



# NHM PIP

## 2024-26

Programme Implementation Plan

# Capital Hospital & PGIMER Bhubaneswar

Mission Directorate  
National Health Mission  
Department of Health & Family Welfare  
Govt. of Odisha





Mission Directorate  
National Health Mission, Odisha  
Department of Health & Family Welfare,  
Government of Odisha

Letter No: OSH&FWS/ 3585 /2024

Date: 15/03/2024

From

Dr. Brundha D, IAS  
Mission Director, NHM, Odisha

To

All Directors, Health & FW Department, Govt. of Odisha  
The Director, Capital Hospital/ RGH, Rourkela/ AHRCC, Cuttack  
All Superintendents, Govt. Medical College & Hospitals, Odisha  
The Superintendent, SVPPGIP, Cuttack & MHI, Cuttack  
All CDM& PHOs –cum– District Mission Directors  
All ADUPHOs (Municipal Corporation Cities)

Sub: Approval of NHM District / City Program Implementation Plan (PIP) for the Financial Year (FY) 2024-25 & FY 2025-26 – Reg.

Madam / Sir,

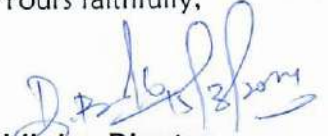
The Program Implementation Plan (PIP) for the FY 2024-25 & FY 2025-26 has been approved by Government of India. The approval includes workplan and budget for two years and brief description on implementation modalities of each activity. The abstract of District/ City wise approved NHM PIP Budget 2024-26 is attached herewith at Annexure-1 for information & necessary action.

It is evident that a rigorous monitoring system with mechanisms to handhold the peripheral health functionaries & Programme Officers would go a long way in improving the quality of health delivery system. The approved activities shall be implemented, strictly following the Terms & Conditions detailed out at Annexure-2.

I look forward to work with you all and achieve the set targets under Key Deliverables (Annexure-3) and Key conditionalities (Annexure-4) set by Gol for our State within the given timeframe.

Enclosure: Soft Copy of District / City / Other Agency wise PIP for FY 2024-26 to be shared via email.


Yours faithfully,

  
Mission Director,  
NHM, Odisha.

Memo No. 3586

Date: 15/03/2024

Copy submitted to the Commissioner –cum– Secretary to Govt., Health & FW Department, Odisha for favour of kind information.

  
Mission Director,  
NHM, Odisha



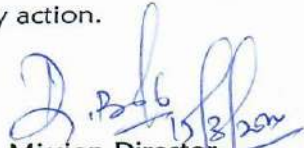


Mission Directorate  
National Health Mission, Odisha  
Department of Health & Family Welfare,  
Government of Odisha

Memo No. 3587

Date. 15/03/24

Copy forwarded to AMD, NHM, Odisha for information and necessary action.

  
Mission Director,  
NHM, Odisha

Memo No. 3588

Date. 15/03/24

Copy forwarded to all Collectors & District Magistrates, Odisha for information & necessary action.

  
Mission Director,  
NHM, Odisha

Memo No. 3589

Date. 15/03/24

Copy forwarded to all Programme Officers and Consultants of Directorates / Officials & Consultants of SPMU for information and necessary action.

  
Mission Director,  
NHM, Odisha

Memo No. 3590

Date. 15/03/24

Copy forwarded to State Representatives of all Development Partners for information and necessary action.

  
Mission Director,  
NHM, Odisha

Memo No. 3591

Date. 15/03/24

Copy forwarded to all DPMs for information and necessary action.

  
Mission Director,  
NHM, Odisha

Memo No. 3592

Date. 15/03/24

Copy forwarded to all CPMs for information and necessary action.

  
Mission Director,  
NHM, Odisha

## Abstract Budget for FY 2024-25 and FY 2025-26

Pool	FMR	Component	Capital Hospital, BBSR		
			FY 2024-25	FY 2025-26	Grand Total 2024-26 (Rs. In Lakhs)
RCH Flexible Pool	RCH.1	Maternal Health	46.18	46.18	92.36
	RCH.2	PC & PNDT Act	0.00	0.00	0.00
	RCH.3	Child Health	14.08	14.11	28.20
	RCH.4	Immunization	6.22	5.92	12.15
	RCH.5	Adolescent Health	0.12	0.12	0.24
	RCH.6	Family Planning	4.13	3.80	7.93
	RCH.7	Nutrition	14.92	13.06	27.97
	RCH.8	National Iodine Deficiency Disorders Control Programme (NIDDCP)	0.00	0.00	0.00
	<b>RCH Sub Total (Rs. In Lakhs)</b>			<b>85.65</b>	<b>83.19</b>
NDCP Flexi Pool	NDCP.1	Integrated Disease Surveillance Programme (IDSP)	4.10	4.13	8.23
	NDCP.2	National Vector Borne Disease Control Programme (NVBDCP)	0.00	0.00	0.00
	NDCP.3	National Leprosy Eradication Programme (NLEP)	7.71	7.41	15.11
	NDCP.4	National Tuberculosis Elimination Programme (NTEP)	201.54	204.18	405.72
	NDCP.5	National Viral Hepatitis Control Programme (NVHCP)	1.52	2.30	3.82
	NDCP.6	National Rabies Control Programme (NRCP)	0.74	0.04	0.79
	NDCP.7	Programme for Prevention and Control of Leptospirosis (PPCL)	0.00	0.00	0.00
	NDCP.8	State specific Initiatives and Innovations	0.00	0.00	0.00
	<b>NDCP Sub Total (Rs. In Lakhs)</b>			<b>215.61</b>	<b>218.05</b>
NCD Flexi Pool	NCD.1	National Program for Control of Blindness and Vision Impairment (NPCB+VI)	0.00	0.00	0.00
	NCD.2	National Mental Health Program (NMHP)	7.63	6.35	13.98
	NCD.3	National Programme for Health Care for the Elderly (NPHCE)	5.10	5.10	10.20
	NCD.4	National Tobacco Control Programme (NTCP)	1.90	1.92	3.82
	NCD.5	National Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS)	38.54	37.54	76.08
	NCD.6	Pradhan Mantri National Dialysis Programme (PMNDP)	125.59	129.35	254.94
	NCD.7	National Program for Climate Change and Human Health (NPCCHH)	1.00	13.00	14.00
	NCD.8	National Oral health programme (NOHP)	1.50	1.50	3.00
	NCD.9	National Programme on palliative care (NPPC)	0.00	0.00	0.00
	NCD.10	National Programme for Prevention and Control of Fluorosis (NPPCF)		0.00	0.00
	NCD.11	National Programme for Prevention and Control of Deafness (NPPCD)	0.00	0.00	0.00
	NCD.12	National programme for Prevention and Management of Burn & Injuries			0.00
	NCD.13	State specific Programme Interventions			0.00
	<b>NCD Sub Total (Rs. In Lakhs)</b>			<b>181.25</b>	<b>194.76</b>

*J. B. Singh*  
15/12/2024

Pool	FMR	Component	Capital Hospital, BBSR		
			FY 2024-25	FY 2025-26	Grand Total 2024-26 (Rs. In Lakhs)
Health System Strengthening (HSS) - Urban		NHUM (Rs. In Lakhs)			0.00
Health System Strengthening (HSS) Rural	HSS.1	Comprehensive Primary Healthcare (CPHC)	15.96	15.96	31.93
	HSS.2	Blood Services & Disorders	102.11	131.02	233.13
	HSS.3	Community Engagement	0.00	0.00	0.00
	HSS.4	Public Health Institutions as per IPHS norms	0.00	0.00	0.00
	HSS.5	Referral Transport	0.00	0.00	0.00
	HSS.6	Quality Assurance	79.13	78.23	157.36
	HSS.7	Other Initiatives to improve access	281.25	323.42	604.67
	HSS.8	Inventory Management	0.00	0.00	0.00
	HSS.9	HRH	361.77	383.60	745.37
	HSS.10	Enhancing HR	21.16	16.16	37.32
	HSS.11	Technical Assistance	15.50	15.50	31.01
	HSS.12	IT interventions and Systems	0.03	0.03	0.05
	HSS.13	Innovation	0.00	0.00	0.00
	HSS.14	Untied Grants	5.00	5.00	10.00
	HSS.15	Prevention Control and Management of Snakebites (PCMS)	0.00	0.00	0.00
<b>HSS Sub Total (Rs. In Lakhs)</b>			<b>881.91</b>	<b>968.92</b>	<b>1850.83</b>
<b>GRAND TOTAL 2024-25 (Rs. In Lakhs)</b>			<b>1364.42</b>	<b>1464.93</b>	<b>2829.35</b>

*J. B. S.*  
15/12/2024

## Abstract Budget for FY 2024-25 and FY 2025-26

Pool	FMR	Component	PGIMER, Bhubaneswar		
			FY 2024-25	FY 2025-26	Grand Total 2024-26 (Rs. In Lakhs)
RCH Flexible Pool	RCH.1	Maternal Health	0.00	0.00	0.00
	RCH.2	PC & PNDT Act	0.00	0.00	0.00
	RCH.3	Child Health	0.00	0.00	0.00
	RCH.4	Immunization	0.00	0.00	0.00
	RCH.5	Adolescent Health	0.00	0.00	0.00
	RCH.6	Family Planning	0.00	0.00	0.00
	RCH.7	Nutrition	0.00	0.00	0.00
	RCH.8	National Iodine Deficiency Disorders Control Programme (NIDDCP)	0.00	0.00	0.00
	<b>RCH Sub Total (Rs. In Lakhs)</b>			<b>0.00</b>	<b>0.00</b>
NDCP Flexi Pool	NDCP.1	Integrated Disease Surveillance Programme (IDSP)	0.00	0.00	0.00
	NDCP.2	National Vector Borne Disease Control Programme (NVBDCP)	0.00	0.00	0.00
	NDCP.3	National Leprosy Eradication Programme (NLEP)	0.00	0.00	0.00
	NDCP.4	National Tuberculosis Elimination Programme (NTEP)	0.00	0.00	0.00
	NDCP.5	National Viral Hepatitis Control Programme (NVHCP)	0.00	0.00	0.00
	NDCP.6	National Rabies Control Programme (NRCP)	0.00	0.00	0.00
	NDCP.7	Programme for Prevention and Control of Leptospirosis (PPCL)	0.00	0.00	0.00
	NDCP.8	State specific Initiatives and Innovations	0.00	0.00	0.00
	<b>NDCP Sub Total (Rs. In Lakhs)</b>			<b>0.00</b>	<b>0.00</b>
NCD Flexi Pool	NCD.1	National Program for Control of Blindness and Vision Impairment (NPCB+VI)	0.00	0.00	0.00
	NCD.2	National Mental Health Program (NMHP)	0.00	0.00	0.00
	NCD.3	National Programme for Health Care for the Elderly (NPHCE)	0.00	0.00	0.00
	NCD.4	National Tobacco Control Programme (NTCP)	0.00	0.00	0.00
	NCD.5	National Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS)	0.60	0.30	0.90
	NCD.6	Pradhan Mantri National Dialysis Programme (PMNDP)	0.00	0.00	0.00
	NCD.7	National Program for Climate Change and Human Health (NPCCHH)	0.00	0.00	0.00
	NCD.8	National Oral health programme (NOHP)	0.00	0.00	0.00
	NCD.9	National Programme on palliative care (NPPC)	0.00	0.00	0.00
	NCD.10	National Programme for Prevention and Control of Fluorosis (NPPCF)		0.00	0.00
	NCD.11	National Programme for Prevention and Control of Deafness (NPPCD)	0.00	0.00	0.00
	NCD.12	National programme for Prevention and Management of Burn & Injuries	0.00	0.00	0.00
	NCD.13	State specific Programme Interventions	0.00	0.00	0.00
<b>NCD Sub Total (Rs. In Lakhs)</b>			<b>0.60</b>	<b>0.30</b>	<b>0.90</b>

*[Handwritten Signature]*  
15/12/2023

Pool	FMR	Component	PGIMER, Bhubaneswar		
			FY 2024-25	FY 2025-26	Grand Total 2024-26 (Rs. In Lakhs)
Health System Strengthening (HSS) - Urban		NHUM (Rs. In Lakhs)	0.00	0.00	0.00
Health System Strengthenin g (HSS) Rural	HSS.1	Comprehensive Primary Healthcare (CPHC)	23.76	23.76	47.53
	HSS.2	Blood Services & Disorders	0.00	0.00	0.00
	HSS.3	Community Engagement	0.00	0.00	0.00
	HSS.4	Public Health Institutions as per IPHS norms	0.00	0.00	0.00
	HSS.5	Referral Transport	0.00	0.00	0.00
	HSS.6	Quality Assurance	0.00	0.00	0.00
	HSS.7	Other Initiatives to improve access	0.00	0.00	0.00
	HSS.8	Inventory Management	0.00	0.00	0.00
	HSS.9	HRH	0.00	2.12	2.12
	HSS.10	Enhancing HR	0.00	0.00	0.00
	HSS.11	Technical Assistance	0.00	0.00	0.00
	HSS.12	IT interventions and Systems	0.00	0.00	0.00
	HSS.13	Innovation	0.00	0.00	0.00
	HSS.14	Untied Grants	0.00	0.00	0.00
	HSS.15	Prevention Control and Management of Snakebites (PCMS)	0.00	0.00	0.00
<b>HSS Sub Total (Rs. In Lakhs)</b>			<b>23.76</b>	<b>25.89</b>	<b>49.65</b>
<b>GRAND TOTAL 2024-25 (Rs. In Lakhs)</b>			<b>24.36</b>	<b>26.19</b>	<b>50.55</b>

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**Mission Directorate**  
National Health Mission, Odisha  
Department of Health & Family Welfare,  
Government of Odisha

Annexure – 2

**NHM PIP 2024-26: Terms & Conditions**

• **Financial Modalities:**

- All unspent balance available under NHM with the State as on 1st April 2024, has become a part of the Resource Envelope of FY 2024-25. Similarly, all the unspent balance available as on 1st April 2025, would become a part of the Resource Envelope for FY 2025-26. If required, a mid-term review at the end of FY 2024-25 would be carried out, either at the request of the Ministry or the State/ District concerned, to provide course correction in case of shifting of priorities.
- The State/ Districts must ensure that there is no duplication or overlap between various sources of funds including the recently approved FC-XV Health Grants support and PM-ABHIM for the similar activities.
- Any reallocation to be conducted by State is to be approved by the Executive Committee and the Governing body of the State Health Society. Maximum budget available for States to reallocate fund is 10% of the total approved budget for that program/activity. **Districts are not allowed to undertake any reallocation of NHM funds.** State must intimate FMG, MoHFW regarding reallocation of fund on quarterly basis along with the 'Financial Management Reports' in the following format:

FMR	Budget Head	Total amount approved in FY 2024-25/ 2025-26	Fund allocated from Budget Head/ FMR	Fund allocated to Budget Head/ FMR	Quantity & unit cost approved in PIP for undertaking the activity	Number of quantities increased	Remarks

- **JSSK, JSY, NPY and other entitlement scheme**
  - The State/ Districts must provide all the entitlement schemes mandatorily. No beneficiary should be denied any entitlement because of any limitations of approved amount for such entitled bases schemes. Wherever required, the State must suitably increase the provision in such FMR. The ceiling of 10% shall not be applicable in such cases.
  - The State/ Districts to ensure that JSY and NPY payments are made through Direct Benefit Transfer (DBT) mechanism through 'Aadhaar' enabled payment system or through NEFT under Core Banking Solution.
- The State / Districts must ensure due diligence in expenditure and observe, in letter and spirit, all rules, regulations, and procedures to maintain financial discipline and integrity particularly with regard to procurement; competitive bidding must be ensured, and only need-based procurement should take place as per ROP approvals.
- The unit cost/ rate wherever approved for all activities including procurement, printing, etc. are only indicative for the purpose of estimation. However, actuals are subject to transparent and open bidding process as per the relevant and extant purchase rules and up to the limit of unit cost approved.
- As per the Mission Steering Group (MSG) meeting decision, only up to 9% of the total Annual State Work Plan for that year could be budgeted for program management and M&E. The States/ Districts will have to ensure that overall

*J. B. Singh*  
15/3/2024





**Mission Directorate**  
National Health Mission, Odisha  
Department of Health & Family Welfare,  
Government of Odisha

- expenditure under programme management and M&E do not exceed the limit of 9% as mandated by MSG.
- The accounts of State/ Districts / Grantee institution/ Organization shall be open to inspection by the sanctioning authority and audit by the Comptroller & Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare.
  - **Conditionalities for Fund release:**
    - **Release of First tranche of funds:**
      - State/ Districts should not have more than 25% of the total release (Central+State Share) as unspent amount.
      - State/ Districts should have completed all the tasks related to SNA and implementing Agencies mapping.
      - State/ Districts should have deposited all the previous central share and corresponding State share in the SNA
      - Interest earned on NRHM and NUHM for central share must be remitted to the consolidated funds of India.
    - **Release of Subsequent tranche of funds:**
      - State must have spent at least 75% of the total release (Central +State Share).
      - State should have deposited all the previous central share and corresponding State share in the SNA
      - Interest earned on NRHM and NUHM for central share in previous quarters have been remitted to the consolidated funds of India.
      - Statutory audit report needs to be submitted by the states/UTs for release beyond 75% of central allocation
  - **Human Resource (HR):**
    - NHM aims to strengthen health systems by supplementing and hence it should **not be used to substitute regular HRH.**
    - The remuneration proposed in the PIP is indicative and given for the purpose of estimation. However, the actual remuneration shall be paid to the Staff as per the exclusive communication from HR Cell (SPMU) with due approval of Mission Director, NHM.
  - **Infrastructure:**
    - The approval for new infrastructure is subject to the condition that the State/ Districts will use energy efficient lighting and other appliances.
    - The States/ Districts should submit Non-Duplication Certificate in prescribed format.
    - The States/ Districts should review quarterly performance of physical & financial progress of each project and share the progress report with State /MoHFW.
    - Third party monitoring of civil works and certification of their completion through reputed institutions may be introduced to ensure quality. Also, Information on all ongoing works should be displayed on the NHM website and PMS portal.
  - **Equipment:** The State/ Districts should submit Non-Duplication Certificate in prescribed format.

*J. B. Singh*  
15/3/2024



# Mission Directorate

National Health Mission, Odisha  
Department of Health & Family Welfare,  
Government of Odisha

- **IT Solutions:** All IT solutions being implemented by the State/ Districts must be EHR compliant. In cases where there is Central Software and the State is not using it, the State/ Districts must provide APIs of its State Software for accessing/viewing data necessary for monitoring.
- The activity approvals under NHM for FY 2024-25 and FY 2025-26 are to be reflected in NHM-PMS portal. State/ Districts to ensure that the valid data entries are made in the portal and it will be analysed for progress under NHM along with key deliverables.
- **Statutory Meetings:** The State to ensure regular meetings of State and District Health Missions/ Societies. The performance of SHS/DHS along with financials and audit report must be tabled in Governing Body meetings as well as State Health Mission and District Health Mission meetings.
- **Mandatory Disclosures:** The State / Districts must ensure mandatory disclosures on the State NHM website of all publicly relevant information as per previous directions of CIC and letters from MoHFW.
- **Resources Envelope and approvals: Approvals over and above the Resource Envelope is** accorded with the condition that there would be no increase in Resource Envelope and the State / Districts will have to prioritize and undertake the approved activities under existing RE.
- **Implementation Framework:**
  - All approvals are subject to the Framework for Implementation of NHM and Guidelines issued from time to time and the observations made in this document.
  - The major outputs agreed by the State in the form of **key deliverables** have been placed at **Annexure-2**. The Districts/ Cities have to ensure full compliance to the target assigned for each indicator.
  - The **Conditionalities Framework** for FY **2024-25** and FY **2025-26** is attached herewith as **Annexure-3**. It is to be noted that Full Immunization Coverage (FIC)% will be treated as the screening criteria and Conditionalities would be assessed for only those State which will achieve 85% Full Immunization Coverage. The Districts/ Cities have to give priority focus to achieve conditionalities set by Gol, in order to earn incentives.

*J. B. Singh*  
15/3/2024



## Key Deliverables for the State of Odisha under NHM 2024-26

## 1. RCH Flexipool including Routine Immunization Programme, Pulse Polio Immunization Programme

SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
<b>RCH including Routine Immunization Programme, Pulse Polio Immunization Programme</b>							
<b>Maternal Health</b>							
1	Output	ANC Coverage	<b>Percentage of PW registered for ANC</b> <b>Numerator:</b> Total number of PW registered for ANC <b>Denominator:</b> Total number of estimated pregnancies	Percentage	80	85	HMIS
2	Output	ANC registration in 1st trimester of pregnancy (within 12 weeks)	<b>Percentage of PW registered for ANC in 1st trimester</b> <b>Numerator:</b> Total number of PW registered in 1 <sup>st</sup> Trimester <b>Denominator:</b> Total number of PW registered for ANC	Percentage	95	95	HMIS
3	Output	Pregnant Women who received 4 or more ANC check-ups	<b>% of PW received 4 or more ANC check-ups</b> <b>Numerator:</b> Total number of PW received 4 or more ANC <b>Denominator:</b> Total number of PW registered for ANC	Percentage	92	94	HMIS
4	Output	Identification of HRP	<b>% of high risk pregnancies identified</b> <b>Numerator:</b> Total no. of PW identified as High Risk Pregnancy (HRP) <b>Denominator:</b> Total number of PW registered for ANC	Percentage	10	11	RCH Portal
5	Output	Management of HRP	<b>% of HRP Managed</b> <b>Numerator:</b> Total no. of High Risk Pregnancies (HRP) managed <b>Denominator:</b> Total number of High Risk Pregnancies identified	Percentage	100	100	RCH Portal
6	Output	Institutional Deliveries	<b>% of institutional deliveries out of total ANC registration</b> <b>Numerator:</b> Total number of institutional deliveries (public + private) <b>Denominator:</b> Total number of PW registered for ANC	Percentage	91	92	HMIS
7	Output	National Certification of LRs & OTs under LaQshya	<b>% of nationally certified LRs and OTs under LaQshya against target</b> <b>Numerator:</b> Total number of nationally certified LRs & OTs. <b>Denominator:</b> Total number of LaQshya identified LRs and OTs	Percentage			NHSRC Report
			LaQshya LR	Number	23	0	
			LaQshya OT	Number	23	0	
8	Output	Public Health facilities notified under SUMAN	<b>Percentage of public health facilities notified under SUMAN against target</b> Suman facilities	Percentage Number	 1000	 1000	State Report
9	Output	Maternal death review mechanism	<b>% of maternal deaths reviewed against the reported maternal deaths.</b> <b>Numerator:</b> Total no. of maternal deaths reviewed <b>Denominator:</b> Total no. of maternal deaths reported	Percentage	93	95	HMIS
10	Output	JSY Beneficiaries	<b>Percentage of beneficiaries availed JSY benefits against RoP approval</b> <b>Numerator:</b> Total no. of JSY beneficiaries paid JSY benefits <b>Denominator:</b> Total no. of beneficiaries approved in RoP	Percentage	100	100	State Report
11		NQAS certification of SUMAN notified facilities	Percentage of SUMAN notified facilities received NQAS/Part NQAS nationally certification against target	Number	100	200	NHSRC Report
<b>Child Health (CH) and RBSK</b>							
12	Output	SNCU successful discharge rate	<b>SNCU successful discharge rate out of total admission (%)</b> <b>Numerator:</b> No. of "sick and small new-borns discharged successfully (Unsuccessful denotes" Death, LAMA and referral) <b>Denominator:</b> Total no. of sick new-borns admitted in SNCUs	Percentage	Sustain > 80%	Sustain > 80%	SNCU MIS Online Portal
13	Output	HR training in Newborn and Child Health	<b>HR training in Newborn Health</b> Percentage of Paediatrician / Medical Officers and Staff Nurses trained in FBNC and NBSU Training Package. <b>Numerator:</b> Total Number of Doctors (Paediatrician/MOs) and Staff Nurses trained in FBNC and NBSU training package. <b>Denominator:</b> Total Number of Doctors (Paediatrician / MOs) and Staff Nurses posted in SNCUs/NICUs and NBSUs.	Percentage	90%	90%	State Report

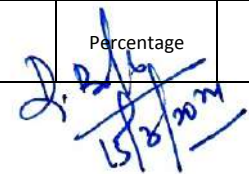
*J. B. Singh*  
15/8/2024

Sl No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
14	Output	Child Death Reporting	<b>Percentage of Child Death Reported against Estimated deaths</b> <b>Numerator:</b> Total no. of Childdeaths reported. <b>Denominator:</b> Estimated number of Child Deaths based on latest SRS report (34000)	Percentage	60% (18,229 Under 5 Deaths)	80% (24,305 Under 5 Deaths)	HMIS
15	Outcome	Stillbirth Rate	<b>Still Birth Rate</b> <b>Numerator:</b> Total no. of Stillbirth Reported <b>Denominator:</b> Total no. of Reported Deliveries	Rate	< 15 per 1000 births	< 12 per 1000 births	HMIS
16	Output	Home visits by ASHAs for New-borns	<b>Percentage of newborns received complete schedule of home visits against total reported live births.</b> <b>Numerator:</b> Total no. of new-borns received complete scheduled of home visits <b>Denominator:</b> Total no. of new-borns	Percentage	90% (D: 479898)	90% (D: 479898)	Quarterly HBNC Report
17	Output	Roll out of HBYC visits in all districts	<b>Percentage of District Roll out HBYC visits against RoP approval with trained ASHAs</b> <b>Numerator:</b> Total no. of districts implementing HBYC visits with trained ASHAs <b>Denominator:</b> Total no. districts approved in RoP for HBYC implementation	Percentage	100% (30 districts)	100% (30 districts)	Quarterly HBYC Report
18	Output	Paediatric HDU/ICU unit	<b>Percentage of Districts with functional Paediatric HDU/ ICU unit out of total districts.</b> <b>Numerator:</b> Total no. of districts with functional Paediatric HDU/ ICU unit <b>Denominator:</b> Total no. of districts with the approved Paediatric HDU/ ICU unit in RoP/ECRP.	Percentage	100% (4 PICUs + 29 PHDUs/ ICUs) - 27 Districts	100% (4 PICUs + 29 PHDUs/ ICUs) - 27 Districts	Quarterly State Report
19	Output	MusQan	Number of facilities national certified against total identified facilities under MusQan <b>Numerator:</b> Total number of health facilities nationally certified under MusQan initiative (at least two units per facility (SNCU/NBSU, Paediatric OPD, Paediatric Ward, Nutrition Rehabilitation Centre) <b>Denominator:</b> Total number of facilities identified under MusQan initiative.	Percentage	100 % 4 facilities	100 % 4 facilities	Quarterly State Report
20	Output	New-born Screening at Delivery points	<b>Percentage of New- borns Screened at the time of birth out of total Live Births</b> <b>Numerator:</b> Number of New- borns Screened at the time of birth <b>Denominator:</b> Total number of Live Birth Reported.	Percentage	90%	90%	Quarterly State Report
21	Output	Functional DEICs	<b>Percentage of DEIC functional with Infrastructure, Essential Equipment and HR as per Guidelines against the RoP approval.</b> <b>Numerator:</b> Number of DEICs functional with Infrastructure, Essential Equipment, HR and training as per Guidelines. <b>Denominator:</b> Total number of DEICs approved in RoP.	Percentage	100% 32 (DEIC)	100% 32 (DEIC)	Quarterly State Report
22	Output	RBSK MHTs	<b>Percentage of Government &amp; Government aided schools and Anganwadi Centre covered by RBSK MHTs</b> <b>Numerator:</b> Number of Government & Government aided schools and Anganwadi Centre covered by RBSK MHTs as per RBSK Guideline. <b>Denominator:</b> Total number of Public Schools and Anganwadi Centre in the block <b>Source:</b> State Quarterly Report	Percentage	90% AWC - 133477 (2 visit) School - 49391	90% AWC - 133477 (2 visit) School - 49391	State Quarterly Report
23	Output	Screening of Children in Government & Government aided schools and Anganwadi Centre	<b>Percentage of children screened by RBSK MHTs</b> <b>Numerator:</b> Number of Children in Government & Government aided schools and Anganwadi Centre screened by RBSK MHTs as per RBSK Guideline. <b>Denominator:</b> Total number of Children in Government & Government aided schools and Anganwadi Centre	Percentage	90% 0-6 years ( 2 visit) 64 273057- 18 years (1 visit) 55 02689	90% 0-6 years ( 2 visit) 6427 3057- 18 years (1 visit) 5502 689	Quarterly State Report
24	Output	Secondary/ Territory management of Conditions specified under RBSK	<b>Number of beneficiaries received Secondary/ Territory management against RoP approval (for surgical intervention specified under RBSK).</b>	Nos.	1720	1720	Quarterly State Report

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
25		NBSU Function ality	Functional (including online reporting) Newborn Stabilization Units (NBSUs) against approval at CHC/FRUlevel. <b>Numerator:</b> Total Number of NBSU functional and reportingonline. <b>Denominator:</b> Total Number of NBSU approved at CHC/FRUs.	Number	100 % (33 NBSUs)	100% (46 NBSUs)	FBNC online reporting
26		IMNCI/F-IMNCI trainings	Health Professional (Paediatricians/ MOs/ SNs/ANMs/ CHOs) Trained under Child Health Training (IMNCI/ F- IMNCI) againstapproval. <b>Numerator:</b> Total Number ofHealth Professional (Paediatricians/ MOs/ SNs/ANMs/ CHOs) Trained under Child Health Training (IMNCI/ F-IMNCI). <b>Denominator:</b> Total Number of Health Professional (Paediatricians/ MOs/ SNs/ANMs/ CHOs) approved forIMNCI/ F-IMNCI training.	Partici pants	90%	90%	Quarterly State Report
27.		ORS and Zinc Coverage	<b>Under 5 Children received ORSand Zinc against Under 5 Children identified with Diarrhoea during the IDCF Campaign.</b> <b>Numerator:</b> Total Number No.of Under 5 Children received ORS and Zinc. <b>Denominator:</b> Total Number of under 5 Children identified withDiarrhoea during the IDCF Campaign.	Percent age	100%	100%	IDCF campaign State Report
<b>Immunization</b>							
28	Output	Full immunization coverage	<b>Percentage of Full Immunization Coverage (FIC)</b> <b>Numerator:</b> Total number of children aged 9-11 months fullyimmunized with BCG+ Three doses of pentavalent + three doses of OPV + One dose of MRCV <b>Denominator:</b> Total No. of target children in 9-11 months'age group	Perce ntage	90%	92%	HMIS
29	Output	Coverage of birthdose Hepatitis B	<b>Percentage of children receiving birth dose Hepatitis Bas against institutional deliveries</b> <b>Numerator:</b> Total no. of infants immunized with birth dose of Hepatitis B. <b>Denominator:</b> Total no. of institutional deliveries	Perce ntage	100%	100%	HMIS
30	Output	Dropout % of children	<b>Percentage dropout of children from Pentavalent 1 to Pentavalent 3</b> <b>Numerator:</b> Total no. of children immunized with Pentavalent 1 – Total no. of children immunized with Pentavalent 3 <b>Denominator:</b> Total no. of children immunized with Pentavalent 1	Percentage	0	0	HMIS
31	Output	Dropout % of children	<b>Percentage dropout of children from Pentavalent 3 to MR 1</b> <b>Numerator:</b> Total no. of children immunized with Pentavalent 3 – Total no. of children immunized with MCV/MR 1 <b>Denominator:</b> Total no. of children immunized with Pentavalent 3	Percentage	0	0	HMIS
32		Dropout % of children	<b>Percentage dropout of children from MR 1 to MR 2</b> <b>Numerator:</b> Total no. of children immunized with MR 1 –Total no. of children immunized with MR 2 <b>Denominator:</b> Total no. of children immunized with MR 1	Percentage	0	0	HMIS
33	Output	TT10 coverage	<b>Percentage of children receiving Td10</b> <b>Numerator:</b> Total no. of children ≥ 10 years old immunized with Td10 <b>Denominator:</b> Total no. ofchildren ≥ 10 years of age	Percentage	95%	95%	HMIS
34	Output	<b>MR-2 Coverage &gt;95%</b>	<b>MRCV2 coverage &gt; 95% at state level</b> <b>Numerator:</b> Total no. ofchildren received MR 2 <b>Denominator:</b> Total no. ofchildren due for MR 2		>95%	>95%	HMIS
35	Output	Utilization of U-WIN	<b>No. of vaccinators using U-WIN for vaccination</b> <b>Numerator :</b> Total no. vaccinators conducting immunization session using U- WIN <b>Denominator:</b> Total no. registered vaccinators on U-WIN		Benchmark > 90 %	Benchmark > 90 %	U-WIN
<b>Nutrition</b>							
36		Early Initiation of Breastfeeding	<b>Percentage of newborn breastfeed within one-hour birth against total live birth.</b> <b>Numerator:</b> Number of newborn breastfeed within one hour of birth. <b>Denominator:</b> Total live births registered in that period.	Percentage	97	97	HMIS


  
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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
37	Output	Bed Occupancy Rate at Nutrition Rehabilitation Centre (NRC)	<b>Bed Occupancy Rate at Nutrition RehabilitationCentres (NRCs)</b> <b>Numerator-</b> Total inpatient daysof care from 1 <sup>st</sup> April 2022 to 31st March 2023/1 <sup>st</sup> April 2023 to 31 <sup>st</sup> March 2024 <b>Denominator-</b> Total available bed days during the same reporting period	Percentage	80	80	State reports
38		Successful Discharge Rate at Nutrition Rehabilitation Centre (NRC)	<b>Successful Discharge Rate at Nutrition Rehabilitation Centres (NRCs)</b> <b>Numerator-</b> Total number of under- five children discharged with satisfactory weight gain for 3 consecutive days (>5gm/kg/day) from 1st April 2022 to 31st March 2023/1 <sup>st</sup> April 2023 to31 <sup>st</sup> March 2024 <b>Denominator-</b> Total No. of under-five children exited from the NRC during the same reporting period	Percentage	90	90	State reports
39	Output	IFA coverage	<b>Percentage of pregnant women given 180 IFA tablets as against pregnant women registered for ANC</b> <b>Numerator:</b> Number of pregnant women given IFA tablets. <b>Denominator:</b> Number of pregnant women registered for ANC in that period.	Percentage	95%	95%	HMIS report
40		Anaemia Muktbharat	<b>Percentage of children 6-59 months given 8-10 doses of IFAsyrup every month</b> <b>Numerator:</b> Total number of children 6-59 months given 8-10 doses of IFA syrup in the reporting month <b>Denominator:</b> Number of children 6-59 months covered under the programme (Target Beneficiaries)	Percentage	75	77	HMIS report
41		Anaemia Muktbharat	<b>Percentage of children 5-9years given 4-5 IFA tablets every month</b> <b>Numerator:</b> Total number of children 5-9 years given 4-5 IFA tablets in the reporting month <b>Denominator:</b> Number of children 5- 9 years covered under the programme (TargetBeneficiaries)	Percentage	85	85	HMIS report
<b>Comprehensive Abortion Care (CAC)</b>							
42	Output	CAC services	<b>Public Health Facilities equipped with Drugs (MMA Combi pack/ Mifepristone &amp; Misoprostol), Equipment (MVA/EVA) and Trained Provider (MTP Trained MO/OBGYN) for providing CAC services against the total number of Public Health Facilities as per RoP targets</b> <b>Numerator:</b> Total no. of PublicHealth Facilities that are equipped with Drugs (MMA Combi pack/ Mifepristone & Misoprostol), Equipment (MVA/EVA) and Trained Provider (MTP Trained MO/OBGYN)) <b>Denominator:</b> Total number of Public Health Facilities as per RoP targets	Percentage	1. 100% of CHCs and above level of public Health Facilities to be equipped 2. 390 Facilities ( MCs:5; DH including women & Children Hospital/MC H :32; SDHs:33; CHCs (FRUs) & Other Sub District Level Hospitals: 34; 24 x 7 PHCs, Non FRU CHCs:260 ; Other PHCs:26 )	1. 100% of CHCs and above level of public Health Facilities to be equipped 2. 425 Facilities ( MCs:5; DH including women & Children Hospital/MC H :32; SDHs:33; CHCs (FRUs) & Other Sub District Level Hospitals: 34; 24 x 7 PHCs, Non FRU CHCs:270 ; Other PHCs:51 )	CAC Annual & Quarterly Report
43	Output	MO training	<b>Medical Officers trained in CACagainst the RoP approval</b> <b>Numerator:</b> Total no. of MedicalOfficers (MBBS) trained <b>Denominator:</b> Target of Medical Officers (MBBS) to be trained as per RoP	Number	150 MBBS Doctors	150 MBBS Doctors	CAC Annual & Quarterly Report

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
<b>Family Planning (FP)</b>							
44	Output	PPIUCD acceptance	<b>Percentage of PPIUCD acceptance among Institutional deliveries</b> <b>Numerator:</b> Number of PPIUCDs inserted in public facilities <b>Denominator:</b> Number of institutional deliveries in public facilities	Percentage	26.0%	28.0%	HMIS
45	Output	Injectable MPA users	<b>Percentage of Injectable MPA users among Eligible Couples</b> <b>Numerator:</b> Total number of Injectable MPA doses/4 <b>Denominator:</b> Number of Eligible Couples	Percentage	0.40%	0.50%	HMIS/ RCH register
46	Output	Operationalization of FPLMIS	<b>% of Facilities indenting and issuing the stock in FPLMIS out of total facilities (including Sub Centres)</b> <b>Numerator:</b> Number of Facilities indenting and issuing the stock in FPLMIS (including Sub Centres) <b>Denominator:</b> Total Number of Facilities registered in FPLMIS (including Sub Centres) Remark: This key deliverable <i>has been revised to include Sub Centres</i>	Percentage	95.0%	95.0%	FPLMIS
47		% Increase in Male Sterilization performance from 2022-23	<b>Numerator:</b> No. of male sterilizations in current year (-) <b>Denominator:</b> No. of male sterilizations in 2022-23 Remark: The baseline year for this Key deliverable has been revised from 2019- 20 to 2022-23	Percentage	50%	100%	HMIS
<b>Existing additional Key ROP deliverables for selected States/UT's</b>							
48		Doubling Family Planning Indemnity Scheme Compensation (SC Directives)	Doubling of Compensation under FPIS as per the Honourable Supreme Court Directives. <b>Source: Annual FPIS report</b> Remark: This deliverable is applicable for only for few states which have not yet completed the doubling of compensation	Yes/No	NA	NA	Annual FPIS report
49		Number of Nayi Pahal Kits (NPK) distributed per ASHA	<b>Numerator:</b> No. of NPKs distributed <b>Denominator:</b> No. of ASHAs <b>Source: MPV Quarterly Report</b> Remark: This deliverable is applicable only to 13 MPV States and few other states.	Number	5 Kit/ASHA	5 Kit/ASHA	MPV Quarterly Report
50		Number of Sash Bahu Sammelan Conducted	No. of SBS Conducted <b>Source: MPV Quarterly Report</b> Remark: This deliverable is applicable only to 13 MPV States and few other states.	Number	10800	10800	MPV Quarterly Report
<b>Adolescent Health/ Rashtriya Kishor Swasthya Karyakram (RKSK)</b>							
51	Output	Client load at AFHC	<b>Average monthly Client load at AFHC/month in PE Districts at DH/SDH /CHC level to increase by 25% in 2024-25 and 50% in 2025-26 from the baseline data of 2023-24</b> <b>Numerator:</b> Total Clients registered at AFHC. <b>Denominator:</b> Number of AFHCs divided by no. of months (per AFHC per month)	Nos	100	120	(HMIS/ Quarterly AFHC Report)
52	Output	WIFS coverage	<b>Percentage coverage of in- school beneficiaries under WIFS Programme every month.</b> <b>Numerator-</b> Total no in School beneficiaries covered <b>Denominator-</b> Targeted beneficiaries (In School)	Percentage	85%	90%	HMIS
53	Output	WIFS coverage	<b>Percentage coverage of out-of-school (girls) under WIFS Programme every month.</b> <b>Numerator-</b> Total no out of School beneficiaries covered <b>Denominator-</b> Targeted beneficiaries (out of School)	Percentage	60%	65%	HMIS
54	Output	Selection of Peer Educator	<b>Percentage of Peer Educator selected against the target</b> <b>Numerator-</b> Total no PEs selected <b>Denominator-</b> Total No. of PE to be selected	Percentage	100%	100%	State PE Reports
55		Training of Peer Educator	<b>Percentage of Peer Educator trained against the Peer Educator selected.</b> <b>Numerator-</b> Total no PEs Trained <b>Denominator-</b> Total No. of PEs selected	Percentage	100%	100%	State PE Reports

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
56	Output	Menstrual Hygiene Scheme coverage	<b>Percentage coverage of Adolescent Girls against the target under Menstrual Hygiene Scheme</b> <b>Numerator-</b> Total no, of adolescent girls receiving sanitary napkins under MHS <b>Denominator-</b> Total No. of adolescent girls to be covered	Percentage	80%	85%	HMIS
57	Output	Ayushman Bharat School Health & Wellness Programme implementation	Percentage of the selected Districts implementing Ayushman Bharat School Health & Wellness Programme against the RoP approval. <b>Numerator-</b> Total no districts implementing ABSHWP <b>Denominator-</b> Total No. of Districts selected for ABSHWP	Percentage	100%	100%	SHWP Report
58	Output	Ayushman Bharat School Health & Wellness Programme implementation	<b>Percentage of Health &amp; Wellness Ambassadors trained to transact weekly activities in schools in the select districts</b> <b>Numerator-</b> Total no of Health & Wellness Ambassadors (HWAs) trained <b>Denominator-</b> Total no of HWAs to be trained	Percentage	100%	100%	SHWP Report
<b>Pre-Conception &amp; Pre-Natal Diagnostic Techniques (PCPNDT)</b>							
59	Output	<b>Total Number of meetings conducted by district advisory committees (DAC) in the state/ UT</b>	<b>As mandated by the PC&amp;PNDT Act law the DAC has to meet minimum 6 times a year</b> <b>Numerator-</b> Total No. of meetings actually conducted by all districts in the state <b>Denominator-</b> No of district *6	Percentage	100%	100%	State Report
<b>National Iodine Deficiency Disorders Control Programme (NIDDCP)</b>							
60	Output	Monitoring of salt & urine in the State/UT	<b>Percentage of salt samples tested using Salt Testing Kits (Qualitative testing) by ASHA in identified District.</b> <b>Numerator:</b> Total Number of sample tested by ASHA. <b>Denominator:</b> Number of ASHA *50 samples*12 months.	Percentage	100%	100%	State Report
61			<b>Percentage of salt samples tested (Quantitative) in Lab (Volumetric method) for estimation of iodine content.</b> <b>Numerator:</b> Number of salt samples tested (Quantitative) in Lab (Volumetric method). <b>Denominator:</b> Number of District *25 samples*12 months.	Percentage	10%	20%	State Report
62		Monitoring of salt & urine in the State/UT	<b>Percentage of urine sample tested for Urinary iodine estimation.</b> <b>Numerator:</b> Number of urinesamples tested for Urinary iodine estimation. <b>Denominator:</b> Number of District *25 samples*12 months.	Percentage	10%	20%	State Report
<b>Reproductive and Child Health (RCH) Portal</b>							
63	Output	Implementation of RCH application - Registration Coverage of "Pregnant Women and Child (0-1" Year)	<b>Percentage of Registration Coverage of Pregnant Women and Child on pro- rata basis</b> <b>"Numerator: Total No. of Registered PW and Child" on RCH Portal</b> <b>Denominator: Estimated PW and Child on pro-rata basis.</b>	Percentage	100% Registration coverage of Pregnant Women and Children on pro- rata basis	100% Registration coverage of Pregnant Women and Children on pro-rata basis	RCH Portal
64	Output	Implementation of RCH application - Service Delivery Coverage of PW	<b>Percentage of Service Delivery Coverage of entitled Pregnant Women for ANC services.</b> <b>Numerator:</b> Total No. of PW received All ANC services (ANC1 + ANC2 + ANC3 + ANC4 + TT1 / TT2 + 180 IFA tablet) <b>Denominator:</b> Total PW expected for Service based on reporting period	Percentage	100%	100%	RCH Portal
65	Output	Implementation of RCH application Service Delivery Coverage of Child	<b>Percentage of Service Delivery Coverage of entitled Child [0-1Year] for Immunization services.</b> <b>Numerator:</b> Total No. of Child received All Immunization services (as per National Immunization Schedule) <b>Denominator:</b> Total child expected for Service based on reporting period	Percentage			RCH Portal

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
66	Output	Implementation of RCH application - Total Deliveries Reported	<b>Percentage of total Delivery reported of Pregnant Women.</b> <b>Numerator:</b> Total No. of Delivery reported <b>Denominator:</b> Total PW expected for Delivery based on reporting period	Percentage	100% Delivery reported	100% Delivery reported	RCH Portal
67	Output	Implementation of ANMOL application	<b>Health provider (ANM) using ANMOL application "for entering Data"</b> <b>Numerator:</b> Total No. of Users(ANM) doing data entry. <b>Denominator:</b> Total no. active" users (ANMs) registered in RCH Portal.	Percentage	90% Health Provider (ANM) are doing data entry on ANMOL	90% Health Provider (ANM) are doing data entry on ANMOL	RCH Portal
<b>2. NDCP Flexi Pool (National Disease Control Programme)</b>							
<b>Integrated Disease Surveillance Programme (IDSP)</b>							
68	Output	Weekly Reporting – S form	% of Reporting Units Reported in S form	Percentage	100	100	IDSP IHIP
69	Output	Weekly Reporting – P form	% of Reporting Units Reported in P form	Percentage	100	100	IDSP IHIP
70	Output	Weekly Reporting – L form	% of Reporting Units Reported in L form	Percentage	100	100	IDSP IHIP
71	Output	Weekly Reporting – Lab Access of Outbreaks	Lab Access of Outbreaks reported under IDSP excluding Chickenpox, Food Poisoning, Mushroom Poisoning	Percentage	100	100	IDSP IHIP
<b>National Tuberculosis Elimination Programme (NTEP)</b>							
72.	Output	Presumptive TB Examination	Presumptive TB examination / lakh population	Nos.	>3000	>3000	
73	Output	Expansion of rapid molecular diagnostics for TB	% Of TB patients tested for Rifampicin resistance	Nos.	70%	70%	State Report
74	Output	State TB Score	% Improvement in Annual TB Score Numerator: (State Annual TB Score in Current Yr- State Annual TB Score in last yr) Denominator: State Annual TB Score in last yr	Percentage	90	90	NIKSHAY Portal
75	Output	Nikshay Poshan Yojana	% of eligible patients receiving all benefit of DBT Numerator: No. of eligible patients receiving all benefit of DBT Denominator: No. of eligible patients	Percentage	100%	100%	NIKSHAY Portal
76	Output	Districts with TB free Status	No. of districts to achieve TB free Status # Bronze, # Silver, # Gold, #TB Free district/City	Nos.	8 district	10 district	State Report
77	Output	% Of Gram Panchayat/wards with TB free Status	% Of Gram Panchayat/ward to achieve TB free Status # Bronze, # Silver, # Gold, #TB Free	Percentage	20%	30%	
78	Output	% Of patients adopted by Ni-Kshay Mitra	% Of consented TB patients adopted by Ni-Kshay Mitra	Percentage	100%	100%	
79							
<b>National Rabies Control Program (NRCP)</b>							
80	Output	Availability of Rabies Vaccine and Rabies Immunoglobulins	<b>ARV available at the Health Facilities as per Essential Medical List</b> <b>Numerator-</b> Total No. of Health Facility till PHC level having stocks of ARV Source- DVDMS Portal/State Monthly report <b>Denominator-</b> Total No. of Health Facilities till PHC level (Source- Rural Health Statistic- MoHFW)	Percentage	Availability of Stock as per EML at 85% health Facilities till CHC Level	Availability of Stock as per EML at 90% health Facilities till CHC Level	DVDMS Portal/State Monthly report Rural Health Statistic- MoHFW)
81	Output		Rabies Immunoglobulins available at the Health Facilities as per Essential Medical List Numerator- Total No. of Health Facility till CHC level having stocks of ARS Denominator- Total No. of Health Facilities till CHC level (Source- Rural Health Statistic- MoHFW)	Percentage	Availability of Stock as per EML at 75% health Facilities till CHC Level	Availability of Stock as per EML at 80% health Facilities till CHC Level	DVDMS Portal/State Monthly report Rural Health Statistic- MoHFW)

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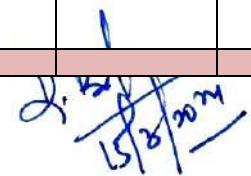
SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
<b>National Viral Hepatitis Control Programme (NVHCP)</b>							
82	Output	Management of Hepatitis C -under the program	Percentage of Hepatitis C Patients benefited i.e number who receivedtreatment against target.	Percentage	90%(256)	90%(256)	NVHCP MIS Portal
83	Output	Management of Hepatitis B -under the program	Percentage of Hepatitis B Patients benefited i.e number who receivedtreatment against target	Percentage	90%(458)	90%(476)	NVHCP MISPortal
84	Output	Pregnant women screened for hepatitis B	Percentage of pregnant women screened for hepatitis B (HBsAg) againstthe target (Institutional Deliveries)	Percentage	100%(665678)	100%(665678)	RCH Portal
85	Output	Administration of HBIG to newborns of HBsAg positive pregnant women	Percentage of new borns administered HBIG among new borns delivered to HBsAg positive pregnant women at health care facility	Percentage	100%(750)	100%(850)	RCH Portal
<b>National Leprosy Elimination programme (NLEP)</b>							
86	Output	Percentage of Grade II Disability (G2D) among new cases	No of Districts with Grade II Disability (G2D) percentage less than 2%among new cases	Nos	20	21	State Report
87	Output	Certification of Districts as Leprosy Free	No of Districts certified as Leprosy Free	Number	3	4	State Report
88	Output	Clearance of backlog of Reconstructive Surgeries (RCS)	Number of Reconstructive Surgeries (RCS) conducted during the F.Y./ Number of Patients Eligible for RCS during the F.Y.*100	Numbers	75	75	State Report
89		No of districts with Zero incidence of leprosy case in F.Y.	No of districts with zero new cases of leprosy in the current F.Y.		0	0	
<b>National Vector Borne Disease Control programme (NVBDCP)</b>							
90	Output	Malaria Reduction in API at District level	No. of districts with API <1	Numbers	To sustain in 25 Districts	To sustain in 25 Districts	MES report, NVBDCP
91.	Output		Annual blood Examination Rate (ABER)	Percentage	To sustain ABER>15%	To sustain ABER>15%	MES report, NVBDCP
92.	Output		%IRS population coverage in each round	I Round	>85%	>85%	IRS report, NVBDCP
93.	Output		II Round	>85%	>85%	IRS report, NVBDCP	
94.	Output		No. of Districts Certified as MalariaFree	Number	3	3	State & District, NVBDCP Data Base
95.	Output	Lymphatic Filariasis	The proportion of districts/IUs with coverage>65%for DA	Percentage	55 IUs (100% of MDA-DA Implimentin g unit)	48 IUs (100% of MDA-DA Implimentin g unit)	13 Table MDA report and WHO Post MDA report
96.	Output		and 85%forIDA of the total population (admin coverage/independent assessment)		197 IUs (100% of MDA-DA Implimentin g unit)	101 IUs (100% of MDA-DA Implimentin g unit)	13 Table MDA reportand WHO Post MDA report
97.	Output		Morbidity management and disease prevention (MMDP) services for hydrocele and Lymphedema cases	Number	100% MMDP services and kit distribution: 67117	100% MMDP services and kit distribution: 67117	13 Table MDA report/Monthly MMDP report
98.	Output		Cumulative number of endemic districtswhich achieved mf rate<1% verified byTAS1	Number	11	11	As per TAS plan
99.	Output		Cumulative number of districts to achieveDisease Free Status- LF as per TAS 3 Clearance	Number	9	9	Post TAS report
100.	Output	Dengue& Chikungunya	Dengue Case Fatality Rate at State level	Percentage	CFR <1%	CFR <1%	

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Sl No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
101.	Output	Kala-azar	Number of blocks achieved Kala azar elimination i.e.<1 case per 10000population at block level	Number	NA	NA	
102.			Number of blocks sustained Kala-azar elimination	Number	NA	NA	
103.			%IRS population coverage in eachround	Percentage	NA	NA	
104.			%Complete treatment of KA Cases and HIV/VL	Percentage	NA	NA	
105.			%Complete treatment of PKDL Cases	Percentage	NA	NA	
<b>National Tobacco Control Programme (NTCP)</b>							
106	Output	Increase in availability of Tobacco Cessation Services available	No. of districts with Tobacco Cessation Centers	Number	30	30	MIS / NTCP portal
107	Outcome	Improved accessfor Tobacco Cessation Services	No. of People availed tobacco cessation services in2022-24	Number	65,000	70,000	MIS / NTCP portal
<b>National Mental Health Programme (NMHP)</b>							
108	Output	Improved coverage of mental health services	Percentage of districts covered District Mental HealthUnits operationalized.	Percentage	100	100	State Report
109	Output	Improved coverage of mental health services	Percentage increase Number of persons cateredthrough District Mental Health Units	Number/ Percentage	30% increase of previous year 2023-24	35 % increase of 2023-24	State Report
<b>National Programme for Health Care of Elderly (NPHCE)</b>							
110	Output	Provision of primary and secondary Geriatric healthcare services at District Hospitaland below	Numerator: No. of DH with Geriatric Unit (at least10beds) Denominator : No. of total DH in the state	Number	32/32	32/32	NPHCE QPR
111	Output	Provision of primary and secondary Geriatric healthcare services at District Hospitaland below	Numerator: No. of DH with physiotherapy unit forelderly Denominator : No. of total DH in the state	Number	32/32	32/32	NPHCE QPR
112	Output	Provision of primary and Secondary Generic Health Care Services at DistrictHospital and Below	Numerator: No. of CHCs with physiotherapy unit Denominator : No. of total CHC in the state	Number	278 (67%)	414 (100%)	NPHCE report
<b>National Programme for Non-Communicable Diseases (NP-NCD)</b>							
113	Input	population (30+) registered for NCD Services	% of population (30+) registered in the National NCD portal	Percentage	1,72,29,420	1,73,37,090	National NCD Portal
114	Process	population screened for NCD	% of population screened for Hypertension	Percentage	1,72,29,420	1,73,37,090	National NCD Portal
115	Process	population screened for NCD	% of population screened for Diabetes	Percentage	1,72,29,420	1,73,37,090	National NCD Portal
116	Output	Patient put on treatment	% of people on standard of care for Hypertension against target population	Percentage	16,35,152	17,98,667	National NCD Portal
117	Output	Patient put on treatment	% of people on standard of care for Diabetes against target population	Percentage	10,56,035	11,61,639	National NCD Portal
<b>National Programme for Control of Blindness and Vision Impairment (NPCB&amp;VI)</b>							
118	Output	Eye care servicesunder NPCB and VI provided at District level andbelow	Percentage achievement of Cataract operationsagainst targets	Percentage Number	465400	209400	District Reports

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
119	Output	Eye care services under NPCB and VI provided at primary, secondary at District level	Percentage achievement of Collection of donated eyes for corneal Transplantation against targets	Percentage Number	2000	2200	District Reports
120	Output	Eye care services under NPCB and VI provided at District level and below District level	No. of Free Spectacles to school children suffering from Refractive errors	Number	56000	60000	District Reports
121	Outcome	Cataract backlog Free Certification	No. of Districts Certified as Cataract backlog Free	Number	-	-	State Report
<b>Pradhan Mantri National Dialysis Program (PMNDP)</b>							
122	Output	Dialysis Facility in the District	No. of districts with dialysis facility under PMNDP Calculated as total number of districts having dialysis centres divided by the total number of districts in the state.	Number	30	30	State Report
123	Output	Number of sessions held in the month	Estimated number of dialysis sessions (monthly) Calculated as 10% increase over the previous year dialysis sessions	Number	0.2	0.21	State Report
124	Output	Peritoneal dialysis services under PMNDP	Estimated number of patients planned for peritoneal dialysis services	Number	100	150	
<b>National Programme for Prevention and Control of Fluorosis (NPPCF)</b>							
125	Outcome	Improvement in sample testing in fluoride affected districts	Percentage of water samples tested for Fluoride level against number of samples as per norms.	Percentage	40	100	NPPCD QPR
126	Outcome	Medical management of diagnosed fluorosis cases including supplementation, surgery, and rehabilitation.	Percentage of patients provided medical management to diagnosed fluorosis cases out of the total diagnosed cases.	Percentage	30	100	NPPCD QPR
<b>National Programme for Prevention &amp; Control of Deafness (NPPCD)</b>							
127	Output	Hearing Aid	Number of people with hearing problems rehabilitated.	Number	10% Increase	10% Increase	NPPCD QPR
128	Output	Audiometry Facilities	Number of people screened for deafness/hearing impairment.	Number	30	30	NPPCD QPR
<b>National Programme for Palliative Care (NPPC)</b>							
129	Output	Palliative care services under NPPC programme	Total no. of District Hospitals providing palliative care services	Number	32	32	MPR
<b>National Oral Health Programme (NOHP)</b>							
130	Output	Strengthening Oral Health Services	Percentage of PHFs providing dental care services upto CHC level against total PHFs upto CHC level (DH/SDH/CHC)	Number	100%	100%	HMIS (Dental OPD)/MPR
<b>National Programme for Climate Change and Human Health (NPCCH)</b>							
131	Output	Orientation/ Training/Capacity Building of healthcare staff	% of Medical officers in district trained on diagnosis and management of HRI and ARI surveillance in context of air pollution	Percentage	80	100	State report
132	Output	Heat Related Illness	% of DHs and SDH with operational min 5 bedded Heat Stroke Room (from 1st March – 31st July)	Percentage	25	50	State report
133	Output	Acute Respiratory Illness (ARI) in context of Air Pollution	% of Sentinel Surveillance Hospitals reporting daily ARI cases on IHIP portal	Percentage	75	100	State report
<b>Health System Strengthening (HSS)- Rural and Urban</b>							


  
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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
134	Output	Improving access to healthcare in urban India	Number of operational urban health facilities (UPHCs and UCHCs) increased. (a) UCHC% = Numerator: No. Of UCHC operationalized Denominator: No. of UCHC approved	Percentage	a) UCHC – 7	a) UCHC – 7	MIS-QPR/ Approved State RoPs
			(b) UPHC % = Numerator: No. of UPHC operationalized Denominator: No. of UPHC approved		b) UPHC- 116	b) UPHC- 116	
135	Output	Improving access to healthcare in urban India	No. of UPHCs converted to Ayushman Arogya Mandir Numerator: No. of UPHC converted to AAPs Denominator: Total No. of UPHCs approved	Percentage	116 Nos. (100%)	116 Nos. (100%)	AAP Portal/ Approved State RoPs
136	Output	Improving access to healthcare in urban India	<b>% of UCHC and UPHC-AAPs offering specialist service</b> Numerator: No. of UCHC and UPHC-AAM offering specialist services Denominator: No. of UCHC and UPHC-AAM approved	Percentage	123 Nos. (100%)	123 Nos. (100%)	AAP Portal/ Approved State RoPs
137	Output	Improving access to healthcare in urban India	<b>Annual utilization of urban health facilities (UPHC-AAM) increased with at least 50% visits made by women to be sustained</b> a) Urban Health Facilities Footfall: Numerator: No of UPHC- AAM reporting at least average footfall (60 footfalls per 1000 population) Denominator: No of operational UPHC-AAM	Percentage	a-50 UPHCs b- 50%	a-55 UPHCs b- 50%	AAP Portal
			b) % female footfall: Numerator: Female footfall in current year Denominator: Total footfall recorded in current year				
138 A	Output	Improving access to healthcare in urban India	<b>%No of individuals screened for NCD at UPHC-AAM</b> a) For Hypertension Numerator: Individuals screened for NCD- Hypertension Denominator: Total 30 years and above, Urban population as on 1 <sup>st</sup> April (Beginning of FY)	Percentage	50% 50%	60% 60%	AAM Portal
			(b) For Diabetes: Numerator: No. of individual screened for Diabetes Denominator: Total 30 years and above urban population as on 1st April (Beginning of FY)				
138 b			% of individual screened for NCD at UPHC-AAM (a) For Oral Cancer: Numerator: No. of individual screened for Oral Cancer Denominator: Total 30 years and above urban population as on 1st April (Beginning of FY)	Percentage	a-30% b-30% c-30%	a-40% b-40% c-35%	AB-AAM Portal
			(b) For Breast Cancer: Numerator: No. of individual screened for Breast Cancer Denominator: Total 30 years and above urban women population as on 1st April (Beginning of FY) (C) For Cervical Cancer: Numerator: No. of individual screened for Cervical Cancer Denominator: Total 30 years and above urban women population as on 1st April (Beginning of FY)				
139	Output	Providing quality healthcare	% Urban pregnant women accessing 4 or more antenatal care at UPHC- AAM and UCHC- AAM and UCHC Numerator: Total urban PW accessing 4 or more ANC's Denominator: Total urban PW registered	Percentage	86%	86%	HMIS
140	Output	Providing quality healthcare services in Urban India	Percentage of Urban Health and Nutrition Day (UHND) held organized Numerator: Number of monthly UHND organized Denominator: Number of monthly UHND approved	Percentage	92%	95%	MIS / HMIS portal/Approved State RoPs

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
141	Output	Providing quality healthcare services in Urban India	<b>Number of patients treated for Diabetes and Hypertension at UPHC-AAM % of diagnosed patients put on treatment for Diabetes:</b> <b>Numerator:</b> Number of patients put on treatment for Diabetes <b>Denominator:</b> Number of patients diagnosed for Diabetes % of diagnosed patients put on treatment for Hypertension: <b>Numerator:</b> Number of patients put on treatment for Hypertension <b>Denominator:</b> Number of patients diagnosed for Hypertension	Number	a-98% b-98%	a-98% b-98%	AAM Portal
<b>DVDMS</b>							
142	Output	Implementation of DVDMS in AAM SHC	% of Health Facilities up to AAM SHC implementing the DVDMS	Percentage	100%	100%	State Report
<b>Quality Assurance (QA)</b>							
143	Output	NQAS certified public health facilities (National + State)	Cumulative Number of NQAS certified public health facilities	Number	(a) DH: 22 (70%) (b) SDH: 16 (50%) (c) CHC: 192 (50%) (d) PHC: 644 (50%) (e) UPHC: 45 (50%) (f) AAM SC: 1256 (40%)	(a) DH: 24 (75%) (b) SDH: 20 (60%) (c) CHC: 230 (60%) (d) PHC: 773 (60%) (e) UPHC: 53 (60%) (f) AAM SC: 1884 (60%)	NHSRC Quality Certification Unit
144	Output	Public health facilities with Kayakalp score greater than 70%	Number of public health facilities with Kayakalp score more than 70% (on external assessment)	Number	2653	2919	NHSRC Quality Certification Unit
145	Output	NQAS Certified public health facilities (National + State) in Aspirational Block	Percentage of NQAS Certified Facilities (%) in Aspirational Block	Percentage	45%	65%	State Report
<b>Free Diagnostic Service Initiative</b>							
146	Output	Free Diagnostic s Services	Number of diagnostic test available at DH/SDH/CHC/PHC as per NEDL 2019 Calculated as average of total number of diagnostics tests available at each level of health facility divided by the minimum number of diagnostics tests specified in FDSI (14/63/97/111/134) guidelines <b>Numerator:</b> Number of Healthcare facility undertaking full menu of essential diagnostic tests prescribed in the FDSI guidelines <b>Denominator:</b> Total number of Primary Healthcare Facilities available in the State (Upto DH level)	Percentage	50%	60%	HMIS/ State Reports/ Dashboards/ Assessment report
<b>Blood Services &amp; Disorders</b>							
147	Output	Number of District Hospitals having Blood Banks	Percentage(%)of District Hospitals having functional Blood Bank	Percentage	100%	100%	E -Raktkosh, Blood Cell
148	Output	Voluntary blood donation	Voluntary blood donation against the blood collection units targeted for replacement/ donation	Percentage	100%	100%	E -Raktkosh, Blood Cell
149	Output	Blood component separator	Percentage of blood banks having blood component separator	Percentage	37% (21 nos)	56% (32 nos)	Blood Cell
150	Output	No of ICHH centres in the state at high prevalence districts	Number of integrated centres for hemoglobinopathies & haemophilia in the district against no. of identified districts with high prevalence of hemoglobinopathies & haemophilia	Number	30	30	Blood Cell
151	Output	Sickle Cell Disease	Percentage of population screened for sickle cell disease against annual target	Percentage	100% (22,63,737)	100% (22,38,594)	Sickle Cell Portal
152	Output	Sickle Cell Disease	Percentage of people registered on Sickle portal with ABHA ID	Percentage	20%	30%	Sickle Cell Portal

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Sl No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
153	Output	Sickle Cell Disease	Distribution of Sickle cell Status card	Number	100% (22,63,737)	100% (22,38,594)	Sickle Cell Portal
<b>Comprehensive Primary Healthcare (CPHC)</b>							
154	Output	Number of functional Ayushman Arogya Mandir	Numerator: Total functional AAM in the state/ UT Denominator: Total primary healthcare facilities in State/UT as per the latest RHS	Percentage	100%	100%	AAM Portal
155	Output	AAM providing expanded service packages	Numerator: No. of AAM providing all 12 expanded range of services. Denominator: Total functional AAM in the state/ UT	Percentage	100%	100%	AAM Portal
156	Output	Footfall at AAM (Receiving services for Preventive, promotive, curative, rehabilitative and palliative care)	Numerator: No. of AAM reporting at least average footfall as per (norm of 60 footfalls per 1000 population): - Rural: SHC-AAM @ 300/month; PHC-AAM @ 1800/month - Urban: U-AAM @ 1200/month; UPHC-AAM @ 3000/month - Tribal: SHC-AAM @ 180/month; PHC-AAM @ 1200/month Denominator: Number of operational AAM in rural areas (SHC- AAM+PHC-AAM)	Percentage	95%	100%	AAM Portal
157	Output	Medicine at AAM	% of AAM where at least 80% of expanded range of medicines as per Essential list (Medicines: SHC-AAM- 105; PHC-AAM-171) against number of functional AAM.	Percentage	100%	100%	AAM Portal AS per UT essential Drug List for AAM- SC- 23 For AAM-PHC-71
158	Output	Diagnostic s at AAM	Percentage of AAM out of total functional AAM in State/UT with availability of diagnostics as per Essential list (Diagnostics: SHC-AAM-14; PHC-AAM-63) against number of functional AAM.	Percentage	100%	100%	AAM Portal
159	Output	Adoption of SASHAKT & Training of AAM primary health care teams on expanded service packages	Numerator: No of ABHA verified primary health care team members (ASHA, MPW, CHO, SN and MO) registered in SASHAKT portal Denominator: Total number of in position primary healthcare team members (ASHA, MPW, CHO, SN and MO) in State/UT	Percentage	50%	85%	SASHAKT portal
160	Output	NCD Screening	a) % of Individuals screened for NCD at AAM - Hypertension and Diabetes Numerator: Individuals screened for NCD- Hypertension and Diabetes Denominator: 30+ population of State/UT	Percentage	HTN-DM-	HTN-DM-	National NCD portal
161	Output		b) % of Individuals screened for NCD at AAM - Oral cancer, Breast Cancer and Cervical Cancer Numerator: Individuals screened for NCD- cancers Denominator: 30+ population of State/UT	Percentage	OC-BC-CC-	OC-BC-CC-	National NCD portal
162	Output	Wellness sessions at AAM	Numerator: Number of wellness sessions conducting a minimum of 10 wellness sessions per month Denominator: Total functional AAM in the state)	Percentage	100	100	AAM Portal
163	Output	Tele- consultations started at AAM	Numerator: Number of AAM conducting a minimum of 25 teleconsultations per month Denominator: Total functional AAM in the state)	Percentage	65	70	eSanjeevani portal
164	Output	JAS functioning	Numerator: Number of JAS constituted at AAM conducted at least 10 meetings in a year Denominator: Total no of JAS constituted AAM	Percentage	80	90	AAM Portal
165	Output	Functional AAM awarded Kayakalp Awards	Numerator: Number of AAM scoring more than 70% in Kayakalp peer assessment Denominator: Total number of functional AAM	Percentage	50%	70%	Kayakalp report
166	Output	Functioning of VHSNC(in Rural areas)	Numerator: Number of VHSNCs that conducted at least 10 meetings in the year (against the norm of minimum one meeting every month) Denominator: Total VHSNCs formed	Percentage	99	99	AAM Portal

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
167	Output	AAM primary healthcare team's incentives	a) Numerator: Number of AAM whose primary healthcare teams have received timely incentives (Performance Linked Payment and Team Based Incentives) minimum 10 times a year Denominator: Total number of functional AAM	Output	100	100	AAM Portal
<b>AYUSH</b>							
168	Output	Co- location of AYUSH facilities	Number of Public Health Facilities with Co-located AYUSH OPD Services	Number	1485	1485	State Report
<b>Human Resource for Health</b>							

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
169	Output	NHM HR in place	% of HRH in Position out of total posts approved under NHM*	Percentage	90%	92%	NHSRC HRH Division
170	Output	HRH availability as per IPHS	% of HRH available as per IPHS (HR in Place/IPHS requirement x 100) for six key staff categories*	Percentage			NHSRC HRH Division
			o MPW (Male+Female)		72%	78%	NHSRC HRH Division
			o Staff Nurses		40%	50%	NHSRC HRH Division
			o Lab technicians** (*Reduction in gap% applicable only for those levels of facilities where lab services including HR for lab have been outsourced)		45%	50%	NHSRC HRH Division
			o Pharmacists		88%	90%	NHSRC HRH Division
			o Medical Officer-MBBS		75%	80%	NHSRC HRH Division
			o Clinical specialists		76%	80%	NHSRC HRH Division
<b>Biomedical equipment Management &amp; Maintenance Program (BMMP)</b>							
171	Output	Equipment CAMC/ AMC	% of Equipment Covered under Comprehensive Maintenance Contract/ Annual Maintenance Contract/ BMMP Calculated as total number of equipment covered under CMC/AMC divided by total number of equipment available at the facility (Average of all Facilities in percentage)	Percentage	77% under BEMP 10% under Warranty 1% under progress to include under BEMP 1% Not In BEMP scope 3% for Condemnation Total target Asset:63866	77% under BEMP 10% under Warranty 1% under progress to include under BEMP 1% Not In BEMP scope 3% for Condemnation Total target Asset:63866	BMMP Dashboard/ State Equipment Inventory Software (e- upkaran)
172	Output	Equipment Upkeep time	% upkeep time of of equipment uptime Calculated as average of upkeep time of all equipment at each level of facility against the specified uptime in BMMP (DH- 95%/CHC-90%/PHC-80%)	Percentage	A.DHH-97% B.CHCs & SDHs-95% C.PHCs-90%	A.DHH-97% B.CHCs & SDHs-95% C.PHCs-90%	BMMP Dashboard/ State Equipment Inventory Software (e- upkaran)
173	Output	AERB Compliance	% of Public Health Facility certified as per AERB compliance Calculated as average number of health facilities (having X- Ray related equipment) registered on eLORA portal for AERB license divided by the total number of health facilities having X-Ray related equipment.	Percentage	40%	100%	AERB Compliance certification dashboard
<b>Health Management Information System (HMIS)</b>							
174	Output	HMIS Reporting	Ensuring timely reporting of data by the State Data Manager/M&E/HMIS personnel by 20th of following month. <b>Numerator:</b> No. of health facilities reported data by 20th of following month. <b>Denominator:</b> Total no. of health facilities.	Percentage	99	99	HMIS IHIP Portal
<b>Public Health Infrastructure</b>							

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SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2024-25	Target 2025-26	Source of data
175	Output	Infrastructure (Rural and Urban health care facilities- a. DHH, b. SDH, c. CHCs, d. UCHCs, e. UPHCs, f. PHCs, g. Sub Health Centers, h. Others)	Number of new constructions completed and handed over against the projects sanctioned.	Number	(a) CHCs-20 (b) PHCs- 114 (C) Sub Health Centers- 430 (d) Others- 30 Total = 594	(a) CHCs-30 (b) PHCs- 170 (C) Sub Health Centers- 414 (d) Others-8 Total = 622	State Report
176	Output	IPHS compliance	% Of health care facilities achieved IPHS compliance.	Percentage	10	25	State Report
177	Output	GRS & Health Help Desk	Average calls received per day (output measurement by call efficiency): - numerator- Total calls received per day per call operator against the denominator - Average 130 call received per Call operator per day with avg. call handling time of 3 minutes.	Percentage	85	90	State Report
178	Output	GRS & Health Help Desk	% Of calls resolved out of calls received service wise a. Health Information, b. Counselling, c. SUMAN, d. ECD.	Percentage	100	100	State Report
179	Output	National Ambulance Services	% of Ambulances functional as per population norms (one BLS per 1 lakh Population and One ALS for every 5-lakh population)	Percentage	152	152	State Report
180	Output		Average response time per vehicle	Minutes	20min	20min	State Report
181	Output	MMU	Avg. no. of trips per MMU per month	Numbers	---	---	State Report
182	Output		Average no. of lab Number investigations per MMU per day.	Numbers	---	---	State Report
183	Process	DH Strengthening as knowledge Hub	% of District hospitals- initiated any of the following courses:-				
			(a) DNB courses	Percentage	100	100	State Report
			(b) Nursing courses -				
			ANM	Percentage	21	21	State Report
			GNM	Percentage	8	15	State Report
BSC NURSING	Percentage	10	15	State Report			
(C) Allied health care courses like CPS	Percentage	-	-	State Report			

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### Conditionalities Framework 2024-26

Full Immunization Coverage (%) to be treated as the screening criteria. Conditionalities to be assessed only for those EAG, NE and hilly States which achieve at least 85% full Immunization Coverage. For rest of the States/UTs, the minimum full Immunization Coverage to be 90%.

Sl. No	Conditionalities	Indicators of 2024-26	Source of verification	% Incentive/ Penalty
		<b>Based on overall score of AAM conditionality (out of 100 marks)</b>		
1	AAM State/UT Score	a. Score more than 75: +25 b. Score more than 50 or less than or equal to 75: +15 c. Score more than 25 but less than or equal to 50: -15 d. Score less than or equal to 25: -25	AAM portal	+25 to -25
		<b>DVDMS implementation up to AAM-SC</b>		
2	Implementation of DVDMS or any other logistic management IT software with API linkages to DVDMS up to PHC level	a. In 100% AAM-SHC: +5 b. 80% or above but less than 100%: +3 c. 50% or above but less than 80%: 3 a. In less than 50%: -5	DVDMS Portal or Any other similar system with API linkages to DVDMS	+5 to -5
3	Registration of pregnant women and children (0-1) on RCH or equivalent portal	% Registration against estimated beneficiaries (Pregnant woman & Child registration 0-1 yr) on Pro- rata basis a. 100% Registration: +5 b. 80% or above but less than 100%: +3 c. 50% or above but less than 80%: No Penalty a. d. less than 50%: -5	RCH Portal or similar state portal	+5 to -5
4		<b>Human Resources for Health</b>		
4 (A)	A. Availability of regular service delivery HRH as per IPHS norms	Percent of service delivery HRH in-place in the regular cadre against IPHS norms for the six key categories as on 31st March 2025 and 31st March 2026 : MPW (Male + Female), Staff Nurses, Lab Technicians, Medical Officers (MBBS) and Specialists a. At least 80%: +7.5 b. At least 70%,, but less than 80%: +5 c. than 80%: +5 d. At least 60%, but less than	State notifications, advertisements and PIP, HRH Division of NHSRC	+7.5 to -7.5

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Sl. No	Conditionalities	Indicators of 2024-26	Source of verification	% Incentive/ Penalty
		70%: Nil d. Less than 60%: -7.5		
4 (B)	B. In-place contractual HRH against the approved posts	Percentage of in-place contractual service delivery HRH of MPW (Male and Female), Staff Nurses, Lab technicians, Medical Officers (MBBS) and Specialists as on 31st March 2025 and 31st March 2026: a. More than 90%: +7.5 b. More than 70% but up to 90%: +5 c. More than 60% but up to 70%: +3 d. 60% and below: -7.5	State notifications, advertisements and PIP, HRH Division of NHSRC	+7.5 to -7.5
5	District wise RoP uploaded on NHM website	District wise RoP uploaded on NHM website within 30days of issuing of RoP by MoHFW to Stateor by 31 <sup>st</sup> May 2024 (whichever is later) a. 100% districts whose ROPs forFY2022-24 are uploaded on state NHM website: +5 b. Fewer than 100% districts whose ROPs for FY 2022-24 are uploaded on state NHM website: -5	State NHM website and D.O.letter	+5 to -5
6		<b>Implementation of National Viral Hepatitis Control Programme (NVHCP)</b>		
6 (A)	A. Percentage put on treatment for hepatitis B against the target	a. More than 90%: incentive 3 points (+3) b. More than 60% upto 90%: incentive 1 points (+1) c. More than 30% upto 60%: penalty 1 points (-1) d. 30% or Less: penalty 3 points (-3)	Report from NVHCP Division, MoHFW	+3 to -3
6 (B)	B. Percentage put on treatment for hepatitis C against the target	a. More than 90%: incentive 3 points (+3) b. More than 60% to 90%: incentive 1 points (+1) c. More than 10% to 60%: penalty 1 points (-1) d. 10% or Less: penalty 3 points(-3)	Report from NVHCP Division, MoHFW	+3 to -3
6 (C)	C. Percentage of pregnant women screened for hepatitis B (HBsAg)	a. More than 90%: incentive 3 points (+2) b. More than 70% to 90%: incentive 1 points (+1)	Report from NVHCP Division, MoHFW	+2 to -2


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Sl. No	Conditionalities	Indicators of 2024-26	Source of verification	% Incentive/ Penalty
	against the target (Institutional Deliveries)	c. More than 50% to 70%: penalty 1 points (-1) d. 50% or Less: penalty 2 points(-2)		
6 (D)	D. Percentage of newborns administered HBIG among newborns delivered to HBsAg positive pregnant women at health care facility	a. More than 90%: incentive 2 points (+2) b. More than 70% to 90%: incentive 1 points (+1) c. More than 50% to 70%: penalty 1 points (-1) d. 50% or Less: penalty 2 points (-2)	Report from NVHCP Division, MoHFW	+2 to -2
7		<b>Implementation of National Mental Health Program (NMHP)</b>		
7 (A)	A. Actions taken for fulfilment of provisions under Mental Healthcare Act, 2017 (MHCA 2017)	State has established State Mental Health Authority: a. If Yes: +2 b. If not: -2  State has established Mental Health Review Boards: a. If Yes: +2 b. If not: -2  State has created State Mental Health Authority Fund: a. If yes: +1  If not: -1	Report from Mental Health division, MoHFW	+5 to -5
8		<b>National Tuberculosis Elimination Programme (NTEP)</b>		
8 (A)	A. Percentage of Districts achieving 90% of TB Notification targets	a. More than 80% of districts achieving 90% of target: +5 b. 60% to 80% of districts achieving 90% of target: +2.5 c. Less than 60% of districts achieving 90% of target: -2.5 d. Less than 40% of districts achieving 90% of TB Notification target: -5	NTEP Nikshay Portal & AAM Portal	+5 to -5
8 (B)	B. Percentage of Districts achieving more than 85% of treatment success rate	a. More than 80% of districts achieving 90% of target: +5 b. 60% to 80% of districts achieving 90% of target: +2.5 c. Less than 60% of districts achieving 90% of target: -2.5 d. Less than 40% of districts achieving 90% of target: -5	NTEP Nikshay Reports	+5 to -5
8 (C)	C. Percentage of AAM providing drugs	a. More than 80% of AAM providing drugs to TB patients: +5	AAM report	+5 to -5

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Sl. No	Conditionalities	Indicators of 2024-26	Source of verification	% Incentive/ Penalty
	to TB patients	b. 60% to 80% of AAM providing drugs to TB patients: +2.5 c. Less than 60% of AAM providing drugs to TB patients: -2.5 d. Less than 40% of AAM providing drugs to TB patients: -5		
9		Implementation of National Quality Assurance Programme and LaQshya		
9 (A)	A. NQAS certification (against the target)	a. More than 80% of the targets achieved for the FY: Incentive 10 points (+10) b. Between 51-80% of the targets achieved for the FY: Incentive 5 points (+5) c. Between 25-50% of the targets achieved for the FY: Penalty 5 points (-5) d. Less than 25% of the targets achieved for the FY: Penalty 10 points (-10)  <i>* Target for percent of public health facilities certified under NQAS (as per level of the facilities) will be taken from the attached DO letter as Annexure-A</i>	Quality and Patient Safety Division, NHSRC	+10 to -10
9 (B)	B. LaQshya certification (Labour Room and Maternity Operation Theatre)	a. More than 80% of the targets achieved for the FY: Incentive 5 points (+5) b. Between 51-80% of the targets achieved for the FY: Incentive 3 points (+3) c. Between 25-50% of the targets achieved for the FY: Penalty 3 points (-3) d. Less than 25% of the targets achieved for the FY: Penalty 5 points (-5)	Quality & Patient Safety Division, NHSRC and	+5 to -5
10	Compliance to IPHS for infrastructure	<b>FY 2024-25</b> a. more than 15%: incentive: 20 points b. More than 10% up to 15%: 12 points c. More than 5% to 10%: Incentive 6 points d. Up to 5%: 3 points e. No increase: no penalty and no incentive: 0 f. Any decline: penalty 20 points	State Reports	+20 to -20


  
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Sl. No	Conditionalities	Indicators of 2024-26	Source of verification	% Incentive/ Penalty
		<b>FY 2025-26</b> a. more than 30%: incentive: 20 points b. More than 20% up to 30%: 12 points c. More than 10% to 20%: Incentive 6 points d. Up to 10%: 3 points e. No increase: no penalty and no incentive: 0 f. Any decline: penalty 20 points  All facilities put together: SHC, PHC, CHC, SDH and DH, cumulative compliance would be taken		
11	Increase in State Health Budget	a. Increase in State health budget by 10% or more over previous year's budget: incentive 10 points b. Less than 10% increase: 0 For calculation of increase in budget, entire State budget for public health, medical education, and AYUSH would be considered	State reports State Health Budget	10 to 0
12		National Programme for Prevention and Control of Non Communicable Diseases (NP-NCD)		
12 (A)	A. % of annual screening for Hypertension of target population (30+)	a. >70%: +5 b. >60%: +4 c. >50%: +3 d. >40%: +2 e. >30%: +1 f. <30%: 0 g. <20%: -3 h. <10%: -5	National NCD Portal	+5 to -5
12 (B)	B. % of annual screening for Diabetes of target population (30+)	a. >70%: +5 b. >60%: +4 c. >50%: +3 d. >40%: +2 e. >30%: +1 f. <30%: 0 g. <20%: -3 h. <10%: -5	National NCD Portal	+5 to -5
12 (C)	C. % of people on standard of care for hypertension against the targeted population (target population: proportionate estimated)	a. >60%: +5 b. >50%: +4 c. >40%: +3 d. >30%: +2 e. <30%: 0 f. <20%: -3 g. <10%: -5	National NCD Portal	+5 to -5

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Sl. No	Conditionalities	Indicators of 2024-26	Source of verification	% Incentive/ Penalty
	population for target 75 million by 2025)			
12 (D)	D. % of people on standard of care for diabetes against the targeted population (target population: proportionate estimated population for target 75 million by 2025)	a. >60%: +5 b. >50%: +4 c. >40%: +3 d. >30%: +2 e. <30%: 0 f. <20%: -3 g. <10%: -5	National NCD Portal	+5 to -5

[1] The Conditionalities apply to both urban as well as rural areas/facilities.

[2] Numbers given in the table are indicative of weights assigned. Actual budget given as incentive /penalty would depend on the final calculations and available budget. The total incentives to be distributed among the eligible States would be 20% of the total NHM budget.

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## Ayushman Arogya Mandir Scoring for NHM Conditionality FY 2024-25 and 2025-26

### Method for giving Score to the State for AAM (it has two Parts):

1. Indicator for achieving State Level AAM operationalization Targets:
  - a. State level 100% of AAM operationalization against latest RHS – 15 marks
  - b. Creation of regular cadre of CHO - 10 marks
2. AAM functionality - 75 marks, consists of 9 indicators – Average scoring of all the functional AAM will be taken to arrive at the same.

Sl. No	Proposed Indicator	Unit	FY 2024-25		FY 2025-26		Source
			Max Score for SHC-AAM/ U-AAM	Max Score for PHC-AAM	Max Score for SHC-AAM/ U-AAM	Max Score for PHC-AAM	
1	<b>HWC-01:</b> Functional AAM providing all 12 expanded range of services	%	10	5	10	5	AAM Portal
2	<b>HWC-02:</b> Functional AAM reporting at least average footfall as per (norm of 60 footfalls per 1000 population): – Rural: SHC-AAM @ 300/month; PHC-AAM @ 1800/month – Urban: U @ 1200/month; UPHC-AAM @ 3000/month – Tribal: SHC-AAM @ 180/month; PHC-AAM @ 1200/month	%	10	10	10	10	AAM Portal
3	<b>HWC-03:</b> AAM fulfilling expanded range of medicines and diagnostics as per Essential list of both (Medicines: SHC-AAM- 105; PHC-AAM- 171 & diagnostics: SHC- AAM- 14; PHC - AAM- 63)	%	10	5	10	5	AAM Portal
4	<b>HWC-04:</b> AAM providing a minimum of 10 Wellness sessions per month	%	10	10	10	10	AAM Portal
5	<b>HWC-05:</b> Functional AAM scoring more than 70% in Kayakalp peer assessment	%	10*		10*		Kayakalp report

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Sl. No	Proposed Indicator	Unit	FY 2024-25		FY 2025-26		Source
			Max Score for SHC-AAM/ U-AAM	Max Score for PHC-AAM	Max Score for SHC-AAM/ U-AAM	Max Score for PHC-AAM	
6	<b>HWC-06:</b> Utilization of National NCD App for screening and tracking of all NCD patients.	%	5	10	5	10	National NCD Portal
7	<b>HWC-07:</b> % of operational AAM providing active Teleconsultation services	%	5*		5*		e-Sanjeevani application
8	<b>HWC-08:</b> Functional AAM with JAS constituted and conducted at least 10 meetings in a year.	%	10	10	10	10	AAM Portal
9	<b>HWC-09:</b> AAM whose primary healthcare teams have received timely incentives ( <i>Performance Linked Payment and Team Based Incentives</i> ) at least 10 times a year	%	5	10	5	10	AAM Portal

\* For Kayakalp and teleconsultation any AAM (SHC or PHC) fulfilling the criteria are scored.

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# NHM PIP

## 2024-26

Programme Implementation Plan

**RCH-1**  
**Maternal Health**



RCH-1\_Maternal Health

S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
<b>Total RCH-1 (Maternal Health)</b>						<b>46.18</b>	<b>46.18</b>		
<b>1</b>	<b>Village Health &amp; Nutrition Day (VHND)</b>					-	-		
<b>1.1</b>	<b>Monthly Village Health and Nutrition Days</b>					-	-	<p><b>Background:</b> VHSNDs are organised at AWC level once in a month on fixed days by ANM, AWW and ASHA. These platforms are to provide ANC registration, ANC check up and identification high risk pregnancies, identification SAM children counseling to ANC, lactating mothers and mothers of children within age group of 0-5 years. However there are some hard to reach areas in which the integrated - VHSND and RI sessions are held on quarterly basis.</p> <p><b>Proposal with justification:</b>                      Total Session Planned : 597879                      Regular Sessions: 580223                      Difficult area sessions to be held quarterly :17656 (From 4418 notified difficult villages )</p>	
<b>1.1.1</b>	Organisation cost for Regular sessions	Per session	100	0.00	0	-	0	<p><b>Ongoing Activity</b>                      Expected session to be held: 98% of total session planned i.e. 568619                      Organization cost for sessions at urban areas have been proposed under NUHM PIP.</p>	
<b>1.1.2</b>	Organisation cost for Difficult Area Sessions	Per session	2000	0.02	0	-	0	<p><b>Ongoing Activity</b>  <b>Total difficult to reach villages:</b> 17656 nos  <b>Frequency of sessions planed:</b> Quarterly                      Budget: Rs. 2000/- (Mobility-Rs. 1500/- + Session organizing cost- Rs. 500/-)                      Budgeted: 10594 (60% of sessions)</p>	
<b>1.1.3</b>	Printing of reporting forms & formats	Lumpsum	562100	5.62	0	-	0	<p>Proposal1: Sub centre level monthly reporting by ANM (1 Booklet containing 100 pages with self carbonated duplicate pages) for all 6688 sub centers (@ Rs. 75/- X (6688+548)=7236                      Proposal2: VHSND/UHSND monitoring format for BPMU/UPHC and DPMU /CPMU (1 Booklet containing 100 pages for 314 blocks, 30 DPMUs, 5 CPMUs (5 booklets) &amp; 116 UPHC) (@ Rs. 40 X 485(314+30+116+25)</p>	
<b>1.2</b>	ASHA Incentive for mobilising and attending VHSND	Per session	200	0.00	0	-	0	<p><b>Ongoing activity</b> - part of routine and recurring activity  <b>Background:</b> ASHAs are involved in the activity to mobilize the beneficiaries to the session site for which they are incentivized.  <b>Current Status:</b> In 98% of sessions ASHAs are involved in mobilization of all beneficiaries with deliverable : 85% targeted beneficiaries (PW, PNC mother, Children 0-5 years) mobilised to attend VHSND.  <b>Proposal:</b>                      Total Sessions expected to be held at VHSND: 579213                      Total Sessions expected to be held at UHSND: 52608                      Total Session VHSND+UHSND: 631821                      ASHA incentive proposed for 90% of VHSND &amp; UHSND sessions : 568640</p>	
<b>2</b>	<b>Pregnancy Registration and Ante-Natal Checkups</b>					-	-		

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
2.1	Preparation of due list of ANC beneficiaries to be updated on monthly basis.	Per ASHA p.m	300	0.00	0	-	0	-	<p><b>Ongoing Activity-</b> Part of Routine and recurring Activities of ASHA</p> <p><b>Background:</b> ASHAs to prepare the list of ANC beneficiaries for regular follow up to attend VHSND, PMSMA and other HR pregnant women.</p> <p><b>Current Status:</b> ASHA with the support of ANM prepares the list. 100% of ASHAs prepares the ANC beneficiary list</p> <p><b>Proposal:</b> ANC due list is prepared by 49990 ASHAs. Budgeted 90%.</p>	
2.2	Printing									
2.2.1	Mother & Child Protection Card (MCP Card- Revised)	Per Card	15	0.00	0	-	0	-	<p><b>Background:</b> Every registered pregnant woman is provided with MCP card which provides her information regarding the services she has received for her and her child including immuniation. This card is also used as IEC tool having information for both mother and baby.</p> <p><b>Current status:</b> MCP card is printed every year as per the expected number of ANC cases</p> <p><b>Proposal:</b> Mother &amp; Child Protection Card (MCP Card- Revised) : MCP Card for 665678 ANC cases (665678 ANC cases X 1 per case + 10% (66567) buffer stock = 732245 (@Rs. 15/- (recent tender rate)</p>	
2.2.2	Family & Couple Counseling Booklet (Nirapada Matrutwa)	Per Case	10	0.00		-		-	<p><b>Background:</b> Every registered pregnant woman is provided with Family &amp; Couple Counseling Booklet (Nirapada Matrutwa) which used as IEC tool having information for both mother and baby, family planning methods, nutrition and various schemes for mother and child.</p> <p>Current status: Family &amp; Couple Counseling Booklet (Nirapada Matrutwa) is printed every year as per the expected number of ANC cases</p> <p><b>Proposal:</b> Family &amp; Couple Counseling Booklet (Nirapada Matrutwa) :Family &amp; Couple Counseling booklet for 665678 ANC cases (665678 ANC cases X 1 per case + 10% (66567) buffer stock = 732245 (@ Rs. 10/- To be met out of State specific scheme i.e. SAMPURNA</p>	
3	Janani Suraksha Yojana (JSY)						43.26	43.26	<p><b>Total Expected Delivery - 732093</b></p> <p><b>Reported institutional delivery at Public facilities - 471652 (78.5%)</b></p> <p><b>Reported institutional delivery at Private facilities - 129088 (21.5%)</b></p> <p><b>Total reported institutional delivery - 600740</b></p> <p><b>Total reported home delivery - 7196</b></p> <p><b>Total reported delivery - 607936</b></p> <p><b>Source: HMIS</b></p>	
3.1	Home deliveries	Per beneficiary	500	0.01	0	-	0	-	<p><b>Background:</b> Home delivery cases belonging to BPL category are incetivised @ Rs. 500/- under JSY</p> <p><b>Current Status:</b> 626 cases were paid during 2022-23</p> <p><b>Proposal:</b> Keeping in view the trend of achievement 10% of expected home deliveries are targeted for incentive</p> <p>Proposed for JSY benefit -10% of Expected home delivery : 719 (Proposed based on payment trend)</p>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
3.2	Institutional deliveries					30.90		30.90	<p><b>Background:</b> Institutional delivery in public health facilities and accredited private health facilities are incentivised @ Rs. 1400 for rural areas beneficiaries and Rs. 1000/- for Urban area beneficiaries</p> <p><b>Current Status:</b> During 2022-23, 471652 nos of deliveries conducted and reported in public health facilities &amp; 4715 delivery conducted in accredited private health facilities = 476367 delivery</p> <p><b>Proposal:</b> Target at Rural (Public facilities + accredited private health facilities) - 436367 Target at Urban (Public facilities + accredited private health facilities) - 40,000 (Reported 33,000 delivery during 2022-23)</p>
3.2.1	Rural	Per beneficiary	1400	0.01	0	-	0	-	
3.2.2	Urban	Per beneficiary	1000	0.01	3090	30.90	3090	30.90	
3.2.3	C-sections	Per case	3000	0.03	0	-	0	-	5 % of total C section delivery at public health facility
3.3	<b>JSY Incentive to ASHA</b>			-		<b>12.36</b>		<b>12.36</b>	
3.3.1	For Rural Areas	Per Case	600	0.01	0	-	0	-	Budgeted for 100% of targeted of rural ID
3.3.2	For Urban Areas	Per Case	400	0.00	3090	12.36	3090	12.36	Budgeted for 100% of targeted of urban ID
3.3.3	JSY Administrative Expenses	Lumpsum	15,450	0.15		-			<p><b>Total JSY Budget:</b> Rs.6705.86 lakhs (excluding ASHA incentive)</p> <p>- Administrative Cost: Rs. 33.19 Lakhs per each year (0.5% of total cost)</p> <p><b>Budget Shifted to HSS-7, SL No 194</b></p>
4	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)					1.59		1.59	
4.1	Free Diet	Lumpsum				1.59		1.59	<p><b>Ongoing Activity Proposal</b></p> <p>1.Diet to beneficiaries attending PMSMA (2022-23 status - 37% of reported ANC cases) - 50% of expected ANC beneficiaries i.e. 332839 (665678 x 50%) are expected to attend PMSMA @Rs.110/- per day x 1 day</p> <p>2.Diet to beneficiaries admitted at SC &amp; PHC (N) Delivery Points where sanctioned beds are not available (Delivery in SC &amp; PHC (N) in 2022-23: 44396) &amp; expected same number in 2024-25/2025-26</p> <p>Budget Proposed: 22198 (50% of expected delivery at that level) @Rs.110/- per day x 2 days</p> <p>3. Diet for other insts. having sanctioned bed strength has been provisioned under State budget.</p> <p>Justification for Targeted beneficiaries: Previous year achievement trend.</p> <p>Justification for unit cost: prevailing rate of diet in public health intuitions for general patients (GoO Notification No.18461 dtd.03.08.2023)</p>
4.1.1	For PMSMA beneficiaries	Per day	110	0.00	1445	1.59	1445	1.59	
4.1.2	Expected deliveries at SC & PHC(N) DP	Per day	110	0.00	0	0.00	0	-	

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S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
4.2	Free Blood Transfusion							Proposal under the given head is dropped in view of free blood services in the state covering all population <b>Budget Proposed in HSS-2 Blood Services Sl. No-155.</b>	
4.3	Free Diagnostic Services	Per case	350	0.00	0	0.00	0	<p><b>Ongoing Activity</b>  <b>Background:</b> AS per mandate of PMSMA all ANC beneficiaries should have at least one ultrasound during the pregnancy period. In order to have maximum coverage for ultrasound, the private ultrasound units are empanelled for the purpose. These units will provide free of cost ultrasound services to beneficiaries and the funds @ Rs.350/- per beneficiary is reimbursed to the empanelled unit.  <b>Current Status:</b> During the year 2022-23, 200500 ANC cases have received ultrasound services in empanelled clinic  <b>Proposal:</b>                      This activity will target coverage of ultrasound for all pregnant woman. The ultrasound facility is available in both public and private facilities. The budget provision is done for private empanelled ultrasound facilities . The referral cases from PMSMA clinic and from the public health facilities which do not have USG machines will be covered in the empanelled private USGs clinic. The unit cost per USG is proposed @ Rs. 350/- per case for private empanelled facilities only                      Total expected pregnancies - 665678                      Expected to be covered in private clinics 30% of ANC cases- 199703</p>	
4.4	Free Drugs and Consumables					0.00	0.00		

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S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
4.4.1	IFA tablets for Pregnant & Lactating Mothers	Per tab	0.12	0.00		0.00		<p><b>Ongoing Activity</b>  <b>Background:</b> All pregnant woman will be given 1 tab IFA for 180 days from 2nd trimester and all PNC cases will be given 1 tab of IFA for 180 days after delivery as prophylactic dose . Incase of anemic pregnant woman or lactating mother double dose of IFA is provided.  <b>Current Status:</b> 95% of PW and 93% of PNC mothers are provided 180 IFA tabs during pregnancy and PNC period.  <b>Proposal:</b>            Drugs Specification (Revised in the current year) : 60 mg elemental Iron + 500 mcg Folic Acid            Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH            Total pregnant women - 665678            Total PNC - 607936  <b>Recommended as per NPCC comments follows:</b>            1. Procurement of 229250520 red IFA tablets for prophylactic treatment of 1273614 pregnant and lactating women            2. Procurement of 28916280 IFA tablets for therapeutic management of 160646 anemic pregnant and lactating women @Rs 0.12 per tablet  <b>Budget Shifted to RCH-7 Nutrition, SL NO. 52, as per recommendation of NPCC</b></p>	
4.4.2	Calcium Tablets	Per tab	0.2	0.00	0	0.00	0	<p><b>Ongoing Activity</b>  <b>Background:</b> All pregnant woman will be given 2 tabs of calcium daily for 180 days from 2nd trimester and all PNC cases will be given 2 tab of calcium for 180 days after delivery as prophylactic dose .  <b>Current Status:</b> 96% of PW and 93% of PNC mothers are provided 360 calcium tabs during pregnancy and PNC period.  <b>Proposal:</b>  <b>Calcium supplementation</b> during pregnancy is implemented in all 30 districts.            - Training at all levels has been completed.            Drugs Specification : 500 mg elemental Calcium &amp; 250 IU Vitamin D3            Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH              Total pregnant women - 665678            Total PNC - 607936  <b>Total Beneficiaries</b> : 665678+607936=1273614            Provisioned of 2 for all PW &amp; all PNC mother for 180 days= 458501040 tabs.            Buffer 10%= 45850104            Total Requirement of Tablets:504351144 tabs.</p>	

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S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
4.4.3	Albendazole tablets	Per tab	1.5	0.00		0.00		<p><b>Ongoing Activity</b> Background: De-worming during pregnancy is implemented in all 30 districts. Training at all levels has been completed. All pregnant woman will be given one albendazole during 2nd trimester. Current status: During 2022-23, 86.4_% of PW were provided deworming tablet during 2nd trimester</p> <p><b>Proposal:</b> Drugs Specification : 400 mg , chewable Level at which the item would be used : SC Total pregnant women - 665678 <b>Provisioned of 1 tablet per PW for all PW (665678)</b> <b>Budget Revised and shifted to RCH-7 , Nutrition SI No. 52 as per recommendation of NPCC</b></p>	
4.4.4	Other Drugs & Consumables			0.00		0.00		- To be met out of state supply	
5	Janani Shishu Suraksha Karyakram (JSSK) - Transport					0.00	0.00		
5.1	Free Referral Transport - JSSK for Pregnant Women	Per case	500	0.01	0	0.00	0	<p><b>Ongoing Activity</b> <b>Background:</b> As mandate of JSSK all pregnant woman and Complicated PNC cases up to 42 days of delivery will be provided free referral transportation to the public health facility. Hence free transportation is provisioned as one of the entitlements under JSSK. <b>Current status :</b> During the year 2022-23 , 376141 pregnant woman have availed free referral transportation from home to facility and 92133 have availed free referral for higher facility. <b>Proposal:</b> Targeted beneficiaries - 471652</p>	
6	Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)					0.00	0.00		

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S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
6.1	PMSMA activities at State/ District level					0.00	0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b> PMSMA clinic day is organised 9th of every month with aim to ensure each pregnant woman must get at least one check up by O &amp; G Spl or trained MBBS doctor so that high risk condition can be screened and appropriate management of high risk condition can be done. Private practitioners are also encouraged under the programme as volunteer. All these services, investigations, ultrasound etc along with diet are provided free of cost. Extended PMSMA are the days organised for check up of high risk cases. Each high risk cases are provided support for maximum of three visits also with provision of ASHA to accompany.  <b>Proposed Budget:</b>            1. Rs.0.50 lakhs per dist with &lt;=5 blocks x 4 = Rs. 2.00 Lakhs            2.Rs.1.00 lakh with 6 to 10 block x 13 = Rs. 13.00 Lakhs            3. Rs.1.50 lakhs with 11 to 15 blocks x 10= Rs. 15.00 Lakhs            3. Rs.2.00 lakhs with &gt; = 16 blocks x 3= Rs. 6.00 Lakhs  <b>Total Proposed: Rs. 36.00 Lakhs,</b>            The fund will be released to institutions for taking of following activities as per need.            1. Transportation of private practitioners            2. Meeting with various stakeholders at State and District level            3. Award and refreshment to volunteers &amp; others            4. Mobility cost to doctors and paramedical staff those are deployed from other facilities for the Clinic day            5. IEC at institution level for wide publicity of the programme  <b>Activity for extended PMSMA</b>            1. Transportation cost to HRP for maximum 3 visits            2. ASHA Incentive for mobilizing HRPs to PMSMA Clinic for maximum 3 visits            3. Incentive to ASHA @Rs.500/-per HRP on achieving a healthy outcome for both mother and baby at 45th day after delivery.</p>	
6.1.1	At District level (<= 5 blocks)	Per dist	50000	0.50	0	0.00	0	- Ongoing Activity	
6.1.2	At District level (6 to 10 blocks)	Per dist	100000	1.00	0	0.00	0	- Ongoing Activity	
6.1.3	At District level (11 to 15 blocks)	Per dist	150000	1.50	0	0.00	0	- Ongoing Activity	
6.1.4	At District level (>=16 blocks)	Per dist	200000	2.00	0	0.00	0	- Ongoing Activity	
6.2	Activity for extended PMSMA							Ongoing Activity	
6.2.1	Transportation cost to High Risk Pregnancy (HRP)	per visit	100	0.00	0	0.00	0	<p><b>Ongoing Activity</b>            Total no. of pregnant woman- 665678            - 15% of expected HRPs – 99852            Each HRP will be supported for 3 visits = Total 299556 visits            Budget proposed @ Rs. 100/- per visit per HRP (40% expected no of visits) visits</p>	
6.2.2	ASHA Incentive for mobilizing HRPs to PMSMA Clinic	Per ASHA per visit	100	0.00	0	0.00	0	<p><b>Ongoing Activity</b>            Total no. of pregnant woman- 665678            - 15% of expected HRPs – 99852            Each HRP will be accompanied by ASHA for 3 visits = Total 299556 visits            Budget proposed @ Rs. 100/- per visit per ASHA</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
6.2.3	Incentive to ASHA @Rs.500/-per HRP on achieving a healthy outcome for both mother and baby	Per ASHA	500	0.01	0	0.00	0	0	<b>Ongoing Activity</b> Incentive to ASHA @Rs.500/-per HRP on achieving a healthy outcome for both mother and baby at 45th day after delivery. Budget proposed: 40% of expected HRP cases, X Rs. 500/- per HRP
7	Surakshit Matritva Aashwasan (SUMAN)					0.00		0.00	<b>SUMAN NOTIFICATION</b> <b>Background:</b> The SUMAN programme aims at zero preventable maternal and newborn death. Under SUMAN programme the facilities providing maternal and new born services are categorized under 3 packages, SUMAN Basic, SUMAN BEmOC and SUMAN CEmOC package. the facilities are notified as per the service availability. <b>Total target upto 2023-24: 1907 Institutions (MCH-4, DHH-32, SDH-33, UCHC+CHC-384, PHC+UPHC+OH-1394, SC DP-60)</b> <b>Achievement upto Aug 2023: 1429 i.e CEmOC-95, BEmOC-300, Basic- 1034 (75% of total target and it is expected to achieve 100% by March 2024)</b> Total target for 2024-25: 1000 Institutions for notification under basic package Total target for 2025-26: 1000 Institutions for notification under basic package
7.1	Self assessment and notification of SUMAN								
7.2	Budget for self assessment and notification of CEmONC & BEmONC Facilities	Per institution	2000	0.02		0.00			- <b>Non Budgeted Activity</b>
7.3	Budget for self assessment and notification of Basic Facilities	Per institution	1000	0.01		0.00			- <b>Non Budgeted Activity</b>
7.4	Block level SUMAN volunteers training	Per person	850	0.01	0	0.00	0	0	<b>Ongoing Activity</b> <b>Background:</b> The SUMAN volunteer program will be expanded by identifying and training more volunteers. Each village will ideally have one SUMAN volunteer. Presently, there is one volunteer per Sub center, i.e 6688 volunteers have been selected, and hence an additional two volunteers per sub centre is proposed for 6688 old sub centers and 8026 newly created SCs. For 2024-25 6688 volunteers and for 2025-26 8036 volunteers will be selected. Training will be provided for the newly selected SUMAN volunteers at block level. Current Status: 6688 volunteers from 6688 villages have been selected and trained at block level. <b>Proposal for 2024-25: 6688 volunteers from additional 6688 villages</b> <b>Proposal for 2025-26: 6688 + 1338 (New SC) = 8026 volunteers from additional 8026 villages</b> Participants- SUMAN volunteers are to be trained at block level in batch size of 30 (Max.)

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
7.5	ASHA incentive as first responder of maternal death under SUMAN	Per case	1000	0.01	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background:</b>            Incentive is allowed after confirmation of maternal death in case of community death and transit death case by first responder as per SUMAN 1st responder guideline.  <b>Current status:</b> 100% of community and transit death reported were incentivised  <b>Proposal:</b>            Provision for 30% expected maternal death</p>
7.6	CoE MH & SUMAN								<p>Ongoing Activity            Current Status: COE MH and SUMAN is functioning at O &amp; G deptt of SCB MCH.            Proposal:            Mentoring visit expenses (New activity): Mentoring visit will be given by mentors selected by CoE to FRUs/DPs and medical colleges for providing hand holding support to the service providers in the LR, MOT, ANC ward, OG OPD and PNC wards to improve the maternal health services. 66 nos of Mentors from various medical colleges, pvt practitioners/ medical officers and consultants are been selected who will visit facilities at district level.</p>
7.6.1	Mentoring visit expenses	Lumpsum	3399001	33.99	0	-	0	-	<p><b>Mentoring visit expenses</b></p> <ul style="list-style-type: none"> <li>• TA @ Rs. 4000/- per mentor per visit for quarterly visit= Rs. 4000/- X 66 x4 visits</li> <li>• DA and accommodation@ Rs. 1625/- per mentor per day/per visit for 3 days = Rs 1625/- X 66 mentors X 3 days X 4 visits</li> <li>• Honorarium @ Rs. 4000/-per mentor per visit X 66mentors X 4 quarterly visit</li> </ul> Mentoring Expenses Total requirement = 33.99 Lakhs per annum <b>Budgeted 50%: for FY 2024-25</b> <b>Budgeted 60%: for FY 2025-26</b>
7.6.2	Coordinating expenses for mentoring	Lumpsum	60000	0.60	0	-	0	-	- Coordinating expenses for mentoring: Rs.0.60 lakhs per year
8	Midwifery						0.00	0.00	<p><b>Proposal : Fictionalization of NMTI at SCBMCH, Cuttack</b>  <b>Nature of Proposal : New Proposal</b>  <b>Proposed batch/es of training in 2024-25- 1batch &amp; in 2025-26 - 1 Batch</b>  <b>Course duration - 6 months)</b></p>
8.1	NMTI (National Midwife Training Institute)								<b>Dropped as per NPCC Recommendation</b>
8.1.1	Strengthening of Training Sites for NMTI	Per inst	500000	5.00		-			- <b>Functionalisation of NMTI: NMTI, SCBMCH, Cuttack</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
8.1.2	Contingency & Consumables for National Midwifery Training Institutes	Per inst/ Per Annum	351000	3.51		-			- Dropped as per NPCC Recommendation
8.1.3	Strengthening of Training sites for Midwifery education at MLCU	Per inst	2000000	20.00		-			- Dropped as per NPCC Recommendation
8.1.4	<b>Training for Midwifery Educator at NMTI</b>					0.00		0.00	Dropped as per NPCC Recommendation
8.1.4.1	Accommodation for the trainers/Educators	Per trainer/ educator	30000	0.30		-			- Dropped as per NPCC Recommendation
8.1.4.2	Food for trainers & trainees	Per trainer/ educator	45000	0.45		-			- Dropped as per NPCC Recommendation
8.1.4.3	Travel cost for participants (to & fro)	Per participant	5000	0.05		-			- Dropped as per NPCC Recommendation
8.1.4.4	DA to Participant for trainees during training	Per participant	74000	0.74		-			- Dropped as per NPCC Recommendation
8.1.4.5	Accommodation to participants	Per participant	92500	0.93		-			- Dropped as per NPCC Recommendation
8.1.4.6	Mentoring Visit by mentors	Per Mentor for 6 months	48000	0.48		-			- Dropped as per NPCC Recommendation
8.2	<b>Training of Nurse Practitioners in Midwifery</b>			0.00		0.00		0.00	Ongoing Activity Functional at SCB MCH Cuttack , MKCG Berhampur & VIMSAR Burla Proposed batch - 4 (1 each at MKCG Berhampur & VIMSAR Burla & 2 for SCB MCH Cuttack)
8.2.1	<b>Functionalisation of State Midwifery Training Institute (SMTI)</b>								
8.2.1.1	<b>Contingency &amp; Consumables for SMTI</b>					-		-	Ongoing Budget

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
8.2.1.1.1	Consumables and contingencies for training/educational activities	Per Institution per Month	5000	0.05	0	-	0	-	Rs.5000/- per month per institution for 1 SMTI Rs. 5,000/- X 12months x 3 SMTIs =Rs.1,80,000/-
8.2.1.1.2	Uniform and trainee kit for trainee & trainer	Per participant	2500	0.03		-			Rs. 2500/- per participants for 18 ME and 90 Trainees, <b>provisioned under State budget.</b>
8.2.1.1.3	Organisational cost	Per month	1000	0.01	0	-	0		The cost of organising /arranging training venue printing and stationery cost @ Rs 1,000/- per month X 12 month x 3 SMTIs
8.2.1.1.4	Vehicle hiring cost & POL for visit (to & fro) Clinical sites	Per Month	15000	0.15	0	-	0		Travel Cost for Clinical practice for NPM & Midwifery Educator at delivery points/MLCU as per approved clinical rotation plan as prescribed by INC/MoH & FW, GoI : Vehicle hiring cost & POL for visit (to & fro) Clinical sites @ Rs 15,000 pm for 12 month x 3 SMTIs = Rs.5,40,000/-per year
8.2.1.1.5	Procurement of study materials , journals and refererence book etc	Per trainee	3000	0.03	0	-	0		Rs 3000/- per NPM trainee
8.2.1.1.6	ONMEB registration, examination charges & others for NPM Course	Per head Per NPM	3500	0.04	0	-	0		Rs. 3500/- per head per NPM
8.2.1.2	Honarium for other faculty	Per class	600	0.01		-			Honorarium for the faculties (HOD OB&G , peadiatric,speciality doctors /Sr. Nursing officers/Consultants) taking classes for min 1 hr . <b>Budget proposed under HSS-10</b>
8.2.1.3	Participatory Allowances to trainees during training	Per trainee per day	400	0.00	0	-	0		<b>Approval for F.Y. 2024-25:</b> Participatory Allowances to NPM Trainees @ Rs 400/- per day for 365 days for 90 participants =Rs 1,31,40,000 /- <b>Approval for F.Y. 2025-26:</b> 1.Participatory Allowances to NPM Trainees @ Rs 400/- per day for 185 days for 90 participants =Rs 66,,60,000 /- 2.Participatory Allowances to NPM Trainees @ Rs 400/- per day for 365 days for 30 participants =Rs43,80,000 /-
8.2.1.4	Accommodation to participants	Per trainee per day	500	0.01	0	-	0		<b>Proposal for F.Y. 2024-25:</b> Accommodation to NPM Trainees where hostel facility is not available @ 500/- per day for 365 days for 90 participants = <b>Proposal for F.Y. 2025-26:</b> Accommodation to NPM Trainees where hostel facility is not available @ 500/- 1.Accommodation to NPM Trainees @ Rs 500/- per day for 185 days for 90 participant 2.Accommodation to NPM Trainees @ Rs 500/- per day for 365 days for 30 participants
8.2.1.5	Food for participants	Per trainer/ educator per day	250	0.00	0	-	0		<b>Proposal for F.Y. 2024-25:</b> Food to participants @ Rs. 250/- per day for 365 days for 90 participants <b>Proposal for F.Y. 2025-26:</b> Food to participants @ Rs. 250/- per day 1.Fooding to NPM Trainees @ Rs.250/- per day for 185 days for 90 participants 2.Fooding to NPM Trainees @ Rs.250/- per day for 365 days for 30 participants

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
8.2.1.6	Accommodation to trainers/educators	Per trainer/ educator per month	5000	0.05	0	-	0	-	<p><b>Proposal for F.Y. 2024-25:</b> Accommodation for the trainers/educators @ Rs 5000/- per trainer PM per educators (@ 6 educator per SMTI X 3 SMTI= 18 educator)  <b>Budget:</b> Rs. 5000/- PM X 12 month X 18 educator= Rs 10,80,000/-  <b>Proposal for F.Y. 2025-26:</b> Accommodation for the trainers/educators @ Rs 5000/- per trainer PM  <b>Budget:</b>                      Rs. 5000/- PM X 12 months X 12 educator= Rs.7,20,000/-  <b>Condition:</b> This provision can may be given if not avail HRA from State Budget.</p>
8.2.1.7	Food for trainers/educators	Per trainer/ educator per day	250	0.00	0	-	0	-	<p><b>Proposal for F.Y. 2024-25:</b> Food for the trainers @ Rs. 250/- per trainer per day for 365 days ( includes breakfast , high tea, Lunch and dinner) (@ 6 educator per SMTI X 3 SMTI= 18 educator)                      Budget: Rs.250/- x 365 days x 18 educators  <b>Proposal for F.Y. 2025-26:</b> Food for the trainers @ Rs. 250/- per trainer per day ( includes breakfast , high tea, Lunch and dinner)                      Budget:                      1.Rs.250/- X 185 days X 12 educators                      2.Rs.250/- X 365 days X 6 educators</p>
8.2.1.8	Mentoring Visit by mentors	Per Mentor	288000	2.88	0	-	0	-	<p>Mentoring visit by mentors (Midwifery educator) @ 3 sites per mentor per month ( Unit cost is 8,000/-per visit which includes travel, accommodation , food &amp; Honorarium. (fund may be approved in 2024-25 PIP) in previous PIP it is proposed as Rs.6750/- per visit it may be increased to Rs.8000/- per visit as the mentoring site is so far from training institute.  <b>Proposal for F.Y. 2024-25:</b> For 3 SMTI for 18 mentor 12 months visit @ 3 visits PM ( Rs. 8000/- PM X 3 visits X 12 months X 18 mentor = Rs.51,84,000/- (Rs 17,28,000/- per SMTI)  <b>Proposal for F.Y. 2025-26:</b> For 1 SMTI for 6 mentor 12 months visit @ 3 visits PM Rs. 8000/- PM X 3 visits X 12 months X 6 mentor = <b>Rs. 17,28,000/- per SMTI</b>  <b>Condition:</b> Tour diary &amp; tour report; a must condition for settling mentoring visit claims.</p>
8.2.1.9	Library strngthening at SMTI	Per unit		-		-		-	<b>Budget proposed under HSS-10</b>
8.2.1.10	Incentive to Midwifery Educator from the system	Per month	15000	0.15		-		-	Incentives to 18 Midwifery Educators / Tutor for 3 SMTI @ Rs 15,000/- PM for 18 Midwifery Educators at SCB MCH Cuttack, MKCG MCH & VIMSAR Burla <b>Budget proposed under Programme Management HR</b>
8.2.1.11	Incentive for Programme Coordinator	Per month	5000	0.05		-		-	Program coordinator ( Principal Nursing College) @ Rs 5000/- PM Proposed target in 2024-25: 3 Proposed target in 2025-26: 3 <b>Budget proposed under Programme Management HR</b>
9	<b>Maternal Death Review</b>					-		-	
9.1	Maternal Death Review Trainings			0.00		0.00			- Integrated with MPCDSR training, budgeted under Child Health.

