar have Tested 3707 Nos. of samples, out of which 3654 Nos. of samples have been declared as Standard Quality and 53 Nos. of samples have been declared as "Not of Standard Quality". The SDT & RL (O), Bhubaneswar have also Tested 2007 Nos. of Excise samples.

13 CHAPTER

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 52,235 clients have been detected HIV positive in different Integrated Counseling & Testing centers (ICTC) as on November, 2020. Out of these detected cases 32,395 are male and 19,840 are female. The reported number of deaths is 9021.

Out of the total detections 76% 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 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 Centers 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, JajpurKeonjhar 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 OpidSubstiutional Therapy (OST) centers have been opened in Puri, Cuttack, Sambalpur 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 2019 to Mar 2020:

1. 99% of ANC clients as per NACO target are screened for HIV i.e 6.9 lakhs pregnant women counseled&tested after consent and 225 were found HIV positive, received post ANC care as per the guideline.
2. 125% of general client are tested for HIV as per the annual target, i.e.7.2 lakhs of general clients were undergone counseling & testing; 2922 were found positive.
3. Out of 30 districts, VHND is saturated in 6 districts named as Kandhamal, Nawarangpur, Ganjam, Bolangir, Gajapati& Malkangiri and in 17 districts implemented in pilot basis.
4. Test & Treat policy was introduced in the state, 96% detected positives are registered in Anti Retroviral Therapy (ART) care, receiving free treatment.
5. 3.94 lakhs of blood units was collected in the blood banks of Odisha and 78% were voluntary collection in comparison to 74% in the year 2019.
6. 48 NGOs are working in the state covering High Risk Group population through their Targeted Intervention Projects. Total population covered 10060 FSW, 4300 MSM, 2250 IDU, 10000 truckers, 92000 destination migrants were covered during the year.
7. The HIV intervention in 22 Prison implemented in by OSACS with the permission from Home Dept., Govt. of Odisha, Screening 15938 inmates and detected 57 positives.
8. 21 Employer Led Model partners have carried out different activities for prevention of HIV/AIDS to ensure a health & productive workforce in their industries.
9. 2.24 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. For visual impaired people for the first time in India HIV IEC books prepared in Braille script and developed video on Sign language for Deaf & Dum.
2. Implementation HIV ACT in the state.
3. Two day long HIV screening and awareness camp was organized at Paradip port, where 1153 port workers know their HIV status.
4. HIV/AIDS awareness program telecasted through Doordarshan Kendra & private TV and awareness message broadcasted through All India Radio and FM broadcasters.
5. Hoarding installed in different health facilities and during Car festival, Puri hoardings on HIV/AIDS awareness erected in different crowded areas. Stall was inaugurated in Pallshree mela to spread the HIV message. City bus was branded with Message of HIV services
6. Stalls for HIV message with screening facility opened in different state & district level exhibitions like Adivasi Mela, Pustak Mela etc.
7. Sand Art devised to spread awareness in urban community on HIV.
8. HIV services message tableaux was participated in state level republic day parade.
9. Awareness message published through print media during different events in form of advertisements.
10. Cultural programs were undergone through Song and Drama division by different folk forms of rural Odisha.
11. Branding of HIV/AIDS message in OSRTC bus tickets to spread awareness.
12. 11 lakh awareness messages were sent to BSNL consumers.
13. World AIDS Day, National Youth day and International youth day observed in State level as well as in the 30 districts every year.
14. To spread awareness through youth 640 red ribbon clubs are functioning in the state in different colleges, they undertook different drives in their locations.



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.

