

F. No. 10(12)/2010-NRHM-I
Government of India
Ministry of Health & Family Welfare
Department of Health & Family Welfare

Nirman Bhawan, New Delhi

Dated: 5th May 2010

To,

The Mission Director, (NRHM)
Government of Punjab
5th Floor, Prayas Building
Dakshin Marg, Sector 38-B
Chandigarh 160 036
Punjab

Subject: Approval of State Programme Implementation Plan of NRHM for the year 2010-11

Madam/Sir,

Please refer to your letter submitting draft Programme Implementation Plan (PIP) for the year 2010-11 and the discussions of the same in the meeting of NPCC held on 23.02.2010 at New Delhi and subsequent deliberations¹.

2. The administrative approval of the PIP for your State is conveyed for an amount of Rs. 364.24 Cr. (Three Hundred Sixty Four Crores and Twenty Four Lakhs) (Detail at Table C below) against the resource envelope available comprising of the following:-

Table A

(Rs in Crores)	
Likely Uncommitted Unspent Balance Available under NRHM as on 1.4.2010	55.77
GOI Resource Envelope for 2010-11 under NRHM (on a 15% higher than current year's Budget Estimate for over planning purpose) ²	283.29
15% State share	43.47
Total	382.53

¹. Budgets may be realigned within 3 months of the issue of the Order, to achieve Monitorable Targets indicated in Attachment F, in case there has been inadequate provision in the PIP, to meet national goals.

². The actual resource allocation shall be in accordance with the budgetary allocation of 2010-11 and may be lower than the resource envelope being approved

The Resource Pool wise break up of total NRHM resources is as follows:

Table B

(Rs in Crores)

Sl No.	Programmes	Likely Uncommitted Unspent balance available as on 1.4.2010	GoI Resource Envelope under NRHM	Total
1	RCH Flexible Pool	48.94	72.00	120.94
2	NRHM Flexible Pool	8.31	75.61	83.92
3	Immunization (from RCH Flexible Pool)			
4	NVBDCP	0.00	0.60	0.60
5	RNTCP	-0.61	8.39	7.78
6	NPCB	-2.01	6.93	4.92
7	NLEP	0.67	1.30	1.97
8	IDSP	0.47	0.91	1.38
9	NIDDCP	0.00	0.20	0.20
10	Director & Admn. (Treasury route)	0.00	70.24	70.24
11	PPI Oper. Cost	0.00	10.16	10.16
12.	15% State share	0.00	43.47	43.47
13.	15% over and above GoI resource envelope for purpose of NPCC approval	0.00	36.95	36.95
	Total (**)	55.77	326.76	382.53
Committed Unspent Balance up to 2009-10 to be Revalidated in 2010-11		Rs.72.25 Crore		

SUMMARY OF APPROVAL
(Details provided in respective Annexes)

Table C

S.No	Scheme/Programme	Approved Amount (In Rs. Crores)
1.	RCH Flexible Pool (Details at Attachment A)	94.42
2.	NRHM Mission Flexible Pool (Details at Attachment B)	167.39
3.	Immunization (from the RCH Flexible Pool) (Details at Attachment C)	3.85
4.	NVBDCP (Details at Attachment D)	1.14
5.	RNTCP (Details at Attachment D)	6.81
6.	NPCB (Details at Attachment D)	6.90
7.	NIDDCP (Details at Attachment D)	0.20
8.	IDSP (Details at Attachment D)	1.98
9.	NLEP (Details at Attachment D)	1.15
10	PPI Operation Cost	10.16
11	Infrastructure Maintenance	70.24
	TOTAL	364.24

In addition to above following activities under NPPCD for provisioning of funding from National Programme for Prevention and Control of Deafness.

S.No	Scheme/Programme	Approved Amount (In Rs. Crores)
12	NPPCD/Mental Health/ Tobacco/etc (Details at Attachment E)	--

3. The above approval is subject to the following mandatory requirements. Non compliance to any of the following requirement may entail in suspension of grant to the State.