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
9.2	Maternal Death Review (both in institutions and community)	Lumpsum		-		-		-		
9.2.1	Maternal Death Review	Per case	450	0.00	0	-	0	-		<p><b>Ongoing Activity</b>  <b>Background:</b> For every reported maternal death, community based verbal autopsy is to be done. A team of three members will visit the community and collect information as per the appropriate annexure and each of the member is provided with Rs. 150 for conducting verbal autopsy.  <b>Proposal:</b>  During each year (i.e. 2024-25 &amp; 2025-26), the total estimated deaths are 989 (SRS 119) and expected to be covered 90% i.e., 890 numbers.  Budget proposed for - Honorarium to investigators (@Rs.150/- per person x 3 persons) for Community based maternal death investigation</p>
9.2.2	State / District level meeting of Confidential enquiry and other MDR related meeting as per MDSR guideline.	Lumpsum	0	0.00	1	-	1	-		<p><b>Ongoing Activity</b>  <b>Background:</b> MDR at State and District level is held regularly as per MDSR guidelines.  Current Status: 93% of reported maternal deaths are reviewed at district level.  <b>Proposal:</b>  Budget Proposed @ Rs. 10,000 per district per year for 30 districts &amp; Rs.2,00,000 for State level per year as per MDSR guideline  <b>Justification For increasing provision for Rs.1.00 lakhs to Rs.2.00 lakhs for State level meeting:</b> 4 times confidential review meeting attended by Experts from MCHs/ Programme Officers etc., 4 times State Monitoring and Review Committee attended by Programme Officers, experts from MCH &amp; District MDR Nodal Officers and 1 State Task force meeting are being conducted with this provision of Fund.</p>
9.2.3	Mobility cost to Family Members of Maternal Death case to attend Collector Review Meeting	@Rs.200/- per person for 2 person	400	0.00	0	-	0	-		<p><b>Ongoing Activity</b>  <b>Background:</b> Sample maternal death cases are reviewed by District collector in the presence of family members  <b>Proposal:</b>  During each year (i.e. 2024-25 &amp; 2025-26) the total estimated deaths are 989 (SRS 119) and expected to be covered 90% i.e., 890 numbers.  Budget proposed for mobility cost to 2 nos. of family members (@200/- each) of deceased mother to attend Collector Review meeting at district level - (@Rs.200/- per person x 2 persons)</p>
9.2.4	ASHA incentive on confirmation of maternal death	Per case	200	0.00	0	-	0	-		<p><b>Ongoing Activity</b>  <b>Background:</b>Inorder to ensure 100% reporting of all maternal death cases, ASHAs are incentivised for reporting of maternal death cases. ASHA will inform all women death within the age group of 15-49 yrs and for confirm maternal death cases - ASHA will get incentive of Rs.200/-.  <b>Status:</b> During the year 2022-23, 495 cases have been informed by ASHAs.  <b>Proposal for 2024-25 &amp; 2025-26</b>  Total Expected Maternal Deaths 989 each year as per SRS data , budget proposed for 70% of total MDs : 692 cases will be informed by ASHA</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
9.3	Printing of MDR formats			-		-				Printing of Maternal Death Surveillance & Response (MDSR) formats are required to ensure regular and timely reporting from various levels
9.3.1	Annexure-4 for facility based investigation	Per Unit	3	0.00	0	-	0			Annexure-4 for facility based investigation (1 per facility maternal death) for 692 no. of deaths (70% of total expected death of 989 nos.) @ Rs. 3/- X 692nos.=Rs.2076/-
9.3.2	Annexure-5 for community level investigation	Per Unit	5	0.00	0	-	0			Annexure-5 for community level investigation for all maternal death for 989 no. of deaths (@ Rs. 5/- X 989 = Rs.4945/-
9.3.3	Annexure-6 for all maternal death	Per Unit	2	0.00	0	-	0			Annexure-6 for all maternal death for 989 no. of deaths (@ Rs.2/- X 989=Rs.1978/- ) Maternal Near Miss Review format
9.3.4	Annexure-1 for all near miss cases	Per Case	4	0.00	0	-	0			Annexure-1 for all near miss cases for 5000 formats (@ Rs. 4/- X 5000=Rs. 20,000/- )
9.4	MDR review by adjacent district MDR committee	Per visit per district p.m.	15000	0.15		-				Budget Dropped as per NPCC Recommendation. Required To be met out of State specific Scheme SAMpuRNA.
10	Comprehensive Abortion Care					0.00		0.00		Status : Presently 290 Public Health Facilities are in readiness with trained manpower, Drugs and Equipment to provide Services
10.1	Equipment (MVA /EVA) for Safe Abortion Services	Per unit	3000	0.03	0	0.00	0			MVA equipment for 2024-25: 30% of supplied MVA will be replaced which in non functional condition that is – 575 numbers + 75 numbers will be for newly trained CAC MOs (To be distributed in the training)= Total- 650 MVA equipment for 2025-26: 30% of supplied MVA will be replaced which in non functional condition that is – 575 numbers + 95 numbers will be for newly trained CAC MOs (To be distributed in the training)= Total- 670
10.2	Drugs for Safe Abortion (MMA)	Per pack	40	0.00	0	0.00	0			Ongoing Activity Drugs Specification : Misoprostol 4 Tablets (200 Mcg ) + Mifepristone 1 Tablet (200 mg) comb pack Level at which the item would be used : CHC/ SDH/ DH Total pregnant women - 665678 (reported) 10% of PW - 66567 (Expected for abortion) Expected Induced abortion (40% of expected abortion cases) - 26626 Expected abortion by Medical Method (MMA) 40% of Expected abortion = 10650
10.3	Training & Capacity Building									
10.3.1	TOT on Safe Abortion Services	Per person	8000	0.08	0	0.00	0			Ongoing activity Background: ToT for CAC training is conducted in designated training venue with batch size of 8 comprising of 4 O & G spl and 4 nursing officers who will provide 12 days CAC training in the district training venue. Status: State Level 3 days refresher on safe abortion services (CAC) for 4 O&G Spl. & 4 SNS. (4 Teams) . Proposal for 2024-25: 8 persons (1 batch) Proposal for 2025-26: 8 persons (1 batch)

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
10.3.2	CAC certification Training of MBBS Doctors (2 Doctors for 12 days + 2 SNs for 6 days per batch) twelve working days at 5 CAC Training Venues. (Regional Level)	Per Person	21000	0.21	0	-	0	<p>Background :CAC certification training of MBBS doctors As per key deliverable the State has prospective target for funtionalising 361 facilities. The target of up to 2022-23 is 290 facilities for providing CAC services with MVA, EVA &amp; MMA and trained providers is set as per key deliverables.</p> <p><b>Current Status:</b> 390 facilities are in readiness (with drugs, equipments &amp; trained manpower)</p> <p><b>Proposal:</b> Training for 60 MBBS doctors and 60 Nursing Officers from same facility.</p> <p><b>Proposed for the year 2024-25:60+60=120 Person</b></p> <p><b>Proposed for the year 2025-26: 80+80= 160 person</b></p>	
10.3.3	Refresher training (3 days) on CAC for already MTP Certified Doctors / OG Spl along with SNs including MVA /EVA/MMA - at 5 CAC Training Venues. (Regional Level)	Per Person	5000	0.05	0	-	0	<p><b>Background:</b> OG spl fare provided refresher training on CAC for confidence building and update in CAC programmed.</p> <p>Status:</p> <p><b>State load:</b> 572 ( 290 OG+ 172 MTP Trained MOs + 110 SNs- 2015-16)</p> <p>Target: 3 Doctors &amp; 3 SNs per batch. Duration 3 days.</p> <p>Proposed load for 2years: 60 persons</p> <p><b>Load of 2024-25: 30person (15 MO &amp;15 NO)</b></p> <p><b>Load of 2025-26: 30person (15 MO &amp;15 NO)</b></p>	
10.3.4	3 days MMA training of MBBS doctors from PHC level at State level	Per Person	7500	0.08	0	-	0	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> MMA training will be provided to all MBBS doctors posted in PHC level in both Urban and rural facilities.</p> <p><b>Status:</b> 109 MBBS Doctors are trained in MMA</p> <p><b>Target for the year 2024-25:</b> 90 MBBS Doctors</p> <p><b>Target for the year 2025-26:</b> 70 MBBS Doctors</p>	
10.4	Incentive for accompanying MTP case for surgical intervention	Per ASHA	150	0.00	0	-	0	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> ASHA is incentivized for accompanying the PW for MTP through surgical method.</p> <p><b>Status:</b> During 2022-23, 8806 number of cases have been accompanied by ASHA for Surgical MTP</p> <p>Proposal</p> <p><b>Total reported Pregnancy:</b> 665678</p> <p><b>Total expected abortion:</b> 66567 (10% of total reported pregnancy)</p> <p><b>Induced Abortion:</b> 26626 (40% of expected abortion)</p> <p><b>Surgical Abortion:</b> 15976 (60% of expected induced abortion)</p> <p><b>Medical Method:</b> 6390 (40% of expected induced abortion)</p> <p><b>Deliverables</b> - Accompanied by ASHA to CAC centers for MTP by trained doctor through MVA/EVA</p> <p>Estimating that 50% of the Surgical CAC cases i.e. 7988 will be accompanied by ASHA including Urban facilities.</p>	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
10.5	Incentive for accompanying for MTP case through medical method	Per ASHA for 2 visits	300	0.00	0	-	0		<b>Ongoing Activity</b> <b>Background:</b> ASHA is incentivized for accompanying the PW for MTP through medical method for two times i.e. Day-1 & 3 for MTP by MMA Status: During 2022-23, 6870 number of cases have been accompanied by ASHA Total reported Pregnancy: 665678 - Total expected abortion: 66567 (10% of total reported pregnancy) Induced Abortion: 26626 (40% of expected abortion) Surgical Abortion: 15976 (60% of expected induced abortion) Medical Method: 6390 (40% of expected induced abortion) Estimating that 3834 cases i.e. 60% of abortion through MMA (6390) will be accompanied by ASHA.	
10.6	<b>IEC/BCC activities under CAC Services</b>									
10.6.1	CAC poster (sun-board) on MMA (Medical Method of Abortion)	Lumpsum	1250000	12.50	0	0.00			<b>New Activity (Proposed as per Gol communication)</b> <b>Background:</b> In view of amendment of MTP act the singes and IEC materials have been revised which is to be printed <b>Proposal: 2024-25</b> 1. Signage's for CHC and above facilities: @1 per facilities (Odia and English) Budget: @Rs.400/- per unit X 500nos = Rs.2.00 lakhs 2. Sun board (2X3 feet) for PHC and above facilities: @1 per facilities (in Odia) Budget: @Rs.400/- per unit X 2000 nos = Rs.8.00 lakhs 3. Printing of Leaflet for ASHA: @1 per ASHA Budget: @Rs.5/- per leaflet X 50000 = Rs.2.50 lakhs	
10.7	<b>Printing under Comprehensive Abortion Care Services</b>									
10.7.1	Consent Form –C	Per Booklet	20	0.00	0	-	0		Consent Form –C (1 booklet 104 pages)-1692 booklets (To be printed in Odia & English both side)	
10.7.2	RMP Opinion Form	Per Booklet	50	0.00	0	-	0		RMP Opinion Form up to 20 weeks (1 booklet 104 pages)@Rs. 50/-/ unit - RMP Opinion Form (from 20 - 24 weeks: Form-E) for 94 FRUs & 6 MCH facilities (100) and for refresher trainees (15)=Total 115 (1 booklet 204 pages)- 115 booklets	
10.7.3	Form-II	Per Booklet	50	0.00	0	-	0		1 booklet 100 pages, 1 original page, 612 booklets (@Rs. 50/- per unit)	
10.7.4	Admission register Form-III	Per Booklet	75	0.00	0	-	0		Admission register Form-III (1 booklet 150 pages, 1 original page)booklets (@ Rs. 75 per unit)	
10.7.5	Evacuation Register	Per Booklet	75	0.00	0	-	0		Evacuation Register (1 booklet 210 pages, 1 original page)-1000 booklets (@ Rs. 75/-per unit)	
10.7.6	MMA card (In Odia)	Per Card	1	0.00	0	-	0		MMA card (In Odia) - 25000 cards (@ Rs. 1/- per unit)	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
10.7.7	Printing of CAC Service Delivery Guidelines	Per Unit	400	0.00	0	-	-	<p><b>New Activity</b>  <b>Background:</b> Keeping in view amendment in MTP Act, the modified CAC Guidelines is to be printed. This is to be used during trainings &amp; for reference by Programme Officers / Managers &amp; service providers.            Specification:            Pages: 112 + 4 covers pages            Size: 8.3" (w) X 11"(h), Letter close size            Printing: 4+4 colour            Paper: 250 gsm Sinar Matte (cover) &amp; 130 gsm (inside)            Fabrication: Cover normal Lamination matte finish, perfect binding, section sewing            Budget Proposed for 2024-25: @Rs.400/- per unit X 600 units = Rs.240000/-            Budget Proposed for 2025-26: Not proposed</p>	
10.7.8	Printing of Provider Manual	Per Unit	600	0.01	0	-	-	<p><b>New Activity</b>  <b>Background:</b> Keeping in view amendment in MTP Act, the modified CAC Guidelines is to be printed. This is to be used during trainings &amp; for reference by Programme Officers / Managers &amp; service providers.            Providers manual (English)            Pages: 182 text pages + 4 cover &amp; back pages            Size : 8.25" X 11.75"            Printing : 4+4 colour            Paper for inside pages: 130 gsm Sinar Matt            Paper Cover: 300 gsm art card Sinar Matte            Binding: Spiral binding and Matte lamination on cover and back            Budget Proposed for 2024-25: @Rs.600/- per unit X 600 units = Rs.360000/-            Budget Proposed for 2025-26: Not Proposed</p>	
10.7.9	Printing of MMA Provider manual	Per Unit	600	0.01	0	-	-	<p><b>New Activity</b>  <b>Background:</b> Keeping in view amendment in MTP Act &amp; MMA training, this provider manual is to be printed. This is to be used during trainings &amp; for reference by Programme Officers / Managers &amp; service providers.            No of pages: 56 (including Cover Page)            Printing: 4+4 colour digital printing            Binding: Section sewing and Perfect binding            Paper: 170 matt inside &amp; 300 matt cover page            Fabrication: Matt Lamination thermal            Size: 8.5 X 11.5 Inches            Budget Proposed for 2024-25: @Rs.600/- per unit X 200 units = Rs.120000/-            Budget Proposed for 2025-26: Not proposed</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
10.7.10	Printing of CAC Operational Guideline	Per Unit	150	0.00	0	-			<p><b>New Activity</b>  <b>Background:</b> Keeping in view amendment in MTP Act, the modified CAC Guidelines is to be printed. This is to be used during trainings &amp; for reference by Programme Officers / Managers &amp; service providers.                      Pages: 16 nos.                      Size: 8.50 × 11.00 in (portrait) (inch)                      Paper: 170gsm Sinar Matte                      Printing: 4+4 (front &amp; back)                      Lamination: All pages both side lamination and Centre stapled                      Budget Proposed for 2024-25: @Rs.150/- per unit X 1000 units = Rs.150000/-                      Budget Proposed for 2025-26: Not proposed</p>
11	MCH wings								<p><b>Non of the facilities are eligible as per Gol norms to have MCH wing, hence not proposed.</b></p>
12	FRUs					0.00		0.00	
12.1	Setting up of EmOC Training Centres	Per unit	350000	3.50		0.00			<p>Status: 1 center functional at SCB MCH.                      No new centers proposed in 2024-26</p>
12.2	Setting up of Life saving Anesthesia skills Training Centres	Per inst.	500000	5.00		0.00			<p>Status: 1 center functional at SCB MCH.                      No new centers proposed in 2024-26</p>
12.3	TOT for EmOC	Per Batch/8 person	89293	0.89	0	0.00			<p><b>Background:</b> Out of 94 designated FRUs, either O&amp;G Spls or CEmONC Trained Doctors are available in 89 FRUs. Another 5 MBBS Doctors / Surgery Specialists require to be trained in 24wks CEmONC or Surgery Specialist Training. As required by North Eastern states Tripura, Manipur and Meghalaya and allowed by Govt of India, Odisha is organised CEmONC Training for North Eastern States at Deptt of O&amp;G, SCB MCH, Cuttack. Due to expansion of MCH at Odisha only one Master Trainer is available at Deptt of G&amp;G SCB MCH, Cuttack. To ensure 1:2 ratio, it is proposed that 4 Asst/ Asso Professors to be provided TOT on CEmONC Training . To Accommodate 6wks hands on training it is proposed to provide ToT of O&amp; G Spl of DHH Bhadrak, DHH Puri, DHH Kendrapada &amp; DHH Jagatsinghpur.</p> <p><b>Proposal:</b>                      To ensure the Master Trainers Pool, 4 Asst / Asso Professor of Deptt of O&amp;G SCB, MCH, Cuttack and 4 O&amp;G Specialists from above mentioned Districts Head Quarter Hospital. Total load: 8 person  <b>Duration: 3 days at Deptt of O&amp;G, SCB MCH Cuttack with existing RPs available at MCHs.</b>  <b>Proposed for 2024-25: 8 person (1batch)</b>  <b>No requirement for 2025-26.</b>  <b>Budget: Rs.89293/ batch of 8 person following OSH&amp;FW, Odisha Society</b></p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
12.4	Training of Medical Officers in EmOC	Per participant	552000	5.52	0	0.00	<p><b>Background:</b> Out of 94 designated FRUs, 89 FRUs have either O&amp;G Spls or CEmONC Trained Doctors / Surgery Specialist in CS. So 94-89 FRUs = 5 FRUs. Total 5 MBBS Doctors to be provided 24 wks CEmONC training at Deptt. of O&amp;G SCB MCH, Cuttack.</p> <p>Current Status: Out of 94 designated FRUs, 89 FRUs have either O&amp;G Spls or CEmONC Trained Doctors / Surgery Specialist in CS.</p> <p><b>Proposal:</b> Requirement of 5 MBBS Doctors to be provided 24 wks CEmONC training at Deptt. of O&amp;G SCB MCH, Cuttack.</p> <p><b>Target for 2024-25: 5 MBBS Doctors (1 Batch)</b></p> <p><b>No Target for 2025-26</b></p> <p><b>Budget: 27.60 Lakh for 24 Wks (6month) of 8 person ( Rs.5,52,000/ person) following Govt of India 24 Wks CEmONC Norm.</b></p>		
12.5	TOT for Life Saving Anesthesia Skills training	Per Batch/8 person	89293	0.89	0	0.00	<p><b>Background:</b> Our of 94 designated FRUs 79 FRUs have Anesthesia Specialists or LSAS trained doctors. So 15 MBBS Doctors need to be trained in 24 Wks LSAS Training. Only Deptt of Anesthesiology &amp; Critical Care, SCB MCH, Cuttack is functional as LSAS training venue.</p> <p>Since 2007, Deptt of Anesthesiology &amp; Critical Care, SCB MCH, Cuttack is organising LSAS Training after TOT. Due to expansion of MCH at Odisha, 4 MTs have been transferred to new MCHs and PGIMER, BBSR, only 2 Master Trainers are available at Deptt of Anesthesiology &amp; Critical care, SCB MCH, Cuttack. To maintain 1:2 ratio of Master Trainers (MTs), Deptt of Anesthesiology &amp; Critical care, SCB MCH, Cuttack requests for another 4 MTs.</p> <p>At district level MTs for hands on training are transferred to different MCs. To accommodate 6 Wks Hands on Training at DHH level, following Anesthesia Specialists of DHH &amp; Capital Hospital BBSR need ToT.</p> <p><b>Current Status:</b> 2 Master Trainers are available at Deptt of Anesthesiology &amp; Critical care, SCB MCH, Cuttack.</p> <p><b>Proposal:</b> So total Load of the of the state- 2 Asst. Professors, 2 Asso. Professors of MCH &amp; 4 Anesthesia Specialists from Capital Hospital, BBSR, DHH Puri, DHH Bhadrak and DHH Kendrapada need to be created as MTs . Total Load: 8 Anesthesia Spl.</p> <p><b>Duration:</b> 3 days at Deptt. of Anaes. &amp; Critical Care SCB MCH Cuttack (state level Norm) with existing RPs available at different MCHs.</p>		

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
12.6	LSAS training (24 weeks)	Per Participant	552000	5.52	0	-	0	<p><b>Total Load</b> - 30 FRUs ( Delivery having More than 300 pm) x 3 person=90 + rest 64 FRUs x 1 person- 64= 154 person.</p> <p><b>Existing:</b> Regular Anesthsist=22</p> <p><b>LSAS at FRU:</b> 72 LSAS trained available in 68 FRUs, out of 94 FRUs.</p> <p>Total Trained LSAS Doctors available in both FRUs &amp; Non FRUs= 94 persons.</p> <p>55 LSAS trained Doctors gone for PG, SR and Administrative post.</p> <p><b>Remaining training Load : 39</b></p> <p>Ach till Mar'23: 10 persons</p> <p>Projected Ach. 2023-24: 6 person</p> <p>Training load for 2024-26: 10 persons for 6 months.</p> <p><b>Load for 2024-25: 8 persons &amp;</b></p> <p><b>Load for 2025-26: 6 person</b></p>	
12.7	LSAS training (Refresher training of MOs)	Per participant	25000	0.25	0	-	0	<p>Two weeks refresher training of LSAS trained doctors along with intubation at MCHs - Deptt. of Anesthesiology MKCG &amp; SCB MCH.</p> <p>Justification: LSAS trained doctors posted at FRUs require hands-on training in integration to manage the patient in emergency situation at FRU level.</p> <p>Total requirement : 91 LSAS trained doctors are available at FRUs till Nov.2021. and 3 MBBS doctors are continuing 18 weeks LSAS training.</p> <p>Batch Size: @ 4 persons per Batch</p> <p>Load for 2024-25: 8 persons</p> <p>Load for 2025-26: 8 persons</p>	
12.8	CS & Management of Basic complication for Surgery Spl.( 24 working days)	2/batch	137500	1.38	0	-	0	<p>State is planning CS for surgery Spl. As per Gol Guideline at SCB, MCH Cuttack. In place of EmOC Trg.</p> <p><b>Status:</b></p> <p>Target 2022-24: 8 person (4 batches)</p> <p>Projected Ach. till March 2024: 4 persons</p> <p>Proposed for 2 years (2024-25 &amp; 2025-26: 4 person (2 batches)</p> <p>Load for 2024-25: 1 batch</p> <p>Load for 2025-26: 1 batches</p>	
<b>13</b>	<b>HDU/ICU - Maternal Health</b>					<b>0.00</b>	<b>0.00</b>		
13.1	Equipment for Obstetric ICUs/ HDUs (as per operational guidelines of ICUs and HDUs, 2017)	Lumpsum		0.00		0.00		<p><b>Background:</b></p> <p><b>Obstetric HDUs:</b></p> <p>Functional-5 ( DHH Keonjhar, DHH Kandhamal, DHH Bhawanipatna, Capital Hospital Bhubaneswar &amp; DHH Dhenkanal)</p> <p>(Obstetric HDUs proposed during 2023-24 i.e DHH Puri is under process).</p> <p>No New Proposal in this year</p> <p><b>Hybrid ICUs:</b></p> <p>Functional-2 ( SCB MCH and MKCG MCH)</p> <p>Target 21-22 - 2- (VSS MCH and FM MCH) are not yet functional</p> <p><b>No New Proposal in this year</b></p>	
13.2	Recurring cost for Obstratic HDU			0.00		0.00		- Recurring Cost of Obstetric HDUs to be met out of CCBH cost (PM ABHIM)	
<b>14</b>	<b>Labour Rooms (LDR + NBCCs)</b>					<b>1.33</b>	<b>1.33</b>		

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
14.1	Setting up of SBA Training Centres	Per inst.	300000	3.00		0.00		Current Status: 49 sites are functional across 30 districts. Another 16 sites need to be strengthened & thus proposed under NHM PIP 2024-25 (Proposed under FMR HSS.10 , SL. No-191)	
14.2	TOT for SBA	20/batch	100000	1.00	0	0.00		<p><b>Status:</b> Target 2022-23: 2 Batch (20/ batch) Ach. 2023-24: 1 batch (Proposed Ach.)</p> <p><b>New Proposal:</b> - To crate resource pool of SAB trainers at 64 SAB Training Venues 50 RPs of OG SPI, Paed Spl &amp; Sr Nurse Trainers pool may be required. So Total Load for 2 years: 2 batches</p> <p><b>Proposed for 2024-25 :2 batches (20 Person)</b> Requirement due to transfer and retirement.</p>	
14.3	21 days SBA training at District level	Per participant	26280	0.26	0	-	0	<p><b>Ongoing Activity</b> <b>Status:</b> 21 days SBA training of SNs, ANM, LHV &amp; AYUSH MOs have been saturated of all DHH, SDH &amp; CHC)</p> <p><b>Background:</b> As per the status till July 2023 total 4818 Nursing Officers (CHOs) have been posted at 5400 SHC- HWC and another 1288 CHOs will be posted at Head Quarter PHC- HWC during 2023-24 &amp; 2024-25. <b>Total State load SC HWCs: 6688 Nursing Officers</b> (5400 CHOs+1288 CHOs of HQ PHC- HWC). <b>Total State load of SNs of PHC HWCs= 1532 SNs</b> (1288 (R) + 116 (UPHC) + 128 UHWC)= 1532 SNs (@1 SN / PHC HWC).</p> <p><b>Status:</b> - Target for 2022-23: 1200 for 64 SAB trg Sites (@3 person Avg. / venue) Target for 2023-24: 1200 for 64 SAB trg Sites (@3 person Avg./ venue) Ach. during 2022-23: 826 (as of Mar'23). Projected ach. during 2023-24: 1000 person. Though there are limited SAB Trg. Venues at district level, Districts may conduct integrated 21 days SAB Training of Staff Nurses, CHOs, AYUSH Doctors, ANMs &amp; LHVs with 21 days SBA training of SNs at District level (FMR Code 9.5.1.6 ) as per the priority delivery load . <b>Proposed load for 2 years: 1691 Persons ( Staff Nurses, CHOs, AYUSH Doctors, ANMs &amp; LHVs )</b> <b>Target for 2024-25: 874 for 64 SAB trg Sites (@3 person Avg. / venue)</b> <b>Target for 2025-26: 817 for 64 SAB trg Sites (@3 person Avg./ venue)</b> <b>Revised Unit Cost: 21 days structured in 3 phases (@7days / phase) including printing of training module</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
14.4	3 days SBA refresher training for ANMs	Per batch	64896	0.65	0	-	0		<p><b>New Activity: proposed as per Gol remarks in NPCC</b></p> <p>No. of ANMs received SBA training till date: 8570</p> <p>ANM targeted for refresher training: 80% of trained ANM i.e. 6856 ANMs</p> <p>- 50% of ANM will be covered in FY 2024-25 &amp; rest will be covered in 2025-26</p> <p><b>Total Batches planned: 286 batches (24 ANMs per batch)</b></p> <p><b>Proposal for FY 2024-25: 143 batches</b></p> <p><b>Proposal for FY 2025-26: 143 batches</b></p>	
14.5	TOT for BEmOC training	Per institution		0.00		0.00			- BEmOC training centre is functional at 3 old MCHs. No new proposal in 2024-26.	
14.6	BEmOC training for MOs/LMOs	Per Person	25865	0.26	0	0.00	0		<p><b>Status:</b> Cummulative Trained Doctors 1481 till march 2023.</p> <p>Proposal : 10 days BEmOC Training of MBBS Doctors from 1412 AB HWC of R+U</p> <p>Target: 1412 Doctors</p> <p>Target for 2024-25: 350 Doctors</p> <p>- Projected Ach Till Mar'24: 270 person</p> <p>Total target taken 700 MBBS Doctors for next 2 years in 5 Venues (3MCH, Cap Hospital &amp; PRM MCH Baripada)</p> <p><b>Load for 2024-25: 350 persons</b></p> <p><b>Target for 2025-26: 350 persons</b></p>	
14.7	TOT for Dakshata	15/batch	150000	1.50	0	0.00	0		<p>Proposal for 2024-25: 5 days ToT for Dakshata Training (@One ToT per MCH X 3 MCH) i.e. MKCG MCH, VIMSAR, MCH &amp; SLN MCH Total : 3 batches</p> <p>Proposal for 2025-26: 1 batch state level</p>	
14.8	DAKSHATA training	15/batch	60210	0.60	0	0.00	0		<p>3 days District level Training of MCH/DHH &amp; Facility level service providers (LR &amp; OG ward)</p> <p>- Proposed in 3 MCHs i.e. MKCG MCH, VIMSAR, MCH &amp; SLN MCH</p> <p>Load for 2024-25: 6 batches ( 2 batch per MCH).</p> <p>Load for 2025-26: 15 batches (in 15 districts)</p>	
14.9	Onsite Mentoring for DAKSHATA	per visit	2000	0.02	0	0.00	0		<p>Mentoring visit proposed for Non FRU CHC s having more the 120 delivery per annum. 243 facilities identified having more than 120 delivery per annum. Each facility given 4 visits in a year.</p> <p>Total facilities Identified :243</p> <p>- No of visits = 243 * 4 = 972 visits</p> <p>Cost for each visit @2000 = 972XRs.2000= 1944000, Budget proposed for 50% of visit i.e. 486* 2000 = Rs.9.72 lakhs</p> <p>Target for 2024-25: 486 No. of visits</p> <p>Target for 2025-26 : 486 No. of visits</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
14.10	Disposable Kelley's Pad	Per Kelley's Pad	50	0.0005	-	0			<p><b>Proposal for 2024-25:</b> Not proposed as procurement of 2023-24 will be completed by Mar'24 &amp; the same stock will be used during 2024-25.</p> <p><b>Proposal for 2025-26:</b> Proposal for all institutional delivery cases i.e 681059 at public health institutions. Kelleys pad is one of the impartment labour requirement. The reusable Kelleys pad is not very convenient for decontaminating and cleaning as a result of which the purpose of use kelleys pad is often not fulfilled. However the disposable Kelleys pad can be provided for every delivery case which will satisfy the purpose of kelleys pad. it can be readily used for every delivery even in the busiest labour room. The disposal of kelleys pad will be done following the BMW rules. Total no. of expected delivery in public facility : 681059 Proposed for 50% of expected deliveries @1 per delivery : 340530</p>
14.11	Reusable patients gown for delivery cases	Per Gown	300	0.0030	50	0.15	50	0.15	<p><b>Ongoing Activity</b> Use of patients gown for all delivery cases will reduced incidence of sepsis as in many rural area the delivery cases usages old and turn out clothes due to risulalestic and cultural tabuoos. The provision of sterials / autoclave gown will at least provide asepsis clothing to the delivery cases during the stay at hospital. this will also reduced cross infection scope. Provision : Per day delivery of expected delivery (732093) : 2005 * 2 gown + 10% buffer = 4411 gowns</p>
14.12	<b>Logistics for Birth Companion Scheme</b>								<p><b>Ongoing Activity</b> 1. @Rs. 40,000/- per MCH (Reusable Gown - @ Rs 300X 100nos. = 30000, Slipper Rs. 10000/-) for 14 MCH = Rs. 5,60,000 2. @ Rs. 20,000/- per DHH (Reusable Gown - @ Rs 300X 50nos. = 15000, Slipper Rs. 5000/-)for 22 DHH = Rs. 4,40,000 3. @ Rs. 10,000/- per SDH and CHC (Reusable Gown - @ Rs 300X 20nos. = 6000, Slipper Rs. 4000/-) for 62 facilities = Rs. 6,20,000 <b>Total- Rs. 16.20 lakhs per Annum</b></p>
14.12.1	For MCHs	Per unit	40000	0.4000	1	0.40	1	0.40	
14.12.2	For DHHs	Per unit	20000	0.2000	0	-	0	-	
14.12.3	For SDHs & CHCs	Per unit	10000	0.1000	0	-	0	-	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
14.13	Procurement of NASG kit	Per Kit	6000	0.06	13	0.78	13	0.78	<p><b>New Activity</b>  <b>Background:</b> NASG kits have been procured and supplied to delivery points, medical colleges and 102/108 ambulances. These kits are used for management of PPH and can be used during transportation of referral PPH cases to higher facilities.  <b>Current Status:</b>                      The NASG garment was procured during 2017-18 from State budget                      Distribution Status:                      Supplied to Health facilities /DPs- 770                      Supplied to Ambulances- 420  <b>Proposal for additional procurement:</b>                      No of facilities conducting delivery- 860                      Total number of ambulances- 1124                      Additional required for MCH (@ 3), DHH (@ 5) &amp; SDH (@2) = 172                      Requirement:                      Balance delivery point facilities to be supplied NASG kit- 860-770= 90                      No. of ambulances to be supplied NASG kit- 704                      Additional supply to high delivery load facilities - 172                      Total kits to be procured- 966                      Target for 2024-25- procurement of 483 kit @Rs.6000/- per kit                      target for 2025-26- procurement of 483 kit @Rs.6000/- per kit</p>
14.14	Printing of Labour Room register	Per Unit	300	0.00	0	-	0	-	<p><b>Ongoing Activity</b>                      Labour Room register for delivery points as per MNH toolkit. Each register will cost @ Rs. 300 inclusive of binding. Each Register will have 500 pages. Printing proposal is given for 2052 Registers. (@ Rs. 300/-X 2052 = Rs. 615600/-)</p>
14.15	Printing of Delivery Case sheet	Per Unit	7	0.00	0	-	0	-	<p><b>Delivery Case sheet :</b> Delivery Case sheet with partograph overleaf for all institutional delivery cases in public health institutions (681059 expected deliveries + 10% (68105) buffer= 749165) – (@Rs. 7/-X 749165 = Rs.5244154/-)</p>
15	LaQshya					0.00		0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b> To improve the quality of labour room and OT services, the LR and OT will be LaQshya certified. State has taken target of 98 facilities.  <b>Target for 2022-23: Labour Room- 51/ OT: 51</b>  <b>Target for 2023-24: Labour Room: 24/ OT: 24</b>  <b>Target for 2024-25: Labour Room: 23/ OT: 23</b>  <b>Target for 2025-26: Labour Room: 30/ OT: 30</b>  <b>Current Status:</b> Out of the target of 98 LR and 98 MOT, by August 2023, 24 LR and 23 MOT have been nationally certified.</p>
15.1	Mentoring visit by State team	Per Visit	9800	0.10					<p>Budget to be met out of Sl.No. 7_Surakshit Matritva Aashwasan (SUMAN) under CoE MH &amp; SUMAN</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
15.2	Mentoring by district coaching team	Per Visit	2700	0.03	0	0.00	0	0	<p><b>Background:</b> The district coaching team will visit the LaQshya targeted facilities atleast quarterly once.</p> <p><b>Current Status:</b> Last year 38 facilities have been visited more than once by district coaching team for providing mentoring support for LaQshya certification</p> <p><b>Proposal: 2024-25</b></p> <p>Total Targeted institutions: 23 and proposed one institution to be visited 4 times (two visits for LR &amp; MOT) in a year by mentor.</p> <p>Total visit per annum - 23*4 = 92</p> <p><b>Proposal: 2025-26</b></p> <p>Total visit per annum - 30*4 = 120</p>
15.3	Incentives as per LaQshya guideline					0.00		0.00	<p><b>Status of National level LaQshya Certification before 2023-24</b></p> <p>Total LR certified: 20 (DHH-15, SDH-3, CHC-2)</p> <p>Total OT certified: 19 (DHH-15, SDH-3, CHC-1)</p> <p><b>To be Certified during 2024-25</b></p> <p>Total LR : 24 (MCH-1, DHH-13, SDH-6, CHC-4)</p> <p>Total MOT :24 (MCH-1, DHH-13, SDH-6, CHC-4)</p> <p><b>Target of National level LaQshya Certification before 2025-26</b></p> <p>Total LR certified: 68 (MCH-4, DHH-32, SDH-18, CHC-14)</p> <p>Total OT certified: 67 (MCH-4, DHH-32, SDH-18, CHC-13)</p> <p><b>(As all the LR/MOT of co located DHH with MCH will be considered as LR/MOT of DHH not MCH because the MCH will function in separate building )</b></p>
	<b>Incentives for certification of current certified institutions:</b>								<p><b>Budgeted 60% in 2024-25</b></p> <p><b>Budgeted 60% in 2025-26</b></p>
	For MCH LR	Per LR	600000	6.00	0	0.00	0	0.00	MCH: @Rs.6.00 lakhs per deptt.
	For MCH OT	Per OT	600000	6.00	0	0.00	0	0.00	MCH: @Rs.6.00 lakhs per deptt.
	For DHH LR	Per LR	300000	3.00	0	0.00	0	0.00	LR: @Rs.3.00 lakhs per LR
	For DHH OT	Per OT	300000	3.00	0	0.00	0	0.00	OT: @ Rs. 3.00 lakhs per OT
	For SDH LR	Per LR	200000	2.00	0	0.00	0	0.00	LR: @Rs.2.00 lakhs per LR
	For SDH OT	Per OT	200000	2.00	0	0.00	0	0.00	
	For CHC OT	Per LR	200000	2.00	0	0.00	0	0.00	
	For CHC OT	Per OT	200000	2.00	0	0.00	0	0.00	OT: @ Rs. 2.00 Lakhs per OT
	<b>Incentives for certification of proposed institutions</b>			0.00				0.00	<p>Proposal for certification 2024-25:</p> <p>Total LR certified: 24 (MCH-3, DHH-4 SDH-9, CHC-8)</p> <p>Total OT certified: 24 (MCH-3, DHH-4 SDH-9, CHC-8)</p> <p>Proposal for certification 2025-26:</p> <p>LR : 30 ( SDH-10, CHC-20)</p> <p>M OT : 31 (SDH-10, CHC-21)</p> <p>Budgeted 60% in 2024-25</p> <p>Budgeted 60% in 2025-26</p>
	For MCH LR	Per LR	600000	6.00	0	0.00		0.00	MCH: @Rs.6.00 lakhs per deptt.
	For MCH OT	Per OT	600000	6.00	0	0.00		0.00	MCH: @Rs.6.00 lakhs per deptt.

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	For DHH LR	Per LR	300000	3.00	0	0.00		0.00	LR: @Rs.3.00 lakhs per LR
	For DHH OT	Per OT	300000	3.00	0	0.00		0.00	OT: @ Rs. 3.00 lakhs per OT
	For SDH LR	Per LR	200000	2.00	0	0.00	0	0.00	LR: @Rs.2.00 lakhs per LR
	For SDH OT	Per OT	200000	2.00	0	0.00	0	0.00	OT: @ Rs. 2.00 Lakhs per OT
	For CHC LR	Per LR	200000	2.00	0	0.00	0	0.00	LR: @Rs.2.00 lakhs per LR
	For CHC OT	Per OT	200000	2.00	0	0.00	0	0.00	OT: @ Rs. 2.00 Lakhs per OT
15.4	<b>State and National assessment for LaQshya certification</b>								<b>New Activity Proposed after discussion with Quality Assurance Team</b>
15.4.1	State level assessment of MCH, DHH and SDH	Per MCH/ DHH/ SDH	89500	0.90	0	0.00	0	-	
15.4.2	State level assessment of CHCs	Per CHC	63000	0.63	0	0.00	0	-	
15.4.3	National level assessment of MCH, DHH and SDH	Per MCH/DHH/SDH	210000	2.10	0	0.00	0	-	
15.4.4	National level assessment of CHCs	CHC	146000	1.46	0	0.00	0	-	
15.5	<b>State level assessment for LaQshya surveillance</b>								
15.5.1	State level assessment of MCH, DHH and SDH	Per MCH/DHH/SDH	89500	0.90	0	0.00	0	-	
15.5.2	State level assessment of CHCs	Per CHC	63000	0.63	0	0.00	0	-	
16	<b>Implementation of RCH Portal/ANMOL/MCTS</b>	<b>Per ANM</b>	<b>850</b>	<b>0.0085</b>	<b>0</b>	<b>-</b>	<b>0</b>	<b>-</b>	<p><b>Budget Shifted from HSS-7 SI No.183</b></p> <p><b>Ongoing Activity</b></p> <p>Total ANM - 6688 Rural + 548- Urban = Total 7236</p> <p>Mobile / Tab / Internet charges per month @ Rs. 850/- per SC</p> <ul style="list-style-type: none"> <li>• ANMs are using their mobile for data update in different Apps &amp; portals (ANMOL, NCD, HWC, FPLMIS, IDSP, E ASHA, U WIN, NCD portal etc)</li> <li>• The tablet provided to ANMs during 2018-19 does not support due to low version of Android App. Again having 2 BG RAM, the device performance is poor.</li> <li>• Each ANM to be provided Rs.600/- as device allowance and Rs. 250/- internet charge subject to &gt; 85 % achievement in desired data fields.</li> <li>• The BDMs will validate the achievement % in each portal and approved for release of payment</li> </ul> <p><b>Detail proposal is placed at HSS-7 Other Initiatives write-up Annexure-8 : "Device allowance to ANMs"</b></p> <p><b>Budgeted 60% looking into expenditure trend (43% in 2022-23).</b></p>
17	<b>Other MH Components</b>								
17.1	<b>Incentive &amp; Other allowance</b>								

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
17.1.1	Transportation of HIV/ Syphilis combo kit to VHND sites by maintaining cold chain	Per case	75	0.00	0	-	0	<p><b>Ongoing Activity</b>  <b>Background:</b> Under universal screening of all PW for HIV and Syphilis, screening have been started in VHSND and UHSND sessions. Hence to maintain cold chain of the combo kit AVD system is adopted for carrying the combo kit in cold chain. Hence the person supporting in AVD is provided transportation cost per session.  <b>Status: 350773 (61%) VHSND sessions were supported with AVD volunteers transportation cost</b>  <b>Proposal:</b> Transportation of HIV/ Syphilis combo kit to VHND sites by maintaining cold chain.                      Total Sessions expected to be held at VHSND: 579213                      Total Sessions expected to be held at UHSND: 52608                      Total Session VHSND+UHSND: 631821                      AVD cost for HIV/ Syphilis Kit transportation proposed for 70% sessions : 442274  <b>Implementing Agency:</b> NGOs/ CBOs to be identified those have experience in such activity at district level.</p>	
17.1.2	ASHA incentive for supporting pregnant women to be in non-anemic status (HB% >11gm%)	Per case	200	0.00	0	-	0	<p><b>Ongoing Activity</b>  <b>Budget Not Approved</b></p>	
17.1.3	Mobilise and accompany suspected high risk pregnant women to ICTC or FICTC and ensure HIV and RPR testing during ANC (MH component)	Per case	100	0.00	0	-	0	<p><b>Ongoing Activity</b>  <b>Background:</b> Suspected pregnant women mobilized for testing at ICTC/FICTC for confirmation of HIV.  <b>Status:</b> 75% of suspected cases were provided transportation cost                      Expected 1% (6656) of ANC (665678) will be suspected to be reactive with WBFP Test.</p>	
17.1.4	Incentive for distribution of Misoprostol to home delivery cases	Per Home Delivery	100	0.00	-	-	0	<p><b>Ongoing Activity</b>  <b>Background:</b> Misoprostol tablets are provided to home delivery cases in the SCs with high home deliveries. The programmed will be implemented in the SC having &gt;=20% home delivery in HPDs. As per HMIS data 2022-23 there are 76 SCs having &gt;=20% home deliveries.  <b>Proposal:</b>                      For the implementation of misoprostol prog. the districts which are having &gt;=5 nos. of SC having &gt;=20% of home deliveries is considered. Hence, Total nos. of SC covered in 3 districts under the programmed having &gt;=5 SCs (Kalahandi, Nabarangpur &amp; Rayagada) with &gt;=20% home deliveries : 72.                      Expected home delivery cases in the targeted SC - 2570                      Targeted coverage - 80% i.e. 2056 <b>(In Principally approved in 2024-25 &amp; budget approved for 2025-26)</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
17.1.5	Incentive to ASHA for addressing high risk PNC	Per ASHA	250	0.00	0	0.00	0	0	<p><b>New Activity</b>            Proposal : The high risk PNC cases will be followed up by ASHA during HBNC and mobilize them for facility check up. If the outcome of mother and baby is healthy by 45th day then ASHA will be incentivized for her effort.            Target for PNC Incentive to ASHA  <b>Budget proposed:</b>            • Total no. of deliveries- 607936            • 30% of expected deliveries to be high risk- 182380            • Budget proposed for 30% of HR PNC cases to be supported by ASHA i.e 54714 cases @Rs.250/- per case</p>
17.2	<b>Drugs &amp; Supplies for Maternal Health</b>								
17.2.1	RTI /STI drugs and consumables	Per test		0.00		0.00			- Supply from State Budget
17.2.2	Glucose pouch for Screening (GDM)	Per Pouch	10	0.00	0	-	0		<p>Implemented in all 30 districts. Training has been completed for all service providers            Procurement -            - Drugs Specification : 75gm/pouch            Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH            Expected Pregnancies- 665678            Expected GDM Cases (14% of Expected ANC) - 93194            No. of GDM cases requiring Metformin Tab &amp; Inj. Insulin (3% of GDM cases) - 2795            Requirement of Glucose Pouch (75 gm) for screening (Expected PPW 665678 X 2) - 1331356            Requirement of additional Glucose pouch for PW under Metformin Tab &amp; Inj. Insulin (@20 glucose pouch) - 55900            Total Requirement of Glucose - 1387256 @Rs.10/- per Pouch  <b>Ongoing Activity</b></p>
17.2.3	Cartridge for insulin therapy (GDM)	Per Cartridge	300	0.00	0	-	0		- 3ml cartridge of 100 IU/ml (No. of PW x 6 cartridge for 180 days):932 x 6=5592Nos
17.2.4	Insulin pen (GDM)	Per pen	400	0.00	0	-	0		- Requirement of insulin pen (1 per beneficiary): 932 Nos
17.2.5	Needles (GDM)	Per needle	13	0.00	0	-	0		- Requirement of needles (1 per day x 180 days per person): 932 x180=167760 Nos

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
17.2.6	Misoprostol Tablet	Per Tab	1.65	0.00	-	-	-	-	<p><b>Ongoing Activity</b> The programmed will be implemented in the SC having &gt;=20% home delivery in 13 HPDs. As per HMIS data 2022-23 there are 76 SCs having &gt;=20% home deliveries. For the implementation of misoprostol prog. the districts which is having &gt;=5 nos. of SC having &gt;=20% of home deliveries is considered. Hence, Total nos. of SC covered in 3 districts under the programmed having &gt;=5 SCs (Kalahandi, Nabarangpur &amp; Rayagada) with &gt;=20% home deliveries : 72. <b>Expected home delivery cases in the targeted SC - 2570</b> <b>Targeted coverage - 50% i.e. 1285</b> <b>Total Requirement:</b> Provisioned for 3 tablets per home delivery which is 3855 + 20% of requirement to be kept with ASHA which comes to 771 tabs. = 4626 tablets <b>Drugs Specification : 200 Mcg</b> To be met out of State supply</p>	
17.2.7	Safe Delivery Kit for HIV	Per Kit	600	0.01	0	-	0	-	<p><b>Background:</b> Safe Delivery Kits are required to be kept in all functional delivery kits to meet the requirement and use by the health care service providers at DP while providing services to HIV positive mother approaches for delivery as per the protocol of labour room standardization. <b>Proposal:</b> - Specification : 1pkt/5 kit ( For 4 service providers , 1 for baby) Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH (DP only) Requirement is for 486 functional delivery point @ 3 kit per DP + 220 ICTCs @ 5 kit per ICTCs + @10 kits per MCH for 14 MCH &amp; @5 kit for BBSR Municipality Hosp.=2703 Kits The cost per kit will be around Rs 600/-</p>	
17.2.8	Inj. Ferric Carboxy Maltose	Per inj	400	0.00	0	-	0	-	<p><b>Ongoing Activity</b> <b>Inj. FCM (500mg.) will be provided to severe anaemic PNC cases after delivery under the programmed.</b> Total PNC - 607936 Proposed for expected severe anemic cases (2%) - 12158 @ 2 doses per case = 24316 Injections Initially proposed for severe anemic cases. FCM is not part of State EDL. <b>Budget requirement: Rs. 97.26 Lakhs as per estimation of PNC severe anaemic cases</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
17.2.9	Disposable delivery kit	Per Kit	200	0.00	-	-	-	-	<p><b>Ongoing Activity:</b> The programmed will be implemented in the SC having &gt;=20% home delivery in HPDs. As per HMIS up to Oct.2021 there are 179 SCs having &gt;=20% home deliveries. For the implementation of misoprostol prog. the districts which is having &gt;=5 nos. of SC having &gt;=20% of home deliveries is considered. Hence, Total nos. of SC covered in 6 districts under the programmed having &gt;=5 SCs(Gajapati, Kalahandi, Malkangiri, Nuapada Nabarangpur &amp; Rayagada) with &gt;=20% home deliveries : 169 SCs. Expected home delivery cases in the targeted SC - 3823 Targeted coverage - 50% i.e. 1913 The disposable delivery kit will be provided to home delivery cases those covered under misoprosol programmed. these kits to be distributed by ASHA during the distribution of misoprostol tablets. Requirement : 1913 kits The cost per kit will be around Rs 200/- . <b>To be met out of State Supply</b></p>	
17.3	<b>Training &amp; Capacity Building</b>					0.00		0.00		
17.3.1	TOT for RTI/STI training	30/Per batch	140000	1.40		0.00			<p>90 Master trainers pool created at district level. 3 batches (@ 3 per district- O&amp;G, Paed, Skin VD/ Med) Total 90 persons trained during 2022-23. Not proposed for 2024-26</p>	
17.3.2	Field Training on RTI/STI	25/batch	30000	0.30	0	0.00	0		<p><b>Proposal : RTI/STI training for MOs</b> <b>Status:</b> Total Load - 439 (1 MO per inst x 439 inst) Cumm Trained MO - 902 till 2021-22, Projected Ach in Mar'24: 33 batches Load for 2024-26 : New load for 1404 MOs of PHC HWCs (R+U) Duration: 2 days <b>Load for 2024-25 : 14 batch (@ 1 batch per selected district)</b> <b>Load for 2025-26 : 9 batch (@ 1 batch for selected districts)</b> <b>Other training of LT &amp; SN have been saturated.</b></p>	
17.3.3	Quality ANC and HRP management training for HW(F)	Lumpsum		0.00		0.00			- <b>Dropped as per Recommendation of NPCC</b>	
17.3.4	Half yearly reorientation and refresher training on programmes updates on PMSMA, e PMSMA, anemia in pregnancy, GDM, hypothyroidism and maternal health indicators for ADPHO (FW), Dy Manager RCH, O G Spl at State level.	Per batch	74100	0.74	0	0.00	0		<p><b>New activity</b> <b>Background:</b> There is always some modification and change is various maternal health programmed guidelines which requires periodical update for the grass root level implementers. Hence reorientation and refresher training on PMSMA, e PMSMA, anemia in pregnancy, GDM, hypothyroidism and maternal health indicators is proposed for ADPHO (FW), Dy Manager RCH, O G Spl at State level. <b>Proposal:</b> No. of participants – 30 ADPHO FWs, 30 DMRCHs, 32 O G Spl of DHHS and 4 O &amp; G spl MCH, 4 HMs of MCH and 2 from PGI and RGH - Total participants- 102 participants from districts and 10 from State level No. of batches – 6 ; @ 30- 35 participants per batch</p>	

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17.4	IEC/BCC activities under MH					0.00		0.00	
17.4.1	Mass Media Interventions								- Ongoing Activity
17.4.1.1	Production & Advertisement through DD & local channels or scrolling	Per minute	172000	1.72	0	0.00	0		Timing: 1 minute per day for 24 days per year as per I&PR rates - Cost proposed as per revised I&PR, GoO norm Telecast for e-PMSMA, MH Care etc.
17.4.1.2	Advertisement through AIR channels	Per minute	47000	0.47	0	0.00	0		Timing: 1 minute per day for 12 days in a year as per I&PR rates - Cost proposed as per revised I&PR, GoO norm Broadcast for e-PMSMA, MH Care etc.
17.4.1.3	Advertisement through FM Channels	Per minute	20000	0.20	0	0.00	0		Timing: 10 minutes per day for 36 days per year - Cost proposed as per revised I&PR, GoO norm Broadcast for e-PMSMA, MH Care etc.
17.4.1.4	Publicity through Print Media	Per day	100000	1.00	0	0.00	0		One time advertisement of Colour Quarter page in 2 newspaper for 12 days Cost proposed as per revised I&PR, GoO norm
17.4.2	Mid Media Interventions								- Ongoing Activity
17.4.2.1	Dynamic hoarding 4 times	Per hoarding	3000	0.03	0	0.00	0		- Change of matter for hoarding @ 4 no for each district HQ and for block)
17.4.2.2	Folk show / street theater out reach pockets	Per show	5000	0.05	0	0.00	0		- Need regular intervention to sensitize at grassroots @1 show per block x 314 blocks
17.4.2.3	Branding at SUMAN Facilities	Per Facility	4000	0.04		0.00			<b>Ongoing Activity</b> As per Gol Guideline following IEC materials are to be printed and displayed at SUMAN certified facilities. 1. Standee on Free services 2. Standee on Grievance 3. Banner on Free services 4. Hoarding on Free and RMC services 5. Hoarding on eligible beneficiary and free services 6. Posters 7. Hoarding on SUMAN charter on services 8. Glow board logo as Suman compliant facility (2.5 ft X 4ft) To be displayed in entrance <b>Costing proposed-</b> <b>Basic Facilities @ Rs. 4000/- per unit x 1000 facilities</b> <b>To be met out of State specific scheme AMA Hospital Initiative</b>
17.4.2.4	Installation of New Dynamic Hoardings (Iron Frame)	Per Hoarding	25000	0.25		0.00			Covering 382 CHC/ UCHCs in the Year 2024-25 & 141 MC(17), DHH(32), SDH (32) & OH (60) in the Year 2025-26 To be met out of State specific scheme AMA Hospital Initiative
17.4.2.5	Day celebration : Safe Motherhood Day (11 Apr), World Health Day (7 Apr) & International Safe Abortion Day (28 Sep)			-		-			<b>Ongoing activity</b> - Safe Motherhood Day (11 Apr), World Health Day (7 Apr) & International Safe Abortion Day (28 Sep)
17.4.2.6	At State level	Per event	100000	1.00	0	-	0		-
17.4.2.7	At Dist level	Per event per dist	15000	0.15	0	-	0		-
17.4.2.8	At Block level	Per event per block	2000	0.02		-			-
17.4.2.9	PHC/SC Level		3000			-			- Fund to be met out of IEC budget PHC/SC-HWC

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17.4.2.10	Inter Personal Communication			0.00		0.00			- IPC done at VHND Session and during Home Visits. No additional budget proposed.
17.4.3	Kilkari	Lumpsum	2122000	21.22	0	0.00	0		- Details at RCH-1 MH Write-up Annexure
17.5	<b>Printing activities under MH</b>					-			-
17.5.1	PNC ward register	Per Unit	90	0.00	0	-	0		PNC ward register will comprise of two parts, one Mother & one Newborn. The mother & newborn register will be taken as one unit. (One for each SC DP and other DP will have register as per delivery load with each register having 300 pages). (@ Rs.90/- X 1767 = Rs.159030/-) PNC ward Register: Booklet @ 6 per MCH – 14 MCH X 6 = 84 Booklet @ 3 per DHH - 22 DHH X 3= 66 Booklet @ 2 per SDH - 32 SDH X 2=64 Booklet @ 2 per CHC - 374 CHC X 2 = 748 Booklet @ 2 per OH - 54 OH X 2 =108 Booklet @ 1 per PHC (Functional DP) - 102 PHC X 1=102 Booklet @ 1 per PHC (Promising DP) - 456 PHC X 1 = 456 Buffer (10%) -160 Total = 1628 + 162 = 1790
17.5.2	Referral Slip Sub Centre per Booklet	Per Booklet	30	0.00	0	-	0		Referral Slip Sub Centre per Booklet (100 pages) : Referral Booklet @ 1 per Sub Centre (rural+urban) - 6688 SC X 1 = 6688+548(urban sc)=7236 Buffer (10%) -723 Total = 7236+723=7959 (@ Rs. 30/- X 7959= Rs. 238770/-)
17.5.3	Referral Slip Inter Facility per Booklet	Per Booklet	30	0.00	0	-	0		Referral Slip Inter Facility per Booklet (100 pages): Booklet @ 6 per MCH – 14 MCH X 6 = 84 Booklet @ 3 per DHH - 22 DHH X 3= 66 Booklet @ 2 per SDH - 32 SDH X 2=64 Booklet @ 2 per CHC - 374 CHC X 2 = 748 Booklet @ 2 per OH - 54 OH X 2 =108 Booklet @ 1 per PHC (Functional DP) - 102 PHC X 1=102 Booklet @ 1 per PHC (Promising DP) - 456 PHC X 1 = 456 Buffer (10%) -162 Total = 1628 + 162 = 1790 (@ Rs. 30/- X 1790 = Rs. 53700/-)

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
17.5.4	Referral out Register per Register (50 pages)	Per Booklet	50	0.00	0	-	0	<p><b>Ongoing activity</b>  <b>Background:</b> This register is to be maintained for all cases those are referred to higher facility with intimation for case management  <b>Proposal:</b>                      Referral out Register per Register (50 pages) :                      Register @ 2 per DHH/MCH - 36X2=72                      Register @ 2 per SDH - 32X2=64                      Register @1 per CHC (Functional DP) - 316X1 = 316                      Register @1 per CHC (Promising DP) - 61X1 = 61                      Register @ 1 per OH (Functional DP) - 24x1=24                      Register @ 1 per OH (Promising DP) - 24X1=24                      Register @1 per each Sub Centre (Functional DP) - 80X1=80                      Register @1 per each Sub Centre (Promising DP) - 69X1 = 69                      Register @ 1 per PHC(N) (functional DP) - 102X1 =102                      Register @ 1 per PHC(N) (Promising DP) -456X1=456                      Buffer (10%) - 126                      TOTAL = 1268+126=1394 (@ Rs. 50/- X 1394 = Rs. 69700/-)</p>	
17.5.5	Referral In Register	Per Register	50	0.00	0	-	0	<p><b>Ongoing activity:</b>  <b>Background:</b> Referral In Register is to keep record of all referred cases so that proper priority can be give during treatment  <b>Proposal:</b>                      Register @2 per DHH/MCH - 36X2=72                      Register @ 2 per SDH - 32X2=64                      Register @ 1 per CHC - 374X1 = 374                      Register @ 1 per OH -54X1 = 54                      Buffer (10%) - 56                      Total = 564+56=620 (@ Rs. 50/- X 620= Rs. 31000/-)</p>	
17.5.6	Red Card	Per Card	5	0.00	-	-	-	<p><b>Ongoing activity</b>                      Background: Red Card is provided to all identified high risk PW, PNC and children in the age of O-5 years. This card is provided with mark of high risk for priority treatment  <b>Proposal:</b>                      Total reported PW : 665678                      Expected High Risk PW : 99852 (15% of total Expected PW)                      Red card for expected High Risk PW : 99852                      Reported U5 as per F.I. data 2022-23: 3481602                      Expected Sick U5 = 10% of 3481602= 348160  <b>Grand Total:</b> 99852+348160=448012                      Buffer: 10% (44801)                      Grand Total: 448012+44801= 49813 @ Rs. 5/-                      To be met out of State specific scheme SAMPURNA</p>	
18	State specific Initiatives and Innovations					-	-		

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
18.1	One week confidence building on ultrasonography training for OG spl.	2/ batch	34400	0.34	0	-	0	-	One week confidence building on ultrasonography training for OG spl. at 3 MCH & IGH, rourkela State load = 48 OG Spl .OG requires confidence building &USG machine available. Further load for 2024-26: 20 persons (10 batches) Target for 2024-25: 10 person (5 batches) Target for 2025-26: 10 person (5 batches)
<b>Total RCH-1 (Maternal Health)</b>						<b>46.18</b>		<b>46.18</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**RCH-3**  
**Child Health**



## RCH-3\_Child Health

S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
	<b>Total Child Health</b>					<b>14.08</b>		<b>14.11</b>		
21	<b>Rashtriya Bal Swasthya Karyakram (RBSK)</b>					-		-	<p>Background &amp; Current Status: RBSK is rolled out in the State in the year 2013-14 and implemented in all 30 districts of Odisha. Till date a total of <b>626 MHTs out of 636 sanctioned</b> and 32 DEICs are functional. Referral services to DEIC &amp; Higher facility continued. The State has empanelled &amp; tied up various Health institutions including Govt. MC&amp;Hs, AIIMS, BBSR, AYJNISHD, Khurda, 6 Hospitals of Narayana Hrudayalaya Ltd, Sathya Sai Cardiac Hospital, Ahmadabad, LV Prasad Eye Institute, BBSR, Mission Hospital, Durgapur, Sri Sai Sanjivani Heart Hospital, Raipur, CIIT, Smile Train India Trust, Etc. In addition to treatment at RBSK empanelled Hospital under RBSK referral cost, children are provided free treatment services through Govt. MC&amp;H &amp; BSKY empanelled hospitals in the State. New Born Screening is continuing in all functional DPs and functional linkage between DEIC &amp; SNCU has been established in all districts.</p> <p>Proposal 2024-26: All the ongoing activities of PIP 2022-24 will be continued and strengthened. Four ( 4 ) new MHTs will be added to the fleet in urban areas in <b>FY 2025-26</b> . Justification attached at Write-up Annexure.</p>	
21.1	Mobility support for RBSK Mobile health team	Per team per Month	31000	0.31	0	-	0	-	<p><b>Ongoing Activity</b> <b>Background:</b> In PIP 2022-23 &amp; 2023-24, the mobility support cost per MHT per month approved was Rs.31000/- . Which includes both Vehicle Hiring &amp; Fuel cost. <b>Progress:</b> During 2022-23, 99% of expenditure is incurred under the head. <b>Proposal For FY 2024-25: (for 636 Sanctioned MHTs)</b> <b>Proposal For FY 2025-26: (for 636 Sanctioned MHTs &amp; 4 New MHTs proposed for Urban Areas)</b> The monthly MHT vehicle Mobility cost is proposed @ Rs.31,000/- PM as approved last year. ( GoI Unit cost norm: Rs.30,000/- Mobile Health Team per Month approximately)</p>	
21.2	Operational cost for RBSK Mobile health team	Per MHT	5000	0.05	0	-	0	-	<p><b>Ongoing Activity</b>, proposed as approved last year <b>Background &amp; Justification:</b> Rs.5000/- MHT Operational cost per MHT per annum is used for various contingency expenditure including stationeries for its smooth functioning and documentation of activities. <b>Progress:</b> 100% expenditure incurred towards Operational cost for MHT in 2022-23. <b>Proposal For FY 2024-25: (for 636 Sanctioned MHTs)</b> <b>Proposal For FY 2025-26: (for 636 Sanctioned MHTs &amp; 4 New MHTs proposed for Urban Areas)</b></p>	

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S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
21.3	Internet Data pack for RBSK Mobile health team	Per team	600	0.01	0	-	0	-	<p><b>New Proposals: ( proposal for 636 Sanctioned MHTs)</b>  <b>Background &amp; Justification:</b>  Gol has mandated for real time entry of RBSK MIS in the portal. MHTs have to enter the real time information while screening at AWC, Schools &amp; Junior colleges as per mandate. Internet facility is required for submission of Screening information.  <b>Proposal For FY 2024-25: (for 636 Sanctioned MHTs)</b>  <b>Proposal For FY 2025-26: (for 636 Sanctioned MHTs &amp; 4 New MHTs proposed for Urban Areas)</b>  One time data card and monthly net package is proposed.  1.. Rs.600/ towards one time purchase of Data card/ Dongle per MHT  <b>2. Monthly Data pack to be managed from operational cost</b></p>
21.4	Equipment/ Instruments for RBSK Mobile health team	Per MHT	12000	0.12	0	0.00	0	0.00	<p><b>Ongoing Activity: ( proposal for 636 Sanctioned MHTs)</b>  <b>Background &amp; Justification:</b>  MHT screening kits are frequently used for screening of children on daily basis. Replenishment of one set of Screening Kit ( BP instrument, Weighing scale, Infantometer, Baby Weighing Scale, MUAC tape, Head Circumference tape, Stethoscope , Snellen's chart with a carry bag and Development assessment tools suggested in the Job Aid ) is required to ensure availability of Screening tools with all MHTs during 2025-26.  The screening kit will be proposed as per RBSK guideline prescribed under Job Aid.  <b>Proposal For FY 2024-25: (for 636 Sanctioned MHTs)</b>  Budget Proposed @ Rs.12,000/- per MHT towards purchase of new MHT Screening Kit ( BP instrument, Weighing scale, Infantometer, Baby Weighing Scale, MUAC tape, Head Circumference tape &amp; Development assessment tools as per Job aid ) for all 636 MHTs as same has been given before 3 years.  <b>Proposal For FY 2025-26: (for 4 New MHTs proposed for Urban Areas)</b>  <b>Justification for proposing new set:</b> As the MHT equipment are used on daily basis, to ensure screening equipment set with all MHTs one new set of screening equipment is proposed.</p>
21.5	Drugs & Supplies for RBSK Mobile health team	Per team	10000	0.10		0.00		0.00	<p><b>Not proposed in 2024-2026 PIP</b>  <b>Prescribed drugs for MHT may be supplied out of existing Drugs supply.</b></p>
21.6	RBSK Training -Training of Mobile health team					0.00		0.00	<p><b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>  As per RBSK mandate, the newly joined MHT staff have to undergo 5 days basic training. After implementation of the programme, refresher training for the said MHT staff are required for their skill updation and improving the screening quality. In this regard, both 5 days basic training &amp; 3 days refresher training were approved in 2022-24 PIP which will ne completed by March'2024.  <b>Proposal 1: Induction training to MHT staff (Residential regional level training)</b></p>

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
21.6.1	Induction training to MHT staff	Per Batch	208500	2.09	0	0.00		0.00	<p><b>Proposal-1: Induction training to MHT staff (Residential regional level training)</b>  Total MHT staff strength- 2560 (640 MHTX4)  Out of them, No. of MHT staff undergone 5 days training-2410  Expected No. of MHT staff to be recruited &amp; trained during 2024-25- 150 (5 batches of 5 days RBSK training for MHTs).  Newly recruited MHT staff to be trained in 2024-25 at State &amp; Regional level by National Level Master Trainers  <b>Batch Size: 30/ per batch</b>  <b>Total Budget requirement: Rs.2,08,500/- per batch X 5 batches= Rs.10.43 lakhs</b></p> <p><b>Proposal-2: Three Days Refresher training for RBSK MHT Staff (District level training)</b>  Total MHT staff strength- 2560 (640 MHTX4)  <b>Current Year Proposal:</b> 50% of the existing MHT Staff to undergo Refresher Training ( 1280 MHT staff in 42 Batches @ 30 per batch) &amp; rest have already trained in 2023-24.  <b>Proposal for 2024-25 :</b> Rs.0.78 Lakh per batch X 42 batches= Rs.32.76 Lakhs ( <b>Go unit cost: Rs. 25000/- Per MHT. Training budget calculation is made as per Society norm )</b>  <b>Batch Size: 30/ per batch</b>  <b>Total budget proposed for FY 2024-25: Rs.10.43 Lakhs +Rs.32.76 Lakhs= Rs.43.19 Lakhs</b></p>	
21.6.2	Three Days Refresher training for RBSK MHT Staff (District level training)	Per Batch	78000	0.78	0	0.00		0.00	<p><b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>  <b>RBSK Screening Card:</b>RBSK screening card is prescribed by Govt. of India which is followed by MHT while screening of each child. During 2021-22, Screening cards were supplied to districts. For issue of new cards to newly enrolled children at AWC &amp; Schools in 2024-25 &amp; 2025-26, total 12 Lakhs 0-6 &amp; 6-18 years screening card is proposed to be printed.  - <b>RBSK Registers:</b> As per RBSK guideline, MHT screening registers are prescribed for AWC &amp; Schools. The Prescribed Screening registers are to be supplied to each MHT to record child wise screening information.  <b>Progress:</b>  RBSK Screening card was supplied to districts in 2021-22.  RBSK Screening register was supplied to all MHTs in 2023-24 which was used during 2022-23.</p>	
21.7	Printing of RBSK card and registers						-		<p><b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>  <b>RBSK Screening Card:</b>RBSK screening card is prescribed by Govt. of India which is followed by MHT while screening of each child. During 2021-22, Screening cards were supplied to districts. For issue of new cards to newly enrolled children at AWC &amp; Schools in 2024-25 &amp; 2025-26, total 12 Lakhs 0-6 &amp; 6-18 years screening card is proposed to be printed.  - <b>RBSK Registers:</b> As per RBSK guideline, MHT screening registers are prescribed for AWC &amp; Schools. The Prescribed Screening registers are to be supplied to each MHT to record child wise screening information.  <b>Progress:</b>  RBSK Screening card was supplied to districts in 2021-22.  RBSK Screening register was supplied to all MHTs in 2023-24 which was used during 2022-23.</p>	
21.7.1	Screening registers per MHT	Per MHT	2000	0.02	0	-	0	-	<p>Printed screening registers per MHT for 636 MHTs including buffer to capture screening data from AWC &amp; School. During 2022-24, Rs. 1200/- was approved in PIP. Keeping in view of requirement, Rs.2000/- is proposed in 2024-25 for Printing of MHT screening register Per team per annum.  Budget Proposed: @ Rs. 2000/- per team per annum .  Rs.2000/- Per MHT X 636 MHTs= Rs.12.72 Lakh  <b>Budget Approved 99% for FY 2024-25 &amp; 100% for FY 2025-26</b></p>	

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S.No.	Scheme/ Activity	Approval in 2024-26							
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
21.7.2	Printing of Screening card	Per Card	6	0.00	0	-	0	-	For the year 2024-25 & 2025-26, 12 Lakhs RBSK 0-6 & 6-18 years Screening card ( 6 Lakhs each) is proposed. Budget Proposed: @RS. 6/ Per unit X 12 Lakh Cards= Rs. 72 Lakh
21.8	ASHA incentive for mobilising 0-3yr children for screening	Per 2 visits p.a. by MHT	100	0.00	0	-	0	-	Ongoing Activity: <b>Background &amp; Justification:</b> The age group of below 3 years are not attending the Pre School and their coverage is required for early identification of defects & Delayed development. To ensure screening coverage of 0-6 years children at AWC as per Key deliverables, mobilization of 0-3 years children to AWC on MHT visit date is required. <b>Progress:</b> ASHA incentive for mobilising 0-3yr children to AWC during MHT visit days was approved in 2022-24 and already implemented in the State. <b>Proposal For FY 2024-25:</b> Activity proposed as per last year's approval for 72000 existing AWC in the State. Budgeted 80%
21.9	Planning & M&E								
21.9.1	Review cum CME for Dist. Programme Managers	Per Meeting	90000	0.90	0		0		Ongoing activity. <b>Proposal for FY 2024-26:</b> One day State level half yearly review & Orientation of Programme Managers & Nodal Officers (RBSK Manager & ADMO(FW). One meeting will be conducted for orienting district level Officers on implementation of RBSK MIS. <b>Budget Proposed:</b> @Rs.90,000/- Per Meeting X 2 Meetings= Rs.1.80 Lakhs per Year <b>Budget Shifted to HSS-11 SI No 194</b>
21.9.2	RBSK Convergence/ Monitoring meetings	Lumpsum	15000	0.15	0		0		<b>On Going Activity:</b> <b>Background &amp; Justification:</b> <b>Quarterly Convergence &amp; Review Meeting</b> planned at district level with participation of line departments (School & Mass education, ICDS, SC&ST department & Health under the chairpersonship of Collector & District Magistrate. Along with convergence issues, MHT /Block wise performance review on different RBSK components is covered in the meeting. <b>Proposal</b> <b>Budget:</b> @Rs.15000/- per meeting per Quarter X 4 quarter X 30 districts = <b>Rs.18.00 lakhs</b> per year <b>Budget Shifted to HSS-11 SI No 194</b>

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
22	RBSK at Facility Level including District Early Intervention Centers (DEIC)					3.76		3.76		
22.1	DEIC (Operational Cost )	Per DEIC	336000	3.36	1	3.36	1	3.36	<p><b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>            32 DEICs are established in the State. For smooth operation of these DEICs, the operational cost was approved.  <b>Progress:</b>            Total DEIC s in the State-32. In the year 2022-23, 98% of approved funds were utilized.  <b>Proposal for FY 2024-25:</b>            Operational cost of DEIC proposed as per last year's approval (Including attendant hiring on out sourcing for required cleanliness)            Budgeted @Rs.28,000/- Per DEIC Per Month X 12 Months X 32 DEICs= Rs.107.52 Lakhs</p>	
22.2	DEIC (Equipment / Instruments )	Lumspsum	17786800	177.87	0	0.00		0.00	<p><b>Ongoing Activity</b>  <b>Background &amp; Justification:</b>            32 DEIC are functional in the State.            During the initiation of DEIC activities , Audiological assessment equipment like Pure Tone Audiometer &amp; Impedance Audiometer were supplied to DEICs in the Year 2015. During 2022-24, approval for replacement of 5 Pure Tone Audiometer &amp; 5 Impedance Audiometer were made in PIP 2022-23 and the said equipment have been supplied to DIECs. However the existing Pure Tone Audiometer &amp; Impedance Audiometer which is more than 8 years old needs replacement. The present requirement status is as given bellow:            1.Pure Tone Audiometer: 26 Nos ( 6 units are procured and Installed in 2022-23).The system available at the remaining 26 DEICs are supplied in the year 2015.Hence need Replacement as well as standby for uninterrupted services at DEIC.            2.Impedance Audiometer,: 27 Nos ( 5 units are procured and supplied ).The system available at the remaining 27 DEICs are supplied in the year 2015.Hence need Replacement as well as standby for uninterrupted services at DEIC.  <b>Budget:</b>  <b>Proposal for 2024-25:</b>            Proposal 1: Pure Tone Audiometer: Rs.81.64 Lakhs ( @ Rs.3.14Lakhs per Unit X 26units)            Proposal 2: Impedance Audiometer:Rs.96.228Lakhs (@ Rs.3.564 per Unit X 27Units)  <b>Total Budget proposed for FY 2024-25= Rs.81.64 Lakhs+ Rs. 96.228 Lakhs= Rs.177.87 lakhs</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
22.3	DEIC (Printing )	Per DEIC	40000	0.40	1	0.40	1	0.40	<p><b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>  For printing of different assessment form and registers of DEIC, the annual printing cost is approved in the PIP .  <b>Progress:</b>  During the year 2022-23, the required printing activity were carried out by DEICs.  <b>Proposal for 2024-25:</b>  Proposed @ Rs. 40000/- per DEIC for Printing of registers &amp; case assessment formats x 32 units= Rs. 12.80 Lakhs (as per last years approval.)</p>
22.4	DEIC training : 32 DEICs	Per person	20000	0.20		-		-	<p><b>Dropped as per recommendation of NPCC</b>  <b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>  The newly established DEIC staff are to undergo basic as well as thematic training to strengthen transdisciplinary therapeutic intervention at DEIC.  <b>Progress:</b>  Total DEIC sanctioned:32  No. of Staff per DEIC to be trained per DEIC :08  (M.O (MBBS), Paediatric Specialist, Physiotherapist/ Occupational Therapist, Psychologist, Special Educator, Audiologist&amp; Speech Therapist, Optometrist &amp; Manager)  Training Load: 256  Duration of Training: 5 days basic training will be conducted at State headquarter by central team. Total staff to undergo training - 32 DEICs x 8 critical staff per DEIC = 256 participants.  <b>Proposal for FY 2024-25:</b>  To cover all proposed 256 DEIC staff, 80 no of DEIC staff will be trained in 2024-25 in coordination with Gol team.  No. of DEIC staff to be trained during 2024-25: 80  Training cost: Rs.20000 per person x 80 persons= Rs. 16.00 lakhs  ( GOI unit cost for DEIC staff training- Rs.20,000/- . Proposed as per Gol suggested unit cost)</p>
22.5	New born screening as per RBSK Comprehensive New-born Screening: Handbook for screening visible birth defects at all delivery points	Per Unit	35000	0.35		-		-	Activity Completed in 2021-22. No additional budget proposed.

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
22.6	New born screening- Inborn error of metabolism	per kit	450	0.00		-		<p><b>Ongoing Activity</b></p> <p><b>Background &amp; Justification</b></p> <p><b>Screening of Inborn Error of Metabolism of New Born at Biochemistry Department of SCB MC&amp;H on Pilot basis:</b></p> <p>i) Screening of Inborn Error of Metabolism (IEM) of new born is started on pilot basis at the Department of Biochemistry, SCB MC&amp;H, Cuttack . Initially screening of Congenital Hypothyroidism, CAH and G6PD deficiency is undertaken for inborns at O&amp;G ward of SCB MC&amp;H.</p> <p>ii). Already steps have been taken up by the State for screening of Himoglobinopathies of newborn at the Department of Biochemistry, SCB MC&amp;H, Cuttack (Under sickle cell project jointly undertaken with CMC , Vellore)</p> <p>III). Along with screening of Himoglobinopathies, screening of Congenital Hypothyroidism, CAH and G6PD deficiency is undertaken for inborn at O&amp;G ward of SCB MC&amp;H.</p> <p>IV). Annually around 4500 (about 75% of total deliveries of 6000) newborns will be screened for identification of Himoglobinopathies and IEM like Congenital Hypothyroidism, CAH and G6PD deficiencies.</p> <p>V). Treatment facilities for conditions under Himoglobinopathies and IEM like Congenital Hypothyroidism and G6PD deficiency are available in the existing system and early counseling and medicinal advice can prevent mortality and the</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
22.7	Referral Support for Secondary/ Tertiary care Services	Lumpsum						<p><b>Ongoing Activity:</b>  <b>Background &amp; Justification:</b>  As per RBSK mandate, the children identified with prescribed birth defect conditions are to be treated at Tertiary level facilities. Under RBSK, 8 private cardiac Hospitals are empanelled ( Narayan Hrudayalaya Ltd., Mission Hospital, Durgapur &amp; Sri Sai Sanjivaneey Hospital, Raipur) and 1 Private Hospital is empanelled for treatment of Eye defect cases ( LVPEI, BBSR). Also children are referred to Govt. Tertiary facilities like SCB MC&amp;H, Cuttack, MKCG MC&amp;H, Berhampur, VSS MC&amp;H, Burla &amp; AIIMS, BBSR.</p> <p><b>Plan to cover following cases through empanelled Hospitals during 2024-25:</b></p> <ol style="list-style-type: none"> <li>1.Neural Tube Defect -50</li> <li>2.Talipes (Club foot) - Budget dropped as not approved in 2022-24.</li> <li>3.Development Dysplasia of the hip- 10</li> <li>4.Congenital Cataract - 600</li> <li>5.Congenital Deafness -2500 children Budget Shifted &amp; Proposed at NCD-11 NPPCD- Also children issued with disability certificate may be covered under ADIP Scheme. During 2022-23, No hearing aid was supplied by AYJNISHD, Janala due no availability of stock at their institution.</li> <li>6.Congenital Heart Disease - 400</li> <li>7.Retinopathy of prematurity - 250</li> <li>8.Rheumatic Heart Disease- 10</li> <li>9.Vision Impairment (Strabismus) -200</li> <li>10.Cleft Lip + Cleft Palate- Agencies tied up are SCB MCH, MKCG MCH, Smile Train &amp; Mission Smile empanelled hospitals - Free of cost</li> </ol> <p>RBSK referral support is a demand driven activity. Funds are available under this head at state PIP. However , district to spend &amp; book expenditure under this line item following the RBSK referral treatment cost guideline issued by Gol &amp; communicated to districts from time to time.</p> <p><b>Proposal for FY 2024-25:</b>  <b>Budgeted for 1720 birth defect cases ( NTD- 50, DDH-210, Congenital Cataract-600, CHC-400, RHD-10, Strabismus-200 &amp; RoP-250 Cases). The amount Proposed for treatment in</b></p>	
22.7.1	Neural Tube Defect - Agencies tied up are SCB MCH & AIIMS BBSR	Per Case	35000	0.35	0	0.00	0	<p>Ongoing Activity:  <b>Background &amp; Justification:</b>  Neural Tube Defect - Agencies tied up are SCB MCH &amp; AIIMS BBSR &amp;</p> <p><b>Progress:</b>  During 2024-25,45 NTD cases were treated.</p> <p><b>Proposal for FY 2024-26:</b>  Budget proposed@Rs.35000/- per case x 50 cases per year</p>	
22.7.2	Talipes (Club foot) - Agencies tied up are CIIT Delhi. Club foot clinic operational in 11 facilities	Per Case	3000	0.03		0.00		<p>The activity is managed by H&amp;FW Department. Though H&amp;FW Department has MoU with CIIT, CIIT support is only limited to supply of Special Shoes. The services is provided at 14 selected DHHS, &amp; MCHs. Consumables to be met out of State budget. The budget proposed in 2022-24 was dropped in last PIP.</p> <p><b>No Proposal for 2024-25</b></p>	
22.7.3	Development Dysplasia of the hip- Agencies tied up are SCB MCH, SBNIRTAR & AIIMS BBSR	Per Case	60000	0.60	0	0.00	0	<p>Ongoing Activity:  <b>Proposal for FY 2024-25:</b>  Development Dysplasia of the hip- Agencies tied up are SCB MCH, SBNIRTAR &amp; AIIMS BBSR.</p>	

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22.7.4	Congenital Cataract - Agency tied up is LVPEI BBSR	Per Case	20000	0.20	0	0.00	0	-	Ongoing Activity: <b>Background &amp; Justification:</b> Congenital cataract is covered under RBSK and LVPEI, BBSR is tied up under RBSK for treatment of Eye Defect conditions under RBSK. <b>Progress:</b> During 2022-23, 597 Congenital cataract cases were treated. <b>Proposal for FY 2024-26:</b> Budget proposed @Rs.20000/- per case x 600 cases per
22.7.5	Congenital Deafness - Agency tied up for supply of digital & programmable hearing aid	Per Case	10000	0.10		0.00		-	Congenital Deafness - The procurement will be made through GeM/ the existing rate contract of AYJNISHD, Mumbai to be followed & budgeted @Rs.10000/- per case x 2500 cases = Rs.250.00 lakhs Not Proposed as proposal not approved in 2022-24. <b>Budget Proposed at NCD-11 NPPCD- Children issued with disability certificate may be issued Hearing Aid under ADIP Scheme. AYJNISHD was unable to supply hearing aid during 2022-23, due to non availability of Hearing Aid at its Odisha center.</b>
22.7.6	Congenital Heart Disease - Agencies tied up are SCB MCH & Narayana Hrudalaya Ltd.	Per Case	160000	1.60	0	0.00	0	-	Ongoing Activity: <b>Background &amp; Justification:</b> Under RBSK, treatment provision for CHD cases is covered. Treatment of CHD cases is conducted at SCB MC&H , Cuttack, Capital Hospital, BBSR ( Device Closure cases only) and Private empanelled Hospitals. <b>Progress:</b> During the Year 2022-23, 557 CHD cases have been treated at Govt. & Private empanelled Hospitals. <b>Proposal for FY 2024-26:</b>
22.7.7	Retinopathy of prematurity - Agency tied up is LVPEI BBSR	Per Case	10000	0.10	0	0.00	0	-	Ongoing Activity: <b>Background &amp; Justification:</b> RoP is one of the Health condition covered under RBSK. Under RBSK Model Costing, Funds for RoP laser therapy is also suggested. Prior to RBSK, RoP screening was conducted at Capital Hospital, BBSR and with support of RBSK, the RoP screening services extended to 3 MC&Hs and 10 District Hospitals. Annually around 250 cases are being identified with RoP who require timely laser Therapy to prevent blindness among such high risk category. The activity is an Ongoing activity under RBSK. <b>Progress:</b> During the year 2022-23, 180 RoP Laser therapy done. Payment is not made. The same activity has been proposed under Supplementary PIP 2023-24. <b>Proposal for FY 2025-26:</b> Budget proposed @Rs.10000/- per eye x 211 cases per year

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22.7.8	Rheumatic Heart Disease- Agencies tied up are SCB MCH & Narayana Hrudalaya Ltd.	Per Case	110000	1.10	0	0.00	0	-	<p>Ongoing Activity:</p> <p><b>Background &amp; Justification:</b> Rheumatic Heart Disease is covered under RBSK. Hospitals have been empanelled for treatment of RHD cases under RBSK.</p> <p><b>Progress:</b> During the Year 2022-23, Six RHD cases were treated under RBSK.</p> <p><b>Proposal for FY 2024-26:</b> Budget proposed @Rs.110000/- per case x 10 cases per year</p>	
22.7.9	Vision Impairment (Strabismus) - Agencies tied up are AIIMS BBSR & LVPEI BBSR	Per Case	8500	0.09	0	0.00	0	-	<p>Ongoing Activity:</p> <p><b>Background &amp; Justification:</b> Treatment of Strabismus is covered under RBSK and Prescribed rate chart is available under RBSK Model Costing.</p> <p><b>Progress:</b> During 2022-23, 204 children identified with Strabismus have been provided surgery at empanelled Hospital.</p> <p><b>Proposal for FY 2024-25:</b> Budget proposed @Rs.8500/- per case x 200 cases per year</p>	
22.7.10	Travel support for cases treated at secondary/ tertiary (within & outside of the State)	Per case	2000	0.02		-		-	<p><b>Dropped as per recommendation of NPCC</b></p> <p><b>Background &amp; Justification:</b> State has planned to treat/ manage 1720 cases at referral institutions within and</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
22.8	Center of Excellence	Lumpsum		-		-		-	<p><b>Ongoing Activity</b></p> <p><b>Background &amp; Justification:</b> During 2023-24, DEIC, Cuttack is to be established as CoE for Early Intervention services as approved in PIP 2023-24. Proposed Activities as CoE: 1) Organize capacity building programme for DEIC staff as approved in the PIP. 2) Coordinate with resource persons and with National Institutes like NIMHANS, Bangalore and SVNIRTAR, Olatpur for mentoring visits to different DEICs of the State. 3) Document different success stories and case studies for demonstration. 4) Post training follow up handholding sessions through online mode and Coordinate the teleconsultation services for DEIC staff with thematic experts from National Institutes.</p> <p><b>Progress:</b> DEIC, SVPPGIP, Cuttack is equipped with required infrastructure, Staff and equipment to act as CoE for the State and conduct different training programmes on Early Intervention services. SVPPGIP, Cuttack is also a referral Institution of the State.</p> <p><b>Proposal for 2024-25:</b> No proposal for the year 2024-25.</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
22.9	Mentoring support by AIIMS, MCH & Thematic experts in the field of Early Intervention	Per DEIC	50000	0.50		-		<p><b>Dropped as per recommendation of NPCC</b></p> <p><b>Background &amp; Justification:</b> Mentoring support to DEIC staff by different Thematic experts is required to strengthen and standardize proper Assessment, Therapeutic Intervention and Follow up care of Developmental delay children. In this regard, required coordination has been made with National Institutes like NIHANHS, Bangalore &amp; SVNIRTAR, Olatpur for extending mentoring visits to DEICs and Organize Capacity Building Programme for DEIC staff in line with the training needs as per DEIC guideline.</p> <p><b>Progress:</b> Functional DEIC: 32 - During 2023-24, Mentoring visits will be conducted by Multidisciplinary team from NIMHANS &amp; SVNIRTAR.</p> <p><b>Proposed Activities:</b> To standardize assessment, Therapeutic Intervention and progress tracking, following activities will be carried out : 1) Mentoring Visits by Multidisciplinary team of NIMHANS &amp; SVNIRTAR &amp; extend handholding support during visit. 2) Assessment of gaps &amp; Positive Practices for further improvement. 3) Based on assessment, Suggest for the need of the specific training programmes to be conducted for DEIC staff. 4) As per approval of State, extend technical support/ Resource Persons in organizing thematic training programme for the DEIC staff. 5) Post training evaluation of DEIC by the experts .</p>	
22.10	Any other equipment (please specify)	Per DEIC		0.00		0.00		-	
22.10.1	Printing cost for DEIC	Per DEIC	40000	0.40		-		<p><b>Dropped as per recommendation of NPCC</b></p> <p><b>Background &amp; Justification:</b> For printing of different assessment form and registers of DEIC, the annual printing cost is approved in the PIP .</p> <p><b>Progress:</b> During the year 2022-23, the required printing activity were carried out by DEICs.</p>	

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22.10.2	CoE on Early Intervention in the State	Lumpsum	900000	9.00		-		-	<p><b>Ongoing Activity (To be taken up through State Budget)</b></p> <p><b>Background &amp; Justification:</b>  DEIC, Cuttack is approved to act as CoE for Early Intervention Services in the State for the Year 2023-24.  DEIC, SVPPGIP, Cuttack is established as a model DEIC of the State. Out of 14 sanctioned DEIC positions, 12 staff are in Place and out of mandated 216 DEIC equipment, 198 number of DEIC equipment are in place. DEIC is equipped with different units like Medical Officer room, waiting room, Special educator room, Physiotherapy room, Sensory Integration room, Development Assessment unit, Vision Assessment Unit, Social Worker room, DEIC Manager &amp; Data Entry room, Play area, Reception, dedicated plaster area for fixed day Club Foot Clinic, etc SVPPGIP is also a referral Institution of the State.  Proposed Activities:  1) Carry out Training need assessment, Capacity Building of DEIC staff on proper assessment, intervention and follow up.  2) Create a pool of Master trainers within DEIC &amp; linkage with national institutes like SVNIRTAR, AIIMS, IPGME&amp;R (Kolkata) National Institute for Hearing Handicapped (Janala), National Institute for Empowerment of persons with Intellectual Disability (Secunderabad), NIMHANS (Bangalore) and Eye institutes for organizing early intervention focused thematic training programmes.  3) Organize orientation programme for Mothers of developmental delay children periodically.</p>
23	Community Based Care - HBNC & HBYC					-		-	
23.1	Incentive for Home Based New-born Care programme	Per Newborn	250	0.003	0	-	0		<p><b>Ongoing Activity</b></p> <p><b>Background:</b> Home based newborn care is provided to all newborns through 6/7 visits by ASHAs for early identification of danger signs and referral. ASHAs are provided an incentive of Rs250/- for the same.</p> <p><b>Progress:</b>  Live birth reported in HMIS in 2022-23- 599873. During 2022-23, 86% of reported live birth received all 6 HBNC visits in 2022-23 as per HBNC reports. However, expenditure of incentive was 79% as per FMR.</p> <p><b>Proposal:</b> Therefore, during 2024-26, it is expected to cover all live births reported during 2023-24, i.e. -599873  Incentive for community follow up of SNCU discharge cases as per HBNC schedule after discharge from SNCU is also included under this line item.  Budgeted 80% looking into expenditure trend</p>

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23.2	Incentive to ASHA for quarterly visits under HBYC	Per ASHA	250	0.00	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background:</b> Home based care of young children is provided to all young children between 3-15 months through 5 quarterly home visits by ASHAs for growth monitoring, early identification of danger signs and referral, early childhood development and provision of IFA, ORS &amp; Zinc. ASHAs are provided an incentive of Rs250/- for the same.  <b>Progress:</b>  Live birth reported in HMIS in 2022-23- 599873. During 2022-23, 76% of targeted children have received all 5 HBYC visits in 2022-23 as per HBYC reports. However, expenditure of Incentive was 78% as per FMR.  <b>Proposal:</b> Therefore, during 2024-26, it is expected to cover all live births reported during 2023-24,i.e. 599873.  Budgeted 80% looking into expenditure trend</p>
23.3	New ASHA HBNC Kits	Per Kit	1000	0.01	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> ASHAs are provided with HBNC &amp; HBYC kits which are used during their HBNC &amp; HBYC home visits, for assessment of newborns &amp; young children. Each year some funds are kept for replenishment of old items from these kits in order to ensure all the items in these kits are functional. However, procurement at district level could not be done which has also been observed during field level validation that a lot of HBNC kit items are either unavailable with ASHAs or non-functional, which affects the quality of HBNC visits.  <b>Proposal:</b> Therefore, during 2024-25, it is proposed to provide all ASHAs with new HBNC kits (since it has not been supplied from the State for a long time) and no</p>
23.4	Replenishment of ASHA HBNC and HBYC kits	Per Kit		0.00		0.00		0.00	<p><b>Proposal:</b> Therefore, during 2024-25, it is proposed to provide all ASHAs with new HBNC kits (since it has not been supplied from the State for a long time) and no</p>
23.5	Printing cost for HBYC	Per Booklet	30	0.00	0	-	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> HBYC is provided to all young children between 3-15 months through 5 quarterly home visits by ASHAs for growth monitoring, early identification of danger signs and referral, early childhood development and provision of IFA, ORS &amp; Zinc. ASHAs are provided with a HBYC checklist for conducting the visits. These checklists are provided to ASHA in form of a booklet. As no. of new born per ASHA will vary from 18 to 25, it is proposed to print 30 checklists per booklet.  <b>Progress:</b> During 2022-24, it was provisioned for all ASHAs, i.e. 49037, of which budget utilization was 71%  <b>Proposal:</b> Therefore, budget proposed for all 49990 ASHAs during 2024-26</p>
23.6	State level ToT on Supportive supervision of HBNC & HBYC by AYUSH MOs & CHOs	Per batch	74000	0.74	0	-	0	0.00	<p><b>New Activity:</b>  <b>Background:</b> HBNC &amp; HBYC are powerful community level tools for early identification of high risk babies, which if properly utilized could lead great results in timely saving of vulnerable newborns and children.  <b>Progress:</b> However, as observed from the HBNC &amp; HBYC reports, only about 4% of newborns are identified with danger signs and 2% sick children identified under HBYC. Although ANMs make joint visits along with ASHAs and provide handholding support, the outcome is not encouraging. Therefore, there is a need of strengthening the quality of HBNC &amp; HBYC implementation in the State through</p>

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23.7	District level Supportive supervision training of HBNC & HBYC by AYUSH MOs & CHOs	Per batch	43000	0.43	0	-	0	0.00	supportive supervision by involving AYUSH MOs and CHOs. A comprehensive action plan has been devised for strengthening HBNC & HBYC. <b>Details at RCH-3 Child Health write-up annexure.</b> <b>Proposal:</b> One of the components of the comprehensive plan is to develop a cadre of supervisors in form of AYUSH MOs & CHOs for supportive supervision of HBNC & HBYC. Accordingly, a cascade level training for training of AYUSH MOs & CHOs has been proposed. For CHOs, the training is planned in an integrated module. 1. ToT Participants: ADPHOFW, DMRCH, AM CP of all districts and 15 nos of State Level, i.e. 105 persons; Batch Size: 35 Per batch, 3 batches required (Including printing of training modules) 2. For AYUSH MOs, since training will be at district level, total no. of AYUSH Mos = 1485 across districts. However, as per availability of AYUSH MOs in one district,
23.8	One day State level training of newborn ambassadors on tracking of high risk newborns	Per batch	71000	0.71	0	-	0	0.00	<b>New Activity:</b> <b>Background:</b> Odisha has the 2nd highest NMR in the country, with 75% of newborns dying within 7 days of birth. Therefore, it is imperative to identify the high risk newborns early (through HBNC) and follow up the high risk cases at least till 1 month, to ensure their survival. Intensive tracking & follow up would help in reducing the neonatal mortality in the State. <b>Progress:</b> Based on the recommendations of an expert committee for reduction of neonatal mortality, the State has initiated the process of identifying one nursing officer in each headquarter CHC level for telephonic follow up of high risk newborns, who are termed as 'newborn ambassadors'. An SOP has also been developed for the same. These identified ambassadors will be trained and will be provided a CUG for undertaking the activity.
23.9	State level orientation on HBNC-HBYC web portal	per batch	83000	0.83	0	-	0	0.00	<b>New Activity</b> <b>Proposed as per Gol recommendation</b> As per PIP orientation meeting, a web portal on HBNC-HBYC is to be launched. Therefore, an one day orientation of all State level stakeholders (all RMNCHA programme officers, data managers & consultants) is proposed on the same.
23.10	State level training of district participants on HBNC-HBYC web portal	per batch	71000	0.71	0	-	0	0.00	<b>New Activity</b> <b>Proposed as per Gol recommendation</b> One day State level training of district level participants (ADPHO-FW, DMRCH, DDM, AM CP, APM, CPM), Total participants = 30 x 5 + 7 CPM = 157, Batch size= 30; Proposed batches = 5
23.11	District level training of block participants on HBNC-HBYC web portal	Per batch	31500	0.32	0	-	0	0.00	<b>New Activity</b> <b>Proposed as per Gol recommendation</b> One day district level training of block level participants (Moi/c, BPM, BDM), Total participants = 314 x 3= 942, Batch size= 25; Proposed batches = 38
23.12	HBNC format for ASHA (@ 25 formats per ASHA for 49990 ASHAs)	Per format	100	0.00	0	-	0	0.00	Ongoing Activity: Budget shifted from HSS-3, Community Engagement Sl. No 159 (ASHA) as per NPCC recommendation

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24	Facility Based New Born Care					10.26		10.29	
24.1	Establishment cost of New Born Care Units (SNCU/ NBSU/ NBCC/ KMC/ MNCU)					-		-	
24.1.1	Equipment for new MNCU	Per unit	1305000	13.05	0	-	0	0.00	<p><b>Background:</b> MNCU is an additional unit of SNCU to accommodate stable SNCU babies along with their mothers, for observational care. The unit is to be located near the SNCU &amp; PNC ward, so that mothers &amp; newborns of both inborn &amp; out born cases could stay in the MNCU.</p> <p><b>Progress:</b> A MNCU is established adjoining each DHH level SNCU for step down care along with their mother. But in medical college hospitals, as SNCU is not a part of the NMC guidelines, a MNCU is required to accommodate stable newborns for observational/ step down care.</p> <p><b>Proposal:</b> Therefore, it is proposed to establish three 20 bedded MNCUs at SCB, MKCG &amp; PRM MCH in the PNC ward during FY 24-25. Civil Cost @ Rs. 30.00 Lakhs</p>
24.2	Operating cost of New Born Care Units (SNCU/ NBSU/ NBCC/ KMC/ MNCU)					9.70		9.70	
24.2.1	Operating expenses for SNCU					9.00		9.00	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> Operating expenses for SNCU is proposed as per GoI norms.</p> <p><b>Progress:</b> During 2022-24, the same was proposed as per GoI guidelines. However, utilization has been between 60-80%.</p> <p><b>Proposal:</b> Therefore, budget proposed as per expenditure trend.</p>
24.2.1.1	12 bedded SNCU	Per Unit	600000	6.00	0	-	0	-	<p><b>Ongoing Activity</b></p> <p>For 30 SNCU @ Rs. 6.00 Lakhs per annum (Angul, Bargarh, Boudh, Deogarh, Jajapur, Jagatsingpur, Jharsuguda, Kandhamal, Jeypore, Malkanagiri, Nabarangpur, Umerkot, Nayagarh, Nuapada, Puri, Sundrgrh, Sambalpur, Sonepur, Kendrapada, Dhankanal, Khurda, Athagarh, Karanjia, Rairngpr, Baliguda, Bhanjagar, Udala, Anandpur, Patnagarh &amp; City Hospital BHP)</p> <p><b>No new Proposal for setting up of 12 bedded SNCU in 2024-26</b></p>
24.2.1.2	For 24 bedded SNCU	Per Unit	1000000	10.00	0	-	0	-	<p><b>Ongoing Activity</b></p> <p>For 11 SNCU @ Rs. 10.00 Lakhs per annum (Bolangir, Bhadrak, Rayagada, SCB, Kalahandi, Koraput, Gajapati, Keonjhar, RGH RKL)</p> <p><b>No new Proposal for setting up of 24 bedded SNCU in 2024-26</b></p>
24.2.1.3	For 36 bedded SNCU	Per Unit	1500000	15.00	1	9.00	1	9.00	<p><b>Ongoing Activity</b></p> <p>For 4SNCU @ Rs. 15.00 Lakhs per annum (VSS MCH, Capital Hospital BBSR, Balasore &amp; Mayurbhanj)</p> <p><b>Budget Proposed 60% as per expenditure trend</b></p>

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24.2.1.4	For 72 beded SNCU	Per Unit	2000000	20.00	0	-	0		<p>Ongoing Activity -1, Expansion - 1</p> <p>Recurring cost for 2 SNCUs @ Rs.20.00 Lakhs (SVPPGIP, Cuttack &amp; MKCG MCH Berhampur)</p> <p>- Recurring cost for MKCG, MCH was approved for 36 bedded SNCU. However, the unit is functioning with 70 beds (expansion of beds met out of State plan). Therefore recurring cost is proposed for 72 beds (@Rs.20.00 lakhs per unit)</p> <p><b>Budget Proposed 60% as per expenditure trend</b></p>	
24.2.2	Operating expenses for NBSU	Per Annum	105000	1.05	0	-	0		<p><b>Ongoing Activity</b></p> <p><b>Background:</b> Operating expenses for NBSU is proposed as per Gol norms.</p> <p><b>Progress:</b> During 2022-24, the same was proposed as per Gol guidelines. However, utilization has been 60%.</p> <p><b>Proposal:</b> Therefore, budget proposed as per expenditure trend. Total approved in 2022-24: 72; Unit Cost as per Gol guideline : Rs.1,75,000/- per annum; Recurring Cost proposed (60% based on expenditure analysis ) @ Rs.1,05,000/- per annum/ unit for 72 units</p>	
24.2.3	Operating expenses for NBCC	Per Unit	14000	0.14	0	-	0		<p><b>Ongoing Activity</b></p> <p><b>Background:</b> Operating expenses for NBSU is proposed as per Gol norms.</p> <p><b>Progress:</b> During 2022-24, the same was proposed as per Gol guidelines. However, utilization has been 70%.</p> <p><b>Proposal:</b> Therefore, budget proposed for functional DPs - 486 @ Rs.14,000/- per annum (Proposed 70% based on expenditure analysis)</p>	
24.2.4	Operating expenses for Family participatory care (KMC)	Lumpsum		-		0.70		0.70	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> Kangaroo Mother Care unit are to be established adjoining each SNCU/ FRU NBSUs as per Gol mandate for provision of KMC to all stable low birth weight SNCU &amp; NBSU admissions. Recurring Cost as per Gol Guideline: Rs.1,00,000/- per annum for DHH &amp; Rs.50,000/- per annum for Other facility level KMC units.</p>	
24.2.4.1	Operating expenses for existing KMC at DHHs & MCHs	Per unit per annum	100000	1.00	1	0.70	1	0.70	<p><b>Proposal:</b></p> <p>1. Therefore, recurring cost for the existing 105 KMC units have been proposed at 70% based on expenditure analysis.</p>	
24.2.4.2	Operating expenses for existing KMC at other facilities/ FRUs	Per unit per annum	50000	0.50	0	-	0		<p>A. For existing KMC units at 32 DHHs &amp; 5 MCHs (SCB MCH Cuttack, VIMSAR Burla, SVPPGIP Cuttack, MKCG MCH Behrampur and SLN MCH Koraput) @Rs.70,000 per unit per annum X 37 units</p> <p>B. For existing KMC units at 68 Other facilities/ FRUs @Rs.35,000 per unit per annum X 68 units</p> <p>(Budgeted 70% based on expenditure analysis)</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
24.2.5	Operating expenses for Mother new-born Care Unit (MNCU)	Per unit per annum	260000	2.60		-	0	-	<p><b>New Activity</b></p> <p><b>Background:</b> MNCU is an additional unit of SNCU to accommodate stable SNCU babies along with their mothers, for observational care. The unit is to be located near the SNCU &amp; PNC ward, so that mothers &amp; newborns of both inborn &amp; out born cases could stay in the MNCU.</p> <p><b>Progress:</b> A MNCU is established adjoining each DHH level SNCU for step down care along with their mother. But in medical college hospitals, as SNCU is not a part of the NMC guidelines, a MNCU is required to accommodate stable newborns for observational/ step down care.</p> <p><b>Proposal:</b> Therefore, it is proposed to establish three 20 bedded MNCUs at SCB, MKCG &amp; PRM MCH in the PNC ward during FY 24-25. Recurring cost for the same</p>
24.3	<b>Training &amp; Capacity Building</b>					-		-	
24.3.1	TOT for NSSK			0.00		0.00		0.00	Saturated. No proposal for 2024-26
24.3.2	NSSK Training for Medical Officers	16/ batch	115800	1.16	0	0.00	0	0.00	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> NSSK trainings are to be provided to all medical officers and nursing officers based on the revised NSSK training package.</p> <p><b>Progress:</b> 10 batches were proposed in 2022-24 which has been completed.</p> <p><b>Proposal:</b> Since NSSK module has been revised, it is proposed to train all the O&amp;G specialists posted in DHH &amp; MCHs on the revised module. Accordingly, 4 specialists each from DHH &amp; 3 old MCHs have been proposed as participants.</p> <p>Target: 32 DHH x 4 + 3 old MCH x 4 = 140 participants</p> <p>Proposal for 2024-25 : 70 participants, i.e. 4 batches @Rs1.16 lakhs per batch. 16 participants per batch</p> <p>Proposal for 2025-26 : 70 participants, i.e. 4 batches</p>
24.3.3	NSSK Training for SNs/ CHOs	16/ batch	108600	1.09	0	0.00	0	0.00	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> NSSK trainings are to be provided to all medical officers and nursing officers based on the revised NSSK training package.</p> <p><b>Progress:</b> NSSK trainings for CHOs were proposed in 2022-24 which has been completed.</p> <p><b>Proposal:</b> 2 days NSSK Training for nursing officers of DHH &amp; MCH on revised NSSK module. Target: 32 DHH x 4 + 3 old MCH x 4 = 140 participants</p> <p>Proposal for 2024-25 : 64 participants, i.e. 4 batches @Rs1.08 lakhs per batch. 16 participants per batch</p> <p>Proposal for 2025-26 : 76 participants, i.e. 5 batches</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
24.3.4	4 days Training for facility based new-born care	Per person	2,19,700	2.20	0	0.00	0	0.00	<p><b>Background:</b> 4 days FBNC training is to be provided to MOs &amp; Nursing Officers of all SNCUs as per Gol guidelines.</p> <p><b>Progress:</b> FBNC trainings were proposed for 146 persons during 2022-24. Of which 98 persons were trained in 2022-24.</p> <p><b>Proposal:</b> To provide FBNC training to untrained MOs &amp; NOs of 44 SNCUs. Participants: 2 NOs &amp; 1 MO from each SNCU = 132; Proposal for 2024-26: 96 (32 MOs, 64 NOs), i.e. 48 in each year (16 MOs &amp; 32 NOs); Proposal for 2024-26: 48 persons per year Unit cost for training includes photocopy of modules</p>	
24.3.5	2 weeks observer ship for facility based new-born care	6/ batch	2,10,000	2.10	0	0.00	0	0.00	<p><b>Background:</b> 2 weeks FBNC observership is to be provided to MOs &amp; Nursing Officers of all SNCUs as per Gol guidelines.</p> <p><b>Progress:</b> FBNC observership trainings were proposed for 12 batches during 2022-24. Of which all 12 completed in 2022-24. Cumulative load: 1008, Achievement till 2023-24 (till Q1):374; Remaining load:634</p> <p><b>Proposal:</b> 2 weeks observership of SNCU MOs &amp; NOs will be conducted at SVPPGIP Cuttack, facilitated by 2 in-house RPs and 2 outhouse RPs from state level. Target for 2024-25: 2 batches &amp; 2025-26: 3 Batches</p>	
24.3.6	Two weeks observership of NBSU staff in SNCU	4/ batch	72560	0.73	0	0.00	0	0.00	<p><b>New Activity</b></p> <p><b>Background:</b> Certain NBSUs in the State are sub-optimally utilized with low bed occupancy rate, resulting in overcrowding in the SNCUs. An interaction with the SNCU in terms of observership will be helpful in confidence building of NBSU staff, improving coordination between SNCU &amp; NBSU staff and referral back from SNCUs.</p> <p><b>Progress:</b> Currently, NBSU staff are provided with 3 days NBSU training, but due to lack of confidence the concerned staff hesitate to admit moderately sick children for treatment.</p> <p><b>Proposal:</b> Therefore, it is proposed to conduct 2 weeks observership of NBSU staff in SNCU. In one batch 1 Nursing Officer from each NBSU in the district will attend observership in the concerned Dist. level SNCU. Total batches required - 02 batches to be proposed in 2 years</p>	
24.3.7	Trainings for 2 days State level Family participatory care (KMC)	24/Per Batch	110000	1.10	0	0.00	0	0.00	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> FPC-KMC training is provided to all nursing officers working in KMC units.</p> <p><b>Progress:</b> Cumulative load: 105 KMC x 4 = 420. Trained till 2023-24 (Q1) = 258, Remaining Load = 162.</p> <p><b>Proposal:</b> Proposal for 2024-26= 13 MCH x 10 NOs=130 + 24 DHH x 8 NOs = 192 + 32 SDHs x 5 NOS = 160, i.e. 482 (including remaining load of 162). Therefore 20 batches required <b>Proposal for 2024-26: 5 batches per year</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
24.3.8	Three days Regional level training on NBSU	16/ Per Batch	165000	1.65	0	0.00	0	0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b> New born mortality is high in Odisha. MOs &amp; SNs working in high case load institutions / FRUs earlier are either retired / transferred. So, the new entrants requires training on new guidelines of NBSU to impart regional level training to MOs &amp; SNs.  <b>Progress:</b> ToT has been saturated. Target for 3 days training: 72 NBSUs x 2 MOs = 144 + 72 x 4 NOs = 288, Total load = 438, Trained till date: 233; Remaining load = 199. Target batches = 8 (24/ batch).  <b>Proposal for 2024-25:</b> 4 batches  <b>Target:</b> 72 NBSUs x 2 Mos = 144 + 72 x 4 NOs = 288, Total load = 438, Trained till date: 233; Remaining load = 199. Target batches = 8 (24/ batch). Proposal for 2024-26: 4 batches per year</p>	
24.3.9	One day refresher training for SNCU Mo I/c, SNs & DEO at State Level	30/ batch	90000	0.90	0	-	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> Since SNCU is a critical care unit and the data is entered in a software by a dedicated DEO, who are mostly outsourced, it is important to train them from time to time on the software along with the SNCU team, i.e. MO i/c &amp; NO i/c.  <b>Progress:</b> Proposed during 2022-24, all batches completed.  <b>Proposal:</b> To be organized at State level for refresher of all SNCU MO I/c., DEOs &amp; Nursing Officers in charge on data entry process and data management  <b>Proposed for 2024-26: 5 batches @30/ batch per year</b></p>	
24.3.10	One day refresher training for NBSU Mo I/c, SNs & DEO at State Level	30/ batch	90000	0.90	0	-	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> Since NBSUs cater to newborns who are vulnerable and the data is entered in a software by a dedicated DEO, it is important to train them from time to time on the software along with the NBSU team, i.e. MO i/c &amp; NO i/c.  <b>Progress:</b> Proposed during 2022-24, all batches completed.  <b>Proposal:</b> To be organized at State level for refresher of all NBSU MO I/c., DEOs &amp; Nursing Officers in charge on data entry process and data management  <b>Proposed for 2024-25: 216 Persons (7 batches @30/ batch)</b></p>	
24.3.11	Workshop for continued Medical Education of SNCU & NBSU Staff by professional bodies (IAP, NNF etc)	Lumsump	1000000	10.00		-	0	0.00	<b>Budget Not Approved</b>	
24.4	<b>Planning and M&amp;E</b>					<b>0.04</b>		<b>0.04</b>		
24.4.1	<b>SNCU Data management (excluding HR)</b>	Per Month	300	0.00	1	0.04	1	0.04	<p><b>Ongoing Activity</b>  <b>Background:</b> As SNCU data entry requires uninterrupted internet services for updation in SNCU online software, it requires a hotspot device and recurring data charges.  <b>Progress:</b> All SNCUs have a desktop and hotspot device was provided to all SNCUs in 2021-22.  <b>Proposal:</b> Therefore, budget proposed for monthly recurring data charges @ Rs. 300/- per month x 12 months x 45 units per year</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
24.4.2	Data entry cost for NBSU data management			-		-		-	<p><b>Ongoing Activity</b>  <b>Background:</b> As NBSU data is entered in the NBSU online software on day to day basis, it requires a dedicated DEO for regular entry of NBSU data.  <b>Progress:</b> A DEO has been identified for all the NBSUs and accordingly data entry cost had been provisioned during 2022-24. The expenditure during 2022-23 was 72% as identification of DEO was done during Q1.  <b>Proposal 2024-26:</b> Newly recruited MRA will be given the responsibility.</p>
24.4.3	Onetime cost for hotspot/ wifi device	Per Unit	1000	0.01	0	-	0	-	<p><b>New Activity</b>  <b>Background:</b> As NBSU data entry requires uninterrupted internet services for updation in NBSU online software, it requires an uninterrupted internet connection, through provision of hotspot device and recurring data charges.  <b>Progress:</b> All NBSUs have a designated DEO and provision of PC with Printer for NBSU data management is met out of State Budget, it is proposed to provide them with a hotspot device and recurring data charges.  <b>Proposal:</b> Therefore, budget proposed for:  1.one time cost for hotspot device = 1000 x 72 = Rs72000  2. monthly recurring data charges @Rs300 per month x 72 = 300 x 12 x 72 = Rs2.59 Lakhs per year</p>
24.4.4	Monthly recurring cost for data charges	Per Month	300	0.00	0	-	0	-	<p><b>Proposal:</b> Therefore, budget proposed for:  1.one time cost for hotspot device = 1000 x 72 = Rs72000  2. monthly recurring data charges @Rs300 per month x 72 = 300 x 12 x 72 = Rs2.59 Lakhs per year</p>
24.5	Printing (SNCU Data Management)			-		0.53		0.56	
24.5.1	Printing of SNCU Case Sheet	Per Sheet	50	0.00	1057	0.53	1110	0.56	<p><b>Ongoing Activity</b>  <b>Background:</b> Standardized SNCU case sheets are used for maintaining the data of each SNCU admission which are also entered in the SNCU online software.  <b>Progress:</b> Each year based on the expected SNCU admissions, the SNCU case sheets are printed  <b>Proposal:</b> Printing of SNCU Case Sheet based on Expected admission in existing SNCUs during 2023-24 + 10% buffer  Other printing i.e. Discharge Note, Referral Note, Admission Register (for SNCU &amp; NBSU), Follow up Register, Facility Follow up record book, met out of SNCU contingency fund at district level  Budget proposed @ Rs. 50/- per sheet x 75708 sheets</p>
24.5.2	Printing of NBSU Data Management formats/ stationeries	Per Unit/ Per Month	50	0.00	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background:</b> Standardized NBSU case sheets are used for maintaining the data of each NBSU admission which are also entered in the NBSU online software.  <b>Progress:</b> Each year based on the expected NBSU admissions, the NBSU case sheets are printed  <b>Proposal:</b> Printing of NBSU Case sheets as per Gol guidelines. Proposal based on Expected admission in existing NBSUs during 2022-23 + 10% buffer  <b>Budget proposed @ Rs. 50/- per sheet x 11882 sheets</b></p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
24.5	MusQan certifications and recertification (National & State Certification)					0.00		0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b> MusQan is a newer initiative for quality certification of all child health units in public facilities. The State is in process of getting the facilities ready for certification.  <b>Progress:</b> Target institutions = 32, National assessment completed for 1 institution, 10 institutions under process.  <b>Proposal: Assessment of MusQan target facilities at State &amp; National Level for certification.</b> To target 40 institutions in total, i.e. (32 in 2022-24 and 4 each in the upcoming 2 years, including MCH). Leftout institutions on 2022-24 and 8 new to be</p>
24.5.1	State Assessment for MusQan certification	Per Unit	40,000	0.40	0	0.00	0	-	<p><b>Budget for State level Assessment: as per LaQshya Guidelines</b>  <b>Budget Proposal for FY 2024-26: 20 facilities per year</b>  Rs.40000 x 20 facilities = Rs. 8.00 Lakhs per year</p>
24.5.2	National Assessment for MusQan certification	Per Unit	1,10,000	1.10	0	0.00	0	-	<p><b>Budget for National level Assessment: as per LaQshya Guidelines</b>  <b>Budget Proposal for FY 2024-26: 15 facilities per year</b>  Rs.110000 x 15 facilities = Rs. 16.50Lakhs per year</p>
24.6	One day half yearly State level refresher on MusQan	Per batch	91000	0.91	0	-	0	-	<p><b>New Activity</b>  <b>Background:</b> MusQan is a newer initiative for quality certification of all child health units in public facilities. The State has initiated MusQan mentoring during 2022-23, where 32 teams make quarterly visits to the identified facilities for supporting the institutions for MusQan certification.  <b>Proposal:</b> To conduct a review with the institutions and their concerned mentors for expediting the process of MusQan certification and for re-training the district teams on the process .  <b>Participants:</b> State mentors -64, District Participants-40 x 4, State level-5 = 190</p>
24.7	Mentoring Visits to the facilities for MusQan	Lumpsum	32,56,064	32.56	0	-	0	-	<p><b>Ongoing Activity:</b>  State Level Mentoring Cost: TA,DA, Accommodation and honorarium for 64 mentors comprising of State level officers, consultants, experts from MCHs &amp; development partners for extending state level mentoring support to all pediatric units under MusQan.  TA &amp; DA for Mentors as per NHM norms proposed as mentioned below:  1. TA @ Rs. 4000/- per mentor per visit for quarterly visit = Rs. 4000/- x 64 x 4 visit =Rs. 10.24 Lakhs  2. DA &amp; Accommodation @ Rs. 1625/- per mentor per day/ per visit for 3 days visit= Rs. 1573/- x 64 mentors x 3 days x 4 visits= Rs. 12.08 Lakhs  3. Honorarium @Rs.4000/-per mentor per visit X 64 mentors X 4 Quarterly visits= Rs. 10.24 lakhs (honorarium proposed as per Laqshya guidelines)  <b>Total: Rs. 32.56 Lakhs Per year</b></p>
24.8	Day / Week celebration : Newborn Care Week (Nov 15-21) & World Pneumonia Day (12 Nov)			-		-		-	List of days expanded as per the communication by GoI on observation of days at HWCs
24.8.1	At State level	Per event	100000	1.00	0	-	0	-	Felicitation of 6 best performing SNCUs(3) and NBSUs (3) at State Level during National Newborn week

