



NHM PIP 2022-24 Programme Implementation Plan

FM MC&H Balasore

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



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

Letter No: OSH&FWS/ 9269 /2022

Date: 12.08.22

From

778/21

Shalini Pandit, 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 & Hospitals, Odisha
The Superintendent, SVPPGIP, Cuttack & MHI, Cuttack
All CDM& PHOs-cum-District Mission Directors
All Nodal Officers, NUHM, Corporation Cities

Sub: Approval of NHM District / City Program Implementation Plan (PIP) for the Financial Year (FY) 2022-23 & FY 2023-24- Reg.

Madam / Sir,

The Program Implementation Plan (PIP) for the FY 2022-23 & FY 2023-24 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 component wise approved budgets for the State are given below:

	Amount (in	n Rs lakhs)	
NHM PIP	Budget Approved		
Poolwise summary	FY 2022-23	FY 2023-24	
RCH Flexible Pool (including RI, IPPI, NIDDCP)	51,476.66	49,546.66	
NDCP Flexible Pool (RNTCP, NVHCP, NVBDCP, NLEP, IDSP, NRCP, PPCL)	17,577.68	15,743.16	
NCD Flexible Pool (NPCB&VI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPPCCHH)	17,097.27	14,680.03	
NUHM Flexible Pool	8,768.05	8,504.95	
Health System Strengthening (HSS) under NRHM	2,16,507.25	2,01,656.41	
Total	3,11,426.91	2,90,131.22	

Further, the abstract of district/city wise approved Budget is attached herewith at Annexure 1 for information & necessary action.

The Major Revisions & other Features of PIP 2022-24 for facilitating PIP implementation are as follows.

The major reforms made in the PIP is introduction of two year PIP cycle instead of one year as done in previsious years, reduction in budget lines to facilitate flexibility and easier implementation of SNA and a shift in focus from mere inputs to outputs. The major outputs agreed by the State in the form of key deliverables have been placed at Annexure-2.



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- The Conditionalities Framework for FY 2022-23 and FY 2023-24 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 90% Full Immunization Coverage.
- All the support for Human Resources for Health (Especially Clinical Manpower) under NHM will be to the extent of gap found between manpower in position (through regular & outsourced mode) at a particular health facility against the staffing recommended in IPHS & corresponding health facility level caseload. NHM aims to strengthen health systems by supplementing and hence it should not be used to substitute regular HRH.
- All unspent balance available under NHM with the State as on 1st April 2022, has become a part of the approved budget of FY 2022-23. Similarly, all the unspent balance available as on 1st April 2023 would become a part of the budget for FY 2023-24.
- Action on the following issues would be looked at while considering the release of first tranche of funds:
 - State/District should not have more than 25% of the total release (Central + State Share) as unspent amount.
 - State/District should have completed all the tasks related to SNA and implementing Agencies mapping.
- Action on the following issues would be looked at while considering the release of subsequent tranche of funds:
 - State must have spent at least 75% of the total release (Central + State Share).
- The State/District/ Other implementing agency 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 PIP approvals.
 - o The unit cost/ rate wherever approved for all activities including procurement, printing, etc. are only indicative for purpose of estimation. However, actuals are subject to transparent and open bidding process as per the relevant and extant purchase rules.
 - o Third party monitoring of civil works and certification of their completion through reputed institutions shall be introduced to ensure quality. Also, information on all ongoing works should be displayed on the NHM website.
 - o Ensure regular meetings of State and District Health Missions/ Societies. The performance of State Health Society (SHS)/ District Health Society (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.



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- o The accounts of State/ District gurantee 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.
- The activities approved under NHM for FY 2022-23 and FY 2023-24 is to be reflected in NHM-PMS portal, State / District 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.
- The approval for new infrastructure is subject to the condition that the State/ District will use energy efficient lighting and other appliances.
- The State/District shall submit Non-Duplication Certificate in prescribed format for all civil works (New/upgradation).
- The State/District shall submit Non-Duplication Certificate in prescribed format for all equipment/instruments procured.
- The State/District / other implementing agency must provide for 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 apply in such
 cases.
- The State/District/ other implementing agency to ensure that Janani Suraksha Yojana (JSY) and Nikshay Poshan Yojana (NPY) payments are made through Direct Benefit Transfer (DBT) mechanism through 'Aadhaar' enabled payment system or through NEFT under Core Banking Solution.
- Though approval for all activities have been given for two years but process can only be initiated immediately to undertake non recurring activities of FY 2023-24, especially civil works & procurement of EIF (if the facilities are ready in all aspects for operationalization). However, preparatory process may be initated for other approved activities of FY 2023-24 at the earliest to roll out of the activities in the beginning of FY 2023-24. The implementation process for all activities of FY 2022-23 to be undertaken as usual.
- The State/District must ensure mandatory disclosures on the State NHM website of all publicly relevant information as per previous directions of Central Information Commission (CIC) and letters from MoHFW.
- All approvals are subject to the Framework for Implementation of NHM and guidelines issued from time to time from MD, NHM and observations made in this document.



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Let us re-affirm our commitment towards ensuring resilient Health Systems which are sustainable and equipped to provide equitable, affordable and quality health care that is accountable and responsive to people's needs. I look forward to work with you all and achieve the set targets under Key Deliverables and Key conditionalities set by GoI for our State within the given timeframe.

Enclosure: Soft Copy of District / City / Other Agency wise email.	PIP for FY 2022-24	to be shared via
		Yours faithfully
Memo No. 9270	Date. 12.08.02	Mission Director NHM, Odisha
Copy submitted to the Principal Secretary to Gov for kind information.	t. Health & FW Dep	partment Odisha
		Mission Director NHM, Odisha
Memo No. 9271 Copy forwarded to all Collectors & District Ma	Date. 12.08.12	
necessary action.	igistrates, Odisha 10	or information &
		Mission Director NHM, Odisha
Memo No. 9272	Date. 12-08-21	
Copy forwarded to all Programme Officers and Co Consultants of SPMU for information and necessary action.	ansultants of Director	rates / Officials &
		Mission Director
Memo No.9273	Date. 12.08.22	NHM, Odisha
Copy forwarded to State Representatives of all De and necessary action.	evelopment Partner:	for information
	•	Mission Director,
Memo No. 9274 Copy forwarded to all DPMs for information and n	Date. 12.08.12 ecessary action.	NHM, Odisha
		Mission Director,
Memo No. 9275 Copy forwarded to all CPMs for information and n	Date. 12.08.22 ecessary action.	NHM, Odisha
		7

Mission Director. NHM, Odisha

Key Deliverables for the State of Odisha under NHM 2022-24

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

	Indicator						
SI No.	Туре	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24	
Materna	l Health						
1	Output	ANC Coverage	Percentage of PW registered for ANC	Percentage	88	90	
2	Output	ANC registration in 1st trimester of pregnancy (within 12 weeks)	Numerator: Total number of PW registered for ANC Denominator: Total number of estimated pregnancies	Percentage	90	95	
3	Output	Pregnant Women who received 4 or more ANC check-ups		Percentage	85	90	
4	Output	Identification of HRP	Numerator: Total number of PW registered in 1 st Trimester Denominator: Total number of PW registered for ANC	Percentage	7	10	
5	Output	Management of HRP	% of PW received 4 or more ANC check-ups	Percentage	7	10	
6	Output	Institutional Deliveries	% of institutional deliveries out of total ANC registration Numerator: Total number of institutional deliveries (public + private) Denominator: Total number of PW registered for ANC	Percentage	87	90	
7	Output	National Certification of LRs & OTs under LaQshya	% of nationally certified LRs and OTs under LaQshya against target Numerator: Total number of nationally certified LRs & OTs. Denominator: Total number of LaQshya identified LRs and Ots	Percentage	61.1	100	
7.1			LaQshya LR	Number	51	93	
7.2			LaQshya OT	Number	51	74	
8	Output	Public Health facilities notified under SUMAN	Percentage of public health facilities notified under SUMAN against target	Percentage	100	100	
8.1		Public Health facilities notified under SolviAN	Suman facilities	Number	754	1505	
9	Output	Maternal death review mechanism	% of maternal deaths reviewed against the reported maternal deaths. Numerator: Total no. of maternal deaths reviewed Denominator: Total no. of maternal deaths reported	Percentage	90	90	
10	Output	JSY Beneficiaries	Percentage of beneficiaries availed JSY benefits against RoP approval Numerator: Total no. of JSY beneficiaries paid JSY benefits Denominator: Total no. of beneficiaries approved in RoP Source: State Report	Percentage	100% of RoP targets	100% of RoP targets	
10.1		Operationalization of MCH Wings	% of MCH Wings Operational against total MCH wings sanctioned.	Percentage	75% (13 additional)	97% (16 additional)	
Child Hea	alth (CH) and			J		, i	
11	Output	SNCU successful discharge rate	SNCU successful discharge rate out of total admission (%) Numerator: No. of sick and small new-borns discharged successfully (Unsuccessful denotes Death, LAMA and referral) Denominator: Total no. of sick new-borns admitted in SNCUs	Percentage	Sustain > 80%	80%	
12	Output	Functionality of SNCUs	Percentage of Districts with functional SNCU out of total approval in RoP Numerator: Total number of districts with functional SNCUs (with functional equipment, trained HR as per FBNC guideline) Denominator: Total number of district with approved SNCU in RoP	Percentage	100%	100%	
13	Output	HR training in Newborn and Child Health	Percentage of HR trained in New-born and Child Health (NSSK, FBNC, FBNC Observership, NBSU, SAANS and F-IMNCI) against the approval of RoP. Numerator: Total no. of HR (MOs/SNs/ANMs) trained in New-born and Child Health (NSSK, FBNC, FBNC Observership, NBSU, SAANS, F-IMNCI) Denominator: Total no. of HR (MOs/SNs/ANMs) approved in RoP for training in New-born and Child Health (NSSK, FBNC, FBNC Observership, NBSU, SAANS, F-IMNCI)	Percentage	90%	90%	





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
14	Output	Child Death Reporting	Percentage of Child Death Reported against Estimated deaths Numerator: Total no. of Child deaths reported. Denominator: Estimated number of Child Deaths based on latest SRS report (34000)	Percentage	60%	80%
15	Output	Stillbirth Rate	Still Birth Rate Numerator: Total no. of Stillbirth Reported Denominator: Total no. of Reported Deliveries	Rate	< 10 per 1000 births	< 10 per 1000 births
16	Output	SAANS implementation in districts	Percentage of Districts implemented SAANS IEC/ BCC Campaign (100%) against RoP approval Numerator: Total no. of Districts implementing SAANS Campaign (November – February) Denominator: Total no. of Districts approved for implementation of SAANS Campaign (November – February) in RoP	Percentage	100% (30 Districts)	100% (30 Districts)
17	Output	Home visits by ASHAs for New-borns	Percentage of newborns received complete schedule of home visits against total reported live births. Numerator: Total no. of new-borns received complete scheduled of home visits Denominator: Total no. of new-borns	Percentage	90% (Denominator: 436174)	90% (Denominator: 438916)
18	Output	Roll out of HBYC visits in all districts	Percentage of District Roll out HBYC visits against RoP approval with trained ASHAs Numerator: Total no. of districts implementing HBYC visits with trained ASHAs Denominator: Total no. districts approved in RoP for HBYC implementation	Percentage	100% (Denominator:30 districts)	100% (Denominator:30 districts)
19	Output	Paediatric HDU/ ICU unit	Percentage of Districts with functional Paediatric HDU/ ICU unit out of total districts. Numerator: Total no. of districts with functional Paediatric HDU/ ICU unit Denominator: Total no. of districts with the approved Paediatric HDU/ ICU unit in RoP/ ECRP.	Percentage	100% (Denominator:30 districts	100% (Denominator:30 districts
20	Output	MusQan	Percentage of identified facilities certified under MusQan (National) Numerator: Total no. of identified facilities (SNCUs/ NBSUs/ Paediatric Units certified under MusQan (National). Denominator: Total no. of identified facilities (SNCUs/ NBSUs/ Paediatric Units) by State/ UT for certification under MusQan (National).	Percentage	30% (26 SNCUs + NBSUs)	60% (52 SNCUs + NBSUs)
21	Output	Reported Live Birth	% of Live Birth Numerator: Total number of Live Birth reported Denominator: Estimated number of Live Birth (SRS)	Percentage	80%	80%
22	Output	New-born Screening at Delivery points	Percentage of New-borns Screened at the time of birth out of total Live Births Numerator: Number of New-borns Screened at the time of birth Denominator: Total number of Live Birth Reported.	Percentage	90%	90%
23	Output	Functional DEICs	Percentage of DEIC functional with Infrastructure, Essential Equipment and HR as per Guidelines against the RoP approval. Numerator: Number of DEICs functional with Infrastructure, Essential Equipment, HR and training as per Guidelines. Denominator: Total number of DEICs approved in RoP.	Percentage	100% (32)	100% (32)





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
24	Output	RBSK MHTs	Percentage of Government & Government aided schools and Anganwadi Centre covered by RBSK MHTs Numerator: Number of Government & Government aided schools and Anganwadi Centre covered by RBSK MHTs as per RBSK Guideline. Denominator: Total number of Public Schools and Anganwadi Centre in the block Source: State Quarterly Report	Percentage	100% AWC -142268 (2 visits) School - 59010	100% AWC -142268 (2 visits) School 59010
25	Output	Screening of Children in Government & Government aided schools and Anganwadi Centre	Percentage of children screened by RBSK MHTs Numerator: Number of Children in Government & Government aided schools and Anganwadi Centre screened by RBSK MHTs as per RBSK Guideline. Denominator: Total number of Children in Government & Government aided schools and Anganwadi Centre	Percentage	90%	90%
26	Output	Secondary/ Territory management of Conditions specified under RBSK	Number of beneficiaries received Secondary/ Territory management against RoP approval (for surgical intervention specified under RBSK).	Nos.	3270	3270
Immuniz	ation					
27	Output	Full immunization coverage	Percentage of Full Immunization Coverage (FIC) Numerator: Total number of children aged 9-11 months fully immunized with BCG+ Three doses of pentavalent + three doses of OPV + One dose of MRCV Denominator: Total No. of target children in 9-11 months' age group Source: HMIS	Percentage	90%	90%
28	Output	Coverage of birth dose Hepatitis B	Percentage of children receiving birth dose Hepatitis B as against institutional deliveries Numerator: Total no. of infants immunized with birth dose of Hepatitis B. Denominator: Total no. of institutional deliveries Source: HMIS	Percentage	100	100
29	Output	Dropout % of children	Percentage dropout of children from Pentavalent 1 to Pentavalent 3 Numerator: Total no. of children immunized with Pentavalent 1 – Total no. of children immunized with Pentavalent 3 Denominator: Total no. of children immunized with Pentavalent 1 Source: HMIS	Percentage	0	0
30	Output	Dropout % of children	Percentage dropout of children from Pentavalent 3 to MR 1 Numerator: Total no. of children immunized with Pentavalent 3 – Total no. of children immunized with MCV/MR 1 Denominator: Total no. of children immunized with Pentavalent 3 Source: HMIS	Percentage	0	0
31	Output	Dropout % of children	Percentage dropout of children from MR 1 to MR 2 Numerator: Total no. of children immunized with MR 1 – Total no. of children immunized with MR 2 Denominator: Total no. of children immunized with MR 1 Source: HMIS	Percentage	0	0
32	Output	TD10 coverage	Percentage of children receiving Td10 Numerator: Total no. of children ≥ 10 years old immunized with Td10 Denominator: Total no. of children ≥ 10 years of age Source: HMIS	Percentage	>=70	>=70





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
33	Output	Early Initiation of Breastfeeding	Percentage of newborn breastfeed within one-hour birth against total live birth. Numerator: Number of new born breastfeed within one hour of birth. Denominator: Total live births registered in that period. Source: HMIS report	Percentage	96	97
34	Output	Bed Occupancy Rate at Nutrition Rehabilitation Centre (NRC)	Bed Occupancy Rate at Nutrition Rehabilitation Centres (NRCs) Numerator- Total inpatient days of care from 1st April 2022 to 31st March 2023/1st April 2023 to 31st March 2024 Denominator- Total available bed days during the same reporting period Source: State reports	Percentage	75	80
35	Output	Successful Discharge Rate at Nutrition Rehabilitation Centre (NRC)	Successful Discharge Rate at Nutrition Rehabilitation Centres (NRCs) Numerator- 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 2023/1st April 2023 to 31st March 2024 Denominator-Total No. of under-five children exited from the NRC during the same reporting period	Percentage	90	90
36	Output		Percentage of pregnant women given 180 IFA tablets as against pregnant women registered for ANC Numerator: Number of pregnant women given IFA tablets. Denominator: Number of pregnant women registered for ANC in that period.	Percentage	92	95
37	Output	IFA coverage Anaemia MuktBharat	Percentage of children 6-59 months given 8-10 doses of IFA syrup every month Numerator: Total number of children 6-59 months given 8-10 doses of IFA syrup in the reporting month Denominator: Number of children 6-59 months covered under the programme (Target Beneficiaries) Source: HMIS report	Percentage	70	75
38	Output		Percentage of children 5-9 years given 4-5 IFA tablets every month Numerator: Total number of children 5-9 years given 4-5 IFA tablets in the reporting month Denominator: Number of children 5-9 years covered under the programme (Target Beneficiaries) Source: HMIS report	Percentage	80	85
Compreh	ensive Aborti	on Care (CAC)				
			Numerator: Total Number of Induced Abortion Reported			
39	Output	Induced Abortion	Denominator: Total number of registered pregnancy	Percentage		
			Source: RCH Portal Numerator: Total Number of Spontaneous Abortion Reported			
40	Output	Spontaneous Abortion	Denominator: Total number of registered pregnancy	Percentage		
			Source: RCH Portal			





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
41	Output	CAC services	Public Health Facilities equipped with Drugs (MMA Combi pack/ Mifepristone & 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 Numerator: Total no. of Public Health Facilities that are equipped with Drugs (MMA Combi pack/ Mifepristone & Misoprostol), Equipment (MVA/EVA) and Trained Provider (MTP Trained MO/OBGYN)) Denominator: 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 1. 326 Facilities including Non FRU CHCs & 24X7 PHCs and above level of Public Health Facilities to be equipped
42	Output	MO training	Medical Officer trained in CAC against the RoP approval Numerator: Total no. of Medical Officer trained. Denominator: Target of MOs to be trained as per RoP.	Number	120	200
Family Pl	anning (FP)		Scholling Co. Transcription of the most of			
43	Output	PPIUCD acceptance	Percentage of PPIUCD acceptance among Institutional deliveries Numerator: Number of PPIUCDs inserted in public facilities Denominator: Number of institutional deliveries in public facilities Source: HMIS	Percentage	25%	27.50%
44	Output	Injectable MPA users	Percentage of Injectable MPA users among Eligible Couples Numerator: Total number of Injectable MPA doses/4 Denominator: Number of Eligible Couples Source: HMIS/ RCH register	Percentage	0.20%	0.30%
45	Output	Operationalization of FPLMIS	Percentage of Facilities indenting and issuing the stock in FPLMIS out of total facilities (excluding SC) Numerator: Number of Facilities indenting and issuing the stock in FPLMIS (excluding SC) Denominator: Total Number of facilities registered in FPLMIS (excluding SC) Source: FPLMIS	Percentage	50%	95%
Addition	al ROP deliver	ables for Odisha				
45.1		Number of NayiPehel Kits (NPKs) distributed per ASHA	Numerator: Number of NPKs distributed Denominator: Number of ASHAs		4	5
45.2		Number of Saas Bahu Sammellans (SBS) conducted	Number of SBS conducted		7,268	10,800
45.3		% Increase in Male Sterilization performance from 2019-20	Numerator: No. of male sterilizations in current year (-) No. of male sterilizations in 2019-20 Denominator: No. of male sterilizations in 2019-20		100%	150%





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
Adolesce	ent Health/ Ras	shtriyaKishorSwasthyaKaryakram (RKSK)				
			Average monthly Client load at AFHC/month in PE Districts at DH/SDH /CHC level to increase by 25% in 2022-23 and 50% in 2023-24 from the baseline data of 2021-22.			
46	Output	Client load at AFHC	Numerator: Total Clients registered at AFHC.	Nos.	38	46
			Denominator: Number of AFHCs divided by no. of months (per AFHC per month) Source : (HMIS/ Quarterly AFHC Report)			
			Percentage coverage of in-school beneficiaries under WIFS Programme every month.			
47	Output	WIFS coverage	Numerator- Total no in School beneficiaries covered Denominator- Targeted beneficiaries (In School)	Percentage	60	60
			Source –HMIS			
			Percentage coverage of out-of-school (girls) under WIFS Programme every month.			
48	Output	WIFS coverage	Numerator- Total no out of School beneficiaries covered Denominator- Targeted beneficiaries (out of School)	Percentage	50	50
			Source –HMIS			
			Percentage of Peer Educator selected against the target			
49	Output	Selection of Peer Educator	Numerator- Total no PEs selected Denominator- Total No. of PEs to be selected	Percentage	100	100
			Source: State PE Reports			
			Percentage of Peer Educator trained against the Peer Educator selected.			
50		Training of Peer Educator	Numerator- Total no PEs Trained Denominator- Total No. of PEs selected Source: State PE Reports	Percentage	100	100
51	Output	Menstrual Hygiene Scheme coverage	Percentage coverage of Adolescent Girls against the target under Menstrual Hygiene Scheme Numerator- Total no, of adolescent girls receiving sanitary napkins under MHS Denominator- Total No. of adolescent girls to be covered	Percentage	75	75
			Source: HMIS			
			Percentage of the selected Districts implementing School Health & Wellness Programme against the RoP approval.			
52	Output	School Health & Wellness Programme implementation	Numerator- Total no districts implementing SHP. Denominator- Total No. of District selected for SHP	Percentage	100	100
			Source : SHWP Report			





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
53	Output	School Health & Wellness Programme implementation	Percentage of Health & Wellness Ambassadors trained to transact weekly activities in schools in the select distt Numerator- Total no of Health &Wellness Ambassadors (HWAs) trained Denominator- Total no of HWAs to be trained Source: SHWP Report	Percentage	100	100
Pre-Cond	eption & Pre-	Natal Diagnostic Techniques (PCPNDT)				
54	Output	Meeting of statutory bodies	Percentage of District Advisory Committee (DAC) meetings conducted as mandated by Law (6 meetings / Year/District) Numerator- Number of District Advisory Committee (DAC) meetings conducted Denominator-Number of meeting prescribed under the law.(6 meetings / Year/District). Source: State Report	Percentage	100%	100%
National	Iodine Deficie	ncy Disorders Control Programme (NIDDCP)	our our out of the port			
55	Output		Percentage of salt samples tested using Salt Testing Kits (Qualitative testing) by ASHA in identified District. Numerator: Total Number of sample tested by ASHA. Denominator: Number of ASHA *50 samples*12 months. Data Source:State Report	Percentage	75%	75%
56	Output	Monitoring of salt & urine in the State/UT	Percentage of salt samples tested (Quantitative) in Lab (Volumetric method) for estimation of iodine content. Numerator: Number of salt samples tested (Quantitative) in Lab (Volumetric method). Denominator: Number of District *25 samples*12 months. Data Source: State Report	Percentage	75%	75%
57	Output		Percentage of urine samples tested for Urinary iodine estimation. Numerator: Number of urine samples tested for Urinary iodine estimation. Denominator: Number of District *25 samples*12 months. Data Source: State Report	Percentage	75%	75%
58	Output	IDD surveys /resurveys	Percentage of district IDD surveys/ resurveys conducted in State/UT against RoP approval. Numerator: Number of district where IDD surveys/ resurveys conducted. Denominator: No. of Districts approved in RoP. Data Source: State Report	Percentage	100%	100%
59	Output	Implementation of RCH application - Registration Coverage of Pregnant Women and Child (0-1 Year)	Percentage of Registration Coverage of Pregnant Women and Child on pro- rata basis Numerator: Total No. of Registered PW and Child on RCH Portal Denominator: Estimated PW and Child on pro-rata basis.	Percentage	women and Children	(a)100% Registratio n coverage of Pregnant women and Children on pro-rata basis [For States]





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
60	Output	Implementation of RCH application - Service Delivery Coverage of PW	Percentage of Service Delivery Coverage of entitled Pregnant Women for ANC services. Numerator: Total No. of PW received All ANC services (ANC1 + ANC2 + ANC3 + ANC4 + TT1 / TT2 + 180 IFA tablet) Denominator: Total PW expected for Service based on reporting period	Percentage	(a) >80% All ANC services of Pregnant women [For States]	(a) >80% All ANC services of Pregnant women [For States]
61	Output	Implementation of RCH application - Service Delivery Coverage of Child	Percentage of Service Delivery Coverage of entitled Child [0-1 Year] for Immunization services. Numerator: Total No. of Child received All Immunization services (as per National Immunization Schedule) Denominator: Total child expected for Service based on reporting period	Percentage	(a) >80% All Immuniza tion services of Child(0-1 Year) [For States]	(a) >80% All Immuni zation services of Child(0-1 Year) [For States]
62	Output	Implementation of RCH application - Total Deliveries Reported	Percentage of total Delivery reported of Pregnant Women. Numerator: Total No. of Delivery reported Denominator: Total PW expected for Delivery based on reporting period	Percentage	(a) >90% Delivery reported [For States]	(a) >90% Delivery reported [For States]
63	Output	Implementation of ANMOL application	Health provider(ANM) using ANMOL application for entering Data Numerator: Total No. of Users (ANM) doing data entry. Denominator: Total no. active users (ANMs) registered in RCH Portal.	Percentage	(a) >90% Health provider (ANM) are doing data entry on	(a) >90% Health provider (ANM) are doing data entry on
2. NDCP	Flexi Pool					
Integrate	ed Disease Sur	veillance Programme (IDSP)				
64	Output	Weekly Reporting – S form	% of Reporting Units Reported in S form	Percentage	90	95
65	Output	Weekly Reporting – P form	% of Reporting Units Reported in P form	Percentage	90	95
66	Output	Weekly Reporting – L form	% of Reporting Units Reported in L form	Percentage	85	95
67	Output	Weekly Reporting – Lab Access of Outbreaks	Lab Access of Outbreaks reported under IDSP excluding Chickenpox, Food Poisoning, Mushroom Poisoning	Percentage	90	95
National	Tuberculosis	Elimination Programme (NTEP)				
68	Output	Total TB cases notified (Both public and private sectors	% of cases notified against target Numerator: No. of TB cases notified (public + private) Denominator: Target approved by Gol	Percentage	65000	65000
69	Output	Expansion of rapid molecular diagnostics for TB	% of blocks with rapid molecular diagnostics	Percentage	314	314
70	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	5.9	5.9
71	Output	Nikshay Poshan Yojana	% Of eligible patients receiving at least first instalment of DBT Numerator: No. of eligible patients receiving at least first instalment of DBT Denominator: No. of eligible patients	Percentage	100	100
72	Output	Districts with TB free Status	No. of districts to achieve TB free Status # Bronze # Silver # Gold #TB Free district/City	Nos.	10 district for bronze, state for bronze	Additional 10 district for bronze







SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
National	<u> </u>	ol Program (NRCP)				
73	Output	Availability of Rabies Vaccine and Rabies Immunoglobulins	ARV available at the Health Facilities as per Essential Medical List Numerator- Total No. of Health Facility till PHC level having stocks of ARV Source- DVDMS Portal/State Monthly report Denominator- Total No. of Health Facilities till PHC level (Source- Rural Health Statistic- MoHFW)	Percentage	Availabil ity of Stock as per EML at 80% health Facilities till PHC Level	Availab ility of Stock as per EML at 80% health Facilitie s till PHC Level
74	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	as per EML at 70 %	Availab ility of Stock as per EML at 70% he alth Facilitie s till CHC Level
National	Viral Hepatiti	s Control Programme (NVHCP)				
75	Output	Management of Hepatitis C -under the program	Percentage of Hepatitis C Patients benefited i.e number who received treatment against target.	Percentage	90 (1251)	90(1251)
76	Output	Management of Hepatitis B -under the program	Percentage of Hepatitis B Patients benefited i.e number who received treatment against target	Percentage	90(883)	90(1033)
77	Output	Pregnant women screened for hepatitis B	Percentage of pregnant women screened for hepatitis B (HBsAg) against the target (Institutional Deliveries)	Percentage	100(595596)	100(595596)
78	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(4348)	100(4348)
National	Leprosy Elimi	nation programme (NLEP)	·			
79	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	22
80	Output	Certification of Districts as Leprosy Free	No of Districts certified as Leprosy Free	Number	0	7
81	Output	Clearance of backlog of Reconstructive Surgeries (RCS)	Number of RCS conducted against backlog of RCS	Numbers	75	80
82	Output		No. ofdistricts with API <1	Numbers	26	27
83	Output	Malaria Reduction in APIat	Annual blood Examination Rate (ABER)	Percentage	To sustain API>15%	To sustain API>15%
84	Output	Districtlevel	%IRSpopulation coveragein each round	I Round	>85%	>85%
85	Output		%ikspopulation coveragem each round	II Round	>85%	>85%
86	Output		No. of Districts Certified as Malaria Free	Number	3	4
87	Output	Lymphatic Filariasis	The proportion of districts/IUs with coverage>65% for DA	Percentage	10	4
88	Output		and 85% for IDA of the total population (admin coverage/ independent assessment)	Not applicable	6 State has only agreed to 6)	12
89	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
90	Output			Number	50% Hydrocele cases: 10000	50% Hydrocele cases: 10000
91	Output]	Cumulative number of endemic districts which achieved mf rate<1% verified by TAS1	Number	11	11
92	Output		Cumulative number of districts to achieve DiseaseFreeStatus-LF as per TAS 3 Clearance	Number	7 (To sustain)	7 (To sustain)







SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
93	Output	Dengue& Chikungunya	DengueCaseFatality	Percentage	CFR	CFR
		- G G. 7.	Rate at Statelevel		<1%	<1%
94	Output		Number of blocks achievedKala-azar elimination i.e.<1 case per 10000 population at block level	Number		
95	Output		Number of blocks sustained Kala-azar elimination	Number	1	
96	Output	Kala-azar	% IRS population coveragein each round	Percentage	Non endemi	for Kala-azar
97	Output	_		Percentage	<u> </u>	
98	Output		% Complete treatment of KA Cases and HIV/VL	Percentage	1	
99	Output		% Complete treatment of PKDL Cases	Percentage		ı
National	Tobacco Cont	rol Programme (NTCP)				
100	Output	Increase in availability of Tobacco Cessation Services available	No. of districts with Tobacco Cessation Centers	Number	30	30
101	Outcome	Improved access for Tobacco Cessation Services	No. of People availed tobacco cessation services in 2022-24	Number	40000	100000
National	Mental Health	n Programme (NMHP)				
102	Output	Improved coverage of mental health services	Percentage of districts covered District Mental Health Unitsoperationalized.	Percentage	100	100
103	Output	Improved coverage of mental health services	Percentage increase Number of persons catered through District Mental Health Units	Number/ Percentage	25% Increase	25% Increase
National	Programme fo	or Health Care of Elderly (NPHCE)				
104	Output	Provision of primaryand secondary Geriatric health care services at District Hospital and below	Numerator: No. of DH with Geriatric Unit (atleast 10 beds) Denominator : No. of total DH in the state	Number	32/32	32/32
105	Output	Provision of primaryand secondary Geriatric health care services at District Hospital and below	Numerator: No. of DH with physiotherapy unit for elderly Denominator: No. of total DH in the state	Number	32/32	32/32
106	Output	Provision of primaryand secondary Geriatric health care services at District Hospital and below.	Numerator: No. of CHCs with physiotherapy unit Denominator: No of total CHCs in the state	Number	225	384
National	Programme fo	or Prevention and Control of Cancer, diabetes,	, cardiovascular diseases and Stroke (NPCDCS)			
107	Output	NCD App	% registration done in the NCD App against 30+ population target	Percentage	1,71,73,384 (100%)	1,73,45,118 (100%)
108	Output	Setting up of NCD Clinics at District Hospitals	Percentage of DHs with NCD Clinics	Number	100% 30	100% 30
109	Output	Setting up of NCD Clinics at CHCs	Percentage of SDHs/ CHCswith NCD Clinics	Number	417 100%	417 100%
National	Programme fo	or Control of Blindness and Vision Impairment	(NPCB&VI)			
110	Output	Eye care services under NPCB and VI provided at District level and below District level	Percentage achievement of Cataract operationsagainst targets	Percentage	150000/ 227000 (66%)	165000/ 230000 (72%)
		de District level and below District level		Number	227000	230000
111	Output	Eye care services underNPCB and VI provided at primary, secondary at District level and below level	Percentage achievement of Collection of donated eyes for corneal Transplantation against targets	Percentage	1400 (100%)	1500 (100%)
				Number	1400	1500







SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
112	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	50000	100000
113	Output	Cataract backlog FreeCertification	No. of Districts Certified as Cataract backlog Free	Number	-	1
Pradhan	Mantri Natio	nal Dialysis Program (PMNDP)				
114	Output	Dialysis facilities in all districts	No. of districts with Dialysis facility under PMNDP	Number	30	30
115	Output	Number of Sessions held in the month	Estimated number of dialysis session (in Lakhs)	Number	0.145	0.145
116	Output	Peritoneal dialysis services under PMNDP	Estimated number of patients planned for peritoneal dialysis services	Number		
117	Output	Improvement in sample testing in fluoride affected districts	Percentage of water samples tested for Fluoride level against number of samples asper norms.	Percentage	5% increase from previous year	700
118	Output	Medical management of diagnosed fluorosis cases including supplementation, surgery, and rehabilitation.	Percentage of patientsprovided medical management to diagnosed fluorosis cases out of the total diagnosed cases.	Percentage	90% of total diagnosed cases	100
119	Output	Hearing Aid	Total No. of Hearing Aid fitted	Number	10% Increase	10% Increase
120	Output	Audiometry Facilities	No. of Districts having audiometry facilities	Number	32	32
121	Output	Palliative care services under NPPC programme	Total no. of District Hospitals providing palliative care services	Number	32	32
122	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 (79%) (253 +100)	96 (100%) (353+96)
123	Output	Improving access to healthcare in urban India	Number of operational urbanhealth facilities (UPHCs and UCHCs) increased.	Number	7 Nos. All (100%)	7 Nos. All (100%)
			(b) Operational UPHC:	Number	110	116
124	Output	Improving access to healthcare in urban India	No. of UPHCs converted to Health wellness centres (HWCs) increased.	Number	110 Nos. All (100%)	116 Nos. All (100%)
125	Output	Improving access to healthcare in urban India	Increased number of UCHCs and UPHC-HWCs offering specialist services.	Number	110 Nos. All (100%)	116 Nos. All (100%)
126	Output	Improving access to healthcare in urban India	Annual utilisation of urban health facilities (UPHC- HWCs) increased with at least 50% visits made by women.	Percentage	53	54
127	Output	Improving access to healthcare in urban India	a)No of Individuals screened for NCD at UPHC-HWC - Hypertension and Diabetes Numerator: Individuals screened for NCD- Hypertension and Diabetes Denominator: Total 30 years and above, Urban population	Percentage	30	40
127	Output		b)No of Individuals screened for NCD at UPHC-HWC -Oral cancer, Breast Cancer and Cervical Cancer Numerator: Individuals screened for NCD- Oral cancer, Breast Cancer and Cervical Cancer Denominator: Total 30 years and above, Urban population		20	30
128	Output	Providing quality healthcare services in Urban India	Urban pregnant women accessing antenatal care at UPHC- HWC and UCHCincreased.	Percentage	86	86
129	Output	Providing quality healthcare services in Urban India	Number of Urban Health and Nutrition Day (UHND) held against planned	Percentage	90	95







SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
	<i>"</i>		a) No of patients treated for Diabetes at UPHC-HWC			
			Numerator: Individuals received treatment for NCD- Diabetes	Number	100	100
130	Output	Providing quality healthcare services in Urban	Denominator: Total individuals diagnosed for NCDs- Diabetes			
130	Output	India	b) No of patients treated for Hypertension at UPHC-HWC			
			Numerator: Individuals received treatment for NCD- Hypertension		100	100
			Denominator: Total individuals diagnosed for NCDs- Hypertension			
131	Output	Implementation of DVDMS in PHCs	Percentage of Health Facilities upto PHCs implementing the DVDMS	Percentage	100	100
132	Output	NQAS certified public health facilities (National + State)	Cumulative Number of NQAS certified public health facilities	Number	16 DHH, 8 SDH, 74 CHC, 257 PHC, 38 HWC-SC	19 DHH, 13 SDH, 112 CHC, 385 PHC, 75 HWC-SC
133	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	DHH-30, SDH/CHC- 196, PHC/UPHC-400, HWC-SC-696	DHH-32, SDH/CHC- 229, PHC/UPHC-441, HWC-SC-800
134	Output	Free Diagnostics Services May be kept	Percentage of Public Healthcare Facility undertaking all essential diagnostic tests as per the FDSI guidelines (SC:14/PHC:63/CHC:97/SDH:111/DH:134) Numerator: Number of Healthcare Facility undertaking full menu of the essential diagnostic tests prescribed in the FDSI guidelines. Denominator: Total Number of Primary Healthcare Facilities available in the State (Upto DH level)	Number	SC:12 PHC:31 CHC:58 SDH:64 DH:120	SC:13 PHC:55 CHC:59 SDH:74 DH:128
135	Output	Number of District Hospitals having Blood Banks	Percentage (%) of District Hospitals having functional Blood Bank	Percentage	100	100
136	Output	Voluntary blood donation	Voluntary blood donation against the blood collection units targeted for replacement/ donation	Percentage	100	100
137	Output	Blood component separator	Percentage of blood banks having blood component separator	Percentage	38% (21 nos)	43% (24nos)
138	Output	No of ICHHcentres 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
139	Output	Number of operational Health &WellnessCenters	Numerator: Total operational AB-HWCs in the state Denominator: Total target of AB-HWCs to be operationalised for the respective FY	Percentage	100% (SHC HWC - 5400 PHC HWC - 1288 UPHC HWC - 106 Total - 6794)	100% (SHC HWC - 5400 PHC HWC - 1288 UPHC HWC - 106 Total - 6794)
140	Output	FunctionalAB-HWCssatisfying advanced functionality Criteria	Numerator: No. of AB-HWCs providing all 12 expanded range of services. Denominator: Total functional AB-HWCs	Percentage	100	100
141	Output	Footfall at AB-HWCs (Receiving services for Preventive, promotive,	A. Numerator: No. of AB- HWCs in rural areas reporting minimum 5% annual increase in footfalls over preceding year Denominator: Number of operational AB-HWCs in rural areas (SHC- HWC+PHC-HWC)	Percentage	100	100
141	Julput	curative, rehabilitati ve and palliative care)	B. Numerator: No. of AB- HWCs in urban areas reporting minimum 15% annual increase in footfalls over preceding year. Denominator: Number of operational AB-HWCs in urban areas (UPHC- HWC+UHWC)	Percentage	100	100
142	Output	Medicine at AB- HWC	Percentage of AB-HWC fulfilling minimum 80% of expanded range of medicines as per Essential list (Medicines: SHC-HWC- 105; PHC-HWC-172) against number of functional AB- HWCs.	Percentage	100	100





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
143	Output	Diagnostics at AB- HWC	Percentage fulfilling minimum 80% of expanded range of diagnostics as per Essential list (Diagnostics: SHC-HWC-14;PHC-HWC-63) againstnumber of functional AB-HWCs.	Percentage	85	87
144	Output	Training on AB-HWC primaryhealth careteams (ASHA, MPW, CHO, SNand MO) on expanded service packages	Numerator: Total number of AB-HWC primary healthcare team members (ASHA, MPW, CHO, SN and MO) trained on expanded service packages Denominator: Total number ofprimary healthcare teammembers (ASHA, MPW, CHO, SN and MO) in the state	Percentage	90	90
145	Output	CBAC form updation	Numerator: Number of Individuals for whom CBAC form was filled. Denominator: Total catchment population (30+) under all operational AB-HWCs in the State.	Percentage	100% annualy	100% annualy
146	Output	FunctionalAB-HWCsproviding wellness services	Numerator: Number of wellness sessions conducted at operational AB-HWCs in the state Denominator: Total number of wellness sessions (at the rate of minimum 10 wellness sessions per month for all operational AB-HWCs in the state)	Percentage	100	100
147	Output	Tele- consultations started at AB- HWCs	Numerator: Number of teleconsultations conducted at AB-HWCs in the state) operational AB-HWCs in the state Denominator: Total number of teleconsultations (at the rate of minimum 25 teleconsultations per month for all operational	Percentage	50	60
148	Output	To the set of the set	Numerator: Total no. of Individuals received treatment for Hypertension Denominator: Total individuals diagnosed for Hypertension	Percentage	80	70
149	Output	-Treatment compliance	Numerator: Total no. of Individuals received treatment for Diabetes Denominator: Total individuals diagnosed for Diabetes	Percentage	80	80
150	Output	JAS functioning	Numerator: Number of JASconducted at least 10 meetings in a year Denominator: Total operational AB-HWCs	Percentage	80	90
151	Output	FunctionalAB-HWCawarded Kayakalp Awards	Numerator: Number of facilities awarded district level Kayakalp awards Denominator: Total number of functional AB-HWCs	Percentage	15% (Total - 1006 SHC - 636/5400 PHC+ UPHC HWC - 330/1394)	17% (Total - 1151 SHC HWC - 740/5400 PHC & UPHC HWCs - 411)
152	Output	Functioning of VHSNC(in rural areas)	Numerator: Number of VHSNCs that conducted atleast 10 meetings in the year (against the norm of minimum one meeting every month) Denominator: Total VHSNCs formed	Percentage	99	99
453		AB-HWC primary healthcare	a) Numerator: Number of AB- HWCs whose primary healthcare teams have received timely incentives (Performance Linked Payment and Team Based Incentives) minimum 12 times a year Denominator: Total number of operational AB-HWCs	Output	100	100
153 C	Output	team's incentives	b) Numerator: Number of ASHAs who received timely incentives(Routine-recurring and program incentives) minimum 12 times a year Denominator: Total number of in-position ASHAs	Output	100	100
154	Output	Co- location of AYUSH facilities	Number of Public Health Facilities with Co-located AYUSH OPD Services	Number	1485	1485





SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
155	Output	NHM HR in place	Percentage of HRH in Position out of total posts approved under NHM* (*Depending on the actual status, the target may be changed as per NPCC discussion)	Percentage	95	95
			Percentage of HRH available as per IPHS (HR in Place/IPHS requirement x 100) for six key staff categories* (*Depending on the actual status, the target may be changed as per NPCC discussion)			
			o MPW (Male+Female)		90	95
			o Staff Nurses		90	95
156	Output	HRH availability as per IPHS	O Lab technicians** (**Reduction in gap% applicable only for those levels of facilities where lab services including HR for lab have been outsourced)	Percentage	60	70
			o Pharmacists		98	98
			o Medical Officer-MBBS		99	99
			o Clinical specialists		40	40
157	Output	Equipment CAMC/ AMC	Percentage of Equipment Covered under Comprehensive Maintenance Contract/ Annual Maintenance Contract/ BMMP	Percentage	73% under BEMP 10% under Warranty 1% under progress to include under BEMP 5% Not In BEMP scope 11% for Condemnation Total traget Asset:51507	77% under BEMP 10% under Warrant 1% under progress ti include under BEMF 1% Not In BEMP scope 3% for Condemnatio Total traget Asset:54988
158	Output	Equipment Upkeep time	Percentage of equipment uptime at each level of Public health facility as per BMMP guidelines i.e. (PHC-80%; CHCs-90% and DH - 95%)	Percentage	A.DHH-97% B.CHCs & SDHs- 95% C.PHCs-90%	A.DHH-97% B.CHCs & SDHs- 95% C.PHCs-90%
159	Output	AERB Compliance	Percentage of Public Health Facility certified as per AERB compliance	Percentage		
	Output	HMIS Reporting	Ensuring timely reporting of data by the State Data Manager/M&E/HMIS personnel by 20th of following month.	Percentage	99	99
161	Output	Infrastructure (Rural and Urban health care facilities- a. DH, b. SDH, c. CHCs, d. UCHCs, e. UPHCs, f. PHCs, g. Sub Health Centers, h. Others)		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
162	Output	IPHS compliance	% Of health care facilities achieved IPHS compliance.	Percentage	10	25
102	σαιραί	In 115 compliance	70 of ficultificate facilities admiced if 115 compiliance.		National Health I	

SI No.	Indicator Type	Indicator Statement	Indicator	Unit	Target 2022-23	Target 2023-24
163	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	70	80
164	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
165	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	100	100
166	Output		Average response time per vehicle	Minutes	28min	25min
167	Output	MMU	Avg. no. of trips per MMU per month	Numbers		
168	Output	IVIIVIO	Average no. of lab Number investigations per MMU per s day.	Numbers		
			% of District hospitals- initiated any of the following courses:-	Percentage		
			(a) DNB/ NBE courses	Percentage	50	100
169	Process	DH Strengthening as knowledge Hub	(b) Nursing courses -			
103	17100035	Dit Strengthening as knowledge nub	ANM	Percentage	21	21
			GNM	Percentage	0	0
			BSC NURSING	Percentage	10	15
			(C)Allied health care courses like CPS	Percentage	100	100







Annexure 2:

Conditionalities Framework 2022-24

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 is to be 90%.

SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
1.	Incentive or penalty based on NITI Aayog ranking of states on 'Performance on Health Outcomes'	Based on the ranking which will measure incremental changes over the base: a. States showing overall improvement to be incentivized: +40 b. States showing no overall increment get no penalty and no incentive: 0 c. States showing decline in overall performance to be penalized: -40 % of incentive/penalty to be in proportion to overall improvement shown by the best performing state and the worst performing state: +40 to -40 points	NITI Aayog report	+40 to -40
2.	DH Ranking	At least 75% (in Non EAG) and 60% (in EAG and NE states) of all District Hospitals to have at least 8 fully functional specialties as per IPHS: 10 points incentive. Less than 40% in Non EAG and 30% in EAG to be penalized up to 10 points	NITI Aayog DH ranking report	+10 to -10
3.	AB-HWCs State/UT Score	Based on overall score of HWC conditionality (out of 100 marks) a. Score more than 75: +25	AB-HWC portal	+25 to -25



SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
		 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 		
4.	Implementation of Ayushman Bharat-School Health and Wellness Ambassador initiative	Percentage of Health and Wellness Ambassadors (HWAs) trained to transact weekly activities in schools in the selected districts a. >75%: 5 points incentive (+5) b. 25%-75%: 3 points incentive (+3) c. < 25%: 3 points disincentive (-3) d. NIL 5-point disincentive (-5)	AH division, MOHFW	+5 to -5
5.	Implementation of DVDMS or any other logistic management IT software with API linkages to DVDMS up to PHC level	DVDMS implementation up to PHC/UPHC* a. in 100%PHC/UPHC: +5 b. 80% or above but less than 100%: +3 c. 50% or above but less than 80%: -3 d. in less than 50%: -5	DVDMS Portal or Any other similar system with API linkages to DVDMS	+5 to -5
6.	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 d. less than 50%: -5	RCH Portal or similar state portal	+5 to -5





SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]			
	Human Resources for Health						
7.	A. Increase 'in- place' regular service delivery HR	Increase in 'in-place' Regular service delivery cadres of MPW (Male & Female), Staff Nurses, laboratory technicians, Medical Officers, and specialists as on 31 st March 2023 against 31 st March 2022 and as on 31 st March 2024 against 31 st March 2023. a. More than 80%: +7.5 b. More than 50% but up to 80%: +5 c. More than 20% but up to 50%: +3 d. Up to 20% - Nil e. Increase in vacancy-7.5	State notifications, advertiseme nts, and PIP HRH Division NHSRC	+7.5 to -7.5			
	B. Increase 'in - place' contractual HR	Increase in 'in-place' contractual service delivery cadres of MPW (Male & Female), Staff Nurses, laboratory technicians, Medical Officers, and specialists as on 31st March 2023 against 31st March 2022 and as on 31st March 2024 against 31st March 2023. a. More than 80%: +7.5 b. More than 50% but up to 80%: +5 c. More than 20% but up to 50%: +3 d. Up to 20% Nil e. Increase in vacancy-7.5	State notifications, advertiseme nts, and PIP HRH Division NHSRC	+7.5 to -7.5			
8.	District wise RoP uploaded on NHM website	District wise RoP uploaded on NHM website within 30 days of issuing of RoP by MoHFW to State or by 31 st May 2022 (whichever is later) a. 100% districts whose ROPs for FY 2022-24 are uploaded on state NHM website: +5 b. Fewer than 100% districts whose ROPs for FY 2022-24 are uploaded on state NHM	State NHM website and D.O. letter	+5 to -5			





SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
		website: -5		
	Implementation o	of National Viral Hepatitis Control P	rogramme (NVH	CP)
	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
	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
9.	C. Percentage of pregnant women screened for hepatitis B (HBsAg) against the target (Institutional Deliveries)	 a. More than 90%: incentive 3 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
	D. Percentage of newborns administere d HBIG among newborns delivered to HBsAg positive pregnant women at health care facility	 a. More than 90%: incentive 3 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





SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
10.	A. % districts covered under Mental health program and providing services as per framework	a. 100% of the districts covered: incentive 5 points (+5) b. 70% districts in Non-EAG and 60% districts in EAG states covered: incentive 3 points (+3) c. Less than 60% districts in EAG states and less than 70% districts in Non EAG states covered: penalty 3 points (-3) d. If less than 40% districts covered: penalty 5 points (-	Report from Mental Health Division, MoHFW	+5 to -5
	B. 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 b. If not: -1	Report from Mental Health division, MOHEW	+5 to -5
	National Tuberculo	sis Elimination Programme (NTEP)	<u> </u>	<u> </u>
11.	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 Reports	+5 to -5





SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
	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
	C. Percentage of AB-HWCs providing drugs to TB patients	 a. More than 80% of AB-HWCs providing drugs to TB patients: +5 b. 60% to 80% of AB-HWCs providing drugs to TB patients: +2.5 c. Less than 60% of AB-HWCs providing drugs to TB patients: -2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: -5 	HWC report	+5 to -5
	Implementation of	National Quality Assurance Program	nme and LaQshy	/a
12.	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) * 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 	Quality and Patient Safety Division, NHSRC	+10 to-10





SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
	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 and Patient Safety Division, NHSRC	+5 to-5
13.	Compliance to IPHS for infrastructure	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 FY 2023-24 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: HWC, PHC, CHC, SDH and DH, cumulative compliance would be taken	State Reports	+20 to -20





SI. No	Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty ^[2]
14.	Implementation of National Ambulance Services as per norms:	Sufficient fleet of ALS (one per 5 lakh population) and BLS (one per 1 lakh population) deployed as per norms a. Sufficient Fleet of ALS (one per 5 lakh population) deployed as per norms - +5 b. Sufficient Fleet of BLS (one per 1 lakh population) deployed as per norms- +5 c. If ambulances not as per norms: No penalty or incentive	NHM PIP	+10 to 0
15.	Increase in State Health Budget	 a. Increase in State heath 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

 $^{^{[1]}}$ 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.

^{*}PHC/UPHC data as per RHS 2021-22

 $[\]ensuremath{^{**}\text{Estimated}}$ births, new-borns, PWs as per RGI estimates as communicated by the HMIS division

HWC Scoring for NHM Conditionality FY 2022-23 and 2023-24

Method for giving Score to the State for AB-HWCs (it has two Parts):

- 1. Indicator for achieving State Level AB-HWC operationalization Targets:
 - a. 10 marks for achieving State Level AB-HWC operationalization Targets
 - b. 10 marks for the states/UTs creating regular cadre of CHO position for AB-HWC
 - c. 15 marks for achieving more than State Level AB-HWC operationalization Targets
- 2. Indicators for AB-HWC Scoring max 75 marks Average scoring of all the functional AB-HWCs will be taken to arrive at the same.

			FY 20	FY 2022-23		FY 2023-24	
S. No	Criterion	Proposed Indicator	Max Score for SHC- HWC	Max Score for PHC- HWC	Max Score for SHC- HWC	Max Score for PHC- HWC	
1	Functional AB- HWCs satisfying advanced functionality Criteria	HWC-01: Functional AB- HWCs providing all 12 expanded range of services	15	10	15*	10*	
2	Footfall at AB-HWCs (Receiving services for Preventive, promotive, curative, rehabilitative and palliative care)	HWC-02: AB-HWCs in rural areas reporting minimum 5% annual increase in footfalls over preceding year AB-HWCs in urban areas reporting minimum 15% annual increase in footfalls over preceding year.	10	10	10	10	
3	Medicine & Diagnostics at AB-HWC	HWC-03: AB-HWC fulfilling expanded range of medicines and diagnostics as per Essential list of both (Medicines: SHC-HWC- 105; PHC-HWC-172 & diagnostics: SHC-HWC- 14; PHC-HWC- 63)	10	10	10	10	
4	Functional HWCs providing wellness Services	HWC-04: AB-HWCs providing a minimum of 10 Wellness sessions per month	10	10	10	10	





			FY 20	022-23	FY 2023-24	
S. No	Criterion	Proposed Indicator	Max Score for SHC- HWC	Max Score for PHC- HWC	Max Score for SHC- HWC	Max Score for PHC- HWC
6	Quality Care	HWC-06: Functional AB- HWCs scoring more than 70% in Kayakalp peer assessment	5	10	5	10
7	Leveraging IT	HWC-07: Utilization of CPHC-NCD App for screening and tracking of all NCD patients	5	10	5	10
8	Continuum of Care	HWC-08: Number of AB- HWCs conducting minimum 25 teleconsultations per month.	5	5	5	5
9	Community Engagement	HWC-09: Constitution of JAS and conduction of at least 10 meetings in a year.	10	5	10	5
10	Payment of PLPs and TBIs	HWC-10: AB-HWCs whose primary healthcare teams have received timely incentives (Performance Linked Payment and Team Based Incentives) at least 10 times a year	5	5	5	5
	75				75	75

^{*}States/UTs are to operationalize additional SHC and PHC as AB-HWC as per RHS 2019



HWC-01: Functionality Criteria indicator

	Basic Functionality Criteria	Provision of services all 12 expanded range of service packages		
1)	HR availability	1) Care in pregnancy and Childbirth		
2)	Infrastructure Strengthening/Branding	2) Neonatal and Infant health services		
3)	Availability of Free Medicines	3) Childhood and Adolescent Health serv	vices	
4)	Availability of Free Diagnostics	including immunization		
5)	Completion of CBAC enumeration	4) Family Planning, Contraceptive serv	/ices	
	forALL 12 packages as per revised CBAC	and other Reproductive Health Service	S	
	form	5) Management of Communicable disea	ises:	
6)	Capacity Building of primary healthcare	National Health program	mes	
	team on	(Tuberculosis, leprosy, Hepatitis,	HIV-	
	 a. expanded package of services 	AIDS, Malaria, Kala- azar, filariasis	and	
	b. 'Eat Right'	Other vector borne diseases)		
		6) Management of Communicable disease	es	
		and General outpatient care for acute		
		simple illnesses and Minor ailments		
		7) Prevention, Screening and Managemer	nt	
		of non-Communicable diseases		
		8) Care for Common Ophthalmic and ENT problems	-	
		9) Basic Oral Health Care		
		10) Elderly Care and Palliative Healthcare		
		11) Emergency medical services include	ling,	
		including for Trauma and burn.		
		12) Screening and basic management	of	
		Mental health ailments		

HWC-04: Criteria for Wellness Indicator

- 1. Wellness / Yoga sessions up to 10 session/month
- 2. Health calendar activity conducted (24 out of 39 activities per year)
- 3. As per Official Memorandum F.No. 7 (l4)/2020-NHM-I, following health promotion activities to be undertaken
 - a. Conduction of Community-based sessions in at least two Anganwadi Centers (AWCs) per month on lifestyle and dietary modification; alcohol and tobacco cessation; road safety/ occupational injury including agricultural labourers; personal hygiene, nutrition, safe drinking water, sanitation, and other public health measures.
 - b. Sessions conducted in schools in coordination with School Health and Wellness ambassadors





RCH.3 RCH.4 Immunization 0.00	Budget Abstract		FM	MCH, Balas	ore		
RCH.2 PC & PNDT Act	Sl. No.	Name of the Pool	FMR	Component	F.Y. 2022-23	F.Y. 2023-24	Total Budget
RCH.3 Child Health Child Health Child Health RCH.4 Immunization Child Health Child Health RCH.4 Immunization Child Health Child Heal	1		RCH.1	Maternal Health	0.00	0.00	0.00
RCH.4 Immunization	2		RCH.2	PC & PNDT Act	0.00	0.00	0.00
S RCH Flexible Pool RCH.5 Adolescent Health 0.00 0.00 0.00 0.00 0.00 0.00 RCH.6 Family Planning 3.14 3.14 5.28 0.00	3		RCH.3	Child Health	0.00	0.00	0.00
RCH Flexible Pool RCH.6 Family Planning 3.14 3.14 6.28 RCH.7 Nutrition 0.00	4		RCH.4	Immunization	0.00	0.00	0.00
RCH.7 Nutrition	5		RCH.5	Adolescent Health	0.00	0.00	0.00
RCH.8	6	RCH Flexible Pool	RCH.6	Family Planning	3.14	3.14	6.28
RCH.8 Control Programme (NIDDCP) 0.00	7		RCH.7	Nutrition	0.00	0.00	0.00
9	8		RCH.8	_	0.00	0.00	0.00
NDCP-1			RCH Sub T	otal (Rs. In Lakhs)	3.14	3.14	6.28
Programme (IDSP) National Vector Borne Disease Control Programme (NPBCP) NDCP-2 National Vector Borne Disease Control NDCP-3 National Leprosy Eradication NDCP-3 National Leprosy Eradication NDCP-4 National Tuberculosis Elimination NDCP-4 National Tuberculosis Elimination NDCP-5 National Tuberculosis Elimination NDCP-5 NDCP-5 National Viral Hepatitis Control NDCP-5 N	0		NDCD 1	Integrated Disease Surveillance	0.00	0.00	0.00
10	9		NDCP.1	Programme (IDSP)	0.00	0.00	0.00
NDCP.3	10		NDCD 2	National Vector Borne Disease Control	0.00	0.00	0.00
11	10		NDCP.2	Programme (NVBDCP)	0.00	0.00	0.00
NDCP National Tuberculosis Elimination NDCP National Tuberculosis Elimination NDCP National Tuberculosis Elimination NDCP National Tuberculosis Elimination NDCP National Viral Hepatitis Control NDCP National Viral Hepatitis Control NDCP National Rabies Control Programme NDCP National Rabies Control Programme NDCP NDCP National Rabies Control Programme NDCP NDCP NDCP Programme for Prevention and NDCP NDCP NDCP NDCP State specific Initiatives and NDCP NDCP State specific Initiatives and NDCP NDCP State specific Initiatives and NDCP NDCP NDCP State specific Initiatives and NDCP	11		NDCD 2	National Leprosy Eradication	0.00	0.00	0.00
12 NDCP, 4 Programme (NTEP) 0.00 0.00 0.00 0.00 0.00	11		NDCP.3	Programme (NLEP)	0.00	0.00	0.00
NDCP Flexi Pool NDCP.5 National Viral Hepatitis Control Programme (NVHCP) 0.50 0.50 1.00	12		NDCD 4	National Tuberculosis Elimination	0.00	0.00	0.00
13	12		NDCP.4	Programme (NTEP)	0.00	0.00	0.00
NDCP.6 National Rabies Control Programme 0.00	12	NDCP Flexi Pool	NDCD F	National Viral Hepatitis Control	0.50	0.50	1 00
14	13		NDCP.5	Programme (NVHCP)	0.50	0.50	1.00
NDCP.7 Programme for Prevention and 0.00 0.	1.4		NDCD C	National Rabies Control Programme	0.00	0.00	0.00
15	14		NDCP.6	(NRCP)	0.00	0.00	0.00
Control of Leptospirosis (PPCL)	1.5		NDCD 7	Programme for Prevention and	0.00	0.00	0.00
NDCP.8	15		NDCP.7	Control of Leptospirosis (PPCL)	0.00	0.00	0.00
Innovations	16		NDCD 0	State specific Initiatives and	0.00	0.00	0.00
NCD.1 National Program for Control of NCD.1 Blindness and Vision Impairment 0.00	10		NDCP.8	Innovations	0.00	0.00	0.00
18	17			NDCP Sub Total (Rs. In Lakhs)	0.50	0.50	1.00
19				National Program for Control of			
NCD.2 National Mental Health Program (NMHP) NCD.3 National Programme for Health Care for the Elderly (NPHCE) NCD.4 National Tobacco Control Programme (NTCP) NCD.5 National Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS) NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NATIONAL PROGRAM O.00 0.00 0.00 0.00 0.00	18		NCD.1	Blindness and Vision Impairment	0.00	0.00	0.00
NCD.2 (NMHP) 0.00				(NPCB+VI)			
NCD.3 National Programme for Health Care for the Elderly (NPHCE) NCD.4 NATIONAL Tobacco Control Programme (NTCP) NCD.5 NATIONAL Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS) NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NCD.7 National Program for Climate Change	10		NCD 2	National Mental Health Program	0.00	0.00	0.00
NCD.3 for the Elderly (NPHCE) 0.00 0	19		NCD.2	(NMHP)	0.00	0.00	0.00
NCD.4 NCD.4 NAtional Tobacco Control Programme (NTCP) National Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS) NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NCD.7 National Program for Climate Change	20		NCD 3	National Programme for Health Care	0.00	0.00	0.00
NCD.4 (NTCP) National Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS) NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NCD.7 National Program for Climate Change	20		NCD.3	for the Elderly (NPHCE)	0.00	0.00	0.00
NCD.5 NCD.5 NCD.5 NCD.5 NCD.5 NCD.6 NCD.6 NCD.6 NCD.6 NCD.6 NCD.7 NCD.7 NCD.7 NCD.7 NCD.7 NCD.7 NAtional Programme for Prevention and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS) 0.30 0.30 0.30 0.30 0.30 0.00 0.00 0.00 0.00 0.00	21		NCD 4	National Tobacco Control Programme	0.00	0.00	0.00
22 NCD.5 and Control of Diabetes, Cardiovascular Disease and Stroke (NPCDCS) NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NCD.7 National Program for Climate Change			NCD.4	1, ,	0.00	0.00	0.00
22 NCD.5 Cardiovascular Disease and Stroke (NPCDCS) 0.30 0.30 0.60 23 NCD.6 Pradhan Mantri National Dialysis 0.00 0.00 0.00 Programme (PMNDP) 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.10 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.05 0.05 0.05 0.05 0.05 NCD.7 National Program for Climate Change 0.05 0.				National Programme for Prevention			
Cardiovascular Disease and Stroke (NPCDCS) NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NCD.7 National Program for Climate Change	22		NCD 5	and Control of Diabetes,	0.30	0.30	0.60
NCD.6 Pradhan Mantri National Dialysis Programme (PMNDP) NCD.7 National Program for Climate Change			1100.5	Cardiovascular Disease and Stroke	0.50	0.50	0.00
NCD.6 Programme (PMNDP) 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.							
Programme (PMNDP) NCD 7 National Program for Climate Change	23		NCD 6	Pradhan Mantri National Dialysis	0.00	0.00	0.00
1 24 1			1405.0	Programme (PMNDP)	0.00	0.00	0.00
1 24 1				National Program for Climate Change			
I NCD FIEXT POOL I Jand Human Health (NPCCHH)	24	NCD Flexi Pool		and Human Health (NPCCHH)	0.05	0.05	0.10
		HCD FIGNITION		1			
NCD.8 National Oral health programme 0.00 0.00 0.00	25	NICD			0.00	0.00	0.00
(NOHP)					0.00	0.00	0.00
NCD.9 National Programme on palliative care 0.00 0.00 0.00	26		NCD.9		0.00	0.00	0.00
(NPPC) 0.00				(NPPC)	1.56	2.20	3.30





Budget Abstract			FM	MCH, Balas	ore	
SI. No.	Name of the Pool	FMR	Component	F.Y. 2022-23 F.Y. 2023-24		Total Budget
27		NCD.10	National Programme for Prevention and Control of Fluorosis (NPPCF)	0.00	0.00	0.00
28		NCD.11	National Programme for Prevention and Control of Deafness (NPPCD)	0.00	0.00	0.00
29		NCD.12	National programme for Prevention and Management of Burn & Injuries	0.00	0.00	0.00
30		NCD.13	State specific Programme Interventions	0.00	0.00	0.00
			NCD Sub Total (Rs. In Lakhs)	0.35	0.35	0.70
	National Urban Health Mission (NUHM)	HSS.U	Health System Strengthening (HSS) - Urban		0.00	0.00
31		HSS.1	Comprehensive Primary Healthcare (CPHC)	1.20	1.32	2.52
32		HSS.2	Blood Services & Disorders	0.00	0.00	0.00
33		HSS.3	Community Engagement	10.20	10.20	20.40
34		HSS.4	Public Health Institutions as per IPHS norms	0.00	0.00	0.00
35		HSS.5	Referral Transport	0.00	0.00	0.00
36	Health System	HSS.6	Quality Assurance	0.00	0.00	0.00
37	Strengthening (HSS)	HSS.7	Other Initiatives to improve access	0.00	0.00	0.00
38	Rural	HSS.8	Inventory Management	0.00	0.00	0.00
39		HSS.9	HRH	23.08	24.15	47.22
40		HSS.10	Enhancing HR	0.00	0.00	0.00
41		HSS.11	Technical Assistance	0.00	0.00	0.00
42		HSS.12	IT interventions and Systems	0.00	0.00	0.01
43		HSS.13	Innovation	0.00	0.00	0.00
44		HSS.14	Untied Grants	0.00	0.00	0.00
45			HSS Sub Total (Rs. In Lakhs)	34.48	35.67	70.15
		38.47	39.66	78.13		









