NATIONAL RURAL HEALTH MISSION
राष्ट्रीय ग्रामीण स्वास्थ्य मिशन
(2005-2012)

APPROVAL OF STATE PROGRAMME IMPLEMENTATION PLAN 2012-13: HARYANA

May 2012

MINISTRY OF HEALTH & FAMILY WELFARE
GOVERNMENT OF INDIA

Preface

I truly believe that the National Rural Health Mission affords us a unique opportunity to be aspirational and to bring about transformational change.

This document evolves out of a shared vision – about where the State of Haryana must reach and the path to be traversed. Strides in the right direction get the State more money while there is danger too of losing funds for slippages.

As NRHM embarks on the second phase of its journey, let us be inspired by what Mahatma Gandhi said ***"A small body of determined spirits fired by an unquenchable faith in their mission can alter the course of history."***

Let us believe in ourselves and our ability to make a difference.

Anuradha Gupta
Additional Secretary & Mission Director, NRHM

No. 10(12)/2012-NRHM-1
Government of India
Ministry of Health and Family Welfare
(National Rural Health Mission)

Nirman Bhavan, New Delhi
Dated May 26, 2012

To,
Mission Director (NRHM),
Department of Health & Family Welfare,
Government of Haryana
Paryatan Bhawan Building
Bays No 55-58, Sector - 2,
Panchkula
Haryana – 134109

Subject: Approval of NRHM State Programme Implementation Plan for the year 2012-13

1. This refers to the Programme Implementation Plan (PIP) for the year 2012-13 submitted by the State and subsequent discussions in the NPCC meeting held on April 17, 2012 at New Delhi.
2. Against a resource envelope of Rs 399.07 crores, the administrative approval of the PIP for your State is conveyed for an amount of Rs.342.55 crores. Details are provided in Table A, B and C below:

TABLE-A

(Rs. in Crore)

Likely Uncommitted Unspent Balance Available under NRHM as on 1.4.2012	13.54
GOI Resource Envelope for 2012-13 under NRHM	289.15
25% State share (2012-13)	96.38
Total	**399.07**

TABLE-B

Sl. No.		Likely Uncommitted Unspent balance available as on 1.4.2012	GoI Resource Envelope under NRHM	Total
1	RCH Flexible Pool	12.57	77.49	90.06
2	NRHM Flexible Pool	12.26	96.27	108.53
3	Immunization (from RCH Flexible Pool)	1.96	3.79	5.75
4	NVBDCP	0.00	2.60	2.60
5	RNTCP	2.21	21.62	23.83
6	NPCB	5.11	8.38	13.49
7	NLEP	0.31	1.43	1.74
8	IDSP	0.00	2.50	2.50
9	NIDDCP	0.00	0.26	0.26
10	Direction & Admn. (Treasury route)	-22.49	62.55	40.06
11	PPI Oper. Cost	1.61	12.26	13.87
12	25% State share			96.38
	Total			**399.07**
	Committed Unspent Balance up to 2011-12 to be Revalidated in 2012-13	**Rs. 48.94 crore**		

TABLE-C

SUMMARY OF APPROVAL			
Sr. No.	**Scheme /Programme**	**Approved Amount (Rs. Crores)**	**Annexure**
1	RCH Flexible Pool	125.55	1
2	NRHM Flexible Pool	110.89	2
3	Immunization and PPI operation cost	18.84	3
4	NIDDCP	0.45	4A
5	IDSP	2.38	4B
6	NVBDCP	3.25	4C
7	NLEP	1.43	4D
8	NPCB	8.38	4E
9	RNTCP	8.83	4F
10	Infrastructure maintenance(Treasury route)	62.55	
	Total	**342.55**	

Thus, there is a cushion of Rs. 56.52 crores (Rs. 399.07 less Rs. 342.55 crores) for which, State is advised to send a supplementary PIP urgently.

Targets, Conditionalities and road map

3. State has been assigned mutually agreed goals and targets. The state is expected to achieve them, adhere to key conditionalities introduced this year and implement the road map provided in each of the sections of the approval document.

4. District resource envelope as indicated in the PIP should be respected by the State.

5. All buildings/vehicles supported under NRHM should prominently carry NRHM logo in English/ Hindi and regional languages.

Mandatory disclosures

6. In addition, the State is directed to ensure mandatory disclosure on the state NRHM website of the following:

- Facility wise deployment of all contractual staff engaged under NRHM with name and designation.
- MMUs- total number of MMUs, registration numbers, operating agency, monthly schedule and service delivery data on a monthly basis.

- Patient Transport ambulances and emergency response ambulances- total number of vehicles, types of vehicle, registration number of vehicles, service delivery data including clients served and kilometres logged on a monthly basis.
- All procurements- including details of equipments procured (as per directions of CICI which have been communicated to the States by this Ministry vide letter No..Z.28015/162/2011-H' dated 28th November 2011).
- Buildings under construction/renovation –total number, name of the facility/hospital along with costs, executing agency and execution charges (if any),), date of start & expected date of completion.

Release of second tranche of funds

7 Action on the following issues would be looked at while considering the release of second tranche of funds:

- Compliance with conditionalities.
- Physical and financial progress made by the State.
- It is expected that 25% of the State share, based on release of funds by Government of India is credited to the account of the State Health Society as early as possible.

Monitoring requirements

8. State shall ensure submission of quarterly report on progress against targets and expenditure including an analysis of adverse variances and corrective action proposed to be taken.

9. All approvals are subject to the observations made in this document.

10. The State shall not make any change in allocation among different budget heads without approval of GoI.

11. The accounts of State/ grantee institution/ organization shall be open to inspection by the sanctioning authority and audit by the Comptroller& Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare.

12. State shall ensure submission of details of unspent balance indicating inter alia, funds released in advance & funds available under State Health Societies. The State shall also intimate the interest amount earned on unspent balance. This amount can be spent against activities already approved.

Yours faithfully

Dr. Suresh. K. Mohammed
(Director NRHM-I)

APPROVAL OF STATE PROGRAMME IMPLEMENTATION PLAN, 2012-13: HARYANA

CONTENTS

Annex (Detailed budgets)

SUMMARY

STATE-SPECIFIC GOALS

The following are the goals and service delivery targets specifically laid out for the state of Haryana:

INDICATOR	INDIA		HARYANA			STATE TARGETS		
	Current status	RCH II/ NRHM (2012) goal	Trend (*year & source*)			2011-13	2013-15	2015-17
Maternal Health								
Maternal Mortality Ratio (MMR)	212 (SRS 07-09)	<100	162 (SRS 01-03)	186 (SRS 04-06)	153 (SRS 07-09)	120 (11-13)	94 (13-15)	65 (15-17)
Child Health						**2013**	**2014**	**2015**
Under 5 Mortality	55 (SRS 2010)		65 (SRS 2008)	60 (SRS 2009)	55 (SRS 2010)	40	36	32
Infant Mortality Rate (IMR)	48 (SRS 2010)	<30	54 (SRS 2008)	51 (SRS 2009)	48 (SRS 2010)	36	32	28
Neonatal Mortality Rate (NMR)	33 (SRS 2010)		34 (SRS 2008)	35 (SRS 2009)	33 (SRS 2010)	27	25	23
Early NMR	25 (SRS 2010)		24 (SRS 2008)	23 (SRS 2009)	25 (SRS 2010)	22	21	15
Family Planning								
Total Fertility Rate (TFR)	2.3 (SRS 2010)	2.1	2.5 (SRS 2008)	2.5 (SRS 2009)	2.3 (SRS 2010)	2.1	2.0	2.0

SERVICE DELIVERY TARGETS

Indicators	DLHS-2 (2002-04)	DLHS-3 (2007-08)	CES (2009)	State Targets		
				2012-13	2013-14	2014-15
Maternal Health						
Mothers who had 3 or more Ante Natal Check-ups	43.1%	51.9%	68.6%	513956 (4 ANCs)	1133184 (4 ANCs)	1211995 (4 ANCs)
Institutional delivery in public health facilities(%)	35.7	46.9	63.3	44	46	49
Line listing and follow up of Severely Anaemic pregnant women (nos)	NA	NA	NA	7646	7776	7894
Child Health						
Full Immunisation (%)	59.1	59.6	71.7%	90	95	99
Line listing and follow up of Low Birth Weight babies RURAL Nos; (% of live births)				40329 (11%)	56461 (15%)	76625 (20%)
Family Planning						
Female sterilisations (lakhs)			0.73 (HMIS: 2010-11)	0.9	1.0	1.0
Post-Partum sterilizations (lakhs)			0.042 (HMIS: 2010-11)	0.09	0.10	0.15
Male sterilisations (lakhs)			0.062 (HMIS: 2010-11)	0.20	0.20	0.20
IUD insertions (lakhs)			1.79 (HMIS: 2010-11)	2.64	2.9	3.15
Disease Control						
ABER for malaria (%)				>11		
API for malaria (per 1000 population)				<1		
Annualized New Smear Positive Detection Rate of TB (%)				12		
Success Rate of New Smear Positive Treatment initiated on DOTS (%)				3		
Cataract operations(lakhs)				1.47 lacs		

High focus district

Performance against the above service delivery indicators in the 1 high focus district (Mewat) out of total 21 districts should be at least, on par with the state average; and subsequently in line with the performance of the top 10% of districts.

KEY CONDITIONALITIES AND INCENTIVES

As agreed, the following key conditionalities would be enforced during the year 2012-13.

a) **Rational and equitable deployment of HR with the highest priority accorded to high focus district and delivery points[1].**

b) **Facility wise performance audit and corrective action based thereon[2].**

Non-compliance with either of the above conditionalities may translate into a reduction in outlay upto 7 ½% and non-compliance with both translating into a reduction of upto 15%.

c) **Gaps in implementation of JSSK may lead to a reduction in outlay upto 10%.**

d) **Continued support under NRHM for 2nd ANM would be contingent on improvement on ANC coverage and immunization as reflected in MCTS.**

e) **Vaccines, logistics and other operational costs would also be calculable on the basis of MCTS data.**

INCENTIVES

Initiatives in the following areas would draw additional allocations by way of incentivisation of performance:

a) **Responsiveness, transparency and accountability (upto 8% of the outlay).**

b) **Quality assurance (upto 3% of the outlay).**

c) **Inter-sectoral convergence (upto 3% of the outlay).**

d) **Recording of vital events including strengthening of civil registration of births and deaths (upto 2% of the outlay).**

e) **Creation of a public health cadre (by states which do not have it already) (upto 10% of the outlay)**

f) **Policy and systems to provide free generic medicines to all in public health facilities (upto 5% of the outlay)**

Note: The Framework for Implementation of NRHM to be strictly adhered to while implementing the approved PIP.

[1] Rational and equitable deployment would include posting of staff on the basis of case load, posting of specialists in teams (eg. Gynaecologist and Anaesthetist together), posting of EmOC/ LSAS trained doctors in FRUs, optimal utilization of specialists in FRUs and above and filling up vacancies in high focus/ remote areas.

[2] Performance parameters must include OPD/ IPD/ normal deliveries/ C. Sections (wherever applicable).

FINANCE: KEY ISSUES AND GUIDING PRINCIPLES

Quality FMRs must be submitted on time with both physical and financial progress fully reflected.

1. Status of 15% Contribution of state share:

Year	Amounts required on basis of releases (Rs. in Crore)	Amount Credited in SHS Bank A/C (Rs. in Crore)	Short/ (Excess) (Rs. In Crore)
2007-08	20.43	12.14	8.29
2008-09	29.12	36.14	-7.02
2009-10	36.38	25.15	11.23
2010-11	38.77	32.14	6.63
2011-12	41.15	27.56	13.59
Total	**165.85**	**133.13**	**32.72**

State should contribute the outstanding State Share of **Rs.32.72 crore**. State should submit the details of expenditure of State share for the year 2011-12. **Further, with effect from 2012-13, State's share would be 25%.**

2. Before the release of funds upto 100% of BE of your state for the year 2012-13, State needs to provide Utilization Certificates against the grant released to the State up to 2010-11. The details for such pending UCs is as under:

Status of pending UC 2010-11

Programme	Amount Rs. in Crore
RCH_II	47.65
Mission Flexi Pool	0.19
Total	**47.84**

3. Release of 100% of funds for the year 2012-13 would be contingent on the state providing utilisation certificates upto 2010-11.
4. The appointment of Concurrent Auditor for the year 2012-13 is a prerequisite for release of 2nd tranche of funds.
5. Timely submission of Statutory Audit Report for the year 2011-12 is a must for release of 2nd tranche of funds.
6. State is required to comply with the instructions and/or guidelines issued for maintenance of bank account vide D. O. No. G-27017/21/2010-NRHM-F dated January 23, 2012.
7. State should provide a confirmation of submission of Action Taken Report/ Compliance Report on the FMR Analysis (2011-12) and Audit Report Analysis for FY 2010-11.
8. State needs to prioritise the internal control procedures for all transactions.
9. State should ensure proper maintenance of books of accounts at all districts and blocks within the State.
10. Appointment of Auditor for the year 2011-12 is pending and must be completed in the first quarter of 2012-13.
11. Audit Report of FY 2010-11 is incomplete as activity wise expenditure has not been given in the schedules. Management letter, World Bank reimbursable expenses and last quarter FMR comparison with audited expenditures have not been provided.
12. **The state 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.**

ROAD MAP FOR PRIORITY ACTION

NRHM must take a 'systems approach' to Health. It is imperative that States take a holistic view and work towards putting in place policies and systems in several strategic areas so that there are optimal returns on investments made under NRHM. For effective outcomes, a sector wide implementation plan would be essential. Some of the key strategic areas in this regard Progress under NRHM hinges on urgent and accelerated action in several strategic areas which are outlined as below for urgent and accelerated action under on the part of the State.

S. NO.	STRATEGIC AREAS	ISSUES THAT NEED TO BE ADDRESSED
PUBLIC HEALTH PLANNING & FINANCING		
1.	Planning and financing	Mapping of facilities, differential planning for districts / blocks with poor health indicators; resources not to be spread too thin / targeted investments; at least 10% annual increase in state health budget (plan) over and above State share to NRHM resource envelope; addressing verticality in health Programmes; planning for full spectrum of RCH services; emphasis on quality assurance in delivery points
2.	Management strengthening	Full time Mission Director for NRHM and a full-time Director/ Jt. Director/ Dy. Director Finance, not holding any additional responsibility outside the health department; fully staffed Programme management support units at state, district and block levels; training of key health functionaries in planning and use of data. Strong integration with Health & FW and AYUSH directorates
3.	Developing a strong Public Health focus	Separate public health cadre, induction training for all key cadres; public health training for doctors working in health administrative positions; strengthening of public health nursing cadre, enactment of Public Health Act
HUMAN RESOURCES		
4.	HR policies for doctors, nurses paramedical staff	Minimising regular vacancies; expeditious recruitment (eg. taking recruitment of MOs out of Public Service Commission

S. NO.	STRATEGIC AREAS	ISSUES THAT NEED TO BE ADDRESSED
	and Programme management staff	purview); merit –based and transparent selection; opportunities for career progression and professional development; rational and equitable deployment; effective skills utilization; stability of tenure; sustainability of contractual human resources under RCH / NRHM and plan for their inclusion in State budget
5.	HR Accountability	Facility based monitoring; incentives for both the health service provider and the facility based on functioning; performance appraisal against benchmarks; renewal of contracts/ promotions based on performance; incentives for performance above benchmark; incentives for difficult areas
6.	Medical, Nursing and Paramedical Education (new institutions and upgradation of existing ones)	Planning for enhanced supply of doctors, nurses, ANMs, and paramedical staff; mandatory rural posting after MBBS and PG education; expansion of tertiary health care; use of medical colleges as resource centres for national health Programmes; strengthening/ revamping of ANM / GNM training centres and paramedical institutions; re-structuring of pre service education; developing a highly skilled and specialised nursing cadre
7.	Training and capacity building	Strengthening of State Institute of Health & Family Welfare (SIHFW)/ District Training Centres (DTCs); quality assurance; availability of centralised training log; monitoring of post training outcomes; expanding training capacity through partnerships with NGOs / institutions; up scaling of multi skilling initiatives, accreditation of training
STRENGTHENING SERVICES		
8.	Policies on drugs, procurement system and logistics management	Articulation of policy on entitlements on free drugs for out / in patients; rational prescriptions and use of drugs; timely procurement of drugs and consumables; smooth distribution to facilities from the district hospital to the sub centre; uninterrupted availability to patients; minimisation of out of pocket expenses; quality assurance; prescription audits;

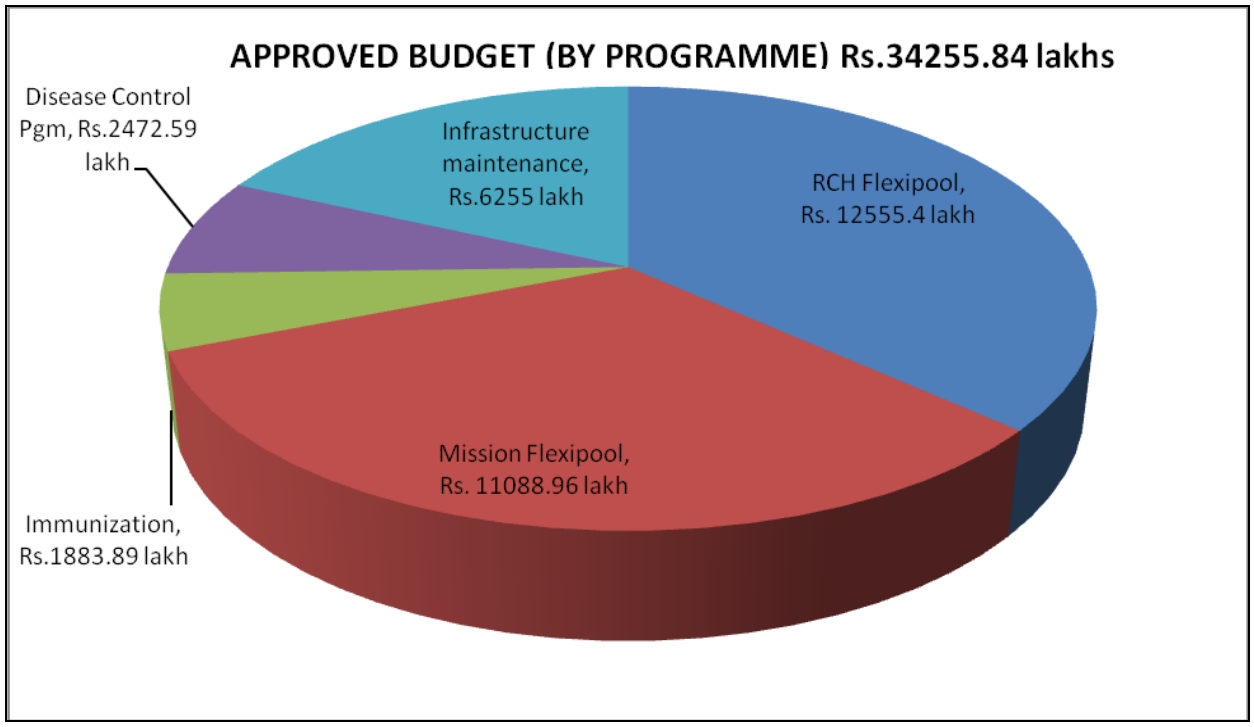
S. NO.	STRATEGIC AREAS	ISSUES THAT NEED TO BE ADDRESSED
		essential drug lists (EDL) in public domain; computerised drugs and logistics MIS system; setting up dedicated corporation eg: TNMSC
9.	Equipments	Availability of essential functional equipments in all facilities; regular needs assessment; timely indenting and procurement; identification of unused/ faulty equipment; regular maintenance and MIS/ competitive and transparent bidding processes
10.	Ambulance Services and Referral Transport	Universal availability of GPS fitted ambulances; reliable, assured free transport for pregnant women and newborn/ infants; clear policy articulation on entitlements both for mother and newborn; establishing control rooms for timely response and provision of services; drop back facility; a prudent mix of basic level ambulances and emergency response vehicles
11.	New infrastructure and Maintenance of buildings; sanitation, water, electricity, laundry, kitchen, facilities for attendants	New infrastructure, especially in backward areas; 24x7 maintenance and round the clock plumbing, electrical, carpentry services; power backup; cleanliness and sanitation; upkeep of toilets; proper disposal of bio medical waste; drinking water; water in toilets; electricity; clean linen; kitchens, facilities for attendants
12.	Diagnostics	Rational prescription of diagnostic tests; reliable and affordable availability to patients; partnerships with private service providers; prescription audits, free for pregnant women and sick neonates
COMMUNITY INVOLVEMENT		
13.	Patient's feedback and grievance redressal	Feedback from patients; expeditious grievance redressal; analysis of feedback for corrective action
14.	Community Participation	Active community participation; empowered PRIs; strong VHSNCs; social audit; effective Village Health & Nutrition Days

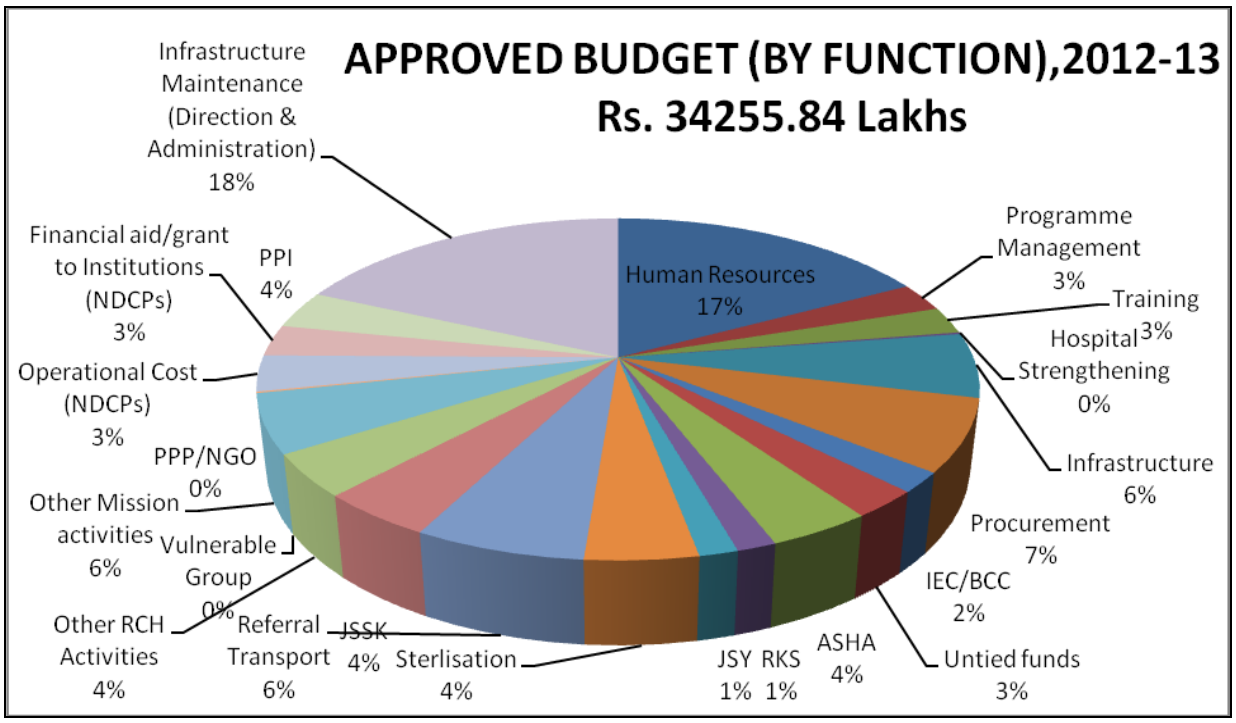
S. NO.	STRATEGIC AREAS	ISSUES THAT NEED TO BE ADDRESSED
		(VHNDs), strengthening of ASHAs, policies to encourage contributions from public/ community
15.	IEC	Comprehensive communication strategy with a strong behaviour change communication (BCC) component in the IEC strategy; dissemination in villages/ urban slums/ peri urban areas
CONVERGENCE, COORDINATION & REGULATION		
16.	Inter Sectoral convergence	Effective coordination with key departments to address health determinants viz. water, sanitation, hygiene, nutrition, infant and young child feeding, gender, education, woman empowerment, convergence with SABLA, SSA, ICDS etc.
17.	NGO/ Civil Society	Mechanisms for consultation with civil society; civil society to be part of active communitisation process; involvement of NGOs in filling service delivery gaps; active community monitoring
18.	Private Public Partnership (PPP)	Partnership with private service providers to supplement governmental efforts in underserved and vulnerable areas for deliveries, family planning services and diagnostics
19.	Regulation of services in the private sector	Implementation of Clinical Establishment Act; quality of services, e.g. safe abortion services; adherence to protocols; checking unqualified service providers; quality of vaccines and vaccinators, enforcement of PC-PNDT Act
MONITORING & SUPERVISION		
20.	Strengthening data capturing, validity / triangulation	100% registration of births and deaths under Civil Registration System (CRS); capturing of births in private institutions; data collection on key performance indicators; rationalising HMIS indicators; reliability of health data / data triangulation mechanisms

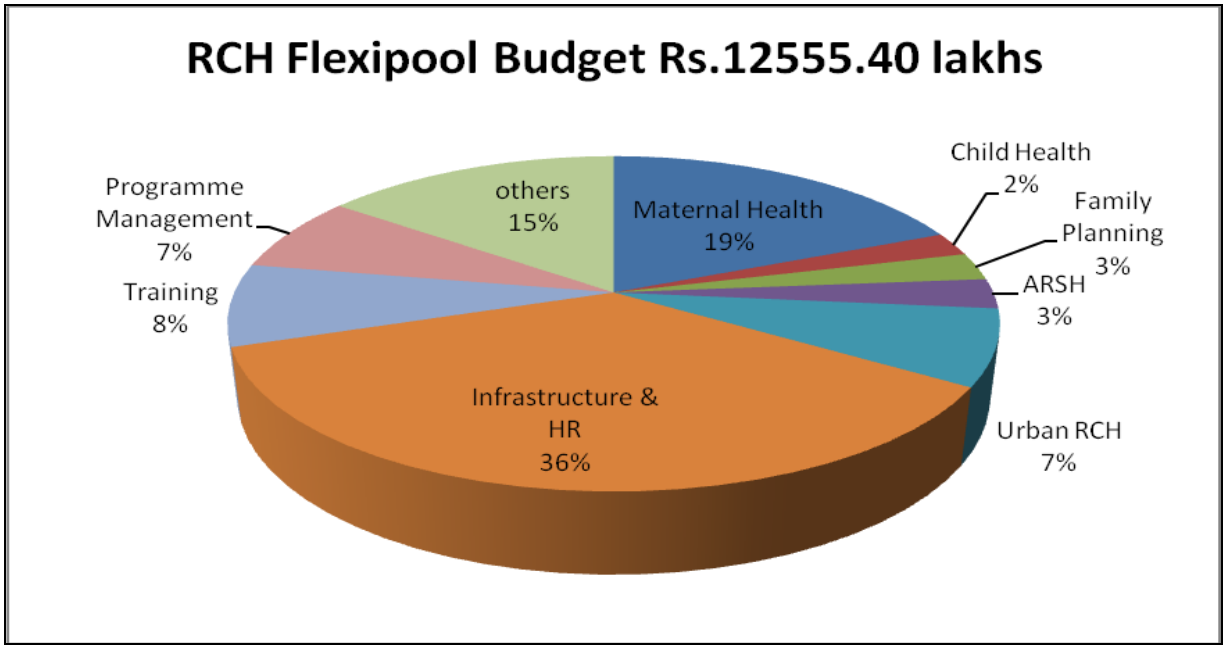
S. NO.	STRATEGIC AREAS	ISSUES THAT NEED TO BE ADDRESSED
21.	Supportive Supervision	Effective supervision of field activities/ performance; handholding; strengthening of Lady Health Visitors (LHVs), District Public Health Nurses (DPHNs), Multi Purpose Health Supervisors (MPHS) etc.
22.	Monitoring and Review	Regular meetings of State/ District Health Mission/ Society for periodic review and future road map; clear agenda and follow up action; Regular, focused reviews at different levels viz. Union Minister/ Chief Minister/ Health Minister/ Health Secretary/ Mission Director/ District Health Society headed by Collector/ Officers at Block/ PHC level; use of the HMIS/ MCTS data for reviews; concurrent evaluation
23.	Quality assurance	Quality assurance at all levels of service delivery; quality certification/ accreditation of facilities and services; institutionalized quality management systems
24.	Surveillance	Epidemiological surveillance; maternal and infant death review at facility level and verbal autopsy at community level to identify causes of death for corrective action; tracking of services to pregnant women and children under MCTS
25.	Leveraging technology	Use of GIS maps and databases for planning and monitoring; GPS for tracking ambulances and mobile health units; mobile phones for real time data entry; video conferencing for regular reviews; closed user group mobile phone facility for health staff; endless opportunities- sky is the limit!

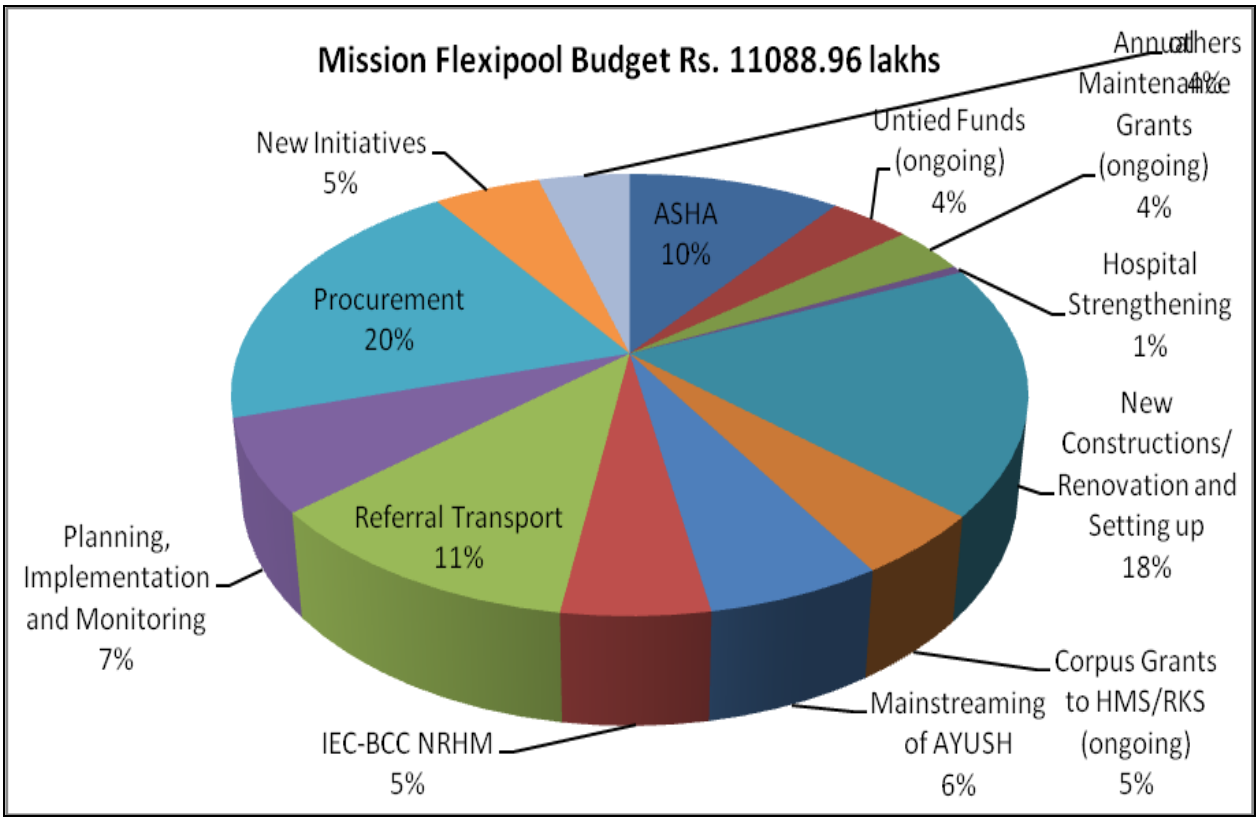
PROGRAMME WISE BUDGET

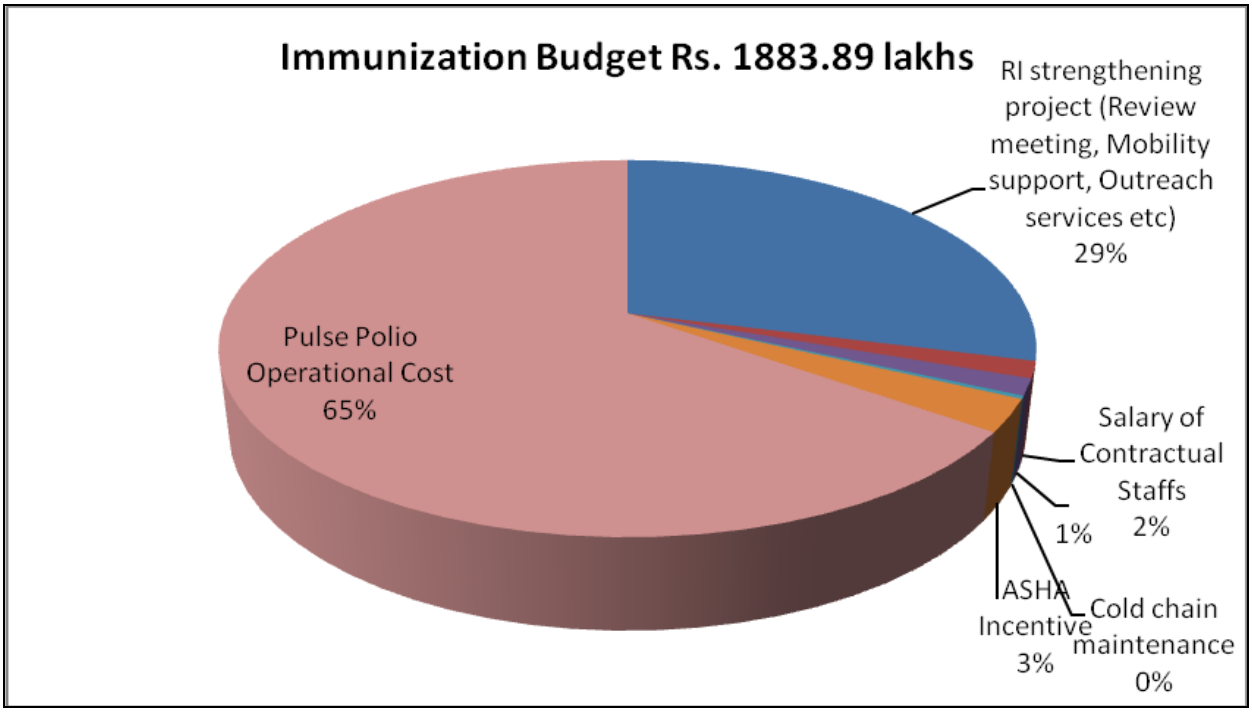
APPROVED BUDGET (By Programme and by Function)

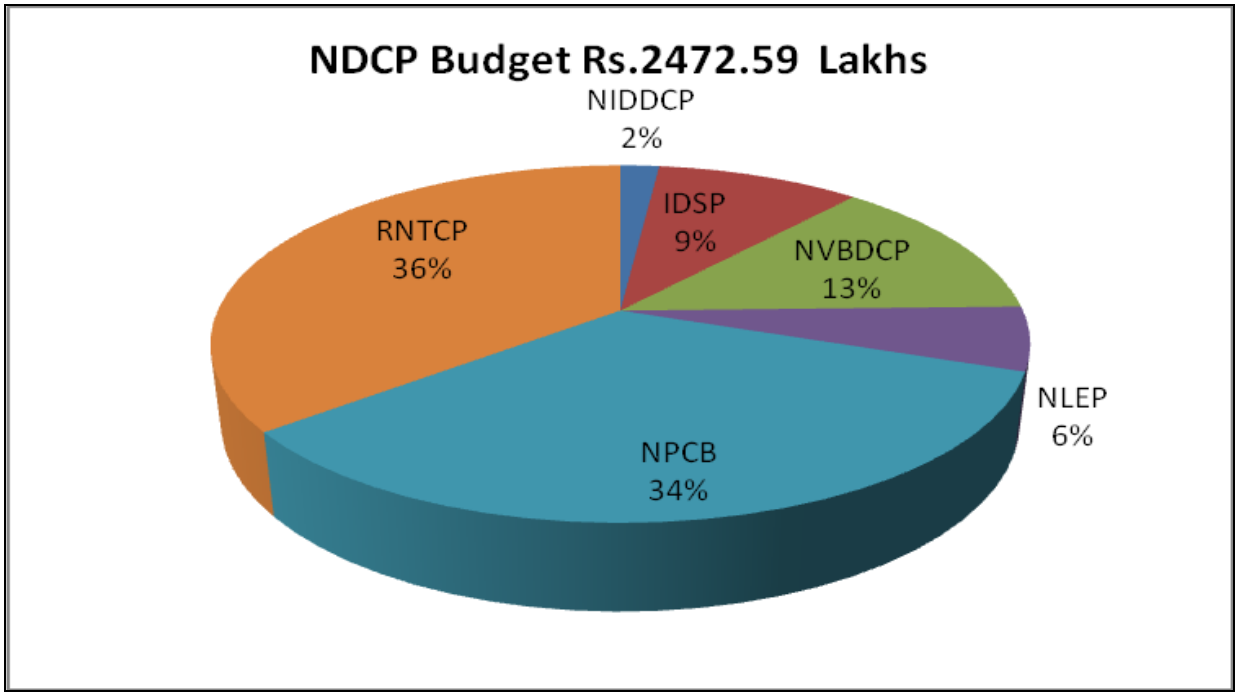





RCH Flexipool Budget Rs.12555.40 lakhs
Maternal Health 19%
Child Health 2%
Family Planning 3%
ARSH 3%
Urban RCH 7%
Infrastructure & HR 36%
Training 8%
Programme Management 7%
others 15%