14

CHAPTER

Acharya Harihara Regional Cancer Centre (AHRCC)

- Acharya Harihar Regional Cancer Centre has been renamed as “Acharya Harihar Post Graduate Institute of Cancer”, (AHPGIC).
- 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.
- AHPGIC expansion plan included in SCB MCH, Cuttack redevelopment plan.
- M.Ch degree in Surgical Oncology & Gyn Oncology has been recognised by the competent authority.
- An one-year OT Technician course started from this year. 4 students have been enrolled.
- Utkal University has given consent for affiliation for starting of one-year Diploma course in Medical Physics at AHPGIC.
- Construction over LINAC is in progress. The MRI & CT Scan machine are under process of installation.
- During sudden upsurge of corona positive cases Telemedicine and tele-consultations and districts cancer care programme were actively promoted.

Sl No	Particulars	Year 2020
1.	Total No. of OPD Registrations:	50,602
2.	Total No. of Admission:	12,627
3.	Total No. of Pathological Investigation:	2,21,244
4.	Total No. of Radiological Investigation:	5,886
5.	Total No. of OT Procedure:	1,200
6.	Total No. of Chemotherapy Cycles:	13,486
7.	Total No. of Radiotherapy Treatments:	3410
8	Total COVID 19 Test (RAT) :	13,562

15 CHAPTER

Strengthening of Blood Services

- Director Blood Safety Supports 55 Govt Blood Banks, one Central Red Cross Blood Bank, 29 Pvt blood Banks and 43 no of functional Blood storage units in the state of Odisha.
- In addition to the Functioning 7 Nos of Govt. Blood Component Separation Units, Steps have been taken for operationalization of 7 Nos of Blood Component Separation Units at DHH Bolangir, DHH Baripada, SLNMCH Koraput, DHH Balasore, DHH Bargarh, DHH Keonjhar and RGH Rourkela etc. All the above new BCSUs will be operational soon after the issue of License from DCGI.
- Achievement of Blood Donation Movement:**

Total Blood Collection from different sources for the year 2020 is given below;

Total Blood collection in Units	Blood Collection from Voluntary sources in units	Blood Collection from Exchange sources in units	Voluntary percentage	Number of Voluntary Blood Donation camps	Blood Collection from Camp
421662	280399	141263	66	3804	214188

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

In addition to the 6 Nos of Govt Blood Banks, budget have been proposed for extension to 7 Nos of Govt Blood Banks at DHH Balasore, DHH Baripada, DHH Bolangir, SLNMCH Koraput along with linked Blood Bank at SDH Jeypore, DHH Bargarh and DHH Jharsuguda to EFC. The approval of the budget by EFC is under Process.

Sl. No	Financial Year 2020-21	Total Blood Tested in NAT technology	NAT Yield (Positive)
1	Apr-2020 to December-2020	73151	228

- e-blood banking** is operational in 69 Blood Banks (52 Govt, 1 Red Cross Blood Banks and 16 Private Blood Banks) in the State. NHM has supported for positioning of 71 HR at all Govt. Blood Banks through an outsourcing agency.
- Sickle Cell Project in Odisha:**

Sickle cell project is being implemented at 12 Districts i.e., Angul, Bolangir, Sambalpur, Bargarh, Sonapur, Nuapada, Kalahandi, Kandhamal, Sundargarh, Jharsuguda, Deogarh and Boudh for control of sickle and Thalassemia disorder under supervision of VIMSAR burla as the Nodal center under NHM Budget. Each year the school camps are being organized for screening to identify the carriers of Sickle cell trait, β Thalassemia, Haemoglobin variants at school especially class 8 students and above. This year due to COVID pandemic it was not possible in the 642 residential schools till date.



- **NHM assisted Govt Schemes:**

Govt. is providing free blood (service charges exempted) to all categories patients getting treated at Govt. facilities w.e.f. 1st Feb-2019. NHM is providing Rs. 400 per unit blood issued to all the patients treated at Govt. facilities and approximately 417470 units of free blood was issued during this year.

- **Transport cost assistance for blood disorder patients:**

There is provision from state budget for transport cost assistance @ 500/- per person /per month to the blood disorder patients i.e. Sickle Cell Major, Thalassemia Major and Hemophilia requiring medical attention w.e.f 1st March 2018 from state budget. Till now 17876 patients have been registered and consequently benefitted from the scheme.