A. Monitoring Requirements

1. State/UT shall ensure submission of quarterly report on the Measurable Target/indicators at the end of every quarter as per Attachment F and expected outputs stated in the Record of Proceeding in Annexures of Attachment G. Budgets may be realigned within 3 months of the issue of the Order to achieve Monitorable Targets indicated in Attachment F in case there has been inadequate provision in the PIP, to meet national goals,
2. All approvals are subject to the observations made in the RoP of NPCC for NRHM (Attachment G) which is inclusive of commodity grants under Disease Control Programme in the respective Annexures.

B. Human Resource

3. All Posts under NRHM shall be on contract and for the Plan period. All such appointments would be for a particular facility and non transferable in nature. Priority in contractual recruitments and placements would be for backward districts, difficult, most difficult and inaccessible health facilities.
4. All States would ensure that appropriate skill mix of human resource is made available to ensure provision of minimum service guarantee to health facilities. All professionals multi skilled under NRHM shall be placed in facilities where the skills can be utilized.
5. State shall submit action plan for recruitment, deployment and training of human resources within six months from the issue of the Order.

C. Infrastructure

6. All civil works undertaken to achieve IPHS standards, would be based on expected patient load and priority would be accorded to inaccessible and remote areas as per prescribed criteria.
7. In all new constructions, care should be taken to ensure that the location of these facilities are such that beneficiary households can access them easily. They should preferably be located in the midst of habitation and definitely not in agriculture fields, and outskirts of villages, under any circumstances. Any deviation from the above would be treated as ineligible expenditure under NRHM.

8. All new constructions would require prior approval of GoI if names of facilities have not been mentioned in the NRHM-PIP, and also if any shift is proposed. No shift from backward and inaccessible areas would be allowed.
9. The State shall set up implementation arrangement to monitor all civil works being undertaken, on a monthly basis, to ensure quality of works and completion as per schedule.

D. Communitization

10. The State shall ensure that all operational guidelines relating to VH&NDs are complied with.
11. The State shall ensure timely performance based payments to ASHAs/Community Link Workers. State to ensure that supportive supervision mechanism is put in place within six months.
12. The State shall ensure that RKS meets as frequently as possible and mandatorily at least once in every quarter to review proper utilisation of allocated funds for achievement of goals. The proceedings of such meetings should be maintained for scrutiny.

E. Financial

13. The State shall not make any change in allocation among different components/ activities without approval of GoI. Any proposal for re-appropriation between activities within activities should be informed to GoI in advance. However, such re-appropriation should reflect realignment of activities in accordance with priority to high focus districts/involvement of NGOs etc.
14. The State shall ensure that 15% of its share, based on release of funds by Government of India, is credited to the account of the State Health Society, within one month of issue of the release order. The over-all expenditure on health by the State Government should also go up by a minimum of 10 percent each year.
15. The State shall ensure the completion of delegation of administrative and financial powers during the current financial year. Funding of NRHM to the State in 2010-2011 will be based on clear delegation as per earlier directions.
16. The State shall follow all the financial management systems under operation under NRHM and shall submit Audit Reports, Quarterly Summary Concurrent Audit Report, FMRs, Statement of Fund Position, as and when they are due. State also agrees to undertake Monthly District Audit and periodic assessment of the financial system.

17. The accounts of the State/ grantee institution/ organization shall be open to inspection by the sanctioning authority and audit by the Comptroller and Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Office of the Ministry of Health & Family Welfare.
18. State shall ensure submission of details of unspent balance indicating, inter alia, funds released in advance and 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 and will also count towards the central share.

F. Miscellaneous

19. The State shall ensure establishment of supportive supervisory structures for RCH and other national programmes in lagging districts and for ensuring quality services, within six months of the issue of the Order
20. The State shall maintain essential drug list /develop Standard Protocols , and enforce its implementation through State machinery.
21. Component for the salary of staff and mobility support which is being approved in IDSP Annexure would be subject to approval of EPC/MSG under NRHM. The support for expenditure to be incurred by Central Surveillance Unit (CSU) and the State is subject to approval of World Bank for restructuring and Extension.
22. State shall ensure taking appropriate action to monitor the performance of the cold chain /ILR Points and implementation details of ProMIS.