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
24.8.2	At Dist level	Per event per dist	15000	0.15	0	-	0	-	
24.8.3	At Block level	Per event	2000	0.02	0	-	0	-	
24.8.4	PHC/SC Level		3000			-		-	Fund to be met out of IEC budget PHC/SC-HWC
24.8.5	Awareness through community radio	Per day	4500	0.05	0	0.00	0	-	
25	<b>Child Death Review</b>					-		-	
25.1	<b>Training &amp; Capacity Building</b>					0.00		0.00	
25.1.1	Two days State level refresher on MPCDSR	30/Per batch	1,08,150	1.08	0	0.00		-	<p><b>New Activity</b>  <b>Background:</b> The MPCDSR software was rolled out in 2022-23 for capturing all the maternal &amp; child deaths at source, so that no deaths are missed and the reporting of maternal &amp; child deaths improve. It is a newer software and trainings on the software were done in 2022-23, so refresher trainings on the same are required.  <b>Progress:</b> Trainings were conducted in 2022-23. However, reporting in the MPCDSR software is only 21% of the actual reported deaths in the CDR reports of 2022-23.  <b>Proposal:</b> Therefore, it is proposed to conduct a two days State level Refresher training of data handlers and programme officers/ managers on MPCDSR where one day is dedicated for MDR and one day for CDR  Total requirement : 4 batches  3 batches for dist level participants (ADPHOFW, DMRCH &amp; DDM) and on batch for MCH level participants (HoD O&amp;G/ HoD Paed. and Hospital manager)</p>
25.2	<b>Incentive / Honorarium Child Death Review</b>			-		-		-	
25.2.1	Brief investigation by ANM (all deaths)	Per case	100	0.00	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background:</b> A set of incentives &amp; honorariums are provisioned in the child death review guidelines for the different level of information &amp; review.  <b>Progress:</b> As per SRS , about 30380 U5 deaths are expected in the State, of which 60% has been set as target as key deliverables for 2024-25 i.e. 18228 &amp; 80% for Fy 2025-26, i.e. 24,304. As per recommendation of NPCC budgeted for 11666 deaths which is 64% of target FY 2024-25 &amp; 48% target for FY 2025-26  <b>Budget revised as recommendation of NPCC.</b></p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
25.2.2	Investigation by investigator teams (No of verbal autopsy to be done @ 6 cases per month)	Per case	500	0.01	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background:</b> A set of incentives &amp; honorariums are provisioned in the child death review guidelines for the different level of information &amp; review.  <b>Progress:</b> As per Gol guidelines, at least 6 cases per block per month are to be investigated in details and of all the reported cases, which accounts about 76% of cases investigated by ANM. As target for ANM has been revised as per recommendation of NPCC i.e. 11666, team investigation incentive is proposed for 76% of 11666 cases= 8880  <b>Proposal:</b> Honorarium for verbal autopsy Rs.300/- per team per case and Travel expenses Rs.200/- per team per case.  <b>Budget revised as recommendation of NPCC.</b></p>
25.2.3	Support cost for family members to attend review meeting conducted by Collector	Per case	200	0.00	0	-	0	-	<p><b>Ongoing Activity:</b>  <b>Background:</b> As per Gol guidelines, the district collector should review 2 sample cases each quarter in presence of the family members, for which a support cost of RS 200 is provisioned for 2 family members of the 2 cases.  <b>Progress:</b> During 2022-24, budget was proposed for 2 cases per qtr per district, and the same is to be proposed during 2024-26.  <b>Proposal:</b> Cases to be reviewed @2 cases per qtr per dist i.e. 2 X 4X 30= 240 cases, therefore budget proposed = 240 xRs200 =Rs48000/- per year</p>
25.2.4	ASHA incentive for Child Death Review	Per Case	50	0.00	0	-	0	-	<p><b>Ongoing Activity:</b>  <b>Background:</b> As per Gol guidelines, ASHAs are to report each U% death irrespective of place of death, for which an incentive of Rs50/- per case has been provisioned for ASHAs.  <b>Progress:</b> As per SRS , about 30380 U5 deaths are expected in the State, of which 60% has been set as target as key deliverables for 2024-25 i.e. 18228 &amp; 80% for Fy 2025-26, i.e. 24,304. As per recommendation of NPCC budgeted for 11666 deaths which is 64% of target FY 2024-25 &amp; 48% target for FY 2025-26  <b>Budget revised as recommendation of NPCC.</b></p>
25.3	Printing of Child Death Review formats			-		-		-	<p><b>Ongoing Activity</b>  <b>Background:</b> As per Gol guidelines, a set of forms &amp; formats are to be used for conducting CDR at community &amp; facility levels.  <b>Progress:</b> During 2022-24, all forms &amp; formats were proposed as per guidelines, but expenditure was 56% in FMR 2022-23  <b>Proposal:</b> Therefore, budget proposed for 60% of all forms &amp; formats as per Gol guidelines.</p>
25.3.1	Form-1	Per form	1.0	0.00	0	-	0	-	Form 1-ASHA notification @Re.1/- per form x 16955 x 2 + 10% buffer = 37301 (60% of excepted under five deaths *2 + 10% buffer)
25.3.2	Form-2	Per form	2.0	0.00	0	-	0	-	Form 2-ANM investigation form @Rs.2/- per form x 18650 (60% excepted under five deaths + 10% buffer = 16955 +1695)
25.3.3	Form-3a	Per form	3.0	0.00	0	-	0	-	2/3 of no. of blocks * 6 cases per block*12 months + 10% buffer

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
25.3.4	Form-3b	Per form	3.0	0.00	0	-	0	-	1/3 of no. of blocks * 6 cases per block*12 months + 10% buffer	
25.3.5	Form-3c	Per form	2.0	0.00	0	-	0	-	No. of blocks * 6 cases per block*12 months + 10% buffer	
25.3.6	Form-4a	Per form	3.0	0.00	0	-	0	-	2/3*No. of expected under five facility deaths (58% of 60%) + 10% buffer = 2/3(58%x16955 +10%) = 2/3(9834+983) =10817x2/3=7211	
25.3.7	Form-4b	Per form	3.0	0.00	0	-	0	-	1/3*No. of expected under five facility deaths (58% of 60%) + 10% buffer =1/3(58% x 16955 +10%)= 1/3(10817)=3606	
26	<b>SAANS</b>									
26.1	2 days State level ToT on SAANS for Paediatrics Specialist, MCH faculty & Nursing Officers	24/Per batch	1,07,000	1.07		0.00		-	Activity Completed in 2022-24	
26.2	2 days Regional level training on Childhood Pneumonia Management	24/Per batch	60,800	0.61		0.00		-	Activity Completed in 2022-24	
26.3	Printing for Gentamycin treatment cards under SAANS	Per unit	5	0.00	0	-	0	-	Background: As per Gol guidelines, gentamycin treatment cards are to be used at SC, PHC & CHC level for recording the data on treatment of PSBI cases. Proposal: Therefore, printing of cards has been proposed for 60% of 60% estimated PSBI cases (estimated PSBI cases = 15% of reported live births derived from FI data) + 10% buffer = 0.6 x 0.6 x 0.15 x 724580 + 10% buffer = 39127 + 3913 = 43040 units per year	
26.4	Mobility support for supervision at State level (including SAANS supportive supervision)	Lumpsum	540000	5.40		-		-	Integrated with State Integrated Monitoring Team visits	
27	<b>Paediatric Care</b>									
27.1	Establishment cost of Pediatric Care Units (PICU/Hybrid ICU)								- Already saturated	
27.2	Operating cost of Pediatric Care Units (PICU/Hybrid ICU)									
27.2.1	Recurring cost for PICU	Per Annum	300000	3.00	0	-	0	-	<b>Ongoing Activity</b> <b>Background:</b> PICUs have been established in the State at MCH level for providing intensive care to severely sick children. <b>Progress:</b> 4 PICUs are functioning in the State at MC&H level, at MKCG MC&H Behrampur, VIMSAR Burla, SVPPGIP Cuttack and SLN MC&H Koraput and recurring cost @Rs.3L per annum for each 6 bedded PICU was proposed in PIP 2024-26. <b>Proposal:</b> Therefore, recurring cost Rs.3.00 Lakhs x 4 PICUs = Rs.12.00 lakhs to be met out of CCBH budget under PM ABHIM.	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
27.2.2	Recurring cost for Pediatric Hybrid ICU	Per unit	600000	6.00	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background:</b> Paed. hybrid ICUs have been established in the State at DHHH level under ECRP-2 for providing intensive &amp; high dependency care to severely sick children.  <b>Progress:</b> 29 Paed. Hybrid ICUs are functioning in the State at DHHH level and recurring cost @Rs.6L per annum for each unit was proposed in PIP 2024-26.  <b>Proposal:</b> Therefore, recurring cost Rs.6.00 Lakhs x 29 Paed. Hybrid ICUs = Rs.104.40 Lakhs <b>to be met out of CCBH budget under PM ABHIM.</b></p>	
27.3	MusQan certifications and recertification (National & State Certification)					0.00		0.00	Budget Shifted to RCH-3, SI No. 24.5 as per recommendation of NPCC	
27.3.1	State Assessment for MusQan certification	Per Unit	40,000	0.40			0.00		Budget Shifted To SI No. 24.5.1	
27.3.2	National Assessment for MusQan certification	Per Unit	1,10,000	1.10			0.00		Budget Shifted To SI No. 24.5.2	
27.4	<b>Training &amp; Capacity Building</b>						0.00	0.00		
27.4.1	7 days training on Hybrid ICU for Pediatrics Specialists/ MO working at Paed. Hybrid ICUs	Per Batch	1,57,850	1.58	0	-	0	0.00	<p><b>New Activity:</b>  <b>Background:</b> A 7 days training is imparted to Hybrid ICUs for Pediatrics Specialists/ MO working at Paed. Hybrid ICUs  <b>Progress:</b> Target: 29 Paed. hybrid ICUs x 2 MOs &amp; 4 NOs = 174 persons; Batches completed in 2022-24, i.e. 81 persons trained. Remaining load = 93 persons (1 MO &amp; 2 NO from each unit); i.e. 10 batches required.  <b>Proposal:</b> Proposal for 2024-26: 3 batches per year (including printing of training module @ Rs. 450/- per module for 9 modules per batch)</p>	
27.4.2	14 days Observership training on Management of Paediatric Hybrid ICU	6/ batch	169700	1.70	0	0.00	0	0.00	<p><b>New Activity</b>  <b>Background:</b> The pediatric specialist/MO and Nursing Officers working in pediatric Hybrid ICU are trained on a 7 days module at State level. However as per their feedback more hands on experience is required on management of pediatric Hybrid ICU.  <b>Progress:</b> 1 doctor and 2 nursing officers from each of the 29 hybrid ICUs have been trained on 7 days Paediatric hybrid ICU management.  <b>Proposal:</b> Therefore 2 weeks observership module is proposed for the already trained participants. Proposal for 2024-26: 6 persons/batch (2 MOS &amp; 4 Nursing Officers) = 4 batches per year; Venue: SVPPGIP, Cuttack &amp; SLN Koraput</p>	

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
27.4.3	F-IMNCI Training for Medical Officers	Per batch	271907	2.72	0	0.00	0	0.00	<b>New Activity:</b> <b>Background:</b> Since module of FIMNCI has been revised from 11 days to 5 days. Trainings for Paed. Specialists/ MOs and NOs are proposed in 2024-26. <b>Proposal:</b> It is proposed to train all MOs upto CHC level, so total load is 42 batches(24/BATCH), of which 10 to be proposed in 2024-26. Proposal for 2024-25: 5 batches; Venue: SVPPGIP, Cuttack, SLN MCH Koraput	
27.4.4	F-IMNCI Training for Staff Nurses	Per batch	2,49,138	2.49	0	0.00	0	0.00	<b>New Activity:</b> <b>Background:</b> Since module of FIMNCI has been revised from 11 days to 5 days. Trainings for Paed. Specialists/ MOs and NOs are proposed in 2024-26. <b>Proposal:</b> It is proposed to train all NOs (PHC HWC onwards) upto SDH level, so total load is 16 batches, of which 6 to be proposed in 2024-26 Proposal for 2024-26: 3 batches per year Venue: SVPPGIP, Cuttack, SLN MCH Koraput, MKCG MCH & PRM MCH Baripada	
27.4.5	One day half yearly State level refresher on MusQan	Per batch	91000	0.91		-		-	<b>Budget Shifted to RCH-3, SI No. 24.6 as per recommendation of NPCC</b>	
27.5	Printing of Stationeries for Paediatric Care Reporting	Lumpsum	82,90,000	82.90	0	-	0	0.00	New Activity: Proposed as per Gol recommendation for printing of forms, formats & registers for Paediatric Care Reporting <b>Budget Proposed for 99 institution ( 94 FRUs+ 5 MCHs including SVPPGIP, Cuttack)</b> 1. For MCH& SVPPGIP @ Rs.1,50,000 per unit x 5 units= Rs. 7.50 Lakhs 2. For DHH @ Rs. 100,000 x 32 DHHs= Rs. 32.00 Lakhs 3. For SDH & CHC @ Rs. 70,000 x 62 institutions= Rs. 43.40 Lakhs <b>Total: Rs. 82.90 Lakhs per year</b> <b>Printing to done at district level as per estimated load of OPD &amp; IPD</b>	

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
27.6	Centre of Excellence Paediatrics Operational Cost	Lumpsum	1,00,000	1.00	0	-	0	0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b> A centre of excellence on newborn &amp; child health has been established at SVPPGIP, Cuttack under ECRP-2 for conducting training and mentoring activities.  <b>Proposal:</b> Therefore, mentoring and coordination cost for CoE is proposed as follows:  <b>1. Operational cost @ Rs. 1,00,000/- per annum as per Gol norms .</b>  <b>Proposal:2 Budget Shifted to RCH-3, SI No. 24.7 as per recommendation of NPCC</b>            2. State Level Mentoring Cost: TA,DA, Accommodation and honorarium for 64 mentors comprising of State level officers, consultants, experts from MCHs &amp; development partners for extending state level mentoring support to all pediatric units under MusQan.            TA &amp; DA for Mentors as per NHM norms proposed as mentioned below:            2. TA @ Rs. 4000/- per mentor per visit for quarterly visit = Rs. 4000/- x 64 x 4 visit =Rs. 10.24 Lakhs            3. DA &amp; Accommodation @ Rs. 1625/- per mentor per day/ per visit for 3 days visit= Rs. 1573/- x 64 mentors x 3 days x 4 visits= Rs. 12.08 Lakhs            4. Honorarium @Rs.4000/-per mentor per visit X 64 mentors X 4 Quarterly visits=</p>	
27.7	Training on IMNCI	Per batch				-	0	-	<p><b>New Activity: (Proposed as per Recommendation of NPCC)</b>  <b>Background:</b> IMNCI training was being implemented in the State previously. However, the module has been revised recently and National &amp; Regional ToT on the revised module has been completed by Gol. Therefore, it is proposed to conduct the State ToT and district level trainings during 2024-26.  <b>Proposal:</b> To conduct 5 batches of State level ToT in order to create a pool of master trainers with a view of training at least 4-5 Pediatricians/Community Medicine from each district.</p>	
27.7.1	5 days State level ToT on IMNCI	Per batch	2,19,650	2.20	0	-		0.00	<p>To conduct district level training of medical officers (@3 MO from non-FRU CHC &amp; 1 MO from PHC) and nursing officers (@9 NO from non-FRU CHC &amp; 1 NO from PHC) from all PHCs and all non-FRU CHCs and all CHOs in position. Total load = 2253 MOs (non-FRU CHC MO-1020, PHC MO-1233) + 4293 NOs (non-FRU CHC NO-3060, PHC NO-1233) + 3634 CHOs            Total batches = 94 batches for MO, 330 batches NO&amp;CHO.  <b>Proposal for 24-25:</b> 5 batches State ToT, 47 batches District training of MOs, 165</p>	
27.7.2	5 days District level training of MOs on IMNCI	per batch	1,99,650	2.00	0	-	0	0.00		
27.7.3	5 days District level training of nursing officers & CHOs on IMNCI	per batch	1,80,900	1.81	0	-	0	0.00		
28	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)					-		-		
28.1	Free Diagnostics for Sick infants under JSSK	Per Case	100	0.00		0.00		0.00	<p><b>Ongoing Activity</b>            To be met out of state specific scheme NIDAN - Free Diagnostics Services</p>	
29	Janani Shishu Suraksha Karyakram (JSSK) - transport					-		-		
29.1	Free Referral Transport - JSSK for Sick Infants	Per case	500	0.01	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> Transportation cost for sick infants is proposed for expected sick infants.  <b>Proposal:</b> Therefore, funds proposed for estimated sick infants i.e. 59987 (10% of reported live birth-599873) including transportation to facility &amp; drop back</p>	

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S.No.	Scheme/ Activity	Approval in 2024-26							
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
30	Other Child Health Components					0.06		0.06	
30.1	Drugs & Supplies	Lumpsum				0.00		0.00	<p>1. Inj. Gentamycin= 97186 vials (80 mg per 2 ml vials) @ 1.5 vial per estimated PSBI case for 7 days treatment including buffer</p> <p>2. Syp Amoxicillin =377189 Bottles (30 ml bottle, 125 mg / 5ml) @ 2 bottles per estimated case for 7 days treatment including buffer &amp; pre-referral dose</p> <p>3.Tab. Amoxicillin (250mg) dispersible = 6990742 Tabs @ 20 Tabs per estimated case for 7 days treatment including buffer &amp; pre-referral dose</p> <p>4. 1 ml syringe for Inj Gentamycin= 453533 Syringes @ 1 per case per day</p> <p>5. Inj. Vitamin K1= 659864 ampoules (1 mg per ml ampoules) @ 1 ampoules per estimated live birth including buffer</p> <p>6. Inj. Dexamethasone Sodium Phosphate =267504 Vials (4 mg/vial) @ 4 vials per expected preterm labour casesincluding buffer</p> <p><b>To be met out of state budget</b></p>
30.2	Transportation cost for HIV testing of Exposed Babies (Below 18 months)	Per Case	1,000	0.01	0	0.00	0	0.00	<p><b>Ongoing Activity</b> Transportation cost for HIV testing of Exposed Babies (Below 18 months)</p> <p><b>Justification</b> Activity is proposed for testing HIV exposed children for HIV for at least 4 times during 2 years of age at ICTC at defined intervals. Expected exposed babies is estimated as 90% of identified HIV PW during 2022-24. A total of 684 PW were identified as HIV positive, so the estimated HIV exposed babies is estimated at 90% of 684 = 616 babies. It is thus proposed to provide transportation cost of Rs.1000/- per baby for HIV testing at ICTC at the age of 45 days , 6 month, 1 year and 18 month. As 108 ambulances are used only for transportation of critical cases and also it doesn't have a drop back service, it is proposed to give additional transportation cost to these babies for ensuring HIV testing.</p> <p><b>Budget:</b> Rs1000 per baby x 616 exposed babies = Rs.6.16 Lakhs per annum</p>
30.3	IEC/BCC activities under CH					0.06		0.06	
30.3.1	Mass Media Interventions					-		-	<b>Ongoing Activity</b>
30.3.1.1	Production & Advertisement through DD & local channels or scrolling	Per minute	172000	1.72	0	-	0	0.00	<p>Timing: 1 minute per day for 24 days per year as per I&amp;PR rates</p> <p>Cost proposed as per revised I&amp;PR, GoO norm</p> <p>Telecast for SAANS, IDCM &amp; Newborn Care &amp; Child Care</p>
30.3.1.2	Advertisement through AIR channels	Per minute	47000	0.47	0	-	0	0.00	<p>Timing: 1 minute per day for 12 days in a year as per I&amp;PR rates</p> <p>Cost proposed as per revised I&amp;PR, GoO norm</p> <p>Broadcast for SAANS, IDCM &amp; Newborn Care &amp; Child Care</p>
30.3.1.3	Advertisement through FM Channels	Per minute	20000	0.20	0	-	0	0.00	<p>Timing: 10 minutes per day for 30 days per year</p> <p>Cost proposed as per revised I&amp;PR, GoO norm</p> <p>Broadcast for SAANS, IDCM &amp; Newborn Care &amp; Child Care</p>
30.3.1.4	Publicity through Print Media	Per day	100000	1.00	0	-	0	0.00	<p>One time advertisement of Color Quarter page in 2 newspaper for 6 days</p> <p>Cost proposed as per revised I&amp;PR, GoO norm</p>
30.3.2	Mid Media Interventions					0.06		0.06	<b>Ongoing Activity</b>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
30.3.2.1	Dynamic hoarding - Change of flex for hoarding @ 2 nos for each district HQ and for block)	Per flex	3000	0.03	2	0.06	2	0.06	Budget for SAANS, IDCM & Newborn Care & Child Care
30.3.2.2	Installation of Retro display board on danger signs of newborn child (4'X3')	Per Board	8000	0.08		-		0.00	<b>New Activity</b> In the year 2024-25 covering all MC,DHH, SDH, CHC & In the year 2025-26 covering all PHC (N) To be taken up through State specific scheme i.e. AMA Hospital Scheme
30.3.2.3	<b>Day / Week celebration : Newborn Care Week (Nov 15-21) &amp; World Pneumonia Day (12 Nov)</b>			-		-		0.00	<b>Budget Shifted to RCH-3, SI No. 24.8 as per recommendation of NPCC</b>
30.3.2.4	At State level	Per event	100000	1.00		-		0.00	<b>Budget Shifted to RCH-3, SI No. 24.8 as per recommendation of NPCC</b>
30.3.2.5	At Dist level	Per event per dist	15000	0.15		-		0.00	<b>Budget Shifted to RCH-3, SI No. 24.8 as per recommendation of NPCC</b>
30.3.2.6	At Block level	Per event	2000	0.02		-		0.00	<b>Budget Shifted to RCH-3, SI No. 24.8 as per recommendation of NPCC</b>
30.3.2.7	PHC/SC Level		3000			-		0.00	<b>Fund to be met out of IEC budget PHC/SC-HWC</b>
30.3.2.8	Awareness through community radio	Per day	4500	0.05		0.00		0.00	<b>Budget Shifted to RCH-3, SI No. 24.8 as per recommendation of NPCC</b>
30.3.2.9	IEC activities for SAANS at Dist & Municipal Corporation Level	Per Block/MC	20000	0.20	0	0.00	0	0.00	IEC activities for SAANS at Block & MC Level @ Rs. 20000 per Block & Per unit in MC (3 Unit per MC) x 329 units
30.4	<b>Planning &amp; M&amp;E</b>			0.00		<b>0.00</b>		<b>0.00</b>	
30.4.1	One day Half yearly State level orientation cum review meeting	30/ Per batch	91000	0.91	0	0.00	0	0.00	<b>Background:</b> Odisha has a high under five mortality of 39 per 1000 live births, for which the State is undertaking various programs & initiatives in line with the National programs, along with certain State specific interventions. <b>Proposal:</b> Therefore, in order to reduce the U5 mortality and morbidity in the State, it is proposed to conduct one day half yearly State level orientation of District level programme officers and managers on Key child health programmes to strengthen the quality of implementation through detailed analysis and feedback. Participants: ADPHOFW, DMRCH, AM ASHA, and State level programme officers and consultants (100 persons) Batch size: 30 per batch; Total Batch: 6 batches; Frequency : twice in a year
30.4.2	Review/orientation meetings for child health programmes	Lumpsum	1000000	10.00	0		0		New Proposal: Budget proposed for Child Health Programme Review/ Consultative meeting in/ out side the State. Rs. 10.00 Lakhs <b>In Principle Budget @ Rs. 10.00 Lakhs approved. Budget Shifted to HSS-11 SI No. 194</b>
31	<b>State Specific Initiatives and Innovations</b>					<b>0.00</b>		<b>0.00</b>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
31.1	ASHA Incentive for ensuring survival of all newborns till 10 weeks of age	Per Newborn	200	0.00	0	0.00		0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> A State specific initiative had been undertaken during 2022-24 in 5 pilot districts with high neonatal mortality in view of reduction of high NMR in the State, i.e. provision of ASHA incentives of Rs200/- per case for ensuring survival of newborns till 10 weeks of age.</p> <p><b>Proposal:</b> ASHA Incentive for ensuring survival of all newborns till 10 weeks of age  <b>Details is at Write-up Annexure</b>  <b>Budgeted 80% looking expenditure trend</b></p>
31.2	Development of an app for supervision of HBNC & HBYC		1500000	15.00	0	0.00	0	0.00	<p><b>New Activity</b>  <b>Background:</b> HBNC &amp; HBYC are key community level interventions for early identification of danger signs, which if implemented with quality, will help in reducing neonatal mortality rates.</p> <p><b>Proposal:</b> Comprehensive Action Plan on Strengthening HBNC &amp; HBYC encompassing 1. Supportive supervision of HBNC &amp; HBYC by AYUSH MOs &amp; CHOs, 2. Provision of HBNC kits to all ASHAs, 3. Re-orientation of ASHAs on danger signs of newborns and ECD, 4. Revision of ASHA HBNC Checklist 5. Push message notification to beneficiaries &amp; ASHAs on scheduled HBNC &amp; HBYC visits &amp; 6. Sample validation of visits by State level call centre (104)- Details in write-up Annexure. For Supportive supervision of HBNC &amp; HBYC by AYUSH MOs &amp; CHOs it is proposed to train the AYUSH MOS &amp; CHOs on supportive supervision using the Handbook for ASHA facilitator and ANM/MPW on HBNC &amp; HBYC. In line with that it is proposed to develop an app for entering the supervision data obtained from supervision, which can be later analyzed and component wise feedback can be given to ASHAs &amp; ANMS. Details in write-up annexure.</p>
<b>Total Child Health</b>						<b>14.08</b>		<b>14.11</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**RCH-4**  
**Immunization**





## RCH-4\_Immunisation

S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total Immunisation</b>					6.22		5.92	
<b>32</b>	<b>Immunization Including Mission Indradhanush</b>					5.87		5.57	
<b>32.1</b>	<b>Micro Planning</b>					-		-	
<b>32.1.1</b>	Sub-centre level Micro Plan	Per SC	100	0.00	0	-	0	-	Ongoing activity - Proposal 2024-25: for 6688 existing SC + 548 virtual SC under NUHM.= 7236 SCs Proposal 2025-26: for 6688 existing SC + 1338 Newly created SC + 548 SC under NUHM.= 8574 SCs
<b>32.1.2</b>	Consolidation of Micro Plan at Block Level	Per Block	1000	0.01	0	-	0	-	Ongoing Activity
<b>32.1.3</b>	Consolidation of Micro Plan at District Level	Per District	2000	0.02	0	-	0	-	Ongoing Activity
<b>32.2</b>	RI Sessions	Per session	150	0.00	0	-	0	-	Ongoing Activity <b>Name of the activity:</b> RI sessions at SC where ANM position is vacant <b>Background</b> - The fund is being proposed to carry out Routine Immunization Vaccination Sessions at vacant SCs. The said fund will be utilized towards TA/DA for Vaccinator who will be assigned to conduct the RI Session at the said Vacant SC. Total SC without ANM - 543 (as per quarterly MIS report) <b>Proposal 2024-25:</b> - Provision for 13032 sessions. Projected unit cost - Rs.150/- per session X 4 session in a month X 543 SCs (proposed for 6 months as expected to fill up the vacancies in 6 months) <b>Proposal 2025-26:</b> - Proposed for 5000 sessions
<b>32.3</b>	<b>Alternative Vaccine Delivery</b>					0.00		0.00	
<b>32.3.1</b>	Alternative vaccine delivery in hard to reach areas	Per session	200	0.00	0	-	0	-	Ongoing Activity 18% of the total session sites are identified hard to reach Areas Budgeted 80% looking into expenditure trend. <b>Budget Revised as per recommendation of NPCC</b>
<b>32.3.2</b>	AVD in very hard to reach areas esp. notified by States/districts	Per session	450	0.00	0	-	0	-	Ongoing Activity 2% of the total session sites are identified very hard to reach Areas Budgeted 80% looking into expenditure trend. <b>Budget Revised as per recommendation of NPCC</b>
<b>32.3.3</b>	Alternative Vaccine Delivery in other areas	Per session	90	0.00	0	-	0	-	Ongoing Activity 80 % of the total session sites are other/ Normal Areas Budgeted 80% looking into expenditure trend. <b>Budget Revised as per recommendation of NPCC</b>
<b>32.4</b>	<b>Cold Chain Maintenance</b>			-		0.35		0.35	Ongoing Activity Budget proposed as approved in last year

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
32.4.1	SVS & RVS level	Per inst.	50000	0.50	0	-	0	-	Cold chain Maintenance of WIC & WIF at SVS & RVS level @ Rs. 50,000/- per RVS/ SVS <b>Budget Revised as per recommendation of NPCC</b>
32.4.2	District level	Per district	18750	0.19	1	0.19	1	0.19	Proposed as per last year approval
32.4.3	Cold Chain Point level	Per inst.	1000	0.01	16	0.16	16	0.16	Cold chain Maintenance at Cold Chain Point level @Rs.1000/- per CCP x 1300 CCPs <b>Budget Revised as per recommendation of NPCC</b>
32.5	Transportation of vaccine from SVS to RVS, RVS to DVS & DVS to Cold chain Points	Per district/ MCC	200000	2.00	1	2.00	1	2.00	<b>Transportation cost for Vaccine:</b> <b>GOI Norm-</b> @ RS.2.00 Lakhs per district for 30 districts & 5 Municipal Corporation Cities(MCC) per year <b>Ongoing Activity</b> <b>Budget proposed as approved in last year</b>
32.6	<b>Supplies for Immunization</b>					<b>0.45</b>		<b>0.45</b>	
32.6.1	Hub Cutter	Per SC	1000	0.01		0.00		-	<b>Background/Justification:</b> - Under Bio-Medical Waste Management, use of Hub Cutter under Routine Immunization Programme is essential to ensure injection safety of Healthcare workers and Safe waste disposal. During COVID-19 Vaccination Programme due to extensive use of Hub Cutters, many of the Sub Centres are not having a proper functional Hub Cutter. Based on Facility Assessment, it was found that Hub Cutter needs to be Procured for all the Sub Centres in Phased Manner, so as to enable them to meet the guideline of Safe injection Practices  <b>Proposal:-</b> Proposal for 6688 existing SC + 1338 New Zero DP SC + 548 SC under NUHM.= 8574 SCs , Based on Facility assessment, it was proposed to procure Hub Cutter for atleast 50% of Sub Centres of the State in the year 2024-25 & for the rest 50% of SC, Hub Cutter can be procured in 2025-26. To be met out of XV FC, In this regard guideline will be issued from State level for procurement of Hub cutter.
32.6.2	Red/Black plastic bags etc.	Per Set	6	0.00	3951	0.24	3951	0.24	<b>Ongoing Activity</b> <b>Background/Justification:-</b> As per BMW Guideline, for each Routine Immunization Session, there is requirement of 1 Red, Black & Yellow Bag as well as per Open Vial Policy, 3 Zipper Bags to be used for transportation of Open vials & Unopened Vials. <b>Proposal:-</b> Total immunization sessions planned in 2024-26 p.a. : 360302 Red/black/Yellow & Zipper Bag required for 360302 nos. of RI Sessions. <b>Proposal is for Routine Immunisation Programme Only</b>
32.6.3	Bleach/Hypochlorite solution/ Twin bucket	Per CHC/ PHC	1500	0.02	14	0.21	14	0.21	<b>Ongoing Activity for FID Sites:</b> Proposed for 50%. of Cold Chain Points in 2024-25 & rest in 2025-26 PIP. Budget: @ Rs. 1500 per institution as per Gol norms

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
32.6.4	Blue Puncture Proof Container	Per SC	200	0.00	0	0.00	-	-	<b>New Activity</b> <b>Background/Justification:-</b> As per BMW Guideline, for the safety of Healthcare workers at the sessions site while dealing with the Broken/ Empty vials & Diluents a puncture proof Blue Container is required to avoid any hazards. Hence, for each Sub Centre needs a Blue Puncture proof container. <b>Proposal:-</b> As this is a BMW requirement, Hence, proposed to be procured as a one time activity for SC level. <b>Detail proposal at RCH-4 Immunisation Write-up Annexure-F</b>
32.7	<b>Training &amp; Capacity Building</b>					2.06		2.06	<b>On Ongoing Activity</b>
32.7.1	Three days training of Medical Officers on RI & new vaccine (Participants : Block MO I/c, AYUSH MO) at State Level	20/ batch	80000	0.80	0	0.00	0	-	State load -3499, Projected achievement till September 2023: 2325 Remaining Load: 1174 Proposed Training for the year 2024-25: 20 batches at (MKCG MCH, SLN MCH, BB MCH) Proposed Training for the year 2025-26: 20 batches at (MKCG MCH, SLN MCH, BB MCH)
32.7.2	One day ICA training at State level	Per batch	106000	1.06		0	0	-	<b>Ongoing Activity</b> Refresher to ICA on New vaccines & new software (U-WIN,HMIS, SAFE VAC, NCCMIS, FI & CI Data analysis,Immunization coverage improvement plan) Projected 2024-25: No proposal Target for 2025-26: 1 batch
32.7.3	One day State level Refresher training on Cold Chain Management for CCT & WIC operators	40/Per Batch	106000	1.06	0	0		-	Refresher training on cold chain equipment repair & maintance (CCT-34 WIC operation 40, state-6)
32.7.4	One day State level training on RI microplan & AEFI & VPD Surveillance	35/Per Batch	106000	1.06	0	0.00	0	-	Ongoing Activity Total Participant: 106 (9 RVCCM, 32 DVLM, 30 ADMO, 5 ADUPHO & 30 ICA) Proposal for 2024-25 & 2025-26: 3 batches per year
32.7.5	One Day State level Orientation on Routine Immunization Programme for DPM & DAM & SPMU officials	35 / Per Batch	106000	1.06	0	0.00		-	<b>New Activity</b> <b>Background/Justification</b> - As SPMU Officials at State level & DPM & DAM are playing an important role in Programme and Finance part at District level and previously there was no training Planned for them to orient regarding Routine Immunization Programme, Hence, this training has been proposed as a orientation to the DPM & DAM, which will help to take ahead the Routine Immunization Programme in a better way at District level in Coordination with District Officials and District Immunization Team.
32.7.6	One Day State level orientation on U-WIN for District Officials	35 / Per Batch	106000	1.06	0	0.00	0	-	<b>New Activity</b> <b>Background/Justification</b> - As the U-WIN Software is being implemented throughout the State for Real time Monitoring of Routine Immunization Coverage, Hence a Review cum refresher training of District officials is required for gap analysis & to provide Hand Holding Support to Districts. <b>Proposal for 2024-25 &amp; 2025-26: 3 batches per year</b>

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
32.7.7	One Day District level Orientation on U-WIN for Block level Vaccinators,BDM & Private Facilities	35/ Per Batch	35000	0.35	3	1.05	3	1.05	<p><b>New Activity</b>  <b>Background/Justification</b> - As the U-WIN Software is being implemented throughout the State for Real time Monitoring of Routine Immunization Coverage, Hence a Review cum refresher training for Block level functionaries to assess the gap analysis &amp; to provide Handholding Support. 50% of training load of District level U-WIN training is being proposed in the year 2024-25 and the rest 50% is being proposed in the year 2025-26.  Total Targeted batches: 218nos  <b>Proposal for 2024-25 &amp; 2025-26: 109 batches per year</b></p>	
32.7.8	Two days district level Orientation/ refresher training for service providers on RI & new vaccine (Participants : Health Worker (M/F), Multi Purpose Health Worker (M/F) & supervisors	20/ batch	50424	0.50	1	0.50	1	0.50	<p><b>Background:</b> District level orientation/ refresher required for service providers is essential for implementation of RI programme.  <b>Progress:</b> Likely to be achieve 100% during 2023-24.  <b>Proposal:</b> As per Facility assessment, training load for the year 2024-26 for Basic Health Worker training is nearly 2380 Health Care Workers. Hence, 50% of the said training load has been proposed in the year 2024-25 and the rest 50% is being proposed in the year 2025-26.  <b>Budget Revised as per recommendation of NPCC</b></p>	
32.7.9	Two days district level cold chain handlers training	20/ batch	50590	0.51	1	0.51	1	0.51	<p><b>Ongoing Activity</b>  Background: District level cold chain handlers training required for service providers is essential for maintaining proper cold chain system.  <b>Progress:</b> Likely to be achieve 100% during 2023-24.  <b>Proposal: As per Facility assessment, training load for the year 2024-26 for Cold Chain Handler training is nearly 2378 Cold Chain Handlers.</b> Hence, 50% of the said training load has been proposed in the year 2024-25 and the rest 50% is being proposed in the year 2025-26.  <b>Budget Revised as per recommendation of NPCC</b></p>	
32.8	ASHA Incentive under Immunization								<p><b>Ongoing activity</b>  Incentive under Immunization:  1. For full immunization in first year-  2. For ensuring complete immunization up to 2nd year of age-  3. For DPT booster at the age of 5-6 years-</p>	
32.8.1	ASHA Incentive for full immunisation in first year	Per Beneficiary	100	0.00	0	-	0	-	<p>Total expected Infant 2024-26 : 724580  Expected Coverage: 615893 (85% of expected Infant)  Budgeted 80% looking into expenditure trend</p>	
32.8.2	ASHA Incentive for ensuring complete immunisation up to 2nd year of age	Per Beneficiary	75	0.00	0	-	0	-	<p>Total expected Infant 2024-26 : 724580  Expected Coverage: 615893 (85% of expected Infant)  Expected full immunization coverage- (100%) as per expenditure trend.  Budgeted 80% looking into expenditure trend</p>	
32.8.3	ASHA Incentive for DPT booster at the age of 5-6 years	Per Beneficiary	50	0.00	0	-	0	-	<p>Total Excepted children at the age of 5-6 years= 903495  Expected coverage for DPT Booster- (85%) i.e. 767970 beneficiary  Budget: Rs.50/- per ASHA X 767970 beneficiary  Budgeted 80% looking into expenditure trend</p>	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
32.8.4	ASHA Incentive for preparation of due list of children to be immunised & updated in monthly basis	Per ASHA p.m	300	0.00		-		-	Budget proposed in HSS-3_Community Engagement
32.8.5	ASHA Incentive for Mobilization of children	Per session	150	0.00	0	-	0	-	Ongoing Activity- Part of Routine & Recurring Activities Total immunization sessions planned in 2024-26 p.a. : 360302 Budgeted 90% looking into expenditure trend
32.9	<b>IEC/BCC &amp; Printing</b>					<b>0.60</b>		<b>0.60</b>	
32.9.1	<b>Mass Media</b>								Ongoing Activity
32.9.1.1	Advertisement through DD & local channels or scrolling	Per minute	172000	1.72	0	-	0	-	Timing: 1 minute per day for 12 days per year as per I&PR rates
32.9.1.2	Advertisement through AIR channels	Per minute	47000	0.47	0	-	0	-	Timing: 1 minute per day for 12 days in a year as per I&PR rates
32.9.1.3	Advertisement through FM Channels	Per 10 minute	20000	0.20	0	-	0	-	Timing: 10 minutes per day for 20 days per year
32.9.1.4	Publicity through Print Media	Per day	100000	1.00	0	-	0	-	One time advertisement of Color Quarter page in 2 newspaper for 6 days
32.9.2	<b>Mid Media Activities: Day / Week celebration</b>			-		-		-	<b>Proposed day to be celebrated-World Immunization Week</b>
32.9.2.1	At State level	Per event	100000	1.00	0	-	0	-	<b>Background / Justification :</b> -World Immunization Week, celebrated in the last week of April every year, aims to highlight the collective action needed and to promote the use of vaccines to protect people of all ages against disease.  Hence , in this regard this will also help for sensitization towards MR Elimination activities and increasing the Full Immunization coverage. In this forum good performing Districts and Human Resources in Routine Immunization Programme can be rewarded at State & District level.
32.9.2.2	At Dist level	Per event per dist	20000	0.20	0	-	0	-	
32.9.2.3	At Block level	Per event	2000	0.02		-		-	Not proposed
32.9.2.4	PHC/SC Level		3000			-		-	Fund to be met out of IEC budget PHC/SC-HWC List of days expanded as per the communication by GoI on observation of days at HWCs
32.9.2.5	Printing and dissemination of Immunization cards, tally sheets, monitoring forms etc.	Per beneficiary	10	0.00	6000	0.60	6000	0.60	<b>Ongoing Activity:</b> Expected live birth 2022-23 : 724580 85% Budget Proposed for Printing of Routine Immunization Registers, Training Modules, IEC Materials, Formats, AEFI Registers, AVD Registers, Vaccine Registers, Cold Chain Registers, Tally Sheets, Micro Planning formats, Preventive Maintenance Checklist, Monitoring Checklist etc.. <b>Proposal for Printing of 85% of live Birth = 615893</b>
32.10	<b>Planning &amp; M&amp;E</b>					<b>0.12</b>		<b>0.12</b>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
32.10.1	Consumables for computer including provision for internet access for strengthening RI at district level	Per District	12000	0.12	0	-	0	-	<b>Ongoing activity</b> <b>Background</b> : - Approved as per GOI Norms @ Rs.1000/- per Month / District. This fund has been Provisioned for internet access for Immunization Computer Assistants to manage the MIS like SAFEVAC, U-WIN, NCCMIS and other Routine Immunization Activities. <b>Proposal</b> : - Any Consumables required for Computer may be purchased using this Fund.
32.10.2	Consumables for computer including provision for internet access for strengthening vaccine stores at different level	Per SVS/RVS/DVS Per Annum	12000	0.12	1	0.12	1	0.12	<b>New Activity</b> <b>Background/Justification:</b> - State has completed Construction of dedicated Vaccine Stores at 1 State, 9 nos. of Regional & 32 nos. of District level. In the said Vaccine Stores. As SVS/RVS & DVS are functioning in separate dedicated buildings & SVLM/SVSK, LM & RVCCMs (42 Nos.) are working from there. <b>Proposal:</b> Hence for the internet needs of SVS,RVS & DVS and for smooth functioning of eVIN, Challan generation, Data cost & the consumables required for Printer and Computer shall be met out of this fund.
32.10.3	Support for Quarterly State level review meetings of district officer	Per participant	1500	0.02	0	-	0	-	<b>Ongoing Activity</b> <b>Participants</b> : 3 participants each from all 32 units <b>Budget</b> : Per qtr 96 participants x 4 qtrs = 384 participants per annum.
32.10.4	Review meetings exclusive for RI at district level with Block MOs, CDPO, and other stake holders	Per Participant	150	0.00	0	-	0	-	<b>Ongoing Activity</b> Proposed as per last year approval
32.10.5	Review meetings exclusive for RI at block level	Per Participant	100	0.00	0	-	0	-	Rs. 75/- Per Person as honorarium for ASHA and Rs. 25/- per Person at the disposal of MO I/c. for meeting expense. <b>Ongoing Activity</b>
32.10.6	Mobility Support for supervision for district level officers.	Per district	200000	2.00	0	-	0	-	<b>Ongoing activity</b> Budget Proposed @ Rs 2.00 lakhs / year/ district looking into expenditure
32.10.7	JE Campaign								Campaign has been taken up in previous years 2016-17 & 2017-18 covering 17 districts 2018-19- Nil, 2019-20- 7 districts completed. To be taken up as per GoI instruction & fund will be asked in Supplementary PIP if required.
32.10.8	Measles Rubella Supplementary Immunisation Activity								Taken up in all 30 districts in 2017-18. No new proposal for 2024-26
32.11	<b>State Specific Initiative &amp; Innovations</b>						<b>0.30</b>		

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
32.11.1	Vaccination on Demand in Urban Areas	Per Session	800	0.01	0	0.00	0	-	<b>Ongoing Activity</b> Organization of Session site at Slum & Non Slum areas @Rs.800/- per session- Budget Revised as per recommendation of NPCC • Hiring of Urban ANM @ Rs. 450/- per session • Organization cost of the session Rs. 250/- per session • Preparation of due listing of beneficiaries Rs. 100/- per session • Total Cost budgeted for 5 MCs in 2024-25 = Rs 12.48 Lakhs • Total Cost budgeted for 5 MCs in 2025-26 = Rs. 12.48 Lakhs <b>Detail proposal at RCH-4 Immunisation Write-up Annexure-C</b> <b>Budget Revised as per Recommendation of NPCC</b>
32.11.2	<b>Vaccine Preventable Disease (VPD) Surveillance</b>					-		-	<b>Ongoing Activity</b> <b>Detail proposal at RCH-4 Immunisation Write-up Annexure-A</b>
32.11.2.1	VPD Case Investigation by Medical Officers	Per Case	300	0.00	0	-	0	-	Expected No of cases.- 1500 (AFP- 1348, DPT-152) per year To pay towards travel expenses @Rs 300/- per of case investigated
32.11.2.2	Assistance in investigation of VPD cases	Per Case	200	0.00	0	-	0	-	Rs 200/-per case is approved to the Health worker/ volunteer assisted the case investigation as incentive.
32.11.2.3	Sample Collection for AFP and DPT Surveillance	Per Case	200	0.00	0	-	0	-	2 samples per case @200/- per sample collection to be given to the sample messenger towards travel expenses from suspected case to Health facility
32.11.2.4	Sample Shipment for AFP & DPT from Block to District	Per Shipment	300	0.00	0	-	0	-	Shipment Cost (Travel Allowance from Health Facility to District HQ/ Sample Storage Centre) @ 300 per shipment
32.11.2.5	Sample collection and storage for shipment	Per Case	150	0.00	0	-	0	-	<b>Proposed for one dedicated support staff and paid honorarium @Rs 150/- per case for supporting in sample collection, storage, documentation and supporting shipment.</b>
32.11.2.6	Printing of VPD Surveillance Booklets	Per booklet	200	0.00	0	-	0	-	<b>Proposed for Printing of VPD Booklet @250 for 600 Rus</b>
32.11.2.7	Printing of VPD Surveillance Posters etc.	Per poster	20	0.00	0	-	0	-	<b>Proposed 10,800 posters @35</b>
32.11.2.8	Block VPD Surveillance review & orientation	Per participant	50	0.00	0	-	0	-	Proposed Rs.75 per participants for refreshment (all MOs of SDHs, CHCs, PHCs, HWs-M&F & support staff)
32.11.2.9	State AEFI Committee meeting Bi-monthly	Per participant	550	0.01	0	-	0	-	Proposed Rs.150/ for Stationary and Rs.400/ for Refreshment participant for upto 15-members for bi-monthly causality assessment at State level
32.11.2.10	District AEFI Committee meeting Quarterly	Per participant	100	0.00	0	-	0	-	Proposed budget for refreshment @Rs 150/- for per participant for 10 participant per district per quarter
32.11.2.11	Organising DTFI/CTFI meeting for Immunization	Per Meeting	2800	0.03	0	-	0	-	Proposed Rs.70 per participants for refreshment of 40 participants per District per month= Rs. 2800/- per Meeting x 35 units x 12 months

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
32.11.3	Independent Monitoring through Immunization Field Monitors (IFM)	Lumpsum		-	1	0	1	0	<b>Ongoing Activity</b> Details at Immunisation Write-up Justification Annexure-D <b>Estimated budget for 2024-25: Rs.402.72 lakhs, Proposed Rs. 281.90 Lakhs (70%) as per expenditure trend</b>  Estimated budget 2025-26: Rs.412.33 lakhs, Proposed Rs. 288.63 Lakhs (70%) as per expenditure trend
32.11.4	Effective Vaccine Management Assessment in all 30 Districts of Odisha	Lumpsum	3000000	30.00	0	-		-	<b>New Activity</b> <b>Detail proposal at RCH-4 Immunisation Write-up Annexure-E</b>
32.11.5	ISO 9001:2015 Certification of Vaccine Stores	Lumpsum	1380000	13.80	0	0.30		-	<b>New Activity</b> <b>Detail proposal at RCH-4 Immunisation Write-up Annexure-G</b>
32.11.5.1	For SVS	Per Unit	60000	0.60	0	-		-	
32.11.5.2	For RVS	Per Unit	40000	0.40	0	-		-	
32.11.5.3	For DVS	Per Unit	30000	0.30	1	0.30		-	
<b>33</b>	<b>Pulse polio Campaign</b>					-		-	
33.1	Pulse Polio operating costs	Lumpsum	31193000	311.93	0	-	0	-	<b>Ongoing Activity</b> Budget proposed as per last year's approval
<b>34</b>	<b>eVIN Operational Cost</b>					<b>0.35</b>		<b>0.35</b>	<b>Total ILR Point-1360 in the State</b>
34.1	Human Resource							-	1. SPO: Existing SVLM, IT Consultant (eVIN) & CCM are managing the assignment. 2. PO-Operation: Existing RVCCMs are managing the assignment. 3. VCCM: Existing DVLMs are managing the assignment.
34.2	Mobility Support	Per Month	30000	0.30		-		-	No separate mobility cost provisioned in the PIP, managed out of budget proposed under Planning & ME.
<b>34.3</b>	<b>Non Recurring Cost of eVIN</b>								
34.3.1	Replacement of Temperature loggers	Per logger	15000	0.15	0	-	0	-	<b>Background:</b> Temperature logger is essential to monitor the real-time temperature of cold chain equipments. Progress: 1360 cold chain equipment having data logger <b>Proposal:</b> Based on facility assessment replacement of Temperature loggers is required for 272 nos of CCE. Approved in RoP 125 Nos
<b>34.4</b>	<b>Recurring Cost of eVIN</b>								
34.4.1	Data Sim Cards rental for Temperature Loggers	Per logger p.a.	3000	0.03	0	-	0	-	<b>Ongoing Activity</b> 1360 temperature loggers have been installed at existing ILR, DF, WIC & WIF.
34.4.2	Data cost for Cold Chain Handlers, RVCCM & DVLM for manging eVIN application	Per Cold Chain Handler/ Month	150	0.00	0	-	0	-	<b>New Activity</b> <b>Background:</b> As State has dropped the activity of procurement of Smart Phone for use of eVIN software, Hence, data cost to be provided to the Cold Chain Handlers, RVCCM & DVLM.
<b>34.5</b>	<b>eVIN Trainings</b>								

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
34.5.1	One Day State Level Training on eVIN & Data logger Management	Per Meeting	106000	1.06	0	-	0	-	<b>Ongoing Activity</b> Total Participant: 9 RVCCM, 32 DVLM & 35 CCTs/ RM & State 5 State level Participant Frequency of Meeting: Twice in a Year
34.5.2	One days refresher training on eVIN & NCCMIS for CCT/RM, RVCCM, LM at State level.	35/Per Batch	106000	1.06	0	0	0	-	<b>Ongoing Activity</b> State load -105(ICA - 30, CCT-34,DVLM-32 RVCCM-9 & state consultant-5) Proposed for the year 2024-25 - 3 Batches Proposed <b>Target for 2025-26:</b> 3 batches each year @35 per batch
34.5.3	One day district level training on eVIN	30/Per Batch	35000	0.35	1	0.35	1	0.35	Ongoing Activity Training for Cold Chain Handler on eVIN Target-1255 cold chain point *2=2510 Batch size-30 Total target for 2024-26: 94 batches Proposal for 2024-25 & 2025-26: 47 batches per year
<b>Total Immunisation</b>						<b>6.22</b>		<b>5.92</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**RCH-5**

# Adolescent Health



S.No.	Scheme/ Activity	Approval for 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
	<b>Total Adolescent Health</b>					<b>0.12</b>	<b>0.12</b>		
<b>35</b>	<b>Adolescent Friendly Health Clinics</b>					<b>0.12</b>	<b>0.12</b>		
35.1	Establishment of AFHSC at MCH/ DHH/ CHC/ PHC level					-		<p><b>Ongoing Activity:</b>  <b>Background:</b> In Odisha total 252 AFHCs functional at 32 DHHs, 26 SDHs &amp; 194 CHCs level. Plan is to scale up AFHC clinic to all 375 CHCs, 32 SDHs &amp; 32 DHHs during 2024-26 in rural areas .Further, 123 New AFHC are proposed at 116 Urban PHCs &amp; 7 UCHCs of the State.  <b>Progress :</b> All 252 AFHs are functional and out of which also includes 32 M-AFHCs as proposed in PIP 2022-24.  <b>Proposal:</b> Total AFHC proposed - 562 (including 252 functional)</p> <p>- <b>Proposal 2024-25:</b> Operational expenses for 252 functional AFHC.  <b>Proposal 2025-26:</b> Operational expenses for 562 AFHC.</p> <p><b>Budget:</b>  1. DHH/SDH/CHC/UCH @Rs.50,000/- per institution (as per Gol norm) for 194 institutions (6 SDHs + 181 CHCs + 7 UCHCs) = <b>Rs.97.00 lakhs</b>  2. Urban PHC @Rs.20,000/- per institution (as per Gol norm) for 116 Urban PHC = <b>Rs.23.20 lakhs</b>  3. HR: Integrated Counselors upto CHC level proposed in HSS  4.Equipment/Instrument: To be met out of establishment cost / state supply</p>	
35.1.1	For SDH, CHC, UCHC	Per Inst	50000	0.50	0	-	-		
35.1.2	For UPHCs	Per Inst	20000	0.20	0	-	-		
35.2	Establishment of District level Adolescent Friendly Health Resource Centre (AFHRC)	Per DHH		-		-	-	<b>Saturated at all DHH level. No proposal for 2024-26</b>	

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S.No.	Scheme/ Activity	Approval for 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
35.3	Operating Expenses for AH/ RKSK Clinics/ M-AFHC	Per unit	12000	0.12	1	0.12	1	0.12	<p><b>Ongoing Activity:</b>  <b>Background:</b> In Odisha total 252 AFHCs functional at 32 DHHs, 26 SDHs &amp; 194 CHCs level. Plan is to scale up AFHC clinic to all 375 CHCs, 32 SDHs &amp; 32 DHHs during 2024-26 in rural areas .Further, 123 New AFHC are proposed at 116 Urban PHCs &amp; 7 UCHCs of the State.  <b>Progress :</b> All 252 AFHs are functional and out of which also includes 32 M-AFHCs as proposed in PIP 2022-24.  <b>Proposal:</b> Total AFHC proposed - 562 (including 252 functional)  <b>Proposal 2024-25:</b> Operational expenses for 252 functional AFHC.  <b>Proposal 2025-26:</b> Operational expenses for 562 AFHC.  <b>Budget:</b> Unit cost revised from Rs.10,000/- to Rs.12,000/- per year as per GoI cost norm.                      Printing for AFHC-AFHC Registers, reporting formats, AFHC cards etc to be met out of operational cost including other contingencies &amp; stationeries.</p>
35.4	AFHS Training of Medical Officers	Per batch	350000	3.50	0	0.00	0	-	<p><b>Ongoing Activity</b>  <b>Proposal 2024-25:</b> 4 days AFHS training for all existing 252 AFHCs in 6 batches .One MO ( MBBS/AYUSH from institutions having AFHCs                      Total load: 252 Batch Size: 40  <b>Proposal 2025-26:</b> 4 days AFHS training for all existing 310 AFHCs in 7 batches. One MO ( MBBS/AYUSH from institutions having AFHCs                      Total load: 310 Batch Size: 40  <b>Justification:</b> MOs training on AFHS proposed to strengthen quality clinical service.</p>
35.5	Training of AH counselors	Per batch	10000	0.10	0	0.00	0	-	<p><b>Ongoing Activity</b>  <b>Proposal:</b> 1 days training on use of APP &amp; Dash board developed by GoI for Counselors who are providing services at AFHCs at DHH/ SDH, CHC &amp; UPHC level along with Block Data Managers, District Data Managers.                      Total load: 1 batch per district for existing &amp; newly inducted counselors  <b>Justification:</b> As GOI develop new mobile App for AFHCs reporting hence one day training on Mobile app for all counselors proposed.</p>
35.6	Review meetings/ workshops	Per meeting	12000	0.12	0	0.00	0	-	<p><b>Ongoing Activity</b>  <b>Proposal:-</b> One day Review-cum-convergent meeting Bi- annually for block level officials, Programme managers of Health, Education and WCD and counselors of AFHCs on various components of RKSK &amp; school health                      Load for 2024-25 =2 meetings / year/ Dist.                      Unit Cost: Rs. 12,000/- per meeting                      Total : 60 meeting per year.</p>
35.7	Communication Support for Counselors			-		-		-	Closed User Group (CUG) to be provided to each of the counselor. Budget for the same has been included under HSS.
36.0	Weekly Iron Folic Supplement (WIFS)					0.00		0.00	

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S.No.	Scheme/ Activity	Approval for 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
36.1	IFA tablets under WIFS (10-19 yrs.)	Per tab	0.12	0.00	0	0.00	0	-	<p><b>Ongoing activity with revised unit nos</b></p> <p>Drugs Specification : 60 mg elemental Iron &amp; 500 mcg,Folic acid, sugar coated tab (IFA blue)</p> <p>Level at which the item would be used : (School and AWC)</p> <p>The numbers provided by S&amp;ME Dept. and W&amp;CD Dept</p> <p>No. of Out of School Adolescent girls 10-19 yrs - 962439</p> <p>No. of In-school adolescents 10-19 yrs - 2695468</p> <p>Requirement for IFA. (Large Blue) tablets -329885245</p> <p>A. Prophylactic Dose: 3657907 X 52 weeks = 190211164 tablets (<b>Approved 70%</b> looking into consumption trend i.e. 190211164 X 70% = <b>133147815</b>)</p> <p>B. Therapeutic Dose: 1092986 (total 70% of estimated anemic cases, out of 1337727 10-19 years boys, 30% is 401318 as anemia prevalence as per NFHS-5 is 30%, out of 23, 20, 180, 10-19 years girls, 50% is 1160090 based on expected consumption as anemia prevalence as per NFHS-5 is 65.5%) x 90 days X2tablets per per day=<b>196737480</b> tablets</p> <p>Requirement for IFA. (Large Blue) tablets for both prophylactic &amp; therapeutic treatmentAppoeved - 329885295</p> <p>Details calculation at write up Annexure</p>
36.2	Albendazole Tablets under WIFS (10-19 yrs.)	Per tab	1.50	0.00		0.00		-	<p><b>Budget Shifted to RCH -7, Nutrition SI No. 53 as per recommendation of NPCC</b></p> <p><b>Ongoing activity- NDD</b></p> <p>Drugs Specification :Albendazole 400 mg chewable tab.</p> <p>Level at which the item would be used :School &amp; AWC</p> <p>Estimated no of beneficiaries (10-19 years) = 6482035</p> <p>For 2 rounds total No. of tablets required +10 % buffer=18513871 as per normative calculation</p> <p>Details calculation at write up Annexure</p>
36.3	Printing under WIFS -WIFS cards, WIFS registers, reporting format etc	Lumpsum		-		-		-	WIFS Card Integrated with MCP Card. Reporting formats printed & supplied. No additional requirement in 2024-26.
37	Menstrual Hygiene Scheme (MHS)					0.00		0.00	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
37.1	Sanitary Napkins procurement	Per Napkin	10.86	0.00		0.00	0	-	<p><b>Ongoing activity</b>  <b>Background:</b> The Community level social marketing of sanitary napkins for out of school adolescent girls (10 to 19 years) by ASHAs under Rastriya Kishor Swasthya Karyakram (RKSK) will be continued as before. For in school adolescent girls provision of sanitary napkin is under State Budget.  <b>Proposal under NHM:</b>  <b>Total out of school adolescent girls - 962439</b>                      Adolescent girls in menarche stage - 673707 (70% of total adolescent girls)                      Expected no. of Adolescent Girls to purchase napkins from ASHA (80% of AGs in menarche stage as per past coverage)=538965  <b>Total requirement</b> 538965 girls X 2 pkts X 12 months =12935180 pkts  <b>Basis of finalisation of Unit Cost:</b> Recent Tender done at State level- Rs. 1.81/- per pc x 6 pieces= Rs 10.86/-                      Requirement for 2024-25: Already procured in 2023-24                      Procurement to be initiated in 2024-25 but PO to be issued in 2025-26.</p>
37.2	Training & Capacity Building			0.00		0.00		-	Requirement Saturated
37.3	<b>IEC/BCC activities under AH</b>								
37.3.1	<b>Mass Media</b>								<b>Ongoing Activity</b>
37.3.1.1	Advertisement through DD & local channels or scrolling	Per minute	171100	1.71	0	-	0	-	Timing: 1 minute per day for 10days per year as per I&PR rates
37.3.1.2	Advertisement through FM Channels	10 minutes Per minute	4354	0.04	0	-	0	-	Timing: 10 minutes per day for 30 days per year
37.3.1.3	Publicity through Print Media	Per day	100000	1.00	0	-	0	-	One time advertisement of Colour Quarter page in 2 newspaper for 6 days
38	<b>Peer Educator Programme</b>					0.00		0.00	<b>Peer Educator Programme is implemented in 6 districts out of total 30 districts. Of which 3 are aspirational districts.</b>
38.1	Organizing Adolescent Health day	Per AHD session	1900	0.02	0	-	0	-	<p><b>Ongoing activity</b>  <b>Background &amp; Proposal :</b>                      1. AHD at PE districts :Bolangir-7192, Dhenkanal-4516, Bhadrak-5508, Koraput-12989, Mayurbhanj-13466, Boudh-2208                      - Total AHD sessions planned: 11470 session site per quarter x 4 quarters = 45880 sessions                      2. AHD at 4147 SC HWCs on Half yearly basis in selected villages at rest 24 districts (Non PE Districts)                      Expected 80% sessions to be organised in a year, hence budgeted 80%.</p>
38.2	Organising Adolescent Friendly Club meetings at subcentre level	Per meeting	500	0.01	0	-	0	-	<p><b>Ongoing activity</b>  <b>Background:</b> AFC conducted at SC level in 6 PE implemented districts on monthly basis. In Odisha AFC conducted in 1535 SCs on monthly basis by ANM at SC HWC level.  <b>Proposal :</b> Total SC - 1535 (In 6 RKSK districts namely Dhenkna-167x12, Bolangir-226x12, Bhadrak-178x12 , Koraput-308x12,Mayurbhanj-589x12,Boudh-67x12)                      Budget Proposed: @ Rs. 500/- per meeting x 1535 SC x 12 months= Rs.92.10 lakhs                      Expected 80% meetings to be organised in a year, hence budgeted 80%.</p>

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S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval for 2024-26				State's Remarks
					FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
38.3	Training & Capacity Building			0.00		0.00		0.00	Saturated. No proposal for 2024-26
38.4	PE Kit and PE Diary			0.00		0.00		0.00	Saturated. No proposal for 2024-26
38.5	Merchandise T-shirt & cap for Peer Educator	Per Peer Educator	300	0.00	0	0.00		0.00	<b>New Activity</b> T-shirts & caps are provided to Peer Educators since last 3 years. This provision creates an identity for Peer Educators in the field which facilitates them to discharge their duties smoothly.
38.6	Incentives for Peer Educators	Per PE per Annum	600	0.01	0	-	0	0.00	<b>Ongoing Activity:</b> <b>Background :</b> In Odisha 6 PE districts have 45424 trained PEs (Total PE in Dhenkanal- 4532 & Balangir - 8932, Bhadrak- 5508 & Koraput - 10416, Myurbhanj- 13420, Boudh-2616= 45424 ) <b>Proposal :</b> Provision of Non financial incentive proposed @ Rs. 50/- per month for all PEs for 12 months (45424 X 12 months) proposed @ Rs. 50/- per month for all PE Budgeted 80% looking expenditure trend
38.7	Incentive to ASHA for selection of Peer Educator			-		-		0.00	No new PE Proposed for 2024-26
38.8	Incentive for mobilizing adolescents and community for AHD	Per AHD	150	0.00	0	-	0	0.00	<b>Ongoing activity</b> 1. AHD at PE districts : Bolangir-7192, Dhenkanal-4516, Bhadrak-5508 , Koraput-12989, Mayurbhanj-13466, Boudh-2208 Total AHD sessions planned: 11470 session site per quarter x 4 quarters = 45880 sessions 2. AHD at 4147 SC HWCs on Half yearly basis in selected villages at rest 24 districts (Non PE Districts) Budgeted 80% looking expenditure trend
39	<b>School Health And Wellness Program under Ayushman Bharat</b>					0.00		0.00	<b>Background:</b> School health programme under Ayushman Bharat has been implemented in 30 districts by 2023-24.
39.1	Refresher training of School Health Ambassadors	Lumpsum/ Per Dist	22000	0.22	0	0.00			<b>Background:</b> Under SHP, 54000 Health and Wellness Ambassador(HWA) targeted and 90% training completed. HWAs are currently taking classroom sessions . For reporting of sessions Gol has been developed mobile application for reporting.  Proposal: 1 day orientation cum sensitisation of HWAs on Mobile application for 54000 HWAs ( Per Batch 40 HWAs in 1350 Batches)
39.2	Mobility & Communication support for AH counselors for monitoring School Health Programme	Per Person	2400	0.02	0	-	0	0.00	<b>Proposal1:</b> State has engaged Counselors at Integrated Counseling Centre-As they are assigned with task of counseling for all components (RCH/ DCP/ NCD), it is not possible in part of them to make field visit. Hence, no budget proposed. <b>Proposal 2: Mobility support to trained HW(M)</b> for outreach visit to schools for monitoring & mentoring of School Health Initiatives (Targeted all 30 districts where school health programme initiated ) under the guidance of MO, PHC HWCs <b>Budget Proposed:</b> @ Rs. 200/- per visit x 12 visits Per HW(M) X 30 districts X 3657 Expected 80% visit, hence budgeted 80%
40	<b>Other Adolescent Health Components</b>					0.00		0.00	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
41	State specific Initiatives and Innovations					0.00		0.00	
41.1	Mobile Application for ASHA to track sanitary napkin social marketing under MHS								<p><b>Background:</b> Under MHS programme ASHA selling sanitary napkin to adolescent girls and keep record in physical form. In all 30 districts 49990 ASHAs are involved in the process which is difficult to track.</p> <p><b>Proposal:</b> Mobile application for ASHA on social marketing of sanitary napkins. Technical &amp; financial support for development of app will be by UNFPA</p> <p><b>Features of app: Elements to be updated</b></p> <ol style="list-style-type: none"> <li>1. Stock &amp; store of napkins</li> <li>2. No. of packets sold</li> <li>3. Amount earned</li> <li>4. Amount deposited</li> </ol>
	<b>Total Adolescent Health</b>					<b>0.12</b>		<b>0.12</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**RCH-6**  
**Family Planning**



## RCH-6\_Family Planning

S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
	<b>Total Family Planning</b>					4.13		3.80	<b>Mandate: Provision of quality sterilization services upto block level (DHH/ SDH/ CHCs) by increasing availability of trained service providers &amp; increasing regularity of FDS for minilap, laparoscopic &amp; NSV sterilization.</b>	
<b>42</b>	<b>Sterilization - Female</b>					<b>2.47</b>		<b>2.47</b>	<b>Expected Beneficiaries : 1,00,000</b>	
42.1	Female sterilization fixed day services			-		-		-	Background: All facility upto CHC level are mandate to provide FDS (either through engaging trained Surgeons from the same facility or mobilizing from other facilities) Progress: 371 facilities are providing FDS Budget: As budget for FDS is already covered under Compensation package hence, no additional cost proposed. Expenditure Heads under compensation package: FDS organisation cost Drugs dressing = 100 , Anaesthist=50, Nurse/ANM=30, OT helper=30, Documentation=20, Refreshment=10, Misc-10 = Total FDS organization cost= Rs.250/-	
42.2	<b>Compensation for female sterilization</b>			-		<b>0.88</b>		<b>0.88</b>	<b>Ongoing Activity</b> Budgeted proposed for 100000 cases Achievement for 2022-23: 92529 cases (out of 75000 targeted cases)	
42.2.1	At Public Sector	Per beneficiary	2000	0.02	55	0.88	55	0.88	<b>1. At Public Sector (Interval Female Sterilization): @Rs.1400/- X 62000 beneficiaries</b>	
42.2.2	At Private Sector	Per beneficiary	3000	0.03	0	-	0	-	<b>2. At Private Sector: @Rs.1000/- X 5000 beneficiaries</b>	
42.2.3	For PPS at public sector	Per beneficiary	3000	0.03	0	-	0	-	<b>3. For PPS at public sector: Rs.2200/- X 33000 beneficiaries</b>	
42.3	Minilap kits	Per Kit	5000	0.05	3	0.15	3	0.15	<b>Expenditure Analysis:</b> <b>As per FMR 2022-23, fund to the tune of Rs. 1790.35 lakhs has been spent. Hence budgeted 80% of estimated cost</b>	
									5 sets of Minilap Kits for each of the 30 districts to replace old sets.	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
42.4	Laparoscopes	Per Machine	1500000	15.00	0	0.00			0.00	<p><b>Progress:</b> State has 21 laparoscopes functional in different sites and another 21 defective laparoscopes which needs repairing.</p> <p><b>Proposal 1:</b> 14 surgeons from Balasore, Bhadrak, Cuttack, Deogarh, Dhenkanal, Jagatsinghpur, Kendrapara, Khurdha, Koraput, Malkangiri, Mayurbhanj, Nayagarh, Puri and Sambalpur are performing more than 500 surgeries per year with only one laparoscope in their setup. They need to be reinforced with another 14 laparoscopes set as per Gol guideline.</p> <p><b>Proposal 2:</b> 12 surgeons are planned to be trained during 2024-25 who will be providing services in 10 new FDS sites, for them we need additional 10 Laparoscopes.</p> <p>Proposal 2025-26: Not proposed, as proposed in 2024-25</p>
42.5	Drop Back Services for sterilization clients	Per case	250	0.00	0	0.00	0		0.00	<p><b>Ongoing Activity</b> Cases targeted for female sterilization at public health inst- <b>100000</b> Budgeted for :<b>70000 (70%)</b> of the targeted cases as others may expected to use their own conveyance</p>
42.6	TOT on Laparoscopic Sterilization	4/ batch	40000	0.40	0	0.00			0.00	<p><b>Proposal:</b> 3 days TOT on laparoscopic sterilization <b>Justification:</b> For acceradation of new laparoscopic sterilization training center at Capital Hospital Bhubaneswar. Total Batch Proposed for 2024-25: 1 (4 per batch) Total Batch Proposed for 2025-26: Not proposed</p>
42.7	Laparoscopic Sterilization training for doctors (teams of doctor, SN and OT assistant)	3/ batch	87000	0.87	1	0.87	1		0.87	<p><b>Ongoing Activity</b> Total trg. Load : 72 (24 Surgeons + 24 Staff Nurses + 24 OT asst) <b>Progress:</b> Cumm. Trained till March 23 team 131*3=393 persons (Upto 2023) Remaining load 477 - 393 = 84 (9 batches) Target 2024-25: 4 batches (3 per teams) Target 2025-26: 4 batches (3 per teams) <b>Duration - 12 days training.</b></p>
42.8	TOT on Minilap	4/ batch	40000	0.40	0	0.00			0.00	<p>Proposal: 3 days TOT on Minilap ToT Justification: 1 batch TOT proposed for the functionalization of 2 new Laparoscopic training centers made functional during 2023 Total Batch Proposed for 2024-25: 1 (4 per batch) Total Batch Proposed for 2025-26: Not proposed</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
42.9	Minilap training for Medical Officers	4 / batch	57000	0.57	1	0.57	1	0.57	<b>Ongoing Activity</b> Progress: 293 doctors trained in Minilap till 2023. Training proposed for the newly inducted MOs. Proposed for 2024-25: 12 MOs (3 batches) including New MBBS recruits during 2023-24 key priority under FP by GOI. Duration - 12 days training
42.10	Processing accreditation/empanelment for private facilities/providers to provide sterilization services	Per Meeting	2000	0.02	0	-	0	0.00	<b>New Activity</b> <b>Background:</b> A Meeting is required for coordination with private accredited facilities to ensure timely reporting and disposal of compensation of claims. A total of 117 private accredited institutions currently present in the State. Expected to accreditate 30 nos of private institutions in 2024-26. <b>Progress:</b> Newly proposed this year <b>Proposal for 2024-26:</b> 60 Meetings per year (twice a year for 30 districts)
42.11	Printing under Female Sterilization- Manuals & Guidelines/Register/ Documets	Per register	120	0.00	0	-	-	0.00	<b>Ongoing Activity</b> <b>Proposal for 2024-25:</b> Register for all operational fixed day facilities Total Requirements : 500 registers @ Rs.120/- per register <b>Budget: Rs.120/- per register X 500 register</b> <b>Proposal for 2025-26:</b> Already proposed in 2024-25, no new proposal proposed in 2025-26
43	<b>Sterilization - Male</b>					0.41		1.08	<b>Expected Beneficiaries for 2024-25 - 2100</b> <b>Expected Beneficiaries for 2025-26 - 2800</b>
43.1	Male Sterilization fixed day services	Per Case	150	0.00		-		0.00	<b>Ongoing Activity</b> Total No. of expected cases in 2024-25 & 2025-26: 2100 & 2800 (achievement April to March 2023 Male Sterilisation = 1537) Budget: As budget for FDS is already covered under Compensation package hence, no additional cost proposed. <b>Expenditure Heads:</b> FDS organisation cost Drugs dressing =50, Nurse/ANM=30, OT helper=30, Documentation=20, Refreshment=10, Misc-10 = Total FDS organization cost= Rs.150/-
43.2	Compensation for Male Sterilization/NSV	Per beneficiary	2700	0.03	15	0.41	40	1.08	<b>Ongoing Activity</b> Male Sterilization Achievement by 2022-23: 1537 Target for 2024-25: 1680 beneficiaries (80% of 2100 expected cases) based on the achievement trend of 2022-23 Proposed target 2025-26: 2240 beneficiaries
43.3	NSV kits	Per Kit	2000	0.02	0	0.00		0.00	<b>Ongoing Activity</b> 50 sets to be provided to the 8 proposed new NSV FDS centers
43.4	NSV Training- ToT & Other trainings	4/Per Batch	34600	0.35	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Proposal for 2024-25 &amp; 2025-26:</b> 5 days NSV training of MOs at Selected Dist. Level As per the case load one batch of NSV training proposed in 2024-25 & 2025-26 (@4 person per batch)

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
43.5	Incentives for Male Health Workers for Mobilizing clients for Vasectomy	Per Worker	750	0.01	0	-	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> In order to strengthen community mobilization activity for increasing acceptance of male sterilization, it is proposed to involve MPHWM to increase the level of acceptance to the desire level as well as to support ASHA in mobilization.  <b>Progress:</b> Achievement: 2022-23 (1537 cases)  <b>Proposal:</b> An incentive of Rs.750/- to be provided to each Male health Worker for motivating at least 3 clients for vasectomy.</p>
43.6	Involvement of GKS/ VHSNC for strengthening male engagement in family planning	Per meeting	300	0.00		-		0.00	<p><b>Ongoing Activity</b>  <b>Background</b>  It is seen that Male Health Workers are more effective in communicating FP messages to men especially regarding male sterilization operation as compared to ASHAs. For this reason GKS level meetings are proposed to be conducted by Male Health Workers for increasing awareness and client mobilization  -Selection of 20% GKS for the activity (selection will be based on 1. Acceptance of male sterilization procedure in the past. 2. Availability of trained service providers in nearby functional FDS. 3. Coordination between the GKS members)  Tracking performance of identified GKSs by Asst. Manager GKS with the support from BPMU.Best performing GKS to be identified &amp; felicitated in the subsequent meeting in the presence of block level officials  <b>Proposal</b>  (46162 GKS X 20%=9232 GKS)  Budget: @Rs.300/- per meeting X 2 meeting X 9232 GKS= Rs. 55.39 lakhs  To be met out of VHSNC Untied fund, hence not budgeted.</p>
43.7	Printing under Male Sterilization	Per booklet	200	0.00		-		0.00	<b>Not Proposed this year</b>
44	<b>IUCD Insertion (PPIUCD and PAIUCD)</b>					-		-	<b>Expected Beneficiaries - 1,41,000</b>
44.1	IUCD fixed day services					-		0.00	Not proposed.
44.2	Compensation for IUCD insertion at health facilities (including fixed day services at SHC and PHC)	Per case	75	0.00	0	-	0	0.00	<p><b>Ongoing Activity</b>  Total Achievement of IUCD insertion (April to March 2022-23): 104000 (Private Institutions -1741 in 2022-23 )  <b>Proposal :</b>  - At public health institutions - Not budgeted , met out of IMEP fund under State budget  - At private institutions - Budgeted for 5000 cases as per last years achievement</p>
44.3	PPIUCD Services: Compensation to beneficiary for PPIUCD insertion	Per case	300	0.00	0	-	0	0.00	<p><b>Ongoing Activity</b>  Achievement during 2022-23 - 75252  <b>Proposal /Target 2024-25:</b> 141000 (20% of expected delivery 705958)  <b>Budget proposed for 2024-25 &amp; 2025-26:</b> 98700 (70% of total target i.e 141000 )</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
44.4	PAIUCD Services: Compensation to beneficiary per PAIUCD insertion	Per case	300	0.00	0	-	0	0.00	<b>Ongoing Activity</b> Achievement during 2022-23 - 75252 Proposal /Target 2024-25: 141000 (20% of expected delivery 705958) Budget proposed for 2024-25 & 2025-26: 7000 (50% of total target i.e 141000 )
44.5	ASHA PPIUCD incentive for accompanying the client for PPIUCD insertion	Per ASHA	150	0.00	0	-	0	0.00	<b>Ongoing Activity</b> Target 2024-25: 141000 (20% of expected delivery 705958) Budgeted for 70% i.e. 98700 cases.
44.6	ASHA PAIUCD incentive for accompanying the client for PAIUCD insertion	Per ASHA	150	0.00	0	-	0	0.00	<b>Ongoing Activity</b> Achievement during 2022-23: 4959 Target 2024-25: 10000 cases Proposal 2024-25 & 2025-26: 7000 (70% of 10000 cases)
44.7	IUCD kits	Per Kit		0.00		0.00		0.00	Not Proposed
44.8	PPIUCD forceps	Per unit	2000	0.02		0.00		0.00	Not Proposed
44.9	TOT (IUCD insertion training)	10/ per batch	90000	0.90		0.00		0.00	ToT for IUCD Insertion training have been already saturated. No new proposal proposed this year.
44.10	Training of Medical officers (IUCD insertion training)	10 / batch	80500	0.81	0	0.00	0	0.00	<b>Background: Comprehensive IUCD Training :-</b> <b>Comprehensive IUCD Training :-As per Govt of India Comprehensive IUCD Module 2018 (Interval +PP+PA) is merged and training will be conducted for 5 days for MO MBBS and Paramedics SNS, ANM, LHV,AYUSH in 2:8 ratio (Medical: Paramedical), per batch irrespective of the Trained Service providers earlier. the training load to be included for Rural &amp; urban service providers @10/ batch.</b> <b>Progress: 186 doctors trained till 2023</b> <b>Proposal</b> <b>Training load for 2024-25 &amp; 2025-26: 10 batches as per the district requirement (MO MBBS and Paramedics SNS, ANM, LHV,AYUSH in 2:8 ratio). Newly inducted doctors and nurses training is proposed.</b>
44.11	Training of AYUSH doctors (IUCD insertion training)			0.00		0.00		0.00	Integrated with Comprehensive IUCD Training. No separate proposal.
44.12	Training of Nurses (Staff Nurse/LHV/ANM) (IUCD insertion training)	Per batch		0.00		0.00		0.00	Integrated with Comprehensive IUCD Training. No separate proposal.
44.13	TOT (PPIUCD Insertion Training)	10/Per batch	80500	0.81		0.00		0.00	Not Proposed
44.14	Training of Medical Officers (PPIUCD Insertion training)			0.00		0.00		0.00	Integrated with Comprehensive IUCD Training. No separate proposal.
44.15	Training of AYUSH Doctors (PPIUCD Insertion training)			0.00		0.00		0.00	Not Proposed as per Gol guideline
44.16	Training of Nurses (Staff Nurse/LHV/ANM) (PPIUCD Insertion Training)			0.00		0.00		0.00	Integrated with Comprehensive IUCD Training. No separate proposal.

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
44.17	Printing Under IUCD Services: Manuals & Guidelines/ Register/ Documents						-	0.00	Ongoing Activity
44.17.1	Printing of IUCD Card	Per Card	2	0.00	0	-	0	0.00	Proposal-1: IUCD Card Printing IUCD card @Rs.2/- per card x 150000 = Rs.3.00 lakhs -
44.17.2	Printing of IUCD Register	Per Register	70	0.00	0	-	0	0.00	Proposal-2: IUCD register for facilities Per Register Rs.70/- X 1000 = 0.70 lakhs
45	ANTARA					0.00		0.00	Expected Beneficiaries for 2024-25 - 2,00,000 Expected Beneficiaries for 2025-26 - 2,50,000
45.1	Injectable contraceptive incentive for beneficiaries	Per Beneficiary	100	0.00	0	-	0	0.00	Achievement of MPA up to March 2023: 79484, Budget proposed for 2024-25: 50% of expected Beneficiary i.e. 200000 Budget proposed for 2025-26: 60% of expected Beneficiary i.e. 200000
45.2	ASHA incentive for accompanying the client for Injectable MPA administration	per Beneficiary	100	0.00	0	-	0	0.00	Achievement of MPA up to March 2023: 79484, Budget proposed in 2024-25: for 100000 cases Budget proposed in 2025-26: 120000 cases
45.3	TOT on Injectable Contraceptive Trainings			0.00		0.00		0.00	Not proposed. Already saturated the requirements
45.4	Training of Medical Officers on Injectable Contraceptive	30/batch	25000	0.25	0	0.00		0.00	Ongoing Activity Proposal for 2024-25: 4 batches of training proposed for Mos of Balasore & Gajapati districts as Subcutaneous ANTRA is Piloted in these districts. Proposal 2025-26: Already proposed in 2024-25 no new proposal proposed this year.
45.5	Training of Staff Nurse/LHV/ANM on Injectable Contraceptive	30/batch	25000	0.25	0	0.00		0.00	Ongoing Activity Proposal is for One day Training of SN/ LHV/ ANM on Newer Contraceptives at District level. Proposal for 2024-25: 6 batches of training proposed for Staff Nurses of Balasore & Gajapati districts as Subcutaneous ANTRA is Piloted in these districts. Proposal 2025-26: Already proposed in 2024-25 no new proposal proposed this year.
45.6	Printing under ANTARA					-		-	Ongoing Activity
45.6.1	Printing of MPA cards	Per Card	10	0.00	0	-	0	0.00	Proposal is for 2024-25 & 2025-26: Proposal-1: MPA Card Printing of MPA cards @Rs.10/- per card x 200000 cards = Rs.20.00 lakhs
45.6.2	MPA register	Per Register	250	0.00	0	-	0	0.00	Proposal-2: MPA register Printing of MPA Register: Rs.250/- per register X 2000 = Rs.5.00 lakhs
46	MPV(Mission Parivar Vikas)					0.00		0.00	
46.1	Procurement & supply of Nayi Pehl Kit	Per kit	200	0.00		0.00		0.00	Budget Shifted to SL No. 51.4, State specific Initiatives and Innovations as per Recommendation of NPCC

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
46.2	ASHA Incentives for distribution of Nayi Pehl Kit	Per Beneficiary	100	0.00		-		0.00	<b>Budget Shifted to SL No. 51.5, State specific Initiatives and Innovations as per Recommendation of NPCC</b>	
46.3	ASHA incentive for updation of EC survey before each MPV campaign			-		-		0.00	ASHA Incentive for updation of Village Register has been provisioned under ASHA CPRC head . Hence , not proposed	
46.4	Other activities under Mission Parivar Vikas : Demand Generation (Saarhi, Saas Bahu Sammelan, Creating enabling environment)	Per Meeting	1600	0.02		-		0.00	<b>Proposal 1: for 2024-25 &amp; 2025-26: Saas Bahu Sammelan (Ongoing activity)</b> The activity will be taken up on half yearly basis at functional SC HWCs (5400) in 2024-26 <b>Budget: @Rs. 1600/- per Sammelan (Rs. 500/- for organizing Sammelan + Rs. 1000/- as token gift + Rs. 100 for ASHA incentive) x 5400 SC HWCs x 2 times= Rs. 172.80 Lakhs</b> <b>Proposal 2: Mobilisation campaign through IEC Van - dropped</b>	
47	<b>FPIS</b>					<b>0.00</b>		<b>0.00</b>		
47.1	Family Planning Indemnity Scheme	Per Case	50	0.00	0	-	0	0.00	<b>Ongoing Activity</b> 2022-23 FPIS Failure =402 , Death = 4 , Complication = 0, Expected cases = 450 failure * 60000=2.7 crores, death = 4*4.00 Lac=16.00 Lacs, Complication = 50000*5 = 2.5 Lacs Total number of expected sterilization cases in 2024-25 & 2025-26: 120000 & 125000 <b>Budget Proposed for 2024-25: @Rs.50/- per case X 90000 cases = Rs.45.00 lakhs</b> <b>Budget Proposed for 2025-26: @Rs.50/- per case X 90000 cases = Rs.45.00 lakhs</b> <b>Budget Revised as per Recommendation of NPCC</b>	
47.2	Printing under FPIS			-		-		0.00	Proposal: Printing of FPIS manual Already available, hence, not Proposed	
48	<b>FPLMIS</b>					<b>1.25</b>		<b>0.25</b>		
48.1	<b>FP-LMIS training</b>			0.00		<b>1.25</b>		<b>0.25</b>		
48.1.1	State level orientation / training	30/per batch	85000	0.85	0	-	0	0.00	Proposal: One day State level orientation of DVLMs, System In Charge,& Pharmacist on FP LMIS. State load 92. Target for the year 2024-25: 92 person (3 batches @30/batch). Target for the year 2025-26: 92 person (3 batches @30/batch).	
48.1.2	District level orientation / training	30/per batch	25000	0.25	1	0.25	1	0.25	Proposal: One day district level orientation to BPM,BDM & Block pharmacist on FPLMIS State load: 1236. (R+U) Target for the year 2024-25: 1236 person (45 batches @30/batch) Target for the year 2025-26: 1236 person (45 batches @30/batch)	
48.1.3	District level refresher Training	30/per batch	25000	0.25	4	1.00		0.00	<b>Proposal for 2024-25: One day district level refresher Training on FP LMIS for MPH W F &amp; PHC Pharmacist</b> Batch Size: 30 Total Batches: 300	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
48.1.4	Block level training	30/per batch	13185	0.13		-	0	0.00	Proposal: One day block level refresher training of ASHAs on FPLMIS, @2 Batch per Block Target for the year 2024-25: Not proposed this year Target for the year 2025-26: 628 batches proposed (@40/batch)
48.1.5	One day block level review Meeting	40/per batch	12600	0.13		-	0	0.00	Proposal: One day block level review Meeting of all ASHAs on FPLMIS, @2 Batch per Block Target for the year 2024-25: Not proposed this year Target for the year 2025-26: 628 batches proposed (@40/batch)
48.2	Printing of FPLMIS Manual	Per booklet	300	0.00		-		0.00	Printed & supplied in 2022-24. Not Proposed this year
49	<b>World Population Day</b>					0.00		0.00	
49.1	<b>IEC &amp; promotional activities for World Population Day celebration</b>	Lumpsum		0.00		0.00		0.00	<b>Ongoing Activity</b>
49.1.1	At State level	Lumpsum	300000	3.00	0	-	0	0.00	Additional budget proposed for felicitation of good performing providers, districts and facilities along with State level observation ceremony.
49.1.2	<b>At District level</b>								
49.1.2.1	District level function and documentation	Per dist	20000	0.20	0	-	0	0.00	Budget proposed for 30 district & 5 Municipal Corporation Cities
49.1.2.2	Publicity through IEC Van	Per block	20000	0.20	0	-	0	0.00	Budget proposed for @Rs. 20000/-for 314 Blocks & @Rs.60000/- per MC for 5 Municipal Corporation Cities
49.1.2.3	Hoardings, Posters and leaflets	Per block	10000	0.10	0	-	0	0.00	Budget proposed for @Rs. 10000/-for 314 Blocks & @Rs.30000/- per MC for 5 Municipal Corporation Cities
49.1.3	<b>At Block level</b>							0.00	
49.1.3.1	Block level function	Per block	3000	0.03		-		0.00	
49.2	<b>IEC &amp; promotional activities for Vasectomy Fortnight celebration</b>			0.00		0.00		0.00	<b>Ongoing Activity</b>
49.2.1	At State level	Lumpsum	200000	2.00	0	-	0	0.00	
49.2.2	<b>At District level</b>							0.00	
49.2.2.1	District level function and documentation	Per dist	15000	0.15	0	-	0	0.00	Budget proposed for 30 district & 5 Municipal Corporation Cities
49.2.2.2	Miking	Per block	10500	0.11	0	-	0	0.00	Budget proposed for @Rs. 10500/-for 314 Blocks & @Rs.31500/- per MC for 5 Municipal Corporation Cities Budget Breakup: Rs.1500/- per day for 7 days
49.2.2.3	Posters and leaflets	Per block	5000	0.05	0	-	0	0.00	Budget proposed for @Rs. 5000/-for 314 Blocks & @Rs.15000/- per MC for 5 Municipal Corporation Cities
50	<b>Other Family Planning Components</b>					0.00		0.00	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
50.1	Provisioning of Self Help Kit	Per Box	2000	0.02	0	-	0	0.00	<p><b>New Activity</b></p> <p><b>Background</b> Client privacy is a major concern while providing reproductive health services. In this regard GoI has suggested installation of self help kit boxes in health facilities. These boxes will contain ECP, Chhaya and Condoms. Interested clients can collect the commodities as required from the boxes installed at the health facility themselves and at the same time maintaining anonymity.</p> <p><b>Proposal</b></p> <p>Budget for 2024-25: Rs.2000/- per box X 446 (32 DHH + 32 SDH + 382 CHC/UHC) facilities</p> <p>Budget for 2025-26: Rs.2000/- per box X 1412 (1296 PHC/OH + 116 UPHC) facilities</p>
50.2	Mobilisation of Surgeons (Public/Private) for providing FDS	Per District	50000	0.50	0	-	0	0.00	<p><b>Ongoing Activity</b></p> <p>Mobilization of Surgeons (Public/Private) for providing FDS (Reimbursement will be done as per society norms) @Rs.50000/- per district x 30 district = Rs.15.00 lakhs</p> <p>Expenditure incurred in 2022-23 - Rs.10.38 lakhs</p>
50.3	POL provision for transporting contraceptive commodities from State to district	Lumpsum	400000	4.00	0	-	0	0.00	<p><b>Ongoing Activity</b></p> <p>POL &amp; Loading Unloading provision for transporting contraceptive commodities from State to district- Supply chain management from state warehouse to district level will be ensured through this funding - Rs.4.00 lakhs (As per last years approval)</p> <p>Expenditure incurred in 2022-23 - Rs.2.27 lakhs</p>
50.4	POL provision for transporting contraceptive commodities from District to Blocks	Per block	8000	0.08	0	-	0	0.00	<p><b>Ongoing Activity</b></p> <p>POL &amp; Loading &amp; Unloading provision for transporting contraceptive commodities from District to Blocks &amp; Block to Sub Centre - Supply chain management from state warehouse to district level will be ensured through this funding. Approx. cost for transportation from district to block = Rs.8000/-, Expected number of trips from district to block per year = 8 times.</p> <p>Total Requirement : Rs.8000 per annum per block x 314 Blocks = <b>Rs.25.12 lakhs</b></p> <p><b>Approx. (budgeted 79.6% )</b></p> <p>Expenditure incurred in 2022-23 - Rs.5.00 lakhs</p>
50.5	Delivery of FP contraceptives to districts by India Post	Lumpsum	400000	4.00	0	-	0	0.00	<p><b>Ongoing Activity</b></p> <p>Delivery of FP contraceptives to districts by India Post - Rs.4.00 lakhs for transportation of small quantities of commodities by parcel/courier services &amp; for emergency purposes</p> <p>Expenditure incurred in 2022-23 - Rs.4.00 lakhs</p>
50.6	Incentive for FP Services								-

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
50.6.1	ASHA incentive under ESB scheme for promoting spacing of births	Per ASHA	500	0.01	0	-	0	0.00	<b>Ongoing Activity</b> <b>Proposal for 2024-25 &amp; 2025-26:</b> 1. ASHA incentive under ESB scheme for delaying of first pregnancy after marriage (2years) <b>Budget:</b> 36031 cases X Rs.500/- 2. ASHA incentive under ESB scheme for promoting spacing of births between 2 children (3 years) <b>Budget:</b> 54393 cases X Rs.500/- <b>Budgeted 70% looking into expenditure trend.</b>
50.6.2	ASHA Incentive under ESB scheme for promoting adoption of limiting method up to two children	Per ASHA	1000	0.01	0	-	0	0.00	Target for 2024-25 & 2025-26: 34949 <b>Ongoing Activity</b> <b>Budgeted 70% looking into expenditure trend.</b>
50.6.3	ASHA Incentive for Preparation of due list of Eligible Couples for updation of RCH register on monthly basis.	Per ASHA p.m	300	0.00		-		0.00	<b>Budget Dropped as the same is proposed under HSS-3 Community Engagement Sl. No. 159.8</b> Budget Proposed for 2024-25 & 2025-26: @Rs.300/- per ASHA X 49990 ASHA X 12 months =Rs.1799.64 Lakhs Budgeted 70% looking into expenditure trend.
50.6.4	ASHA incentive for Supporting ANM in updating RCH register, maintaining due list for different beneficiary and EC Register	Per ASHA p.m		-		-		-	<b>Ongoing Activity- Part of Routine and recurring Activities</b> ASHAs are facilitating in ensuring records & providing data as required for RCH updation on regular basis. Deliverable - Provide data and assist ANM to update RCH Register.
50.6.5	Orientation/review of ASHAs (as applicable) for New Contraceptives, Post partum and post abortion Family Planning, Scheme for home delivery of contraceptives (HDC), Ensuring spacing at birth (ESB {wherever applicable}), Pregnancy Testing Kits (PTK)	Per Batch	10000	0.10		-		-	Budget not proposed
50.7	<b>Procurement of bio-medical and other equipment: FP</b>								<b>Not proposed</b>
50.8	<b>Family Planning Trainings</b>								<b>Not proposed</b>
50.9	<b>IEC/BCC activities</b>					0.00		0.00	<b>IEC for publicity of all components under Family Planning Services</b>
50.9.1	<b>Media Mix of Mid Media/ Mass Media</b>	Lumpsum				0.00		0.00	
50.9.1.1	<b>Mass Media Interventions</b>								<b>Ongoing Activity</b> New FP audio video messages on Newer Contraceptives, Sterilization, Oral Pills, Antara & IUCD, provided by GoI which have been dubbed in Odia will be broadcasted for increasing Family Planning Methods acceptance in the State. Proposed Broadcasting Plan April-May:- Sterilization, Antara June-July;- Antara, Chhaya August-September:- Vasectomy, PPIUCD October-November-- Newer methods, Condom, Mala-N Dec to March - Newer Methods, Antara, Chhaya, Sterilization

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
50.9.1.1.1	Advertisement through DD & local channels or scrolling	Per minute	172000	1.72	0	-	0	-	Timing: 1 minute per day for 12 days per year as per I&PR rates
50.9.1.1.2	Advertisement through AIR channels	Per minute	47000	0.47	0	-	0	-	Timing: 1 minute per day for 6 days in a year as per I&PR rates
50.9.1.1.3	Advertisement through FM Channels	Per 10 minutes	20000	0.20	0	-	0	-	Timing: 10 minutes per day for 24 days per year
50.9.1.1.4	Publicity through Print Media	Per day	100000	1.00	0	-	0	-	Cost proposed as per revised I&PR, GoO norm Print media Advertisement on Newer Contraceptive & use of emergency contraceptive pills to be done through out the year except July (WPD) & November (WVF) One time advertisement of Color Quarter page in 2 newspaper for 12 days
<b>50.9.1.2</b>	<b>Mid Media Interventions</b>								
<b>50.9.1.2.1</b>	<b>District level</b>								
50.9.1.2.1.1	Folk show / street theatre out reach pockets	per show	3000	0.03		-		-	
<b>50.9.1.2.2</b>	<b>Block level</b>			-					
50.9.1.2.2.1	Village meeting involving all male members and PRI Members on advantages of male sterilisation with a model NSV successors		0	-	0	-	0	-	Budget integrated with GKS untied funds
50.9.1.2.2.2	Prize distribution at sector level to successful Male sterilisation acceptors ( in lottery basis)			-	0	-	0	-	
50.9.1.2.2.3	Inter Personal Communication			0.00		0.00		-	Activities integrated with population fortnight and vasectomy fortnights.
50.9.1.2.2.4	Any other IEC/BCC activities (please specify)			0.00		0.00		-	
<b>50.9.2</b>	<b>Other Printing activities under FP</b>					-		-	
50.9.2.1	Reference manual for OCPs			-		-		-	Not Proposed for 2024-25. 500- proposed for 2025-26
50.9.2.2	MEC Wheel			-		-		-	Not Proposed for 2024-25. 500- proposed for 2025-26
50.9.2.3	Printing of Oral Pills Register for CHC and above institution	Per register	120	0.00	0	-	0	-	Proposal for 2024-26: Each 500 registers @ Rs.120/-per register
50.9.2.4	Integrated poster on all FP methods	Per Poster	15	0.00	0	-		-	Poster on Basket of Choice & poster on all FP methods containing brief description of each method has been developed which is planned to be displayed at all
50.9.2.5	Poster on Basket of Choice of FP Methods	Per Poster	8	0.00	0	-		-	facilities up to PHC level. (32 DHHs +33 SDHs + 384 CHC/ UCHCs + 1378 PHCs)
<b>50.9.3</b>	<b>Planning &amp; M&amp;E</b>					<b>0.00</b>		<b>0.00</b>	<b>Budget Shifted to HSS-11, SI No. 194</b>
50.9.2.1	FP QAC meetings (Minimum frequency of QAC meetings as per Supreme court mandate: State level - Biannual meeting; District level - Quarterly)			-					<b>1. State level : Integrated with annual SQAC meeting - @Rs.25000/- per meeting x 1 = Rs.0.25 lakhs Per year</b>  <b>Ongoing activity</b>
50.9.2.1.1	State Level	Per Meeting	25000	0.25	0		0		
50.9.2.1.2	District Level	Per Qtr	1000	0.01					

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
50.9.2.2	FP review meetings (As per Hon'ble SC judgment)	Per Meeting	100000	1.00	0		0		<b>Ongoing activity</b> 1. Exclusive review meeting proposed at State level, which will be attended by ADMO(FW), Dpty. Mng. RCH & Quality Consultant of 30 district level. <b>Budget:</b> @1.00 lakhs per Year
51	<b>State specific Initiatives and Innovations</b>						0.00	0.00	
51.1	<b>Establishment of Training Centre for Laparoscopic Sterilization</b>	Per Center	2000000	20.00			0.00		Not Proposed this year. Currently functional at City Hospital Cuttack, under process at Capital Hospital Bhubaneswar & DHH Koraput
51.2	<b>Establishment of Training Centre for NSV</b>	Lumpsum	966000	9.66	0		0.00		Background: Due to low numbers of NSV and conventional vasectomy providers it is suggested that at new NSV training center be established at SDH Gunupur, Raygada. SDH Gunupur is identified because of availability of master trainers as well as high case load for demonstration and practice purposes. Currently one NSV Training center at CHC Ghatagaon <b>Proposal</b> is for establishment of Training Centre for NSV at CHC Gunupur of Raygada District Total Budget: Rs.9.66 lakhs
51.3	<b>Strengthening Private Sector Engagement</b>	Per Person	1600	0.02					<b>Budget dropped as per recommendation of NPCC</b> <b>Background:</b> Most of the private hospitals in the urban areas provide permanent as well as spacing methods to desirable clients. However, the services are not reported and the existing benefits like compensation and incentives are not being claimed due to lack of coordination. Hence it is being proposed to develop an application dedicated for this which will facilitate the following actions. • Ensure real time reporting of services • Provide one platform for accreditation of private hospitals for sterilization services. • Provide a platform where incentives for the clients as well as hospitals can be settled. <b>Proposal:</b> An application will be developed for the same with support of UNFPA. It is proposed that after development of the application 5 batches of orientations be planned for the private hospitals for capacity building and sensitization. <b>Budget proposed for 2024-25 &amp; 2025-26:</b> @Rs.1600/- X 260 participants ( 2 from
51.4	Procurement & supply of Nayi Pehl Kit	Per kit	250	0.00	0		0.00	0	This gift kit is proposed to provide the newlyweds The kit consists of birth control pills, condoms, a mirror, two towels, handkerchiefs for both husband and wife, bindi, comb, nail cutter, and a glossy dossier educating the newlyweds about the need of it and ways for family planning. About 420000 New Eligible Couples regd. During 2022-23, Budgeted for newly wed couple : 200000 Unit cost revised from Rs.250/- to Rs.200/- as per tender rate. <b>Budget revised as per recommendation of NPCC</b>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
51.5	ASHA Incentives for distribution of Nayi Pehl Kit	Per Beneficiary	100	0.00	0	-	0	-	About 420000 New Eligible Couples regd. during 2022-23, Budgeted for newly wed couple : 200000 <b>Budget revised as per recommendation of NPCC</b>
51.6	ASHA incentive for updation of EC survey before each MPV campaign			-		-			ASHA Incentive for updation of Village Register has been provisioned under ASHA CPRC head . Hence , not proposed
51.7	Other activities under Mission Parivar Vikas : Demand Generation (Saarathi, Saas Bahu Sammellan, Creating enabling environment)	Per Meeting	1600	0.02	0	-	0	-	<b>Proposal 1: for 2024-25 &amp; 2025-26: Saas Bahu Sammellan (Ongoing activity)</b> The activity will be taken up on half yearly basis at functional SC HWCs (5400) in 2024-26 <b>Budget: @Rs. 1500/- per Sammellan (Rs.500/- for organizing Sammellan + Rs. 1000/- as token gift + Rs. 100 for ASHA incentive) x 5400 SC HWCs x 2 times</b> <b>Proposal 2: Mobilisation campaign through IEC Van - dropped</b>
<b>Total Family Planning</b>						<b>4.13</b>		<b>3.80</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**RCH-7**  
**Nutrition**



RCH-7\_Nutrition

S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total Nutrition</b>						14.92		13.06	
52	Anaemia Mukd Bharat					0.00		0.00	There are 6 different age groups who are covered under AMB but funded under different programmes heads are as follows: 6-59 months - Covered under Nutrition component 5-9 years - Covered under Nutrition component 10-19 years - Covered under Adolescent Health 20-24 years WRA (NPML)- Covered under Nutrition component PW & Lactating Mother - Covered under Maternal Health
52.1	Procurement of Drugs			-		-		-	
52.1.1	IFA syrups (with auto dispenser) for children (6-59 months)	Per bottle	7	0.00	0	0.00	0	0.00	<b>Ongoing Activity</b> Drugs Specification: 20 mg elemental Iron & 100 mcg Folic acid with Auto dispensable dropper- 50 ml bottle Level at which the item would be used : SC (AWC) Expected No. of Children (6-60 months) - 3477388 <b>Revised as per NPCC comments:</b> A. Procurement of 4868343 prophylactic iron syrup bottles (70% no. of bottles required as per consumption) for 3477388 children between 6-59 months @Rs 7 per bottle B.Procurement of 86500 therapeutic iron syrup bottles (50% bottles required as per consumption) for 173000 children 6-12 months and 1565694 therapeutic iron syrup bottles (50% bottles required as per coverage) for 1565694 children 13-59 months @Rs 7 per bottle <b>Requirement for Iron Folic Acid Syrup bottles @ 50 ml per bottle -6434037</b> <b>Budget Revised as per recommendation of NPCC</b>
52.1.2	IFA tablets (IFA WIFS Junior tablets- pink sugar coated) for children (5-9 yrs.)	Per tab	0.12	0.00	0	0.00	0	0.00	<b>Ongoing Activity</b> Drugs Specification : 45 mg elemental Iron & 400 mcg Folic acid sugar coated tablet (IFA pink) Level at which the item would be used :School Expected No. of Children from Class-1 to 5 - 2746041 <b>Revised as per NPCC comments:</b> A. Procurement of 114203814 prophylactic pink iron tablets (80% no. of tablets required as per consumption) for 2745284 children between 5-9 years months @Rs 0.12 per tablet B. Procurement of 46120746 therapeutic pink iron tablets (70% no. of tablets required as per consumption) for 1098113 children between 5-9 years (covering 40% of children) @Rs 0.12 per tablet Requirement for IFA (Small, Pink) tablets (Prophylactic + Therapeutic) - 160324560 (Actual cost to be booked as per competitive bidding) <b>Budget Revised as per recommendation of NPCC</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
52.1.3	IFA tablets for non-pregnant & non-lactating women in Reproductive Age (20-49 years)	Per tab	0.12	0.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>                      No. of females aged of 20-24 years = 20,41,585 ( i.e. 49.46% of the total population aged 20-24 years)                      Since the Pregnant women (PW) and Lactating women (LW)in the WRA group (20-24 years) constitute 3.8% and shall be covered under IFA for PW &amp; LW, the WRA group will be include 1964004 may be targeted.                      Drugs Specification : 60mg elemental Iron &amp; 500 mcg Folic acid , sugar coated, (IFA Red)                      The drug (IFA red) would be used: SC                      Requirement for IFA. (Large Red) tablets:                      A. Prophylactic Dose: 1964004 X 52 weeks = 102128231 tablets ( 51064104 tablets proposed looking at the consumption)                      B. Therapeutic Dose: 982002 (50% of 1964005 WRA based on expected consumption) x 90 days X 2tablets per day= 176760399 tablets, 88380180 tablets proposed looking on the consumption)                      As prevalence of anemia in WRA as per NFHS-5 is 64.4%, 50% of the total WRA 20-24 yrs targeted.                      Total tablets: 139444284  <b>Approval 2024-26: @Rs. 0.14/- per tab</b>  <b>Budget Revised as per recommendation of NPCC</b></p>	
52.1.4	IFA tablets for Pregnant & Lactating Mothers	Per tab	0.12	0.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> All pregnant woman will be given 1 tab IFA for 180 days from 2nd trimester and all PNC cases will be given 1 tab of IFA for 180 days after delivery as prophylactic dose . In case of anemic pregnant woman or lactating mother double dose of IFA is provided.  <b>Current Status:</b> 95% of PW and 93% of PNC mothers are provided 180 IFA tabs during pregnancy and PNC period.  <b>Proposal:</b>                      Drugs Specification (Revised in the current year) : 60 mg elemental Iron + 500 mcg Folic Acid                      Level at which the item would be used : SC/ PHC/ CHC/ SDH/ DH                      Total pregnant women - 665678                      Total PNC - 607936  <b>Recommended as per NPCC comments follows:</b>                      1. Procurement of 229250520 red IFA tablets for prophylactic treatment of 1273614 pregnant and lactating women                      2. Procurement of 28916280 IFA tablets for therapeutic management of 160646 anemic pregnant and lactating women @Rs 0.12 per tablet  <b>Budget Shifted from RCH-4 Maternal Health , SL NO. 4.4.1, as per recommendation of NPCC</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
52.1.5	Albendazole Tablets for non-pregnant & non-lactating women in Reproductive Age (20-24 years)	Per tab	1.5	0.00		0.00		0.00	<p><b>Budget Shifted to RCH-7, SI No. 53 as per Recommendation of NPCC</b></p> <p><b>New Activity</b>                      Total Estimated No. of WRA 20-24 yrs: 1964004                      Drugs Specification: Albendazole 400 mg chewable tab                      Requirement: 1374802 nos (i.e. 70% of total WRA 1964004) X 2 rounds= 2749605                      No. of tablets required  <b>Justification:</b> According to recommendation of AMB programme, WRA are to be deformed biannually to reduce anemia. Anemia prevalence of WRA is 64.4% as per NFHS-5 report,</p>	
52.1.6	Albendazole tablets for Pregnant Women	Per tab	1.5	0.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>                      Background: De-worming during pregnancy is implemented in all 30 districts. Training at all levels has been completed.                      All pregnant woman will be given one albendazole during 2nd trimester.                      Current status: During 2022-23, 86.4_% of PW were provided deworming tablet during 2nd trimester  <b>Proposal:</b>                      Drugs Specification : 400 mg , chewable                      Level at which the item would be used : SC                      Total pregnant women - 665678  <b>Provisioned of 1 tablet per PW for all PW (665678)</b>  <b>Budget Revised and shifted from RCH-4 , Maternal Health SI. No.4.4.3 as per recommendation of NPCC</b></p>	
52.1.7	Multivitamin for Pregnant women	Per tab	0.5	0.00		-		0.00	<p><b>Budget Shifted to SI No. 60 (Other Nutrition Components) as per NPCC recommendation)</b></p> <p><b>Background:</b> As per WHO, Micronutrient supplementation is a recommended part of routine antenatal care to overcome complications associated with micronutrient deficiencies during pregnancy, and to support maternal health and fetal development. Hence it is proposed to supplement Multi-Vitamin and Multi-mineral tablets for 3 months (during 2nd trimester- 90 Days) to pregnant women with normal Hb level and for 6 Months (during 2nd and 3rd trimester- 180 Days) to pregnant woman with anaemia.  <b>Total estimated pregnant Woman:-834770</b>                      • 90 tabs for non-anaemic PW i.e. 50% of 834770=417385*90=37564650 Tablets                      • 180 tabs for anaemic cases i.e. 50% of 834770=417385*180=75129300 Tablets                      Total Requirement of tablets: 112693950                      Unit cost per multivitamin tablets:-Rs.0.50  <b>Met out of State budget</b></p>	
52.2	Equipment/ instruments & consumables for Anaemia Mukh Bharat			-		-		0.00	For Test for Hemoglobin, budget proposed under 15th FC Treatment under procurement head under NHM PIP	
52.3	<b>Training &amp; Capacity Building</b>									

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
52.3.1	One day District level Refresher training on AMB/Anaemia control programme	Per batch	35700	0.36	0	0.00		0.00	<p><b>Proposal:</b> Refresher training on AMB/Anaemia control programme. Participants for the training DDM from district &amp; MO I/C, BPMs, BDM, MO- MHT (2per block), CDPOs, BEOs and WEOs. Total participant 2198, Batch Size: 30 Total batches: 84 Unit Cost per batch: @Rs. 35700/- No new proposal for 2025-26</p>	
52.3.2	One day State level Bi-Annual Training on gap analysis of AMB/aneamia control Programme	Per batch/30	70000	0.70	0	0.00	0	0.00	<p>Proposal: Bi-Annual Training on gap analysis of AMB/anemia control Programme Participants per batch from 5 Districts: ADPHO(FW), DMRCH, RBSK Manager, DSWO, DEO, DWO (@ 6 persons per district) Total Participants: 6 per son per district X 30 districts= 180 participants Batch Size: 30 Total Batch: 12 (Bi Annual 6 batches) Unit Cost per batch: @Rs.70000/-</p>	
52.4	Printing of compliance cards and reporting formats for National Iron Plus Initiative	Per Card		-		-		0.00	<p>1.Compliance of 6 to 59 months children, Pregnant women, Lactating mother is included in MCP card. 2.Follow up card for 5 to 9 years children, Adolescent 10-19 years (both in school &amp; out of school) &amp; WRA 20-24 years - met out of State budget</p>	
52.5	National Iron Plus Initiative for mobilizing children and/or ensuring compliance and reporting			-		-		0.00	<p>Provision of incentive is in State specific scheme - AMLAN (Anemia Mukh Lakhsya AbhiyaN) met out of State budget are as follows 1. Incentive to ASHA @Rs.100/- per T3 session at school for mobilising &amp; compliance of IFA for in school children / Adolescent (5-9 years &amp; 10-19 years) 2.Incetive to ASHA @Rs.100/- per T3 session at VHSND to mobilise &amp; compliance of IFA for 6-59 months children, WRA (20-24 years), PW &amp; lactating mother</p>	
53	<b>National Deworming Day</b>					0.00		0.00	<p><b>There are 3 different age groups who are covered under NDD but funded from under different programme heads are as follows:</b> 1-5 years - Covered under Nutrition component 6-9 years - Covered under Nutrition component 10-19 years - Covered underAdoloscent Health</p>	
53.1	<b>Procurement of Drugs</b>			-		-		0.00		
53.1.1	Albendazole Suspention for children (1-5 years)	Per Bottle	3.5	0.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b> <b>Budget Revised as per recommendation of NPCC</b> Drugs Specification: Albendazole Suspension 10 ml bottle; Each 5ml contains 200 mg Level at which the item would be used : AWC &amp; play schools Estimated no of beneficiaries (1-5 years): 3294630 Estimated no of beneficiaries (1-2 years): 850575 (Half bottle per child 5ml) Estimated no of beneficiaries (2-5 years): 2444055 (One bottle per child) Total Requirement: 425288 (i.e. 50% of 850575) + 2444055 X 2 rounds = 5738686 per normative calculation <b>Approved 71%</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
53.1.2	Albendazole Tablets for children (5-9 yrs.)	Per tab	1.5	0.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Budget Revised as per recommendation of NPCC</b>                      Drugs Specification :Albendazole 400 mg chewable tab.                      Level at which the item would be used :School &amp; AWC                      Estimated no of beneficiaries (5-9 years) = 2745284 , For 2 rounds Total No. of tablets required = 5490568 as per normative calculation  <b>Approved 71%</b></p>	
	Albendazole Tablets under WIFS (10-19 yrs.)	Per tab	1.50	0.00	0	0.00	0	0.00	<p><b>Budget Shifted from RCH-5_Adolescent Health SI No. 36.2 as per recommendation of NPCC</b>  <b>Ongoing activity- NDD:</b>                      Drugs Specification :Albendazole 400 mg chewable tab.                      Level at which the item would be used :School &amp; AWC                      Estimated no of beneficiaries (10-19 years) = 6482035                      For 2 rounds total No. of tablets required +10 % buffer=18513871 as per normative calculation                      Details calculation at write up Annexure  <b>Approved 71%</b></p>	
52.1.4	Albendazole Tablets for non-pregnant & non-lactating women in Reproductive Age (20-24 years)	Per tab	1.5	0.00	0	0.00	0	0.00	<p><b>Budget Shifted from RCH-7, SI No. 52 as per Recommendation of NPCC</b>  <b>New Activity</b>                      Total Estimated No. of WRA 20-24 yrs: 1964004                      Drugs Specification: Albendazole 400 mg chewable tab                      Requirement: 1374802 nos (i.e. 70% of total WRA 1964004) X 2 rounds= 2749605                      No. of tablets required  <b>Justification:</b> According to recommendation of AMB programme, WRA are to be deformed biannually to reduce anemia. Anemia prevalence of WRA is 64.4% as per NFHS-5 report  <b>Approved 71%</b></p>	
53.2	Orientation on National Deworming Day	Per Batch	3000	0.03	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Budget Revised as per recommendation of NPCC</b>                      Half day block level orientation of 2643 batches of teachers+ANMs+Supervisors across 30 districts for 2 rounds of NDD @Rs 3000 per batch of 30 participants per NDD round                      Budget provision of Rs. 100/- participants to meet towards travel &amp; incidental cost.</p>	
53.3	IEC/BCC								<p><b>Ongoing Activity</b></p>	
53.3.1	State Level	Lumpsum per round	200000	2.00	0	0.00	0	0.00	<p><b>Activities:</b>  <b>Budget Revised as per recommendation of NPCC</b>                      Printing in leading news dailies - quarter page @Rs.1.00 lakhs x 2 news paper for 2 rounds = Rs.4.0 lakhs</p>	
53.3.2	District/Block Level	Per Block	1000	0.01	0	0.00	0	0.00	<p>For Block Level @ Rs. 1000/- per block x 314 x 2= Rs. 6.28 Lakhs - for mid media activities in 2 rounds</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
53.4	Printing of IEC materials and reporting formats etc. for National Deworming Day	Per District	0	-	1	-	1	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b> As per the F.Y. 2022-24 Rs.100000/- per District and Rs. 100000/- per Municipal corporation approved. However, As the number of blocks per District varies the amount is irrationally placed . So budget proposed as per block available in the districts.  <b>Cost recommended by NPCC:</b> Rs.120000/- per dist x 30 districts x 2 rounds= Rs. 72.00 Lakhs  <b>Budget proposed:</b> 314 block X Rs.10000/- + 5 MC X Rs.92000/- X 2 rounds</p>
53.5	Incentive for National Deworming Day for mobilising out of school children	Per ASHA/ per round	100	0.00	0	-	0	0.00	<p><b>Ongoing Activity:</b>                      Provision is proposed for ASHAs (49149), they will be paid incentive @ Rs 100 per round                      Assignment:                      ASHA will mobilize all out of school (6-19 years) and non enrolled children at AWC (1-6 years) for observed dose at AWC  <b>Amount of incentive:</b> Rs. 100/- per ASHA x 49990 ASHAs (Rural + Urban) x 2 rounds                      Budgeted 80% looking into expenditure trend</p>
54	<b>Nutritional Rehabilitation Centers (NRC)</b>						11.49	9.63	<p><b>There are 67 functional NRCs with bed occupancy rate of 83% &amp; discharge rate of 94%</b></p>
	<b>Operating expenses for NRCs</b>								<p><b>Ongoing Activity:</b> Unit cost revised as per Gol guideline (Mother's diet cost increased from Rs.85/- to Rs.110/-)  <b>Background:</b> 67 NRCs are functional (Out of which 65 are 10 bedded NRC &amp; 2 are 15 bedded NRCs)  <b>Proposal:</b>                      1. Continuation of 61 10 bedded NRC + 2 new (Justification attached in write-up annexure)                      2.Continuation of 2 15 bedded NRCs + 4 new (Justification attached in write-up annexure)  <b>The detailed Operational Expenses attached at NRC Recurring Cost Annexure Budgeted 78% looking into expenditure trend &amp; 6 new NRCs functional may take at least 6 month times.</b>  <b>Approved rate by Gol for 2024-26</b>                      For 10 Bedded NRC: Rs. 10.40 lakhs per NRC                      For 15 bedded NRC: Rs. 16.65 lakhs per NRC</p>
54.1	Operating expenses for 10 bedded NRCs	Per NRC	1020000	10.20	1	10.20	1	9.34	
	Operating expenses for 15 bedded NRCs	Per NRC	1545000	15.45	0	-	0	-	
54.2	<b>Non-recurring &amp; Maintenance cost for NRCs</b>								<p><b>Proposal 1:</b> As the maintenance of equipments like digital weighing machine and other anthropometric measurement tools, TV, Computer &amp; printer and kitchen equipments are not covered under comprehensive bio-medical equipment maintenance programme, recurring cost @Rs. 100000/- is proposed per NRC, which are functional more than 5 years (No. Of NRC targeted 60) = Rs.1.00 lakhs x 60 NRCs  <b>Proposal 2:</b> Establishment cost of 2 NRCs @Rs.11.40 lakhs per NRC (Rs.10,00,000</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	Maintanance cost for olf NRCs (more than 5 years )	Per NRC	100000	1.00	1	1.00			for renovation (discussed and recommended in NPCC) + Rs.1,40,000 for equipment & instrument)
	Establishment cost for New NRCs	Per NRC	1140000	11.40	0	-			<b>Budget Revised as per recommendation of NPCC</b> <b>No proposal for 2025-26</b>
54.3	<b>Training &amp; Capacity Building</b>								
54.3.1	Two days NRC management training for NRC Medical Officers at State level.	35/ batch	112000	1.12	0	-	0		- 1 batch each year due to transfer & promotion of MOs
54.3.2	Three days training for NRC Staff Nurses and ANM and NRC counselors cum Medical Social worker at State level (including refreshers)	35/ batch	180000	1.80	0	-	0		- 1 batch each year due to transfer & promotion of MPHWS (F) & new posting of NCS / Poor performing of NCS
54.3.3	Half yearly one day State level Review MO, NCS, DMRCH, HMs	35/ batch	87500	0.88	0	-	0		State Load: 231 of 67 NRCs Target 2024-26: 6 batches each year
54.4	<b>IEC/ BCC</b>								
54.4.1	GP level wall painting on mobilization of SAM identification and the services provided for their management	Per GP	1000	0.01		-			- To be met out of VHSNC Unities fund
54.5	Incentive for referral of SAM cases to NRC and for follow up of discharge SAM children from NRCs	Per NRC discharged child	300	0.00	95	0.29	95	0.29	<b>Ongoing Activity</b> <b>Proposal for 2024-26:</b> Estimated admission at NRC in 2022-23: 12780 Total Discharge from NRC 2022-23: 11979 Of which 75% of estimated discharge from NRCs during 2022-23 to be follow-up by ASHA = 75% x 11979 = 8984 <b>Budget: @Rs.300/- per child for referral &amp; follow-ups will be given to ASHA</b>
54.5	Annual review meeting of NRC staffs (NC/MO/DMRCH/HM)	35 Per batch	72700	0.73		-			<b>Dropped as per recommendation of NPCC</b> Proposal for Annual review meeting of NRC staffs (NC-67/MO-67/DMRCH-30/HM-67) in each review meeting 6 batches will be held to cover all 67 NRCs in the state. Hence 6 batch of NRC review meeting will be conducted in a year. Total Batch: 6
55	<b>Vitamin A Supplementation</b>					0.00		0.00	
55.1	Procurement of Vitamin A syrup	Per Bottle (50ml)	30	0.00	0	0.00	0		<b>Ongoing activity with revised unit cost (Unit cost revised as per latest tender rate)</b> Drug Specification :100000IU/ml Vitamin A pediatric oral solution, Level at which it will be used: SC & Session Site, To be utilized in Vit-A supplementation campaign & RI session. Expected children below 5 years: 3210650 - Expected child 9 month to 1 year: 234822 (1 bottle consume 50 child) Expected child 1 to 9 years: 2975828 (1 bottle consume 25 child) Total Requirement: 234822/ 50 + 2975828/25 + 15% buffer= 142695 Estimated Vitamin A solution bottle required= 142695 (including 15% buffer) as per normative calculation <b>Funds kept at State Level</b> <b>Budget Revised as per recommendation of NPCC</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
55.2	Orientation activities on vitamin A supplementation and Anaemia Mukta Bharat Programme			0.00		0.00		- To be taken up in Virtual Mode	
55.3	Printing for Micronutrient Supplementation Programme including IEC materials, reporting formats, guidelines / training materials etc. (For AMB and Vitamin A supplementation programmes)	Lumpsum	0	-	1	-	1	<b>Ongoing Activity</b> Printing of forms & Formats and IEC material will be done as per GoI guidelines. District will be released fund based on the population norms. <b>Budget Revised as per recommendation of NPCC</b>	
<b>56</b>	<b>Mother's Absolute Affection (MAA)</b>					-			
56.1	ASHA incentive under MAA programme @ Rs 100 per ASHA for quarterly mother's meeting			-		-		- No additional Incentive proposed . Mothers are sensitized at VHND Sessions .	
56.2	<b>Training &amp; Capacity Building</b>								
56.2.1	One day State level Orientation for the Baby friendly Hospital Initiative assessors	Per Batch	72700	0.73		-		<b>Dropped As per recommendation of NPCC</b> Proposal is for Capacity Building of Assessors on BFHI assessment, one day State level Orientation for the Baby friendly Hospital Initiative assessors is proposed. - BFHI assessors: 30; 2 RP from State & 2 National RP to be imparted orientation 1 batch in State level@Rs.120000/- Budget for -2024-25= Rs. 120000/- No proposal for 2025-26	
56.2.2	One day sensitisation to new ASHAs, AWWs & ANMs on breastfeeding	Per Batch	33400	0.33	0	-		Ongoing Activity Batch Size: 40 - Level of Training: Block Level No proposal for 2025-26 <b>Budget Revised as per recommendation of NPCC</b>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
56.3	Baby friendly Hospital Initiative	Per institution	10000	0.10	0	-	0	<p><b>Ongoing Activity</b>  <b>Background:</b> Baby-friendly Hospital Initiative serves as the standard for measuring adherence to each of the Ten Steps for Successful Breastfeeding and prohibits Marketing of Infant milk Substitutes. Promotion of optimal infant and young child feeding (YCF) practices is an important intervention for preventing under nutrition in children and also improving child survival as well as development. Breastfeeding within an hour of birth could prevent 20 per cent of newborn Deaths and 13% of under five Deaths. Babies, who are exclusively breastfed in the first six months of age, are 11 times less likely to die from diarrhoea and 15 times less likely to die from pneumonia, which are the two leading causes of death in children under-five years of age.  <b>Progress:</b> As 32 DHHs are covered under BFHI, it may be scaled up to SDH in 2024-25 and FRU in 2025-26  <b>Proposed Target:</b> 10 SDH will be awarded for BFHI in 2024-25 &amp; 20 FRU will be awarded for BFHI in 2025-26                      Budget Proposed: Award money @ Rs.10000/- per institution, which may be utilised to promote, protect and support breastfeeding.                      Budget for -2024-25= Rs. 100000/-                      Budget for -2025-26= Rs. 200000/-</p>	
56.4	TA & DA for assessors for BFHI assessment	Lumpsum	544000	5.44		-		<p><b>Dropped As per recommendation of NPCC</b>  <b>New Activity</b>  <b>Background:</b> Travel of Mentors for assessment (Total of 30 person @ 3 days annually for BFHI assessment)- Travel cost as per actual  <b>Assessment Cost to Accessory:</b>  <b>Proposal is for 2024-25:</b> Assessment cost for 30 members  <b>Budget proposed for 2024-25:</b> Assessment Fee Per Assessor Rs.2000/- X 32 SDH= Rs.64000/-  <b>Proposal is for 2025-26:</b> Assessment Fee Per Assessor as per Society norm <b>Budget proposed for 2025-26:</b> Assessment Fee Per Assessor @Rs.2000/- X 60 FRU=Rs.120000/-  <b>Accommodation Cost to Accessory:</b>  <b>Proposal is for 2024-25:</b> Accommodation to Assessors  <b>Budget Proposed for 2024-25:</b> Accommodation approx Rs.7500/- X 64 (32 SDH*2 Members)= Rs.480000/-  <b>Proposal is for 2025-26:</b> Accommodation to Assessors  <b>Budget Proposed for 2025-26:</b> Accommodation approx 7500 X 60 FRU (60 fru*2 Members 120)= Rs.900000/-</p>	
56.5	IEC/ BCC								
56.5.1	Breast Feeding Week								