NHM PIP 2022-24

Programme Implementation Plan

RCH-6
Family Planning

RCH-6_Family Planning

					Арр	proved in 202	22-24			
SI.						F.Y. 2	2022-23	F.Y 2	.023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Total Family Planning					3.14		3.14	
42		Sterilization - Female					3.14		3.14	Mandate: Provision of quality sterilization services up to block level (DHH/ SDH/ CHCs) by increasing availability of trained service providers & increasing regularity of FDS for minilap, laparoscopic & NSV sterilization.
	1.1.3.1.1	Female sterilization fixed day services			-		-		-	New Activity Total No. of expected cases in 2022-23=75000 (achievement April to Nov Tubectomy = 35254) Total No. of FDS expected= 75000/30 cases per FDS =2500. Expenditure Heads: 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/- Budget already covered under Compensation package hence, dropped as per NPCC Recommendation
	1.2.2.1.1	Compensation for female sterilization (Provide breakup for cases covered in public facility, private facility. Enhanced Compensation Scheme (if applicable) additionally provide number of PPS done. Female sterilization done in MPV districts may also be budgeted in this head and the break up to be reflected)			-		3.14		3.14	Ongoing Activity Total projected cases as per ELA - 175000 Budgeted for 75000 cases Achievement for 2021-22- 35254 1. At Public Sector: @Rs.1400/- X 31500 (70% of Total beneficiaries 45000) = Rs.630.00 lakhs 2. At Private Sector: @Rs.1000/- X 3500 (70% of Total beneficiaries 5000) =
	1.2.2.1.1	At Public Sector	Per beneficiary	2000	0.02	157	3.14	157	3.14	105.00 lakhs 3. For PPS at public sector: Rs.2200/- X 17500 (70% of total beneficiaries 25000)= Rs.525.00 lakhs
	1.2.2.1.1	At Private Sector	Per beneficiary	3000	0.03	0	-	0	-	Expenditure Analysis: As per FMR 2020-21, fund to the tune of Rs. 1100.00 lakhs has been spent and as
	1.2.2.1.1	For PPS at public sector	Per beneficiary	3000	0.03	0	-	0	-	per FMR 2021-22, till December Rs.883.00 lakhs have been spent as per report. Hence budgeted for 70% cases
	6.1.1.3.3	Minilap kits	Per Kit	5000	0.05	0	0.00	0	-	Approval 2022-23: 5 sets of Minilap Kits for each of the 30 districts to replace old sets. Proposal 2023-24: Not Proposed
	6.1.1.3.4	Laparoscopes	Lumpsum	3000000	30.00	0	0.00	0	-	Approval 2022-23: Budget Proposed for One New Training Centers & One Maintenance (i.e. 3 for Capital Hospital BBSR & 2 for City Hospital Cuttack) will require 5 Single puncture laparoscope with HD screen (Endo vision) for demonstration purposes. Proposal 2023-24: No new proposal in 2023-24
	7.3	Drop back scheme for sterilization clients	Per case	250	0.00	0	0.00	0	-	Approval 2022-23 & 2023-24: Cases targeted for female sterilization at public health inst- 75000 Budgeted for :52500 (70%) of the targeted cases







					Арр	proved in 202	22-24			
SI.	011500					F.Y. 2	2022-23	F.Y 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	9.5.3.3	TOT on laparoscopic sterilization	4/ batch	40000	0.40	0	0.00	0	-	Approval 2022-23: 3 days TOT on laparoscopic sterilization Justification: For acceradation of new laparoscopic sterilization training center at Capital Hospital Bhubaneswar. Total Batch Proposed for 2022-23: 1 (4 per batch) Proposal 2023-24: Not proposed as training will be completed in 2022-23
	14544	Laparoscopic sterilization training for doctors (teams of doctor, SN and OT assistant)	3 / batch	87000	0.87	0	0.00	0		Ongoing Activity with revised unit cost Total trg. Load: For 94 FRUs -159 teams (32 DHH*2=64 + 33 SDH*2=66 + 29 CHC*1=29) x 3 per team =477 persons Status: Cumm. Trained till Sep'21 team 108*3=324 persons (Upto 2020) Remaining load 477 - 324=153 (51 teams) Target 2022-23: 5 batches (5 teams) Target 2023-24 = (3 teams) Duration - 12 days training.
ì	9.5.3.5	Refresher training on laparoscopic sterilization			0.00		0.00		-	Reorientation proposed in virtual mode. Non budgeted activity.
	9.5.3.6	TOT on Minilap			0.00		0.00		-	Not required for 2022-23
	9.5.3.7	Minilap training for medical officers	3 / batch	57000	0.57	0	0.00	0	-	Total trg. Load at DPs-(FRUs-94*2=188 + L2- 418 *1 = 418)=606. Cumm.Trained - 542 person till Sep'21 Status: Remaining Load-606-542=64 person Approved for 2022-23 = 28 MOs (7 batches) including New MBBS recruits during 2022-23 key priority under FP by GOI. Approved for 2023-24 = 4 batches for newly recruited doctors Duration - 12 days training
	9.5.3.8	Refresher training on Minilap sterilization			0.00		0.00		-	Hands-on training given at functional FDS centre. No additional budget required.
	15.1.1	Processing accreditation/empanelment for private facilities/providers to provide sterilization services			-		-		-	Not Proposed
	12.3.4	Printing under Female Sterilization- Manuals & Guidelines/Register/ Documents					-		-	
		Register for all operational fixed day facilities	Per register	120	0.00	0	-	0	-	Approval for 2022-23 & 2023-24: Register for all operational fixed day facilities Total Requirements: 500 registers @ Rs.120/- per register Budget: Rs.120/- per register X 500 register = Rs.0.60 lakhs
l		Printing of Sterilization essential documents	Per Checklist	10	0.00	0		0	-	Approval for 2023-24: Printing of Sterilization essential documents (Consent form, Medical record checklist, Sterilization certificate, post operative discharge card)-Rs.10/- per checklists/ documents per case X 100000 =Rs.10.00 lakhs







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ı.						F.Y. 2	2022-23	F.Y 2	2023-24	
o.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
3		Sterilization - Male					0.00		0.00	
	1.1.3.1.2	Male Sterilization fixed day services	Per Case	150	0.00		-		-	New Activity Total No. of expected cases in 2022-23=2000 (achievement April to Nov Male Sterilisation = 700) Total No. of FDS expected= 2000/30cases per FDS =67. Expenditure Heads: FDS organisation cost Drugs dressing =50, Nurse/ANM=30, OT helper=30, Documentation=20, Refreshment=10, Misc-10 = Total FDS organization cost= Rs.150/- Budget already covered under Compensation package hence, dropped as per NPCC Recommendation
	1.2.2.1.2	Compensation for male sterilization/NSV (Provide breakup for cases covered in public facility, private facility. Male sterilization done in MPV districts may also be budgeted in this head and the break up to be reflected)		2700	0.03	0	-	0	-	Total projected cases as per ELA - 25000 Male Sterilization Achievement by 2021-22= 700 Approved target 2022-23 & 2023-24 based on the achievement trend of 2021-22
-	6.1.1.3.1	NSV kits	Per Kit	2000	0.02	0	0.00	0	0.00	Approved for 2022-23: 50 sets to be provided to the 8 proposed new NSV FDS centers Proposal 2023-24: Not proposed for 2023-24 as planned in 2022-23
	9.5.3.9	NSV Training- ToT & Other trainings	4/Per Batch	34600	0.35	0	0.00	0	0.00	5 days NSV training of Mos at Selected Dist. Level As per the case load one batch of NSV training proposed in 2022-23 Approved for 2022-23: 1 batch (@4 person per batch) Approved for 2023-24: 1 batch (@4 person per batch)
	9.5.3.10	Training/ Refresher training on NSV sterilization			0.00		0.00		0.00	No additional training required
	114711	Incentives for Male Health Workers for Mobilizing clients for Vasectomy	Per Worker	750	0.01	0	-	0	-	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. Achievement: 2020-21 (703 cases) Expected achievement for 2022-23 based on achievement of 2020-21. Justification: An incentive of Rs.750/- to be provided to each Male health Worker for motivating at least 5 clients for vasectomy. Total expected cases 2000







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No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	1.1.3.2.1	Involvement of GKS/ VHSNC for strengthening male engagement in family planning	Per meeting	300	0.00	0	-	0	-	Implementation modalities: -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 CP with the support from BPMU.
		,, ,								Best performing GKS to be identified & felicited in the subsequent meeting in the presence of block level officials
										(46102 GKS X 20%=9220 GKS) Budget: @Rs.300/- per meeting X 2 meeting X 9220 GKS= Rs. 55.32 lakhs
	12.3.3	Printing under male sterilization	Per booklet	200	0.00	0	-	0	-	Approval for 2022-23: Reference manual (New Activity/proposal) Proposal for 2023-24: Not proposed
44		IUCD Insertion (PPIUCD and PAIUCD)					-		-	
	1.1.3.2.1	IUCD fixed day services					-		-	Not proposed.
	1.2.2.2.1	Compensation for IUCD insertion at health facilities (including fixed day services at SHC and PHC) [Provide breakup: Private Sector]	Per case	75	0.00	0	-	0	-	Total ELA - 250000 (Interval IUCD-100000+PPIUCD-140000+PAIUCD-10000) April to Nov 2021-22 Achievement Interval IUCD =36524 - At public health institutions - Not proposed, met out of IMEP fund under State budget - At private institutions - Budgeted for 5000 cases as per last years achievement
		PPIUCD services: Compensation to beneficiary for PPIUCD insertion	Per case	300	0.00	0	-	0	-	Target 2022-23: 120000 considering the achievement of 2021-22 - 65987
	1 1 1 1 1 3	PAIUCD Services: Compensation to beneficiary per PAIUCD insertion	Per case	300	0.00	0	-	0	-	Target 2022-23-10000 cases Proposed based on the achievement of 2021-22: 3350
		ASHA PPIUCD incentive for accompanying the client for PPIUCD insertion (@ Rs. 150/ASHA/insertion)	Per ASHA	150	0.00	0	-	0	-	Target - 120000 cases (No. of PPIUCD services given at Public inst.). Budgeted for 80% i.e. 96000 cases.
	21175	ASHA PAIUCD incentive for accompanying the client for PAIUCD insertion (@ Rs. 150/ASHA/insertion)	Per ASHA	150	0.00	0	-	0	-	Target - 10000 cases (No. of PAIUCD services given at Public inst.). Budgeted for 80% i.e. 8000 cases.
	6.1.1.3.2	IUCD kits	Per Kit		0.00		0.00		0.00	Not Proposed
	6.1.1.3.5	PPIUCD forceps	Per unit	2000	0.02	0	0.00	0	0.00	Approval for 2022-23: 4 PPIUCD forceps to be provided to each of the 30 districts to replace old forceps as per need. Proposal for 2023-24: Not proposed as already budgeted in 2022-23







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No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	9.5.3.11	TOT (IUCD insertion training)	10/ per batch	90000	0.90	0	0.00	0	0.00	Approval for 2022-23: 3 days ToT on IUCD Insertion Training at State Level. Justification: Considering the requirement of comprehensive IUCD training for district master trainers @3 person per DHH/ PPC X 32 =96 (OG-1, MBBS/OG-1, SN-1) to be trained as master trainers. Load for 2022-23: 9 batches (@10 participant per batch) Proposal for 2023-24: Not proposed as the activity is completed in 2022-23
	9.5.3.12	Training of Medical officers (IUCD insertion training)	10 / batch	80500	0.81	0	0.00	0	0.00	Comprehensive IUCD Training:- 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, LHVs,AYUSH in 2:8 ratio (Medical: Paramedical), per batch irrespective of the Trained Service providers earlier. the training load to be included for Rural & urban service providers @10/ batch. Total Trained (Projected-150 during 21-22) Proposal-1 Training load for 2022-23 & 2023-24: 52 batches as per the district requirement (MO MBBS and Paramedics SNs, ANM, LHVs,AYUSH in 2:8 ratio) Proposal-2 Justification: Out of total 5400 CHOs 3634 CHOs will be posted at HWC SCs during 2021-22 & 2022-23. To providing 12 packages of service to communities level at SC HWCs, the CHOs need to be trained in comprehensive IUCD training. 1st batch of CHOs 1560 was already posted at SC HWCs & 2nd batch of 1680 CHOs will be completed and posted at SC HWCs by March 2022. Total 3240 CHOs will be posted Proposal for 2022-24: 3240 CHOs will be trained in Comprehensive IUCD training in 324 batches. Duration - 5 days training. Approval for 2022-23 & 2023-24: 188 batches each year (52 batches of MO & SNs + 324 batches of CHOs training)
	9.5.3.13	Training of AYUSH doctors (IUCD insertion training)			0.00		0.00		0.00	Integrated with Comprehensive IUCD Training. No separate proposal.
	9.5.3.14	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.
	9.5.3.15	TOT (PPIUCD insertion training)	10/Per batch	80500	0.81		0.00		0.00	Proposal dropped as per NPCC Discussion
	9.5.3.16	Training of Medical officers (PPIUCD insertion training)			0.00		0.00		0.00	Integrated with Comprehensive IUCD Training. No separate proposal.
	9.5.3.17	Training of AYUSH doctors (PPIUCD insertion training)			0.00		0.00		0.00	Not Proposed as per Gol guideline
	9.5.3.18	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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I	Old FMR					F.Y. 2	2022-23	F.Y 2	023-24	
o. (Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
1	734	Printing Under IUCD Services: Manuals & Guidelines/ Register/ Documents					-		-	
		Printing of IUCD Card	Per card	2	0.00	0	-	0	-	
		Printing of IUCD Register	Per Register	70	0.00	0	-	0	-	
		Reference Manuals for IUCD services	Per Manual	300	0.00	0	-	0	-	
5		ANTARA					0.00		0.00	
1	2.2.2.4	Injectable contraceptive incentive for beneficiaries	per Beneficiary	100	0.00	0	-	0	-	Achievement of MPA up to Dec.21 is Approx. 61000, expected achievement i Mar.2022 is 75000, Budget approved for 2022-23: @ Rs. 100/- per Beneficiary x 100000 beneficiarie = Rs.100.00 lakhs Budget approved for 2023-24: @ Rs. 100/- per Beneficiary x 120000 beneficiarie = Rs.120.00 lakhs
3	3.1.1.2.8	ASHA incentive for accompanying the client for Injectable MPA (Antara Prog) administration (@Rs 100/dose/beneficiary)- Only for 146 Mission Parivar Vikas districts	per Beneficiary	100	0.00	0	-	0	-	Achievement of MPA up to Dec.21 is Approx. 61000, expected achievement i Mar.2022 is 75000 Budget approved for 2022-23: @ Rs. 100/- per Beneficiary x 100000 beneficiarie = Rs.100.00 lakhs Budget approved for 2023-24: @ Rs. 100/- per Beneficiary x 120000 beneficiarie = Rs.120.00 lakhs
9	.5.3.21	TOT (Injectable Contraceptive Trainings)			0.00		0.00		0.00	Not proposed
9	1.5.3.22	Training of Medical officers (Injectable Contraceptive Trainings)	30/batch	25000	0.25	0	0.00	0	0.00	District Load 2022-24: 35 batches Target for 2022-23: 17 batches Target for 2023-24: 18 batches
9	1.5.3.23	Training of AYUSH doctors (Injectable Contraceptive Trainings)	30/batch	30000	0.30		0.00		0.00	Not Proposed as per Gol guideline
9	15324	Training of Nurses (Staff Nurse/LHV/ANM) (Injectable Contraceptive Trainings)	30/batch	25000	0.25	0	0.00	0	0.00	Ongoing Activity Proposal is for One day Training of SN/ LHV/ ANM on Newer Contraceptives a District level. Justification: Out of total 5400 CHOs 3634 CHOs will be posted at HWC SCs during 2021-22 & 2022-23. To providing 12 packages of service to communities level a SC HWCs, the CHOs need to be trained in One day Injectable Contraceptive training. 1st batch of CHOs 1560 was already posted at SC HWCs & 2nd batch of 1680 CHOs will be completed and posted at SC HWCs by March 2022. Total 3240 CHOs will be posted Proposal for 2022-24: 3600 CHOs will be trained in injectable contraceptive training. Approval for 2022-23: 2310 persons (60 batches of CHOs + 17 MO & SNs batches: 77 batches) Approval for 2023-24: 2340 persons (60 batches of CHOs + 18 MO & SNs batches: 78 batches)
1	.2.3.4	Printing under ANTARA	Per card				-		-	
		Printing of MPA cards	Per card	10	0.00	0	-	0	-	
		MPA register	Per Register	250	0.00	0		0	-	







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No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
46		MPV(Mission Parivar Vikas)					0.00		0.00	Budget Shifted to RCH-6 Sl. No.51
47		FPIS					0.00		0.00	
	1.2.2.3	Family Planning Indemnity Scheme	Per Case	50	0.00	0	-	0	-	2020-21 FPIS Failure =436 , Death = 4 , Complication = 5 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 2022-23=90000 Budget as per norm Rs.50 per sterilization case for insurance = 90000 x Rs.50/- = RS.45.00 lakhs.
	12.3.3	Printing under FPIS	Per Booklet	100	0.00	0	-	0	-	Proposal: Printing of FPIS manual Not Proposed for 2022-23. 100 proposed for 2023-24
48		FPLMIS					0.00		0.00	
	9.5.3.26	FP-LMIS training			0.00		0.00		0.00	
	9.5.3.26	One day State level re-orientation of DVLMs, System In Charge, & Pharmacist on FP LMIS.	30/per batch	85000	0.85	0	-	0		State load 92. Target for the year 2022-23;92 person (3 batches @30/batch). Target for the year 2023-24: 92 person (3 batches @30/batch).
	9.5.3.26	One day district level orientation to BPM,BDM & Block pharmacist on FPLMIS	30/per batch	25000	0.25	0	-	0		State load: 1236. (R+U) Target for the year 2022-23 =1236person (45 batches @30/batch) Target for the year 2023-24 =1236person (45 batches @30/batch)
	9.5.3.26	One day Block level refresher Training on FP LMIS for MPHW M &F	30/per batch	20000	0.20		-		-	Not Proposed
	9.5.3.26	One day Block level training for ASHA on FPLMIS	30/per batch	13800	0.14	0	-	0		Approval for 2022-23: One day block level refresher training of all 49037 ASHAs on FPLMIS, 1226 batches @ 40 ASHAs per batch Proposal for 2023-24: Not proposed
	New Activity	Printing of FPLMIS Manual	Per booklet	300	0.00	0	-	0	-	Approval for 2022-23: Printing of FPLMIS Manual to CHC level Proposal for 2023-24: Not Proposed
	14.2.3	Implementation of FP-LMIS	Lumpsum	1500000	15.00		-		-	No new proposal this year
49		World Population Day					0.00		0.00	
	11.6.3	IEC & promotional activities for World Population Day celebration	Lumpsum		0.00		0.00		0.00	
	11.6.3	At State level	Lumpsum	200000	2.00	0	-	0	-	Additional budget proposed for felicitation of good performing providers, districts and facilities along with State level observation ceremony.
		At District level								
	11.6.3	District level function and documentation	Per dist	15000	0.15	0	-	0		Budget proposed for 30 district & 5 Municipal Corporation Cities
	11.6.3	Publicity through IEC Van	Per block	20000	0.20	0	-	0	_	Budget proposed for @Rs. 20000/-for 314 Blocks & @Rs.60000/- per MC for 5 Municipal Corporation Cities
	11.6.3	Hoardings, Posters and leaflets	Per block	10000	0.10	0	-	0	-	Budget proposed for @Rs. 10000/-for 314 Blocks & @Rs.30000/- per MC for 5 Municipal Corporation Cities
		At Block level								
	11.6.3	Block level function	Per block	3000	0.03		-		-	





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il. o.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	11.6.4	IEC & promotional activities for Vasectomy Fortnight celebration			0.00		0.00		0.00	
	11.6.4	At State level	Lump sum	200000	2.00	0	-	0	-	Additional budget proposed for felicitation of good performing providers districts and facilities along with State level observation ceremony.
	11.6.4	At District level								
	11.6.4	District level function and documentation	Per dist	15000	0.15	0	-	0	-	Budget proposed for 30 district & 5 Municipal Corporation Cities
	11.6.4	Miking	Per block	10500	0.11	0	-	0	-	Budget proposed for @Rs. 10500/-for 314 Blocks & @Rs.31500/- per MC for Municipal Corporation Cities Budget Breakup: Rs.1500/- per day for 7 days
	11.6.4	Posters and leaflets	Per block	5000	0.05	0	-	0	-	Budget proposed for @Rs. 5000/-for 314 Blocks & @Rs.15000/- per MC for Municipal Corporation Cities
0		Other Family Planning Components					0.00		0.00	
	111371	Other activities (demand generation, strengthening service delivery etc.)					-		-	New Activity 1. Provisioning of Condom Boxes in UCHCs and UPHCs
	1.1.3.2.1	Provisioning of Condom Boxes in UCHCs and UPHCs	Per Box	500	0.01	0	-	0	-	Approval for 2022-23: Provisioning of Condom Boxes in UCHCs and UPHCs Justification: Condom boxes to be supplied to each FRU, UPHC and UCHCs fo promoting use of condom while maintaining anonymity of client. Budget: Rs.500/- per box X 471 (94 FRU + 63 SDH + 314 CHC) facilities Approval for 2023-24: Provisioning of Condom Boxes for PHCs Justification: Condom boxes to be supplied to each PHCs for promoting use o condom while maintaining anonymity of client. Budget: Rs.500/- per box X 1288 facilities
	2.2.1	POL for Family Planning/ Others (including additional mobility support to surgeon's team if req)					-		-	Justification: In F.Y. 2020-21 up to sept 2020 Rs.2.80 lakhs already booked under this head. Proposed Rs. 4.00 lakhs considering the current trend of expenditure.
	2.2.1	Mobilisation of Surgeons (Public/Private) for providing FDS	Per District	50000	0.50	0	-	0	-	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 - ongoing activity
	2.2.1	POL provision for transporting contraceptive commodities from State to district	Lumpsum	400000	4.00	0	-	0	-	POL & 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) - ongoing activity
	2.2.1	Delivery of FP contraceptives to districts by India Post	Lumpsum	400000	4.00	0	-	0		Delivery of FP contraceptives to districts by India Post - Rs.4.00 lakhs for transportation of small quantities of commodities by parcel/courier services & for emergency purposes - Ongoing activity
		POL provision for transporting contraceptive commodities from District to Blocks	Lumpsum	0	-	1	-	1	-	POL & Loading & Unloading provision for transporting contraceptive commodities from District to Blocks & Block to Sub Centre - Supply chain management from state warehouse to district level will be ensured through this funding. Approx. cos for transportation from district to block = Rs.8000/-, Expected number of trips from district to block per year = 8 times. Budget: 314 Blocks x 8 times x Rs.8000 = Rs.20.00 lakhs Approx.

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o.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
3	.1.1.2	Incentive for FP Services					-		-	-
3		ASHA incentive under ESB scheme for promoting spacing of births		500	0.01	0	-	0	-	Approval for 2022-23 & 2023-24: 1. ASHA incentive under ESB scheme for delaying of first pregnancy after marriage (2years) Budget: 47088 cases X Rs.500/- = Rs.235.44 lakhs 2. ASHA incentive under ESB scheme for promoting spacing of births between 2 children (3 years) Budget: 31392 cases X Rs.500/- = Rs.156.96 lakhs
3	.1.1.2.7	ASHA Incentive under ESB scheme for promoting adoption of limiting method up to two children	Per ASHA	1000	0.01	0	-	0	-	Total achievement 2021-22 (for 1st & 2nd qtr): 13571 Target 2022-23 & 2023-24: 40000
3	.1.1.6.1	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		-		-	
3		ASHA incentive for Supporting ANM in updating RCH register, maintaining due list for different beneficiary and EC Register			-		-		-	Ongoing Activity- Part of Routine and recurring Activities 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. Dropped as per NPCC Recomendation
3	.1.2.5	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
6	.1.1.3	Procurement of bio-medical and other equipment: FP					0.00		0.00	
6	.1.1.3.6	Any other equipment (please specify)	Per unit	60000	0.60	0	0.00	0	0.00	Approval for 2022-23: Procurement FP Equipments Laparoscopes Ring Apllicator+Atraumatic Trochar @ 60000 per unit for 36 sets in 2022-23 as a replacement for the 36 nos of Laparoscopes supplied during 2018-19. Budget: 36 * 60000 = 21.60 Lakhs Proposal for 2023-24: Not proposed
9		Family Planning Trainings					0.00		0.00	
9	.1.6.2	Training / Orientation technical manuals			0.00		0.00		0.00	Reorientation proposed in virtual mode. Non budgeted activity.
9	.5.3.1	Orientation/review of ANM/AWW (as applicable) for New schemes, FP-LMIS, 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)			0.00		0.00		0.00	To be taken up at Sector Meeting Platforms- Non Budgeted Activity 1. FP LMIS review of 10 Asperitional districts to be conducted at block level (2 virtual & 2 physical): To be Supported by UNFPA 2. Capacity building of 500 AYUSH MO at CHCs & UPHCs on quality RH counseling: Supported by UNFPA
9	.5.3.2	Dissemination of FP manuals and guidelines (workshops only)			0.00	,	0.00		0.00	Knowledge dissemination workshop on right based SRH services No. of Training: 1 at State Level (Supported by UNFPA)





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No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	9.5.3.19	Training for Post abortion Family Planning	Per batch	35000	0.35	0	0.00	0	0.00	Proposal for 2022-23: Integrated with Comprehensive IUCD Training. No separate proposal. Approved for 2023-24: Post Abortion and Post Partum Family Planning planned for all 30 districts in 2023-24.
	9.5.3.20	Training of RMNCH+A/ FP Counselors	35/Per batch		0.00		0.00		0.00	Not Proposed
	9.5.3.25	Oral Pills Training	30/batch	1500	0.02	0	0.00	0		1 day training for MOs on Oral Pills at District level (in virtual mode) Approved for 2022-23: 77 batches (2 resource person per training @300/- per session X 4 sessions + incidental expenses @300/- per batch= Rs.1500/- per batch) Batch Size: @30/batch Approved for 2023-24: 78 batches (2 resource person per training @300/- per session X 4 sessions + incidental expenses @300/- per batch= Rs.1500/- per batch) Batch Size: @30/batch
İ	11.6	IEC/BCC activities under FP					0.00		0.00	IEC for publicity of all components under Family Planning Services
		Media Mix of Mid Media/ Mass Media	Lumpsum				0.00		0.00	, , , , , , , , , , , , , , , , , , , ,
	11.6.1	Mass Media Interventions								Ongoing Activity New FP audio video messages on 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-2022:- Sterilization, Antara June-July-2022;- Antara, Chhaya August-September-2022:- Vasectomy, PPIUCD October-November-2022:- Condom, Mala-N December 2022-January 2023: Sterilization, Antara February-March: Chhaya, PPIUCD
	11.6.1	Advertisement through DD & local channels or scrolling	Per minute	162000	1.62	0	-	0	-	Timing: 1 minute per day for 20 days per year as per I&PR rates
	11.6.1	Advertisement through AIR channels	Per minute	60000	0.60	0	-	0	-	Timing: 1 minute per day for 6 days in a year as per I&PR rates
	11.6.1	Advertisement through FM Channels	Per 10 minutes	20000	0.20	0	-	0	-	Timing: 10 minutes per day for 30 days per year
-	11.6.1	Publicity through Print Media	Per day	110000	1.10	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 Colour Quarter page in 2 newspaper for 12 days
ŀ	11.6.1	Mid Media Interventions								
		District level								
	11.6.1	Folk show / street theatre out reach pockets	per show	3000	0.03	0	-	0	-	
Ī	11.6.1	Block level Village meeting involving all male members and PRI Members on advantages of male sterilisation with a model NSV successors		0	-		-		-	Budget integrated with GKS untied funds





					Арр	proved in 202	22-24			
SI.						F.Y. 2	2022-23	F.Y 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	11.6.1	Prize distribution at sector level to successful Male sterilisation acceptors (in lottery basis)			-		-		-	
	11.6.2	Inter Personal Communication			0.00		0.00		-	Activities integrated with population fortnight and vasectomy fortnights.
	11.6.6	Any other IEC/BCC activities (please specify)	Lumpsum	1000000	10.00	0	0.00	0	-	Proposal: Social Media campaign on Family Planning. Preparation of campaign material Audio/Visual Aids @ 50000 along with agency cost for implementing the campaign. Budget Rs 50000 for campaign advertisement cost.
	12.3	Other Printing activities under FP					-		-	
	12.3.3	Reference manual for OCPs	Per Booklet	200	0.00	0	-	0	-	Not Proposed for 2022-23. 500- proposed for 2023-24
	12.3.3	MEC Wheel	Per Booklet	50	0.00	0	-	0	-	Not Proposed for 2022-23. 500- proposed for 2023-24
	12.3.4	Printing of Oral Pills Register for CHC and above	Per register	120	0.00	0	-	0	-	500 registers @ 120 per register proposed in 2022-23 & 2023-24
	12.3.5	Integrated poster on all FP methods	Per Poster	15	0.00	0	-	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
	12.3.5	Poster on Basket of Choice of FP Methods	Per Poster	8	0.00	0	-	0	-	facilities up to PHC level. (32 DHHs +33 SDHs + 384 CHC/ UCHCs + 1378 PHCs)
		Planning & M&E					0.00		0.00	
	16.1.2.1.	FP QAC meetings (Minimum frequency of QAC meetings as per Supreme court mandate: State level - Biannual meeting; District level - Quarterly)			-		-			 State level: Integrated with bi-annual SQAC meeting - @Rs.25000/- per meeting x 2 = Rs.0.50 lakhs District level: To be taken up quarterly once as per mandate & as & when required as per need. Urban Area Interventions in 5 corporation cities & Puri @Rs.1000/- per meeting x 120 = Rs.1.20 lakhs
	16.1.2.1. 4	State Level	Per Meeting	25000	0.25	0	-	0	-	
	16.1.2.1. 4	District Level	Per Qtr	1000	0.01	0	-	0	-	
	16.1.2.1. 5	FP review meetings (As per Hon'ble SC judgment)			-		-			Ongoing activity 1. Exclusive review meeting proposed at State level, which will be attended by ADMO(FW), Dpty. Mng. RCH & Quality Consultant of 30 district level. Budget: @1.00 lakhs X 2 = Rs.2.00 lakhs New Activity 2. Biannual Review meeting on FPIS for ADPHCO/ DPHCO/ SA/ SI of all districts Budget: @1.00 lakhs per meeting X 2 meeting = Rs.2.00 lakhs
	16.1.2.1. 5	State Level review meeting	Per Meeting	100000	1.00	0	-	0	-	
	16.1.2.1. 5	State level Biannual Review meetings on FPIS	Per Meeting	100000	1.00	0	-	0	-	
51		State specific Initiatives and Innovations					0.00		0.00	
	3.1.1.2.1	ASHA Incentives under Saas Bahu Sammellan			-		-		-	Not proposed





					Арр	proved in 202	22-24			
SI.						F.Y. 2	2022-23	F.Y 2	023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	3.1.1.2.2	ASHA Incentives for distribution of Nayi Pehl Kit	Per Beneficiary	100	0.00	0	-	0	-	Approval for 2022-23: Approx. 415000 New Eligible Couples regd. During 2020-21, Budgeted for 50% newly wed couple: 200000 Approval for 2023-24: Approx. 415000 New Eligible Couples are registered. During 2020-21, Budgeted for 60% newly wed couple: 250000
	3.1.1.2.3	ASHA incentive for updation of EC survey before each MPV campaign			-		-		-	Not proposed
	6.2.3.1	Procurement & supply of Nayi Pehl Kit	per kit	250	0.00	0	0.00	0	0.00	This gift kit is proposed to 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. Approval for 2022-23: Approx. 415000 New Eligible Couples regd. During 2020-21, Budgeted for 50% newly wed couple: 200000 Approval for 2023-24: Approx. 415000 New Eligible Couples are registered. During 2020-21, Budgeted for 60% newly wed couple: 250000
	11.6.5	IEC activities for Mission Parivar Vikas Campaign (Frequency-at least 4/year)			0.00		0.00		0.00	Not proposed
	12.3.2	Printing for Mission Parivar Vikas Campaign			-		-		-	Not proposed
	3.2.1	Other activities under Mission Parivar Vikas : Demand Generation (Saarthi, Saas Bahu Sammellan, Creating enabling environment)					-		-	Approval for 2022-23 & 2023-24: Saas Bahu Sammelan The activity will be taken up on half yearly basis at functional SC HWCs (3634) in 2022-23 & (5400) in 2023-24 Budget Breakup: @ Rs. 1600/- per Sammelan (Rs. 500 for organising Sammelan + Rs. 1000/- as token gift + Rs. 100 for ASHA incentive) Budget for 2022-23: Rs.1600/- X 3634 HWCs X 2 times= Rs.116.29 lakhs Budget for 2022-24: Rs.1600/- X 5400 HWCs X 2 times= Rs.172.80 lakhs Approval for 2022-23 & 2023-24: IEC Vans(Awareness on wheels) A smartly designed bus/van equipped with interactive communication devices, IEC materials and FP commodities shall be operationalised in 10 Aspitational districts during MPV fortnight (April, July, October and January- form 11th to 25th of the designated months) to sensitize and disseminate FP messages in the far flung areas. Budget: @ Rs. 12.23 lakhs per districts for 4 MPV fortnight (1st MPV fortnight: Rs. 3.545 Lakhs+ 2nd MPV fortnight: Rs. 2.895 Lakhs+ 3rd MPV fortnight: Rs.2.895 Lakhs+ 4th MPV fortnight: Rs.2.895 Lakhs) x 10 Aspitational districts= Rs. 122.30 Lakhs (unit cost proposed as per the Gol Guidelines)
		Saas Bahu Sammelan	Per Sammelan	1600	0.02	0	-	0	-	
		IEC Vans(Awarness on wheels)	Per District	1223000	12.23	0	-	0	-	