Yours faithfully

(P.K. Bali)

Under Secretary to the Government of India

Copy to:

1. All JSs in the Ministry of Health & Family Welfare
1. All Programme Division Heads of NRHM/ RCH/ Disease Control Programmes
2. DS/Director Finance (NRHM)
3. All Under Secretaries concerned
4. IFD
5. PPS to Secretary(H&FW)/PS to AS&MD, NRHM
6. Sanction Folder

APPROVAL OF RCH II PIP 2010-11

Rs. in Lakh

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1	Maternal Health	210.00	200 RCH outreach camps;
2	Child Health	122.44	IMNCI cell at State HQ; Operational expenses and consumables for 2 SNCUs; Breastfeeding scheme in 6 districts: training of 12 trainers and 166 batches of frontline workers; evaluation and supervision.
3	Family Planning	69.55	240 camps (female), AMC and & repair of laparoscopes etc.; Printing of manuals
4	ARSH	95.97	Multi Purpose Youth Friendly Centres at 21 DH and 36 SDH
5	Urban RCH	190.44	230 contractual ANMs for 230 slum area clusters
6	Innovations/ PPP/ NGO	364.10	5 new and 12 existing MNGOs; 2 new and 2 existing SNGOs incl. external evaluation; quarterly review meeting with NGO partners; 4000 beneficiaries under Surakhit Janepa Yojana
7	Infrastructure & HR	2632.00	426 SNs, 470 doctors & 8 OT assistants, 1 MH specialists, 1 Hardware supervisor, 2 System analyst, 1 Public Health Specialist, 1 Family Welfare Specialist.
8	Institutional Strengthening	498.06	5 DHs for NABH accreditation
9	Training	813.73	Repairs/ renovations of SIHFW (Mohali), HFWTC (Amritsar), MPHWM training centres (Kharar and Nabha), and ANMTCs (Sangrur, Nangal Hoshiarpur, and Gurdaspur,); Equipment and training aids to SIHFW (Mohali) & HFWTC (Amritsar); SBA TOT - 1 batch, MOs - 1 batch, SNs-120 batches, ANM/LHVs - 120 batches; EmOC -5 batches of MOs; LSAS-TOT - 1 batch, MOs - 24 batches; MTP -20 batches of MOs; RTI/STI -MOs - 60 batches, SN/ ANM/ LHV - 60 batches;

			IMEP -60 batches of medical officers, 60 batches of LHV/ SN/ HA (M)/ ANM/ MPHWH (M).; IMNCI : 20 batches of LHVs/ ICDS supervisors, 30 batches ANMs, 30 batches AWWs; Facility Based New Born Care :20 batches of medical officers, 26 batches of SNs and other CH ; Laparoscopic Sterilisation & Minilap Training : 20 batches (MO, SN, OT tech), NSV Training : 25 Doctors and IUD Insertion Training : 20 batched medical officers, 40 batches ANMs/LHVs/ AWWs.; ARSH -20 batches medical officers, 40 batches ANMs/ LHVs/ AWWs;
10	BCC / IEC	422.00	Advocacy workshops: 118 block level, and 20 district level; focus group discussions in 2950 sub-centres and 1 at State level.
11	Procurement	1837.25	2 New Born Care Centres, 447 Baby Warmers and UV Light Units, 3.50 lakh Manual Mucus Suckers, equipment for 2 SNCUs (Bathinda & Patiala)
12	Programme Management	516.35	Strengthening of State society/ SPMU & DPMU
13	JSY	612.00	48,000 Home Deliveries, 31,500 Institutional Deliveries & 10,500 Caesarean Deliveries. ASHA incentive for 42,000 deliveries & printing of 1,00,000 JSY cards.
14	Sterilisation & IUD Compensation, and NSV Camps	1059.00	240 camps (NSV); 0.90 lakh cases (female) & 0.15 lakh cases (male); 3 lakh cases (IUD services at health facilities/compensation,
	GRAND TOTAL RCH II	9442.89	