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
56.5.1.1	State Level	Lumpsum	200000	2.00	0	-	0	-	Background: World Breastfeeding Week (WBW) is an annual event which is held every year from 1st to 7th August with the goal to promote, protect and support breastfeeding and fostering growth and development of children. To observe the week at State level various activities like felicitation of best performing Districts on IYCF practices, Awarding 10 best performing BFHI institutions, conducting healthy baby show and other activities as per GOI guidance note Rs. 200000/- proposed	
56.5.1.2	District Level	Per District	15000	0.15	0	-	0	-		
56.5.1.3	Mass Media Activities on MMA	Lumpsum		-	0	-	0	-	<b>New Activity</b> Proposal for 2024-25 as discussed in- Orientation on HMIS indicators on Nutrition from 14th & 15th Sept 2023 at New Delhi 1. Poster at AWCs on MAA Programme: 2. Fabric banner at SCs: <b>Budget Revised as per recommendation of NPCC</b>	
<b>57</b>	<b>Lactation Management Centers</b>					<b>2.83</b>		<b>2.83</b>		
57.1	<b>Comprehensive Lactation Management Centers (CLMCs)</b>	Per CLMC							<b>Background: CLMC functional at SCB MCH Cuttack &amp; Capital Hospital</b> <b>Proposal is for recurring cost of CLMC at CHB BBSR &amp; SCB MCH Cuttack</b> <b>Non Recurring Cost: Not proposed</b> <b>Recurring Cost:</b> 1. HR for CLMC Proposed at SD HR (HSS) 2.Other Supplies - proposed below	
57.1.1	Non Recurring Cost	Per CLMC	5075000	50.75		-		-	Not proposed. As the Non-recurring cost is already been approved in 2022-24.	
57.1.2	Recurring Cost	Lumpsum	283000	2.83	1	2.83	1	2.83	Recurring cost : @Rs.2.49 lakhs per unit as per Gol norm. However, proposed as per actual requirement submitted by Capital Hospital 1.Capital Hospital - Rs.2.83 lakhs 2.SCB MCH - Rs.2.49 lakhs as per Gol norms <b>Budget Revised as per recommendation of NPCC</b>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
57.2	Lactation Management Unit (LMUs)	Each unit							<p><b>Ongoing Activity</b>  <b>Background:</b> To promote breast feeding practices, for donor human milk collection, storage, processing and dispensing for babies admitted in health facilities and provide lactation support to all mothers at delivery points lactation management centers are proposed at the DHHs with 100 bedded MCH wing at district level.  <b>Progress:</b> 1 out of 19 approved LMUs is functional &amp; rest will be made functional by March'24.  <b>Proposal:</b> Establishment of LMU at 12 new districts where LMU are not available.  <b>Proposed for 2024-25:</b> 6 LMU proposed for 6 DHHs in the year i.e. Angul, Bolangir, Kandhamal, Kendrapada, Sonepur &amp; SVPPGIP Cuttack.  <b>Budget Proposed for 2024-25:</b>                      Non Recurring Cost: 6new proposed for @Rs.9.6 Lakhs per LMU                      Recurring Cost: 19 Existing LMU approved during 2022-24  <b>Proposed for 2025-26:</b> 6 LMU proposed for 6 DHHs in the year i.e. Bhadrak, Jagatsinghpur, Boudh, Deogarh, Sambalpur, RGH Rourkela  <b>Budget Proposed for 2025-26:</b>                      Non Recurring Cost: 6new proposed for @Rs.9.6 Lakhs per LMU                      Recurring Cost: 25 (19 existing + 6 New proposed in 2024-25)</p>
57.2.1	Non Recurring Cost	Per LMU	960000	9.60	0	-	0	-	
57.2.2	Recurring Cost	Per LMU	105000	1.05	0	-	0	-	
57.3	Two days State level Training to Staff Nurse and Mos	Per batch/30	130000	1.30	0	0.00	0	-	<p>Proposal: Two days State level Training to Staff Nurse &amp; MOs of LMUs Participant: @2 nos of MO I/C of 18 new LMU &amp; proposed 12 LMU                      Total Participants: 60 participants                      Batch Size: 30                      Total batches: 2 for FY 2024-25 &amp; 1 Batch for 2025-26                      Unit cost per Batch: Rs.130000/-</p>
<b>58</b>	<b>Intensified Diarrhoea Control Fortnight</b>					<b>0.00</b>		<b>0.00</b>	
58.1	Procurement of Drugs (ORS & Zinc)								State supply. Hence no additional budget proposed
58.2	ASHA Incentive for prophylactic distribution of ORS to family with under-five children.	Per ORS Packet	1	0.00	0	-	0	-	<p><b>Ongoing Activity</b>                      Rs.1/- per ORS packet prepositioned in the family of under five children during diarrhoea.                      Proposed for expected U5 population-3481602</p>
58.3	Printing of IEC Materials and monitoring formats	Per unit	18000	0.18	0	-	0	-	In 30 districts and 5 municipal corporations @ Rs.18,000/- per district and MC Proposed as per last year approval
<b>59</b>	<b>Eat Right Campaign</b>								EAT Right tool kit & training already given as per GoI norm in previous years. Refresher training of CHOs will be done in integrated manner. Hence no additional budget proposed.
<b>60</b>	<b>Other Nutrition Components</b>								

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S.No.	Scheme/ Activity	Approval in 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
52.1.5	Multivitamin for Pregnant women	Per tab	0.5	0.00		-		<p><b>Budget Shifted from SI No. 52 (Anaemia Mukht Bharat) as per NPCC recommendation)</b></p> <p><b>Background:</b> As per WHO, Micronutrient supplementation is a recommended part of routine antenatal care to overcome complications associated with micronutrient deficiencies during pregnancy, and to support maternal health and fetal development. Hence it is proposed to supplement Multi-Vitamin an Multi-mineral tablets for 3 months (during 2nd trimester- 90 Days) to pregnant women with normal Hb level and for 6 Months (during 2nd and 3rd trimester- 180 Days) to pregnant woman with anaemia.</p> <p><b>Total estimated pregnant Woman:-834770</b></p> <ul style="list-style-type: none"> <li>• 90 tabs for non-anaemic PW i.e. 50% of 834770=417385*90=37564650 Tablets</li> <li>• 180 tabs for anaemic cases i.e. 50% of 834770=417385*180=75129300 Tablets</li> </ul> <p>Total Requirement of tablets: 112693950 Unit cost per multivitamin tablets:-Rs.0.50</p> <p><b>To be Met out of State budget</b></p>	
<b>61</b>	<b>State specific Initiatives and Innovations</b>					<b>0.60</b>	<b>0.60</b>		
61.1	Drugs for CMAM programme	Per bottle	12	0.00		-		<p><b>New Activity</b></p> <p><b>Background:</b> To manage SAM without medical complication in community, W &amp; CD Dept. Started CMAM programme in our State. Administration of antibiotic syrup and multivitamin syrup is necessary for management of these children. As other drugs like antibiotic, zinc and folic acid are included in EDL, hence, procurement of Multivitamin is proposed for 81950 SAM children (annual case load shared by W&amp;CD Dept.). The SAM child without complication are supplemented with multivitamin for 16 weeks i.e.112days. One 60ml. Bottle of multivitamin supplemented for 12 days/per child so, 9 bottles are required for one child.</p> <p><b>Proposal for 2024-26:</b> Total estimated SAM children without complication – 81950 No. Of bottle required (including 10% buffer)= 81950 * 9 + 10% buffer = 811305 Cost of one bottle =Rs.12/- <b>Budget for -2024-26= 811305 bottles per year @ Rs12/- per unit</b> <b>To be met out of State budget</b></p>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
61.2	COE Nutrition	Per Month	5000	0.05	12	0.60	12	0.60	<p><b>New Activity</b>  <b>Background: CoE Nutrition at Capital Hospital Bhubaneswar</b>                      The Centre of Excellence-Nutrition is established since 10th January 2018 at Shishubhawan, Capital Hospital, Bhubaneswar to serve as a one-stop resource center for child health and nutrition interventions in the state. This is supported by UNICEF. The CoE serves as a one-stop centre for supporting planning, monitoring and knowledge management for all child health and nutrition programmes in the state, including F-SAM, CMAM, RBSK and micronutrient supplementation programmes.  <b>Proposal for 2024-26:</b>                      1.Operational cost for COE Nutrition: @Rs.5000/- Per month for 12 months proposed                      2.Mentoring &amp; Handholding support for SAM management and Anemia Control Programme: <b>Supported by UNICEF</b>                      3.Assessment of Anemia Control Programme on cluster/Districts: <b>Supported by UNICEF</b></p>
<b>Total Nutrition</b>						<b>14.92</b>		<b>13.06</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NDCP-1**  
**IDSP**



NDCP-1\_IDSP

Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total IDSP</b>						4.10		4.13	
63	<b>Implementation of IDSP</b>					4.10		4.13	
63.1	<b>Trainings &amp; Capacity Building</b>					0.00		0.03	
63.1.1	Medical Officers of peripheral health facilities	Per participant	2852.53	0.03	0	0.00	1	0.03	<p><b>Ongoing Activity</b>  <b>Proposal:</b> One-day refresher Training of Medical Officers at district level on IDSP-IHIP  <b>Justification:</b> MOs are need to be oriented on each year on IDSP-IHIP implementation as surveillance is required for emerging &amp; re-emerging diseases coming under different disease control programmes like zoonotic, water &amp; vector borne diseases.                      Batch size: 35, period - 1 day, district level training.                      Total Mos: 1858 MOs from 1412 PHC &amp; UPHCs, 382 CHC &amp; UCHCs, 32 SDH, 32 DHH (one from each facility)                      Unit cost approved as per societal norms.</p>
63.1.2	Medical Officers of Medical Colleges	Per Batch	25000	0.25	0	0.00		0.00	<p><b>Ongoing Activity</b>  <b>Background</b>                      IDSP paper-based weekly reporting is now migrated into real-time data entry in the IDSP-IHIP portal. The goal is to generate and take timely responses to unusual events.  <b>Current Status</b>                      All DHHs, SDHs, CHCs, PHCs, &amp; and SCs are mapped and reported in the IDSP-IHIP portal. However, mapping and data entry from the medical college is yet to be initiated, for which capturing real numbers of events is not possible.  <b>Proposal</b>                      As the faculties of Medicine, Paediatric, Casualty MO, etc. are not being oriented in IDSP-IHIP reporting / other health programmes, so 1 batch of training at their respective MCH by Deptt. of Community Medicine is highly essential. Batch Size - 30, period - 1 day, MCH level training. Proposal for all 11 Govt. MCHs.</p>
63.1.3	Hospital Pharmacists/Nurses Training	Per Batch							One day of training of pharmacists and Nurses is previously completed and the target is achieved. Moreover, MRA is now entering the data in the IDSP-IHIP portal. Hence no budget Proposed.
63.1.4	Lab. Technician	Per batch							Integrated with other program like NVHCP. Hence no budget proposed
63.1.5	Refresher Training of Microbiologist								Integrated with NVHCP Program. Hence no budget proposed.

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Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
63.1.6	Review cum training of Epidemiologist	Per Batch	69200	0.69	0	0.00	0	0.00	<b>Ongoing activity</b> <b>Justification:</b> One day review cum refresher training of Epidemiologist at State level is required to monitor & sensitize of different national programmes. Batch size: 30, period - 1 day, state level training.
63.1.7	Data Managers	Per batch	69200	0.69	0	0.00	0	0.00	<b>Ongoing activity</b> One day State Level Refresher Training of Data Managers on IDSP-IHIP Batch Size - 30, period - 1 day, State level training
63.1.8	One day Sensitization cum Orientation training for Data entry and analysis of Block Health Team (including Block Programme Manager)	Per Batch	32800	0.33	0	0.00		0.00	<b>Ongoing Activity</b> <b>Background</b> IDSP-IHIP real-time data analysis can direct the institution in identifying unusual events and taking prompt action. Block health team can respond to Outbreak timely. <b>Current Status</b> District-level training of block health team is initiated, but not completed in all the proposed districts. Training needs to be saturated among all block health team. <b>Proposal</b> Training will be conducted for IDSP-IHIP of BPM/ BDM/MRA, Pharmacist, PHEO, HQ MPHS 64 batches (Batch Size 35) of training is required to saturate one time training across the State. Unit cost approved as per societal norms.
63.1.9	ASHA & MPWs, AWW & Community volunteers								Integrated in ASHA Module Training. Hence no budget was proposed.
63.1.10	One day sensitization for PRIs			-					Integrated with VHSNC meeting. No additional cost proposed. Not proposed in PIP 2021-22.
63.2	<b>Operational cost of DPHL/IPHL</b>					<b>4.00</b>		<b>4.00</b>	
63.2.1	Non-recurring costs on account of equipment for District Public Health Labs requiring strengthening.			0.00		0.00		0.00	Already been supported from IDSP & PMABHIM.
63.2.2	Recurring Cost of Functional DPHL/IPHL (Recurring costs on account of Consumables, kits, communication, misc. expenses etc. at each district public health lab)	Per DPHL	4,00,000	4.00	1	4.00	1	4.00	<b>Ongoing Activity</b> <b>Background:</b> Total DPHL sanctioned under IDSP - 32. IPHL approved under PM-ABHIM - 30. <b>Proposal:</b> 2 DPHL which has established & made functional at Capital Hospital & RGH Rourkela.
63.2.3	Reference laboratory at MCHs	Per Unit	1,50,000	1.50	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Background:</b> MoU has been signed with 3 govt. MCHs i.e. SCB MCH, MKCG MCH & VSS MCH for functionalisation as State Reference laboratory for outbreak response. Head of Expenses: Expenditure made on account of consumables, operating expenses, office expenses, broadband cost, transport of samples, mobility, miscellaneous etc
63.3	<b>Planning and M&amp;E</b>					<b>0.10</b>		<b>0.10</b>	

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Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
63.3.1	Review Meetings	Per meeting	70000	0.70	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Background:</b> Participants - DPHOs & ADPHOs DC and one among Microbiologist/ Epidemiologist/ Data Manager as per need. Frequency of meeting - Quarterly No of participants in each meeting - 90 Level of meeting - State
63.3.2	Mobility Cost at State level	Per annum	300000	3.00	0	0.00	0	0.00	<b>Ongoing Activity</b> Head of Expenses - Travel Cost, POL, etc. during outbreak investigations and field visits for monitoring programme activities.
63.3.3	Mobility Cost at District level	Per Block/ Per Annum	22930	0.23	0	0.00	0	0.00	<b>Ongoing Activity</b> Head of expenses - The District RRT will move for Disease Surveillance, Onsite Training of CHOs, Hands on Portal Entry, Monitoring & Supervision of CHC/PHC/SC and Outbreak preparedness and response Fund at district level 10 days on a month on day to day hire basis.
63.3.4	Officer expenses Cost at State level	Per SSU	260000	2.60	0	0.00	0	0.00	<b>Ongoing Activity</b> Head of expenses - telephone, fax, Broadband Expenses & Other Miscellaneous Expenditures
63.3.5	Officer expenses at District level	Per DSU	150000	1.50	0	0.00	0	0.00	
63.3.6	Minor repairs and AMC of IT/office equipment supplied under IDSP	Per DSU	10000	0.10	1	0.10	1	0.10	<b>Ongoing Activity</b>
<b>Total IDSP</b>						<b>4.10</b>		<b>4.13</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NDCP-3**  
**NLEP**



NDCP-3\_NLEP\_Odisha

S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
	<b>Total NLEP</b>					7.71		7.41		
69	<b>Case detection and Management</b>					0.83		0.83		
69.1.1	<b>Specific -plan for High Endemic Districts (Block level) LCDC (Leprosy Case Detection Campaign</b>								<p><b>Ongoing Activity:</b>  <b>Background:</b>                      As per Govt. of India National Strategic Plan (2023-27) Guideline LCDC will be conducted two times in a year in Highest &amp; High Priority Blocks having ANCDR &gt; 10 &amp; or G2D % &gt; 2.                      It is proposed to conduct LCDC once in a year and <b>another round LCDC will be merged with integrated Campaign in all the villages support by State Budget</b>                      LCDC will be conducted once in a year in 177 Blocks of 26 districts by 24000 ASHA/FLW.                      LCDC will be conducted once approximately 142 Blocks are expected to be high endemic in 2025-26 which is 20% less than 2024-25 by 19200 ASHA/FLW</p> <p><b>Proposal 2024-25:</b>                      1. Incentive to FLW: 24000 FLW x Rs 1000/ per FLW-                      2. Training to FLW &amp; HW : (24000 + 4800 HW) x Rs. 100 per person                      3. Advocacy / IEC activities during LCDC: 177 Blocks x Rs 4000/- per block                      4. Printing of Reporting Forms: 24000 FLW x Rs 30/- per FLW  <b>5. Monitoring &amp; supervision cost : Rs 32.51 Lakhs (Shifted to HSS-11 SI No-194)</b></p> <p><b>Proposal 2025-26:</b>                      1. Incentive to FLW: 19200 FLW x Rs 1000/ per FLW-                      2. Training to FLW &amp; HW : (19200 + 3840 HW) x Rs. 100 per person                      3. Advocacy / IEC activities during LCDC: 142 Blocks x Rs 4000/- per block                      4. Printing of Reporting Forms: 19200 FLW x Rs 30/- per FLW  <b>5. Monitoring &amp; supervision cost : Rs 26.66 Lakhs (Shifted to HSS-11 SI No-194)</b></p> <p><b>Detail proposal at NDCP-3 NLEP Write-up Annexure</b></p>	
69.1.1.1	Incentive to FLW	Per FLW	1000	0.01	0	0.00	0	0.00		
69.1.1.2	Training to FLW & HW	Per person	100	0.001	0	0.00	0	0.00		
69.1.1.3	Advocacy / IEC activities during LCDC	Per block	4000	0.04	0	0.00	0	0.00		
69.1.1.4	Printing of Reporting Forms	Per FLW	30	0.0003	0	0.00	0	0.00		
69.1.1.5	<b>Monitoring &amp; supervision cost</b>									
69.1.1.5.1	State level	Lumpsum	50000	0.5	0		0			
69.1.1.5.2	District level	Lumpsum	10000	0.1	0		0			
69.1.1.5.3	Block level	Per block	3000	0.03	0		0			
69.1.1.5.4	Mobility support for monitoring & supervision by HW @ 10% of Incentive of ASHA	Lumpsum		0	0		0			

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
69.1.2	<b>Focused Leprosy Mop up campaign in villages where new Grade 2 Disability (G2D) cases or Child cases detected</b>	Lumpsum	1500	0.015	15	0.23	15	0.23	<p><b>Budget Shifted from NDCP-8, Implementation State Specific Initiatives &amp; Innovation SL No. 86.3 as per recommendation of NPCC</b></p> <p><b>Ongoing Activity</b>  <b>Background:</b>                      As per NLEP mandate, the G2D % should be less than 2% among new cases. One of the ways to decrease G2D is early diagnosis of cases and complete treatment so that deformity can be prevented. A focused mop up for cases can be done in areas where G2D cases or child case are reported to find out any missing cases and break the transmission. To achieve the target, Mop up screening round will be conducted in the village population and slum/ peri urban areas where G2D cases are detected and any child case detected.</p> <p><b>Proposal:</b>                      There are 195 G2D cases and 382 (5.3% of total new cases) child detected in our state in the year 2022-23. Approximately 577 (195+382) villages will be covered in the mop up round</p> <p><b>Budget proposed for FY 2024-26</b>                      i. Incentive to ASHA/FLW@ Rs 700/- per case                      ii. Mobility cost to 2nd member (HW/ BNLW/ block staffs) @ Rs 800/- per village</p>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
69.1.3	Suspects examination by MO after Campaign	lumpsum	0	0	2	0.00	2	0.00	<p><b>Budget Shifted from NDCP-8, Implementation State Specific Initiatives &amp; Innovation SL No. 86.3 as per recommendation of NPCC</b></p> <p><b>New Activity:</b>  <b>Background:</b>                      Under Nation Leprosy Eradication Program (NLEP), national and state government has taken steps for early detection of cases by regular leprosy surveillance and campaign mode leprosy case detection. We have case confirmation rate between 4-5% among suspects found by field level workers, Suspects are being lost to follow up due to lack of proper post -campaign tracking, fear factor and inconvenient travel to long distance hospitals. To overcome these operational hindrances during Leprosy Case Detection Campaign, it is proposed to support case confirmation drive at nearest health facility level where a NLEP trained MO is there. This will be apart from district level officials visit during case detection drive.</p> <p><b>Proposal:</b>                      For high endemic Blocks:                      1. Incentive to ASHA for bring the suspects to nearest PHC/CHC for confirmation by MO: Rs 200/- per ASHA x 19200 ASHA (80% of 24000 ASHA)                      2. Incentive to ASHA for bring the suspect for Slit Skin Smear test at SDH/DHH/ Medical Colleges (need higher facility referral): Rs 200/- per case for 2000 cases (in FY 2697 case sent for smear test so approximately 2000 cases budgeted for the campaign))</p> <p><b>Total Proposal for FY 2024-26: @ 2 campaign per year</b></p>
69.2	Incentive for ASHA/AWW/Volunteer/etc for detection of Leprosy (Rs 250 for detection of an early case before onset of any visible deformity, Rs 200 for detection of new case with visible deformity in hands, feet or eye)	Per Case	250	0.0025	78	0.20	78	0.20	<p><b>Ongoing Activity</b>  <b>Background:</b>                      ASHA/AWW/Volunteer/etc will get Incentive for detection of Leprosy cases (Rs 250 for detection of an early case before onset of any visible deformity, Rs 200 for detection of new case with visible deformity in hands, feet or eye)</p> <p><b>Budget proposed for FY 2024-26</b>                      Approx 7000 new case detected per year from which about 62% MB Cases &amp; 32% of PB Cases.                      The Budget proposed for all New Cases detected by ASHA@ Rs. 250/- per case</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
69.3	ASHA Incentive for Treatment completion of PB cases (@ Rs 400)	Per Case	400	0.004	30	0.12	30	0.12	<p><b>Ongoing Activity</b>  <b>Background:</b>                      ASHA has been paid incentive of Rs 400/- after Treatment completion of PB cases.</p> <p><b>Budget proposed for FY 2024-26</b>                      Budget proposed for 2660 PB case (as per previous year data) for follow-up by ASHA to completion of treatment @ Rs. 400/- per case</p>
69.4	ASHA Incentive for Treatment completion of MB cases (@ Rs 600)	Per Case	600	0.006	48	0.29	48	0.29	<p><b>Ongoing Activity</b>  <b>Background:</b> ASHA has been paid incentive of Rs 600/- after treatment completion of MB cases.</p> <p><b>Progress:</b>                      7197 new cases detected in the year 2022-23 from which 4460 was MB cases (62% of new cases) and 2737 (38% of new cases) PB cases. ASHA incentive for Treatment completion of MB cases has been paid Rs 12.65 Lakhs for the year <b>2022-23</b>.</p> <p><b>Budget proposed for FY 2024-25</b>                      Budget proposed for MB cases (as per previous year data) for follow-up by ASHA to completion of treatment @ Rs. 600/- per case</p>
69.5	Equipment	Lumpsum	86900	0.869	0	0.00	0	0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b>                      NLEP mandate is there should be zero backlog of RCS cases. Essential additional instruments &amp; equipments for Reconstructive Surgery (RCS) of deformed persons affected with Leprosy (PALs). These are required for conducting more number of RCS in different districts .</p> <p><b>Progress:</b>                      The RCS Equipment &amp; instruments has been purchased for 11 RCS centres for the Year 2022-23. The RCS centres are Bargarh, Bolangir Boudh, Dhenkanal, Ganjam, Mayurbhanj, Nawarangpur, Nuapada, Sonepur, Sambalpur, Jharsuguda &amp; Leprosy Home &amp; Hospital, Cuttack</p> <p><b>Proposal for 2024-25:</b>                      Proposed for purchase of RCS Instruments &amp; Equipments for the district RCS Centre Angul, Kalahandi, Keonjhar, Koraput &amp; Sundargarh.</p> <p><b>Proposal for 2025-26:</b>                      Proposed for purchase of RCS Instruments &amp; Equipments for the district RCS Centre Bolangir, Puri, Nayagarh, Khordha &amp; Deogarh.</p> <p><b>Detail proposal at NDCP-3 NLEP Write-up Annexure</b></p>
69.6	Supportive drugs, lab. Reagents			0		0.00		0.00	No proposal for FY 24-26. To be met out of State Budget

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
69.7	Any other drugs & supplies (Procurement of Rifampicin, Prednisolone and other NLEP drugs)	Lump Sum	0	0	1	0.00	1	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b>                      Post Exposure Prophylaxis (PEP) with single dose of Rifampicin (SDR) is given to all contacts of all new cases to prevent spread of infection by M. Leprae. Approximately 20-30% of new cases may develop lepra reactions for management of these cases. Prednisolone, Clofazimine &amp; other NLEP drugs required.  <b>Progress:</b>                      During 2022-23, 97950 contacts have been administered Single Dose of Rifampicin (SDR).  <b>Proposal:</b>                      1. Proposed to implement Post Exposure Prophylaxis (PEP) @ Rs 10/- per contact for 1,40,000 contacts of 7000 index cases for procurement of Rifampicine (450 mg / 300 mg/ 100 mg / Syrup)                       If not available in NIRAMAYA</p>
69.8	Focused Leprosy Mop up campaign in villages where new Grade 2 Disability (G2D) cases or Child cases detected	Lumpsum	1500	0.015		0.00		0.00	Ongoing Activity <b>Proposed in SI No. 69.1.2</b>
69.9	<b>Validation of silent villages where no cases detected in last 3 years</b>			0		0.00		0.00	<b>Budget dropped as ABSULS, LCDC &amp; FLC are being conducted in the State.</b>
69.10	Support for implementation of NLEP	Lump Sum		0				0.00	DPMR Clinic at 10 UCHCs Progress  Recurring Cost @ Rs40,000/- per DPMR Clinic for Dressing Material, Medicine, Creams, Globes, Socks etc. Total Budget : (Rs40,000/- x 10) = Rs 4.00 Lakhs Funded through State Budget
70	<b>DPMR Services: Reconstructive surgeries</b>					3.33		3.33	
70.1	Support to govt. institutions for RCS	Per Case	5000	0.05	0	0.00	0	0.00	<p>Ongoing Activity  <b>Background:</b>                      Reconstructive surgery (RCS) of eligible and fit cases are conducted free of cost in all District Head Quarter Hospitals. Provision made for procurement of drugs &amp; consumables which are not available in NIRAMAYA during RCS.  <b>Progress:</b>                      179 Reconstructive surgeries have been conducted in the year 2022-23. 49 Reconstructive Surgeries completed from April 2023 to Aug 2023. There are no backlog of RCS till date in Odisha.  <b>Proposal:</b>                      RCS will be conducted of 55 fit &amp; willing cases for the year 2024-25.  <b>Budget proposed for FY 2024-26 @ Rs 5,000/- per case / Surgeries</b></p>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
70.2	Welfare allowance to patients for RCS	Per Case	13500	0.135	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Background:</b>                      Reconstructive surgery (RCS) of eligible and fit cases are conducted free of cost in all District Head Quarter Hospitals. Rs 12,000/- will be paid as welfare allowance to the patients undergoing RCS in three phases. Rs 1500/- per case will be provided towards Travel cost (To and fro journey) to the person going for Reconstructive Surgery.  <b>Progress:</b>                      Rs 10.38 Lakhs welfare allowance to the patients paid in the Year 2022-23. 179 RCS conducted in the Year 2022-23.  <b>Budget proposed for FY 2024-26</b>                      Proposed cost norm per case: Rs.12000/- (Rs. 8000/- at the time of discharge &amp; Rs. 4000/- at the time of follow up)                      Travel cost to RCS patients: @1500/- per case                      Targeted RCS cases at Govt. institutions:                      Targeted RCS cases at Pvt. (NGO) institutions:</p>
70.3	DPMR: At camps	Per Camp		-		-		0.00	Not Proposed
70.4	MCR	Per Pair	500	0.005	200	1.00	200	1.00	<p><b>Ongoing Activity with revised unit cost</b>  <b>Background:</b>                      MCR Footwear (Grade I &amp; Grade II) will be provided two times in a year to the patients who have ulcers in foot and who need it in weekly DPMR clinic  <b>Progress:</b>                      Rs 19.11 Lakhs has been spent for procurement of MCR footwear in the Year 2022-23.  <b>Budget proposed for FY 2024-26</b>                      The unit cost of the MCR footwear was Rs 400/- per pair which is very difficult to procure. So Rs 500/- per pair (as per market rate) is proposed for procurement of 9000 MCR footwear's per year</p>

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
70.5	Aids/Appliance(Ulcer Kit)	Lumpsum	227500	2.275	1	2.28	1	2.28	<p><b>Ongoing Activity</b>  <b>Background:</b>                      Gol approved Rs 500/- per kit for DPMR like Lymphoedema case under Morbidity Management &amp; Disability Prevention (MMDP) Similar kit (Self Care ulcer kit) instead of ulcer kit is proposed to provide to the leprosy ulcer patients for regular dressing and ulcer care.  <b>Progress:</b>                      Rs 19.27 Lakhs has been booked under this head in FY 2022-23. All the kits purchased in the Year 2022-23.  <b>Proposal:</b>  <b>Provision of self care kit (Ulcer Kit)</b>  <b>A) One time Cost per Year</b>                      1. Plastic Tub (Minimum 30 ltr volume and one ft height)                      2. Plastic Mug (Minimum one ltr capacity)                      3. Cotton towel (Minimum 1.5 ft x 1.5 ft) (two nos)                      Total Non Recurring Cost (approx) Rs.350/-  <b>B) Two times cost per year)</b>                      1. Moisturizing cream / oil (Vaseline) 50gm, Foot Scraper (6 cm x 4 cm scrapping surface) and other drugs if required and not available in NIRAMAYA.                      Total Recurring Cost: (appx): Rs.150/-  <b>Total Ulcer Cases line listed:</b> Approx 5950 as on March 2023                      Budget for 6000 Ulcer cases.  <b>Budget proposed for FY 2024-26</b>                      A. One time Cost per year: Rs. 350/- per case                      B. Two times cost per year: Rs. 150/- per case X 2 times</p>	
70.6	<b>ASHA Incentive for referral for Reconstructive Surgery (RCS) @ Rs 500</b>	Per ASHA	500	0.005	1	0.01	1	0.01	<p><b>Ongoing Activity</b>  <b>Background:</b>                      ASHA counseled the patients having G2D and eligible for RCS and the family members to willing for surgery. So more number of cases undergone RCS.  <b>Progress:</b>                      An amount of Rs. 2.00 Lakhs has been approved in FY 2022-24 for referral of 400 G2D fit cases for RCS. out of which 228 cases operated from April 2022 to August 2023.  <b>Budget proposed for FY 2024-26</b>                      It is proposed to conduct 75 RCS per year @ Rs. 500/- Incentive to ASHA for motivation to fit &amp; eligible G2D cases for Reconstructive Surgery (RCS) and follow-up after RCS.</p>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
70.7	RCS Camp Cost	Per Camp	5000	0.05	0	0.00	0	0.00	<p><b>Ongoing Activity:</b>  <b>Background:</b>                      NLEP mandate is there should be zero backlog of RCS cases. The RCS conducted in camp mode around 4 to 5 cases operated in a camp. TA/DA, accommodation will be provided to the operating surgeon for RCS, the physiotherapist / Asst. accompanying him for assistance.  <b>Progress:</b>                      The State has completed 179 RCS cases (2022-23) in different districts of eligible and willing cases. RCS conducted till Aug 2023 (2023-24) is 49. RCS Surgery will be conducted in Camp mode.  <b>Budget proposed for FY 2024-26</b>                      TA/DA and accommodation cost of RCS Surgeon, assisting person &amp; Miscellaneous expenses and refreshment cost@ Rs 5,000/- per camp.</p>
70.8	Management of existing DPMR clinics at DHH, SDH, CHC level.	Lumpsum	5000	0.05	1	0.05	1	0.05	<p><b>Ongoing Activity:</b>  <b>Background:</b>                      Services like dressing of Ulcer, physiotherapy, medicines, MCR footwear etc. are provided in the DPMR clinics. Rs 5,000/- per year for management of DPMR Clinics in CHC, SDH &amp; DHH like logistics, repair of furniture and display of self care IEC materials etc.  <b>Progress:</b>                      Rs 30.74 Lakhs has been booked under this head in FY 2022-23.  <b>Budget proposed for FY 2024-26</b>                      Budget @ Rs. 5000/- per unit is proposed for 386 institutions (314 Block CHC +33 SDH +32 DHH+ 7 UCHC)</p>
71	District Awards								
72	Other NLEP Components					3.55		3.25	
72.1	Capacity building under NLEP					0.90		0.60	<p>Ongoing Activity  <b>Background:</b>                      Training of trainers conducted at state level &amp; Medical officers at district level so that they can easily detect the leprosy cases and accordingly treatment started. The Block Nodal Leprosy Worker (BNLW) will be trained at district level.  <b>Progress:</b>                      2 batches of Training of trainers at State level in the Year 2022-23 has been conducted . 101 Master trainer of 31 districts trained at state level and imparting training at district &amp; sub district level. This year not proposed..                      2 batches LT training conducted at state level. This year not proposed.                       All the MO training (36 batches per year) and BNLW training (15 batches per year) are conducted at district level</p>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
72.1.1	1 day sensitization/ reorientation meeting of Health Worker at district level	Per Batch	30000	0.30	1	0.30	0	0.00	<b>Proposal:</b> Batch size-30. Training at district level. <b>For 2024-26: @Rs. 30,000/- per Batch</b>
72.1.2	1 day sensitization training of MBBS & AYUSH MO, LNO at district level	Per Batch	30000	0.30	1	0.30	1	0.30	<b>Proposal:</b> Batch size-30. Training at district level. <b>For 2024-26: @Rs. 30,000/- per Batch</b> One batch per district each year except Budh & Deogarh.
72.1.3	1 day sensitization/ reorientation meeting of CHO at district level	Per Batch	30000	0.30	1	0.30	1	0.30	<b>New Activity:</b> <b>Background:</b> Community Health Officers (CHOs) are very important in Primary Health Care. Starting from screening of leprosy cases to follow up of treatment, motivation of G2D cases for RCS, referring lepra reaction cases to higher centres etc. are the responsibilities of the CHOs. So a reorientation training on NLEP (National Leprosy Eradication Programme) to all CHOs in phased manner is very important for successful implementation of programme and achieving the target by 2027 as fixed by Govt. of India. <b>Proposal:</b> Batch size-30. Training at district level. <b>For 2024-26: @Rs. 30,000/- per Batch.</b> One batch per district each year.
72.2	<b>IEC/BCC: Mass media, Outdoor media, Rural media, Advocacy media for NLEP</b>					<b>0.13</b>		<b>0.13</b>	<b>Budget Revised as per recommendation of NPCC</b> <b>Ongoing Activity</b> Rs 98,000/- per district as per CLD norms for 31 districts
72.2.1	<b>Mass Media Intervention</b>								
72.2.1.1	Advertisement through DD & local channels (14 channels) once for 60 sec	per adv	171100	1.71	0	0.00	0	0.00	Timing: 1 minute per day for 6 days per year as per I&PR rates
72.2.1.2	Advertisement in digital 83 cinema halls	per show	40577	0.41		0.00		0.00	
72.2.1.3	Advertisement in FM, VB, Rainbow in 6 channels	per adv	4354.2	0.04	0	0.00	0	0.00	Timing: 10 minutes per day for 17 times per year
72.2.1.4	Publicity through Print Media	per adv	100000	1.0	0	0.00	0	0.00	One time advertisement of Colour Quarter page in 2 newspaper for 5 days
72.2.2	<b>Mid Media Intervention</b>			0					
72.2.2.1	Anti Leprosy Day / SPARSH observation at State Level	Lumpsum	100000	1.00	0	0.00	0	0.00	Day observation at State level
72.2.2.2	Anti Leprosy Day / SPARSH observation at District Level	Lumpsum	10000	0.10	1	0.10	1	0.10	Observation of Anti Leprosy Day: Rs 10,000/- per district and including Bhubaneswar urban for observation of Anti Leprosy Day on 30th January.

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S.No.	Scheme/ Activity	Approval in 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
72.2.2.3	Observation of SPARSH Leprosy Awareness Campaign at Block level	Per block	2700	0.03	1	0.03	1	0.03	314 block & 67 Urban units for conducting Gram/ Ward Sabhas, oath taking and quiz competition in SPARSH fortnight @ Rs 2700/- per Block / urban areas. Oath taking at block & urban areas. Major activities to be done . Messages by District Magistrate to be read by Block Administrator, Appeal from PRI members, Role play, messages on leprosy basing on reduction of stigma etc to be conducted on 30th January every year. Budget: Rs 2700/- per Block/ urban areas x 381 = Rs 10.29 Lakhs per year	
72.2.2.4	Observation of SPARSH Leprosy Awareness Campaign at village level	Lump Sum	350	0.00		0.00		0.00	Oath taking at village level by Gramsabha. Major activities to be done. Messages by District Magistrate to be read by Gram sabha Pramukh, Appeal from Gram sabha Pramukh, PRI members, Role play, messages on leprosy basing on reduction of stigma etc to be conducted on 30th January every year. To be taken up out of GKS/ VHSND fund	
72.3	Any other IEC/BCC activities (please specify)		0	0.00	0	0.20	0	0.20	0	
72.3.1	Printing works	Lumpsum	20000	0.20	1	0.20	1	0.20	<b>Budget Revised as per recommendation of NPCC</b> <b>Ongoing Activity</b> Printing of Master Register, DPMR Register, Patient Treatment Card Any other Register, formats as required by district. Total Budget: Rs 20,000/- per district/ Unit	
72.3.2	NGO - Scheme	Per Scheme	975000	9.75	0	0.00	0	0.00	<b>Ongoing activity</b> Scheme-1 Designated Referral Centres (DRC 1 C) 1. Operational from 2015 -16 at Bargarh for providing services to out patients, in patients and RCS Total RCS done : 181 (from 2015-16 to March 2023)	
72.4	<b>Planning and M&amp;E</b>					<b>2.32</b>		<b>2.32</b>		
72.4.1	NLEP Review Meetings	Per Meeting	100000	1.00	0	-	0	0.00	<b>Ongoing activity</b> Half yearly meeting planned. Participants 60	
72.4.2	Travel expenses - Contractual Staff at State level	Lumpsum	100000	1.00	0	-	0	0.00	Ongoing Activity	
72.4.3	Mobility Support: State Cell	Per Month	35000	0.35	0	-	0	0.00	Ongoing Activity: Rs. 4.20 lakhs has been approved in PIP 2022-24, hence same amount is proposed in 2024-26. <b>Budget: (Monthly vehicle hiring &amp; PoL cost @Rs 35,000/ per month- x 12)</b>	
72.4.4	Travel expenses - Contractual Staff at District level	Per District	25000	0.25	1	0.25	1	0.25	Ongoing activity	
72.4.5	Mobility Support: District Cell	Per District	100000	1.00	0.7	0.70	0.7	0.70	There are no govt. vehicles available in districts they should hire vehicles as per NHM norms.	
72.4.6	Others: travel expenses for regular staff.	Lumpsum	300000	3.00		-		0.00	<b>Budget dropped as per recommendation of NPCC</b>	
72.4.7	Office operation & Maintenance - State Cell	Lumpsum	75000	0.75	0	-	0	0.00	Ongoing activity	
72.4.8	State Cell - Consumables	Lumpsum	50000	0.50	0	-	0	0.00	Ongoing activity	
72.4.9	Office operation & Maintenance - District Cell	Per District	35000	0.35	1	0.35	1	0.35	Ongoing activity	
72.4.10	District Cell - Consumables	Per District	30000	0.30	1	0.30	1	0.30	Ongoing activity	
72.4.11	Office equipment maintenance State	Lumpsum	50000	0.50	0	-	0	0.00	Ongoing activity	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
72.4.12	Mobility Support to BNLW (Block Nodal Leprosy Worker) for urban & rural.	Per BNLW	18000	0.18	5	0.72	5	0.72	<p><b>Ongoing Activity</b></p> <p><b>Background:</b> As there is no dedicated staff for NLEP activities, state has identified one Health worker as Block Nodal Leprosy Worker (BNLW) from the existing work force for NLEP activities for each CHC at Block &amp; urban level. They move around all villages and wards to supervise the NLEP work, dispense MDT (Multi Drug Therapy) and motivate Grade-2 Deformity for Reconstructive Surgery.</p> <p><b>Proposal for FY 2024-25:</b> For strengthening of different activities at field level, mobility support may be provided to the Block Nodal Leprosy Worker both at Rural &amp; Urban areas. The BNLW will conduct at least 15 days visit per month @ Rs 100/- per day for 15 days total of Rs 1,500/- per month Unit Target: 394 (314 Block + 80 Urban Area) <b>Budget proposed: Rs 1,500/- per BNLW x 394 unit x 12 months</b> <b>Budgeted 80% (Rs. 56.74 Lakh) looking into expenditure trend per year</b></p>
						7.71		7.41	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NDCP-4**  
**NTEP**





## NDCP-4\_NTEP

Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NTEP</b>					<b>201.54</b>		<b>204.18</b>	
<b>73</b>	<b>Drug Sensitive TB (DSTB)</b>					<b>48.94</b>		<b>48.42</b>	
73.1	Treatment Supporter Honorarium	No. of TB patients (incl. INH res. TB) on treatment	1000	0.01	2596	20.77	2596	20.77	Total target for TB Notification in 2024-25 & 2025-26 is 65000 (64350 for DSTB + 650 for DRTB) Incentive proposed as per the CTD guideline D. O. No. z-28015/24/2017-TB dated 09-07-2019. Although target is 64350 patients. <b>Budgeted 80%</b>
73.2	Civil Works under NTEP (Refurbishment/ Up gradation)	Lumpsum	0	0	0	0.00	0	0.00	No proposal in 2024-25 & 2025-26
73.3	Procurement of Equipment					0.00		0.00	
73.3.1	Procurement of Office Equipment at STC, SDS, STDC, etc					0.00		0.00	
73.3.1.1	Procurement of desktop/ Laptop	Per unit	100000	1	0	0.00	0	0.00	<b>New Activity</b> Proposal is for equipping central drug store at State level (currently no computer section available). Laptop for DPC and STS to be met out of State budget.
73.3.1.2	Procurement of photocopier cum printer	Per unit	150000	1.5	0	0.00	0	0.00	<b>New Activity</b> Proposal is for State TB cell & ATD &TC, Cuttack
73.4	Equipment Maintenance & Management			0		0.40		0.40	Covered under Comprehensive Bio Medical Equipment Maintenance Programme under NHM. Hence no additional fund proposed
73.4.1	Maintenance & management office equipment at STC, SDS, STDC, DTC etc.					0.40		0.40	<b>Ongoing Activity:</b> <b>Head of expenses:</b> Maintenance of Office Equipment includes: (Repair and maintenance, AMC/CMC, Cartridges for printers, Internet expenses etc)
73.4.1.1	Maintenance of Office Equipment at STC	Per unit/ Per Annum	75000	0.75	0	0.00	0	0.00	<b>1. State Level:</b>
73.4.1.2	Maintenance of Office Equipment STDC,IRL	Per unit/ Per Annum	150000	1.5	0	0.00	0	0.00	<b>1.1.</b> Maintenance of Office Equipment at STC: Rs. 0.75 Lakhs per annum (proposed as approved last year) <b>1.2</b> Maintenance of Office Equipment STDC,IRL: Rs.1.50 lakhs per annum (Amount approved last year Rs. 50,000/-, proposed as per actual expenditure in previous year)
73.4.1.3	Maintenance of Office Equipment at State Drug Store	Per unit/ Per Annum	25000	0.25	0	0.00	0	0.00	<b>1.3</b> Maintenance of Office Equipment at State Drug Store: Rs.0.25 lakhs per annum (proposed as approved last year)
73.4.1.4	Maintenance of Office Equipment of DTC	Per unit/ Per Annum	40000	0.4	1	0.40	1	0.40	<b>2. District Level:</b> Maintenance of Office Equipment of 31 DTC, @ Rs. 40,000/- per DTC per annum x

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Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.5	Procurement of Drugs	Lumpsum	29948000	299.48	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Emergency procurement of drugs in case short supply from GoI</b>  <b>Justification:</b> Justification: There is interrupted supply of the drugs from the Central TB Division (CTD) since last few years. This is hampering patient care. To ensure uninterrupted supply of drugs to all the patients throughout the year and as suggested by CTD, 25% of the annual requirement of the drugs will be procured by the state.  <b>1st line Drugs for DSTB, lumpsum amount: for 2024-26 =Rs.299.48 Lakhs per year</b>  Expenditure : 97.00 % of Budget in the FY 2022-23.  Implementing Agency : OSMCL, Bhubaneswar  <b>Details at NTEP Write-up Annexure 3 -NTEP Drugs</b></p>
73.6	Drug transportation charges (State)	Lumpsum	200000	2.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  1. State to District : Budget proposed for transportation of drugs from State Drug Store (Cost of packaging &amp; transportation etc. included) to District Warehouse and DTA to other States as per instructions from GoI</p>
73.7	Drug transportation charges (District)	Per Unit	4621	0.05	4	0.18	4	0.18	<p><b>Ongoing Activity:</b> Proposed as approved last year  <b>Transportation charges from District Drug Store to periphery level (TUs &amp; PHIs) @ 4,621/- per Annum per unit</b></p>
73.8	Diagnostics, Consumables & Sample Transportation- Consumables/ Lab materials for Districts (DMCs) For Smear Microscopy and Fluorescent Microscopy					6.01		6.01	<p><b>Ongoing Activity</b>  As proposed by State, 50% of total test to be conducted by upfront NAAT &amp; 50% by microscopy  <b>Lab Consumables requirement for DMCs for Smear Microscopy and Fluorescent Microscopy:</b></p>
74.8.1	For Detection of +Ve Case	Per Test	50	0.00	214	0.86	214	0.86	<p>1. Cost towards Lab consumables requirement for DMCs at PHC HWCs level to be met out of 15th Finance Commission funding for Primary Health care Services</p>
74.8.2	For follow up tests	Per Test	50	0.00	2146	5.15	2146	5.15	
73.9	<b>Diagnostics, Consumables &amp; Sample Transportation-</b> Sample collection & transportation charges					2.41		2.41	
73.9.1	Sputum collection and transportation from Non DMC PHIs to DMC or DTC/ DMC/ Collection Centre to Molecular Lab (CBNAAT)/Culture & DST lab by non-salaried Treatment supporter/ Community Volunteer/govt staff without provision of TA/ Patient attendant/ courier agency within a pre decided time limit (Within the District)	Per Visit	400	0.004	624	2.00	624	2.00	<p><b>Ongoing Activity</b>  Transportation through Volunteer/ Govt. Staff- As per actual cost per visit through public transport (Within district Rs. 400 per visit; Outside district upto Rs.1000 per visit) or norms approved by the State Health Society for such activity  Through Human Carrier- As per actual Cost/ Human Carrier up to Maximum Rs.400/-  <b>Budget requirement: 322 TUs X 52 Weeks X 3 times per week X Rs.400/- Max per visit</b>  <b>Budget proposed 80% as expecting UDST at the block level after saturating all blocks with NAAT machines.</b></p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.9.2	Sputum collection and transportation from Non DMC PHIs to DMC or DTC/ DMC/ Collection Centre to Molecular Lab (CBNAAT)/Culture & DST lab by non-salaried Treatment supporter/ Community Volunteer/govt staff without provision of TA/ Patient attendant/ courier agency within a pre decided time limit (Outside the District)	Per Visit	1000	0.01	104	0.42	104	0.42	<p><b>Ongoing Activity</b>  <b>Background:</b> Currently C&amp;DST Lab be functional in IRL Cuttack &amp; RMRC Bhubaneswar. 2 more C&amp;DST Labs to be functional at VIMSAR Burla &amp; AIIMS Bhubaneswar.  <b>Proposal:</b> Transportation through Volunteer/ Govt. Staff- As per actual cost per visit through public transport (Outside district upto Rs.1000 per visit) or norms approved by the State Health Society for such activity.                      Through Human Carrier / Courier- As per actual Cost/ Human Carrier / Courier up to Maximum Rs.1,000/-  <b>Budget Requirement: 31 NTEP Districts X 52 Weeks X 2 times per week X Rs.1,000/- Max per visit</b>  <b>Budget proposed: 40%</b></p>
<b>73.10</b>	<b>Capacity Building including Trainings</b>					<b>2.31</b>		<b>1.79</b>	
<b>73.10.1</b>	<b>State Level Training</b>					<b>0.00</b>		<b>0.00</b>	
73.10.1.1	5 days Initial Training of MOTC on NTEP at ATD & TC, CTC.	20/ Batch	145813	1.46	0	0.00	0	0.00	<p><b>Justification:</b> As guideline has been revised so it is suggested to orient DTOs on Revised guideline.  <b>State load: MOTC-318 at CHC level</b>  <b>Target for 2024-25: 100 person (5 batches)</b>  <b>Target for 2025-26: No batches proposed</b>  <b>Batch Size: 5 days training @20 per batch</b>                      Implementing agency: ATD &amp; TC , Cuttack . Provide 60% Accommodation.                      No RP fees for ATD&amp;TC faculties.</p>
73.10.1.2	2 Days Training of Community Health Officers (TOT) At ATC CTC at State level	30/ batch	97875	0.98	0	0.00	0	0.00	<p><b>Justification:</b> The Community Health Officers are new to the Revised guideline of programme, hence Training is required.  <b>State load: 62 DPC &amp; PMDT coordinator, HQ STS/ PPM Coordinator</b>  <b>Approved load for 2 years: 62 person (2 batch (@ 30/ batch)</b>  <b>Target for 2024-25: 2 batches (@ 30/ batch)</b>  <b>Target for 2025-26: No batches</b>                      Implementing agency: ATD &amp; TC , Cuttack . Provide 60% Accommodation.                      No RP fees for ATD&amp;TC faculties.</p>
73.10.1.3	3 days State level Training on EQA Training for DTOs	30/ batch	141263	1.41	0	0.00	0	0.00	<p><b>Justification:</b> Some DTOs are newly posted, Hence the Training is required.  <b>State load: 31 DTOs</b>  <b>Proposed load: 30 person (1 batch (2 days/Training @ 30/ batch)</b>  <b>Target for 2024-25: 1 batches (@ 30/ batch)</b>  <b>Target for 2025-26: Not Proposed</b>                      Implementing agency: ATD &amp; TC , Cuttack . Provide 60% Accommodation.                      No RP fees for ATD&amp;TC faculties.</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.10.1.4	10 Days Training of LTs of DMCs- ZN Initial (Comprehensive) Govt.+ Non Govt. at ATD & TC , Cuttack .	15/ batch	183375	1.83	0	0.00	0	0.00	<b>Justification:</b> This is required only for Newly Joined LTs under NTEP. <b>Training of LTs of DMCs- ZN Initial (Comprehensive)</b> Govt.+ Non Govt. Implementing agency: ATD & TC , Cuttack . ( Integrated Training of LTs for ZN Stain, LED FM ) Duration of the training :10 days State load: 500 LTs to be recruited through SSSC during 2022-23 Approved load for 2 Years: 255 person (17 batches @15/ batch) <b>Target for 2024-25: 10 Batches</b> <b>Target for 2025-26: 10 Batches</b>
73.10.1.5	5 days comprehensive training of district Microbiologist on ZN microscopy, TruNAT, CBNAAT, IGRA/CyTB and EQA	15/batch	103125	1.03	0	0.00	0	0.00	<b>New Activity</b> <b>Justification:</b> This is required for ensuring quality of testing in the laboratory and will enhance capacity building of lab technicians. Microbiologists posted at DHH to be engaged in this activity. They will travel to laboratory and will supervise and monitor lab persons. In addition these microbiologists will train identified LTs from blocks on EQA ( district will identify LTs from blocks who will be utilized as STLS for NTEP EQA activities at block and sub-block level laboratories) at district level. State Load: 75 microbiologists at district level <b>Required load for 2024-25: 5 batches ( 15/batch) Duration of the training :5 days</b> <b>Required load for 2025-26: 5 batches ( 15/batch) Duration of the training :5 days</b> Implementing agency: ATD & TC , Cuttack Provide 60% Accommodation. No RP fees for ATD&TC faculties.
73.10.1.6	3 days Refresher Training of STLS on EQA at ATD & TC , Cuttack	15/batch	67875	0.68	0	0.00	0	0.00	<b>New Activity</b> <b>Justification:</b> STLS need refresher training on EQA for ensuring quality component of laboratory STLS in place = 77 <b>Required load for 2024-25 : 3 batches (15/batch)</b> <b>Required load for 2025-26 : 2 batches (15/batch)</b> Implementing agency: ATD & TC , Cuttack Provide 60% Accommodation. No RP fees for ATD&TC faculties. <b>Duration of the training :3 days</b>
73.10.1.7	2 days state-level workshop of district NTEP team (DTO, DPC, PPM) on ACSM to address identified programmatic gaps	per batch	324990	3.25	0	0.00	0	0.00	<b>New Activity</b> <b>Justification:</b> This state level workshop for district NTEP staffs (DTO, DPC, PPM) is required to strengthen district level ACSM activities by collaborative learning through workshop. Implementing agency: State TB Cell, Provide 60% Accommodation. <b>Duration of the training :2 days</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.10.1.8	2 Days Re-Training of Capacity building workshop on Data Management (NIKSHAY/ NIKSHAY AUSADHI) at Academy of Broadcasting and Multimedia Prashar Bharati by State TB Cell	per batch	135220	1.35	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Justification:</b>  This is required for staff under NTEP to increase their technical and managerial expertise in NIKSHAY /Nikshay Ausadhi.  Implementing agency: State TB Cell  <b>Duration of the training :2 days</b>  <b>State load : 62 ( 2 NTEP staffs from each district - DPC/HQ STS/any person handling Ni-kshay). In 2 batches ( @30-32/batch)</b>  <b>Target for 2024-25:2 Batches (@ 30-32/batch)</b>  <b>Target for 2025-26:2 Batches (@ 30-32/batch)</b></p>
73.10.2	<b>District Level Training</b>					<b>1.61</b>		<b>1.09</b>	
73.10.2.1	3 days Training of TB Champions	20 Per Batch	51493	0.51	1	0.51		0.00	<p><b>Justification:</b>  <b>TB Champions are being newly included in the Programme, hence Training is required.</b>  <b>Districts to identify TB Champions</b> for each HWCs &amp; initiate TB Champion training for community engagement activities at districts level.  Implementing Agency - DTC  Duration of the training 3 days  Total batch proposed : (1 batch per Dist + 1 additional batch for Balasore, Cuttack, Ganjam, Keonjhar,Mayurbhanj &amp; Sundargarh )  Total batch proposed for 2024-25: @ Rs.0.51 lakh per batch for 1 sensitization Training.</p>
73.10.2.2	1 day Training of Community Volunteers on NTEP Programme	30 Per Batch	25118	0.25	1	0.25	1	0.25	<p><b>Ongoing Activity</b>  <b>Training of Community Volunteers: (MPW, MPHS, Pharmacists, PHEOs at District level)</b>  Implementing agency: DTC  Duration of the training :1 day  Batch size:30 per batch  State Load: 3060 volunteers involved in TB Activities  <b>Total batch approved for 2024-25 &amp; 2025-26:</b> (1 batch per Dist + 1 additional batch for Balasore, Cuttack, Ganjam, Keonjhar,Mayurbhanj &amp; Sundargarh )</p>
73.10.2.3	1 Day Training of CHC LTs on EQA and Trunat at district level	10 Per Batch	9878	0.10	1	0.10	1	0.10	<p><b>New Activity:</b>  <b>Training of CHC LTs on EQA and Trunat at district level :</b>  Implementing agency: DTC  Duration of the training :1 day  Total State load: 300 person  Batch size: 10 per batch  <b>Total batch: (1 batch per Dist+ 1 additional batch for Balasore, Cuttack, Ganjam, Keonjhar,Mayurbhanj &amp; Sundargarh )</b></p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.10.2.4	Any other (1 day Training of staff from Mobile Health Units (MHU,RBSK, RKSK, NRC)on case detection.	30 Per Batch	26693	0.27	1	0.27	1	0.27	<p><b>Ongoing Activity</b>  <b>Training of staff</b> from Mobile Health Units (MO, ANM, pharmacist), MHU RBSK, RKSK, NRC have been engaged across the State for ensuring health services at village level                      State load : 314 x3= 942 persons (@ 3 person/ inst.)                      Implementing agency: DTC                      Duration of the training :1 day                      Batch size: 30 per batch                      Proposed load for 2 years: 62 batches  <b>Target for 2024-25 &amp; 2025-26: 31 batches in each year</b>  <b>Justification:</b> Training will improve case notification across the State.</p>
73.10.2.5	1 day Training to General Health Staffs and Different Cadres of NTEP on Risk Identification, Assessment, Referral and Management of High Risk TB Patients for Differentiated Care at District level.	20 Per Batch	19073	0.19	1	0.19	1	0.19	<p><b>Ongoing activity</b>  <b>Training of staff (MOs from DHH &amp; Block, STS &amp; TBHV Staffs at District level)</b>                      State load: 1075 person (@1 from 322 TUs+ 109 STLS + @2 from 314 CHC staff)                      Approved load for 2 Years: 1075 persons  <b>Target for 2024-25 &amp; 2025-26: 37 batches in each year</b> (31 Dist x1 batch each + 1 batch extra for Balasore, Cuttack, Ganjam, Keonjhar,Mayurbhanj &amp; Sundargarh ) @ Rs.0.19 lakh per batch  <b>Justification:</b> Training will improve case notification in tribal blocks. Implementing agency: DTC                      Duration of the training :1 day</p>
73.10.2.6	1 Day Block Level Training of CHOs & MOs PHC HWC on differentiated TB Care	20 Per Batch	16159	0.16	0	0.00		0.00	<p><b>New activity</b>  <b>Training Staffs: CHO, Medical officer of PHC-HWC</b>  <b>Load: 4810 CHOs + 1394 MOs of PHC-HWC = 6204</b>  <b>Proposed Target: All 314 blocks to conduct one batch to orient all CHOs, MO-PHC-HWCs and HWC teams.</b>  <b>Target for 2024-25 : 314 batches</b>  <b>Justification:</b> Training will improve case notification in tribal blocks. Implementing agency: DTC                      Duration of the training :1 day</p>
73.10.2.7	1 day Orientation for Pvt. Practitioners on NTEP	30 Per Batch	26693	0.27	0	0.00	0	0.00	<p><b>Ongoing Activity</b>                      Training of staff ( Pvt. Practitioners)                      Only districts where Medical Colleges are not there shall conduct this one day orientation for private practitioners.                      Implementing agency: DTC                      Duration of the training :1 day  <b>Proposal for 2024-25 : 18 (18 Dist x1 batches each DHH)</b>                      Batch size: 30 per batch  <b>Proposal for 2025-26 : Nil</b>                      Batch size: 30 per batch                      Total batch proposed : 31 @ Rs.0.27 lakh per batch  <b>Justification:</b> Training will improve case notification in private sector</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.10.2.8	2 days District level Training of CHOs/Mos/HWC Team for Provision of TB Services and Outreach Activities	30 Per Batch	51735	0.52	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Training of staff (CHOs/Mos/HWC Team ):</b> <b>State load: 3510 CHOs by Mar'22 +1394 MOs PHC HWC=4904 person</b> <b>Approved target for 2 years: 4440 person (148 Batches @30/ batch)</b> Implementing agency: DTC <b>Target for 2024-25 &amp; 2025-26: 160 batches in each year</b> <b>Justification:</b> As guideline has been revised so it is suggested to orient the MOs on Revised guideline.
73.10.2.9	1 day Training at District level for MOs and STS of TUs on LTBI management (PMTPT)	30 / Batch	28268	0.28	1	0.28	1	0.28	<b>Justification:</b> PMTPT is entirely one newer initiative. State load: 644 person (MOs & STS) for 2 years <b>Target for 2024-25 &amp; 2025-26: 31 batches in each year</b> Implementing Agency- DTC Duration of the training 1 day Batch size:30 per batch Total batch Approved : 31 (1 batch each for 31 TB DHH)
73.10.3	<b>Any other (Specify) Training for Active Case Finding of TB Patients</b>					0.70		0.70	
73.10.3.1	Training of TB Champions (TOT)	Per Batch	40000	0.40	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Training of TB Champions (TOT):</b> Implementing agency: ATD & TC , Cuttack Duration of the training :2 days Batch size:15 per batch <b>Total batch Proposed : 2 batches in each year (@ Rs.0.40 lakh per batch)</b> <b>Justification:</b> As guideline has been revised so it is suggested to orient DTOs on Revised guideline
73.10.3.2	<b>Orientation &amp; Training for ACF Activity</b> District level one day Orientation training of Programme Officers	Per Batch/ Per Round	19073	0.19	1	0.38	1	0.38	<b>Ongoing Activity: District level one day Orientation training of Programme Officers (20 POs)</b> <b>Fund proposed for 2024-25:</b> Rs.19,073 per batch X 31 Districts and 5 Urban Areas x 2 rounds
73.10.3.3	<b>Orientation &amp; Training for ACF Activity</b> One day Block Level Orientation training of Field level Service providers	Per Batch/ Per Round	16159	0.16	1	0.32	1	0.32	<b>Ongoing Activity: One day Block Level Orientation training of Field level Service providers (50 persons)</b> <b>Fund proposed for 2024-25: @ Rs.16,159 per batch X 319 batches (in 314 blocks and 5 batches in 5 Municipal Corporation Area) x 2 rounds</b>
73.11	<b>CME (Medical Colleges)</b>					5.10		5.10	

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73.11.1	Faculty Members	30 Per Batch	32000	0.32	5	1.60	5	1.60	<p><b>Ongoing Activity</b>  <b>Sensitization of Faculty Members of Medical colleges:</b>  <b>Duration of the training 1 day</b>                      Batch size:30 per batch                      Total batch Proposed : 17 (one per MCH) @ Rs.0.32 lakh per batch                      1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela</p>
73.11.2	Residents & Interns	50 Per Batch	20000	0.20	10	2.00	10	2.00	<p><b>Ongoing Activity</b>  <b>Sensitization of Residents &amp; Interns on RNTCP:</b>  <b>Duration of the training 1 day</b>                      Batch size:50 per batch ( 37 batches to be trained =1850 participants to be trained - 450 participants from SCB, MKCG &amp; VSS and rest 1400 from rest all 14 MCH including PGIMER BBSR)  <b>Total batch proposed : 37 (3 per annum for SCB, MKCG &amp; VSS and 2 per annum for rest 14 MCH including PGIMER BBSR) per MCH) @ Rs.0.20 lakh per batch</b>                      1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela</p>
73.11.3	CME of Private Practitioners	30 Per Batch	30000	0.30	5	1.50	5	1.50	<p><b>Ongoing Activity</b>                      Sensitization of Private Practitioners on NTEP:                      Duration of the training 1 day                      Batch size:30 per batch  <b>Total batch Proposed : 17 (one per MCH) @ Rs.0.30 lakh per batch</b>                      1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela</p>
73.11.4	Support to Conferences, Symposiums, Panel discussions and Workshops organized at National and state levels and at level of Medical college	Per Activity	100000	1	0	0.00	0	0.00	<p><b>Ongoing Activity</b>                      To be met out of HSS head.</p>

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73.11.5	1 day Operational Research Workshop for Medical Colleges (to be conducted in one Medical College)	Per workshop	60000	0.6	0	0.00	0	0.00	<p><b>New Activity:</b> Operational research is one of the key component in NTEP towards development of strategic plans towards TB elimination. So, it has been decided by the STF chair and STO to conduct one operational research workshop with involvement of at least one medical college staff from each medical colleges to review and discuss research activities conducted at the medical colleges. One day Operational Research workshop shall be conducted in one of the Medical College once in a year. Venue for the workshop will be provided by the medical college.</p> <p><b>Budget proposed for 2024-25: 1 batch @ Rs. 60000/-per batch</b> <b>Budget proposed for 2025-26: 1 batch @ Rs. 60000/-per batch</b></p> <p>1. Travel cost for 20 participants @ Rs 2000/- per participant (Total Rs. 40000/-) The travel cost will be reimbursed on production of tickets by public transport. 2. Refreshment, Lunch for 30 participants @ Rs 500/- per person (Total Rs. 15000/-) 3. Other including meeting materials = Rs 5000/-</p>	
73.12	<b>Community engagement activities</b>					<b>8.76</b>		<b>8.76</b>		
73.12.1	TB Champions	Per month	3500	0.035	120	2.52	120	2.52	<p><b>Ongoing Activity</b> <b>Proposal 2024-25:</b> Patients support initiatives by TB Champions for improving treatment compliance of TB patients at <b>1288 PHC- HWCs (i.e. 100% of total 1288 PHC HWCs to be focused in 2024-25)</b></p> <p><b>Progress: 300 TB Champions out of 565 selected HWCs are already engaged.</b></p> <p>1. Organizing support group meeting on fortnight basis: @Rs.500/- X 2 nos=<b>Rs.1000/-</b> 2. Home visit by TB champions for post treatment follow up: all patients who have completed TB treatment will be followed up for next 2 years to ensure there is no relapse of TB by following up TB screening among them.: weekly once: @Rs.500/- X 4 no=<b>Rs.2000/-</b> 3. Attending monthly meeting of TB Champions at district level: @<b>Rs. 500/-</b></p> <p><b>Total Budget for 2024-26: Rs. 3500/- per month x 12 months x 1288 HWCs (Budgeted 60%) per year</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.12.2	Payment of Incentive To ASHAs For Referral of TB Cases (Negative Cases)	Per Test	100	0.001	5783	5.78	5783	5.78	<p><b>Ongoing Activity</b>                      The presumptive TB examination rate increased remarkably in 2020-21 (1264 per lakh presumptive TB examination rate in 2020, increased to 1725 per lakh presumptive TB examination rate in 2021).                      For presumptive TB examination rate ASHAs as informants for negative cases plays a vital contributory roll.  <b>Proposed Budget for FY 2024-26:</b> Assuming 21650 cases to be diagnosed through ASHAs effort (out of total 65000 cases, assuming 21667 cases (1/3 cases) diagnosed by the Medical Colleges and 50% (21666 cases) of the rest by Other Health Institutes).                      For 21650 cases to be diagnosed, required Nos. of Tests = 216500 (Expected 10 tests required to detect 1 +ve case) <b>per year</b>  <b>Details at NTEP Write-up Annexure 10 -ASHA negative incentive</b></p>
73.12.3	ASHA incentive for Sunday ACF under comprehensive PHC services at model HWCs	Per ASHA Per Month	150	0.0015	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>ASHA incentive for Sunday ACF under comprehensive PHC services at 1288 PHC-HWCs to be focused in 2024-25 &amp; 2025-26)</b>  <b>Justification:</b>                      ASHAs would conduct Active Case Finding on one Sunday in a month and cover all houses in her area in a quarter. Thus, ASHA is expected to visit each house 4 times in a year.                      Funds approved for ASHA's visit at 150 per Sunday with the assumption that there are 25 ASHAs in a PHC. She has to send at least 20 samples after active case finding to nearest DMC to get the incentive  <b>Budget proposed for FY 2024-25 :</b> Rs.150/- per ASHA p.m. x 25 ASHAs per HWC x 1288 HWCs x 12 months <b>(Budgeted 30%)</b>  <b>Budget proposed for FY 2025-26 :</b> Rs.150/- per ASHA p.m. x 25 ASHAs per HWC x 1288 HWCs x 12 months <b>(Budgeted 30%)</b></p>
73.12.4	Incentive for Community volunteers undertaking active case finding	Per day/ per round	100	0.001	566	0.45	566	0.45	<p><b>Ongoing Activity:</b>                      Total House hold to be covered =11.40 lakhs                      Households to be covered per day = 50 Nos                      Total days required to cover total house hold= 22800 days (11.40 lakhs / 50 nos.) to be covered in a round x 2 rounds= 45600 Days.  <b>Proposed Incentive for FY 2024-26= Rs.100/- per day per round x 45600 man days, budgeted 80% looking into expenditure trend</b></p>

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73.12.5	M& E for Active Case Finding of TB Patients	Per Round	84000	0.84	2		2	<p><b>Ongoing Activity</b>  <b>Active Case finding for TB cases (RNTCP)</b>                      Population Coverage: 57.00 Lakhs (51 Lakhs Population from rural and 6.00 Lakhs from urban slums &amp; other vulnerable pockets-Targeted as per current year coverage)                      Approved Rounds: Twice (Tentatively in September &amp; Feb)  <b>Approved Activity:</b>                      Monitoring &amp; Supportive Supervision                      3.1. Mobility Support &amp; POL for Active Case Finding: - Estimated Cost- Rs.28.50 Lakhs ( @ Rs. 5,000/- for every 10,000 population)                      3.2. Incidental Charges – Estimated Cost – Rs.11.40 Lakhs (@ Rs.2000/- per every 10000 population)                      3.3. Other Logistics                      3.3.1 Sputum Transportation – from existing head                      3.3.2 Transportation of samples to CBNAAT Site – From Existing head  <b>Total Cost Per round : Rs.28.50 lakhs + Rs.11.40 lakhs = Rs.39.90 lakhs</b>  <b>Budget Proposed for 2 rounds: Rs.39.90 lakhs x 2 =Rs.79.80 lakhs</b>  <b>Budget Shifted to HSS-11 SL No 194</b></p>	
73.13	<b>Vehicle Allowance</b>	Per Annum/ Per person	12000	0.12	7		7	<p><b>Ongoing Activity</b>  <b>Proposal as per Gol norms: 2 wheeler for STS/ STLS/ Dist. PMDT &amp; TBHIV Coordinator/ PPM Coordinator</b>  <b>Providing Vehicle Allowance to Staff :</b> Plan is to provide Rs.1000/- PM as vehicle allowances to concerned staff if s/he is using its own vehicle for field monitoring for recommended no of days as per the ToR and submit filed visit report to all concerned as per guidelines. This will be exclusive of POL cost claimed for field visits as per Society norms.  <b>Justification for arriving the cost norms for vehicle allowance:</b>                      A new vehicle (Two Wheeler) is costing about Rs.70,000/- inclusive of all taxes etc. The age of vehicle for use is about 6 years as per Gol guidelines. So annual expenditure on the head is about Rs.12,000/- (Rs.70,000/ 6=11,666). Hence, as per the calculation, Rs.1000/- can be given spent on the head.                      Coverage: The provision will be applicable for those 293 Staff who has no vehicle / vehicle attained the age for condemnation. The same provision will be extended to others gradually.  <b>Budget: @Rs.1000/- per month per person X 12 months</b>  <b>Budget Shifted to HSS-11 SL No 194</b>  <b>Details at NTEP Write-up Annexure 9 - Vehicle allowance District wise Requirement</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.14	Printing					0.16		0.16	<p><b>Ongoing activity proposed as approved last year</b>                      Fund Approved for printing at                      1. State Level : Rs. 3.00 Lakhs                      2. Multi colored patient identity Card with awareness messages for availability of free diagnostics and anti TB drugs in health facilities upto HWC level, to achieve case notification and adherence.  <b>Budget: @ Rs. 5/- per card x 70,000 patients (in cluding 10 % buffer)= Rs. 3.50 Lakhs</b>                      3. DTC Level:@ Rs. 8000/- per block x 314 blocks+ (4 for urban areas Cuttack-1, Bhubaneswar-2, Rourkella-1)                      Printing Details at DTC level:                      a. 7 types of Registers                      b. 15 Types Formats                      c. Patient Information Booklet</p>
73.14.1	State Level	Lumpsum	650000	6.50	0	0.00	0	0.00	Proposed as proposed last year approval
73.14.2	DTC Level	Per DTC	8000	0.08	2	0.16	2	0.16	Proposed as proposed last year approval
73.15	Hand Held Tablets								Tablets have been provided to STS, STLS, PPM Coordinator, PMDT Coordinator, DPC out of Supplies form CTD. No additional requirement proposed in the current year.
73.16	Sub-national Disease Free Certification: Tuberculosis	Per district	200000	2.00	0	0.00	0	0.00	<p><b>Ongoing Activity:</b>  <b>To claim the sub national disease free certification the districts are nominated based on indicators of 1.</b> Nos. needed to Test (NNT) - Min-20% increase in comparison to 2015 Baseline Data. <b>2.</b> TB Score - Min. 80% <b>3.</b> Drug Consumption &amp; Drugs Sale in Public &amp; Pvt. sector - Decrease by 20% in comparison to 2015 Baseline Data.                      State is proposing 08 Nos. of districts to claim Bronze certification in the Year 2024-25 and 08 Nos. in the Fy 2025-26 along with State level claim for Bronze in 2024-26.  <b>Proposed in 2024-25 : 08 districts</b> (to be decided based on prerequisites during Claim submission)  <b>Proposed in 2025-26: 08 districts</b> (to be decided based on prerequisites during Claim submission)</p>
73.17	Thesis / Studies for Medical Colleges	No. of thesis	30000	0.30	5	1.50	5	1.50	<p><b>Ongoing Activity</b>  <b>Financial support to PG Student in in Govt. &amp; Pvt. MCHs for preparation of Thesis on subject on TB</b>  <b>Budget for 2024-26: @ Rs. 30000/- per thesis per MCH x 17 MC&amp;H= Rs. 5.10 Lakhs per year</b>                      Coverage (13 Govt, 3 Pvt &amp; AIIMS): 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela</p>

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73.18	Operational Research	No of Research	200000	2.00	0	0.00	0	0.00	<b>Ongoing Activity:</b> Research activities by MCHs/ Research institutes will play pivotal role for planning of different strategies towards TB elimination activities by 2025. <b>Proposed Budget in 2024-26: Rs.2.00 Lakhs x 3 Research proposal</b>
73.19	<b>CIE/ SIE/ ZSS Mission</b>					<b>0.60</b>		<b>0.60</b>	
73.19.1	<b>State Level</b>					<b>0.00</b>		<b>0.00</b>	<b>Proposed as approved last year approval</b>
73.19.1.1	Expenditure for State internal evaluation, State Supervisory visit, Joint supervisory visit, OSE visit etc.	Lumpsum	300000	3	0	0.00	0	0.00	<b>Ongoing Activity</b> Expenditure in relation to State Internal Evaluation- 6 nos, Central Internal Evaluation by Gol- 1 nos & any other Central Govt. Monitoring.etc. Lumpsum Rs. 3.00 Lakhs
73.19.1.2	State level Review meeting	Per meeting	100000	1	0	0.00	0	0.00	<b>Ongoing Activity</b> State level Review meeting of NTEP @ Rs. 1.00 laks per meeting x 4 = <b>Rs.4.00 Lakhs</b>
73.19.2	District Level Review meeting	Per meeting	10000	0.1	6	0.60	6	0.60	<b>Ongoing Activity</b> Bi-Monthly Performance Monitoring meeting @ <b>6nos. Per DTC x 31 DTCs = 186 meetings</b> Implementing agency: DTC
73.20	<b>NTF/ ZTF/ STF</b>					<b>0.60</b>		<b>0.60</b>	
73.20.1	Travel support for attending NTF, ZTF, STF meetings for Govt. Medical Colleges	Per Unit	20000	0.20	0		0		<b>Ongoing Activity :</b> 5 members x 2 nos (ZTF & NTF) of task force to attend ZTF and NTF meeting. Budget to be kept at STC. <b>Proposed Budget for 2024-25: @Rs. 0.20 Lakhs x 5 members from MCH x 2 meetings (NTF &amp; ZTF) = Rs. 2.00 lakhs</b> <b>Proposed Budget for 2025-26: @Rs. 0.20 Lakhs x 5 members from MCHs x 2 meetings (NTF &amp; ZTF) = Rs. 2.00 lakhs</b> <b>Budget Shifted to HSS-11 SL No 194</b>
73.20.2	Communication & other expenses	Per Unit	10000	0.10	2		2		<b>Ongoing Activity:</b> Proposed for Govt Medical College : 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar,9.SJMCH, Puri, 10. DDMCH Keonjhar, 11. GMC sundargarh, 12. PGIMER BBSR, 13. SRM MCH Kalahandi, <b>Proposed Budget: @Rs.10000/- X 13 Govt. MCHs = Rs. 1.30 lakhs</b> <b>Budget Shifted to HSS-11 SL No 194</b>
73.20.3	Organizational cost for STF Meeting	Per meeting	20000	0.2	0	0.00	0	0.00	<b>Ongoing Activity</b> Proposed as per 2023-24 Approval. STF meeting done in quarterly basis as per Gol Norm. <b>Proposed Budget: Rs.0.20 lakh x 4 Nos</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
73.20.4	Core Committee Meeting	Per meeting	3000	0.03	20	0.60	20	0.60	<b>Ongoing Activity</b> <b>Approved Medical College both Govt &amp; private:</b> 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SUM Bhubaneswar, 10.KIIMS BBSR, 11. Hi-Tech MCH, BBSR, 12. SJMCH, Puri, 13. DDMCH Keonjhar, 14. GMC sundargarh, 15. PGIMER BBSR, 16. SRM MCH Kalahandi, 17. Hi-Tech MCH Rourkela <b>Budget Proposed for 2024-26: Rs. 3000/- per meeting per Quarter x 17 Medical colleges</b>	
73.20.5	Monitoring visit of STF chair and Vice-chair	Per vist	20000	0.2	0	0.00	0	0.00	<b>New activity:</b> STF chair and Vice chair will visit to Medical colleges for monitoring to increase contribution of Medical colleges in various NTEP activities. STF chair and vice-chair shall visit one medical college in each quarter to assess and improve the performance in NTEP activities. <b>Budget Proposed for 2024-2025:</b> 8 x Rs 20000/- per visit (2 days) for travel (hired vehicle) and accommodation. <b>Budget Proposed for 2025-26:</b> 8 x Rs 20000/- per visit (2 days) for travel (hired vehicle) and accommodation.	
73.21	<b>State/District TB Forums</b>					<b>0.14</b>		<b>0.14</b>	<b>1. State level TB Forums:</b> 2 meetings per annum @ Rs.10,000/- per meeting <b>2. District level TB Forums:</b> 2 meetings per annum @ Rs.7,000/- per meeting in 31 districts	
73.21.1	State level TB Forums	Per Meeting	10000	0.1	0	0.00	0	0.00	<b>Ongoing Activity</b> State TB Forum @ Rs 0.10 Lakh per meeting ( Rs 0.05 lakh for Stationary, refreshment and venue. Rs 0.05 lakh for mobility & loss of wages of 10 nos. of non-govt members)	
73.21.2	District level TB Forums	2 meetings Per district	7000	0.07	2	0.14	2	0.14	<b>Ongoing Activity</b> Dist. TB Forum @ Rs 0.07 Lakh per meeting ( Rs 0.02 lakh for Stationary, refreshment and venue. Rs 0.05 lakh for mobility & loss of wages of 10 nos. of non-govt members)	
<b>74</b>	<b>Nikshay Poshan Yojana</b>					<b>73.92</b>		<b>73.92</b>		
74.1	NPY for TB patients notified from public sector	No. of TB patients notified	3000	0.03	1396	37.69	1396	37.69	<b>Ongoing Activity</b> Budgeted 90% in 2024-25 & 90% in 2025-26 as per last year's achievement. (92.0% Notification)	
74.2	NPY for TB patients notified from private sector	No. of TB patients notified	3000	0.03	1200	32.40	1200	32.40	<b>Ongoing Activity</b> Budgeted 90% as per last year's achievement. (99.0% Notification)	
74.3	NPY for Drug Resistant TB patients	No. of DR-TB patients notified	6000	0.06	41	2.46	41	2.46	<b>Ongoing Activity</b> Budgeted 100%.	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
74.4	Provision of Incentive to ASHAs or Community Volunteers for ensuring seeding of bank account details of TB patitens in Ni-kshay portal for enabling DBT Payments under NTEP	Per ASHA/ Community volunteer	50	0.0005	2729	1.36	2729	1.36	<p><b>Ongoing Activity</b>  <b>Approved in Supplementary PIP 2022-24:</b>                      Total target for TB Notification in 2024-25 &amp; 2025-26 is 57000 (Out of 65000 Diagnosed cases 8000 cases to be contributed by the PPSA)  <b>Justification:</b>                      Provision of incentive at rate of Rs.50/- to ASHA or community volunteer for facilitating seeding of bank account information of notified TB patient in Ni-kshay portal within 15 days of treatment initiation for enabling DBT payments under the National Tuberculosis Elimination Programme.  <b>Proposed as per Gol Letter No.D.ONo. V.11011/1/2022-NHM-II, Dtd. 26th</b></p>
<b>75</b>	<b>PPP</b>					<b>57.40</b>		<b>57.40</b>	
75.1	Private Provider Incentive	Per patient	1000	0.01	1200	8.40	1200	8.40	<p><b>Ongoing Activity</b>                      Provider's Incentives for notification of TB patients and reporting treatment outcome to private practioners (PP), pharmacies, patients &amp; any other informers  <b>Justification:</b>                      Unit cost proposed as per the last years approval                      Provider's Incentives for notification of TB patients and reporting treatment outcome to private practioners (PP), pharmacies, patients &amp; any other informers@ Rs. 1000/- per patient x 10000 cases (100% of annual target of 10000 cases from pvt. sector)  <b>Expenditure: 64.00 % of Budget in the FY 2022-23, hence 70% of total estimated budget proposed.</b></p>
75.2	Informants Incentive (for positive cases)	Per Case	500	0.005	1184	5.92	1184	5.92	<p><b>Ongoing Activity:</b> Incentive proposed @ Rs. 500/- per case as per CTD norms and basis of costing Incentive proposed vide D. O. No. z-28015/36/2017-TB (Pt-IV) dated 11-01-2019.  <b>Target 2024-26 :</b> Targeted notified patients as per NIKSHAY is 65000 cases. of which 55000 from public sector. Provision has been made for 40% cases from public sector as about 60% patients comes suo moto without any informant. Provision is made for 22000 cases (40% of 55000) x Rs. 500/- per case</p>
75.3	<b>Any PPM-PP/NGO Support</b>					<b>42.93</b>		<b>42.93</b>	<p><b>PP/NGO Support - District level - Programme continued: 2024-25</b>                      1.ACSM Activities at community level                      2.DMC (A)                      3.Improving TB control in Urban slum                      4.Treatment Services (TB Management Centre)</p>
75.3.1	ACSM Activities at community level			0		0.00		0.00	<p><b>Activity dropped. New ACSM activity proposed under TB Harega Desh Jeetega Campaign</b></p>

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75.3.2	ACSM activities at Urban Slums in Municipal Corporations of Odisha	Per One lakh	50000	0.5		0.00		0.00	<p><b>Ongoing Activity:</b>  <b>Approved in 2023-24 :</b> State has decided to expand the activity to 05 Municipal Corporations of Odisha i.e Cuttack (129471), Ganjam (71211), Bhubaneswar MC (301611), Sambalpur (111628), Sundargarh (53541). Total Urban Slum population is 667462. (Say 6.67 lakh)  <b>Justification:</b>  Budget hiked to 50000 per Lakh population, due to difficulty in engaging local NGOs to implement this activity within existing budget approved last year(25000 per Lakh population)  <b>Budget requirement Rs.50,000/- per lakh population X 6.67 Lakhs population in 5 MCs</b>  <b>To be met out of NUHM IEC budget</b></p>	
75.3.3	Public Private Support Agency (PPSA)	Per case	3000	0.03	1431	42.93	1431	42.93	<p><b>Ongoing Activity</b>  Approved 7 NTEP districts with average budget is Rs. 2871/- per patient in FY 2022-24. 07 NTEP Districts are : Ganjam, Khurda, Bhubaneswar MC, Cuttack, Mayurbhanj, Sambalpur, Sundargarh.  <b>Proposed - Addition of one more district i.e. Baleswar district.</b> because 1) the probability of detection of private sector TB notification may be 550 cases (approx.) per annum , 2) High urban population 3) More than 40 active private providers and 4) presence of medical college in the district.  <b>Modality of implementation: PPP mode Target - 8000 patients</b>  <b>Present Status:</b> Agencies has given PPSA contract {1. HLPPT- (Ganjam, Khordha, Bhubaneswar MC, Cuttack), 2. IMTS- (Mayurbhanj &amp; Sundargarh), 3. WHP- (Sambalpur)}. Performance status of the agencies from July'21 to June'23 = 13453 Nos. of patients  A fresh RFP may be prepared with base price of Rs. 3000/- per case. The cost may include the TPT indicator with the previously approved 6 indicators.</p>	
75.4	<b>Multi-sectoral collaboration activities</b>					<b>0.15</b>		<b>0.15</b>		
75.4.1	<b>Intersectoral Convergence</b>									
75.4.1.1	1 day District level Sensitization of MOs and Concerned Health Staffs, Health Establishments under Railway, AYUSH, Defence, Labour, ESI, Mining, Coal, Power, CGHS, ECHS, etc.	20 Per Batch	10000	0.10	1	0.10	1	0.10	<p><b>Ongoing Activity</b>  <b>Sensitization of staff (Sensitization of MOs from other sectors (Railway/ AYUSH/ Defense/Mining, etc.):</b>  Implementing agency: DTC  Duration of the training :1 day  Batch size: 20 per batch/ as per actual no. of participants.  <b>Budget Proposed for 2024-26 :</b> 31 batches (@ 1 batch/ districts) per year  <b>Justification:</b> Sensitization will improve intersectoral coordination</p>	
75.4.1.2	Convergence meetings	Per District	5000	0.05	1	0.05	1	0.05	<p><b>Ongoing Activity</b>  <b>The NTEP activities at the intersectoral level shall be reviewed by the Chairmanship of the District Magistrate in annually per district.</b>  1 Convergence meetings with line department &amp; industries per annum per district:  Rs.5,000/- per meeting X 31 districts</p>	
<b>76</b>	<b>Latent TB Infection (LTBI)</b>					<b>8.37</b>		<b>12.60</b>		

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
76.1	Diagnosis and Management under Latent TB Infection Management					8.37		12.60	Scale up of TPT in adolescents, adult contacts at household & workplace of pulmonary TB patients & other risk group: Background: As per PMTPT guideline, in children HHC >5 years and adults, chest X ray and TBI testing would be offered wherever available. All efforts need to be made to ensure that CXR and TBI testing is made available. However, TPT must not be deferred in their absence. As of now, TPT services are expanded to HHC >5 years and adults.
76.1.1	Cost towards adopting in house model for PMTPT					4.23		8.46	<b>Ongoing Activity</b> <b>Proposal for 2024-25 &amp; 2025-26:</b> For 2024-25, beneficiaries for 6 month (45000 beneficiaries) and for 2025-26 all beneficiaries (90000 beneficiaries) to be provided TPT service. <b>Budget for LTBI testing kit @ Rs.1,300/-</b> Budget cost towards transportation, packaging and collection of sample = @ Rs. 400/- ( Rs. 250 + Rs. 100 + Rs. 50) , Total = Rs. 1,700/- per Beneficiary <b>Budget Proposed for 2024-26:</b> @Rs.1,700 per beneficiary.
76.1.1.1	Cost for LTBI Test Kit	Per unit	1300	0.01	0	0.00	0	0.00	
76.1.1.2	cost towards transportation, packaging and collection of sample	Per IGRA test	400	0.00	1057	4.23	2114	8.46	
76.1.2	Treatment of LTBI (3HP treatment for Adult contacts)					0.00		0.00	<b>Ongoing Activity</b> <b>LTBI drugs:</b>
76.1.2.1	For 3HP treatment	Per Course	1250	0.01	0	0.00	0	0.00	<b>Justification:</b> Assuming 30% people are infected in the community, so 30000
76.1.2.2	For INH Course	Per Course	250	0.00	0	0.00	0	0.00	beneficiaries may be detected positive after IGRA testing to 90000 eligible
76.1.3	Provision to incentive to ASHA/ Community Health Volunteer for supporting treatment adherence and completion of TB Preventive Treatment among eligible individuals	Per ASHA/ Community volunteer	250	0.00	2763	4.14	2763	4.14	<b>Ongoing Activity</b> <b>Approved in Supplementary PIP 2022-24:</b> Provision of financial incentive to ASHA/ Community Health Volunteer of Rs.250/- per individual for successful completion of TB Preventive Treatment Proposed as per Gol Letter No.D.ONo. V.11011/1/2022-NHM-II, Dtd. 26th October 2022 Total target population per annum: 117619 (details of beneficiaries calculation is at PMTPT Annexure) <b>Budget Proposed for 2024-25: 117619 cases x Rs.250/- per case</b> <b>Budget Proposed for 2025-26: 117619 cases x Rs.250/- per case</b> This has been calculated based on TPT scale up plan provided by the districts and assuming 71% positivity rate among household contacts. Assuming 40% infectivity rate in the state and also based on findings of 30% positivity in the community as per Prevalence survey, so 60% budget is proposed. <b>Details at NTEP Write-up Annexure 4 Beneficiary calculation sheet -PMTPT Beneficiary Calculation for ASHA TPT Incentive</b>
76.1.4	Procurement of Handheld X-Ray Machine	Per machine	2700000	27.00	0	0.00	0	0.00	<b>New Activity:</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
76.1.4.1	Operational Expenses of Handheld X-Ray Machine	Per machine	104000	1.04		0.00	0.00	0.00	Proposal 1: Procurement of 30 Handheld X-ray machines (rest 15 Handheld X-ray machines procured under DMF & other district funding sources) for all districts.
76.1.5	Adult BCG Vaccination	Lumpsum	38732000	387.32	0	0.00	0	0.00	<p><b>Shifted from Sl.No.79 as per NPCC Comments</b></p> <p><b>New Activity:</b> MoHFW is planning to conduct an Implementation research of BCG vaccination in adults in close collaboration with ICMR/DHR. From our state, in 15 districts, BCG vaccination will be implemented and rest 16 NTEP districts will be control districts. Randomization of implementing districts and control districts has been done by ICMR.</p> <p><b>Budget proposed in 2024-25 only.</b> <b>Details at NTEP Write-up Annexure 1 - Adult BCG Vaccination</b> Estimated Budget: Rs.387.32 lakhs. Budget proposed 70% of estimated budget i.e.Rs.271.12 lakhs as it is a new initiative and thus may take time for rollout.</p>
<b>77</b>	<b>Drug Resistant TB(DRTB)</b>					<b>3.25</b>		<b>3.43</b>	
77.1	Treatment Supporter Honorarium	No. of MDR/RR-TB patients on treatment	5000	0.05	41	2.05	41	2.05	<p><b>Ongoing Activity:</b> Unit cost proposed as per the last years approval for 650 patients @ Rs.0.05 Lakh per patient. <b>Proposed Budget: 650 DRTB Patients x Rs.0.05 Lakh per Patient</b></p>
77.2	Infrastructure- Civil works (I&C)								<p>1. Infrastructure requirement at IRL &amp; CDST Centre- saturated. 2. There is no plan expand CBNAT sites, Hence, no civil works cost required. 3. Infrastructure requirement at TureNat sites- To be mobilised from State, if</p>
77.3	NABL Certification renewal of IRL, Cuttack	Lumpsum	250000	2.5	0	0.00	0	0.00	<p><b>New Activity</b> <b>Justification:</b> FIND was supporting in NABL accreditation for IRL and already withdrawn. Since IRL is the tertiary level laboratory mechanism for NTEP and supervising all NTEP labs at district and sub-district level, so annual NABL certification is necessary. <b>Budget Proposed for 2024-25 : Rs 2.5 Lakhs</b> <b>Budget Proposed for 2025-26: Rs 2.5 Lakhs</b> <b>Details at NTEP Write-up Annexure 2 - NABL Certification IRL Breakup</b></p>
77.4	Maintenance & management for DRTB Centre, IRL & C&DST Lab & Molecular Diagnostic Equipments	Per Unit	250000	2.50	0	0.00	0	0.00	All equipment/ instruments except BSL3 lab at IRL Cuttack is managed & maintained under Comprehensive Biomedical Equipment Maintenance Programma- Supported under NHM. Hence budgeted for BSL3 lab only.
77.5	Procurement of essential Equipemnts for IRL, Cutttack	Lumpsum	3700000	37.00	0	0.00	0	0.00	GT Blot - 1 No, Twin Cubator - 1 No, Thermocycler- 1 No, Analytical Weighing Balance - 1 No, 10 KVA Online UPS- 2 Nos, 5 KVA Online UPS- 2 Nos, DG SET Machine (250 KVA including installation and Shed) - 1 No
77.6	Maintenance of Office Equipment of Nodal DRTB centers	Per unit/ Per Annum	36000	0.36	0	0.00	0	0.00	<p><b>Ongoing Activity:</b> Maintenance of Office equipments and internet facility @ 3000/- per month per NDRTB Centre. <b>Budget: Rs.3000/- per month X 12 months X 3 NDRTBC</b></p>

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Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
77.7	Procurement of Drugs	Lumpsum	2000000	20.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Emergency procurement of drugs in case short supply from CTD</b>                      Justification: Fund proposed as per last year's approval                      All anti TB drugs supplied by CTD but at times local procurement of drugs for a period of 6 months is done when there is interruption of central supply                      Budget approved for procurement at State &amp; district level for meting procurement gaps                      1 .MDR Drugs, lumsum mount: Rs.10.00 Lakhs                      2. XDR Drugs, lumsum mount: Rs.10.00 Lakhs                      Budget revised to 20Lakhs expecting 20% hke in DRTB patient.  <b>Details at NTEP Write-up Annexure 3 -NTEP Drugs</b></p>
77.8	Procurement of sleeves and drug boxes					0.00		0.00	<p><b>Ongoing Activity</b>  <b>Justification:</b> To ensure adherence DRTB Treatment use of IT technology in the form of MERM Drug boxes may be proposed in PIP 2024-25 and 2025-26.</p>
77.8.1	New MERM Drug Boxes for DRTB Patients	Per Box	4000	0.04		0.00		0.00	To be taken up through Innovation fund placed in HSS13, sl-198
77.8.2	Old MERM boxes to be refurbished	Per Box	1500	0.02	0	0.00	0	0.00	Not proposed in 2024-25
77.9	Laboratory Materials and Consumables for IRLs, CDST & Molecular Diagnostics					0.57		0.57	<b>Lab consumables for the State IRL (21 districts tagged) &amp; NRL (10 districts tagged)</b>
77.9.1	For LC and LC-DST tests	Lumpsum	14610840	146.11	0	0.00	0	0.00	<p><b>Ongoing Activity</b>                      Background:                      Indicative cost of Lab consumables required for 1000 number of LC and LC-DST tests (excluding GST) is Rs 6,41,974.                      LC and LC DST ideally to be done for all RR MTB cases, H monopoly cases and Follow up cases of all DRTB cases.                      Considering scenario of only 21% interim FU and 31% final FU , it is proposed to do 50% FU by LC of all DRTB cases i.e at least 3 FUs of all DRTB cases.                      Total C&amp;DST conducted in IRL and NRL in 2021 is around 7000.Expecting 20% more tests during 2022, total C&amp;DST to be conducted in 2022 is 8400.                      Expected cost of Lab consumables required for 8400 number of LC and LC-DST tests is 8.4 x Rs.6,41,974= 53,92,582.                      Considering 5% GST and 5% inflation rate, total amount is 5392582 + 5% of 5392582 + 5% of 5392582 = <b>Rs 59,31,840 (Say Rs. 59.32 Lakhs)</b>  <b>Lab Consumables requirement Non proprietary items for CDST &amp; LPA = Rs.86.79 Lakhs</b>  <b>Total Budget requirement = Rs. 59.32 Lakhs + Rs.86.79 Lakhs =Rs.146.11 Lakhs</b>  <b>Budget Proposed for 2024-26 :Rs. Rs.36.53 lakhs per year (25% of total budget requirement)</b></p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
77.9.2	For LPA tests	Lumpsum	6780334	67.80	0	0.00	0	0.00	<p><b>Ongoing Activity</b> Background: Indicative cost of Lab consumables required for 1000 number of LPA tests (excluding GST) = Rs 3,08,197 LPA ideally to be done for all MTB detected in NAAT (both R sensitive and R resistant cases) and S LPA for all H monopoly cases. On an average 30,000 to 33,000 cases to be tested for LPA annually (Calculated based on data from CBNAAT Lab indicator report, Quarterly PMDT reporting Google spreadsheet and microbiologically confirmed cases from Nikshay). Around 50% RS MTB cases are sent for F LPA, 92% RR MTB cases are sent for S LPA and 73% of H monopoly cases are sent for S LPA. Considering only 2 C&amp;DST Labs presently doing LPA (IRL Cuttack &amp; NRL BBSR) and LPA conducted around 15,100 per annum in 2021 (around 46% of total load). It is proposed to do 60% LPA during this FY – for approx. 20,000 samples (60% of 33,000 =19800) Expected indicative cost of Lab consumables required for 20,000 number of LPA tests excluding GST = Rs 20 x 3,08,197 = Rs 61,63,940 (GST @5% of 61,63,940 = Rs 3,08,197 + Inflation@ 5% = Rs 3,08,197) <b>Total Budget requirement = Rs 67,80,334 (Say Rs. 67.80 Lakhs)</b> <b>Funds to be kept at State Level</b> <b>Budget Proposed for 2024-26 : Rs. 16.95 Lakhs per year (25% of total budget requirement)</b></p>
77.9.3	<b>Cartridges CBNAAT / TrueNat machines</b>					0.00		0.00	<b>Ongoing Activity:</b>
77.9.3.1	Procurement of Cartridges CBNAAT	Per unit	1100	0.01	0	0.00	0	0.00	<b>Activity: 1 - Procurement of Cartridges CBNAAT: Proposed for 2024-25 &amp; 2025-26</b>
77.9.3.2	Procurement of TrueNAAT Chips	Per unit	720	0.01	0	0.00	0	0.00	<b>Justification for Costing:</b> As CTD is providing CBNAAT Cartridges in trenches, it is
77.9.3.3	Procurement of MTB Rif Chips	Per unit	600	0.01	0	0.00	0	0.00	decided to proposed for 25% of Annual requirement in PIP.
77.9.4	Travel cost to DR TB patient to District DR TB Centre or Nodal DR TB Centre or to district for treatment initiation/ follow up/ADR management during treatment along with one accompanying person/attendant. Patient support for investigations will be reimbursed for tests which are not available in government hospital and on prior approval.	No. of patients	1400	0.01	41	0.57	41	0.57	<p><b>Ongoing Activity:</b> The Travel cost to the DRTB patients along with the attendant shall be reimbursed to attend the distinct and Nodal DRTB Center for initiation of Treatment, follow up and managing adverse drug reaction as per CTD norm. <b>Budget: 650 Nos. of DRTB Patients X Rs.1400/- per DRTB Patients per annum</b></p>
77.10	<b>Trainings for State &amp; District Level</b>					<b>0.63</b>		<b>0.80</b>	
77.10.1	3 days state level training on TOG, RPMDT & PMTPT for district level newly joined NTEP Staffs	Per Batch	90636	0.91	0	0.00	0	0.00	<p><b>New Activity</b> <b>Justification:</b> All newly joined district level NTEP staffs to be trained on revised guidelines. <b>State Load : 15 approx.</b> <b>Budget Proposed for 2024-25: 1 batch</b> <b>Budget Proposed for 2025-26 : 1 batch</b> Implementing Agency : ATD &amp;TC, Cuttack and Provide 60% Accommodation. No RP fees for ATD&amp;TC faculties.</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
77.10.2	2 days Training of Medical Officer on TOG & RPMDT	30 Per Batch	62685	0.63	1	0.63	1	0.63	<p><b>Ongoing Activity:</b>  <b>Justification:</b>                      As guideline has been revised so it is suggested to orient the MOs on Revised guideline.  <b>Training of MOs Revised PMDT, Delamanid , Bedaquiline and AIC :</b>  <b>State load:</b> 2 MOs from each TU (322x2) + 4 MOs from 33 SDHs and 32 DHs including RGH &amp; Capital Hospital (65x4) = Total 904 participants                      Proposed load for 2 years: 930 MOs(31 batches @30/ batch)  <b>Budget Proposed for 2024-25: 37 batches</b>  <b>Budget Proposed for 2025-26: 37 batches</b></p>	
77.10.3	1 day Training of LTs of DMCs (Revised PMDT on Sample Collection & Transport) Govt. + Non Govt. at District Level.	20/ Batch	17498	0.17	0	0.00	1	0.17	<p><b>Ongoing Activity</b>  <b>Justification:</b>                      This is required only for LTs under NTEP to increase their technical expertise                      State load: 685 person (LTs from Lab)                      Approved load for 2 years: 37 batches Target for 2025-26: 37 batches (@20/ batch)  <b>Budget Proposed for 2024-25: Nil</b>  <b>Budget Proposed for 2025-26: 37 batches</b></p>	
77.10.4	PMDT, TB-comorbidity committee meeting expenditure	Per meeting	10000	0.10	0	0.00	0	0.00	<p><b>Ongoing Activity</b>                      Bi-annually Review meeting for PMDT, PMTPT, TB Co morbidity meeting and State Technical Working Group Committee meeting under NTEP.  <b>Budget Proposed for 2024-25: Rs.10000/- per meeting X 8 Meetings</b></p>	
<b>78</b>	<b>TB Harega Desh Jeetega Campaign</b>					<b>4.37</b>		<b>3.13</b>		
<b>78.1</b>	<b>ACSM (State &amp; district)</b>					<b>4.37</b>		<b>3.13</b>		
<b>78.1.1</b>	<b>Mass Media Interventions</b>					<b>0.00</b>		<b>0.00</b>	<b>Ongoing Activity</b>	
78.1.1.1	Advertisement through AIR channels	Per minute	47000	0.47	0	0.00	0	0.00	Proposed Budget @ 47,000/- per minutes for 1 minute per 24 days per year	
78.1.1.2	Advertisement through FM Channels	Per 10 minutes	20000	0.20	0	0.00	0	0.00	Timing: 10 minutes per day / month for 120 minutes in a year	
78.1.1.3	Publicity through Print Media	Per day	100000	1.00	0	0.00	0	0.00	Cost of one time advertisement for color Quarter page In 1 leading news daily is Rs. 1.00 Lakhs Timing: 1 day in a month for 12 months	
<b>78.1.2</b>	<b>Mid Media Interventions</b>					<b>0.08</b>		<b>0.08</b>	<b>Ongoing Activity</b>	
78.1.2.1	Change for hoarding	Per hoarding	1500	0.015	5	0.08	5	0.08	Change of flex of existing hoarding at District TB Center, TB Units, MCHs and District HQ Hospitals ( 314 + 32+ 12) = 358 Nos of Units	
<b>78.1.3</b>	<b>World TB Day</b>			<b>0.000</b>		<b>0.00</b>		<b>0.00</b>	<b>Ongoing Activity</b>	
78.1.3.1	TB Day observation at State level	lumpsum	120000	1.200	0	0.00	0	0.00	Approved activity: Community Mobilization, IEC material display, Signature campaign, Prize distribution (ASHA, Worker, best performing district, Best pvt.	
78.1.3.2	TB Day observation at District Level	Per District	20000	0.200	0	0.00	0	0.00	Approved activity: Community Mobilisation, IEC material display, Signature campaign at DTC level.	
<b>78.1.4</b>	<b>IPC Interventions</b>					<b>0.00</b>		<b>0.00</b>		
78.1.4.1	ACSM Activities at community level	Per SC HWC	2000	0.02	0	0.00	0	0.00	<b>New Activity</b> Details at NTEP Write-up Annexure 5 - Proposal_IEC-BCC with Community Groups at SC-HWC	

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Sl. No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>78.1.5</b>	<b>ADVOCACY (State level)</b>					<b>2.80</b>		<b>2.80</b>	<b>Ongoing Activity</b>
78.1.5.1	Sensitisation of NGOs, PRIs etc.	Per meeting	4000	0.040	4	0.16	4	0.16	4 sensitization meetings per district per year planned X 31 districts = 124 meetings @ Rs.4000/- per meeting
78.1.5.2	One day state level CME for advocacy of IMA, IPHA, IAPSM, IAP members, etc.	per day	110000	1.100	0	0.00	0	0.00	<b>New Activity</b> 1 day program : 100 participants [Rs. 1000/- per person 1000 X 100 Nos. = 1 Lakh] + Meeting materials = Rs. 100/- x 100 nos = 10,000/-
78.1.5.3	Active Case Finding Campaign	Per round	132000	1.320	2	2.64	2	2.64	<b>Ongoing Activity</b> <b>Proposal: Active Case finding for TB cases (NTEP)</b> <b>Approved Rounds:</b> Twice (Tentatively in September & Feb) <b>Mid Media Activities per round:</b> 2.1 Miking : Estimated Cost – (@ Rs. 6,000/- (@Rs.1500/- per day X 4 days) for every 10,000 population) 2.2 Printing of Poster, Leaflets, Banner etc. – Estimated Cost- (@ Rs. 5,000/- for every 10,000 population)
<b>78.1.6</b>	<b>Printing (ACSM)</b>	Per TB Champion	2000	0.02	19	0.38	9	0.18	<b>Ongoing Activity</b> Background: Total TB Champions engaged - 714 Proposal: Apron & I Card to be provided to newly engaged TB Champions. Assuming 20% drop out of 1200 TB Champions, the requirement for the year 2025-26: 240
<b>78.1.7</b>	<b>TB Mukta Panchyat</b>	Lumpsum			1	1.119	1	0.070	<b>Budget Shifted from SI.No.79 as per NPCC Comments</b> <b>New Activity</b> <b>Details at NTEP Write-up Annexure 12 -TB Mukta Panchayat</b> <b>Estimated Budget for Fy 2024-25:</b> Rs.249.38 lakhs. Budget proposed 70% of estimated budget i.e.Rs.174.57 lakhs as it is a new initiative and thus may take time for rollout. <b>Estimated Budget 2025-26:</b> Rs.167.75 lakhs. Budget proposed 70% of estimated budget i.e.Rs.117.42 lakhs as it is a new initiative and thus may take time for rollout.
<b>79</b>	<b>State specific Initiatives and Innovations</b>					<b>5.29</b>		<b>5.29</b>	
79.1	Tribal Patient Support and transportation charges	No. of patients	750	0.01	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Approval for 14 notified Tribal districts @Rs. 750/- to cover travel cost of patients and attendant (Baleswar, Gajapati, Kalahandi, Kandhamal, Keonjhar, Koraput, Malkangiri, Mayurbhanj, Nabarangpur, Rayagada, Sambalpur, Sundargarh and Nuapada &amp; Debagarh)</b> <b>Budgeted 80% looking into expenditure trend.</b>
79.3	Procurement of Airborne Infection Control (AIC) kits	Per Kit	200	0.00	2389	4.78	2389	4.78	<b>Ongoing Activity</b> <b>Proposal: Procurement of Airborne Infection Control (AIC) kits</b> <b>Budget proposed 2024-26: 45500 pulmonary microbiological confirmed cases &amp; DRTB Cases (70 % of Target Notification) X Rs.200/- per kit per case = Rs. 91 Lakhs. per year</b> <b>Details at NTEP Write-up Annexure 8 -AIC Kit</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
79.4	Vulnerability Mapping			0.00		0.00		0.00	Ongoing Activity Proposal: Vulnerability mapping for 9 tribal districts, proposed under MOTA. Details at NTEP Write-up Annexure 6 -Vulnerability Assessment
79.5	Death audit of TB patient					0.51		0.51	New Activity Details at NTEP Write-up Annexure 7 - TB Death Audit
79.5.1	Community based TB death review – TU / DTC within 21 days of occurrence of TB death	Per Review	500	0.01	94	0.47	94	0.47	Assuming 4000 deaths in a year
79.5.2	Quarterly Facility based TB death review at TU	Per Review	250	0.00	4	0.04	4	0.04	Rs. 250/- per review for 322 TUs x 4 reviews in a year
79.5.3	TB death review by District Magistrate (at least 2 TB deaths to be reviewed in every six month)	Per Review	2000	0.02	0	0.00	0	0.00	Rs. 3000/- per review to be conducted under the chairmanship of district magistrate once in every 6 months.
79.5.4	TB death review by state (at least once in every six month)	Per Review		0.00		0.00		0.00	Review to be conducted under the chairmanship of Mission Director once in every 6 months.
79.5.5	State level Capacity building of District level NTEP staffs virtually	per Batch		0.00		0.00		0.00	Once a year.
79.5.6	Capacity building of Block level staffs, MO, CHO, ASHA	per Batch		0.00		0.00		0.00	Once a year. Training shall be conducted along with Differentiated TB Care training.
<b>Total NTEP</b>						<b>201.54</b>		<b>204.18</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NDCP-5**  
**NVHCP**



S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NVHCP</b>						<b>1.52</b>	<b>2.30</b>	
<b>80</b>	<b>Prevention</b>						<b>0.40</b>	<b>1.60</b>	
<b>80.1</b>	<b>Suggested Activities as per costing template</b>						<b>0.00</b>	<b>0.00</b>	
80.1.1	Drugs ( Cash Grant i.e Vaccination for Hep B )	Lumpsum	4219300	42.193	0	0.00	0	0.00	Budget proposed under cash grant: Rs. 42.193 Lakhs for vaccination HRG for Hep B <b>Budget proposed as per calculation made in costing template by Gol</b>
80.1.2	Vaccination for HBIG	Per dose	2000	0.02	0	0.00	0	0.00	Budget proposed under cash grant: Rs. 16.00 Lakhs for vaccination HBIG <b>Budget proposed as per calculation made in costing template by Gol</b>
<b>80.2</b>	<b>Any other (please specify)</b>						<b>0.40</b>	<b>1.60</b>	
80.2.1	Outreach for demand generation, testing and treatment of Viral Hepatitis through Mobile Medical Units/NGOs/CBOs/etc	Per camp	2200	0.022	18	0.40	18	0.40	<b>Ongoing Activity: Revised on need basis the camp conducted by the Municipal corporation is reduced</b> <b>Screening at Jails / Sub Jails and Truckers Association (2022-2023) will continue</b> As HBV and HCV incidence is high among Jail intimates and truckers, they need to be screened for HBV & HCV in camp mode as they cannot be brought generally to the facilities. <b>Camp Breakup:</b> <b>For Truckers (Deliverable- minimum 50 cases will be screened in each camp)</b> 1. One camps each in 5 Municipal Corporations area in every month x 12 months = 60 Camps 2. One camps each district (30 districts) per month for Truckers/other vulnerable groups x 12 months <b>For Jail inmates</b> 1. One camp bi-monthly at 65 Jails X 6 camps per annum <b>Budget Breakup for each camp:</b> a.1 LT @ 850/- to be engaged on outsourced basis b. Refreshment cost @ 500/- c. Mobility cost @ 500/- per day per camp d. Other contingencies = 350/- <b>Total cost:- Rs. 2200/- per camp</b>
80.2.2	Incentives for Peer Educators	Per Peer Educator p.a.	120000	1.2		0.00	1	1.20	<b>New Activity</b> <b>Background:</b> A peer educator can be a person who was recovered from hepatitis or benified from the scheme or can be anyone who is working in the same objective like NGO personnel who will closely work with the TC for support in mobilisation of cases and other program related activity. <b>Total 32 TCs and 2 MTCs total =34 Nos.</b> Budget proposed : @ 10000 Rs per month i.e 120000 Rs per annum per educator(2025-26) for 34 TC/MTCs <b>Budget Revised as per NPCC recommendation</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
80.2.3	Training			-					Activity Dropped
80.2.4	<b>IEC under NVHCP</b>			0.00		0.00		0.00	<b>Ongoing Activity</b>
80.2.4.1	Advertisement through DD & local channels or scrolling					0.00		0.00	<b>Activity Dropped:</b> as the advertisement cost will be met from the IEC budget of the state
80.2.4.2	Advertisement through AIR channels					0.00		0.00	<b>Activity Dropped:</b> as the advertisement cost will be met from the IEC budget of the state
80.2.4.3	Advertisement through FM Channels	Per 10 minute	20000	0.20	0	0.00	0	0.00	<b>Ongoing activity:</b> Timing: 10 minutes per day for 20 days per year
80.2.4.4	Publicity through Print Media	Per day	100000	1.00	0	0.00	0	0.00	<b>Ongoing activity:</b> One time advertisement of Color Quarter page in 2 leading newspaper for 5 days
80.2.4.5	State Level Observation of the World Hepatitis Day	lump sum	100000	1.00	0	0.00	0	0.00	<b>Ongoing activity:</b>
80.2.4.6	District Level Observation of the World Hepatitis Day	Per District	15000	0.15	0	0.00	0	0.00	Observation of the World Hepatitis Day on 28th July 1. At State Level: Rs. 1.00 Laths (lump sum)
80.2.4.7	Posters	For Health Facilities	6	0.00	16200			0.00	<b>Activity: Taken up in the last FY</b>
80.2.4.8	Sunboard for Subcenters	Per Subcenter	0	0.00	0	0.00	0	0.00	To be met out from the Ama Hospital initiative of State Budget.
<b>81</b>	<b>Screening and Testing through facilities</b>					<b>0.43</b>		<b>0.00</b>	
81.1	<b>Suggested Activities as per costing template</b>					-		-	
81.1.1	<b>Diagnostics (Screening, Viral Load, Consumables )</b>								Budget proposed for Consumables as per the costing template
81.1.1.1	<b>Screening Test</b>								
81.1.1.1.1	Hepatitis B	Per Screening	20	0.0002	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.1.2	Hepatitis C	Per Screening	20	0.0002	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.2	<b>Confirmatory Test</b>								
81.1.1.2.1	Hepatitis B								Details at NVHCP Costing Templet Annexure
81.1.1.2.2	Hepatitis C	Per Test	1000	0.01	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.3	<b>Viral Load</b>								
81.1.1.3.1	Hepatitis B	Lumpsum	1000	0.01	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.3.2	Hepatitis C	Per Case	1000	0.01	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.4	<b>Consumables</b>								
81.1.1.4.1	Hepatitis B	Per Case	6	0.00006	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.4.2	Hepatitis C	Per Case	6	0.00006	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.5	<b>ANC Screening</b>								
81.1.1.5.1	Hepatitis B	Per Case	20	0.0002	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
81.1.1.5.2	Hepatitis C	Per Case							Details at NVHCP Costing Templet Annexure (Budgeted at zero as there will not be any Hepatitis C screening for the ANCs)
81.1.2	<b>Equipment &amp; Instruments</b>	Lump sum							Activity Dropped
81.1.3	Sample transportation cost under NVHCP	Per District	10000	0.10	0	-	0	0.00	<b>Budget Shifted from SL NO. 83 as per recommendation of NPCC</b> <b>Ongoing activity:</b> Rs.10000/- per district for emergency referral of samples to State Lab/ Other DPHL in case of exigency <b>Revised as per recommendation of NPCC</b>
81.2	Any other (please specify)					<b>0.43</b>		<b>0.00</b>	

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
81.2.1	State lab: Meeting Costs/Office expenses/Contingency	Per Annum	100000	1	0	0.00	0	0.00	<b>Ongoing Activity</b> i. Quarterly meeting Cost: @ Rs. 4000/- x 4= Rs. 16,000/- ii. Internet cost: Rs. 2000/- PM x 12= Rs. 24,000/- iii. Other Office Contingencies: Rs. 5000/- PM x 12= Rs. 60,000/-
81.2.2	MTC: Meeting Costs/Office expenses/Contingency (photocopy, internet/communication/ Resistance testing in selected cases/ Printing M & E tools/ Tablets for M & E if needed) etc)	Per Annum	300000	3		0.00		0.00	<b>Budget Shifted to SL NO. 83 as per recommendation of NPCC</b> <b>Ongoing Activity:</b> <b>Justification as in the year 2024-25 &amp; 2025-26 MKCG Berhampur is going to be functionalise as MTC apart from SCB Cuttack which has approved by Gol earlier on following heads:</b> i. Quarterly meeting Cost ii. Internet cost iii. Other Office Contingencies <b>Revised as per recommendation of NPCC</b>
81.2.3	Trainings for NVHCP								
81.2.3.1	Training of the lab technicians								<b>Activity Dropped</b> as the training has been conducted in the year 2023-24
81.2.3.2	Training for Community Volunteers								<b>Dropped</b> as not approved in the last year PIP
81.2.4	Training for State & District Microbiologists	Per Batch	127000	1.27	0	0.00	0	0.00	<b>Ongoing activity:</b> 2 days Refresher training for microbiologists of 32 DHHs at State Level. Batch size: 32 participants x 2 batch = 64 Microbiologist
81.2.5	1 day training of Medical Officers (District Level)	Per batch	42850	0.4285	1	0.43		0.00	<b>Ongoing activity:</b> <b>Participants:</b> One Medical Officer from all <b>384 CHCs, 33 SDHs &amp; 32 DHHs (One batch for each district except Ganjam, Mayurbhanj, Keonjhar &amp; Sundargarh who will conduct 2 batches for MOs)</b> District level Batch Size: 30 Duration: 1 day
81.2.6	Half day sensitisation of ASHA / ANM regarding NVHCP	Per participants							<b>Dropped.</b> The content of NVHCP to be included in the 5 days training of ASHA Module to be imparted at Sector Level
81.2.7	Printing for formats/registers under NVHCP								<b>Ongoing activity:</b> Type of registers/ reporting formats to be printed for Hep b & Hep c are follows 1. Patient testing & treatment card @ Rs. 20/- x 10000 cards (total case 4300)= Rs. 2.00 Lakh 2. other Registers and formats like treatment register, patient referral register , stock & store register, dispensing register etc will be met out of office contingencies approved for treatment centres and labs at different levels, which will be printed at state level.
81.2.7.1	Patient testing & treatment card	Per Card	10	0.00	0	0.00	0	0.00	<b>Ongoing activity:</b> Colour coded cards for all Hepatitis patients ( Yellow - Hepatitis B Positive / Blue for Hepatitis C Positive) Patient testing & treatment card @ Rs. 10/- x 5000 cards (Hep B expected cases 3772 + Hep C expected cases 568 = 4340 cases + Buffer) = Rs. 1.00 Lakh for the year 2024-25 & 2025-26 which will be printed at state level.