					Арр	proved in 202	2-24			
SI.						F.Y. 2	022-23	F.Y 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	New Activity	Strengthening FP Services at SC HWCs					-			Total HWC: 5400 (3634 by Match 2022) A range of initiatives to be taken up for strengthening SC HWCs (5400) for FP services. Proposed this year 2022-23: 3634 HWCs (which are targeted to be made operational by 2022-23) & rest 1766 in 2023-24 Proposal-1: Establishment of FP Corners 1. Display of FP commodities in Basket of Choice & Vinyle Posters for FP corners (3nos): @ Rs 750/- each 2. Installation of Condom Box: @ Rs 500/- Each (Condom box for other higher facilities have been approved in previous years) 3. MPA tracking Calendar: @ 500 each Total Cost for 2022-23 for FP corner for HWC: Rs. 1750/- X 3634 HWCs= Rs.63.60 lakhs Total Cost for 2023-24 for FP corner for HWC: Rs. 1750/- X 1766 HWCs= Rs.30.91 lakhs Proposal-2: Training & Capacity Building of CHOs Training of CHOs on FP methods, FPLMIS and FP Counseling (2 days training, (3634 CHOs training proposed in 2022-23, 1766 CHOs training proposed in 2023-24, Batch size @40 = 90 Nos of batches proposed, @ 30,000 per batch X 90 batches = Rs.27.00 lakhs Total Cost in 2022-23: Rs.63.60 lakhs + Rs.27.00 lakhs = Rs.90.60 lakhs Total Cost in 2023-24: Rs.30.91 lakhs + Rs.13.20 lakhs = Rs.44.11 lakhs
		Cost for FP Corners for HWCs	Per unit	1750	0.02	0	-	0	-	
		Training & Capacity Building of CHOs	Per unit	30000	0.30	0	-	0	-	
	New	ANTRA Follow-up & Tracking	Per calendar	500	0.01		-		-	Anatra Tracking calendar for all facilities up to CHC and all urban facilities Rs 500 per calendar for 500 facilities. Justification: It is proposed to supply all urban facilities and SC health and wellness centers with an Antara Calendar, which will be a sling Calendar with 12 different pockets arranged vertically for each of the twelve months of an year. The SN/ ANM after administering a dose of Antra is supposed to fill up the Antra Card and give one part of the card to the client and the other half will be kept in the facility part of ANtra card arranged in a month wise manner so as to help the SN/ ANM in follow-up of clients scheduled for subsequent doses in any particular month. This will enable the service provider to keep track of clients for follow-up and help in improving the continuity of Antra usage. Budget dropped as per NPCC Recommendation







				Арј	proved in 202	22-24			
					F.Y. 2	2022-23	F.Y 2	023-24	
Old F	MR Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
New Activit	ANTARA MIS APP for follow up and reminder	Lumpsum		0.00		-		-	Antara MIS app developed by Directorate Family Welfare with support from UNFPA will be piloted in 5 municipal corporation in 2022-23 will be rolled ou State wide in 2023-24 with support from UNFPA. Supported by UNFPA
New Activit	Establishment of Nodal Training Centre 1 Laparoscopic Sterilization	Per Center	2000000	20.00	0	0.00	0	-	Approval for 2022-23: Establishment of Nodal Training Centre at Capital Hospital Bhubaneswar and DHH Koraput. Total Budget: Rs.40.00 lakhs. Heads of expenses: Cost estimated for Projector system, OT table, Furniture demonstration models(ZOE), Kit & other instruments. power backup, computer printer etc. Proposal for 2023-24: Already proposed in 2022-23 Detail Proposal at Training Institutes & Skill Lab Write-up Justification Annexure.
New Activit	Establishment of Training Centre for NSV	Lumpsum	966000	9.66	0	0.00	0	-	Approval for 2022-23: Establishment of Training Centre for NSV at CHG Ghatagoan Total Budget: Rs.9.66 lakhs Proposal for 2023-24: Already proposed in 2022-23 Detail Proposal at Training Institutes & Skill Lab Write-up Justification Annexure.
New Activit	Strengthening private sector engagement throu introduction of 'e-RUPI'	th Lumpsum		0.00		-		-	Proposal is for Strengthening private sector engagement through introduction of 'e-RUPI' vouchers to address the financial barriers for meeting 'FP and SRH' need of young populations among urban poor This initiative is being piloted in Municipal Corporation Cities by Jhpiego in 2022-23.
	Total Family Planning					3.14		3.14	









NHM PIP 2022-24

Programme Implementation Plan

NDCP-5 **NVHCP**

NDCP-5_NVHCP

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SI.					745	roved in 202 F.Y. 2	2022-23	F.Y. 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Total NVHCP					0.50		0.50	
80		Prevention					0.00		0.00	
	2.3.1.11	Outreach for demand generation, testing and treatment of Viral Hepatitis through Mobile Medica Units/NGOs/CBOs/etc		2500	0.03	0	-	0	-	Newly Approved for Screening at Jails / Sub Jails and Truckers Association (2022-2023) 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. Camp Breakup: For Truckers (Deliverable- minimum 50 cases will be screened in each camp) 1. Two camps each in 5 Municipal Corporations area in every month x 12 months = 120 Camps 2. One camps each district (30 districts) per month for Truckers x 12 months = 360 Camps For Jail inmates 1. One camp bi-monthly at 65 Jails X 6 camps per annum =390 Camps Budget Breakup for each camp: a.2 LT @ 850/- to be engaged on outsourced basis b. One Counselor or Mobilize @ 450/- to be outsourced basis c. Refreshment cost @ 500/- d. Mobility cost @ 500/- per day per camp e. Other contingencies = 200/- Total cost:- Rs. 2500/- per camp x 870 Camps= Rs. 21.75 Lakhs
	3.2.3.2	Incentives for Peer Educators			-		-		-	Not Proposed, Proposed activities are to be taken up through system mode engaging existing counselors.
	New Activity	Training	Per team	2500	0.03	0	0.00	0	0.00	Activity: One day orientation training of the teams for screening at Jails, Sub Jails & Truckers State Load: 80 Teams (2 teams per district & Extra 2 teams for 10 bigger districts) Composition of Team: 2 Outsource LTs & One Counselor/ Attendant Each team must be taken up @4 camp per month Target 2022-23: 80 teams
	11.3.6	IEC under NVHCP			0.00					Ongoing Activity
	111.3.6	Advertisement through DD & local channels or scrolling	Per minute	162000	1.62	0	0.00	0	0.00	Timing: 1 minute per day for 12days per year as per I&PR rates
	11.3.6	Advertisement through AIR channels	Per minute	60000	0.60	0	0.00	0	0.00	Timing: 1 minute per day for 6 days in a year as per I&PR rates
	11.3.6	Advertisement through FM Channels	Per 10 minute	20000	0.20	0	0.00	0	0.00	Timing: 10 minutes per day for 20 days per year



SI.						F.Y. 2	2022-23	F.Y. 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	11.3.6	Publicity through Print Media	Per day	110000	1.10	0	0.00	0	0.00	One time advertisement of Color Quarter page in 2 newspaper for 5 days
	11.3.6	State Level Observation of the World Hepatitis Day	lump sum	100000	1.00	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)
	11.3.6	District Level Observation of the World Hepatitis Day	Per District	15000	0.15	0	0.00	0	0.00	2. At District Level: Rs. 15000/- per dist x 30= Rs. 4.50 Lakhs
	11.3.6	Poster	Per ASHA	7	0.00	0	0.00	0		Poster @ Rs. 7 per unit 49037 ASHAs X 4 32 DHHs X 20 33 SDHs X 15 384 CHC/ UCHC X 40
	9.5.28.7	Demand Generation	Per MHU	1800	0.02		0.00		0.00	No new proposal this year
	New Activity	Drugs (Cash Grant i.e Vaccination for Hep B)	Lumpsum	5846000	58.46	0	0.00	0	0.00	Budget proposed under cash grant: Rs. 58.46 Lakhs for vaccination HRG for Hep B Budget proposed as per calculation made in costing templates
81		Screening and Testing through facilities					0.00		0.00	
	1.3.1.16	State lab: Meeting Costs/Office expenses/Contingency	Per Annum	100000	1.00	0	-	0	-	Ongoing Activity 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/-
	1.3.1.17.1	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	238000	2.38	0		0	-	Ongoing Activity i. Quarterly meeting Cost: @ Rs. 4000/- x 4= Rs. 16,000/- ii. Internet cost: Rs. 3500/- PM x 12= Rs. 42,000/- iii. Other Office Contingencies: Rs. 15000/- PM x 12= Rs. 1,80,000/-
	6.2.23.2	Diagnostics (Screening, Viral Load, Consumables)								Budget proposed for Consumables as per the costing template
		Screening Test								
		Hepatitis B	Per Screening	7	0.00	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
		Hepatitis C	Per Screening	20	0.00	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
		Confirmatory Test								
		•	Per Test		0.00		0.00			Details at NVHCP Costing Templet Annexure
		Hepatitis C	Per Test	950	0.01	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
		Viral Load								
		Hepatitis B	Lumpsum		0.00		0.00			Details at NVHCP Costing Templet Annexure
		Hepatitis C	Per Case	950	0.01	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
		Consumables								
		Hepatitis B	Per Case	6	0.00	0	0.00	0		Details at NVHCP Costing Templet Annexure
		Hepatitis C	Per Case	6	0.00	0	0.00	0	0.00	Details at NVHCP Costing Templet Annexure
		ANC Screening								
		Hepatitis B	Per Case	6.5	0.00	0	0.00	0		Details at NVHCP Costing Templet Annexure
		Hepatitis C	Per Case		0.00				0.00	Details at NVHCP Costing Templet Annexure







SI.						F.Y. 2	2022-23	F.Y. 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	6.1.1.25.3	Equipment & Instruments	Lump sum	2800000	28.00		0.00		0.00	Fully Automated DNA/RNA extraction system. Not Proposed this year. Approved in 2021-22
	6.2.23.3	Consumables for Labs	Lumpsum	1500000	15.00	0	0.00	0	0.00	Budget proposed for Consumables as per the costing template
	9.5.28	Trainings for NVHCP								Ongoing Activity
	9.5.28.2	Training of the lab technicians	20/Per batch	110000	1.10	0	0.00	0	0.00	3 days state level training for LTs of 32 DHHs along with 8 Govt. MCHs (Total prticipants:40) Batch size: 20 participants x 2 batches
	9.5.28.6	Training for Community Volunteers	Per participants		0.00		0.00		0.00	
	9.5.28.7	Any other (please specify)			0.00					
	9.5.28.7	Training for Microbiologists	Per Batch	75000	0.75	0	0.00	0	0.00	1 day Refresher training for microbiologists of 32 DHHs at State Level. Batch size: 32 participants x 1 batch Budget Revised as per NPCC Discussion
	9.5.28.7	Half day sensitisation of ASHA / ANM regarding NVHCP	Per participants	100	0.00		0.00		0.00	Half day sensitization of ASHA / ANM regarding NVHCP in the sector meeting to refer the suspected for screening and treatment Total Participants: 55725 (49037 ASHAs + 6688 ANMs) To be taken up in the existing Sector Meeting. Hence, Budget dropped as per NPCC discussion.
	New Activity	1 day training of Medical Officers (District Level)	Per batch	30000	0.30	0	-	0	-	Participants: One Medical Officer from all 384 CHCs, 33 SDHs & 32 DHHs (One batch for each district except Ganjam, Mayurbhanj, Keonjhar & Sundargarh who will conduct 2 batches for MOs) District level Batch Size: 30 Duration: 1 day
	12.17.4	Printing for formats/registers under NVHCP			-					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.
	12.17.4	Patient testing & treatment card	Per Card	20	0.00	0	-	0	-	Patient testing & treatment card @ Rs. 20/- x 10000 cards (total case 5250)= Rs. 2.00 Lakh
	12.17.4	Other Registers and formats like treatment register, patient referral register , stock & store register, dispensing register etc	Per DHH	50000	0.50	0	-	0	-	Printing of Treatment cards, formats, reporting formats etc.
82		Screening and Testing through NGOs					0.00		0.00	
	15.3.4.1	PPP initiative under NVHCP							-	Not Proposed
	3.2.3.3	Engagement with NGO CBO(Community Based Organizations) for outreach			-		-		-	Not Proposed. Proposed activities are to be taken up through system mode.







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No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
83		Treatment					0.50		0.50	
	1.3.1.17.2	MTC: Management of Hep A & E	Lumpsum	100000	1.00	0	ī	0	-	Approved for Model Treatment Center @Rs. 1.00 lakh, for management of Outbreaks (proposed as per Gol norms)
	1.3.1.18.2	TC: Management of Hep A & E	Lumsum/ per unit	20000	0.20	0	-	0	_	Budget approved for 30 districts @Rs.20,000/- per TC, for management of Outbreaks. However a TC may utilize maximum Rs. 1.00 Lakh per annum
	6.2.23.1	Drugs for Hep B & C treatment (Cash & Kind)	Lumpsum	37695000	376.95	0	0.00	0	0.00	 Budget proposed under cash grant for 2022-23 & 2023-24: Rs. 86.96 Lakhs (HBIG@ Rs.2000/- per case X 4348 cases) Budget proposed under kind grant to be supplied by Gol for 2022-23 & 2023-24: = Rs. 90.12 Lakhs & Rs. 113.91 lakhs Budget proposed as per calculation made in costing templates
	6.2.23.4	Consumables for treatment Centres (TCs)	Lumpsum	300000	3.00	0	0.00	0	0.00	Budget proposed for Consumables as per the costing template
	9.5.28.1	3 day training of Medical Officer of the Model Treatment Centre (15 Medical officers in each batch)	32/Per batch	165000	1.65	0	0.00	0		3 days Refresher training of MOS to be conducted at MTC Batchsize:32 participants x 3 batches
	9.5.28.3	Training of Peer support of the Treatment sites (MTC/TCs)	32/Per batch	58000	0.58	0	0.00	0	0.00	One day refresher training for peer support of the Treatment sites (MTC/TCs) at the state level Batchsize:32 participants Budget Revised as per NPCC Discussion
	9.5.28.4	Training of pharmacist of the Treatment sites (MTC/TCs)	32/Per batch	58000	0.58	0	0.00	0	0.00	One day refresher training of Pharmacists of the Treatment sites (MTC/TCs) from 38 units to be trained in Hepatology department of SCBMCH Batch size: 32 participants Budget Revised as per NPCC Discussion
	9.5.28.5	Training of DEO of the Treatment sites (MTC/TCs)	32/Per batch	58000	0.58	0	0.00	0	0.00	One day refresher training of DEOs of the Treatment sites (MTC/TCs) at State level Batch Size: 32 Total batch:1 Budget Revised as per NPCC Discussion
	14.2.13	Sample transportation cost under NVHCP	Per District	30000	0.30	0	-	0	_	Rs.30000/- lakhs may be proposed per district for emergency referral of samples to State Lab/ Other DPHL in case of exigency
	8.4.11	Incentives under NVHCP								Budget Proposed under HSS-9, SL-185 (Incentives(Allowance, Incentives, staff welfare fund)
	1.3.1.18.1	TC: Meeting Costs/Office expenses/Contingency	Per Unit	50000	0.50	1	0.50	1	0.50	Background: Currently 32 DHHs have been identified as TC. It has been proposed to extent TCs to rest 7 Govt MCHs for quantitative viral load estimation as well as treatment of uncomplicated cases. Budget: i.Quarterly meeting Cost: @ Rs. 500/- x 4= Rs. 2,000/- ii. Internet cost: Rs. 1500/- PM x 12= Rs. 18,000/- iii. Other Office Contingencies: Rs. 2500/- PM x 12= Rs. 30,000/- Total cost requirement for one unit: Rs.50,000/- (approved as per Gol norms)
		Total NVHCP					0.50		0.50	











NHM PIP 2022-24

Programme Implementation Plan

NCD-5 **NPCDCS**

NCD-5_NPCDCS_Odisha

			Approval 2022-24							
						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
		Total NPCDCS					0.30		0.30	
107		NCD Clinics at DH					0.00		0.00	State's Mandate/ Plan 2022-24: Operationalise NCD Clinics at all DHHs, SDHs & Block CHCs
	1.3.1.8	District NCD Clinic: Mobility, Miscellaneous & Contingencies			-		-		-	Functional NCD clinic at DHH 32 Dedicated medical officers from regular carder have been deployed to manage NCD clinic as per GoO.
	1.3.1.8	Recurring cost for NCD clinic at DHHs	Lumpsum	0	-	1	-	1	-	1. Recurring cost proposed @ Rs1.00 Lakh per DHH consists of >= 10 Blocks -16 DHH & Rs.0.60 lakhs for DHHs <= 10 Blocks- 16 DHH (Capital Hospital & RGH included) Financial implication: 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= Rs9.60 Lakh
	1.3.1.8	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, No new proposal in the current year
	6.1.1.23.3	Non-recurring: Equipment at District NCD clinic			0.00		0.00		0.00	Recommended equipment/ instruments are available at all DHHs NCD Clinics as per GoI guideline
	6.2.19.1	Drugs & consumables for NCD management (includes Diabetes, Hypertension, Stroke, etc) for whole district	Per District	1200000	12.00	0	0.00	0	0.00	Requirement for entire 30 districts Drugs and consumable for NCD management including diabetes, hypertension, & stroke care @ Rs. 12.00 Lakhs per district (GoI norm @12.00 lakhs per districts) x 32 DHHs (30 Districts)= Rs. 360.00 Lakhs
	6.2.19.3	Diagnostics Services for NCD management (includes Diabetes, Hypertension, etc) for whole district			0.00		0.00		0.00	Funds met out of State specific scheme called NIDAN- Free Diagnostic Services, Hence no additional cost proposed under this head
	7.6.1	Referral cost for District NCD Clinic			0.00		0.00		0.00	108 emergency ambulance services is operation in the state. Hence, no additional fund proposed under this head
	9.5.19.2	Training for Strengthening District NCD Cell	30 / batch	210000	2.10		0.00		0.00	Approval Shifted to SI No. 110. Other NPCDCS Components
108	15.4.5.2	PPP at District NCD Cell / Clinic NCD Clinics at CHC/SDH					0.00		0.00	Programme implemented through system mode Plan: NCD Clinics shall be established at all Block CHCs- 314, 7 UCHCs & SDH-33 level (354). These NCD Clinics shall be managed and maintained by the State Health System. No additional HR proposed under NHM for the same. However, One time cost for establishment and other recurring cost is proposed under NHM.
	1.1.6.2	Integration with AYUSH at CHC NCD Clinic	Per person		-		-		-	AYUSH doctors are placed at all 314 Block CHCs as part of Co-locational AYUSH initiatives. They are being trained on NCD in different platforms. Hence No additional Budget proposed.
	1.3.1.9	SDH/ CHC level NCD Clinic: Mobility, Miscellaneous & Contingencies								
	1.3.1.9	Recurring Cost for CHC NCD Clinic: Mobility , Miscellaneous & Contingencies	Per institution	24000	0.24	0	-	0	_	The amount @ Rs.24000/ per year (314 Block CHC, 7 UCHCs &33 SDH is proposed towards management of IT Cost (Internet & Other Consumables) for managing proposed MO portal at SDH/CHC level, meeting cost etc.

			Approval 2022-24							
							2022-23	F.Y. 2	2023-24	
No.	o. Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
	1 3 1 9	Non recurring cost for establishment of new NCD clinics at SDH/ CHCs	Per institution	100000	1.00	0	-		-	Rs. 1.00 lakhs is proposed for 292 SDH/ CHCs/ UCHCs level NCD clinics out of proposed 354 clinics as funds for establishment of 62 clinics have
	6.1.1.23.4	Non-recurring cost for CHC NCD Clinic (Equipment/ Instrument at CHC NCD clinic etc)	Lumpsum	217530000	2175.30	0	0.00		0.00	State has prepared a list of equipment instruments and estimated costing for operationalisation of CHC/ SDH NCD clinic. The list and cost estimate is as follows. 1. Disposable Tongue Depressor @Rs. 100/- per unit X 10 nos = Rs.1000/- 2. ECG Machine Ordinary @Rs. 60000/- per unit X 1 nos = Rs.60000/- 3. Cardiac Monitor with defibrillator @Rs. 450000/- X 1 nos = Rs. 450000/- 4. Pulse Oximeter @Rs. 50000/- X 1nos = Rs.50000/- 5. Infusion Pump @Rs.30000/- X 1 nos = Rs.30000/- 6. Spiro meter Rs.120000/- X 1 nos (under BPHL Hence not proposed) 7. CO Analyzer Rs. 40000/- X 2 nos = Rs.40000/- 8. Stethoscope @Rs.2000/- X 2 nos Rs.4000/- Total Budget Per Unit: Rs.6.35 lakhs (Gol norms Rs.8.00 lakhs) Total Budget Required: 354 X 6.35 lakhs = Rs.2247.90 lakhs Budget already approved for 121 ECG Machines last year of costing Rs.72.60 lakhs. Hence rest of the amount i.e. Rs. 2175.30 lakhs proposed in 2022-23
	6.2.19.1	Drugs & consumables for NCD management (includes Diabetes, Hypertension, Stroke, etc)	Per District	200000	2.00	0	0.00	0	0.00	Gol norms @Rs.2.00 lakhs per unit Proposed: @2.00 lakhs per unit
	6.2.19.3	Diagnostics Services for NCD management (includes Diabetes, Hypertension, etc) for whole district			0.00		0.00		0.00	Funds met out of State specific scheme called NIDAN- Free Diagnostic Services, Hence no additional cost proposed under this head
	7.6.2	Referral cost for CHC NCD Clinic			0.00		0.00		0.00	108 emergency ambulance services is in operation in the State. Hence, no additional fund proposed under this head





			Approval 2022-24							NCD-5_NPCDCS FM MCF
						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	0	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
	15.4.5.3	PPP at CHC NCD Clinic			-		-		-	Programme is being implemented through system mode
109		Cardiac Care Unit (CCU/ICU) including STEMI					0.00		0.00	
	6.1.1.23.1	Non-recurring: Equipping Cardiac Care Unit (CCU)/ICU	Lumpsum		0.00		0.00		0.00	Proposal for CCU/ ICU: Currently operational at 12 DHHs & other ICU/ CCU at 20 DHHs in process. Expected to operational 18 ICU/ CCU by March 2022. Established/ proposed through funding under NHM- 10 Funding Under State Budget- 8nos Funding Under ECRP-II- 14nos Hence, there is no new proposal in the current year.
	6.2.4.5	Drugs & Diagnostics for Cardiac care	Per District	500000	5.00	0	0.00	0	0.00	As per NPCDCS Operational Guidelines, Rs. 5.00 Lakh per CCU is proposed (Rs. 5.00 Lakhs x 18 CCU) Gol norms Rs.5.24 lakhs per district X 30 districts = Rs.157.20 lakhs
	New Activity	STEMI Programme					0.00		0.00	Budget Details of STEMI Proposal Placed at NCD write-up Annexure Budgeted 70%
		Hub Requirement: (24/7 Cath Lab)					0.00		0.00	Background: Existing Hubs & Spokes: 1. Capital Hospital (Hub)- (Spokes)- DHH-Khorda, DHH-Nayagrah, DHH-Puri, CHC - Daspalla, CHC- Nimapara, CHC-Charichwak, CHC- Sakhigopal, CHC- Jatani, CHC - Banapur, CHC- Tangi 2. SCB, MCH, Cuttack (Hub)- (Spokes)- SDH- Athagarh, SDH- Banki, CHC- Adaspur, CHC-Mahanga Proposed Hubs & Spokes: 1. Cardiac Care Hospital, Jharsuguda (Hub run in PPP Mode, details of the project is attached at Annexure-A), - (Spokes)RGH, Rourkela, DHH, Jharsuguda, DHH, Sundergarh, SDH Bonai, SDH Panposh, CHC Rajagangpur, CHC Biramitrapur, CHC Kuanrmunda, CHC Lahunipada, CHC Bargaon, CHC Brajarajnagar, CHC Lakhanpur, CHC Mandarajore-Laikera Total Spokes -27 nos (Spoeks at DHH-6 nos, SDH-4, CHC-17) Cardiac Care Hospital, Jharsuguda PPP agency to maintain: Brief Project Overview • A 100 bed Cardiac Care Hospital is being established at Jharsuguda at 5.05 acres of land through PPP mode with financial support from Mahanadi Coalfields Limited (Approx. Rs. 102 Crores). • M/s Care Hospitals has been selected as the operating partner and the concession agreement was signed on 24thDecember 2016 with H&FW Deptt., Odisha. • The construction work of the project is being undertaken by a Turnkey Contractor engaged by Works Department, Odisha and the work expected to be completed by June 2022. Scope of Work:
		Infrastructure Development								







			Approval 2022-24									
						F.Y. 2	2022-23	F.Y. 2	2023-24			
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks		
		Cath Lab	per unit	35000000	350.00	0	0.00			1- Capital Hospital (Already Provisioned) 2- SCB, MCH (Already equipped with State Budget fund) 3- Cardiac Care Hospital, Jharsuguda-To be made functional with PPP Mode by June 2022.		
		Fully Equipped CCU	per unit	3000000	30.00	0	0.00			Already established in 3 above mentioned hubs.		
		Equipment										
		Stemi Kit	per unit	100000	1.00	0	0.00	0	0.00	For 3 Hubs FY 22-23 @ 2 per Hub FY 23-24 @1 kit per hub		
		Recurring / Operational cost								Capital Hospital and SCB MCH - To be met out of funding under Comprehensive Equipment maintainance grant. Hence no additional budget to be provisioned. Cardiac Care Hospital, Jharsuguda PPP agency to maintain.		
		AMC / CMC of Existing Cath lab Machine	per unit	3000000	30.00	0	0.00					
		Manpower								Hub at Capital Hospital, Bhubaneswar - The manpower proposed earlier to be continue (1 Cardiologist, 4 Nursing Officers, 3 Cathlab Technicians, 6 Ward Boys) Hub at SCB MCH, Cuttack- Already in position with the funding from State Budget, Hence Not Proposed Hub at Cardiac Care Hospital, Jharsuguda- PPP Agency to Manage		
		Cardiologist	per month	200000	2.00	0	0.00	0	0.00	Hub Capital Hospital- Existing One will continue Hub at Cardiac Care Hospital, Jharsuguda- PPP Agency to Manage		
		Medical Officer	per month	93000	0.93	0	0.00	0	0.00	For Programme Coordination at DHH, Jharsuguda to manage the STEMI Programme only FY 22-23 @ 93,000 per month FY23-24@ 97000 per month		
		Nursing Officer	per month	24939	0.25	0	0.00	0		Total Requirement: 4 1. Hub Capital Hospital- Existing 4 Nursing Officer will be continue 2. Hub at Cardiac Care Hospital, Jharsuguda- PPP agency to maintain.		
		Cath lab technicians	per month	20076	0.20	0	0.00	0	0.00	Total Requirement: 3 1. Hub Capital Hospital- Existing 3 Cathlab Technician will be continue 2. Hub at Cardiac Care Hospital, Jharsuguda- PPP agency to maintain.		
		Ward boys	per month	10029	0.10		0.00		0.00	Ward boys to be mobilised from existing pool		
		Medications							0.00			





			Approval 2022-24									
						F.Y. 2	2022-23	F.Y. 2	2023-24			
S.No	. Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks		
		PCI/Stent & consumables (Puncture needle, Arterial sheath, diagnostic catheter (for right & left), Guide wires (0.032"), Guide cather's, PTCA wire, Coronary stent, NC Balloon, "Y-Connector", Inflation device, pressure tube	Lumsum	0	0.00	1	0.00	1	0.00	This is for two Hubs for STEMI (Capital Hospital, Bhubaneswar-& SCB MCH-Cuttack) connected with 14 Spoks a. Existing Average Cases (Angiogram) per month - 250 b. Average Cases (Angioplasty with Singe Stent)per Month-130 c. Average Cases (Angioplasty with Double Stent) per Month-65 d. Average cases for Device Clouser(ASD/VSD/PDA) per month-50 e. Pacemaker Implantation Budget Proposed:18,24,00,000 1.Angiogram: Rs1,80,00,000 (Rs.6000 per case X 250cases per month X12months) 2.Angioplasty (Single Stent):Rs.6,24,00,000(Rs.40,0000 X 130 cases per month X 12months) 3.Angioplasty (Double Stent) on an above of Single stent:Rs1,62,00,000 (Rs.27,000 X 50cases per month X 12months) 4.Device Clouser: Rs.5,70,00,000 (Rs.95,000 X 50cases per month X 12months) 5.pacemaker Implantation: Rs.4,50,00,000		
		Spoke Type-1					0.00		0.00	Existing Hubs & Spokes: 1. Capital Hospital (Hub)- (3 DHH Spokes)- DHH, Khorda, DHH, Nayagrah, DHH, Puri 2. SCB, MCH, Cuttack (Hub)- 0 DHH Spokes Proposed Hubs & Spokes: 1. Cardiac Care Hospital, Jharsuguda (Hub run in PPP Mode)- (3 DHH,Spokes) RGH, Rourkela, DHH, Jharsuguda, DHH, Sundergarh Total DHH Spokes (Spoke Type-I)-6 nos		
		Infrastructure Development: Civil										
		Repair & Renovation	per unit		0.00	2	0.00		0.00	There are 6 DHHs which will be act as Spokes namely: DHH, Khorda, DHH, Nayagarh, DHH, Puri, DHH, Jharsuguda, DHH, Sundergarh, RGH Rourkela ICU position at DHH Spokes: DHH, Khorda- Functional DHH, Nayagarh- Functional DHH, Puri-Functional DHH, Puri-Functional DHH, Jharsuguda- Provisioned DHH, Sundergarh-Provisioned RGH, Rourkela- Provisioned		
		Equipment								Non Pocurring, not proposed		
		ICU Equipment	per unit		0.00	2	0.00			Non Recurring -not proposed Budget Proposed Under Line item: 6.11.23.a		





									Approval 20	2022-24		
						F.Y.	2022-23	F.Y. 2	2023-24			
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks		
		Stemi Kit	Per unit	100000	1.00	0	0.00	0	0.00	For all 27 Spokes Existing Hubs & Spokes: 1. Capital Hospital (Hub)- (Spokes)- DHH, Khorda, DHH, Nayagrah, DHH, Puri, CHC Daspalla, CHC Nimapara, CHC Charichwak, CHC Sakhigopal, CHC Jatani, CHC Banapur, CHC Tangi 2. SCB, MCH, Cuttack (Hub)- (Spokes)- SDH, Athagarh, SDH, Banki, CHC, Adaspur, CHC Mahanga Financial implication: Fund proposed for DHH Spokes only (6 Nos) Proposed Hubs & Spokes: 1. Cardiac Care Hospital, Jharsuguda (Hub run in PPP Mode)- (Spokes)RGH, Rourkela, DHH, Jharsuguda, DHH, Sundergarh, SDH Bonai, SDH Panposh, CHC Rajagangpur, CHC Biramitrapur, CHC Kuanrmunda, CHC Lahunipada, CHC Bargaon, CHC Brajarajnagar, CHC Lakhanpur, CHC Mandarajore- Laikera		
		Recurring / Operational cost										
		Manpower								To be managed through existing HR at facility		
		MO	per month		0.00		0.00		0.00			
		Staff nurse	per month		0.00		0.00		0.00			
		Pharmacist	per month		0.00		0.00		0.00			
		Medications										
		PCI/Thrombolysis - rTPA	Per unit	20000	0.20	0	0.00	0	0.00	For 6 Districts & Capital Hospital targets as Spokes (@ 200 per DHH Spoke) (70% proposed) for FY 23-24 it is expected to increase 10% of case load-220=(220*7)1540 (70% Proposed)		
		Spoke Type -2					0.00		0.00			
		Spoke Requirement at FRUs (21 no of CHCs & SDHs)								Existing Hubs & Spokes: 1. Capital Hospital (Hub)- (7 CHC Spokes)- CHC Daspalla, CHC Nimapara, CHC Charichwak, CHC Sakhigopal, CHC Jatani, CHC Banapur, CHC Tangi 2. SCB, MCH, Cuttack (Hub)- (4 Spokes)- SDH, Athagarh, SDH, Banki, CHC, Adaspur, CHC Mahanga Proposed Hubs & Spokes: 1. Cardiac Care Hospital, Jharsuguda (Hub run in PPP Mode)- (10 CHC Spokes) SDH		
										Bonai, SDH Panposh, CHC Rajagangpur, CHC Biramitrapur, CHC Kuanrmunda, CHC Lahunipada, CHC Bargaon, CHC Brajarajnagar, CHC Lakhanpur, CHC Mandarajore-Laikera Total CHC Spokes -21 nos		
		Stemi Kit	Per unit	100000	1.00	0	0.00	0	0.00	Non Recurring - Proposed for 04 SDH and 17 CHCs in 6 districts.		
		Recurring / Operational cost										
		Medications					1		l			