Mission Flexipool Budget Rs. 11088.96 lakhs
others 4%
Maintenance Grants (ongoing) 4%
Untied Funds (ongoing) 4%
ASHA 10%
Hospital Strengthening 1%
New Constructions/ Renovation and Setting up 18%
Corpus Grants to HMS/RKS (ongoing) 5%
Mainstreaming of AYUSH 6%
IEC-BCC NRHM 5%
Planning, Implementation and Monitoring 7%
Referral Transport 11%
Procurement 20%
New Initiatives 5%


Immunization Budget Rs. 1883.89 lakhs
RI strengthening project (Review meeting, Mobility support, Outreach services etc) 29%
Pulse Polio Operational Cost 65%
Salary of Contractual Staffs 2%
1%
ASHA Incentive 3%
Cold chain maintenance 0%


NDCP Budget Rs.2472.59 Lakhs
NIDDCP 2%
IDSP 9%
NVBDCP 13%
NLEP 6%
NPCB 34%
RNTCP 36%

SUMMARY BUDGET 2012-13: HARYANA

S. No.	Budget Head	FY 2012-13 Budget (Rs lakhs)		
		Proposed	Approved	%
1. RCH				
A1	Maternal Health	2380.45	2353.66	6.87
A2	Child Health	419.41	284.79	0.83
A3	Family Planning	435.71	332.96	0.97
A4	ARSH	445.07	362.55	1.06
A5	Urban RCH	1077.81	920	2.69
A6	Tribal RCH	0	0	0.00
A7	PNDT & Sex Ratio	92.36	92.36	0.27
A8	Infrastructure & HR	4915.51	4514.66	13.18
A9	Training	1216.94	999.05	2.92
A10	Programme Management	1406.89	920.98	2.69
A11	Vulnerable groups	0	0	0.00
	Total Base Flexi Pool	**12390.15**	**10781.01**	31.47
A12	JSY	629.82	629.82	1.84
A13	Sterilisation & IUD Compensation, and NSV Camps	1073.6	1144.58	3.34
	Total Demand Side	**1703.42**	**1774.4**	5.18
	Total RCH Flexi Pool	**14093.57**	**12555.41**	36.65
2. MFP				

S. No.	Budget Head	FY 2012-13 Budget (Rs lakhs)		
		Proposed	Approved	%
B1	ASHA	1347	1145	3.34
B2	Untied Funds (ongoing)	527.1	435.4	1.27
B3	Annual Maintenance Grants (ongoing)	497.4	385.03	1.12
B4	Hospital Strengthening	100	61.28	0.18
B5	New Constructions/ Renovation and Setting up	2000	2040	5.96
B6	Corpus Grants to HMS/RKS (ongoing)	566	510.59	1.49
B7	District Action Plans (including block, village)	21	21	0.06
B8	Panchayati Raj Initiative	0	75.83	0.22
B9	Mainstreaming of AYUSH	783.41	665.02	1.94
B10	IEC-BCC NRHM	592.35	559.35	1.63
B11	Mobile Medical Units (Including recurring expenditures)	69.42	39.35	0.11
B12	Referral Transport	700	1253.96	3.66
B13	PPP/ NGOs	0	0	0.00
B14	Innovations (if any)	0	0	0.00
B15	Planning, Implementation and Monitoring	769.58	750.05	2.19
B16	Procurement	2270.54	2217.36	6.47
B17	Regional drugs	179.93	165.98	0.48

S. No.	Budget Head	FY 2012-13 Budget (Rs lakhs)		
		Proposed	Approved	%
	warehouses			
B18	New Initiatives	770.54	573.94	1.68
B19	Health Insurance Scheme	0	0	0.00
B20	Research, Studies, Analysis	64.37	38	0.11
B21	State level Health Resources Center	99.6	99.6	0.29
B22	Support Services	52.33	52.32	0.15
B23	Other Expenditures (Power Backup, Convergence etc)	0	0	0.00
	TOTAL MFP	**11410.57**	**11088.96**	32.37
3. IMMUNIZATION				
C1	RI strengthening project (Review meeting, Mobility support, Outreach services etc)	529.31	546.74	1.60
C2	Salary of Contractual Staffs	29.9	27	0.08
C3	Training under Immunisation	26.55	26.55	0.08
C4	Cold chain maintenance	5.48	4.88	0.01
C5	ASHA Incentive	52.5	52.5	0.15
	Total Immunization	**643.74**	**657.67**	1.92
C6	Pulse Polio Operational	0	1226.22	3.58

S. No.	Budget Head	FY 2012-13 Budget (Rs lakhs)		
		Proposed	Approved	%
	Cost			
	Total RI & PPO costs	**643.74**	**1883.89**	5.50
4.	**NATIONAL DISEASE CONTROL PROGRAMMES**			
4A.	National Iodine Deficiency Disorders Control Programme (NIDDCP)	31.5	45.37	0.13
4B.	Integrated Disease Surveillance Programme(IDSP)	280.51	238.44	0.70
4C.	National Vector Borne Disease Control Programme (NVBDCP)	938.29	325	0.95
4D.	National Leprosy Eradication Programme (NLEP)	170.77	142.93	0.42
4E.	National Programme for control of Blindness (NPCB)	1017.6	837.6	2.45
4F.	Revised National Tuberculosis Control Programme (RNTCP)	966.71	883.25	2.58
	Total NDCP	**3405.38**	**2472.59**	7.22
E	**Total Infrastructure Maintenance**	**6255**	**6255**	18.26
	GRAND TOTAL	**35808.26**	**34255.85**	100.00

REPRODUCTIVE AND CHILD HEALTH

MATERNAL HEALTH

MATERNAL HEALTH

GOALS AND SERVICE DELIVERY TARGETS: MATERNAL HEALTH

Indicator	Target
Maternal Mortality Ratio	(2010-12) 120 (2013-15) 94
4 ANCs	513956 in 2012-13
Institutional Deliveries (out of the total estimated deliveries) to be conducted in Public health institutions from 39% in 2010-11 to 44% in 2012-13	259526 in 2012-13
Caesarean Section rate in public health facilities from 5% in 2010-11 to 8% in 2012-13	20762 in 2012-13
Severely anaemic pregnant women out of total anaemic pregnant women (@2%)to be line listed and managed	7646 in 2012-13

DELIVERY POINTS:

Level of Facility	Target
DHs	21
CHCs and other health facilities at sub district level	17
24*7 PHCs and Non FRUs	250
SCs	All identified Sub Centres
Total	**659**

TRAINING:

Training Programme	Target
LSAS	20
EmOC	42
BEmOC	10
SBA	508 SNs, 684 LHVs and ANMs
MTP	150
RTI/STI	LTs: 271, MOs: 210, SNs/ PHNs: 329

ROAD MAP FOR PRIORITY ACTION

Commitment No. 1- Operationalizing Delivery Points

Gaps in the identified delivery points to be assessed and filled through prioritized allocation of the necessary resources in order to ensure quality of services and provision of comprehensive RMNCH services at these facilities.

The targets for different categories of facilities are:

A) All District Hospitals and other similar district level facilities(e.g District women and children hospital) to provide the following services:

- 24*7 service delivery for CS and other Emergency Obstetric Care.
- 1st and 2nd trimester abortion services.
- Conduct Facility based MDR.
- Essential newborn care and facility based care for sick newborns.
- Family planning and adolescent friendly health services
- RTI/STI services.
- Have functional BSU/BB.

B) 17 CHCs and other health facilities at sub district level (above block and below district level) functioning as FRUs to provide the same comprehensive RMNCH Services.

C) 250 PHCs and Non FRU-CHCs to provide the following services:

- 24*7 BeMOC services including conducting normal delivery and handling common obstetric complications.
- 1st trimester safe abortion services. (MVA upto 8 weeks and MMA upto 7 weeks)
- RTI/STI services.
- Essential newborn care.
- Family planning

D) All identified SC Level delivery point facilities will provide the following services :

- Delivery by SBAs.
- IUD insertion

- Essential new born care.
- ANC, PNC and Immunization.
- Nutritional and Family planning counseling.
- VHND and other outreach services on designated days.

Commitment No. 2- Implementing free entitlements under JSSK

A) JSSK entitlements to be ensured to all PW and sick newborns accessing Public health facilities.

B) At least 70% drop back to be ensured to PW delivering in the PHFs.

Commitment No. 3- Centralized Call Centre and Assured Referral

A) Every State needs to ensure availability of a centralized call centre for referral transport at State or district level as per requirements along with GPS fitted ambulances.

B) Response time for the ambulance to reach the beneficiary not to exceed 30 minutes.

Commitment No. 4- Essential Drug List

A) Every State to have an Essential Drug List (EDL) for SC, PHCs, CHCs, DHs, and Medical colleges and ensure timely procurement and supply to Sub centres, PHCs, CHCs, DHs and MCs.

B) The EDL should include drugs for maternal and child health including drugs for safe abortion services, RTI/STI.

C) Differential distribution of types and quantities of drugs to performing and non performing facilities.

Commitment No. 5- Capacity Building

A) Delivery points to be first saturated with trained HR. High focus/ remote areas to be covered first.

B) Shortfall in trained human resource at delivery points particularly sub centres and those in HFDs/ tribal/ remote areas to be addressed on priority.

C) Training load for skill based trainings to be estimated after gap analysis.

D) Certification /accreditation of the training sites is mandatory.

E) Training plan to factor in reorientation training of HR particularly for those posted at non functional facilities and being redeployed at delivery points. Orientation training of field functionaries on newer interventions e.g. MDR/ HBNC etc.

F) Performance Monitoring during training/post-deployment needs to be ensured.

G) Specific steps to strengthen SIHFW/ any other nodal institution involved in planning, implementation, monitoring and post training follow up of all skill based trainings under NRHM.

Commitment No. 6– Tracking severe anemia

A) All severely anaemic pregnant women (2% of the anaemic pregnant women) to be tracked and line listed for providing treatment of anaemia followed by micro birth planning.

Commitment No. 7– For High Focus Districts

B) The State to make use of the MCH sub plans made for these districts in the recent past and develop and operationalise the identified facilities as delivery points.

C) At least 25% of all sub centres under each PHC to be made functional as delivery points in the HFDs.

Commitment No. 8-– Demarcation /Division of population and Job clarity of both ANMs working at the Sub-centre to ensure availability of one ANM at the SC and the other for outreach activities for the geographically demarcated population/villages.

Commitment No. 9: For 12 High Focus States: Pre service Nursing Training

A) At least one state Master Nodal centre shall be created and made functional.

B) State nursing cell will be created and made functional.

Commitment No. 10: Proper implementation of JSY:

A) JSY guidelines to be strictly followed and payments made as per the eligibility criteria.

B) No delays in JSY payments to the beneficiaries and full amount of financial assistance to be given to the beneficiary before being discharged from the health facility after delivery.

C) All payments to be made through cheques and preferably into bank/ post office accounts.

D) Strict monitoring and physical (at least 5%) verification of beneficiaries to be done by state and district level health authorities to check malpractices.

E) Grievance redressal mechanisms as stipulated under JSY guidelines to be activated at the district and state levels.

F) Accuracy of JSY data reported at the HMIS portal of MOHFW to be ensured besides furnishing quarterly progress reports to the Ministry within the prescribed timeframe.

Commitment No. 11: Strengthening Mother & Child Tracking System

A) State level MCTS call centre to be set up to monitor service delivery to pregnant women and children.

B) MCTS to be made fully operational for regular and effective monitoring of service delivery including tracking and monitoring of severely anaemic women, low birth weight babies and sick neonates.

DETAILED BUDGET: MATERNAL HEALTH

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
A.1	**MATERNAL HEALTH**					
A.1.1	**Operationalise facilities (only dissemination, meetings and quality assurance)**					
A.1.1.1	Operationalise FRUs		39 FRUs in 21 districts	21.00	5.25	Approved at 25% of the proposed amount .
A.1.1.2	Operationalise 24x7 PHCs					
A.1.1.3	MTP services at health facilities	50000.00	21 districts.	10.50	2.63	Approved at 25% of the proposed amount .This amount has been proposed for monitoring and supervision of MTP services but should be utilized for comprehensive monitoring and not for stand alone Programmes
A.1.1.4	RTI/STI services at health facilities					
A.1.1.5	Operationalise Sub-centres					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
A.1.2	**Referral Transport**					
A.1.3	**Integrated outreach RCH services**					
A.1.3.1	RCH Outreach Camps/ Others					
A.1.3.2	Monthly Village Health and Nutrition Days					
A.1.4	**Janani Suraksha Yojana / JSY**					
A.1.4.1	Home Deliveries (Rural)	500.00	11077	55.38	55.39	Approved
	Home Deliveries(Urban)	500.00	4747	23.74	23.74	Approved
A.1.4.2	Institutional Deliveries(Urban)	600.00	18990	113.94	113.94	Approved
	Institutional Deliveries(Rural)	700.00	44309	310.16	310.16	Approved
A.1.4.2.c	C-sections					
A.1.4.3	Administrative expenses					
A.1.4.4	Incentive to ASHAs	200.00	63299	126.60	126.60	Approved
A.1.5	Maternal Death Review	1000.00	850	6.35	3.18	Approved as per GOI rate of Rs 750 per death .(Rs 50 for informer,Rs 300 for field verification and Rs 200X2 for incentive to relaive)

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
A.1.6	Other strategies/ activities					
1.7	***JSSK- Janani Shishu Surakhsha Karyakram***					
A.1.7.1	Drugs & Consumables (other than reflected in Procurement)					
A.1.7.1 .1	Drugs and Consumables for Normal Deliveries	350.00	255000	787.50	787.50	Approved for 225000 normal deliveries
A.1.7.1 .2	Drugs and Consumables for Caesarean Deliveries	1000.00	15000	150.00	150.00	Approved
A1.7.2	Diagnostic for 2.55 lacs mothers	200.00	255000	100.00	100.00	Approved. For the purposes of Diagnostic i.e. Hb., Urine, ABORH, VDRL, Ultrasound etc. a provision of Rs.200/- per mother for

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
						2.55 lacs mother is required. However, the expenditure on the diagnostics (reagents etc.) will be done under the drugs & consumables head. Therefore, a provision of Rs. 100.00 lacs is kept under this head for reimbursing the investigation s which are not available in the Govt. Sector at this point of time.
A.1.7.3	Blood Transfusion					
A.1.7.4	Diet (3 days for Normal Delivery and 7 days for	100.00		412.60	412.60	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
	Caesarean)					
A.1.7.5	Referral Transport for mothers(Referral for 2.55 lacs mothers 2.55 lacs beneficiaries x Rs.500 (Rs 250 for home to facility and Rs 250 for drop back)- =1275.00 lacs. (Provision of 70% budget is made)	500.00	255000	892.50	892.50	Inter facility transfers to be done by State ambulances.
	Sub-total Maternal Health (excluding JSY)			**2380.45**	**2353.66**	
	Sub-total JSY			**629.82**	**629.82**	
A.9.3	**Maternal Health Training**					
A.9.3.1	Skilled Birth Attendance / SBA training (SBA + IMEP for SNs)			188.92	188.92	Approved.508 SNs (1 batch - 4 SNs) Total batches-127
	SBA + IMEP for ANMs & LHVs					Approved. 684 ANMs/ LHVs(1 batch - 4 SNs) Total batches-171 batches

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
	TOT for SBA					
	Training of Medical Officers in Management of Common Obstetric Complications (BEmOC)					
	Training of Staff Nurses in SBA (DH)					
	Training of ANMs / LHVs in SBA (DH)					
	Training of ANMs / LHVs in SBA (FRU)					
A.9.3.2	Comprehensive EmOC training (including c-section)					
	Setting up of EmOC Training Centres PGIMS & GMCH-Sec 32			22.2	22.2	Approved
	TOT for Mos	Rs 7.0 lacs / batch	Rs 7.0 lacs / batch	7	7	Approved
	Training of Mos	11.09 lacs / batch	11.09 lacs / batch	66.56	66.56	Approved.6 batches of 8 MOs each
	Evaluation of MOs trained in EmOC	0.92 lac / batch	0.92 lac / batch	1.86	1.86	Approved. 2 Batches (60)
A.9.3.3	Life saving Anaesthesia skills training					
	Training of MOs in LSAS	Rs 6.67 lacs per batch		33.36	33.36	Approved for 5 batches of 4 trainees each
	Evaluation of	0.92 lac /		1.85	1.85	Approved for

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
	MOs in LSAS	batch				2 Batches (60)
A.9.3.4	Safe abortion services training (including MVA/ EVA and Medical abortion)					
	TOT on safe abortion services for MO & SN					
	ToT of Medical Officers in safe abortion					
	Training of Medical Officers in safe abortion					
A.9.3.5	RTI / STI training					
	TOT for RTI/STI training					
	Training of laboratory technicians in RTI/STI	11633/ batch	11633/ batch	3.49	3.49	Approved .271 LTs (1 batch-30 Trainees)
	Training of Medical Officers in RTI/STI	Rs 0.68 lacs per batch	Rs 0.68 lacs per batch	4.79	4.79	Approved.1 Batch =30; Total load=210
	Training of Staff Nurses in RTI/STI	Rs 0.38 lacs per batch	Rs 0.38 lacs per batch	4.27	4.27	Approved.1 Batch =30; Total load=329
	Training of ANMs / LHVs in RTI/STI					
A.9.3.6	BEmOC training					
A.9.3.7	Other MH training (ISD refresher)					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
	Other maternal health training (SBA 1 day orientation)					
	Diploma Course for MO - 2years					
	Advance training course for ANMs					
	MH trainings sub total			**334.3**	**334.3**	
	ASHA					
B1.1.3	**Performance Incentive/Other Incentive to ASHAs**					
	Incentive to ASHA under Maternal Health					
	Registration of p.w. and facilitation ANC -1. For SC women @100 and other women @50	100-SC 50-others	40000 SC 160000-others			Approved for payment of incentives to ASHAs @ Rs.150 for Registration & facilitation of full ANC of SC/BPL p.w. and @ Rs. 75 for other pregnant women
	Facilitating p.w. ANC II	50 for SC 25 for others	40000 SC 160000-others			
	Facilitating p.w. ANC III	50 for SC 25 for others	40000 SC 160000-others			
	Facilitating p.w.	400-SC	40000 SC			Not

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
	for Institutional deliveries.	women 200 other	160000-others			approved. Rs. 126.6 lakhs for ASHA incentives for facilitating institutional deliveries have already been approved under JSY in RCH Flexipool.
	Identification & referral of sick /danger sign p.w. /mothers other than HBPNC cases	50	20000			Approved
	Mobilization of Women for Medical Termination of Pregnancies (MPTs) (ongoing at Rs.100/-)	100	18750			Approved @ Rs.100 per case.ASHA should be provided the incentive only after provision of safe abortion service to the women.
	Mobilization of Women for IUD Insertion (ongoing at Rs.100-)	100	2500			Not Approved
	Reporting from Community about Abortion >12 Weeks of	100	2500			Not approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
	Pregnancy (New activity)					
	Sub Total ASHA incentives under MH			350	350	ASHA incentives under maternal health- Amount of Rs.350 lakh is Approved against lump sum proposal of Rs. 350 lakh. The incentives which are not approved/Not approved have been indicated specifically under sub heads
B10	**IEC-BCC NRHM**					
B.10.2.1	**BCC/IEC activities for MH**			**0**	**0**	**Covered under integrated BCC**
B16.1.1	Procurement of equipment: MH			10	10	Approved subject to the equipments purchased are placed on priority at the delivery points and as per the gap analysis of

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13	Approved Budget 12-13	Remarks
						the facilities. For MVA equipments @ Rs. 5000 x 200 Centres. Names of the centres to be provided.
B.16.2.1	Drugs & supplies for MH			0	0	Booked under JSSK
	Total MH Component			**3704.57**	**3677.79**	

CHILD HEALTH & IMMUNIZATION

CHILD HEALTH & IMMUNIZATION

TREND IN CHILD MORTALITY: HARYANA

Indicator	SRS 2008	SRS 2009	SRS 2010	Remarks
ENMR	24	23	25	
NMR	34	35	33	Unsteady
IMR	54	51	48	Declining
U5MR	65	60	55	Declining

PHYSICAL TARGETS *(No. of districts: 21)*

A	OUTCOME INDICATORS					
			Current Status (SRS 2010)	**SRS 2013**	**SRS 2014**	**SRS 2015**
1	**Early Neonatal Mortality**		**25**	**22**	**21**	**20**
2	**NMR**		**33**	**27**	**25**	**23**
3	**IMR**		**48**	**36**	**32**	**28**
4	**U5MR**		**55**	**40**	**36**	**32**
			Current Status	**Target for 2012-13**	**2013-14**	**2014-15**
B	**KEY PERFORMANCE INDICATORS (CUMULATIVE)**					
1	Establishment & operationalisation of SNCUs		7	21	*in process	
2	Establishment & operationalisation of NBSU		66*	66		
3	NBCC at delivery points		242	392		
4	Establishment of NRCs		0	1		
5	Personnel trained in IMNCI (ANM+LHV)	No.	4546	4710		
		%	97%	100%		
6	Personnel trained in F-IMNCI (MO+SN)	No.	1498	3170		
		%	35%	75%		

7	Personnel trained in NSSK (MO+ANM+SN)	No.	5852	7541		
		%	65%	84%		
8	ASHA trained in Module 6&7	No.	11971	13319		
		%	90%	100%		
C	**KEY PERFORMANCE INDICATORS (NON CUMULATIVE)**					
1	Newborns visited by ASHA (as per HBNC guidelines)	No.	0	354600	500650	589000
		%	0	60%	85%	100%
2	Newborns breastfed with one hour of birth (CES 2009)	No.	301410	502350	559550	589000
		%	51.00%	85%	95%	100%
3	LBW children (state HMIS)	No.	123105	70920	53010	11780
		%	21%	12%	9%	2%
D	**KEY PERFORMANCE INDICATORS- IMMUNIZATION (NON CUMULATIVE)**					
1	Fully immunized children by age of 12-23 months (CES 2009)	No.	423747	561450	559550	583110
		%	71.70%	90%	95%	99%
2	DPT-3 coverage for 12-23 months (CES 2009)	No.	443250	561450	583110	589000
		%	75.00%	95%	99%	100%
3	DPT 1st booster in children aged 18-23months (CES 2009)	No.	164889	413700	500650	559550
		%	27.90%	70%	85%	95%
4	Sessions held (HMIS)	No.	105573	As per state requirement for reaching full immunization targets		
		%	94%			

Note: The targets are calculated for achieving MDG by 2015 and have been aligned with funds recommended for approval in FY 2012-13

A. ***Priority Actions to be carried out by state for Child Health Interventions***

1. All the delivery points should have a functional Newborn Care Corner consisting of essential equipment and staff trained in NSSK. The staff must be trained in a 2 days NSSK training package for skills development in providing Essential Newborn Care.

2. Special Newborn care Units (SNCU) for care of the sick newborn should be established in all Medical Colleges and District Hospitals. All resources meant for establishment of SNCUs should be aligned in terms of equipment, manpower, drugs etc. to make SNCUs fully operational.

3. SNCUs are referral centres with provision of care to sick new born the entire district and relevant information must be given to all peripheral health facilities including ANM and ASHA for optimum utilisation of the facility. Referral and admission of outborn sick neonates should be encouraged and monitored along with inborn admissions.

4. NBSUs being set up at FRUs should be utilised for stabilization of sick newborns referred from peripheral units. Dedicated staff posted to NBSU must be adequately trained and should have the skills to provide care to sick newborns.

5. All ASHA workers are to be trained in Module 6 & 7 (IMNCI Plus) for implementing Home Based Newborn Care Scheme. The ASHA kit and incentives for home visits should be made available on a regular basis to ASHAs who have completed the Round 1 of training in Module 6

6. All ANMs are to be trained in IMNCI.
All Medical Officers and Staff Nurses, positioned in FRUs/DH and 24x7 PHCs should be prioritised for F-IMNCI training so that they can provide care to sick children with diarrhoea, pneumonia and malnutrition.

7. Infant and Under fives Death Review must be initiated for deaths occurring both at community and facility level.

8. In order to promote early and exclusive breastfeeding, the counselling of all pregnant and expectant mothers should be ensured at all delivery points and breastfeeding initiated soon after birth. At least two health care providers should be trained in 'Lactation Management' at District Hospitals and FRUs; other MCH staff should be provided 2 days training in IYCF and growth monitoring.

9. Nutrition Rehabilitation Centres are to be established in District Hospitals (and/or FRUs), prioritising tribal and high focus districts with high prevalence of child malnutrition. The optimum utilisation of NRCs must be ensured through identification and referral of Severe Acute Malnutrition cases in the community through convergence with Anganwadi workers under ICDS scheme.

10. Line listing of newly detected cases of SAM and Low birth weight babies must be maintained by the ANM and their follow-up must be ensured through ASHA.

11. In order to reduce the prevalence of anaemia among children, all children between the ages of 6 months to 5 years must receive Iron and Folic Acid tablets/ syrup (as appropriate) as a preventive measure for 100 days in a year. Accordingly appropriate formulation and logistics must be ensured and proper implementation and monitoring should be emphasised through tracking of stocks using HMIS.

12. Use of Zinc should be actively promoted along with use of ORS in cases of diarrhoea in children. Availability of ORS and Zinc should be ensured at all sub-centres and with ASHAs.

13. Data from SNCU, NBSU and NRC utilisation and child health trainings (progress against committed training load) must be transmitted on a regular basis to the Child Health Division.

B. Priority Actions to be carried out by state for Immunisation

1. The year 2012 has been declared as the '**Year of Intensification'** of Routine Immunisation. Therefore, state must prepare a detailed district plan for *Intensification of Routine Immunization* with special focus on districts with low coverage.

2. The birth dose of immunisation should be ensured for all newborns delivered in the institutions, before discharge.

3. A dedicated State Immunisation Officer should be in place. District Immunisation Officer should be in place in all the districts. The placement of ANMs at all session sites must be ensured.

4. Due list of beneficiaries must be available with ANM and ASHA and village wise list of beneficiaries should be available with ASHA after each session.

5. The immunisation session must be carried out on a daily basis in District Hospitals and FRUs/ 24x7 PHCs with considerable case load in the OPD.

6. Cold chain mechanics must be placed in every district with a definite travel plan so as to ensure that at least 3 facilities are visited every month as a preventive maintenance of cold chain equipment.

7. The paramedic person instead of a clerical staff should be identified as the Cold Chain Handler in all cold chain points and their training must be ensured along with one more person as a backup.

8. It has been observed that the coverage of DPT 1st booster and Measles 2nd dose to be given at the age of 18 months is less than 50% across the country. Therefore coverage of DPT 1st booster and measles 2nd dose must be emphasised and monitored.

9. District AEFI Committees must be in place and investigation report of every serious AEFI case must be submitted within 15 days of occurrence.

10. Rapid response team should be in place in priority districts of the states to identify pockets of low immunization coverage and to respond to any threat of polio.

11. Special micro plans are to be developed for inaccessible, remote areas and urban slums. The micro plans developed under polio Programme must be utilised and special focus should be given to the migrant population

DETAILED BUDGET: CHILD HEALTH & IMMUNIZATION

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.2	**CHILD HEALTH**					
A.2.1	IMNCI					
2.1.1	Prepare detailed operational plan for IMNCI across districts (Monitoring & supervision of IMNCI activities will be done by DIO, DTO Pediatrician, MO PHC/ CHC and LHV at district level.	Rs.50,000/- per district for 21 districts+ Rs.50000/- for State level)		11.00	11.00	Approved
2.1.2	Implementation of IMNCI activities in districts					
2.1.3	Monitor progress against plan; follow up with training, procurement, etc **(Meeting of State level Committee twice in a year)**	25000.00	2	0.50	0.50	Approved
	Half Yearly meeting of District level Committee (2 meetings per district for 21 district)	5000 / meeting	2/ district	2.10	2.10	Approved
2.1.4	Pre-service IMNCI activities in medical colleges, nursing colleges, and ANMTCs (Printing of 6000 IMNCI and IMNCI supervisory booklets)	100/booklet (IMNCI) 100/booklet(Supervisory booklet)	5000 1000	6.00	6.00	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.2.2	***Facility Based Newborn Care/FBNC (SNCU, NBSU, NBCC)***					
2.2.1	Prepare detailed operational plan for FBNC across districts (including training, BCC/IEC, drugs and supplies, etc.; cost of plan meeting should be kept).					
	Coordination workshops on newborn care and immunization (Arranging of workshop and honorarium for faculty from NNF, PGI, AIIMS, IMA, IAP and AIPGMER etc.) @ Rs. 50000/- per workshop for 2 workshops	50000.00	2	1.00	1.00	Approved
	Monitor progress against plan; follow up with training, procurement, etc					
	Consumables for computer and stationery for SNCUs @ Rs. 1.00/- lac for 21 districts + Rs.1.00 lacs for Printing SNCU case sheets			22.00		Not Approved
	Mother & newborn care4 kit @ 400 per kit x 1 kits x 25,000 deliveries.			100.00	100.00	Approved.On the condition that mother stays for 48 hrs atleast.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Funds for mobile charges @Rs. 500/- pm for 2 mobiles i.e. 500x2x12			0.12	0.00	Not Approved
A.2.3	**Home Based Newborn Care/HBNC**					
	Printing of PNC Card and referral cards Rs.3/- per card x 150000 cards	3.00	150000	4.50	4.50	Approved
A.2.4	**Infant and Young Child Feeding/IYCF**					
2.4.1	Prepare and disseminate guidelines for IYCF.					
	Printing of 150000 booklets @ Rs. 2/- per booklet (IYCF)	2.00	150000	3.00	3.00	Approved
	Printing of IYCF guidelines 2010 Booklets	5.00	5000	0.25	0.25	Approved
2.4.2	Prepare detailed operational plan for IYCF across districts (including training, BCC/IEC, drugs and supplies, etc.; cost of plan meeting should be kept). One day orientation workshop of Medical Officers on IYCF guidelines 2010 & IMS act guidelines @ 1 in each district	10000.00	21	2.10	2.10	Approved
2.4.3	Monitor progress against plan; follow up with training, procurement, etc.					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
2.5	***Care of Sick Children and Severe Malnutrition at facilities (Prevention and management of anemia and malnutrition)***					
2.5.1.	Prepare and disseminate guidelines.					
2.5.2	Prepare detailed operational plan for care of sick children and severe malnutrition at FRUs, across districts (cost of plan meeting should be kept).					
	Establishment of 1 NRC			10.26	10.26	Approved
A.2.7	Other strategies/ activities					
	Quarterly review meetings of 30 participants from the district level officers, which includes TA/ DA contingency @ Rs. 1250/- per participant for 30 participants	1250.00	30	1.50	1.50	Approved
	Quarterly review & feedback meeting exclusive for Child health at district level with one block MO, ICDS, CDPO and other stake holder @Rs. 100/- per participants per meeting expenses	100.00	20	1.68	1.68	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	(lunch, organizational expenses) for 20 participants i.e. 20*100*4*21					
A.2.8	Infant Death Audit			28.40	28.40	Approved
A.2.9	Incentive to ASHA under Child Health					
A.2.10	**JSSK (for Sick neonates up to 30 days)**					
A.2.10.1	Drugs & Consumables (other than reflected in Procurement)	200.00	50000	100.00	50.00	Approved for 25000 sick newborns expected in the State.(10% of live births)
A.2.10.2	Diagnostics					
A.2.10.3	Referral Transport for sick newborns(Referral for 50000 sick newborns (Rs.500/- x 50000 Sick Newborns = Rs.250.00 Lacs) (Provision of 50% budget is made)	500.00	50000	125.00	62.50	Approved for 50% of total budget. Numbers revised at 25000 sick newborns (500*25000)/ 2
	Sub-total Child Health			**419.41**	**284.79**	
A.9.5	**Child Health Training**					
9.5.1	IMNCI Training					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
9.5.1.1	TOT IMNCI and FIMNCI (Pre and in service)			34.24	34.24	Approved
9.5.1.2	IMNCI Training for ANMs / LHVs					
9.5.1.3	IMNCI Training for Anganwadi Workers					
A.9.5.2	F-IMNCI training					
9.5.2.1	TOT on F-IMNCI					
9.5.2.2	F-IMNCI Training for Medical Officers					
9.5.2.3	F-IMNCI Training for Staff Nurses					
	Printing of training material					
A.9.5.3	Home Based Newborn Care training					
9.5.3.1	TOT on HBNC					
9.5.3.2	Training on HBNC for ASHA					
A.9.5.4	Care of Sick Children and severe malnutrition training					
9.5.4.1	TOT on Care of sick children and severe malnutrition					
9.5.4.2	Training on Care of sick children and severe malnutrition for Medical Officers					
A.9.5.5	Other CH training (Facility based New Born Care)			91.24	91.24	Approved
9.5.5.1	NSSK Training			78.87	78.87	Approved
9.5.5.1.1	TOT for NSSK					
9.5.5.1.2	NSSK Training for Medical Officers					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
9.5.5.1.3	NSSK Training for SNs					
9.5.5.1.4	NSSK Training for ANMs					
	Printing of Manuals & Procurement of Mannequins for NSSK Training					
9.5.5.2	Other Child Health training					
	Two batches of Training of NALS & PALS @Rs. 6000/- per participants for 36 participants i.e. 36 x 6000 x 2			4.32	0.00	Not approved
	Training of all SNCU staff @ Rs. 4.0 lac per training of 24 participants with technical support from NNF, PGIMER, Chandigarh, Rohtak & Safdarjung Hospital-New Delhi i.e. 4.0 lac x 10 batches			40.00	40.00	Approved
	Following up 15 days observer ship & Hands on training of all doctors & staff nurses of 21 districts at PGI, Rohtak & Chandigarh & Safdarjung Hospital, New Delhi for 294 participants @ 2 doctors & 8 SNs per SNCU * 15 days x Rs.~ 1000 per day x 21			44.10	44.10	Approved
	Training of 1 MO & 2			12.00	12.00	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	staff nurses of 66 SUs @ Rs. 4.0 lac per training, per batch for 3 bathces. 4.0 lac x 3 batches					
	Training of 21 SNCU data entry operators on SNCU software & follow-up @ Rs. 30000 for 1 batch			0.30	0.30	Approved
	Sub total CH trainings			**305.07**	**300.75**	
	Incentive under Child Health including IBSY					
	Visits for HBPNC Strategy for Birth Preparedness & PNC of Mother and Newborn (Total 07 Home Visits: from 8th month of pregnancy to 42nd day of Delivery)	250 for 7 home visits	120000			Approved
	Identification and Referral of Seriously Sick Children (42 Days to 5 Years) as per IMNCI Norms	100	6125			Approved
	Neo-natal/ Infant Death Registration	100				Budgeted under RCH flexipool
	Community Based Neo-natal/ Infant Death Audit	100				Budgetd under RCH flexipool

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Complete Immunization Children of High Risk Population (0- 1 Year)(ongoing at Rs.100/-)	200	30000			Approved and projected in Part C Immunization .This is an approoved activity by GoI across the States.
	Age-appropriate Vaccination of Children under Primary Immunization (New Activity)	Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 1½ Month	122500			Not approved
		Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 3½ Month	122500			Not approved
		Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 9-12 Month	12250			Not approved
	Incentive for ASHAs for Daily visit to schools for administering iron and folic tablets to anemic children	25	1125000 (approx) Anemic Children (0-18 Years in			Approved under IBSY @ rate of Rs.25

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
			rural areas) budget is propose d for 50% of these cases i.e 562500 to be covered by ASHA x Rs. 25 as an incentive for ASHA			
	Incentive to ASHA for mobilization of disabled children from the community to the special disability camps/DH	25	38000 (1% disability rate of the total 3800000 children) disabled children (physical & mental)			Approved under IBSY @ rate of Rs.25
	Sub Total ASHA incentives under CH			**300**	**300**	**ASHA incentives under Child Health- Amount of Rs. 300 lakh is approved against a lump sum proposal of Rs. 300 lakh.**

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						The incentives which are not approved/Not approved have been indicated specifically under sub heads
B.10.2.2	BCC/IEC activities for CH			**0**	**0**	under comprehensive IEC plan
B16.1.2	Procurement of equipment: CH			**176.72**	**176.72**	Approved for Equipments for New born care.
B.16.2.2	Drugs & supplies for CH			**134**	**134**	Approved. IFA & albendazole for 0-5 year.
	Total CH			**1335.2**	**1196.26**	
C	**IMMUNIZATION BUDGET**					
C.1	**RI Strengthening Project (Review meeting, Mobility Support, Outreach services etc**					
c.1.a	Mobility Support for supervision for district level officers.	Rs.50000/ Year /district level officers.		2.52	2.52	
c.1.b	Mobility support for supervision at state level	Rs. 100000 per year.		1	1	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
c.1.c	Printing and dissemination of Immunization cards, tally sheets, monitoring forms etc.	Rs. 5 beneficiaries		62.34	62.34	
c.1.d	Support for Quarterly State level review meetings of district officer			1.5	1.5	
c.1.e	Quarterly review meetings exclusive for RI at district level with one Block Mos, CDPO, and other stake holders			1.68	1.68	
c.1.f	Quarterly review meetings exclusive for RI at block level			0	0	
c.1.g	Focus on slum & underserved areas in urban areas/alternative vaccinator for slums			72.11	72.11	
c.1.h	Mobilization of children through ASHA or other mobilizers	Rs. 150 per session		220.27	220.27	
c.1.i	Alternative vaccine delivery in hard to reach areas	Rs. 100 per session		17.17	17.17	
c.1.j	Alternative Vaccine Delivery in other areas	Rs. 50 per session		63.12	63.12	
c.1.k	To develop microplan at sub-centre level	@ Rs 100/- per subcentre		2.63	2.63	
c.1.l	For consolidation of microplans at block	Rs. 1000 per block/		3.03	3.03	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	level	PHC and Rs. 2000 per district				
c.1.m	POL for vaccine delivery from State to district and from district to PHC/CHCs	Rs100,000/ district/yea r		12.5	12.5	
c.1.n	Consumables for computer including provision for internet access for RIMs	@ 400/ - month/ district		0	0	
c.1.o	Red/Black plastic bags etc.	Rs. 2/bags/sess ion		3.15	3.15	
c.1.p	Hub Cutter/Bleach/Hypoch lorite solution/ Twin bucket	Rs. 900 per PHC/CHC per year		6.64	4.01	
c.1.q	Safety Pits			12.12	12.12	
c.1.r	State specific requirement			47.54	20.54	
c.1.s	Teeka Express Operational Cost			0	47.07	
C.1-Sub Total				**529.31**	**546.74**	
C.2	**Salary of Contractual Staffs -Sub Total**					
c.2.a	Computer Assistants support for State level	Rs.12000-15000 per person per month		2.18	1.8	
c.2.b	Computer Assistants support for District level	8000-10000 per person per month		27.72	25.2	
C.2-				**29.9**	**27**	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
Sub Total						
C.3	Training under Immunization					
c.3.a	District level Orientation training including Hep B, Measles & JE(wherever required) for 2 days ANM, Multi Purpose Health Worker (Male), LHV, Health Assistant (Male/Female), Nurse Mid Wives, BEEs & other staff (as per RCH norms)			15.75	15.75	
c.3.b	Three day training including Hep B, Measles & JE(wherever required) of Medical Officers of RI using revised MO training module)			5.25	5.25	
c.3.c	One day refresher training of district Computer assistants on RIMS/HIMS and immunization formats			0.3	0.3	
c.3.d	One day cold chain handlers training for block level cold chain handlers by State and district cold chain officers			5.25	5.25	
c.3.e	One day training of block level data handlers by DIOs and District cold chain			0	0	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	officer					
C.3-Sub Total				**26.55**	**26.55**	
C.4	**Cold chain maintenance**	Rs.500/PHC /CHCs per year District Rs.10000/year		**5.48**	**4.88**	
C.5	**ASHA incentive for full Immunization**			**52.5**	**52.5**	
	Total under Routine Immunization			**643.73**	**657.67**	
C.6	**Pulse Polio Operational Cost (Tentative)**			**0**	**1,226.22**	
	Grand Total Immunization			**643.73**	**1,883.89**	
	Grand Total Child Health			**1978.93**	**3080.15**	