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
81.2.7.2	Other Registers and formats like treatment register, patient referral register , stock & store register, dispensing register etc								Not proposed as the same has been approved in the previous year PIP
82	Screening and Testing through NGOs					0.00		0.00	
82.1	PPP initiative under NVHCP								Not Proposed : Proposed activities are to be taken up through system mode.
82.2	Engagement with NGO CBO(Community Based Organizations) for outreach			-		-			- Not Proposed. Proposed activities are to be taken up through system mode.
83	Treatment					0.70		0.70	
83.1	Suggested Activities as per costing template					-		-	
83.1.1	Drugs for Hep B & C treatment (Cash & Kind )	Lumpsum	5912750	59.13	0	-	0	0.00	Budget proposed as per calculation made in costing templates
83.2	MTC: Meeting Costs/Office expenses/Contingency (photocopy, internet/communication/ Resistance testing in selected cases/ Printing M & E tools/ Tablets for M & E if needed) etc)	Per Annum	300000	3	0	0.00	0	0.00	<b>Budget Shifted from SL NO. 81.2.2 as per recommendation of NPCC</b> <b>Ongoing Activity:</b> Justification as in the year 2024-25 & 2025-26 MKCG Berhampur is going to be functionalise as MTC apart from SCB Cuttack which has approved by GoI earlier on following heads: i. Quarterly meeting Cost ii. Internet cost iii. Other Office Contingencies <b>Revised as per recommendation of NPCC</b>
83.3	Any other					0.70		0.70	
83.3.1	MTC: Management of Hep A & E					-		0.00	Activity dropped as the MTC is conducting only Hep.B & C testing, treatment & management. Hep A & E is being managed at TC establish at DHH level.
83.3.2	TC: Management of Hep A & E	Per DHH	20000	0.20	1	0.20	1	0.20	Budget approved for 32 DHHs @Rs.20,000/- per TC, for management of Outbreaks / Vulnerable groups like PW / VHND Surveillance activities. However a TC may utilize maximum Rs. 1.00 Lakh per annum
83.3.3	2 days refresher training of Medical Officers of TCs at State Level	32/Per batch	127000	1.27	0	-	0	0.00	<b>Ongoing activity:</b> 2 days Refresher training of MOS of TCs to be conducted at State Level Batchsize:32 participants
83.3.4	Training of Peer support of the Treatment sites (MTC/TCs)					-		0.00	<b>Dropped.</b> The training has been conducted in the year 2022-23
83.3.5	Training of pharmacist of the Treatment sites (MTC/TCs)	32/Per batch	58000	0.58	0	-	0	0.00	<b>Ongoing Activity:</b> One day refresher training of Pharmacists of the Treatment sites (MTC/TCs) from 38 units to be trained in Hepatology department of SCBMCH / state level <b>Batch size: 32 participants</b>
83.3.6	Training of Hospital Manager	32/Per batch	65000	0.65	0	-	0	0.00	<b>New Activity</b> Hospital Managers plays a vital role in coordination for management of Hepatitis in the TCs the so can may be kindly approved.

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
83.3.7	Sample transportation cost under NVHCP	Per District	10000	0.10		-		0.00	Budget Shifted to SL NO. 81 as per recommendation of NPCC <b>Ongoing activity:</b> Rs.10000/- per district for emergency referral of samples to State Lab/ Other DPHL in case of exigency <b>Revised as per recommendation of NPCC</b>
83.3.8	Incentives under NVHCP					-		0.00	<b>Activity Dropped:</b> As state has decided not to give additional incentive from any scheme other than the remuneration approved under PIP.
83.3.9	TC: Meeting Costs/Office expenses/Contingency	Per Unit	50000	0.50	1	0.50	1	0.50	<b>Ongoing activity:</b> <b>Background:</b> Other Registers and formats like treatment register, patient referral register, stock & store register, dispensing register etc <b>Proposal:</b> Quarterly meeting including other stake holders= 4 times per year / Internet cost / Other Office Contingencies: Paper / Printer Cartridge etc Total cost requirement for one unit: Rs.50,000/- (approved as per GoI norms)
83.3.10	<b>SVHMU Meeting Costs/ Office expenses/ Contingency / miscellaneous &amp;SVHMU: Non-recurring Equipment- (computer, printer photocopier scanner etc)</b>					-		-	<b>New Activity</b> <b>Background:</b> The state HQ where one state nodal officer, one Consultant NVHCP, One Data Manager are working for the smooth & effective implementation of the program. For day to day office work a contingency amount is needed to meet the official operational requirement.
83.3.10.1	One time procurement of Laptop/Desktop/AIO along with printer & PICO projector	Lumpsum	400000	4.00	0	-	0	0.00	<b>Proposal:</b> 1.One time procurement of 3 Laptop/Desktop/AIO along with printer & PICO projector in 2024-25 @Rs.4.00 lakhs.
83.3.10.2	Office contingency on need basis including minor purchase, internet cost etc	Per Annum	30000	0.30	0	-	0	0.00	2. Office contingency on need basis including minor purchase, internet cost etc @Rs.0.30 lakhs p.a. for 2024-25 & 2025-26
83.3.10.3	Monitoring and supervision on need basis	Per Annum	70000	0.70	0	-	0	0.00	3. Monitoring and supervision on need basis @Rs.0.70 lakhs p.a. for 2024-25 & 2025-26.
83.3.10.4	Mobility Support for National Level Meeting	Per Annum	200000	2.00	0	-	0	0.00	<b>4. Mobility Support for National Level Meeting : Per annum Lump sum Rs. 2.00 Lakhs- Proposed as suggested in NPCC</b>
<b>Total NVHCP</b>						<b>1.52</b>		<b>2.30</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NDCP-6**  
**NRCP**



NDCP-6\_NRCP

S.No.	Scheme/ Activity	Approval in 2024-26							
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NRCP</b>					<b>0.74</b>		<b>0.04</b>	
<b>84</b>	<b>Implementation of NRCP</b>					<b>0.74</b>		<b>0.04</b>	
84.1	<b>Functionalisation of Anti Rabies Clinic</b>					<b>0.70</b>		<b>-</b>	
84.1.1	Provision of Anti-Rabies Vaccine/Anti-Rabies Serum for animal bite victims	Lumpsum	126730000	1267.30	0	-	0	-	<p><b>Background</b> As per GOI mandate, provision of Anti-Rabies Vaccine/Anti rabies serum is mandatory for targeted health facilities.</p> <p><b>Ongoing Activity</b> <b>A. Anti-Rabies Vaccine/Anti-Rabies Serum</b> <b>1.Anti-Rabies Vaccine (ARV)</b> Approved rate - Rs.262/- (Rs.250/- + 5%tax, decided through competitive bidding process) Required quantity - 416112 as per the indent submitted by the district say 420000 <b>Budget - Rs.262/- x 420000 = Rs.1100.40 lakhs</b> <b>2.Inject. Equine Rabies Immunoglobulin</b> Required quantity - 77202 as per the indent submitted by the district say 77200 Budget - Rs.149/- (as per tender rate including Tax) x 77200 = <b>Rs.115.03 lakhs</b> <b>3.Human Rabies Immunoglobulin</b> Required quantity - 47814 as per the indent submitted by the district say 47800 Budget - Rs.4015/- (as per tender rate including Tax) x 47800 = <b>Rs.1919.17 lakhs</b> <b>B. Consumables, IV fluids &amp; emergency drugs for adverse reaction management - Out of State budget.</b> <b>Total Budget (A+b) - Rs.3134.60 lakhs</b> Against this estimated budget, OSMCL has procured the same in 2022-23 with the budget amounting to Rs.1267.30 lakhs. Hence, a lumpsum of Rs.1267.30 lakhs proposed per year.</p>
84.1.2	Establishment of Model Anti Rabies Clinic at DHH	Per Unit	70000	0.70	1	0.70	0	-	<p><b>Revised as per NPCC Recommendation</b> <b>Background</b> Rabies are highly infectious, fatal &amp; can affect multiple organs. As per GOI guideline in 2022-2023, the existing DHHs/SDHs/CHCs are made functional as Anti Rabies Clinics. In last year 2 model units were proposed. However, no budget was sanctioned.</p> <p><b>Proposal :</b> Model Anti Rabies Clinics shall be established in all DHHs and 2 major Hospitals i.e. Capital Hospital and RGH Rourkela.</p> <p><b>For the year 2024-25:</b> - Angul, Balasore, Bhadrak, Jajpur, Jagatsinghpur, Kendrapara, Puri, Khurda, Koraput, Rayagada, Mayurbhanj, Sundergarh, Nayagarh, Jharsuguda &amp; Kalahandi, Capital Hospital</p> <p><b>For the year 2025-26:</b> - Nawarangpur, Balangir, Bargarh, Boudh, Cuttack, Deogarh, Dhenkanal, Gajapati, Ganjam, Kandhamal, Kendujhar, Malkangiri, Nuapada, Rayagada, Sopur, RGH Rourkela</p> <p><b>Details of proposal is at NRCP Write-up justification Annexure</b></p>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
84.2	Training & Capacity Building					0.04		0.04	
84.2.1	State ToT	Per batch	75000	0.75	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Background/Current Status</b>                      Name of the training: Training of Medical Officers                      - Two Medical Officer from each district is to be trained as District ToT at the State level                      Batch Size: 32 x 2 = 64 participants                      Duration: 1 day</p>
84.2.2	District Training	per Participant	1420	0.01	3	0.04	3	0.04	<p><b>Ongoing Activity</b>                      Refresher Training under National Rabies Control Programme (Training in cascade model) for strengthening functionalisation of ARCs  <b>Participants:</b> One Medical Officer, One Pharmacist, One Staff Nurse from all <b>384 CHCs/UCHCs, 33 SDHs &amp; 32 DHHs</b>                      District level  <b>Batch Size: 30 per batch (May be vary according to the total participant of the district)</b>                      Duration: 1 day  <b>The Participants of UCHCs, Capital Hospital &amp; RGH are to be trained at respective District Head Quarter level</b></p> <p><b>Background/ Current Status</b>  <b>New Proposal</b>                      None of the pharmacists and Staff Nurses have been trained.                      However, ARV is generally administered by the Pharmacist and Staff nurse in the ARV clinic.                      Proposal                      Hence, Training of MOs / Staff Nurses / Pharmacist at the District Level will be trained on NRCP</p>
84.3	IEC/BCC					0.00		0.00	
84.3.1	Publicity through Print Media	Per Qtr Page/ per paper	100000	1.00	0	-	0	-	<p><b>Ongoing activity</b>                      - One-time advertisement of Colour Quarter page in 2 reputed newspapers for NRCP Day</p>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
84.3.2	Branding of Anti Rabbits Clinic	Per Unit	8000	0.08	0	-	-	-	<p><b>Revised as per NPCC Recommendation</b>  <b>Ongoing Activity - scale up</b>  <b>Background/Current Status</b>                      As per the GoI mandate ARV clinic declaration and branding are to be done at 32 DHHs and 33 SDHs and 384 CHCs. In FY 2022-23, 94% of the institutions achieved the target.  <b>Justification of Proposal:</b>                      It is to be observed that 60-65% of the animal bite cases are reported from the Urban areas. This FY the program is targeting to expand up to UPHC &amp; UCHC level. Following branding materials to be developed for the ARV clinic in the 2nd phase.                      1.Visible signage at the entrance as well as outside the center                      2.visible organisational Chart                      3.Time Schedule (functional hrs of ARC)                      4.Visible flow chart/ algorithm of "decision to treat"                      5.Visible IEC message                      For FY 2024-25: Branding @10000 per unit for (116 UPHC &amp; 7 UCHC) X 123 = Rs. 12.30 Lakhs</p>
84.3.3	<b>Observation of the World Rabbits Day on 28th Sept</b>			-					1. At State Level: Rs. 1.00 Lakhs 2. At District Level: Rs. 15000/- per dist x 30 dists= Rs. 4.50 lakhs
84.3.3.1	State Level	Lumpsum	100000	1.00	0	-	0	-	<b>Ongoing Activity</b>
84.3.3.2	District Level	Per District	20000	0.20		-	0	-	
84.3.4	<b>Printing of formats for Monitoring and Surveillance under NRCP</b>								
84.3.4.1	Printing of Animal Bite Register, Vaccination Cards for ARV & Formats for Monthly reporting	Lumpsum	600000	6.00			0		<p><b>Ongoing Activity</b>  <b>Background</b>                      To track, record, follow up &amp; for standardized reporting system of animal bite cases, Printing of Animal Bite Register, Vaccination Cards for ARV &amp; Formats for Monthly reporting is done for all districts.  <b>Current Status</b>                      Printing of Animal Bite Management guideline is done but only distributed to 5 Districts. So the available printing materials and guidelines will be adjusted for the FY 24-25                      Approved for 2022-23 &amp; 2023-24: Printing of Animal Bite Register, Vaccination Cards for ARV &amp; Formats for Monthly reporting.  <b>Proposal</b>                      Proposal for FY 2024-25: Not proposed as already available from the budget of 2022-23.                      Proposal for FY 2025-26: Rs.6.00 lakhs</p>

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S.No.	Scheme/ Activity	Approval in 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	FY 2024-25		FY 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
84.3.4.2	Printing of Animal Bite Management guidelines	Per guideline	300	0.00	0	-	-	-	<p><b>Ongoing Activity</b></p> <p><b>Background</b> For smooth and hastlefree management of animal bite cases, guideline is printed for all districts.</p> <p><b>Current Status</b> Printing of Animal Bite Magament guideline is done but only distributed to 5 Districts. So the available printing materials and guidelines will be adjusted for the FY 24-25</p> <p>Approved for 2022-23: Printing of Animal Bite Management guidelines for 449 institutions (say 500) / UCHC / UPHC / Municipal Corporation</p> <p><b>Proposal</b> Proposal for 2024-25: Rs.300/- X 700 nos =Rs.2.10 lakhs</p>
84.4	<b>Planning and M&amp;E</b>					-		-	
84.4.1	Monitoring and Surveillance	Lumpsum	100000	1.00	0	-	0	-	<p><b>Ongoing Activity</b></p> <p><b>Head of expenses</b> : Monitoring &amp; Supervision, Office &amp; Miscellaneous Expenditure etc.</p>
<b>Total NRCP</b>						<b>0.74</b>		<b>0.04</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-2**  
**NMHP**





## NCD-2\_NMHP

## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total NMHP</b>						7.63		6.35	
97	<b>Implementation of District Mental Health Plan</b>					7.63		6.35	
97.1	<b>DMHP Wing (HR)</b>					-			
97.2	<b>Operationalization of District Mental Health Unit at District Headquarter Hospital</b>								<b>Budgeted under HR Annexure</b>
97.3	<b>Outreach activities (Targeted Intervention)</b>					1.65		1.65	
97.3.1	Screening Camp	Per camp	15000	0.15	10	1.50	10	1.50	<p><b>Ongoing Activity:</b>  <b>Background:</b> Screening camps are conducted in outreach/distant areas for screening &amp; providing psychological intervention, counseling &amp; follow up services to the persons with mental illness &amp; others by the District Mental Health unit team. In this year the screening camp will be conducted at PHC HWC level.  <b>Current Status:</b>  Target: In the year 2022-23 (117 camps) &amp; 2023-24 (156 camps)  Achievement: 2022-23 (117 camps) &amp; till June, 2023 (58 camps)  <b>Proposal:</b>  I. Districts having &lt;6 CHC -06 camps /per year (5 districts)  II. Districts having 6-15 CHC -08 camps/per year (10 districts)  III. Districts having 16-20 CHC-10 camps/per year (11 districts)  IV. Districts having &gt;20 CHC -12 camps/per year(4 districts)  V. @5 camps /Per year *2 units=10 camps (CH, BBSR &amp; RGH, Rourkela)  Total 278 camps will be organised per year @15,000 per camp for 30 districts &amp; Urban Mental Health Wing at BBSR &amp; Rourkela  <b>Expenditure Heads:</b> Psychotropic drugs, Refreshment cost of service providers, PwMI &amp; their Caregivers, per diem to MOs/skilled mental health professionals/pharmacists/mobilizers of PwMI(ASHAs/AWWs) to the screening camp, awareness activity for screening camp.  -Drugs out of EDL hence dropped  -Mobility cost dropped</p>
97.3.2	Life Skill Education for School teachers								Activity to be dropped & integrated with school health programme. However module for life skill education to be included in the curriculum of school health Ambassadors for which the cost of booklet is kept at FMR code 12.4.2

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.3.3	Work place Stress Management Sessions	Per Session	3000	0.03	5	0.15	5	0.15	<p><b>Ongoing Activity:</b>  <b>Background:</b>            Work place stress management sessions to be organised at health care facilities, Colleges/School teachers, other Govt. offices., Municipal Corps, migrants, factory workers, orphanages, child care institutions, rehab homes, shelter homes , old age home, swadhar grahas etc.</p> <p><b>Proposal for FY 2024-25 &amp; 2025-26:</b>            -FAQs to be developed &amp; shared with all HCF ,colleges/School teachers, other Govt. offices &amp; the cost of FAQ is kept at FMR code 12.4.2            -The unit cost per session upto Rs.3000/-</p> <p><b>Sessions proposed for</b>            District having &lt;10 CHCs= 8 Sessions per district /per year (10 districts)            District having 10-20 CHCs=-10 sessions per district /per year (18 districts)            District having &gt;20 CHC=12 sessions per district /per year (2 districts)            For Urban mental health unit (CH, BBSR &amp; RGH, Rourkela)= @5 sessions per inst./ per year =10 sessions (2 institutions)  <b>Total Sessions required per year= 294 Sessions</b>  <b>Participants per session:</b>            for schools &amp; colleges= 100 persons            for Health Care Facilities= 50- 60 persons            for Govt. Offices= 20-25 persons</p>
97.4	<b>Training &amp; capacity building</b>					<b>0.40</b>		<b>0.40</b>	<p>Training Budget Maximum as per guidelines is @ Rs.4.00 lakhs per district X 30 districts = Rs. 120.00 lakhs. But Total Training Budget proposed in 2024-25 is Rs. 44.25 lakhs only &amp; Rs.39.06 lakhs proposed in 2025-26</p>
97.4.1	One day training of District Public Health Officers on mental health	30/batch	60000	0.60	0	0.00		0.00	<p><b>Ongoing Activity:</b>  <b>Proposal for 2024-25: 1 batch</b>            One day training of District Public Health Officers of 30 districts on mental health to strengthen the Mental Health Units.  <b>Not Proposed in 2025-26</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.4.2	Training of Clinical Psychologist, Psychiatric Social Worker & Psychaitric Nurse								<b>New Activity</b> <b>Proposal for 2024-25: 30 ongoing DMHP Units</b> Clinical Psychologist, Psychiatric Social Worker & Psychiatric Nurse will be trained on mental health Act 2017 & National Mental Health Programme activities at MHI, SCBMCH, Cuttack & DMHP/DAC unit in the campus of MKCGMCH, Berhampur @30/batch for 2 days <b>Proposal for 2025-26: 02 New Mental Health Wing</b> Clinical Psychologist, Psychiatric Social Worker & Psychiatric Nurse , Community Nurse & Case Registry Assistant will be trained on mental health Act 2017 ,National Mental Health Programme activities & reporting format at MHI, SCBMCH, Cuttack & DMHP/DAC unit in the campus of MKCGMCH, Berhampur @3000/per person for 2 days
97.4.2.1	Training of Clinical Psychologist, Psychiatric Social Worker & Psychaitric Nurse in 2024-25	30/batch	97875	0.98	0	0.00		0.00	
97.4.2.2	Training of Clinical Psychologist, Psychiatric Social Worker & Psychaitric Nurse in 2025-26	Per Person	3000	0.03		0.00	0	0.00	
97.4.3	Training of Community Nurse & Case Registry Assistant	30/batch	97875	0.98	0	0.00		0.00	<b>New Activity</b> <b>Proposal for 30 ongoing DMHP Units</b> Community Nurse & Case Registry Assistant will be trained on National Mental Health Programme activities & reporting format at MHI, SCBMCH, Cuttack & DMHP/DAC unit in the campus of MKCGMCH, Berhampur @30/batch for 2 days
97.4.4	Training of Counsellor	20/batch	97875	0.98	0	0.00	0	0.00	<b>New Activity</b> <b>Proposal for 2024-25:</b> Counselor will be trained on Counseling skills through counselor module & National Mental Health Programme activities at MHI, SCBMCH, Cuttack & DMHP/DAC unit in the campus of MKCGMCH, Berhampur @20 /batch for 3 days <b>Proposal for 2025-26:</b> Counselor will be trained(Refresher training) on Counseling skills & National Mental Health Programme activities at MHI, SCBMCH, Cuttack & DMHP/DAC unit in the campus of MKCGMCH, Berhampur @20 /batch for 3 days

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.4.5	One day Training of PHC Medical Officers/ Nurses/ Pharmacists from HWC/ PHEO/Paramedical Workers / Other Health Staff working / PRI Members/ NGO-PPP Members/ Traditional Healers	30/ batch	40000	0.40	1	0.40	1	0.40	<p><b>Ongoing Activity:</b>  <b>Background :</b> Multigroup training for PHC Medical Officers/ Nurses/ Pharmacists from HWC/ PHEO/Paramedical Workers / Other Health Staff working / PRI Members/ NGO-PPP Members/ Traditional Healers with an average of 2-3 members from each group for early detection of mental health illness, timely referral of cases to DMHP unit.  <b>Current Status:</b>                      Target: In the year 2022-23 (92 batches) &amp; 2023-24 (120 batches)                      Achievement: 2022-23 (84 batches) &amp; till June, 2023 (21 batches)  <b>Proposal for FY 2024-25 &amp; 2025-26:</b>                      Total 92 batches of training at district level is proposed @40,000 per batch per year</p>
97.5	<b>IEC/BCC &amp; Printing</b>					<b>1.58</b>		<b>0.30</b>	<p><b>Proposal for 2024-25:</b>                      Maximum Budget limit is Rs. 4.00 lakhs per district X 30 districts = Rs. 120.00 lakhs. But Total Budget proposed is Rs. 79.60 lakhs  <b>Proposal for 2025-26:</b>                      Maximum Budget limit is Rs. 4.00 lakhs per district X 30 districts = Rs. 120.00 lakhs. But Total Budget proposed is Rs.21.10 lakhs</p>
97.5.1	<b>Mass Media</b>								
97.5.1.2	Publicity through Print Media for Mental Health and TM Cell	Per Display	10000	0.10	0	0.00	0	0.00	Cost of one time advertisement for color Quarter page In 1 leading news daily is Rs. 1.00 Lakhs Timing: 12 advt. per Annum
97.5.2	<b>Mid Media</b>			-					
97.5.2.1	Observation of Mental Health Day at State & District Level	Lumpsum	20000	0.20	1	0.20	1	0.20	<p><b>Ongoing Activity</b>  <b>Activities to be taken up during observance of Mental Health Day:</b>                      i. Sensitization meetings with students of schools/colleges                      ii. Quiz/essay competition among students of schools/colleges                      iii. Printing of annual reports                      iv. Sensitization meeting at orphanages, CCIs, rehab homes, old age homes                      v. Sensitization of judicial staffs, police, prison staffs , WCD staffs, SSEPD staffs, SHG groups, Zilla Parisad members.                      vi. Intersectoral meeting                      vii. NGO-PPP sensitization  <b>Proposal for 2024-26:</b>                      1. State Level: Rs.1.00 lakh                      2. District Level: Rs.0.20 lakhs per DHH X 32 DHH= Rs.6.40 lakhs</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.5.2.2	Observation of Mental Health Day at CHC Level	Per CHC	2000	0.02	0	0.00	0	0.00	<p><b>New activity:</b> Proposal for Mental Health Day observation meeting at all CHCs Activities to be taken up during observance of Mental Health Day: i. Sensitization meetings with students of schools / colleges ii. Quiz/essay competition among students of schools/colleges iii. Sensitization of CHOs, ANM,ASHA, AWW regarding popularization of Tele MANAS number <b>Budget Proposed for FY 2024-25 &amp; 2025-26:</b> Rs. 2,000 per CHC x 375 CHCs=Rs.7.50 Lakhs</p>
97.5.3	<b>Printing activities under NMHP</b>			-					-
97.5.3.1	FAQs on mental illness	Per FAQ	20	0.00	0	0.00		0.00	This has to be distributed among 4000 ST school students @20 /per school
97.5.3.2	Booklet on mental health awareness for CHOs and Schools	Booklet for CHOs and Teachers	425	0.00	300	1.28		0.00	6,000 booklet on mental health to be printed & shared with CHOs in first phase @125/- per booklet for screening, diagnosis & referral of patient to DMHP Unit; Life Skill Education Booklet @300/- for 4000 ST Schools to educate the children regarding signs & symptoms & intervention on mental health disorders
97.5.3.3	Mental health treatment card	Lumpsum	20	0.00	500	0.10	500	0.10	In the previous year, the new case detection was around 26,000. Therefore, we propose 25000 Mental Health Treatment Card for new case detection Rs.20/- per card to be given at district level and for two new Mental Health Units at BBSR & Rourkella
97.6	<b>Drugs and supplies</b>					4.00		4.00	<p>Cost Norm for 2024-25: @Rs.14.00 lakhs per district x 30 districts = Rs,420.00 lakhs. Budget proposed Rs.212.50 lakhs Cost Norm for 2025-26: @Rs.14.00 lakhs per district x 30 districts = Rs,420.00 lakhs. Budget proposed Rs.202.00 lakhs</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.6.1	Drugs	Lumpsum	400000	4.00	1	4.00	1	4.00	<p><b>Ongoing Activity:</b> Non EDL items/drugs shall be procured &amp; provided to patient with mental illness as per prescription out of this fund.</p> <p><b>Proposed amount for Drugs:</b></p> <ol style="list-style-type: none"> <li>Districts having &lt;6 CHC@ 4 Lakhs per district x 4 districts= Rs 16.00 Lakhs</li> <li>Districts having 6-15 CHC @6 lakhs per district x 17 districts= Rs. 102.00 Lakhs</li> <li>Districts having 16-20 CHC @ 8 lakhs per district x 7 districts= Rs. 56.00 Lakhs</li> <li>Districts having &gt;20 CHC @10 Lakhs per district x 2 districts= Rs. 20.00 Lakhs</li> <li>Drugs for City Mental Health wing at two major hospitals at Capital Hospital &amp; RGH Rourkela of Bhubaneswar MC &amp; Rourkela MC @ Rs. 4.00 lakhs per unit x 2 units= Rs. 8.00 Lakhs</li> </ol> <p><b>Total budget proposal for FY 2024-25 &amp; 2025-26: Rs. 202.00 Lakhs for all 30 districts.</b></p>
97.6.2	Equipment (PICO projector & pendrive/CD )	Per unit	35000	0.35	0	0.00		0.00	Under District Mental Health programme, different activities are conducted like outreach camps, fixed day visit etc. For this, we need a PICO projector @ 35000/-/district
97.7	Planning and M&E			-		-		-	<p><b>Activity Inprinciple Approved. Budget to be met out of HSS-11_SI.No.194</b></p> <p>Maximum Budget limit is Rs. 5.50 lakhs per district X 30 districts = Rs. 165.00 lakhs. But Budget proposed under Monitoring &amp; Evaluation is <b>Rs. 24.04 lakhs only.</b></p>
97.7.1	Miscellaneous/ Travel	Lumpsum	55000	0.55	1		1		<p><b>Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194</b></p> <p><b>Ongoing activity:.</b> <b>District MHP Cell</b> Mobility Support, contingency&amp; miscellaneous cost for District Mental Health Programme</p>
97.7.2	Operational expenses of the district centre : rent, telephone expenses, website, cartridge, tonner, minor repair of IT consumables etc.	Per District	10000	0.10	1		1		<p><b>Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194</b></p> <p><b>Ongoing activity</b> Proposed @ Rs. 10,000/- per unit x 32 units (30 districts + 2 new Mental Health units at BBSR &amp; Rourkela)= Rs. 3.20 lakhs. ( Unit cost remain unchanged)</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.8	<b>Any other activities</b>			-		0.00		0.00	
97.8.1	ASHA incentives	Per case		-		0.00		0.00	ASHA incentive is included in the package of NCD for EPS
97.8.2	<b>State Tele-Manas Cell</b>			-		0.00		0.00	Budget for 8 months under NHM & rest from Tele-Manas, proposed as per Gol guidelines.
97.8.2.1	HR			-		0.00		0.00	Budgeted under HR
97.8.2.2	IVRS-AMC	Per Unit	466620	4.67		0.00	0	0.00	<b>Amount proposed for State Tele Manas Cell i.e. MHI, Cuttack &amp; MKCG MCH Berhampur. Details at Budget is palced at NMHP Write-up Annexure-1 "Budget Tele MANAS Cell (2024-26)"</b>
97.8.2.3	Internet/ Telecom	Per Unit	799920	8.00		0.00	0	0.00	
97.8.2.4	Contigency/ Misc	Per Unit	399960	4.00		0.00	0	0.00	
97.8.3	<b>Mentoring Institute</b>			-		0.00		0.00	
97.8.3.1	HR			-		0.00		0.00	Budgeted under HR
97.8.3.2	Contigency/ Telephone/ AMC	Lumpsum	1773156	17.73		0.00	0	0.00	<b>Details at Budget is placed at NMHP Write-up Annexure-1 "Budget Tele MANAS Cell (2024-26)"</b>
97.8.3.3	Travel/ Meeting/ Research	Lumpsum	599940	6.00		0.00	0	0.00	
97.8.4	<b>DMHP Unit</b>			-		0.00		0.00	Budget for 8 months under NHM & rest from Tele-Manas
97.8.4.1	Internet Charges	Lumpsum	599940	6.00		0.00	0	0.00	<b>Details at Budget is placed at NMHP Write-up Annexure-1 "Budget Tele MANAS Cell (2024-26)"</b>
98	<b>State specific Initiatives and Innovations</b>					-		-	<b>Not proposed</b>
98.1	NGO based activities under NMHP			-		-		0.00	Not proposed

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-3**  
**NPHCE**



## NCD-3\_NPHCE

## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
	<b>Total NPHCE</b>					<b>5.10</b>	<b>5.10</b>		
<b>99</b>	<b>Geriatric Care at DH</b>					<b>5.10</b>	<b>5.10</b>		
99.1	Machinery & Equipment-Recurring GIA for DH @ 3 lakh/ CHC @ 0.50 lakh/ PHC @ 0.20 lakh					4.00	4.00	Ongoing Activity 1. For DHH: 1.1 Proposal for DHH with functional Geriatric Wards Budget: Rs.300000/- X 32 = Rs.96.00 lakhs (Gol norm - Rs.3.00 lakhs per annum)	
99.1.1	Recurring Cost for Functional Geriatric Wards at DHH	Per DHH	300000	3.00	1	3.00	1	3.00	Ongoing Activity Recurring Equipments for Geriatric Wards at DHH are: a) Intermittent Cervical traction b) Walking Gait training equipment c) Walking Sticks d) Walking Sticks e) Shoulder wheels f) Pulley g) Walker (Ordinary) h) Cervical Traction ( Manual) This will also include the recurring EIF as per guidelines.
99.1.2	Recurring Cost for for DHH with Physiotherapy Wing	Lumpsum	100000	1.00	1	1.00	1	1.00	Ongoing Activity- may be consider for approval Operational Cost for Integrated Physiotherapy Unit (IPU) of DHHs Recurring cost proposed: i. @ Rs1.50 Lakh per DHH consists of >= 10 Blocks -16 DHHs ii @ Rs.1.00 lakhs for DHHs <= 10 Blocks- 16 DHHs ( Capital Hospital & RGH included) <b>Financial implication: Rs 40.00Lakh</b> 16 DHH @1.5 Lakh X 16 DHHs= Rs. 24.00 Lakh 16 DHH @ Rs 1.00Lakh X 16 DHHs= Rs..16.00 Lakh
99.1.3	Drugs and supplies for NPHCE							0.00	State Supply. No new proposal under NHM. Gol norms- Rs.10.00 lakhs per District
<b>99.2</b>	<b>Non- Recurring Cost</b>					<b>0.00</b>	<b>0.00</b>		
99.2.1	Non-recurring GIA: Machinery & Equipment for DH	Lumpsum		0.00		0.00		0.00	
99.2.2	Non-recurring GIA: Furniture of Geriatrics Unit with 10 beds and OPD facilities at DH	Per DHH		0.00		0.00		0.00	No New Proposal in the current year, already saturated

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
99.3	Training & Capacity building					0.85		0.85	
99.3.1	Training of doctors and staff at DH level	Per DHH	85000	0.85	1	0.85	1	0.85	<p><b>Background:</b>  <b>Proposal:</b>                      a) Target for FY 2024-25: Two batches each purposed per district consists of &gt;= 10 Blocks -16 DHH=4 batches ( Rs 1.16 Lakh per district for 16 District Rs.18.56 Lakh                      b) One batch MO &amp; 2 batches paramedic purposed for DHHs &lt;= 10 Blocks- 16 DHH ( Capital Hospital &amp; RGH included)= 16 batches e batch MO &amp; 32 batches paramedic total cost comes around Rs. 13.76 Lakh  <b>Duration-</b> 1 day, Venue -DHH, MO Training Unit cost Rs 0.30 Lakh - and Paramedic Unit Cost <b>Rs.0.28 Lakh</b>  <b>No of Batches :</b>                      Financial implication: Rs.32.32 Lakh  <b>16 DHH @Rs.1.16 Lakh X 16 DHHs= Rs.18.56 Lakh (4 batches)</b>  <b>16 DHH @Rs.0.85Lakh X 16 DHHs= Rs.13.76 Lakh (3 batches)</b></p>
99.3.2	Orientation cum Refresher Training of Programme Officers of Districts	30/ batch	90000	0.90	0	0.00	0	0.00	<p><b>Ongoing activity:</b>                      Proposal: One day orientation cum refresher training of DPHO, ADPHO ( DC)/MO Geriatric ward, Epidemiologist &amp; AM , NCD at State Level                      State Load: 120 person of 30 Districts  <b>Load for 2024-25: 4 batches (@30/batch)</b>  <b>Load for 2025-26: 4 batches (@30/batch)</b></p>
99.3.3	Any other (please specify)- State level training of physiotherapist on Elderly Care	30/ batch	200000	2.00	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Proposal: Refresher Training of existing physiotherapists</b>                      Integrated Physiotherapy Unit (IPU): During FY 22-23, Integrated Physiotherapy is functioning in all 32 DHH, 115 CHCs/SDHs as per key Deliverable mandate of Gol.                      • Total in Position Physiotherapists at DHH level: 85 (2-3 Physiotherapists per DHH, 4 at PGIMER and Capital Hospital &amp; 2 at RGH Rourkela)                      • Total in Position Physiotherapists at SDH/CHCs level: 17 (1 Physiotherapist per SDH/CHCs) &amp; Recruitment already in process for 98 Physiotherapists. <b>(Total Physiotherapist 85+17+98=200)</b>                      Integrated physiotherapy units (IPU) have been established at 147 public health facilities (32 DHHs &amp; 115 SDHs/CHC). In these public health facilities 200 Physiotherapist have been engaged.  <b>State Load: 200 person</b>  <b>Load for 2024-25: 3 batches (30/ Batch)</b>  <b>Load for 2025-26: 3 batches (30/ Batch)</b>                      Duration of Training-2 days</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
99.4	Printing activities under NPHCE	Lumpsum	25000	0.25	1	0.25	1	0.25	CGA - Comprehensive Geriatric Assessment Format printing and Fitness book printing in Odia ( regional Language) for DHHs 1. DHHs Recurring cost proposed @ Rs.0.30 Lakh per DHH consists of >= 10 Blocks -16 DHH=Rs 4.80 lakh 2. DHHs recurring cost proposed @Rs.0.25 lakhs for DHHs <= 10 Blocks-16 DHH ( Capital Hospital & RGH included)= Rs 4.00 Lakh Financial implication: <b>Rs 8.80Lakh</b> <b>(To be met from Budget of Rs. 1.20 lakh per CHC for Training IEC and Printing activities as per guidelines)</b>
100	<b>Geriatric Care at CHC/SDH</b>					0.00		0.00	
100.1	<b>Recurring GIA: Machinery &amp; Equipment for DH @ 3 lakh/ CHC @ 0.50 lakh/ PHC @ 0.20 lakh</b>								
100.1.1	<b>Recurring Cost for for SDH&amp; CHC with physiotherapy wing</b>								<b>Proposal for 2024-25:</b> <b>Recurring Cost for Existing 115 IPU's operational as ongoing activities.</b> 1. For 115 existing SDHs/CHCs IPU : @Rs.0.50 lakh per unit X 115 = Rs. 57.50 Lakhs (Gol Norm: Rs.0.50 lakhs) <b>Proposal for 2025-26:</b> <b>Recurring Cost for Existing 115 IPU's &amp; New 163 IPU's ongoing activities.</b> 1. For 115 existing SDHs/CHCs IPU & 163 New IPU's: @Rs.0.30/- per unit X278 = Rs. 83.40 Lakhs (Gol Norm: Rs.0.50 lakhs)
100.1.1.1	Recurring Cost for SDH& CHC with physiotherapy wing 2024-25	Per SDH/CHC	50000	0.50	0	0.00		0.00	
100.1.1.2	Recurring Cost for for SDH& CHC with physiotherapy wing 2025-26	Per SDH/CHC	30000	0.30		0.00	0	0.00	
100.2	Non-recurring GIA: Machinery & Equipment for SDH & CHC	Lumpsum	300000	3.00		0.00		0.00	<b>Shifted to State Specific initiatives</b>
100.3	Training of doctors and staff at SDH/CHC level under NPHCE			0.00		0.00		0.00	Mentoring for skill upgradation of physiotherapist at CHC/ SDHs will be done by physiotherapist at DHH level, hence no additional training proposed.

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
101	Geriatric Care at PHC					0.00		0.00	
101.1	Aids and Appliances for Sub-Centre/HWC Sub Centre	per SC-HWC	10000	0.10	0	0.00	0	0.00	<p><b>Proposal:</b> Essential supportive equipment/instruments for needy patients (for SC HWC level - For FY 2024-25: 6020 SC HWC &amp; for FY 2025-26: 668 new SC HWC )</p> <p>As per NPHCE OG, the home bound/ bed ridden cases may require calipers (knee brace), walker, walking-stick, tripod stick, clutches (elbow &amp; axillary), foldable wheel chair, weight cuff (various weights), bed pan, portable commode, air-bed and other supportive devices for making them ambulatory. A set of such equipments / instruments shall be kept at SC-HWC level. The devices are to be provided to home bound / bed ridden needy persons.</p> <p><b>Mode of Utilisation of EIF</b></p> <ol style="list-style-type: none"> <li>1. A set of such equipments / instruments shall require and kept at SC-HWC level.</li> <li>2. The devices are to be provided to needy persons as per advice of team (team consist of MO/ MO AYUSH Physiotherapist / CHO /HW-M ) after due home visit to concerned person by respective service provider.</li> <li>3. Proper stock, store and distribution register has to be maintained for record. Existing procedure and responsible person for the SC HWC will maintain the register and MO will verify the register accordingly. The recipient signature and detail clearly may be maintained.</li> </ol> <p>Proposal: @Rs.10,000/- per SC HWC( Gol norms-Rs10,000/- SC-HWC(recurring))</p>
101.2	Non-recurring GIA: Machinery & Equipment for PHC	Per HWC	20000	0.20	0	0.00	0	0.00	<p>Background: Ongoing Activity:</p> <p><b>Kit for Physiotherapists ( For delivery of extended Physiotherapy services)</b></p> <p>Empanelled physiotherapists have been engaged and tagged for conducting both facility based &amp; home based extended physiotherapy services. These physiotherapists are assigned for two days in a week for home- bound cases ( Attending minimum 4 home bound/ bed ridden cases per visit) .</p> <p><b>Proposal:</b> Out of total 1412 HWC( PHC/UPHC) in the State, kit procurement has been completed for 280 nos of HWC (PHC/UPHC) and for the balance 1132 HWC (PHC/UPHC) fund is proposed in 2024-26.</p> <p>FY 24-25- 557 ,FY 25-26-575</p> <p>Proposed Kit contains:( Non recurring)</p> <ol style="list-style-type: none"> <li>1. Tens:1 Nos/2. Tens + MST:1 Nos,3. Portable Ultrasound:1 Nos,4. Therabands Set:1 Nos,5. Hand Gripper:1 Nos,6. Portable Pulleys:1 Nos,7. Finger Extensor Band:1 Nos,8. Ultrasound Gel Bottle:1 Nos,9. Cotton Roll:1 Nos,10. Carry Bag:1 Nos</li> </ol> <p>For equipment budget proposed Rs 0.20 Lakh per HWC( Gol norms Rs 0.30 Lakh per PHC)</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
101.3	Training of doctors and staff at PHC level under NPHCE			0.00		0.00		0.00	Not Proposed
102	<b>Community Based Intervention</b>					-		-	
102.1	Miscellaneous including Travel/ POL/ Stationary/ Communications/ Drugs etc.					-			
102.1.1	Mobility support cost for Home Visit to bed ridden and other home bound cases need Physiotherapy Services	Per day per worker	150	0.00		-		0.00	<p>In the FY 2022-24 Fund has been approved for empanelled physiotherapists to take-up fixed day services at PHC HWCs &amp; extended home based services for home bound &amp; bedridden cases have been approved under NHM PIP 2021-22.</p> <p>in the FY 22-23 home based elderly care provided to 12283 Nos of Elderly person</p> <p>Empanelled physiotherapists have been engaged and tagged to 2-3 PHC HWCs for conducting fixed day physiotrapy services. These physiotherapists are also assigned two days (Deliverable: Attending minimum 4 home bound/ bed ridden cases at their home per visit.) in a week for attend home bound cases. One Day Static Clinic at PHC-HWCs in a week for 2 Hours. Physiotherapy equipment/ instrument for fix day facility based physiotherapy services have already been approved &amp; Equipment for 280 PHC HWC was approved in PIP 22-23.</p> <p><b>Fund proposed in CPHC -HSS-8.4.2 extended Physiotherapy Service</b></p>
102.1.2	Home based care for bed-ridden elderly under NPHCE					-			<p>In the FY 2022-24 Fund has been approved for empanelled physiotherapists to take-up fixed day services at PHC HWCs &amp; extended home based services for home bound &amp; bedridden cases have been approved under NHM PIP 2021-22.</p> <p>in the FY 22-23 home based elderly care provided to 12283 Nos of Elderly person</p> <p>Empanelled physiotherapists have been engaged and tagged to 2-3 PHC HWCs for conducting fixed day physiotrapy services. These physiotherapists are also assigned two days (Deliverable: Attending minimum 4 home bound/ bed ridden cases at their home per visit.) in a week for attend home bound cases. One Day Static Clinic at PHC-HWCs in a week for 2 Hours. Physiotherapy equipment/ instrument for fix day facility based physiotherapy services have already been approved &amp; Equipment for 280 PHC HWC was approved in PIP 22-23.</p> <p><b>Fund proposed in CPHC -HSS-8.4.2 extended Physiotherapy Service</b></p>
102.2	IEC/BCC activities under NPHCE					0.00		0.00	Maximum Budget for IEC, Printing is Rs. 2.00 lakhs per district X 30 districts = Rs. 60.00 lakhs

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
102.2.1	IPC,Group activities and mass media for NPHCE								
102.2.1.1	Production of TV & AV Spot on geriatric care	Lumpsum	500000	5.00		0.00		0.00	Already completed in 2021-22
102.2.1.2	Telecast in DD & Local Channels			0.00		0.00		0.00	Activity dropped
102.2.1.3	Broadcast in FM Radio	Per day	19350	0.19	0	0.00	0	0.00	Timing: 10 minutes per day for 5 days per year
102.2.1.4	Sensitization programme at Old Age Home	Per District	5000	0.05	0	0.00	0	0.00	
102.2.2	<b>Celebration of days-ie International Day for older persons</b>								
102.2.2.1	Observance of International Day for Elderly at State Level			0.00		0.00		0.00	Activity dropped
102.2.2.2	<b>Observance of International Day for Elderly at District Level</b>								<p><b>Proposal-1</b> Observance of International Day for Elderly at District Level: @Rs.15000/- per district X 30 district= Rs.4.50 lakhs</p> <p><b>Proposal-2</b> IDOP will be observed for a period of 7 days in the month of Oct. Detail of Financial implication: 1. pre camp propaganda for 3 days prior to IDOP- Rs 3000 per block for 314 block.=Rs.9.42 Lakh 2. Organizing screening camp for 1394 PHC HWC ( PHC &amp; UPHC), @ Rs3000 per camp/HWC = Rs.41.82 Lakh Proposed 96%</p>
102.2.2.1	Observance at District Level	Per District	15000	0.15	0	0.00	0	0.00	
102.2.2.2	Observance at Block Level	Per Block	3000	0.03	0	0.00	0	0.00	
102.2.2.3	Observance at Block Level	Per PHC	3000	0.03	0	0.00	0	0.00	
102.2.3	HWC level IEC/BCC Activities			0.00		0.00		0.00	Funds under HWC IEC/BCC head
102.2.4	Advertisement in leading Local Dailies	Per Unit	100000	1.00	0	0.00	0	0.00	One time advertisement of Colour Quarter page in 2 newspaper for 2 days

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
103	State specific Initiatives and Innovations					0.00		0.00	
103.1	Non-recurring GIA: Machinery & Equipment for SDH & CHC	Lumpsum	300000	3.00	0	0.00	0	0.00	<p><b>Proposal: FY 2024-25</b>                      Non - Recurring Cost for <b>Integrated Physiotherapy Units- Rs. 3.00 Lakhs for Equipments</b> as per need based. List of the Equipment and estimated cost mentioned below:                      1. Lumbar &amp; Cervical traction with Bed: Rs. 50,000                      2. Interferential Current therapy Unit (Combo) with trolley-Rs. 30,000                      3. Trans-Coetaneous Electrical Nerve Stimulation Unit-Rs. Rs.15,000                      4. Muscle Stimulator Unit (FC/GC)- Rs. 15,000                      5. Therapeutic Ultrasound Unit (Dual Frequency) with trolley: Rs.40,000                      6. Infra Red Therapy Unit with Stand: Rs. 15,000                      7. Hydro Cooler with fomentation Unit: Rs. 15,000                      8. Paraffin Wax Bath Unit: Rs. 15,000                      9. Shoulder Wheel, Over head Pulley, Shoulder Ladder (Set): Rs.10,000                      10. Treatment wooden beds with matters (2 units): Rs. 15,000/-                      11. Parallel Bar, Stair Climber, Quadriceps Table: Rs. 20,000/-                      12. Short wave Diathermy : Rs. 50,000/-                      13. Diagnostic Set Like X-Ray Viewer,/Stethoscope/BP Apparatus, Inch tape/ Goniometer/Knee Hammer etc. : Rs. 10,000/-  <b>Total estimate cost of Equipment per unit is @ Rs. 3.0 Lakhs</b>  <b>FY 2024-25:</b>                      Expanded to 163 SDHs/CHCs : @Rs.3.00 Lakhs /- per unit X 163 units  <b>FY 2025-26:</b>                      Expanded to 136 SDHs/CHCs : @Rs.3.00 Lakhs /- per unit X 136 units</p>
103.2	Research in the field of Geriatric health			-		-		0.00	No New Proposal in the current year
103.3	<b>Planning and M&amp;E</b>								
103.3.1	Workshops, Conferences & review meetings under NPHCE			-		-		0.00	Integrated NCD Programme Review Planned . Hence not budgeted under this head.
<b>GRAND TOTAL</b>						<b>5.10</b>		<b>5.10</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-4**  
**NTCP**



NCD-4\_NTCP

Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NTCP</b>					<b>1.90</b>		<b>1.92</b>	
<b>104</b>	<b>Implementation of COTPA - 2003</b>					<b>0.20</b>		<b>0.22</b>	
104.1	Coverage of Public School and Pvt School								<p><b>Ongoing activity:</b>  <b>Proposal -1:</b>  <b>New Tobacco Free Educational Institutions (ToFEI)</b>  <b>Background:</b> Since 2019 ToFEI is being implemented in the Govt High Schools of the State .  <b>Proposal</b> for FY 2024-25: 1400 School                      FY 25-26 - 1600 Schools  <b>Budget:</b> Rs.10450/- per unit/per High School  <b>Total Financial implication for FY 2024-25:</b> Rs. 10450/- per School x 1400 Schools= Rs 146.30 Lakhs  <b>Total Financial implication for FY 2025-26:</b> Rs. 10450/- per School x 1600 Schools= Rs 167.20 Lakhs  <b>Proposal -2 (New Activity):</b>  <b>Tobacco Free Educational Institutions (for Follow up and Maintenance of already certified ToFEI)</b>                      Total No of School - 4968 School                      FY- 24-25- 1988                      FY- 25-26-2980  <b>Budget:</b> Rs.2500/- per High School  <b>Total Financial implication for FY 2024-25:</b> Rs. 2500/- per School x 1988 Schools= -Rs 49.70 Lakh s  <b>Total Budget Proposed for FY 2024-25:</b> Rs. 146.30 Lakhs + Rs. 49.70 Lakhs= Rs. 196.00 Lakhs  <b>Total Financial implication for FY 2025-26:</b> Rs. 2500/- per School x 2980 Schools= -Rs 74.50 Lakh s  <b>Total Budget Proposed for FY 2025-26:</b> Rs. 167.20 Lakhs + Rs. 74.50 Lakhs= Rs. 241.70 Lakhs  <b>Detail proposal at NCD-4 NTCP Write-up Justification Annexure</b></p>
104.1.1	New Tobacco Free Educational Institutions (ToFEI)	Per Unit	10450	0.10	0	-	0	-	
104.1.2	Tobacco Free Educational Institution s( for Follow up and Maintenance of already certified ToFEI)	Per Unit	2500	0.03	0	-	0	-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
104.2	Sensitization campaign for college students and other educational institutions								<p><b>Ongoing activity</b></p> <p><b>Proposal-1:</b>  <b>Tobacco free Tobacco Free Educational Institution (College-ToFEI)</b>  <b>Background:</b> Since 2019 ToFEI is being implemented in the Govt Colleges of the State .  <b>Proposal :</b>                      2024-25:400 Colleges                      2025-26 : 477 Colleges  <b>Estimated Budget :</b> Rs.15,000/-per unit  <b>Total Financial implication for FY 2024-25:</b> Rs. 15000/- per unit x 400 colleges= Rs 60.00 Lakhs.  <b>Total Financial implication for FY 2025-26:</b> Rs. 15000/- per unit x 477colleges= Rs 71.55 Lakhs.  <b>Proposal-2( New Activities):</b>  <b>Tobacco Free Educational Institutions( for Follow up and Maintenance of ToFEI)</b>                      Certification completed College -374                      FY 24-25-187 no of College                      FY 25-26--187 No of College                      Unit Cost Rs 2500/- per College  <b>Total Financial implication for FY 2024-25:</b> Rs. 2500/- per colleges x 187 colleges= Rs 4.68 Lakhs  <b>Total Budget Proposed for FY 2024-25:</b> Rs. 60.00 lakhs + Rs. 4.68 Lakhs= Rs. 64.68 lakhs  <b>Total Financial implication for FY 2024-25:</b> Rs. 2500/- per colleges x 187 colleges= Rs 4.68 Lakhs  <b>Total Budget Proposed for FY 2024-25:</b> Rs. 71.55 lakhs + Rs. 4.68 Lakhs= Rs. 76.23 lakhs                      Detail proposal at NCD-4 NTCP Write-up Justification Annexure</p>
104.2.1	Tobacco free Tobacco Free Educational Institution (College-ToFEI)	Per Unit	15000	0.15	0	-	0	-	
104.2.2	Tobacco Free Educational Institutions( for Follow up and Maintenance of ToFEI)	Per Unit	2500	0.03	0	-	0	-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
104.3	Training of PRI's representatives/ Police personnel/ Teachers/ Transport personnel/ NGO personnel/ other stakeholders	Per batch/ 30 per batch	28000	0.28	0	-	0	-	<p><b>Proposal-1:</b>  <b>Training of PRI members (Sarpanch) on NTCP and COTPA for Tobacco Free Villages:( On going activities)</b>                      Background: For initiation of tobacco free village, the sensitization of PRI members is essential. Training of 4000 Sarapancha has already been planned in the FY 2022-24 out of 6802. The rest 2802 Srapanch will be trained in the FY: 2024-26.                      Present Status: 4000 Sarpanch will be trained by March 2024.  <b>Total batches to be trained in 2024-26:</b> 2802 participants / 30 per batch= 93 Batches  <b>Proposal for 24-25:</b> 45 Batches and 25-26: 48 Batches  <b>Budget requirement for 2024-25:</b> @Rs.28000/- per batch X 45 Batches = Rs.12.60 Lakhs  <b>Budget requirement for 2025-26:</b> @Rs..28000/- per batch X 48 Batches = Rs.13.44 Lakhs ,  <b>Justification :</b> Sensitisation of PRI very essential for COTPA and Tobacco free Village , Hence for better implementation all Sarapanch will be trained in next two years.  <b>Proposal-II:</b>Implementation of Tobacco Free Villages: Awareness, certification , Signage's to be met out from GKS Funds</p>
104.4	Printing of Chillan Books under NTCP	Per Book	50	0.00	-	-	0	-	<p><b>Already available not proposed in 2024-25</b>  <b>Proposal for 2025-26</b>  <b>Ongoing Activity</b>                      For Enforcement the Challan is essential                      Per Block 10 nos of book may be provided.                      314 Block X 10 Per Block =3140 @ Rs 50 Per Book</p>
104.5	Any Other (Case Record & Information Sheet for patients )	Per Card	10	0.00	2035	0.20	2195	0.22	<p><b>Ongoing Activity</b>  <b>Targeted Counseling as per Key Deliverable - 0.65 Lakh</b>  <b>Case Record &amp; Information Sheet for patients at TCC : Following documents required for maintaining case record of individual patient at facility level</b>                      1. Patient In-take with follow-up form (6 to7 pages)                      2. Fagerstrom Scale for detection of level of nicotine dependence (1 pager)                      3. Patient Referral Card (1 pager)                      4. Awareness leaflet (1 pager)  <b>Total: 10 pages</b>  <b>Total expected patients - 2000 per DHH per annum x 32 DHHs + Buffer</b></p>
105	Implementation of ToEFI Guideline								

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
106	<b>Tobacco Cessation</b>					1.70		1.70	
106.1	Tobacco Cessation Centre (TCC): Weekly FGD with the tobacco users								
106.2	<b>Procurement of bio-medical and other equipment: NTCP</b>								
106.2.1	Non-recurring: Equipment for DTCC			0.00		0.00			- District Tobacco Control Cell is integrated with district NCD cell. Hence, no additional budget proposed.
106.2.2	Non-recurring: Equipment for TCC	Per Unit	50000	0.50		0.00			-
106.2.3	Procurement of medicine & consumables for TCC under NTCP	Lumpsum	150000	1.50	1	1.50	1	1.50	<p><b>Ongoing activity:</b>  <b>Back Ground:</b> Provision for Pharmacology treatment for Tobacco dependence at district Tobacco cessation Centre is a essential component of NTCP.  <b>Present Status :</b> in the year 2022-23 , 1637 Pharmacotherapy sessions has been provided for Quitting the Tobacco use  <b>Proposal for 2024-25:</b>  <b>1. Procurement of medicine &amp; Consumables at DHH Level:</b> @Rs.2.00 lakhs X 32 DHHs= Rs.64.00 Lakhs( Gol norms @ 2 lakh per district for 32 DHH =Rs 64 Lakh  <b>The Fund may be distributed in following manner as per CHC &amp; Population</b>                      i. Recurring cost proposed @ Rs2.50 Lakh per DHH for districts consists of &gt;= 10 CHCs= 16 DHHs                      li. Recurring cost proposed @ Rs.1.50 lakhs per DHH for districts consists of &lt; 10 CHCs= 16 DHHs ( Capital Hospital &amp; RGH included)  <b>Financial implication for 2024-25: Rs 64.00 Lakh</b></p>
106.3	<b>Trainings under NTCP at District level</b>								
106.3.1	Orientation of Stakeholder organizations	Lumpsum	50000	0.50		-		-	
106.3.2	Training of Health Professionals	Per Batch		0.00		-		-	- Not Proposed
106.3.3	Orientation of Law Enforcers	50/ Batch	37500	0.38	0	-	0	-	<p><b>Ongoing Activity</b>                      Duration: 1 day (Non residential at district level)                      Batch Size: 50                      Refresher Training of different enforcement officials.                      Target for 2024-25: 30 batches (1 batch per District)                      Target for 2023-24: 30 batches (1 batch per District)</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
106.3.4	Other Trainings/Orientations - sessions incorporated in other's training	50/ Batch	41250	0.41	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Proposal for 2024-25:</b>                      Total Schools targeted in 2024-25: 1400                      Targeted college in 2024-25: 400                      Participant in the training: 1 School Health Ambassadors of 1400 schools &amp; one teaching representative from college 400                      Total Participants: 1800                      Duration of training: One day                      Batch Size: 50,                      No. of batch: 36                      Unit Cost -Rs0.41 Lakh per Batch</p> <p><b>Proposal for 2025-26:</b>                      Total Schools targeted in 2025-26: 1600                      Targeted college in 2025-26: 477                      Participant in the training: 1 School Health Ambassadors of 1600 schools &amp; one teaching representative from college 477                      Total Participants: 2077                      Duration of training: One day                      Batch Size: 50,                      No. of batch: 42                      Unit Cost -Rs0.41 Lakh per Batch</p>
106.4	<b>Trainings under NTCP at State level</b>								<b>Ongoing Activity</b>
106.4.1	State Level Advocacy Workshop	Lumpsum	50000	0.50	0	-	0	-	One dat State level inter sectoral workshop
106.4.2	Training of Trainers, Refresher Trainings	Per batch	64000	0.64		-		-	<b>Not proposed for 2024-25</b>
106.4.3	Training on tobacco cessation for Health care providers	32/ Batch	70000	0.70	0	-	0	-	<p><b>Ongoing Activity</b>                      State Level Training of Medical Officers for operationalisation of Tobacco Cessation Centers  <b>Duration of training -1 day</b>                      Batch Size-30 (1 MOs &amp; In charge Counselors from Tobacco Cessation Centre)  <b>Target for 24-25: 1 Batch</b>  <b>Target 25-26:1 Batch</b></p>
106.4.4	Law enforcers training / sensitization Programme			0.00		-		-	No Separate proposal submitted , the activity has to be taken up as part of State level Advocacy workshop
106.4.5	Any other training to facilitate implementation of provisions of COTPA 2003, FSSA 2006, and WHO FCTC implementation	30/ batch	70000	0.70	0	-	0	-	State load : 120 person (DPHO, ADPHO ( Lep),Epidemiologist, AM NCD of 30 DHH) <b>Target for 2024-25: 3 batches (40/ batch)</b> <b>Target for 2025-26: 3 batches</b> Venue: State level Duration: 1 day (Non residential at State level)
106.4.6	Baseline/End line surveys/ Research studies (DTCC)			-		-		-	Research studies & Capacity Building of NTCP at district level is already being conducted by AIIMS Bhubaneswar in collaboration with PGIMR Chandigarh & the UNION. Hence, no budget is proposed

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
106.4.7	Baseline/End line surveys/ Research studies (STCC)			-		-			Research studies & Capacity Building of NTCP at State level is already being conducted by SCB Dental College, Cuttack in collaboration with the UNION. Hence, no budget is proposed
<b>106.5</b>	<b>IEC/BCC for NTCP</b>								<b>Ongoing Activity</b>
<b>106.5.1</b>	<b>Mass Media</b>								
106.5.1.1	Advertisement through DD & local channels	Per minute	171000	1.71	0	-	0	-	Cost proposed as per revised I&PR, GoO norm Timing: 1 minute per day for 12days per year as per I&PR rates
106.5.1.2	Advertisement through AIR channels	Per minute	60000	0.60	0	-	0	-	Cost proposed as per revised I&PR, GoO norm Timing: 1 minute per day for 6 days in a year as per I&PR rates
106.5.1.3	Advertisement through FM Channels	Per minute	20000	0.20	0	-	0	-	Cost proposed as per revised I&PR, GoO norm Timing: 10 minutes per day for 20 days per year
106.5.1.4	Publicity through Print Media	Per day	110000	1.10	0	-	0	-	Cost proposed as per revised I&PR, GoO norm One time advertisement of Colour Quarter page in 2 newspaper for 5 days
106.5.1.5	Panel discussion at Doordarshan	Per Unit	185000	1.85	0	-			on going activities: - awareness on ill effect of Tobacco may be organised by SIHFW in consultation with State Tobacco Control Cell
106.5.1.6	Screening cum awareness camp at slum area	Per camp	10000			-		-	
<b>106.5.2</b>	<b>Observation of World Tobacco day</b>								
106.5.2.1	State level Media awareness & observation	Lump sump	100000	1.00	0	-	0	-	<b>Funds kept at State Level</b>
106.5.2.2	District Level	Per Dist	20000	0.20	1	0.20	1	0.20	Observation of World No Tobacco Day on 31st May at DHH level @ Rs.20000/- X 32 DHH = 6.40 Lakhs
106.5.2.3	Block Level	Per Block				-		-	
<b>106.5.3</b>	<b>IPC</b>								
106.5.3.1	Flip Book for counseling at Integrated Counseling Centre	Per Flip Book	400	0.00	0	-	0	-	414 @ 1/SDH/CHC/UHC
106.5.3.2	Brochure for tobacco users	Per brochure	5	0.00		-		-	Not proposed this year
106.5.3.3	Development of IEC Material video spot (Translation & Development of Audio visual documents on Tobacco control for School Health Programme and awareness programme at slums)	Lump sump	500000	5.00		-			Already completed in 2021-22, Funds Not proposed this year
<b>106.6</b>	<b>Planning and M&amp;E</b>								<b>Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194</b>
106.6.1.	Monthly meeting with the hospital staff, Weekly FGD with the tobacco users			-		-			Non Budgeted activity
106.6.2	<b>State Tobacco Control Cell (STCC): Mobility Support</b>								<b>Activity Inprinciple Approved. Budget approved under HSS-11_SI.No.194</b>
106.6.2.1	Hiring of Operational Vehicle under NTCP	Lumpsum	150000	1.50	0		0		<b>Ongoing Activity with revised unit cost</b> Budget proposed for local hiring & TA/DA support for consultant and Programme Officers at State level

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
106.6.2.2	Enforcement Squads	Per Squad/ Per Visit	3000	0.03	0		0		<p><b>Ongoing Activity</b>  <b>Support cost for movement of enforcement squad:</b>  <b>Background:</b> The Enforcement Squad constituting of enforcement officials like Food safety Officer, Drug Inspector, Sub Inspector of Police &amp; Excise Inspector. The squad will move to block for look into the violation of the COTPA. This flying squad will take-up at least 1 enforcement per month. The TA/ DA and DOL for this squad shall be met out of this fund.  <b>Present Status: 688 Enforcement Squad has been moved in the year 2022-23 and around Rs 11.00 Lakh fines had been collected from the violators for Violating of COTPA 2003 in different places of odisha. It is expected to achieve the target for FY 23-24 as per approved PIP.</b></p> <p><b>Financial Implication:</b> Budget proposed for 30 district &amp; 5 Municipal Corporation Areas and Puri urban areas  <b>Total Budget proposed for FY 2024-25 &amp; 2025-26:</b> 36 places x 24 per annum total 864 visits @ Rs 3000/- per visit=Rs25.92 lakh  Mobility support for NTCP staff will also be met out of this head.</p>
106.6.2.3	Tobacco Cessation Centre (TCC): Office Expenses	Per District	12000	0.12	1		1		<p><b>Proposed as per last year approval</b>  <b>Ongoing Activity for DHH</b>  <b>Budget Proposed for FY 2024-25:</b>  1. TCC at DHHs @ 12,000 per DHH: 0.12 Lakh X 32 DHHs = Rs. 3.84lakhs  In CHC level dental wing are operational  <b>Total: Rs.3.84Lakhs</b></p>
106.6.3	State Tobacco Control Cell (STCC): Misc./Office Expenses			-					Activity Inprinciple Approved. Budget approved under HSS-11_SI.No.194
106.6.3.1	Misc/ Office Expenses of State Tobacco Control Cell (STCC)	Lumpsum	72000	0.72	0		0		Ongoing activity Proposed as per last year approval
106.6.3.2	State-level Coordination Committee Meeting	Per Meeting	5000	0.05	0		0		Frequency: Quarterly Budget: Rs.5000/- Per meeting X 4 Qtr = Rs.0.20 lakhs Proposed as per last year approval Ongoing Activity
106.6.4	District Tobacco Control Cell (DTCC): Misc./Office Expenses			-					Activity Inprinciple Approved. Budget approved under HSS-11_SI.No.194
106.6.4.1	Misc./Office Expenses (DTCC)	Per District	36000	0.36	0		0		District Tobacco Control Cell (DTCC): Misc./Office Expenses Budget: @Rs.36000/- X 30 =Rs.10.80 lakhs Ongoing activity Proposed as per last year approval

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
106.6.4.2	District level Coordination Committee Meeting	Lumpsum	0	-	1		1		<p><b>Proposal-1: Ongoing activity</b>                      The district level coordination committee scheduled on quarterly basis. Approved @4 meetings per district per year. Proposed Unit cost @2000/- per Meeting  <b>Budget requirement:</b> @Rs.2000/- per Meeting X 4 meeting X 30 District = Rs.2.40 lakhs                      Proposed as per last year approval</p> <p><b>Proposal-2: New Activity</b>                      Block Level Co ordination Committee shall be constituted as per operational Guidelines of NTCP .AM,NCD may co ordinate it in consultation with BPMU and MO I/C. one BLCC may be organised in a</p>
106.5	Setting up of STCC		120000	1.20					
<b>GRAND TOTAL</b>							<b>1.90</b>	<b>1.92</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-5**  
**NPCDCS**



NCD-5\_NPCDCS

Capital Hospital, BBSR

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total NPCDCS</b>						<b>38.54</b>		<b>37.54</b>	
107	<b>NCD Clinics at DH</b>					<b>0.60</b>		<b>0.60</b>	<b>State's Mandate : Operationalise NCD Clinics at all DHHs, SDHs &amp; Block CHCs</b>
107.1	<b>District NCD Clinic: Mobility, Miscellaneous &amp; Contingencies</b>			-		<b>0.60</b>		<b>0.60</b>	Status: Functional NCD clinic at DHH 32 27 contractual MO post sanctioned (8 in position) for District NCD clinic., in absence of contractual post dedicated medical officers from regular carder have been deployed to manage NCD clinic .
107.1.1	Recurring cost for NCD clinic at DHHs	Lumpsum	60000	0.60	1	0.60	1	0.60	<b>Ongoing activities:</b> Proposed as approved last year 1. Recurring cost proposed @ Rs1.00 Lakh per DHH consists of >= 10 CHCs -16 DHH & Rs.0.60 lakhs for DHHs <= 10 CHCs- 16 DHH ( Capital Hospital & RGH included) <b>Financial implication:</b> Rs 25.60 Lakh 16 DHH NCD Clinic @1 Lakh X 16 DHHs= Rs. 16.00 Lakh 16 DHH NCD Clinic @ Rs 0.60 Lakh X 16 DHHs= Rs..9.60 Lakh
107.1.2	Non recurring cost for establishment of new NCD clinics at DHHs	Per unit	100000	1.00		-			NCD Clinics have been made functional at all DHHs, so no new proposal in the current year
107.1.3	Non-recurring: Equipment at District NCD clinic			0.00		0.00			Recommended equipment/ instruments are available at all DHHs NCD Clinics as per GoI guideline
107.1.4	Drugs & consumables for NCD management (includes Diabetes, Hypertension, Stroke, etc) for whole district	Per District	750000	7.50	0	0.00	0	-	<b>Ongoing activities:</b> <b>Requirement for entire 30 districts</b> Drugs and consumable for NCD management including diabetes, hypertension, & stroke care @ Rs. 7.50Lakhs per district (GoI norm @12.00 lakhs per districts) x 32 districts( 30 Districts)= <b>Rs. 225.00 Lakhs</b> <b>Status:</b> Currently NCD drugs & consumables worth about Rs.1500.00 lakhs is being procured from State budget for all Public Health Facility across the State as per the indent from districts. Proposal to contribute about 846 (Rs.225 lakhs for DHH Level & Rs.621 lakhs for 414 CHC & SDH Level= Rs.846 lakhs) of total cost out of NHM fund.
107.1.5	Diagnostics Services for NCD management (includes Diabetes, Hypertension, etc) for whole district			0.00		0.00		-	Funds met out of State specific scheme called NIDAN- Free Diagnostic Services, Hence no additional cost proposed under this head
107.1.6	Referral cost for District NCD Clinic			0.00		0.00		-	108 emergency ambulance services is operation in the state. Hence, no additional fund proposed under this head
107.1.7	PPP at District NCD Cell / Clinic			-		-		-	Programme implemented through system mode
108	<b>NCD Clinics at CHC/SDH</b>					<b>0.00</b>		<b>0.00</b>	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
108.1	SDH/ CHC level NCD Clinic: Mobility, Miscellaneous & Contingencies								
108.1.1	Recurring Cost for CHC NCD Clinic: Mobility , Miscellaneous & Contingencies	Per institution	12000	0.12	0	0.00	0	-	<b>Ongoing Activity</b> The amount @ Rs.12000/ per year for 414 CHC, UCHCs & SDH is proposed towards management of IT Cost (Internet & Other Consumables) for managing MO portal at SDH/CHC/UCHC level, meeting cost, data validation , day to day NCD monitoring , Printing of NCD Programmes reports & referral slip etc. <b>Gol Norms @1.00 lakh per clinic per annum per unit</b>
108.1.2	Non recurring cost for establishment of new NCD clinics at SDH/ CHCs	Per institution	100000	1.00		-		-	Proposal: IT, Renovation / Refurbishing Budgeted previous year and provided to all CHC/SDH No new proposal for this year Gol Norms @1.00 lakh per SDH/CHC clinic
108.1.3	Non-recurring cost for SDH/ CHC NCD Clinic (Equipment/ Instrument at SDH/ CHCs	Lumpsum		0.00		0.00		-	Proposal: Lab equipment & instrument Budgeted Previous Year. No new proposal for this year Gol Norms @8.00 lakh per SDH/CHC clinic
108.1.4	Drugs & consumables for NCD management (includes Diabetes, Hypertension, Stroke, etc) at SDH/ CHCs	Per unit	100000	1.00	0	0.00	0	-	<b>Ongoing activities</b> Gol norms @Rs.2.00 lakhs per unit Proposed: @1.00 lakhs per unit
108.1.5	Diagnostics Services for NCD management (includes Diabetes, Hypertension, etc) at SDH/ CHCs			0.00		0.00		-	Funds met out of State specific scheme called NIDAN- Free Diagnostic Services, Hence no additional cost proposed under this head
108.1.6	Referral cost for CHC NCD Clinic			0.00		0.00		-	108 emergency ambulance services is in operation in the State. Hence, no additional fund proposed under this head
108.1.7	PPP at CHC NCD Clinic			-		-		-	Programme is being implemented through system mode
109	<b>Cardiac Care Unit (CCU/ICU) including STEMI</b>					<b>6.00</b>		<b>5.00</b>	Details of Critical Care Health Blocks approved under PM-Abhim is placed at <b>Detail proposal at NCD-5 NPCDCS Write-up annexure A</b> . Total CCHB approved at DHH - 20 (Approval accorded from Gol for all CCHBs from 2021-26)
109.1	Non-recurring: Equipping Cardiac Care Unit (CCU)/ICU	Lumpsum		0.00		0.00			<b>Proposal for CCU/ ICU:</b> Currently operational at 18 DHHs & expected to be made functional at all DHHs by March 2024. Established/ proposed through funding under NHM- 10 Funding Under State Budget- 8nos Funding Under ECRP-II/ PM-Abhim- 14nos Hence, there is no new proposal in the current year. <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure- A "CCHB (DHH)"</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
109.2	Drugs & Diagnostics for Cardiac care	Per District	500000	5.00	1	5.00	1	5.00	<p><b>Ongoing Activity</b> As per NPCDCS Operational Guidelines, Rs. 5.00 Lakh per CCU is proposed (Rs. 5.00 Lakhs x 10 CCUs, refer annexure1). Rest to be met out of CCHB budget. <b>Gol norms Rs.5.24 lakhs per district</b></p>
109.3	STEMI Programme								<p><b>Ongoing Activity</b> <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure B "STEMI"</b> <b>Estimated Budget for 2024-25:</b> Rs.3557.13 lakhs, budgeted 70% as expansion of activities will take time. <b>Estimated Budget 2025-26:</b> Rs.3403.58 lakhs, budgeted 70%. Additional fund required shall be proposed in supplementary PIP</p>
109.3.1	Stemi Kit	Per unit	100000	1.00	1	1.00		-	<p>Unit Cost- Rs 1 Lakh per Kit Proposal 2024-25: 1 Kit per for 27 New DHH (5 DHHs have been already been provided with STEMI kit in previous year.) Proposal 2025-26: Not proposed</p>
109.3.2	PCI/Thrombolysis - rTPA	Per unit	18000	0.18	0	0.00	0	0.00	<p>2024-25: For all 32 DHH @50 per DHH Spoke 2025-26: for all 32 DHH @70 per DHH Spoke</p>
109.3.3	PCI/Thrombolysis - rTPA	Per unit	18000	0.18	0	0.00	0	0.00	<p>2024-25: Total cases - 446 cases SDH Spoke @ 2 per case - 32 SDHs x 2 = 64 cases CHC Spoke @ 1 per case - 382 CHCs x 1 = 382 cases 2025-26: Total cases - 446 cases SDH Spoke @ 2 per case - 32 SDHs x 2 = 64 cases CHC Spoke @ 1 per case - 382 CHCs x 1 = 382 cases</p>
110	<b>Other NPCDCS Components</b>								
110.1	Population Based Screening Programme (PBS)/ Universal health check-up and screening of NCDs								<p><b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-C "PBS"</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.2	Non recurring: Equipment for Cancer Care					0.00		0.00	<p><b>Ongoing activities:</b>  <b>Ongoing Programmes/ Proposals:</b>  <b>1. Day Care Chemo Therapy Cancers: Supported &amp; maintained under State budget.</b>  <b>2. Strengthening Screening &amp; Services for facility based Breast Cancer &amp; Cervical Cancer program In Odisha</b>                      2.1. Status of <b>Breast Cancer Programme</b> at DHH level- Procurement of equipment/ instruments required for diagnosis by True Cut Biopsy, Ultrasound Probe for Breast Cancer, lump size determination in screening &amp; Humanoid Model for Training on CBE/SBE is in process for 10 DHHs                      2.2. Status of <b>Cervical Cancer Programme</b> at DHH level: Procurement of equipment/ instruments required i.e. Hand Held Colposcop, Biopsy Forceps &amp; Thermo coagulator etc. for 10 DHHs is in process.  <b>Proposal:</b> Same set of equipment/instruments proposed for rest 10 districts for Breast Cancer Programme &amp; Cervical Cancer Programme . (Total DHH-32, Total Proposal Till 2022-24-20)</p>
110.2.1	Non Recurring Expenses for Cervical Cancer	Per DHH	854800	8.55	0	0.00			<p><b>Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur)</b>  <b>1. Digital Video Colposcope @ Rs. 5.00 Lakhs per unit x 10 DHHs = Rs. 50.00 Lakhs</b>  <b>2. Biopsy Forceps @ Rs. 2400 per unit x 2 per DHH x 10 DHHs= Rs. 0.48 Lakhs</b>  <b>3. Thermo coagulator @ Rs.3.50 Lakhs per unit x 10 DHHs= Rs. 35.00Lakhs</b></p>
110.2.2	Recurring Expenses for Cervical Cancer	Per case	40	0.00	0	0.00	0	-	<p><b>Ongoing for 3rd phase districts (30DHHs)</b>                      Disposable plastic Cusco's speculum for Screening by VIA Test @ Rs. 40/ per unit for 100000 cases per year.</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.2.3	Non Recurring Expenses for Breast Cancer								Revised as per NPCC Recommendation <b>Proposal for 2024-25:</b> Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur) 1. Biopsy Gun (30 Disposable Needles) @ Rs.2.05 Lakhs per unit x 10 units= Rs. 20.50 Lakhs 2. 7.5 mhz Linear probe/transducer (adjunct to existing USG machine) for Breast cancer detection @ Rs.2.50 Lakhs per unit x 10 units = Rs. 25.00 Lakhs 3. Vernier caliper @ Rs.260 per unit x 1500 units (150 per DHH)= Rs. 3.90 Lakhs <b>Proposal for 2025-26:</b> Ongoing Activity 1. Biopsy Gun 2. Vernier caliper @ Rs.260 per unit x 1500 units (50 per DHH)= <b>Rs. 3.90 Lakhs</b>
110.2.3.1	Biopsy Gun	Per Unit	205000	2.05	0	0.00		-	
110.2.3.2	7.5 mhz Linear probe/transducer	Per Unit	250000	2.50	0	0.00		-	
110.2.3.3	Vernier caliper	Per Unit	260	0.00	0	0.00	0	-	
110.2.4	Recurring Expenses for Breast Cancer								Not proposed
110.3	<b>Any other equipment (Procurement of COPD &amp; CKD Equipment)</b>					0.00		0.00	
110.3.1	Non Recurring Equipment/ instrument for COPD & CKD	Per unit	500	0.01		0.00		-	<b>Proposal 1 (COPD):</b> Peak flow meter already procured for all health institution up to PHC level @one per each Health Institution as per COPD GoI Guidelines. No new proposal for this year. <b>Proposal 2 (PMNDP):</b> Proposed under PMNDP PIP.
110.3.2	COPD Drugs and Consumables	Per District	1200000	12.00	0	0.00	0	-	<b>Ongoing Activity</b> Drugs and consumable for COPD @ Rs. 12.00 Lakhs per dist ( <b>GoI norm @25.00 lakhs per district</b> ). Drugs to be procured centrally at State level through OSMCL
110.3.3	<b>Non-Alcoholic Fatty Liver Diseases (NAFLD)</b>								
110.3.3.1	Non Recurring Equipment/ instrument for NAFLD	Per machine	8000000	80.00	0	0.00		0.00	<b>Unit Cost &amp; Unit No. Revised as per NPCC Recommendation</b> Procurement of Equipment & Instrument for Diagnostic Services at District Head Quarters Hospital for Non- Alcoholic Fatty Liver Diseases (NAFLD) has been proposed. <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-D "NAFLD"</b>
110.3.3.2	Recurring cost for NAFLD								To be met out of State specific NIDAN Scheme

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4	Training & Capacity Building					0.00		0.00	
110.4.1	Training for Screening of Breast Cancer								<p><b>Ongoing Activity:</b>  <b>Background:</b>                      Capacity building of all categories of health staff is important for successful implementation of Programme activities under NP-NCD. Under NP- NCD, the major diseases are Hypertension, Diabetes, Oral, Breast and Cervical Cancers, Cardiovascular Diseases and Stroke for which Screening of the 30+ aged population is carried out, and the diagnosed cases are put under treatment, and followed up.</p> <p><b>Current Status:</b>  <b>1. Cancer trainings:</b>                      a) Cancer care programme was initiated first in 10 districts and further 10 districts were included for which the following trainings have been held: 180 OG specialists have been trained on PAP smear - Cervical cancer screening. 10 OG specialists trained on Colposcopy &amp; Thermo-coagulation for Cervical cancer, during 2022-24. 14 Pathologists/Surgery Specialists &amp; LTs trained on screening of cervical cancers in 2022-24. 11 Surgery specialists trained on Tru-cut biopsy for breast cancer in 2022-24. ToT of District Level Medical Officers on CBE/SBE, is completed in January 2023 – 16 trained.                      a) Now Cancer programme is to be implemented in all 30 districts of the State. Hence the same trainings are planned for Specialists, MOs and paramedical staff in the 10 remaining districts, namely Balangir, Balasore, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj and Sambalpur.</p>
110.4.1.1	Training on True Cut Biopsy and CBE on Humanoid Model	Per Person	8000	0.08	0	0.00	0	-	<p><b>Ongoing Activity</b>                      Training of Surgery Specialists from rest 10 DHH has been planr FY: 24-25: 10person form DHH Level (@5/ Batch), Duration : 3 days                      Batch Size: 5 per batch                      Batch- 2 Batch  <b>Target: FY 2024-25-2 Batch &amp; FY 2025-26- 2 batch</b></p>
110.4.1.2	Centralized District Level Trainings for Block level trainers on CBE/SBE	Per batch	70000	0.70		0.00		-	<p><b>Ongoing Activity</b>                      State Level Training (ToT) for Training on CBE/SBE. 15 districts covered during previous years. Proposed One Surgery specialist/lady Medical Officer from rest 15 Districts.                      Duration One day                      Batch Size: 15 per batch                      Batch-1 Batch  <b>Target: FY 2024-25-1 Batch &amp; FY 2025-26- Not proposed</b></p>
110.4.2	Training for Screening of Cervical Cancer								

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.2.1	Training On Colposcopy, Biopsy and thermo coagulation for doctors by hybrid training model	Per Person	8000	0.08	0	0.00	0	0	<p><b>Ongoing Activity</b>                      Training of OG Spl from remaining 10 DHH.(@5/Batch) Duration 3days                      Batch Size: 5 per batch                      Batch-2 Batch                      Target                      FY 2024-25-2 Batch                      FY 2025-26- 2 batch</p>
110.4.2.2	Training for pathologists/surgery specialist/technicians from DHH	Per Batch	40000	0.40	0	0.00			<p><b>Ongoing Activity</b>                      Training for pathologists/surgery specialist/technicians from remaining 10 DHH (2 persons per districts) i.e. Total 20 participants                      Batch Size: 5 per batch                      Batch- 4 Batch                      Target                      FY 2024-25-4 Batch                      FY 2025-26- Not proposed</p>
110.4.3	2 days State level Training of MOs of DHH Level NCD Clinic	30/ Batch	124000	1.24	0	0.00			<p><b>Ongoing Activity</b>                      Background:: Training is necessary for orientation of the DHH, SDH &amp; CHC MOs on NCD programmes, and MO portal reporting.                      NCD clinics were established in all DHHs. Now, NCD Clinics have been established in all SDH and CHCs of the State with designated Medical Officers to manage them, as part of key deliverables. 74 MOs had been trained previously (Both contractual and Regular).                      Proposal: Training is necessary for orientation of the DHH &amp; SDH MOs on NCD programmes, and MO portal reporting.                      Training of DHH &amp; SDH NCD Clinic Mos One Batch-20/Batch, Duration 2days  <b>Target</b>                      Batch Size: 20 per batch                      Batch- 3 Batch                      Target                      FY 2024-25-3 Batch                      FY 2025-26- Not proposed</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.4	Three months ICU case management training of Medical officer	Per Batch	3175000	31.75	0	0.00	0	0	<p><b>Ongoing Activity:</b>  <b>Back Ground :</b>                      Critical care Case Management is essential for treatment of Critical cases, at the earliest. It is the mandate of the State government to establish ICUs/CCUs in all DHHS of the State, RGH Rourkela and Capital Hospital Bhubaneswar. They have already been established in 17 DHH and Capital Hospital, Bhubaneswar. Trained manpower is required for smooth functioning of the ICUs. Over the years, 155 numbers of Medical Officers and Paramedical staff have undergone ICU training. However, due to high levels of attrition and establishment of new ICUs, three months training on Critical care case management is an on-going process and 56 numbers of Medical Officers and Nursing staff have undergone training during 2022-24.</p> <p><b>Proposal:</b>                      Further training is required to operationalize the newly established ICUs to deal with critical cases of cardiovascular diseases and Stroke. Total 4 batches of Medical Officers and Nursing Officers are planned at SCB MCH Cuttack / Govt. MCH in FY 2024-26.</p> <p>Three months ICU case management training of Medical officer &amp; Nursing Officers                      Batch size: 20, 2 batches in 24-25 and 2 batches in 25-26</p> <p><b>Target</b>                      Batch Size: 20 per batch                      Batch- 4 Batch                      FY 2024-25-2 Batches                      FY 2025-26- 2 Batches</p>
110.4.5	Two days State level Training of Nodal Officers / Programme Managers on NCD Programmes	30/ batch	140000	1.40	0	0.00	0	0	<p>Ongoing Activity.                      Programme Officers ( DPHO/ADPHO(DC) /ADPHO(lep))/                      Epidemiologist/AM, NCD s need orientation on various NCD Programmes. State level two days training will be conducted for the Programme Officers</p> <p><b>Target</b>                      State load: 150 person,                      Duration 2days-30/Batch,                      Batch Size: 5 batches                      Target for 2024-25: 2 batch (@30/batch)                      Target for 2025-26: 3 batch (@30/batch)</p>
110.4.6	Two Days Orientation training of NCD and NTCP Counselor at state level	25/batch	116000	1.16	0	0.00	0	0	<p><b>Ongoing Activity.</b>                      State load: 67 Counselor</p> <p><b>Target</b>                      Target for 2024-25: 1 Batch (@30/ Batch)                      Target for 2025-26: 2 batch (@30/batch)</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.7	District level cascade training on COPD for Block level Medical Officers	30/batch	30000	0.30	0	-	-	-	<p><b>Ongoing Activity.</b> Two new programmes have been included under NP-NCD, namely COPD and NAFLD, as they contribute to a large number of NCD Cases. State level TOTs for both have been completed. Under COPD 60 nos of TB &amp; Chest / Medicine Specialists &amp; under NAFLD 30 nos of Medicine Specialists were trained. <b>Proposal:</b> It is now planned to have district level cascade trainings for Medical Officers /specialists of district and block level.</p> <p>One day State level training of SDH and CHC MOs on COPD. 7 batches, Batch size-30. Target for 2024-25: 7 batch (@30/batch) Target for 2025-26: Not proposed</p>
110.4.8	State level ToT on NAFLD for District level Medical Officers	30/batch	140000	1.40	0	-	0	-	<p><b>Ongoing Activity:</b> New programme to be implemented ToT for Medicine Specialists/Medical Officer &amp; DPHOs who will be the master trainers for block level Medical Officers of all SDHs &amp; CHCs at MCH Level. Batch size-30. Duration of Training- 1 days. FY- 2024-25 - 7 Batches FY - 2025-26- 7 Batches</p>
110.4.9	Training of MO on Cancer Chemotherapy	10 / batch	762000	7.62	0	0.00	-	-	<p><b>New Activity</b> Day Care Cancer Chemotherapy Centres are functioning in all DHH, RGH Rourkela and Capital Hospital Bhubaneswar where chemotherapy cycles are administered by trained Medical and Nursing officers. 36 MOs and 57 Nursing Officers have been trained previously. b) Due to transfers and attrition, there is a felt need for training of more Staff for the DCCCs. So, it is proposed to train 10 Medical Officers and 10 Nursing Officers during 2024-26. Batch size: 10 ,Duration of Training: 4 weeks Venue of Training: Sarvodaya Hospital, Faridabad, Haryana Unit Cost: No of Batch training: 2 FY 2024-25; 2 Batch &amp; FY 2025-26: Not proposed</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.10	District Level Training on VIA for CHOs & ANMs.	30/Batch	45000	0.45	0	0.00	0	-	<b>New Activity</b> VIA Training is essential for Cervical Cancer screening at Sub-Centre Level. CHOs /ANMs need to be trained on VIA by O&G Spl/MO at District Level. Duration of training 2days. Batch size-30. Duration of Training- 2days. FY- 2024-25: 60 Batches & FY-2025-26: 60 Batches
110.4.11	2 Days State level ToT on Stroke & STEMI for Medicine Specialist & DPHO	30/ batch	140000	1.40	0	0.00	-	-	<b>New Activity:</b> New programme to be implemented ToT for Medicine Specialists/Medical Officer & DPHOs who will be the master trainers for block level Medical Officers of all SDHs & CHCs. Batch size-30. Duration of Training- 2days. FY- 2024-25 - 2 Batches & FY -2025-26: Not proposed
110.4.12	Any other CME/Symposium/Plenary Session on NCD programmers	Per MCH	30000	0.30	0	0.00	0	-	<b>Ongoing Activity:</b> <b>CME/Symposium/Plenary Session on NCD programmers</b> for updating of knowledge of NPCDCS Programmes and technical input for implementation of Program in State specific. Participant-faculty of the concern dept of MCH Level of implementation at MCH level
110.4.13	State level one Day Training of FLCs	per batch	70000	0.70	-	0.00	0	-	<b>Ongoing Activity:</b> <b>Not proposal in FY 2024-25</b> <b>Proposal for 2025-26:</b> State level training of FLCs Batch Size:30, venue : State Level ,Cost per Batch: Rs 0.70 Lakh
110.5	PHC level: Mobility, Miscellaneous & Contingencies	Per HWC	9000	0.09	0	-	0	-	<b>Ongoing Activity</b> <b>Proposed for all functional PHC/ UPHC HWCs:to be taken up following activities</b> 1.Review of NCD Activities in sector meeting 2.Meeting of ASHA/ANM/MO PHC meeting Revalidation by BDM in NCD Application, NCD TB/NTEP co morbidity. 3. Monitoring of Screening Camp by MO & AYUSH MO conducted by ANM( each month two visit/month 4. Quarterly Patient network meeting at PHC HWC on Health Promotion 5. outreach activity for uncovered population & any other related NCD Screening 6.All NCD Day observation- fund from HWC 7. Any other activities as special drive, campaign,& innovation, special time base need, reporting format, register , other need base requirement <b>GoI norms @0.30 lakhs per annum per unit</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.6	Sub-Centre level: Mobility , Miscellaneous & Contingencies	Per HWC	3000	0.03		-			<p><b>Not Approved</b></p> <p><b>Ongoing activity</b></p> <p>CHOs have been engaged/ engaged at 5400 SC HWCs . Hence, to monitor the field activities under NCD component budget to the tune of Rs. 6000/- per month has been proposed.</p> <ol style="list-style-type: none"> <li>1. Review of NCD Activities in sector meeting</li> <li>2. Data Validation meeting at SC HWCs</li> <li>3. Outreached activity for uncovered population &amp; any other related NCD Screening</li> <li>4. Any other activities as special drive, campaign,&amp; innovation, special time base need, reporting format, register , other need base requirement</li> </ol> <p><b>GoI norms @0.60 lakhs per annum per unit</b></p>
110.7	<b>IEC/BCCat State level</b>					<b>0.00</b>		<b>0.00</b>	<b>Ongoing Activity</b>
110.7.1	Advertisement through DD & local channels or scrolling	Per minute	171000	1.71	0	0.00	0	-	Timing: 1 minute per day for 12 days per year as per I&PR rates
110.7.2	Advertisement through AIR channels	Per minute	60000	0.60	0	0.00	0	-	Timing: 1 minute per day for 12 days in a year as per I&PR rates
110.7.3	Advertisement through FM Channels	Per 10 minutes	20000	0.20	0	0.00	0	-	Timing: 10 minutes per day for 30 days per year
110.7.4	Publicity through Print Media	Per day Per paper	100000	1.00	0	0.00	0	-	One time advertisement of Color Quarter page in 2 newspaper for 6 days
110.7.5	Day Celebration	Per Unit	110000	1.10	0	0.00	0	-	Day Celebration with Media briefing and district performance appraisal : Observance of World Diabetics Day (14 Nov) /World Hypertension Day (17 May)/ World Cancer Day (4 Feb)/Stroke Day (29 Oct)/World Heart Day (29 Sep), COPD Day at State Level @Rs.100000/- per day X 6 days= Rs.6.00 lakhs
110.8	<b>IEC/BCC for District Level</b>					<b>0.00</b>		<b>0.00</b>	<b>Revised as per NPCC Recommendation</b> <b>Ongoing Activity</b>
110.8.1	Dynamic hoarding	Per Flex	3000	0.03		0.00		0.00	Change of flex for hoarding on NCD in strategic locations @Rs.3000/- per flex X 449 (Targeted Institution:32 DHH,33 SDH, 377 CHC, 7 UCHCs)= Rs.13.47 lakhs
110.8.2	Day Celebration	Per District	120000	1.20	0	0.00	0	0.00	Observance of World Diabetics Day (14 Nov) /World Hypertension Day (17 May)/ World Cancer Day (4 Feb)/Stroke Day (29 Oct)/ World Heart Day (29 Sep) at District Level: @Rs.20 000/- Per Designated Day X 6 days X 30 districts = Rs.36.00 lakhs

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.8.3	IEC/BCC activities for Universal Screening of NCDs	Lumpsum	3402000	34.02	0	0.00	0	0.00	<p><b>Target:</b> State has set target for reaching out 174 lakhs population in 2024-25 across the State</p> <p><b>Proposal:</b> Proposed to organize Poster campaign in the villages to be taken as preparatory initiatives before initiation of NCD campaign and distribution of leaflets during Universal Screening to intended beneficiaries (One per family)</p> <p>1. <b>Poster:</b> @Rs.5/- per poster X 6 posters per villages X 60000 villages = <b>Rs.18.00 lakhs</b></p> <p>2. <b>Leaflets:</b> @Rs.1/- per leaflet X 1000000 leaflets (4000000 / 4.3 is family size ) = <b>Rs.10.00 lakhs</b></p> <p>3. <b>Banner:</b> @Rs.100/- per banner X 6020 HWC = <b>Rs.6.02 lakhs</b></p>
110.8.4	Involvement of Community Institutions/ Groups/ Individuals in Behavior Change Communication at SC HWC level	Per SC-HWC	1500	0.02	0	0.00	0	0.00	<b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-E "Community engagement at SC-HWC for NCD"</b>
110.9	<b>Printing activities under NPCDCS</b>					<b>0.00</b>		<b>0.00</b>	<b>Ongoing Activity</b>
110.9.1	Printing at PHC Level	Lumpsum	5	0.00	0	-	0	-	<p><b>Proposal: Printing of Patient Treatment and Referral Cards</b> PBS is now being conducted through out the State, The Screening Target for 2024-25 is 174.00 Lakh and screening target for 2025-26 is 175.00 Lakh .So it is expected that 10% of Screened population will be referred to higher facility for confirmation and treatment. Hence, printing proposed for 17.5 lakhs Treatment &amp; referral cards (5 lakh at PHC level and 12.5 Lakhs at SC level)</p>
110.9.2	Printing at SC Level	Per unit	5	0.00	0	-	0	-	<p><b>Proposal: Printing of Patient Treatment and Referral Cards</b> PBS is now being conducted through out the State, The Screening Target for 2024-25 is 174.00 Lakh and screening target for 2025-26 is 175.00 Lakh .So it is expected that 10% of Screened population will be referred to higher facility for confirmation and treatment. Hence, printing proposed for 17.5 lakhs Treatment &amp; referral cards (5 lakh at PHC level and 12.5 Lakhs at SC level)</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.9.3	Printing activities for Universal Screening of NCDs - printing of cards and modules	Per format	1	0.00	0	-	0	-	<p><b>Proposal: Printing of CBAC form</b>                      Proposed Screening in CBAC form : 174.00 Lakhs(2024-25) and 175.00 Lakhs (2025-26)                      Printing of CBAC format; 4.70 crore population (total States Population)                      Revised CBAC- The amount proposed for All Population 4 crores.                      CBAC forms were previously being filled up by ASHAs for the population above 30 years of age, to screen for common NCDs, as per GoI guidelines. Currently CBAC forms have been revised <b>to include other diseases like TB, Leprosy visual defects and Mental Health</b>. Many of these ailments effort persons of age groups below 30 years of age. Any suspected detected from the CBAC forms are referred to higher centres for early diagnosis and treatment. Keeping in view the above and GoI guidelines for enrolment of the total population of all age, the revised CBAC forms are now being filled for the total population of the State. From 2021-22, districts have already started using the revised CBAC forms. Hence during 2024-25, printing of 3.76 crore CBAC forms is proposed to cover the total population.( 80% proposed excluding 20% migration &amp; other reasons) The same number is proposed for printing in 2025-2026                      Budgeted 80%</p>
110.9.4	Printing of Operational Guidelines on NCDs	Per unit	250	0.00	0	-	-	-	1. Operational Guidelines for NP-NCD -250 copies @ 400 Per copies-Rs1.00 Lakh

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.9.5	Printing of Patient Tracking & Follow-up Register	Per Register	200	0.00	0	-	0	-	<p><b>Proposal: Registers will be printed for 6688 SCs, 1288 PHCs &amp; 106 UPHCs</b></p> <p><b>Justification for Printing of NCD Registers:</b>                      State has planned to screen 40 Lakhs population during the year 2022-23 and 70 lakhs population during the year 2023-24 as per the key deliverable.                      For capturing above data NCD screening register is highly required for following reasons                      1. It is the mandate of GoI to maintain register.                      2. For line listing &amp; follow up of the patients up to down the line.                      3. Periodic Distribution of medicine/drugs under free drugs distribution of Diabetes and HTN drugs.                      4. Proper &amp; correct monthly reporting.                      5. Proper Supervision &amp; Monitoring of common NCDs.ASHA of respective village will monitor periodically at least twice a year. In this context state also providing incentive to ASHA in a package manner.                      6. Validation of NCD reportings.The MO portal entry is in initial stage so it is essential to capture the data in black and white.                      7. In the year 2016-17 NCD screening register have supplied partially but now Odisha is targeting 100% of PBS</p>
110.10	<b>Strengthening Screening &amp; Services For Breast Cancer</b>								Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur)
110.10.1	ASHA booklet on CBE/SBE	Per Booklet	20	0.00	0	-	0	-	On going activity: Printing of ASHA book let : 14 Sheets, Multicolour both the side offset printing with laminated
110.10.2	ANM Job Aids in odia	Per unit	30	0.00	0	-	0	-	On going activity: 1/2 demy with one fold , Multicolor both the side offset printing with laminated
110.11	<b>Strengthening Screening &amp; Services For Cervical Cancer</b>								Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur)
110.11.1	ASHA Booklet on Screening for Cervical Cancer	Per Booklet	20	0.00	0	-	0	-	on going activities : Printing of ASHA book let : Multicolour both the side offset printing with laminated
110.11.2	ANM JOB AIDS – Flash cards for VIA	Per unit	250	0.00	0	-	0	-	On going activity: 300 GSM Art paper ( Glossy finish) , Brightness-80 minimum ,
110.12	<b>Planning and M&amp;E</b>								- <b>Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.12.1	Mobility, Miscellaneous, TA/DA & Contingencies for State NCD Cell	per State	1000000	10.00		-		-	<b>On going activity</b> <b>GoI norms State NCD Cell :Rs 10.00 Lakh</b>
110.12.2	Mobility, Miscellaneous, TA/DA & Contingencies for District NCD Cell	Lumpsum	10500000	105.00		-		-	<b>Ongoing activities with revised Unit cost</b> 1. Recurring cost proposed @ Rs4.00Lakh per DHH consists of >= 12 CHCs -15 DHH Rs 3.00 Lakh for DHHs <= 12 CHCs- 15 DHH <b>Financial implication: Rs 105.00Lakh</b> 15 District NCD Cell @4.00Lakh X 15 DHHs= Rs. 60.00 Lakh 15 District NCD Cell @ Rs 3.00Lakh X 15 DHHs= Rs..45.00Lakh <b>GoI norms District NCD Cell : Rs 6.00 Lakh</b>
110.13	Renovation and furnishing, furniture, computers, office equipment (fax, phone, photocopier etc.)					-		-	<b>New Activity</b>
110.13.1	State NCD Cell	Lumpsum	140000	1.40	0	-		-	A) Previously one photo copier was procured for State NCD Cell during 2011, as the work load is increasing day by day and it is highly essential for a new photo copier.
110.13.2	District NCD Cell	Lumpsum	60000	0.60	0	-		-	In 1st phase 5 districts NCD programme was implemented i.e. Bolangir, Nuapada, Koraput, Malkanagiri , Nabarangpur in FY 2011-12. So one time additional cost @ Rs 60,000/- may be proposed for computer & accessories. GoI norms Rs 1.00 lakh per district
110.14	<b>Excess Balance Amount Kept at State Level</b>	Lumpsum	4397600	43.98				-	
111	<b>State specific Initiatives and Innovations</b>					<b>31.94</b>		<b>31.94</b>	
111.1	Kidney Care on Wheels in Priority District of Odisha	Lumpsum	0	0.00	1	0.00	1	-	<b>Ongoing Activity</b> <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-F"NP-NCD"</b>
111.2	Vaccination for Human Papilloma Virus (HPV) for prevention of Cervical Cancer among girls student of residential schools	Lumpsum	100000000	1000.00		0.00	0	-	<b>Ongoing Activity</b> Re proposed in 2025-26 <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-G"NP-NCD"</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
111.3	ECG InterPretation & Tele reporting by Agency								<p><b>Budget shifted from NCD-5_NPCDCS, SI.No.109</b></p> <p><b>Ongoing Activity Programme:</b></p> <ul style="list-style-type: none"> <li>• Implementation of a Time Bound System of ECG, Interpretation &amp; Tele-Reporting in an Outsourced Hub &amp; Spoke Model for Diagnosis of Patients STEMI.</li> <li>• Rs.175/- (Rupees One hundred &amp; Seventy Five only) per each ECG and it's Interpretation &amp; Tele-reporting costs for providing the Equipment (ECG machine/ Equipment, Communication Devices etc), Analytic Software (Dashboard) / Application Software as mentioned in technical specification at each hub &amp; spoke hospital, maintenance charges of the equipment, recurring internet cost, recurring consumables related to ECG (Thermal Paper rolls, Gel etc.) but excludes any manpower deployment and consumables required for treatment at the hub / spoke hospitals.</li> </ul> <p>Proposal: 2024-26: Approximately ECG Calculation: (Budgeted)</p> <ul style="list-style-type: none"> <li>• Per Hub: Average-30 ECG per day per MCH Hub i.e. (4*30*365=43800)</li> <li>• Per DHH: 20 ECG Per day per DHH Hub i.e. (32*20*365=233600)</li> <li>• Per SDH/ CHC: 3 ECG per day per spoke (SDH &amp; CHCs) (32*5*365=58400) &amp; (382*5*365=697150)</li> <li>• Per PHC &amp; UPHC: 4 ECG per week per spoke i.e. FY-2024-25: (183*4*52=38064), FY-2025-26: (378*4*52=78,624)</li> </ul> <p>A. FY 2024-25= (43,800+2,33,600+58,400+697150+38,064)=1071014* Rs.175= Rs. 1874.27 Lakhs B. FY 2025-26: (43,800+2,33,600+58,400+697150+78,624)= 1111574* Rs.175= Rs. 1945.25 Lakhs</p>
111.3.1	Medical College Hospital (MCH)	Per Case	175	0.00	10950	19.16	10950	19.16	
111.3.2	District Head Quarter Hospital (DHH)	Per Case	175	0.00	7300	12.78	7300	12.78	
111.3.3	SDH/ CHC	Per Case	175	0.00	0	0.00	0	0.00	
111.3.4	PHC/ UPHC	Per Case	175	0.00	0	0.00	0	0.00	
<b>Total NPCDCS</b>						<b>38.54</b>		<b>37.54</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-6**  
**PMNDP**





NCD-6\_PMNDP

Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total PMNDP</b>					<b>125.59</b>		<b>129.35</b>	
<b>112</b>	<b>Haemodialysis Services</b>					<b>125.59</b>		<b>129.35</b>	<b>Status:</b> All districts saturated- At least one Haemodialysis Center available per district (Total Centers Operational-33, Total District-30) Total Machines Available: 296 Management: Management of Haemodialysis Centers are through PPP mode. <b>Details at PMNDP Write-up Justification Annexure</b>
112.1	Hemo-Dialysis Services under PMNDP			-		-		-	Not Proposed
112.2	Medical devices as per National Dialysis Programme	Per machine		0.00		0.00		-	No proposal on procurement of Medical devices in the current year
112.3	Drugs & Consumables for Haemodialysis (Erythropoietin, iron, vitamin, etc) & Peritoneal dialysis (refer page 17 of guideline)	Lumpsum	19310544	193.11	0	0.00	0	-	<b>Ongoing Activity</b> <b>Proposal 2024-25 &amp; 2025-26:</b> <b>A. 33 Existing Dialysis Unit: Total Session 213120</b> i) EPO (4000IU) : @Rs.119/- x 117216 nos. (50% of total session) EPO for the required sessions + 10% Additional Buffer) = <b>Rs.139.79 lakhs</b> ii) Iron Sucrose (20 mg) : @Rs.8/- x 117216 nos. (50% of total session) EPO for the required sessions + 10% Additional Buffer): <b>Rs.9.38 lakhs</b> iii) Hep-B Vaccination : @Rs. 180/- per 10ml vial X 400 vial = <b>Rs.0.72 lakhs</b> <b>B. 32 New Dialysis Unit: Total Session 61920</b> i) EPO (4000IU) : @Rs.119/- x 34056 nos. (50% of total session) EPO for the required sessions + 10% Additional Buffer) = <b>Rs.40.53 lakhs</b> ii) Iron Sucrose (20 mg) : @Rs.8/- x 34056 nos. (50% of total session) EPO for the required sessions + 10% Additional Buffer)= <b>Rs.2.72 lakhs</b> iii) Hep-B Vaccination : @Rs. 180/- per 10ml vial X 150 vial = <b>Rs.0.27 lakhs</b> <b>Details of Calculation is at PMNDP Write-up Annexure</b>
112.4	Training for Nurse, medical officer, Nephrologists, ANM/ASHA, patients & bystanders on peritoneal dialysis/Haemodialysis			0.00		0.00		-	Regularly conducted by PPP service agency, with their fund
112.5	IEC/BCC - National Dialysis Programme (Haemodialysis and Peritoneal Dialysis)	Per Unit	172000	1.72	0	0.00	0	-	Cost proposed as per revised I&PR, GoO norm Budget proposed for Advertisement on National Dialysis Programme (One time advertisement for Colour Quarter page is @1.72 lakhs X 2 news paper X 12 times/ one time per month)
112.6	Printing activities under PMNDP			-		-		-	Managed by PPP Service Agency

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
112.7	Dialysis services under PMNDP					125.59		129.35	Ongoing Activity
112.8	Existing Dialysis Machine	Per Session	1038	0.01	15120	125.59	15120	129.35	<p><b>Background:</b> Existing Dialysis Centers-33 @60 sessions per machine per month Total Machine available: 296 Total Session for 12months: 2,13,120 (60 sessions x 296machines x 12 months)</p> <p><b>Budget Proposed for 2024-25:</b> @ Rs.1038.24 per session (3% increment of session cost @1008) x 213120 sessions = <b>Rs.2212.70 lakhs, budgeted 80% i.e. Rs.1770.16 lakhs</b></p> <p><b>Budget Proposed for 2025-26:</b> @ Rs.1069.38 per session (3% increment of session cost @1069.38/-) x 213120 sessions = <b>Rs.2279.06 lakhs, budgeted 80% i.e. Rs.1823.25 lakhs</b></p> <p><b>Budgeted 80% looking into expenditure trend.</b></p>
112.9	New Dialysis Machine	Per Session	792	0.01	0	-	0	-	<p><b>Background:</b> Currently 33 Dialysis Centers are functional &amp; 32 New Centers at SDH/CHC (selected) level to be operational by end of 2024. Contract has been signed with new PPP service provider.Procurement of Dialysis machine of 129nos are finalized at OSMCL. Average Session @40 session per machine per month as per the GoI Guideline Total Machine: 129 Total Sessions for 12months: 61,920 (40 sessions x 129machines x 12 months)</p> <p><b>Budget Proposed for 2024-25:</b> @ Rs.792/- per session x 61920 sessions =<b>Rs.490.40 lakhs, budgeted 70% i.e. Rs.343.28 lakhs</b></p> <p><b>Budget Proposed for 2025-26:</b> Budget proposed for 12 months in 2025-26 @ Rs.815.76/- per session (3% increment of session cost @Rs.815.76) x 61920 sessions =<b>Rs.505.12 Lakhs, budgeted 70% i.e. Rs.353.58 lakhs</b></p> <p><b>Budgeted 70% due to following reasons:</b> 1.Rollout at SDH level may take time 2.Paitent turnover may be less in initial period</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
113	Peritoneal Dialysis Services					0.00		0.00	
113.1	Peritoneal Dialysis Services under PMNDP	Per Patient	22000	0.22	0	-	0	-	<p><b>Background:</b> Pradhan Mantri National Dialysis Programme (PMNDP) is being implemented in all 30 districts under PPP Mode. Peritoneal Dialysis is being implemented in SCB MCH which will be expanded to MKCG &amp; VIMSAR in 2024. for the FY 2022-24 budgeted as following Estimated cost for Peritoneal Dialysis per patient (As per PMNDP Guidelines):</p> <p>a) Catheter Initial kit including transfer set and adaptor: Rs. 11,000.00                      b) One time Patient Support for Monitoring tools (BP apparatus, IV stand, weighing scale): 3000/-                      c) Quarterly replacement of transfer set: 2000/- (Three per year)                      d) PD bag (including training support): Between Rs.200.00-Rs. 220.00                      e) Monthly requirement: 90-120 bags per patient                      Monthly per patient cost (range) INR 18,000-INR26,400 say Rs. 22,000/-</p> <p>For covering 200 patients in 1st year (2022-23) estimated cost will be Rs. 22,000/- per month X 6 month = Rs. 264.00 lakhs                      For covering 300 patients in 2nd year (2023-24) estimated cost will be Rs. 22,000/- per month X 12 month = Rs. 792.00 lakhs</p> <p><b>Budgeted 50%</b>  <b>Current Status:</b>                      Total 75 cases peritoneal dialysis done at CB MCH Cuttack.                      Training of Medical Officers at Medical College and DHH is a new activity. Peritoneal Dialysis is being implemented in SCB MCH which will be expanded to MKCG &amp; VIMSAR in 2024.</p> <p><b>Proposal:</b>  <b>Target for 2024-25 is 100 &amp; 2025-26 is 150 Budget will be proposed.</b>                      It is now envisaged to train Nephrologists/ Surgery Specialists/ Medical</p>
113.2	RO water testing (Bacteriological, endotoxin, Chemical) and tank/pipes disinfection (peracetic acid) for Dialysis			-		-		-	
<b>GRAND TOTAL</b>						<b>125.59</b>		<b>129.35</b>	