ATTACHMENT B

APPROVAL OF MISSION FLEXIPOOL PIP 2010-11

(Rs. in Lakh)

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
B	ASHA selection, training and drug kits	1475.81	All 17360 ASHAs to be trained for 23 days over the year and provided drug kits, mentoring support and regular performance incentives
B2	Untied Funds	1800.55	Untied funds to be utilised at all levels as per guidelines
B3	Infrastructure Related Matters	5645.28	All DH to be made fully operational by March 2011 including dental OPD and dental procedures and all PHCs will provide service guarantees as per NRHM.
	Infrastructure (New & Old), Equipment & Drugs	1416.23	New construction and upgradation of 36 SDHs where upgradation with equipments and dental chair etc.
B4	Annual Maintenance Grant	638.60	AMG to CHCs, PHCs and HSCs
B6	Rogi Kalyan Samiti	715.00	RKS funds to 21DH, 129 CHCs, 445 PHCs and 36 SDH.
B8	Panchayati Raj Initiative	35.00	Preparation of guideline on role of PRIs printing and dissemination in local language to all PRI members and other key stakeholders in NRHM & organise advocacy meetings with PRIs.
B9	Mainstreaming of AYUSH	1511.58	MO's (Ayurveda & Homeo) in position at 236 PHCs; Dispenser (Ayurveda) at 236 PHCs; Dispenser (Homeo) at 115 CHC, 36 SDH & 21 DH
B10.1	Special Innovative Programme for Minorities	21.45	Organisation of Camps
B10.3	IEC/ BCC Convergence With DWSS	11.50	
B11	Mobile Medical Unit	480.00	24 MMUs

B13.1	School Health Programme	690.00	Target Group 30 Lakh students
B14	Additional Contractual staff	1244.17	ANMs at 1411 SCs; Gynaecologists at 10 DH; Travelling allowance to 1411 ANMs
B18	Community Action Programme	380.00	The state may synergise with the work done by the Advisory Group on Community Action in for operationalising Community monitoring and utilise the resource material prepared by the group.
B.19	Procurement of Medicine	41.00	
B22	Dental Health Programme	18.72	
B22.2	Dental Fortnight	44.60	To be organised twice in a year
B27	Strengthening of Programme Management	405.86	Support for 118 Blocks with Block Statistical Asstt, Block Accountant cum cashier; 173 Computer operators
B27.7	Provision of Cell phone	163.80	
Grand Total		16739.15	

APPROVAL OF IMMUNISATION STRENGTHENING PROGRAMME - 2010-11**(Rs. in Lakh)**

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1	Mobility support for Supervision and Monitoring at districts and state level.	11.00	Improved supervision for programme
2	Cold Chain Maintenance	4.42	Strengthening of cold chain
3	Alternate Vaccine Delivery to Session sites	54.87	Timely supply of vaccine to 109740 session sites
4	Social Mobilization by ASHA /Link workers	180.54	Ensure universal access
5	Computer Assistants support at State Level	1.44	
6	Computer Assistants support at District Level	24.00	
7	Printing and dissemination of immunization cards, tally sheets, charts, registers, receipt book, monitoring formats etc.	25.00	Strengthen Monitoring
8	Quarterly review meeting at state level	3.00	
9	Quarterly review meeting at District level	1.60	
10	Quarterly review meeting at block level	21.24	Regular meeting for Programme Review
11	District level Orientation for 2 days ANMs, MPHW,LHV	22.25	Capacity building of Medical Officers, Health Workers and other Immunization related staffs
12	To develop micro plan at sub-centre level	2.95	
13	For consolidation of micro plan at block level	1.58	Conduction of session regularly
14	POL for vaccine delivery from state to District and PHC/CHCs	20.00	
15	Consumables for computer including provision for internet access	1.00	