- **Mobile Blood Collection Vans:**

Last year Mobile Blood Collection vans were operationalized at 9 major blood banks situated at SCB MCH, Cuttack, MKCG MCH, Berhampur, VIMSAR, Burla, DHH Koraput, DHH Bolangir, DHH Balasore, DHH Baripada, DHH Bargarh and RGH, Rourkela etc. The HR and recurrent costs are borne from NHM budget. Total Voluntary Blood Collected through the Nine number of Mobile Blood Collection Vans is 44578 units.



- **Procurement and supply of Equipments to the Blood Banks/BSUs/BCSUs:**

Tender for the procurement of cold box 358 Nos, Blood Bank Refrigerator 41 Nos, Binocular Microscope 43 Nos, Portable Tube Sealer 17 Nos, Horizontal Cylindrical Autoclave of Minimum 180 ltr capacity Steps 35 Nos, 8 channel Multichannel Micropipette 92 Nos, Deep Freezer Small 70 ltr capacity 55 Nos, 110 Nos of tube stripper is under process for 55 Nos of Govt Blood Banks. The Annual Maintenance Contract, Comprehensive Maintenance Contract and calibration is being made centrally by an agency named Kirloskar through OSMCL.

- **Training of Man power at BSU and Odisha Sickle Cell Project:**

Capacity building of one batch of Medical Officers and Lab Technicians at BSU was completed and two batches of refresher training of Programme Associates and LT and 5 Nos of CMEs under Odisha Sickle Cell project have already been completed this year. The induction training of programme associates and lab technicians will be completed soon after the fulfilment of vacant posts.

- **IEC and BCC Activities:**

All the Mass Media Activities and the Mid Media Activities proposed in the last year PIP 2020-21 have been achieved physically.

- **Central Procurement of Blood Bags, kits and reagents:**

Last year central procurement of Blood Bags, kits and reagents was made and supplied to all Govt. Blood Banks. Procurement of leucofilters for thalassemia patients is under process.

Special Programme Under Blood Cell (Control of Sickle Cell and Thalassemia Programme)

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 6 Districts Odisha i.e. Balasore, Koraput, Sambalpur, Cuttack, Bargarh and Jharsuguda etc. on Pilot basis and later it will be expanded to all 30 Districts.

16

CHAPTER

Health Assurance Schemes

16.1 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 15th August 2018. It has two components.

1. 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 179 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. 10 lakhs 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.

2. 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.		
Total		89,98,900	69,69,672

3. **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 31.12.2020.

Sl. No.	Biju Swasthya Kalyan Yojana	Nos of claim raised	Amount of Claim raised
1	Component-I (In Govt. Hospitals)	134481651	
2	Component-II (In Private hospitals)	3,01,363	Rs. 290,72,26,126

4. **Grievance Redressal:** Helpline Number for BSKY: 104 (24 x 7).

16.2 Odisha State Treatment Fund (OSTF)

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, 05 hospitals in Vishakhapatnam & Vijaynagaram, Andhra Pradesh, 03 hospitals in Raipur, Chhattisgarh and 6 hospitals in Surat, Gujarat both at tertiary and multispecialty level. From 01.08.2020, financial assistance (through cashless treatment) has been ceased to exist in 13 empanelled private hospitals inside the State only. However, through BSKY beneficiaries can avail cashless treatment in the empanelled private hospitals inside the State.

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 2020-21 (as on December 31st 2020) 2780 no's of beneficiaries have availed free treatment in empanelled Private hospitals under OSTF amount to Rs. 43.88 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 31.12.2020, 4 patients have received free treatment in hospitals of National repute outside the State.