*J. R. Singh*  
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# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-7**  
**NPPCHH**



## NCD-7\_NPCCHH

## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NPCCHH</b>						<b>1.00</b>	<b>13.00</b>	<b>Budget Shifted to respective heads as per NPCC Recommendation</b>
<b>114</b>	<b>Implementation of NPCCHH</b>						<b>1.00</b>	<b>13.00</b>	<b>To be implemented in all 30 districts with focus on selected districts for Green &amp; Climate Resilient Health Care measures</b>
<b>114.1</b>	<b>Infrastructure civil works (climate resilient healthcare facilities)</b>						<b>0.00</b>		
114.1.1	Retrofitting Health Care Facility Infrastructre(Climate/Disaster resilient)								Identified facilities of 60 % Districts (Cumulative 20 ) have been targeted to upgrade as Climate Resilient Health Care Facilities. Fund to be met out of State Budget.
<b>114.2</b>	<b>Capacity building including training</b>						<b>0.00</b>	<b>0.00</b>	
114.2.1	Capacity building of health professionals and health workers						<b>0.00</b>	<b>0.00</b>	
114.2.1.1	2 days training of DNO and Epidemiologists at state level on NPCCHH and preparation of DAPCCHH	30/ batch	120000	1.20	0	0.00	0	0.00	<b>Participants:</b> DNO and Epidemiologist from 30 districts <b>Target:</b> Total 2 numbers of batches(30 persons/batch) for 30 districts <b>Budget:</b> Rs.1.20 Lakhs *2=2.40 Lakhs
114.2.1.2	2 days training of Specialists on diagnosis and management of ARI and HRI including HRI surveillance and certification of Heat deaths	30/ batch	120000	1.20	0	0.00	0	0.00	<b>Participants:</b> Medical Officers from 30 districts <b>Target:</b> 1 batch consisting 30 Medical officers <b>Budget:</b> Rs.1.20 Lakhs*1=1.20 Lakhs
114.2.1.3	2 days training of Sentinel Surveillance Nodal Officers on ARI	26/ batch	100000	1.00	0	0.00	0	0.00	<b>Participants:</b> 2 persons from 13 Medical officers <b>Target:</b> 1 batch of training consisting 26 persons <b>Budget:</b> Rs.1 Lakh*1=1 Lakh
114.2.1.4	1 day Training of CHO on NPCCHH at district level			0.00		0.00		0.00	District has to integrate with CHO training package
114.2.1.5	1 day Training of ASHA, AWW on NPCCHH at block level			0.00		0.00		0.00	District has to integrate with ASHA sector meeting
114.2.1.6	1 day Training of PRI on NPCCHH			0.00		0.00		0.00	To be integrated with training of Panchayati Raj deptt.
114.2.2	<b>Foster partnerships to create synchrony/ synergy with other health programmes, missions, and departments</b>					<b>0.00</b>		<b>0.00</b>	
114.2.2.1	Jan Arogya Samiti (JAS) and Panchayats sensitized on NPCCHH			0.00		0.00			To be conducted by CHO in the existing platform
114.2.2.2	Schools/colleges in a district sensitized on Climate Change and Health			0.00		0.00			School Health & Wellness Ambassadors will be sensitized to take up this activity. Budgeted under RSKK programme.
<b>114.3</b>	<b>Other operating costs (green measures in healthcare facilities)</b>					<b>1.00</b>		<b>13.00</b>	
<b>114.3.1</b>	<b>Strengthening of the Health System</b>					<b>0.00</b>		<b>13.00</b>	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
114.3.1.1	Greening of health care facilities and maintenance of greening health care sector								Activities proposed as per Gol guideline 1. Plantation 2. Conversion lighting system to LED 3. Rain Water Harvesting Structure 4. Solar lighting system of Public Health Facilities 5. Energy Auditing Facilities DHH/SDH/CHC/UCHC have been targeted as per Govt. of India PIP guidance note for FY-2024-26 mentioned at Annexure 6:Unit Costs for Green & Climate Resilient Health Care Infrastructure Measures. <b>The cost plan in this category is based on the vulnerability mapping on climate change for 14 districts in terms of flood/cyclone/drought/heat/air pollution</b>
114.3.1.2	<b>LED Replacement</b>								Proposal :40% of the district in which 10% of the Health Care Facilities have to be undergone for LED replacement <b>Detail proposal at NCD-7 NPCCHH Write-up Annexure</b>
114.3.1.2.1	DHH/SDH								
114.3.1.2.2	CHC/UCHC	Per unit	75000	0.75	0	-	0	0.00	
114.3.1.2.3	PHC/UPHC								
114.3.1.3	<b>Energy Auditing</b>								Proposal for 2024-25:40% of the district in which 20% of the Health Care Facilities have to be undergone for Energy Auditing. District/ Facility. Proposal for 2025-26: 40% of the district in which 35% of the Health Care Facilities (Cumulative)have to be undergone for Energy Auditing. <b>Detail proposal at NCD-7 NPCCHH Write-up Annexure</b>
114.3.1.3.1	DHH/SDH	Per unit	100000	1.00	0	-		0.00	<b>Background:</b> Energy auditing is a major component to find out exact energy requirement for proper functioning of an institution. As per Gol guidance it can be done per institution in every 3 years interval.
114.3.1.3.2	CHC/UCHC	Per unit	30000	0.30	0	-	0	0.00	
114.3.1.3.3	PHC/UPHC								
114.3.1.4	<b>Installation of Solar Panels (With battery back up)</b>								<b>Proposal for 2024-25:</b> 45% of the district in which 5% of the Health Care Facilities have to be undergone for Solar System. <b>Proposal for 2025-26:</b> 45% of the district in which 10% of the Health Care Facilities (Cumulative)have to be undergone for Solar System <b>Detail proposal at NCD-7 NPCCHH Write-up Annexure</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
114.3.1.4.1	DHH/SDH	Per unit	1000000	10.00	0	-	1	10.00	<b>Background:</b> Health care system contributes 5% of carbon emission globally. By changing it to more renewable sources like solar or wind the burden of carbon foot print can be reduced in long run and provide a sustainable green environment.
114.3.1.4.2	CHC/UCHC	Per unit	500000	5.00		-	0	0.00	
114.3.1.4.3	PHC/UPHC					-		0.00	
114.3.1.5	<b>RWH Installation</b>								<b>Proposal for 2024-25:</b> 30% of the district in which 5% of the Health Care Facilities have to be undergone for RWH System . <b>Proposal for 2025-26 :</b> 30% of the district in which 10% of the Health Care Facilities (Cumulative)have to be undergone for RWH System <b>Detail proposal at NCD-7 NPCCHH Write-up Annexure</b>
114.3.1.5.1	DHH/SDH	Per unit	300000	3.00	0	-	1	3.00	
114.3.1.5.2	CHC/UCHC	Per unit	200000	2.00		-	0	0.00	
114.3.1.5.3	PHC/UPHC					-		0.00	
114.3.2	Effluent treatment plant (ETP)			-		-		0.00	To be met out of State budget. Plan already taken up
114.3.3	Installation of AQI monitors	Per unit	100000	1.00	1	1.00		0.00	Installation of 44 AQI monitors (30 DHHs & 14 Sentinel Hospitals ( 12 MCHs, Capital Hospital & RGH Rourkela)) <b>Background</b> The AQI monitor will be use full to track the air pollutants level like SO2, CO, H2S, NO2, ground level O3, temp., humidity & other harm full air pollutants. The diseases like COPD, Pulmonary disease, Hypertension, long term damage to kidney, liver & brain, heart attack & stroke disease burden in general population can be correlated with AQI information which will help in identification of disease burden projection in long run.
114.4	<b>IEC &amp; Printing, e-planning, Monitoring &amp; Evaluation</b>					0.00		0.00	
114.4.1	<b>General Awareness</b>					0.00		0.00	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
114.4.1.1	Observation of Important days								Days to be observed 1. World Water Day (22nd March) 2. World Health Day (7th April) 3. World Environmental Day (5th June) 4. International Day for Clean Air and Blue Skies (7th September) 5. International Day for Disaster Risk Reduction (13th October) 6. National Pollution Control Day (2nd December)
114.4.1.1.1	At State level	Per day observation	100000	1.00	0	0.00	0	0.00	The special days as mentioned above are to be observed at state
114.4.1.1.2	At District level	Per dist per day observation	15000	0.15	0	-	0	0.00	The special days as mentioned above are to be observed by 30 districts
114.4.1.1.3	At Village level	Per day observation	1000	0.01		-		0.00	The special days as mentioned above are to be observed at village level through VHSNC/GKS funds
<b>114.5</b>	<b>Statutory Meetings and Planning</b>					<b>0.00</b>		<b>0.00</b>	<b>Budget Approved In Principle and Shifted to HSS-11_Planning and Programmed Management _SI.No.194</b>
114.5.1	State Governing Body meeting (1/6 months)	Per meeting	5000	0.05	0		0		GoI mandate : Governing Body meeting are to be organized twice in a year
114.5.2	Quarterly State Task Force Meetings	Per meeting	3000	0.03	0		0		GoI Mandate : Task Force meeting are to be organized quarterly
114.5.3	Quarterly District Task Force Meetings	Per dist per qtr	1000	0.01	0		0		GoI Mandate : District Task Force meeting are to be organized quarterly (30 Districts*4=120)
114.5.4	District Action Plan on Climate Change and Human Health (DAPCCHH)	Per dist	5000	0.05	0		0		State has planned to take up District Action Plan & Budget on Climate Change(DAPCCHH) for all 30 districts
114.5.5	Monitoring, supervision & office contingency	Per annum	0	0.00	1		1		State Level : Rs.1.50 Lakhs per Annum District Level : Rs.4.50 Lakhs (Rs.15000/- per district X 30 Districts )
<b>114.6</b>	<b>Surveillance, Research, Review, Evaluation (SRRE)</b>					<b>0.00</b>		<b>0.00</b>	
114.6.1	Operational research on climate change and health	Per study	20000	0.20	0	0.00	0.00	0.00	<b>Research topic:</b> 1.Population based vulnerability health assessment for two districts (1 Urban and 1 rural) will be done as per the GoI Key deliverables guidance's.@ 20000 Rs per study=40000 Rs 2.A paper on best practice of community based intervention on climate change health 2 reports.@ 20000 Rs per paper=40000 Rs The above mentioned studies will be carried out by the Community medicine department of the selected Govt Medical colleges. Total budget proposed =80000 Rs per FY
<b>114.7</b>	<b>HR</b>					<b>0.00</b>		<b>0.00</b>	
114.7.1	HR for NPCCHH								Existing HR under other scheme to manage
<b>Grand Total</b>						<b>1.00</b>		<b>13.00</b>	

*J. R. Singh*  
15/12/2024



# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-8**  
**NOHP**



## NCD-8\_NOHP

## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NOHP</b>					1.50		1.50	
115	Implementation at DH					1.50		1.50	Position of Dental Surg. (Regular from Govt. have been created at DHH, SDH, CHCs & across the State , ( sanctioned post -584) of which 374 are already inducted in the system. Present Status : FY 2022-23 Around 25,000 OPD services on oral care has already been provided.3000 dental extractions done,200 minor oral surgery & 250 oral prophylaxis services has been provided.
115.1	Dental Chair, Equipment			0.00		0.00		0.00	<b>Background:</b> 153 dental Chairs are already their at facility level and 296 are in process of procurement by OSMCL. As the requirement has already been saturated for 32 DHH ,32SDH and 375 CHC & 7 UCHC,there is no new proposal on this head.
115.2	Consumables for DHHs	Lumpsum	150000	1.50	1	1.50	1	1.50	<b>Ongoing Activityoperational Cost for dental wing:</b> Dental wing Consumable of DHHs <b>Recurring cost proposed</b> i. Rs 2.50 Lakh per DHH consists of >= 10 Blocks =16 DHHs ii. Rs.1.50 lakhs per DHH consists of < 10 Blocks= 16 DHH ( Capital Hospital & RGH included) 16 DHH @1.5 Lakh X 16 DHHs= Rs. 24.00 Lakh 16 DHH @ Rs 2.5Lakh X 16 DHHs= Rs.,40.00 Lakh <b>Total Budget Proposed for FY 2024-25 &amp; 2025-26: Rs 64.00Lakh in each year</b> <b>GOI Norms :Rs 5.00 lakh per DHH</b>
116	Implementation at CHC/SDH					0.00		0.00	
116.1	Dental Chair, Equipment			0.00		0.00		0.00	<b>Background:</b> 153 dental Chairs are already their at facility level and 296 are in process of procurement by OSMCL. As the requirement has already been saturated for 32 DHH ,32SDH and 375 CHC & 7 UCHC,there is no new proposal on this head.
116.2	Consumables for SDHs & CHCs	Per unit/ Annum	20000	0.20	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Proposal for FY 2024-25 &amp; 2025-26:</b> @ Rs. 20,000/- per institution x 414 existing institutions (SDH-32+ CHCs& UCHC-382) Additional Dental Material & Instruments and consumables for the clinic
117	Mobile Dental Units/Van								Not Proposed

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
118	State specific Initiatives and Innovations					0.00		0.00	
118.1	2 days orientation on National Oral Health at State level for MO Dental	30/batch	124000	1.24	0	-	0	0.00	<p><b>Ongoing Activity:</b>  <b>Present Status:</b> 300 dentist were trained at SCB MCH , Cuttack .  <b>Proposal :</b> State Govt. Sanctioned all position of Dentist at CHC level. 584 Out of which 374 are in-positioned. Vacancy of the rest positions will be recruited shortly through OPHC.Two batches proposed for balance 60 positions ( 374-300) . If recruitment process will complete in 23-24 , the funds will be proposed in Supplementary PIP 24-26.                      Batch Size: 30                      State Load: 60                      Total Batch 2024-25 &amp; 2025-26: 1 batch each year (left out)</p>
118.2	One day refresher training at State Level	30/batch	80000	0.80	0	-	0	0.00	<p><b>Ongoing Activity</b>  <b>Proposal:</b> One day refresher training on NOHP at State Level  <b>State Load: 360 for 2 years</b>  <b>Total Batch 2024-25: 5batches</b>  <b>Target for 2025-26: 7 batches</b></p>
118.3	IEC/BCC under NOHP								<p><b>Observation of Oral Health Day on 20th March</b>  <b>State Level: (before 7 days)</b></p>
118.3.1	Mass Media Campaign for NOHP								
118.3.1.1	Advertisement in the DD & local channels	Per minute	171100	1.71	0	0.00	0	0.00	Timing: 1 minute per day for 4days per year as per I&PR rates
118.3.1.2	TV (Local channels)- Advertisement in the DD & local channels	Per minute	30000	0.30		0.00		0.00	
118.3.1.3	Advertisement through All India Radio	Per minute	60000	0.60	0	0.00	0	0.00	as per norms/state tariff
118.3.1.4	Advertisement through FM Channels & Community Radio	Per Advertisement	4354	0.04	0	0.00	0	0.00	as per norms/state tariff
118.3.2	State / District Level Observation	Lumpsum	110000	1.10	0	0.00	0	0.00	State level Observance along with media briefing
<b>GRAND TOTAL</b>						<b>1.50</b>		<b>1.50</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-1**  
**CPHC**





## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total CPHC</b>					15.96		15.96	
<b>150</b>	<b>Development &amp; Operation Health &amp; Wellness Centers - Rural</b>					-		-	<b>Target 2024-25 - 7316 (1296 PHC, 6020 SHC)</b> <b>Target 2025-26 - 7984 (1296 PHC, 6688 SHC)</b>
150.1	ICT for HWC- Internet connection			-		-		-	Funds proposed under old FMR head 17.2.1
150.2	Filling up of CBAC form and mobilizing for NCD screening			-		-		-	Proposed under NCD Component
150.3	Follow up of NCD patients for treatment initiation and compliance			-		-		-	Proposed under NCD Component
150.4	ASHA incentives for Ayushman Bharat Health & Wellness Centers (H&WC)	Per ASHA p.m	1000	0.01	0	-	0	-	<b>Ongoing Activity</b> <b>Team Based Incentives to ASHAs</b> <b>Background:</b> ASHAs are the backbone of the Primary Health Care Team - they are responsible for mobilising patients/clients to the HWCs. Based on the programmatic needs and GoI mandate - the ASHAs are incentivised under Team based incentives - (25 indicators). This activity was initiated from FY 2022-24. <b>Approval:</b> Rs.1000/per month will be paid to the ASHAs based on the HWC SHC team performance <b>Justification:</b> Incentives is being paid to ASHAs of rural areas for ensuring delivery of expanded range of services at SHC-HWC level on fulfilling set of deliverables mentioned under Team based incentives ( based on modified state guidelines placed in the writeup folder). Budgeted for 70% of total estimated cost. If required budget will be asked in supplementary stage.
150.5	Equipment for Rollout of B.Sc. (Community Health)			0.00		0.00		-	Not Proposed this year
150.6	<b>IT equipment for HWCs (PHC and SHCS)</b>					<b>0.00</b>		<b>0.00</b>	
150.6.1	Recurring Cost for PHC HWCs	Per facility	5000	0.05	0	0.00	0	-	<b>Ongoing Activity</b> Background: For the FY 2024-26 - the target PHC HWCs is 1296 and HWC SHC is 6688; approval for IT equipments already given for 1288 PHCs and 5400 SHCs through last PIPs <b>Detail Approval:</b> <b>For PHC HWCs:</b> FY 24-25: Target 1296 (Current Sanctioned 1288) I. Non Recurring: Procurement of IT equipments proposed for 8 PHC HWCs = 8x0.55=4.4 Lakhs II. Recurring cost @Rs 5000/ per annum for 1296 SHC-HWCs= 1296x 5000 = Rs. Rs.64.80 lakhs FY 25-26: Target 1296 (Expected to be fully operational by 24-25) I. Non Recurring: Not Applicable as 100% target achievement is expected by 24-25
150.6.2	Non Recurring: Procurement Desktop; software for PHC level H&WC (Rural)	Per facility	55000	0.55	0	0.00		-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.6.3	Recurring Cost for SC HWCs	Per facility	5000	0.05	0	0.00	0	0	<p>II. Recurring cost @Rs 5000/ per annum for 1296 PHC-HWCs= 1296×5000 = Rs. Rs.64.80 lakhs</p> <p><b>For SHC HWCs:</b></p> <p>FY 24-25: Target 6020 (Current Sanctioned 5400)</p> <p>I. Non Recurring: Procurement of IT equipments proposed for 620 SHC HWCs = 620×0.40=248 Lakhs</p> <p>II. Recurring cost @Rs 5000/ per annum for 6020 SHC-HWCs= 6020 × 5000 = Rs.301L.</p> <p>For 25-26: Target 6688 (Expected to be operational by 24-25: 6020)</p> <p>I. Non Recurring: Procurement of IT equipments proposed for 668 SHC HWCs = 668×0.40=267.2 Lakhs</p> <p>II. Recurring cost @Rs 5000/ per annum for 6688 SHC-HWCs= 6688 × 5000 = Rs.334.4L.</p>
150.6.4	Non Recurring: Procurement of Tablets; software for SC Level H&WC (Rural)	Per facility	40000	0.40	0	0.00	0	0	<p>I. Non Recurring: Procurement of IT equipments proposed for 668 SHC HWCs = 668×0.40=267.2 Lakhs</p> <p>II. Recurring cost @Rs 5000/ per annum for 6688 SHC-HWCs= 6688 × 5000 = Rs.334.4L.</p>
150.7	Tablets; software for implementation of ANMOL			0.00		0.00			<p><b>Tablet for Anmol device not proposed in current year. Only Device Allowance proposed at HSS-13</b></p>
150.8	<b>Drugs &amp; Supplies for Health &amp; Wellness Centres (H&amp;WC)</b>					0.00		0.00	<p><b>Ongoing Activity</b></p> <p>Target till 2024-25: 7316 (1296 PHC, 6020 SHC)</p> <p>Target till FY 2024-25: 7984 (1296 PHC, 6688 SHC)</p> <p>Background: Non recurring cost under Lab strengthening of newly proposed SHC and PHC HWCs shall be met out of State budget &amp; recurring cost for all SHC and PHC HWCs including newly proposed will be met out of XV FC Budget</p>
150.8.1	<b>Lab strengthening for SHC - HWC</b>					0.00			<p><b>Detail Proposal for SHC HWCs:</b></p> <p>FY 24-25: Target 6020 (Current Sanctioned 5400)</p>
150.8.1.1	Non Recurring Cost for SC HWCs	Per HWC	50000	0.50		0.00			<p>I. Non Recurring: lab strengthening for 620 SHC HWCs = 620×0.50=310 Lakhs</p>
150.8.1.2	Recurring cost for SC HWCs	Per HWC	10000	0.10		0.00			<p>For 25-26: Target 6688 (Expected to be operational by 24-25: 6020)</p> <p>I. Non Recurring: lab strengthening for 668 SHC HWCs = 668×0.50=334 Lakhs</p>
150.8.2	<b>Lab strengthening for PHC - HWC</b>					0.00			<p><b>Detail Proposal for PHC HWCs:</b></p> <p>FY 24-25: Target 1296 (Current Sanctioned 1288)</p>
150.8.2.1	Non Recurring Cost for PHC HWCs	Per HWC	100000	1.00	0	0.00			<p>I. Non Recurring: lab strengthening proposed for 8 new PHC HWCs = 8×1.0=8 Lakhs</p>
150.8.2.2	Recurring cost for PHC HWCs	Per HWC	30000	0.30		0.00			<p>FY 25-26: Target 1296 (Expected to be fully operational by 2024-25)</p> <p>I. Non Recurring: Not Applicable as 100% target achievement is expected by 2024-25</p>
150.9	<b>Trainings for Ayushman Bharat Health &amp; Wellness Centre (AB-H&amp;WC)</b>					0.00		0.00	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.9.1	Training on CPCH for CHOs	Per student	80500	0.81	0	0.00	-	<p><b>CPCH Course:</b>  <b>Background:</b> Out of 5400 sanctioned, 4810 CHOs are trained in CPCH and are in position. The remaining 590 (from already sanctioned) + 1288 (new target for FY 24-26) CHOs are expected to be recruited from the integrated nursing course. (Pass outs from 2019-20 academic session – BSc (N) &amp; PBBSc (N)); how ever, as contingency plan arising out of non availability of integrated course pass out candidates – 180 (about 10%) is proposed for the CPCH course  <b>Target:</b> FY 2024-26 for 180 candidates. No new proposal proposed in 2025-26.</p>	
150.9.2	Multiskilling of MPW and ASHAs at HWCs (SHC and PHC)	Per inst.	14000	0.14	0	0.00	-	<p><b>1. Multi skilling training for MPWs</b> on newer programmatic needs as per the 12 package of services  <b>Background:</b> MPWs from 6688 HWCs are trained on expanded package of services through a 10 days module through last PIPs. FY 2024-25  <b>Approval:</b> 4 days Refresher training for MPWs (M&amp;F) on newer programmatic needs as per the 12 package of services will be given once in two years  Budget: @ 8000(Rs.1000 per person/day×2 MPWs×4 Days) per HWCs for 6688 SHC HWCs: 6688 × 8000 = 535.04L</p> <p><b>2. Multi skilling trainings for ASHAs</b> on newer programmatic needs as per the 12 package of services  <b>Background:</b> ASHAs from 6688 HWCs are trained on expanded package of services through a 14 days module through last PIPs. FY 2024-25  <b>Approval:</b> 3 days Refresher training (non residential) for ASHAs on newer programmatic needs as per the 12 package of services will be given once in two years  Budget: @ 6000(Rs.400 per person/day×5ASHAs×3 Days) per HWCs for 6688 SHC HWCs: 6688 × 6000 = 401.28L  Total Budget: 535.04+401.28 = 936.32L (<b>Budgeted 80% i.e. Rs.749.06 Lakhs as HR positions may not be 100% at all HWCs</b>)  <b>NB: even though the budget is approved FY 2024-25, the activity will</b></p>	

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150.9.3	Additional Training of CHOs - CHO Induction for newly inducted CHOs	Per Batch	262140	2.62	0	0.00	0	<p><b>CHO Induction Training</b>  <b>Background:</b> as per GoI mandate, the CHO once inducted should go through a 15 days induction program; the state has customized the induction to 6 days induction and orientation to IT applications and portal and other 6 days as Basic Package of Services  <b>Approval (30 in a batch at state level)</b>  <b>FY 2024-25:</b> Target 6020 (Current Sanctioned 5400, as of now 4810 have been trained, Rest from the sanctioned will be trained by March 2024)            CHO Induction for newly inducted CHOs - 620 SHC HWCs = 262140×21=55.05L  <b>For 2025-26:</b> Target 6688 (Expected to be operational by 24-25: 6020)            CHO Induction for newly inducted CHOs - 668 SHC HWCs = 262140×22=57.67L  <b>Allocation of the district for training:</b>            Districts with more number of CHOs will have the training within the district itself i.e. Cuttack, Balasore, Ganjam, Keonjhar, Puri, Mayurbhanj, Bhadrak &amp; Jajpur.            Districts with less number of CHOs will come together for the respective training:            A. Koraput will host CHOs from Koraput &amp; Malkangiri            B. Dhenkanal will host CHOs from Angul &amp; Dhenkanal            C. Bolangir will host CHOs from Bolangir &amp; Boudh            D. Sambalpur will host CHOs from Bargarh, Sambalpur, Jharsuguda, Nuapada &amp; Subarnapur.            E. Sundargarh will host CHOs from Deogarh &amp; Sundargarh            F. Rayagada will host CHOs from Gajapati &amp; Rayagada            G. Kendrapara will host CHOs from Jagatsinghpur &amp; Kendrapara            H. Kalahandi will host CHOs from Kalahandi, Kandhamal &amp; Nabrangpur            I. Khurda will host CHOs from Khurda &amp; Nayagarh</p>	
150.9.4	Additional Training of CHOs - Training on Basic Package Services	Per Batch	165810	1.66	0	0.00	0	<p><b>Training on Basic Package Services</b>  <b>Background:</b> New CHOs will be trained on 6 days Basic Package of services training which includes service from 1st - 7th package  <b>Approval (30 in a batch - residential @ dist level)</b>  <b>FY 2024-25:</b> Target 6020 (Current Sanctioned 5400, as of now 4810 have been trained, Rest from the sanctioned will be trained by March 2024)            Basic Package of services for newly inducted CHOs - 620 SHC HWCs = 165810×21=34.82L  <b>For 2025-26:</b> Target 6688 (Expected to be operational by 24-25: 6020)            Basic Package of services for newly inducted CHOs - 668 SHC HWCs = 262140×22=36.48L</p>	

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150.9.5	Additional Training of CHOs - Training on Expanded Package Services	Per Batch	165810	1.66	0	0.00	0	-	<p><b>Training on Expanded Package of Service</b>  Background: as per Gol mandate the CHOs are to be trained in expanded range of services (8th - 12th package of services)  <b>Approval (30 in a batch - residential @ dist. level)</b>  <b>FY 2024-25:</b> Target 6020 (Current Sanctioned 5400, as of now 4810 have been trained, Rest from the sanctioned will be trained by March 2024)  Expanded Package of Service for newly inducted CHOs - 620 SHC HWCs = 165810×21=24.37L  <b>For 2025-26:</b> Target 6688 (Expected to be operational by 24-25: 6020)  Expanded Package of Service for newly inducted CHOs - 668 SHC HWCs = 262140×22=25.53L  <b>Allocation of the district for training:</b>  Districts with more number of CHOs will have the training within the district itself i.e. Cuttack, Balasore, Ganjam, Keonjhar, Puri, Mayurbhanj, Bhadrak &amp; Jajpur.  Districts with less number of CHOs will come together for the respective training:  A. Koraput will host CHOs from Koraput &amp; Malkangiri  B. Dhenkanal will host CHOs from Angul &amp; Dhenkanal  C. Bolangir will host CHOs from Bolangir &amp; Boudh  D. Sambalpur will host CHOs from Bargarh, Sambalpur, Jharsuguda, Nuapada &amp; Subarnapur.  E. Sundargarh will host CHOs from Deogarh &amp; Sundargarh  F. Rayagada will host CHOs from Gajapati &amp; Rayagada  G. Kendrapara will host CHOs from Jagatsinghpur &amp; Kendrapara  H. Kalahandi will host CHOs from Kalahandi, Kandhamal &amp; Nabarangpur</p>
150.9.6	<b>Any other (please specify)</b>			0.00		0.00		0.00	
150.9.6.1	<b>Multiskilling activities for HWC (ongoing)</b>			0.00		0.00		0.00	
150.9.6.1.1	Multiskilling of Mos	Per HWC		0.00		0.00		-	<p><b>Background:</b> At present out of 1296 PHC HWCs, there are 696 Mos are in position which have already received training under CPHC. However they need refresher traing on recent updates and developments. In addition 600 MOs who are expected to join at PHC HWCs need to be trained on CPHC.</p>
150.9.6.1.2	Refresher Training for Existing Mos	40/ Per batch	264660	2.65	0	0.00	0	-	<p><b>Approved:</b> 4 days of residential refresher training proposed for existing 696 MOs at State level  All existing MOS will be trained at state level @4 days/round . Each batch will consist of 40 participants.</p>
150.9.6.2	Multi Skilling of Newly recruited Mos							-	
150.9.6.2.1	Multiskilling of Mos on NCD & HWC	40 per Batch	214278	2.14	0	0.00		-	<p><b>Approved:</b> 3 days of NCD &amp; HWC training for newly to be joined 600 MOs at <b>State level</b> @40 participants in a batch. As per the current training calendar 400 new Mos will be trained by end of FY 23-24. Hence 5 batch training is proposed for rest MOs.(200 MOs)</p>

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150.9.6.2.2	Multiskilling of Mos on EPS	40 per Batch	264660	2.65	0	0.00	0	-	<b>Approved:</b> 8 days of EPS training for newly joined 600 MOs at State level Of the 600 MOs - 300 will be trained in the year 2024-25 & 300 in year 2025-26. The MOS will be trained in 2 rounds @4 days/round . Each batch will consist of 40 participants.
150.9.6.3	Multiskilling of PHC SNs (Theory + Skill Based)							-	
150.9.6.3.1	Multiskilling of PHC SNs/ANMs(Theamatic)	30 Per Batch	103470	1.03	0	0.00	0	-	<b>Background:</b> SNs/ANMs of 1296 PHCs have received CPHC training. However they need to be given refresher training on recent updates under CPHC. <b>Approved:</b> Refresher Multiskilling training of SNs/ANMs working at PHCs on recent updates in various programs as per GoI and state govt. and as per different programmatic needs is proposed. Hence, 4 days of refresher training will be carried at district level for SNs/ANMs (43 batches @30 participants in a batch)23 batches in 2024-25 & 20 batches in 2025-26.
150.9.6.3.2	Skill based training for PHC SNs/ANMs on Cancer screening	10 Per Batch	85230	0.85	0	0.00	0	-	<b>Background:</b> As per GoI mandate the the HWC PHC should conduct Cancer screening at the facility level - for this initiative the HWC PHCs are provided with an additional manpower of one SN at each of the HWC PHCs <b>Current Status:</b> The Cancer Screening training for SNs from HWC PHCs is completed for 778 HWC PHCs <b>Approved:</b> 518 SNs to be trained in Skill Based Training - the SNs will be trained in screening of patients for VIA, OVE & CBE (6 Days residential), total parcipant 518/10 per batch = 52 batches at DHH (26 batches in each year)
150.9.6.4	Multiskilling of CHOs (Theamatic areas)	30 Per Batch	25867	0.26	0	0.00	0	-	<b>Background:</b> HWCs are envisaged to deliver expanded range services that of beyond maternal and child health care services to include care for NCDs, Palliative and Rehabilitative care, Oral, Eye and ENT care, Mental health and first level care of emergencies and trauma, including free essential drugs and diagnostics services. At present 4810 CHOs are trained on EPS. These 4810 CHOs will be provided refresher trauning in the FY 24-25 and the rest 1878 (Remaining from 6688) will be trained in FY 25-26. <b>Approved:</b> Refresher Multiskilling training of CHOs on different thematic areas as per the new programs introduced by the GoI and State govt. based on programmatic needs. It is approved that the thematic training will be carried out in two FYs at district level. 4810 will be trained in year 2024-25 i.e. 160 batches and other 1878 CHOs in 2025-26 i.e. 63 batches @ 30 in a batch
150.9.6.5	Skill based/ Refresher training for CHOs								<b>Revised as per NPCC Recommendation</b>

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150.9.6.5.1	Skill based training on Cancer screening	Per Batch	85230	0.85	0	0.00	0	0.00	<p><b>Approval: Skill based training on Cancer screening</b>  <b>Background:</b> As per Gol and state mandate - the Cancer screening is a mandate at the HWCs (VIA, CBE &amp; OVE) and it is included in the diagnostic list of HWC SHCs. The Gol training for Ca. screening is for 12 days which the Govt of odisha is doing in two phases (6+ 6 days). The target for the State for NQAS certification of SC HWC is 963 by Fy 2024-26. Amongst them, 215 nos of CHOs have already completed their first phase of Training (6days).  <b>Current status:</b> Currently 215 CHOs are already completed 6 days of training.  <b>Approval:</b> The State proposes to complete the phase-2 training (6 days) of 215 nos of CHOs and train the rest of the 748 CHOs from NQAS targeted facilities (963-215) on the Skill based cancer screening training.  Phase -2 training of 215 nos of CHOs and Phase-1 training of 748 nos of CHOs, Total Target= 963 (96 Batches in 30 districts)  <b>Budget: @Rs.85230/- per batch X 48 batches = Rs.40.91 lakhs in each year.</b></p>
150.9.6.5.2	Skill based training on Computer literacy	Per CHO	500	0.01		0.00		0.00	<p><b>Not Approved: Skill based training on Computer literacy</b>  This initiative proposes that all the CHOs will be trained for basic computer skills. Along with the basic computer skills, they will also be trained in the existing portals- CPHC-NCD, RCH, Nikshay, IHIP, FPLMIS, UWIN and others  This training to be merged with refresher training of CHOs. Content on IT platforms &amp; computer literacy to be included in training module.  <b>Budgeted in 2024-25: @Rs.500/- per CHO X 3040 CHOs = Rs.15.20 lakhs</b>  <b>Budgeted in 2025-26: @Rs.500/- per CHO X 334 CHOs = Rs.1.67 lakhs</b>  <b>Budget shifted from Sub Line Item No. 150.29</b></p>
150.9.6.6	One and half day training on Eat Right India Movement for the HWCs	Per Batch		0.00		0.00		0.00	Trainings completed for all primary health care staff in FY 2023-24. So not proposed this year.
150.9.6.7	Establishment of study center for certificate course in community health	Per Unit		0.00		0.00		0.00	28 PSCs established across the state; no new proposal for FY 2024-25
150.10	<b>Printing activities for Ayushman Bharat H&amp;WC</b>			-		-		-	Printing of modules on all 12 services for the newly inducted Medical officers and CHOs ; this also includes the operational guidelines for reference
150.10.1	HWC SHC	Per module	38.16	0.00	0	-		-	<p><b>For CHOs:</b>  printing of induction modules and modules for the 12 services (Induction - 1, EPS-7, BPS - 8, OG - 7 = 23 modules)  <b>Approval:</b> 600+1288 = 1888 units × 23 modules = 43424 modules @ avg. unit cost Rs. 38.16 as per the previous tender placed</p>

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150.10.2	HWC PHC	Per HWC	216.85	0.00	0	-	-	-	<b>For Medical Officers</b> (EPS - 7 modules and NCD module -1) <b>Approval:</b> Printing of modules for MOs -600 MOs × 8 modules = 4800 modules @ avg. unit printing cost Rs.216.85 as per the previous tender placed
150.11	<b>Printing of eat right tool kit &amp; handbook</b>								
150.11.1	Printing of Eat right tool kit	Per tool kit	990	0.01		-		-	Budget Sanctioned for all HWCs in previous PIPs. Printing in process.
150.11.2	Printing Handbook for ASHA	Per Copy	150	0.00		-		-	Budget Sanctioned for all HWCs in previous PIPs. Printing in process.
150.12	Strengthening of diagnostic services of Ayushman Bharat H&WC through PPP			-		-		-	- Not proposed as it is being funded through XVFC.
150.13	<b>Independent Monitoring Cost for performance assessment of Health &amp; Wellness Centre (H&amp;WC)</b>			-		<b>0.00</b>		<b>0.00</b>	<b>Ongoing activity</b>
150.13.1	Concurrent monitoring of HWC	Lumpsum	3000000	30.00		0.00	0	0.00	Not Proposed in 2024-25. <b>Approved in 2025-26:</b> Concurrent monitoring of HWC activities is being done by various govt. agencies like NHSRC/NITI Ayog. In addition various development partners and academic institutions are also conducting independent studies in collaboration with State. Hence no separate budget is proposed.
150.13.2	Involving MCHs for mentoring	Per HWC/ Per Month	10000	0.10	0	0.00	0	0.00	Involving MCHs for mentoring of 10 selected functional HWCs of nearby districts Target: Seven MCHs of the State & AIIMS, Bhubaneswar will provide mentorship guidance to 10 HWCs each in the respective districts @10000/- per month TA/ DA & honorarium cost for field visits X 12 month x 8 = Rs.9.60 lakhs
150.14	Outsourcing of the services (Out Reach Activities) of selected Sub Center HWCs where the ANM position is vacant since long	Per SC	586000	5.86	0	0.00	0	0.00	Ongoing Activity, Approved only for existing 38 operational SCs covered under this initiatives. Detail modalities at Annexure B
150.15	House Rent for SC HWCs where Govt. building isn't available	Per SHC HWC p.m.	2500	0.03	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Approval for 2024-25:</b> <b>Proposal 1:</b> As per Portal 693 SHC HWC are operating in rented Buildings <b>Proposal 2:</b> Out of the proposed 1210 new SHC HWCs 968 are not having govt. buildings (Building Sanctioned construction going on) Total 1661(693+968) SHC HWC proposed for house rent @Rs.2500/- p,m, (including electricity) <b>Approval for 2025-26:</b> Out of 1661 SHC HWC,80% SCs shall have its own building and thus proposed house rent for 332 SC HWCs @Rs.2500/- p,m, (including electricity)

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150.16	e-Decision Support System for Community Health Officers(DSS) at Sub Center Health and Wellness Centers- CHO Sathi App	Per CHO	500	0.01	0	0.00	0	0.00	<b>Budget for FY 2024-25:</b> Training of Newly recruited CHOs on e-DSS: Rs 500/-x 620=3.10 Lakhs <b>Budget for FY 2025-26:</b> Training of Newly recruited CHOs on e-DSS: Rs 500/-x668=3.34 Lakhs Refresher training for all CHOs: Rs 500/-x6688= 33.44 Lakhs <b>Details at CPHC Write-up Justification at Annexure-C</b>
150.17	Award to best performing HWC at the state level	Lumpsum	250000	2.5	0	0.00	0	0.00	<b>State Level Award Ceremony for Best Performing SC-HWC on the UHC day. Detail modalities at CPHC Write-up Justification Annexure-D</b>
150.18	Award to best performing HWC at the district level	annually	30000	0.3	0	0.00	0	0.00	District Level Award Ceremony for Best Performing SC-HWC on the UHC day
150.19	District bi-annual Convergence Meeting with NHM & NAM	Bi annual	10000	0.1		0.00	0	0.00	<b>District level bi annual convergence meeting =10000x30x2=6L</b>
150.20	Quarterly Convergence Meeting at the Block level with NHM & NAM	quarterly	5000	0.05		0.00	0	0.00	<b>Quarterly Convergence Meeting at the Block level (the state has 314 block) =5000x314x4= 62.8L</b>
150.21	Implementation of AB-HWC Mobile App in 100% Health and Wellness Centers	Per participant	500	0.01	0	0.00	0	0.00	On going Activity: Approval for 2023-24- 4896 (3634 nos of CHOs from SC-HWC, 1228 nos of ANM from PHC-HWC, 106 nos of Staff Nurse from UPHC-HWC) . <b>Approval:</b> FY 24-25: 2464 (CHO-2386, ANM - 68, UPHC SN- 10) FY 25-26: 668 CHO <b>Detail modalities at Annexure-E</b>
150.22	Equipping the Sub-Centre/ PHCs -Health and Wellness Centers with essential equipment, Instruments and furniture (EIF) for the delivery of Comprehensive Primary Health Care Services. (Without Civil Cost)	Lumpsum		0.00		0.00		0.00	To be taken after due facility assessment.
150.23	<b>Incentives under CPHC</b>					<b>0.00</b>		<b>0.00</b>	
150.23.1	Performance incentive for Mid-level service providers							0.00	The CHOs' performance is tracked through 28 state customised indicators out of the 6020 SHCs - 4810 CHOs are already in position so they will be eligible to get their incentives for 12 months and the rest 1210 CHOs who are expected to join in FY 24-25 will be eligible for getting 8 months incentive
150.23.2	for Old CHOs	Per month	15000	0.15		0.00		0.00	As it is a performance linked incentive, budget has been proposed 70% of the total entitlement <b>(i.e. 4810x15000x12=865.8L)</b> <b>Budgeted under HSS-9_HRH, SI.No.188</b>
150.23.3	for New CHOs	Per month	15000	0.15		-		0.00	As it is a performance linked incentive, budget has been proposed 70% of the total entitlement <b>(i.e. 1210x15000x8=145.2L)</b> <b>Budgeted under HSS-9_HRH, SI.No.188</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.23.4	Team based incentives for Health & Wellness Centres (H&WC - Sub Centre)	Per HWC	36000	0.36				0.00	Proposal 2024-25: Team based incentive proposed for 6020 for ANM & MPW(M) under SC HWCs which is tracked through state customized 27 indicators Amount of Incentive @ 3,000/- per month per SC as team based incentives to ANM/MPW(M)= $6020 \times 12 \times 0.03 = \text{Rs. } 2407.68\text{L}$ Budgeted: As it is a performance linked incentive, budget has been proposed 70% of the total entitlement - Rs.1517.04 lakhs <b>Budgeted under HSS-9_HRH, Sl.No.188</b>
150.23.5	Team based incentives for Health & Wellness Centres (PHC-H&WCs)	Per Inst. Per annum	96000	0.96				0.00	Proposal: Team based incentive proposed for 1296 PHC HWCs Proposed incentive: i. MBBS MO @ Rs. 3000/- Per Month x 12 months = Rs. 36000 ii. AYUSH MO @ Rs. 2000/- Per Month x 12 months = Rs. 24000 iii. Paramedics @Rs. 3000/- Per month x 12 months = Rs. 36000 = 36000 + 24000 + 36000 = Rs. 96000 = 96000 x 1296 = Rs. 1244.16 Lakhs Budgeted: As it is a performance linked incentive, budget has been proposed 70% of the total entitlement - <b>Rs. 870.91 Lakhs</b> <b>Budgeted under HSS-9_HRH, Sl.No.188</b>
150.24	Strengthening primary EMO Eye Care by engagement of EMOs	Lumpsum	9618000	96.18		0.00		0.00	<b>Dropped as per NPCC Recommendation</b> Eye Mitra Optician (EMO) are rural entrepreneur, who are trained by OSELFunder Odisha Skill Development Scheme, on identification and correction of Refractive Errors. The proposal envisages strengthening primary eye care services involving EMOs at PHC/UPHC HWCs in 14 selected districts of Odisha. <b>Details Proposal &amp; budget is at CPHC Write-up Justification Annexure H</b>
150.25	Fixed Day Case Confirmatory cum Referral Camp at SHC HWC	Per HWC	1500	0.02		0.00		0.00	<b>New Activity: Not Approved</b> It is proposed to organize a 'fixed day' at SHC HWCs where fixed day camps (Mental, Dental & Eye Care) can be organized for confirmation of cases, providing basic primary care and referral to higher facilities (if required). <b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure I</b>
150.26	Popularizing CPHC Services through mass media campgain	Lumpsum	4300000	43.00	0	0.00		0.00	<b>New Activity Recommended for One year only as per NPCC Recommendation</b> Its proposed to have an aggressive Mass media campaign to wide spread the awareness about services provided at HWCs and thereby improving its utilization. <b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure J</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.27	Strengthening supply chain management at SHC HWC	Lumpsum	3001000	30.01		0.00		0.00	<p><b>Shifted to HSS-12_Sl.No.-196 as per NPCC Recommendation</b></p> <p><b>New Activity</b></p> <p>Its proposed to strengthen supply chain management at SHC HWC across state by creating login credentials of SHC HWCs in DVDMS, training CHOs on forecasting &amp; indenting through e-Niramaya &amp; supporting in transportation of drugs &amp; logistics. The transportation cost to the CHOs under this initiative is proposed under HSS-7 (SI-180: free drug initiatives). Only training cost is proposed under CPHC.</p> <p><b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure K</b></p>
150.28	Jan-Sambad at SC HWCs	Per HWC	2000	0.02		0.00		0.00	<p><b>New Activity: Not Approved</b></p> <p>Under this initiative, it is envisaged that the SC HWC along with JAS will conduct one public meeting involving with wider participation from the community under "Jan-Sambaad".</p>
150.29	Computer literacy training of the CHOs	Per CHO	500	0.01		0.00		0.00	<p><b>Budget Shifted to Sub Line item No. 150.9.6.5 as per NPCC Recommendation</b></p> <p>This initiative proposes that all the CHOs will be trained for basic computer skills. Along with the basic computer skills, they will also be trained in the existing portals- CPHC-NCD, RCH, Nikshay, IHIP, FPLMIS, UWIN and others</p> <p><b>This Training to be merged with refresher training of CHOs. Content on IT platforms &amp; computer literacy to be included in training module.</b></p> <p><b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure M</b></p>
151	Wellness Activities at HWCs-Rural					0.00		0.00	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
151.1	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60		0.00		0.00	Budgeted under HSS-9_HRH, Sl.No.188
151.2	IEC activities for Ayushman Bharat Health & Wellness centre (H&WC)			0.00		0.00		0.00	Ongoing Activity
151.2.1	IEC Recurring Cost			0.00		0.00		0.00	IEC Recurring Cost : For FY :2024-25 1296 PHC HWC @ Rs 50,000/- for organising minimum 24 events in a year 6020 SHC HWC @Rs. 25,000 for organising minimum 24 events in a year For FY :2025-26 1296 PHC HWC @ Rs 50,000/- for organising minimum 24 events in a year 6688 SHC HWC @Rs. 25,000 for organising minimum 24 events in a year
151.2.1.1	IEC Recurring Cost PHC HWCs	Per HWC	50000	0.50	0	0.00	0	0.00	Observance of days and wellness activities at HWC - PHC - 1296 × 50000 = <b>Rs.648 Lakhs</b>
151.2.1.2	IEC Recurring Cost SC HWCs	Per HWC	25000	0.25	0	0.00	0	0.00	Observance of days and wellness activities at HWC - SHC - 6020 × 25000 = <b>Rs.1505 Lakhs</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
151.2.2	Day celebration	Lumpsum	0	0.00	1	0.00	1	0.00	<p><b>Proposal - Day celebration</b>  <b>State Level - @Rs.2.00 lakhs for State level Observation</b>  <b>1. HWC day - Rs. 1.00 lakhs</b>  <b>2. UHC day - Rs. 1.00 lakhs</b>  <b>District Level -</b>  <b>1. HWC day - Rs. 50000/dist. × 30 dist. = Rs.15.00 Lakhs</b>  <b>2. UHC day - Rs. 50000/dist × 30 dist. = Rs.15.00 Lakhs</b>  <b>Total= Rs. 30.00 lakhs + Rs.2.00 Lakhs =Rs. 32.00 Lakhs</b></p>
151.2.3	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60	0	0.00	0	0.00	<p><b>Budget Shifted from HSS-9_HRH, Sl.No.188</b>  <b>Background:</b>  This is an ongoing activity as per CPHC mandate. Budget is proposed based on increase in number of operational HWCs. Unit cost remains same. Considering the constraints of availability of trained Yoga teacher 50% of the total budget is proposed. As per GoI conditionality framework upto 10 Yoga sessions in a month will be conducted by a trained Yoga Teacher.  <b>Incentive/honorarium for Yoga instructor: @Rs.600 per yoga session</b>  <b>For FY 2024-25</b>  Total HWCs - 6020 SHC HWCs +1296 PHC HWCs = 7316 HWCs  Budget FY 2024-25: 500 x 10 x 7316x 12 months = Rs.4389.6 lakhs  Budget Proposed-50% of total cost- Rs.2194.80 lakhs  <b>For FY 2025-26</b>  Total HWCs - 6688 SHC HWCs +1296 PHC HWCs = 7984 HWCs  Budget FY 2025-26: 500 x 10 x 7984x 12 months = Rs.4790.4 lakhs  Budget Proposed-50% of total cost- Rs.2395.20 lakhs  NB:As per the state govt. Notification Yoga instructors are paid Rs.500 for facilitating one yoga session including travel cost, against the GoI norm of Rs. 250; this incentive includes travel expenses borne by the instructor as one instructor has to travel on an avg. 30 KMS to reach the facility. in addition getting yoga teachers in interior rural belts with low incentive is a real challenge.</p>
152	Tele-consultation facilities at HWC-Rural					15.96		15.96	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
152.1	Telemedicine/ teleconsultation facility under Ayushman Bharat H&WC			0.00		15.96		15.96	<p><b>Current status</b>  <b>Background/Current Status:</b>At present under e-sanjeevani eco system, state has 12 active Hubs,32 DHH Sub Hubs,19 SDH Sub Hubs,366 CHC Sub Hubs and 5742 spokes. These facilities are providing tele consultation services to the beneficiaries across state.  <b>Approval: New HUBs/Sub Hubs/Spokes are proposed in the following manner:</b>  <b>FY 2024-25:</b>  <b>A. Hubs:5 New (All New operational MCHs)</b>  I. Sri Jagannath Medical College and Hospital, Puri  II. Fakir mohan MCH , Baleshwar  III. Bhima Bhoi, Government Medical College &amp; Hospital, Bolangir  IV. Dharani Dhara Government Medical College, Keonjhar  V. Government Medical College, Sundargarh  <b>B. Sub Hubs: 29 New (100 % saturation of SDH (32)&amp; CHCs (382))</b>  <b>C. Spokes: 2242 New (All targeted PHC (1296)&amp; SHC HWC (6020))</b>   <b>FY 2025-26:</b>  <b>A. Hub: 3 (Saturation of all MCH expected to be operational)</b>  <b>I. Govt MCH Kalahandi</b>  <b>II. Govt. MCH Talcher,Anugul</b>  <b>III. Govt. MCH Jajpur</b>  <b>B. Sub Hubs: 0</b>  <b>C. Spokes: 668 (All targeted SHC HWC 6688)</b></p>
152.1.1	HUBs at Medical Colleges & Sub-hubs at DHHs					15.96		15.96	
152.1.1.1	Non Recurring Cost					-		-	
152.1.1.1.1	Telemedicine diagnostic kit:								State has planned to take-up this activity by providing Digital diagnostics devices at Spokes level, through the funding from XVFC. Hence no budget proposed
152.1.1.1.2	IT Equipment								

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
152.1.1.1.3	Computer & other accessories including printer	Per MCH	70000	0.70	0	-	0	<p><b>IT Equipment:</b> Supply of IT Equipment (Computer, Web Camera, Microphone) is proposed for Existing Hubs, New Hubs &amp; new Sub Hubs. The State has planned to have 6 IT sets at Hubs (Existing 4 sets provided) , 2 IT sets at DHH Sub-Hubs (Existing 1 set provided), one IT set at the other Sub-Hubs (at SDH/CHC level)and spokes. Additional IT set are proposed at Hubs and DHH Sub-Hubs to reduce the waiting time and call drop.</p> <p><b>Budget:</b> To match the state norm IT equipments are proposed in the following manner: <b>FY 2024-25:</b> For Existing Hubs: 24 @Additional 2 per Hub for 12 Hubs - For Existing DHH Sub Hubs: 32 @Additional 1 per DHH Sub Hubs for 32 DHH Sub Hubs For Newly Approved Hubs: 30 @ 6 per new Hub for 5 Hubs Newly Approved Sub Hubs (SDHs/CHCs): 29 @1 per new Sub Hub for 29 Sub Hubs <b>Total Requirement for FY 2024-25: 115</b> <b>Total Budget for FY 2024-25: Rs 70000x 115=80.50Lakhs</b> <b>FY 2025-26:</b> For Newly Approved Hubs: 18 @ 6 per new Hub for 3 Hubs <b>Total Requirement for FY 2025-26:18</b> <b>Total Budget for FY 2025-26: Rs 70000x 18=12.60 Lakhs</b> NB: The proposal for requirement of IT equipment for new spokes is proposed under ICT head of the PIP.</p>	
152.1.1.2	Recurring Cost					15.96	15.96		
152.1.1.2.1	Human Resource							To be mobilised from system & to be hired from market on session basis	
152.1.1.2.2	Super Specialist session at Hub (Part Time) @ Rs 3,000 per session of 120 minutes	Per session	2500	0.03	0	-	0	6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 17 Hubs = 5304 sessions	
152.1.1.2.3	Specialist sessions at Hub & sub-hubs (Part Time) @ Rs 3,000 per session of 120 minutes	Per session	2500	0.03	520	13.00	520	13.00 <p><b>A.Hub</b> 10 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 17 hubs = 8840 sessions <b>B.Sub-Hub (All 32 DHHs are considered as sub-hubs)</b> 10 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 32 hubs = 16640 sessions Type of Specialist consultation - O&amp;G, Peadriatic, Ophthalmology, SNCU follow up consultations, etc. <b>Total consultations = 8840+16640=25480</b> <b>Budget Approved for 2024-25: @Rs.2500/- X 25480 = Rs.637.00 lakhs</b> <b>Budget Approved for 2024-25: @Rs.2500/- X 27039 = Rs.675.98 lakhs</b></p>	

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S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval 2024-26				State's Remarks
					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
152.1.1.2.4	General consultation Sessions at Sub hub @Rs.1000 per session of 120 minutes	Per session	1000	0.01	0	-	0	-	6 sessions (duration - 120 minutes per session) per week x 52 weeks p.a. x 414 sub hubs = 129168 sessions Budgeted-70% of total cost- Rs.904.18
152.1.1.2.5	Tele-consultation Coordinator	Per person p.m.	19700	0.20	1	2.36	1	2.36	Engaged through outsource agency (Skilled labour rate @Rs.480/- per day for 26 days in a month = Rs.12480/- + ESI & EPF = Rs.19700/-)
152.1.1.2.6	Internet Charges	Per Month	2000	0.02	1	0.24	1	0.24	HUB(MCH) & SUB HUB (DHH) - Rs. 2000 / month = Rs. 11.76 L
152.1.1.2.7		Per Month	1000	0.01	0	-	0	-	SUB HUB(SDH & CHC) - Rs. 1000/month = Rs.49.68 L
152.1.1.2.8		Per Month	500	0.01	-	-	0	-	For Spokes Proposed in Recurring expenses
152.1.1.2.9	Miscellaneous Charges	Per Month	3000	0.03	1	0.36	1	0.36	Cost for printing of prescription, register etc
152.1.2	<b>Spokes for Model PHC HWCs</b>			0.00		-		-	
152.1.2.1	<b>Non Recurring Cost</b>			0.00		-		-	
152.1.2.1.1	Telemedicine diagnostic kit:			0.00					- Not proposed
152.1.2.1.2	IT Equipment			0.00					- Requirement saturated in previous years except printer
152.1.2.1.3	Printer	Per HWC		0.00		-		-	- Already Proposed in 2022-23
152.1.2.2	<b>Recurring Cost</b>			0.00		-		-	- Recurring cost for 5400 SHCs from all 30 districts.
152.1.2.2.1	Miscellaneous cost	Per HWC p.a.	5000	0.05	0	-	0	-	<b>Total HWCs - 1296 +6020 = 7316</b> • PHC HWCs - 1296 • SHC HWC - 6020 Total - 7316 × 0.05 = <b>Rs.365.8 Lakhs</b>
152.1.2.2.2	Internet connectivity charges	Per Month	500	0.01		-		-	<b>Dropped as per NPCC Recommendation</b> <b>Total HWCs - 1296 +6020 = 7316</b> • PHC HWCs - 1296 • SHC HWC - 6020 Total - 7316×0.01 = <b>Rs.438.96 Lakhs</b>
152.2	<b>Other IT Initiatives (please specify)</b>					-		-	
153	<b>CHO Mentoring</b>					0.00		0.00	
153.1	State Mentorship for the CHOs	Per CHO p.m.	5400	0.054	0	-	0	-	<b>Gol's mentorship initiative is initiated through CMC Vellore. At present state has 10 trained mentors. The state is expected to have 35 State mentors by end of FY 24-25. Each mentor will be tagged 36 CHOs each.</b>
153.2	Review cum Sensitization Meeting for HWC SHC team at the district level	quarterly	1200	0.012	0	-	0	-	<b>Quarterly District Level Review meeting</b> - Approved budget is Rs.300/CHO (Rs.200 for reimbursement of travel using public conveyance and Rs. 100/- for refreshment

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
153.3	Review cum Sensitization Meeting for HWC SHC team at the block level	8 times in a year	2400	0.024	0	-	0	-	<b>Block Level Review meeting (eight times in a year)</b> - Approved budget is Rs.300/HWC team (Rs.300 will be utilised towards refreshment cost for the team)
153.4	Tickler Bag in SC-HWC for Effective Tracking and Follow up for NCD Patients	Lumpsum							<b>Not proposed. All aspirational districts saturated through last year PIPs.</b>
153.5	CHO Leadership Certification Program	Per CHO p.m.	150	0.00	0	-	0	-	<b>Ongoing activity:</b> With the support from JHPIEGO, by end of FY 2023-24, 1 CHO in each block to be certified as CHO peer leader/CHO buddy. They are expected to play the role of a peer mentor for the remaining CHOs of their block to accomplish assigned task under CPHC. The detail write-up is attached at annexure G
153.6	Nurse Mentor for SC HWC	Lumpsum	10240000	102.40			0		<b>New Activity: Budget Shifted to HSS-6, Sl.No. 175 in 2024-25</b> Under this initiative, for the Aspirational Districts & Blocks covered under aspirational block programme of Odisha, for every 20 SC HWC, one Nurse mentor will be empanelled and will be reimbursed based on their performance. There are 1667 nos of SC HWCs in the 10 Aspirational districts of Odisha and for them, 83 nos of Nurse Mentors will be engaged. These Nurse mentors will be basically GNM/BSc nurse who are available for freelance mentoring. These mentors once empanelled, will provide NQAS field mentoring to the CPHC team members on one to one basis. <b>Budgeted: 50%</b> as empanelment of nurse mentors may take time to rollout the programme.

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# NHM PIP

## 2024-26

Programme Implementation Plan

### HSS-2

# Blood Services & Disorders



## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total Blood Services &amp; Disorders</b>					<b>102.11</b>		<b>131.02</b>	
<b>154</b>	<b>Screening for Blood Disorders</b>								
154.1	<b>Universal Screening of Sickle Cell at Field and Facility Level</b>								
154.1.1	Universal Screening	Per POCT	100	0.001	0	0.00	0	0.00	<p><b>Target &amp; Unit Cost Revised as per NPCC Recommendation</b></p> <p><b>Background: Kit Cost (Recurring Cost)</b> Screening Cost: Rs.150/- per screening (cost may vary depending on tender)</p> <p>Target Beneficiary for the FY 2024-25: 2263737 (20 targeted Districts ) Target Beneficiary for the FY 2025-26: 2238594 (20 Targeted districts)</p> <p>This fund shall be utilised for procurement of POCTs and reagent/ consumables used for screening through HPLC/ Capillary Electrophoresis etc..</p> <p><b>List of district wise targeted beneficiaries at Blood Services write-up justification Annexure A.</b></p> <p><b>Budget Approved 95%</b></p>
154.2	<b>Training, Capacity Building</b>					<b>0.00</b>		<b>0.00</b>	
154.2.1	Training of Service Providers for Universal Screening	Lumpsum				0.00		0.00	Detailed proposal at Blood Services write-up Justification Annexure-B
154.2.1.1	District ToT (1 day training)	Per Batch	94000	0.94	0	0.00		0.00	MOs of Larger Districts (No. of Blocks≥10): 6 Nos., MOs of Smaller Districts (No. of Blocks<10): 4 Nos. Batch Size: 40 Total batch: 3
154.2.1.2	Field level Training of Mos	Per Person	961	0.01	0	0.00		0.00	Training of MOs at MHT : 1 No. of MO per MHT, Total No. of MHT-416 nos Per Person: Rs.961/-
154.2.1.3	Field Level Training of CHOs	Per Batch	40000	0.40	0	0.00		0.00	Training of CHOs of SC HWCs: Total Nos of CHOs in SC HWC-3497 Batch Size: 40 Total batch: 87
154.2.1.4	Field Level Training of SNs	Per Person	1028	0.01	0	0.00		0.00	Training of SNs of 416 Nos. of MHT and facilities (240 CHC, 23 SDH and 21 DHH) in 20 targeted Districts: Total Nos of SN-700 Nos. Per Person: Rs.1028/- per person
154.2.1.5	Field Level Training of ANMs	Per Batch		0.00		0.00		0.00	This training will be provided to the ANMs in the Sector / Monthly Meeting. So no separate budget is proposed. Total ANM: 4266 Nos.
154.2.1.6	Field level training of ASHAs	Per Batch		0.00		0.00		0.00	This training will be provided to the ASHAs in the Sector / Monthly Meeting. So no separate budget is proposed. Total ASHA: 32230 Nos.

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
154.2.1.7	Printing of Training modules for District ToT and Field	Per Piece	200	0.00	0	0.00		0.00	CHOs-3497 Nos, SN-700, MO-518, ASHA/MPW-240 Nos
154.2.2	Training for roll out of counselling and awareness module	Lumpsum		0.00		0.00		0.00	Proposed as recommended by MoTA <b>Detailed proposal at Blood Services write-up Justification Annexure-C</b> Proposal submitted to MoTA
154.3	IEC/BCC	Lumpsum						0.00	<b>Detailed proposal at Blood Services write-up Justification Annexure D</b> Proposal submitted to MoTA
154.4	Provisioning of Sickle Cell Status Cards	Per card	20	0.0002	0	0.00	0	0.00	<b>Target Revised as per NPCC Recommendation</b> <b>Target Beneficiary for the FY 2024-25: 2263737</b> <b>Target Beneficiary for the FY 2025-26: 2238594</b> <b>Budget for FY 2024-25: Rs.20/- X 2263737=Rs. 452.75 Lakhs (Approx.)</b> <b>Budget for FY 2025-26: Rs.20/- X 2238594= Rs. 447.72 Lakhs. (Approx.)</b> The actual amount to be paid as per the competitive bidding. District wise target beneficiary is at Budget Annexure. <b>This fund is proposed in NHM PIP FY 2024-26.</b> <b>Detailed proposal at Blood Services write-up Justification Annexure E</b> <b>Budget Approved 95%</b>
154.5	Sickle Cell Database Entry (Portal/Mobile app)	Per case	5	0.0001		-			<b>Dropped as per NPCC Recommendation</b> - The sickle cell database entry shall be done at the source those who will screen the case in the field (MHT/ANM/CHO/LT etc)
154.6	Screening / Management of Positive Sickle Cell Cases					0.00		0.00	<b>New Activity</b> <b>Detailed proposal is at Blood Services write-up Justification Annexure-F.</b> <b>Proposed in 2025-26</b> <b>Budget Approved 50%</b>
154.6.1	Recurring cost of CVS per case	Per case	2000	0.020		0.00	0	0.00	
154.6.2	Maintenance cost for CVS Centre	Per Center	60000	0.600		0.00	0	0.00	
154.6.3	Incentive to ASHA for motivation of ANC PW for screening	Per ASHA	20	0.000		0.00	0	0.00	
155	<b>Support for Blood Transfusion</b>					<b>102.11</b>		<b>131.02</b>	
155.1	Free user charges for blood transfusion of all cases treated at Public Health Facilities	Per Unit	400	0.00	17711	70.84	17711	70.84	Free Blood Issued in 2022: 4.56 lakhs Budget Approved for 2024-25: 4,60,000 units Budget Approved for 2025-26: 4,60,000 units
155.2	Establishment of New Blood Component Separation Units	Per unit	8548000	85.48		-	0	-	<b>Detailed proposal at Blood Services write-up Justification Annexure-G</b> <b>Proposed in 2025-26</b>
155.3	Lab Automation of Blood Grouping and Cross Matching Services	Per unit	175	0.00	44660	31.26	49126	60.18	<b>Detailed proposal at Blood Services write-up Justification Annexure-G</b> <b>Estimated Budget: Rs.1057.45 lakhs, budgeted 40% as rollout of activities may take time</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
155.4	Lab Automation of Antibody Screening			-		-		-	Detailed proposal at Blood Services write-up Justification Annexure-G To be taken up out of State budget fund
155.5	Other recurring cost for 3 Day Care Centers	Per Unit	100000	1.00	0	-	0	-	<b>Ongoing Activity</b> <b>For DHH Balasore, DHH Kandhmal &amp; RGH Rourkela.</b> <b>Head of expenses -</b> 1.1.HR proposed in Human Resource SD A. Staff Nurse:6nos B. Lab Tech: 3 nos C. Medical officer: 3 nos D. Counselor: Existing counselor are multitasked and engaged for the purpose. E. Attendant: Under State Budget Scheme 1.2.Other recurring cost @Rs.1.00 lakhs per unit x 3 unit = Rs.3.00 lakhs (Proposed as per last year approval)
<b>156</b>	<b>Blood Bank/BCSU/BSU/Thalassemia Day Care Centre</b>								
156.1	Equipment for Blood Banks/BSU/BCSU	Lumpsum		0.00		0.00		0.00	<b>To be met out of State Budget</b>
156.2	Equipment for Day Care Centre			0.00		0.00		0.00	No new Day Care Center proposed in this Year
156.3	Recurring Cost of BSUs	Per BSU	24000	0.24	0	0.00	0	0.00	Recurring expenses for Blood storage unit (BSU) :- Total FRU in the State - 94; Blood Bank functional in : 51 FRUs; BSU functional in 42 FRUs. Recurring funds approved 42 BSUs @24000/- per BSU per Annum x 42 BSUs =Rs.10.08 lakhs (On going activity)
156.4	E-rakt kosh	Lumpsum/ per annum	17035000	170.35	0	-	0	-	170.35 Lakhs (Including the Cost of Code Upgradation/Maintenance/Audit) <b>Current Status:</b> e-blood bank is operational at 72 Blood Bank (Govt. Blood Bank- 55, 16 Private Blood Banks & 1 Red cross Blood Bank). 65 Manpower Support has been provided to the Govt. and Red Cross Blood Centers (56 Blood Centers) @Rs20024 per person (Including 18% GST) <b>Justification:</b> NHM has supported for positioning of Technical Resources at all Govt. and Red Cross Blood Banks to operationalise e-Blood Bank since 2015-16. The application has already integrated with e-Rakt Kosh of GOI. Proposal for 2024-25 and 2025-26: Budget proposed with resource cost at par with the Techno-Managerial Skilled Labor Cost prescribed by H & FW Department, Govt. of Odisha adhering to the Minimum Wages Act. Budget also included the Application Maintenance, Change Request, Code Upgradation and Cyber Security Audit Cost of the Application.(Apprx @1 Lakh+GST per Month)

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
156.5	Blood Bank/Blood Storage Unit (BSU) Training	20/batch	179000	1.79	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Proposed as per last year approval</b>  Justification: Total FRU 94, out of 51 BB. BSU requirement 43. Training requirement 43 x 2 (MO 1 + LT 1) = 86. Total trained = 229, excess achievement due to transfer &amp; retirement. In view of transfer &amp; retirement every year.  Status:  Target for 2022-23: 1 batch (20/ batch)  Ach till Mar'23: 1 batch - 15 Participants  Target for 2023-24: 1 batch (20/ batch)  Projected achievement by Mar'24: 1 batch  <b>Approved for 2024-25: 2 batches (20/ batch)</b>  <b>Approved for 2025-26: 2 batches (20/ batch)</b>  <b>Budget: Rs. 161500 + Rs. 17,500 manual printing of 50 booklets= Rs. 1,79,000/ batch</b></p>
<b>157</b>	<b>Blood collection and Transport Vans</b>								
157.1	Mobile blood collection Vans - Non recurring	Per MBCV	6000000	60.00	0	-		-	<b>Approval Pended</b>
157.2	Mobile blood collection Vans - Recurring	Per unit p.a.	308880	3.09	0	-	0	-	<p><b>Activity Approved In-principle</b>  <b>Ongoing activity</b> : Proposed as approved last year.  Operational cost for Mobile blood collection vans:  1. POL/DOL @Rs.25000/- p.m. per unit  2. Contingency @Rs.740/- p.m. per unit (towards minor emergency repairs, stationary items (paper, pencil and pen), consumables (cotton, syringe, sanitizer, surgical spirit and band-aid), refreshment for staff and IEC materials such as banners and leaflets. )  HR proposed under HSS head</p>
<b>158</b>	<b>Other Blood Services &amp; Disorders Components</b>								
158.1	<b>IEC/BCC activities under Blood Services</b>								The proposed IEC/BCC activities will proposed to improve voluntary blood collection. Current status: 68% through voluntary blood donation.
158.1.1	<b>Mass Media Interventions</b>								-
158.1.1.1	Publicity through Print Media	Per day	100000	1.00	0	-	0	-	One time display for Color Quarter page advt. in 1 paper for 2 newspaper for 6 days per year
158.1.2	<b>Mid Media Interventions</b>								-
158.1.2.1	<b>Day celebration :</b>								Days planned to be observed: 1. Blood Donor Day (14 Jun) 2. National Voluntary Blood Donation Day (1st October)

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
158.1.2.1.1	At State level	Per event	150000	1.50	0	-	0	-	Budget Breakup: 1. Launching Ceremony: Rs.30000/- 2. Mass Rally involving 600 participant (Pla Card, Banner, Snacks & launch) :Rs.90000/- 3. Prize to best performing blood banks & organisers of VBD camps : Rs. 30000/-
158.1.2.1.2	At Dist level	Per event per dist	15000	0.15	0	-	0	-	@Rs.15000/- per district per event X 2 event Unit cost proposed as approved in last year
158.2	Support to CoE, Sickle Cell, VIMSAR Burla			-		-		-	As per NPCC discussion, the proposal shall be proposed in Supplementary PIP, Once the guideline is developed by GoI. Detailed proposal at Blood Services write-up Justification Annexure-H & H.1
<b>Total Screening of Blood Disorders</b>						<b>102.11</b>		<b>131.02</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-6**

**Quality Assurance**



## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total Quality Assurance</b>					<b>79.13</b>		<b>78.23</b>	
175	<b>Quality Assurance Implementation &amp; Mera Aspataal</b>					<b>78.27</b>		<b>77.37</b>	
175.1	<b>Quality Assurance Trainings</b>					<b>0.00</b>		<b>0.00</b>	<b>Total number of Qualified External Assessors in the State:22</b>
175.1.1	Quality Assurance ToT	Per Batch	200000	2.00	0	-	0	-	<b>Proposal 1:</b> participants: 6 Master Trainer cum District mentor from each district (total 180 participants) to be trained in 2024-25, who will act as district Master Trainer, conduct mentoring visit to the targeted hospitals, act as External Assessors for PHC & HWC-SC targeted for NQAS certification. These trained assessors also utilised for conducting State Assessment of CHC, PHC & HWC SC. Budget proposal : <b>For 2024-25:</b> Rs.2.00 lakhs per batch X 5 batches = Rs.10.00 lakhs & same for 2025-26
175.1.2	2 days Quality Assurance Training (including training for internal assessors, service providers at State and District levels)	Per Batch	47000	0.47	0	-	0	-	<b>Proposal 2:</b> 2 days Quality Assurance Training (including training for internal assessors, service providers at District Level for PHC (MO, Pharmacist/LT) & HWC SC (CHO) from targeted PHC & SC HWCs. Batch Size: 30 1 batch for 14 districts having less than 10 Block and 2 batches for 16 districts having 10 or more blocks for creating pool of master trainer & internal assessors. <b>Proposal 2024-25:</b> Rs.47000/- per batch X 46 batch = Rs.21.62 lakhs <b>Proposal 2025-26:</b> Rs.47000/- per batch X 46 batch = Rs.21.62 lakhs
175.1.3	Miscellaneous Activities under QA (Quality Course, etc.)	per person	215250	2.15	0	-	0	-	<b>Revised as per NPCC Recommendation</b> <b>Ongoing Activity.</b> Till Date 52 HMs are trained. Only Hospital Managers will be nominated for this training. Selection criteria will be year of services and Out Standing Performance. 1. PGDHQM Course at TISS, Mumbai @Rs.215250/- per person Target for 2024-25: 15 Nos Target for 2025-26: 15Nos
175.1.4	Mera Aspataal Training	33/ batch	0	0.00		-		-	<b>Ongoing Activity</b> Mera Aspataal is functional in all DHHs. Proposal 2024-26: No new proposal under NHM as MO Sarkar Patient feedback system is being implemented in the State wherein administrative officers of the Department used to take feedback from sample patients those who attended public health facilities for getting services.
175.1.5	Any other (please specify)	Per person	0	0.00		-		-	
175.2	<b>IMEP Training</b>					<b>0.00</b>		<b>0.00</b>	
175.2.1	TOT on IMEP			0.00		-		-	Not proposed separately. Integrated with Kayakalp training.
175.2.2	IMEP training for state and district programme managers			0.00		-		-	Not proposed separately. Integrated with Kayakalp training.
175.2.3	IMEP training for medical officers			0.00		-		-	Not proposed separately. Integrated with Kayakalp training.
175.2.4	Others (please specify)			0.00		-		-	Not proposed separately. Integrated with Kayakalp training.

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
175.3	<b>IEC Activity under NQAP, LaQshya, Kayakalp &amp; Mera-Aspataal (Signages- Approach road, Departmental, Directional and other facility level signage's)</b>								Budget proposed for the hospitals taken up for NQAS certification. Fixing of different Signages, protocol, posters in hospitals, printing of Registers etc. <b>In 2024-25:</b> @Rs. 1.00 lakh for 87 CHC, @Rs. 0.50 lakh for 648 PHC & @Rs. 0.30 lakh for 1925 HWC-SC proposed for NQAS Certification. <b>In 2025-26:</b> Rs @ Rs. 0.50 lakh for 129 PHC & @Rs. 0.30 lakh for 962 HWC-SC proposed for NQAS Certification <b>Prototype of IEC materials required for all level of hospitals are being developed and communicated to districts.</b> Proposal 2024-25: Rs.1.00 lakh X 50 CHC= Rs.50.00 lakhs, Rs.0.50 lakh X 512 CHC= Rs.50.00 lakhs Proposal 2025-26: Rs.47000/- per batch X 46 batch = Rs.21.62 lakhs
175.3.1	DHH	Per unit	0	0.00		-		-	Not Proposed. Fund required for fixing required IEC will be met out of Ama Hospital programme (State Budget). Detailed write up attached.
175.3.2	SDH	Per unit	0	0.00		-		-	Not Proposed. Fund required for fixing required IEC will be met out of Ama Hospital programme (State Budget). Detailed write up attached.
175.3.3	CHC	Per unit	0	0.00		-		-	Not proposed in PIP. Required fund will be met out of State specific Scheme i.e. Ama Hospital initiatives.
175.3.4	PHC	Per unit		0.00		-		-	To be met out of S.No.175.8.4
175.3.5	SC HWC	Per unit		0.00		-		-	To be met out of S.No.175.8.4
175.3.6	Printing of SOPs for implementation of NQAS, Kayakalp & LaQshya			-		-		-	Draft SOP communicated to all targeted hospitals. Hospital Quality team will customized the SOPs in consultation with the process owner and print it out of IEC fund. So no separate budget proposed.
175.4	<b>Quality Assurance Implementation (for traversing gaps)</b>								
175.4.1	Calibration								<b>Calibration of all measuring equipments</b> to be done by KTPL. The activity to be taken up through outsourced agencies centrally. Budget under Comprehensive Annual Maintenance Grant, funded through NHM.Hence, No additional fund proposed under this head.
175.5	<b>EQAS for Labs</b>	Lumpsum							<b>Ongoing Activity.</b> External Quality Assurance Scheme (EQAS) programmes are accepted around the world as invaluable tools by Laboratories to assess the performance of their testing systems. Results are objectively compared to other Laboratories, using the same methodologies for every parameter. EQAS is also essential for getting NQAS Certification.
175.5.1	EQAS for Biochemistry Lab for <b>Chemistry-I</b>	Per Unit	8000	0.08	1	0.08	1	0.08	Ongoing activity with revised budget. Proposal for 2024-26: EQAS for Biochemistry Lab will be conducted with CMC Vellore, which will cost Rs. 8000/- for Chemistry-I per facility. EQAS will be conducted for all 32 DHHs, Budget: 8000X 32= <b>Total-Rs.2.56 lakhsX2years= Rs.5.12 lakhs</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
175.5.2	EQAS for Biochemistry Lab for <b>Chemistry-II</b>	Per unit	3000	0.03	1	0.03	1	0.03	Ongoing Activity. EQAS for Biochemistry Lab will be conducted with CMC Vellore, which will cost Rs. 3000/- for Chemistry-II. For the year 2024-25, EQAS will be conducted for 32 SDH & 187 CHC targeted for NQAS Certification. For the year 2025-26, EQAS will be conducted for all 32 SDH & 375 CHC Budget: 2024-25: Rs. 3000 X 219= Rs. 6.57lakh In 2025-26: Rs. 3000 X 407= Rs. 12.21 lakh. <b>Total Rs. 18.78 lakhs</b>
175.5.3	EQAS for Haematology Lab	Per Unit	2000	0.02	1	0.02	1	0.02	EQAS for Hematology Lab for all DHHs will be conducted with AIIMS, Delhi, which will cost Rs. 2000/- per DHH, for 32 DHHs Total cost proposed= Rs.64000/-
175.6	Specific Interventions for promotion of patient safety			-		<b>1.00</b>		<b>1.00</b>	<b>1. Electrical Audit of Hospitals:</b> Electrical Audit will be conducted out of NPCCHH PIP, NHM. So separate budget not proposed here. <b>2. Lightning Arrester</b> will be installed in all hospitals. For this purpose budget proposed under Civil section. So separate budget not proposed here. <b>3. Fire Safety measures</b> will be taken up for all hospitals. Budget for refilling of fire extinguisher proposed under QA head
175.6.1	Refilling of fire Extinguisher			-		<b>1.00</b>		<b>1.00</b>	<b>Ongoing activity with revised budget . Proposed under NHM PIP for Refilling &amp; procurement of fire Extinguisher (Statutory Requirement) -</b> Proposed as it is a recurring expenses and thus cannot be met out of Ama Hospital funds. <b>Proposal 2024-25:</b> Refilling of fire Extinguisher of all 32 DHH, 32 SDH, 375 CHC targeted for NQAS certification. 3 new fire extinguisher will be procured for 648 PHCs targeted for NQAS Certification. <b>Total Budget in 2024-25: Proposed for 2912 institutions:</b> 1. DHH: 32 X @Rs.1.00 lakh per institution = Rs.32.00 lakhs 2. SDH: 32 X @Rs.1.00 lakh per institution = 32.00 lakhs 3. CHC: 375 X @Rs.0.35 lakh per institution = Rs.131.25lakhs <b>Proposal 2025-26:</b> Refilling of fire Extinguisher of all 32 DHH, 32 SDH, 375 CHC to be done. <b>Total Budget in 2025-26: Proposed for 1128 institutions:</b> 1. DHH: 32 X @Rs.1.00 lakh per institution = Rs.32.00 lakhs 2. SDH: 32 X @Rs.1.00 lakh per institution = 32.00 lakhs 3. CHC: 375 X @Rs.0.35 lakh per institution = Rs.131.25lakhs
175.6.1.1	DHH	Per DHH	100000	1.00	1	1.00	1	1.00	Fire Extinguisher of all DHH, SDH & CHC will be refilled.
175.6.1.2	SDH	Per SDH	100000	1.00	0	-	0	-	
175.6.1.3	CHC	Per CHC	35000	0.35	0	-	0	-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
175.7	Facility Level Quality Team Meeting			-		0.24		0.24	<p><b>On going activity</b>  <b>Proposal 2024-25</b>  <b>Meeting Expenses: Total targeted institution: 899</b>                      Total Budget proposed for 899 (32 DHH, 32 SDH, 187 CHC &amp; 648 PHC) institutions:                      1. DHH: 32 X @Rs.2000/-per month X 12 month = Rs.7.68 lakhs                      2. SDH: 32X @Rs.1000/- per month X 12 months = 3.84 lakhs                      3. CHC/ PHC: (187+648) 835 X @Rs.500/- per month X 12 months = Rs.50.10lakhs  <b>Total Budget: Rs.61.62 lakhs</b></p> <p><b>Proposal 2025-26</b>  <b>Meeting Expenses:</b>                      Total targeted institution: 1066 (32 DHH, 32 SDH, 225 CHC &amp; 777 PHC)                      Total Budget proposed for 1066 institutions:                      1. DHH: 32 X @Rs.2000/-per month X 12 month = Rs.7.68 lakhs                      2. SDH: 32X @Rs.1000/- per month X 12 months = 3.84 lakhs                      3. CHC/ PHC: (225+777)1002 X @Rs.500/- per month X 12 months = Rs.60.12lakhs  <b>Total Budget: Rs.71.64 lakhs</b></p>
175.7.1	DHH	Per Month/ Per Unit	2000	0.02	1	0.24	1	0.24	Budget proposed for 32 DHH
175.7.2	SDH	Per Month/ Per Unit	1000	0.01	0	-	0	-	Budget proposed for 32 SDH
175.7.3	CHC/ PHC	Per Month/ Per Unit	500	0.01	0	-	0	-	Budget proposed for 187 CHC & 648 PHC in 2024-25 & 225 CHC & 777 PHC in 2025-26.
175.8	Paste Control Measures for Hospitals already NQAS certified			-		1.00		1.00	<p><b>On going activity. Proposed under NHM PIP as it is a recurring expenses and thus cannot be met out of Ama Hospital funds.</b></p> <p><b>Proposal 2024-25:</b> Paste Control Measures is required as per NQAS &amp; Kayakalp mandate. So fund proposed for all DHH, SDH, CHC and PHCs. Fund will be provided @ Rs. 1.00 lakh each for 32 DHH, Rs. 75000 each for 32 SDH &amp; Rs. 50000 each for 375 CHC and Rs.15000 each for 648 PHC (Total 97.20 lakh). Total= 340.70 lakh</p> <p>Paste Control Measures is required as per NQAS &amp; Kayakalp mandate. So fund proposed for all DHH, SDH, CHC and PHCs</p>
175.8.1	DHH	Per Institution	100000	1.00	1	1.00	1	1.00	
175.8.2	SDH	Per Institution	75000	0.75	0	-	0	-	
175.8.3	CHC	Per Institution	50000	0.50	0	-	0	-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
175.8.4	<b>Quality Assurance Implementation (for Traversing gaps at HWC SC &amp; PHC HWC)</b>								<p><b>New Proposal</b> One time additional Cost for HWC SC &amp; HWC PHC for NQAS Certification (Branding, Signage's, coloring, procurement of fire extinguisher, paste control etc. except minor repair/renovation) will be met out of this fund. The proposed budget is exclusive of civil upgradation works required for each PHC/SC. The civil upgradation work if needed will be met out of the budget head HSS-4 sl-170</p> <p><b>Proposal1 for SC HWC:</b> Rs. 0.20 Lakh per HWC SC for 1925 HWC SC in 2024-25 &amp; 962 HWC SC in 2025-26</p> <p><b>Proposal2 for PHC HWC:</b> Rs.0.50 Lakh per HWC PHC for 648 HWC PHC in 2024-25 &amp; 129 HWC PHC in 2025-26</p> <p><b>Budget proposal:</b> 2024-25 : Rs.0.20 lakhs per SC HWC x 1925 = Rs.385.00 lakhs + Rs.0.50 lakhs per PHC HWC x 648 = Rs.324.00 lakhs = Rs.709.00 lakhs 2025-26 : Rs.0.20 lakhs per SC HWC x 962 = Rs.192.4 lakhs + Rs.0.50 lakhs per PHC HWC x 129 = Rs.64.5 lakhs = Rs.256.90 lakhs Any recurring expenses required for paste control, refilling of fire extinguisher etc. shall be met out of JAS fund.</p>
175.8.4.1	For PHC HWC	Per Unit	50000	0.50	0	-	0	-	
175.8.4.2	For SC HWC	Per Unit	20000	0.20	0	-	0	-	
175.8.5	Quality Management System for AEFI surveillance under Universal Immunisation Programme			-		-		-	Budget proposed under RI PIP (NHM). Hence no separate budget proposed under this head.
175.9	<b>Quality Assurance Assessment (State &amp; district Level assessment cum Mentoring Visit)</b>			-		<b>0.90</b>		<b>0.00</b>	
175.9.1	State Mentoring Visit by SQUAU	Per SQUAU in a year	540000	5.40	0	-	0	-	<b>Ongoing Activity.</b> <b>Mentoring cost proposed for SQUAU for visiting to the hospitals targeted NQAS, LaQshya &amp; MusQan certification.</b>
175.9.2	Mentoring visit by MCH	Per Facility	8000000	80.00	0	-	0	-	Community Medicine department of MCH will provide mentoring support to the targeted CHC/PHC. Hence cost will be proposed for that purpose
175.9.3	District Mentoring Visits by DQUAU	Per DQUAU in a year	140000	1.40	0	-	0	-	<b>Ongoing Activity</b> <b>Mentoring cost proposed for DQUAU for visiting to the hospitals targeted NQAS certification.</b>
175.9.4	State Level Assessment (DH and SDH)	Per DH/SDH	89500	0.90	0	-	0	-	Proposal for DHH only 80% of the targeted DHH will be eligible for State certification in 2024-25.
175.9.5	State Level Assessment (CHC)	Per CHC	63000	0.63	0	-	0	-	Proposal for 70 SDH & CHC (70% of the targeted 187 CHC will be eligible for state assessment in 2024-25 & rest 94 proposed for 2025-26.
175.9.6	State Level Assessment (PHCs)	Per PHC	43000	0.43	0	-	0	-	70% of the targeted PHC (453) expected to be state certified in 2024-25 and rest 324 HWC SC targeted to be state certified in 2025-26.
175.9.7	State Level Assessment (HWC SCs)	Per HWC SC	28000	0.28	0	-	0	-	70% of the targeted HWC SC expected to be state certified in 2024-25 and rest 1510 HWC SC targeted to be state certified in 2025-26.
175.9.8	National Level Assessment (DH and SDH)	Per DH/SDH	210000	2.10	0	-	0	-	Proposal for DHH only

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
175.9.9	National Level Assessment (CHC)	Per CHC	146000	1.46	0	-	0	-	70% of the SDH/CHC eligible for state certification, targeted for national certification in 2024-25 and rest 134 in 2025-26.
175.9.10	National Level Assessment (PHC)	Per PHC	120000	1.20	0	-	0	-	70% of the PHC eligible for state certification, targeted for national certification in 2024-25 and rest 460 in 2025-26.
175.9.11	National Level Assessment (HWC SC)	Per HWC	96000	0.96	0	-	0	-	Total 4813 SC HWCs are functional till August 2023. Out of which 40% (1925) are targeted for certification in 2024-25. 50% of the targeted HWC SC will be assessed in 2024-25 and rest 1925 will be in 2025-26.
175.9.12	Quality Assurance Certifications, Re-certification (National & State Certification) under NQAS	Per unit	89500	0.90	1	0.90	0	-	<b>Proposal: Cost of re certification/ surveillance assessment (DH,SDH,CHC,PHC)</b> 4 DHH, 4 CHC, 23 PHC and 3 HWC SC are National certified till August 2023. These hospitals are to be assessed.(DHH kalahandi, DHH Rayagada, Capital Hospital BBSR, DHH Malkangiri, CHC Ghatagaon, CHC Bhandra, CHC harichandanpur, Keonjhar, CHC Mandasahi, Jagatsinghpur, 23 PHC & 3 HWC SC) If more hospitals required for Surveillance assessment/re-certification, fund will be spent accordingly and will be proposed in supplementary PIP.
175.10	Incentivisation on attainment of NQAS certification (Please provide details in Annexure)					75.00		75.00	<b>NQAS incentive for Nationally Certified facilities subject to fulfillment of below mentioned conditionality: The incentive will be disburse as per defined norms.</b> 1. If certified through physical assessment, incentive amount to be distributed as per norms given in MoHGW D.O. No. NHRC/13-14/QI/01/QAP, dated 24/05/2017 2. if certified through virtual assessment,30% of incentive as per point no. 1. 2.1 Submission of surveillance report to certification unit, NHRSC on yearly basis 2.2 Facility is re-certified, once expiry date of previous certification is over
175.10.1	Incentives for DHs/SDHs NQAS certified	Lumpsum	7500000	75.00	1	75.00	1	75.00	1. DHH Kalahandi (240 bed), certified for 12 departments. <b>Budget: 240 beds X Rs.10,000 / 18 department X 12 department = Rs.16.00 Incentive for NQAS certification will be released as per requirement.</b> <b>12 Deptt. Of DHH Kalahandi are certified under NQAS out of 18 Deptts.</b> <b>DHH Rayagada: 229 beds, Incentives- 1526666, Capital Hospital BBSR: 750 beds, Incentive-7500000, DHH Malkangiri: 350 beds, Incentive-3500000</b> <b>2. 2 DHHs ( Capital Hosp. &amp; DHH Malkangiri National Assessment completed and resuly awaited) Fund proposed for these Hospitals.</b>
175.10.2	Incentives for CHCs NQAS certified	Per CHC	10000	0.10	0	-	0	-	CHC Ghatagaon, Keonjhar - Rs.4.80 lakhs of 48 bedded for 12 dep.
175.10.3	Incentives for PHCs with beds NQAS certified	Per PHC	300000	3.00	0	-	0	-	1. CHC Manadasahi, Jagatsinghpur, CHC Bhandra, CHC harichandanpur of Keonjhar district - Rs.3.00 lakhs per Non FRU CHC
175.10.4	Incentives for PHCs without beds NQAS certified	Per PHC	200000	2.00	0	-	0	-	Till date 23 PHC got NQAS Certification. Fund will be released to PHCs. If more PHCs will be qualified fund will be proposed in Supplementary PIP if required.
175.10.5	Incentives for SC HWCs NQAS certified	Per SC	126000	1.26	0	-	0	-	Till date 3 SC HWC got NQAS Certification. External assessment completed for other 20 HWC SC and result awaited. Incentive proposed for 23 HWC SC. Additional Fund will be released to SC HWC if qualified and will be proposed in Supplementary PIP if required. Certification will be conducted for Seven Basic Packages (Rs.18000/- per package X 7 = Rs.1.26 lakhs per unit)

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S.No.	Scheme/ Activity	Approval 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
175.10.6	Any other Like Partnership Programme with PHFI, TISS, ASCI, AHA etc. (Please Specify)					-		-	Not Proposed	
175.11	<b>Planning and M&amp;E</b>					<b>0.00</b>		<b>0.00</b>		
175.11.1	State Quality Assurance Unit (Review meeting)			-		-		-	Non budgeted activity	
175.11.2	District Quality Assurance Unit (Review Meeting)			-		-		-	Non budgeted activity	
175.11.3	State/ District Quality Assurance Unit (Monitoring & Supervision)			-		-		-	Non budgeted activity	
175.11.4	State Quality Assurance Unit (Operational cost)			-		-		-	Non budgeted activity	
175.11.5	District Quality Assurance Unit (Operational cost)			-		-		-	Non budgeted activity	
175.11.6	QAC Misc. (IT Based application etc.)			-		-		-	Not proposed. State will used the Platform to be developed by NHSRC for capturing Outcome Indicators.	
153.6	Nurse Mentor for SC HWC	Lumpsum	10789000	107.89	0	-			<b>New Activity: Budget Shifted from HSS-1_Sl.No. 153 in 2024-25</b> Under this initiative, for the Aspirational Districts & Blocks covered under aspirational block programme of Odisha, for every 20 SC HWC, one Nurse mentor will be empanelled and will be reimbursed based on their performance. There are 1667 nos of SC HWCs in the 10 Aspirational districts of Odisha and for them, 83 nos of Nurse Mentors will be engaged. These Nurse mentors will be basically GNM/BSc nurse who are available for freelance mentoring. These mentors once empanelled, will provide NQAS field mentoring to the CPHC team members on one to one basis. <b>Budgeted: 50%</b> as empanelment of nurse mentors may take time to rollout the programme. <b>The detail is at CPHC write-up annexure attached at annexure N</b>	
<b>176</b>	<b>Kayakalp</b>					<b>0.86</b>		<b>0.86</b>		
176.1	<b>Kayakalp Trainings</b>			0.00		<b>0.00</b>		<b>0.00</b>		
176.1.1	External assessor training at state level	50/ Per Batch	50000	0.50	0	0.00	0	-	External assessor training at state level (1 batch), 50 participants - Rs.50,000/-	
176.1.2	Kayakalp Awareness cum internal assessment training at district level	Per batch	40000	0.40	0	0.00	0	-	Participants- DPHO, ADPHO (FW), Hospital Superintendent of DHH/SDH/CHC, MO PHC, HM/Jr. HM/BPM, PHEO, DPM, DMRCH, AM QA, Epidemiologist, Microbiologist, etc. working at District Level for creating a pool of Internal Assessor & selected CHO:@Rs.40000/- per batch for 46 batches = Rs.18,40,000/- 1 batch for 14 district having less than 10 Block and 2 batch for 16 districts having 10 or more blocks for creating pool of master trainer & internal assessors.	
176.1.3	Kayakalp Awareness cum internal assessment training at facility level	Per batch	17500	0.18		0.00		-	Not Proposed	
176.2	<b>Kayakalp Assessments</b>			-		<b>0.86</b>		<b>0.86</b>	<b>All activities approved. Hence, budget reduced in % to comply with amount of approval made in the RoP</b>	
176.2.1	Internal Assessments of DHs	Per DH	2000	0.02		0.00		-	Not Proposed	
176.2.2	Peer Assessments of DHs	Per DH	25000	0.25	1	0.25	1	0.25	Peer assessment all DHH to be conducted.	
176.2.3	External Assessments of DHs	Per DH Selected	61000	0.61	1	0.61	1	0.61	All DHH expected to be qualified for External assessment. Qualified in 2022-23: 26	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
176.2.4	Internal Assessments of SDH and CHCs	Per SDH/CHC	1000	0.01		0.00		-	Not Proposed
176.2.5	Peer Assessments of SDH and CHCs	Per SDH/CHC	13000	0.13	0	0.00	0	-	Peer assessment to be conducted for all 32 SDH/375 CHC.
176.2.6	External Assessments of SDH and CHCs	Per SDH/CHC	35000	0.35	0	0.00	0	-	284 (70%) of SDH/ CHC expected to be qualified for External assessment out of total 407 SDH/ CHCs targeted for Peer Assessment in 2024-25 & 304 (75%) of SDH/ CHC expected to be qualified for External assessment out of total 407 SDH/ CHCs targeted for Peer Assessment in 2025-26 Qualified in 2022-23: 224
176.2.7	Internal Assessment of PHCs/HWCs	Per PHC/HWCs	500	0.01		0.00		-	Not Proposed
176.2.8	Peer Assessment of PHCs/HWCs	Per PHC/HWCs	5000	0.05	0	0.00	0	-	Total PHCs: 1296 Total PHC HWCs expected to be functional: 1296 Peer Assessment of all PHC to be conducted
176.2.9	External Assessments of PHCs/HWCs	Per PHC/HWCs	8000	0.08	0	0.00	0	-	900 (70%) of PHC HWCs expected to be qualified for External assessment out of total 1287 PHCs targeted for Peer Assessment in 2024-25 & 965 (75%) PHC HWC expected to be qualified for External assessment out of total 1287 PHCs targeted for Peer Assessment in 2025-26. Qualified in 2022-23: 657  Justification for higher target: As 657 PHC HWCs have been qualified in 2023-24 for Kayakalp award & constant monitoring & mentoring done by district & state level, it is expected higher number of PHC HWCs to qualify under Kayakalp
176.2.10	External Assessments of SC HWCs	Per PHC/HWCs	2000	0.02	0	0.00	0	-	<b>Cumulative Target for SHS HWCs: 4813</b> <b>40 % SC HWCs expected to qualify for external assessment in 2024-25 &amp; 45% HWC SC expected to be qualified for external assessment in 2025-26 out of the total 4813 functional HWC SC.</b>
176.3	<b>Kayakalp Awards</b>			-		<b>0.00</b>		<b>0.00</b>	-
176.3.1	Kayakalp Award Winner DH	One DH	5000000	50.00	0	0.00	0	-	
176.3.2	Kayakalp Award First Runner up DH (If Applicable)	One DH	2000000	20.00	0	0.00	0	-	
176.3.3	Kayakalp Award Second Runner up DH (If applicable)	One DH	1000000	10.00		0.00		-	Not Applicable
176.3.4	Commendation awards for DH	Per DH	300000	3.00	0	0.00	0	-	<b>30 DHHs are expected to be qualified for Kayakalp Award</b>
176.3.5	Kayakalp Award Winner CHCs/SDHs	One CHC/SDH	1500000	15.00	0	0.00	0	-	
176.3.6	Kayakalp Award First Runner up CHC/SDH (If Applicable)	One CHC/SDH	1000000	10.00	0	0.00	0	-	
176.3.7	Commendation awards for CHCs/SDHs	Per CHC/SDH	100000	1.00	0	0.00	0	-	244 (60%) of the SDH/CHC expected to be qualified in external assessment in 2024-25 & 264 (65%) of the SDH/CHC expected to be qualified in external assessment in 2025-26 & eligible to receive the award.

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
176.3.8	Kayakalp Awards for PHC	One PHC/Per District	200000	2.00	0	0.00	0	-	
176.3.9	Commendation awards for PHCs	Per PHCs	50000	0.50	0	0.00	0	-	643 (50%) of the PHC expected to be qualified in 2024-25 & 707 (55%) of PHC expected to be qualified in 2025-26 and eligible to receive the award.
176.3.10	Kayakalp Awards for HWCs	One HWC/District	100000	1.00	0	0.00	0	-	Proposal for Sub Centers HWCs. Functional HWC SC till August 2023: 4813
176.3.11	Kayakalp Award First Runner up HWCs (If Applicable)	One HWC/District	50000	0.50	0	0.00	0	-	
176.3.12	Kayakalp Award Second Runner up HWCs (If applicable)	One HWC/District	35000	0.35		0.00		-	
176.3.13	Commendation awards for HWCs	Per HWC	25000	0.25	0	0.00	0	-	1443 (30%) of the HWC SC are expected to be qualified for award out of targeted 4813 SC HWCs in 2024-25. Out of which 30 get winner award, 30 gets Runners up and rest 1383 HWC SC will get Commendation award. & 1685 (35%) of the HWC SC are expected to be qualified for award in 2025-26, Out of which 30 get winner award, 30 gets Runners up and rest 1625 HWC SC will get Commendation award
176.4	<b>Support for Implementation of Kayakalp</b>					<b>0.00</b>		<b>0.00</b>	The required fund to be met out of State specific BMW scheme. Hence no separate budget proposed under this head.
176.4.1	Biomedical Waste Management				-	0.00		-	The required fund to be met out of State specific BMW scheme. Hence no separate budget proposed under this head.
176.4.2	Consumables & PPE				-	0.00		-	The required fund to be met out of State specific BMW scheme. Hence no separate budget proposed under this head.
176.4.3	Liquid Waste Treatment & Disposal				-	0.00		-	The required fund to be met out of State specific BMW scheme. Hence no separate budget proposed under this head.
176.4.4	Contingencies	Lumpsum	2500000	25.00	0	0.00	0	-	The funds will be utilized for - Trophy for Awardees Hospital - Certificate - Venue hiring cost - Expenses for State level function for DHH, SDH, CHC and district level for PHC & HWC-SC - Incidental expenditure In the year 2022-23, total 2413 facilities are qualified for Kayakalp award. More number of facilities are qualifying for Kayakalp award. To maintain the momentum, the award winner facility team need to be felicitated in function at state and district level. For this purpose Rs. 25lakhs is proposed
<b>177</b>	<b>Swachh Swasth Sarvatra</b>					<b>0.00</b>		<b>0.00</b>	
177.1	<b>Swachh Swasth Sarvatra Training</b>			0.00		<b>0.00</b>		<b>0.00</b>	Proposal for 2022-23: Integrated with Kayakalp facility level training. Hence, no additional budget proposed
177.1.1	Facility level Training on "Swachh Bharat Abhiyan" for District Hospitals	Per Batch	20000	0.20		0.00		-	Proposal for 2022-23: Integrated with Kayakalp facility level training. Hence, no additional budget proposed

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
177.1.2	Facility level Training on "Swachh Bharat Abhiyan" for SDHs and CHCs	Per Batch	10000	0.10		0.00		-	
177.2	Organisation of Swachhata Pakhwada	Per Institution/ Per Round	20000	0.20	0	-	0	-	<p><b>Proposal 2024-25:</b> Proposed to provide a budget to the tune of Rs.20000/- to all DHHs, SDHs &amp; CHCs those have qualified for Kayakalpa Award in last year i.e. 2022-23. Total institutions bagged Kayakalpa Award as follows: DHH - 26, SDH -23, CHC - 201, total - 250 facilities.</p> <p><b>Proposal 2025-26:</b> Proposal for Institutions received Kayakalpa award in 2022-23 + 20% additional facilities (250 + 50 = 300 facilities) expected to qualify under Kayakalpa.</p>
177.3	Swachh Swasth Sarvatra	Per CHC	1000000	10.00		-		-	<p>All 314 Blocks declared as ODF in 2019-20 as per Swachhata website of GoI. Till date following no. of institutions received SSS grant 2019-20: 42 CHCs 2020-21: 221 CHC Total Hospital : 263 Rest 51 facilities given kayakalp award, hence no new proposal proposed in 2024-25 &amp; 2025-26.</p>

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-7**  
**Other Initiatives**  
**to**  
**improve access**





## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval 2024-26				State's Remarks
					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total Other Initiatives</b>						<b>281.25</b>		<b>323.42</b>	
<b>178</b>	<b>Comprehensive Grievance Redressal Mechanism</b>					<b>19.610</b>		<b>19.61</b>	
<b>178.1</b>	<b>Comprehensive Grievance Redressal Mechanism</b>			-		<b>19.61</b>		<b>19.61</b>	
<b>178.1.1</b>	<b>Integrated Call centre (Health helpline including 8 seated ECD Call Centre)</b>			-		-			<b>Ongoing activity</b> 1. Integrated Call centre (Health helpline including 8 seated ECD Call Centre) <b>Seat &amp; Man shift Arrangements (Total Seat: 33 &amp; Shifts:49)</b> a. Health Information (NHM/ Other Programs) (Seats:8 & Nos. of Shifts : 8X3 ) b.RCH (Counselors) : (Seats:10 & Nos. of Shifts : 10X1) c.Feedback (Counselors) : (Seats:5 & Nos. of Shifts : 5X1) d.Consultaions by MBBS Doctors : (Seats:2 & Nos. of Shifts : 2X1) e.ECD (Counselors) : (Seats:6 & Nos. of Shifts : 6X1) f.ECD (Doctors) : (Seats:2 & Nos. of Shifts : 2X1) <b>Overall seat- 33 &amp; overall man shifts per day - 49 (Doctor-4 &amp; Counselor-25)</b>
<b>178.1.2</b>	<b>Service Cost</b>			-		-		-	
<b>178.1.2.1</b>	<b>Counselors</b>	Per seat/per shift/ per month	12093	0.12	0	-	0		<b>Ongoing Activity :</b> <b>Proposal for 2024-25:</b> With a hike of 5% on monthly rate of 2023-24 i.e. Rs.11,517/-, proposed budget for financial year 2024-25 @ Rs.12,093/- per seat/per shift / per month for 45 Man shifts (29 Seats for Counselors : 8 Counselors X3 Shifts & 21 Counselors X 1 shift ) <b>Budget Proposed (2024-25) : Rs.65.30 lakhs</b> <b>Proposal for 2025-26:</b> With a hike of 5% on monthly rate of 2024-25 i.e. Rs.12,093/-, budget proposed for financial year 2025-26 @ Rs.12697.65 per seat/per shift / per month for 45 Man shifts (29 Seats for Counselors : 8 Counselors X3 Shifts & 21 Counselors X 1 shift ) <b>Budget Proposed (2025-26) : Rs.68.57 lakhs</b>
<b>178.1.2.2</b>	<b>Doctors</b>	Per seat/per shift/ per month	120924	1.21	0	-	0		<b>Ongoing Activity :</b> <b>Proposal for 2024-25:</b> With a hike of 5% on monthly rate of 2023-24 i.e. Rs.1,15,166/-, budget proposed for financial year 2024-25 @ Rs.1,20,924/- per seat /per shift/ per month for 4 Man shifts (4 Doctors for 1 Shift) <b>Budget Proposed (2024-25) : Rs.58.04 lakhs</b> <b>Proposal for 2025-26:</b> With a hike of 5% on monthly rate of 2024-25 i.e. Rs.1,20,924/-, budget proposed for financial year 2025-26 @ Rs.1,26,970/-per seat /per shift/ per month for 4 Man shifts (4 Doctors for 1 Shift) <b>Budget Proposed (2025-26) : Rs.60.95 lakhs</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
178.1.3	Telephone bill for incoming calls	Lumpsum	931800	9.32		0.00		0.00	<p><b>Ongoing Activity :</b>  <b>Proposal for 2024-25:</b>            Rs.1.20 per minute for 3 minutes per day for an average of 700 calls per day for 365 days + monthly rental of Rs.1000/- per month  <b>Budget Proposed (2024-25): Rs.9. 32 lakh</b>  <b>Proposal for 2025-26:</b>            Rs.1.20 per minute for 3 minutes per day for an average of 800 calls per day for 365 days + monthly rental of Rs.1000/- per month  <b>Budget Proposed (2025-26): Rs.10.63 lakh</b></p>
178.1.4	Help Desk at DHH & SDH			-		19.61		19.61	<p><b>Ongoing Activity:</b>  <b>Help Desk Recurring Expenses</b>            1. At DHH @Rs.19,61,000/- per DHH x 32 DHHs = Rs.627.52 lakhs            2. at DHH @Rs.12,63,600/- per SDH x 32 SDHs = Rs.404.352 lakhs  <b>Budget is revised as per the Minimum Wages rate revised by Labour Commissioner, Govt. of Odisha.</b>  <b>Detail Calculation placed at HSS-7_Other Initiative Write-up Annexure-1</b></p>
178.1.4.1	DHH	Per DHH	19,61,000	19.61	1	19.61	1	19.61	
178.1.4.2	SDH	Per SDH	12,63,600	12.64	0	-	0	-	
179	PPP					-		-	
179.1	Public Private Partnerships (PHC(N) Management)			-		-		-	<p><b>Ongoing Activity:</b>  <b>Proposal for 2024-25</b>  <b>A. Ongoing initiative under the project:</b>            (i) Continuation of all 42 sanctioned PHC(N) Management projects on basis of last year approval (at present, 39 PHC(N)s are operational in PPP mode in 15 districts out of 42 sanctioned number, New selection of agencies for 3 projects is in progress).  <b>Details Justification is at PHC New Management Write-up Annexure</b>            (ii) Expanded scope for outreach services as per CPHC mandate (in 42 PHCs): On basis of last year approval the intervention will be continued in 40 PHC New management projects. These PHC(N)s are located mostly in hard to reach areas and local community people have poor health seeking behavior. The PHC(N) will ensure delivery of outreach services in the SC HWC areas under CPHC with increased community engagement and strengthening SC HWC-JAS            Proposal for sealing upto 2 more PHC (N) on the basis of sanction strength of PHC(N) Management projects i.e. 42 nos.            No changes in the unit cost as approved in last year i.e. @Rs.3.60 lakhs per annum per projects.            (iii) Detail proposal at HSS-7 Other Initiative Write-up Annexure-6  <b>C. Proposed Budget for 2024-25:</b>            (i) PHC (N) Management project: @ Rs. 31,36,065/- per annum per project X 42 projects = Total Rs. 13,17,14,730/-            Details Justification is at PHC New Management Write-up Annexure            (ii) Expanded Scope of outreach services: @ Rs.3, 60,000/- per project per annum X 42 projects = Rs. 151.20 lakhs per annum  <b>Detail proposal at HSS-7 Other Initiative Write-up Annexure-7</b></p>
179.1.1	Recurring Cost for PHC (N) managed by NGOs								

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
179.1.1.1	Recurring Cost for PHC (N) managed by NGOs for 2024-25	Per unit	3136065	31.36	0	-	-	-	Estimated budget: Rs.1317.14 Lakhs Budgeted 80% looking into expenditure trend
179.1.1.2	Recurring Cost for PHC (N) managed by NGOs for 2025-26	Per unit	3287310	32.87	-	-	0	-	Estimated budget: Rs.1380.67 Lakhs Budgeted 80% looking into expenditure trend
179.1.2	Outreach services as per CPHC mandate in the PHC(N) areas managed by NGOs	Per Project	360000	3.60	0	-	0	-	<b>Estimated budget: Rs.151.20 Lakh.</b> Budgeted 80% looking into expenditure trend
179.1.3	Evaluation of PHC (N) management projects	Per Unit	100000	1.00	0	-	0	-	<b>Ongoing Activity</b> <b>PHC (N) Management project:</b> External evaluation of the projects by empanelled evaluating Agencies after completion of 3 years of operation in each occasion. The proposed budget @ Rs. 1 lakh/per project (as per last year budget norm). Proposal for 2024-25: External evaluation of 10 Projects @ Rs. 1 lakh = Rs. 10 lakhs. Proposal for 2025-26: External evaluation of 16 Projects @ Rs. 1 lakh = Rs. 16 lakhs. <b>Details Justification is at PHC New Management Write-up Annexure-2</b>
179.1.4	Training of Service Providers at PHCs managed by NGO	Lumpsum	690000	6.90	0	-	0	-	<b>Proposal 1 :</b> Refresher training of PHC Team on NQAS Certification <b>Participants:</b> MO I/C, AYUSH Doctor, Pharmacist, HW(F) Duration: 2 days at State level Batch: 4 participants per PHC x 42 PHC = 168 participants, 6 batches (30 per batch) <b>Proposal 2024-25 :</b> 3 batches @Rs.142000/- per batch = Rs.4.26 lakhs <b>Proposal 2025-26 :</b> 3 batches @Rs.142000/- per batch = Rs.4.26lakhs  <b>Proposal 2 :</b> Refresher training of SC Team for Strengthening outreach activities <b>Participants:</b> CHO, HW(F) & HW (M) Duration: 2 days at State level Batch: 3 participants per PHC x 42 SC = 126 participants, 4 batches (30 per batch) <b>Proposal 2024-25 :</b> 2 batches @Rs.132000/- per batch = Rs.2.64 lakhs <b>Proposal 2025-26 :</b> 2 batches @Rs.132000/- per batch = Rs.2.64 lakhs
179.2	<b>Any other PPP initiatives</b>					-		-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
179.2.1	Maternity Waiting Home								<p><b>Ongoing Activity</b>  <b>Operationalisation of Maternity Waiting Home</b>  <b>Background:</b>  Maa Gruha (Maternity Waiting Home) projects are temporary home for the pregnant women residing in the remote areas, where they can stay and wait for safe delivery during the third trimester of pregnancy. On onset of labour, they are being safely and timely shifted to nearby health facility having BeMOC facility for safe delivery.  At present out of 93 NHM PIP sanctioned projects, all 93 projects are operational in 17 Districts in partnership with the NGOs selected in the process of open tender. Out of 93 operational projects, 24 projects are operational in 23 Aspirational Blocks of the State.  <b>Proposal for 2024-25:</b>  Along with existing 93 projects, proposal made for scale up of <b>5 new more projects</b> as per the proposals of three Districts (Deogarh, Kendrapara &amp; Balasore) for setting up of new Maa Gruha Projects. Accordingly, <b>total 98 projects</b> have been proposed for operational.  <b>Budget for 2024-25:</b>  <b>Recurring Cost for MWH:</b> @ 16,84,224/- per annum per project X 98 projects = Rs. 1650.54 lakhs  <b>Non Recurring Cost for MWH:</b> @Rs.200000/- per project X 5 projects = Rs.10.00 lakhs  <b>Budget for 2025-26:</b>  <b>Recurring Cost for MWH:</b> @ 17,27,375/- per annum per project X 98 projects = Rs. 1692.83 lakhs  <b>Details Justification is at Maternity Waiting Home Write-up Annexure</b>  <b>Budgeted 85% looking into expenditure trend</b></p>
179.2.1.1	Recurring Cost for MWH	Per MWH Per Annum	1684224	16.84	0	-	0	-	
179.2.1.2	Non Recurring Cost for MWH	Per MWH	200000	2.00	0	-	-	-	
179.2.2	Evaluation of Maternity Waiting Home projects	Per MWH	100000	1.00	0	-	0	-	<p><b>Ongoing Activity</b>  <b>External evaluation of Maa Gruha Project:</b>  External evaluation of the projects by empanelled evaluating Agencies after completion of 3 years of operation in each occasion. The proposed budget @ Rs. 1 lakh/per project (as per last year budget norm).  <b>Proposal for 2024-25: External evaluation of 10 Projects @ Rs. 1 lakh = Rs. 10 lakhs.</b>  <b>Proposal for 2025-26: External evaluation of 10 Projects @ Rs. 1 lakh = Rs. 10 lakhs.</b>  <b>Details Justification is at HSS-7_Other Initiative_Maternity Waiting Home Write-up Annexure-3</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
179.2.3	Training of Service Providers at Maternity Waiting Homes	40/ batch	155700	1.56	0	-	0	-	<b>Ongoing Activity</b> Proposal: 2 days refresher training of ANMs/ Leady Health Assistants engaged at Maternity Waiting Homes - State Load: 190 person ANM/ lady Health Assistants engaged at Maternity Waiting Homes. Target for 2024-25: 190 person (5 batches @40/ per batch) Target for 2025-26: 190 person (5 batches @40/ per batch)
179.3	<b>Other Training &amp; Capacity Building</b>			-		-		-	-
179.3.1	3 Days ToT at State level of 177 MHUs in 18 districts	25/ batch	130000	1.30		-			- <b>Not proposed</b>
179.3.2	2 days district level training of AYUSH doctors & ANMs of 177 MHUs	Per batch	46000	0.46	0	-	0		- <b>Batch Size: 35</b>
179.3.3	1 day State level review Cum orientation of NGO chief functionaries and PPP coordinators on Mgt of all PPP projects	35/batch	155700	1.56	0	-	0		<b>Ongoing Activity:</b> Review meeting will be half-yearly for 60 NGO Chief Functionaries managing NGO projects and 21 PPP coordinators working at 21 districts. - <b>Total Load:</b> 103 person (60 from NGO functionaries + PPP coordinators from 21 districts + 22 Arogya Plus Projects) Target for 2024-25: 103 person (3 batches Bi-annually) 35 per batch Target for 2025-26: 103 person (3 batches Bi-annually) 35 per batch
180	<b>Free Drugs Services Initiative</b>					<b>0.00</b>		<b>0.00</b>	
180.1	<b>Supply chain logistic system for drug warehouses</b>			-		-		-	<b>Ongoing Activity</b>
180.1.1	Transportation of medicines & medical consumables from Central Drug Store, to different districts	Lumpsum	14400000	144.00	0	-	0		Transportation of medicines & medical consumables from Central Drug Store, to different districts <b>Budget:</b> Rs.144.00 lakh (Ongoing activity with revised unit cost as per tender rate)
180.1.2	Transportation of medicines & medical consumables from different districts drug warehouse to different medical facilities (CHC & PHCs)			-		-			Transportation of medicines & medical consumables from different districts drug warehouse to different medical facilities (CHC & PHCs) using fleet of vehicles engaged through tender process at OSMCL level & cost of material handlers for loading & unloading
180.1.2.1	Vehicle hiring charges	Per Vehicle/ Annum	1045200	10.45	0	-	0		Vehicle hiring charges: @Rs. 87,100 per month per vehicle (as per recent tender rate) X 53 vehicles x 12 months = Rs. 553.96 lakhs (i.e. Angul-2, Balasore-3, Bargarh-2, Bhadrak-1, Bolangir-3, Boudh-1, Central Drug Store-1, Cuttack-2, Deogarh-1, Dhenkanal-1, Gajapati-1, Ganjam-3, Jagatsinghpur-1, Jajpur-2, Jharsuguda-1, Kalahandi-2, Kandhmal-2, Kendrapada-1, Keonjhar-2, Khurda-2, Koraput-2, Malkangiri-1, Mayurbhanj-3, Nabrangpur-1, Nayagarh-1, Nuapada-1, Puri-2, Rayagada-2, Sambalpur-2, Sonapur-1 & Sundargarh-3) <b>Budgeted 70% looking into expenditure made in last year</b>
180.1.2.2	Cost of Material Handler	Per unit	127015	1.27	0	-	0		Cost of Material Handler: @Rs. 1.27 lakhs (Rs. 345.00 per day as per daily wage rate x 26 days x12 months +GST@ 18%) X 144 = Rs.182.90 lakhs <b>Budgeted 70% looking into expenditure made in last year</b>
180.1.3	Transportation of medicine & medical consumables from PHC to SCs using local means of transportation	Per unit	12000	0.12	0	-	0		<b>Budget:</b> 1352 (1236 PHC + 116 UPHCs) X @Rs. 0.12 lakhs per annum = Rs. 162.24 Lakhs (Ongoing activity) <b>Budgeted 70% looking into expenditure made in last year</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
180.1.4	Material Handling Equipments	Lumpsum		-		-			<p><b>New Activity</b>  <b>Background:</b> For handling of drugs &amp; consumables effectively in a scientifically manner at State Drug Warehouse &amp; Drug Warehouse.  <b>Proposal:</b>            1. Order Picker High Elevation upto 8 meter (State): @Rs. 50.00 lakhs X 2 = Rs.100.00 lakhs            2. Pallets: @Rs.4000/- X 1350 nos = Rs.54.00 lakhs            3. Hydraulic Trolleys: @Rs.30000/- X 150 nos = Rs. 45.00 lakhs            4. Flat Base Trolleys: @Rs.12000/- X 110 nos= Rs. 13.20 lakhs            5. Ladders: @Rs.20000/- X 100nos = Rs.20.00 lakhs            6. Plastic Crates: @Rs. 2000/- X 1200 nos = Rs. 24.00 lakhs  <b>Odisha State Medical Corporation to manage the fund. Hence, budget dropped.</b></p>
180.1.5	3 day District level training of Pharmacists on inventory management of drugs, drug distribution, compilation of prescription audit	30/ batch	76000	0.76		0.00	0		<p><b>Justification:</b> Unlike available training modules for paramedical staff, there is no systematic training for pharmacist. Though pharmacists deal with critical component of inventory management of drugs, drug distribution, compilation of prescription audit etc.They are also involved in day to day petty maintenance of equipments. So there is a need of updation of their knowledge on present practices for effective service delivery. DVDMS Refresher training required.            State load:1126 person (851 Pharmacists +275 DDC)            Proposed for 2021-22: 1126 person (40 batches @30/batch)  <b>Proposal for 2025-26: 40 batches</b></p>
180.1.6	Indent Rationalisation of Drugs & Consumables and Hospital EIF	Lumpsum	180000	1.80	0	-	0		<p><b>Ongoing Activity</b>            Nodal Office: State Drug Management Unit (DHS-O)  <b>Activity:</b>            1. Indent Compilation and rationalization of drugs &amp; consumables received form the different health institutions of the State. Subsequent conducting State Drug Management Meeting (SDMC) for approval of the Govt. before purchase by OSMCL.            2.Indent Compilation and rationalization of Hospital Equipment Instrument and furniture received form the different health institutions and Health Directorates of the State. Subsequent conducting State Equipment Management Meeting (SEMC) for approval of the Govt. before purchase by OSMCL            3. Periodic revision and publication of EDL of the State            4. Regular prescription Audit.  <b>Proposal for 2024-25 &amp; 2025-26:</b>            Office Stationary @ Rs. 15,000/- Per month x 12= <b>Rs. 1.80 Lakhs per year</b></p>
180.1.7	Drugs Support for Snakebite: Inj. Snake Venom AntiSerum (Polyvalent) with diluents	Per Vial		-		-			<p><b>Proposal submitted as per Gol Letter No. D.O.No.M- 11016t4212021-NHM-II(Part-1), dated 7th October 2022</b>  <b>Specification:</b> 10ml/ Vial (Lyphillised, Powder form)            To be met out of State budget</p>
181	Free Diagnostics Services Initiative					245.80		287.97	Details is at HSS-7_Other Initiative Write-up Justification Annexure-4
181.1	Lab Services (in house)					45.21		64.61	Other requirements are being managed through State specific scheme NIDAN & 15th FC funding