The projected amount is less than the recommended amount because of the following reasons:

1. Provisioning of Operational Cost of Teeka Express of Rs 47.07 lakhs
2. The state has not projected the operational cost of Pulse Polio Operational Funds which according to the revised estimates is Rs 1226.22 lakhs

State Specific Requirement Activities

- VPD & AEFI Surveillance
- Monitoring by external monitors
- Hiring of vehicle in far flung & underserved area

- Supportive Supervision in 2 poor performing districts of Southern Haryana (Faridabad & Mewat)
- Data Quality Audit in 2 districts

FAMILY PLANNING

5 YEARS PROJECTION OF KEY INDICATORS

SN.	Indicator	Current Status	Target/ ELA				
			2012-13	2013-14	2014-15	2015-16	2016-17
1	**Goal Indicators:**						
1.1	Total Fertility Rate (TFR)	2.3 (SRS 2010)	2.1	2.0	Maintain TFR level		
1.2	Contraceptive Prevalence Rate (CPR)	54.5 (DLHS-3)	60.0	62.5	65.0	67.5	70.0
1.3	Unmet Need	16.0 (DLHS-3)	13.0	12.0	11.0	10.0	9.0
2	**Service delivery:**						
2.1	IUCD - Total	179369 (HMIS: 2010-11)	264000	290000	315000	340000	350000
2.2	Post-partum IUCD (subset of IUCD-total)		10000	20000	25000	30000	35000
2.3	Female Sterilisation	73970 (HMIS: 2010-11)	90000	100000	100000	100000	100000
2.4	Post-partum sterilisation (subset of tubectomy)	4281 (HMIS: 2010-11)	9000	10000	15000	20000	25000
2.5	Male sterilisation	6233 (HMIS:	20000	20000	20000	20000	20000

SN.	Indicator	Current Status	Target/ ELA				
			2012-13	2013-14	2014-15	2015-16	2016-17
		2010-11)					
3	**Input/ facility operationalization:**						
3.1	Fixed Day service delivery:						
3.1.1	IUCD (daily at DH, SDH, CHC)	**Daily** - 22 DH, 29 SDH & 50 CHCs. **Twice/ week** - 330 PHC & 1300 SHC	Weekly @ PHC + CHC	Weekly @ PHC + CHC	Weekly @ PHC + CHC	Weekly @ PHC + CHC	All SHC
3.1.2	Sterilisation	DH-21 SDH-25 CHCs-93 PHCs-140	All DH	DH + 1 SDH/ FRU per dist	DH + all FRU per dist	DH + all FRU + 25% PHC per dist	DH + all FRU + 50% PHC per dist
3.2	Appointment of FP counsellors	43 FP Counsellors	All DH	DH + 1 SDH/ FRU per dist	DH + all FRU per dist	DH + all FRU per dist	DH + all FRU per dist

CONDITIONALITIES FOR FAMILY PLANNING

SN.	Indicator	Target / ELA-2012-13	Minimum Level of Achievement		Remarks
			By Sep. 2012	By March 2013	
1	**Goal (target):**				
1.1	Reduction in TFR – 2013	2.3	NA	NA	Current Status 2.3 (SRS-2010)
2	**Service delivery (ELA):**				
2.1	*IUCD:*				
2.1.1	Post-partum IUCD	10000	4000	9000	
2.1.2	Interval IUCD	254000	101600	228600	
2.2	*Sterilisation:*				
2.2.1	Tubectomy	90000	27000	72000	
2.2.2	Post-partum sterilisation (subset of tubectomy)	9000	2700	7200	
2.2.3	Vasectomy	20000	6000	16000	
3	**Training of personnel (target):**				
3.1	*Post-partum IUCD*				
3.1.1	MO	320	80	240	
3.1.2	SN/ ANM	630	158	473	
3.2	*interval IUCD*				
3.2.1	MO	460	115	345	166 trained (2011-12)
3.2.2	SN				
3.2.3	ANM/ LHV	870	218	653	909 trained (2011-12)
3.3	Minilap	150	38	113	Trained MOs-301
3.4	NSV	104	26	78	Trained MOs-264
3.5	Laparoscopic	30	8	23	Trained MOs- 93
4	**Others (target):**				
4.1	Appointment of FP Counsellors	100% DH	100% DH	NA	43 FP Counsellors
4.3	Regular reporting of the scheme	Regular	Monthly	Quarterly	1 District in

SN.	Indicator	Target / ELA-2012-13	Minimum Level of Achievement		Remarks
			By Sep. 2012	By March 2013	
	of "home delivery of contraceptives by ASHAs"	reporting	reporting till Sep 12	reporting after Sep 12	the Pilot Project.
4.4	Fixed Day Services for IUCD	Daily - 22 DH, 29 SDH & 50 CHCs. Twice/ week - 330 PHC & 1300 SHC	NA	100%	
4.5	Fixed Day Services for Sterilisation	DH-21 SDH-25 CHCs-93 PHCs-140	NA	100%	

ROAD MAP FOR PRIORITY ACTION :FAMILY PLANNING PROGRAMME

MISSION: "The mission of the national Family Planning Programme is that all women and men (in reproductive age group) in India will have knowledge of and access to comprehensive range of family planning services, therefore enabling families to plan and space their children to improve the health of women and children".

GUIDING PRINCIPLES: Target-free approach based on unmet needs for contraception; equal emphasis on spacing and limiting methods; promoting 'children by choice' in the context of reproductive health.

STRATEGIES:

1. Strengthening spacing methods:
    a. Increasing number of providers trained in IUCD 380A
    b. Strengthening Fixed Day IUCD services at facilities. Increased focus on IUCD services at subcentres for at least 2 fixed days a week.
    c. Introduction of Cu IUCD 375
    d. Delivering contraceptives at homes of beneficiaries (in pilot states/ districts)
2. Emphasis on post-partum family planning services:
    a. Strengthening Post-Partum IUCD (PPIUCD) services at least at DH level
    b. Promoting Post-partum sterilisation (PPS)
    c. Establishing Post-Partum Centers at women & child hospitals at district levels
    d. Appointing counsellors at high case load facilities
3. Strengthening sterilization service delivery
    a. Increasing pool of trained service providers (minilap, lap & NSV)
    b. Operationalising FDS centers for sterilisation
    c. Holding camps to clear back log
4. Strengthening quality of service delivery:
    a. Strengthening QACs for monitoring
    b. Disseminating/ following existing protocols/ guidelines/ manuals
    c. Monitoring of FP Insurance
5. Development of BCC/ IEC tools highlighting benefits of Family Planning specially on spacing methods
6. Focus on using private sector capacity for service delivery (exploring PPP availability):
7. Strengthening Programme management structures:
    a. Establishing new structures for monitoring and supporting the Programme
    b. Strengthening Programme management support to state and district levels

KEY PERFORMANCE INDICATORS:

a. % IUD inserted against ELA
b. % PPIUCD inserted against total IUCD
c. % PPIUCD inserted against institutional deliveries
d. % of sterilisations conducted against ELA
e. % post-partum sterilisation against total female sterilisations
f. % of male sterilisation out of total sterilisations conducted
g. % facilities delivering FDS services against planned
h. % of personnel trained against planned
i. % point decline in unmet need
j. point decline in TFR
k. % utilisation of funds against approved

DETAILED BUDGET: FAMILY PLANNING

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.3	**FAMILY PLANNING**					
A.3.1	**Terminal/ Limiting Methods**					
A.3.1.1	Dissemination of manuals on sterilisation standards & QA of sterilisation services(Periodic: QAC meetings)	4 state QAC, 48 DQAC and 280 Quality circles meetings	332 QAC meetings	2.48	2.48	Approved
3.1.1.1	*Prepare operational plan for provision of sterilisation services at facilities (fixed day) as well as camps , review meetings* - **(Review meetings on Family Planning performance and initiatives at the state and district level(A**	Rs. 25,000/- at State HQ & Rs.6 000/- at Distt. Level (One @ Rs.3.00 lacs) State - 12 meetings District - 252 meeting GoI - 1 workshops	265	24.12	21.12	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	3.1.1 a))					
	Monitoring and supervisory visits to districts facilities	DHS (FW) & DD (FW) - 48 visits CS - 504 visists DyCS - 1092 visits	DHS& DD Rs 6000 CS-Rs 500 DyCS-Rs 500	10.86	8.46	State level approval @ Rs. 1000/ visit(against proposed Rs 6000) and remaining approved as proposed by the state.
	Orientation workshop on technical manuals of FP viz. sterilization standards & QA, FDS, SOP for camps, Insurance etc.	State -1 District- 21	State Rs 1 lakh District Rs 50000	11.50	11.50	Approved
3.1.1.2	*Implementation of sterilisation services by districts(including fixed day services and PP sterilization)*					
A.3.1.	Female	10000.00	1365	100.00	95.55	Proposed

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
2	Sterilization camps (Budget limited to Rs.100 lacs for time being)					rate has been revised to Rs. 7000/ camp. Accordingly approved.
A.3.1.3	NSV camps	20000.00	630	100.00	94.50	Proposed rate has been revised to Rs. 15000/ camp. Accordingly approved
A.3.1.4	Compensation for female sterilisation	APL-Rs. 650/- per case BPL-Rs.1000/- per cash	57634 32266	620.80	697.28	Budget (APL Rs 374.62 and BPL Rs 322.66 lakhs) has been reworked as per GoI norm and accordingly approved
A.3.1.5	Compensation for male sterilisation	1500.00	20000	300.00	300.00	Approved
A.3.1.6	Accreditation of private providers for sterilisation services	50000.00	21	10.50	5.25	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.3.2.3	Accreditation of private providers/NGOs for IUCD/PPIUCD services	1000/ PAHF	1500	15.00	0.00	Not Approved. Display boards/ wallwritting s/ performa/ flip charts/repo rting/ orientations /review meetings
A.3.2	**Spacing Methods**					
A.3.2.1	IUD camps					
3.2.2	*Implementation of IUD services by districts (including fixed day services at SHC and PHC)- Plan for providing FDS (Fixed Day Static) IUD services at health facilities in districts (at least 2 days in a week at SHC and PHC level)*	200000.00	21	42.00	21.00	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
3.2.2.1	Provide IUD services at health facilities / compensation	20.00	264000 IUCD Insertions	52.80	52.80	Approved
3.2.2.2	PPIUCD services					
A.3.2.4	Social Marketing of contraceptives					
	Social marketing of contraceptives including delivery of contraceptives at door step	3 lakh / district ,2 lakh / HQ	6	20.00	5.00	Approved
A.3.2.5	Contraceptive Update seminars					
A.3.3	POL for Family Planning/ Others					
A.3.4	Repairs of Laparoscopes	50000.00	21	10.50	10.50	Approved
A.3.5.	Other strategies/ activities					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
3.5.1	*Monitor progress, quality and utilisation of services (both terminal and spacing methods) including complications / deaths / failure cases. Note: cost of insurance / failure and death compensation NOT to be booked here*					
3.5.2	*Performance reward if any*			10.00	10.00	Best performance in delivery of services in all components of FP will be rewarded & all stake holders will be identified in Govt. as well PAHF awards /reward will

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						be Given by State Celebrities. Approved
	World Population Day' celebration (such as mobility, IEC activities etc.): funds earmarked for district and block level activities	State - Rs. 5.00 lakhs District - Rs. 5.00 lakhs Block - Rs. 10000	21 districts + 111 CHC/ block + State		121.10	Proposed by State in consultation with GOI.
	Mobile Surgical Teams 3 per District to provide F.P services	Rs 100000/ district	21	21.00	21.00	Approved
	Procurements					
	Procurement of laproscope	500000.00	40			Shifted to MFP
	NSV Kits	1000.00	2500			
	IUCD insertion Kits	2000.00	1300			
	Kelly's Forceps	425.00	1000			
	Minilap Set	2500.00	100			
	Sub-total			**377.96**	**332.96**	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Family Planning (excluding compensation)					
	Sub-total Sterilisation and IUD compensation & NSV camps			**973.60**	**1050.08**	
	Sub Total FP			**1351.56**	**1477.54**	
A.9.6	**Family Planning Training**					
	Laparoscopic Sterilisation training					
	TOT on laparoscopic sterilisation					
A.9.6.1	Laparoscopic sterilisation training for doctors (teams of doctor, SN and OT assistant)	30710	30(10 batches)	3.08	3.08	Approved
9.6.1.1						
9.6.1.2						
A.9.6.2	Minilap training for medical	41520	150(50 batches)	20.76	20.76	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	officers					
9.6.2.1						
9.6.2.2						
A.9.6.3	NSV training	20400	104(26 batches)	5.30	5.30	Approved
A.9.6.4	TOT on Minilap					
	Training of Medical officers in IUD insertion	52265	460(46 batches)	24.04	24.04	Approved
	Training of staff nurses in IUD insertion					
	Training of ANMs / LHVs in IUD insertion	39640	870(87 batches)	34.49	34.49	Approved
A.9.6.5	Contraceptive Update training at State	171625	100 (2 batches)	3.43	3.43	Approved
	Contraceptive Update training at District	27940	420 (21 batches)	5.87	5.87	Approved
A.9.6.6	Other FP Training					
	TOT in PP IUD	61055	10(1 batch)	0.61	0.61	Approved
	Training of MOs in PP	52525	320 (64 batches)	33.62	33.62	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	IUD+ BEmOC					
	Training of staff nurses in Counselling of PP IUD	32940	630 (21 batches)	6.92	0.00	State was recommended to hire counsellors at high delivery load facilities, which has not been proposed by the state. This is not approved.
	IUCD training supported by HLFPPT				127.87	Approved in consultation by the State.
	Sub Total Trainings under FP			**138.11**	**259.07**	
B.10.2.3	**BCC/IEC activities for FP**			**50**	**65**	**Approved. Rs. 15 lakhs approved for printing of IUCD cards @ Rs. 5/ card for 3.00 lakhs cards**
B16.1.3	**Procurement of equipment: FP**					
	NSV Kit	2500 kits	1000	25	25	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	IUD insertion Kit	1300 kits	2000	26	26	Approved
	Minilap sets	100 sets	2500	2.5	2.5	Approved
	Kelly's Forceps	1000	425	4.25	4.25	Approved
	Laparoscopes	40 laparoscopes	500000	100	100	Approved
	G. Total under FP component			**1697.43**	**1959.36**	

ADOLESCENT HEALTH

ROAD MAP FOR PRIORITY ACTION: ADOLESCENT HEALTH

SETTING UP OF AH CELL

A unit for adolescent health at state level with a nodal officer supported by four consultants one each for ARSH, SHP, Menstrual hygiene and WIFS; one nodal officer (rank of ACMHO) for all the components of Adolescent Health at district level to take care of Adolescent health programme including the SHP.

PROGRAMME SPECIFIC ESSENTIAL STEPS FOR IMPLEMENTATION:

I. Adolescent Reproductive Sexual Health (ARSH) Programme

- **Clinics**
  - Number of functional clinics at the DH, CHC, PHC and Medical Colleges(dedicated days, fixed time, trained manpower).
  - Number of clinics integrated with ICTCs
  - Quarterly Reporting from the ARSH clinics to be initiated to GoI.
  - Establish a Supportive supervision and Monitoring mechanism
- **Outreach**
  - Utilisation of the VHND platform for improving the clinic attendance.
  - Demand generation in convergence with SABLA and also through Teen Clubs of MOYAS
- **Capacity Building/Training:**
  - Calculation of the training load and development of training plans/ refresher trainings.
  - Deployment of trained manpower at the functional clinics.

II. School Health Programme:

- GoI Guidelines including terms of reference of stakeholders adapted by States and operational plan in place..
- School health committee with diverse stakeholders beyond the health department; this committee with representation of academia will be responsible for implementation and monitoring of the programme.
- Involvement of nodal teachers from schools in the programme (Screening and communication - preventive and promotive) is to be ensured.
- Height / weight measurement and BMI calculation should be part of School Health Card.
- All children in government and government aided schools should be covered.
- The programme should focus on three Ds- Deficiency, Disease and Disability.
- Referral of children must be tied up and complete treatment at higher facilities to be ensured.
- An effort should be made to have dedicated teams for school health. The teams should also conduct health check- ups for children below 6 years at AWCs.

III. Menstrual Hygiene Scheme (MHS):

- Formation of State and district level steering committees.
- Training / re-orientation of service providers(MOs, ANMs, ASHAs)
- Monthly meeting with BMO.
- Regular feedback on quality of sanitary napkins to be sent to GoI
- Identification of appropriate storage place for sanitary napkins.
- Mechanism of distribution of SN right upto the user level.
- Reporting and accounting system in place at various levels.
- Utilizing MCTS for service delivery by checking with ASHAs and ANMs about supply chain management of IFA tabs and Sanitary napkins.
- Distribution of Sanitary Napkins to school going adolescent girls to be encouraged in schools and preferably combined with Weekly Iron Folic Acid Supplementation (WIFS).

IV. Weekly Iron and Folic Acid Supplementation programme (WIFS):

- Procurement policy in place for procurement of EDL including IFA and deworming tablets.
- Establish "Monday" as a fixed day for WIFS.
- Plan for training and capacity building of field level functionaries of concerned Departments(i.e. Department of Women and Child Development and and Department .of Education) and plan for sensitization of Programme Planners on WIFS.
- Ensure that monitoring mechanism as outlined in the operational framework (Shared with the States during the National Adolescent Health Workshop) are put in place across levels and departments.

DETAILED BUDGET: ADOLESCENT HEALTH

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.4	**ADOLESCENT REPRODUCTIVE AND SEXUAL HEALTH / ARSH**					
A.4.1	Adolescent services at health facilities					
4.1.1	Disseminate ARSH guidelines.					
4.1.2	Establishment of new clinics at DH level	50000.00	21	10.50	10.50	Approved
4.1.3	Establishment of new clinics at CHC/PHC level					
4.1.3.1	Operating expenses for existing clinics(Contingency)	5000.00	21	1.50	1.50	Approved
4.1.3.2	Salary to new Counselors in District Hospitals					
4.1.3.3	Honorarium for existing Counselors at Clinics at AHs & CHCs	12500.00	21	26.25	26.25	Approved
4.1.4.	Outreach activities including peer educators					
	Honorarium for ICTCs/FICT for outreach activities	250.00	105	3.15	3.15	Approved
	Honorarium for Peer Educators	100.00	12000	116.00	116.00	Approved
	Youth Festivals/Mela	50000.00	21	10.50	10.50	Approved
	Monitoring cost for state level officers – visit to districts					
	Monitoring cost at district level					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Evaluation of ARSH Programme					
	Printing of formats for Nodal Teachers			10.00	10.00	Approved
	Convergence - Quarterly Joint Review meetings at state level			2.40	2.40	Approved
A.4.2	**School Health Programme**					
4.2.1	Prepare and disseminate guidelines for School Health Programme.					
	Development of guideline/training module/SOPs for School health Programme involving expert agency	603843		6.04	6.04	Approved .
	Printing of 50000 School Health manuals	24	50000	12.00	12.00	Approved Document needs to be developed in local language. Should include separate sections as per the need to early, mid and late adolescent students in classes 6-12th.
	Printing of 600 School Health SOPs for each	80	600	0.48	0.48	Approved .

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	PHCs/CHCs/DH/Directorate officers					
4.2.2	Prepare detailed operational plan for School Health Programme across districts (cost of plan meeting should be kept)					
	37576 visits to schools by School Health Officers in 427 PHCs/CHCs/DHs x 8 visits per month x 11 months	150	37576	56.36	56.36	Approved
	IBSY Children fund. Initial Contribution of Rs.1 Crore (50% state, 50% Center)			50.00	50.00	Approved State to give unit cost, unit of measure, disease pattern from data as reflected in the writeup for FY 2011-2012. Linkage with RSBY or state insurance is not proposed as well.
		38000 disability	15	5.70	5.70	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
		certification				
		38000 disability data entry	2	0.76	0.76	Approved
4.2.3	Implementation of School Health Programme by districts.					
4.2.4	Monitor progress and quality of services.					
	50000 School Health registers to be printed			12.50	12.50	Approved Structure of school health registers to be revised as persuggestion mentioned in Tour report of consultant school health Programme. The registers also needs to include BMI for age and Anemia level follow up at individual student

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						level.
	3840537 school health data to be computerised			38.41	38.41	Approved
4.3	*Other strategies/activities (please specify) Details of the Menstrual Hygiene project to be provided and budgeted under this head*					
4.3.1	Menstrual Hygiene					
4.3.2	Weekly Iron Folic Acid Supplementation (WIFS) Scheme					
	Sub-total ARSH			**362.55**	**362.55**	
9.7.3	**ARSH Training**					
9.7.4	TOT for ARSH training	1	11		14.00	Approved as per consolidated ARSH budget
9.7.5	Orientation training of state and district Programme managers					
	ARSH training for medical officers	95535	7		6.69	Approved as per consolidated ARSH budget
	ARSH training for	41910	4		2.00	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	ANMs/LHVs					as per consolidated ARSH budget
	ARSH training for AWWs					
A.9.8	ARSH training for Other activities(paramedics)	41910	7		3.00	Approved as per consolidated ARSH budget
A.9.8.1	Menstrual Hygiene					
	State TOT on Weekly Iron Folic Acid Supplementation (WIFS) Scheme	98628	2		1.97	Approved as per consolidated ARSH budget
A.9.8.2	District TOT Weekly Iron Folic Acid Supplementation (WIFS) Scheme	41565	9		3.74	Approved as per consolidated ARSH budget
	Sub total ARSH Training			**0**	**31.4**	
B.10.2.4	**BCC/IEC activities for ARSH**			**10**	**10**	**Approved**
	Drugs for ARSH			83	83	Approved. For IFA @ Rs.0.16 and albendazole @ Rs.1.19..All the procurement of drugs and supplies for ARSH to be

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						met from this head only and not from any other head.
	Total under ARSH			**373.03**	**486.95**	

ANNEX A

DETAILED BUDGET: SCHOOL HEALTH

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.4.2	**School Health Programme**					
4.2.1	Prepare and disseminate guidelines for School Health Programme.					
	Development of guideline/training module/SOPs for School health Programme involving expert agency	603843		6.04	6.04	Approved .
	Printing of 50000 School Health manuals	24	50000	12.00	12.00	Approved Document needs to be developed in local language. Should include separate sections as per the need to early, mid and late adolescent students in classes 6-12th.
	Printing of 600 School Health SOPs for each PHCs/CHCs/DH/Directorate officers	80	600	0.48	0.48	Approved .

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
4.2.2	Prepare detailed operational plan for School Health Programme across districts (cost of plan meeting should be kept)					
	37576 visits to schools by School Health Officers in 427 PHCs/CHCs/DHs x 8 visits per month x 11 months	150	37576	56.36	56.36	Approved
	IBSY Children fund. Initial Contribution of Rs.1 Crore (50% state, 50% Center)			50.00	50.00	Approved State to give unit cost, unit of measure, disease pattern from data as reflected in the writeup for FY 2011- 2012. Linkage with RSBY or state insurance is not proposed as well.
		38000 disability certification	15	5.70	5.70	Approved
		38000 disability data entry	2	0.76	0.76	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
4.2.3	Implementation of School Health Programme by districts.					
4.2.4	Monitor progress and quality of services.					
	50000 School Health registers to be printed			12.50	12.50	Approved Structure of school health registers to be revised as persuggestion mentioned in Tour report of consultant school health Programme. The registers also needs to include BMI for age and Anemia level follow up at individual student level.
	3840537 school health data to be computerised			38.41	38.41	Approved
4.3	***Other strategies/activities (please specify) Details of the Menstrual Hygiene project to be provided and budgeted under this head***					
4.3.1	Menstrual Hygiene					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
4.3.2	Weekly Iron Folic Acid Supplementation (WIFS) Scheme					
A.9.8.2	District TOT Weekly Iron Folic Acid Supplementation (WIFS) Scheme	41565	9		3.74	Approved as per consolidated ARSH budget
	Sub Total SHP			**182.25**	**185.99**	
	School Health Programme trainings					
	21 district level training of master trainers	50000	21		11.50	Approved as per consolidated School health budget
	1 state level training of master trainers	2,50,000	1		2.50	Approved as per consolidated School health budget
	14752 schools x 2 teachers per school = 29504 teachers to be trained for one day training at block level	100	29504			Funding from SSA
	State level training for State master trainers	2,71,000	1		2.71	Approved as per consolidated School health budget
	Sub Total trainings			**0**	**16.71**	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Drugs & supplies for School Health and IBSY					**Approved. IFA and Albendazole**
	Prophylactic Iron and folic acid tablets to each and every child	0.16	97174 children (age group 6-9) x 52 weeks x 1 tablet/week x cost of 1 tablet @ Rs .16/ tablet with 10% wastage	103	77.52	Approved
	De-Worming tablets (Albendazole)	1.19	97174 children to be de-wormed x 1 campaign per year x 2 tablets per campaign x Rs1.19/- per tablet		21.35	Approved
	Sub Total Procurements SHP			**103**	**98.87**	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Total SHP			**285.25**	**301.57**	

URBAN RCH

ROAD MAP FOR PRIORITY ACTION: URBAN RCH

- Carry out a comprehensive third party evaluation of UHCs/ NGO performance. State to apprise MoHFW of action taken on the basis of the findings of the evaluation by September 2012.
- Monitor performance of UHCs/NGOs against targets.
- Staffing at UHCs to be linked to case load.

BUDGET: URBAN RCH

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.5	**URBAN RCH**					
5.1	***Urban RCH Services*** **(Budget for 2 Urban FRUs in Faridabad)**		2	106.98		Staffing pattern and salary to remain same as last year. Senior MO,2 Mos,dental surgeon,2 pharmacists,radiographer,nursing staff and other support staff in each FRU.
5.1.1	Identification of urban areas / mapping of urban slums					
5.1.2.	Prepare operational plan for urban RCH					
5.1.3	Implementation of Urban RCH plan/ activities					
5.1.3.1	Recruitment and training of					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	link workers for urban slums					
5.1.3.2	Strengthening of urban health posts and urban health centres					
5.1.3.3	Provide RCH services (please specify)					
5.1.4	Monitor progress, quality and utilisation of services.					
5.1.5	***Other Urban RCH strategies/activities (please specify)***					
	Budget for 88 existing Centres including 11 (24x7) Delivery Centres		88	970.83		Activity approved for Rent and staff salary at same rates . No new sub activity and manpower approved.
	Sub-total Urban Health			**1077.81**	**920.00**	

PC-PNDT

ROAD MAP FOR PRIORITY ACTION: PNDT

MISSION:

The mission of PNDT Programme is to improve the sex ratio at birth by regulating the pre-conception and prenatal diagnostic techniques misused for sex selection.

Guiding Principle:

Deterrence for unethical practice sex selection to ensure improvement in the child sex ratio

STRATEGIES:

- **Strengthening Programme management structures**:
    - Appointment of Nodal officer
    - Strengthening of Human resource
    - Formation of PNDT Cell at state and district level

- **Establishment of statutory bodies under the PC&PNDT Act**
    - Constitution of 20 member State Supervisory Board
        - Reconstitution every three years (other than ex-officio members)
        - Four meetings in a year
    - Notification of three members Sate Appropriate Authority,
    - Constitution of 8 member State Advisory Committee
        - Reconstitution in every 3 years
        - At least 6 meetings in a year
    - Notification of District Appropriate Authorities
    - Constitution of 8 member district Advisory Committees
        - Reconstitution in every 3 years
        - At least 6 meetings in a year
- **Strengthening of monitoring mechanisms**
    - Monitoring of sex ratio at birth through civil registration of birth data
    - Formulation of Inspection and Monitoring committees
    - Increasing the monitoring visits
    - Review and evaluation of registration records
    - Online availability of PNDT registration records
    - Online filling and medical audit of form Fs
    - Ensure regular reporting of sales of ultrasound machines from manufactures
    - Enumeration of all Ultrasound machines and identification of un-registered ultrasound machine
    - Ensure compliance for maintenance of records mandatory under the Act

- Ensure regular quarterly progress reports at state and district level

- **Capacity building and sensitisation of Programme managers**
  - Appropriate Authorities
  - Advisory committee members
  - Nodal officers both State and District
- **Sensitisation and Alliance building with**
  - Judiciary
  - Medical Council / associations
  - Civil society

- **Development of BCC/ IEC/ IPC Campaigns highlighting provisions of PC& PNDT Act and promotion of Girl Child**

- **Convergence for Monitoring of Child sex Ratio at birth**

KEY PERFORMANCE INDICATORS:

- Improvement in child sex ratio at birth
- % of civil registration of births
- Statutory bodies in place
- % registrations renewed
- Increase in inspections and action taken
- No. of unregistered machines identified
- % of court cases filed
- % of convictions secured
- No. of medical licences of the convicted doctor cancelled or suspended

DETAILED BUDGET: PNDT

FMR	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.7	**PNDT & Sex Ratio**					
A.7.1.	Support to PNDT Cell			36.96	36.96	Support to PNDT Cell {Human Resource-State-(Data Entry Operator ,Law Officer, Account Assistant, Computer Assistant, Peon) Human Resource-District(Data Entry Operators in Districts, Law Assistant)},
7.1.1	Operationalise PNDT Cell			15.70	15.70	Logistic support-computers, camera, other infrastructure and maintenance costs included.
	Capacity Building			3.20	3.20	Training/ Workshop of District Nodal Officers, Judiciary, State Advisory Committee ,Doctors, Sonologists (Pvt. & Govt.), District Attorney, District Advisory Committee

7.1.2	Orientation of Programme managers and service providers on PC & PNDT Act					
A.7.2	Other PNDT activities			36.50	36.50	Informer and Best Village scheme and Quarterly Review Meetings .
	Sub-total PNDT & Sex Ratio			**92.36**	**92.36**	
	IEC					
B.10.4	**Creating awareness on declining sex ratio issue**			**11.7**	**11.7**	**Approved. Incentive for Informers Rs.10.5 Lakh Annual Status Report -Rs.1.2 lakh**
	Total			**104.06**	**104.06**	

HUMAN RESOURCES AND PROGRAMME MANAGEMENT

ROAD MAP FOR PRIORITY ACTION: HUMAN RESOURCES

- HR policy (including tenure) approved and implemented; uploaded on the website.
- A comprehensive HR policy to be formulated and implemented; to be uploaded on the website too.
- Underserved facilities particularly in high focus districts/ areas, to be first strengthened through contractual staff engaged under NRHM. Similarly high case load facilities to be supplemented as per need
- All appointments under NRHM to be contractual; contracts to be renewed not routinely but based on structured performance appraisal
- Decentralized recruitment of all HR engaged under NRHM by delegating recruitment process to the District Health Society under the chairpersonship of the District Collector/ Rogi kalyan Samitis.
- Preference to be given to local candidates to ensure presence of service providers in the community. Residence at place of posting to be ensured.
- Quality of HR ensured through appropriate qualifications and a merit based transparent recruitment process.
- Vacant regular posts to be filled on a priority basis: at least 75% by March 2013.
- It has been observed that contractual HR engaged under NRHM i.e. Specialists, Doctors (both MBBS and AYUSH), Staff Nurses and ANM are not posted to the desired extent in inaccessible/hard to reach areas thereby defeating the very purpose of the Mission to take services to the remotest parts of the country, particularly the un-served and under-served areas. It must therefore be ensured that the remotest Sub-Centres and PHCs are staffed first. Contractual HR must not be deployed in better served areas until the remotest areas are adequately staffed. No Sub-Centre in remote/difficult to reach areas should remain without any ANM. No PHC in these areas should be without a doctor. Further,CHCs in remote areas must get contractual HR ahead of District Hospitals. Compliance with these conditionalities will be closely monitored and salaries for contractual HR dis-allowed in case of a violation.
- Special financial incentives for difficult areas have been approved in view of the proposal made by the State. However, it is felt that these special financial incentives need to be further graded keeping in view the distance of the place of posting from the District HQs and other relevant factors such as accessibility, time taken to reach a particular facility on account of geographical terrain, road connectivity etc. The issue should be examined on priority and a suitable proposal in this regard formulated and sent to MoHFW for consideration. In the interim, incentives as approved may be implemented.

- Details of facility wise deployment of all HR engaged under NRHM to be displayed on the state NRHM web site.
- For SHCs with 2 ANMs, population to be covered to be divided between them. Further, one ANM to be available at the sub-centre throughout the day while the other ANM undertakes field visits; timings for ANM's availability in the SHC to be notified.
- AYUSH doctors to be more effectively utilised eg for supportive supervision, school health and WIFS.
- All contractual staff to have job descriptions with reporting relationships and quantifiable indicators of performance.
- Performance appraisal and hence increments of contractual staff to be linked to progress against indicators.
- Staff productivity to be monitored. Continuation of additional staff recruited under NRHM for 24/7 PHCs/FRUs/SDH, etc , who do not meet performance benchmarks to be reviewed by State on a priority basis.
- All performance based payments/ difficult area incentives should be under the supervision of RKS/ Community Organizations (PRI).

DETAILED BUDGET: HUMAN RESOURCES

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.8.1	**Contractual Staff & Services**					
A.8.1.1	ANMs, supervisory nurses, LHVs	9800	2630 ANM	2500.00	2811.99	Approved at existing salary (Rs 8910)
A.8.1.2	Laboratory Technicians	10164	21	25.61	23.28	Approved at existing salary (Rs 9240)
A.8.1.3	Specialists (Anaesthetists, Paediatricians, Ob/Gyn, Surgeons, Physicians, Dental Surgeons, Radiologist, Sonologist, Pathologist, Specialist for CHC)	4 lacs per district		84.00	84.00	Approved .
A.8.1.4	PHNs at CHC/ PHC level					
A.8.1.4.1	PHNs/Staff Nurse at CHC/ FRU level(39 FRUs)	11374	156	212.92	193.56	Approved at existing salary (Rs. 10340)
A.8.1.4.2	PHNs/Staff Nurse at PHC level (3 PHN/SN for 282 Delivery points 24X7)	11374	846	1154.69	636.53	Approval given for SN at 171 delivery points with 3 SN each . Total 513 SN at existing salary (Rs. 10340)
A.8.1.5	Medical Officers at PHCs and CHCs	Rs 40000 pm /MO	21	75.60	51.98	Approved for 21 Mos @ Rs 27500 pm .