16	Red/Black/Zipper bags	2.82	Injection waste disposal as per CPCB guidelines
17	Bleach/Hypochlorite solution	0.59	
18	Twin Bucket	0.47	
19	Hiring of Vaccinators for uncovered urban area	6.40	
Total		385.17	

APPROVAL OF NATIONAL VECTOR BORNE DISEASE CONTROL PROGRAMME PIP
2010-11

(Rs. in Lakh)

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1	Domestic Budget support (DBS)		
1.1	Malaria		
a	IEC	15.00	Enhanced Awareness for Malaria Control
d	Training	5.00	Improve capacity of Medical & Paramedical
e	M&E	20.00	Faster Transmission of Data to electronic means
1.3	Dengue & Chikungunya		
a.	Sentinel surveillance hospital	3.00	Early diagnosis & treatment to reduce case fatality rate
b.	Monitoring and evaluation and rapid response	10.00	Assessment at local level
c.	Epidemic preparedness (Logistics + operational cost)	10.00	change in community behaviour for personal protection and readiness to tackle the epidemic outbreak
d.	Fogging machines	3.05	
e.	IEC/BCC for Dengue (chikungunya)	8.00	social mobilization on prevention of mosquito breeding in & around houses and early reporting to hospitals
	Training /Workshop	4.00	more medical officers will be trained on management of dengue/chikungunya cases
3	Cash for Decentralized Commodities	36.33	
	Total cash assistance including cost of decentralized drugs	114.38	
4	Commodity support for VBD	24.03	
	GRAND TOTAL	138.41	

APPROVAL OF RNTCP PIP 2010-11

(Rs. in Lakh)

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1	Civil works	5.40	Civil work Upgradation and maintenance completed as planned;
2	Laboratory materials	31.20	Sputum of TB Suspects Examined per lac population per quarter; All districts subjected to IRL OSE and Panel Testing in the year; IRLs accredited and functioning optimally
3	Honorarium	15.00	All eligible Community DOT Providers are paid honorarium in all districts in the FY
4	IEC/ Publicity	17.50	All IEC/ ACSM activities proposed in PIP completed; Increase in case detection and improved case holding
5	Equipment maintenance	8.40	Maintenance of Office Equipments at State/Districts and IRL equipments completed as planned; All BMs are in functional condition;
6	Training	18.90	Induction training, Update and Re-training of all cadre of staff as planned;
7	Vehicle maintenance	30.90	All 4 wheelers and 2 wheelers in the state are in running condition and maintained;
8	Vehicle hiring	14.40	Increase in supervisory visit of DTOs and MOTCs; Increase in case detection and improved case holding;
9	NGO/PP support	24.30	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
10	Miscellaneous	27.30	All activities proposed under miscellaneous head in PIP
11	Contractual services	425.10	All contractual staff appointed and paid regularly
12	Printing	21.00	All printing activities at state and district level
13	Research and studies	5.00	Proposed Research to be initiated or completed in the FY
14	Medical Colleges	36.60	All activities proposed under Medical Colleges head in PIP
15	Procurement – vehicles	0.50	Procurement of vehicles
Total		681.5	

APPROVAL OF NPCB PIP 2010-11

(Rs. in Lakh)

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP	
1	Grant-in-Aid to NGOs for free Cataract	625.00	Free catops 1,80,000 & for IOL 1,62,000	
2	GIA for School Eye Screening.		25,000 spectacles	
3	Distt. Hospitals			
	1) Purchasing of 2 Phaco Machines @ 12 lacs = 24.00			
	for Civil Hospital Mukatsar & Hoshiarpur			
	2) 5 Yag Laser for 5 District hospital @ 12 lacs = 60.00			
	3) Maintenance of ophthalmic equipments 16 lacs = 16.00			
	4) Applanation Tonometer for district hospitals i.e. (10x60,000) = 6.00			
	6) Fluroscein Angiography (10,00,000x2 = 20.00			
7) Flash Autoclave for each districts hospitals i.e (20x2.50)=50.00				
4	Recurring GIA to Eye Banks (there are 4 eye banks in the State).			
5	Recurring GIA to Eye Donation Centres			
6	Training of PMOAs and MPHWS			
	Training of eye surgeons in identified institutes in following areas:			
	ECCE/IOL implantation Surgery, small incision Cataract Surgery Phaco-			