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
181.1.1	Coagulation Analyzer (2channel)	Per unit	100000	1.00		0.00			<p><b>Proposal:</b> Expansion of laboratory diagnostic services at CHC Level</p> <p><b>Status:</b> Coagulation analyzer approved for 33 CHCs in 2022-24. As 321 CHCs are proposed for expansion of laboratory for diagnostic services, 288 coagulation analyzer are proposed for the same CHCs.</p> <p><b>Budget proposed for 2024-25:</b> Rs.100000/- X 288 CHC = <b>Rs.288.00 lakhs</b></p> <p>Test to be conducted with this analyzer as per National free diagnostic initiative are :<b>Prothrombin Time (PT),(aPTT ) ,Thrombin Time (TT) ,Fibrinogen (FIB) ,D-Dimer (DD) &amp;Antithrombin (AT).</b>These tests are also recommended for patients infected with Covid 19.</p> <p><b>To be met out of State budget.</b></p>
181.1.2	Laboratory services under PPP	Lumpsum		0.00		45.21		64.61	<p><b>Ongoing Activity</b></p> <p><b>Proposal for 2024-25:</b> High End Pathology Services running through PPP mode</p> <p><b>Estimated Budget:</b> Rs.2545.96 lakhs. However budgeted 80% as expansion from DHH to SDH/CHC has been made in recent past which was not there in 1st phase. So stabilisation of the process for smooth operation of services may take time.</p> <p><b>Proposal for 2025-26:</b> High End Pathology Services running through PPP mode</p> <p><b>Estimated Budget:</b> Rs.3638.25 lakhs. However budgeted 80% as expansion from DHH to SDH/CHC has been made in recent past which was not there in 1st phase. So stabilisation of the process for smooth operation of services may take time.</p> <p><b>Details is at Free Diagnostics HSS Write-up Annexure</b></p>
181.2	Free Radiological services					0.00			<p><b>Status:</b></p> <p>1. X ray available: 119 (DHH: 32, SDH: 28, CHC: 59)</p> <p>2. CR Systems available : 48 (DHH: 32, SDH: 13, CHC: 3)</p> <p><b>Budget: Expansion proposal &amp; maintenance to be manage through state specific scheme NIDAN</b></p>
181.3	Any other (please specify)					200.58		223.36	
181.3.1	CT Scan Services			0.00		200.58		223.36	
181.3.1.1	Repair & Renovation / Modification/ Furnitures & fixtures for existing units	Per Unit	400000	4.00		0.00			

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
181.3.1.2	CT Scan services under PPP	Per CT Scan	770.44	0.01	37193	200.58	40209	223.36	<p>Background: Total Centers funded under NHM is 29 (all at DHHs) Implemented under Free Radiology services in two phases.</p> <p><b>I. First Phase:</b> 11 centers (10 Centers at DHH-Capital Hospital, Angul, Balasore, Baripada, Bolangir, Kalahandi, Koraput, Keonjhar, Puri and Sundargarh under NHM PIP and 1 at DHH-Rourkela under DMF) Rate: Rs.1199/- at 3% escalation per year. Present contract rate after renewal based on satisfactory performance is of Rs.749.97. This rate was derived through a competitive bidding process for new 18 centers in 2022. The existing service provider M/s Spandan Diagnostic ,Kolkata accepted the new rate on negotiation before contract renewal for another 5 years. Period of Contract: 10 years (5Years + 5 years with satisfactory Performance) Avg case load in laset year 2023: 49 case /day.</p> <p><b>II. Second Phase: 18 centers</b> Type of Facility: DHH Rate:Rs.749/- per scan Proposal for 2024-25 : For 29 Centers Avg Case Load : 49 per day for the old 11 centers &amp; 25 per day for the new 18 centers Avg=37 {(49 +25)/2}</p> <p><b>Budget proposed for 2024-25:</b> Total Estimated beneficiaries: 3,91,645 (37scan per day X 365 Days x 29Centers) Present Rate per Scan: Rs.749.97/- (Say Rs.748/-) Rate after annual escalation: 770.44 (Rs.749.97 + 3% Escalation) <b>Total Budget Requirement for 2024-25: Rs. 3017.39 Lakhs, budgeted 70% as expenditure reported is 65% in 2022-23</b></p> <p><b>Budget proposed for 2025-26:</b> Agv Case Load=40 per day Total Estimated beneficiaries: 423400 (40scan per day X 365Days x 29 Centers) Rate per Scan:770.44</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
181.3.1.3	MRI Services under PPP	Per Beneficiary	2060	0.02	0	0.00	0	0.00	<p><b>Ongoing Activity</b>  <b>Background: Total MRI Centers Operational in the State 9</b>  <b>I. NHM funding MRI Centers:</b> DHH-Angul, Balasore, Baripada and Puri  <b>II. State Funding Centers:</b> SCB MCH-Cuttack, AHPGIP-Cuttack, MKCG-Berhampur, VIMSAR Burla &amp; Capital Hospital-Bhubaneswar.                      Completed Five Years Service and renewed the contract for another five years as per the RFP with a negotiated price of Rs.2000/- Scan.  <b>Proposal for 2024-25:</b>                      Annual Escalation as per RFP: 3%                      Rate in 2024-25: Rs.2060/-                      Total estimated beneficiaries: 42664 (Total Load of 2022-23: 38786 +10% increase)                      Budget proposed for 100% of beneficiaries: Rs.8,78,87,840/- (42664 beneficiaries X Rs.2060/-scan)  <b>Proposal for 2025-26:</b>                      Proposed Rate 2024-25: Rs.2060/-                      Annual Escalation as per RFP: 3%                      Rate in 2025-26: Rs.2121.80                      Total estimated beneficiaries: 46930 (Case Load of 2024-25: 42664+10%)                      Budget proposed for 100% of beneficiaries: Rs.995.76Lakhs (42664 beneficiaries X Rs.2121.80/-scan)  <b>Expenditure reported in 104% in 2022-23</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
181.3.1.4	New born screening- Inborn error of metabolism	Per kit	450	0.00		0.00	0	0.00	<p>The Screening kit was procured as per previous year plan which will be utilized for screening during 2024-25. So there is no budget proposed in 2024-25. The activity will continue.</p> <p>Screening of Inborn Error of Metabolism of New Born at Biochemistry Department of SCB MC&amp;H on Pilot basis:</p> <p>i) Screening of Inborn Error of Metabolism (IEM) of new born is started on pilot basis at the Department of Biochemistry, SCB MC&amp;H, Cuttack . Initially screening of Congenital Hypothyroidism, CAH and G6PD deficiency is undertaken for inborn at O&amp;G ward of SCB MC&amp;H.</p> <p>ii). Already steps have been taken up by the State for screening of Himoglobinopathies of newborn at the Department of Biochemistry, SCB MC&amp;H, Cuttack (Under sickle cell project jointly undertaken with CMC , Vellore)</p> <p>III). Along with screening of Himoglobinopathies, screening of Congenital Hypothyroidism, CAH and G6PD deficiency is undertaken for inborn at O&amp;G ward of SCB MC&amp;H.</p> <p>IV). Annually around 4500 (about 75% of total deliveries of 6000) newborns will be screened for identification of Himoglobinopathies and IEM like Congenital Hypothyroidism, CAH and G6PD deficiencies.</p> <p>V). Treatment facilities for conditions under Himoglobinopathies and IEM like Congenital Hypothyroidism and G6PD deficiency are available in the existing system and early counseling and medicinal advice can prevent mortality and the burden of disability.</p> <p>Progress:</p> <p>IEM screening of New Borns is running as a pilot programme at SCB MC&amp;H, Cuttack. During 2022-23, 1240 new born have been screened out of which, 33 positive cases were identified and under follow up treatment. The IEM screening is conducted after 48 Hours after birth. Screening kit for IEM screening is procured . The programme will be further strengthened in 2024-25 &amp; 2025-26.</p> <p><b>Proposal for 2025-26:</b> Budgeted for 4500 new born babies @ Rs.450 Per Kit= Rs. 20,25,000/</p>
182	<b>Mobile Medical Units</b>					0.00		0.00	0
182.1	<b>National Mobile Medical Units (MMU)</b>								State Specific 177 Mobile Health Units are operational in the tribal blocks for strengthening door step health care service delivery through State Budget. Hence, no proposal submitted under NHM PIP
182.1.1	Capex			-		-			
182.1.2	Opex			-		-			
182.2	<b>National Mobile Medical Vans (smaller vehicles) and specialised Mobile Medical Units</b>								
182.2.1	Capex								

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
182.2.2	Opex	Per MHU per annum	15,77,698	15.78	0	0.00	0	0.00	<p><b>Ongoing Activity:</b>  <b>Revised as per NPCC Recommendation</b>  Component: NUHM (Earlier proposed under U.2.1.1)  <b>Proposal:</b> Mobile Medical Units (MMU) / Mobile Health Units (MHU) for urban areas  <b>Status:</b> 9 MHUs are operational in the State in urban areas. (Puri-1, Bhubaneswar-3, Khurda-1, Rourkela-1, Sambalpur-1, Berhampur-1, Cuttack-1)</p> <p>Implemented through NGO partners. vehicles are being through hired mode.</p> <p>Budget proposed as approved last year except cost of HR. which has increased by 5% as Increment.</p> <p><b>Detail Budget breakup is placed at NUHM Write-up Annexure-5.</b></p>
<b>183</b>	<b>State specific Programme Interventions and Innovations</b>					<b>15.84</b>		<b>15.84</b>	
183.1	Tribal RCH: Outreach activities			-		-			Mobile Health Units are engaged (one per each tribal block ) to provide out -reach services at village level under State Budget. Hence no new proposal proposed.
183.2	Services for Vulnerable groups			-		-			Local specific initiatives are being taken up with the funding from different sources like DMF & OMBADC. Hence no specific proposal proposed under NHM
183.3	Device Allowances for HW(F)s for digital reporting	Per ANM	1000	0.01	0	-	0	-	<b>Budget Shifted to RCH-1_SI.No.16</b>
183.4	Financial assistance to SC/ST student in KBK, KBK+ & Non-KBK districts for GNM & BSc (N) course	Per Student	24000	0.24	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Budgeted:</b> Only 80% of estimated cost is proposed as 100% of the seats SC/ST category may not be filled and considering the time lag due to processing  <b>Detail proposal is placed at HSS-7 Other Initiatives write-up Annexure-9: "Financial assistance to SC/ST student"</b></p>
183.5	Ancillary Services at Major Public Health Facilities (i.e. FRUs)	Lumpsum	0	-	1	-	1	-	<b>Budget Shifted to HSS-9_SI.No.189</b>
183.6	<b>Concurrent Capacity building and on the job training of Paramedics</b>								<p>Ongoing Activity  <b>Detail proposal is placed at HSS-7 _Other Initiatives_ write-up Annexure-11: "Concurrent Capacity Building_Paramedics"</b></p>
183.6.1	Bi-annual CME for paramedics at district level	Per District	30000	0.30	0	-	0	-	
183.6.2	Deployment of paramedics at higher facilities	Per District	1000	0.01	0	-	0	-	
183.7	<b>Management of Rest Shed for Patient attendant</b>								<p>New Activity:  <b>Detail proposal is placed at Detail proposal is placed at HSS-7 _Other Initiatives_ write-up Annexure-12: "Managing Rest shed for Patient Attendants"</b>  <b>Budgeted 50% as all rest sheds shall be made functional by 3rd quarter of next year.</b></p>
183.7.1	Rest Shed at DHH	Per DHH	1584000	15.84	1	15.84	1	15.84	
183.7.2	Rest Shed at SDH	Per SDH	660000	6.60	0	-	0	-	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
183.8	Refresher training of Integrated Counsellors	Per Batch	1,83,760	1.84	0	-	0	-	New Activity: Detail proposal is placed at Detail proposal is placed at HSS-7 _Other Initiatives_ write-up Annexure-13 : "Refresher training of Integrated Counselors"
183.9	Proposal on ART & Surrogacy Act 2021	Lumpsum		-			0	0	New Activity: Detail proposal is placed at HSS-7 _Other Initiatives_ write-up Annexure-14: "Proposal on ART & Surrogacy Act 2021"
183.10	Balance Amount Kept at State Level	Lumpsum					0.00	0.00	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-9**  
**HRH**



## HSS-9\_HRH

## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total HRH</b>						<b>361.77</b>		<b>383.60</b>	
<b>185</b>	<b>Remuneration for all NHM HR</b>					<b>360.67</b>		<b>382.50</b>	Ongoing Activity Details calculation at HR writeup Annexure
185.1	Remuneration of Service Delivery HR	Lumpsum		0.00		284.99		303.77	
185.2	EPF of Service Delivery HR	Lumpsum		0.00		4.69		4.28	
185.3	Remuneration of Programme Management HR	Lumpsum		0.00		69.31		72.78	
185.4	EPF of Programme Management HR	Lumpsum		0.00		1.68		1.68	
185.5	Balance Amount Kept at State Level	Lumpsum		0.00		-		-	
<b>186</b>	<b>Incentives(Allowance, Incentives, staff welfare fund)</b>					<b>1.10</b>		<b>1.10</b>	
<b>186.1</b>	<b>Incentives and Allowances</b>								
186.1.1	Performance based Incentive to LSAS & EmOC trained Doctors								Division: Maternal Health Total LSAS trained doctors in the system: 175 LSAS trained doctors posted at FRUs: 73 Total EMOC trained doctors in the system: 38 EMOC trained doctors posted at FRUs: 17
186.1.2	Incentivisation of LSAS Doctors	Lumpsum	0	-	1	-	1	-	70% expected to quality as per norms (at least 2 CS per month) and eligible to get @3000 per month (70% of 73 doctors posted in FRUs=51). Budget : 51 * @3000 * 12= Rs.18.36 lakhs  30% expected to quality for additional @2000 incentive per month ; 30% of 51 = 15 persons eligible for Rs.2000. Budget : 15* Rs.2000 * 12 =3.60 lakhs TOTAL : Rs.21.96 lakhs
186.1.3	Incentivisation of EMOC Doctors	Lumpsum	0	-	1	-	1	-	70% expected to quality as per norms (at least 2 CS per month) and eligible to get @3000 per month (70% of 17 doctors posted in FRUs=12). Budget : 12 * @3000 * 12= Rs.4.32 lakhs  30% expected to quality for additional @2000 incentive per month ; 30% of 12 = 4 persons eligible for Rs.2000. Budget : 4 * Rs.2000 * 12 = 0.96 lakhs TOTAL : Rs.5.28 lakhs
186.1.4	Pregnant women line listed & treated for severe anaemia			-		-			Budget dropped
186.1.5	Pregnant women line listed & treated for high risk pregnancies			-		-			Budget dropped
186.1.6	Home deliveries attended by SBA trained ANM			-		-			Budget dropped

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S.No.	Scheme/ Activity	Approval 2024-26							
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
186.1.7	Institutional deliveries at SCs designated as delivery points (DP) conducting >5* deliveries/month			-		-			Budget dropped
186.1.8	Institutional deliveries at APHCS/PHCs designated as delivery points (DP) conducting >15* deliveries/month			-		-			Budget dropped
186.1.9	Institutional deliveries at CHCs(Non FRU) conducting 50* deliveries/month			-		-			Budget dropped
186.1.10	C-sections per month at Sub district CHC/ FRUs.	Per case	3000	0.03	0	-	0	-	<b>Ongoing Activity: Davison MH</b> Provision is for FRU-SDH and CHC in 10 Aspirational districts Total number of FRU-SDH and CHC in 10 Ads - 14 Total Num of del. (April to March 23)- 16781 Exp del for 12 months- 24732 Exp C Section up to 12 months- 3676 Avg CS per month-306 Monthly max. Limit for incentivisation (C section up to 20% of Normal del)-352 Case load for incentivization for 12 months (Monthly maximum limit as per norm from 6th CS onwards)-3384 Budgeted 80% as per expenditure trend
186.1.11	C-sections per month at District Hospital FRUs	Per case	3000	0.03	0	-	0	-	<b>Ongoing Activity: Division MH</b> Provision is for FRU-DHH in 10 Aspirational districts Total number of DHH-10 nos Total Num of del. (April to march 2023) - 46776 Exp del for 12 months- 46776 Exp C Section up to 12 months- 13990 Avg CS per month- 1167 Monthly max. Limit for incentivisation (C section up to 20% of Normal del)- 545 Case load for incentivization for 12 months (Monthly maximum limit as per norm from 11th CS onwards)- 5340 Budgeted 80% as per expenditure trend
186.1.12	<b>Special incentive to service providers of SNCU for quality service delivery</b>	Per unit							<b>Not Approved</b>
186.1.13	For 12 bedded SNCUs	Per Unit	30,000	0.30	0	0.00	0	0.00	
186.1.14	For 24 bedded SNCUs	Per Unit	35,000	0.35	0	0.00	0	0.00	
186.1.15	For 36 bedded SNCUs	Per Unit	40,000	0.40	0	0.00	0	0.00	
186.1.16	For 72 bedded SNCUs	Per Unit	55,000	0.55	0	0.00	0	0.00	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
186.1.17	Honorarium for Specialists	Per visit	10000	0.10	11	1.10	11	1.10	<p><b>Ongoing Activity: Division RBSK</b>  <b>Budget Proposed as per last year's approval</b>  <b>Strengthening of universal Eye Screening under RBSK at District Hospitals:</b>  <b>Background:</b>  For ensuring universal eye screening as per RBSK mandate (including RoP) experts will be hired from empanelled Pvt. Hospitals/ Individual specialists.  <b>Budget:</b>  Rs.10,000 per visit per expert inclusive of all cost X 100 visits= Rs.10.00 lakhs</p>
186.1.18	<b>Award to the Service Provider for FP Services</b>			-		-		-	<p><b>Ongoing Activity: Division FP</b>  <b>Award to the Service Provider</b>  <b>1.</b> Top three best performing service providers for NSV, Female Sterilization  <b>Budget:</b> @Rs.10000/- X 6 = <b>Rs.0.60 lakhs</b>  <b>2.</b> Top three ASHAs at district level for Male and Female Sterilization and PPIUCD  <b>Budget:</b> @Rs. 1000/- X 9 X 30 =<b>Rs.2.70 lakhs</b>  <b>3.</b> Top three Male Health Workers at District Level for Male Sterilization  Budget: @Rs. 1000/- X 3 X 30 =Rs.0.90 lakhs  Total Budget: Rs.4.20 lakhs</p>
186.1.18.1	Best performing service providers for NSV, Female Sterilization	Per Award	10000	0.10	0	-	0	-	
186.1.18.2	Best three ASHAs at district level for Male and Female Sterilization and PPIUCD	Per ASHA	1000	0.01	0	-	0	-	
186.1.18.3	Best three Male Health Workers at District Level for Male Sterilization	Per HW	1000	0.01	0	-	0	-	
186.1.19	Incentive to service provider for PPIUCD services	Per Service Provider	150	0.00	0	-	0	-	<p><b>Ongoing Activity: Division FP</b>  Achievement during 2022-23 - 75252  Proposal /Target 2024-25: 141000 (20% of expected delivery 705958)  Budget proposed for 2024-25 &amp; 2025-26: 98700 (70% of total target i.e. 141000 )</p>
186.1.20	Incentive to service provider for PAIUCD Services	Per Service Provider	150	0.00	0	-	0	-	<p><b>Ongoing Activity: Division FP</b>  Achievement during 2022-23: 4959  Target 2024-25: 10000 cases  Proposal 2024-25 &amp; 2025-26: 7000 (70% of 10000 cases)</p>
186.1.21	Others (please specify) including Welfare Fund for Staff	Lumpsum		-		-		-	
186.1.22	NHM Staff Welfare Fund	Lumpsum	10000000	100.00	0	0.00	0	-	<p>Ongoing Activity  <b>Details at HSS Write-up justification Annexure</b></p>
187	<b>Remuneration for CHOs</b>					-		-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
187.1	Remuneration of CHOs	per month	10000	0.10	0	0.00	0	-	<p><b>Ongoing Activity: Division CPHC</b>  Target 2024-25 : 6020 CHO positions  As per the target, 6020 SCs are to be converted as HWCs by 2024-25. Accordingly, State Government has created 6020 post of Nursing Officers on contractual basis under regular Nursing cadre being deployed as CHOs after completion of CPCH training in phased manner. The remuneration of all CHOs is proposed as per State Govt. circular (Remuneration @Rs.10000/- p.m.) under NHM PIP. These Nursing Officers will be inducted into regular cadre after completion of 6 years.  Budgeted 80% due to expected vacancies</p>
188	<b>Incentives under CPHC</b>					-		-	
188.1	Performance incentive for Mid-level Service Providers								The CHOs' performance is tracked through 28 state customised indicators out of the 6020 SHCs - 4810 CHOs are already in position so they will be eligible to get their incentives for 12 months and the rest 1210 CHOs who are expected to join in FY 24-25 will be eligible for getting 8 months incentive
188.1.1	for Old CHOs	Per month	15000	0.15	0	-	0	-	<p>As it is a performance linked incentive, budget has been approved for 70% for F.Y. 2024-25 &amp; 80% for 2025-26.  <b>Total fund requirement: 4810×15000×12=Rs. 8658.00 Lakhs</b>  <b>Fund Approved for 2024-25: Rs. 6060.60 Lakhs</b> (70% of the total requirement)  <b>Fund Approved for 2024-25: Rs. 8668.80 Lakhs</b> (80% of the total requirement)  <b>Incentive may be given to CHOs as per the actual inposition Status</b></p>
188.1.2	for New CHOs	Per month	15000	0.15	0	-	0	-	<p>As it is a performance linked incentive, budget has been approved for 70% for F.Y. 2024-25 &amp; 6 months budget approved for 2025-26.  <b>Total fund requirement: 1210×15000×8=Rs. 1452.00 Lakhs</b>  <b>Fund Approved for 2024-25: Rs. 1016.40 Lakhs</b> (70% of the total requirement)  <b>Fund Approved for 2025-26: Rs. 601.20 Lakhs</b> (6 months budget approved for the total requirement)  <b>Incentive may be given to CHOs as per the actual inposition Status</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
188.2	Team based incentives for Health & Wellness Centres (H&WC - Sub Centre)	Per HWC	36000	0.36	0	-	0	0	<p><b>Approval 2024-25 &amp; 2025-26:</b> Team based incentive proposed for 6020 &amp; 6688 for ANM &amp; MPW(M) under SC HWCs which is tracked through state customized 27 indicators</p> <p>- Amount of Incentive @ 3,000/- per month per SC as team based incentives to ANM/MPW(M)= 6020 x 12 x 0.03 = Rs. 2167.2 Lakhs (<b>Budgeted 70% i.e. Rs.1517.04 lakhs</b>) ANM/MPW(M)= 6688 x 12 x 0.03 = Rs. 2407.68 Lakhs (<b>Budgeted 70%</b>)</p>
188.3	Team based incentives for Health & Wellness Centres (PHC-H&WCs)	Per Inst. Per annum	96000	0.96	0	-	0	0	<p><b>Approval:</b> Team based incentive proposed for 1296 PHC HWCs Proposed incentive: i. MBBS MO @ Rs. 3000/- Per Month x 12 months = Rs. 36000 ii. AYUSH MO @ Rs. 2000/- Per Month x 12 months = Rs. 24000 - iii. Paramedics @Rs. 3000/- Per month x 12 months = Rs. 36000 = 36000 + 24000 + 36000 = Rs. 96000 = 96000 x 1296 = Rs. 1244.16 Lakhs <b>Budgeted:</b> As it is a performance linked incentive, budget has been proposed 70% of the total entitlement - <b>Rs. 870.91 Lakhs</b></p>
188.4	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60	0	0.00	0	0.00	<p><b>Revised as per NPCC Recommendation Budget Shifted to HSS-1_CPHC, SI.No. 151</b></p> <p><b>Background:</b> This is an ongoing activity as per CPHC mandate. Budget is proposed based on increase in number of operational HWCs. Unit cost remains same. Considering the constraints of availability of trained Yoga teacher 50% of the total budget is proposed. As per Gol conditionality framework upto 10 Yoga sessions in a month will be conducted by a trained Yoga Teacher. <b>Incentive/honorarium for Yoga instructor:</b> @Rs.600 per yoga session <b>For FY 2024-25</b> Total HWCs - 6020 SHC HWCs +1296 PHC HWCs = 7316 HWCs Budget FY 2024-25: 500 x 10 x 7316x 12 months = Rs.4389.6 lakhs Budget Proposed-50% of total cost- Rs.2194.80 lakhs <b>For FY 2025-26</b> Total HWCs - 6688 SHC HWCs +1296 PHC HWCs = 7984 HWCs Budget FY 2025-26: 500 x 10 x 7984x 12 months = Rs.4790.4 lakhs Budget Proposed-50% of total cost- Rs.2395.20 lakhs NB:As per the state govt. Notification Yoga instructors are paid Rs.500 for facilitating one yoga session including travel cost, against the Gol norm of Rs. 250; this incentive includes travel expenses borne by the instructor as one instructor has to travel on an avg. 30 KMs to reach the facility. in addition getting yoga teachers in interior rural belts with low incentive is a real challenge.</p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
188.5	Incentive to Physiotherapists	Per Session	750	0.01	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Proposal:</b> Extended physiotherapy sessions for home bound geriatric &amp; other cases  Approximately 30% of the home-bound patients may require the physiotherapy services once in a month. Targeted patients 3000  <b>Incentive to empanelled Physiotherapists:</b> @Rs.750/- per session x 900 patients x 12 sessions p.a.</p>
189	<b>Costs for HR Recruitment and Outsourcing</b>							-	
189.1	Ancillary Services at Major Public Health Facilities (i.e. FRUs)	Lumpsum		-					<p><b>Budget shifted from HSS-7, Sl.No. 183</b>  <b>Ongoing Activity:</b>  <b>A State Specific Initiative namely NIRMAL is being implemented in the State. The Services under the scheme has been extended from DHH to PHC Level. It is managed by outsourced agencies.</b>  <b>Areas of interventions include :</b>  <ul style="list-style-type: none"> <li>• Housekeeping and cleanliness services-</li> <li>• Hospital linen and laundry services-</li> <li>• Security services-</li> <li>• Patient Attendant services-</li> <li>• Gardener Services</li> <li>• Lift Services</li> <li>• Patient Attendant Services</li> </ul> Annual Cost Estimate of the project is more than Rs.50000.00 lakhs. The total cost of Ancillary Services at FRUs only is about Rs. 17213.46 Lakhs out of which Rs.2000.00 lakhs has been proposed under NHM and rest to be met out of State Budget.  <b>Detail proposal is placed at HSS-7_ Other Initiatives write-up Annexure-10 : "Ancillary Services"</b></p>
190	<b>Human Resource Information Systems (HRIS)</b>							-	<b>Not proposed, provisioned in previous years</b>

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Details of Service Delivery HR Approved in NHM PIP 2024-25

Category	Pool	Position Name	Base salary Approved in 2023-24	New / Dropped Positions proposed in FY 24-25	Total Positions proposed in FY 24-25	Base salary Proposed in PIP 2024-25 (5% increment on base 23-24)	PI (25%)	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget
SD	NMHP	Psychiatric Nurse	24406		1	25626	6407	0	32033	12	3.84
SD	NMHP	Community Nurse/ Supervisor <b>redesignated as Community Supervisor</b>	24406		1	25626	6407	0	32033	12	3.84
SD	MFP	CLMC Technician	16864		1	17707	4427	0	22134	12	2.66
SD	MFP	Technician for MGPS Manifold, PSA and LMO	16864		6	17707	4427	0	22134	12	15.94
SD	NPCDCS	Cath lab technician	17967		3	18865	4716	0	23581	12	8.49
SD	NPCDCS	Pharmacist-NPCDCS	17967		2	18865	4716	0	23581	12	5.31
SD	Intergated (NPCDCS/ NPCHE/ NLEP)	Physiotherapist	38927		4	40873	10218	0	51091	12	24.52
SD	NPCDCS	Cardiologist			1	0	0	0	160000	12	19.20
SD	NPCDCS	Doctor	77190		2	81050	20263	0	101313	12	24.32
SD	Hep C	Medical Officer	77190		1	81050	20263	10000	111313	12	13.36
SD	NTEP	Medical Officers DTC / Sr. MO-DRTB Centre	74296		4	78011	19503	0	97514	12	46.81
SD	RCH	Pediatricians	96489		1	101313	25328	0	126641	12	15.20
SD	RCH	Medical Officers, MBBS	77190		1	81050	20263	0	101313	12	12.16
SD	RCH	Medical Officers, Dental	52008		1	54608	13652	0	68260	12	8.19
SD	RCH	Physiotherapist	38927		1	40873	10218	0	51091	12	6.13
SD	RCH	Occupational Therapist	38927		1	40873	10218		51091	12	6.13
SD	RCH	Audiologist & speech therapist	38927		2	40873	10218	0	51091	12	12.26
SD	RCH	Psychologist	25572		1	26851	6713	0	33564	12	4.03
SD	RCH	Optometrist	20688		1	21722	5431	0	27153	12	3.26
SD	RCH	Early interventionist cum special educator	25572		1	26851	6713	0	33564	12	4.03
SD	RCH	Dental technician-DEIC	17967		1	18865	4716	0	23581	12	2.83
SD	RCH	Medical Officers - SNCU - Non KBK	77190	-3	2	81050	20263	0	101313	12	24.32
SD	RCH	RMNCH/ FP Counselors <b>redesignated as Counselor</b>	24406		3	25626	6407	0	32033	12	11.53
SD	NMHP	Clinical Psychologist	38927		1	40873	10218	0	51091	12	6.13
SD	NMHP	Psychiatric Social worker	38927		1	40873	10218	0	51091	12	6.13
SD	IDSP	Microbiologist at district labs	59502		1	62477	15619	0	78096	12	9.37
SD	RCH	Social worker	25571		1	26850	6713	0	33563	12	4.03
SD	NTEP	TBHV - <b>10 positions TBHV shifted to MCHs</b>	20688		4	21722	5431	0	27153	12	13.03
SD	NPCB & VI	Ophthalmic Assistant	20688		1	21722	5431	0	27153	12	3.26
SD	NMHP	Case Registry Assistant	14611		1	15342	3836	0	19178	12	2.30
SD	RCH	Doctor (Comprehensive Skill lab)	96489		1	101313	25328	10000	136641	12	16.40
SD	RCH	Nurse Trainer (Comprehensive Skill lab)	47786		5	50175	12544	0	62719	12	37.63
DEO	RCH	DEO (Comprehensive Skill lab)	21365		1	22433	5608	0	28041	12	3.36
<b>Grand Total (Estimated Budget)</b>				<b>-3</b>	<b>59</b>						<b>379.99</b>
Budget Proposed is 75% of the total estimated cost (However, the estimated budget has been finalised based on the requirement including 3% of rationalisation fund to be deposited in the Treasury)											<b>284.99</b>

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## Details of Service Delivery HR Approved in NHM PIP 2025-26

Category	Pool	Position Name	Positions proposed in FY 24-25	Base salary proposed in 2024-25	New / Dropped Positions proposed in FY 25-26	Total Positions proposed in FY 25-26	Base salary Proposed in PIP 2025-26 (5% increment on base 24-25)	PI (25%)	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget
SD	NMHP	Psychiatric Nurse	1	25626		1	26907	6727	0	33634	12	4.04
SD	NMHP	Community Supervisor	1	25626		1	26907	6727	0	33634	12	4.04
SD	MFP	CLMC Technician	1	17707		1	18592	4648	0	23240	12	2.79
SD	MFP	Technician for MGPS Manifold, PSA and LMO	6	17707		6	18592	4648	0	23240	12	16.73
SD	NPCDCS	Cath lab technician	3	18865		3	19808	4952	0	24760	12	8.91
SD	NPCDCS	Pharmacist-NPCDCS	2	18865		2	19808	4952	0	24760	12	5.57
SD	Intergated (NPCDCS/ NPCHE/ NLEP)	Physiotherapist	4	40873	0	4	42917	10729	0	53646	12	25.75
SD	NPCDCS	Cardiologist	1	0		1		0	0	160000	12	19.20
SD	NPCDCS	Doctor	2	81050		2	85103	21276	0	106379	12	25.53
SD	Hep C	Medical Officer	1	81050		1	85103	21276	10000	116379	12	13.97
SD	NTEP	Medical Officers DTC / Sr. MO-DRTB Centre	4	78011		4	81912	20478	0	102390	12	49.15
SD	RCH	Pediatricians	1	101313		1	106379	26595	0	132974	12	15.96
SD	RCH	Medical Officers, MBBS	1	81050		1	85103	21276	0	106379	12	12.77
SD	RCH	Medical Officers, Dental	1	54608		1	57338	14335	0	71673	12	8.60
SD	RCH	Physiotherapist	1	40873		1	42917	10729	0	53646	12	6.44
SD	RCH	Occupational Therapist	1	40873		1	42917	10729		53646	12	6.44
SD	RCH	Audiologist & speech therapist	2	40873		2	42917	10729	0	53646	12	12.88
SD	RCH	Psychologist	1	26851		1	28194	7049	0	35243	12	4.23
SD	RCH	Optometrist	1	21722		1	22808	5702	0	28510	12	3.42
SD	RCH	Early interventionist cum special educator	1	26851		1	28194	7049	0	35243	12	4.23
SD	RCH	Dental technician-DEIC	1	18865		1	19808	4952	0	24760	12	2.97
SD	RCH	Medical Officers - SNCU - Non KBK	2	81050		2	85103	21276	0	106379	12	25.53
SD	RCH	RMNCH/ FP Counselors redesignated as Counselor	3	25626	0	3	26907	6727	0	33634	12	12.11
SD	NMHP	Clinical Psychologist	1	40873		1	42917	10729	0	53646	12	6.44
SD	NMHP	Psychiatric Social worker	1	40873		1	42917	10729	0	53646	12	6.44
SD	IDSP	Microbiologist at district labs	1	62477		1	65601	16400	0	82001	12	9.84
SD	RCH	Social worker	1	26850		1	28193	7048	0	35241	12	4.23
SD	NTEP	TBHV	4	21722		4	22808	5702	0	28510	12	13.68
SD	NPCB & VI	Ophthalmic Assistant	1	21722	2	3	22808	5702	0	28510	12	10.26
SD	NMHP	Case Registry Assistant	1	15342		1	16109	4027	0	20136	12	2.42
SD	RCH	Doctor (Comprehensive Skill lab)	1	101313		1	106379	26595	10000	142974	12	17.16
SD	RCH	Nurse Trainer (Comprehensive Skill lab)	5	50175		5	52684	13171	0	65855	12	39.51
DEO	RCH	DEO (Comprehensive Skill lab)	1	22433		1	23555	5889	0	29444	12	3.53
		<b>Grand Total (Estimated Budget)</b>	<b>59</b>		<b>2</b>	<b>61</b>						<b>404.75</b>
		<b>Budget Proposed is 75% of the total estimated cost (However, the estimated budget has been finalised based on the requirement including 3% of rationalisation fund to be deposited in the Treasury)</b>										<b>303.77</b>

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## Capital Hospital, BBSR

## Details of Programme Management HR Approved in NHM PIP 2024-25

Category	Pool	State/ District/ Block	Position Name	Positions proposed in FY 23-24	Base salary proposed in 2023- 24	New / Dropped Positions proposed in FY 24-25	Total Positions proposed in FY 24-25	Base salary Proposed in PIP 2024-25 (5% increment on base 23-24)	PI (25% (SHSRC PI 10%))	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget
PM	HSS	District	System In-charge - Non KBK	1	21365		1	22433	5608	0	28041	12	3.36
SD	HSS	District	Pharmacist (Logistic Assistant)	1	16890		1	17735	4434	0	22169	12	2.66
PM	RCH	District	Asst. Manager RBSK/RKSK - Non KBK (incl. 3 MCHs + Capital Hosp., BBSR+RGH, Rourkela)	1	47786		1	50175	12544	0	62719	12	7.53
PM	RCH	District	Accountant cum DEO at DHH - Non KBK	1	24406		1	25626	6407	0	32033	12	3.84
DEO	RCH	District	Medical Record Assistant at Major Hospital (Hosp Strg.) - Non- KBK_(District wise detail breakup is at Annexure) Outsourced staff shall be given remuneration as applicable & contractual staff as per OSHFW society norm.	5	Lumpsum		5					12	16.82
PM	RCH	District	Logistic Manager (Logistic, PROMIS & Immunization) - Non KBK	1	38927		1	40873	10218	0	51091	12	6.13
PM	NTEP	District	Dist Prog Coordinator (Non-KBK)	1	38927		1	40873	10218	0	51091	12	6.13
PM	NTEP	District	Dist PMDT TB HIV Coordinator (Non-KBK)	1	32846		1	34488	8622	0	43110	12	5.17
PM	NTEP	District	District PPM Coordinator (Non-KBK)	1	32846		1	34488	8622	0	43110	12	5.17
PM	NTEP	District	Driver	1	17988		1	18887	4722	0	23609	12	2.83
PM	NTEP	District	Senior Treatment Supervisor (STS) (Non-KBK)	3	27782		3	29171	7293	0	36464	12	13.13
PM	NTEP	District	Senior TB Lab Supervisor (STLS) (Non-KBK)	2	27782		2	29171	7293	0	36464	12	8.75
			<b>Grand Total (Estimated Budget)</b>	<b>19</b>		<b>0</b>	<b>19</b>						<b>81.54</b>
			<b>Proposal for SHSRC, budgetd under HSS-11, SI-193</b>										<b>0.00</b>
			<b>Balance estimated Budget</b>										<b>81.54</b>
			<b>Proposed Budget 85% as per last year's expenditure i.e. 80% approx. expenditure reported in 2022-23 (proposed under HSS-9, SI-185.3)</b>										<b>69.31</b>

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Details of Programme Management HR Approved in NHM PIP 2025-26

Category	Pool	State/ District/ Block	OID FMR	Position Name	Positions proposed in FY 25-26	Base salary proposed in 2024-25	New / Dropped Positions proposed in FY 25-26	Total Positions proposed in FY 25-26	Base salary Proposed in PIP 2025-26 (5% increment on base 24-25)	PI (25% (SHSRC PI 15%))	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget
PM	HSS	District	14.1.1.1	System In-charge - Non KBK	1	22433		1	23555	5889	0	29444	12	3.53
SD	HSS	District	14.1.1.1	Pharmacist (Logistic Assistant)	1	17735		1	18622	4656	0	23278	12	2.79
PM	RCH	District	16.4.2.1.1	Asst. Manager RBSK/RKSK - Non KBK (incl. 3 MCHs + Capital Hosp., BBSR+RGH, Rourkela)	1	50175		1	52684	13171	0	65855	12	7.90
PM	RCH	District	16.4.2.1.7	Accountant cum DEO at DHH - Non KBK	1	25626		1	26907	6727	0	33634	12	4.04
DEO	RCH	District	16.4.2.1.9	Medical Record Assistant at Major Hospital (Hosp Strg.) - Non- KBK <b>(District wise detail breakup is at Annexure)</b> <b>Outsourced staff shall be given remuneration as applicable &amp; contractual staff as per OSHFW society norm.</b>	5	Lumpsum		5					12	17.67
PM	RCH	District	16.4.2.1.11	Logistic Manager (Logistic, PROMIS & Immunization) - Non KBK	1	40873		1	42917	10729	0	53646	12	6.44
PM	NTEP	District	16.4.2.2.4	Dist Prog Coordinator (Non-KBK)	1	40873		1	42917	10729	0	53646	12	6.44
PM	NTEP	District	16.4.2.2.4	Dist PMDT TB HIV Coordinator (Non-KBK)	1	34488		1	36212	9053	0	45265	12	5.43
PM	NTEP	District	16.4.2.2.4	District PPM Coordinator (Non-KBK)	1	34488		1	36212	9053	0	45265	12	5.43
PM	NTEP	District	16.4.2.2.11	Driver	1	18887		1	19831	4958	0	24789	12	2.97
PM	NTEP	District	16.4.3.2.11	Senior Treatment Supervisor (STS) (Non-KBK)	3	29171		3	30630	7658	0	38288	12	13.78
PM	NTEP	District	16.4.3.2.11	Senior TB Lab Supervisor (STLS) (Non-KBK)	2	29171		2	30630	7658	0	38288	12	9.19
<b>Grand Total (Estimated Budget)</b>					<b>19</b>		<b>0</b>	<b>19</b>						<b>85.62</b>
<b>Proposal for SHSRC, budgetd under HSS-11, SI-193</b>														<b>0.00</b>
<b>Balance estimated Budget</b>														<b>85.62</b>
<b>Proposed Budget 85% as per last year's expenditure i.e. 80% approx. expenditure reported in 2022-23 (proposed under HSS-9, SI-185.3)</b>														<b>72.78</b>

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-10**  
**Enhancing HR**



## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval 2024-26				State's Remarks
					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total Enhancing HR</b>					<b>21.16</b>		<b>16.16</b>	
<b>191</b>	<b>DNB/CPS courses for Medical doctors</b>					<b>0.00</b>		<b>0.00</b>	
191.1	CPS course			-		-			<b>Not Proposed this year</b>
191.2	NBE Diploma Courses	Lumpsum		-		-		-	<p><b>Detail proposal placed at NBE Write-up Annexure-HSS-10</b>  <b>Estimated Budget for 2024-25:</b> Rs.1994.73 lakhs  Budget in the 1st year reduced to 60% of total estimated budget in view following reasons:  1.Rollout of all streams planned under NBE course may take time  2. Less no. of student intake in each stream expected against the target as planned under NBE course  <b>Estimated Budget for 2025-26: Rs.1675.06 lakhs</b>  Budget in the 2nd year reduced to 70% of total estimated budget in view following reasons:  1.Rollout of all streams planned under NBE course may take time  2. Less no. of student intake in each stream expected against the target as planned under NBE course</p>
191.3	PGDHM Courses	Per Person	365000	3.65	0	0.00	0	-	<p><b>Background:</b> 1 year PGDPHM Course of MBBS Doctors (Regular MBBS doctor) at IIPH-BBSR.  Proposal for 2022-23: = 30 person &amp; 2023-24: = 30 Persons  Ach. during 2022-23 : 15 person  <b>Proposed ach. till Mar'24: 30 person</b>  As per the decision taken at Govt. level all Medical Officers of the State will be trained in public health course to strengthen them in Public Health Cadre in the State  <b>Proposed Load for 2024-25: 30 person</b>  <b>Proposed Load for 2025-26: 30 person</b>  <b>Unit Cost revised from Rs.3.25 lakhs to Rs.3.65 lakhs as per GoI Letter No. Z-18015/6/2023-NHM-II</b>  <b>Budgeted 90%</b></p>
191.4	Technical & Management training of MBBS Doctors					-		-	<p><b>Ongoing Activity; Approved last year</b>  <b>Budget Shifted from HSS-7</b></p>
191.4.1	30 days Induction training for newly appointed MBBS doctor at State Level	per person	47000	0.47	0	-	0	-	<p><b>Ongoing Activity:</b>  Load for 2022-23: 90 &amp; 2023-24: 90 person  Ach. During 2022-23: 60 person  Projected Ach till Mar'24: 60 person  <b>Proposed during 2024-26 : 180 person ( for newly recruited Mos)</b>  <b>2024-25: 90 MOs</b>  <b>2025-26: 90 Mos</b></p>
<b>192</b>	<b>Training Institutes and Skill Labs</b>					<b>21.16</b>		<b>16.16</b>	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1	Strengthening of Nursing Institutes & Skill Lab					21.16		16.16	
192.1.1	Setting up of Skill Lab (Non recurring)	Lumpsum	2000000	20.00	0	0.00	-	-	<p><b>Ongoing Activity:</b> One time establishment cost (Non recurring)</p> <p><b>Background :</b> Total skill labs sanctioned- 30 (Comprehensive - 3 &amp; Mini - 27)</p> <p>1. Comprehensive skill labs : 3 (SNC Berhampur at CON Berhampur, CSL Sundergarh at CON Sundergarh &amp; CSL Capital Hospital BBSR</p> <p>2. Mini Skill labs : 27 (ANMTC-21, CON -6)</p> <p><b>Current status:</b> 3 Comprehensive skill labs are conducting trainings for in-service nursing officers , nursing faculties . All mini skill labs are utilised for training of pre-service students.</p> <p>Out of 27 mini skill labs ,civil work for the skill labs at all the institutions are completed except Malkangiri, Deogarh &amp; Gajapati as there were no space at these ANMTC buildings only the required mannequins/ items/ articles were procured for educating the students. Now new ANMTC building for these 3 institutions have been established.</p> <p><b>Proposal with justification:</b> It is proposed for Establishment of New Skill labs at Malkangiri, Deogarh &amp; Gajapati</p> <p><b>Budget Proposed @</b> Rs. 20.00 Lakhs for establishment and renovation of the skill labs of 3 new ANMTC building (Malkangiri,Gajapati &amp; Deogarh) for enhancement of the RMNCH+A skills of Nursing Officers, ANMs and nursing students of the district.</p> <p>Total Budget Proposed : Rs. 20.00 Lakhs per unit ( as per GoI norms) x 3 insts. = Rs. 60.00 lakhs</p>
192.1.2	Recurring expenses for Skill lab			-		7.00		2.00	<b>Ongoing Activity</b>
192.1.2.1	Recurring Expenses for Comprehensive Skill Lab	Per CSL	200000	2.00	1	2.00	1	2.00	3 Comprehensive skill lab (CSL) @Rs.2.00 lakhs per annum x 3= Rs.6.00 lakhs (CSL at Bhubaneswar, Sundergarh , SNC Berhampur )
192.1.2.2	Recurring Expenses for Mini Skill Lab	Per Skill Lab	25000	0.25	0	-	0	-	21 ANMTCs & 6 College of Nursing (Dhenkanal, Kalahandi, Kandhamal, Nawarangpur, Cuttack & Burla)

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.3	Strengthening of Other Nursing labs (Non recurring)	Per unit	500000	5.00	0	-	0	-	<p><b>Ongoing Activity: One time Grant under Non-recurring component:</b>  <b>Background:</b> Total 29 Nursing institutions (8 CoN, 21 ANMTCs) are functional. The labs of 08 CoN &amp; 3 ANMTCs (Rayagada, Malkanagiri, Gajapati) were strengthened during PIP 2022-24. As per revised INC, MOHFW GoI guidelines the Nursing labs of the institutions are to be updated with advanced skill training models, mannequins, models etc and which are to be arranged in the designated labs like fundamental lab, community lab, nutrition lab, pre-clinical Science lab etc. as per the prescribed guideline of INC. Thus the labs of the 18 ANMTCs are to be strengthened.</p> <p><b>Proposal: 2024-25: 10 ANM TCs &amp; 2025-26 : 8 ANMTCs</b>  <b>Strengthening of other Nursing labs in 2024-25-</b> i.e. Fundamental Lab, community Lab, Nutrition Lab, Pre-Clinical Science lab at ANMTCs for 10 Govt. ANMTC at Bhubaneswar, Kalahandi, Subarnapur, Berhampur, Dhenkanal, Kendrapara, Boudh, Kandhamal, Koraput &amp; Sambalpur.  <b>Strengthening of other Nursing labs in 2025-26-</b> i.e. Fundamental Lab, community Lab, Nutrition Lab, Pre-Clinical Science lab at ANMTCs for 8 Govt. ANMTC at Balasore, Bolangir, Baripada, Deogarh, Nayagarh, Keonjhar, Puri, Sundargarh.</p> <p><b>Budget per unit:</b>  Rs. 4.00 lakhs ( as per Indian Nursing Council norms, New Delhi) for models, 3D structure, dummy, articles, instruments and PVC charts.  Rs. 1.00 lakhs for furniture, fixture and storage.</p> <p><b>Total Budget for 2024-25: Rs. 5.00 lakhs per unit * 10 = 50 lakhs</b>  <b>Total Budget for 2025-26: Rs. 5.00 lakhs per unit * 8 = 40 lakhs</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.4	Strengthening of Library	per unit per annum	500000	5.00	1	5.00	0	-	<p><b>Ongoing Activity: One time Grant under Non - recurring component:</b></p> <p><b>Background:</b> Total 29 Nursing institutions (8 CoN, 21 ANMTCs) . Library books have been provided to 21 ANMTCs during 2014-15 and during 2022-24 provision was made for 08 CoN .</p> <p>As per MOHFW /INC guideline, the nursing libraries must have updated and latest edition of nursing manuals and books and speciality subject books for improving the knowledge of staffs as well as students . So latest edition of books are to be procured for the 21 ANMTCs .</p> <p><b>Proposal: 2024-25: 10 ANM TCs &amp; 2025-26 : 11 ANMTCs</b> Proposed to strengthen existing library at ANMTCs for 10 Govt. ANMTC Bhubaneshwar , Kalahandi , subarnapur, Berhampur , Dhenkanal, Kendrapara, Boudh,Kandhamal,Koraput &amp; Sambalpur . Budget per unit: 1.00 lakhs for furniture for storage of books &amp; 4.00 lakhs for books, annual subscription of journals &amp; magazines. Latest edition of books to be procured as per Indian Nursing Council revised syllabus &amp; updated ANM curriculum. <b>Total budget for 2024-25: Rs. 5.00 lakhs per unit * 10 = Rs.50.00 lakhs</b> <b>Total budget for 2025-26: Rs. 5.00 lakhs per unit * 11 = Rs.55.00 lakhs</b></p>
192.1.2.5	Computer/ IT lab/ Smart Classroom	per unit per annum							<p><b>Ongoing Activity: One time Non-Recurring cost</b></p> <p><b>Background:</b> Total 29 Nursing institutions (8 CoN, 21 ANMTCs) . 08 CoN were supported in PIP 2022-24 .Digital board for teaching is an alternative to the traditional black and whiteboards. It is an interactive screen that displays text, images, videos, etc., which helps students visualize content better. Average students at each ANMTC - 40 to 50 per year . Proposal of 1 smart Borad for each ANMTCs (total 21 ANMTCs). <b>Budget Head:</b> i. Digital classroom board (65" ) with accessories @ Rs. 1.00 Lakhs per unit x 21 = Rs. 21.00 Lakhs <b>Total Budget for 2024-25: Rs. 1.00 Lakhs per unit x 21 units= Rs. 21.00 Lakhs</b> <b>Total Budget for 2025-26: Rs. 4.00 Lakhs per unit x 2 units= Rs. 8.00 Lakhs</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.5.1	Computer/ IT lab/ Smart Classroom for 2024-25	per unit per annum	100000	1.00	0	-		-	
192.1.2.5.2	Computer/ IT lab/ Smart Classroom for 2025-26	per unit per annum	400000	4.00		-	0	-	
192.1.2.6	Furniture /fixture for classrooms	Per Classroom	200000	2.00	0	0.00	0	-	<p><b>Ongoing activity: One time</b>  <b>Background:</b> Total Govt. 29 Nursing institutions: 21 ANMTCs &amp; 08 CoN.  8 CoN &amp; 17 ANMTCs are having adequate fixture &amp; furniture according to the student strength. The classrooms of the 4 ANMTCs at Gajapati, Deogarh, Sambalpur, Keonjhar are to be strengthened with adequate furniture and fixture. As per MOHFW, Gol a Nursing institution should be furnished classroom for advanced nursing skill trainings as per the annual intake capacity.  <b>Proposal: 2024-25: 2 ANMTCs &amp; 2025-26: 2 ANMTCs</b>  Proposed to strengthen the classrooms of ANMTC Gajapati &amp; Deogarh in 2024-25 &amp; ANMTC Sambalpur &amp; Keonjhar in 2025-26 : One time procurement and installation of Fixture and furniture for 2 numbers of classrooms each of two institutions per year .  <b>Total Budget 2024-26 : @Rs.2.00 lakhs per class room x 2 class room x 2 ANMTC in each year= Rs.8.00 lakhs</b></p>
192.1.2.7	Outsourcing of teaching services for computer lab	per unit per annum	45000	0.45	0	-	0	-	<p><b>Ongoing Activity</b>  Hiring Computer Instructors for existing computer labs at ANMTCs-21, &amp; College of Nursing-8. Hiring is being done through empanelment process from market.</p>
192.1.2.8	Pre-service development cost								<p><b>Ongoing Activity:</b>  <b>Proposal:</b>  1. For 8 Nursing Colleges @ Rs. 5.00 Lakhs/institution (Dhenkanal, Kandhamal, Kalahandi, Nabarangpur, Sundergarh, CoN Burla, Berhampur &amp; Cuttack)  <b>Total Budget for CoN: Rs. 5 lakhs X 8 = Rs. 40.00 Lakhs</b>  2. For 21 ANMTC @Rs. 3.00 Lakhs X 21 ANMTC= Rs. 63.00 lakhs.  <b>Total: Rs.103.00 Lakhs</b>  <b>Head of expenses:</b> Recurring cost like Includes stationery cost, office supplies, internet and telephone expenses, AMC, recurring costs for labs, subscription of journals and other miscellaneous expenses AND POL or arranging transportation for clinical site and community visits of nursing students</p>
192.1.2.8.1	Pre-service development cost of CoN	Per unit	500000	5.00	0	-	0	-	
192.1.2.8.2	Pre-service development cost for ANMTC	Per unit	300000	3.00	0	-	0	-	
192.1.2.9	Technical Advisory Group meeting at state level	per meeting	10000	0.10	0	-	0	-	Ongoing Activity proposed as approved last year

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S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval 2024-26				State's Remarks
					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1.2.1 0	TAG meeting at SNC	per meeting	3000	0.03	0	-	0	-	Ongoing Activity proposed as approved last year
192.1.2.1 1	Rewards & Recognition for meritorious students	Lumpsum	150000	1.50	0	-	0	-	Ongoing activity with revised unit cost Background : The best performing nursing students from ANM/GNM/BSc/ PBBSc/ MSc / PB Diploma etc. are to be felicitated with award and mementos for motivation and encouragement of the students. 1) Felicitation to Toppers /Best performer students in shape of Award for minimum 18 participants on the basis of merit & recommendation of the committee. 2) venue arrangement cost 3) Refreshment cost 4) Miscellaneous cost
192.1.2.1 2	Office contingency for Nursing Management Supportive Unit operational at Directorate of Nursing	Per month	10000	0.10	0	0.00	0	-	Ongoing Activity with revised unit cost Background: Provision of fund for Office contingency for NMSU operational at Directorate of Nursing (organizing meeting, procurement for office consumables, printing cost, repair and maintenance, procuring electrical and electronic items , refilling , banner cost etc) Proposed Budget: Rs.10000/- per month x12 months= Rs. 1.20 Lakhs
<b>192.1.3</b>	<b>Training &amp; Capacity Building</b>					<b>14.16</b>		<b>14.16</b>	
192.1.3.1	Training (Implementation of Clinical Establishment Act)			0.00		0.00		-	Funding under State budget
192.1.3.2	Promotional Training of ANMs to lady health visitor etc.			0.00		0.00		-	Funding under State budget
192.1.3.3	Training of ANMs, Staff nurses, AWW, AWS			0.00		0.00		-	Thematic Training proposed in respective heads
192.1.3.4	Training (quality, record keeping etc) for lab technician on tests that are not covered under National disease control programs (Communicable and non-communicable).			0.00		0.00		-	Not Proposed
192.1.3.5	6 week training of faculty members from ANM / GNM schools at the State Nodal Centre, Berhampur	15/batch	1179400	11.79		-		-	Activity Dropped
192.1.3.6	6 days training (ToT) of Nurse Trainers and Medical Officers on Skills Lab at National Skills lab, Delhi	Per person	25000	0.25	0	-		-	Ongoing activity Background: The 3 newly recruited nurse trainers are to be trained in national level skill lab at NIHFW Newdelhi Proposal 2024-25: 3 person

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1.3.7	6 days DAKSH training for faculty and staff nurses	16 per batch	132000	1.32	10	13.20	10	13.20	<b>Ongoing activity</b> <b>Proposal for DAKSH training In NHM PIP 2024-25</b> at CSL Capital Hospital, CSL ,Sundargardh will conduct 10 batches each & SNC Berhampur will conduct 8 batchper annum (total-28 batches) x @Rs.1.32 per training Newly recruited nursing officers will be included in the training
192.1.3.8	Refresher training for Nursing Consultants & Nurse trainers	Per Person	35000	0.35	0	-	0	-	One time National level training at simulation labs at SGT University, New Delhi/ NIHFW, New Delhi/ others for comprehensive skill building training on RMNCH+A components.
192.1.3.9	One day state level review meeting for principals & Nursing Superintendents.	Per meeting	20000	0.20	0	0.00	0	-	<b>Ongoing activity:</b> Total 4 meeting per annum two numbers of biannual meeting for Education & clinical sector organised by Directorate of Nursing . <b>Budget Proposed for 2024-25:</b> Rs. 20000/- x 4 meeting= Rs.80000/- for state level activity.
192.1.3.10	2days State level workshop for nursing personnel	Per meeting	400000	4.00	0	0.00	0	-	<b>Ongoing activity:</b> <b>Background:</b> The knowledge development programme for nursing officers and faculties will be organized at College of Nursing VIMSAR Burla & College of Nursing Sundargarh for Nursing officers/ Faculties/ Students/ Nursing Administrators/ Consultants etc. <b>Budget proposed for 2024-25: 1 (CoN VIMSAR Burla)</b> <b>Budget proposed for 2025-26: 1 (CoN Sundargarh)</b>
192.1.3.11	6 days refresher training for 6 weeks trained nursing faculties.	Per batch	133168	1.33	0	0.00	0	-	<b>Ongoing activity:</b> <b>Background:</b> SNC Berhampur will conduct 6 days refresher training for the participants /teaching faculties who had earlier attended the 6 weeks training. To update the skills and knowledge of the participants it is necessary to conduct the refresher training, @ two batches per annum ( 16 participants per batch). <b>Proposal for 2024-25 &amp; 2025-26:</b> 2 batches per year proposed
192.1.3.12	Administrative and management training for clinical Sr. Nursing personnel working at DHH/MCH (virtual mode)	per person	25000	0.25	0	0.00	0	-	<b>Ongoing activity: Recurring activity</b> <b>Background:</b> For strengthening the clinical cadre, the managerial and leadership capacity of Sr. clinical nursing personnel are to be enhanced by training programmes. Sr. Nursing personnel like NS/DNS/ANS/ Ward in-charge are dealing with the supervisory and administrative activities of the Nursing officers. Sr. Nursing personnel of 30 DHH, capital hospital , RGH ,8 MCH are to be trained. In the year 2022-24 total 30 senior clinical staffs of 14 districts(2 participants from each district) were trained at NIHFW New Delhi . 1 batch @30 participants per batch to be organized at national level training institutions.

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					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.1.3.1 3	Onsite mentoring at Delivery point /School & college of Nursing	per visit	8000	0.08	12	0.96	12	0.96	<b>Ongoing activity:</b> The institutions such as CSL at Capital Hospital, CSL at Sundergarh, SNC at College of Nursing Berhampur & Directorate of Nursing will conduct 12 visits each per annum per institution to Govt Nursing training institutions/Delivery points for onsite mentoring and quality assessment <b>Proposed Budget for 2024-25 &amp; 2025-26:</b> @ Rs.8000/- Per visit ( for a team of two representatives form CLS, SNC & Directorate of Nursing) x 12 visits per annum x 4 institution= Rs. 3.84 Lakhs
192.1.3.1 4	Continues Nursing education program for Nursing Officers (Virtual mode) organized by Govt. Nursing institution level	Per meeting	25000	0.25	0	0.00	0	-	<b>Ongoing Activity</b> CNE programme for Nursing officers for knowledge updation and strengthen the clinical hands-on practices, Duration of min 4hrs for 2 days conducted in Hybrid mode( 70% virtual 30% Physical ) organize single batch CNE programme at Govt. Nursing institution level (21 ANMTC & 8 CON) , per batch 500 Nursing Officers & faculties/Students as participants <b>Proposed Budget for 2024-25 &amp; 2025-26:</b> Rs. 25,000/- per batch x 29 Institutions= Rs.7.25 Lakhs
192.1.3.1 5	Guest faculty /Honorarium for New BSc Nursing /Super specialty nursing course	Per unit	600	0.01	0	0.00	0	-	<b>Ongoing Activity</b> For strengthening the upgraded Nursing training institutions. Engagement of qualified guest faculty { MSc nursing (10 years teaching experience) /PHD Nursing faculty/ above MBBS or MD/MS Doctors} for taking classes of the graduate and post graduate or Super speciality nursing courses at the 8 upgraded Nursing Colleges and 3 SMTIs ( SCB MCH Cuttack, MKCG MCH, Berhampur & VSSMCH, Burla). <b>Proposed Budget for 2024-25 &amp; 2025-26:</b> Rs.600 per hr x 50 sessions per institution x 11=3.30 lakhs.
192.1.3.1 6	State level observation of International Nursing days	Lumpsum	20000	0.20	0	0.00	0	-	<b>New Activity</b> <b>Background:</b> Proposal for observation of International Nurses Day, Midwives Day & to conduct reward & recognition functions on International Nurses Day & Midwives Day at State level.
192.1.3.1 7	Strengthening of Directorate of Nursing & Nursing cell	per unit	80000	0.80		0.00		-	Activity Dropped
<b>192.2</b>	<b>Strengthening of other Training Institutes</b>					<b>0.00</b>		<b>0.00</b>	<b>0.00</b>
192.2.1	Nodal Training Centre for Laparoscopic Sterilization training	Lumpsum		0.00		0.00		-	<b>Not proposed</b>
192.2.2	Establishment of NSV Training Centre	Lumpsum		0.00		0.00		-	<b>Proposed under RCH-6 State Specific Family Planning Component</b>
192.2.3	Strengthening of CAC Training Centres	Lumpsum	200000	2.00	0	-		-	<b>Detail proposal at Training Institutes &amp; Skill Lab Write-up Justification Annexure</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
192.2.4	Setting up of DTU & SBA Training Centres	Lumpsum	0	0.00	1	0.00			<p><b>Status: Ongoing</b>  SAB Venue: As per PIP: 2022-24 total 15 existing SAB venues have been strengthened. Total functional SAB Venues in the State is 64. To accommodate enhance requirement of SAB training for CHOs, As the existing SAB venues were set up since 2011-12 and as per the actual requirement of 15 districts, it is estimated for 26 SAB venues (Existing &amp; New) of 15 districts needs to be strengthened during FY:2024-25.  <b>Budget Proposal: 2024-25 Rs. 71.89 lakh for SAB Venues.</b>  <b>District wise Detail Budget is annexed at Write-up Annexure-HSS-10 No proposal for 2025-26.</b>  <b>DTUs:</b> At District Training Unit (DTU) different Training programmes under RMNCAH+N, NCD &amp; DCP are organised apart from SAB Training. DTUs are also utilised for district level review meeting and other administrative meeting. During 2018-19 &amp; 2019-20, 15 districts have been strengthened.  <b>Proposal: As per actual requirement 19 DTUs of remaining 15 Districts need to be strengthened during 2024-25.</b>  <b>Proposed Budget: 2024-25 : Rs.125.21 Lakh for DTUs.</b>  <b>District wise Detail Budget is annexed at Write-up Annexure-HSS-10 No proposal for 2025-26.</b></p>
192.2.5	Setting up of EmOC Training Centres	Per unit	567989	5.68	0	0.00			<p><b>Ongoing Activity:</b>  1. EmOC training Centre: Functional at 1 venue i.e. SCB,MCH. Site in readiness  <b>Background:</b>  BEmOC training centre is functional at 3 old MCHs. As per the requirement of BEmOC training for 4 southren districts of Odisha i.e. Koraput, Malkangiri, Nawarangpur, Rayagada will be accommodated at Sahid Laxman Nayak (SLN ) MCH, Koraput (New MCH) . So  <b>New Proposal for</b> BEmOC training Centre at Deptt of O&amp;G , SLN MCH Koraput needs to strengthened.  <b>Budget proposed for 2024-25: @ 5.68 lakh for SLN MCH Koraput towards BEmOC Site Strengthening</b>  <b>Detal budget is placed at Write-up Annexure-HSS-10</b>  <b>No requirement for 2025-26</b></p>

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-11**  
**Technical**  
**Assistance**



## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total Technical Assistant</b>						15.50	15.50	
193	SHSRC/ ILC (Innovation & Learning Centre)						0.00	0.00	
193.1	SHSRC & ILC	Lumpsum		-			0.00	0.00	Please refer to write-up justification annexure for details of proposal
194	Planning and Program Management						15.50	15.50	F.Y. 2024-25: Rs. 15.50 lakhs (Permissible amount Rs.12.40 lakhs) F.Y. 2025-26: Rs. 15.50 lakhs (Permissible amount Rs.12.40 lakhs) Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
194.1	Programme Management Units at different levels						0.30	0.30	
194.1.1	Health Action Plans						0.00	0.00	
194.1.1.1	State Level	Lumpsum	1000000	10.00	0	0.00	0	0.00	<b>Ongoing Activity</b> Head of expenses : 1.Orientation of planning teams of district level 2.Planning meetings at state level (technical sub-committee meetings & appraisal committee meetings) 3.Dissemination of approved PIP with state & district level programme officers 4.Printing of state & district PIPs Budget proposed as per last year's approval Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
194.1.1.2	District Level	Per dist	20000	0.20	0	0.00	0	0.00	<b>Ongoing Activity</b> Head of expenses: 1.Consultation meetings with programme officers & other stake holders 2.Printing of block PIPs 3.Dissemination workshop/s Budget proposed as per last year's approval Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.1.1.3	Block Level	Per block	2000	0.02	0	0.00	0	0.00	<b>Ongoing Activity</b> Head of expenses: 1.Planning meetings at selected village level (Min 2 per blocks) for preparation of village PIP 2.Sharing meeting at village level where village consultation meetings taken up Budget proposed as per last year's approval <b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.1.2	<b>Meetings, Workshops and Conferences</b>					<b>0.00</b>		<b>0.00</b>	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.1.2.1	<b>PMU Meetings at State level</b>								
194.1.2.1.1	One day Review Meeting of DPM (30 participants + 10 facilitators)	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.1.2	One day Review Meeting of DAM (30 participants + 10 facilitators)	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.1.3	One day Review Meeting of Engineering Consultants (30 participants + 10 facilitators)	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.1.4	One day Review Meeting of AM ASHA/GKS (60 participants + 10 facilitators) - 2 batches	Per meeting	120000	1.20	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.1.5	One day Review Meeting of DM RCH (30 participants + 10 facilitators)	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.1.6	One day Review Meeting of HM (35 participants + 10 facilitators)	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.1.7	One day Review Meeting of ADMO(FW) & AM GKS & QA (60 participants + 10 facilitators)	Per meeting	120000	1.20	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.2	<b>Thematic area meetings at State level</b>								
194.1.2.2.1	Two days RCH review (MH + CH + FP + ARSH + QA) (3/district x 30 dists = 90 per + 10 facilitators per batch x 2 days)	Per meeting	145000	1.45	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.2.2	One day Training review meeting (2/district x 30 dists = 60 per + 10 facilitators) - 2 batches	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.2.3	One day review meeting of NGO programmes (PHC mgt., MWH on rotation basis) implemented under PPP mode	Per meeting	60000	0.60	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.2.4	One day IEC/BCC review (2 persons per district x 30 districts = 60 persons + 10 facilitators per batch)	Per meeting	67500	0.68	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.2.5	Two days CDMO conference (1 person per district x 30 districts = 30 persons + 20 facilitators per batch x 2 days)	Per meeting	120000	1.20	0	0.00	0	0.00	Budget proposed as per last year's approval

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.1.2.3	Review meetings at District level							0.00	
194.1.2.3.1	One day District level Monthly Programme Review meeting (MO, BPM, APHCO, CDPO, DQAC) and other Statutory meetings, Technical meetings etc.	Per block p.a	24000	0.24	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.3.2	One day Monthly BPM/BAM review meeting at District level	Per block p.a	2000	0.02	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.4	Review Meetings at Block level	Perblock pa	5000	0.05	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.2.5	Workshops and Conferences	Lumpsum	2000000	20.00	0	0.00	0	0.00	
194.1.3	Mobility Support, Field Visits					0.00		0.00	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
194.1.3.1	At State level			-		0.00		0.00	
194.1.3.1.1	Dist Nodal Officers visit to field - Officers above the rank of Addl. Director are appointed as DNO by Govt. of Odisha	Per day	3000	0.03	0	0.00	0	0.00	Fortnightly once for min. 2 days per visit to one or two districts. Min. recommended no. of tour days - 120 @Rs.3000/- per day Budget proposed as per last year's approval
194.1.3.1.2	Integrated Monitoring Team	Per visit per team	45000	0.45	0	0.00	0	0.00	There are ten composite field monitoring teams (FMT) having cross domain representatives from Civil, Programme, Finance, MIS, etc. visit atleast 10 dists per month. Each team is assigned 2-3 districts & each team consisting of 5 members. The findings are analyzed in the monthly review meetings by MD NHM and subsequently are shared with the corresponding districts  Per team expenses per visit @Rs.3000/- per member per day x 3 days x 5 members = Rs.45000/- Budget proposed as per last year's approval
194.1.3.1.3	Visit of Domain Specialists / Prog. Officers	Per visit per member	6000	0.06	0	0.00	0	0.00	The technical consultants then visit to districts as per gaps identified by integrated monitoring team.  Monthly visits p.m. & minimum for 2 days - 20 Budget proposed as per last year's approval
194.1.3.1.4	Attending different meetings/ workshops at National level	Per qtr	250000	2.50	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.3.2	At District level					0.00		0.00	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
194.1.3.2.1	Mobility Support for DPMU/District	Per District per annum	1080000	10.80	0	0.00	0	0.00	Budget: @Rs.90000/- per district per month X 30 district X 12 months = Rs.324.00 lakhs Budget proposed as per last year's approval

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.1.3.3	<b>At Block/sub block level</b>						0.00	0.00	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.1.3.3.1	Block/BPMU level Monitoring & Supportive Supervision Cost for field visits	Per block/ Per annum	300000	3.00	0	0.00	0	0.00	The cost includes TA/DA and Vehicle(Two wheeler) allowances as per Society norms, if utilized his/her own vehicle for field visit & made visits as per ToR & submit reports in time, DOL/POL cost for using Govt. vehicle or own vehicle as per society norms ,hiring of vehicles (4 Wheeler)as per requirement in tender price, etc . <b>Budget: @Rs.25000/- per Block Per Month x 314 Block</b> Budget revised as per the recent tender rate of vehicles.
194.1.3.3.2	Sector level - AYUSH Doctor 8 days p.m. (Mobility + DA as per Society norms) - 6 man days (Expected 70% of total mandated visit days) visits per month	Per Sector	6000	0.06	0	0.00	0	0.00	Budget proposed as per last year's approval
194.1.4	<b>Any Other Programme Management Cost</b>						0.30	0.30	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.1.4.1	Statutory Audit Fees	Per annum	2000000	20.00	0	0.00	0	0.00	Audit fee - Rs.19.00 lakhs Audit expenses - Rs.1.00 lakh Budget proposed as per recent tender rate.
194.1.4.2	<b>Concurrent Audit system</b>			-					1.At state level - <b>Rs.2.40 lakhs</b> 2.District level @Rs.23200/- (Audit fees @Rs.13200/- p.a. + Audit expenses @Rs.10000/- p.a.) per block x 314 blocks = <b>Rs.72.85 lakhs</b> <b>Budget proposed as per recent tender rate.</b>
194.1.4.2.1	State Level	Lumpsum	240000	2.40	0	0.00	0	0.00	
194.1.4.2.2	District Level	Lumpsum	23200	0.23	0	0.00	0	0.00	
194.1.4.3	<b>Administrative &amp; Contingency expenses at State level</b>							0.00	
194.1.4.3.1	Outsourcing of Services ( Security, Housekeeping & cleaning and Office support staff) for all admin. Units including Mission Directorate	Avg. Per person	200000	2.00	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.2	Maintenance & Audit of NHM website & its modules	Lumpsum	2500000	25.00	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.3	Leased line connectivity for SPMU (Primary & Secondary) including portable internet connectivity	Per qtr	187500	1.88	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.4	Telephone expenses for all admin. units	Per unit	30000	0.30	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.5	Electricity charges for SPMU	Per qtr	210000	2.10	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.6	Hiring, DOL & Maintenance of hired & Govt. vehicles for all admin. units	Per vehicles	420000	4.20	0	0.00	0	0.00	Ongoing Activity. Unit cost proposed as per tender rate.
194.1.4.3.7	Advertisement for SPMU	Per qtr	375000	3.75	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.8	Stationary & Contingency for SPMU	Per qtr	300000	3.00	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.1.4.3.9	Postage & telegram for SPMU	Per qtr	66000	0.66	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.10	Legal expenses for SPMU including hiring of legal experts	Per qtr	200000	2.00	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.3.11	Logistic support (furniture fixture & digitalization of HR documents etc) for all admin. units	Per qtr	250000	2.50	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4	<b>Administrative &amp; Contingency expenses at District level</b>								
194.1.4.4.1	Electricity & water charges of DPMU	per dist	30000	0.30	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4.2	Housekeeping of DPMU	per dist	21600	0.22	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4.3	Stationary & Contingency of DPMU	per dist	108000	1.08	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4.4	Internet connection for DPMU	per dist	48000	0.48	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4.5	Legal Expenses of DPMU	per dist	12000	0.12	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4.6	Advertisement Expenses of DPMU	per dist	72000	0.72	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.4.7	Sub-staff cost of DPMU	per dist	220000	2.20	0	0.00	0	0.00	Ongoing Activity. Budget revised as per current daily wages rate. Unit cost includes additional Rs.2000/- p.m. towards office maintenance
194.1.4.4.8	Admin & Contingency for Hospital Managers at DHH	per DHH	30000	0.30	1	0.30	1	0.30	Ongoing Activity. Proposed as approved last year
194.1.4.4.9	Admin & Contingency for Prog. Mgt. units at SDH	per SDH	24000	0.24	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.5	<b>Administrative &amp; Contingency expenses at Block level</b>								
194.1.4.5.1	Stationary & Contingency of BPMU	Per block	30000	0.30	0	0.00	0	0.00	0
194.1.4.5.2	Electricity & water charge of BPMU	Per block	10000	0.10	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.5.3	Internet connection charge of BPMU	Per block	12000	0.12	0	0.00	0	0.00	Ongoing Activity. Proposed as approved last year
194.1.4.6	<b>CUG cost for Programme Officers &amp; Service Providers</b>	Lumpsum	41430000	414.30	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Detail proposal at Planning and Program Management Write-up Justification Annexure</b>
194.1.4.7	<b>Management Development Training &amp; Exposure visit for SPMU, DPMU, BPMU Staff</b>	Lumpsum		0.00	1	0.00	1	0.00	<b>Ongoing Activity</b> <b>Detail proposal at HSS-11 Write-up Justification Annexure</b>
194.1.4.8	<b>Bio-matric Attendance</b>	Per unit	50000	0.50	0	0.00		0.00	<b>New Activity</b> Bio-matric attendance system at 42 PHC(N)s & 32 UPHCs managed by NGOs. Unit cost includes 3 years warranty.
194.2	<b>Planning &amp; Programme Management of other Programmes (NTEP)</b>					11.39		11.39	<b>Ongoing Activity</b> <b>Detail proposal at NDCP-4 NTEP Write-up Justification Annexure</b>
194.2.1	<b>Supervision and Monitoring</b>	Lumpsum		-		3.24		3.24	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.2.1.1	<b>State Level</b>					0.00		0.00	<b>Proposed as approved last year approval</b>
194.2.1.1.1	TA of Contractual Staff	Per month	40000	0.40	0	0.00	0	0.00	Increased to 40000 from 25000, as expenditure in 2022-23 is 109%
194.2.1.1.2	DA of Contractual Staff	Per month	50000	0.50	0	0.00	0	0.00	Increased to 50000 from 35000, as expenditure is 117%

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.2.1.1.3	TA & DA of STO and other regular staff at State TB Cell & ATD&TC, Cuttack for attending the meetings, workshops, supervision & monitoring activities, etc.	Per month	50000	0.50	0	0.00	0	0.00	Increases to 50000 from 40000
194.2.1.1.4	Other (specify)			-		0.00		0.00	
194.2.1.1.5	Provision of CUG phone & operating cost for tablets to RNTCP staff	Per CUG/ per annum	1260.24	0.01		0.00		0.00	Provision of CUG phone & operating cost for tablets to RNTCP staff for better communication and strengthen patient follow up @ Rs. 105/- per month (as per revised rate) x 12 months x 900 units= RS. 11.34 Lakhs <b>Proposed under NHM Budget</b>
194.2.1.2	<b>District Level</b>					<b>3.24</b>		<b>3.24</b>	Unit cost remains same but unit nos increased in view of increase in no. of urban TU
194.2.1.2.1	TA of Contractual Staff	Per annum per block	1000	0.01	4	0.04	4	0.04	<b>At Dist Level:</b> 2.1. Supervision and Monitoring @ Rs. 23,000/- per TB Units
194.2.1.2.2	DA of Contractual Staff	Per annum per block	15000	0.15	4	0.60	4	0.60	
194.2.1.2.3	TA & DA of DTO/MODTC for attending the meetings, workshops etc	Per annum per block	2000	0.02	4	0.08	4	0.08	
194.2.1.2.4	Other (specify)			-		0.00		0.00	
194.2.1.2.5	Travel allowance to TBHV	Per month per TBHV	1500	0.02	168	2.52	168	2.52	Additional Travel allowance to TBHV @ Rs. 1500/- per month x 12 month x 71 TBHV= Rs.12.78 Lakhs
194.2.3	<b>Vehicle Operation (POL)</b>			-		<b>3.68</b>		<b>3.68</b>	<b>Ongoing activity</b> Total budget approved in 2020-21: 190.85 lakhs Part of the budget shifted to 16.1.5.2.4 for maintenance of vehicle Total budget (16.1.3.1.13 & 16.1.5.2.4) is less than last years approval <b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.2.3.1	Four wheeler STC	No. of vehicles	25000	0.25		0.00		0.00	
194.2.3.2	Four wheeler STDC	No. of vehicles	200000	2.00		0.00		0.00	Dropped as vehicle is off road now. For ATD&TC, Cuttack lump sum @ Rs.2.00 Lakhs per vehicle for 1 vehicle including Budget approved in 2018-19: Rs.2.00 lakhs
194.2.3.3	Four wheelers DTO	No. of vehicles	130000	1.30		0.00		0.00	Existing vehicles are off road now For DTO @ 1.40 lakhs per unit x 31 units = Rs.43.40 lakhs
194.2.3.4	Four wheelers MOTC	No. of vehicles	8000	0.08	1	0.08	1	0.08	For MOTC @ 8000/- per unit x 250 units (including Urban)= Rs.20.00 lakhs Budget approved in 2018-19: Rs. 20.00 lakhs
194.2.3.5	Two-wheelers STS	No. of vehicles	50000	0.50	4	2.00	4	2.00	Increased to 50000 from 30000 due to expansion program activities thus requirement of more field activities For STS @ Rs.50000/- per vehicle x 321 Vehicles = Rs.161.00 Lakhs

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.2.3.6	STLS	No. of vehicles	50000	0.50	2	1.00	2	1.00	As DMCs increased, more requirement of travel by STLS to provide reagents to these labs and for EQA activities. For STLS @ Rs.50000/- per vehicle x 109 Vehicles = Rs.54.50 Lakhs Tribal:32 Non tribal: 77
194.2.3.7	Distinct PPM Coordinator	No. of vehicles	30000	0.30	1	0.30	1	0.30	For Distinct PPM Coordinator @ Rs.30000/- per vehicle x 31 Vehicles = Rs.9.30 Lakhs Tribal:11 Non tribal:20
194.2.3.8	District Senior DOTS plus TB HIV Supervisor	No. of vehicles	30000	0.30	1	0.30	1	0.30	For District Senior DOTS plus TB HIV Supervisor @ Rs.30000/- per vehicle x 31 Vehicles = Rs.9.30 Lakhs Tribal:11 Non tribal:20
194.2.4	<b>Vehicle hiring</b>			-		<b>3.77</b>		<b>3.77</b>	<b>Ongoing Activity proposed as approved last year</b> <b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.2.4.1	Four wheeler STC	Per Month	80000	0.80	0	0.00	0	0.00	Vehicle hiring and other Travel cost at STC @ Rs. 80,000/- per month x 12 months= Rs.9.60 Lakhs (Proposed as per NHM norm)
194.2.4.2	Four wheeler STDC	Per Month	40000	0.40	0	0.00	0	0.00	Vehicle hiring and other Travel cost at STDC @ Rs. 40,000/- per month x 12 months= Rs.4.80 Lakhs
194.2.4.3	For DTO	Per Month per DTC	30000	0.30	12	3.60	12	3.60	Vehicle hiring and other Travel cost at DTC @ Rs. 30,000/- per month x 31 NTEP districts X 12 months= Rs.111.60 Lakh
194.2.4.4	For MOTC	No. of travel days	1000	0.01	17	0.17	17	0.17	Additional Vehicle hiring cost for MOTCs @ Rs. 1000/- per vehicle per day x 1033 days = Rs. 10.33 Lakhs (Proposed as per NHM norm) Tribal:309 Non tribal:724
194.2.5	<b>Office Operation (Miscellaneous)</b>			-		<b>0.40</b>		<b>0.40</b>	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
194.2.5.1	<b>State Level</b>					<b>0.00</b>		<b>0.00</b>	
194.2.5.1.1	STC level	Per Month	70000	0.70	0	0.00	0	0.00	<b>Ongoing Activity:</b> State TB Cell @ Rs. 70,000/- per month x 12 months= Rs. 8.40 Lakhs
194.2.5.1.2	STDC level	Per Month	20000	0.20	0	0.00	0	0.00	<b>Ongoing Activity:</b> ATD& TC Cuttack @ Rs. 20,000/- per month x 12 months = Rs. 2.40 Lakhs
194.2.5.2	<b>District Level</b>					<b>0.40</b>		<b>0.40</b>	
194.2.5.2.1	Office Operation cost for Districts	Per Block per annum	10000	0.10	4	0.40	4	0.40	<b>Ongoing Activity:</b> Budget has been proposed block wise @ Rs.10,000/- per block per annum. Fund to be utilized at district level.

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
194.2.6	Vehicle Operation (Maintenance)			-		0.30		0.30	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
194.2.6.1	Four wheeler STDC	Per Vehicle	30000	0.30		0.00		0.00	New line item created as per direction of CTD. Previously budget included under 16.1.3.1.13
194.2.6.2	Four wheelers DTO	Per Vehicle	20000	0.20		0.00		0.00	
194.2.6.3	Two-wheelers STS	Per Vehicle	5000	0.05	2	0.10	2	0.10	
194.2.6.4	STLS	Per Vehicle	5000	0.05	2	0.10	2	0.10	
194.2.6.5	Distinct PPM Coordinator	Per Vehicle	5000	0.05	1	0.05	1	0.05	
194.2.6.6	District Senior DOTS plus TB HIV Supervisor	Per Vehicle	5000	0.05	1	0.05	1	0.05	
	<b>Total Budget Shifted from Other Programme Head to Planning &amp; M&amp;E</b>					<b>3.81</b>		<b>3.81</b>	
	<b>Programme Management Cost Shifted from RCH</b>					<b>0.15</b>		<b>0.15</b>	
	<b>RCH-1_Maternal Health_Odisha</b>					<b>0.15</b>		<b>0.15</b>	
3.3.3	JSY Administrative Expenses	Lumpsum	15450.00	0.15	1	0.15	1	0.15	<b>Total JSY Budget:</b> Rs.6705.86 lakhs (excluding ASHA incentive) Administrative Cost: Rs. 33.19 Lakhs per each year (0.5% of total cost) <b>Budget Shifted from RCH-1 SI No.3</b> Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
	<b>RCH-2_PC &amp; PNDDT Act_Odisha</b>					-		-	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
19.5.2	Monitoring/Mobility support	Per inspection	5000	0.05	0	-	0	-	Ongoing Activity Proposal: Field Inspection by State Inspection and Monitoring Team (PCPNDDT) Background & Justification: This can also be used for conducting inspections by District Inspection team at the District level to unearth violations of provisions under PC & PNDDT Act Progress: 126 inspections conducted by the district team during 2022-24 Proposal: Target for 2024-25:30 Nos. Target for 2025-26: 30 Nos. <b>Budget Shifted from RCH-2 SI No.19</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
19.5.3	Digitization of data base & Maintatinance of Dedicated PC PNDT Website	Lumpsum	900000	9.00	0	-	0	-	Ongoing Activity Payment is being made to NICSI, a GoI entity. <b>Budget Shifted from RCH-2 SI No.19</b>
20	<b>Gender Based Violence &amp; Medico Legal Care For Survivors Victims of Sexual Violence</b>					0.00		0.00	
20.5	<b>Planning &amp; M&amp;E</b>							-	<b>Budget Shifted from RCH-2 SI No.20</b>
20.5.1	Annual State level Refresher training of 32 DHH Internal Complaint Committee of Sexual Harassment at Workplace	Per Batch	76500	0.77	0	-	0	-	<b>Ongoing Activity.</b> <b>Background &amp; Justification:</b> <b>Follow-up of the VISHAKHA guideline of Hon,ble SC, India.</b> 1. Implementing the policy related to the prevention of sexual harassment, resolving compliance by the agreed and recommending actions to be taken by the employer. 2. Review of formation and role of Internal Complaint Committee of Sexual Harassment at Workplace at 32 DHHs <b>Progress:</b> Two batches conducted in 2022-23 and two batches planned to be completed by Dec, 2023 <b>Proposal:</b> <b>Target for 2024-25:3 Batches</b> <b>Target for 2025-26: 3 Batches</b>
20.5.2	Annual State level Refresher training of District Nodal Officers, DMO MS, & Hospital Managers on Health infrastructure in One Stop Centres of Odisha	Per Batch	90000	0.90	0	-	0	-	<b>Ongoing Activity.</b> <b>Background &amp; Justification:</b> 32 One stop centres are functional at each DHH. The health infrastructure provided to the One Stop Centre (OSC) need to be reviewed in order to smoothly address cases of GBV. <b>Progress:</b> Two batches conducted in 2022-23 and two batches planned to be completed by Dec, 2023 <b>Proposal:</b> <b>Target for 2024-25:3 Batches</b> <b>Target for 2025-26: 3 Batches</b>
	<b>RCH-3_Child Health_Odisha</b>							-	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
21.9	<b>Planning &amp; M&amp;E</b>								
21.9.1	Review cum CME for Dist. Programme Managers	Per Meeting	90000	0.90	0	-	0	-	Ongoing activity. <b>Proposal for FY 2024-25:</b> One day State level half yearly review & Orientation of Programme Managers & Nodal Officers (RBSK Manager & ADMO(FW). One meeting will be conducted for orienting district level Officers on implementation of RBSK MIS. <b>Budget Proposed:</b> @Rs.90,000/- Per Meeting X 2 Meetings= Rs.1.80 Lakhs <b>Budget Shifted from RCH-3 SI No 21</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
21.9.2	RBSK Convergence/ Monitoring meetings	Lumpsum	15000	0.15	0	-	0	-	<p><b>On Going Activity:</b>  <b>Background &amp; Justification:</b>  <b>Quarterly Convergence &amp; Review Meeting</b> planned at district level with participation of line departments (School &amp; Mass education, ICDS, SC&amp;ST department &amp; Health under the chairpersonship of Collector &amp; District Magistrate. Along with convergence issues, MHT /Block wise performance review on different RBSK components is covered in the meeting.  <b>Proposal</b>  <b>Budget:</b> @Rs.15000/- per meeting per Quarter X 4 quarter X 30 districts =Rs.18.00 lakhs  <b>Budget Shifted from RCH-3 SI No 21</b></p>
<b>30</b>	<b>Other Child Health Components</b>					<b>0.00</b>		<b>0.00</b>	
<b>30.4.2</b>	Review/orientation meetings for child health programmes	Lumpsum	1000000	10.00	0	0.00	0	0.00	<p>New Proposal:  Budget proposed for Child Health Programme Review/ Consultative meeting in/ out side the State.  Budget proposed as per GoI Recommendations.  <b>In Principle Budget approved. Budget Shifted from RCH-3 SI No 30</b></p>
	<b>RCH-6_Family Planning_Odisha</b>								<p><b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b></p>
<b>50</b>	<b>Other Family Planning Components</b>					<b>0.00</b>		<b>0.00</b>	
<b>50.9.3</b>	<b>Planning &amp; M&amp;E</b>					<b>0.00</b>		<b>0.00</b>	<b>Budget Shifted from RCH-6 SI No 50</b>
<b>50.9.2.1</b>	FP QAC meetings (Minimum frequency of QAC meetings as per Supreme court mandate: State level - Biannual meeting; District level - Quarterly)								<p><b>1. State level :</b> Integrated with annual SQAC meeting - @Rs.25000/- per meeting x 1 = Rs.0.25 lakhs Per year  <b>Ongoing activity</b></p>
<b>50.9.2.1.1</b>	State Level	Per Meeting	25000	0.25	0	-	0	-	
<b>50.9.2.1.2</b>	District Level	Per Qtr	1000	0.01		-		-	
<b>50.9.2.2</b>	FP review meetings (As per Hon'ble SC judgment)	Per Meeting	100000	1.00	0	-	0	-	<p><b>Ongoing activity</b>  1. Exclusive review meeting proposed at State level, which will be attended by ADMO(FW), Dpty. Mng. RCH &amp; Quality Consultant of 30 district level.  <b>Budget:</b> @1.00 lakhs per Year</p>
	<b>Programme Management Cost Shifted from NDCP</b>					<b>2.72</b>		<b>2.72</b>	
	<b>NDCP-2_NVBDP_Odisha</b>					<b>0.00</b>		<b>0.00</b>	
<b>64</b>	<b>Malaria</b>					<b>0.00</b>		<b>0.00</b>	<p><b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b></p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
64.2.2.9	LQAS Related cost	Per Block	2000	0.02	0	0.00	0	0.00	Revised as per recommendation of NPCC Ongoing activity : Background: State has a sanction of 180 VBDS for 314 Blocks. Hence one VBDS is assigned with >1 Block. Low endemic coastal districts have only one VBDSs to work for multiple Blocks (even more than 5) of the districts. Sanction of funds for LQAS per VBDS will be inadequate to conduct LQAS in multiple Blocks. Hence sanction may be given per Block instead of per VBDS. Funds for LQAS (for printing of formats etc) for 30 MTS/VBDS of 314 Blocks @ Rs. 1000/- per block x twice a year Budget Proposed for FY 2024-26: Rs. 2000 per block x 314 Blocks = Rs.6.28 Lakhs per Year (Budget @ Rs. 4.16 Lakhs for 208 blocks has been shifted from the head SI 64.7.7.6 ("Travel related Cost (TRC) - GFATM) as per GoI recommendation <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.2.2.10	Sub-national Disease Free Certification: Malaria	Per District	200000	2	0	0.00	0	0.00	Ongoing Activity: Background: National disease free certification for Malaria 2 districts are expected to continue this zero indigenous case reporting status in 2024-25. Hence as per GoI guideline, the name of these two districts have been proposed for disease free certification for malaria, provided they are validated by independent evaluation. Taking the current malaria epidemiological scenario into consideration.(Kendrapada, Jagatsingpur) Budget Proposed for FY 2024-26:- @Rs. 200000/- per district x 2 districts = Rs.. 4.00 Lakhs per Year <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.1.1	State Level	Lumpsum	100000	1	0	-	0	0.00	Ongoing activity: Background: The budget is proposed to meet the expenses of STTF meetings, Border meetings as and when necessary for review and planning of malaria and VBD control activities based on priority of the diseases and issues. Budget Proposed for FY 2024-26: Lumpsum of Rs. 100000 per Year <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.1.2	District Level	Per District	20000	0.2	0	-	0	0.00	Ongoing activity: Background: The budget is proposed to meet the expenses of intra district (inter-block) border meetings as and when necessary for review and planning of malaria and VBD control activities based on priority of the diseases and issues. Budget Proposed for FY 2024-26:: Rs. 20,000/District is proposed for four SRMs to be conducted at state level. Quarterly State Review Meeting (SRM) : Rs. 20,000/District(Rs. 20,000 * 30 Districts = Rs. 6 Lakhs per Year) (For 4 SRMs @1,50,000/- per quarterly SRM) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
64.7.2.1.1	Travel & accommodation related claims	Per participant/ Per Meeting	26000	0.26	0	-	0	0.00	Ongoing Activity: GFATM Activity Regional Review Meeting(RRM): 2024-26 1. Travel & accommodation related claims for attending RRM for 8 existing positions @Rs. 26000/- per participant X 8 participants X 4 RRM= Rs.8.32 lakhs proposed per Year
64.7.2.1.2	Regional Review Meeting (RRM)	Lumpsum	1000000	10		-	0	0.00	
64.7.2.2	Quarterly State Review Meeting (SRM) - GFATM	Per Meeting	250000	2.5	0	-	0	0.00	As per the D.O No. M-11016/4/2023-NHM- Finance dated 6/09/2023 of Joint Secretary MoH&FW GoI, the resource envelope of Odisha has decreased by 10% for the FY 2024-26 in comparison to 2022-24. Hence, the budget has not been revised as per the recommendation of GoI(NCVBDC). Ongoing Activity: GFATM Activity Background: Under GFATM SRM will be conducted every quarter. In one year 4 SRMs will be conducted at state level involving participation of the District VBD units along with the VBDTSs. Budget Proposed for FY 2024-26: Quarterly State Review Meeting (SRM) : @2,50,000/- per quarterly SRM x 4 meetings= Rs. 10.00 Lakhs per Year <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.2.3	District Level Quarterly Meeting (DTTF)	Per Meeting	15000	0.15	0	-	0	0.00	New Activity: Background: District Level Quarterly Meeting (DTTF) will be conducted every quarter under the chairmanship of DM&Collector to review the activities of NVBDCP for prevention & control of all the VBDs. This is important to build up intersect oral convergence which will help in quality coverage of programme and intensive monitoring. Budget Proposed for FY 2024-26: In one year 4 DTTFs will be conducted per district. As per the guideline Rs. 15,000/Meeting is proposed. 21 Districts addressed under DAMaN (State Plan Fund), so DTTF of 9 non DAMaN districts are proposed District Level Quarterly Meeting (DTTF) @ Rs. 15,000 per meeting x 36 meetings = Rs.5.40 Lakhs per Year <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.2.4	Block Level Quarterly Meeting (BTTF)	Per Meeting	3800	0.038	0	-	0	0.00	New Activity: Background: Block Level Quarterly Meeting (BTTF) will be conducted every quarter under the chairmanship of BDO to review the activities of NVBDCP for prevention & control of all the VBDs. This is important to build up intersect oral convergence which will help in quality coverage of programme and intensive monitoring. In one year, 4 BTTFs will be conducted per block. Budget Proposed for FY 2024-26: 21 Districts addressed under DAMaN (State Plan Fund), so BTTF of 83 Blocks of 9 non DAMaN districts are proposed Block Level Quarterly Meeting (BTTF) @ Rs. 3800 per meeting x 332 meetings <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
64.7.4.1	State Level mobility support(POL/DOL/Hiring of Vehicles/TA/DA etc)	Per Month	50000	0.5	0	-	0	0.00	Funds for mobility Support (POL/DOL/Hiring of Vehicles/TA/DA etc) for State Level(@Rs. 50000/Month x 12 Months) = Rs. 6.00 Lakhs (unit cost proposed in parity with GFATM) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.4.2	District Level mobility support(POL/DOL/Hiring of Vehicles/TA/DA etc) for 11 Non GFATM Districts	Per Month	19845	0.19845	0	-	0	0.00	Funds for mobility support (POL/DOL/Hiring of Vehicles/TA/DA etc) for 11 Non GFATM Districts(@Rs. 19845/Month x 12 Months * 11 Districts) = Rs. 26.20 Lakhs (unit cost proposed in parity with GFATM) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.4.3	Mobility support(POL/DOL/TA/DA etc) for 150 MTS/VBDTS of 11 Non GFATM districts	Per Month	2800	0.028	0	-	0	0.00	Funds for mobility support (POL/DOL/TA/DA etc) for 30 MTS/VBDTS of 11 Non-GFATM districts(@Rs. 2800/Month * 12 Months * 30 VBDTS(VBDTS of 11 Non-GFATM districts)) = Rs. 10.08 Lakhs (unit cost proposed in parity with GFATM) (The expenditure towards TA/DA, PoL/ DoL will be made as per NHM Norms) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.5.1	State Level mobility Support (POL/DOL/Hiring of Vehicles/TA/DA etc) - GFATM	Per Month	50000	0.5	0	-	0	0.00	As per the D.O No. M-11016/4/2023-NHM- Finance dated 6/09/2023 of Joint Secretary MoH&FW Gol, the resource envelope of Odisha has decreased by 10% for the FY 2024-26 in comparison to 2022-24. Hence, 1. budget for concurrent & consecutive supervision of IRS as per GFATM has not been proposed. The expenditure for the same will be met out of SI No. 64.7.5.1. 2. Additional 5% inflation cost has not been proposed <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.5.2	District Level mobility support (POL/DOL/Hiring of Vehicles/TA/DA etc) for 19 GFATM Districts - GFATM	Per Month	19845	0.19845	0	-	0	0.00	As per the D.O No. M-11016/4/2023-NHM- Finance dated 6/09/2023 of Joint Secretary MoH&FW Gol, the resource envelope of Odisha has decreased by 10% for the FY 2024-26 in comparison to 2022-24. Hence, Funds for mobility support (POL/DOL/Hiring of Vehicles/TA/DA etc) for 19 GFATM Districts(@Rs. 19845/Month x 12 Months * 19 Districts) = Rs. 45.25 Lakhs is proposed 1. Additional 5% inflation cost has not been proposed <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.5.3	District Level mobility support (POL/DOL/TA/DA etc) for 150 MTS/VBDTS of 19 GFATM districts - GFATM	Per Month	2800	0.028	0	-	0	0.00	As per the D.O No. M-11016/4/2023-NHM- Finance dated 6/09/2023 of Joint Secretary MoH&FW Gol, the resource envelope of Odisha has decreased by 10% for the FY 2024-26 in comparison to 2022-24. Hence, Funds for mobility support (POL/DOL/TA/DA etc) for 150 MTS/VBDTS of 19 GFATM districts(@Rs. 2800/Month * 12 Months * 150 VBDTS(VBDTS of 19 GFATM districts)) = Rs. 50.40 Lakhs is proposed (The expenditure towards TA/DA, PoL/ DoL will be made as per NHM Norms) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.6.1.1	Mobility support for strengthening Entomological surveillance - GFATM	Per Unit	600000	6	0	-	0	-	Proposed Support for 8 entomological zones (Cuttack, Sambalpur, Ganjam, Angul, Balasore, Kalahandi, Koraput & Puri) @Rs. 50000/Month per Zone Rs. 50000*12*8 = Rs. 48 Lakhs <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
64.7.6.3.1	Mobility support for strengthening Entomological surveillance	Per Month	50000	0.5	0	-	0	-	Ongoing Activity: Field activities of State entomological unit Budget Proposed for FY 2024-25: Mobility support for state level - @ Rs.50,000/- per month x 12 months = Rs. 6.00 Lakhs <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.7.1	State Level	Per Month	50000	0.5	0	-	0	-	State Level: @ Rs. 50,000/Month (Rs. 50,000 x 12 months = Rs. 6 Lakhs) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.7.2	District Level	Per Month	2500	0.025	0	-	0	-	District Level: Rs. 2500/Month per Block (Rs. 2500 x12 months 314 Blocks = Rs. 94.20 Lakhs) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
64.7.7.7	Maintenance cost of vehicles	Per unit	3000	0.03	0	-	0	-	Ongoing Activity: Maintenance cost of motor bikes provided under IMCP-3 for 30 VBDSs of non GFATM funded districts@ Rs.3000/- per annum x 30 VBDSs = Rs. 90,000. (unit cost proposed in parity with GFATM) <b>Budget Shifted From NDCP -2 NVBDCP SI No. 64</b>
66	AES/JE					0.00		0.00	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
66.12.4.1	Any other (please specify)	Lumpsum	0	0		-	1	-	Ongoing Activity: 1. Printing of AES case register As per national guideline JE/AES NVBDCP GoI, all AES case must be reported under AES surveillance in the state. It is revealed that AES cases are not either recorded and/or reported from DHHs/MCHs with maintenance of date/area wise AES cases which could help the periodical screening of JE cases. Non availability of these data does not give any guidance to state to know the actual disease burden. Hence Printing of AES case register is required to maintain in the pediatric and medicine ward of each DHHs, SDHs & MCHs of the state. Proposal for FY 2025-26: AES Case Register(@Rs. 200/Register) Budget Breakup: a. Rs. 200/Register * 5 Registers/MCH * 7 MCHs = Rs. 7000 b. Rs. 200/Register * 3 Registers/DHH * 37 DHHs = Rs. 22200 c. Rs. 200/Register * 2 Registers/SDH * 33 SDHs = Rs. 13200 Budget Proposed: Rs. 42,400 <b>Budget Shifted From NDCP -2 NVBDCP SI No. 66</b>
68	Lymphatic Filariasis					0.00		0.00	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expences.</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
68.10.7	Monitoring & Evaluation (Post MDA assessment by medical colleges (Govt. & private)/ICMR institutions )	Per IU	35000	0.35	0	0.00	0	-	<p><b>Ongoing Activity:</b>  <b>Background:</b>            19 districts are proposed for MDA in continuation to this for Post MDA assessment by external agency such as medical college/ICMR Institutions are paramount important to identify and understand the actual coverage and compliance of MDA and to identify the gaps in the programme.  <b>Proposal for FY 2024-25:</b> Rs. 35,000/- per district x 19 MDA districts= Rs. 6.65 Lakhs            Proposal for FY 2025-26: Rs. 35,000/- per MDA district for 18 MDA districts.= Rs. 6.30 lakhs  <b>Budget Shifted From NDCCP -2 NVBDCP SI No. 68</b></p>
68.12.1.1	For State Level	Lumpsum	50000	0.5	0	-	0	-	<p><b>Ongoing Activity</b>  <b>Proposal for FY 2024-25:</b>            1. For State Level: @Rs. 50,000</p>
68.12.1.2	For District Level	Per Meeting	10000	0.1	0	-	0	-	
68.12.1.3	For Block Level	Per Meeting	500	0.005	0	-	0	-	
68.12.2.1.1	For State Level	Lumpsum		0	0	-	0	-	
68.12.2.1.2	For District Level	Per District	80000	0.8	0	-	0	-	<p><b>Proposal for FY 2024-25:</b></p>
68.12.3.1.1	Contingency support for use of marker pen, chalk and formats	Per DA	75	0.00075	0	-	0	-	<p>For ensuring maximum anti filaria drug compliance and supervision Odisha had done a pilot-based endeavour of house marking and finger marking in MDA districts. This witnessed a great success in enhancing the drug compliance in the community. Since it was not a budgeted item, the same could not be implemented uniformly across all the MDA districts. Under such circumstances in the current PIP prevision for marker, chalk and printing of formats is proposed under contingency            Rs. 75 per DA for use of marker pen, chalk and formats  <b>Proposal for 2024-25</b>            Total 109439 DAs for covering 252 IUs of 19 districts            Budget requirement: Rs. 75 x 109439 = 82.07 lakhs  <b>Proposal for 2025-26</b>            Total 62628 DAs for of 18 districts            Budget required: Rs. 75 x 62628 = 46.97 lakhs  <b>Budget Shifted From NDCCP -2 NVBDCP SI No. 68</b></p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
68.12.3.1.2	Height based, collapsible coloured dose pole (Ivermetin + DEC + Albendazole)(IDA)	Per DA	125	0.00125	0	-	0	-	(Ivermetin + DEC + Albendazole)(IDA) Studies in India and elsewhere have shown a great impact in reducing the mF load drastically in the endemic areas with few rounds of IDA and moved hastily to elimination phase. As the administration of IDA is based on height based, collapsible coloured dose pole to be provisioned for IDA IUs (@ 1 Dosepole/DA) are proposed at the rate of 125 rupees per pole. <b>Proposal for 2024-25</b> Budget requirement: Rs. 125 x 86628 DAs =108.28 lakhs Total budget proposed for FY 2024-25: Rs.190.36 lakhs <b>Proposal for 2025-26</b> Budget required: Rs. 125 x 36097 DAs =45.12 lakhs Total budget proposed for FY 2025-26: Rs.45.12 lakhs <b>Budget Shifted From NDCP -2 NVBDCP SI No. 68</b>
	<b>NDCP-3_NLEP_Odisha</b>					<b>0.00</b>		<b>0.00</b>	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
<b>69</b>	<b>Case detection and Management</b>					<b>0.00</b>		<b>0.00</b>	
<b>69.1.1.5</b>	<b>Monitoring &amp; supervision cost</b>								<b>Budget Shifted From NDCP -3 NLEP SI No. 69</b>
<b>69.1.1.5.1</b>	State level	Lumpsum	50000	0.5	0	0.00	0	0.00	
<b>69.1.1.5.2</b>	District level	Lumpsum	10000	0.1	0	0.00	0	0.00	
<b>69.1.1.5.3</b>	Block level	Per block	3000	0.03	0	0.00	0	0.00	
<b>69.1.1.5.4</b>	Mobility support for monitoring & supervision by HW @ 10% of Incentive of ASHA	Lumpsum		0	0	0.00	0	0.00	
	<b>NDCP-4_NTEP_Odisha</b>					<b>2.72</b>		<b>2.72</b>	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
<b>73</b>	<b>Drug Sensitive TB (DSTB)</b>					<b>2.72</b>		<b>2.72</b>	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
73.12.5	M& E for Active Case Finding of TB Patients	Per Round	84000	0.84	2	1.68	2	1.68	<p>Ongoing Activity</p> <p>Active Case finding for TB cases (RNTCP)</p> <p>Population Coverage: 57.00 Lakhs (51 Lakhs Population from rural and 6.00 Lakhs from urban slums &amp; other vulnerable pockets-Targeted as per current year coverage)</p> <p>Approved Rounds: Twice (Tentatively in September &amp; Feb)</p> <p>Approved Activity:</p> <p>Monitoring &amp; Supportive Supervision</p> <p>3.1. Mobility Support &amp; POL for Active Case Finding: - Estimated Cost- Rs.28.50 Lakhs ( @ Rs. 5,000/- for every 10,000 population)</p> <p>3.2. Incidental Charges – Estimated Cost – Rs.11.40 Lakhs (@ Rs.2000/- per every 10000 population)</p> <p>3.3. Other Logistics</p> <p>3.3.1 Sputum Transportation – from existing head</p> <p>3.3.2 Transportation of samples to CBNAAT Site – From Existing head</p> <p>Total Cost Per round : Rs.28.50 lakhs + Rs.11.40 lakhs = Rs.39.90 lakhs</p> <p>Budget Proposed for 2 rounds: Rs.39.90 lakhs x 2 =Rs.79.80 lakhs</p> <p><b>Budget Shifted From NDCP -4 NTEP SI No. 73</b></p>	
73.13	Vehicle Allowance	Per Annum/ Per person	12000	0.12	7	0.84	7	0.84	<p>Ongoing Activity</p> <p>Proposal as per GoI norms: 2 wheeler for STS/ STLS/ Dist. PMDT &amp; TBHIV Coordinator/ PPM Coordinator</p> <p>Justification:</p> <p>Replacement of 301 nos of vehicle is required as the vehicles have completed more than 6 years and covered more than 100000 Km./vehicles have become off-road.</p> <p>Changes made as per States decision: Justification for providing vehicle allowances instead of purchase of new vehicle for field staff (NTEP): As per GoI guidelines, used vehicles can be changed on completion of every 6 years term or running more than 1,00,000 KMs. As State is finding difficulty in maintenance of vehicles and condemnation/ disposal of old vehicles, following proposal has been placed for consideration.</p> <p>Providing Vehicle Allowance to Staff : Plan is to provide Rs.1000/- PM as vehicle allowances to concerned staff if s/he is using its own vehicle for field monitoring for recommended no of days as per the ToR and submit filed visit report to all concerned as per guidelines. This will be exclusive of POL cost claimed for field visits as per Society norms.</p> <p>Justification for arriving the cost norms for vehicle allowance:</p> <p>A new vehicle (Two Wheeler) is costing about Rs.70,000/- inclusive of all taxes etc. The age of vehicle for use is about 6 years as per GoI guidelines. So annual expenditure on the head is about Rs.12,000/- (Rs.70,000/ 6=11,666). Hence, as per the calculation, Rs.1000/- can be given spent on the head.</p> <p>Coverage: The provision will be applicable for those 293 Staff who has no vehicle / vehicle attained the age for condemnation. The same provision will be extended to others gradually.</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
73.20.1	Travel support for attending NTF, ZTF, STF meetings for Govt. Medical Colleges	Per Unit	20000	0.20	0	0.00	0	0.00	Ongoing Activity : 5 members x 2 nos (ZTF & NTF) of task force to attend ZTF and NTF meeting. Budget to be kept at STC. Proposed Budget for 2024-25: @Rs. 0.20 Lakhs x 5 members from MCH x 2 meetings (NTF & ZTF) = Rs. 2.00 lakhs Proposed Budget for 2025-26: @Rs. 0.20 Lakhs x 5 members from MCHs x 2 meetings (NTF & ZTF) = Rs. 2.00 lakhs <b>Budget Shifted From NDCP -4 NTEP SI No. 73</b>
73.20.2	Communication & other expenses	Per Unit	10000	0.10	2	0.20	2	0.20	Ongoing Activity: Proposed for Govt Medical College : 1. SCB MCH, 2. MKCG MCH, 3. VSS MCH, 4. SLN MCH Koraput, 5. PRM Mayurbhanj, 6. BB MCH, Bolangir, 7. FM MCH Balasore, 8. AIIMS, Bhubaneswar, 9. SJMCH, Puri, 10. DDMCH Keonjhar, 11. GMC sundargarh, 12. PGIMER BBSR, 13. SRM MCH Kalahandi, Proposed Budget: @Rs.10000/- X 13 Govt. MCHs = Rs. 1.30 lakhs <b>Budget Shifted From NDCP -4 NTEP SI No. 73</b>
	<b>Programme Management Cost Shifted from NCD</b>					<b>0.77</b>		<b>0.77</b>	
<b>96</b>	<b>Other NPCB&amp;VI components</b>					<b>0.00</b>		<b>0.00</b>	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
<b>96.6</b>	<b>Planning and M&amp;E</b>					<b>0.00</b>		<b>0.00</b>	
96.6.1	Management of Health Society (State to provide details of PM Staff in the remarks column separately)			-					Ongoing Activity, proposed as per last year approval.
96.6.2	Programme Management HR			-		0.00		0.00	Programme Management HR (Accounts Manager, Administrative Assistant, DEO & Support Staff- which has been projected in Line Item No. HSS-9_HRH)
96.6.3	Administrative Contingency at State Level	Lumpsum	500000	5.00	0	0.00	0	0.00	<b>Budget Shifted from NCD-1_Other NPCB+VI_SI.No. 96</b> Administrative Contingency at State Level: @ 5.00 lakhs per annum (Amt reduced from 6.00 Lakhs to Rs.5.00 Lakhs in view of low expenditure trend.
96.6.4	Administrative Contingency at District Level	Per District	50000	0.50	0	0.00	0	0.00	<b>Budget Shifted from NCD-1_Other NPCB+VI_SI.No. 96</b> Administrative Contingency at District Level: Rs.50000/- per annum x 30 district = Rs.15.00 lakhs
<b>97</b>	<b>Implementation of District Mental Health Plan</b>					<b>0.65</b>		<b>0.65</b>	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
<b>97.7</b>	<b>Planning and M&amp;E</b>			-		<b>0.65</b>		<b>0.65</b>	Maximum Budget limit is Rs. 5.50 lakhs per district X 30 districts = Rs. 165.00 lakhs. But Budget proposed under Monitoring & Evaluation is <b>Rs. 24.04 lakhs only.</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
97.7.1	Miscellaneous/ Travel	Lumpsum	55000	0.55	1	0.55	1	0.55	<b>Budget Shifted from NCD-2_national mental Health Programme_SI.No. 97</b> <b>Ongoing activity..</b> District MHP Cell Mobility Support, contingency& miscellaneous cost for District Mental Health Programme
97.7.2	Operational expenses of the district centre : rent, telephone expenses, website, catridge, tonner, minor repair of IT consumables etc.	Per District	10000	0.10	1	0.10	1	0.10	<b>Budget Shifted from NCD-2_national mental Health Programme_SI.No. 97</b> <b>Ongoing activity</b> Proposed @ Rs. 10,000/- per unit x 32 units (30 districts + 2 new Mental Health units at BBSR & Rourkela)= Rs. 3.20 lakhs. ( Unit cost remain unchanged)
106	<b>Tobacco Cessation</b>					0.12		0.12	<b>Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over &amp; above the permissible amount, district has to take due approval from MD NHM for booking of expenses.</b>
106.6.2	<b>State Tobacco Control Cell (STCC): Mobility Support</b>					0.12		0.12	<b>Budget Shifted from NCD-4_National Tobacco Control Programme_SI.No. 106</b>
106.6.2.1	Hiring of Operational Vehicle under NTCP	Lumpsum	150000	1.50	0	-	0	-	<b>Ongoing Activity with revised unit cost</b> Budget proposed for local hiring & TA/DA support for consultant and Programme Officers at State level
106.6.2.2	Enforcement Squads	Per Squad/ Per Visit	3000	0.03	0	-	0	-	<b>Ongoing Activity</b> <b>Support cost for movement of enforcement squad:</b> <b>Background:</b> The Enforcement Squad constituting of enforcement officials like Food safety Officer, Drug Inspector, Sub Inspector of Police & Excise Inspector. The squad will move to block for look into the violation of the COTPA. This flying squad will take-up at least 1 enforcement per month. The TA/ DA and DOL for this squad shall be met out of this fund. <b>Present Status: 688 Enforcement Squad has been moved in the year 2022-23 and around Rs 11.00 Lakh fines had been collected from the violators for Violating of COTPA 2003 in different places of odisha. It is expected to achieve the target for FY 23-24 as per approved PIP.</b>  <b>Financial Implication:</b> Budget proposed for 30 district & 5 Municipal Corporation Areas and Puri urban areas <b>Total Budget proposed for FY 2024-25 &amp; 2025-26:</b> 36 places x 24 per annum total 864 visits @ Rs 3000/- per visit=Rs25.92 lakh Mobility support for NTCP staff will also be met out of this head.
106.6.2.3	Tobacco Cessation Centre (TCC): Office Expenses	Per District	12000	0.12	1	0.12	1	0.12	<b>Proposed as per last year approval</b> <b>Ongoing Activity for DHH</b> <b>Budget Proposed for FY 2024-25:</b> 1. TCC at DHHs @ 12,000 per DHH: 0.12 Lakh X 32 DHHs = Rs. 3.84lakhs In CHC level dental wing are operational <b>Total: Rs.3.84Lakhs</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
106.6.3	State Tobacco Control Cell (STCC): Misc./Office Expenses			-					Budget Shifted from NCD-4_National Tobacco Control Programme_SI.No. 106
106.6.3.1	Misc/ Office Expenses of State Tobacco Control Cell (STCC)	Lumpsum	72000	0.72	0	-	0	-	Ongoing activity Proposed as per last year approval
106.6.3.2	State-level Coordination Committee Meeting	Per Meeting	5000	0.05	0	-	0	-	Frequency: Quarterly Budget: Rs.5000/- Per meeting X 4 Qtr = Rs.0.20 lakhs Proposed as per last year approval Ongoing Activity
106.6.4	District Tobacco Control Cell (DTCC): Misc./Office Expenses			-					Budget Shifted from NCD-4_National Tobacco Control Programme_SI.No. 106
106.6.4.1	Misc./Office Expenses (DTCC)	Per District	36000	0.36	0	-	0	-	District Tobacco Control Cell (DTCC): Misc./Office Expenses Budget: @Rs.36000/- X 30 =Rs.10.80 lakhs Ongoing activity Proposed as per last year approval
106.6.4.2	District level Coordination Committee Meeting	Lumpsum	0	-	1	-	1	-	<b>Proposal-1: Ongoing activity</b> The district level coordination committee scheduled on quarterly basis. Approved @4 meetings per district per year. Proposed Unit cost @2000/- per Meeting <b>Budget requirement:</b> @Rs.2000/- per Meeting X 4 meeting X 30 District = Rs.2.40 lakhs Proposed as per last year approval <b>Proposal-2: New Activity</b> Block Level Co ordination Committee shall be constituted as per operational Guidelines of NTCP .AM,NCD may co ordinate it in consultation with BPMU and MO I/C. one BLCC may be organised in a year . Budget requirement : @Rs.1500/- per Meeting X 1 meeting in a FY X 314 blocks = Rs.4.71 lakhs <b>Budget Proposed for FY 2024-25:(Prop-1+Prop-2) =Rs 7.11 Lakh</b>
106.5	Setting up of STCC		120000	1.20	0	-	0	-	
110	Other NP-NCD Components					0.00		0.00	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
110.12	Planning and M&E					-		-	Budget Shifted from NCD-5_NPCDCS_SI.No. 110
110.12.1	Mobility, Miscellaneous, TA/DA & Contingencies for State NCD Cell	Per State	1000000	10.00	0	-	0	-	On going activity Gol norms State NCD Cell :Rs 10.00 Lakh
110.12.2	Mobility, Miscellaneous, TA/DA & Contingencies for District NCD Cell	Lumpsum	0	-	1	-	1	-	Ongoing activities with revised Unit cost 1. Recurring cost proposed @ Rs4.00Lakh per DHH consists of >= 12 CHCs -15 DHH Rs 3.00 Lakh for DHHs <= 12 CHCs- 15 DHH <b>Financial implication: Rs 105.00Lakh</b> 15 District NCD Cell @4.00Lakh X 15 DHHs= Rs. 60.00 Lakh 15 District NCD Cell @ Rs 3.00Lakh X 15 DHHs= Rs..45.00Lakh <b>Gol norms District NCD Cell : Rs 6.00 Lakh</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
114	Implementation of NPCCHH						0.00	0.00	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
114.5	Statutory Meetings and Planning						0.00	0.00	Budget Shifted from NCD-7_Implementation of NPCCHH_SI.No.114
114.5.1	State Governing Body meeting (1/6 months)	Per meeting	5000	0.05	0	0.00	0	0.00	Gol mandate : Governing Body meeting are to be organized twice in a year
114.5.2	Quarterly State Task Force Meetings	Per meeting	3000	0.03	0	0.00	0	0.00	Gol Mandate : Task Force meeting are to be organized quarterly
114.5.3	Quarterly District Task Force Meetings	Per dist per qtr	1000	0.01	0	0.00	0	0.00	Gol Mandate : District Task Force meeting are to be organized quarterly (30 Districts*4=120)
114.5.4	District Action Plan on Climate Change and Human Health (DAPCCHH)	Per dist	5000	0.05	0	0.00	0	0.00	State has planned to take up District Action Plan & Budget on Climate Change(DAPCCHH) for all 30 districts
114.5.5	Monitoring, supervision & office contingency	Per annum	0	0.00	1	0.00	1	0.00	State Level : Rs.1.50 Lakhs per Annum District Level : Rs.4.50 Lakhs (Rs.15000/- per district X 30 Districts )
	Programme Management Cost Shifted from HSS						0.17	0.17	
195	Health Management Information System (HMIS)						0.17	0.17	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
195.3.2.4	Contingency for report returns			-			0.10	0.10	1. Cartridge & Papers per reporting unit: 1.1 State Level: Rs. 0.60 lakhs 1.2 District Level: 30X Rs.30000/- =Rs.9.00 lakhs 1.3 Block & other major hospital Level: 379 X Rs.10000/- =Rs. 37.90 lakhs
195.3.2.4.1	State Level	Lumpsum	60000	0.60	0	-	0	0.00	Budget Shifted from HSS-12_IT Interventions_SI.No.195 Rs. 60,000/- X 1 SPMU =0.60 Lakhs
195.3.2.4.2	District Level	Per District	30000	0.30	0	-	0	0.00	Budget Shifted from HSS-12_IT Interventions_SI.No.195 Rs. 30,000/- X 30 DPMU = 9.00 Lakhs
195.3.2.4.3	Block & Other major Hospital Level	Per Institution	10000	0.10	1	0.10	1	0.10	Budget Shifted from HSS-12_IT Interventions_SI.No.195 Rs. 10,000/- X BPMU- 314 + DHH-32+ SDH-33 (Total - 379) = 37.90 Lakhs
195.3.2.1	Internet Connectivity through LAN / data card			-			0.07	0.07	
195.3.2.1.1	Internet connection for M&E cell at SPMU	Per annum	60000	0.60	0	-	0	-	Budget Shifted from HSS-12_IT Interventions_SI.No.195
195.3.2.1.2	Internet connection for M&E cell at DPMU	Per dist p.a	30000	0.30	0	-	0	-	Budget Shifted from HSS-12_IT Interventions_SI.No.195
195.3.2.1.3	Internet connection (Broadband) for BPMU	Per BPMU p.a	12000	0.12	0	-	0	-	Budget Shifted from HSS-12_IT Interventions_SI.No.195
195.3.2.1.4	Internet connection (Broadband) for Major facilities i.e. DHH & SDH for facility based reporting in HMIS	Per facility p.a	7000	0.07	1	0.07	1	0.07	Budget Shifted from HSS-12_IT Interventions_SI.No.195
195.3.2.3	AMC Cost for Printer			-			-	-	AMC Cost of Printer State (4) X @Rs.28000/- = Rs.1.12 lakh
195.3.2.3.1	State Level	Per Unit	28000	0.28	0	-	0	-	Budget Shifted from HSS-12_IT Interventions_SI.No.195

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
200	Implementation of PCMS					0.00		0.00	Permissible amount is 80% of total sanctioned budget. In case of any additional requirement on the same head over & above the permissible amount, district has to take due approval from MD NHM for booking of expenses.
200.1.7	State Level Surveillance & Monitoring	Lumpsum	700000	7	0	0.00	0	0.00	Budget Shifted from HSS-15_Implementation of PCMS_SI.No.200 To supervise the programme, moving to different districts / institutions of the State
200.1.8	District Level Surveillance & Monitoring	Per District	50000	0.5	0	0.00	0	0.00	Budget Shifted from HSS-15_Implementation of PCMS_SI.No.200 To supervise the programme, moving to different districts / institutions of the respective districts
200.1.3	State Level Meeting Cost / Office Expenses / Contingency	Lumpsum	100000	1	0	0.00	0	0.00	Budget Shifted from HSS-15_Implementation of PCMS_SI.No.200
200.1.4	District Level Meeting Cost / Office Expenses / Contingency	Per District	10000	0.1	0	0.00	0	0.00	Head of expenses: Printer Cartridge, Xerox Paper, Reviw Meeting with different stake holders etc

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-12**  
**IT interventions**  
**and systems**



HSS-12\_IT Interventions

Capital Hospital, BBSR

S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval 2024-26				State's Remarks
					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total</b>						0.03		0.03	
195	<b>Health Management Information System (HMIS)</b>					0.03		0.03	
195.1	<b>HMIS/MCTS Trainings</b>					-		-	
195.1.1	<b>State Level Training</b>								
195.1.1.1	Regional Workshop on HMIS (GOI)	Per Batch	1200000	12	0	-			<b>New Activity:</b> <b>Proposal for 2024-25:</b> As per proposal given by MoH & FW, GoI. Participants from Odisha & other States to be decided by GOI <b>Not Proposed in 2025-26</b>
195.1.1.2	Training cum review meeting for HMIS & RCH at State Level	Per Batch	160000	1.6	0	-	0		<b>Ongoing Activity :</b> State Level Training cum review meeting of DDM/ CDM for HMIS/ RCH Portal Duration of training: 2 days No. of Batch: 3 in each Year Batch Size: 50 (State+ District level) participants
195.1.2	<b>District Level Training</b>								
195.1.2.1	Training cum review meeting for HMIS & MCTS at District level	Per Block/urban	7200	0.07	0	-	0		<b>Ongoing Activity :</b> Monthly- Review-cum-validation meeting of BDMs, SAs, reporting personnel of SDH & DHH at District level Proposed Load for 2 years: 344 batches Target for 2024-25: 344 blocka/ urban (@1 batch/ block) Target for 2025-26: 344 block/ urban (Activity continued)
195.1.2.2	Orientaion of Private Hospital reporting personnels in 5 Urban Municipal Coroprations	per batch	100000	1	0	-	0		<b>New Activity</b> This training may be done at 5 Urban Cities (Bhubaneswar, Cuttack, Berhampur, Sambalpur & Rourkela) where more no. of pvt. Hospitals are exists. Target for 2024-25: 5 batches Target for 2025-26: 5 batches
195.1.2.3	2 days Training cum review meeting of DDM/ BDM/ UDM/ ICA on HMIS & RCH portal	Per Batch	3,00,000	3.00	0	-	0		<b>Ongoing Activity :</b> Category of Participants: DDM/ BDM/ UDM/ ICA. State load: 525 person Proposed load for 2years: 20 batches Target for 2024-25: 10 batches (50/batch) Same activity will be continued in 2025-26: 10 batches (50/batch)
195.1.2.4	2 days Training of Newly recruited MPHWF on HMIS/ RCH at District level in 2025-26	Per person	600	0.012		-	0		<b>New Activity</b> 1338 New Subcenters are to be established in "0" subcenter GPs in 2025-26. 1338 new MPHWFs are to be recruited. Target for 2024-25: No proposal Target for 2025-26: 1338 personnel's
195.1.3	<b>Block level Training</b>								

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
195.1.3.1	Monthly review -cum-validation meeting of sub Block level reporting personnel	Per block/ per year	3000	0.03	0	-	0	-	<b>Ongoing Activity :</b> Monthly review -cum validation meeting of sub block level reporting personnel - @ Rs. 250/- month/ block X 314 Blocks X 12 months Target for 2024-25: 314 blocks Target for 2025-26: 314 blocks
195.1.3.2	Refresher training (one day each) for sub-block level Rural + Urban) reporting personnel	Per person	600	0.006	0	-	0	-	Ongoing Activity: <b>Proposal</b> Refresher training (one day each) for sub-block level Rural + Urban) reporting personnel (Participants : Health Worker (M /F), Health Supervisor (M /F), reporting personnel of (CHC/ PHC/ OH/ SDH/ DHH) @ Rs. 600/- per person X 27298= 163.79 Lakhs Target for 2024-25: 27298 persons Target for 2025-26: 27298 persons
<b>195.2</b>	<b>Printing activities under HMIS/MCTS</b>								
195.2.1	Printing of HMIS Formats	Per Booklet	300	0.003	0	-	0	-	<b>Ongoing Activity</b> Institutions reporting through HMIS : <b>Public health instructions</b> = SC - (6688 + 548) PHC - (1290+244) + CHC - (379+7) + SDH - 33 + DHH-32 + MCH -12 = 9233 Nos. <b>Private institutions</b> = 565 Nos. 10% Buffer - 538 Total Institutions = 10336 <b>Target for FY 2024-25: 10336 Booklets</b> (Pages in format : MCH-18, DH-21, SDH-21, CHC-21, PHC-20, SC-13) 24 Sets per institutions per year Cost of printing should be based on competitive bidding
195.2.2	Printing of RCH Register	Per register	250	0.0025	0	-	0	-	<b>Revised as per NPCC Recommendation</b> Ongoing Activity Total ANM - 6688 Rural + 548- Urban = Total 7236 • Each Sub Center will be provided one register, New Register format will be developed on basic data fields. As State is planning for complete digitalization data on site to avoid duplicity of data capturing and avoid errors along reduce workload and focus on data quality. • Each register can capture at least 300 beneficiary (PW & Child) • The register cost will be Rs. 250/- each Target for FY 2024-25: 7236 Registers @ 1 per ANM + 723 (10% buffer)= 7959
<b>195.3</b>	<b>HMIS &amp; MCTS Operational Cost</b>					<b>0.03</b>		<b>0.03</b>	
195.3.1	Mobility Support for HMIS & MCTS			0.00		-		-	
195.3.2	Other cost for HMIS & MCTS (incl. Internet connectivity; AMC of Laptop, printers, computers, UPS; Office expenditure; Mobile reimbursement)			0.00		<b>0.03</b>		<b>0.03</b>	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
195.3.2.1	<b>Internet Connectivity through LAN / data card</b>			-		-		-	
195.3.2.1.1	Internet connection for M&E cell at SPMU	Per annum	60000	0.60		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
195.3.2.1.2	Internet connection for M&E cell at DPMU	Per dist p.a	30000	0.30		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
195.3.2.1.3	Internet connection (Broadband) for BPMU	Per BPMU p.a	12000	0.12		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
195.3.2.1.4	Internet connection (Broadband) for Major facilities i.e. DHH & SDH for facility based reporting in HMIS	Per facility p.a	7000	0.07		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
<b>195.3.2.2</b>	<b>AMC for Computer/ laptop etc.</b>			-		<b>0.03</b>		<b>0.03</b>	AMC cost of Computers, Laptop & other accessories (412) computers including UPS/ laptops)
195.3.2.2.1	State Level (for SPMU)	Per unit	2500	0.03	0	-	0	-	SPMU: 8 X Rs.2500/- (Cost proposed for a set of computers along with UPS @Rs.2500/-)
195.3.2.2.2	District Level (for DPMU)	Per unit	2500	0.03	0	-	0	-	DPMU : 90 (Available 90 X Rs.2500/- (Cost proposed for a set of computers along with UPS
195.3.2.2.3	Block Level (for BPMU)	Per unit	2500	0.03	1	0.03	1	0.03	BPMU- 314 + DHH-32+ SDH-33 = Total: 379 X Rs.2500/- (Cost proposed for a set of computers along with UPS @Rs.2500/-)
<b>195.3.2.3</b>	<b>AMC Cost for Printer</b>			-		-		-	2. AMC Cost of Printer 2.1 State (4) X @Rs.28000/- = Rs.1.12 lakh 3.2 District (60) & Block (314) level & major facility (65): 439 X @Rs.1200/- per unit = 5.27 lakhs
195.3.2.3.1	State Level	Per Unit	28000	0.28		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
195.3.2.3.2	District & Below Level	Per Unit	1170	0.01	0	-	0	-	
<b>195.3.2.4</b>	<b>Contingency for report returns</b>			-		-		-	
195.3.2.4.1	State Level	Lumpsum	60000	0.60		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
195.3.2.4.2	District Level	Per District	30000	0.30		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
195.3.2.4.3	Block & Other major Hospital Level	Per Institution	10000	0.10		-		-	Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194
<b>195.4</b>	<b>State Specific Initiatives &amp; Innovations</b>								
195.4.1	Field validation of Data (Inter districts)	Per district	85000	0.85	0	-	0	-	<b>Ongoing Activity</b> This activity is carried out yearly once by interchanging District reporting personnel from one district to another district. This will help in cross verification of data with register to portal, innovations made by district. Planned annually once.