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
		for 9 months.				State to fill up 17 vacancies existing in Mewat on a priority basis.
A.8.1.6	Additional Allowances/ Incentives to M.O.s of PHCs and CHCs					
A.8.1.7	Others - Computer Assistants/ BCC Co-ordinator etc					
	FBNC					
	Provision of 1 Paediatrician for SNCUs in General Hospitals of 21 districts for 6 months.	60000 p.m.	21 paediatricians	560.63	542.76	Salary of 63 MOs at SNCU revised. Approved at Rs 35000/month. Rest all approved as proposed
	Provision of 8 Staff Nurses for SNCUs in 21districts i.e. Rs.10340/- pm x 8 Staff Nurses x 21 dist x 12 months	10340 p.m.	168 Staff Nurses			
	Appointment of 2 additional Staff Nurses for SNCUs in 21 districts i.e. 10340 pm x 2 nurses x 21 dist x 6 months	10340 p.m.	42 SNs			
	Provision of 3 MOs for SNCUs in General Hospitals of 21 districts for 6 months	40000 pm	63 Mos			
	SNCU attendant as	5500 pm				

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Support Staff for 21 SNCUs at district level @ 5500/- pm i.e.5500 x 4 x 12 x 21(DC rate)		84 Attendants			
	1 Data Entry Operator @ Rs. 8800/- pm for 12 months X 21 districts	8800 pm	21 Data entry operators			
	1 Lab Technician to District Hospital lab for providing services to SNCU @ 9240 per month = 1X 21X 6 X9240	9240pm	21 Lab Technicians			
	1 Counselor for each SNCU @ 8000 per month for 6 months = 1X21X 6 X8000	8000 pm	21 counselors			

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Appointment of 1 Paediatrician for SNCUs at 1 SDH i.e. 1 Paed. @ Rs.60,000/- pm x 3monthsx 1	60000	1 Paediatrician	15.23	14.78	Salary of 3 MOs at SDH-SNCU revised. Approved at Rs 35000/month. Rest all approved as proposed
	Appointment of 10 staff Nurses for SNCUs at 1 SDH i.e. 10340 pm x 10 nurses x 1 SDH x 3 months	10340	10 SN			
	Appointment of 3 MOs for SNCUs at 1 SDH i.e. 40000 x3month x3x1	40000	3 Mos			
	SNCU attendant as Support Staff for 1 SNCUs at SDH level @ 5500/- pm i.e.5500 x 4 x 1 x 3months (DC rate)	5500	4 Attendants			
	1 Data Entry Operator @ Rs. 8800/- pm for 3 months X 3 SDH	8800	3 Data Entry Operators			
	Manifold operator 4 per SNCU with centralized Manifold @ 8800/- pm for 3 months for 5 districts = 4X8,800X3 X5	8800	20 Manifold Operators			

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	IYCF					
	Under IYCF Salary of Yashoda supervisors @ Rs. 9000/- pm for 8 months in 15 districts	9000.00	15	10.80	0.00	Approval pended. State to share the details of the activity.
	Funds for Yashodas scheme for 65000 deliveries @ Rs.120/- per delivery (IYCF). (Rs.100/- per delivery for Yashoda and Rs.20/- as operational cost	120.00	65000	78.00	0.00	Approval pended. State to share the details of the activity.
	ARSH					
	State ARSH Coordinator	0.30	1	3.6	3.60	Approved
	WIFS Coordinator	0.30	1	3.6	3.60	Approved
	Computer Assistant	0.11	1	1.32	0	Not Approved
	Supervisor(WIFS)	0.10	1	18.9	0	Not Approved
	Family Planning					
	Setting up of Programme management structure for management monitoring of Programme at State level	One Computer Programmer @ Rs. 20000 X 9 Month One senior stenographer @ Rs.15,000 X 9 months for DHS (FW)	4	4.95	1.80	Only 2 computer assistants are approved @ Rs 1000 pm for 9 months.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
		Two Computer Assistants @ Rs. 10000 X 9 month for DHS (FW) and DD (FW)				
	Setting up of Programme management structure for management monitoring of Programme at District levels.	One Computer Assistants @ Rs. 10000 X 6 month for Dy. C.S. (FW) X 21 Distt.	21	12.60	0.00	Not approved. District has enough staff in DPMUs
	Counsellors at 43 FRUs				33.54	Proposed as per guidelines by GOI and approved-43 counselors @ Rs 13000/month .(Fixed salary around Rs. 10000/ month and remaining as performance based incentive.)
	School Health Programme					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	1 State level disability coordinator for 12 months	33000.00	1		3.96	Approved as per consolidated School health budget
	1 School Health Programme Consultant (jr.) for 12 months	35000.00	1		4.20	Approved as per consolidated School health budget
	21 district level School health cum Disability coordinator cum ARSH Coordinator cum WIFS coordinator for 9 months	10000.00	21		18.90	Approved as per consolidated School health budget
	one General Assistant with computer knowledge for 12 months	11000.00	1		1.32	Approved as per consolidated School health budget
A.8.1.8	Incentive/ Awards etc. to SN, ANMs etc.					
A.8.2.1	**Jachcha Bachcha Scheme**					
A.8.2.2	**Incentive to Dais**					
A.8.2.3	**Incentive to EmOC and LSA**	Rs 1000/ C-section , Rs 500/ for EmOC and Rs 500/- for LSAS doctor		30.00	30.00	Approved.Rs. 60000/- per year per EmOC/LSA for 100 doctors as blended payment as suggested with a ceiling of max Rs 5,000/

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.8.2.4	**Surakshit Maa Awards.**			54.86	54.86	Approved. Rs. 300/- per award per month for 3 mothers per sub-centre (508 Sub-centres).
A.8.1.9	Human Resources Development (Other than above)					
A.8.1.10	Other Incentives Schemes (Pl. Specify)					
B9	Mainstreaming of AYUSH					
B9.1	Medical Officers at DH/CHCs/ PHCs (only AYUSH)					
B9.2	Other Staff Nurse/ Supervisory Nurses (for AYUSH)					
	Strengthening of AYUSH Cell at State level					
	AYUSH Coordinator	0	1	0	0	
	AYUSH Doctors	0	2	0	0	
	Consultant	35000	1	3.15	2.7	Approved @ Rs.30000/month. No hikes in salaries approved.
	Account assistant	13300	1	1.59	1.59	Approved
	Adminstrative Assistant		0	0	0	
	Computer assistant	9700	1	1.16	1.05	Approved @ Rs.8800/month. No hike in salary

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						approved.
	Information assistant	8500	2	1.78	0.92	Approved @ Rs. 7,700/month for 1 position. No additional staff approved.
	MPW	6900	1	0.82	0.66	Approved @ Rs.5500/month
	Strengthening of District Ayurvedic Offices at District Level					
	Computer Assistant	9,700	21	24.44	22.18	Approved @ Rs.8800 /month
	Strengthening of District Hospitals					
	Strengthening of Panchkarma centers at District Hospital					
	MD In Panchkarma (Panchkarma Specialist) MD IN Ayur/Homeo/Unani	29700	8	28.51	22.68	Approved for 7 Panchkarma specialist@ Rs.27000/month
	Yoga and Dietician	24800	2	5.95	5.04	Approved @ Rs.22000/month for dietician and @ Rs.20000/month for Yoga specialist
	Medical Officers 1. AMO/HMO/UMO	22000	6	15.84	14.4	Approved @ Rs.20000/mo

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						nth
	Para Medical Staff 1. Pharma Ayu/Homeo/Unani 2. Therapist Panchkarma	9700	36	41.9	38.01	Approved @ Rs.8800/month.
	Kitchen Assistant	7300	6	5.25	4.75	Approved @ Rs.6600/month
	MPW (attendant)	6100	9	6.58	5.94	Approved @ Rs.5500/month
	Strengthening of AYUSH Wings at District Hospitals					
	Medical Officers AMO/HMO/UMO	22000	30	79.2	72	Approved @ Rs.20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	30	34.92	31.68	Approved @ Rs.8800/month
	MPW (attendant)	6100	15	10.98	9.9	approved @ Rs.5500/month
	Strengthening of AYUSH wing at CHCs					
	MD In Homeo	29700	1	3.56	0	Not approved
	Medical Officers AMO/HMO/UMO	22000	93	245.52	223.2	Approved @ Rs.20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	93	108.25	98.2	Approved @ Rs.8800/month
	Strengthening of AYUSH OPD at PHCs					
	Medical Officers AMO/HMO/UMO	22000	29	76.56	69.6	Approved @ Rs. 20000/month

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	29	33.75	30.62	Approved @ Rs.8800/month
B10	IEC-BCC NRHM					
B.10	Strengthening of BCC/IEC Bureaus (State and district levels)					
	Hiring BCC consultants	40000	1	4.8	4.8	Approved
	Junior Editor	15000	1	1.8	1.8	Approved
	Computer Assistants	12000	2	2.88	2.88	Approved
	Graphics Designer	18000	1	2.16	2.16	Approved
	Office Helper	6000	1	0.72	0.72	Approved
	Support for District Supervision (mobility)	50000	21	10.5	2.62	Rs. 2.62 lakh Approved as 25% of the proposed amount remaining amount to be included in comprehensive mobility support plan
B.17	**Regional drugs warehouses/ Strengthening of Procurement & Logistics**					
	Director, IPD	90000	1X12	0.00	0	Budgeted under SPMU
	Sr. Consultant Equipment Procurement & Maintenance	60000	1X12	0.00	0	Budgeted under SPMU
	4 No. Bio Medical Engineers (one each at Divisional level)	22000	4 X X 12	10.56	9.6	Approved @ Rs.20000/month

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Technical Assistant with IT background	22000	1x12	2.64	2.4	Approved @ Rs.20000/month
	Pharmacist	11500	2 X 12	2.76	2.52	Approved @ Rs.10500/month
	Computer Assistant cum Data Entry Operator	10000	2 X 12	2.40	2.16	Approved @ Rs.9000/month
	Purchase of 4 nos of Computer & Accessories	50000	4	2.00	2	Approved
	At Each District HQ					
	Additional Pharmacist	11500	12 X 21	28.98	26.46	Approved @ Rs.10500/month
	2 Computer Assistant	9000	2 X 12 X 21	45.36	45.35	Approved @Rs.8800/month
	21 Bio Medical Engineers	20000	21x12	50.40	41.58	Approved @ Rs.16500/month
	TA/DA of Bio Medical Engineers			6.24	6.24	Approved
	Training and Capacity Building @ Rs. 10000/- per district			2.10	2.1	Approved
	Procurement Officer (Doctor)	40000	1x9	3.60	3.6	Approved
	Assistant (Procurement)	9400	1x9	0.85	0.85	Approved
	Computer Operator cum Record Keeper (Procurement)	9000	1x9	0.81	0.72	Approved @ Rs.8000/month
	Logistics Officer	25000	1x9	2.25	2.25	Approved
	Assistant (Logistics)	9400	1x9	0.85	0.85	Approved
	Account Officer/ Finance Manager	20000	1x9	1.80	1.8	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	(Logistics)					
	Section Officer (Logistics)	12000	1x9	1.08	1.08	Approved
	Two Computer Operators cum Record Keeper (Logistics)	9000	2x9	1.62	1.44	Approved @ Rs. 8000/month
	Drug & Pharmaceuticals					
	Doctor	30000	1x9	2.70	2.7	Approved
	Two Pharmacists	11500	2x9	2.07	1.69	Approved @ Rs.9400/month
	Equipment					
	Bio Medical Consultant	25000	1x9	2.25	2.25	Approved
	Bio Medical Engineer	20000	1x9	1.80	1.62	Approved @Rs.18000/month
	One Doctor	35000	1x9	3.15	3.15	Approved
	Assistant (Quality Control)	9400	1x9	0.85	0.85	Approved
	Computer Operator cum Record Keeper (Quality Control)	9000	1x9	0.81	0.72	Approved @ Rs.8000/month
B.15.3	Monitoring and Evaluation					
15.3.1 a	Salaries of M&E , MIS & Data Entry Consultants			489.6	476.55	
	Total HR			**6269.41**	**5827.29***	

- HR under DCPs and other minor heads not included.

ROAD MAP FOR PRIORITY ACTION: PROGRAMME MANAGEMENT

- A full time Mission Director is a prerequisite. Stable tenure of the Mission Director should also be ensured.
- A regular full time Director/ Joint Director/ Deputy Director (Finance) (depending on resource envelope of State), from the State Finance Services not holding any additional charge outside the Health Department must be put in place, if not already done, considering the quantum of funds under NRHM and the need for financial discipline and diligence.
- Regular meetings of state and district health missions/ societies must take place.
- Key technical areas of RCH to have a dedicated / nodal person at state/ district levels; staff performance to be monitored against targets and staff sensitised across all areas of NRHM such that during field visits they do not limit themselves only to their area of functional expertise.
- Performance of staff to be monitored against benchmarks; qualifications , recruitment process and training requirements to be reviewed.
- Delegation of financial powers to district/ sub-district levels in line with guidelines should be implemented.
- Funds for implementation of programmes both at the State level and the district level must be released expeditiously and no delays should take place.
- Evidence based district plans prepared, appraised against pre determined criteria; district plans to be a “live” document. Variance analysis (physical and financial) reports prepared and discussed/action taken to correct variances.
- Supportive supervision system to be established with identification of nodal persons for districts; frequency of visits; checklists and action taken reports.
- Special attention to high focus districts: percentage of staff vacancies should be in line with that in the top 10% of districts; increased supervision.
- An integrated plan and budget for providing mobility support to be prepared and submitted for review/approval; this should include allocation to State/ District and Block Levels.

DETAILED BUDGET: PROGRAMME MANAGEMENT

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.10.2	**PROGRAMME MANAGEMENT**					
10.2.1	Strengthening of SHS/ SPMU (Including HR, Management Cost, Mobility Support, field visits)			266.23	219.84	Only following new posts approved in 2012-13- 1 Director (MH) @ Rs 1 lakh for 9 months,1 Director (CH) @ Rs 1 lakh for 9 months,4 Consultants for MH @ Rs. 40000 for 9 months,5 Consultants for CH @ Rs 40000 for 9 months,2 Coordinators MCTS @ Rs 25000 for 9 months. No other new post approved. Salary for all staff to be continued as per last years approved budget
A.10.3	Contractual Staff for SPMSU recruited and in position					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
A.10.4	Strengthening of DHS/ DPMU (Including HR, Management Cost, Mobility Support, field visits)			245.89	204.91	No incentive approved at any level. Salary for all staff to be continued as per last year's approved budget
A.10.5	Contractual Staff for DPMSU recruited and in position					
A.10.6	Strengthening of Block PMU (Including HR, Management Cost, Mobility Support, field visits)			332.52	277.10	No incentive approved at any level. Salary for all staff to be continued as per last year's approved budget
A.10.7	Strengthening (Accounting and Audit Fees)			38.00	38.00	Approved
	Audit Fees (SKS Audit)			36.69	36.69	Approved
	Concurrent Audit (Physical verification Stock)			11.71	11.71	Approved
	Mobility Support to BMO/ MO/ Others(mobility support, rent of SPMU/DMPU)			345.50	86.38	Approval at 25% of proposed budget. State to prepare integrated pal and budget for mobility support across the Programme.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Monitoring and supervision			15.75	15.75	Approved
	IPAI Team Expenditure			30.60	30.60	Approved
	Quality Assurance			84.00	0.00	Not Approved
	Sub-total Programme Management			**1406.89**	**920.98**	

MISSION FLEXI POOL (MFP)

ASHA

TARGETS:

S. No.	Activity	Targets
1.	ASHAs with Drug kits	17000
2.	ASHAs trained in 6th and 7th modules	5100

ROAD MAP:

- Clear criteria for selection of ASHA
- Well functioning ASHA support system including ASHA days, ASHA coordinators
- Performance Monitoring system for ASHAs designed and implemented (including analysis of pattern of monthly payments; identification of non/under-performing ASHAs and their replacement; and reward for well performing ASHAs). State to report on a quarterly basis on ASHA's average earnings/ range per month.
- Timely procurement and replenishment of ASHA kits.
- Timely payments to ASHAs and move towards electronic payment.
- Detailed data base of ASHAs created and continuously updated; village wise name list of ASHA to be uploaded on website with address and cell phone number

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B.1	**ASHA**					
B1.1	**ASHA Cost**					
B1.1.1	Selection & Training of ASHA		17000	200	200	**Approved. Rs.200 lacs is the lump-sum amount approved against a lump sum proposal of Rs. 200 lacs**

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	a)Training Module I-V		3700 ASHAs			Approved
	b) HBPNC (Round - I)Training Module VI-VII-2 days		5100 ASHAs			Approved. State to adopt GoI prescribed training module VI and VII for the proposed number of ASHAs. Also the topics of Module VI & VII which were not covered under HBPNC round I & II should be covered for the already trained ASHAs.
	c) HBPNC (Round - I)Training Module VI-VII-5 days		5100 ASHAs			Approved
	d) HBPNC refresher course for poor performing ASHA		5000 ASHAs			Approved.. State may finish up with all the four rounds of Trainings and refresher maybe plan only after that
	e) MCP cards Orientation		13500 ASHAs			Approved
B.1.1.2	**Procurement of ASHA Drug Kit**	300 / 500	12000/5000	61	61	Approved for 12000 ASHA drug kits @ Rs. 300 and 5000 ASHA drug kits @ Rs.500

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B.1.1.3	**Other Incentives to ASHAs**	588.24	17000	700	700	Approved. Total Approval is of Rs. 700 lakhs under this head. Break up is as follows: 1) **Other incentives to ASHAs**-Amount approved is Rs. 50 lakhs against the lump sum proposal of Rs.50 Lakhs . 2) **ASHA incentives under maternal health-** Amount of Rs.350 lakh is Approved against lump sum proposal of Rs. 350 lakh. 3) **ASHA incentives under Child Health**- Amount of Rs. 300 lakh is approved against a lump sum proposal of Rs. 300 lakh. The incentives which are Approved/Not approved have been indicated specifically under sub heads as follows:
	Community	Rs.	25000			Approved @ Rs.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	Mobilization for Celebration of VHND or Janani-Shishu Divas	50/-for each Celebrated Day				50 for each celebrated day
	Birth/Death Registration (Other than Institutional Deaths)	50 per case	30000			Approved @ Rs.50 per case
	Ensuring safe drinking water	50 per sample	10000			Approved @ at Rs.50 per case
	Registration for Treatment of RTI/STIs	50	20000			Not Approved
	Monthly Meeting at PHCs	100	13500X12			Approved @ Rs.100 per meeting
	Mentoring of Sakshar Mahila Samooh (SMS) by ASHA	Rs. 50/-per Pakhwara	13500x2x12			Not approved
	community mobilization for post Partum permanent sterilization	vasectomy-Rs. 300	vasectomy-500			Not Approved
	community mobilization for post Partum permanent sterilization	tubectomy - Rs.200	tubectomy -1000			Not Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	Incentive to ASHAs under JSY	200	66575			Reflected in RCH Flexipool (MH-JSY)
	Incentive to ASHA under Maternal Health					
	Registration of p.w. and facilitation ANC -1. For SC women @100 and other women @50	100-SC 50-others	40000 SC 160000-others			Approved for payment of incentives to ASHAs @ Rs.150 for Registration & facilitation of full ANC of SC/BPL p.w. and @ Rs. 75 for other pregnant women
	Facilitating p.w. ANC II	50 for SC 25 for others	40000 SC 160000-others			
	Facilitating p.w. ANC III	50 for SC 25 for others	40000 SC 160000-others			
	Facilitating p.w. for Institutional deliveries.	400-SC women 200 other	40000 SC 160000-others			Not approved. Rs. 126.6 lakhs for ASHA incentives for facilitating institutional deliveries have already been approved under JSY in RCH flexipool .
	Identification & referral of sick /danger sign p.w.	50	20000			Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	/mothers other than HBPNC cases					
	Mobilization of Women for Medical Termination of Pregnancies (MPTs**)**	100	18750			Approved @ Rs.100 per case. ASHA should be provided the incentive only after provision of safe abortion service to the women.
	Mobilization of Women for IUD Insertion	100	2500			Not Approved
	Reporting from Community about Abortion >12 Weeks of Pregnancy	100	2500			Not approved
	Incentive under Child Health including IBSY					
	Visits for HBPNC Strategy for Birth Preparedness & PNC of Mother and Newborn (Total 07 Home Visits: from 8th month of	250 for 7 home visits	120000			Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	pregnancy to 42nd day of Delivery)					
	Identification and Referral of Seriously Sick Children (42 Days to 5 Years) as per IMNCI Norms	100	6125			Approved
	Neo-natal/ Infant Death Registration	100	0			Budgeted under RCH flexipool
	Community Based Neo-natal/ Infant Death Audit	100	0			Budgeted under RCH flexipool
	Complete Immunization Children of High Risk Population (0- 1 Year	200	30000			Approved and projected in Part C Immunization.This is an approoved activity by GoI across the States.
	Age-appropriate Vaccination of Children under Primary Immunization	Rs. 50/- for Scheduled Caste Childre n & Rs. 25/- for Other	122500			Not approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
		Cases at 1½ Month				
		Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 3½ Month	122500			Not approved
		Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 9-12 Month	12250			Not approved
	Incentive for ASHAs for Daily visit to schools for administering iron and folic tablets to anemic children	25	1125000 (approx) Anemic Children (0-18 Years in rural areas) budget is proposed			Approved under IBSY @ rate of Rs.25

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
			for 50% of these cases i.e 562500 to be covered by ASHA x Rs. 25 as an incentive for ASHA			
	Incentive to ASHA for mobilization of disabled children from the community to the special disability camps/DH	25	38000 (1% disability rate of the total 3800000 children) disabled children (physical & mental)			Approved under IBSY @ rate of Rs.25
	Incentive to ASHA under Routine Immunizatio n	1294.1 2	17000			Reflected under Immunization (Part C)
B1.1. 4	Awards to ASHA's/Link workers, non monetary incentive (Dress, I-card, SAF/Guidebo ok, Communicati on networking allowance,)	1682.3 5	17000			Total amount approved is Rs.184 lakhs. Break-up is as unde:
	Dress / Identity Card	300	17000X2	102	0	Not approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	/ Nameplate,					
	Self-Appraisal Booklet and Guidebook etc.	50	20000	10	10	Approved
	Performance Awards for ASHA	03 Performance Awards @ Rs. 500/-, Rs. 1000/-, Rs. 1500/- Monthly at District	10000	30	30	Approved
	Communication-Networking Allowances	100	12000x100x12	144	144	Approved @ Rs 100 per month communication allowances. (CUG mode)
B1.1.5	ASHA resource centre/ASHA Mentoring group					
	Support structure for ASHA	309.94	17000			Not approved. State should operationalize ASHA resource centre.
	AYUSH Medical Officer	3000	104x12	37.44	0	
	ASHA Facilitators	1000	438x12	52.56	0	
	Orientations of AYUSH			10	0	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	MO (Lump-sum)					
	Total			**1347**	**1145**	

UNTIED FUNDS/ RKS/ AMG

ROAD MAP FOR PRIORITY ACTION

- Timely release of untied funds to all facilities; differential allocation based on case load. Funds to be utilized by respective RKS only and not by higher levels.
- Review of practice of utilising RKS funds for procurement of medicines from commercial medical stores and accordingly revisit guidelines for fund utilisation by RKS.
- Well functioning system for monitoring utilization of funds as well as purposes for which funds are spent.
- Plan for capacity building of RKS members developed and implemented.
- RKS meetings to take place regularly.
- Audit of all untied, annual maintenance grants and RKS funds.
- The State must take up capacity building of Village Health & Sanitation Committees Rogi Kalyan Samitis and other community/ PRI institutions at all levels
- The State shall ensure regular meetings of all community Organizations/ District / State Mission with public display of financial resources received by all health facilities
- The State shall also make contributions to Rogi Kalyan Samitis

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B2	Untied Funds			**527.1**	**435.4**	Approved, State to implement differential financing for the facilities. Detailed plan to be shared.
B2.1	Untied Fund for CHCs	50000	104	52	52	Approved
	Untied Fund for SDHs	50000	23	11.5	11.5	Approved
B2.2	Untied Fund for PHCs	25000	334	83.5	83.5	Approved, on the basis of 100% utilization percentage of 2011-12

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B2.3	Untied Fund for Sub Centers	10000	2521	252.1	219.32	Approved , on the basis of 86.79% utilization percentage of 2011-12
B2.4	Untied fund for VHSC	10000	6280	128	69.08	Approved, on the basis of 11.49% utilization percentage of 2011-12
B.3	Annual Maintenance Grants			**497.4**	**385.03**	Approved, State to implement differential financing for the facilities. Detailed plan to be shared.
B.3.1	CHCs	100000	103	103	89.61	Approved, on the basis of 86.87% utilization percentage of 2011-12
	SDHs	100000	23	23	20	Approved, on the basis of 86.87% utilization percentage of 2011-12
B.3.2	PHCs	50000	333	166.5	166.5	Approved, on the basis of 100% utilization percentage of 2011-12
B.3.3	Sub Centers	10000	2049	204.9	108.92	Approved for 1556 SCs in Govt. Building (RHS 2011) and approved amount is on the basis of 69.78% utilization percentage of 2011-12
B.6	**Corpus Grants to HMS/RKS**			**566**	**510.59**	**Approved, State to implement differential financing for the facilities. Detailed plan to be shared.**

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B6.1	District Hospitals	500000	21	105	95.55	Approved, on the basis of 91.02% utilization percentage of 2011-12
B6.2	CHCs	100000	104	104	100.88	Approved, on the basis of 97.95% utilization percentage of 2011-12
B6.3	PHCs	100000	334	334	293.92	Approved, on the basis of 88.42% utilization percentage of 2011-12
B6.4	Other or if not bifurcated as above (SDHs)	100000	23	23	20.24	Approved, on the basis of 87.91% utilization percentage of 2011-12
	Grand Total			**1590.5**	**1331.02**	

NEW CONSTRUCTIONS/ RENOVATION AND SETTING UP

Construction of new SCs only in high focus districts. All newly constructed SCs to be strengthened with 2 ANMs and service delivery closely monitored.

ROAD MAP:

- Works must be completed within a definite time frame. For new constructions upto CHC level, a maximum of two years and for a District Hospital, a maximum period of 3 years is envisaged. Renovation/ repair should be completed within a year. Requirement of funds should be projected accordingly. Funds would not be permissible for constructions/ works that spill over beyond the stipulated timeframe. Timeline (not more than 2 years) for completion of ongoing construction/ renovation activities; close monitoring of progress.
- Progress of works being executed to be closely monitored
- Standardized drawing/ detailed specifications and standard costs must be evolved keeping in view IPHS.
- Third party monitoring of works through reputed institutions to be introduced to ensure quality.
- Information on all ongoing works to be displayed on the NRHM website
- Approved locations for constructions/ renovations will not be altered
- All government health institutions in rural areas should carry a logo of NRHM as recognition of support provided by the Mission in English/ Hindi & Regional languages.

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B5	New Constructions/ Renovation and Setting up			**2040**	**2040**	
B5.1	CHCs			500	2000	Approved. Rs. 1000 lakhs for ongoing constructions in Mewat and Palwal districts. And Rs. 1000 lakhs for ongoing constructions in remaining districts. Name wise list of the Facilities proposed and timeline for completion of construction need to be shared by the State.
B5.2	PHCs			600		
B5.3	SHCs/Sub Centers			800		
B5.4	Setting up Infrastructure wing for Civil works					
B5.5	Govt. Dispensaries/ others renovations					
B5.6	Construction of BHO, Facility improvement, civil work, BemOC and CemOC centers					

B.5.7	Major civil works for operationalisation of FRUS					
	Minor civil works for operationalisation of FRUs(Minor Civil Works for operationalization of FRUs (Minor Civil Works for labour rooms and STI clinics will be done from the budget under AMG and Construction/ Renovation)	1000000	4	0	40	Shifted from RCH Flexipool. Approved. Rs. 40 lakhs approved for Minor civil work for operationalization of FRUs.
	Renovation and construction of Central Warehouse for drugs, equipments and 4 Regional Cold Chair Store	25	4	100.00	0	Not approved
B.5.8	Major civil works for operationalisation of 24 hour services at PHCs					
B.5.9	Civil Works for Operationalise Infection Management & Environment Plan at health facilities					
B.5.10	Infrastructure of Training Institutions					

B.5.10.1	Strengthening of Existing Training Institutions/Nursing School(Other than HR)					
	a. GNM Schools					
	1. Infrastructure					
	2. Equipment					
	b. ANMTCs					
	1. Infrastructure					
	2. Equipment					
B.5.10.2	New Training Institutions/School(Other than HR)					
	Total			**2000**	**2040**	

PROCUREMENT

ROAD MAP:

- Strict compliance of procurement procedures for purchase of medicines, equipments etc as per state guidelines.
- Competitive bidding through open tenders and transparency in all procurement to be ensured.
- Only need based procurement to be done strictly on indent/requisition by the concerned facility.
- Procurement to be made well in time & not to be pushed to the end of the year.
- Audit of equipment procured in the past to be carried out to ensure rational deployment.
- Annual Maintenance Contract (AMC) to be built into equipment procurement contracts.
- A system for preventive maintenance of equipment to be put in place.

DETAILED BUDGET: PROCUREMENT

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B.16	**PROCUREMENT**					
B16.1	Procurement of Equipment					
B16.1.1	Procurement of equipment: MH			10	10	Approved subject to the equipments purchased are placed on priority at the delivery points and as per the gap analysis of the facilities. For MVA equipments @ Rs. 5000 x 200 Centres. Names of the centres to be provided.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B16.1.2	Procurement of equipment: CH			176.72	176.72	Approved for Equipments for New born care.
B16.1.3	Procurement of equipment: FP			68		
	NSV Kit	2500 kits	1000		25	Approved
	IUD insertion Kit	1300 kits	2000		26	Approved
	Minilap sets	100 sets	2500		2.5	Approved
	Kelly's Forceps	1000	425		4.25	Approved
	Laparoscopes	40 laparo scopes	500000		100	Approved
B16.1.4	Procurement of equipment: IMEP					
B16.1.5	Procurement of Others					
	Procurement of Ambulances	7	50	350	350	Approved
	Hospital furniture			125.82	125.82	Approved.
	Heamoglobin colour scale (starter kit)	Starter Kit-1500, Refill pack-2500	3000-Starter kit, 3000-Refill pack (200 strips)	120	120	Approved. Adolescent Hb level is different, thus the levels of anemia need to be adjusted to measure anemia status among adolescents
	Sub Total Procurement equipments			**850.54**	**940.29**	
B.16.2	**Procurement of Drugs and supplies**					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B.16.2.1	Drugs & supplies for MH					Booked under JSSK
B.16.2.2	Drugs & supplies for CH			134	134	Approved. IFA & albendazole for 0-5 year.
B.16.2.3	Drugs & supplies for FP					
B.16.2.4	Supplies for IMEP					
B.16.2.5	General drugs & supplies for health facilities			1100	961.2	Approved. Rs.138.8 lakh for Iron and folic acid tablets to be given to 40% of the children supposed to be anemic in age group 6-18 yrs(therapeutic) i.e. 867472*100 tabs each/child *cost of 1 tablet @Rs .16/tablet not approved as per SHP guidelines. Remaining Rs.961.20 lakhs recommended subject to drugs under JSSK are not procured under this head.
	Drugs & supplies for School Health and IBSY			103		Approved. IFA and Albendazole

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Prophylactic Iron and folic acid tablets to each and every child	0.16	97174 children (age group 6-9) x 52 weeks x 1 tablet/week x cost of 1 tablet @ Rs .16/ tablet with 10% wastage		77.52	Approved
	De-Worming tablets (Albendazole)	1.19	97174 children to be de-wormed x 1 campaign per year x 2 tablets per campaign x Rs1.19/- per tablet		21.35	Approved
	Drugs for ARSH			83	83	Approved. For IFA @ Rs.0.16 and albendazole @ Rs.1.19.All the procurement of drugs and supplies for ARSH to be met

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
						from this head only and not from any other head.
	Sub Total Procurement Drugs & supplies			**1420**	**1277.07**	
	Total Procurement			**2270.54**	**2217.36**	

MOBILE MEDICAL UNIT (MMU)

ROAD MAP:

- Route chart to be widely publicised
- GPS to be installed for tracking movement of vehicles
- Performance of MMUs to be monitored on a monthly basis (including analysis of number of patients served and services rendered).
- MMUs to be well integrated with Primary Health Care facilities and VHND.
- Engagement with village panchayats / communities for monitoring of services
- AWCs to be visited for services to children below 6 years of age
- AWCs to maintain record of services rendered
- Service delivery data to be regularly put in public domain on NRHM website.
- A universal name 'Rashtriya Mobile Medical Unit' to be used for all MMUs funded under NRHM. Also uniform color with emblem of NRHM (in English/ Hindi & Regional languages), Government of India and State Government to be used on all the MMUs.

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B11	**Mobile Medical Units (Including recurring expenditures)**		6	**69.42**	**39.35**	Approved. For salaries of ongoing Staff, POL, maintenance/insurance, recurring GPS charges.No new staff approved as well as no hike in salaries approved.

MAINSTREAMING OF AYUSH

ROAD MAP FOR PRIORITY ACTION:

- State to co-locate AYUSH in district hospitals and provide post graduate doctors for at least two streams: Ayurveda and homoeopathy (or Unani, Siddha,Yoga as per the local demand). Panchakarma Unit should also be considered.
- OPD in AYUSH clinics will be monitored alongwith IPD/OPD for the facility as a whole.
- The AYUSH pharmacist/compounder to be engaged only in facilities with a minimum case load.
- Adequate availability of AYUSH medicines at facilities where AYUSH doctors are posted to enable them to practice their own system of Medicine without difficulty.
- At CHCs and PHCs any one system viz., Homeopathy/Ayurveda/ Unani/Sidha to be considered depending on local preference.
- At CHC/PHC level, Post-Graduate Degree may not be insisted upon.
- District Ayurveda Officer should be a member of District Health Society in order to participate in decision making with regard to indent, procurement and issue of AYUSH drugs.
- Infrastructure at facilities proposed to be collocated would be provided by Department of AYUSH.
- Those PHC/CHC/Sub-Divisional hospitals which have been identified as delivery points under NRHM should be given priority for collocation of AYUSH as these are functional facilities with substantial footfalls.
- AYUSH medical officers should increasingly be involved in the implementation of national health Programmes and for the purpose of supportive supervision and monitoring in the field. They should be encouraged to oversee VHND and outreach activities and in addition Programmes such as school health, weekly supplementation of iron and folic acid for adolescents, distribution of contraceptives through ASHA, menstrual hygiene scheme for rural adolescent girls etc.
- AYUSH medical officer should also be member of the RKS of the facility and actively participate in decision making.
- AYUSH doctors need to be provided under NRHM first in the remotest locations and only thereafter in better served areas.

DETAILED BUDGET: MAINSTREAMING OF AYUSH

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B9	**Mainstreaming of AYUSH**					
B9.1	Medical Officers at DH/CHCs/ PHCs (only AYUSH)					
B9.2	Other Staff Nurse/ Supervisory Nurses (for AYUSH)					
	Strengthening of AYUSH Cell at State level					
	AYUSH Coordinator	0	1	0	0	
	AYUSH Doctors	0	2	0	0	
	Consultant	35000	1	3.15	2.7	Approved @ Rs.30000/month. No hikes in salaries approved.
	Account assistant	13300	1	1.59	1.59	Approved
	Adminstrative Assistant		0	0	0	
	Computer assistant	9700	1	1.16	1.05	Approved @ Rs.8800/month. No hike in salary approved.
	Information assistant	8500	2	1.78	0.92	Approved @ Rs. 7,700/month for 1 position. No additional staff approved.
	MPW	6900	1	0.82	0.66	Approved @ Rs.5500/month
	Strengthening of District Ayurvedic Offices at District					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Level					
	Computer Assistant	9,700	21	24.44	22.18	Approved @ Rs.8800 /month
	Strengthening of District Hospitals					
	Strengthening of Panchkarma centers at District Hospital					
	MD In Panchkarma (Panchkarma Specialist) MD IN Ayur/Homeo/Unani	29700	8	28.51	22.68	Approved for 7 Panchkarma sepcialist@ Rs.27000/month
	Yoga and Dietician	24800	2	5.95	5.04	Approved @ Rs.22000/month for dietician and @ Rs.20000/month for Yoga specialist
	Medical Officers 1. AMO/HMO/UMO	22000	6	15.84	14.4	Approved @ Rs.20000/month
	Para Medical Staff 1. Pharma Ayu/Homeo/Unani 2. Therapist Panchkarma	9700	36	41.9	38.01	Approved @ Rs.8800/month.
	Kitchen Assistant	7300	6	5.25	4.75	Approved @ Rs.6600/month
	MPW (attendant)	6100	9	6.58	5.94	approved @ Rs.5500/month
	Strengthening of AYUSH Wings at District Hospitals					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Medical Officers AMO/HMO/UMO	22000	30	79.2	72	Approved @ Rs.20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	30	34.92	31.68	Approved @ Rs.8800/month
	MPW (attendant)	6100	15	10.98	9.9	approved @ Rs.5500/month
	Strengthening of AYUSH wing at CHCs					
	MD In Homeo	29700	1	3.56	0	Not approved
	Medical Officers AMO/HMO/UMO	22000	93	245.52	223.2	Approved @ Rs.20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	93	108.25	98.2	Approved @ Rs.8800/month
	Strengthening of AYUSH OPD at PHCs					
	Medical Officers AMO/HMO/UMO	22000	29	76.56	69.6	Approved @ Rs. 20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	29	33.75	30.62	Approved @ Rs.8800/month
B9.3	**Activities other than HR**					
	Panchkarma Training (AYUSH doctors)	1,00,000/ Batch	2	2	2	Approved. State has to conduct the cascading

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Panchkarma Training (AYUSH therapists)	1,05,000/ Batch	2	2.1	2	training Programme at State and District level for AYUSH doctors.
	IEC for AYUSH			32	0	Not Approved.IEC for AYUSH proposed under comprehensive IEC plan
	Equipment / Furniture			2	2	Approved.
	Monitoring & mobility support	30000	12 months	3.6	0.9	Rs. 0.9 Lakh approved as 25 % of the proposed amount remaining amount to be proposed under comprehensive mobility plan.
	Miscellaneous			12	3	Approved for stationery, contingencies, adv., TA/DA, bi yearly review meetings etc.
	Total AYUSH			**783.41**	**665.02**	

IEC/BCC

ROAD MAP FOR PRIORITY ACTION:

- Comprehensive IEC/ BCC strategy to be strengthened. IPC given necessary emphasis and improved inter-sectoral convergence particularly with WCD.
- Details of activities carried out to be displayed on the website.