17 CHAPTER

Directorate of Health Intelligence & Vital Statistics

Directorate of Health Intelligence and Vital Statistics has been established as a separate directorate since 2017 as per the orders of Honorable Supreme court of India. This has been entrusted with the responsibility of ensuring the registration of birth, death, still birth in urban and rural areas of Odisha; health intelligence management of whole state by way of collecting all health related data from all medical sources, compiling the same, analysis and forwarding to CBHI(Central Bureau of Health Intelligence). This is of utmost importance for public health managers, policy makers, planners and administrators as it provides the essential data regarding the number of births, number of deaths, mortality and morbidity pattern in a particular geographical area.

The birth and death registration work is done through a network of 314 rural registration units and 114 urban registration units in Odisha. The online app of birthdeath.odisha.gov.in is used by the registrars to register the births and deaths. The Chief District Medical & Public Health Officers are the District Registrars, Birth & Death and the District Public Health Officers are the additional district registrar, birth and death for the district. The Block Public Health officers are the registrars of the block level registration units. The executive officer in the NAC, the health officer in the municipality and the city health officers in the municipal corporations are the registrars of the respective urban areas.

Highlights of the year 2020-2021

- The appointment of 106 Vital Statistics Clerks which was lying vacant since the last 4 years has been completed and they are going to join the different registration units located across the state.
- Keeping in view the work load on the single registration unit in Bhubaneswar, 2 more registration units have been newly established for Bhubaneswar Municipal Corporation. One RU at AIIMS, Bhubaneswar and the other at Capital hospital, Bhubaneswar.
- In order to validate the data regarding the birth and death registration, the district level and state level data validation Committees have been reconstituted with an order from the government in this regard.
- Interdepartmental Co-ordination Committee (IDCC) is the platform for discussing the issues related to birth and death registration and the support required from other line departments for strengthening the civil registration system. The annual meeting of IDCC has been conducted on 12.1.2021 under the chairmanship of the Additional Chief Secretary to Government.
- Departmental Co-ordination Committee(DCC) is there to discuss the issues and problems related to Health Intelligence, among the different directorates of health .The meeting of the DCC was convened under the chairmanship of the special secretary to Government (PH) on 17.11.2020 and important issues related to data management of different National Health programmes was discussed.
- A new online app with the domain name birthdeath.odisha.gov.in was introduced by the government from 1.1.2021 for the registration of birth and death. All the rural and urban registration units of Odisha are using this app to register birth and death. This has enabled the easy access of the services of birth

and death registration and receipt of certificate to the citizens from the comfort of their home. These certificates are now digitally signed certificates replacing the manually signed ones earlier in use in rural areas.

- All the Vital Statistics clerks, the Block Public Health officers, the District Public Health officers, the Chief District Medical & Public Health officers were trained by OCAC & TCS on the use of the new online app in batches.
- The annual review meeting of the Registrar General & Census Commissioner of India (RGCCI) was conducted on 28.8.2020. The Chief Registrar, Birth & Death, Odisha presented the status report of Odisha and suggested the required modifications to be made to the existing RBD act, 1969.
- IEC materials in the form of Posters and leaflets on the issue of “Birth & Death Registration” were distributed to all the districts of the state. This will help in generating awareness among the people regarding the importance of birth and death registration.