									Approval 20	22-24
							2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	0/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
		PCI/Thrombolysis - rTPA	Per unit	20000	0.20	0	0.00	0	0.00	Proposed for 19 FRUs& 2CHC in 6 districts excluding, Capital Hospital, DHH - Khurda, Puri & Nayagarh, DHH Sundergarh, RGH Rourkela and DHH Jharsuguda) FY 22-23 Case load15*21 (15 Case per year) FY 23-24 Case load 20*21 (20 case per year per HI)
		Spoke Type -3					0.00			Cuttack - ALS-5, BLS-21, Khordha - ALS-4,BLS-19, Nayagarh-ALS-0,BLS-13, Puri-ALS-3,BLS-17, Sundergarh ALS-9,,BLS-30, Jharsuguda- ALS-2, BLS-6
		108 Ambulance								
		Equipment								
		Stemi Kit	per unit	100000	1.00	0	0.00	0		115 STEMI Kits for 23 ALS Ambulance
		PPP initiative under STEMI					0.00		0.00	
		ECG Interpretation & Tele reporting by Agency								
		ECG Interpretation & Tele reporting by Agency	Per case	120	0.00	0	0.00	0		Budgeted: Average-20 ECG per day per HI budgeted FY 22-23- ECG 600 per Spoke per month for 16 Spoke for 12 month (600*16*12*120) FY 23-24 ECG 660 per Spoke per month for 30 Spoke for 12 month (660*30*12*120)
		Any other					0.00			
110		Other NPCDCS Components					0.30		0.30	
	1.1.6.1	Integration with AYUSH at District NCD Cell / Clinic			-		-		-	AYUSH doctors are placed at all 314 Block CHCs as part of Co-locational AYUSH initiatives. They are being trained on NCD in different platforms. Hence No additional Budget proposed.
	1.3.1.10	PHC level: Mobility, Miscellaneous & Contingencies	Per HWC	12000	0.12	0	-	0	-	Proposed for all functional PHC/ UPHC HWCs:to be taken up following activities 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. outreached 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
	1.3.1.11	Sub-Centre level: Mobility , Miscellaneous & Contingencies	Per HWC	5000	0.05	0	-	0	-	CHOs have been engaged/ proposed to be engaged at 5400 SC HWCs by December 2022. Hence, to monitor the field activities under NCD component budget to the tune of Rs. 5000/- per SC HWC is Approved
	2.3.2.1	Universal health check-up and screening of NCDs (May propose organizing outreach activities for NCD screening in non-PBS districts)			-		-		-	Budget proposed under XV-FC, No additional cost proposed under this head







					22-24					
			F.Y. 2022-23 F.Y. 2023-24		2023-24					
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
	6.1.1.23.2	Non recurring: Equipment for Cancer Care					0.00		0.00	1. Day Care Chemo Therapy Cancers: Supported & maintained under State budget. 2. Strengthening Screening & Services for facility based Breast Cancer & Cervical Cancer program In Odisha 2.1. Status of Breast Cancer Programme at DHH level- Procurement of equipment/instruments required for diagnosis by True Cut Biopsy, Ultrasound Probe for Breast Cancer, lump size determination in screening & Humanoid Model for Training on CBE/SBE is in process for 10 DHHs 2.2. Status of Cervical Cancer Programme at DHH level: Procurement of equipment/ instruments required i.e. Hand Held Colposcop, Biopsy Forceps & Thermo coagulator etc. for 10 DHHs is in process. Proposal: Same set of equipment/instruments proposed for 10 other selected DHHs during 2022-24. (Total DHH-32, Total Proposal Till 2022-24-20)
	6.1.1.23.2	Strengthening screening & services for cervical cancer							0.00	
	6.1.1.23.2	Non Recurring Expenses for Cervical Cancer	Per DHH	454800	4.55	0	0.00			1. Digital Video Colposcope @ Rs. 2.5 Lakhs per unit x 10 DHHs = Rs. 25.00 Lakhs 2. Biopsy Forceps @ Rs. 2400 per unit x 2 per DHH x 10 DHHs= Rs. 0.48 Lakhs 3. Thermo coagulator @ Rs. 2.00 Lakhs per unit x 10 DHHs= Rs. 20.00 Lakhs
	6.1.1.23.2	Recurring Expenses for Cervical Cancer	Per Unit	20	0.00	0	0.00	0	0.00	Ongoing for 1st phase districts (10 DHHs) in 2022-23 Ongoing for 1st & 2nd phase districts (20 DHHs) in 2023-24 Disposable plastic Cusco's speculum for Screening by VIA Test @ Rs. 20/- per unit. 100000 (assuming 10% coverage for age group 30 to 65 female in Odisha in 1st year and of this 50% assumed to be screened at PHC HWC)
	6.1.1.23.2	Strengthening screening & services for breast cancer								
	6.1.1.23.2	Non Recurring Expenses for Brest Cancer	Per DHH	409000	4.09	0	0.00		0.00	Ongoing for 1st & 2nd phase districts (20 DHHs) 1. Biopsy Gun (30 Disposable Needles) @ Rs.1.20 Lakhs per unit x 10 units= Rs. 12.00 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 calliper @ Rs.260 per unit x 1500 units (150 per DHH)= Rs. 3.90 Lakhs
		Recurring Expenses for Brest Cancer							0.00	Not proposed
	6.1.1.23.5	Any other equipment (Procurement of COPD & CKD Equipment)								
	6.1.1.23.5	Non Recurring Equipment for CKD			0.00		0.00		0.00	Refer details at NCD.6-PMNDP







			Approval 202							22-24	
						F.Y. 2	2022-23	F.Y. 2	2023-24		
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks	
	6.1.1.23.5	Non Recurring Equipment for COPD	Per unit	500	0.01	0	0.00		0.00	Proposal-1: Peak flow meter will be procured for all health institution @one per each Health Institution as per COPD GoI Guidelines Budget: 1843 nos of facilities X Rs.500/- = Rs.9.22 lakhs (FY -2022-23) Proposal-2: Spiro meter as per COPD Guidelines (Proposed under NCD clinic Equipment/ instruments) Other Items supplied through State Health System	
	6.2.19.2	COPD Drugs and Consumables in whole district	Per District	1200000	12.00	0	0.00	0	0.00	Drugs and consumable for COPD @ Rs. 12.00 Lakhs per dist (GoI norm @25.00 lakhs per districts) x 32 DHHs= Rs. 384.00 Lakhs Drugs to be procured centrally at State level through OSMCL	
	6.1.2.6.1	Procurement for Universal Screening of NCDs			0.00		0.00		0.00	Budget proposed for procurement of Gluco strip, lancet & swab under XV-FC	
	6.2.4.5	Drugs & Diagnostics Cancer care	Lumpsum		0.00		0.00		0.00	Drugs for Cancer Care are being supported under State Budget. Hence no proposal under NHM fund. Gol norms Rs.18.00 lakhs per annum per district X 30 districts =Rs. 540.00 lakhs	
	6.2.19.4	Consumables for PHC level: Glucostrips, lancet, swabs, etc	Per kit	7	0.00		0.00		0.00	Population based Screening for NCD Status: Achievement till date 1375032, Likely to be achieve 2500000 by march 2022, Proposed target 4000000 for 2022-23 & Target 7000000 for 2023-24 Target 2022-23: 4000000 Budget proposed under XV-FC	
	6.2.19.5	Consumables for Sub-Centre level: Glucostrips, lancet, swabs, etc	Per kit	7	0.00		0.00		0.00	Budget proposed under XV-FC	
	6.2.19.6	Drugs & supplies for Universal Screening of NCDs	Lumpsum	0	0.00	1	0.00	1	0.00	Proposal is for procurement of OVE Kit and VIA kit 1.100 VIA examination KIT (Gloves, Cotton swabs, distilled water, acetic acid) for each PHC (HWC) towards 1394 PHC HWC for Screening of suspected women for cervical Cancer. As observed during Screening 10 % of 30+ women are present with signs & Symptom of suspected cervical Cancer VIA kit are required for PHC and above as per operational Guidelines Financial implication: @Rs.10/- per kit X 100 per PHC X 1394 = Rs.13.94 lakhs 2.OVE Kit: Average Tobacco user of the State 42%It is expected that we will be capturing 70% of population at risk (Tobacco user for oral screening). Average tobacco uses among 30+ population to be screened under PBS is 20%, Hence 250 number of disposable tong depressor/oral examination spatula per SC will be required per year. All ANM should be provided with one oral cavity examination mirror and torch light along with oral examination spatula Financial implication: @Rs.10/- per kit X 250 per SC X 6688 = Rs.167.20 lakhs Total Budget: (50% of total budget has been proposed in 2022-23 & rest in 2023-24)	





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						F.Y. 2	2022-23	F.Y. 2	2023-24		
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks	
		State NCD Cell					0.00		0.00		
	9.5.19.1	Training for Screening of Breast Cancer					0.00		0.00		
	9.5.19.1	Training on True Cut Biopsy and CBE on Humanoid Model	Per Person	8000	0.08	0	0.00		0.00	Training of Surgery Specialists from 11 DHH has been planned at AHPGIC during Jan-Mar'22 but due to COVID Pandemic it is postponed. So it is reproposed for FY: 2022-23: 11 person form DHH Level (@5/ Batch), Duration: 3 days	
	9.5.19.1	Training on Breast Imaging/ Ultrasonography at State Level	Lumpsum	150000	1.50	0	0.00		0.00	One Participant (Preferably Radiologist/O&G Spl from each DHH (10 Numbers) for 7 days Training has been planned but due to COVID Pandemic it is postponed. So it is re-proposed for FY: 2022-23. No Proposal for 2023-24	
	9.5.19.1	Centralized District Level Trainings for Block level trainers on CBE/SBE	Per batch	30000	0.30	0	0.00		0.00	The Trg has been planned for conducting in 10 DHHs, due to COVID Pandemic it is postponed. So it is re-proposed for FY: 2022-23. No Proposal for 2023-24 for 10 districts	
	9.5.19.1	State level Training of District level data managers on reporting formats	Lumpsum	5000	0.05		0.00		0.00	Not proposed	
		District level training of Block level data managers	Per DHH	5000	0.05		0.00			Not Proposed	
	9.5.19.1	Training for Screening of Cervical Cancer			0.00		0.00		0.00		
	9.5.19.1	Training On Colposcopy, Biopsy and thermo coagulation for doctors by hybrid training model by NICPR	Per Person	8000	0.08	0	0.00		0.00	Training of OG Spl from 10 DHH has been planned at AHPGIC during Jan-Mar'22 but due to COVID Pandemic it is postponed. So it is re-proposed for FY: 2022-23: 10 person (@5/ Batch), Duration: 3 days	
	9.5.19.1	Training for pathologists/surgery specialist/technicians from DHH	Per Batch	50000	0.50	0	0.00		0.00	Training for pathologists/surgery specialist/technicians from 10 DHH has been planned at AHPGIC during Jan-Mar'22 but due to COVID Pandemic it is postponed. So it is re-proposed for FY: 2022-23 Load for 2022-23: 4 batches: @5/ Batch), Duration: 3 days No Proposal for 2023-24	
	9.5.19.1	Standard Breast Examination Trainer Simulation Model, Limbs and Things	Per District	60000	0.60	0	0.00		0.00	Proposed for FY: 2022-23 for additional 10 DHH	
	9.5.19.1	2 days State level Refresher Training of MOs of DHH Level NCD Clinic	30/ Batch	124000	1.24	0	0.00	0	0.00	Training of MOs of DHH Level NCD Clinic Load of 2022-23: 1 batch Target for 2023-24: 1 batch	
	9.5.19.1	Three months ICU case management training of Medical officer	Per Batch	3175000	31.75	0	0.00	0	0.00	Three months ICU case management training of Medical officer & Nursing Officers Batch size: 20 Load for 2022-23: 2 batches & 2023-24: 2 batches Revised Unit Cost	
	New Activity	7 days Refresher Training for Medical Officers and Nursing Officers on ICU / CCU Case Management	20/batch	264000	2.64	0	0.00	0	0.00	Refresher Training for Medical Officers and Nursing Officers on recent changes & Updating. Load for 2022-23: 1 batch & 2023-24: 1 batch	
	New Activity	2 days State level Training of CHC Medical Officers on NCD Programmes	30/batch	140000	1.40	0	0.00	0	0.00	MOs of CHCs need orientation on various NCD Programmes. State level two days training will be conducted for the CHC MOs i/c. Target for 2022-23: 10 Batches Target for 2023-24: 3 batches	







			Approval 2022-24							
							2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
	New Activity	Two days State level Training of Nodal Officers / Programme Managers on NCD Programmes	30/ batch	140000	1.40	0	0.00	0	0.00	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 State load: 150 person, Target for 2022-23: 5 batches & Target for 2023-24: 5 batches
	New Activity	3 days State level Training on NCD Data Management of District Epidemiologist	30/batch	148000	1.48	0	0.00	0	0.00	State Load: 30 person (@1 Epidemiologist/ District) Target for 2022-23: 1 Batch & Target for 2023-24: 1 batch
		One day Refresher Training of FLC on Financial Management at state level.	30/batch	90000	0.90	0	0.00	0	0.00	State load: 30 FLC in 30 DHH Target for 2022-23: 1 batch (@30/batch) Target for 20223-24: 1 batch (@30/batch)
	New Activity	Two Days Orientation training of NCD and NTCP Counsellor at state level	25/batch	116000	1.16	0	0.00	0	0.00	State load: 47 persons Target for 2022-23:2 batches (@25/ batch) Target for 2023-24: 2 batches (@25/ batch)
	New Activity	2 Days State level ToT on COPD for District level Medical Officers	30/batch	140000	1.40	0	-	0	-	New programme to be implemented ToT for TB & Chest Specialist/ Medicine Specialists/DPHOs who will be the master trainers for block level Medical Officers. Load for 2022-23: 2 batches (Batch size-30.) Duration of Training- 2days. Load for 2023-24: 2 batches (Batch size-30). Duration of Training- 2days.
	New Activity	District level cascade training on COPD for Block level Medical Officers	30/batch	30000	0.30	0	-	0	-	For Year 2022-23 & 23-24 One day District level training of SDH and CHC MOs on COPD. Target for 2022-23: 7 batches Target for 2023-24: 7 batches Batch size-30. Total No of batches-14
	New Activity	State level ToT on NAFLD for District level Medical Officers	Lumpsum		-	0	-	0	-	New programme to be implemented ToT for T Medicine Specialists/Medical Officer & DPHOs who will be the master trainers for block level Medical Officers. Batch size-30. Duration of Training- 2days. Total Number of batches-4. (2 batches in 22-23 & 2 in 2023-24) Cost per batch in 2022-23: Rs. 1,40,000 Cost per batch in 2023-24: Rs. 1,50,000







			Approval 2							I 2022-24		
						F.Y.	2022-23	22-23 F.Y. 2023-24				
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks		
	9.5.19.3	Training for Universal Screening for NCDs	30 / batch	210000	2.10	0	0.00	0	0.00	Background: Day care Chemotherapy services has been available at all DHHs. The MOs rendering services require refresher training for better chemotherapy services. Induction training is also required for MOs on Cancer Care Load for 2022-23:1 batch Load for 2023-24:1 batch Duration: 3 days Batch size-30 Budget:@Rs.1.40 lakhs X 1 batch= Rs.1.40 lakhs		
	9.5.19.4	Any other (2 days state level Training of MOs of DHH, SDH & CHC on MO Portal of NPCDCS)	20 / batch	135000	1.35	0	0.00		0.00	Ongoing Activity: Background: As per GOI recommendation for Universal population based screening on common NCD, data captured during screening needs to be uploaded in MO portal/ NCD App. So, the MOs dealing with such portal / App requires training which will enable them to use the features of the App in one hand and data analysis / prescription etc., on the other. Load: 32 DHH + 34 SDH + 377 CHC= 443 Mos Proposed for 2022-23: 7 batches Load for 2023-24: N/R		
	9.5.19.2	Training for Strengthening District NCD Cell	30 / batch	210000	2.10	0	0.00	0	0.00	Proposal: 3 days Refresher training of Medical Officers on Cancer Care Background: Day Care Chemotherapy Services are available at all DHHs. The MOs rendering services require refresher training for better chemotherapy services Induction training is also required for MOs on Cancer Care . Number of Batches 1batch/year at state level Load for 2022-23:1 batch Load for 2023-24:1 batch		
	New Activity	Any other CME/Symposium/Plenary Session on NCD programmers	Per MCH	30000	0.30	1	0.30	1	0.30	CME/Symposium/Plenary Session on NCD programmers for updating of knowledge of NPCDCS Programmes and technical input for implementation of Programme in State specific. Participant-faculty of the concern dept of MCH Level of implementation at MCH level		
-	10.2.12	Research and Survey at State NCD Cell			-		-		-	Not Proposed in the current Year		
-	10.2.13	Research and Survey at Institutes			-		-		-	Not Proposed in the current Year		
	10.3.2.1	Surveillance at State NCD Cell			-		-		-	Not Proposed in the current Year		
	10.3.2.2	Surveillance at Institutes Any other Research/ Survey/ Surveillance (please specify)			-		-		-	Not Proposed in the current Year Not Proposed in the current Year		
j	11.22.1	IEC/BCC for State NCD Cell					0.00		0.00			
	11.22.1	Advertisement through DD & local channels or scrolling	Per minute	162000	1.62	0	0.00	0	0.00	Timing: 1 minute per day for 24days per year as per I&PR rates		
	11.22.1	Advertisement through AIR channels	Per minute	60000	0.60	0	0.00	0	0.00	Timing: 1 minute per day for 12 days in a year as per I&PR rates		
	11.22.1	Advertisement through FM Channels	Per 10 minutes	20000	0.20	0	0.00	0	0.00	Timing: 10 minutes per day for 30 days per year		







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						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
	11.22.1	Publicity through Print Media	Per day Per paper	110000	1.10	0	0.00	0	0.00	One time advertisement of Color Quarter page in 2 newspaper for 12 days
	11.22.1	Panel discussion at Doordarshan	Per Unit	55000	0.55	0	0.00	0		Six Panel discussions proposed in a year
	11.22.1	Day Celebration	Per Unit	100000	1.00	0	0.00	0		Day Celebration: 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
	11.22.1	Production of TV & Radio Spot	Per Spot		0.00		0.00		0.00	Separate fund for production of TV & Radio Spots has been kept under Line Item No. HSS-3 Sl.no.163
	11.22.2	IEC/BCC for District NCD Cell					0.00		0.00	
	11.22.2	Dynamic hoarding	Per Flex	3000	0.03	0	0.00	0	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
	11.22.2	Day Celebration	Per District	90000	0.90	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.15000/- Per Designated Day X 5 days X 30 districts = Rs.22.50 lakhs
	11.22.2	Street Play/Folk show	@4 Per Block/ Per Show	12000	0.12	0	0.00	0	0.00	Street Play/Folk show: @Rs.3000/- per show X 4 per block at media dark areas X 314 block =Rs.37.68 lakhs
		IEC/BCC activities for Universal Screening of NCDs					0.00		0.00	
	11.22.3	Poster	Per poster	5	0.00	0	0.00	0	0.00	Target: Target set by Gol for Universal Screening: 40 lakhs population State has planned for reaching out minimum 70 lakhs population in 2022-23 across the State Proposal 2022-23: 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) 1. Poster: @Rs.5/- per poster X 6 posters per villages X 60000 villages = Rs.18.00 lakhs 2. Leaflets: @Rs.1/- per leaflet X 1000000 leaflets (4000000 / 4.3 is family size) = Rs.10.00 lakhs
		Leaflet	Per leaflet	1	0.00	0	0.00	0	0.00	Proposal 2023-24: Proposed to organize Poster campaign in the villages to be taken as preparatory initiatives before initiation of NCD campaign and distribution of leaflets during



							Approval 20	022-24		
						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
	11.22.4	Any other IEC/BCC activities (please specify)	Per Show		0.00	0	0.00		0.00	Wall painting on CVD, Cancer awareness at village level utilising VHSNC fund
	12.15	Printing activities under NPCDCS					-		-	
	12.15.1	Printing at PHC Level	Per unit	10	0.00	0	-	0	-	Proposal: Printing of Patient Cards (Depict treatment & Referral details as applicable) PBS is now being conducted through out the State, The Screening Target for 2022-23 is 40.00 Lakh. So it is expected that 10% of Screened population will be referred to higher facility for confirmation and treatment. Hence, printing proposed for 4 lakhs referral cards (1.00 lakh at PHC level and 3.00 Lakhs at SC level)
	12.15.2	Printing at SC Level	Per unit	10	0.00	0	-	0	-	Proposal: Printing of Patient Cards (Depict treatment & Referral details as applicable) PBS is now being conducted through out the State, The Screening Target for 2022-23 is 40.00 Lakh. So it is expected that 10% of Screened population will be referred to higher facility for confirmation and treatment. Hence, printing proposed for 4 lakhs referral cards (1.00 lakh at PHC level and 3.00 Lakhs at SC level)
	12.15.3	Printing activities for Universal Screening of NCDs printing of cards and modules	Per format	1.5	0.00	0	-	0	-	Ongoing Activity Proposal: Printing of CBAC form Proposed screening: 40.00 Lakhs in 22-23 & 70.00 Lakhs in 2023-24 Printing of CBAC format; 4.65 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 Gol guidelines. Currently CBAC forms have been revised to include other diseases like TB, Leprosy visual defects and Mental Health. 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 Gol
	12.15.4	Any other (please specify)			-		-		-	No new proposal in the current year PIP.
	12.15.4	Printing of Operational Guidelines on NCDs	Per unit	400	0.00	0	-		-	Operational Guidelines for NPCDCS -250 copies @ 400 Per copies- Rs1.00 Lakh Operational Guideline for COPD-250 Copies @ Rs 400 for Copies - Rs 1.00 Lakh operational Guidelines for NAFLD-250 Copies @ Rs 400 per copies - Rs 1.00 lakh







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							2023-24					
.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks		
	12.15.4	Printing of Patient Tracking & Follow-up Register	Per Register	200	0.00	0	-		-	Proposal: Registers will be printed for 6688 SCs, 1288 PHCs & 106 UPHCs Justification for Printing of NCD Registers: 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 & 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 &correct monthly reporting. 5. Proper Supervision & 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		
	12.15.4	Strengthening Screening & Services For Breast Cancer			-		-		-			
	12.15.4	ASHA booklet on CBE/SBE	Per Booklet	20	0.00	0	-		-			
	12.15.4	ANM Job Aids	Per unit	30	0.00	0	-		-			
	12.15.4	Strengthening Screening & Services For Cervical Cancer			-		-		-			
		Ÿ	Per Booklet	20		0	-		-			
	12.15.4	ANM JOB AIDS – Flash cards for VIA	Per unit	30	0.00	0	-		-			
	15.4.5	PPP (NGO, Civil Society, Pvt. Sector) under NPCDCS					-		-			
	15.4.5.1	PPP at State NCD Cell			-		-		-	Programme implemented through system mode		
		Any other (please specify)			-		-		-			
		Planning and M&E					-		-			
	1	State NCD Cell (Monitoring Supervision & Review Meeting)		1000000	10.00	0	-	0	-	Review Meeting of district level officers & consultants at State level: 4 review meetings X Rs.1.00 lakhs = Rs.4.00 lakhs Monitoring & Supervision: @0.50 lakhs per month X 12 months = Rs.6.00 lakhs Revised as per requirement (last years approval Rs.5.00 lakhs)		
	2	District NCD Cell (Monitoring Supervision & Review Meeting)	Per District	50000	0.50	0	-	0	-			
	9	State NCD Cell (TA,DA, POL)	Lumpsum	300000	3.00	0	-	0	-			
	16.1.3.3.1 6	District NCD Cell (TA,DA, POL)	Per District	50000	0.50	0	-	0	-			







			Approval 2022-24								
						F.Y. 2	2022-23	F.Y. 2	2023-24		
S.No	o. Old FM	R Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks	
	16.1.4.1. 3	State NCD Cell (Contingency)	Lumpsum	200000	2.00	0	-	0	-		
	16.1.4.2	9 District NCD Cell (Contingency)	Per District	50000	0.50	0	1	0	-		
	16.1.5.2	office equipment (fax, phone, photocopier etc.)	,				-		-		
	16.1.5.2. 1	State NCD Cell			-		-		-	Already provisioned	
	16.1.5.2. 2	5. District NCD Cell			-		-		-		
11:	L	State specific Initiatives and Innovations					0.00		0.00		
	U.1.1.2.5	Support for implementation of NPCDCS	Per camp	10000	0.1	0	0.00	0	0.00	Activity: Quarterly NCD Screening Camp at non slum area. No of Camps to be organized: 1 Camp per Qtr per UPHC. Total No of Camps = 106 UPHC X 4 Camps per UPHCs= 424 Camps. in 2022-23 Total No of Camp = 110 UPHCs (106 + 4 New) X 4 Camps per UPHC= 440 Camp. in 2023-24 Budget proposed per camp: Rs.10,000/- 1. Camp arrangement - Rs.5,000/- 2. IEC/BCC (Miking/ Poster/ leaflets) -Rs.3,000/- 3. Other contingencies - Rs.2,000/-	
	New Activity	Improving access, coverage and treatment of cervical cancer through home-based HPV testing and screening in Odisha	Lumpsum		o		0.00			This activity is being piloted in 2 Municipal Corporation Cities i.e. Cuttack & Bhubaneswar. Since October 2020 out of funding under NHM district/ State innovation fund. The activity will be scaled after proper assessment by 3rd party.	
	New Activity	Kidney Care on Wheels in Priority District of Odisha	Per block	965000	9.65	0	0.00		0.00	Two priority district (Proposed: Cuttack and Kalahandi) Total Targeted Population in 4 Blocks: 4 lakhs Cuttack(Narasinghpur, Badamba) and Junagarh, Dharamgarh of Kalahandi district	
	New Activity	Vaccination for Human Papilloma Virus (HPV) for prevention of Cervical Cancer among girls student of residential schools	Lumpsum	100000000	1000.00		0.00	0	0.00		
							0.30		0.30		









NHM PIP 2022-24

Programme Implementation Plan

NCD-7 **NPPCHH**

NCD-7_NPCCHH_Odisha

			Approval 20						val 2022-24		
	011500	21 (21)				F.Y. 2	2022-23	F.Y. 2	2023-24		
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks	
		Total NPCCHH					0.05		0.05		
114		Implementation of NPCCHH					0.05		0.05		
	3.3.3.3	Training of PRI under National Program for Climate Change and Human Health (NPCCHH)					0.00		0.00		
	3.3.3.3	State level Training (ToT) of PRI under National Program for Climate Change and Human Health (NPCCHH)	Per Person	3000	0.03	0	-	0	-	Proposal: One day State level Training(ToT) for PRI members on NPCCHH Target- 6 NCAP Districts State load:48 (6 DPHCO + 6 District Pachayat officers + 12 representative of GPEO +12 representative Municipal office+ 6 representative BPHCO + 6 District AM (IEC & training) in 6 districts under National clean Air Programme like Khordha, Cuttack, Angul, Baleswar, Sundergarh, Jajpur) Total Target: 2 batches Target for 2022-23: 1 batch (Cuttack, Khordha, Angul) Target for 2023-24: 1 batch (Baleswar, Sundergarh, Jajpur)	
	3.3.3.3	District level Training of PRI under National Program for Climate Change and Human Health (NPCCHH)	Per Person	800	0.01	0	0.00	0	0.00	Target- 6 NCAP Districts Proposal: One day District level Training for PRI members on NPCCHH State load: 1762 (168 Sarapanch of Khordha+ 332 Sarapanch of Cuttack +260 Sarapanch of Angul + 67 BMC Corporators+54 CMC corporators+40 RMC corporators+289 Sarapanch of Balasore +262 Sarapanch of Sundergarh + 290 Sarapanch of Jajpur) Total Target: 35 batches(Batch size= 50) Target for 2022-23=881 persons having 18 batches (Angul-5 batches, Cuttack-8 batches, Khordha-5) Target for 2023-24: 881 persons having 18 batches (Sundergarh-6 batches, Baleswar-6 batches, Jajpur-6 batches)	
		Climate change resilience and Greening of Health Sector 1. Plantation 2. Conversion lighting system to LED 3. Rain Water Harvesting Structure 4. Solar lighting system of Public Health Facilities 5. Energy Auditing			-		-		-	Programme Division: NPCCHH Target-Climate change resilience and greening of Health Sector in PHC in 6 NCAP Districts Proposal 1: Budget for Plantation to be met from respective RKS. Proposal-2: Conversion of LED Light system Budget: @Rs. 0.25 lakhs per PHC/ UPHC X 48 units, @Rs.0.75 lakhs per CHC/CHC X 12	
		Conversion lighting system to LED					-		-	units, @Rs.2.00 lakhs per DHH X 6 DHHs= Rs.33.00 lakhs	
		For DHH	Per unit	200000	2.00	0	-	0	-	Proposal-3: Rain Water Harvesting Structure Budget: @Rs. 2.00 lakhs per DHH X 9 DHHs with New 300 bedded Building, @Rs.1.00	
		For CHC/ UPHC	Per unit	75000	0.75	0	-	0	-	lakhs per CHC/UCHC X 12units, @Rs.1.00 lakh per UPHC/PHC X 36 units= Rs.66.00 lakhs	
		For PHC/ UPHC	Per unit	25000	0.25	0	-	0	-	Proposal-4: Solar Lighting System at Government Hospitals in 6 targeted cities under	
	5.1.1.2.1	Rain Water Harvesting Structure			-		-		-	NCAP Background: Use of Solar energy for lighting purpose will not only reduce the cost of	
		For DHH	Per unit	200000	2.00	0	-	0	-	energy for hospital sector but will also contribute immensely towards protecting the	
		For CHC /UPHC	Per unit	100000	1.00	0	-	0	-	environment and combating climate change. Govt of Odisha is planning to implement the initiative in Six NCAP (National Clean Air Programme) cities. The Govt envisages to	





			Approval 2022-24							
	01.1.5140	Charles 5				F.Y. 2	F.Y. 2022-23 F.Y. 2023-24			
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks
		Solar lighting system of Public Health Facilities			-		-		-	implement the initiative in one SDH (Talcher), 8 CHCs & 48 nos of UPHCs in these si
		For SDH	Per unit	1500000	15.00	0	-	0	-	cities (Anugul, Balasore, Cuttack, Jajpur, Bhubaneswar & Rourkela)
		For CHC/UCHC	Per unit	1000000	10.00	0	-	0	-	Budget 2022-24: Rs. 145.00 Lakhs (@ 15 Lakhs per SDH X 1, @ 10 Lakhs per CHC X 1, @ 5 Lakhs per UPHC X 24 units)
		For UPHC	Per unit	500000	5.00	0	-	0	-	Proposal-5: Energy Auditing for public health facilities
		Energy Auditing			-		-		-	Budget: @Rs.0.10 lakhs per PHC/UPHC X 140 units, @Rs.0.30 lakhs per CHC/UCHC X 3 units, @Rs.1.00 lakhs per DHH X 8 DHHs=Rs.31.00 lakhs
		For DHH	Per unit	100000	1.00	0	-	0	-	Total Budget as per Gol Recommendation: Rs.275.00 lakhs (50% proposed in 1st year
		For CHC/UCHC	Per unit	30000	0.30	0	-	0	-	rest in 2nd year)
		For PHC/ UPHC	Per unit	10000	0.10	0	-	0	-	
•	6.1.1.25.3	Installation of indoor air quality monitor with centralized monitoring system	Lumpsum	8130000	81.30		0.00		0.00	
9	9.5.29.8	Trainings under NPCCHH					0.00		0.00	
9	9.5.29.8	Trainings of Medical Officers, Health Workers and Programme officers under NPCCHH			0.00		0.00		0.00	
9	9.5.29.8	2 days State level training of Medical officer (ToT) of 6 targeted NACP districts	30 / Batch	120000	1.20	0	0.00		0.00	State level TOT Training (2 Medical officer, 2 Ayush Medical Officer an Epidemiologist of 6 targeted cities) Budget: Rs. 1.20 lakhs
9	9.5.29.8	2 days District level Training of Medical Officer	30/Batch	60000	0.60	0	0.00	0	0.00	Training of CHC & PHC Medical Officer including AYUSH MO (2days as suggeste by Gol) Budget: Rs 3.6 lakhs
9	9.5.29.8	2 days District level Training of Health Worker	30/Batch	60000	0.60	0	0.00	0	0.00	Training of CHC & PHC Health Worker (2days as suggested by GoI) Budget: Rs 3.6 lakhs
Ç	9.5.29.8	State level Two day Training of Medical Officer & Data Handler of 13 Sentinel Hospital of 6 targeted Districts	Per Person	3000	0.03	0	0.00	0	0.00	Two day Training of Medical Officer and Data Handler in 13 sentinel Hospital citic for surveillance ARI under Climate Change. Budget: Rs.0.78 lakhs
:	10.2.14	Surveillance/ Vulnerability assessment/ Research related to Climate Change, Air Pollution and Heat related illness	Lumpsum	2200000	22.00		-		-	Proposal: 1. Vulnerable assessment - Rs. 12.00 lakhs 2. Research & Studies - Rs. 10.00 lakhs Dropped as per NPCC comments
	11.24.4.4	IEC on Climate Sensitive Diseases at Block , District and State level – Air pollution, Heat and other relevant Climate Sensitive diseases			0.00		0.00		0.00	
:	11.24.4.4	TV (Local channels)- Advertisement in the DD & local channels	Per minute	30000	0.30	0	0.00	0	0.00	Timing: 1 minute per day once in a month for 12 months as per I&PR rates
:	11.24.4.4	Advertisement through All India Radio	Per minute	60000	0.60	0	0.00	0	0.00	Timing: 1 minute per day for 6 days in a year as per I&PR rates
:	11.24.4.4	Advertisement through FM Channels & Community Radio	Per minute	20000	0.20	0	0.00	0	0.00	Timing: 10 minutes per day for 30 days per year
ŀ	11.24.4.4	Day Celebration	Per Unit	10000	0.10	0	0.00	0	0.00	Proposal for day celebration at District, Block & MC level
	12.17.3	Printing activities for NPCCHH	Per unit	5000	0.05	1	0.05	1	0.05	Ongoing Activity Cost for printing of forms & Formats, related consumables (For 13 sentin hospital in 6 cities as per identified sites NCAP)
		Planning and M&E					-		-	·