DETAILED BUDGET: **IEC/BCC**

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B10	**IEC-BCC NRHM**			**592.35**	**559.25**	**Amount approved under this head is Rs. 559.25 lakhs. Additional Rs. 200 lakhs to be utilized from savings of FY 2011-12 as proposed. Total IEC plan is Rs. 792.35 lakhs. State has proposed for Rs.592.35 lakhs in the budget sheet. Remaining Rs. 200 lakhs proposed to be utilized from savings of 2011-12.**
B.10	Strengthening of BCC/IEC Bureaus (State and district levels)					
	Hiring BCC consultants	40000	1	4.8	4.8	Approved
	Junior Editor	15000	1	1.8	1.8	Approved
	Computer	12000	2	2.88	2.88	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	Assistants					
	Graphics Designer	18000	1	2.16	2.16	Approved
	Office Helper	6000	1	0.72	0.72	Approved
	Support for District Supervision (mobility)	50000	21	10.5	2.62	Rs. 2.62 lakh Approved as 25% of the proposed amount remaining amount to be included in comprehensive mobility support plan
	Coordination and Supportive supervision by AYUSH Doctor at PHC level	1000 per month	441	52.92	52.92	Approved. Coordination and Supportive of SMS and peer educators of ARSH by AYUSH doctors.
B.10.1	Development of State BCC/IEC strategy					
	Hiring of professional agency for External Evaluation			25	25	Approved
	Quarterly review meeting of Dy. Civil Surgeons at State level	50000	4	2	2	Approved
	Creation of BCC/IEC material			20	20	Approved
B.10.2	Implementation of BCC/IEC strategy					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	BCCs activities for all health Programme by SMS at Village level			294.65	294.65	Approved
	Mentoring of SMS groups by ASHA	Rs. 50 per pakhwara		0	0	Reflected in ASHA head ( )
	Printing of BCC/IEC Materials (Posters, Booklets/Flip charts, Bus Panels)			75	75	Approved
	Mass Media					
	News paper Advertisement at State level			40	40	Approved
	Radio Publicity and Community Radio to Cover all Programmes			90	90	Approved
	News letter for doctors and general public			16	16	Approved
	IEC Activities at Distt. Level		1 per district	21	21	Approved
	Miscellaneous			10	10	Approved
B.10.2.1	BCC/IEC activities for MH			0	0	Covered under integrated BCC
B.10.2.2	BCC/IEC activities for			0	0	under comprehensive IEC plan

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
	CH					
B.10.2.3	BCC/IEC activities for FP			50	65	Approved. Rs. 15 lakhs approved for printing of IUCD cards @ Rs. 5/ card for 3.00 lakhs cards
B.10.2.4	BCC/IEC activities for ARSH			10	10	Approved
B.10.3	Health Mela			0	0	
B.10.4	Creating awareness on declining sex ratio issue			11.7	11.7	Approved. Incentive for Informers Rs.10.5 Lakh Annual Status Report -Rs.1.2 lakh
B.10.5	Other activities					
	BCC/IEC activities for IDSP			16.98	0	Not Approved. Rs. 5.88 lakhs for publicity / IEC material at districts for IDSP under comprehensive IEC plan
	BCC/IEC activities for Immunization			9.24	0	Approved Under comprehensive IEC plan.
	BCC/IEC activities for Malaria			14	0	Not Approved. All activities under NVBDCP approved under comprehensive IEC plan
	BCC/IEC activities for AYUSH			11	11	Approved

MONITORING AND EVALUATION (HMIS)/MCTS

ROAD MAP FOR PRIORITY ACTION:

- Data is uploaded, validated and committed; data for the month available by the 15th of the following month.
- Uploading of facility wise data by the first quarter of 2012-13.
- Facility based HMIS to be implemented. HMIS data to be analysed, discussed with concerned staff at state and district levels and necessary corrective action taken.
- Programme managers at all levels use HMIS for monthly reviews.
- MCTS to be made fully operational for regular and effective monitoring of service delivery including tracking and monitoring of severely anemic women, low birth weight babies and sick neonates.
- Pace of registration under MCTS to be speeded up to capture 100% pregnant women and children
- Service delivery data to be uploaded regularly.
- Progress to be monitored rigorously at all levels
- MCTS call centre to be set up at the State level to check the veracity of data and service delivery.

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B15.3	**Monitoring and Evaluation**			**769.58**	**750.05**	
B15.3.1	Monitoring & Evaluation / HMIS/MCTS					
15.3.1 a	Salaries of M&E , MIS & Data Entry Consultants			489.6	476.55	Approved. No hikes in salaries and no new HR is approved.
15.3.1 b	Mobility of M&E Officers			8.64	2.16	Rs. 2.16 lakh approved as 25% of

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
						the proposal and remaining amount to be budgted under comprehensive mobility support plan
15.3.1 c	Workshops/ Training on M&E at State Level			8.75	8.75	Approved
15.3.1 d	M&E Studies			0	0	
15.3.1 e	Others			0	0	
15.3.1 f	Hardware & Software Procurement			15	15	Approved
15.3.1 g	Internet Connectivity			52.5	52.5	Approved
15.3.1 h	Annual Maintenance			2.6	2.6	Approved
15.3.1 i	Operational Costs (consumables) @ 20,000 per institution(505)			51.5	51.5	Approved
15.3.1 j	Review of Existing Registers - to make them compatibles with National HMIS/MCTS			2	2	Approved
15.3.1 k	Printing of New Registers / Forms			44.78	44.78	Approved
15.3.1 l	Training of Staff			0	0	No Budget provided under this head

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
15.3.1 m	Printing & reproducing Registers/ Forms					
15.3.1 n	Capacity Building of Teams					
15.3.1 o	Ongoing Review of MCH tracking Activities			2.6	2.6	Approved
15.3.1 p	Monitoring Data Collection & Data Quality			2.5	2.5	Approved
15.3.1 q	Operationalising SMS work-plans - provision for Mobile rent to ASHA/ANM			5.53	5.53	Approved
15.3.1 r	Establishing Call centers at State Level to be outsourced to third party			15	15	Approved
B15.3.2	Computerization HMIS and e-governance, e-health, Drug/Monitoring Software System			25	25	Approved
B15.3.3	Other M & E/ Civil Registration System			43.58	43.58	Approved
	Total M&E			**769.58**	**750.05**	

REFERRAL TRANSPORT

ROAD MAP FOR PRIORITY ACTION

- Free referral transport to be ensured for all pregnant women and sick neonates accessing public health facilities.
- Universal access to referral transport throughout the State, including to difficult and hard to reach areas, to be ensured.
- A universal toll free number to be operationalized and 24x7 call centre based approach adopted.
- Vehicles to be GPS fitted for effective network and utilization.
- Rigorous and regular monitoring of usage of vehicles to be done
- Service delivery data to be regularly put in public domain on NRHM website.

Detailed Budget:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
B12	**Referral Transport**		422	**700**	**1253.96**	Approved Rs. 1253.96. Total plan is of Rs. 2543 lakh out of which State has proposed for Rs. 2200 lakh. Rs. 1500 lakhs have been proposed under JSSK and Rs. 700 lakh under MFP. Total amount approved for the activity with out hike in salaries and number of staff is Rs.2208.96 lakh. Amount approved under JSSK is Rs.955 lakh. Hence approval under MFP is Rs. 1253.96 lakh (Rs.2208.96-Rs.955 lakh)
B12.1	Ambulance / EMRI/ other models					
	District					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	control room					
	Salary of 6 control room operators	9680	6	134.16	80.64	Appoved for 4 operators @ Rs.8000 p.m.
	Salary of one fleet manager	15000	1	37.8	30.24	Approved for 1 fleet manager@ Rs.12000 p.m.
	Travel allowance for Fleet Manager (new post)	1000	21	2.52	2.52	Approved
	Cost of mobile bills of CUG phones one for control room and one for fleet manager	1000	21 X 2 X 1000 X 12	5.04	5.04	Approved
	Cost of broadband	1000	21	2.52	2.52	Approved
	Cost of landline telephone bill	300	2	1.5	1.5	Approved
	Miscellaneous and contingency expenses for control room	1000	21	2.52	2.52	Approved
	State control room					
	One Computer Assistant	9680	1	1.16	0.96	Approved for1 computer asst. @ Rs.8000 p.m.
	Two Referral Transport Monitors	15000	2	3.6	3.6	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	for the purpose of monitoring the system(new activity)					
	expenditure on running of Ambulances		357 X 3 months +422 X 9 months			
	POL for running the ambulances			740.9	740.9	
	Salary of drivers	9000		1021.02	794.13	Approved @ Rs.7000 p.m.salary of drivers for 357 ambulances for 3 months and 422 ambulances for 9 months
	Maintenance of vehicles	2000		97.38	97.38	Approved
	CUG phone monthly bill	300		14.6	14.6	Approved
	GPS recurring charges	500		24.34	24.34	Approved
	Insurance of vehicles	5000		21.1	21.1	Approved
	Salary of EMTs on ALS ambulance	12000	2X22 ALS	63.36	52.8	Approved @ Rs.10000 p.m salary of EMTs on ALS
	Paramedics on ambulance	12000	2X 100 BLS X9	216	180	Approved @ Rs.10000 p.m salary of paramedics
	Procurement of receipt machine for each ambulance (new			50.64	50.64	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
	activity)					
	Tyres	4300	150X5	0	0	To be provided from revenue generated
	Fitting of GPS on new ambulances	13000	90	11.7	11.7	Approved
	Training of EMT and drivers					Approved
	Training of paramedics on BLS ambulances	10000	2 X 100	20	20	Approved
	Training of drivers in Basic Life Support	2500	422X2.33	24.58	24.58	Approved
	Training of Casualty staff (MOs & Staff Nurses) in ACLS, ITLS & ALSO.		21 DH	47.25	47.25	Approved
B12.2	Operating Cost (POL)					

OTHERS

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B.4	Hospital Strengthening					
B.4.1	Upgradation of CHCs, PHCs, Dist. Hospitals to IPHS)			100	61.28	Approved for ongoing staff which was approved in 2011-12 only, No new staff and No hike in salaries approved.
B4.1.1	District Hospitals					
B4.1.2	CHCs					
B4.1.3	PHCs					
B4.1.4	Sub Centers					
B4.1.5	Others					
B 4.2	Strengthening of District, Su-divisional Hospitals, CHCs, PHCs					
B.4.3	Sub Centre Rent and Contingencies					
B.4.4	Logistics management/ improvement					
	Total			**100**	**61.28**	

PANCHAYATI RAJ INITIATIVE

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B8	**Panchayati Raj Initiative**					
B8.1	Constitution and Orientation of Community leader & of VHSC,SHC,PHC,CHC etc	24150	314		75.83	Approved. Shifted from RCH flexipool
B8.2	Orientation Workshops, Trainings and capacity building of PRI at State/Dist. Health Societies, CHC,PHC					
B8.3	Others					
	Total			**0**	**75.83**	

NEW INITIATIVES/ STRATEGIC INTERVENTIONS

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed Rs. In lacs	Amount Approved Rs. In lacs	Remark
B.18	**New Initiatives/ Strategic Interventions (As per State health policy)/ Innovation/ Projects (Telemedicine, Hepatitis, Mental Health, Nutition Programme for Pregnant Women, Neonatal) NRHM Helpline) as per need (Block/ District Action Plans)**			**770.54**	**573.94**	
B.18.1	Free Treatment of Cleft Lips and Palates and Club Foot			30.2	10	Club foot surgeries not approved
B.18.2	Oral Health			22.44	22.44	Approved
B.18.3	Free Treatment Facility for Hemophilia Patients			324	324	Approved
B.18.4	Capacity Building of Doctors in Healthcare			17.5	17.5	Approved

	Financing and Health policy					
B.18.5	Difficult Area Incentive to District Mewat and Hathin Block of Palwa			200	200	Approved. Rs. 200 lakh is approved against a lump sum proposal of Rs. 200 lakhs. Specific activity approval is provided against each sub head as follows
	Civil Surgeon, Dy. Civil Surgeon & SMOs	10000	15			Approved
	Medical Officer Specialist	25000	15			Approved
	Medical Officer	10000	66			Approved
	Dental Surgeon	5000	12			Approved
	Nursing sister & Staff Nurse	2000	72			Approved
	Pharmacist	2000	22			Approved
	Lab Technician	2000	30			Approved
	Radiographer	2000	4			Approved
	MPHS(M)	2000	10			Approved
	MPHS(F)	2000	16			Approved
	MPHW(M)	2000	70			Approved
	MPHW(F)	2000	150			Approved
	Ministerial Staff (Regular)	1000	19			Not Approved
	Ministerial Staff (NRHM) DPM, DAM, Account Asstt. Computer Asstt. Data Entry Operator, Information Asstt. Etc.	1000	60			Not Approved

B.18.6	Menstrual Hygiene Scheme for rural adolescent girls			150	0	Not Approved. Procurement of Sanitary Napkins from MNC open tenders is not approved. Arbitrary change of district for procurement of Sanitary Napkins from SHG to direct procurement from MNC cannot be made as the same has been approved at the highest level by the Mission Steering Group (MSG) of NRHM. State may therefore procure Sanitary Napkins in approved 7 Districts through SHG only.
B.18.7	Continuation of Physiotherapy Units in Four District Hospitals	275000	8	26.4	0	Not Approved
	Total			**770.54**	**573.94**	

NATIONAL DISEASE CONTROL PROGRAMMES (NDCP)

NATIONAL IODINE DEFICIENCY DISORDERS CONTROL PROGRAMME (NIDDCP)

ROAD MAP FOR PRIORITY ACTON:

Priority Actions to be carried out by State/UTs (i) To achieve goal to bring the prevalence of IDD to below 5% in the entire country by 2017 and (ii) To ensure 100% consumption of adequately iodated salt (15ppm) at the household level under **National Iodine Deficiency Disorders Control Programme:**

1. Establishment of State IDD Cell, if not established in the State/UT for implementation Programme activities.

2. Establishment of State IDD monitoring laboratory, if not established in the State/UT for conducting quantitative analysis of iodated salt and urine for iodine content and urinary iodine excretion.

3. All the sanctioned posts i.e. Technical Officer, Statistical Assistant, LDC/DEO, Lab Technician and Lab Assistant of State IDD Cell and State IDD Monitoring Laboratory should be filled on regular/contractual basis on priority for smooth implementation of Programme.

4. Supply, availability and consumption of adequately iodated salt in the state should be monitored.

5. District IDD survey/re-surveys should be undertaken as per NIDDCP guidelines to assess the magnitude of IDD in the respective districts as approved in the PIP and reports accordingly submitted.

6. Use of Salt testing kits by ASHA/Health Personnel being supplied in the endemic districts for creating awareness & monitoring of iodated salt consumption at household level should be monitored and monthly reports are to be submitted as per the prescribed proforma.

7. ASHA incentives Rs. 25/- per month for testing 50 salt samples per month in endemic districts should be made available on regular basis to ASHA.

8. Health education and publicity should be conducted with more focus in the endemic districts emphasizing about IDD and promotion of consumption of adequately iodated salt. Should observe Global IDD Celebrations on 21st October by conducting awareness activities at various level and submission of reports.

DETAILED BUDGET:

FMR Code	Activity	Unit cost	Physical target	Amount Proposed (Rs. in lacs)	Amount Approved (Rs. in lacs)	Remarks
D	**IDD**					
D.1	**Establishment of IDD Control Cell-**		Implementation & monitoring of the Programme	11.50	10.00	State Govt. may conduct and co-ordinate approved Programme activities and furnish quarterly financial & physical achievements as per prescribed format.
D.1.a	Technical Officer	1				
D.1.b	Statistical Assistant	1				
D.1.c	LDC Typist	1				
D.2	**Establishment of IDD Monitoring Lab-**		Monitoring of district level iodine content of salt and urinary iodine excretion as per Policy Guidelines.	7.00	5.00	The vacant sanctioned post of Lab Asst. should be filled up on regular/ contractual basis on priority. State Govt. may conduct quantitative analysis of salt & urine as per
D.2.a	Lab Technician	1				
D.2.b	Lab. Assistant	1				

FMR Code	Activity	Unit cost	Physical target	Amount Proposed (Rs. in lacs)	Amount Approved (Rs. in lacs)	Remarks
						NIDDCP Guidelines and furnish monthly/quarterly statements
D.3	**Health Education and Publicity**		Increased awareness about IDD and iodated salt.	11.00	9.00	IDD publicity activities including Global IDD Day celebrations at various level.
D.4	**IDD Survey/resurveys**	Rs. 50,000 per district		2.00	2.00	State. Govt. may under take 4 districts IDD survey as per guidelines and furnish report.
D.5	Salt Testing Kits supplies by GOI inform of kind grant for 10 endemic districts	12 STK per annum per ASHA	Creating iodated salt demand and monitoring of the same at the community level.			State Govt. to monitor the qualitative analysis of iodated salt by STK through ASHA in 10 endemic districts i.e. Ambala, Faridabad, Gurgaon, Hissar, Jind, Karnal, Panipat, Punchkula,
D.6	ASHA Incentive	Rs. 25/- per month for testing	50 salt samples per month per ASHA in 10 endemic		19.37	

FMR Code	Activity	Unit cost	Physical target	Amount Proposed (Rs. in lacs)	Amount Approved (Rs. in lacs)	Remarks
		50 salt sample/ month	districts			Rothak, Sonipat, .
TOTAL				**31.50**	**45.37**	

INTEGRATED DISEASE SURVEILLANCE PROGRAMME (IDSP)

ROAD MAP FOR PRIORITY ACTION:

- There is 1 vacant post of technical contractual staff (Epidemiologists) under IDSP in the State. The State needs to expedite the recruitment of these staff.
- The training of Master trainers (ToT) and 2-week FETP for District Surveillance Officers under IDSP has been completed for the State/Districts. However, the State may give the additional list of participants to be trained for ToT and 2-week FETP.
- In 2011, only 61% of all the Reporting Units reported weekly surveillance data in P-form through IDSP Portal. The State needs to ensure regular weekly reporting of all surveillance data (S, P, L) by all the Reporting Units of all Districts through IDSP Portal. Following district are reporting irregularly (50% or less reporting) /not reporting in portal.
    - Ambala
    - Bhiwani
    - Faridabad
    - Gurgaon
    - Jhajjar
    - Jind
    - Karnal
    - Mahendergarh (Narnaul)
    - Panipat

The State has to ensure regular reporting from all districts by September 2012.

- The State has to ensure reporting of L form in portal by the district priority labs at Karnal and Hissar. The Referral lab network has to be established in 2012-13.
- The State has report about the outbreaks every week. Even weekly “NIL” reporting under IDSP is mandatory.
- Appropriate clinical samples need to be sent for the required lab investigations for all outbreaks. In 2011, clinical samples were sent for laboratory investigation for 67% of the disease outbreaks in which 33% were lab confirmed.

- The State needs to send full investigation report for each disease outbreak. Presently, such investigation reports are available for only a few outbreaks.
- Reply of state on Observation made by auditors for 2010-11 is pending. The State has to ensure to send the reply on Observation made by auditors for 2010-11 at the earliest.
- State has to ensure timely submission of quarterly Financial monitoring Report and annual audit report.

DETAILED BUDGET:

FMR Code	Activity	Unit Cost	Amount Proposed (Rs. in lacs)	Amount Approved (Rs in lacs)	Remarks
E.1	**Operational Cost**				
	Field Visits	Rs 2,40,000 per District Surveillance Unit per annum Rs 5,00,000 State Surveillance Unit per annum	55.40 (5.0 × 1 + 2.40 x21)	55.40	
	Office Expenses				
	Broad Band expenses				
	Outbreak investigations including Collection and Transport of samples				
	Review Meetings etc				
	Any other expenses				
		Sub Total	**55.40**	**55.40**	
E1.2	**Laboratory Support**				
	District Priority Lab	Rs. 4,00,000 per district priority lab per annum	8.0 (4.0 × 2)	8.0	
	Referral Network Lab	Rs. 5,00,000 per referral lab per annum	8.0 (4.0 × 2)	8.00	
		Sub Total	**16.0**	**16.0**	
E.2	**Human Resources**				

FMR Code	Activity	Unit Cost	Amount Proposed (Rs. in lacs)	Amount Approved (Rs in lacs)	Remarks
E.2.1	Remuneration of Epidemiologists	Rs.25,000 - Rs. 40,000/ per month	84.48 (32,000 × 22 × 12)	84.48	The state is requested to calculate the remunerations for Consultant – Finance/Procurement, Consultant Training/Technical, Data Manager, and Data Entry Operator according to IDSP norms.
E.2.2	Remuneration of Microbiologists	Rs. 25,000 - Rs. 40,000 (Medical Graduates) Rs. 15,000 - Rs. 25,000 (Others)	7.92 (22,000 × 3 × 12)	7.92	
E.2.3	Remuneration of Entomologists	Rs. 15,000 - Rs. 25,000	2.64 (22,000 × 1 × 12)	2.64	
	Veterinary Consultant	Rs. 25,000 - Rs.40,000	3.84 (32,000 × 1 × 12)	0.00	
E.3	Consultant-Finance/ Procurement	Rs. 14,000	1.86 (15,500 × 1 × 12)	1.68 (14,000 × 1 × 12)	
E.3.1	Consultant-Training/ Technical	Rs. 28,000	3.72 (31,000 × 1 × 12)	3.36 (28,000 × 1 × 12)	
E.3.2	Data Manager	Rs. 14,000 (State) Rs. 13,500 (District)	39.66 ([15,500 × 1 × 12] + [15,000 × 21× 12])	35.70 ([14,000 × 1 × 12] + [13,500 × 21× 12])	
E.3.3	Data Entry Operator	Rs. 8,500	26.22 (9,500 × 23 × 12)	23.46 (8,500 × 23 × 12)	
		Sub Total	**170.34**	**159.24**	
E.8	**Training**	As per NRHM Guidelines			
	One day training of Hospital Doctors		2.31 (210 doctors to be trained in 21 batches)	2.31	
	One day training of Hospital Pharmacist / Nurses		-		
	One day training of Medical College		0.11 (10 to be trained in 1	0.11	

FMR Code	Activity	Unit Cost	Amount Proposed (Rs. in lacs)	Amount Approved (Rs in lacs)	Remarks
	Doctors		batch)		
	One day training for Data Entry and analysis for Block Health Team		1.40 (150 to be trained in 10 batches)	1.40	
	One day training of DM & DEO		0.48 (42 to be trained in 4 batches)	0.48	
	Sub Total		**4.30**	**4.30**	
E. 4.1	Expenses on account of newly formed districts which are not yet under IDSP		**3.50** (for District Palwal)	**3.50**	The amount to be utilized for procurement of ICT equipments under IDSP as per Programme guidelines.
E.6	Information, Education, and Communication (IEC)		**30.97**	**Not approved**	.
	Total (1+2+3+4+5)		**280.51**	**238.44**	

1. The following heads will be approved once approval from EFC is obtained.

    - Remuneration of Veterinary Consultant @ Rs. 25,000 - Rs.40, 000

NATIONAL VECTOR BORNE DISEASE CONTROL PROGRAMME (NVBDCP)

TARGETS:

Indicator	2010	2011	2012
Annual Blood Examination Rate (ABER) i.e. percentage of population screened annually for Malaria	9.46%	12.02%	>11%
Annual Parasite Incidence (API) i.e. Malaria cases per 1000 population annually	0.76	1.35	<1
Sentinel Surveillance Hospital made functional for Dengue & Chikungunya	6	10	12
Sentinel Surveillance Hospital made functional for JE	3	3	3

Priority Area for Focused Attention

- The districts Bhiwani, Hisar, Sirsa and Yamuna Nagar need to be focussed for micro level monitoring to reduce API
- Ambala and Hisar zones need to be strengthened and their performance on entomologist surveillance to be monitored.
- Revised drug Policy for Malaria must be displayed in every PHC/CHC.
- Karnal, Bhiwani, Rohtak, Sonepat, Ambala, Gurgaon, Jind, Hissar, Faridabad, Thaneshwar, Sirsa, Kaitihal, Yamuna Nagar, Narenaul, Palawal, Panchkula and Panipat town covered under UMS should focus the attention on reduced of Malaria and other VBDs in the urban area.

Essential Conditionality for 2012-13

- Two review meetings in a year to be conducted under the Chairmanship of Principal Secretary (Health)/Mission Director - one before transmission period and second during transmission period.

Desirable Conditionality

- The proposal for recruitment of regular human resource vacancy required for NVBDCP should be initiated by end of 1st quarter.

MPWs (Male)	2544	1871	673	To be filled and redeployment of MPWs may be done as per priority

ROAD MAP FOR PRIORITY ACTION

- Surveillance & monitoring under NVBDCP is done throughout the year. Following salient points are to monitor the implementation of Programme activities in different quarters.
- April to June - 1st round spraying and observance of anti-malaria month to be ensured and accordingly funds availability at districts to be ensured
- July to Sept. - 2nd round of spray and observance of anti-dengue month.
- Oct. to Dec.-Review and Monitor physical and financial performance and preparation of next annual plan.
- Jan. to March - Consolidation of previous year's physical and financial achievement and plan for next year.

DETAILED BUDGET:

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
F.1	**DBS (Domestic Budgetary Support)**					
F.1.1	**Malaria**					
F.1.1.a	**MPW contractual**			288.00	0.00	To be met from state resources & recruitment process be initiated as discussed in NPCC.
	Lab Technicians (against vacancy)					**To be met from state resources**
	VBD Technical Supervisor (one for each block)					
	District VBD Consultant (one per district) (Non-Project States)					

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	State Consultant (Non – Project States), M&E Consultant (Medical Graduate with PH qualification) - VBD Consultant (preferably entomologist)					
	Accountant & Chowkidar/Office Assistant/			2.28	0.00	
F.1.1.b	**ASHA Incentive**			0.00	8.00	State should involve ASHA for Surveillance and provide incentives as per approval of sixth MSG. MD to look into the matter as discussed in NPCC.
F.1.1.c	Operational Cost including Material for MPWs & FTDs & micro slides			145.97	0.00	
	Spray Wages			0.00	0.00	
	Operational cost for IRS					
	Impregnation of Bed nets- for NE states					
F.1.1.d	Monitoring , Evaluation & Supervision & Epidemic			52.96	30.00	

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	Preparedness, NAMMIS including mobility					
F.1.1.e	IEC/BCC			27.17	8.00	State has proposed integrated IEC for malaria, JE and Dengue. The funds approved against JE and Dengue/Chikungunya may also be used.
F.1.1.f	PPP / NGO and Inter sectoral Convergence			0.00	0.00	
F.1.1.g	Training / Capacity Building			24.23	8.00	State has proposed integrated training for malaria, JE and Dengue. The funds approved against JE and Dengue/Chikungunya may also be used.
	Zonal Entomological units					
	Biological and Environmental Management					

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	through VHSC					
	Larvivorous Fish support			79.80	0.00	
	Total Malaria (DBS)			**620.41**	**54.00**	
F.1.2	**Dengue & Chikungunya**					
F.1.2.a	**Strengthening surveillance (As per GOI approval)**					
F.1.2.a(i)	Apex Referral Labs recurrent			4.58	0.00	Apex Lab at Chandigarh is already supported
F.1.2.a(ii)	Sentinel surveillance Hospital recurrent			10.00	10.00	
	ELISA facility to Sentinel Surv Labs @ Rs.0.50 lakh			24.30	15.00	Additional demand 9.30 is for setting of IDSP Lab which may be met from their budget.
F.1.2.b	Test kits (Nos.) to be supplied by GoI (kindly indicate numbers of ELISA based NS1 kit and Mac ELISA Kits required separately)					
F.1.2.c	Monitoring and evaluation				95.00	Funds for the important activities have not been proposed and only for
F.1.2.d	Epidemic containment					
	Case management					
	Vector Control & environmental management			110.00		

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
F.1.2.e	IEC BCC for Social Mobilization					vector control towards volunteers has been proposed. State may implement the activities as per budget allocation made. The funds can be utilized for any activities under DBS if the funds are in shortage. ● State to plan the activities as per the Mid Term Plan approved by CoS
	Inter-sectoral convergence					
F.1.2.f	Training including operational research					
	Total Dengue/Chikunguny a			**148.88**	**120.00**	
F.1.3	**Acute Encephalitis Syndrome (AES)/ Japanese Encephalitis (JE)**					
F.1.3.a	Diagnostics and Case Management				5.00	State should take up this activities which has not been

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
						proposed
F.1.3.b	IEC/BCC specific to J.E. in endemic areas				8.00	State has proposed integrated IEC & training for malaria, JE and Dengue. The funds approved against JE and Dengue/Chikungunya may also be used.
F.1.3.c	Capacity Building				8.00	
F.1.3.d	Monitoring and supervision				5.00	State should take up this activities which has not been proposed
F.1.3.e	Technical Malathion			14.00	14.00	
	Fogging Machine					
	Operational costs for malathion fogging					
	Operational Research					
	Rehabilitation Setup for selected endemic districts					
	ICU Establishment in endemic districts					
	ASHA Insentivization for sensitizing community					

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	Other Charges for Training /Workshop Meeting & payment to NIV towards JE kits at Head Quarter					
	Total AES/JE			**14.00**	**40.00**	Training & IEC not shown in JE by state but clubbed in Malaria. Discussed in NPCC and state was advised to segregate and show separately as it will be specific that disease. Integration may be done at execution level.
F.1.4	**Lymphatic Filariasis**					
F.1.4.a	State Task Force, State Technical Advisory Committee meeting, printing of forms/registers, mobility support, district coordination meeting, sensitization of media etc., morbidity management, monitoring & supervision and			**Not applicable**		

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	mobility support for Rapid Response Team and contingency support					
F.1.4.b	Microfilaria Survey					
F.1.4.c	Monitoring & Evaluation (Assessment)					
F.1.4.d	Training District Officers, PHC MOs, Paramedical staff, drug distributors					
F.1.4.e	BCC/Advocacy/IEC at centre, state, district/PHC, sub centre					
F.1.4.f	Honorarium for Drug Distribution including ASHAs and supervisors					
	Verification and validation for stoppage of MDA in LF endemic districts					
	a) Additional MF Survey					
	b) ICT Survey					
	c) ICT Cost					
	Verification of LF endemicity in non-endemic districts					
	a) LY & Hy Survey in 350 distt					
	b) Mf Survey in Non-endemic distt					

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	c) ICT survey in 200 distt					
	Post-MDA surveillance					
	Total Lymphatic Filariasis			**0.00**	**0.00**	
F.1.5	**Kala-azar**					
F.1.5	Case search/ Camp Approach			**Not applicable**		
F.1.5.a	Spray Pumps & accessories					
F.1.5.b	Operational cost for spray including spray wages					
F.1.5.c	Mobility/POL/supervision					
F.1.5.d	Monitoring & Evaluation					
F.1.5.e	Training for spraying					
F.1.5.f	IEC/ BCC/ Advocacy					
	Total Kala-azar			**0.00**	**0.00**	
	Total (DBS)			**783.29**	**214.00**	
F.2	**Externally aided component**					
F.2.a	**World Bank support for Malaria (Identified state)**			**Not applicable**		
F.2.b	Human Resource					
F.2.c	Training /Capacity building					
F.2.d	Mobility support for Monitoring Supervision & Evaluation including printing of format & review meetings, Reporting format					

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	(for printing formats)					
	Kala-azar World Bank assisted Project					
F.2.e	Human resource					
F.2.f	Capacity building					
F.2.g	Mobility					
F.3	**GFATM support for Malaria (NE states)**					
F.3.a	Project Management Unit including human resource of N.E. states					
F.3.b	Training/Capacity Building					
F.3.c	Planning and Administration(Office expenses recurring expenses, Office automation , printing and stationary for running of project)					
F.3.d	Monitoring Supervision (supervisory visits including travel expenses, etc) including printing of format and review meetings,					
F.3.e	IEC / BCC activities as per the project					

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
F.3.f	Operational cost for treatment of bednet and Infrastructure and Other Equipment (Computer Laptops, printers, Motor cycles for MTS)					
	Total : EAC component			**0.00**	**0.00**	
F.4	**Any Other Items (Please Specify)**			**0.00**	**0.00**	
F.5	**Operational costs (mobility, Review Meeting, communication, formats & reports)**			**0.00**	**0.00**	
	Grand total for cash assistance under NVBDCP (DBS + EAC)			**783.29**	**214.00**	
F.6	**Cash grant for decentralized commodities**					
F.6.a	Chloroquine phosphate tablets			80.00		
F.6.b	Primaquine tablets 7.5 mg			5.00		
F.6.c	Primaquine tablets 2.5 mg					
F.6.d	Quinine sulphate tablets					
F.6.e	Quinine Injections				111.00	
F.6.f	DEC 100 mg tablets			0.00		
F.6.g	Albendazole 400 mg tablets			0.00		
F.6.h	Dengue NS1 antigen kit					
F.6.i	Temephos, Bti (AS) / Bti (wp) (for polluted			55.00		

FMR Code	Component (Sub-Component)	Unit Cost (wherever applicable)	Physical target/ Deliverables	Amount Proposed	Amount Approved	Remarks
	& non polluted water)					
F.6.j	Pyrethrum extract 2% for spare spray			13.00		
F.6.k	Any Other Items (Please Specify)					
	ACT (For Non Project states)			2.00		
	RDT Malaria – bi-valent (For Non Project states)			0.00		
	Total grant for decentralized commodities			**155.00**	**111.00**	
	Grand Total for grant-in-aid under NVBDCP			**938.29**	**325.00**	
	Commodity Grants				**0.00**	
	Total NVBDCP Cash + Commodity			**938.29**	**325.00**	

NATIONAL LEPROSY ERADICATION PROGRAMME (NLEP)

Goals & Target

Goals & Target	September'12	March 2013
Elimination at Sate level	NA	NA
Elimination at District level	NA	NA
Case detection through ASHA	NA	NA
Special activity plan in blocks	NA	NA
MCR footwear procurement & supply	486	972
RCS	0	3
Development of leprosy expertise	50% of Plan	100% of Plan
Treatment Completion Rate assessment for 2011-12	Completed	-
Audited Report for the year 2011-12	Completed	-
Expenditure incurred against approved plan budget	50%	100%

NA- Not Applicable

DETAILED BUDGET:

FMR Code	Activity proposed		Unit Cost (In Rupees)	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 1.	**Improved early case detection**						
G 1.1	Incentive to ASHA	MB	500	0			
		PB	300	0			
G1.1 a	Sensitization of ASHA		50	2000	1.05	1.00	
G 1.2	Specific -plan for High Endemic Distrcts						
G 2	**Improved case management**						
G 2.1	DPMR Services						
	MCR footwear, Aids and appliances, Welfare allowance to BPL patients for RCS, Support to govt. institutions for RCS		MCR - 250/- Aids/Appliance - 12500 Welfare /RCS - 10,000	972 15 Distt. 3	2.23 2.01 0.30	2.23 1.00 0.30	
G 2.2	Urban L:eprosy Control						
	Mega city - , Medium city (1) -1 , Med. City (2)-0 Township -19		Meg - 280000 Med (1)- 120000 Med. (2) - 236000 Town - 57000	0 1 0 19	0 1.32 0 14.62	0 1.20 0 10.83	
G 2.3	Material & Supplies						
G 2.3 i	Supportive drugs, lab. reagents & equipments and printing works		52,000	21	7.83	7.83	

FMR Code	Activity proposed		Unit Cost (In Rupees)	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 2.4	NGO - SET Scheme		500000	2	11.00	3.00	
G 3	**Stigma Reduced**						
G 3.1	Mass media, Outdoor media, Rural media, Advocacy media		50,000	21	11.50	10.50	
G 4.	**Development of Leprosy Expertise sustained**						As NLEP rates are very low, higher rates agreed in keeping with other Programmes. Training needs not properly planned
G 4.1	Training of new MO		60000	-	-	-	
G 4.2	Refresher training of MO		40000	631	8.40	4.20	
G 4.3	Training to New H.S/H.W.		30000	631	6.3	3.15	
G 4.4	Other training - Physiotherapist		30000	-	-	-	
G 4.5	Training to Lab. Tech.		30000	-	-	-	
G 4.6	Management training for District Nucleus Team		30000	21	0.30	0.30	
G 5.	**Monitoring, Supervision and Evaluation System improved**						
G 5.1	Travel Cost and Review Meeting						
G 5.1 i	travel expenses - Contractual Staff at State level		50000	1	0.50	0.50	
G 5.1 ii	travel expenses - Contractual Staff at District level		15000	21	3.15	3.15	
G 5.1 iii	Review meetings		20000	4	1.00	0.80	
G 5.2	Office Operation & Maintenance						
G 5.2 i	Office operation - State Cell		38000	1	0.44	0.38	

FMR Code	Activity proposed		Unit Cost (In Rupees)	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 5.2 ii	Office operation - District Cell		18000	21	4.35	3.78	
G 5.2 iii	Office equipment maint. State		30000	1	0.35	0.30	
G 5.3	Consumables						
G 5.3 i	State Cell		28000	1	0.32	0.28	
G 5.3 ii	District Cell		14000	21	3.38	2.94	
G 5.4	Vehicle Hiring and POL						
G 5.4 i	State Cell		85000	2	0.94	0.94	
G 5.4 ii	District Cell		75000	21	14.40	14.40	
G 6.	**Programme Management ensured**						
G 6.1	G 6.1 Contractual Staff at State level						
G 6.1 i	SMO	1	40000	x12	4.80	4.80	
G 6.1 ii	BFO cum Admn. Officer	1	30000	x12	3.60	3.60	
G 6.1 iii	Admn. Asstt.	1	16000	x12	1.92	1.92	
G 6.1 iv	DEO	1	12000	x12	1.44	1.44	
G 6.1 v	Driver		11000				
G 6.2	Contractual Staff at Disrrict level						
G 6.2 i	Driver	12	11000	x12	15.84	15.84	
G 6.2 ii	Contractual Staff in selected States, NMS	**21**	16000	**x12**	42.24	40.32	
G 7.	**Others**						

FMR Code	Activity proposed		Unit Cost (In Rupees)	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 7.1	Travel expenses for regular staff for specific Programme / training need, awards etc				5.24	2.00	
	TOTAL				**170.77**	**142.93**	
	Additionality in Annual Plan						
	NRHM -peon at sls				0.84	0.84	
	WHO/ILEP/ICMR/Others				-	-	

NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS (NPCB)

ROAD MAP FOR PRIORITY ACTION

1. The emphasis will be on primary health care All vision centers will be established immediately after receipt of grant with PMOA is in position to facilitate eye care delivery at the primary health centre.
2. Eye Bank to be established only in Government Hospital and Government Medical College. The names and address may be furnished in the reports submitted to GOI. The amount will not be split up to more than 1 eye bank.
3. Management of Health Society be restricted within Rs.14 lakh only.
4. Payment of Rs.750/- will be made to NGO per operated case if the NGO has used all facilities of their own like Drugs & Consumables, Sutures, Spectacles, Transports/POL, organization and publicity and IOL, Viscoelastics & addl. Consumables including their own Eye Hospital and Doctors.
5. For organizing and motivating identified persons & transporting them to Govt. / NGO fixed facilities, the NGO would be eligible for support not exceeding Rs.175/- per operated case. (Transport/POL and organization & publicity.)
6. No payment will be released towards reimbursement to be made to NGOs w. e. f. 01.04.2012 if data entry on Management Information System (MIS) is not completed by them.
7. Full details of the NGO funded be provided including the facilities created and the free operations being done by them in lieu thereof. The amount will be released for only one NGO and amount will not be split up into more than one NGO.