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
195.4.2	Field validation of Data (Inter blocks)	Per block	2000	0.02	0	-	0	-	<b>New Activity</b> This initiative proposes that all the blocks within a district will conduct cross validation of data of another block of the same district on annual basis. Target for 2024-25: 314 blocks Target for 2025-26: 314 blocks <b>Detail proposals in HSS writup Annexure</b>
196	Implementation of DVDMS								<b>Status: DVDMS (e-Niramaya) is implemented at DHH, SDH,CHC and PHCs across the State. This year it will expanded to SC level. Fund Source - State Budget.</b>
196.1	Strengthening supply chain management at SHC HWC								<b>Budget Shifted from HSS-1_CPHC- SI.No. 150 as per NPCC Recommendation</b> <b>New Activity</b> Its proposed to strengthen supply chain management at SHC HWC across state by creating login credentials of SHC HWCs in DVDMS, training CHOs on forecasting & indenting through e-Niramaya & supporting in transportation of drugs & logistics. The transportation cost to the CHOs under this initiative is proposed under HSS-7 (SI-180: free drug initiatives). Only training cost is proposed under CPHC.
196.1.1	Training of CHOs on e-Niramay(DVDMS)	Per CHO	500	0.01	0	0.00	0	0.00	
196.1.2	3 day District level training of Pharmacists on inventory management of drugs, drug distribution, compilation of prescription audit	30/ batch	76000	0.76		0.00	0		<b>Budget Shifted from HSS-7_Sl.No. 180</b> <b>Justification:</b> Unlike available training modules for paramedical staff, there is no systematic training for pharmacist. Though pharmacists deal with critical component of inventory management of drugs, drug distribution, compilation of prescription audit etc.They are also involved in day to day petty maintenance of equipments. So there is a need of updation of their knowledge on present practices for effective service delivery. DVDMS Refresher training required. State load:1126 person (851 Pharmacists +275 DDC) Proposed for 2021-22: 1126 person (40 batches @30/batch) <b>Proposal for 2025-26: 40 batches</b>
197	e-Sanjeevani (OPD+HWC)								
197.1	e-Sanjeevani (OPD)								e-Sanjeevani (OPD) managed through State Budget. Hence, No additional budget proposed under NHM PIP
197.2	e-Sanjeevani (HWC)								Budgeted under CPHC Component

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-14**  
**Untied Grants**



## HSS-14\_Untied Grants

## Capital Hospital, BBSR

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
<b>Total Untied Fund</b>						<b>5.00</b>		<b>5.00</b>	
<b>199</b>	<b>Untied Fund</b>					<b>5.00</b>		<b>5.00</b>	
199.1	District Hospitals	Per inst.	1000000	10.00	1	5.00	1	5.00	<b>GoI Norm:</b> Rs.10.00 lakhs per institution <b>Proposal:</b> Budgeted 50%. The rest 50% of fund will be requested in supplementary PIP, once audit report will be settled.
199.2	SDH	Per inst.	500000	5.00	0	0.00	0	0.00	<b>GoI Norm:</b> Rs.5.00 lakhs per institution <b>Proposal:</b> Budgeted 50%. The rest 50% of fund will be requested in supplementary PIP, once audit report will be settled.
199.3	CHCs	Per inst.	500000	5.00	0	0.00	0	0.00	<b>GoI Norm:</b> Rs.5.00 lakhs per institution <b>Proposal:</b> Budgeted 50%. The rest 50% of fund will be requested in supplementary PIP, once audit report will be settled.
199.4	PHCs	Per inst.	150000	1.50	0	0.00	0	0.00	<b>GoI Norm:</b> Rs.1.50 lakhs per institution <b>Proposal:</b> Budgeted 50%. The rest 50% of fund will be requested in supplementary PIP, once audit report will be settled.
199.5	Sub Centres	Per SC	25000	0.25	0	0.00	0	0.00	<b>GoI Norm:</b> Rs.0.25 lakhs per institution <b>Proposal:</b> Budgeted 50%. The rest 50% of fund will be requested in supplementary PIP, once audit report will be settled.
199.6	VHSC	Per GKS	10000	0.10	0	0.00	0	0.00	<b>Background:</b> The total number of GKS in the State is increase to 46162 in place of 46064 (during the year 2022-24). So the revised number of GKS for the year 2024-26 is 46162. <b>GoI Norm:</b> Rs.0.10 lakhs per institution <b>Proposal:</b> Budgeted 50%. The rest 50% of fund will be requested in supplementary PIP, once audit report will be settled.
199.7	Others (please specify)	Per inst.	75000	0.75		<b>0.00</b>		0.00	Other Hospital to be converted into PHC and the budget proposed in PHC untied fund.

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# NHM PIP

## 2024-26

Programme Implementation Plan

**PGIMER,  
Bhubaneswar**

**Mission Directorate  
National Health Mission  
Department of Health & Family Welfare  
Govt. of Odisha**







# NHM PIP

## 2024-26

Programme Implementation Plan

**NCD-5**  
**NPCDCS**



## NCD-5\_NPCDCS

## PGIMER, Capital Hospital, Bhubaneswar

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total NPCDCS</b>						<b>0.60</b>	<b>0.30</b>	
107	<b>NCD Clinics at DH</b>						<b>0.00</b>	<b>0.00</b>	<b>State's Mandate : Operationalise NCD Clinics at all DHHs, SDHs &amp; Block CHCs</b>
107.1	<b>District NCD Clinic: Mobility, Miscellaneous &amp; Contingencies</b>			-			-		Status: Functional NCD clinic at DHH 32 - 27 contractual MO post sanctioned (8 in position) for District NCD clinic., in absence of contractual post dedicated medical officers from regular carder have been deployed to manage NCD clinic .
107.1.1	Recurring cost for NCD clinic at DHHs	Lumpsum	0	-	1	-	1	-	<b>Ongoing activities:</b> Proposed as approved last year 1. Recurring cost proposed @ Rs1.00 Lakh per DHH consists of >= 10 CHCs -16 DHH & Rs.0.60 lakhs for DHHs <= 10 CHCs- 16 DHH ( Capital Hospital & RGH included) <b>Financial implication:</b> Rs 25.60 Lakh 16 DHH NCD Clinic @1 Lakh X 16 DHHs= Rs. 16.00 Lakh 16 DHH NCD Clinic @ Rs 0.60 Lakh X 16 DHHs= Rs..9.60 Lakh
107.1.2	Non recurring cost for establishment of new NCD clinics at DHHs	Per unit	100000	1.00			-		NCD Clinics have been made functional at all DHHs, so no new proposal in the current year
107.1.3	Non-recurring: Equipment at District NCD clinic			0.00			0.00		Recommended equipment/ instruments are available at all DHHs NCD Clinics as per GoI guideline
107.1.4	Drugs & consumables for NCD management (includes Diabetes, Hypertension, Stroke, etc) for whole district	Per District	750000	7.50	0	0.00	0	-	<b>Ongoing activities:</b> <b>Requirement for entire 30 districts</b> Drugs and consumable for NCD management including diabetes, hypertension, & stroke care @ Rs. 7.50Lakhs per district (GoI norm @12.00 lakhs per districts) x 32 districts( 30 Districts)= <b>Rs. 225.00 Lakhs</b> <b>Status:</b> Currently NCD drugs & consumables worth about Rs.1500.00 lakhs is being procured from State budget for all Public Health Facility across the State as per the indent from districts. Proposal to contribute about 846 (Rs.225 lakhs for DHH Level & Rs.621 lakhs for 414 CHC & SDH Level= Rs.846 lakhs) of total cost out of NHM fund.
107.1.5	Diagnostics Services for NCD management (includes Diabetes, Hypertension, etc) for whole district			0.00			0.00	-	Funds met out of State specific scheme called NIDAN- Free Diagnostic Services, Hence no additional cost proposed under this head
107.1.6	Referral cost for District NCD Clinic			0.00			0.00	-	108 emergency ambulance services is operation in the state. Hence, no additional fund proposed under this head
107.1.7	PPP at District NCD Cell / Clinic			-			-	-	Programme implemented through system mode
108	<b>NCD Clinics at CHC/SDH</b>						<b>0.00</b>	<b>0.00</b>	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
108.1	SDH/ CHC level NCD Clinic: Mobility, Miscellaneous & Contingencies								
108.1.1	Recurring Cost for CHC NCD Clinic: Mobility , Miscellaneous & Contingencies	Per institution	12000	0.12	0	0.00	0	-	<p><b>Ongoing Activity</b> The amount @ Rs.12000/ per year for 414 CHC, UCHCs &amp; SDH is proposed towards management of IT Cost (Internet &amp; Other Consumables) for managing MO portal at SDH/CHC/UHC level, meeting cost, data validation , day to day NCD monitoring , Printing of NCD Programmes reports &amp; referral slip etc. <b>Gol Norms @1.00 lakh per clinic per annum per unit</b></p>
108.1.2	Non recurring cost for establishment of new NCD clinics at SDH/ CHCs	Per institution	100000	1.00		-		-	<p>Proposal: IT, Renovation / Refurbishing Budgeted previous year and provided to all CHC/SDH No new proposal for this year Gol Norms @1.00 lakh per SDH/CHC clinic</p>
108.1.3	Non-recurring cost for SDH/ CHC NCD Clinic (Equipment/ Instrument at SDH/ CHCs	Lumpsum		0.00		0.00		-	<p>Proposal: Lab equipment &amp; instrument Budgeted Previous Year. No new proposal for this year Gol Norms @8.00 lakh per SDH/CHC clinic</p>
108.1.4	Drugs & consumables for NCD management (includes Diabetes, Hypertension, Stroke, etc) at SDH/ CHCs	Per unit	100000	1.00	0	0.00	0	-	<p><b>Ongoing activities</b> Gol norms @Rs.2.00 lakhs per unit Proposed: @1.00 lakhs per unit</p>
108.1.5	Diagnostics Services for NCD management (includes Diabetes, Hypertension, etc) at SDH/ CHCs			0.00		0.00		-	<p>Funds met out of State specific scheme called NIDAN- Free Diagnostic Services, Hence no additional cost proposed under this head</p>
108.1.6	Referral cost for CHC NCD Clinic			0.00		0.00		-	<p>108 emergency ambulance services is in operation in the State. Hence, no additional fund proposed under this head</p>
108.1.7	PPP at CHC NCD Clinic			-		-		-	<p>Programme is being implemented through system mode</p>
109	<b>Cardiac Care Unit (CCU/ICU) including STEMI</b>					<b>0.00</b>		<b>0.00</b>	<p>Details of Critical Care Health Blocks approved under PM-Abhim is placed at <b>Detail proposal at NCD-5 NPCDCS Write-up annexure A</b>. Total CCHB approved at DHH - 20 (Approval accorded from Gol for all CCHBs from 2021-26)</p>
109.1	Non-recurring: Equipping Cardiac Care Unit (CCU)/ICU	Lumpsum		0.00		0.00			<p><b>Proposal for CCU/ ICU:</b> Currently operational at 18 DHHs &amp; expected to be made functional at all DHHs by March 2024. Established/ proposed through funding under NHM- 10 Funding Under State Budget- 8nos Funding Under ECRP-II/ PM-Abhim- 14nos Hence, there is no new proposal in the current year. <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure- A "CCHB (DHH)"</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
109.2	Drugs & Diagnostics for Cardiac care	Per District	500000	5.00	0	0.00	0	-	<b>Ongoing Activity</b> As per NPCDCS Operational Guidelines, Rs. 5.00 Lakh per CCU is proposed (Rs. 5.00 Lakhs x 10 CCUs, refer annexure1). Rest to be met out of CCHB budget. <b>Gol norms Rs.5.24 lakhs per district</b>
109.3	STEMI Programme								<b>Ongoing Activity</b> <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure B "STEMI"</b> <b>Estimated Budget for 2024-25:</b> Rs.3557.13 lakhs, budgeted 70% as expansion of activities will take time. <b>Estimated Budget 2025-26:</b> Rs.3403.58 lakhs, budgeted 70%. Additional fund required shall be proposed in supplementary PIP
109.3.1	Stemi Kit	Per unit	100000	1.00	0	0.00		-	Unit Cost- Rs 1 Lakh per Kit Proposal 2024-25: 1 Kit per for 27 New DHH (5 DHHs have been already been provided with STEMI kit in previous year.) Proposal 2025-26: Not proposed
109.3.2	PCI/Thrombolysis - rTPA	Per unit	18000	0.18	0	0.00	0	0.00	2024-25: For all 32 DHH @50 per DHH Spoke 2025-26: for all 32 DHH @70 per DHH Spoke
109.3.3	PCI/Thrombolysis - rTPA	Per unit	18000	0.18	0	0.00	0	0.00	2024-25: Total cases - 446 cases SDH Spoke @ 2 per case - 32 SDHs x 2 = 64 cases CHC Spoke @ 1 per case - 382 CHCs x 1 = 382 cases 2025-26: Total cases - 446 cases SDH Spoke @ 2 per case - 32 SDHs x 2 = 64 cases CHC Spoke @ 1 per case - 382 CHCs x 1 = 382 cases
110	<b>Other NPCDCS Components</b>					<b>0.60</b>		<b>0.30</b>	
110.1	Population Based Screening Programme (PBS)/ Universal health check-up and screening of NCDs			-		-		-	<b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-C "PBS"</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.2	Non recurring: Equipment for Cancer Care					0.00		0.00	<p><b>Ongoing activities:</b>  <b>Ongoing Programmes/ Proposals:</b>  <b>1. Day Care Chemo Therapy Cancers: Supported &amp; maintained under State budget.</b>  <b>2. Strengthening Screening &amp; Services for facility based Breast Cancer &amp; Cervical Cancer program In Odisha</b>                      2.1. Status of <b>Breast Cancer Programme</b> at DHH level- Procurement of equipment/ instruments required for diagnosis by True Cut Biopsy, Ultrasound Probe for Breast Cancer, lump size determination in screening &amp; Humanoid Model for Training on CBE/SBE is in process for 10 DHHs                      2.2. Status of <b>Cervical Cancer Programme</b> at DHH level: Procurement of equipment/ instruments required i.e. Hand Held Colposcop, Biopsy Forceps &amp; Thermo coagulator etc. for 10 DHHs is in process.  <b>Proposal:</b> Same set of equipment/instruments proposed for rest 10 districts for Breast Cancer Programme &amp; Cervical Cancer Programme .                      (Total DHH-32, Total Proposal Till 2022-24-20)</p>
110.2.1	Non Recurring Expenses for Cervical Cancer	Per DHH	854800	8.55	0	0.00			<p><b>Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur)</b>  <b>1. Digital Video Colposcope @ Rs. 5.00 Lakhs per unit x 10 DHHs = Rs. 50.00 Lakhs</b>  <b>2. Biopsy Forceps @ Rs. 2400 per unit x 2 per DHH x 10 DHHs= Rs. 0.48 Lakhs</b>  <b>3. Thermo coagulator @ Rs.3.50 Lakhs per unit x 10 DHHs= Rs. 35.00Lakhs</b></p>
110.2.2	Recurring Expenses for Cervical Cancer	Per case	40	0.00	0	0.00	0	-	<p><b>Ongoing for 3rd phase districts (30DHHs)</b>                      Disposable plastic Cusco's speculum for Screening by VIA Test @ Rs. 40/ per unit for 100000 cases per year.</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.2.3	Non Recurring Expenses for Breast Cancer								Revised as per NPCC Recommendation <b>Proposal for 2024-25:</b> Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur) 1. Biopsy Gun (30 Disposable Needles) @ Rs.2.05 Lakhs per unit x 10 units= Rs. 20.50 Lakhs 2. 7.5 mhz Linear probe/transducer (adjunct to existing USG machine) for Breast cancer detection @ Rs.2.50 Lakhs per unit x 10 units = Rs. 25.00 Lakhs 3. Vernier caliper @ Rs.260 per unit x 1500 units (150 per DHH)= Rs. 3.90 Lakhs <b>Proposal for 2025-26:</b> Ongoing Activity 1. Biopsy Gun 2. Vernier caliper @ Rs.260 per unit x 1500 units (50 per DHH)= <b>Rs. 3.90 Lakhs</b>
110.2.3.1	Biopsy Gun	Per Unit	205000	2.05	0	0.00		-	
110.2.3.2	7.5 mhz Linear probe/transducer	Per Unit	250000	2.50	0	0.00		-	
110.2.3.3	Vernier caliper	Per Unit	260	0.00	0	0.00	0	-	
110.2.4	Recurring Expenses for Breast Cancer								Not proposed
110.3	<b>Any other equipment (Procurement of COPD &amp; CKD Equipment)</b>					0.00		0.00	
110.3.1	Non Recurring Equipment/ instrument for COPD & CKD	Per unit	500	0.01		0.00		-	<b>Proposal 1 (COPD):</b> Peak flow meter already procured for all health institution up to PHC level @one per each Health Institution as per COPD GoI Guidelines. No new proposal for this year. <b>Proposal 2 (PMNDP):</b> Proposed under PMNDP PIP.
110.3.2	COPD Drugs and Consumables	Per District	1200000	12.00	0	0.00	0	-	<b>Ongoing Activity</b> Drugs and consumable for COPD @ Rs. 12.00 Lakhs per dist ( <b>GoI norm @25.00 lakhs per district</b> ). Drugs to be procured centrally at State level through OSMCL
110.3.3	<b>Non-Alcoholic Fatty Liver Diseases (NAFLD)</b>								
110.3.3.1	Non Recurring Equipment/ instrument for NAFLD	Per machine	8000000	80.00	0	0.00		0.00	<b>Unit Cost &amp; Unit No. Revised as per NPCC Recommendation</b> Procurement of Equipment & Instrument for Diagnostic Services at District Head Quarters Hospital for Non- Alcoholic Fatty Liver Diseases (NAFLD) has been proposed. <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-D "NAFLD"</b>
110.3.3.2	Recurring cost for NAFLD								To be met out of State specific NIDAN Scheme

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4	Training & Capacity Building					0.60		0.30	
110.4.1	Training for Screening of Breast Cancer								<p><b>Ongoing Activity:</b>  <b>Background:</b>                      Capacity building of all categories of health staff is important for successful implementation of Programme activities under NP-NCD. Under NP- NCD, the major diseases are Hypertension, Diabetes, Oral, Breast and Cervical Cancers, Cardiovascular Diseases and Stroke for which Screening of the 30+ aged population is carried out, and the diagnosed cases are put under treatment, and followed up.</p> <p><b>Current Status:</b>  <b>1. Cancer trainings:</b>                      a) Cancer care programme was initiated first in 10 districts and further 10 districts were included for which the following trainings have been held: 180 OG specialists have been trained on PAP smear - Cervical cancer screening. 10 OG specialists trained on Colposcopy &amp; Thermo-coagulation for Cervical cancer, during 2022-24. 14 Pathologists/Surgery Specialists &amp; LTs trained on screening of cervical cancers in 2022-24. 11 Surgery specialists trained on Tru-cut biopsy for breast cancer in 2022-24. ToT of District Level Medical Officers on CBE/SBE, is completed in January 2023 – 16 trained.                      a) Now Cancer programme is to be implemented in all 30 districts of the State. Hence the same trainings are planned for Specialists, MOs and paramedical staff in the 10 remaining districts, namely Balangir, Balasore, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj and Sambalpur.</p>
110.4.1.1	Training on True Cut Biopsy and CBE on Humanoid Model	Per Person	8000	0.08	0	0.00	0	-	<p><b>Ongoing Activity</b>                      Training of Surgery Specialists from rest 10 DHH has been planr FY: 24-25: 10person form DHH Level (@5/ Batch), Duration : 3 days                      Batch Size: 5 per batch                      Batch- 2 Batch  <b>Target: FY 2024-25-2 Batch &amp; FY 2025-26- 2 batch</b></p>
110.4.1.2	Centralized District Level Trainings for Block level trainers on CBE/SBE	Per batch	70000	0.70		0.00		-	<p><b>Ongoing Activity</b>                      State Level Training (ToT) for Training on CBE/SBE. 15 districts covered during previous years. Proposed One Surgery specialist/lady Medical Officer from rest 15 Districts.                      Duration One day                      Batch Size: 15 per batch                      Batch-1 Batch  <b>Target: FY 2024-25-1 Batch &amp; FY 2025-26- Not proposed</b></p>
110.4.2	Training for Screening of Cervical Cancer								

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.2.1	Training On Colposcopy, Biopsy and thermo coagulation for doctors by hybrid training model	Per Person	8000	0.08	0	0.00	0	0	<p><b>Ongoing Activity</b>                      Training of OG Spl from remaining 10 DHH.(@5/Batch) Duration 3days                      Batch Size: 5 per batch                      Batch-2 Batch                      Target                      FY 2024-25-2 Batch                      FY 2025-26- 2 batch</p>
110.4.2.2	Training for pathologists/surgery specialist/technicians from DHH	Per Batch	40000	0.40	0	0.00			<p><b>Ongoing Activity</b>                      Training for pathologists/surgery specialist/technicians from remaining 10 DHH (2 persons per districts) i.e. Total 20 participants                      Batch Size: 5 per batch                      Batch- 4 Batch                      Target                      FY 2024-25-4 Batch                      FY 2025-26- Not proposed</p>
110.4.3	2 days State level Training of MOs of DHH Level NCD Clinic	30/ Batch	124000	1.24	0	0.00			<p><b>Ongoing Activity</b>                      Background:: Training is necessary for orientation of the DHH, SDH &amp; CHC MOs on NCD programmes, and MO portal reporting.                      NCD clinics were established in all DHHs. Now, NCD Clinics have been established in all SDH and CHCs of the State with designated Medical Officers to manage them, as part of key deliverables. 74 MOs had been trained previously (Both contractual and Regular).                      Proposal: Training is necessary for orientation of the DHH &amp; SDH MOs on NCD programmes, and MO portal reporting.                      Training of DHH &amp; SDH NCD Clinic Mos One Batch-20/Batch, Duration 2days  <b>Target</b>                      Batch Size: 20 per batch                      Batch- 3 Batch                      Target                      FY 2024-25-3 Batch                      FY 2025-26- Not proposed</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.4	Three months ICU case management training of Medical officer	Per Batch	3175000	31.75	0	0.00	0	<p><b>Ongoing Activity:</b>  <b>Back Ground :</b>                      Critical care Case Management is essential for treatment of Critical cases, at the earliest. It is the mandate of the State government to establish ICUs/CCUs in all DHHS of the State, RGH Rourkela and Capital Hospital Bhubaneswar. They have already been established in 17 DHH and Capital Hospital, Bhubaneswar. Trained manpower is required for smooth functioning of the ICUs. Over the years, 155 numbers of Medical Officers and Paramedical staff have undergone ICU training. However, due to high levels of attrition and establishment of new ICUs, three months training on Critical care case management is an on-going process and 56 numbers of Medical Officers and Nursing staff have undergone training during 2022-24.</p> <p><b>Proposal:</b>                      Further training is required to operationalize the newly established ICUs to deal with critical cases of cardiovascular diseases and Stroke. Total 4 batches of Medical Officers and Nursing Officers are planned at SCB MCH Cuttack / Govt. MCH in FY 2024-26.</p> <p>Three months ICU case management training of Medical officer &amp; Nursing Officers                      Batch size: 20, 2 batches in 24-25 and 2 batches in 25-26</p> <p><b>Target</b>                      Batch Size: 20 per batch                      Batch- 4 Batch                      FY 2024-25-2 Batches                      FY 2025-26- 2 Batches</p>	
110.4.5	Two days State level Training of Nodal Officers / Programme Managers on NCD Programmes	30/ batch	140000	1.40	0	0.00	0	<p>Ongoing Activity.                      Programme Officers ( DPHO/ADPHO(DC) /ADPHO(lep))/                      Epidemiologist/AM, NCD s need orientation on various NCD Programmes. State level two days training will be conducted for the Programme Officers</p> <p><b>Target</b>                      State load: 150 person,                      Duration 2days-30/Batch,                      Batch Size: 5 batches                      Target for 2024-25: 2 batch (@30/batch)                      Target for 2025-26: 3 batch (@30/batch)</p>	
110.4.6	Two Days Orientation training of NCD and NTCP Counselor at state level	25/batch	116000	1.16	0	0.00	0	<p><b>Ongoing Activity.</b>                      State load: 67 Counselor</p> <p><b>Target</b>                      Target for 2024-25: 1 Batch (@30/ Batch)                      Target for 2025-26: 2 batch (@30/batch)</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.7	District level cascade training on COPD for Block level Medical Officers	30/batch	30000	0.30	1	0.30			<p><b>Ongoing Activity.</b> Two new programmes have been included under NP-NCD, namely COPD and NAFLD, as they contribute to a large number of NCD Cases. State level TOTs for both have been completed. Under COPD 60 nos of TB &amp; Chest / Medicine Specialists &amp; under NAFLD 30 nos of Medicine Specialists were trained.</p> <p><b>Proposal:</b> It is now planned to have district level cascade trainings for Medical Officers /specialists of district and block level.</p> <p>One day State level training of SDH and CHC MOs on COPD. 7 batches, Batch size-30. Target for 2024-25: 7 batch (@30/batch) Target for 2025-26: Not proposed</p>
110.4.8	State level ToT on NAFLD for District level Medical Officers	30/batch	140000	1.40	0	-	0		<p><b>Ongoing Activity:</b> New programme to be implemented ToT for Medicine Specialists/Medical Officer &amp; DPHOs who will be the master trainers for block level Medical Officers of all SDHs &amp; CHCs at MCH Level. Batch size-30. Duration of Training- 1 days. FY- 2024-25 - 7 Batches FY - 2025-26- 7 Batches</p>
110.4.9	Training of MO on Cancer Chemotherapy	10 / batch	762000	7.62	0	0.00			<p><b>New Activity</b> Day Care Cancer Chemotherapy Centres are functioning in all DHH, RGH Rourkela and Capital Hospital Bhubaneswar where chemotherapy cycles are administered by trained Medical and Nursing officers. 36 MOs and 57 Nursing Officers have been trained previously.</p> <p>b) Due to transfers and attrition, there is a felt need for training of more Staff for the DCCCCs. So, it is proposed to train 10 Medical Officers and 10 Nursing Officers during 2024-26. Batch size: 10 ,Duration of Training: 4 weeks Venue of Training: Sarvodaya Hospital, Faridabad, Haryana Unit Cost: No of Batch training: 2 FY 2024-25; 2 Batch &amp; FY 2025-26: Not proposed</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.4.10	District Level Training on VIA for CHOs & ANMs.	30/Batch	45000	0.45	0	0.00	0	-	<b>New Activity</b> VIA Training is essential for Cervical Cancer screening at Sub-Centre Level. CHOs /ANMs need to be trained on VIA by O&G Spl/MO at District Level. Duration of training 2days. Batch size-30. Duration of Training- 2days. FY- 2024-25: 60 Batches & FY-2025-26: 60 Batches
110.4.11	2 Days State level ToT on Stroke & STEMI for Medicine Specialist & DPHO	30/ batch	140000	1.40	0	0.00		-	<b>New Activity:</b> New programme to be implemented ToT for Medicine Specialists/Medical Officer & DPHOs who will be the master trainers for block level Medical Officers of all SDHs & CHCs. Batch size-30. Duration of Training- 2days. FY- 2024-25 - 2 Batches & FY -2025-26: Not proposed
110.4.12	Any other CME/Symposium/Plenary Session on NCD programmers	Per MCH	30000	0.30	1	0.30	1	0.30	<b>Ongoing Activity:</b> <b>CME/Symposium/Plenary Session on NCD programmers</b> for updating of knowledge of NPCDCS Programmes and technical input for implementation of Program in State specific. Participant-faculty of the concern dept of MCH Level of implementation at MCH level
110.4.13	State level one Day Training of FLCs	per batch	70000	0.70		0.00	0	-	<b>Ongoing Activity:</b> <b>Not proposal in FY 2024-25</b> <b>Proposal for 2025-26:</b> State level training of FLCs Batch Size:30, venue : State Level ,Cost per Batch: Rs 0.70 Lakh
110.5	PHC level: Mobility, Miscellaneous & Contingencies	Per HWC	9000	0.09	0	-	0	-	<b>Ongoing Activity</b> <b>Proposed for all functional PHC/ UPHC HWCs:to be taken up following activities</b> 1.Review of NCD Activities in sector meeting 2.Meeting of ASHA/ANM/MO PHC meeting Revalidation by BDM in NCD Application, NCD TB/NTEP co morbidity. 3. Monitoring of Screening Camp by MO & AYUSH MO conducted by ANM( each month two visit/month 4. Quarterly Patient network meeting at PHC HWC on Health Promotion 5. outreach activity for uncovered population & any other related NCD Screening 6.All NCD Day observation- fund from HWC 7. Any other activities as special drive, campaign,& innovation, special time base need, reporting format, register , other need base requirement <b>GoI norms @0.30 lakhs per annum per unit</b>

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110.6	Sub-Centre level: Mobility , Miscellaneous & Contingencies	Per HWC	3000	0.03		-			<p><b>Not Approved</b></p> <p><b>Ongoing activity</b></p> <p>CHOs have been engaged/ engaged at 5400 SC HWCs . Hence, to monitor the field activities under NCD component budget to the tune of Rs. 6000/- per month has been proposed.</p> <ol style="list-style-type: none"> <li>1. Review of NCD Activities in sector meeting</li> <li>2. Data Validation meeting at SC HWCs</li> <li>3. Outreached activity for uncovered population &amp; any other related NCD Screening</li> <li>4. Any other activities as special drive, campaign,&amp; innovation, special time base need, reporting format, register , other need base requirement</li> </ol> <p><b>GoI norms @0.60 lakhs per annum per unit</b></p>
110.7	<b>IEC/BCCat State level</b>					<b>0.00</b>		<b>0.00</b>	<b>Ongoing Activity</b>
110.7.1	Advertisement through DD & local channels or scrolling	Per minute	171000	1.71	0	0.00	0	-	Timing: 1 minute per day for 12 days per year as per I&PR rates
110.7.2	Advertisement through AIR channels	Per minute	60000	0.60	0	0.00	0	-	Timing: 1 minute per day for 12 days in a year as per I&PR rates
110.7.3	Advertisement through FM Channels	Per 10 minutes	20000	0.20	0	0.00	0	-	Timing: 10 minutes per day for 30 days per year
110.7.4	Publicity through Print Media	Per day Per paper	100000	1.00	0	0.00	0	-	One time advertisement of Color Quarter page in 2 newspaper for 6 days
110.7.5	Day Celebration	Per Unit	110000	1.10	0	0.00	0	-	Day Celebration with Media briefing and district performance appraisal : Observance of World Diabetics Day (14 Nov) /World Hypertension Day (17 May)/ World Cancer Day (4 Feb)/Stroke Day (29 Oct)/World Heart Day (29 Sep), COPD Day at State Level @Rs.100000/- per day X 6 days= Rs.6.00 lakhs
110.8	<b>IEC/BCC for District Level</b>					<b>0.00</b>		<b>0.00</b>	<b>Revised as per NPCC Recommendation</b> <b>Ongoing Activity</b>
110.8.1	Dynamic hoarding	Per Flex	3000	0.03		0.00		0.00	Change of flex for hoarding on NCD in strategic locations @Rs.3000/- per flex X 449 (Targeted Institution:32 DHH,33 SDH, 377 CHC, 7 UCHCs)= Rs.13.47 lakhs
110.8.2	Day Celebration	Per District	120000	1.20	0	0.00	0	0.00	Observance of World Diabetics Day (14 Nov) /World Hypertension Day (17 May)/ World Cancer Day (4 Feb)/Stroke Day (29 Oct)/ World Heart Day (29 Sep) at District Level: @Rs.20 000/- Per Designated Day X 6 days X 30 districts = Rs.36.00 lakhs

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110.8.3	IEC/BCC activities for Universal Screening of NCDs	Lumpsum	3402000	34.02	0	0.00	0	0.00	<p><b>Target:</b> State has set target for reaching out 174 lakhs population in 2024-25 across the State</p> <p><b>Proposal:</b> Proposed to organize Poster campaign in the villages to be taken as preparatory initiatives before initiation of NCD campaign and distribution of leaflets during Universal Screening to intended beneficiaries (One per family)</p> <p>1. <b>Poster:</b> @Rs.5/- per poster X 6 posters per villages X 60000 villages = <b>Rs.18.00 lakhs</b></p> <p>2. <b>Leaflets:</b> @Rs.1/- per leaflet X 1000000 leaflets (4000000 / 4.3 is family size ) = <b>Rs.10.00 lakhs</b></p> <p>3. <b>Banner:</b> @Rs.100/- per banner X 6020 HWC = <b>Rs.6.02 lakhs</b></p>
110.8.4	Involvement of Community Institutions/ Groups/ Individuals in Behavior Change Communication at SC HWC level	Per SC-HWC	1500	0.02	0	0.00	0	0.00	<b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-E "Community engagement at SC-HWC for NCD"</b>
110.9	<b>Printing activities under NPCDCS</b>					<b>0.00</b>		<b>0.00</b>	<b>Ongoing Activity</b>
110.9.1	Printing at PHC Level	Lumpsum	5	0.00	0	-	0	-	<p><b>Proposal: Printing of Patient Treatment and Referral Cards</b> PBS is now being conducted through out the State, The Screening Target for 2024-25 is 174.00 Lakh and screening target for 2025-26 is 175.00 Lakh .So it is expected that 10% of Screened population will be referred to higher facility for confirmation and treatment. Hence, printing proposed for 17.5 lakhs Treatment &amp; referral cards (5 lakh at PHC level and 12.5 Lakhs at SC level)</p>
110.9.2	Printing at SC Level	Per unit	5	0.00	0	-	0	-	<p><b>Proposal: Printing of Patient Treatment and Referral Cards</b> PBS is now being conducted through out the State, The Screening Target for 2024-25 is 174.00 Lakh and screening target for 2025-26 is 175.00 Lakh .So it is expected that 10% of Screened population will be referred to higher facility for confirmation and treatment. Hence, printing proposed for 17.5 lakhs Treatment &amp; referral cards (5 lakh at PHC level and 12.5 Lakhs at SC level)</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.9.3	Printing activities for Universal Screening of NCDs - printing of cards and modules	Per format	1	0.00	0	-	0	-	<p><b>Proposal: Printing of CBAC form</b>                      Proposed Screening in CBAC form : 174.00 Lakhs(2024-25) and 175.00 Lakhs (2025-26)                      Printing of CBAC format; 4.70 crore population (total States Population)                      Revised CBAC- The amount proposed for All Population 4 crores.                      CBAC forms were previously being filled up by ASHAs for the population above 30 years of age, to screen for common NCDs, as per GoI guidelines. Currently CBAC forms have been revised <b>to include other diseases like TB, Leprosy visual defects and Mental Health</b>. Many of these ailments effort persons of age groups below 30 years of age. Any suspected detected from the CBAC forms are referred to higher centres for early diagnosis and treatment. Keeping in view the above and GoI guidelines for enrolment of the total population of all age, the revised CBAC forms are now being filled for the total population of the State. From 2021-22, districts have already started using the revised CBAC forms. Hence during 2024-25, printing of 3.76 crore CBAC forms is proposed to cover the total population.( 80% proposed excluding 20% migration &amp; other reasons) The same number is proposed for printing in 2025-2026                      Budgeted 80%</p>
110.9.4	Printing of Operational Guidelines on NCDs	Per unit	250	0.00	0	-	-	-	1. Operational Guidelines for NP-NCD -250 copies @ 400 Per copies-Rs1.00 Lakh

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.9.5	Printing of Patient Tracking & Follow-up Register	Per Register	200	0.00	0	-	0	-	<p><b>Proposal: Registers will be printed for 6688 SCs, 1288 PHCs &amp; 106 UPHCs</b></p> <p><b>Justification for Printing of NCD Registers:</b>                      State has planned to screen 40 Lakhs population during the year 2022-23 and 70 lakhs population during the year 2023-24 as per the key deliverable.                      For capturing above data NCD screening register is highly required for following reasons                      1. It is the mandate of GoI to maintain register.                      2. For line listing &amp; follow up of the patients up to down the line.                      3. Periodic Distribution of medicine/drugs under free drugs distribution of Diabetes and HTN drugs.                      4. Proper &amp; correct monthly reporting.                      5. Proper Supervision &amp; Monitoring of common NCDs.ASHA of respective village will monitor periodically at least twice a year. In this context state also providing incentive to ASHA in a package manner.                      6. Validation of NCD reportings.The MO portal entry is in initial stage so it is essential to capture the data in black and white.                      7. In the year 2016-17 NCD screening register have supplied partially but now Odisha is targeting 100% of PBS</p>
110.10	<b>Strengthening Screening &amp; Services For Breast Cancer</b>								Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur)
110.10.1	ASHA booklet on CBE/SBE	Per Booklet	20	0.00	0	-	0	-	On going activity: Printing of ASHA book let : 14 Sheets, Multicolour both the side offset printing with laminated
110.10.2	ANM Job Aids in odia	Per unit	30	0.00	0	-	0	-	On going activity: 1/2 demy with one fold , Multicolor both the side offset printing with laminated
110.11	<b>Strengthening Screening &amp; Services For Cervical Cancer</b>								Ongoing Activity (proposal for 3rd phase 10 additional districts - Bolangir, Baleswar, Boudh, Cuttack, Deogarh, Ganjam, Keonjhar, Koraput, Mayurbhanj, Sambalpur)
110.11.1	ASHA Booklet on Screening for Cervical Cancer	Per Booklet	20	0.00	0	-	0	-	on going activities : Printing of ASHA book let : Multicolour both the side offset printing with laminated
110.11.2	ANM JOB AIDS – Flash cards for VIA	Per unit	250	0.00	0	-	0	-	On going activity: 300 GSM Art paper ( Glossy finish) , Brightness-80 minimum ,
110.12	<b>Planning and M&amp;E</b>								<b>Budget Approved In Principle and Shifted to HSS-11_Planning and Programme Management _SI.No.194</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
110.12.1	Mobility, Miscellaneous, TA/DA & Contingencies for State NCD Cell	per State	1000000	10.00		-		-	<b>On going activity</b> <b>GoI norms State NCD Cell :Rs 10.00 Lakh</b>
110.12.2	Mobility, Miscellaneous, TA/DA & Contingencies for District NCD Cell	Lumpsum	10500000	105.00		-		-	<b>Ongoing activities with revised Unit cost</b> 1. Recurring cost proposed @ Rs4.00Lakh per DHH consists of >= 12 CHCs -15 DHH Rs 3.00 Lakh for DHHs <= 12 CHCs- 15 DHH <b>Financial implication: Rs 105.00Lakh</b> 15 District NCD Cell @4.00Lakh X 15 DHHs= Rs. 60.00 Lakh 15 District NCD Cell @ Rs 3.00Lakh X 15 DHHs= Rs..45.00Lakh <b>GoI norms District NCD Cell : Rs 6.00 Lakh</b>
110.13	Renovation and furnishing, furniture, computers, office equipment (fax, phone, photocopier etc.)					-		-	<b>New Activity</b>
110.13.1	State NCD Cell	Lumpsum	140000	1.40	0	-		-	A) Previously one photo copier was procured for State NCD Cell during 2011, as the work load is increasing day by day and it is highly essential for a new photo copier.
110.13.2	District NCD Cell	Lumpsum	60000	0.60	0	-		-	In 1st phase 5 districts NCD programme was implemented i.e. Bolangir, Nuapada, Koraput, Malkanagiri , Nabarangpur in FY 2011-12. So one time additional cost @ Rs 60,000/- may be proposed for computer & accessories. GoI norms Rs 1.00 lakh per district
110.14	<b>Excess Balance Amount Kept at State Level</b>	Lumpsum	4397600	43.98				-	
111	<b>State specific Initiatives and Innovations</b>					<b>0.00</b>		<b>0.00</b>	
111.1	Kidney Care on Wheels in Priority District of Odisha	Lumpsum	0	0.00	1	0.00	1	-	<b>Ongoing Activity</b> <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-F"NP-NCD"</b>
111.2	Vaccination for Human Papilloma Virus (HPV) for prevention of Cervical Cancer among girls student of residential schools	Lumpsum	100000000	1000.00		0.00	0	-	<b>Ongoing Activity</b> Re proposed in 2025-26 <b>Detail proposal at NCD-5 NPCDCS Write-up Annexure-G"NP-NCD"</b>

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
111.3	ECG InterPretation & Tele reporting by Agency								<p><b>Budget shifted from NCD-5_NPCDCS, SI.No.109</b></p> <p><b>Ongoing Activity Programme:</b></p> <ul style="list-style-type: none"> <li>• Implementation of a Time Bound System of ECG, Interpretation &amp; Tele-Reporting in an Outsourced Hub &amp; Spoke Model for Diagnosis of Patients STEMI.</li> <li>• Rs.175/- (Rupees One hundred &amp; Seventy Five only) per each ECG and it's Interpretation &amp; Tele-reporting costs for providing the Equipment (ECG machine/ Equipment, Communication Devices etc), Analytic Software (Dashboard) / Application Software as mentioned in technical specification at each hub &amp; spoke hospital, maintenance charges of the equipment, recurring internet cost, recurring consumables related to ECG (Thermal Paper rolls, Gel etc.) but excludes any manpower deployment and consumables required for treatment at the hub / spoke hospitals.</li> </ul> <p>Proposal: 2024-26: Approximately ECG Calculation: (Budgeted)</p> <ul style="list-style-type: none"> <li>• Per Hub: Average-30 ECG per day per MCH Hub i.e. (4*30*365=43800)</li> <li>• Per DHH: 20 ECG Per day per DHH Hub i.e. (32*20*365=233600)</li> <li>• Per SDH/ CHC: 3 ECG per day per spoke (SDH &amp; CHCs) (32*5*365=58400) &amp; (382*5*365=697150)</li> <li>• Per PHC &amp; UPHC: 4 ECG per week per spoke i.e. FY-2024-25: (183*4*52=38064), FY-2025-26: (378*4*52=78,624)</li> </ul> <p>A. FY 2024-25= (43,800+2,33,600+58,400+697150+38,064)=1071014* Rs.175= Rs. 1874.27 Lakhs B. FY 2025-26: (43,800+2,33,600+58,400+697150+78,624)= 1111574* Rs.175= Rs. 1945.25 Lakhs</p>
111.3.1	Medical College Hospital (MCH)	Per Case	175	0.00	0	0.00	0	0.00	
111.3.2	District Head Quarter Hospital (DHH)	Per Case	175	0.00	0	0.00	0	0.00	
111.3.3	SDH/ CHC	Per Case	175	0.00	0	0.00	0	0.00	
111.3.4	PHC/ UPHC	Per Case	175	0.00	0	0.00	0	0.00	
<b>Total NPCDCS</b>						<b>0.60</b>		<b>0.30</b>	

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-1**  
**CPHC**



## PGIMER, Capital Hospital, Bhubaneswar

S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
	<b>Total CPHC</b>					23.76		23.76	
<b>150</b>	<b>Development &amp; Operation Health &amp; Wellness Centers - Rural</b>					-		-	<b>Target 2024-25 - 7316 (1296 PHC, 6020 SHC)</b> <b>Target 2025-26 - 7984 (1296 PHC, 6688 SHC)</b>
150.1	ICT for HWC- Internet connection			-		-		-	Funds proposed under old FMR head 17.2.1
150.2	Filling up of CBAC form and mobilizing for NCD screening			-		-		-	Proposed under NCD Component
150.3	Follow up of NCD patients for treatment initiation and compliance			-		-		-	Proposed under NCD Component
150.4	ASHA incentives for Ayushman Bharat Health & Wellness Centers (H&WC)	Per ASHA p.m	1000	0.01	0	-	0	-	<b>Ongoing Activity</b> <b>Team Based Incentives to ASHAs</b> <b>Background:</b> ASHAs are the backbone of the Primary Health Care Team - they are responsible for mobilising patients/clients to the HWCs. Based on the programmatic needs and GoI mandate - the ASHAs are incentivised under Team based incentives - (25 indicators). This activity was initiated from FY 2022-24. <b>Approval:</b> Rs.1000/per month will be paid to the ASHAs based on the HWC SHC team performance <b>Justification:</b> Incentives is being paid to ASHAs of rural areas for ensuring delivery of expanded range of services at SHC-HWC level on fulfilling set of deliverables mentioned under Team based incentives ( based on modified state guidelines placed in the writeup folder). Budgeted for 70% of total estimated cost. If required budget will be asked in supplementary stage.
150.5	Equipment for Rollout of B.Sc. (Community Health)			0.00		0.00		-	Not Proposed this year
150.6	<b>IT equipment for HWCs (PHC and SHCS)</b>					<b>0.00</b>		<b>0.00</b>	
150.6.1	Recurring Cost for PHC HWCs	Per facility	5000	0.05	0	0.00	0	-	<b>Ongoing Activity</b> Background: For the FY 2024-26 - the target PHC HWCs is 1296 and HWC SHC is 6688; approval for IT equipments already given for 1288 PHCs and 5400 SHCs through last PIPs <b>Detail Approval:</b> <b>For PHC HWCs:</b> FY 24-25: Target 1296 (Current Sanctioned 1288) I. Non Recurring: Procurement of IT equipments proposed for 8 PHC HWCs = 8x0.55=4.4 Lakhs II. Recurring cost @Rs 5000/ per annum for 1296 SHC-HWCs= 1296x 5000 = Rs. Rs.64.80 lakhs FY 25-26: Target 1296 (Expected to be fully operational by 24-25) I. Non Recurring: Not Applicable as 100% target achievement is expected by 24-25
150.6.2	Non Recurring: Procurement Desktop; software for PHC level H&WC (Rural)	Per facility	55000	0.55	0	0.00		-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.6.3	Recurring Cost for SC HWCs	Per facility	5000	0.05	0	0.00	0	0	<p>II. Recurring cost @Rs 5000/ per annum for 1296 PHC-HWCs= 1296×5000 = Rs. Rs.64.80 lakhs</p> <p><b>For SHC HWCs:</b></p> <p>FY 24-25: Target 6020 (Current Sanctioned 5400)</p> <p>I. Non Recurring: Procurement of IT equipments proposed for 620 SHC HWCs = 620×0.40=248 Lakhs</p> <p>II. Recurring cost @Rs 5000/ per annum for 6020 SHC-HWCs= 6020 × 5000 = Rs.301L.</p> <p>For 25-26: Target 6688 (Expected to be operational by 24-25: 6020)</p> <p>I. Non Recurring: Procurement of IT equipments proposed for 668 SHC HWCs = 668×0.40=267.2 Lakhs</p> <p>II. Recurring cost @Rs 5000/ per annum for 6688 SHC-HWCs= 6688 × 5000 = Rs.334.4L.</p>
150.6.4	Non Recurring: Procurement of Tablets; software for SC Level H&WC (Rural)	Per facility	40000	0.40	0	0.00	0	0	<p>I. Non Recurring: Procurement of IT equipments proposed for 668 SHC HWCs = 668×0.40=267.2 Lakhs</p> <p>II. Recurring cost @Rs 5000/ per annum for 6688 SHC-HWCs= 6688 × 5000 = Rs.334.4L.</p>
150.7	Tablets; software for implementation of ANMOL			0.00		0.00			<p><b>Tablet for Anmol device not proposed in current year. Only Device Allowance proposed at HSS-13</b></p>
150.8	<b>Drugs &amp; Supplies for Health &amp; Wellness Centres (H&amp;WC)</b>					0.00		0.00	<p><b>Ongoing Activity</b></p> <p>Target till 2024-25: 7316 (1296 PHC, 6020 SHC)</p> <p>Target till FY 2024-25: 7984 (1296 PHC, 6688 SHC)</p> <p>Background: Non recurring cost under Lab strengthening of newly proposed SHC and PHC HWCs shall be met out of State budget &amp; recurring cost for all SHC and PHC HWCs including newly proposed will be met out of XV FC Budget</p>
150.8.1	<b>Lab strengthening for SHC - HWC</b>					0.00			<p><b>Detail Proposal for SHC HWCs:</b></p> <p>FY 24-25: Target 6020 (Current Sanctioned 5400)</p>
150.8.1.1	Non Recurring Cost for SC HWCs	Per HWC	50000	0.50		0.00			<p>I. Non Recurring: lab strengthening for 620 SHC HWCs = 620×0.50=310 Lakhs</p>
150.8.1.2	Recurring cost for SC HWCs	Per HWC	10000	0.10		0.00			<p>For 25-26: Target 6688 (Expected to be operational by 24-25: 6020)</p> <p>I. Non Recurring: lab strengthening for 668 SHC HWCs = 668×0.50=334 Lakhs</p>
150.8.2	<b>Lab strengthening for PHC - HWC</b>					0.00			<p><b>Detail Proposal for PHC HWCs:</b></p> <p>FY 24-25: Target 1296 (Current Sanctioned 1288)</p>
150.8.2.1	Non Recurring Cost for PHC HWCs	Per HWC	100000	1.00	0	0.00			<p>I. Non Recurring: lab strengthening proposed for 8 new PHC HWCs = 8×1.0=8 Lakhs</p>
150.8.2.2	Recurring cost for PHC HWCs	Per HWC	30000	0.30		0.00			<p>FY 25-26: Target 1296 (Expected to be fully operational by 2024-25)</p> <p>I. Non Recurring: Not Applicable as 100% target achievement is expected by 2024-25</p>
150.9	<b>Trainings for Ayushman Bharat Health &amp; Wellness Centre (AB-H&amp;WC)</b>					0.00		0.00	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.9.1	Training on CPCH for CHOs	Per student	80500	0.81	0	0.00	-	<p><b>CPCH Course:</b>  <b>Background:</b> Out of 5400 sanctioned, 4810 CHOs are trained in CPCH and are in position. The remaining 590 (from already sanctioned) + 1288 (new target for FY 24-26) CHOs are expected to be recruited from the integrated nursing course. (Pass outs from 2019-20 academic session – BSc (N) &amp; PBBSc (N)); how ever, as contingency plan arising out of non availability of integrated course pass out candidates – 180 (about 10%) is proposed for the CPCH course  <b>Target:</b> FY 2024-26 for 180 candidates. No new proposal proposed in 2025-26.</p>	
150.9.2	Multiskilling of MPW and ASHAs at HWCs (SHC and PHC)	Per inst.	14000	0.14	0	0.00	-	<p><b>1. Multi skilling training for MPWs</b> on newer programmatic needs as per the 12 package of services  <b>Background:</b> MPWs from 6688 HWCs are trained on expanded package of services through a 10 days module through last PIPs. FY 2024-25  <b>Approval:</b> 4 days Refresher training for MPWs (M&amp;F) on newer programmatic needs as per the 12 package of services will be given once in two years  Budget: @ 8000(Rs.1000 per person/day×2 MPWs×4 Days) per HWCs for 6688 SHC HWCs: 6688 × 8000 = 535.04L</p> <p><b>2. Multi skilling trainings for ASHAs</b> on newer programmatic needs as per the 12 package of services  <b>Background:</b> ASHAs from 6688 HWCs are trained on expanded package of services through a 14 days module through last PIPs. FY 2024-25  <b>Approval:</b> 3 days Refresher training (non residential) for ASHAs on newer programmatic needs as per the 12 package of services will be given once in two years  Budget: @ 6000(Rs.400 per person/day×5ASHAs×3 Days) per HWCs for 6688 SHC HWCs: 6688 × 6000 = 401.28L  Total Budget: 535.04+401.28 = 936.32L (<b>Budgeted 80% i.e. Rs.749.06 Lakhs as HR positions may not be 100% at all HWCs</b>)  <b>NB: even though the budget is approved FY 2024-25, the activity will</b></p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.9.3	Additional Training of CHOs - CHO Induction for newly inducted CHOs	Per Batch	262140	2.62	0	0.00	0	<p><b>CHO Induction Training</b>  <b>Background:</b> as per GoI mandate, the CHO once inducted should go through a 15 days induction program; the state has customized the induction to 6 days induction and orientation to IT applications and portal and other 6 days as Basic Package of Services  <b>Approval (30 in a batch at state level)</b>  <b>FY 2024-25:</b> Target 6020 (Current Sanctioned 5400, as of now 4810 have been trained, Rest from the sanctioned will be trained by March 2024)            CHO Induction for newly inducted CHOs - 620 SHC HWCs = 262140×21=55.05L  <b>For 2025-26:</b> Target 6688 (Expected to be operational by 24-25: 6020)            CHO Induction for newly inducted CHOs - 668 SHC HWCs = 262140×22=57.67L  <b>Allocation of the district for training:</b>            Districts with more number of CHOs will have the training within the district itself i.e. Cuttack, Balasore, Ganjam, Keonjhar, Puri, Mayurbhanj, Bhadrak &amp; Jajpur.            Districts with less number of CHOs will come together for the respective training:            A. Koraput will host CHOs from Koraput &amp; Malkangiri            B. Dhenkanal will host CHOs from Angul &amp; Dhenkanal            C. Bolangir will host CHOs from Bolangir &amp; Boudh            D. Sambalpur will host CHOs from Bargarh, Sambalpur, Jharsuguda, Nuapada &amp; Subarnapur.            E. Sundargarh will host CHOs from Deogarh &amp; Sundargarh            F. Rayagada will host CHOs from Gajapati &amp; Rayagada            G. Kendrapara will host CHOs from Jagatsinghpur &amp; Kendrapara            H. Kalahandi will host CHOs from Kalahandi, Kandhamal &amp; Nabrangpur            I. Khurda will host CHOs from Khurda &amp; Nayagarh</p>	
150.9.4	Additional Training of CHOs - Training on Basic Package Services	Per Batch	165810	1.66	0	0.00	0	<p><b>Training on Basic Package Services</b>  <b>Background:</b> New CHOs will be trained on 6 days Basic Package of services training which includes service from 1st - 7th package  <b>Approval (30 in a batch - residential @ dist level)</b>  <b>FY 2024-25:</b> Target 6020 (Current Sanctioned 5400, as of now 4810 have been trained, Rest from the sanctioned will be trained by March 2024)            Basic Package of services for newly inducted CHOs - 620 SHC HWCs = 165810×21=34.82L  <b>For 2025-26:</b> Target 6688 (Expected to be operational by 24-25: 6020)            Basic Package of services for newly inducted CHOs - 668 SHC HWCs = 262140×22=36.48L</p>	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.9.5	Additional Training of CHOs - Training on Expanded Package Services	Per Batch	165810	1.66	0	0.00	0	-	<p><b>Training on Expanded Package of Service</b>  Background: as per Gol mandate the CHOs are to be trained in expanded range of services (8th - 12th package of services)  <b>Approval (30 in a batch - residential @ dist. level)</b>  <b>FY 2024-25:</b> Target 6020 (Current Sanctioned 5400, as of now 4810 have been trained, Rest from the sanctioned will be trained by March 2024)  Expanded Package of Service for newly inducted CHOs - 620 SHC HWCs = 165810×21=24.37L  <b>For 2025-26:</b> Target 6688 (Expected to be operational by 24-25: 6020)  Expanded Package of Service for newly inducted CHOs - 668 SHC HWCs = 262140×22=25.53L  <b>Allocation of the district for training:</b>  Districts with more number of CHOs will have the training within the district itself i.e. Cuttack, Balasore, Ganjam, Keonjhar, Puri, Mayurbhanj, Bhadrak &amp; Jajpur.  Districts with less number of CHOs will come together for the respective training:  A. Koraput will host CHOs from Koraput &amp; Malkangiri  B. Dhenkanal will host CHOs from Angul &amp; Dhenkanal  C. Bolangir will host CHOs from Bolangir &amp; Boudh  D. Sambalpur will host CHOs from Bargarh, Sambalpur, Jharsuguda, Nuapada &amp; Subarnapur.  E. Sundargarh will host CHOs from Deogarh &amp; Sundargarh  F. Rayagada will host CHOs from Gajapati &amp; Rayagada  G. Kendrapara will host CHOs from Jagatsinghpur &amp; Kendrapara  H. Kalahandi will host CHOs from Kalahandi, Kandhamal &amp; Nabarangpur</p>
150.9.6	<b>Any other (please specify)</b>			0.00		0.00		0.00	
150.9.6.1	<b>Multiskilling activities for HWC (ongoing)</b>			0.00		0.00		0.00	
150.9.6.1.1	Multiskilling of Mos	Per HWC		0.00		0.00		-	<p><b>Background:</b> At present out of 1296 PHC HWCs, there are 696 Mos are in position which have already received training under CPHC. However they need refresher traing on recent updates and developments. In addition 600 MOs who are expected to join at PHC HWCs need to be trained on CPHC.</p>
150.9.6.1.2	Refresher Training for Existing Mos	40/ Per batch	264660	2.65	0	0.00	0	-	<p><b>Approved:</b> 4 days of residential refresher training proposed for existing 696 MOs at State level  All existing MOS will be trained at state level @4 days/round . Each batch will consist of 40 participants.</p>
150.9.6.2	Multi Skilling of Newly recruited Mos							-	
150.9.6.2.1	Multiskilling of Mos on NCD & HWC	40 per Batch	214278	2.14	0	0.00		-	<p><b>Approved:</b> 3 days of NCD &amp; HWC training for newly to be joined 600 MOs at <b>State level</b> @40 participants in a batch. As per the current training calendar 400 new Mos will be trained by end of FY 23-24. Hence 5 batch training is proposed for rest MOs.(200 MOs)</p>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.9.6.2.2	Multiskilling of Mos on EPS	40 per Batch	264660	2.65	0	0.00	0	-	<b>Approved:</b> 8 days of EPS training for newly joined 600 MOs at State level Of the 600 MOs - 300 will be trained in the year 2024-25 & 300 in year 2025-26. The MOS will be trained in 2 rounds @4 days/round . Each batch will consist of 40 participants.
150.9.6.3	Multiskilling of PHC SNs (Theory + Skill Based)							-	
150.9.6.3.1	Multiskilling of PHC SNs/ANMs(Theamatic)	30 Per Batch	103470	1.03	0	0.00	0	-	<b>Background:</b> SNs/ANMs of 1296 PHCs have received CPHC training. However they need to be given refresher training on recent updates under CPHC. <b>Approved:</b> Refresher Multiskilling training of SNs/ANMs working at PHCs on recent updates in various programs as per GoI and state govt. and as per different programmatic needs is proposed. Hence, 4 days of refresher training will be carried at district level for SNs/ANMs (43 batches @30 participants in a batch)23 batches in 2024-25 & 20 batches in 2025-26.
150.9.6.3.2	Skill based training for PHC SNs/ANMs on Cancer screening	10 Per Batch	85230	0.85	0	0.00	0	-	<b>Background:</b> As per GoI mandate the the HWC PHC should conduct Cancer screening at the facility level - for this initiative the HWC PHCs are provided with an additional manpower of one SN at each of the HWC PHCs <b>Current Status:</b> The Cancer Screening training for SNs from HWC PHCs is completed for 778 HWC PHCs <b>Approved:</b> 518 SNs to be trained in Skill Based Training - the SNs will be trained in screening of patients for VIA, OVE & CBE (6 Days residential), total parcipant 518/10 per batch = 52 batches at DHH (26 batches in each year)
150.9.6.4	Multiskilling of CHOs (Theamatic areas)	30 Per Batch	25867	0.26	0	0.00	0	-	<b>Background:</b> HWCs are envisaged to deliver expanded range services that of beyond maternal and child health care services to include care for NCDs, Palliative and Rehabilitative care, Oral, Eye and ENT care, Mental health and first level care of emergencies and trauma, including free essential drugs and diagnostics services. At present 4810 CHOs are trained on EPS. These 4810 CHOs will be provided refresher trauning in the FY 24-25 and the rest 1878 (Remaining from 6688) will be trained in FY 25-26. <b>Approved:</b> Refresher Multiskilling training of CHOs on different thematic areas as per the new programs introduced by the GoI and State govt. based on programmatic needs. It is approved that the thematic training will be carried out in two FYs at district level. 4810 will be trained in year 2024-25 i.e. 160 batches and other 1878 CHOs in 2025-26 i.e. 63 batches @ 30 in a batch
150.9.6.5	Skill based/ Refresher training for CHOs								<b>Revised as per NPCC Recommendation</b>

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					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.9.6.5.1	Skill based training on Cancer screening	Per Batch	85230	0.85	0	0.00	0	0.00	<p><b>Approval: Skill based training on Cancer screening</b></p> <p><b>Background:</b> As per Gol and state mandate - the Cancer screening is a mandate at the HWCs (VIA, CBE &amp; OVE) and it is included in the diagnostic list of HWC SHCs. The Gol training for Ca. screening is for 12 days which the Govt of odisha is doing in two phases (6+ 6 days). The target for the State for NQAS certification of SC HWC is 963 by Fy 2024-26. Amongst them, 215 nos of CHOs have already completed their first phase of Training (6days).</p> <p><b>Current status:</b> Currently 215 CHOs are already completed 6 days of training.</p> <p><b>Approval:</b> The State proposes to complete the phase-2 training (6 days) of 215 nos of CHOs and train the rest of the 748 CHOs from NQAS targeted facilities (963-215) on the Skill based cancer screening training.</p> <p>Phase -2 training of 215 nos of CHOs and Phase-1 training of 748 nos of CHOs, Total Target= 963 (96 Batches in 30 districts)</p> <p><b>Budget: @Rs.85230/- per batch X 48 batches = Rs.40.91 lakhs in each year.</b></p>
150.9.6.5.2	Skill based training on Computer literacy	Per CHO	500	0.01		0.00		0.00	<p><b>Not Approved: Skill based training on Computer literacy</b></p> <p>This initiative proposes that all the CHOs will be trained for basic computer skills. Along with the basic computer skills, they will also be trained in the existing portals- CPHC-NCD, RCH, Nikshay, IHIP, FPLMIS, UWIN and others</p> <p>This training to be merged with refresher training of CHOs. Content on IT platforms &amp; computer literacy to be included in training module.</p> <p><b>Budgeted in 2024-25: @Rs.500/- per CHO X 3040 CHOs = Rs.15.20 lakhs</b></p> <p><b>Budgeted in 2025-26: @Rs.500/- per CHO X 334 CHOs = Rs.1.67 lakhs</b></p> <p><b>Budget shifted from Sub Line Item No. 150.29</b></p>
150.9.6.6	One and half day training on Eat Right India Movement for the HWCs	Per Batch		0.00		0.00		0.00	Trainings completed for all primary health care staff in FY 2023-24. So not proposed this year.
150.9.6.7	Establishment of study center for certificate course in community health	Per Unit		0.00		0.00		0.00	28 PSCs established across the state; no new proposal for FY 2024-25
150.10	<b>Printing activities for Ayushman Bharat H&amp;WC</b>			-		-		-	Printing of modules on all 12 services for the newly inducted Medical officers and CHOs ; this also includes the operational guidelines for reference
150.10.1	HWC SHC	Per module	38.16	0.00	0	-		-	<p><b>For CHOs:</b></p> <p>printing of induction modules and modules for the 12 services (Induction - 1, EPS-7, BPS - 8, OG - 7 = 23 modules)</p> <p><b>Approval:</b> 600+1288 = 1888 units × 23 modules = 43424 modules @ avg. unit cost Rs. 38.16 as per the previous tender placed</p>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.10.2	HWC PHC	Per HWC	216.85	0.00	0	-	-	-	For Medical Officers (EPS - 7 modules and NCD module -1) <b>Approval:</b> Printing of modules for MOs -600 MOs × 8 modules = 4800 modules @ avg. unit printing cost Rs.216.85 as per the previous tender placed
150.11	<b>Printing of eat right tool kit &amp; handbook</b>								
150.11.1	Printing of Eat right tool kit	Per tool kit	990	0.01		-		-	Budget Sanctioned for all HWCs in previous PIPs. Printing in process.
150.11.2	Printing Handbook for ASHA	Per Copy	150	0.00		-		-	Budget Sanctioned for all HWCs in previous PIPs. Printing in process.
150.12	Strengthening of diagnostic services of Ayushman Bharat H&WC through PPP			-		-		-	- Not proposed as it is being funded through XVFC.
150.13	<b>Independent Monitoring Cost for performance assessment of Health &amp; Wellness Centre (H&amp;WC)</b>			-		<b>0.00</b>		<b>0.00</b>	<b>Ongoing activity</b>
150.13.1	Concurrent monitoring of HWC	Lumpsum	3000000	30.00		0.00	0	0.00	Not Proposed in 2024-25. <b>Approved in 2025-26:</b> Concurrent monitoring of HWC activities is being done by various govt. agencies like NHSRC/NITI Ayog. In addition various development partners and academic institutions are also conducting independent studies in collaboration with State. Hence no separate budget is proposed.
150.13.2	Involving MCHs for mentoring	Per HWC/ Per Month	10000	0.10	0	0.00	0	0.00	Involving MCHs for mentoring of 10 selected functional HWCs of nearby districts Target: Seven MCHs of the State & AIIMS, Bhubaneswar will provide mentorship guidance to 10 HWCs each in the respective districts @10000/- per month TA/ DA & honorarium cost for field visits X 12 month x 8 = Rs.9.60 lakhs
150.14	Outsourcing of the services (Out Reach Activities) of selected Sub Center HWCs where the ANM position is vacant since long	Per SC	586000	5.86	0	0.00	0	0.00	Ongoing Activity, Approved only for existing 38 operational SCs covered under this initiatives. Detail modalities at Annexure B
150.15	House Rent for SC HWCs where Govt. building isn't available	Per SHC HWC p.m.	2500	0.03	0	0.00	0	0.00	<b>Ongoing Activity</b> <b>Approval for 2024-25:</b> <b>Proposal 1:</b> As per Portal 693 SHC HWC are operating in rented Buildings <b>Proposal 2:</b> Out of the proposed 1210 new SHC HWCs 968 are not having govt. buildings (Building Sanctioned construction going on) Total 1661(693+968) SHC HWC proposed for house rent @Rs.2500/- p,m, (including electricity) <b>Approval for 2025-26:</b> Out of 1661 SHC HWC,80% SCs shall have its own building and thus proposed house rent for 332 SC HWCs @Rs.2500/- p,m, (including electricity)

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.16	e-Decision Support System for Community Health Officers(DSS) at Sub Center Health and Wellness Centers- CHO Sathi App	Per CHO	500	0.01	0	0.00	0	0.00	<b>Budget for FY 2024-25:</b> Training of Newly recruited CHOs on e-DSS: Rs 500/-x 620=3.10 Lakhs <b>Budget for FY 2025-26:</b> Training of Newly recruited CHOs on e-DSS: Rs 500/-x668=3.34 Lakhs Refresher training for all CHOs: Rs 500/-x6688= 33.44 Lakhs <b>Details at CPHC Write-up Justification at Annexure-C</b>
150.17	Award to best performing HWC at the state level	Lumpsum	250000	2.5	0	0.00	0	0.00	<b>State Level Award Ceremony for Best Performing SC-HWC on the UHC day. Detail modalities at CPHC Write-up Justification Annexure-D</b>
150.18	Award to best performing HWC at the district level	annually	30000	0.3	0	0.00	0	0.00	District Level Award Ceremony for Best Performing SC-HWC on the UHC day
150.19	District bi-annual Convergence Meeting with NHM & NAM	Bi annual	10000	0.1		0.00	0	0.00	<b>District level bi annual convergence meeting =10000x30x2=6L</b>
150.20	Quarterly Convergence Meeting at the Block level with NHM & NAM	quarterly	5000	0.05		0.00	0	0.00	<b>Quarterly Convergence Meeting at the Block level (the state has 314 block) =5000x314x4= 62.8L</b>
150.21	Implementation of AB-HWC Mobile App in 100% Health and Wellness Centers	Per participant	500	0.01	0	0.00	0	0.00	On going Activity: Approval for 2023-24- 4896 (3634 nos of CHOs from SC-HWC, 1228 nos of ANM from PHC-HWC, 106 nos of Staff Nurse from UPHC-HWC) . <b>Approval:</b> FY 24-25: 2464 (CHO-2386, ANM - 68, UPHC SN- 10) FY 25-26: 668 CHO <b>Detail modalities at Annexure-E</b>
150.22	Equipping the Sub-Centre/ PHCs -Health and Wellness Centers with essential equipment, Instruments and furniture (EIF) for the delivery of Comprehensive Primary Health Care Services. (Without Civil Cost)	Lumpsum		0.00		0.00		0.00	To be taken after due facility assessment.
150.23	<b>Incentives under CPHC</b>					<b>0.00</b>		<b>0.00</b>	
150.23.1	Performance incentive for Mid-level service providers							0.00	The CHOs' performance is tracked through 28 state customised indicators out of the 6020 SHCs - 4810 CHOs are already in position so they will be eligible to get their incentives for 12 months and the rest 1210 CHOs who are expected to join in FY 24-25 will be eligible for getting 8 months incentive
150.23.2	for Old CHOs	Per month	15000	0.15		0.00		0.00	As it is a performance linked incentive, budget has been proposed 70% of the total entitlement <b>(i.e. 4810x15000x12=865.8L)</b> <b>Budgeted under HSS-9_HRH, SI.No.188</b>
150.23.3	for New CHOs	Per month	15000	0.15		-		0.00	As it is a performance linked incentive, budget has been proposed 70% of the total entitlement <b>(i.e. 1210x15000x8=145.2L)</b> <b>Budgeted under HSS-9_HRH, SI.No.188</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.23.4	Team based incentives for Health & Wellness Centres (H&WC - Sub Centre)	Per HWC	36000	0.36					Proposal 2024-25: Team based incentive proposed for 6020 for ANM & MPW(M) under SC HWCs which is tracked through state customized 27 indicators Amount of Incentive @ 3,000/- per month per SC as team based incentives to ANM/MPW(M)= $6020 \times 12 \times 0.03 = \text{Rs. } 2407.68\text{L}$ Budgeted: As it is a performance linked incentive, budget has been proposed 70% of the total entitlement - Rs.1517.04 lakhs <b>Budgeted under HSS-9_HRH, Sl.No.188</b>
150.23.5	Team based incentives for Health & Wellness Centres (PHC-H&WCs)	Per Inst. Per annum	96000	0.96					Proposal: Team based incentive proposed for 1296 PHC HWCs Proposed incentive: i. MBBS MO @ Rs. 3000/- Per Month x 12 months = Rs. 36000 ii. AYUSH MO @ Rs. 2000/- Per Month x 12 months = Rs. 24000 iii. Paramedics @Rs. 3000/- Per month x 12 months = Rs. 36000 = 36000 + 24000 + 36000 = Rs. 96000 = 96000 x 1296 = Rs. 1244.16 Lakhs Budgeted: As it is a performance linked incentive, budget has been proposed 70% of the total entitlement - <b>Rs. 870.91 Lakhs</b> <b>Budgeted under HSS-9_HRH, Sl.No.188</b>
150.24	Strengthening primary EMO Eye Care by engagement of EMOs	Lumpsum	9618000	96.18		0.00			<b>Dropped as per NPCC Recommendation</b> Eye Mitra Optician (EMO) are rural entrepreneur, who are trained by OSELFunder Odisha Skill Development Scheme, on identification and correction of Refractive Errors. The proposal envisages strengthening primary eye care services involving EMOs at PHC/UPHC HWCs in 14 selected districts of Odisha. <b>Details Proposal &amp; budget is at CPHC Write-up Justification Annexure H</b>
150.25	Fixed Day Case Confirmatory cum Referral Camp at SHC HWC	Per HWC	1500	0.02		0.00			<b>New Activity: Not Approved</b> It is proposed to organize a 'fixed day' at SHC HWCs where fixed day camps (Mental, Dental & Eye Care) can be organized for confirmation of cases, providing basic primary care and referral to higher facilities (if required). <b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure I</b>
150.26	Popularizing CPHC Services through mass media campgain	Lumpsum	4300000	43.00	0	0.00			<b>New Activity Recommended for One year only as per NPCC Recommendation</b> Its proposed to have an aggressive Mass media campaign to wide spread the awareness about services provided at HWCs and thereby improving its utilization. <b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure J</b>

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
150.27	Strengthening supply chain management at SHC HWC	Lumpsum	3001000	30.01		0.00		0.00	<p><b>Shifted to HSS-12_Sl.No.-196 as per NPCC Recommendation</b></p> <p><b>New Activity</b></p> <p>Its proposed to strengthen supply chain management at SHC HWC across state by creating login credentials of SHC HWCs in DVDMS, training CHOs on forecasting &amp; indenting through e-Niramaya &amp; supporting in transportation of drugs &amp; logistics. The transportation cost to the CHOs under this initiative is proposed under HSS-7 (Sl-180: free drug initiatives). Only training cost is proposed under CPHC.</p> <p><b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure K</b></p>
150.28	Jan-Sambad at SC HWCs	Per HWC	2000	0.02		0.00		0.00	<p><b>New Activity: Not Approved</b></p> <p>Under this initiative, it is envisaged that the SC HWC along with JAS will conduct one public meeting involving with wider participation from the community under "Jan-Sambaad".</p>
150.29	Computer literacy training of the CHOs	Per CHO	500	0.01		0.00		0.00	<p><b>Budget Shifted to Sub Line item No. 150.9.6.5 as per NPCC Recommendation</b></p> <p>This initiative proposes that all the CHOs will be trained for basic computer skills. Along with the basic computer skills, they will also be trained in the existing portals- CPHC-NCD, RCH, Nikshay, IHIP, FPLMIS, UWIN and others</p> <p><b>This Training to be merged with refresher training of CHOs. Content on IT platforms &amp; computer literacy to be included in training module.</b></p> <p><b>Details proposal &amp; budget budget is at CPHC Write-up Justification Annexure M</b></p>
151	Wellness Activities at HWCs-Rural					0.00		0.00	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
151.1	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60		0.00		0.00	Budgeted under HSS-9_HRH, Sl.No.188
151.2	IEC activities for Ayushman Bharat Health & Wellness centre (H&WC)			0.00		0.00		0.00	Ongoing Activity
151.2.1	IEC Recurring Cost			0.00		0.00		0.00	<b>IEC Recurring Cost :</b> <b>For FY :2024-25</b> 1296 PHC HWC @ Rs 50,000/- for organising minimum 24 events in a year 6020 SHC HWC @Rs. 25,000 for organising minimum 24 events in a year <b>For FY :2025-26</b> 1296 PHC HWC @ Rs 50,000/- for organising minimum 24 events in a year 6688 SHC HWC @Rs. 25,000 for organising minimum 24 events in a year
151.2.1.1	IEC Recurring Cost PHC HWCs	Per HWC	50000	0.50	0	0.00	0	0.00	Observance of days and wellness activities at HWC - PHC - 1296 × 50000 = <b>Rs.648 Lakhs</b>
151.2.1.2	IEC Recurring Cost SC HWCs	Per HWC	25000	0.25	0	0.00	0	0.00	Observance of days and wellness activities at HWC - SHC - 6020 × 25000 = <b>Rs.1505 Lakhs</b>

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
151.2.2	Day celebration	Lumpsum	0	0.00	1	0.00	1	0.00	<p><b>Proposal - Day celebration</b>  <b>State Level - @Rs.2.00 lakhs for State level Observation</b>  <b>1. HWC day - Rs. 1.00 lakhs</b>  <b>2. UHC day - Rs. 1.00 lakhs</b>  <b>District Level -</b>  <b>1. HWC day - Rs. 50000/dist. × 30 dist. = Rs.15.00 Lakhs</b>  <b>2. UHC day - Rs. 50000/dist × 30 dist. = Rs.15.00 Lakhs</b>  <b>Total= Rs. 30.00 lakhs + Rs.2.00 Lakhs =Rs. 32.00 Lakhs</b></p>
151.2.3	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60	0	0.00	0	0.00	<p><b>Budget Shifted from HSS-9_HRH, SI.No.188</b>  <b>Background:</b>  This is an ongoing activity as per CPHC mandate. Budget is proposed based on increase in number of operational HWCs. Unit cost remains same. Considering the constraints of availability of trained Yoga teacher 50% of the total budget is proposed. As per GoI conditionality framework upto 10 Yoga sessions in a month will be conducted by a trained Yoga Teacher.  <b>Incentive/honorarium for Yoga instructor: @Rs.600 per yoga session</b>  <b>For FY 2024-25</b>  Total HWCs - 6020 SHC HWCs +1296 PHC HWCs = 7316 HWCs  Budget FY 2024-25: 500 x 10 x 7316x 12 months = Rs.4389.6 lakhs  Budget Proposed-50% of total cost- Rs.2194.80 lakhs  <b>For FY 2025-26</b>  Total HWCs - 6688 SHC HWCs +1296 PHC HWCs = 7984 HWCs  Budget FY 2025-26: 500 x 10 x 7984x 12 months = Rs.4790.4 lakhs  Budget Proposed-50% of total cost- Rs.2395.20 lakhs  NB:As per the state govt. Notification Yoga instructors are paid Rs.500 for facilitating one yoga session including travel cost, against the GoI norm of Rs. 250; this incentive includes travel expenses borne by the instructor as one instructor has to travel on an avg. 30 KMS to reach the facility. in addition getting yoga teachers in interior rural belts with low incentive is a real challenge.</p>
152	Tele-consultation facilities at HWC-Rural					23.76		23.76	

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
152.1	Telemedicine/ teleconsultation facility under Ayushman Bharat H&WC			0.00		23.76		23.76	<p><b>Current status</b>  <b>Background/Current Status:</b>At present under e-sanjeevani eco system, state has 12 active Hubs,32 DHH Sub Hubs,19 SDH Sub Hubs,366 CHC Sub Hubs and 5742 spokes. These facilities are providing tele consultation services to the beneficiaries across state.  <b>Approval: New HUBs/Sub Hubs/Spokes are proposed in the following manner:</b>  <b>FY 2024-25:</b>  <b>A. Hubs:5 New (All New operational MCHs)</b>  I. Sri Jagannath Medical College and Hospital, Puri  II. Fakir mohan MCH , Baleshwar  III. Bhima Bhoi, Government Medical College &amp; Hospital, Bolangir  IV. Dharani Dhara Government Medical College, Keonjhar  V. Government Medical College, Sundargarh  <b>B. Sub Hubs: 29 New (100 % saturation of SDH (32)&amp; CHCs (382))</b>  <b>C. Spokes: 2242 New (All targeted PHC (1296)&amp; SHC HWC (6020))</b>   <b>FY 2025-26:</b>  <b>A. Hub: 3 (Saturation of all MCH expected to be operational)</b>  <b>I. Govt MCH Kalahandi</b>  <b>II. Govt. MCH Talcher,Anugul</b>  <b>III. Govt. MCH Jajpur</b>  <b>B. Sub Hubs: 0</b>  <b>C. Spokes: 668 (All targeted SHC HWC 6688)</b></p>
152.1.1	HUBs at Medical Colleges & Sub-hubs at DHHs					23.76		23.76	
152.1.1.1	Non Recurring Cost					-		-	
152.1.1.1.1	Telemedicine diagnostic kit:								State has planned to take-up this activity by providing Digital diagnostics devices at Spokes level, through the funding from XVFC. Hence no budget proposed
152.1.1.1.2	IT Equipment								

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					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
152.1.1.1.3	Computer & other assessories including printer	Per MCH	70000	0.70	0	-	0	<p><b>IT Equipment:</b> Supply of IT Equipment (Computer, Web Camera, Microphone) is proposed for Existing Hubs, New Hubs &amp; new Sub Hubs. The State has planned to have 6 IT sets at Hubs (Existing 4 sets provided) , 2 IT sets at DHH Sub-Hubs (Existing 1 set provided), one IT set at the other Sub-Hubs (at SDH/CHC level)and spokes. Additional IT set are proposed at Hubs and DHH Sub-Hubs to reduce the waiting time and call drop.</p> <p><b>Budget:</b> To match the state norm IT equipments are proposed in the following manner: <b>FY 2024-25:</b> For Existing Hubs: 24 @Additional 2 per Hub for 12 Hubs - For Existing DHH Sub Hubs: 32 @Additional 1 per DHH Sub Hubs for 32 DHH Sub Hubs For Newly Approved Hubs: 30 @ 6 per new Hub for 5 Hubs Newly Approved Sub Hubs (SDHs/CHCs): 29 @1 per new Sub Hub for 29 Sub Hubs <b>Total Requirement for FY 2024-25: 115</b> <b>Total Budget for FY 2024-25: Rs 70000x 115=80.50Lakhs</b> <b>FY 2025-26:</b> For Newly Approved Hubs: 18 @ 6 per new Hub for 3 Hubs <b>Total Requirement for FY 2025-26:18</b> <b>Total Budget for FY 2025-26: Rs 70000x 18=12.60 Lakhs</b> NB: The proposal for requirement of IT equipment for new spokes is proposed under ICT head of the PIP.</p>	
152.1.1.2	<b>Recurring Cost</b>					<b>23.76</b>	<b>23.76</b>		
152.1.1.2.1	Human Resource							To be mobilised from system & to be hired from market on session basis	
152.1.1.2.2	Super Specialist session at Hub (Part Time) @ Rs 3,000 per session of 120 minutes	Per session	2500	0.03	312	7.80	312	7.80	6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 17 Hubs = 5304 sessions
152.1.1.2.3	Specialist sessions at Hub & sub-hubs (Part Time) @ Rs 3,000 per session of 120 minutes	Per session	2500	0.03	520	13.00	520	13.00	<p><b>A.Hub</b> 10 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 17 hubs = 8840 sessions <b>B.Sub-Hub (All 32 DHHs are considered as sub-hubs)</b> 10 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 32 hubs = 16640 sessions Type of Specialist consultation - O&amp;G, Peadriatic, Ophthalmology, SNCU follow up consultations, etc. <b>Total consultations = 8840+16640=25480</b> <b>Budget Approved for 2024-25: @Rs.2500/- X 25480 = Rs.637.00 lakhs</b> <b>Budget Approved for 2024-25: @Rs.2500/- X 27039 = Rs.675.98 lakhs</b></p>

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S.No.	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Approval 2024-26				State's Remarks
					F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
152.1.1.2.4	General consultation Sessions at Sub hub @Rs.1000 per session of 120 minutes	Per session	1000	0.01	0	-	0	-	6 sessions (duration - 120 minutes per session) per week x 52 weeks p.a. x 414 sub hubs = 129168 sessions Budgeted-70% of total cost- Rs.904.18
152.1.1.2.5	Tele-consultation Coordinator	Per person p.m.	19700	0.20	1	2.36	1	2.36	Engaged through outsource agency (Skilled labour rate @Rs.480/- per day for 26 days in a month = Rs.12480/- + ESI & EPF = Rs.19700/-)
152.1.1.2.6	Internet Charges	Per Month	2000	0.02	1	0.24	1	0.24	HUB(MCH) & SUB HUB (DHH) - Rs. 2000 / month = Rs. 11.76 L
152.1.1.2.7		Per Month	1000	0.01	0	-	0	-	SUB HUB(SDH & CHC) - Rs. 1000/month = Rs.49.68 L
152.1.1.2.8		Per Month	500	0.01	-	-	0	-	For Spokes Proposed in Recurring expenses
152.1.1.2.9	Miscellaneous Charges	Per Month	3000	0.03	1	0.36	1	0.36	Cost for printing of prescription, register etc
152.1.2	<b>Spokes for Model PHC HWCs</b>			0.00		-		-	
152.1.2.1	<b>Non Recurring Cost</b>			0.00		-		-	
152.1.2.1.1	Telemedicine diagnostic kit:			0.00					- Not proposed
152.1.2.1.2	IT Equipment			0.00					- Requirement saturated in previous years except printer
152.1.2.1.3	Printer	Per HWC		0.00		-		-	- Already Proposed in 2022-23
152.1.2.2	<b>Recurring Cost</b>			0.00		-		-	- Recurring cost for 5400 SHCs from all 30 districts.
152.1.2.2.1	Miscellaneous cost	Per HWC p.a.	5000	0.05	0	-	0	-	<b>Total HWCs - 1296 +6020 = 7316</b> • PHC HWCs - 1296 • SHC HWC - 6020 Total - 7316 × 0.05 = <b>Rs.365.8 Lakhs</b>
152.1.2.2.2	Internet connectivity charges	Per Month	500	0.01		-		-	<b>Dropped as per NPCC Recommendation</b> <b>Total HWCs - 1296 +6020 = 7316</b> • PHC HWCs - 1296 • SHC HWC - 6020 Total - 7316×0.01 = <b>Rs.438.96 Lakhs</b>
152.2	<b>Other IT Initiatives (please specify)</b>					-		-	
153	<b>CHO Mentoring</b>					0.00		0.00	
153.1	State Mentorship for the CHOs	Per CHO p.m.	5400	0.054	0	-	0	-	Govt's mentorship initiative is initiated through CMC Vellore. At present state has 10 trained mentors. The state is expected to have 35 State mentors by end of FY 24-25. Each mentor will be tagged 36 CHOs each.
153.2	Review cum Sensitization Meeting for HWC SHC team at the district level	quarterly	1200	0.012	0	-	0	-	<b>Quarterly District Level Review meeting</b> - Approved budget is Rs.300/CHO (Rs.200 for reimbursement of travel using public conveyance and Rs. 100/- for refreshment

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
153.3	Review cum Sensitization Meeting for HWC SHC team at the block level	8 times in a year	2400	0.024	0	-	0	-	<b>Block Level Review meeting (eight times in a year)</b> - Approved badget is Rs.300/HWC team (Rs.300 will be utilised towards refreshment cost for the team)
153.4	Tickler Bag in SC-HWC for Effective Tracking and Follow up for NCD Patients	Lumpsum				-		-	<b>Not proposed. All aspirational districts saturated through last year PIPs.</b>
153.5	CHO Leadership Certification Program	Per CHO p.m.	150	0.00	0	-	0	-	<b>Ongoing activity:</b> With the support from JHPIEGO, by end of FY 2023-24, 1 CHO in each block to be certified as CHO peer leader/CHO buddy. They are expected to play the role of a peer mentor for the remaining CHOs of their block to accomplish assigned task under CPHC. The detail write-up is attached at annexure G
153.6	Nurse Mentor for SC HWC	Lumpsum	10240000	102.40		-	0	-	<b>New Activity: Budget Shifted to HSS-6, Sl.No. 175 in 2024-25</b> Under this initiative, for the Aspirational Districts & Blocks covered under aspeirational block programme of Odisha, for every 20 SC HWC, one Nurse mentor will be empanelled and will be reimbursed based on their performance. There are 1667 nos of SC HWCs in the 10 Aspirational districts of Odisha and for them, 83 nos of Nurse Mentors will be engaged. These Nurse mentors will be basically GNM/BSc nurse who are available for freelance mentoring. These mentors once empanelled, will provide NQAS field mentoring to the CPHC team members on one to one basis. <b>Budgeted: 50%</b> as empanelment of nurse mentors may take time to rollout the programme.

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# NHM PIP

## 2024-26

Programme Implementation Plan

**HSS-9**  
**HRH**





## HSS-9\_HRH

## PGIMER, Capital Hospital, Bhubaneswar

S.No.	Scheme/ Activity	Approval 2024-26						State's Remarks	
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target		Budget (Rs. Lakhs)
	<b>Total HRH</b>					-	2.12		
185	Remuneration for all NHM HR					-	2.12	Ongoing Activity Details calculation at HR writeup Annexure	
185.1	Remuneration of Service Delivery HR	Lumpsum		0.00		-	2.09		
185.2	EPF of Service Delivery HR	Lumpsum		0.00		0.00	0.03		
185.3	Remuneration of Programme Management HR	Lumpsum		0.00		0.00	0.00		
185.4	EPF of Programme Management HR	Lumpsum		0.00		0.00	0.00		
185.5	Balance Amount Kept at State Level	Lumpsum		0.00		-			
186	Incentives(Allowance, Incentives, staff welfare fund)					-	-		
186.1	Incentives and Allowances								
186.1.1	Performance based Incentive to LSAS & EmOC trained Doctors							Division: Maternal Health Total LSAS trained doctors in the system: 175 LSAS trained doctors posted at FRUs: 73 Total EMOC trained doctors in the system: 38 EMOC trained doctors posted at FRUs: 17	
186.1.2	Incentivisation of LSAS Doctors	Lumpsum	0	-	1	-	1	-	70% expected to quality as per norms (at least 2 CS per month) and eligible to get @3000 per month (70% of 73 doctors posted in FRUs=51). Budget : 51 * @3000 * 12= Rs.18.36 lakhs  30% expected to quality for additional @2000 incentive per month ; 30% of 51 = 15 persons eligible for Rs.2000. Budget : 15* Rs.2000 * 12 =3.60 lakhs TOTAL : Rs.21.96 lakhs
186.1.3	Incentivisation of EMOC Doctors	Lumpsum	0	-	1	-	1	-	70% expected to quality as per norms (at least 2 CS per month) and eligible to get @3000 per month (70% of 17 doctors posted in FRUs=12). Budget : 12 * @3000 * 12= Rs.4.32 lakhs  30% expected to quality for additional @2000 incentive per month ; 30% of 12 = 4 persons eligible for Rs.2000. Budget : 4 * Rs.2000 * 12 = 0.96 lakhs TOTAL : Rs.5.28 lakhs
186.1.4	Pregnant women line listed & treated for severe anaemia					-	-		Budget dropped
186.1.5	Pregnant women line listed & treated for high risk pregnancies					-	-		Budget dropped
186.1.6	Home deliveries attended by SBA trained ANM					-	-		Budget dropped

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S.No.	Scheme/ Activity	Approval 2024-26							
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		State's Remarks
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
186.1.7	Institutional deliveries at SCs designated as delivery points (DP) conducting >5* deliveries/ month			-		-			Budget dropped
186.1.8	Institutional deliveries at APHCS/PHCs designated as delivery points (DP) conducting >15* deliveries/month			-		-			Budget dropped
186.1.9	Institutional deliveries at CHCs(Non FRU) conducting 50* deliveries/month			-		-			Budget dropped
186.1.10	C-sections per month at Sub district CHC/ FRUs.	Per case	3000	0.03	0	-	0	-	<b>Ongoing Activity: Davison MH</b> Provision is for FRU-SDH and CHC in 10 Aspirational districts Total number of FRU-SDH and CHC in 10 Ads - 14 Total Num of del. (April to March 23)- 16781 Exp del for 12 months- 24732 Exp C Section up to 12 months- 3676 Avg CS per month-306 Monthly max. Limit for incentivisation (C section up to 20% of Normal del)-352 Case load for incentivization for 12 months (Monthly maximum limit as per norm from 6th CS onwards)-3384 Budgeted 80% as per expenditure trend
186.1.11	C-sections per month at District Hospital FRUs	Per case	3000	0.03	0	-	0	-	<b>Ongoing Activity: Division MH</b> Provision is for FRU-DHH in 10 Aspirational districts Total number of DHH-10 nos Total Num of del. (April to march 2023) - 46776 Exp del for 12 months- 46776 Exp C Section up to 12 months- 13990 Avg CS per month- 1167 Monthly max. Limit for incentivisation (C section up to 20% of Normal del)- 545 Case load for incentivization for 12 months (Monthly maximum limit as per norm from 11th CS onwards)- 5340 Budgeted 80% as per expenditure trend
186.1.12	<b>Special incentive to service providers of SNCU for quality service delivery</b>	Per unit							<b>Not Approved</b>
186.1.13	For 12 bedded SNCUs	Per Unit	30,000	0.30	0	0.00	0	0.00	
186.1.14	For 24 bedded SNCUs	Per Unit	35,000	0.35	0	0.00	0	0.00	
186.1.15	For 36 bedded SNCUs	Per Unit	40,000	0.40	0	0.00	0	0.00	
186.1.16	For 72 bedded SNCUs	Per Unit	55,000	0.55	0	0.00	0	0.00	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
186.1.17	Honorarium for Specialists	Per visit	10000	0.10	0	-	0	-	<b>Ongoing Activity: Division RBSK</b> <b>Budget Proposed as per last year's approval</b> <b>Strengthening of universal Eye Screening under RBSK at District Hospitals:</b> <b>Background:</b> For ensuring universal eye screening as per RBSK mandate (including RoP) experts will be hired from empanelled Pvt. Hospitals/ Individual specialists. <b>Budget:</b> Rs.10,000 per visit per expert inclusive of all cost X 100 visits= Rs.10.00 lakhs
186.1.18	<b>Award to the Service Provider for FP Services</b>			-		-		-	<b>Ongoing Activity: Division FP</b> <b>Award to the Service Provider</b> 1. Top three best performing service providers for NSV, Female Sterilization <b>Budget: @Rs.10000/- X 6 = Rs.0.60 lakhs</b> 2. Top three ASHAs at district level for Male and Female Sterilization and PPIUCD <b>Budget: @Rs. 1000/- X 9 X 30 =Rs.2.70 lakhs</b> 3. Top three Male Health Workers at District Level for Male Sterilization <b>Budget: @Rs. 1000/- X 3 X 30 =Rs.0.90 lakhs</b> <b>Total Budget: Rs.4.20 lakhs</b>
186.1.18.1	Best performing service providers for NSV, Female Sterilization	Per Award	10000	0.10	0	-	0	-	
186.1.18.2	Best three ASHAs at district level for Male and Female Sterilization and PPIUCD	Per ASHA	1000	0.01	0	-	0	-	
186.1.18.3	Best three Male Health Workers at District Level for Male Sterilization	Per HW	1000	0.01	0	-	0	-	
186.1.19	Incentive to service provider for PPIUCD services	Per Service Provider	150	0.00	0	-	0	-	<b>Ongoing Activity: Division FP</b> Achievement during 2022-23 - 75252 Proposal /Target 2024-25: 141000 (20% of expected delivery 705958) Budget proposed for 2024-25 & 2025-26: 98700 (70% of total target i.e. 141000 )
186.1.20	Incentive to service provider for PAIUCD Services	Per Service Provider	150	0.00	0	-	0	-	<b>Ongoing Activity: Division FP</b> Achievement during 2022-23: 4959 Target 2024-25: 10000 cases Proposal 2024-25 & 2025-26: 7000 (70% of 10000 cases)
186.1.21	Others (please specify) including Welfare Fund for Staff	Lumpsum		-		-			
186.1.22	NHM Staff Welfare Fund	Lumpsum	10000000	100.00	0	0.00	0	-	Ongoing Activity <b>Details at HSS Write-up justification Annexure</b>
187	<b>Remuneration for CHOs</b>					-		-	

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S.No.	Scheme/ Activity	Approval 2024-26							State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
187.1	Remuneration of CHOs	per month	10000	0.10	0	0.00	0	-	<p><b>Ongoing Activity: Division CPHC</b>  Target 2024-25 : 6020 CHO positions  As per the target, 6020 SCs are to be converted as HWCs by 2024-25. Accordingly, State Government has created 6020 post of Nursing Officers on contractual basis under regular Nursing cadre being deployed as CHOs after completion of CPCH training in phased manner. The remuneration of all CHOs is proposed as per State Govt. circular (Remuneration @Rs.10000/- p.m.) under NHM PIP. These Nursing Officers will be inducted into regular cadre after completion of 6 years.  Budgeted 80% due to expected vacancies</p>
188	<b>Incentives under CPHC</b>					-		-	
188.1	Performance incentive for Mid-level Service Providers								The CHOs' performance is tracked through 28 state customised indicators out of the 6020 SHCs - 4810 CHOs are already in position so they will be eligible to get their incentives for 12 months and the rest 1210 CHOs who are expected to join in FY 24-25 will be eligible for getting 8 months incentive
188.1.1	for Old CHOs	Per month	15000	0.15	0	-	0	-	<p>As it is a performance linked incentive, budget has been approved for 70% for F.Y. 2024-25 &amp; 80% for 2025-26.  <b>Total fund requirement: 4810×15000×12=Rs. 8658.00 Lakhs</b>  <b>Fund Approved for 2024-25: Rs. 6060.60 Lakhs</b> (70% of the total requirement)  <b>Fund Approved for 2024-25: Rs. 8668.80 Lakhs</b> (80% of the total requirement)  <b>Incentive may be given to CHOs as per the actual inposition Status</b></p>
188.1.2	for New CHOs	Per month	15000	0.15	0	-	0	-	<p>As it is a performance linked incentive, budget has been approved for 70% for F.Y. 2024-25 &amp; 6 months budget approved for 2025-26.  <b>Total fund requirement: 1210×15000×8=Rs. 1452.00 Lakhs</b>  <b>Fund Approved for 2024-25: Rs. 1016.40 Lakhs</b> (70% of the total requirement)  <b>Fund Approved for 2025-26: Rs. 601.20 Lakhs</b> (6 months budget approved for the total requirement)  <b>Incentive may be given to CHOs as per the actual inposition Status</b></p>

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S.No.	Scheme/ Activity	Approval 2024-26								State's Remarks
		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26			
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)		
188.2	Team based incentives for Health & Wellness Centres (H&WC - Sub Centre)	Per HWC	36000	0.36	0	-	0		<p><b>Approval 2024-25 &amp; 2025-26:</b> Team based incentive proposed for 6020 &amp; 6688 for ANM &amp; MPW(M) under SC HWCs which is tracked through state customized 27 indicators</p> <p>- Amount of Incentive @ 3,000/- per month per SC as team based incentives to ANM/MPW(M)= 6020 x 12 x 0.03 = Rs. 2167.2 Lakhs (<b>Budgeted 70% i.e. Rs.1517.04 lakhs</b>) ANM/MPW(M)= 6688 x 12 x 0.03 = Rs. 2407.68 Lakhs (<b>Budgeted 70%</b>)</p>	
188.3	Team based incentives for Health & Wellness Centres (PHC-H&WCs)	Per Inst. Per annum	96000	0.96	0	-	0		<p><b>Approval:</b> Team based incentive proposed for 1296 PHC HWCs Proposed incentive: i. MBBS MO @ Rs. 3000/- Per Month x 12 months = Rs. 36000 ii. AYUSH MO @ Rs. 2000/- Per Month x 12 months = Rs. 24000 - iii. Paramedics @Rs. 3000/- Per month x 12 months = Rs. 36000 = 36000 + 24000 + 36000 = Rs. 96000 = 96000 x 1296 = Rs. 1244.16 Lakhs <b>Budgeted:</b> As it is a performance linked incentive, budget has been proposed 70% of the total entitlement - <b>Rs. 870.91 Lakhs</b></p>	
188.4	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60	0	0.00	0	0.00	<p><b>Revised as per NPCC Recommendation Budget Shifted to HSS-1_CPHC, SI.No. 151</b></p> <p><b>Background:</b> This is an ongoing activity as per CPHC mandate. Budget is proposed based on increase in number of operational HWCs. Unit cost remains same. Considering the constraints of availability of trained Yoga teacher 50% of the total budget is proposed. As per Gol conditionality framework upto 10 Yoga sessions in a month will be conducted by a trained Yoga Teacher. <b>Incentive/honorarium for Yoga instructor:</b> @Rs.600 per yoga session <b>For FY 2024-25</b> Total HWCs - 6020 SHC HWCs +1296 PHC HWCs = 7316 HWCs Budget FY 2024-25: 500 x 10 x 7316x 12 months = Rs.4389.6 lakhs Budget Proposed-50% of total cost- Rs.2194.80 lakhs <b>For FY 2025-26</b> Total HWCs - 6688 SHC HWCs +1296 PHC HWCs = 7984 HWCs Budget FY 2025-26: 500 x 10 x 7984x 12 months = Rs.4790.4 lakhs Budget Proposed-50% of total cost- Rs.2395.20 lakhs NB:As per the state govt. Notification Yoga instructors are paid Rs.500 for facilitating one yoga session including travel cost, against the Gol norm of Rs. 250; this incentive includes travel expenses borne by the instructor as one instructor has to travel on an avg. 30 KMs to reach the facility. in addition getting yoga teachers in interior rural belts with low incentive is a real challenge.</p>	

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		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	F.Y. 2024-25		F.Y. 2025-26		
					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	
188.5	Incentive to Physiotherapists	Per Session	750	0.01	0	-	0	-	<b>Ongoing Activity</b> <b>Proposal:</b> Extended physiotherapy sessions for home bound geriatric & other cases - Approximately 30% of the home-bound patients may require the physiotherapy services once in a month. Targeted patients 3000 <b>Incentive to empanelled Physiotherapists:</b> @Rs.750/- per session x 900 patients x 12 sessions p.a.
189	<b>Costs for HR Recruitment and Outsourcing</b>							-	
189.1	Ancillary Services at Major Public Health Facilities (i.e. FRUs)	Lumpsum		-					<b>Budget shifted from HSS-7, Sl.No. 183</b> <b>Ongoing Activity:</b> <b>A State Specific Initiative namely NIRMAL is being implemented in the State. The Services under the scheme has been extended from DHH to PHC Level. It is managed by outsourced agencies.</b> <b>Areas of interventions include :</b> <ul style="list-style-type: none"> <li>• Housekeeping and cleanliness services-</li> <li>• Hospital linen and laundry services-</li> <li>• Security services-</li> <li>• Patient Attendant services-</li> <li>• Gardener Services</li> <li>• Lift Services</li> <li>• Patient Attendant Services</li> </ul> Annual Cost Estimate of the project is more than Rs.50000.00 lakhs. The total cost of Ancillary Services at FRUs only is about Rs. 17213.46 Lakhs out of which Rs.2000.00 lakhs has been proposed under NHM and rest to be met out of State Budget. <b>Detail proposal is placed at HSS-7_ Other Initiatives write-up Annexure-10 : "Ancillary Services"</b>
190	<b>Human Resource Information Systems (HRIS)</b>							-	<b>Not proposed, provisioned in previous years</b>

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Details of Service Delivery HR Approved in NHM PIP 2025-26

Category	Pool	Position Name	Positions proposed in FY 24-25	Base salary proposed in 2024-25	New / Dropped Positions proposed in FY 25-26	Total Positions proposed in FY 25-26	Base salary Proposed in PIP 2025-26 (5% increment on base 24-25)	PI (25%)	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget	
SD	NTEP	Lab technician (for MCHs) - LT shifted to LT at all facilities	0	18865	1	1	19808	4952	0	24760	12	2.79	2.79
<b>Grand Total (Estimated Budget)</b>			<b>0</b>		<b>1</b>	<b>1</b>						<b>2.79</b>	
Budget Proposed is 75% of the total estimated cost (However, the estimated budget has been finalised based on the requirement including 3% of rationalisation fund to be deposited in the Treasury)													2.09

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**Mission Directorate  
National Health Mission  
SIH&FW (O) Annex Building  
Nayapalli, Bhubaneswar**