				Approval 2022-24									
	0115050						2022-23	F.Y. 2	023-24				
3.140. Old	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Ouantity/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. jakhs)	State's Remarks			
		Task force Meeting to draft health sector plan for Heat and Air Pollution	Lumpsum	0	-	1	-	1		I. One day State level Workshop of Multi Stake Holders from Deptt of Health & Family Welfare, Agriculture, Urban Development, Environment & Forest, other related Deptt. & Expert Organizations) of State & District level to develop roadmap/ micro plan for adaption of acute respiratory and cardiovascular illness attributed to air pollution.@ Rs.1.00 lakh /workshop. II. State Task meeting @ 10000/- twice in a year. (10000 X 2 = 20000/-). III. District level Task force in 6 targeted district/ Cities @ 7500 X 2 X 6 = 90000/-) Total Budget Requirement per year: Rs. 2.10 Lakhs			
		Sensitization workshop/ Meeting of the State Program Officers and District level Health Officers	Per Meeting	60000	0.60		-		-	Not Proposed			
							0.05		0.05				









NHM PIP 2022-24

Programme Implementation Plan

HSS-1 **CPHC**

FM MCH, Balasore

HSS-1_CPHC

SI.						F.Y. 2	022-23	F.Y. 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Total CPHC					1.20		1.32	
150		Development & Operation Health & Wellness Centers Rural					1.20			State : Target 2022-23 - 6688 (1288 PHC, 5400 SHC) Target 2023-24 - Same - 6688 (1288 PHC, 5400 SHC) 2022-23 - Recurring cost support under - XV FC - 2605 SHC HWCs of 14 dist. 2023-24 - Recurring cost support under - XV FC - 2736 SHC HWCs of 15 dist.
	1.1.7.5	ICT for HWC- Internet connection			-		ı		-	Fundsbudgeted under old FMR head 17.2.1
	3.1.1.5	Filling up of CBAC form and mobilizing for NCD screening			-		-		-	Budgted under NCD Component
	3.1.1.5	Follow up of NCD patients for treatment initiation and compliance			-		-		-	Budgeted under Old FMR 3.1.1.6.1 under ASHA Component
	131161	ASHA incentives for Ayushman Bharat Health & Wellness Centers (H&WC)	Per ASHA p.m	1000	0.01	0	-	0	-	Team Based Incentives to ASHAs Incentives will be paid to ASHAs of rural areas for delivery of expanded range of services at SHC-HWC level on fulfilling set of deliverables mentioned under Team based incentives -Budgeted for 60% of total estimated cost. FY 2022-23: @Rs. 1000/- per month X 12 months X 47095 ASHAs= Rs.5651.40 lakhs (Budgeted 60%) FY 2023-24: @Rs. 1000/- per month X 12 months X 47095 ASHAs= Rs.5651.40 lakhs (Budgeted 60%)
	6.1.1.7.1	Equipment for Rollout of B.Sc. (Community Health)			0.00		0.00		-	Not Proposed this year
	6.1.2.5.1	IT equipment for HWCs (PHC and SHCS)					0.00		0.00	
	6.1.2.5.1	Recurring Cost for PHC HWCs	Per facility	5000	0.05	0	0.00	0	-	FY 2022-23: For PHC HWCs i) Recurring cost @Rs 5000/ per annum for 1288 PHC-HWCs= 1288 × 5000 = Rs.64.4L ii) Non Recurring: the requirement for the procurement of Desktop, software for
		Non Recurring: Procurement Desktop; software for PHC level H&WC (Rural)	Per facility	55000	0.55		0.00			PHC level H&WC (Rural) is saturated by FY 2021-22 For SHC-HWC i) Recurring cost @Rs 5000/ per annum for 2795 SC-HWC from 17 districts (out of 5400 SHCs 2795 facilities are from non XV FC supported districts) = 2795 × 5000 = Rs.139.75L ii) Non Recurring: Procurement of laptop; software for SC Level H&WC (Rural)- @Rs.40,000/- for 1766 SHC HWC (3634 approved in in previous year) =



CI						F.Y. 2	2022-23	F.Y. 2	2023-24	nss-i_crnc rw wich, balasore
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	6.1.2.5.1	Recurring Cost for SC HWCs	Per facility	5000	0.05	0	0.00	0	-	1766 × 40000 = Rs.706.40 Lakhs FY 2023-24: For PHC HWCs i) Recurring cost @Rs 5000/ per annum for 1288 PHC-HWCs= 1288 × 5000 = Rs.64.40 lakhs ii) Non Recurring: the requirement for the procurement of Desktop, software for PHC level H&WC (Rural) is saturated by FY 2021-22
	6.1.2.5.1	Non Recurring: Procurement of Tablets; software for SC Level H&WC (Rural)	Per facility	40000	0.40	0	0.00	0	-	FHC level H&WC (Rural) is saturated by FY 2021-22 For SHC-HWC i) Recurring cost @Rs 5000/ per annum for 2664 SC-HWC from 16 districts (out of 5400 SHCs 2664 facilities are from non XV FC supported districts) = 2664 × 5000 = Rs.133.20 lakhs ii) Non Recurring: the requirement for the procurement of Desktop, software for PHC level H&WC (Rural) is saturated by FY 2022-23
	6.1.2.5.2	Tablets; software for implementation of ANMOL			0.00		0.00		-	Tablet for Anmol device not proposed in current year. However, Device Allowance budgted at HSS-13
	6.2.22	Drugs & Supplies for Health & Wellness Centres (H&WC)					0.00		0.00	State Data Cumulative Target till 2021-22: 5028 (SC-3634; PHC-1288 & UPHC-106) Approvals taken till 2020-21: 2257 (SC-1100; PHC-1067 & UPHC-90) Approvals required for FY 2021-22: 2759 (SC-2534; PHC-221 & UPHC-16)
	6.2.22.1	Lab strengthening for SHC - HWC					0.00		0.00	
	6.2.22.1	Non Recurring Cost for SC HWCs	Per HWC	50000	0.50		0.00		-	Not Approved for FY 2022-23: Budgeted under XV-FC For SHC-HWC: 1.Non recurring- Out of total 5400 SHC HWCs, 3634 SHCs are approved in the previous years, rest 1766 is proposed @ Rs 0.50 Lakh per HWC = 1766 × 0.50 = Rs.883.00 Lakhs (Proposed to be met out of State Budget) 2. Recurring cost for Lab Consumable is proposed for 2795 SHC-HWCs from 17 districts (out of 5400 SHCs 2795 facilities are from non XV FC supported districts) @ Rs 10,000/- per HWC = 2795 × 0.10 = Rs. 279.50 Lakhs
	6.2.22.1	Recurring cost for SC HWCs	Per HWC	10000	0.10		0.00	0	-	Approval for 2023-24: For SHC-HWC: 1.Non recurring- (Proposed to be met out of State Budget) 2.Recurring cost for Lab Consumable is proposed for 2664 SHC-HWCs from 10 districts (out of 5400 SHCs 2664 facilities are from non XV FC supported districts @ Rs 10,000/- per HWC = 2664 × 0.10 = Rs.266.4 lakhs
	6.2.22.2	Lab strengthening for PHC - HWC					0.00		0.00	Not Approved for FY 2022-23: Budgeted under XV-FC
	6.2.22.2	Non Recurring Cost for PHC HWCs	Per HWC	100000	1.00		0.00		-	For PHC-HWC: 1.Non recurring- Requirement saturated in financial year 2021-22 2. Recurring cost for Lab Consumable is proposed for 1288 PHC HWCs @ Rs 30,000/- per HWC = 1288 × 0.30 = Rs.386.40 Lakhs FY 2023-24:





CI.						F.Y. 2	2022-23	F.Y. 2	2023-24	nss-I_CPRC FW WICH, Balasore
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	6.2.22.2	Recurring cost for PHC HWCs	Per HWC	30000	0.30		0.00	0	-	For PHC-HWC: 1.Non recurring- Requirement saturated in financial year 2021-22 2. Recurring cost for Lab Consumable is proposed for 1288 PHC HWCs @ Rs 30,000/- per HWC = 1288 × 0.30 = Rs.386.40 Lakhs
	957/	Trainings for Ayushman Bharat Health & Wellness Centre (AB-H&WC)					0.00		0.00	
	9.5.27.1	Training on CPCH for CHOs	Per student	80500	0.81	0	0.00	0	-	FY 2022-23: CHO Training State is expected to recruit 5400 CHOs by the year 2022-23. State has customised a four months certificate course through Odisha Nurses Midwives Examination Board (ONMEB). As per state requirements and is being run in 28 BSc Nursing/GNM/ ANM Training Centres. It is exacted by March 2022, 3634 CHOs will be in position. • At present 308 CHOs are in-positioned at different SC HWCs and 1537 passed in the first batch of CPCH course. the second batch of 1680 CHOs is ongoing. • It is expected that at least 10% (540) of these requirement would be fulfilled through integrated course candidates and the rest of the will undergo the certificate course. = 308+1537+1680+540 = 4065 State Target for 2022-23: 5400 - 4065= 1335 Funds proposed for training of 1335 candidates @Rs.80500/- per student (Gol norms). Total estimated Budget = @0.805 Lakhs x 1335 = 1074.68L FY 2023-24: CHO training not proposed, as expected that by 2022-23 all the target for posting of CHOs will be met
	9.5.27.2	Multiskilling of MPW and ASHAs at HWCs (SHC and PHC)	Per inst.	10000	0.10	0	0.00	0	-	FY 2022-23: Training on EPS is planned from the month Feb - March'22; funds approved last year; hence refresher proposed in 2023-24 FY 2023-24: Budget proposed for a refresher training for a total number of 6688 HWCs (5400 SC-HWC and 1288 PHC-HWC) @ Rs.10,000/- per facility for training of frontline health workers. = 6688 × 10000 = 668.8L = Total Budget: 668.90 Lakhs
		Additional Training of CHOs								Not Proposed this year
		Any other (please specify)			0.00		0.00		0.00	
		Multiskilling activities for HWC (ongoing)		1	0.00		0.00		0.00	
		Multiskilling of Mos	Per HWC	5000	0.05	0	0.00	0	-	Proposal 2022-23: Not Proposed FY 2023-24: Refresher Multiskilling training for MOs @ Rs. 5,000/- per HWC
		Multiskilling of SNs	Per HWC	3500	0.04	0	0.00	0	-	Proposal 2022-23: Not Proposed FY 2023-24: Refresher Multiskilling training of SNs @ Rs. 3,500/- per HWC
		Multiskilling of CHOs	Per HWC	3500	0.04	0	0.00	0	-	Proposal 2022-23: Not Proposed FY 2023-24: Refresher Multiskilling of CHOs @ Rs. 3,500/- per HWC







SI						F.Y. 2	022-23	F.Y. 2	2023-24	
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	9.5.27.4	One and half day training on Eat Right India Movement for the HWCs in Aspirational Districts	Per Batch	20400	0.20	0	0.00	0	-	One and half day training on Eat Right India Movement for the HWCs in non Aspirational Districts (funds for apsirational districts have been approved during FY 2021-22): FY 2022-23: • Total HWCs - 4661 (3733 SHC HWC , 928 PHC HWC) • Proposed @8 Per SHC HWC & PHC HWC = 4661 × 8 = 37288 • @20/batch total batch = 37288/20 = 1864 • Total cost @Rs. 20,400 per batch= 1864 × 20400 = 380.3L Budgeted 80%. FY 2023-24: Refresher training on Eat Right India Movement for the HWCs • Total HWCs - 6688 (5400 SHC HWC , 1288 PHC HWC) • Proposed @8 Per SHC HWC & PHC HWC = 6688 × 8 = 53504 • @20/batch total batch = 53504/20 = 2675 • Total cost @Rs. 20,400 per batch= 2675 × 20400 = 3545.74L Budgeted: 80% of the total cost = Rs.436.56 Lakhs
		Establishment of study center for certificate course in community health	Per Unit	150000	1.50		0.00		-	28 PSCs established across the state; no new proposal for FY 2022-23 & 2023-24
		Printing activities for Ayushman Bharat H&WC			-		-		-	Ongoing Activity The training tool kit and the handbooks shall be provided during the training in 10 aspirational districts. • Eat right tool kit needs to be printed @2 nos /AB HWC (the tool kits shall be kept in the AB-HWC for MO/CHO as resource material and the IEC purpose) and @3 nos / SC of AB HWC (one tool kit shall be kept in the SC as resource material and the other two shall be used by ASHA for IEC-BCC purpose on rotation basis) & • Handbook of the eat right tool kit-one handbook each for each ASHA needs to be printed which shall be handed over to ASHA as a learning material.
		Printing of eat right tool kit & handbook								
	12.16.1	Printing of Eat right tool kit	Per tool kit	990	0.01	0		0	-	FY 2022-23: Proposal for purchase of eat right tool kit for health service providers at PHC HWC (2 per PHC HWC) & SHC HWCs (3 per HWC SHC) in Non aspirational dist. Provision for aspirational districts has been made in previous year Total number of HWCs in Non Aspirational Districts are - 4661 = 928 PHC HWCs + 3733 SHC HWCs (Budget for Aspirational districts have already provisioned in 2021-22) Number of toolkits for PHC HWC = 2 × 928 = 1856 Number of toolkits for SHC HWC = 3 × 3733 = 11,199 Total number of toolkits - 1856 + 11199 = 13055 Approximate cost per tool kit- Rs 990 × 13055 = Rs129.24 Lakhs FY 2023-24: Not proposed, Proposal for procurement of eat right tool kit is already proposed in FY 2022-23







SI						F.Y. 2	2022-23	F.Y. 2	2023-24	noo-i_crnc rw wcn, balasole
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	st Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Printing Handbook for ASHA	Per Copy	150	0.00	0	-	0	-	FY 2022-23: Proposal for printing of handbook for all ASHAs in the state except urban areas in 2022-23 • Total number of ASHA in rural HWCs: 47095 • Approximate cost- Rs. 150 per copy • Total Cost - Rs. 150 × 47095 = Rs.70.64 Lakhs FY 2023-24: Not proposed, Proposal for procurement of eat right tool kit is already proposed in FY 2022-23
	15.2.5	Strengthening of diagnostic services of Ayushman Bharat H&WC through PPP			-		-		-	It is being done through System mode. Hence, no proposal submitted
		Planning and M&E					1.20		1.32	
		Independent Monitoring Cost for performance assessment of Health & Wellness Centre (H&WC)			-		1.20		1.32	
		Concurrent monitoring of HWC	Lumpsum	3000000	30.00	0	0.00	0	-	Concurrent monitoring of HWC activities by third party to support in strengthening implementation of HWC programme in the State. Suitable agency will selected through competitive bidding process - Rs.30.00 lakhs - PHFI is conducting the monitoring for 2021-22.
	16.1.2.2.4	Involving MCHs for mentoring	Lumpsum		-	1	1.20	1	1.32	FY 2022-23: 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 FY 2023-24: 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 @11000/- per month TA/ DA & honorarium cost for field visits X 12 month x 8 = Rs.10.56 lakhs 10% increased in unit cost proposed as compared to F.Y 2022-23
151		Wellness Activities at HWCs-Rural					0.00		0.00	
	9.5.27.4	Incentive/honorarium for Yoga instructor	Per HWC	60000	0.60		0.00		0.00	Incentive/honorarium for Yoga instructor: @Rs.500 per yoga session = As per Gol conditionality framework = upto 10 Yoga sessions in a month = Total HWCs - 5400 SHC HWCs +1288 PHC HWCs = 6688 HWCs = 500 x 10 x 6688 x 12 months = Rs.4012.8L Budgeted-80% of total cost- 2808.96 Lakhs As per the state govt. Notification Yoga instructors are paid Rs. 500 for facilitating one yoga session, 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 Budgeted under HSS-9 (SI.No.187)







SI.						F.Y. 2	2022-23	F.Y. 2	2023-24	1100-1_01 TIO F IN MOTI, Balasore
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		IEC activities for Ayushman Bharat Health & Wellness centre (H&WC)			0.00		0.00		0.00	
		IEC Recurring Cost			0.00		0.00		0.00	
		IEC Recurring Cost PHC HWCs	Per HWC	50000	0.50	0	0.00	0	0.00	FY 2022-23: Observance of days and wellness activities at HWC - PHC - 1288 × 50000 = Rs.644 Lakhs FY 2023-24: Observance of days and wellness activities at HWC - PHC - 1288 × 50000 = Rs.644 Lakhs
		IEC Recurring Cost SC HWCs	Per HWC	25000	0.25	0	0.00	0	0.00	FY 2022-23: Observance of days and wellness activities at HWC - SHC - 2795 × 25000 = Rs.698.75 Lakhs FY 2023-24: Observance of days and wellness activities at HWC - SHC - 2664 × 25000 = Rs.666.00 Lakhs
	11.24.1	Day celebration	Lumpsum	0	0.00	1	0.00	1	0.00	FY 2022-23: Day celebration State Level - @Rs. 2.00 lakhs for State level Observation 1. HWC day - Rs. 1.00 lakhs 2. UHC day - Rs. 1.00 lakhs District Level - 1. HWC day - Rs. 50000/dist. × 30 dist. = Rs. 15.00 Lakhs 2. UHC day - Rs. 50000/dist × 30 dist. = Rs. 15.00 Lakhs Total= Rs. 30.00 lakhs + Rs. 2.00 Lakhs = Rs. 32.00 Lakhs FY 2023-24: Day celebration State Level - @Rs. 2.00 lakhs for State level Observation 1. HWC day - Rs. 1.00 lakhs 2. UHC day - Rs. 1.00 lakhs District Level - 1. HWC day - Rs. 50000/dist. × 30 dist. = Rs. 15.00 Lakhs 2. UHC day - Rs. 50000/dist. × 30 dist. = Rs. 15.00 Lakhs 2. UHC day - Rs. 50000/dist. × 30 dist. = Rs. 15.00 Lakhs
152		Tele-consultation facilities at HWC-Rural					0.00		0.00	
		Telemedicine/ teleconsultation facility under Ayushman Bharat H&WC			0.00		-		-	Current status - Active 8 Hubs- VIMSAR Burla, SLNMCH Koraput, MKCGMCH Berhampur, SCBMCH Cuttack, PRMMCH Baripada, AlIMS Bhubaneswar, SVP PGIP Cuttack, AHPGIC Manglabag, Newly Proposed Hubs: 3 i. Sri Jagannath Medical College and Hospital, Puri ii. SCB Dental College Cuttack iii. Mental Health Institute, Odisha
		HUBs at Medical Colleges & Sub-hubs at DHHs					-		-	
		Non Recurring Cost					-		-	
		Telemedicine diagnostic kit:								Not Proposed
		IT Equipment								
		Computer & other accessories including printer	Per MCH	65000	0.65	0	-	0	-	Approved for 4 computer & other accessories including printer for each proposed hub x 3 new hubs
		Recurring Cost					-		-	
		Human Resource								To be mobilised from system & to be hired from market on session basis







01						F.Y. 2	2022-23	F.Y. 2	2023-24	HSS-1_CPHC FM MCH, Balasor
No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Super Specialist session at Hub (Part Time) @ Rs 3,000 per session of 120 minutes	Per session	4000	0.04	0	-	0	-	FY 2022-23: 1.For 8 existing hubs 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 8 hubs = 2496 sessions 2.For 3 New hubs 6 sessions (duration - 120minutes per session) per week x 26 weeks p.a. x 3 hubs = 468 sessions Type of Super Specialist consultation - Cardiology, Oncology, Urology, Nephrology etc FY 2023-24: 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 11 hubs = 3432 sessions Type of Super Specialist consultation - Cardiology, Oncology, Urology, Nephrology etc
	17.2.1	Specialist sessions at Hub & sub-hubs (Part Time) @ Rs 3,000 per session of 120 minutes	Per session	3000	0.03	0	-	0		FY 2022-23: A. Hub 1.For 8 existing hubs 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 8 hubs = 2496 sessions 2.For 3 New hubs 6 sessions (duration - 120minutes per session) per week x 26 weeks p.a. x 3 hubs = 468 sessions B. Sub-Hub (All 32 DHHs are considered as sub-hubs) 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 32 hubs = 9984 sessions Type of Specialist consultation - O&G, Peadriatic, Ophthalmology, etc FY 2023-24: A. Hub 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 11 hubs = 3432 sessions B. Sub-Hub (All 32 DHHs are considered as sub-hubs) 6 sessions (duration - 120minutes per session) per week x 52 weeks p.a. x 32 hubs = 9984 sessions Type of Specialist consultation - O&G, Peadriatic, Ophthalmology, etc
		Tele-consultation Coordinator	Per person p.m.	15000	0.15	0	-	0	-	Approval for 2022-23 & 2023-24: Engaged through outsource agency (Skilled labour rate @Rs.480/- per day for 26 days in a month = Rs.12480/- + ESI & EPF = Rs.15000/-)
		Internet Charges	Per Month	2000	0.02	0		0		
		Miscellaneous Charges	Per Month	3000	0.03	0	-	0		Cost for printing of prescription, register etc
		Spokes for Model PHC HWCs			0.00		-			
		Non Recurring Cost			0.00		-			
		Telemedicine diagnostic kit:			0.00					Not proposed
		IT Equipment			0.00					Requirement saturated in previous years except printer





CI.						F.Y. 2	2022-23	F.Y. 2	2023-24	HSS-1_CPHC FM MCH, Balasore
SI. No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Printer	Per HWC	5000	0.05	0	-	0	-	FY 2022-23: Status: 1394 nos of Printers for PHC HWCs approved in in Previous years (Requirement Saturated) Proposal: Procurement of Printers for 5400 SC HWCs Unit cost proposed as per market rate Laser Printer FY 2023-24: No new proposal in the current year, already proposed in 2022-23
		Recurring Cost			0.00		-		-	Recurring cost for 2795 SC-HWC from 17 districts out of 5400 SHCs is supported by
		Miscellaneous cost	Per HWC p.a.	5000	0.05	0	-	0	-	NHM, rest is supported by XV FC FY 2022-23: Total HWCs - 1288 + 2795 = 4083 • PHC HWCs - 1288 × 5000 = 64.4L • SHC HWC - Out of 5400 SHCs 2795 facilities are from non XV FC supported districts 2795 × 5000 = 139.75L Total - 64.4L + 139.75L = 204.15 Lakhs FY 2023-24: Total HWCs - 1288 + 2664 = 3952 • PHC HWCs - 1288 × 5000 = 64.4L • SHC HWC - Out of 5400 SHCs 2664 facilities are from non XV FC supported districts - 2664 × 5000 = 133.2L Total - 64.4L + 133.2L = Rs.197.6 Lakhs
		Internet connectivity charges	Per Month	500	0.01	0	-	0	-	FY 2022-23: Total HWCs - 1288 + 2795 = 4083 • PHC HWCs - 1288 × 500 = Rs.6.44 Lakhs • SHC HWC - Out of 5400 SHCs 2795 facilities are from non XV FC supported districts 2795 × 500 = 139.75L Total - 64.4L + 139.75L = 204.15L × 12 = Rs. 244.98L Approval for FY • PHC HWCs - 1288 × 500 = 6.44L • SHC HWC - Out of 5400 SHCs 2664 facilities are from non XV FC supported districts - 2664 × 500 = 13.32L Total - 6.44L + 13.32L = 19.76L × 12 = Rs.237.12 Lakhs
	17.2.2	Other IT Initiatives (please specify)					-		-	
153		CHO Mentoring					0.00		0.00	
		Outsourcing of the outreach services under Sub Center HWCs where the ANM position is vacant since long.	Per SC	586000	5.86	0	-	0	-	
	New Activity	Rent for SC HWCs in rented Building	Per SC	15000	0.15	0	-	0	-	
	New Activity	e-Decision Support System for Community Health Officers(DSS) at Sub Center Health and Wellness Centers- CHO Sathi App	Lumpsum	5550000	55.50	0	-	0	-	
	Activity	State Mentorship for the CHOs	Lumpsum	1650000	16.5	0	-	0	-	
	Activity	Award to best performing HWC								
		State Level Award Ceremony for Best Performing SC-HWC on the UHC day	Lumpsum	250000	2.5	-	-	-	-	





HSS-1 CPHC FM MCH, Balasore

	_	F.Y. 2022-23 F.Y. 2023-24		n55-1_CFHC FW MCH, Balasole						
SI. No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		District Level Award Ceremony for Best Performing SC-HWC on the UHC day	Per HWC	30000	0.3	-	-	-	-	
	New Activity	Convergence between HWCs established by NHM & HWCs established by Directorate of AYUSH								
		Quarterly Convergence Meeting at the Block level	Per Block	5000	0.05	-	-	-	-	
		District bi-annual Convergence Meeting	Per District	10000	0.1	-	-	-	-	
	New Activity	Monthly Review Meeting of CHOs	Per CHO	300	0.003	-	-	-	-	
	New Activity	Tickler Bag in SC-HWC for Effective Tracking and Follow up for NCD Patients	Per bag	2000	0.02	-	-	-	-	
	New Activity	CHO Leadership Certification Program	Per Block	150	0.00	-	-	-	-	
	New Activity	Implementation of AB-HWC Mobile App in 100% Health and Wellness Centers	Per HWC	500	0.01	-	-	-	-	
	New Activity	Equipping the Sub-Centre-Health and Wellness Centers (SC-HWCs) with essential equipment, Instruments and furniture (EIF) for the delivery of Comprehensive Primary Health Care Services.	Lumpsum	300000	3.00	-	-	-	-	









NHM PIP

2022-24

Programme Implementation Plan

HSS-3
Community
Engagement

FM MCH, Balasore

HSS-3_Community Engagement

			2-24							
						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
		Total Community Engagement					10.20		10.20	
159		ASHA (Including ASHA certification and ASHA benefit package)					-		-	
	3.1.1.6.1	ASHA Incentive for mobilising and attending VHSND	Per session	200	0.00		-		-	Part of routine and recurring activities as per Gol Communication- D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Deliverable: 85% targeted beneficiaries (PW, PNC mother, Children 0-5 years) mobilised to attend VHSND. Total Sessions expected to be held: 574843 ASHA incentive proposed for 85% sessions: 488617 Budgeted under RCH-1_Maternal Health
	3.1.1.6.1	ASHA Incentive for convening & guiding VHSNC/ GKS meeting	Per ASHA p.m	150	0.002	0	-	0	-	Activity: Part of routine and recurring activities as per Gol Communication- D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Budgeted 90% looking into vacancy, non-performance etc.
	3.1.1.6.1	ASHA Incentive for attending monthly PHC Review Meeting	Per ASHA p.m	150	0.002	0	-	0	-	Activity - Part of routine and recurring activities as per Gol Communication-D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Monthly meetings of ASHAs are conducted during last week of every month to review performance of each ASHA & handholding support for their capacity building, ensuring compilation of reports etc. by designated CP nodal persons. Proposal is for all ASHAs in the State @Rs.150/- for attending monthly meeting in their respective PHCs. Deliverable - Attend monthly meeting at PHCs at designated day and place Budgeted 90% looking into vacancy, non-performance etc.
	3.1.1.6.1	ASHA Incentive for Line listing of households done at beginning of the year and updated after six months	Per ASHA p.m	300	0.003	0	-	0	_	Activity Part of routine and recurring activities as per Gol Communication- D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Budgeted 89% looking into vacancy, non-performance etc.



			Proposal 2022-24							
	011500					F.Y. 2	.022-23	F.Y. 2	023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
	3.1.1.6.1	ASHA Incentive for maintaing village health register & supporting universal registration of birth & death to be updated on a monthly basis	Per ASHA p.m	300	0.003	0	-	0	-	Activity - Part of routine and recurring activities as per Gol Communication-D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Deliverable: For institutional delivery, follow up with public health facility for issuance of birth certificate. For home delivery ensure registration of new born & help ANM filling up registration form. For death at community level, inform to concern ANM. As it is a demand driven activity all expenditure incurred under this head has to be booked under the same head. Budgeted 90% looking into vacancy, non-performance etc.
	3.1.1.6.1	ASHA Incentive for preparation of due list of children to be immunised & updated in monthly basis	Per ASHA p.m	300	0.00	0	-	0	-	Activity - Part of routine and recurring activities as per Gol Communication-D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Proposed as per revised norm of Gol Budgeted 80% In order to get this incentive, ASHA prepares the due list of children to be immunized in her assigned area on a monthly basis, inform and mobilize the identified families to bring their children for immunization as per schedule. She maintains updated record in her diary. ASHA will share this information with ANM for uploading the data in Ue-VIN portal, this list is required for her to monitor the immunization of children as per schedule. Hence may be recommended.
	3.1.1.6.1	Preparation of due list of ANC beneficiaries to be updated on monthly basis.	Per ASHA p.m	300	0.00		-		-	Part of routine and recurring activities as per Gol Communication- D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) Budgeted under RCH-1 Maternal Health
		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	-	0	-	Activity - Part of routine and recurring activities as per Gol Communication-D.O.No: 7(84)/2018 NHM-I Dated 8th October, 2018 from AS&MD, NHM, Govt. of India (Letter placed at Community Process Write-up Justification Annexure) In order to get this incentive, ASHA prepares the details of eligible couples in her assigned area and update the list on a monthly basis. The list is required for her to counsel the eligible couple for adopting family planning methods, distribute FP contraceptives and maintain stock of the use of FP contraceptives. Hence may be recommended.