	emulsification, low vision services, Glaucoma, Pediatric Ophthalmology, Indirect Ophthalmology & Laser Techniques, Vitreoretinal Surgery, Eye Banking & Corneal Transplantation Surgery etc.)		
7	IEC activities		
8	SBCS Remuneration other activities & Contingency		
9	Financial assistance for other Eye diseases		500 cases
10	Regional Institute of Ophthalmology		
11	Grant for Medical Colleges	30.00	
12	Establishing & Strengthening and supply to New Vision Centres at CHCs and Sub-Distt. Hospitals	15.00	30 centres
13	Non-recurring Grant-in Aid to Eye Donation Centre	9.60	
14	Recruitment of Ophthalmic Assistt	6.00	Recruited 10 Ophthalmic Assistants
15	Recruitment of Eye Donation Counsellor	5.00	Recruited 5 Eye Donation Counsellor
TOTAL		690.6	

APPROVAL OF NIDDCP PIP 2010-11

(Rs. in Lakh)

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1	Establishment of IDD Control Cell	6.00	Better implementation and monitoring of programme activities.
2	Establishment of IDD Monitoring Lab	3.50	Monitoring of iodine content of salt and urine samples in districts.
3	a) Health Education and Publicity		Increased awareness about IDD and iodated salt.
	b) Salt Testing Kits supplies by GOI (1,60,000 No)	8.00	Creating iodated salt demand and monitoring of the same at community level.
4	IDD surveys	2.50	Prevalence of IDD in 5 districts of state
	Total	20.00	

APPROVAL OF IDSP PIP 2010-11

(Rs. in Lakh)

ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1. Surveillance preparedness, training & staff salary 2. Outbreak investigation 3. Analysis & use of data	198.00	1. Training of professionals (DSO, Epidemiologists, Microbiologists, Entomologists) 2. IT network for transmission of data and outbreak reporting 3. Strengthening of lab. 4. Surveillance and reporting of disease outbreaks 5. Strengthening of AI surveillance

APPROVAL OF NLEP PIP 2010-11

(Rs. in Lakh)

S. No.	ACTIVITY PROPOSED	AMOUNT APPROVED	MAJOR EXPECTED OUTPUT IN THE PIP
1)	Contractual Services	32.00	Functional leprosy cell at state/district level
2)	Services through ASHA/USHA	2.00	Increase in percentage of cases reported by ASHA
3)	Office expenses & Consumables	7.50	Functional leprosy cell at state/district level
4)	Capacity building	15.00	Improvement in skills in diagnosis & treatment of leprosy
5)	Behavioral Change Communication	20.00	Better self reporting as a result of increased awareness
6)	POL/Vehicle operation & hiring	3.00	Improvement in mobility of SLOs & DLOs
7)	DPMR	10.50	Decrease in recurrence of foot ulcers and reduction in grade II disability through RCS
8)	Material & Supplies	10.50	Management of reaction cases
9)	Urban Leprosy Control	8.00	Better diagnosis & treatment of leprosy in urban areas
10)	Supervision, Monitoring & Review	2.50	Better, supervision & monitoring of programme
11)	Cash assistance	4.00	Better, supervision & monitoring of programme
	TOTAL	115.00	