DETAILED BUDGET:

ACTIVITY		PHYSICAL TARGET	FUNDS REQUESTED	FUNDS APPROVED AS PER GUIDELINES	REMARKS
FMR CODE.					
H	**Recurring Grant-in-aid**				
H 1.1	For Free Cataract Operation @ Rs.750/- per case	170000	550.00	505.00	Approved on reimbursement basis
H 1.2	Other Eye Diseases@ Rs.1000/-	1500	15.00	15.00	Approved
H 1.3	School Eye Screening Programme@ Rs.200/- per case	10000	21.00	20.00	Approved
H 1.4	Blindness Survey		5.00	0	Not approved
H 1.5	Private Practitioners @as per NGO norms				
H 1.6	Management of State Health Society and Distt. Health Society Remuneration (salary , review meeting, hiring of vehicle and Other Activities & Contingency) @ Rs.14 lakh/ Rs.7 lakh depending on the size of state		16.00	14.00	Approved
H 1.7	Recurring GIA to Eye Donation Centers @ Rs.1000/- per pair		2.00	2.00	Approved
H 1.8	Eye Ball Collection by Eye Bank @ Rs.1500/- per pair	1200	20.00	10.00	Approved
H 1.9	Training PMOA and MIS training		12.00	4.00	Approved training of PMOA and MIS training for 1 time
H 1.10	IEC, Eye Donation Fortnight, World Sight Day & awareness Programme in		35.00	21.00	Approved

ACTIVITY		PHYSICAL TARGET	FUNDS REQUESTED	FUNDS APPROVED AS PER GUIDELINES	REMARKS
	state & districts etc				
H 1.11	Procurement of Ophthalmic Equipment		115.00	115.00	Approved for purchase 50% of the District
H 1.12	Maintenance of Ophthalmic Equipments		0.00	0	
H.2	**Non Recurring Grant-in-aid**				
H.2.1	For RIO (new) @ Rs.60 lakh		0.00	0	
H.2.2	For Medical College@ Rs.40 lakh		0.00	0	
H.2.3	For vision Centre @ Rs.50000/-		10.00	10.00	Approved for 20 Vision Centre
H.2.4	For Eye Bank @ Rs.15 lakh	2	30.00	0	Not Approved
H.2.5	For Eye Donation Centre @ Rs.1 lakh	1	1.00	1.00	Approved for 1 EDC
H.2.6	For NGOs @ Rs.30 lakh	1	30.00	0	Not Approved
H.2.7	For Eye Wards and Eye OTS @ Rs.75 lakh		0.00	0	
H.2.8	For Mobile Ophthalmic Units with tele-network @ Rs.60 lakh		0.00	0	
H.2.9	Grant-in-aid for strengthening of Distt. Hospitals @ Rs.20 lakh	3	60.00	40.00	Approved for 2 Distt Hospital
H.2.10	Grant-in-aid for strengthening of Sub Divisional. Hospitals@ Rs.5 lakh	10	50.00	35.00	Approved for 7 Sub Distt. Hospital
H.3	**Contractual Man Power**				
H.3.1	Ophthalmic Surgeon@ Rs.25000/- p.m	10	30.00	30.00	Approved
H.3.2	Ophthalmic Assistant @ Rs.8000/- p.m	10	9.60	9.60	Approved
H.3.3	Eye Donation Counsellors @ Rs.10000/- p.m.	5	6.00	6.00	Approved
	Total		**1017.60**	**837.60**	

*** The unutilized funds in any of the above said recurring components may be used in any other recurring component.**

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME (RNTCP)

TARGETS

Target for Annualized New Smear Positive Case Detection rate per lakh population (April 2012 to September 2012)	**Target for Annualized New Smear Positive Case Detection rate per lakh population** (October 2012 to March 2013)	**Target for Treatment Success rate** (April 2012 to September 2012)	**Target for Treatment Success rate** (October 2012 to March 2013)
70%	**80%**	**88%**	**90%**

S.No	Indicators	2011	2012
1	Annual Suspects Examined Per Lakh Population	178	180
2	Annual Smear Positive Case Notification Rate (%)	71	70
3	Treatment Success Rate among new smear positive cases	86	86
4	Default Rate among New Smear Positive TB cases	6	4
5	Treatment Success rate among Smear Positive Re-treatment cases	71	85

ROAD MAP FOR PRIORITY ACTION:

- All the Key RNTCP contractual staff positions at State/Districts should be filled and ensuring timely payment of salaries
- The State level RNTCP review meetings to be chaired by Health Secretary/Mission Director (NRHM) at least once in a quarter
- To conduct State TB control society meeting, State Coordination committee meeting (TBHIV) atleast once in a quarter
- Scaling up of DOTS Plus services as per the State DOTS Plus action plan

- Conduct ACSM/Training activities at State/Districts as per the State annual action plan
- To involve Private Practitioners and NGOs in the RNTCP
- Timely payment of DOT Providers honorarium at Districts
- Strengthening Supervision and Monitoring at all levels
- The state could be approved more funds based on expenditure pattern in the first six months

DETAILED BUDGET:

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
I.1	Civil works	As per Revised Norms and Basis of Costing for RNTCP	1) Civil work Up gradation and maintenance completed as planned;	39.92	39.92	Approved 100% .Proposal for new DOTS Plus site, 4 new DTC buildings, 2 new TUs, 20 DMCs are approved.
I.2	Laboratory materials	As per Revised Norms and Basis of Costing for RNTCP	1) Sputum of TB Suspects Examined per lac population per quarter; 2) All districts subjected to IRL On Site Evaluation and Panel Testing in the year; 3) IRLs	51.16	46.40	Approved 100% amount budgeted for district level lab consumables . Approved 65% for the state level lab.

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
			accredited and functioning optimally;			
I.3	Honorarium	As per Revised Norms and Basis of Costing for RNTCP	1) All eligible Community DOT Providers are paid honorarium in all districts in the FY;	31.96	29.94	Approved 100% budgeted for honorarium for DOTS and DOTS Plus providers. Approved 60% budgeted for travel assistance of MDR TB patients.
I.4	IEC/ Publicity	As per Revised Norms and Basis of Costing for RNTCP	1) All IEC/ACSM activities proposed in PIP completed; 2) Increase in case detection and improved case holding;	31.32	25.00	Approval 80% of the proposal. Approved Rs 4.20 LAKHS as honorarium for communication facilitators.
I.5	Equipment maintenance	As per Revised Norms and Basis of	1) Maintenance of Office Equipments	20.22	18.00	Approved 60% of the budget proposed for equipment

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
		Costing for RNTCP	at State/Districts and IRL equipments completed as planned; 2) All BMs are in functional condition;			maintenance and 80% for binocular microscope and 100% for IRL equipment maintenance based on the expenditure.
I.6	Training	As per Revised Norms and Basis of Costing for RNTCP	1) Induction training, Update and Re-training of all cadre of staff completed as planned;	23.29	21.09	Approved as per the norms.
I.7	Vehicle maintenance	As per Revised Norms and Basis of Costing for RNTCP	1) All 4 wheelers and 2 wheelers in the state are in running condition and maintained;	18.75	18.75	Approved 100%.
I.8	Vehicle hiring	As per Revised Norms and Basis of Costing for	1) Increase in supervisory visit of DTOs	74.37	30.00	Approval limited as the previous utilization was low.

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
		RNTCP	and MOTCs; 2) Increase in case detection and improved case holding;			
I.9	NGO/PP support	As per Revised Norms and Basis of Costing for RNTCP	1) Increase in number of NGOs/PPs involved in signed schemes of RNTCP; 2) Contribution of NGOs/PPS in case detection and provision of DOT	59.45	45.00	Approved 75% of the proposed amount.
I.10	Miscellaneous	As per Revised Norms and Basis of Costing for RNTCP	1) All activities proposed under miscellaneous head in PIP completed	50.53	46.00	Approved maximum amount permissible as per the norm. Not approved salary of contractual staff from this head.

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
I.11	Contractual services	As per Revised Norms and Basis of Costing for RNTCP	1) All contractual staff appointed and paid regularly as planned;	485.13	483.93	Amount approved permissible as per the norm. The TA for the State TB HIV coordinator should be met form the miscellaneous head.
I.12	Printing	As per Revised Norms and Basis of Costing for RNTCP	1) All printing activities at state and district level completed as planned;	38.78	19.39	Approved 50%.
I.13	Research and studies	As per Revised Norms and Basis of Costing for RNTCP	1) Proposed Research has been initiated or completed in the FY as planned;	0	0	
I.14	Medical Colleges	As per Revised Norms and Basis of Costing for RNTCP	1) All activities proposed under Medical Colleges head in PIP completed;	31.60	50.60	Approved 100% as the proposal is within the norm. Allotted Rs 19,00,000 over and above the proposed

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
						amount to cover the organizational expenses of ZTF North Zone 2012.
I.15	Procurement –vehicles	As per Revised Norms and Basis of Costing for RNTCP	1) Procurement of vehicles completed as planned;			Approved 100%. The proposal is for 8 Two Wheelers are replacement during the year and 2 new two wheelers for 2 new TUs to be opened during the year are approved.
	Four wheeler			0	0	
	Two Wheeler			5.00	5.00	
I.16	Procurement – equipment	As per Revised Norms and Basis of Costing for RNTCP	1) Procurement of equipments completed as planned;	5.20	4.20	The proposal for computer to TB –HIV coordinator, fire extinguishers and exhaust fans for SDS, not approved as these are not permissible as per the norm.
I.17	Tribal Action Plan					
Total (A)				**966.71**	**883.25**	

FMR Code	Category of Expenditure	Unit cost (wherever applicable)	Physical target/expected output	Proposed Amount	Approved Budget	Remarks
B22.4	Additionality funds from NRHM (B)			55.38	52.32	
Grand Total (A+B)						**Rs. 935.58**

ANNEXURES

Annex 1

Consolidated Approval under RCH Flexipool for FY 2012-13

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.1	**MATERNAL HEALTH**					
A.1.1	**Operationalise facilities**					
A.1.1.1	Operationalise FRUs		39 FRUs in 21 districts	21.00	5.25	Approved at 25% of the proposed amount.
A.1.1.2	Operationalise 24x7 PHCs					
A.1.1.3	MTP services at health facilities	50000.00	21 districts.	10.50	2.63	Approved at 25% of the proposed amount .This amount has been proposed for monitoring and supervision of MTP services

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						but should be utilised for comprehen sive monitoring and not for standalone programm es
A.1.1 .4	RTI/STI services at health facilities					
A.1.1 .5	Operationalise Sub-centres					
A.1.2	**Referral Transport**					
A.1.3	**Integrated outreach RCH services**					
A.1.3 .1	RCH Outreach Camps/ Others					
A.1.3 .2	Monthly Village Health and Nutrition Days					
A.1.4	**Janani Suraksha Yojana / JSY**					
A.1.4 .1	Home Deliveries (Rural)	500.00	11077	55.38	55.39	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Home Deliveries(Urban)	500.00	4747	23.74	23.74	Approved
A.1.4.2	Institutional Deliveries(Urban)	600.00	18990	113.94	113.94	Approved
	Institutional Deliveries(Rural)	700.00	44309	310.16	310.16	Approved
A.1.4.2.c	C-sections					
A.1.4.3	Administrative expenses					
A.1.4.4	Incentive to ASHAs	200.00	63299	126.60	126.60	Approved
A.1.5	Maternal Death Review	1000.00	850	6.35	3.18	Approved as per GOI rate of Rs 750 per death .(Rs 50 for informer,Rs 300 for field verification and Rs 200X2 for incentive to relative)
A.1.6	Other strategies/					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	activities					
1.7	***JSSK- Janani Shishu Surakhsha Karyakram***					
A.1.7.1	Drugs & Consumables (other than reflected in Procurement)					
A.1.7.1.1	Drugs and Consumables for Normal Deliveries	350.00	255000	787.50	787.50	Approved for 225000 normal deliveries
A.1.7.1.2	Drugs and Consumables for Caesarean Deliveries	1000.00	15000	150.00	150.00	Approved
A1.7.2	Diagnostic for 2.55 lacs mothers	200.00	255000	100.00	100.00	Approved. For the purposes of Diagnostic i.e. Hb., Urine, ABORH, VDRL, Ultrasound etc. a provision of Rs.200/- per mother for 2.55

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						lacs mother is required. However, the expenditure on the diagnostics (reagents etc.) will be done under the drugs & consumables head. Therefore, a provision of Rs. 100.00 lacs is kept under this head for reimbursing the investigations which are not available in the Govt. Sector at this point of time.
A.1.7	Blood Transfusion					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
.3						
A.1.7.4	Diet (3 days for Normal Delivery and 7 days for Caesarean)	100.00		412.60	412.60	Approved
A.1.7.5	Referral Transport for mothers(Referral for 2.55 lacs mothers 2.55 lacs beneficiaries x Rs.500 (Rs 250 for home to facility and Rs 250 for drop back)- =1275.00 lacs. (Provision of 70% budget is made)	500.00	255000	892.50	892.50	Inter facility transfers to be done by State ambulances.
	Sub-total Maternal Health (excluding JSY)			**2380.45**	**2353.66**	
	Sub-total JSY			**629.82**	**629.82**	
A.2	**CHILD HEALTH**					
A.2.1	IMNCI					
2.1.1	Prepare detailed operational plan for IMNCI across districts (Monitoring & supervision of	Rs.50,000/- per district for 21 districts+ Rs.50000/-		11.00	11.00	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	IMNCI activities will be done by DIO, DTO Pediatrician, MO PHC/ CHC and LHV at district level.	for State level)				
2.1.2	Implementation of IMNCI activities in districts					
2.1.3	Monitor progress against plan; follow up with training, procurement, etc **(Meeting of State level Committee twice in a year)**	25000.00	2	0.50	0.50	Approved
	Half Yearly meeting of District level Committee (2 meetings per district for 21 district)	5000 / meeting	2/ district	2.10	2.10	Approved
2.1.4	Pre-service IMNCI activities in medical colleges, nursing colleges, and ANMTCs (Printing of 6000 IMNCI and IMNCI supervisory booklets)	100/booklet (IMNCI) 100/booklet (Supervisory booklet)	5000 1000	6.00	6.00	Approved
A.2.2	***Facility Based***					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Newborn Care/FBNC (SNCU, NBSU, NBCC)					
2.2.1	Prepare detailed operational plan for FBNC across districts (including training, BCC/IEC, drugs and supplies, etc.; cost of plan meeting should be kept).					
	Coordination workshops on newborn care and immunization (Arranging of workshop and honorarium for faculty from NNF, PGI, AIIMS, IMA, IAP and AIPGMER etc.) @ Rs. 50000/- per workshop for 2 workshops	50000.00	2	1.00	1.00	Approved
	Monitor progress against plan; follow up with training, procurement, etc					
	Consumables for computer and			22.00		Not

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	stationery for SNCUs @ Rs. 1.00/- lac for 21 districts + Rs.1.00 lacs for Printing SNCU case sheets					Approved
	Mother & newborn care kit @ 400 per kit x 1 kits x 25,000 deliveries.			100.00	100.00	Approved. On the condition that mother stays in the health facility at least for 48 hrs after delivery.
	Funds for mobile charges @Rs. 500/- pm for 2 mobiles i.e. 500x2x12			0.12	0.00	Not Approved
A.2.3	**Home Based Newborn Care/HBNC**					
	Printing of PNC Card and referral cards Rs.3/- per card x 150000 cards	3.00	150000	4.50	4.50	Approved
A.2.4	**Infant and Young Child Feeding/IYCF**					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
2.4.1	Prepare and disseminate guidelines for IYCF.					
	Printing of 150000 booklets @ Rs. 2/- per booklet (IYCF)	2.00	150000	3.00	3.00	Approved
	Printing of IYCF guidelines 2010 Booklets	5.00	5000	0.25	0.25	Approved
2.4.2	Prepare detailed operational plan for IYCF across districts (including training, BCC/IEC, drugs and supplies, etc.; cost of plan meeting should be kept). One day orientation workshop of Medical Officers on IYCF guidelines 2010 & IMS act guidelines @ 1 in each district	10000.00	21	2.10	2.10	Approved
2.4.3	Monitor progress against plan;follow up with training, procurement, etc.					
2.5	***Care of Sick Children and Severe***					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Malnutrition at facilities (Prevention and management of anemia and malnutrition)					
2.5.1.	Prepare and disseminate guidelines.					
2.5.2	Prepare detailed operational plan for care of sick children and severe malnutrition at FRUs, across districts (cost of plan meeting should be kept).					
	Establishment of 1 NRC			10.26	10.26	Approved
A.2.7	Other strategies/ activities					
	Quarterly review meetings of 30 participants from the district level officers, which includes TA/ DA contingency @ Rs.	1250.00	30	1.50	1.50	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	1250/- per participant for 30 participants					
	Quarterly review & feedback meeting exclusive for Child health at district level with one block MO, ICDS, CDPO and other stake holder @Rs. 100/- per participants per meeting expenses (lunch, organizational expenses) for 20 participants i.e. 20*100*4*21	100.00	20	1.68	1.68	Approved
A.2.8	Infant Death Audit			28.40	28.40	Approved
A.2.9	Incentive to ASHA under Child Health					
A.2.10	JSSK (for Sick neonates up to 30 days)					
A.2.10.1	Drugs & Consumables (other than reflected in Procurement)	200.00	50000	100.00	50.00	Approved for 25000 sick newborns expected in

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						the State.(10% of live births)
A.2.10.2	Diagnostics					
A.2.10.3	Referral Transport for sick new borns(Referral for 50000 sick new borns (Rs.500/- x 50000 Sick New Borns = Rs.250.00 Lacs) (Provision of 50% budget is made)	500.00	50000	125.00	62.50	Approved for 50% of total budget. Numbers revised at 25000 sick newborns (500*25000)/2
	Sub-total Child Health			**419.41**	**284.79**	
A.3	**FAMILY PLANNING**					
A.3.1	**Terminal/ Limiting Methods**					
A.3.1.1	Dissemination of manuals on sterilisation standards & QA of sterilisation services(Periodic: QAC meetings)	4 state QAC, 48 DQAC and 280 Quality circles meetings	332 QAC meetings	2.48	2.48	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
3.1.1.1	*Prepare operational plan for provision of sterilisation services at facilities (fixed day) as well as camps , review meetings* - **(Review meetings on Family Planning performance and initiatives at the state and district level(A 3.1.1 a))**	Rs. 25,000/- at State HQ & Rs.6 000/- at Distt. Level (One @ Rs.3.00 lacs) State - 12 meetings District - 252 meeting GoI - 1 workshops	265	24.12	21.12	Approved
	Monitoring and supervisory visits to districts facilities	DHS (FW) & DD (FW) - 48 visits CS - 504 visists DyCS - 1092 visits	DHS& DD Rs 6000 CS-Rs 500 DyCS-Rs 500	10.86	8.46	State level approval @ Rs. 1000/ visit (against proposed Rs 6000) and remaining approved as proposed by the state.
	Orientation workshop on technical manuals of	State -1 District- 21	State Rs 1 lakh District Rs	11.50	11.50	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	FP viz. sterilization standards & QA, FDS, SOP for camps, Insurance etc.		50000			
3.1.1 .2	*Implementation of sterilisation services by districts(including fixed day services and PP sterilization)*					
A.3.1 .2	Female Sterilization camps (Budget limited to Rs.100 lacs for time being)	10000.00	1365	100.00	95.55	Proposed rate has been revised to Rs. 7000/ camp. Accordingly approved.
A.3.1 .3	NSV camps	20000.00	630	100.00	94.50	Proposed rate has been revised to Rs. 15000/ camp. Accordingly approved
A.3.1 .4	Compensation for female sterilisation	APL-Rs. 650/- per case BPL-Rs.1000/-	57634 32266	620.80	697.28	Budget (APL Rs 374.62 and BPL Rs 322.66

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
		per cash				lakhs) has been reworked as per GoI norm and accordingly approved
A.3.1.5	Compensation for male sterilisation	1500.00	20000	300.00	300.00	Approved
A.3.1.6	Accreditation of private providers for sterilisation services	50000.00	21	10.50	5.25	Approved
A.3.2.3	Accreditation of private providers/NGOs for IUCD/PPIUCD services	1000/ PAHF	1500	15.00	0.00	Not Approved. Display boards/ wall writings/ Performa/ flip charts/reporting/ orientations /review meetings
A.3.2	**Spacing Methods**					
A.3.2.1	IUD camps					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
3.2.2	*Implementation of IUD services by districts (including fixed day services at SHC and PHC)- Plan for providing FDS (Fixed Day Static) IUD services at health facilities in districts (at least 2 days in a week at SHC and PHC level)*	200000.00	21	42.00	21.00	Approved
3.2.2.1	Provide IUD services at health facilities / compensation	20.00	264000 IUCD Insertions	52.80	52.80	Approved
3.2.2.2	PPIUCD services					
A.3.2.4	Social Marketing of contraceptives					
	Soial marketing of contraceptives including delivery of contraceptives at door step	3 lakh / district ,2 lakh / HQ	6	20.00	5.00	Approved
A.3.2.5	Contraceptive Update seminars					
A.3.3	POL for Family Planning/ Others					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.3.4	Repairs of Laparoscopes	50000.00	21	10.50	10.50	Approved
A.3.5.	Other strategies/ activities					
3.5.1	*Monitor progress, quality and utilisation of services (both terminal and spacing methods) including complications / deaths / failure cases.* *Note: cost of insurance / failure and death compensation NOT to be booked here*					
3.5.2	*Performance reward if any*			10.00	10.00	Best performance in delivery of services in all components of FP will be rewarded & all stake holders will

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						be identified in Govt. as well PAHF awards /reward will be Given by State Celebrities. Approved
	World Population Day' celebration (such as mobility, IEC activities etc.): funds earmarked for district and block level activities	State - Rs. 5.00 lakhs District - Rs. 5.00 lakhs Block - Rs. 10000	21 districts + 111 CHC/ block + State		121.10	Proposed by State in consultation with GOI.
	Mobile Surgical Teams 3 per District to provide F.P services	Rs 100000/ district	21	21.00	21.00	Approved
	Procurements					
	Procurement of laproscope	500000.00	40	100.00		Shift to MFP
	NSV Kits	1000.00	2500	25.00		
	IUCD insertion Kits	2000.00	1300	26.00		

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Kelly's Forceps	425.00	1000	4.25		
	Minilap Set	2500.00	100	2.50		
	Sub-total Family Planning (excluding compensation)			**435.71**	**332.96**	
	Sub-total Sterilisation and IUD compensation & NSV camps			**1073.60**	**1144.58**	
A.4	**ADOLESCENT REPRODUCTIVE AND SEXUAL HEALTH / ARSH**					
A.4.1	Adolescent services at health facilities					
4.1.1	Disseminate ARSH guidelines.					
4.1.2	Establishment of new clinics at DH level	50000.00	21		10.50	Approved
4.1.3	Establishment of new clinics at CHC/PHC level					
4.1.3	Operating expenses for existing	5000.00	21		1.50	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
.1	clinics(Contingency)					
4.1.3 .2	Salary to new Counselors in District Hospitals					
4.1.3 .3	Honorarium for existing Counselors at Clinics at AHs & CHCs	12500.00	21		26.25	Approved
4.1.4 .	Outreach activities including peer educators					
	Honorarium for ICTCs/FICT for outreach activities	250.00	105		3.15	Approved
	Honorarium for Peer Educators	100.00	12000		116.00	Approved
	Youth Festivals/Mela	50000.00	21		10.50	Approved
	Monitoring cost for state level officers – visit to districts					
	Monitoring cost at district level					
	Evaluation of ARSH Programme					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Printing of formats for Nodal Teachers				10.00	Approved
	Convergence - Quarterly Joint Review meetings at state level				2.40	Approved
A.4.2	**School Health Programme**					
4.2.1	Prepare and disseminate guidelines for School Health Programme.					
	Development of guideline/training module/SOPs for School health programme involving expert agency	603843			6.04	Approved .
	Printing of 50000 School Health manuals	24	50000		12.00	Approved Document needs to be developed in local language. Should include separate sections as

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						per the need to early, mid and late adolescent students in classes 6-12th.
	Printing of 600 School Health SOPs for each PHCs/CHCs/DH/Directorate officers	80	600		0.48	Approved.
4.2.2	Prepare detailed operational plan for School Health Programme across districts (cost of plan meeting should be kept)					
	37576 visits to schools by School Health Officers in 427 PHCs/CHCs/DHs x 8 visits per month x 11 months	150	37576		56.36	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	IBSY Children fund. Initial Contribution of Rs.1 Crore (50% state, 50% Center)				50.00	Approved State to give unit cost, unit of measure, disease pattern from data as reflected in the write-up for FY 2011-2012. Linkage with RSBY or state insurance is not proposed as well.
		38000 disability certification	15		5.70	Approved
		38000 disability data entry	2		0.76	Approved
4.2.3	Implementation of School Health					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Programme by districts.					
4.2.4	Monitor progress and quality of services.					
	50000 School Health registers to be printed				12.50	Approved Structure of school health registers to be revised as per suggestion mentioned in Tour report of consultant school health programme. The registers also needs to include BMI for age and Anemia level follow up at individual student

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						level.
	3840537 school health data to be computerised				38.41	Approved
4.3	***Other strategies/activities (please specify) Details of the Menstrual Hygiene project to be provided and budgeted under this head***					
4.3.1	Menstrual Hygiene					
4.3.2	Weekly Iron Folic Acid Supplementation (WIFS) Scheme					
	Sub-total ARSH			**445.07**	**362.55**	
A.5	**URBAN RCH**					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
5.1	***Urban RCH Services*** **(Budget for 2 Urban FRUs in Faridabad)**		2	106.98		Staffing pattern and salary to remain same as last year. Senior MO,2 Mos, dental surgeon,2 pharmacists ,radiographer, nursing staff and other support staff in each FRU.
5.1.1	Identification of urban areas / mapping of urban slums					
5.1.2.	Prepare operational plan for urban RCH					
5.1.3	Implementation of Urban RCH plan/ activities					
5.1.3	Recruitment and training of link					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
.1	workers for urban slums					
5.1.3 .2	Strengthening of urban health posts and urban health centres					
5.1.3 .3	Provide RCH services (please specify)					
5.1.4	Monitor progress, quality and utilisation of services.					
5.1.5	***Other Urban RCH strategies/activities (please specify)***					
	Budget for 88 existing Centres including 11 (24x7) Delivery Centres		88	970.83		Activity approved for Rent and staff salary at same rates . No new sub activity and manpower approved.

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Sub-total Urban Health			**1077.81**	**920.00**	
A.6	**TRIBAL RCH**					
6.1	***Tribal RCH services***					
6.1.2	Prepare operational plan for tribal RCH					
6.1.3	Implementation of Tribal RCH activities					
6.1.4	Monitor progress, quality and utilisation of services.					
6.1.5	**Other Tribal RCH strategies/activities (please specify)**					
	Sub-total Tribal Health			**0.00**	**0.00**	
A.7	**PNDT & Sex Ratio**					
A.7.1.	Support to PNDT Cell			36.96	36.96	Support to PNDT Cell {Human Resource-State-(Data Entry Operator ,Law Officer,

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						Account Assistant, Computer Assistant, Peon) Human Resource- District(Data Entry Operators in Districts, Law Assistant)},
7.1.1	Operationalise PNDT Cell			15.70	15.70	Logistic support- computers , camera, other infrastructure and maintenance costs included.
	Capacity Building			3.20	3.20	Training/ Workshop of District Nodal Officers, Judiciary, State Advisory

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						Committee ,Doctors, Sonologists (Pvt. & Govt.), District Attorney, District Advisory Committee
7.1.2	Orientation of programme managers and service providers on PC & PNDT Act					
A.7.2	Other PNDT activities			36.50	36.50	Informer and Best Village scheme and Quarterly Review Meetings.
	Sub-total PNDT & Sex Ratio			**92.36**	**92.36**	
A.8	**INFRASTRUCTURE & HUMAN RESOURCES**					
A.8.1	**Contractual Staff &**					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Services					
A.8.1.1	ANMs, supervisory nurses, LHVs	9800	2630 ANM	2500.00	2811.99	Approved at existing salary (Rs 8910)
A.8.1.2	Laboratory Technicians	10164	21	25.61	23.28	Approved at existing salary (Rs 9240)
A.8.1.3	Specialists (Anaesthetists, Paediatricians, Ob/Gyn, Surgeons, Physicians, Dental Surgeons, Radiologist, Sonologist, Pathologist, Specialist for CHC)	4 lacs per district		84.00	84.00	Approved.
A.8.1.4	PHNs at CHC/ PHC level					
A.8.1.4.1	PHNs/Staff Nurse at CHC/ FRU level(39 FRUs)	11374	156	212.92	193.56	Approved at existing salary (Rs. 10340)
A.8.1.4.2	PHNs/Staff Nurse at PHC level (3 PHN/SN for 282 Delivery	11374	846	1154.69	636.53	Approval given for SN at 171 delivery

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	points 24X7)					points with 3 SN each . Total 513 SN at existing salary (Rs. 10340)
A.8.1 .5	Medical Officers at PHCs and CHCs	Rs 40000 pm /MO for 9 months.	21	75.60	51.98	Approved for 21 Mos @ Rs 27500 pm . State to fill up 17 vacancies existing in Mewat on a priority basis.
A.8.1 .6	Additional Allowances/ Incentives to M.O.s of PHCs and CHCs					
A.8.1 .7	Others - Computer Assistants/ BCC Co-ordinator etc					
	FBNC					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Provision of 1 Paediatrician for SNCUs in General Hospitals of 21 districts for 6 months.	60000 pm	21 paediatricians	560.63	542.76	Salary of 63 MOs at SNCU revised. Approved at Rs 35000/month. Rest all approved as proposed
	Provision of 8 Staff Nurses for SNCUs in 21districts i.e. Rs.10340/- pm x 8 Staff Nurses x 21 dist x 12 months	10340 pm	168 Staff Nurses			
	Appointment of 2 additional Staff Nurses for SNCUs in 21 districts i.e. 10340 pm x 2 nurses x 21 dist x 6 months	10340pm	42 SNs			
	Provision of 3 MOs for SNCUs in General Hospitals of 21 districts for 6 months	40000 pm	63 Mos			
	SNCU attendant as Support Staff for 21 SNCUs at district level @ 5500/- pm i.e.5500 x 4 x 12 x	5500 pm	84 Attendants			

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	21(DC rate) 1 Data Entry Operator @ Rs. 8800/- pm for 12 months X 21 districts 1 Lab Technician to District Hospital lab for providing services to SNCU @ 9240 per month = 1X 21X 6 X9240 1 Counselor for each SNCU @ 8000 per month for 6 months = 1X21X 6 X8000	8800 pm 9240pm 8000 pm	21 Data entry operators 21 Lab Technicians 21 counselors			

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Appointment of 1 Paediatrician for SNCUs at 1 SDH i.e. 1 Paed. @ Rs.60,000/- pm x 3monthsx 1	60000	1 Paediatrician	15.23	14.78	Salary of 3 MOs at SDH-SNCU revised. Approved at Rs 35000/month.
	Appointment of 10 staff Nurses for SNCUs at 1 SDH i.e. 10340 pm x 10 nurses x 1 SDH x 3 months	10340	10 SN			Rest all approved as proposed
	Appointment of 3 MOs for SNCUs at 1 SDH i.e. 40000 x3month x3x1	40000	3 Mos			
	SNCU attendant as Support Staff for 1 SNCUs at SDH level @ 5500/- pm i.e.5500 x 4 x 1 x 3months (DC rate)	5500	4 Attendants			
	1 Data Entry Operator @ Rs.	8800	3 Data Entry			

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	8800/- pm for 3 months X 3 SDH Manifold operator 4 per SNCU with centralized Manifold @ 8800/- pm for 3 months for 5 districts = 4X8,800X3 X5	8800	Operators 20 Manifold Operators			
	IYCF					
	Under IYCF Salary of Yashoda supervisors @ Rs. 9000/- pm for 8 months in 15 districts	9000.00	15	10.80	0.00	Approval pended. State to share the details of the activity.
	Funds for Yashodas scheme for 65000 deliveries @ Rs.120/- per delivery (IYCF). (Rs.100/- per	120.00	65000	78.00	0.00	Approval pended. State to share details of

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	delivery for Yashoda and Rs.20/- as operational cost					the activity.
	ARSH					
	State ARSH Coordinator	0.30	1	3.6	3.60	Approved
	WIFS Coordinator	0.30	1	3.6	3.60	Approved
	Computer Assistant	0.11	1	1.32	0	Not Approved
	Supervisor(WIFS)	0.10	1	18.9	0	Not Approved
	Family Planning					
	Setting up of programme management structure for management monitoring of programme at State level	One Computer Programmer @ Rs. 20000 X 9 Month One senior stenographer @ Rs.15,000 X 9 months for DHS (FW) Two Computer Assistants	4	4.95	1.80	Only 2 computer assistants are approved @ Rs 1000 pm for 9 months.