			Proposal 2022-24							
CNI	OLI ENTE	Characterist is				F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
		ASHA Incentive for performing activities under NCD Programme	Per ASHA p.m	1000	0.010	0	-	0	-	Activity/Deliverables: Proposed as per approval of PIP 2021-22 @ Rs. 1000/- per month per ASHA for 49037 ASHAs as clubbed incentive for providing services related to delivery of NCD & other services like geriatric care, eye care & Mental Health Care. Detail Proposal is placed at Write-up Annexure Budgeted 90% looking into vacancy, non-performance etc.
	3.1.1.6.3	ASHA Incentive for regular reporting of Diseases and outbreak situation in her village	Per ASHA p.m	75	0.001	0	-	0	-	Activity/Deliverables: Line listing of all disease & conditions & reporting to ANM. Plan: State has initiated mobile based reporting system by ASHA which is being piloted in two of the districts in State. Budgeted 90% looking into vacancy, non-performance etc.
	3.1.1.6.3	ASHA Incentive for Focus Group Discussion (FGD) at village level targeting Adolescent girls & Eligible couples		100	0.001	0	-	0	-	Activity/Deliverables: Conduct at least one FGD with expectant/pregnant & lactating mothers on breast feeding & nutrition counselling, adolescent girls on ARSH. Budgeted 90% looking into vacancy, non-performance etc.
	3.1.3.4	ASHA Incentive for Mobilization of children for Immunisation	Per session	150	0.00		-			Activity Total immunization sessions planned in 2022-23 p.a.: 380364 (3,37,824 sessions rural based on recent Micro Plan + 42,540 in urban areas) Budgeted 90% (NFHS shows 90% + FIC and the key deliverable is more than 90% hence proposed 90%) Budgeted under RCH-4 Immunisation
	3.1.1.6.3	ASHA incentive for Supporting ANM in updating RCH register, maintaining due list for different beneficiary and EC Register			-		-			Activity 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. Dropped as per NPCC Recommendation
	3.1.1.4.1	ASHA Incentive for fever testing	Per Test	15	0.00015		0.00		0.00	Activity ASHA Incentive for fever testing: Expected Total test done in 2022-23: 74,85,183(with expected 10% increase) Expected Total test done by ASHA in 2022-23: 52,39,628(70% of the total tests) Budget Provision: Rs. 15/- per test x 52,39,628 tests = Rs. 785.94 Lakhs Proposed under NDCP-2 NVBDCP Budget
	3.1.1.4.1	ASHA Incentive for treatment	Per Case	75	0.00075		0.00		0.00	Activity ASHA Incentive for treatment: State is expected to record 26,014 cases in 2021-22 State is expected to record 20, 810 cases in 2022-23(with 20% reduction in cases) Treatment of all malaria positive cases for which she will get Rs. 75/-per case, irrespective of the place / facility where the case is detected). Budget Provision: Rs. 75/- per case x 20810 predicted cases = Rs. 15.61Lakhs Proposed under NDCP-2 NVBDCP Budget







			Proposal 2022-24							
C NI-	Old ENAD	Colours / Australia				F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lalhs)	State's Remarks
	3.2.5.3	ASHA Incentive for Identification of Persons with Mental Illness (New Case)	n Per ASHA/ Per Case	100	0.00	0	-	0	-	Activity ASHA Incentive for Identification of Persons with Mental Illness (New Case) Deliverables: 1. Identification of suspected persons with mental illness. 2. Accompany/referral of persons with mental illness to DMHP unit for Diagnosis. 3. Ensure registration of diagnosed cases at DMHP. 4. Keeping record of line listing of persons with mental illness at her level. 5. Follow up will be a part of routine & recurring activities for NCD cases (New programme proposed separately). Incentive Proposed: Rs. 100/- per registered Patient with Mental Illness Total expected new cases: 5000 Budget Shifted as per NPCC Decision
i	3.1.2	Selection & Training of ASHA								
	3.1.2.1	Induction training	Per ASHA	5542	0.055	0	-	0	-	Proposal 2022-23 Proposal-1: 245 new ASHAs to be selected against vacancy due to attrition (@ 0.5%). Proposal-2: 112 ASHAs will be selected in Urban Areas having 3000 or more population. Total 357 ASHAs to be selected and imparted induction training Unit Cost: Rs.500/- for selection of new ASHA & Rs.5042/- for conducting induction training (8 days residential) proposal 2023-24 Proposal-1: 245 new ASHAs to be selected against vacancy due to attrition (@0.5%). Fund proposed 80% of the total requirement.
	3.1.2.2	Module VI & VII(The newly selected ASHAs will be imparted 4 rounds of training on Module 6 & 7)	Per ASHA	3200	0.032	0	-	0	-	The newly selected ASHAs will be imparted four rounds of training on Module 6 & 7. Fund proposed 80% of the total requirement.
	New Activity 3.1.2.4	Training of newly selected ASHAs on NCD (5 days residential) Certification of ASHA by NIOS	Per ASHA	3200	0.032	0	-	0	-	The newly selected ASHAs will be imparted training on NCD Fund proposed 80% of the total requirement.
		Refresher training of ASHAs on certification programme (2 rounds, each round is of 5 days residential)	Per Batch	94400	0.944	0	-	0	-	To be implemented in 8 districts like Bolangir, Cuttack, Jajpur, Kalahandi, Kendrapara, Khurda, Puri & Sundargarh
	3.1.2.4	External Evaluation of ASHAs by NIOS for certification - 2 days residential (including practical skills examination and theory examination)			-		-		-	Not Proposed
	3.1.2.8	Training of newly selected ASHAs on HBYC (5 days residential)	Per ASHA	3200	0.032	0	-	0	-	The newly selected ASHAs will be imparted training on HBYC Fund proposed 80% of the total requirement.







			Proposal 2022-24							
	011515					F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
	2172	State TOT on Refresher Training of ASHAs on HWC activities (2 days residential)	Per batch	146700	1.467	0	-	0	-	State TOT will be conducted to train the District Level Trainers @ 3 from each district
	3.1.2.3	District TOT on Refresher Training of ASHAs on HWC activities (2 days residential)	Per Batch	69060	0.691	0	-	0		District TOT will be conducted to train the Block Level Trainers (@ 3 each from 314 blocks and 2 each from 1288 PHCs)
	3.1.2.3	Refresher training of ASHAs on HWC activities (2 days non-residential)	Per ASHA	820	0.008		-		-	Not proposed this year. Budgeted in 2023-24 in CPHC head
	New Activity	Supplementary Training								
		State TOT on training of CHOs on Community Socialisation and CPHC activities (2 days residential)	Per Batch	146700	1.467	0	-		-	State TOT will be conducted to train the District Level Trainers @ 3 from each district
		Training of CHOs on Community Socialisation and CPHC activities (2 days residential at District level)	Per batch	73560	0.736	0	-	0	-	CHOs of 50% SC-HWC will be imparted training on Community Socialisation and CPHC activities (2700 CHOs to be trained during 2022-23 and another 50% will be trained in 2023-24) Fund proposed 80% of the total requirement.
	New Activity	Orientation of Training and Supportive Supervision Team on HWC and CP activities (One day non- residential at block level)	Per batch	18450	0.185	0	-		-	Training and supportive supervision team members will be oriented on supportive supervision mechanism. A total of 2230 members @ one from each PHC-HWC and 3 from each CHC Fund proposed 80% of the total requirement.
	New Activity	Training of HW (F)								
	New	State TOT on Refresher Training of HW (F)s on HWC activities (2 days residential)	Per Batch	146700	1.467			0	-	State TOT will be conducted to train the District Level Trainers @ 2 from each district
		District TOT on Refresher Training of HW (F)s on HWC activities (2 days residential)	Per Batch	69060	0.691			0	-	District TOT will be conducted to train the block level Trainers @ 3 from each block
		Training of HW (F) on CP activities (2 days non-residential at block level)	Per Batch	34400	0.344			0	-	All HW (F) will be imparted training on CP and HWC activities Fund proposed 80% of the total requirement.
	3.1.2.6	Training/Refresher training -ASHA (one day) (RBSK trainings)			-		-		-	Not proposed this year
	3.1.2.7	Training of ASHA facilitator			-		-		-	Not proposed this year
	3.1.2.9	Training of ASHAs in National Childhood Pneumonia Management Guidelines under SAANS			-		-		-	Not Proposed
	3.1.3	Support provisions to ASHA								-
	3.1.3.1	Supervision costs by ASHA facilitators(12 months)	Per ASHA SATHI	36000	0.36	0	-	0	-	Total no. of ASHA SATHIs in the state after delinking the role of ASHA & ASHA SATHI is 717
	3.1.3.2	Uniform	Per ASHA	1000	0.01	0	-	0	-	Total number - 49866 (Existing ASHA-49149 + ASHA Sathi-717) Budget proposed @ Rs. 1000/- per ASHA





									Proposal 202	2-24
S No.	Old EMD					F.Y. 2	022-23	F.Y. 2	2023-24	
S.No.	Old FMR		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
	3.1.3.2	ID cards	Per ASHA	100	0.00	0	-	0	-	Identity Card will be provided to the newly selected ASHAs
		CUG	Per ASHA	1119	0.01	0	-	0	-	Activity-@ Rs 93.22/- (including GST) per month per ASHA for mobile reimbursement to existing ASHAs
	3.1.3.2	ASHA Ghar	Per Gruha	90000	0.90	0	-	0	-	Activity Budget proposed as approved last year @ Rs. 90000/- per ASHA Gruha per annum. (Rs. 6000/- towards performance incentive (Rs. 150/- as incentive per day & Rs.50/- as food cost to ASHA) & Rs.1500/- towards maintenance cost.
	3.1.3.3	Felicitation to best performing ASHAs with Award	Per Block	5000	0.05	0	-	0	-	Budget: @Rs.5000/- per unit for 349 units (blocks-314 & urban NAC/ Municipal areas-35)
	3.1.3.3	Felicitation to best performing ASHAs with Award at district level ASHA Convention	Per Block	10000	0.10	0	-	0	-	Budget: @Rs. 10000/- per unit X 349
	3.1.3.5	Any other (please specify)								
	3.1.3.5	ASHA Corpus Fund (Compensation for death and disability of ASHA and ASHA SATHIs)	Per Case	200000	2.00	0	0.00	0	0.00	ASHA corpus fund is utilised to provide financial compensation for ASHAs in case of death or permanent disability. During 2020-21, death compensation has been given to 48 ASHAs @ Rs. 1 lakh per ASHAs. Proposed for 2022-23 & 2023-24 with revised budget @ Rs. 2 lakhs per case for 96 cases (48 nos for each year).
	2125	Bi-annual re-orientation cum review of designated CP nodal persons on strengthening CP activities	Per person	1380	0.01	0	0.00	0	0.00	Monthly meeting of ASHA is conducted at the PHC level by the PHC MO I/c. with the support of designated CP nodal persons from the block level. The activity is planned to reorient designated block level CP nodal persons on ASHA activities on how to further strengthen the capacity of ASHA for effective work performance.
	3.1.3.5	Felicitate ASHAs as part of exit after 62 years of age	Per ASHA	50000	0.50	0	0.00	0	0.00	ASHAs who attains the age of 62 will be felicitated with a cash benefit of Rs. 50,000/- as part of her exit from the position of ASHA from the village. A total of 150 ASHAs are expected to attain age of 62 during 2022-23.
	3.1.3.5	Premium for enrolment of ASHAs and ASHA SATHIs under PMJJBY	Per person	436	0.00	0	0.00	0	0.00	Total no. of ASHAs (below 50 years of age) - 38692 and ASHA SATHI- 717 Premium amount of Rs.436/- per person for 39409 ASHAs and ASHA SATHIs Fund proposed 53% of the total requirement.
•	4 1 4 5 I	Premium for enrolment of ASHAs and ASHA SATHIsunder PMSBY	Per person	20	0.00	0	0.00	0	0.00	Premium amount of Rs.20/- per person for all ASHAs & ASHA SATHIs Fund proposed 42% of the total requirement.
	3.1.3.5	Travel allowance to ASHAs	Per ASHA	1200	0.01	0	0.00	0	0.00	ASHA will be paid Rs. 100/- per month as travel allowance to compensate the travel expenses as she visits to the health facility and other places for various purposes in every month. Further, the incentive provisions does not cover the travel cost of ASHA while performing different activities at field level. Budgeted 90% due to vacancy & absence etc







			Proposal 2022-24		2-24					
do	Old FMR		II-th of		st Unit Cost	F.Y. 2	022-23	F.Y. 2	2023-24	
NO.	Old FIVIK		Unit of Measure	Unit Cost (Rs)	(Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
:	3.1.3.5	Mobile Allowances to ASHAs	Per ASHA/ Per Month	250	0.00	0	0.00	0	0.00	Fund proposed 60% of the total requirement based on the eligibility of ASHAs to avail the benefit. ASHAs are eligible to avail mobile allowance benefit those who are using android mobile handset and active in the whatsapp group of ASHAs created by the block health administration.
	New Activity	Contingency cost for ASHAs	Per ASHA	400	0.00	0	0.00	0	0.00	ASHA will be paid Rs. 100/- per quarter towards contingency cost to meet the expenses she incurs for different purposes in performing her day to day activities and stationary.
		Mobile Academy	Lumpsum		-					Details at Community Engagement Write-up Justification Annexure
	New Activity	Certificate of Recognition for Mobile Academy course completion	Per certificate	15	0.00	0	0.00	0	0.00	As per the Government of India's guidelines, all the ASHAs should be conferred with a certificate of recognition after their course completion.
	Activity	Incentive to ASHAs	Per ASHA	150	0.00	0	0.00	0	0.00	Mobile Academy is a 4 hour mobile- based course that all the ASHAs of the state needs to complete. As a wage of loss compensation an incentive of Rs. 150/- to the ASHAs will surely motivate them to pursue the course
1	6.2.6	Drugs & supplies for ASHA								
		New ASHA Drug Kits			0.00		0.00		0.00	Integrated with SC drugs
(6.2.6.2	Replenishment of ASHA drug kits			0.00		0.00		0.00	Integrated with SC drugs
	12.7	Printing activities under ASHA								-
	12.7.1	Printing of ASHA diary	Per Diary	100	0.00	0	-	0	-	Proposed for (existing ASHA-49307 + New ASHA to b selected in 2021-22 112)=49149
	12.7.2	Printing of ASHA Modules and formats	Per Module	50	0.00	0	-		-	Training Module will be prepared based on the need of ASHAs and provided to a ASHAs for conducting refresher training
	12.7.4	ASHA communication kit			-		-		-	No proposal for the current year.
		Any other (please specify)			-					-
	1//5	HBNC Format for ASHAs (@ 25 formats per ASHA for 49037 ASHAs)	Per Format	4	0.00	0	-	0	-	
	12.7.5	Monthly meeting register	Per Register	100	0.00	0	-	0	-	
:	12.7.5	Report cards for ASHAs	Per card	2	0.00	0	-	0	-	Incentive voucher book will be provided to ASHAs to submit their claim of incentiv on a monthly basis
	12.7.5	Incentive voucher book	Per voucher book	100	0.00	0	-	0	-	
,	New Activity	Village Health Register (For ASHA)	Per Register	100	0.00	0	-	0	-	Village Health register will be maintained by ASHAs to record the detaile information of different target beneficiaries for her own reference an reporting/record keeping
	12.7.5	Compendium of ASHA Incentive Guidelines	Per Booklet	100	0.00	0	-	0	-	Compendium of ASHA incentive payment guidelines will be prepared and share with all field level functionaries for their reference





									Proposal 202	2-24
						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No.	Old FMR	R Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
	12.7.5	Printing of Certificate for ASHAs under Mobile Academy Programme	Per Certificate	10	0.00	0	-	0	-	ASHAs who will qualify Mobile Academy Course will be provided with a certificate after completion of the course
		Planning and M&E								-
	16.1.3.1. 4	Mobility Costs for ASHA Resource Centre/ASHA Mentoring Group (Kindly Specify)	i.		-		0.00		0.00	
	16.1.3.4. 4	Monthly Review meeting of ASHAs at PHC level - Cost of travel and meeting expenses	Per sector	2400	0.02	0	0.00	0	0.00	Facilitation and travel cost for block level CP nodal persons towards attending monthly meeting of ASHAs at PHC level Budget @Rs.200/- per PHC p.m. for 12 months Total PHCs - 1288 + additional meeting to be conducted at 222 PHCs where no. of ASHAs are more than 50
	16.1.2.1. 9	Monthly review meeting of ASHA SATHIs with BPM & Asst. Manager, ASHA at sub-district level (cost of travel and meeting expenses)	Per ASHA SATHI	3000	0.03	0	0.00	0	0.00	
	New Activity	Cost for organising the meeting and refreshment of ASHAs attending the review meeting	Per ASHA	600	0.01	0	0.00	0		Review meeting of ASHAs at PHC level is a half day activity. ASHAs attending the meeting needs to be provided refreshment during the meeting.
	New Activity	Travel cost for PHC CP nodal persons	Per PHC	2400	0.02	0	0.00	0	0.00	Travel cost for PHC CP nodal person towards monitoring and supervision of CP activities at SC and community level.
	New Activity	Review meeting of PHC CP nodal persons to review CP activities on bi-annual basis at district level	Per Person	1230	0.01	0	0.00	0		Meeting of PHC CP nodal person will be held on quarterly basis at district level to review the CP activity implementation
	New Activity	ASHA Software (Entry of profile detail of ASHAs in ASHA Software)	Per ASHA	100	0.00	0	0.00			Detail profile of ASHAs will be entered in ASHA Software (Through out source mode)
	New Activity	State level workshop on Experience sharing, sharing of best practices & felicitation of best performing ASHAs & GKSs	Lumpsum	1000000	10.00	0	0.00	0		A platform at state level for experience sharing and sharing of best practices on community process with involvement of ASHA and GKS members at state level.
	New Activity	ASHA Study (to ascertain the capacity of ASHA vs. activity performed)	Lumpsum	500000	5.00	0	0.00		0.00	The study will be conducted to ascertain the capacity of ASHA vs. activities performed by them.
160		VHSNC					-		-	
	3.3	Panchayati Raj Institutions (PRIs)								
	3.3.1	Orientation of Community leader & of VHSC,SHC,PHC,CHC etc.								





			Proposal 2022-24								
						F.Y. 2	2022-23	F.Y. 2	2023-24		
0. (Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks	
3	3.3.1	State ToT	Per batch	120600	1.21	0	0.00		0.00	State ToT for district level trainers on Capacity Building of GKS on CPHC, SCHWC JAS functioning & role of GKS (Two Days Residential) After the completion of the PR election newly selected Ward members will be selected as GKS president. To develop Capacity of the GKS office bearers & other members on CPHC, JAS functioning & active community participation through GKS it is required to conduct Capacity building training programme of GKS office bearers and SHG members of 50% GKS in 2022-23 and rest 50% during 2023-24. Total Trainer: 120 (Four officials from each district) Total 4 batch @ 30 per batch	
3	3.3.1	District ToT	Per participant	2085	0.02	0	-		-	Two Days District ToT for block level trainers on Capacity Building Programme of CPHC, SCHWC-JAS functioning & role of GKS(Two Days Residential) Total Trainer - 1256	
3	3.3.1	Field Training	Per participant	433	0.00	0	-	0	-	Proposal 2022-24: Field Training of GKS office Bearers & One selected SHG member on CPHC, SCHWG JAS functioning & role of GKS. (One day non -residential) 50% of total GKS (23032 GKS) @ Four Members from each GKS = Total 9212: persons Proposal 2023-24 Remaining 50% of GKS (23032 GKS) Four Members from each GKS- Total 92128 GKS members One day additional training of 3000 GKS members of 500 GKS in 80 SC HWCs of 40 PHCs implemented through partnership mode Budgeted-70%	
3	3.2.4.1	State level			-		-		-		
		District level			-		-		-		
3	3.3.4	Any other (please specify)									
	$\prec \prec \Delta$	Bi Annual Block level convergence meeting (Health, ICDS, PR & RWSS)	Per meeting	500	0.01	0	-	0	-	Forum for review & progress of GKS activity implementation and better intersectoral convergence with other line department.	
	3.3.4	Quarterly GP level meeting for Integration of health related activity with PR system.			-		-		-	Not Proposed	
	3.3.4	GKS Convention	Per Convention	10000	0.10	0	-	0	-	Forum for experience sharing & develop better inter-sectoral convergence wit line Departments at block level	
	3.3.4	Award to Sustha Panchayat Puraskar	Per GP	11250	0.11	0	-	0	-	Not Proposed	
		Award to Sustha Gaon	Per block	10000	0.10	0		0		•	





									Proposal 202	2-24
						F.Y. 2	022-23	F.Y. 2	2023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lalhs)	State's Remarks
	New Activity	Gradation of GKS	Per GKS	50	0.00	0	-			To ascertain the level of functional effectiveness of each GKS by HW- M/F at the field level (Best performing, Moderate & low performing) and prepare plan of action for moderate and low performing GKS to improve performance.
	New Activity	Printing of GKS Register	Per GKS	60	0.00	0	-			GKS register is the user manual of GKS and all records related to GKS activities are being maintained in the register. The register is being provided to each GKS in two year interval.
		Printing of Brochure for field training programme of GKS on CPHC, SCHWC-JAS functioning & role of GKS	Per copy	5	0.00	0	-			Broacher for GKS Budget Proposed @ Rs. 5/- per copy x 190000 copies (@ 4 copy for each GKS (46064 nos GKS) & 314-blocks,30- districts & State
		GKS Study (Role of GKS in addressing issues related to Health and Social determinants	Lumpsum	300000	3.00	0	0.00			The study will be conducted on the role of GKS in addressing issues related to health & social determinants at the community level.
	New Activity	Improve performance of low performing & Moderate GKS	Per GKS	600	0.01		1	0	-	Facilitation cost to be provided person responsible to improve performance of 5% low & moderate GKS @ Rs.200/- per GKS for three month.
161		JAS					-		-	-
	3.2.4.1	State level	per batch	120600	1.21	0	0.00	0	-	Two Days State level ToT for district level trainers on Capacity building programme of SCHWC - JAS Members (Two days Residential) The rest 3054 SCHWC-JAS will be trained in 2022-23 out of 6688 SCHWC-JAS Total Trainer: 90 (three officials from each district) Total 3 batches @ 30 per batch
	3.2.4.2	District level	Per participant	2085	0.02	0	0.00	0	-	Two Days District ToT for block level trainers on Capacity building programme of SCHWC - JAS Members (Two days Residential) Total Trainer-942 (Three participants from each block) 314 blocks-942 participants





						2-24				
C NI=	OLI ENAD	Scheme/ Activity				F.Y. 2	2022-23	F.Y. 2	2023-24	
5.NO.	Old FMR		Unit of Measure		Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
	3.2.4.3	Block level training for SC-HWC JAS (Non-residential)	Per participant	867	0.01	0	0.00	0	-	Proposal 2022-23 Block level Training of remaining 3054 SCHWC-JAS members(Two days non - residential) 3054 SCHWC-JAS x 5 Members from each JAS = Total 15270 persons Training of JAS members for the implementation community outreach services as per CPHC mandate in partnership mode - 15 persons from each SC-HWC JAS x 80 JAS = 1200 persons Total = 16470 Proposal 2023-24 Refresher Training programme of selected JAS members of 50% SCHWC 50% SCHWC-JAS-3344 3344 SCHWC- JAS x 5 members from each JAS= Total 16720 Persons Two days additional training of JAS members for the implementation community outreach services as per CPHC mandate in partnership mode - 15 persons from each remaining 120 SC-HWC JAS=15 person x 120 JAS = 1800 persons Total = 18520 Budgeted: 70%
	New Activity	One day Orientation of Newly elected GP Sarpanchs & CHOs of 3634 SCHWC-JAS.	Per participant	433	0.00	0	0.00			After the completion of PR election newly elected GP Sarpanch & CHOs of the SCHWC-JAS of 3634 (target for 2021-22) needs to be oriented on functioning of SCHWC-JAS at the block level. Total SCHWC- JAS- 3634. Total target @ 2 per 3634 SCHWCs- 7268 Budgeted 80%
	3.2.4.3	Printing of SC HWC JAS module in Odia	Per unit	30	0.00	0	0.00		-	Proposed for (6688 JASs, 314 Blocks , 30 DHHs & 68 for State level)
	New Activity	Printing of SCHWC-JAS Register, Reporting format & Monitoring tool for JAS functioning	Per SC HWC JAS	100	0.00	0	0.00		0.00	SCHWC-JAS Register is a comprehensive register covering all the required aspects for the functioning of JAS. Reporting formats and monitoring tools to be printed and supplied to all SC-JAS
		3 Days State level orientation for the implementation of community outreach services in partnership mode as per CPHC mandate	per batch	182200	1.82	0	0.00		0.00	64 district level officials (4 from each 16 districts) + 20 Chief Functionaries of partner NGOs+ 40 Project Co-ordinators of partner NGOs + 40 BPM of the programme implemented blocks = Total 164 persons Total five batches @32 persons per batch
	New Activity	State level bi-annual review meeting of Stakeholders for the implementation of community outreach services in partnership mode as per CPHC mandate	Per batch	73900	0.74	0	0.00	0	-	16 AM CP+ 16 PPP Co-ordinator + 20 NGO Chief functionaries + 40 Project Co- ordinators = Total 92 participants Three batches @ 30 per batch
	New Activity	Annual GP level Jan Sambad organised by JAS in 80 SC- HWC implemented in 40 PHCs in partnership mode	Per meeting	5000	0.05	0	0.00			Forum to discuss delivery of health services in SC HWC, community partnership in activity implementation, feedback and measures to improve CPHC service delivery @ Rs.5000/- Per SC HWC X 80 SC HWCs







									Proposal 2022	2-24
		/IR Scheme/ Activity				F.Y. 2	2022-23	F.Y. 2	023-24	
S.No	o. Old FMF		Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lalhs)	State's Remarks
	New Activity	IEC and Community Mobilization activities in 80 SCHWCs of 40 PHCs implemented in partnership mode	Per SC HWC	5000	0.05	0	0.00			The activity is intended to raise awareness among the people on CPHC services, conducting entitlement drives, promoting community action for CPHC service implementation @ Rs.5000/- per SC HWC X 80 SC HWCs
	New Activity	Exposure visit of JAS & GKS Members of nearby SCs to 80 SCHWC areas of 40 PHCs implemented in partnership mode	Per Member	500	0.01	0	0.00			Activity for cross learning of the nearby SC HWC JAS and GKS members and replication of the best practices in their field areas @ Rs.500/- per person X 600 persons
	New Activity	Enhancing numeracy & functional literacy skill of low literate ASHAs in of 80 SCHWC areas of 40 selected PHCs implemented in partnership mode	Per ASHA	5000	0.05	0	0.00			The activity is to enhance numeracy and functional literacy skills of low literate ASHAs so as to enable them for better activity performance and reporting 50 ASHAs (10% of total ASHAs of 80 SCHWC areas) @ Rs.5000 per ASHA
	New Activity	Award to Best performing SCHWC-JAS	Per SC HWC- JAS	15000	0.15		-	0	0.00	Award to best performing SCHWC-JAS to achieve certain indicators related to health promotion and wellness activity in 3634 SCHWC-JAS. Near about 4% SCHWC-JAS of the district target to be awarded based on the performance and to encourage other SCHWC-JAS to involve in the process for achieving the indicators.
	New Activity	2 Days State level Review-cum-orientation for the implementation of community outreach services in partnership mode as per CPHC mandate. (2 days Residential)	per batch	128300	1.28		0.00	0		64 district level officials (4 from each 16 districts) + 20 Chief Functionaries of partner NGOs+ 40 Project Co-ordinators of partner NGOs= Total 124 persons Total four batches @31 persons per batch
	New Activity	Annual PHC level Jan Sambad organised by JAS in 40 implemented PHCs in partnership mode	Per meeting	10000	0.10		-	0	0.00	Forum to discuss delivery of health services in SC HWC, community partnership in activity implementation, feedback and measures to improve CPHC service delivery @ Rs.10000/- Per PHC X 40 PHC
	New Activity	IEC and Community Mobilization activities in remaining 120 SCHWCs of 40 PHCs implemented in partnership mode	Per SCHWC	5000	0.05		-	0		The activity is intended to raise awareness among the people on CPHC services, conducting entitlement drives, promoting community action for CPHC service implementation @ Rs.5000/- per SC HWC X 120 SC HWCs
	New Activity	Enhancing numeracy & functional literacy skill of low literate ASHAs in of remaining 120 SCHWC areas of 40 selected PHCs implemented in partnership mode	Per ASHA	5000	0.05		0.00	0	0.00	The activity is to enhance numeracy and functional literacy skills of low literate ASHAs so as to enable them for better activity performance and reporting 70 ASHAs (10% of total ASHAs of remaining 120 SCHWC areas) @ Rs.5000 per ASHA
16	2	RKS					-		-	





									Proposal 202	2-24
اما	Old FMR		11.50.00		Cost Unit Cost (Rs. Lakhs)	F.Y. 2	2022-23	F.Y.	2023-24	
Ю.	Old FIVIR		Unit of Measure	(Rs)		Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lalhs)	State's Remarks
	U.9.2.4	Training/ Orientation of RKS/JAS	Per RKS	3000	0.03	0	0	0	0	Division: Urban Health Proposal for 2022-23: Refresher training has been proposed for all 110 UPHCs + 7 UCHCs Batch size: 15-20 members per RKS. Unit cost @ Rs. 3,000/- per RKS Total Budget = 117 x 3000 = Rs3,51,000/- Proposal for 2023-24: Refresher training has been proposed for all 116 UPHCs + 7 UCHCs Batch size: 15-20 members per RKS/JAS. Unit cost @ Rs. 3,000/- per RKS Total Budget = 123 x 3000 = Rs3,69,000/-
3		Other Community Engagements Components			-		10.20		10.20	IEC/BCC activities common in nature and applicable for all programmes across the components for demand generation have been proposed under this section
		Leveraging Technologies in Health Communication and Promotion					10.20		10.20	
		Social Media Engagement for Health Communication			-		-		-	
		Social media Handler and media management(including posting, analysis and reporting)	Per Month	100000	1.00	0	-	0	-	
	New	Development of creative's for social media posts @ Rs. 1000/ per creative's for 50 creative's per month		1000	0.01	0	-	0	-	Total budget for the year 2022-23: Rs. 102.00 Lakhs Total budget for the year 2023-24 (About 5% hike over budget of 2022-23)
		Development of videos for social media @ Rs. 60,000/- per video for 10 vidoes in a month including animated video	Per Video	60000	0.60	0	-	0	-	
		Purchasing of slots for social media posts @ Rs. 1,00,000/- per months	Per Month	100000	1.00	0	-	0	-	
1	11 14 4 4	Operation Management of Digital Display Boards at DHHs & MCHs	Per unit/ per annum	1020000	10.20	1	10.20	1	10.20	Proposed extend to all DHHs except Puri, Sundargarh and Keojhar where it is already operation with other funding Details at IEC/BCC Write-up Justification Annexure
		Special ICT package for ASHAs in media dark areas					-		-	
		Capacity Building of Three FLWs in notified difficult villages	Per SC HWC	200	0.00	0	-	0	-	Proposed for notified difficult villages from 810 SC HWCs and development of Micro plan for implementation of communication activities
		Procurement of Pico projector	Per unit	22000	0.22	0	-	0	-	
1	11.24.2	Digital information System (LED TV) at PHC HWC level	Per unit	30000	0.30	0	-	0	-	Planned for all PHC HWCs (1288), out of which LED TV has been provisioned for 5 Model PHC HWCs in last year. Proposal for 2022-23: 1288-565= 723
1	11.24.2	Improving communication through bulk SMS services	Lumpsum	0	-	1	-	1	-	Budget Approved: Per district @ Rs. 5.00 Lakhs x 30 districts= Rs. 150.00 lakhs & Rest Rs. 354.20 kept at State Level





									Proposal 202	2-24
CNI	Old FMR	Colours / A skinder				F.Y. 2	2022-23	F.Y. 2	2023-24	
S.NO.	Old FIVIR	Scheme/ Activity	Unit of Measure		Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. LaIhs)	State's Remarks
	111 24 2	Development of animated web series for adolescents with special focus on anaemia among adolescents	Per minute	60000	0.60	0	-	0	-	Proposal: 2 minutes spot @ 1 for each month in 12 different themes for the whole year.@60000 per minute for 1 minutes every month Rs.60,000*2*12= 14.40 lakh Details at IEC/BCC Write-up Justification Annexure
	11.24.2	Development new AV Spots & Editing/ Dubbing of existing AV spots shared by GoI/ other Development Partners	Lumpsum	0	-	1	-	1	-	Budget Approved: Per district @ Rs. 50,000 x 30 districts= Rs. 15.00 lakhs & Rest Rs. 15.00 kept at State Level
	11.24.2	Documentation	Lumpsum	0	-	1	-	1	-	Budget Approved: Per district @ Rs. 20,000 x 30 districts= Rs. 6.00 lakhs & Rest Rs. 9.00 kept at State Level
		SHG Involvement for demand generation for RMNCH Services	Lumpsum		-	0	-	0	-	Total Budget: Rs. 584.44 Lakhs Fund Proposed under HSS-13 SL No-197
	New Activity	Media Engagement Plan	Lumpsum	150000	1.50	0	-	0	-	
	New Activity	Kilkari	Lumpsum	9780000	97.80	0	-	0	-	
	111 3	Targeting Naturally Occurring Gathering of People/ Health Mela	Per dist	100000	1.00	0	0.00	0	0.00	To be integrated with district level Fest organised by Deptt. of Culture to create general awareness on district specific issues. Proposed as approved Last Year