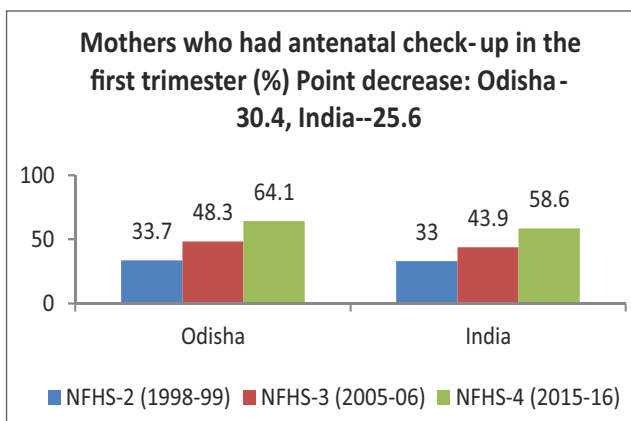
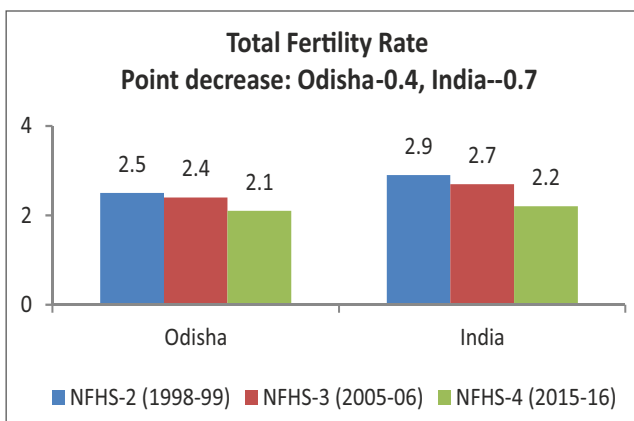
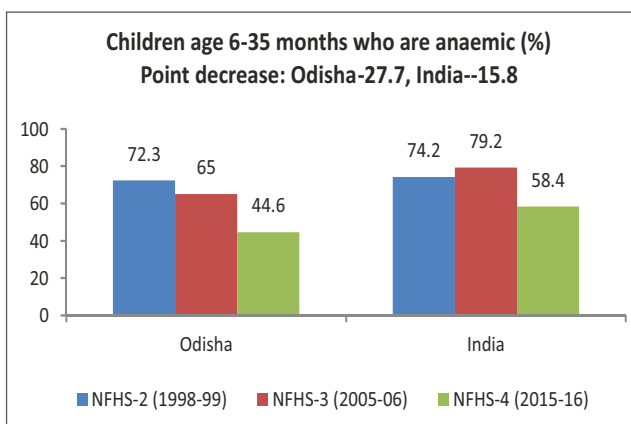
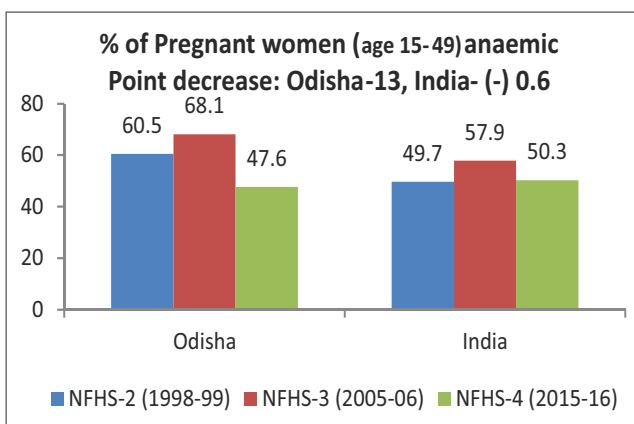
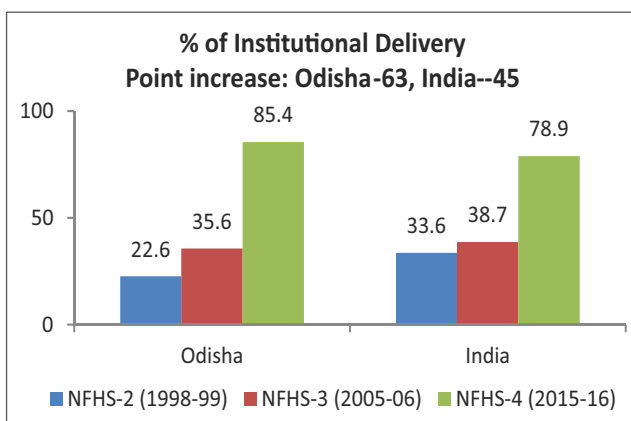
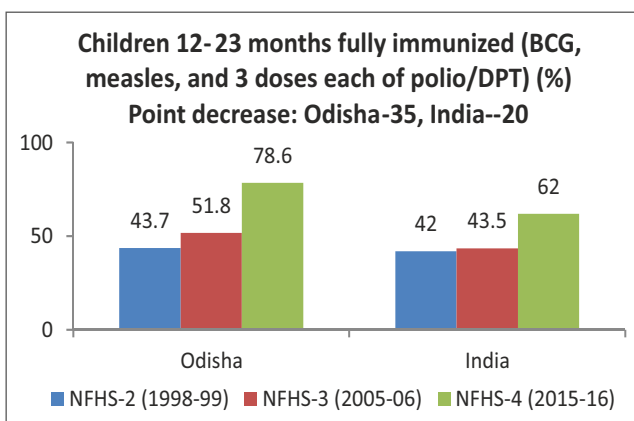
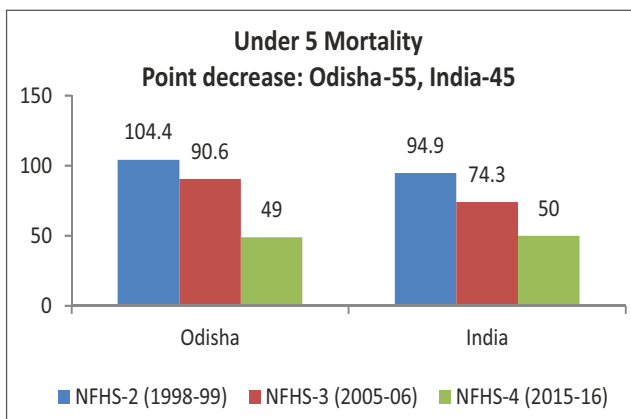
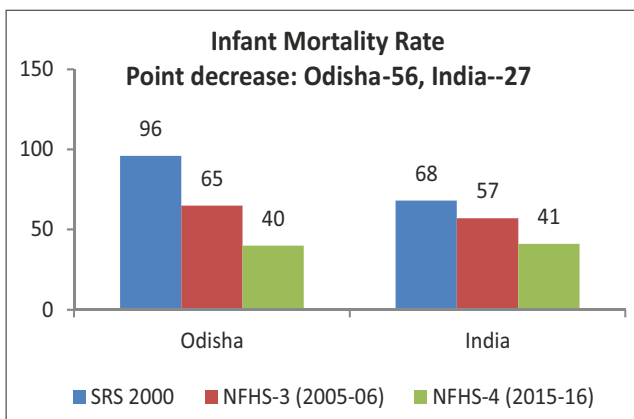


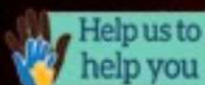
Annual Review meeting of RGI in virtual mode



Training on the new online app underway

Trend of Key Indicators: Odisha vs.India (Source: NFHS Survey Report)





NOVEL CORONAVIRUS (COVID-19)



Protect yourself and others!

Follow these Do's and Don'ts

Do's ✓



Practise frequent hand washing. Wash hands with soap and water or use alcohol based hand rub. Wash hands even if they are visibly clean



Cover your nose and mouth with handkerchief/tissue paper while sneezing and coughing



Throw used tissue papers into closed bins immediately after use



Consult a doctor if you feel unwell (fever, difficult breathing and cough). While visiting doctor wear a mask/cloth to cover your mouth and nose



If you have these signs/symptoms please contact with nearest Govt. Health Facility



Avoid participating in large gatherings



Have a close contact with anyone, if you're experiencing cough and fever



Touch your eyes, nose and mouth



Spit in public

Don'ts ✗

Together we can fight Coronavirus

For further information :

Contact : Health & Family Welfare Department, Odisha control room number

Tel: 0674 2390466 or Mob: 9439994857 / 9439994859

Email : ssuodisha@gmail.com

Health & Family Welfare Department, Govt. of Odisha



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