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
		@ Rs. 10000 X 9 month for DHS (FW) and DD (FW)				
	Setting up of programme management structure for management monitoring of programme at District levels.	One Computer Assistants @ Rs. 10000 X 6 month for Dy. C.S. (FW) X 21 Distt.	21	12.60	0.00	Not approved. District has enough staff in DPMUs
	Counsellors at 43 FRUs				33.54	Proposed as per guidelines by GOI and approved- 43 counsellors @ Rs 13000/month. (Fixed salary around Rs. 10000/ month and remaining as

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						performanc e based incentive.)
	School Health Programme					
	1 State level disability coordinator for 12 months	33000.00	1		3.96	Approved as per consolidate d School health budget
	1 School Health Program Consultant (jr.) for 12 months	35000.00	1		4.20	Approved as per consolidate d School health budget
	21 district level School health cum Disability coordinator cum ARSH Coordinator cum WIFS coordinator for 9 months	10000.00	21		18.90	Approved as per consolidate d School health budget
	one General Assistant with computer knowledge for SHP,	11000.00	1		1.32	Approved as per consolidate d School

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	WIFS & ARSH for 12 months					health budget
A.8.1.8	Incentive/ Awards etc. to SN, ANMs etc.					
A.8.2.1	**Jachcha Bachcha Scheme**					
A.8.2.2	**Incentive to Dais**					
A.8.2.3	**Incentive to EmOC and LSA**	Rs 1000/ C-section , Rs 500/ for EmOC and Rs 500/- for LSAS doctor		30.00	30.00	Approved.Rs.60000/- per year per EmOC/LSA for 100 doctors as blended payment as suggested with a ceiling of max Rs 5,000/
A.8.2.4	**Surakshit Maa Awards.**			54.86	54.86	Approved. Rs. 300/- per award per month for 3 mothers

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						per sub-centre (508 Sub-centres).
A.8.1.9	Human Resources Development (Other than above)					
A.8.1.10	Other Incentives Schemes (Pl. Specify)					
A.8.2	**Minor civil works**					
A.8.2.1	Minor civil works for operationalisation of FRUs(Minor Civil Works for operationalization of FRUs (Minor Civil Works for labour rooms and STI clinics will be done from the budget under AMG and Construction/ Renovation)	1000000	4	40.00		Approved. To be shifted to MFP
A.8.2.2	Minor civil works for operationalisation of 24 hour services at PHCs					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.8.2.3	Maintenance and up-gradation of STI clinics (Up-gradation of STI/RTI clinics @ 282 Delivery Points @ Rs.10000/- = Rs.28.20 lacs	10000	282	28.20	0.00	Not approved. Up gradation of clinics can be undertaken using RKS/AMG funds.To be shifted to MFP
	Sub-total Infrastructure & HR			**4915.51**	**4514.66**	
A.9	**TRAINING**					
9.1	***Strengthening of Training Institutions (SIHFW, ANMTCs, etc.)***			295.28		No break up of budget found in write up. Not approved
9.1.1	Carry out repairs/ renovations of the training institutions					
9.1.2	Provide equipment and training aids to the training institutions					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
9.1.3	Developing systems for monitoring & evaluations of training programmes.					
9.1.4	Other activities (SHSRC)					
A.9.2	**Development of training packages**			12.00		No break up of budget found in write up. Not approved
9.2.1	Development/ translation and duplication of training materials					
9.2.2	Other activities Provision of TA					
A.9.3	**Maternal Health Training**					
A.9.3 .1	Skilled Birth Attendance / SBA training (SBA + IMEP for SNs)			188.92	188.92	Approved.508 SNs (1 batch - 4 SNs) Total batches-127

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	SBA + IMEP for ANMs & LHVs					Approved. 684 ANMs/ LHVs(1 batch - 4 SNs) Total batches- 171 batches
	TOT for SBA					
	Training of Medical Officers in Management of Common Obstetric Complications (BEmOC)					
	Training of Staff Nurses in SBA (DH)					
	Training of ANMs / LHVs in SBA (DH)					
	Training of ANMs / LHVs in SBA (FRU)					
A.9.3 .2	Comprehensive EmOC training (including c-section)					
	Setting up of EmOC Training Centres PGIMS & GMCH-Sec			22.2	22.2	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	32					
	TOT for Mos	Rs 7.0 lacs / batch	Rs 7.0 lacs / batch	7	7	Approved
	Training of Mos	11.09 lacs / batch	11.09 lacs / batch	66.56	66.56	Approved.6 batches of 8 MOs each
	Evaluation of MOs trained in EmOC	0.92 lac / batch	0.92 lac / batch	1.86	1.86	Approved. 2 Batches (60)
A.9.3.3	Life saving Anaesthesia skills training					
	Training of MOs in LSAS	Rs 6.67 lacs per batch		33.36	33.36	Approved for 5 batches of 4 trainees each
	Evaluation of MOs in LSAS	0.92 lac / batch		1.85	1.85	Approved for 2 Batches (60)
A.9.3.4	Safe abortion services training (including MVA/ EVA and Medical abortion)					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	TOT on safe abortion services for MO & SN					
	ToT of Medical Officers in safe abortion					
	Training of Medical Officers in safe abortion					
A.9.3.5	RTI / STI training					
	TOT for RTI/STI training					
	Training of laboratory technicians in RTI/STI	11633/ batch	11633/ batch	3.49	3.49	Approved .271 LTs (1 batch-30 Trainees)
	Training of Medical Officers in RTI/STI	Rs 0.68 lacs per batch	Rs 0.68 lacs per batch	4.79	4.79	Approved.1 Batch =30; Total load=210
	Training of Staff Nurses in RTI/STI	Rs 0.38 lacs per batch	Rs 0.38 lacs per batch	4.27	4.27	Approved.1 Batch =30; Total load=329
	Training of ANMs / LHVs in RTI/STI					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.9.3.6	BEmOC training					
A.9.3.7	Other MH training (ISD refresher)					
	Other maternal health training (SBA 1 day orientation)					
	Diploma Course for MO - 2years					
	Advance training course for ANMs					
A.9.4	**IMEP Training**					
A.9.5	**Child Health Training**					
9.5.1	IMNCI Training					
9.5.1.1	TOT IMNCI and FIMNCI (Pre and in service)			34.24	34.24	Approved
9.5.1.2	IMNCI Training for ANMs / LHVs					
9.5.1.3	IMNCI Training for Anganwadi Workers					
A.9.5.2	F-IMNCI training					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
9.5.2.1	TOT on F-IMNCI					
9.5.2.2	F-IMNCI Training for Medical Officers					
9.5.2.3	F-IMNCI Training for Staff Nurses					
	Printing of training material					
A.9.5.3	Home Based Newborn Care training					
9.5.3.1	TOT on HBNC					
9.5.3.2	Training on HBNC for ASHA					
A.9.5.4	Care of Sick Children and severe malnutrition training					
9.5.4.1	TOT on Care of sick children and severe malnutrition					
9.5.4.2	Training on Care of sick children and severe malnutrition for Medical Officers					

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.9.5.5	Other CH training (Facility based New Born Care)			91.24	91.24	Approved
9.5.5.1	NSSK Training			78.87	78.87	Approved
9.5.5.1.1	TOT for NSSK					
9.5.5.1.2	NSSK Training for Medical Officers					
9.5.5.1.3	NSSK Training for SNs					
9.5.5.1.4	NSSK Training for ANMs					
	Printing of Manuals & Procurement of Mannequins for NSSK Training					
9.5.5.2	Other Child Health training					
	Two batches of Training of NALS & PALS @Rs. 6000/- per participants for 36 participants i.e. 36 x 6000 x 2			4.32	0.00	Not approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	Training of all SNCU staff @ Rs. 4.0 lac per training of 24 participants with technical support from NNF, PGIMER, Chandigarh, Rohtak & Safdarjung Hospital-New Delhi i.e. 4.0 lac x 10 batches			40.00	40.00	Approved
	Following up 15 days observer ship & Hands on training of all doctors & staff nurses of 21 districts at PGI, Rohtak & Chandigarh & Safdarjung Hospital, New Delhi for 294 participants @ 2 doctors & 8 SNs per SNCU * 15 days x Rs.~ 1000 per day x 21			44.10	44.10	Approved
	Training of 1 MO & 2 staff nurses of 66 SUs @ Rs. 4.0 lac per training, per batch for 3 batches. 4.0			12.00	12.00	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
	lac x 3 batches					
	Training of 21 SNCU data entry operators on SNCU software & follow-up @ Rs. 30000 for 1 batch			0.30	0.30	Approved
A.9.6	**Family Planning Training**					
	Laparoscopic Sterilisation training					
	TOT on laparoscopic sterilisation					
A.9.6 .1	Laparoscopic sterilisation training for doctors (teams of doctor, SN and OT assistant)	30710	30(10 batches)	3.08	3.08	Approved
9.6.1 .1						
9.6.1 .2						
A.9.6 .2	Minilap training for medical officers	41520	150(50 batches)	20.76	20.76	Approved
9.6.2 .1						

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
9.6.2.2						
A.9.6.3	NSV training	20400	104(26 batches)	5.30	5.30	Approved
A.9.6.4	TOT on Minilap					
	Training of Medical officers in IUD insertion	52265	460(46 batches)	24.04	24.04	Approved
	Training of staff nurses in IUD insertion					
	Training of ANMs / LHVs in IUD insertion	39640	870(87 batches)	34.49	34.49	Approved
A.9.6.5	Contraceptive Update training at State	171625	100 (2 batches)	3.43	3.43	Approved
	Contraceptive Update training at District	27940	420 (21 batches)	5.87	5.87	Approved
A.9.6.6	Other FP Training					
	TOT in PP IUD	61055	10(1	0.61	0.61	Approved

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
			batch)			
	Training of MOs in PP IUD+ BEmOC	52525	320 (64 batches)	33.62	33.62	Approved
	Training of staff nurses in Counselling of PP IUD	32940	630 (21 batches)	6.92	0.00	State was recommended to hire counsellors at high delivery load facilities, which has not been proposed by the state. This is not approved.
	IUCD training supported by HLFPPT				127.87	Approved in consultation by the State.
9.7.3	**ARSH Training**					
9.7.4	TOT for ARSH training	1	11		14.00	Approved as per consolidated ARSH budget

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
9.7.5	Orientation training of state and district programme managers					
	ARSH training for medical officers	95535	7		6.69	Approved as per consolidated ARSH budget
	ARSH training for ANMs/LHVs	41910	4		2.00	Approved as per consolidated ARSH budget
	ARSH training for AWWs					
A.9.8	ARSH training for Other activities(paramedics)	41910	7		3.00	Approved as per consolidated ARSH budget
A.9.8.1	Menstrual Hygiene					
	State TOT on Weekly Iron Folic Acid Supplementation (WIFS) Scheme	98628	2		1.97	Approved as per consolidated ARSH budget

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.9.8.2	District TOT Weekly Iron Folic Acid Supplementation (WIFS) Scheme	41565	9		3.74	Approved as per consolidated ARSH budget
	School Health Programme					
	21 district level training of master trainers	50000	21		11.50	Approved as per consolidated School health budget
	1 state level training of master trainers	2,50,000	1		2.50	Approved as per consolidated School health budget
	14752 schools x 2 teachers per school = 29504 teachers to be trained for one day training at block level	100	29504			Funding from SSA
	State level training for State master trainers	2,71,000	1		2.71	Approved as per consolidated School

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						health budget
A.9.9	**Programme Management Training**					
	SPMU Training					
	DPMU Training					
	Other training (pls specify)					
	SKS Training			7.22	7.22	Approved
	Monthly review meeting			4.64	4.64	Approved
	National & International visit and training for officials and Health Society functionaries			10.00	10.00	Approved
A.9.10	Monitor progress & quality of trainings			2.00	2.00	Approved
A.9.10.1	HMIS Training			32.96	32.96	Approved
A.9.10.2	Other training and capacity building of VHSNC Members /Programmes			75.36		To be shifted to MFP

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.9.11	**Training (Nursing)**					
A.9.11.1	Strengthening of Existing Training Institutions/ Nursing School					
	New Training Institutions/ School					
	Training (Other Health Personnel)					
A.9.11.2	Promotional Trg of health workers females to lady health visitor etc.					
A.9.11.3	Other training (orientation training of ST/PHN)					
	MPW training					
A.10	Training of AMNs, Staff nurses, AWW, AWS					
A.10.1	Other training and capacity building programmes					
10.1.1	**Sub-total Training**			**1216.94**	**999.05**	

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
A.10.2	**PROGRAMME MANAGEMENT**					
10.2.1	Strengthening of SHS/ SPMU (Including HR, Management Cost, Mobility Support, field visits)			266.23	219.84	Only following new posts approved in 2012-13- 1 Director (MH) @ Rs 1 lakh for 9 months,1 Director (CH) @ Rs 1 lakh for 9 months,4 Consultants for MH @ Rs. 40000 for 9 months,5 Consultants for CH @ Rs 40000 for 9 months,2 Coordinators MCTS @ Rs 25000 for 9 months. No other new post

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						approved. Salary for all staff to be continued as per last years approved budget
A.10.3	Contractual Staff for SPMSU recruited and in position					
A.10.4	Strengthening of DHS/ DPMU (Including HR, Management Cost, Mobility Support, field visits)			245.89	204.91	No incentive approved at any level. Salary for all staff to be continued as per last year's approved budget
A.10.5	Contractual Staff for DPMSU recruited and in position					
A.10.	Strengthening of Block PMU			332.52	277.10	No incentive

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
6	(Including HR, Management Cost, Mobility Support, field visits)					approved at any level. Salary for all staff to be continued as per last year's approved budget
A.10.7	Strengthening (Accounting and Audit Fees)			38.00	38.00	Approved
	Audit Fees (SKS Audit)			36.69	36.69	Approved
	Concurrent Audit (Physical verification Stock)			11.71	11.71	Approved
	Mobility Support to BMO/ MO/ Others(mobility support, rent of SPMU/DMPU)			345.50	86.38	Approval at 25% of proposed budget. State to prepare integrated pal and budget for mobility support

FMR Code	Activity	Unit Rate(Rs.)	Physical Target/ Expected Output	Proposed budget 12-13 (Rs. in lacs)	Approved Budget 12-13 (Rs. in lacs)	Remarks
						across the program.
	Monitoring and supervision			15.75	15.75	Approved
	IPAI Team Expenditure			30.60	30.60	Approved
	Quality Assurance			84.00	0.00	Not Approved
	Sub-total Programme Management			**1406.89**	**920.98**	
A.11	**VULNERABLE GROUPS**					
	Implementation of RCH activities					
	Total RCH II Base Flexi Pool			**12390.15**	**10781.00**	
	Total RCH II Demand Side			**1703.42**	**1774.40**	
	GRAND TOTAL RCH II			**14093.57**	**12555.40**	

Consolidated Approval under Mission Flexipool for FY 2012-13

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B.1	**ASHA**			**1347**	**1145**	
B1.1	**ASHA Cost**					
B1.1.1	Selection & Training of ASHA		17000	200	200	**Approved. Rs.200 lacs is the lump-sum amount approved against a lump sum proposal of Rs. 200 lacs**
	a)Training Module I-V		3700 ASHAs			Approved
	b) HBPNC (Round - I)Training Module VI-VII-2 days		5100 ASHAs			Approved. State to adopt GoI prescribed training module VI and VII for the proposed number of ASHAs. Also the topics of Module VI & VII which were not covered under HBPNC round I & II should be covered for the already trained ASHAs.
	c) HBPNC (Round - I)Training Module VI-VII-5 days		5100 ASHAs			Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	d) HBPNC refresher course for poor performing ASHA		5000 ASHAs			Approved. State may finish up with all the four rounds of Trainings and refresher maybe plan only after that.
	e) MCP cards Orientation		13500 ASHAs			Approved
B.1.1.2	**Procurement of ASHA Drug Kit**	300/500	12000/5000	61	61	Approved for 12000 ASHA drug kits @ Rs. 300 and 5000 ASHA drug kits @ Rs.500
B.1.1.3	**Other Incentives to ASHAs**	588.24	17000	700	700	Approved. Total Approval is of Rs. 700 lakhs under this head. Break up is as follows: 1) **Other incentives to ASHAs**-Amount approved is Rs. 50 lakhs against the lump sum proposal of Rs.50 Lakhs . 2) **ASHA incentives under maternal health-** Amount of Rs.350 lakh is Approved against lump sum proposal of Rs. 350 lakh. 3) **ASHA incentives under Child Health**- Amount of Rs. 300 lakh is approved against

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
						a lump sum proposal of Rs. 300 lakh. The incentives which are Approved/Not approved have been indicated specifically under sub heads as follows:
	Community Mobilization for Celebration of VHND or Janani-Shishu Divas	Rs. 50/- for each Celebrated Day	25000			Approved @ Rs. 50 for each celebrated day
	Birth/Death Registration (Other than Institutional Deaths)	50 per case	30000			Approved @ Rs.50 per case
	Ensuring safe drinking water	50 per sample	10000			Approved @ at Rs.50 per case
	Registration for Treatment of RTI/STIs	50	20000			Not Approved
	Monthly Meeting at PHCs	100	13500X12			Approved @ Rs.100 per meeting

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Mentoring of Sakshar Mahila Samooh (SMS) by ASHA	Rs. 50/- per Pakhwara	13500x2x12			Not approved
	community mobilization for post Partum permanent sterilization	vasectomy-Rs. 300	vasectomy-500			Not approved
	community mobilization for post Partum permanent sterilization	tubectomy - Rs.200	tubectomy-1000			Not Approved
	Incentive to ASHAs under JSY	200	66575			Reflected in RCH Flexipool (MH-JSY)
	Incentive to ASHA under Maternal Health					
	Registration of p.w. and facilitation ANC - 1. For SC women @100 and other women @50	100-SC 50-others	40000 SC 160000-others			Approved for payment of incentives to ASHAs @ Rs.150 for Registration & facilitation of full ANC of SC/BPL p.w. and @ Rs. 75 for other pregnant women
	Facilitating p.w. ANC II	50 for SC 25 for others	40000 SC 160000-others			
	Facilitating p.w. ANC III	50 for SC 25 for others	40000 SC 160000-others			
	Facilitating p.w.	400-SC	40000			Not approved. Rs.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	for Institutional deliveries.	women 200 other	SC 160000-others			126.6 lakhs for ASHA incentives for facilitating institutional deliveries have already been approved under JSY in RCH flexipool .
	Identification & referral of sick /danger sign p.w. /mothers other than HBPNC cases	50	20000			Approved
	Mobilization of Women for Medical Termination of Pregnancies (MPTs**)**	100	18750			Approved @ Rs.100 per case. ASHA should be provided the incentive only after provision of safe abortion service to the women.
	Mobilization of Women for IUD Insertion	100	2500			Not Approved
	Reporting from Community about Abortion >12 Weeks of Pregnancy	100	2500			Not approved
	Incentive under Child Health including IBSY					
	Visits for HBPNC	250 for	120000			Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Strategy for Birth Preparedness & PNC of Mother and Newborn (Total 07 Home Visits: from 8th month of pregnancy to 42nd day of Delivery)	7 home visits				
	Identification and Referral of Seriously Sick Children (42 Days to 5 Years) as per IMNCI Norms	100	6125			Approved
	Neo-natal/ Infant Death Registration	100	0			Budgeted under RCH flexipool
	Community Based Neo-natal/ Infant Death Audit	100	0			Budgeted under RCH flexipool
	Complete Immunization Children of High Risk Population (0- 1 Year)	200	30000			Approved and projected in Part C Immunization. This is an approved activity by GoI across the States.
	Age-appropriate Vaccination of Children under Primary Immunization	Rs. 50/- for Scheduled Caste Children & Rs. 25/- for	122500			Not approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
		Other Cases at 1½ Month				
		Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 3½ Month	122500			Not approved
		Rs. 50/- for Scheduled Caste Children & Rs. 25/- for Other Cases at 9-12 Month	12250			Not approved
	Incentive for ASHAs for Daily visit to schools for administering iron and folic tablets to anemic children	25	1125000 (approx) Anemic Children (0-18 Years in rural areas) budget is proposed for 50% of these			Approved under IBSY @ rate of Rs.25

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
			cases i.e 562500 to be covered by ASHA x Rs. 25 as an incentive for ASHA			
	Incentive to ASHA for mobilization of disabled children from the community to the special disability camps/DH	25	38000 (1% disability rate of the total 3800000 children) disabled children (physical & mental)			Approved under IBSY @ rate of Rs.25
	Incentive to ASHA under Routine Immunization	1294.12	17000			Reflected under Immunization (Part C)
B1.1.4	Awards to ASHA's/Link workers, non monetary incentive (Dress, I-card, SAF/Guidebook, Communication networking allowance,)	1682.35	17000			Total amount approved is Rs.184 lakhs. Break-up is as under:
	Dress / Identity Card / Nameplate,	300	17000X2	102	0	Not approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Self- Appraisal Booklet and Guidebook etc.	50	20000	10	10	Approved
	Performance Awards for ASHA	03 Performance Awards @ Rs. 500/-, Rs. 1000/-, Rs. 1500/- Monthly at District	10000	30	30	Approved
	Communication-Networking Allowances	100	12000x100x12	144	144	Approved @ Rs 100 per month communication allowances**.** (CUG mode)
B1.1.5	ASHA resource centre/ASHA Mentoring group					
	Support structure for ASHA	309.94	17000			Not approved. State should operationalize ASHA resource centre.
	AYUSH Medical Officer	3000	104x12	37.44	0	
	ASHA Facilitators	1000	438x12	52.56	0	
	Orientations of AYUSH MO (Lump-sum)			10	0	
B2	Untied Funds			**527.1**	**435.4**	Approved, State to implement differential financing for the facilities. Detailed plan to be shared.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B2.1	Untied Fund for CHCs	50000	104	52	52	Approved
	Untied Fund for SDHs	50000	23	11.5	11.5	Approved
B2.2	Untied Fund for PHCs	25000	334	83.5	83.5	Approved, on the basis of 100% utilization percentage of 2011-12
B2.3	Untied Fund for Sub Centers	10000	2521	252.1	219.32	Approved , on the basis of 86.79% utilization percentage of 2011-12
B2.4	Untied fund for VHSC	10000	6280	128	69.08	Approved, on the basis of 11.49% utilization percentage of 2011-12
B.3	Annual Maintenance Grants			**497.4**	**385.03**	Approved, State to implement differential financing for the facilities. Detailed plan to be shared.
B.3.1	CHCs	100000	103	103	89.61	Approved, on the basis of 86.87% utilization percentage of 2011-12
	SDHs	100000	23	23	20	Approved, on the basis of 86.87% utilization percentage of 2011-12
B.3.2	PHCs	50000	333	166.5	166.5	Approved, on the basis of 100% utilization percentage of 2011-12

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B.3.3	Sub Centers	10000	2049	204.9	108.92	Approved for 1556 SCs in Govt. Building (RHS 2011) and approved amount is on the basis of 69.78% utilization percentage of 2011-12
B.4	Hospital Strengthening			**100**	**61.28**	
B.4.1	Up gradation of CHCs, PHCs, Dist. Hospitals to IPHS)			100	61.28	Approved for ongoing staff which was approved in 2011-12 only, No new staff and No hike in salaries approved.
B4.1.1	District Hospitals					
B4.1.2	CHCs					
B4.1.3	PHCs					
B4.1.4	Sub Centers					
B4.1.5	Others					
B 4.2	Strengthening of District, Su-divisional Hospitals, CHCs, PHCs					
B.4.3	Sub Centre Rent and Contingencies					
B.4.4	Logistics management/ improvement					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B5	New Constructions/ Renovation and Setting up			**2000**	**2040**	
B5.1	CHCs			500		Approved. Rs. 1000 lakhs for ongoing constructions in Mewat and Palwal districts. And Rs. 1000 lakhs for ongoing constructions in remaining districts. Name wise list of the Facilities proposed and timeline for completion of construction need to be shared by the State.
B5.2	PHCs			600		
B5.3	SHCs/Sub Centers			800		
B5.4	Setting up Infrastructure wing for Civil works					
B5.5	Govt. Dispensaries/ others renovations					
B5.6	Construction of BHO, Facility improvement, civil work, BemOC and CemOC centers					
B.5.7	Major civil works for operationalisatio					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	n of FRUS					
	Minor civil works for operationalisation of FRUs(Minor Civil Works for operationalization of FRUs (Minor Civil Works for labour rooms and STI clinics will be done from the budget under AMG and Construction/ Renovation)	1000000	4		40	Approved. Proposed in RCH Flexipool part and approved in MFP. Shifted from RCH Flexipool. State to provide name of the facilities.
	Renovation and construction of Central Warehouse for drugs, equipments and 4 Regional Cold Chair Store	25	4	100.00	0	Not approved
B.5.8	Major civil works for operationalization of 24 hour services at PHCs					
B.5.9	Civil Works for Operationalization of Infection Management & Environment Plan at health facilities					
B.5.10	Infrastructure of Training Institutions					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B.5.10.1	Strengthening of Existing Training Institutions/Nursing School(Other than HR)					
	a. GNM Schools					
	1. Infrastructure					
	2. Equipment					
	b. ANMTCs					
	1. Infrastructure					
	2. Equipment					
B.5.10.2	New Training Institutions/School(Other than HR)					
B.6	Corpus Grants to HMS/RKS			**566**	**510.59**	Approved, State to implement differential financing for the facilities. Detailed plan to be shared.
B6.1	District Hospitals	500000	21	105	95.55	Approved, on the basis of 91.02% utilization percentage of 2011-12
B6.2	CHCs	100000	104	104	100.88	Approved, on the basis of 97.95% utilization percentage of 2011-12
B6.3	PHCs	100000	334	334	293.92	Approved, on the basis of 88.42% utilization percentage of 2011-12
B6.4	Other or if not bifurcated as above (SDHs)	100000	23	23	20.24	Approved, on the basis of 87.91% utilization percentage of

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
						2011-12
B7	District Action Plans (Including Block, Village)			**21**	**21**	Approved
B8	Panchayati Raj Initiative					
B8.1	Constitution and Orientation of Community leader & of VHSC,SHC,PHC,CHC etc	24150	314		75.83	Approved. Amount Proposed in RCH Flexipool Shifted from RCH flexipool
B8.2	Orientation Workshops, Trainings and capacity building of PRI at State/Dist. Health Societies, CHC,PHC					
B8.3	Others					
B9	Mainstreaming of AYUSH			**783.41**	**665.02**	
B9.1	Medical Officers at DH/CHCs/ PHCs (only AYUSH)					
B9.2	Other Staff Nurse/ Supervisory Nurses (for AYUSH)					
	Strengthening of AYUSH Cell at State level					
	AYUSH Coordinator	0	1	0	0	
	AYUSH Doctors	0	2	0	0	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Consultant	35000	1	3.15	2.7	Approved @ Rs.30000/month. No hikes in salaries approved.
	Account assistant	13300	1	1.59	1.59	Approved
	Administrative Assistant		0	0	0	
	Computer assistant	9700	1	1.16	1.05	Approved @ Rs.8800/month. No hike in salary approved.
	Information assistant	8500	2	1.78	0.92	Approved @ Rs. 7,700/month for 1 position. No additional staff approved.
	MPW	6900	1	0.82	0.66	Approved @ Rs.5500/month
	Strengthening of District Ayurvedic Offices at District Level					
	Computer Assistant	9,700	21	24.44	22.18	Approved @ Rs.8800 /month
	Strengthening of District Hospitals					
	Strengthening of Panchkarma centers at District Hospital					
	MD In Panchkarma (Panchkarma Specialist) MD IN Ayur/Homeo/Unani	29700	8	28.51	22.68	Approved for 7 Panchkarma specialist@ Rs.27000/month

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Yoga and Dietician	24800	2	5.95	5.04	Approved @ Rs.22000/month for dietician and @ Rs.20000/month for Yoga specialist
	Medical Officers 1. AMO/HMO/UMO	22000	6	15.84	14.4	Approved @ Rs.20000/month
	Para Medical Staff 1. Pharma Ayu/Homeo/Unani 2. Therapist Panchkarma	9700	36	41.9	38.01	Approved @ Rs.8800/month.
	Kitchen Assistant	7300	6	5.25	4.75	Approved @ Rs.6600/month
	MPW (attendant)	6100	9	6.58	5.94	approved @ Rs.5500/month
	Strengthening of AYUSH Wings at District Hospitals					
	Medical Officers AMO/HMO/UMO	22000	30	79.2	72	Approved @ Rs.20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	30	34.92	31.68	Approved @ Rs.8800/month
	MPW (attendant)	6100	15	10.98	9.9	approved @ Rs.5500/month
	Strengthening of AYUSH wing at CHCs					
	MD In Homeo	29700	1	3.56	0	Not approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Medical Officers AMO/HMO/UMO	22000	93	245.52	223.2	Approved @ Rs.20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	93	108.25	98.2	Approved @ Rs.8800/month
	Strengthening of AYUSH OPD at PHCs					
	Medical Officers AMO/HMO/UMO	22000	29	76.56	69.6	Approved @ Rs. 20000/month
	Para Medical Staff Pharma Ayu/Homeo/Unani	9700	29	33.75	30.62	Approved @ Rs.8800/month
B9.3	**Activities other than HR**					
	Panchkarma Training (AYUSH doctors)	1,00,000 / Batch	2	2	2	Approved. State has to conduct the cascading training programme at State and District level for AYUSH doctors.
	Panchkarma Training (AYUSH therapists)	1,05,000 / Batch	2	2.1	2	
	IEC for AYUSH			32	0	Not Approved.IEC for AYUSH proposed under comprehensive IEC plan
	Equipment /			2	2	Approved.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Furniture					
	Monitoring & mobility support	30000	12 months	3.6	0.9	Rs. 0.9 Lakh approved as 25 % of the proposed amount remaining amount to be proposed under comprehensive mobility plan.
	Miscellaneous			12	3	Approved for stationery, contingencies, adv., TA/DA, bi yearly review meetings etc.
B10	**IEC-BCC NRHM**			**592.35**	**559.25**	**Amount approved under this head is Rs. 559.25 lakhs. Additional Rs. 200 lakhs to be utilized from savings of FY 2011-12 as proposed. Total IEC plan is Rs. 792.35 lakhs. State has proposed for Rs.592.35 lakhs in the budget sheet. Remaining Rs. 200 lakhs proposed to be utilized from savings of 2011-12.**
B.10	Strengthening of BCC/IEC Bureaus					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	(State and district levels)					
	Hiring BCC consultants	40000	1	4.8	4.8	Approved
	Junior Editor	15000	1	1.8	1.8	Approved
	Computer Assistants	12000	2	2.88	2.88	Approved
	Graphics Designer	18000	1	2.16	2.16	Approved
	Office Helper	6000	1	0.72	0.72	Approved
	Support for District Supervision (mobility)	50000	21	10.5	2.62	Rs. 2.62 lakh Approved as 25% of the proposed amount remaining amount to be included in comprehensive mobility support plan
	Coordination and Supportive supervision by AYUSH Doctor at PHC level	1000 per month	441	52.92	52.92	Approved. Coordination and Supportive of SMS and peer educators of ARSH by AYUSH doctors.
B.10.1	Development of State BCC/IEC strategy					
	Hiring of professional agency for External Evaluation			25	25	Approved
	Quarterly review meeting of Dy. Civil Surgeons at State level	50000	4	2	2	Approved
	Creation of			20	20	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	BCC/IEC material					
B.10.2	Implementation of BCC/IEC strategy					
	BCCs activities for all health programme by SMS at Village level			294.65	294.65	Approved
	Mentoring of SMS groups by ASHA	Rs. 50 per pakhwara		0	0	Reflected in ASHA head
	Printing of BCC/IEC Materials (Posters, Booklets/Flip charts, Bus Panels)			75	75	Approved
	Mass Media					
	News paper Advertisement at State level			40	40	Approved
	Radio Publicity and Community Radio to Cover all programmes			90	90	Approved
	News letter for doctors and general public			16	16	Approved
	IEC Activities at Distt. Level		1 per district	21	21	Approved
	Miscellaneous			10	10	Approved
B.10.2.1	BCC/IEC activities for MH			0	0	Covered under integrated BCC
B.10.2.2	BCC/IEC activities for CH			0	0	under comprehensive IEC plan

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B.10.2.3	BCC/IEC activities for FP			50	65	Approved. Rs. 15 lakhs approved for printing of IUCD cards @ Rs. 5/ card for 3.00 lakhs cards
B.10.2.4	BCC/IEC activities for ARSH			10	10	Approved
B.10.2.5	Other activities (Specify)					
B.10.3	Health Mela			0	0	
B.10.4	Creating awareness on declining sex ratio issue			11.7	11.7	Approved. Incentive for Informers Rs.10.5 Lakh Annual Status Report - Rs.1.2 lakh
B.10.5	Other activities					
	BCC/IEC activities for IDSP			16.98	0	Not Approved. Rs. 5.88 lakhs for publicity / IEC material at districts for IDSP under comprehensive IEC plan
	BCC/IEC activities for Immunization			9.24	0	Approved Under comprehensive IEC plan.
	BCC/IEC activities for Malaria			14	0	Not Approved. All activities under NVBDCP approved under comprehensive IEC plan
	BCC/IEC activities for			11	11	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	AYUSH					
B11	**Mobile Medical Units (Including recurring expenditures)**		6	**69.42**	**39.35**	Approved. For salaries of ongoing Staff, POL, maintenance/insurance, recurring GPS charges. No new staff approved as well as no hike in salaries approved.
B12	**Referral Transport**		422	**700**	**1253.96**	Approved amount is Rs. 1253.96. Total plan is of Rs. 2543 lakh out of which State has proposed for Rs. 2200 lakh. Rs. 1500 lakhs have been proposed under JSSK and Rs. 700 lakh under MFP. Total amount approved for the activity without hike in salaries and number of staff is Rs.2208.96 lakh. Amount approved under JSSK is Rs.955 lakh. Hence approval under MFP is Rs. 1253.96 lakh (Rs.2208.96-Rs.955 lakh)
B12.1	Ambulance/					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	EMRI/ other models					
	District control room					
	Salary of 6 control room operators	9680	6	134.16	80.64	Approved for 4 operators @ Rs.8000 p.m.
	Salary of one fleet manager	15000	1	37.8	30.24	Approved for 1 fleet manager@ Rs.12000 p.m.
	Travel allowance for Fleet Manager (new post)	1000	21	2.52	2.52	Approved
	Cost of mobile bills of CUG phones one for control room and one for fleet manager	1000	21 X 2 X 1000 X 12	5.04	5.04	Approved
	Cost of broadband	1000	21	2.52	2.52	Approved
	Cost of landline telephone bill	300	2	1.5	1.5	Approved
	Miscellaneous and contingency expenses for control room	1000	21	2.52	2.52	Approved
	State control room					
	One Computer Assistant	9680	1	1.16	0.96	Approved for1 computer asst. @ Rs.8000 p.m.
	Two Referral Transport Monitors for the purpose of monitoring the system(new activity)	15000	2	3.6	3.6	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	expenditure on running of Ambulances		357 X 3 months +422 X 9 months			
	POL for running the ambulances			740.9	740.9	
	Salary of drivers	9000		1021.02	794.13	Approved @ Rs.7000 p.m.salary of drivers for 357 ambulances for 3 months and 422 ambulances for 9 months
	Maintenance of vehicles	2000		97.38	97.38	Approved
	CUG phone monthly bill	300		14.6	14.6	Approved
	GPS recurring charges	500		24.34	24.34	Approved
	Insurance of vehicles	5000		21.1	21.1	Approved
	Salary of EMTs on ALS ambulance	12000	2X22 ALS	63.36	52.8	Approved @ Rs.10000 p.m salary of EMTs on ALS
	Paramedics on ambulance	12000	2X 100 BLS X9	216	180	Approved @ Rs.10000 p.m salary of paramedics
	Procurement of receipt machine for each ambulance (new activity)			50.64	50.64	Approved
	Tyres	4300	150X5	0	0	To be provided from revenue generated
	Fitting of GPS on new ambulances	13000	90	11.7	11.7	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Training of EMT and drivers					Approved
	Training of paramedics on BLS ambulances	10000	2 X 100	20	20	Approved
	Training of drivers in Basic Life Support	2500	422X2.33	24.58	24.58	Approved
	Training of Casualty staff (MOs & Staff Nurses) in ACLS, ITLS & ALSO.		21 DH	47.25	47.25	Approved
B12.2	Operating Cost (POL)					
B13	**PPP/ NGOs**			0	00.0	
B13.1	Non governmental providers of health care RMPs/TBAs					
B13.2	PNDT and Sex Ratio					
B13.3	Public Private Partnership for High focus districts					
B13.4	NGO Programme/ Grant in Aid to NGO					
B14	**Innovations**					
B15	**Planning, Implementation and Monitoring**					
B15.1	Community Monitoring (Visioning workshops at State, Dist, Block					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	level)					
B15.1.1	State level					
B15.1.2	District level					
B15.1.3	Block level					
B15.1.4	Other					
B15.2	**Quality Assurance**					
B15.3	**Monitoring and Evaluation**			**769.58**	**750.05**	
B15.3.1	Monitoring & Evaluation / HMIS/MCTS					
15.3.1 a	Salaries of M&E , MIS & Data Entry Consultants			489.6	476.55	Approved. No hikes in salaries and no new HR is approved.
15.3.1 b	Mobility of M&E Officers			8.64	2.16	Rs. 2.16 lakh approved as 25% of the proposal and remaining amount to be budgeted under comprehensive mobility support plan
15.3.1 c	Workshops/ Training on M&E at State Level			8.75	8.75	Approved
15.3.1 d	M&E Studies			0	0	
15.3.1 e	Others			0	0	
15.3.1 f	Hardware & Software			15	15	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Procurement					
15.3.1 g	Internet Connectivity			52.5	52.5	Approved
15.3.1 h	Annual Maintenance			2.6	2.6	Approved
15.3.1 i	Operational Costs (consumables) @ 20,000 per institution(505)			51.5	51.5	Approved
15.3.1 j	Review of Existing Registers - to make them compatibles with National HMIS/MCTS			2	2	Approved
15.3.1 k	Printing of New Registers / Forms			44.78	44.78	Approved
15.3.1 l	Training of Staff			0	0	No Budget provided under this head
15.3.1 m	Printing & reproducing Registers/ Forms					
15.3.1 n	Capacity Building of Teams					
15.3.1 o	Ongoing Review of MCH tracking Activities			2.6	2.6	Approved
15.3.1 p	Monitoring Data Collection & Data Quality			2.5	2.5	Approved
15.3.1 q	Operationalising SMS work-plans - provision for Mobile rent to ASHA/ANM			5.53	5.53	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
15.3.1 r	Establishing Call centers at State Level to be outsourced to third party			15	15	Approved
B15.3 .2	Computerization HMIS and e-governance, e-health, Drug/Monitoring Software System			25	25	Approved
B15.3 .3	Other M & E/ Civil Registration System			43.58	43.58	Approved
B.16	**PROCUREMENT**			**2270.54**	**2217.36**	
B16.1	Procurement of Equipment			**850.54**	**940.29**	
B16.1 .1	Procurement of equipment: MH			10	10	Approved subject to the equipments purchased are placed on priority at the delivery points and as per the gap analysis of the facilities. For MVA equipments @ Rs. 5000 x 200 Centres. Names of the centres to be provided.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
B16.1 .2	Procurement of equipment: CH			176.72	176.72	Approved for Equipments for New born care.
B16.1 .3	Procurement of equipment: FP			**68**	**157.75**	Total approval for procurement of FP equipments is Rs.157.75 lakhs
	NSV Kit	2500 kits	1000		25	Approved
	IUD insertion Kit	1300 kits	2000		26	Approved
	Minilap sets	100 sets	2500		2.5	Approved
	Kelly's Forceps	1000	425		4.25	Approved
	Laparoscopes	40 laparoscopes	500000		100	Approved
B16.1 .4	Procurement of equipment: IMEP					
B16.1 .5	Procurement of Others					
	Procurement of Ambulances	7	50	350	350	Approved
	Hospital furniture			125.82	125.82	Approved.
	Heamoglobin colour scale (starter kit)	Starter Kit-1500, Refill pack-2500	3000-Starter kit, 3000-Refill pack (200 strips)	120	120	Approved. Adolescent Hb level is different, thus the levels of anemia need to be adjusted to measure anemia status among

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
						adolescents
B.16.2	**Procurement of Drugs and supplies**			**1420**	**1277.07**	
B.16.2.1	Drugs & supplies for MH					Booked under JSSK
B.16.2.2	Drugs & supplies for CH			134	134	Approved. IFA & albendazole for 0-5 year.
B.16.2.3	Drugs & supplies for FP					
B.16.2.4	Supplies for IMEP					
B.16.2.5	General drugs & supplies for health facilities			1100	961.2	Approved. Rs.138.8 lakh for Iron and folic acid tablets to be given to 40% of the children supposed to be anemic in age group 6-18 yrs(therapeutic) i.e. 867472*100 tabs each/child *cost of 1 tablet @Rs .16/tablet not approved as per SHP guidelines. Remaining Rs.961.20 lakhs recommended subject to drugs under JSSK are not procured under this head.