HSS-9_HRH_Odisha

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						F.Y. 2	.022-23	F.Y. 2	2023-24								
S.No.	Old FMR	Scheme/ Activity	Unit of	Unit Cost	Unit Cost	Quantity/	Budget	Quantity/	Budget								
			Measure	(Rs)	(Rs. Lakhs)	Target	(Rs. Lakhs)	Target	(Rs. Lakhs)	State's Remarks							
		Total HRH					23.08		24.15								
185		Remuneration for all NHM HR	Lumpsum		0	1	20.74		21.76								
		Service Delivery					13.54		14.18								
		Remuneration	Lumpsum				13.02		13.67	In the year 2021-22 as per the State's decision Rs. 1000/- flat hike has been given to							
		Rationalisation	Lumpsum				0.00		0.00	all contractual employees both programme Management & Service delivery Staff,							
		EPF	Lumpsum				0.51		0.51	drawing base remuneration Rs. 35,000/- and below. According Rs. 1000/- has been							
		Programme Management					7.20		7.57	added in the base remuneration of 2021-22 of such staffs.							
		Remuneration	Lumpsum				7.00		7.35	Remuneration of SHSRC HR Shifted to SL 193, HSS-11, Technical Assistant							
		Rationalisation	Lumpsum				0.00		0.00								
		EPF	Lumpsum				0.21		0.23								
		Incentives(Allowance, Incentives, staff welfare								Proposed under Incentives & Allowances under NVHCP							
186		fund)					2.34		2.39	Proposed under Incentives & Allowances under NVHCP							
	8.1.16.6	Incentive for Data Entry & updation			-		0.00		0.00								
		Incentives and Allowances					2.34		2.39	1. Division: Maternal Health							
	0.4.4	Additional Allowances/ Incentives to Medical								Division: Maternal Health Proposal: Performance based Incentive to LSAS & EmOC trained Doctors Division: Maternal Health							
	8.4.1	Officers			-		0.00		0.00								
	8 4 1	Performance based Incentive to LSAS & EmOC trained Doctors								Division: Maternal Health Total LSAS trained doctors in the system: 161 LSAS trained doctors posted at FRUs: 91 Total EMOC trained doctors in the system: 38 EMOC trained doctors posted at FRUs: 7							
	8.4.1	A. Incentivisation of LSAS Doctor	Lumpsum	0.00	-	1	0.00	1	0.00	70% expected to quality as per norms(at least 2 CS per month) and eligible to get @3000 per month (70% of 91 doctors posted in FRUs=64). Budget: 64 * @3000 * 12= Rs.23.04 lakhs 30% expected to quality for additional @2000 incentive per month; 30% of 64 = 19 persons eligible for Rs.2000. Budget: 19* Rs.2000 * 12 = 4.56 lakhs TOTAL: Rs.27.60 lakhs							
	8.4.1	B. Incentivisation of EMoC Doctors	Lumpsum	0.00	-	1	0.00	1	0.00	70% expected to quality as per norms(at least 2 CS per month) a eligible to get @3000 per month (70% of 7 doctors posted in FRUs=5). Budget: 5 * @3000 * 12= Rs.1.80 lakhs 30% expected to quality for additional @2000 incentive per month; 30 of 7 = 2 persons eligible for Rs.2000. Budget: 2 * Rs.2000 * 12 = 0.48 lakhs TOTAL: Rs.2.28 lakhs							
	8.4.2	Incentive/ Awards etc. to SN, ANMs etc. (Including group/team based incentives at sub-centre/PHC for primary care)	Lumpsum		-		0.00		0.00								





									Approval 20	22-24			
						F.Y. 2	2022-23	F.Y. 2	2023-24				
S.N	o. Old FM	R Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks			
	8.4.2	Pregnant women line listed & treated for severe anaemia	Per case	100	0.00	0	0.00	0	0.00	Provision is for 10 Aspirational Districts for identification, line listing of sever anaemic pregnant women by HW (F) & confirmation of HB% (<7gm%) at facility level by MO & initiate treatment along with follow up visit at least for two consecutive months. Budget Provision: Incentive to ANM @Rs.100/- per case Expected severe anaemia cases - 5025 (2% of expected pregnancy) Expected coverage through ANM- 2515 (50%)			
	8.4.2	Pregnant women line listed & treated for high risk pregnancies (for detection & timely referral of at least 7% of high risk cases out of total ANC registered) - Hypertension, any bleeding during ANC, Bad Obstetric History, women with blood disorder etc. (Excluding anaemia)	Per SC	1000	0.01	0	0.00	0	0.00	- For 10 Aspiration District Pregnant women line listed & treated for high risk pregnancies (for detection & timely referral of at least 7% of high risk cases out of total ANC registered) - Hypertension, any bleeding during ANC, Bad Obstetric History, women with blood disorder etc. (Excluding anaemia) Total SC to be covered- 2027 30% of SC ANMs are expected to be covered- 610 nos			
	8.4.2	Home deliveries attended by SBA trained ANM	Per case	1000	0.01	0	0.00	0	0.00	Expected Home deliveries to be attended by SAB trained ANM in the notified villages in 10 Aspirational districts- 5406. Budget provisioned for 70% of cases- 3784			
	8.4.2	Institutional deliveries at SCs designated as delivery points (DP) conducting >5* deliveries/ month	Per case	300	0.00	0	0.00	0	0.00	Expected of deliveries in DP SCs beyond 5del/per DP in 10 Aspirational districts- 3048			
	8.4.2	Institutional deliveries at APHCS/PHCs designated as delivery points (DP) conducting >15* deliveries/month	Per case	300	0.00	0	0.00	0	0.00	Expected of deliveries in DP PHC-N beyond 15/del per month/DP in 10 Aspirational districts -14652			
	8.4.2	Institutional deliveries at CHCs(Non FRU) conducting 50* deliveries/month	Per case	300	0.00	0	0.00	0	0.00	Expected of deliveries in DP CHC-Non FRU beyond 50 /del per month/DP- 10 Aspirational districts-16968			
	8.4.2	C-sections per month at Sub district CHC/FRUs.	Per case	3000	0.03	0	0.00	0	0.00	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. (Aprl -to Nov 21- 16781 Exp del for 12 months- 25174 Exp C Section up to 12 months- 3865 Avg CS per month-323 Monthly max. Limit for incentivisation (C section up to 20% of Normal del)-353 Case load for incentivization for 12 months (Monthly maximum limit as per norm from 6th CS onwards)-3396			
	8.4.2	C-sections per month at District Hospital FRUs	Per case	3000	0.03	0	0.00	0	0.00	Provision is for FRU-DHH in 10 Aspirational districts Total number of DHH-10 nos Total Num of del. (Aprl -to Nov 21) - 3062 Exp del for 12 months- 46041 Exp C Section up to 12 months- 14643 Avg CS per month- 1221 Monthly max. Limit for incentivisation (C section up to 20% of Norma 524 Case load for incentivization for 12 months (Monthly maximum lir per norm from 11th CS onwards)- 5088 Detailed calculated is at Annexure			







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C N1	OL LEVED	Colored Aut 1				F.Y. 2	2022-23	F.Y. 2	2023-24						
S.No	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks					
		Special incentive for service providers (CH) - Incentive to SNCU team for performance	Lumpsum	25000	0.25	0	0.00	0	0.00	Incentive to be released to units on meeting the following conditionalities: Bed occupancy $\geq 70\%$ Inborn admission $\leq 40\%$ Death rate $\leq \! 15\%$ Currently about 30% of SNCUs qualify for the above indicators. Since MUSQAN is planned to be implemented and regular review and mentoring of SNCUs are being conducted it is proposed to make more SNCUs eligible for te quality criteria in a phased manner i.e. 50% SNCUs in 2022-23 & 70% of SNCU in 2023-24.					
	8.4.2	Incentisation of existing Human Resources			-		0.00		0.00	Budget shifted to FMR 8.4.11					
	1843	Honorarium for Paediatric ECO, ENT specialist, Orthopediatrician, Ophthalmologist, Psychiatrics	Per visit	10000	0.10	0	0.00	0	0.00	Budget Proposed as per last year's approval Strengthening of universal Eye Screening under RBSK at District Hospitals: Background: For ensuring universal eye screening as per RBSK mandate (including RoP) experts will be hired form empanelled Pvt. Hospitals/ Individual specialists. Budget: Rs.10,000 per visit per expert inclusive of all cost X 100 visits= Rs.10.00 lakhs					
	1244	Honorarium to ICTC and other Counsellors for outreach AH activities			-		0.00		0.00	Rs.10,000 per visit per expert inclusive of all cost X 100 visits= Rs.10.00 lakhs Not proposed separately. ICTC counsellor utilise fund from budget available NACO (OSACS)					
		Performance reward if any			-		0.00		0.00						
		Award to the Facilities based on composite FP indicators	Per Facility	100000	1.00	0	0.00	0	0.00	Performance incentives for 1. Award to the Facilities based on composite FP indicators (Details at FP Write-up					
		Award to the Service Provider								Justification Annexure) Budget: @Rs. 1.00 lakhs X 5 = Rs.5.00 lakhs 2. Award to the Service Provider					
	8.4.5	a. Top three best performing service providers for NSV, Female Sterilization	Per Service Provider	10000	0.10	0	0.00	0	0.00	2.1. Top three best performing service providers for NSV, Female Sterilization Budget: @Rs.10000/- X 6 = Rs.0.60 lakhs 2.2. Top three ASHAs at district level for Male and Female Sterilization and PPII					
		b. Top three ASHAs at district level for Male and Female Sterilization and PPIUCD	Per ASHA	1000	0.01	0	0.00	0	0.00	Budget: @Rs. 1000/- X 9 X 30 =Rs.2.70 lakhs 2.3. Top three Male Health Workers at District Level for Male Sterilization Budget: @Rs. 1000/- X 3 X 30 =Rs.0.90 lakhs					
		c. Top three Male Health Workers at District Level for Male Sterilization	Per Health Worker	1000	0.01	0	0.00	0	0.00	Total Budget: Rs.9.20 lakhs					
		Incentive to provider for IUCD insertion at health facilities (including fixed day services at SHC and PHC) [Provide breakup: Public Sector]			-		0.00		0.00	Not proposed.					







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S	.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		8.4.7	Incentive to provider for PPIUCD services	Per Service Provider	150	0.00	0	0.00	0	0.00	Target - 120000 cases (No. of PPIUCD services given at Public inst.). Budgeted for 80% i.e. 96000 cases. Proposed as per concerned Programme Guideline
		8.4.8	Incentive to provider for PAIUCD Services	Per Service Provider	150	0.00	0	0.00	0	0.00	Target - 10000 cases (No. of PAIUCD services given at Public inst.). Budgeted for 80% i.e. 8000 cases. Proposed as per concerned Programme Guideline
		8.4.11	Incentives & Allowances under NVHCP					2.34		2.39	Incentive for Screening of Hepatitis B & Hepatitis C (2022-23) Division: NVHCP 1. Incentivisation of MOs: For Hep C Cases • For initiation of treatment of Hep c patient along with counselling & Data Entry @ Rs. 100/- per patient x 1390 patients= Rs. 1.39 Lakh • Completion of treatment @ Rs. 100/- Per patient x 1390= Rs. 1.39 Lakh (after SVR& MIS entry) For Hep B Cases • Follow-up of Hep B cases @ Rs. 100/- per case x 824 cases x 4 (Quarterly follow-up advise)= Rs. 3.30 Lakhs. 2. Incentive for LTs: • For testing and data updation in MIS portal of samples for all types of viral hepatitis @Rs.10/- per case x 14.1 lakh cases= Rs. 141.00 Lakhs 3. Incentive for Data Entry & updation @ Rs. 2000/- PM lump sum (on satisfactory data entry in MIS portal of all positive cases after due verification by concerned Nodal Officer) - Existing HR to be mobilised. Budget @ Rs. 2000/- PM x 38 TCs= Rs. 9.12 lakhs 4. Incentive to each HRG positive cases for Hep C @ 500/- for estimation of SVR (testing by QVLT) once in a year with completion of Treatment in case of Hepatitis C. (Budget Not Approved) 5.Incentive to each HRG positive cases for Hep B @ 500/- for testing by QVLT two times in a year with adherence to treatment and visiting the Centre 4 times in a year for each case of Hepatitis B. (Budget Not Approved) Total Approved for 2022-23: Rs. 156.20 Lakhs Proposal 2023-24
		I	Incentivisation of Mos	Per Case	100	0.00	100	0.10	150	0.15	Division: NVHCP 1. Incentivisation of MOs: For Hep C Cases • For initiation of treatment of Hep c patient along with counselling & Data Entry @ Rs. 100/- per patient x 1390 patients= Rs. 1.39 Lakh
			Incentive for LT	Per Case	10	0.00	20000	2.00	20000	2.00	Completion of treatment @ Rs. 100/- Per patient x 1390= Rs. 1.39 Lakh (after SVR& MIS entry) For Hep B Cases Follow-up of Hep B cases @ Rs. 100/- per case x 1776 cases x 4 (Quarterly follow-up)
		I	Incentive for Data Entry & updation	per month	2000	0.02	1	0.24	1	0.24	advise)= Rs. 7.10 Lakhs. 2. Incentive for LTs: • For testing and data updation in MIS portal of samples for all types of viral hepatitis @Rs.10/- per case x 14.1 lakh cases= Rs. 141.00 Lakhs 3. Incentive for Data Entry & updation @ Rs. 2000/- PM lump sum (on satisfactory data entry)







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							F.Y. 2	.022-23	F.Y. 2	023-24	
S.N	o. OI	ld FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		I	Incentive to each HRG positive cases for Hep C	Per test	500	0.01		0.00		0.00	in MIS portal of all positive cases after due verification by concerned Nodal Officer) - Existing HR to be mobilised. Budget @ Rs. 2000/- PM x 38 TCs= Rs. 9.12 lakhs 4. Incentive to each HRG positive cases for Hep C @ 500/- for estimation of SVR (testing by QVLT) once in a year with completion of Treatment in case of Hepatitis C. (Budget Not Approved)
			Incentive to each HRG positive cases for Hep B	Per case	500	0.01		0.00		0.00	S.Incentive to each HRG positive cases for Hep B @ 500/- for testing by QVLT two times in a year with adherence to treatment and visiting the Centre 4 times in a year for each case of Hepatitis B. (Budget Not Approved) Total Approved for 2023-24: Rs. 160.00 Lakks
	8.4	4.12	Others (please specify) including welfare fund for staff	Lumpsum		-		0.00		0.00	
			NHM staff welfare Fund	Lumpsum	8603625	86.04		0.00		0.00	Details at HSS Write-up justification Annexure
18			Remuneration for CHOs					0.00		0.00	•
-	8.1	1.12	Staff for Health & Wellness Centre (H&WC)					0.00		0.00	
	8.1	1.12.1	Mid-level Service Provider					0.00		0.00	As regular Nursing Officers from state Govt. are inducted as CHOs, state has decided to pay Rs.15000/- p.m. as an incentive over and above the salary drawn from state govt during services period at HWCs and Rs. 10,000/- as stipend during training period.
	8.1	1.12.1	Remuneration For Staff Nurse (CHOs)	per month	10000	0.10	0	0.00	0	0.00	2022-23: 5400 new positions As per GoI mandate, 5400 SCs are to be converted as HWCs by December 2022. Accordingly, State Government has created 5400 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. About 1200 CHOs have not joined out of 5400 CHOs, they will be joined by Jun'22. Hence, 10 months remuneration proposed for all 5400 CHOs during 2022-23. and 12 months remuneration proposed for all 5400 CHOs during 20223-24
18	8		Incentives under CPHC					0.00		0.00	
	9.	.5.27.4	Incentive/honorarium for Yoga instructor	Per Session	500	0.01	0	0.00	0	0.00	Incentive/honorarium for Yoga instructor: @Rs.500 per yoga session As per the state govt. Notification Yoga instructors are paid Rs. 500 for facilitating one yoga session, 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 As per GoI conditionality framework up to 10 Yoga sessions will be held in a month Total HWCs: 5400 SHC HWCs +1288 PHC HWCs = 6688 HWCs Fund proposal for 2022-23: Rs.500/- per session x 10 sessions x 6688 HWCs x 12 months = Rs.4012.8 lakhs Fund proposed: Rs.2808.96 Lakhs (70% of total cost)







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						F.Y. 2	2022-23	F.Y. 2	2023-24	
S.No	. Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	8.1.12.2	Performance incentive for Mid-level service providers					0.00		0.00	Proposal 2022-23 proposed for non XV FC supported districts: • Out of 5400 SHCs 2795 (1836+959) CHOs are from non XV FC supported districts. 1. 1836 CHOs from 16 districts (already posted by March'23 from the 16 dist.) = 1836 x 12 x 0.15 = Rs. 3304.80 Lakhs
		For old CHOs	per month	15000	0.15	0	0.00	0	0.00	2. Proposed for 959 CHOs from 17 dist. for 8 months; as new CHOs are expected to resume their duties as CHO after due training of four months - 959 x 8 x 0.15 = Rs. 1150.8 Lakhs • Grand Total - 3304.8+ 1150.8 = Lakhs 4455.60 Lakhs • Budgeted: 70% as they have to qualify against the set deliverables as per Gol/ State specific guidelines =Rs. 3118.92 Lakhs Proposal 2023-24
		For Newly appointed CHOs	per month	15000	0.15	0	0.00		0.00	proposed for non XV FC supported districts: • Out of 5400 SHCs, 2664 are from non XV FC supported districts. • the 2664 CHOs from 15 districts are already posted at the 15 districts = 2664 × 0.15 × 12 = Rs.4795.2 Lakhs Budgeted: 70% as they have to qualify against the set deliverables as per Gol/ State specific guidelines =Rs. 3356.64 Lakhs Details of incentive proposed for HWcs is at CPHC Write-up Annexure
	8.4.2	For Physiotherapists	Per Session	600	0.01	0	0.00	0	0.00	Proposal: Physiotherapy sessions at PHC HWCs Justification: As part of comprehensive primary health care service packages, physiotherapy services will be rendered at 560 selected PHC-HWCs where physiotherapist are available. Payment @ Rs,600/- per session (inclusive of Travel Allowances & Honorarium) will provided to Physiotherapists for attending a session (duration minimum 4 hrs, coterminous with OPD Time-1st half/2nd half) & manage minimum 2 cases per session. These Physiotherapists will be engaged through outsourced agency/ies decided through competitive bidding process. Physiotherapists are expected to attend 4 sessions per month per PHC-HWCs. Incentive to Physiotherapists: @Rs.600/- per session x 4 sessions p.m. (1 sessions per week) x 12 months x 560 Physiotherapists







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	011505					F.Y. 2	2022-23	F.Y. 2	2023-24			
S.No	. Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)		Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks		
	8.4.9	Team based incentives for Health & Wellness Centres (H&WC - Sub Centre)	Per HWC	36000	0.36	0	0.00	0	0.00	for non XV FC supported districts: Proposal 2022-23: Team based incentive proposed for 2795 for ANM & MPW(M) under SC HWCs in the 17 district under NHM PIP, the rest of the 2605 ANM & MPW-M is provisioned under XV FC Amount of Incentive @ 3,000/- per month per SC as team based incentives to ANM/MPW(M)= 2795 x 12 x 0.03 = Rs. 1006.2. Budgeted: 70% as they have to qualify against the set deliverables as per Gol/ State specific guidelines - 704.34L Proposal 2023-24: Team based incentive proposed for 2664 for ANM & MPW-M under SC HWCs in the 15 district under NHM PIP, the rest of the 2736 ANM & MPW-M is provisioned under XV FC Amount of Incentive @ 3,000/- per month per SC as team based incentives to ANM/MPW(M)= 2664 x 12 x 0.03 = Rs. 959.04 Lakhs Budgeted: 70% as they have to qualify against the set deliverables as per Gol/ State specific guidelines = Rs. 671.33 Lakhs		
	R 4 10	Team based incentives for Health & Wellness Centres (H&WC - PHC)			-		0.00		0.00	Proposal: Team based incentive proposed for 1288 PHC HWCs Amount of Incentive: GoI Norms: @Rs.2.00 lakhs per PHC HWCs (@Rs.1.00 lakhs for PHC team & Rs.1.00 lakhs for collocated SC team) 1. Proposed incentive: for PHC i. MBBS MO @ Rs. 3000/- Per Month x 12 months = Rs. 36000		
	8.4.10	Team based incentives for Health & Wellness Centres (PHC-H&WCs)	Per Inst. Per annum	96000	0.96	0	0.00	0	0.00	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 × 1288 = Rs. 1236.48 Lakhs Budgeted: 70% as they have to qualify against the set deliverables as per Gol/ State specific guidelines - Rs. 865.54 Lakhs		
	12 4 10	Team based incentives for MPW(M&F) at Collocated SCs	Per Inst. Per annum	36000	0.36	0	0.00	0	0.00	2. Proposed incentive for Collocated SCs i. ANM & MPW (M) @ Rs. 3000/- per month × 12 months = Rs. 36000 = 36000 × 1288 = Rs. 463.68 Lakhs Budgeted: 70% as they have to qualify against the set deliverables as per Gol/ State specific guidelines - Rs. 324.58 Lakhs		
189		Costs for HR Recruitment and Outsourcing			0		0.00		0.00			
190		Human Resource Information Systems (HRIS) Training on Training Management Information System			0.00		0.00		0.00	Training Management Information System (TMIS) is an online application managed by NIHFW which provide scope for line listing of trained HR and tracking their skill utilization status.		







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						F.Y. 2	2022-23	F.Y. 2	023-24	
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Two days State level Orientation Training on TMIS for HM, BDM & DEO of MCH	30/ Per Batch		0.00		0.00		0.00	Not proposed for 2022-23 & 2023-24 as the training is completed in 2021-22
	9.5.29.10	Two days State level Orientation Training on TMIS for PHEOs, BDM and others	Per Batch	100000	1.00	0	0.00	0	0.00	for new categories. Proposed Budget: Rs. 1.00 lakh/ batch x 11 batches= Rs.11.00 lakh. Load for 2021-22: 11 batches of 330 person Projected Ach.till Mar'22: 270 person in 7 batches Proposed for 2 years: 4batches (30/ batch) Target for 2022-23: 2 batches @30/ batch Target for 2023-24: 2 batches for UDM and newly recruited HMs.
		Field validation of database reported in TMIS	Per Visit	40000	0.40		0.00			Target for 2021-22: 2 Visits Proposed Budget: Rs. 40000/ visit x 2 visits = Rs. Rs.0.80 Lakh Completed. Not proposed for 2022-23 & 2023-24 as the activity is completed in 2021-22
	177	Implementation of Human Resource Information System (HRIS)	Lumpsum	1000000	10.00	0	0.00	0	0.00	Background: HRIS is developed by NICSI resources. The application contains profile information, leave details, e-pay slip & integrated with TMIS data through HRMS code. Proposal: This year, the representation based transfer and Appointment through counselling module for all staffs (regular and NHM) will be developed & implemented along with the maintenance of the entire application. Budget proposed as per last year's approval





Details of Service Delivery HR Approved in NHM PIP 2022-23

Pool	OID FMR	Position Name	Position s approve d in FY 21-22	salary 2021-22	Amount for Rational isation	2021-22 after	New / Dropped Positions proposed in FY 22- 23	s propose	cs (regular/	(Contract	Base salary Proposed in PIP 2022-23	PI (25%)	KBK Incenti ve	lotal	No of months salary propos ed	Old+Ne	ent for	requirement for	treasury for rermneratio	Amount to be disburshe
RNTCP	8.1.1.5	Lab technician	0	15296		15296	1	1	0	1	16061	4015	0	20076	12	2.41	1	2.41	-	2.41
RNTCP	8.1.5.1	Medical Officers DTC / Sr. MO-DRTB Centre	0	67389		67389	1	1		1	70758	17690	0	88448	12	10.61		10.61	-	10.61
		Grand Total	0				2	2	0	2						13.02	0.00	13.02	0.00	13.02
		Total Paramedics	0				1	1	0	1						2.41	0.00	2.41	0.00	2.41







Details of Service Delivery HR Approved in NHM PIP 2023-24

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Pool	OID FMR	Position Name		salary proposed in 2022-23	nronosad	Total Positions proposed in FY 23-24	Total Paramed ics (regular/ Inducted)	dics (Contrac	Base salary Proposed in PIP 2023-24	PI (25%)	KBK Incentiv e	Total salary p.m.	No of months salary proposed		nt for Paramedic s (regular/	Paramedics	rermnerati on of	Amount to
RNTCP	8.1.1.5	Lab technician	1	16061		1	0	1	16864	4216	0	21080	12	2.53	0.00	2.53	0.00	2.53
RNTCP	8.1.5.1	Medical Officers DTC / Sr. MO-DRTB Centre	1	70758		1	0		74296	18574	0	92870	12	11.14			0.00	11.14
		Grand Total	2		0	2								13.67	0.00	2.53	0.00	13.67
		Total Paramedics	1		0	1	. 0	1						2.53	0.00	2.53	0.00	2.53

0.725495







			Programm	e Manage	ement Hu	ıman Resoui	rses NHM PIF	2022-23						
Pool	OID FMR	Position Name	Positions	Base salary 2021- 22 as per RoP	Amount for	Base salary	New/ Dropped Positions	Total Positions	Base salary Proposed in PIP 2022-23	PI (25%)	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget
NPCDCS / MFP	16.4.2.3.2	Fin. Cum Logistic Consultant	0	44416		44416	1	1	46637	11659	0	58296	12	7.00
		Total	0				1	1						7.00







			Programn	ne Managemer	nt Human Resou	rses NHM PIP 20	23-24					
Pool	OID FMR	Position Name	Positions proposed in FY 22-23	Base salary proposed in 2022- 23	New / Dropped Positions proposed in FY 23-24	Total Positions proposed in FY 23-24	Base salary Proposed in PIP 2023-24	PI (25%)	KBK Incentive	Total salary p.m.	No of months salary proposed	Total budget
NPCDCS / MFP	16.4.2.3.2	Fin. Cum Logistic Consultant	1	46637		1	48969	12242	0	61211	12	7.35
		Total	1		0	1						7.35











NHM PIP

2022-24

Programme Implementation Plan

HSS-12
IT interventions
and systems

HSS-12_IT Interventions_Odisha

nss-12_11 interventions_Outsita										
			Approval 2022-24							2-24
						F.Y. 2022-23		F.Y. 2023-24		
lo.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		Total					0.0025		0.0025	
95		Health Management Information System (HMIS)					0.0025		0.0025	
9	9.5.26	HMIS/MCTS Trainings					0.00		0.00	
9	9.5.26.1	2 days Training cum review meeting for HMIS & MCTS at State level	Per Batch	1,80,000	1.80	0	0.00	0	0.00	Review Meeting of DDM/ CDM for HMIS/ RCH Portal (2 days, 3 State level meeting) Proposed load for 2 years: 180 person Target for 2022-23: 3 batches (@30/ batch)
9	9.5.26.1	2 days Training cum review meeting of DDM/ BDM/ UDM/ ICA on HMIS & RCH portal at State Level.	Per Batch	1,80,000	1.80	0	0.00	0	0.00	Category of Participants: DDM/ BDM/ UDM/ ICA. State load: 525 person Proposed load for 2years: 30 batches Target for 2022-23: 15 batches (35/batch) Same activity will be continued: 15 batches (35/batch)
9	9.5.26.2	1 day Training cum review meeting for HMIS & MCTS at District level	Per Batch	6000	0.06	0	0.00	0	0.00	Activity: Monthly- Review-cum-validation meeting of BDMs, SAs, reporting personnel of SDH & DHH at District level Proposed Load for 2 years: 314 batches Target for 2022-23: 314 batches (@1 batch/ block) Target for 2023-24: 314 batches (Activity continued)
Š		Monthly review -cum-validation meeting & Refresher Training of sub Block level reporting personnel					0.00			1. One day Monthly review -cum-validation meeting of sub Block level reporting personnel @ Rs. 200/- month/ block X 314 Blocks X 12 months= Rs. 7.54 lakhs 2. 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 18768 = 112.61 Lakhs
		1 day Monthly review -cum-validation meeting of sub Block level reporting personnel	Per Block/ Month	200	0.00	0	0.00	0	0.00	Total Budget Proposed: Rs. 7.54 Lakhs + Rs. 112.61 lakhs= Rs. 120.15 Lakhs
		Refresher training (one day each) for sub-block level Rural + Urban) reporting personnel	Per person	600	0.01	0	0.00	0	0.00	
g	9.5.26.4	Any other (please specify)	Lumpsum	1000000	10.00	0	0.00	0	0.00	National Level HMSI Workshop not proposed in 2022-23 & 2023-24.
1	12.9	Printing activities under HMIS/MCTS					0.0025		0.0025	
1	12.9.1	Printing of HMIS Formats	Per institutions	250	0.0025	1	0.0025	1	0.0025	Institutions reporting through HMIS: Rural: SC - 6688 + PHC - 1288 + CHC - 377 + SDH - 33 + DHH -32 + MCH - 7 + Urban: SC - 516 + CHC - 7 + PHC - 102 = 9477 + Buffer - 523 = 10000 booklet. No. of pages required per inst. per annum - 8 pages x 2 nos (original + duplicate) = 16 pages p.m. x 12 months = 192 pages Cost of printing should be based on competitive bidding
1	12.9.4	Any other (please specify)			-		-		-	
1	16.3	HMIS & MCTS					0.00		0.00	

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						F.Y. 2022-23		F.Y. 2023-24		
S.No.	Old FMR	Scheme/ Activity	Unit of Measure	Unit Cost (Rs)	Unit Cost (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
	16.3.2	Mobility Support for HMIS & MCTS			0.00		0.00		0.00	
	16.3.3	Operational cost for HMIS & MCTS (incl. Internet connectivity; AMC of Laptop, printers, computers, UPS; Office expenditure; Mobile reimbursement)			0.00		0.00		0.00	
		Internet Connectivity through LAN / data card			-		0.00		0.00	
		Internet connection for M&E cell at SPMU	Per annum	60000	0.60	0	0.00	0	0.00	
		Internet connection for M&E cell at DPMU	Per dist p.a	30000	0.30	0	0.00	0	0.00	
		Internet connection (Broadband) for BPMU	Per BPMU p.a	12000	0.12	0	0.00	0	0.00	
		Internet connection (Broadband) for Major facilities I.e. DHH & SDH for facility based reporting in HMIS	Per facility p.a	7000	0.07	0	0.00	0	0.00	
		AMC for Computer/ laptop etc.			-		0.00		0.00	AMC cost of Computers, Laptop & other accessories (412) computers including UPS/ laptops)
		State Level (for SPMU)	Per unit	2500	0.03	0	0.00	0	0.00	SPMU: 8 X Rs.2500/- (Cost proposed for a set of computers along with UPS @Rs.2500/-)
		District Level (for DPMU)	Per unit	2500	0.03	0	0.00	0	0.00	DPMU : 90 (Available 90 X Rs.2500/- (Cost proposed for a set of computers along with UPS
		Block Level (for BPMU)	Per unit	2500	0.03	0	0.00	0	0.00	BPMU- 314 + DHH-32+ SDH-33 = Total: 379 X Rs.2500/- (Cost proposed for a set of computers along with UPS @Rs.2500/-)
		Other reporting unit major facilities i.e. DHH/ SDH	Per unit	2500	0.03		0.00		0.00	
		AMC Cost for Printer			-					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
		State Level	Per Unit	28000	0.28	0	0.00	0	0.00	
		District & Below Level	Per Unit	1200	0.01	0	0.00	0	0.00	
		Contingency for report returns			-		0.00		0.00	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
		State Level	Lumpsum	60000	0.60	0	0.00	0	0.00	Rs. 60,000/- X 1 SPMU =0.60 Lakhs
		District Level	Per District	30000	0.30	0	0.00	0	0.00	Rs. 30,000/- X 30 DPMU = 9.00 Lakhs
		Block & Other major Hospital Level	Per Institution	10000	0.10	0	0.00	0	0.00	Rs. 10,000/- X BPMU- 314 + DHH-32+ SDH-33 (Total - 379) = 37.90 Lakhs
	16.3.4	Procurement of Computer/Printer/UPS/ Laptop/ VSAT	Per unit	55000	0.55		0.00		0.00	No Additional proposal as the requirement has been saturated by 2021-22
		Digital Record Keeping in DPMU/BPMUs	Lumpsum	10000000	100.00		0.00		0.00	
		Improving HMIS data quality through External & Internal Evaluation	Lumpsum	6000000	60.00	0	0.00	0	0.00	Detail proposal is Placed at IT Interventions Write-up Justification Annexure





			Approval 2022-24							
		Scheme/ Activity	Unit of Measure		Unit Cost (Rs. Lakhs)	F.Y. 2022-23		F.Y. 2023-24		
S.No.	Old FMR					Quantity/ Target	Budget (Rs. Lakhs)	Quantity/ Target	Budget (Rs. Lakhs)	State's Remarks
		QR Code for Strengthening reporting in ANMOL								Total Budget Requirement: Rs. 19.97 Lakhs Fund proposed under RCH-1, SI No.16 MH Component
		IT Support to SPMU other Than M&E Cell/ HMIS Cell	Lumpsum		0.00		0.00		0.00	
196		Implementation of DVDMS					-		-	
		Infrastructure	Lumpsum		-		-		-	Infrastructure (computer & other accessories) available upto PHC HWC level. Hence, no additional requirement proposed.
	14.2.2	E-Upkaran Software	Lumpsum	13200000	132.00		-		-	Budget Not Approved
	14.2.2	Drug Vaccine Distribution Management Software	Lumpsum			0	-	0		1. Renewal of The FIREWALL System- 2. Antivirus License Renewal 3. AMC of IT equipments
197		e-Sanjeevani (OPD+HWC)					-		-	
		e-Sanjeevani (OPD)								e-Sanjeevani (OPD) managed through State Budget. Hence, No additional budget proposed under NHM PIP
		e-Sanjeevani (HWC)								Budgeted under CPHC Component
		Other IT Initiatives for Service Delivery (please specify)			0.00		-		-	
	17.8	Maintenance and Audit of NHM website and its modules	Lumpsum	1000000	10.00	0	-	0	_	Maintenance and Audit of NHM website and its modules (Ongoing Activity) Budget: Rs.10.00 lakhs (Rs.5.00 lakhs for maintenance and change requests in the web site & Rs.5.00 lakh for Mobile App for E-ASHA module)
		GPS at MHT Vehicles			0.00		-		-	GPS at MHT Vehicles (Ongoing Activity) 1. Non Recurring cost: Not proposed as the same was approved in 2021-22 2. Recurring cost for GPS operation, including SIM charges (Budget: 636 MHTs X Rs.1380/- =Rs. 8.78 lakhs)
		Non Recurring cost	Per MHT	10000	0.10	0	-	0	-	
		Recurring cost	Per MHT	1380	0.01	0	-	0	-	







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