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Drugs & supplies for School Health and IBSY					Approved. IFA and Albendazole
	Prophylactic Iron and folic acid tablets to each and every child	0.16	97174 children (age group 6-9) x 52 weeks x 1 tablet/week x cost of 1 tablet @ Rs .16/ tablet with 10% wastage	103	77.52	Approved. Amount approved is Rs. 77.52 lakhs.
	De-Worming tablets (Albendazole)	1.19	97174 children to be de-wormed x 1 campaign per year x 2 tablets per campaign x Rs1.19/- per tablet		21.35	Approved. Amount approved is Rs.21.35 lakhs

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Drugs for ARSH			83	83	Approved. For IFA @ Rs.0.16 and albendazole @ Rs.1.19..All the procurement of drugs and supplies for ARSH to be met from this head only and not from any other head.
B.17	**Regional drugs warehouses/ Strengthening of Procurement & Logistics**			**179.93**	**165.98**	
	Director, IPD	90000	1X12	0.00	0	Budgeted under SPMU
	Sr. Consultant Equipment Procurement & Maintenance	60000	1X12	0.00	0	Budgeted under SPMU
	4 No. Bio Medical Engineers (one each at Divisional level)	22000	4 X X 12	10.56	9.6	Approved @ Rs.20000/month
	Technical Assistant with IT background	22000	1x12	2.64	2.4	Approved @ Rs.20000/month
	Pharmacist	11500	2 X 12	2.76	2.52	Approved @ Rs.10500/month
	Computer Assistant cum Data Entry Operator	10000	2 X 12	2.40	2.16	Approved @ Rs.9000/month
	Purchase of 4 nos of Computer & Accessories	50000	4	2.00	2	Approved
	At Each District					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	HQ					
	Additional Pharmacist	11500	12 X 21	28.98	26.46	Approved @ Rs.10500/month
	2 Computer Assistant	9000	2 X 12 X 21	45.36	45.35	Approved @Rs.8800/month
	21 Bio Medical Engineers	20000	21x12	50.40	41.58	Approved @ Rs.16500/month
	TA/DA of Bio Medical Engineers			6.24	6.24	Approved
	Training and Capacity Building @ Rs. 10000/- per district			2.10	2.1	Approved
	Procurement Officer (Doctor)	40000	1x9	3.60	3.6	Approved
	Assistant (Procurement)	9400	1x9	0.85	0.85	Approved
	Computer Operator cum Record Keeper (Procurement)	9000	1x9	0.81	0.72	Approved @ Rs.8000/month
	Logistics Officer	25000	1x9	2.25	2.25	Approved
	Assistant (Logistics)	9400	1x9	0.85	0.85	Approved
	Account Officer/ Finance Manager (Logistics)	20000	1x9	1.80	1.8	Approved
	Section Officer (Logistics)	12000	1x9	1.08	1.08	Approved
	Two Computer Operators cum Record Keeper (Logistics)	9000	2x9	1.62	1.44	Approved @ Rs. 8000/month
	Drug & Pharmaceuticals					
	Doctor	30000	1x9	2.70	2.7	Approved
	Two Pharmacists	11500	2x9	2.07	1.69	Approved @ Rs.9400/month

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Equipment					
	Bio Medical Consultant	25000	1x9	2.25	2.25	Approved
	Bio Medical Engineer	20000	1x9	1.80	1.62	Approved @Rs.18000/month
	One Doctor	35000	1x9	3.15	3.15	Approved
	Assistant (Quality Control)	9400	1x9	0.85	0.85	Approved
	Computer Operator cum Record Keeper (Quality Control)	9000	1x9	0.81	0.72	Approved @ Rs.8000/month
B.18	**New Initiatives/ Strategic Interventions (As per State health policy)/ Innovation/ Projects (Telemedicine, Hepatitis, Mental Health, Nutition Programme for Pregnant Women, Neonatal) NRHM Helpline) as per need (Block/ District Action Plans)**			**770.54**	**573.94**	
B.18.1	Free Treatment of Cleft Lips and Palates and Club Foot			30.2	10	club foot surgeries not approved
B.18.2	Oral Health			22.44	22.44	Approved
B.18.3	Free Treatment Facility for			324	324	Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Hemophilia Patients					
B.18.4	Capacity Building of Doctors in Healthcare Financing and Health policy			17.5	17.5	Approved
B.18.5	Difficult Area Incentive to District Mewat and Hathin Block of Palwa			200	200	Approved. Rs. 200 lakh is approved against a lump sum proposal of Rs. 200 lakhs. Specific activity approval is provided against each sub head as follows
	Civil Surgeon, Dy. Civil Surgeon & SMOs	10000	15			Approved
	Medical Officer Specialist	25000	15			Approved
	Medical Officer	10000	66			Approved
	Dental Surgeon	5000	12			Approved
	Nursing sister & Staff Nurse	2000	72			Approved
	Pharmacist	2000	22			Approved
	Lab Technician	2000	30			Approved
	Radiographer	2000	4			Approved
	MPHS(M)	2000	10			Approved
	MPHS(F)	2000	16			Approved
	MPHW(M)	2000	70			Approved
	MPHW(F)	2000	150			Approved
	Ministerial Staff (Regular)	1000	19			Not Approved
	Ministerial Staff (NRHM) DPM, DAM, Account Asstt. Computer Asstt. Data Entry	1000	60			Not Approved

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Operator, Information Asstt. Etc.					
B.18.6	Menstrual Hygiene Scheme for rural adolescent girls			150	0	Not Approved. Procurement of Sanitary Napkins from MNC open tenders is not approved. Arbitrary change of district for procurement of Sanitary Napkins from SHG to direct procurement from MNC cannot be made as the same has been approved at the highest level by the Mission Steering Group (MSG) of NRHM. State may therefore procure Sanitary Napkins in approved 7 Districts through SHG only.
B.18.7	Continuation of Physiotherapy Units in Four District Hospitals	275000	8	26.4	0	Not Approved
B.19	**Health Insurance Scheme**					
B.20	**Research, Studies, Analysis**			**64.37**	**38**	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Assessment of Behavior Change Communication initiave through Shakshar Mahila Smooh			0	0	Not Approved. Activity is budgeted in IEC part also.
	Assessment of training of SIHFW			26.37	0	Not Approved .
	Assessment of Child Health & Immunization through PGI Chandigarh			21	21	Approved
	Study of Maternal Mortality and Infant Mortality in Haryana			17	17	Approved
B.21	**State level health resources center(SHSRC)**			**99.6**	**99.6**	
	Procurement reforms			19.8	19.8	Approved
	Monitoring & evaluation			23.75	23.75	Approved
	Quality Assurance cell			17.4	17.4	Approved
	Public health planning			18.65	18.65	Approved
	Administrative & Capital cost			15	15	Approved
	Public Private Partnership			5	5	Approved
B.22	**Support Services**			**52.32**	**52.32**	
B22.1	Support Strengthening NPCB					
B22.2	Support Strengthening					

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	Midwifery Services under medical services					
B22.3	Support Strengthening NVBDCP					
B22.4	Support Strengthening RNTCP			**52.32**	**52.32**	
	Travel support for HIV-infected TB patients and an attendant to reach the ART centre			5	5	Approved
	Laptop for trainings at IRL Karnal			0.6	0.6	Approved
	Broadband connection (for IRL & DOTS Plus site)			0.24	0	Not approved this can be met from the miscellaneous head of RNTCP.
	Civil works-for expansion of STC & STDC(rooms for newly sanctioned posts, staff rooms, RNTCP library etc.)			40	40	Approved.
	Additional honorarium to non-salaried dot providers for difficult area @Rs. 250/- per patient for 443 patients			1.1	0	Not Approved. The provision for honorarium is already in RNTCP program budget.
	Photostat Machine for			0.8	0.8	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remarks
	STDC & STC					
	Re-imbursement of telephone charges for DOTS Plus supervisor, STS, STLS, IRL Microbiologist & Medical officer(DOTS Plus Site) @ Rs. 200/-month			0	3.04	Approved
	Incentive to community volunteer on new smear positive case diagnosed & registered @ Rs. 50/- per case			1.7	0	Not approved.
	Providing 3 LA's in IRL Karnal			2.88	2.88	Approved.
B22.5	Contingency support to Govt. dispensaries					
B22.6	Other NDCP Support Programmes					
	NLEP					
	NRHM -peon at sls			0	0	Not approved
B.23	**Other Expenditures** (Power Backup, Convergence etc)					
	Grand Total			**11410.57**	**11088.96**	

Annex 3

Consolidated Approval under Immunization for FY 2012-13

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
C.1	RI Strengthening Project (Review meeting, Mobility Support, Outreach services etc					
c.1.a	Mobility Support for supervision for district level officers.	Rs.50000/ Year /district level officers.		2.52	2.52	
c.1.b	Mobility support for supervision at state level	Rs. 100000 per year.		1	1	
c.1.c	Printing and dissemination of Immunization cards, tally sheets, monitoring forms etc.	Rs. 5 beneficiaries		62.34	62.34	
c.1.d	Support for Quarterly State level review meetings of district officer			1.5	1.5	
c.1.e	Quarterly review meetings exclusive for RI at district level with one Block Mos, CDPO, and other stake holders			1.68	1.68	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
c.1.f	Quarterly review meetings exclusive for RI at block level			0	0	
c.1.g	Focus on slum & underserved areas in urban areas/alternative vaccinator for slums			72.11	72.11	
c.1.h	Mobilization of children through ASHA or other mobilizers	Rs. 150 per session		220.27	220.27	
c.1.i	Alternative vaccine delivery in hard to reach areas	Rs. 100 per session		17.17	17.17	
c.1.j	Alternative Vaccine Delivery in other areas	Rs. 50 per session		63.12	63.12	
c.1.k	To develop microplan at sub-centre level	@ Rs 100/- per subcentre		2.63	2.63	
c.1.l	For consolidation of microplans at block level	Rs. 1000 per block/ PHC and Rs. 2000 per district		3.03	3.03	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
c.1.m	POL for vaccine delivery from State to district and from district to PHC/CHCs	Rs100,000 / district/year		12.5	12.5	
c.1.n	Consumables for computer including provision for internet access for RIMs	@ 400/ -month/ district		0	0	
c.1.o	Red/Black plastic bags etc.	Rs. 2/bags/session		3.15	3.15	
	Hub Cutter/Bleach/ Hypochlorite solution/ Twin bucket	Rs. 900 per PHC/CHC per year		6.64	4.01	
c.1.q	Safety Pits			12.12	12.12	
c.1.r	State specific requirement			47.54	20.54	
c.1.s	Teeka Express Operational Cost			0	47.07	
C.1-Sub Total				529.31	546.74	
C.2	Salary of Contractual Staffs -Sub Total					
c.2.a	Computer Assistants support for State level	Rs.12000-15000 per person per month		2.18	1.8	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
c.2.b	Computer Assistants support for District level	8000-10000 per person per month		27.72	25.2	
C.2-Sub Total				29.9	27	
C.3	Training under Immunization					
c.3.a	District level Orientation training including Hep B, Measles & JE(wherever required) for 2 days ANM, Multi Purpose Health Worker (Male), LHV, Health Assistant (Male/Female), Nurse Mid Wives, BEEs & other staff (as per RCH norms)			15.75	15.75	
c.3.b	Three day training including Hep B, Measles & JE(wherever required) of Medical Officers of RI using revised MO training module)			5.25	5.25	
c.3.c	One day refresher training of district Computer assistants on RIMS/HIMS and immunization formats			0.3	0.3	

FMR Code	Activity	Unit Cost	Physical Targets	Amount Proposed (Rs. In lacs)	Amount Approved (Rs. In lacs)	Remark
c.3.d	One day cold chain handlers training for block level cold chain handlers by State and district cold chain officers			5.25	5.25	
c.3.e	One day training of block level data handlers by DIOs and District cold chain officer			0	0	
C.3-Sub Total				26.55	26.55	
C.4	Cold chain maintenance	Rs.500/PHC/CHCs per year District Rs.10000/ year		5.48	4.88	
C.5	ASHA incentive for full Immunization			52.5	52.5	
	Total under Routine Immunization			**643.73**	**657.67**	
C.6	**Pulse Polio Operational Cost (Tentative)**			**0**	**1,226.22**	
	Grand Total Immunization			**643.73**	**1,883.89**	

Annex 4A

Consolidated Approval under National Iodine Deficiency Disorders Control Programme (NIDDCP) for FY 2012-13

FMR Code	Activity	Unit cost	Physical target	Amount Proposed (Rs. in lacs)	Amount Approved (Rs. in lacs)	Remarks
D	**IDD**					
D.1	**Establishment of IDD Control Cell-**		Implementation & monitoring of the programme	11.50	10.00	State Govt. may conduct and co-ordinate approved programme activities and furnish quarterly financial & physical achievements as per prescribed format.
D.1.a	Technical Officer	1				
D.1.b	Statistical Assistant	1				
D.1.c	LDC Typist	1				
D.2	**Establishment of IDD Monitoring Lab-**		Monitoring of district level iodine content of salt and urinary iodine excretion	7.00	5.00	The vacant sanctioned post of Lab Asst. should be filled up on regular/ contractual basis on priority.

FMR Code	Activity	Unit cost	Physical target	Amount Proposed (Rs. in lacs)	Amount Approved (Rs. in lacs)	Remarks
			as per Policy Guidelines.			State Govt. may conduct quantitative analysis of salt & urine as per NIDDCP Guidelines and furnish monthly/quarterly statements
D.2.a	Lab Technician	1				
D.2.b	Lab. Assistant	1				
D.3	**Health Education and Publicity**		Increased awareness about IDD and iodated salt.	11.00	9.00	IDD publicity activities including Global IDD Day celebrations at various level.
D.4	**IDD Survey/resurveys**	Rs. 50,000 per district		2.00	2.00	State. Govt. may under take 4 districts IDD survey as per guidelines and furnish report.
D.5	Salt Testing Kits supplies by GOI inform of kind grant for 10 endemic districts	12 STK per annum per ASHA	Creating iodated salt demand and monitoring of the same at the			State Govt. to monitor the qualitative analysis of iodated salt by STK through ASHA in 10 endemic districts i.e. Ambala,

FMR Code	Activity	Unit cost	Physical target	Amount Proposed (Rs. in lacs)	Amount Approved (Rs. in lacs)	Remarks
			community level.			Faridabad, Gurgaon, Hissar, Jind, Karnal, Panipat, Punchkula, Rothak, Sonipat, .
D.6	ASHA Incentive	Rs. 25/- per month for testing 50 salt sample/ month	50 salt samples per month per ASHA in 10 endemic districts		19.37	
TOTAL				**31.50**	**45.37**	

Annex 4B

Consolidated Approval under Integrated Disease Surveillance Programme (IDSP) for FY 2012-13

FMR Code	Activity	Unit Cost (where-ever applicable)	Amount Proposed (Rs. in lakhs)	Amount Approved (Rs in lakhs)	Remarks
E.1	**Operational Cost**				
E.1.4	Field Visits	Rs 2,40,000 per District Surveillance Unit per annum Rs 5,00,000 State Surveillance Unit per annum	55.40 (5.0 × 1 + 2.40 x21)	55.40	
	Office Expenses				
	Broad Band expenses				
	Outbreak investigations including Collection and Transport of samples				
	Review Meetings etc				
	Any other expenses				
	Sub Total		**55.40**	**55.40**	
E.1.2	**Laboratory Support**				
	District Priority Lab	Rs. 4,00,000 per district priority lab per annum	8.0 (4.0 × 2)	8.0	
	Referral Network Lab	Rs. 5,00,000 per referral lab per annum	8.0 (4.0 × 2)	8.00	
	Sub Total		**16.0**	**16.0**	
E.2	**Human Resources**				
E.2.1	Remuneration of Epidemiologists	Rs.25,000 - Rs. 40,000/ per month	84.48 (32,000 × 22 × 12)	84.48	The state is requested to calculate the remunerations for Consultant – Finance/Procurement,
E.2.2	Remuneration of Microbiologists	Rs. 25,000 - Rs. 40,000 (Medical Graduates) Rs. 15,000 - Rs. 25,000 (Others)	7.92 (22,000 × 3 × 12)	7.92	
E.2.3	Remuneration of Entomologists	Rs. 15,000 - Rs. 25,000	2.64 (22,000 × 1 × 12)	2.64	

FMR Code	Activity	Unit Cost (where-ever applicable)	Amount Proposed (Rs. in lakhs)	Amount Approved (Rs in lakhs)	Remarks
	Veterinary Consultant	Rs. 25,000 - Rs.40,000	3.84 (32,000 × 1 × 12)	0.00	Consultant Training/Technical, Data Manager, and Data Entry Operator according to IDSP norms.
E.3	Consultant-Finance/ Procurement	Rs. 14,000	1.86 (15,500 × 1 × 12)	1.68 (14,000 × 1 × 12)	
E.3.1	Consultant-Training/ Technical	Rs. 28,000	3.72 (31,000 × 1 × 12)	3.36 (28,000 × 1 × 12)	
E.3.2	Data Manager	Rs. 14,000 (State) Rs. 13,500 (District)	39.66 ([15,500 × 1 × 12] + [15,000 × 21× 12])	35.70 ([14,000 × 1 × 12] + [13,500 × 21× 12])	
E.3.3	Data Entry Operator	Rs. 8,500	26.22 (9,500 × 23 × 12)	23.46 (8,500 × 23 × 12)	
		Sub Total	**170.34**	**159.24**	
E.8	**Training**	As per NRHM Guidelines			
	One day training of Hospital Doctors		2.31 (210 doctors to be trained in 21 batches)	2.31	
	One day training of Hospital Pharmacist / Nurses		-		
	One day training of Medical College Doctors		0.11 (10 to be trained in 1 batch)	0.11	
	One day training for Data Entry and analysis for Block Health Team		1.40 (150 to be trained in 10 batches)	1.40	
	One day training of DM & DEO		0.48 (42 to be trained in 4 batches)	0.48	
		Sub Total	**4.30**	**4.30**	
E.4.1	Expenses on account of newly formed districts which are not yet under IDSP		**3.50** (for District Palwal)	**3.50**	The amount to be utilized for

FMR Code	Activity	Unit Cost (where-ever applicable)	Amount Proposed (Rs. in lakhs)	Amount Approved (Rs in lakhs)	Remarks
					procurement of ICT equipments under IDSP as per programme guidelines.
E.6	Information, Education, and Communication (IEC)		**30.97**	**Not approved**	.
	Total (1+2+3+4+5)		**280.51**	**238.44**	

Annex 4C

Consolidated Approval under National Vector Borne Disease Control Programme (NVBDCP) for FY 2012-13

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
F.1	**DBS (Domestic Budgetary Support)**					
F.1.1	**Malaria**					
F.1.1.a	Contractual Payments					
F.1.1.a.i	**MPW contractual**			288.00	0.00	To be met from state resources & recruitment process be initiated as discussed in NPCC.
F.1.1.a.ii	Lab Technicians (against vacancy)					**To be met from state resources**
F.1.1.a.iii	VBD Technical Supervisor (one for each block)					
F.1.1.a.iv	District VBD Consultant (one per district) (Non-Project States)					
F.1.1.a.v	State Consultant (Non – Project States), M&E Consultant (Medical Graduate with PH qualification) - VBD Consultant (preferably entomologist)					

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
	Accountant&Chowkidar/Office Assistant/			2.28	0.00	
F.1.1.b	**ASHA Incentive**			0.00	8.00	State should involve ASHA for Surveillance and provide incentives as per approval of sixth MSG. MD to look into the matter as discussed in NPCC.
F.1.1.c	Operational Cost including Material for MPWs & FTDs & micro slides			145.97	0.00	
F.1.1.c.i	Spray Wages			0.00	0.00	
F.1.1.c.ii	Operational cost for IRS					
F.1.1.c.iii	Impregnation of Bed nets- for NE states					
F.1.1.d	Monitoring , Evaluation & Supervision & Epidemic Preparedness, NAMMIS including mobility			52.96	30.00	
F.1.1.e	IEC/BCC			27.17	8.00	State has proposed integrated IEC for malaria, JE

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
						and Dengue. The funds approved against JE and Dengue/Chikungunya may also be used.
F.1.1.f	PPP / NGO and Intersectoral Convergence			0.00	0.00	
F.1.1.g	Training / Capacity Building			24.23	8.00	State has proposed integrated training for malaria, JE and Dengue. The funds approved against JE and Dengue/Chikungunya may also be used.
F.1.1.h	Zonal Entomological units					
F.1.1.i	Biological and Environmental Management through VHSC					
F.1.1.j	Larvivorous Fish support			79.80	0.00	
	Total Malaria (DBS)			**620.41**	**54.00**	
F.1.2	**Dengue & Chikungunya**					
F.1.2.a	**Strengthening surveillance (As per GOI approval)**					
F.1.2.	Apex Referral Labs			4.58	0.00	Apex Lab at

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
a(i)	recurrent					Chandigarh is already supported
F.1.2. a(ii)	Sentinel surveillance Hospital recurrent			10.00	10.00	
F.1.2 .a.iii	ELISA facility to Sentinel Surv Labs @ Rs.0.50 lakh			24.30	15.00	Additional demand 9.30 is for setting of IDSP Lab which may be met from their budget.
F.1.2. b	Test kits (Nos.) to be supplied by GoI (kindly indicate numbers of ELISA based NS1 kit and Mac ELISA Kits required separately)					
F.1.2. c	Monitoring and evaluation				95.00	Funds for the important activities have not been proposed and only for vector control towards volunteers has been proposed. State may implement the activities as per budget allocation
F.1.2. d	Epidemic containment					
F.1.2. e	Case management					
F.1.2. f	Vector Control & environmental management			110.00		
F.1.2. g	IEC BCC for Social Mobilization					
F.1.2. h	Inter-sectoral convergence					
F.1.2. i	Training including operational research					

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
						made. The funds can be utilized for any activities under DBS if the funds are in shortage. ● State to plan the activities as per the Mid Term Plan approved by CoS
	Total Dengue/Chikungunya			**148.88**	**120.00**	
F.1.3	**Acute Encephalitis Syndrome (AES)/ Japanese Encephalitis (JE)**					
F.1.3.a	Diagnostics and Case Management				5.00	State should take up this activities which has not been proposed
F.1.3.b	IEC/BCC specific to J.E. in endemic areas				8.00	State has proposed integrated IEC & training for malaria, JE and Dengue. The funds approved against JE and
F.1.3.c	Capacity Building				8.00	

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
						Dengue/Chikungunya may also be used.
F.1.3.d	Monitoring and supervision				5.00	State should take up this activities which has not been proposed
F.1.3.e	Technical Malathion			14.00	14.00	
F.1.3.f	Fogging Machine					
F.1.3.g	Operational costs for malathion fogging					
F.1.3.h	Operational Research					
F.1.3.i	Rehabilitation Setup for selected endemic districts					
F.1.3.j	ICU Establishment in endemic districts					
F.1.3.k	ASHA Insentivization for sensitizing community					
F.1.3.l	Other Charges for Training /Workshop Meeting & payment to NIV towards JE kits at Head Quarter					
	Total AES/JE			**14.00**	**40.00**	Training & IEC not shown in JE by state but clubbed in Malaria. Discussed in

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
						NPCC and state was advised to segregate and show separately as it will be specific that disease. Integration may be done at execution level.
F.1.4	**Lymphatic Filariasis**					
F.1.4.a	State Task Force, State Technical Advisory Committee meeting, printing of forms/registers, mobility support, district coordination meeting, sensitization of media etc., morbidity management, monitoring & supervision and mobility support for Rapid Response Team and contingency support			**Not applicable**		
F.1.4.b	Microfilaria Survey					
F.1.4.c	Monitoring & Evaluation (Assessment)					

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
F.1.4.d	Training District Officers, PHC MOs, Paramedical staff, drug distributors					
F.1.4.e	BCC/Advocacy/IEC at centre, state, district/PHC, sub centre					
F.1.4.f	Honorarium for Drug Distribution including ASHAs and supervisors					
F.1.3.g	**Verification and validation for stoppage of MDA in LF endemic districts**					
F.1.3.g.i	a) Additional MF Survey					
F.1.3.g.ii	b) ICT Survey					
F.1.3.g.iii	c) ICT Cost					
F.1.3.h	**Verification of LF endemicity in non-endemic districts**					
F.1.3.h.i	a) LY & Hy Survey in 350 distt					
F.1.3.h.ii	b) Mf Survey in Non- endemic distt					
F.1.3.h.iii	c) ICT survey in 200 distt					
F.1.4.i	**Post-MDA surveillance**					
	Total Lymphatic Filariasis			**0.00**	**0.00**	
F.1.5	**Kala-azar**					
F.1.5	Case search/ Camp Approach			**Not applicable**		
F.1.5.	Spray Pumps &					

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
a	accessories					
F.1.5.b	Operational cost for spray including spray wages					
F.1.5.c	Mobility/POL/supervision					
F.1.5.d	Monitoring & Evaluation					
F.1.5.e	Training for spraying					
F.1.5.f	IEC/ BCC/ Advocacy					
	Total Kala-azar			**0.00**	**0.00**	
	Total (DBS)			**783.29**	**214.00**	
F.2	**Externally aided component**					
F.2.a	**World Bank support for Malaria (Identified state)**					
F.2.b	Human Resource					
F.2.c	Training /Capacity building					
F.2.d	Mobility support for Monitoring Supervision & Evaluation including printing of format & review meetings, Reporting format (for printing formats)			**Not applicable**		
	Kala-azar World Bank assisted Project					
F.2.e	Human resource					
F.2.f	Capacity building					
F.2.g	Mobility					
F.3	**GFATM support for Malaria (NE states)**					

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
F.3.a	Project Management Unit including human resource of N.E. states					
F.3.b	Training/Capacity Building					
F.3.c	Planning and Administration(Office expenses recurring expenses, Office automation , printing and stationary for running of project)					
F.3.d	Monitoring Supervision (supervisory visits including travel expenses, etc) including printing of format and review meetings,					
F.3.e	IEC / BCC activities as per the project					
F.3.f	Operational cost for treatment of bednet and Infrastructure and Other Equipment (Computer Laptops, printers, Motor cycles for MTS)					
	Total : EAC component			**0.00**	**0.00**	
F.4	**Any Other Items (Please Specify)**			**0.00**	**0.00**	

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
F.5	**Operational costs (mobility, Review Meeting, communication, formats & reports)**			**0.00**	**0.00**	
	Grand total for cash assistance under NVBDCP (DBS + EAC)			**783.29**	**214.00**	
F.6	**Cash grant for decentralized commodities**					
F.6.a	Chloroquine phosphate tablets			80.00		
F.6.b	Primaquine tablets 7.5 mg			5.00		
F.6.c	Primaquine tablets 2.5 mg					
F.6.d	Quinine sulphate tablets					
F.6.e	Quinine Injections					
F.6.f	DEC 100 mg tablets			0.00		
F.6.g	Albendazole 400 mg tablets			0.00		
F.6.h	Dengue NS1 antigen kit				111.00	
F.6.i	Temephos, Bti (AS) / Bti (wp) (for polluted & non polluted water)			55.00		
F.6.j	Pyrethrum extract 2% for spare spray			13.00		
F.6.k	ACT (For Non Project states)			2.00		
F.6.l	RDT Malaria – bi-valent (For Non Project states)			0.00		
F.6.m	Any Other Items (Please Specify)					

FMR Code	Component (Sub-Component)	Unit Cost	Physical target/ Deliverables	Amount Proposed (Rs. in Lacs)	Amount Approved (Rs. in Lacs)	Remarks
	Total grant for decentralized commodities			**155.00**	**111.00**	
	Grand Total for grant-in-aid under NVBDCP			**938.29**	**325.00**	
	Commodity Grants				**0.00**	
	Total NVBDCP Cash + Commodity			**938.29**	**325.00**	

Annex 4 D

Consolidated Approval National Leprosy Eradication Programme (NLEP) for FY 2012-13

FMR Code	Activity proposed		Unit Cost	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 1.	**Improved early case detection**						
G 1.1	Incentive to ASHA	MB	500	0			
		PB	300	0			
G1.1 a	Sensitization of ASHA		50	2000	1.05	1.00	
G 1.2	Specific –plan for High Endemic Districts						
G 2	**G 2. Improved case management**						
G 2.1	DPMR Services						
	MCR footwear, Aids and appliances, Welfare allowance to BPL patients for RCS, Support to govt. institutions for RCS		MCR – 250/- Aids/Appliance -12500 Welfare /RCS – 10,000	972 15 Distt. 3	2.23 2.01 0.30	2.23 1.00 0.30	
G 2.2	Urban L:eprosy Control						
	Mega city - , Medium city (1) -1 , Med. City (2)-0 Township -19		Meg - 280000 Med (1)- 120000 Med. (2) - 236000 Town – 57000	0 1 0 19	0 1.32 0 14.62	0 1.20 0 10.83	
G 2.3	Material & Supplies						
G 2.3 a	Supportive drugs, lab. Reagents &		52,000	21	7.83	7.83	

FMR Code	Activity proposed		Unit Cost	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
	equipments and printing works						
G 2.4	NGO – SET Scheme		500000	2	11.00	3.00	
G 3	**Stigma Reduced**						
G 3.1	Mass media, Outdoor media, Rural media, Advocacy media		50,000	21	11.50	10.50	
G 4.	**Development of Leprosy Expertise sustained**						As NLEP rates are very low, higher rates agreed in keeping with other program mes. Training needs not properly planned
G 4.1	Training of new MO		60000	-	-	-	
G 4.2	Refresher training of MO		40000	631	8.40	4.20	
G 4.3	Training to New H.S/H.W.		30000	631	6.3	3.15	
G 4.4	Other training – Physiotherapist		30000	-	-	-	
G 4.5	Training to Lab. Tech.		30000	-	-	-	
G 4.6	Management training for District Nucleus Team		30000	21	0.30	0.30	
G 5.	**Monitoring, Supervision and Evaluation System improved**						
G 5.1	Travel Cost and Review Meeting						
G 5.1 i	travel expenses – Contractual Staff at State level		50000	1	0.50	0.50	
G 5.1 ii	travel expenses - Contractual Staff at District level		15000	21	3.15	3.15	
G 5.1 iii	Review meetings		20000	4	1.00	0.80	
G 5.2	Office Operation & Maintenance						

FMR Code	Activity proposed		Unit Cost	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 5.2 i	Office operation - State Cell		38000	1	0.44	0.38	
G 5.2 ii	Office operation - District Cell		18000	21	4.35	3.78	
G 5.2 iii	Office equipment maint. State		30000	1	0.35	0.30	
G 5.3	Consumables						
G 5.3 i	State Cell		28000	1	0.32	0.28	
G 5.3 ii	District Cell		14000	21	3.38	2.94	
G 5.4	G 5.4 Vehicle Hiring and POL						
G 5.4 i	State Cell		85000	2	0.94	0.94	
G 5.4 ii	District Cell		75000	21	14.40	14.40	
G 6.	**Programme Management ensured**						
G 6.1	Contractual Staff at State level						
G 6.1 i	SMO	1	40000	x12	4.80	4.80	
G 6.1 ii	BFO cum Admn. Officer	1	30000	x12	3.60	3.60	
G 6.1 iii	Admn. Asstt.	1	16000	x12	1.92	1.92	
G 6.1 iv	DEO	1	12000	x12	1.44	1.44	
G 6.1 v	Driver		11000				
G 6.2	Contractual Staff at Disrrict level						
G 6.2 i	Driver	12	11000	x12	15.84	15.84	
G 6.2 ii	Contractual Staff in selected States, NMS	**21**	16000	**x12**	42.24	40.32	
G 7.	**Others**						

FMR Code	Activity proposed		Unit Cost	Physical Targets	Amount proposed (Rs. In lacs)	Amount approved (Rs. In lacs)	Remarks
G 7.1	Travel expenses for regular staff for specific programme / training need, awards etc				5.24	2.00	
	TOTAL				**170.77**	**142.93**	
	Additionality in Annual Plan						
	NRHM -peon at sls				0.84	0.84	
	WHO/ILEP/ICMR/Others				-	-	

Annex 4 E

Consolidated Approval National Programme for Control of Blindness (NPCB) for FY 2012-13

ACTIVITY		PHYSICAL TARGET	FUNDS REQUESTED	FUNDS APPROVED AS PER GUIDELINES	REMARKS
FMR CODE					
H	**Recurring Grant-in-aid**				
H 1.1	For Free Cataract Operation @ Rs.750/- per case	170000	550.00	505.00	Approved on reimbursement basis
H 1.2	Other Eye Diseases@ Rs.1000/-	1500	15.00	15.00	Approved
H 1.3	School Eye Screening Programme@ Rs.200/- per case	10000	21.00	20.00	Approved
H 1.4	Blindness Survey		5.00	0	Not approved
H 1.5	Private Practitioners @as per NGO norms				
H 1.6	Management of State Health Society and Distt. Health Society Remuneration (salary , review meeting, hiring of vehicle and Other Activities & Contingency) @ Rs.14 lakh/ Rs.7 lakh depending on the size of state		16.00	14.00	Approved
H 1.7	Recurring GIA to Eye Donation Centers @ Rs.1000/- per pair		2.00	2.00	Approved
H 1.8	Eye Ball Collection by Eye Bank @ Rs.1500/- per pair	1200	20.00	10.00	Approved
H 1.9	Training PMOA and MIS training		12.00	4.00	Approved training of PMOA and MIS training for 1 time
H 1.10	IEC, Eye Donation Fortnight, World Sight Day &		35.00	21.00	Approved

ACTIVITY		PHYSICAL TARGET	FUNDS REQUESTED	FUNDS APPROVED AS PER GUIDELINES	REMARKS
	awareness programme in state & districts etc				
H 1.11	Procurement of Ophthalmic Equipment		115.00	115.00	Approved for purchase 50% of the District
H 1.12	Maintenance of Ophthalmic Equipments		0.00	0	
H.2	**Non Recurring Grant-in-aid**				
H.2.1	For RIO (new) @ Rs.60 lakh		0.00	0	
H.2.2	For Medical College@ Rs.40 lakh		0.00	0	
H.2.3	For vision Centre @ Rs.50000/-		10.00	10.00	Approved for 20 Vision Centre
H.2.4	For Eye Bank @ Rs.15 lakh	2	30.00	0	Not Approved
H.2.5	For Eye Donation Centre @ Rs.1 lakh	1	1.00	1.00	Approved for 1 EDC
H.2.6	For NGOs @ Rs.30 lakh	1	30.00	0	Not Approved
H.2.7	For Eye Wards and Eye OTS @ Rs.75 lakh		0.00	0	
H.2.8	For Mobile Ophthalmic Units with tele-network @ Rs.60 lakh		0.00	0	
H.2.9	Grant-in-aid for strengthening of Distt. Hospitals @ Rs.20 lakh	3	60.00	40.00	Approved for 2 Distt Hospital
H.2.10	Grant-in-aid for strengthening of Sub Divisional. Hospitals@ Rs.5 lakh	10	50.00	35.00	Approved for 7 Sub Distt. Hospital
H.3	**Contractual Man Power**				
H.3.1	Ophthalmic Surgeon@ Rs.25000/- p.m	10	30.00	30.00	Approved
H.3.2	Ophthalmic Assistant @ Rs.8000/- p.m	10	9.60	9.60	Approved
H.3.3	Eye Donation Counsellors @ Rs.10000/- p.m.	5	6.00	6.00	Approved
	Total		**1017.60**	**837.60**	

Annex 4F

Consolidated Approval Revised National Tuberculosis Control Programme (RNTCP) for FY 2012-13

FMR Code	Category of Expenditure	Unit cost	Physical target/expected output	Proposed Amount	Approved Amount	Remarks
I.1	Civil works	As per Revised Norms and Basis of Costing for RNTCP	1) Civil work Up gradation and maintenance completed as planned;	39.92	39.92	Approved 100% .Proposal for new DOTS Plus site, 4 new DTC buildings, 2 new TUs, 20 DMCs are approved.
I.2	Laboratory materials	As per Revised Norms and Basis of Costing for RNTCP	1) Sputum of TB Suspects Examined per lac population per quarter; 2) All districts subjected to IRL On Site Evaluation and Panel Testing in the year; 3) IRLs accredited and functioning	51.16	46.40	Approved 100% amount budgeted for district level lab consumables . Approved 65% for the state level lab.

FMR Code	Category of Expenditure	Unit cost	Physical target/expe cted output	Proposed Amount	Approved Amount	Remarks
			optimally;			
I.3	Honorarium	As per Revised Norms and Basis of Costing for RNTCP	1) All eligible Community DOT Providers are paid honorarium in all districts in the FY;	31.96	29.94	Approved 100% budgeted for honorarium for DOTS and DOTS Plus providers. Approved 60% budgeted for travel assistance of MDR TB patients.
I.4	IEC/ Publicity	As per Revised Norms and Basis of Costing for RNTCP	1) All IEC/ACSM activities proposed in PIP completed; 2) Increase in case detection and improved case holding;	31.32	25.00	Approval 80% of the proposal. Approved Rs 4.20 LAKHS as honorarium for communicati on facilitators.
I.5	Equipment maintenance	As per Revised Norms and Basis of Costing for RNTCP	1) Maintenanc e of Office Equipments at State/Distric	20.22	18.00	Approved 60% of the budget proposed for equipment maintenance and 80% for

FMR Code	Category of Expenditure	Unit cost	Physical target/expe cted output	Proposed Amount	Approved Amount	Remarks
			ts and IRL equipments completed as planned; 2) All BMs are in functional condition;			binocular microscope and 100% for IRL equipment maintenance based on the expenditure.
I.6	Training	As per Revised Norms and Basis of Costing for RNTCP	1) Induction training, Update and Re-training of all cadre of staff completed as planned;	23.29	21.09	Approved as per the norms.
I.7	Vehicle maintenance	As per Revised Norms and Basis of Costing for RNTCP	1) All 4 wheelers and 2 wheelers in the state are in running condition and maintained;	18.75	18.75	Approved 100%.
I.8	Vehicle hiring	As per Revised Norms and Basis of Costing for RNTCP	1) Increase in supervisory visit of DTOs and MOTCs; 2) Increase	74.37	30.00	Approval limited as the previous utilization was low.

FMR Code	Category of Expenditure	Unit cost	Physical target/expe cted output	Proposed Amount	Approved Amount	Remarks
			in case detection and improved case holding;			
I.9	NGO/PP support	As per Revised Norms and Basis of Costing for RNTCP	1) Increase in number of NGOs/PPs involved in signed schemes of RNTCP; 2) Contribution of NGOs/PPS in case detection and provision of DOT	59.45	45.00	Approved 75% of the proposed amount.
I.10	Miscellaneou s	As per Revised Norms and Basis of Costing for RNTCP	1) All activities proposed under miscellaneo us head in PIP completed;	50.53	46.00	Approved maximum amount permissible as per the norm. Not approved salary of contractual staff from this head.

FMR Code	Category of Expenditure	Unit cost	Physical target/expected output	Proposed Amount	Approved Amount	Remarks
I.11	Contractual services	As per Revised Norms and Basis of Costing for RNTCP	1) All contractual staff appointed and paid regularly as planned;	485.13	483.93	Amount approved permissible as per the norm. The TA for the State TB HIV coordinator should be met form the miscellaneous head.
I.12	Printing	As per Revised Norms and Basis of Costing for RNTCP	1) All printing activities at state and district level completed as planned;	38.78	19.39	Approved 50%.
I.13	Research and studies	As per Revised Norms and Basis of Costing for RNTCP	1) Proposed Research has been initiated or completed in the FY as planned;	0	0	
I.14	Medical Colleges	As per Revised Norms and Basis of Costing for RNTCP	1) All activities proposed under Medical Colleges head in PIP completed;	31.60	50.60	Approved 100% as the proposal is within the norm. Allotted Rs 19,00,000 over and above the proposed

FMR Code	Category of Expenditure	Unit cost	Physical target/expected output	Proposed Amount	Approved Amount	Remarks
						amount to cover the organizational expenses of ZTF North Zone 2012.
I.15	Procurement –vehicles	As per Revised Norms and Basis of Costing for RNTCP	1) Procurement of vehicles completed as planned;			Approved 100%. The proposal is for 8 Two Wheelers are replacement during the year and 2 new two wheelers for 2 new TUs to be opened during the year are approved.
	Four wheeler			0	0	
	Two Wheeler			5.00	5.00	
I.16	Procurement – equipment	As per Revised Norms and Basis of Costing for RNTCP	1) Procurement of equipments completed as planned;	5.20	4.20	The proposal for computer to TB –HIV coordinator, fire extinguishers and exhaust fans for SDS, not approved as these are not permissible as per the norm.
I.17	Tribal Action Plan					
Total (A)				**966.71**	**883.25**	

FMR Code	Category of Expenditure	Unit cost	Physical target/expected output	Proposed Amount	Approved Amount	Remarks
B22.4	Additionality funds from NRHM (B)			55.38	52.32	
Grand Total (A+B)						**Rs. 935.58**