ATTACHMENT E

Rs. In Lakh

S.No	Scheme/Programme	Approved Amount
12	NPPCD/Mental Health/ Tobacco/etc	NIL

ATTACHMENT F

MONITORING TARGETS TO BE ACHIEVED IN 2010-11

	Activity / Measurable indicator	Achievement in/ up to 2009-10	Target (Cumulative) in/ up to 2010-2011	Addition during the year
I	Monitoring Progress Against Standards:			
A	Maternal Health			
1	Institutional Deliveries	63.3% (DLHS-3) 209193 (HMIS upto Jan 10)	80% 384048	16.7%
2	24x7 Facilities	216	20 more PHCs for FY 10/11 and total 236 upto 10/11	20
3	Functional First Referral Units	DHs - 21 SDHs - 36 CHCs - 25 (112 identified, but BSU in 25)	DHs - 21 SDHs - 36 CHCs - 112	87 CHC
4	Functional Sub Centres	100%	100%	
B	Child health			
5	Sick New Born Care Units	-	2	2
6	Stabilization Units in CHCs/ BPHCs	-	-	
7	Full Immunization	80% (DLHS-3) 361358 (HMIS upto Jan 10)	85% 393975	5%
C	Population Stabilization			
8	Male Sterilization	8435 (HMIS upto Dec 09) Rural-0.6% Urban-0.6% (DLHS-3)	15000	6565
9	Female Sterilization	57560 (HMIS upto Dec 09) Rural-35.4% Urban-25.4% (DLHS-3)	90000	32440
10	No. of IUD insertions	228486 (till Jan 10)	300000	
D	Disease Control :			
11	Annualized New Smear Positive Detection Rate	62%	70%	8%
12	Success Rate of New Smear	87%	Above 87%	

	Activity / Measurable indicator	Achievement in/ up to 2009-10	Target (Cumulative) in/ up to 2010-2011	Addition during the year
	Positive			
13	ABER for malaria	10.55%	11.00%	0.45%
14	API for malaria (cases per thousand population)	0.11	0.13	
15	No. of Reconstructive surgeries performed under NLEP		20	
16	Annual New Case Detection Rate for Leprosy		3.10 per 100,000 population	
17	Cataract Surgeries performed		180000	
II	Human Resources including Training			
18	Appointment of ANMs	4388	457 (2 nd ANM in addition to 954 2 nd ANMs already recruited) 100% sub-centre will have at least one ANM and sub-centre with population more than 6500 will have 2 nd ANM and all sub-centres of focused districts will have two ANMs	457
19	Appointment of staff nurses		426	426
20	Percent / number of ANMs trained as Skilled Birth Attendant	395	480	
21	Doctors trained on EmOC	Training not started	25	25
22	Doctors trained on LSAS	09	96	87
23	Doctors trained in NSV/ Conventional vasectomy	25	25	25
24	Doctors trained in Abdominal Tubectomy (Minilap)	-	40(MO's)	40
25	Doctors trained in laparoscopic Tubectomy	49 (MO's +SN +OTA)	24 (MO's)	24.
26	Personnel trained in IMNCI	1374 (upto Jan 10)	3430	
III	Communitisation Processes.			
27	Functional VHSCs	13250 upto Dec. 09	13298	48

	Activity / Measurable indicator	Achievement in/ up to 2009-10	Target (Cumulative) in/ up to 2010-2011	Addition during the year
28	ASHAs completed four modules of training (minimum 15 days training)	17229 ASHAs have been selected till date. Their 2nd, 3rd and 4th module training is being taken during 2009-10	The Vth module training of ASHA along with refresher training of ASHAs is to be undertaken in 2010-11	
29	ASHAs with Drug kits	84% of trained ASHA were provided drug kit. 14500 kits procured	17360 (100%) ASHAs will have drug kit Procurement of 2860 ASHA drug kits and replenishment of 14500 ASHA drug kits	
30	Expenditure of NRHM funds through Non Governmental organizations	N/A	300 Lakh	Activities to be indicated by the state
31	Percentage Districts having community monitoring system in place	Committees constituted at all levels	Community Monitoring Initiative will be established in all districts	
IV	Flexible Financing			
32	Percent utilization of untied grants	72%	90%	18%
V	Improved Management:			
33	Percent districts uploading timely HMIS Data and confirming	Yes	Yes	
34	Tracking of pregnant mothers and children	Yes	Yes	
35	Computerisation of HMIS (level of data entry, and unit of data entry)	Not indicated	Not indicated	
36	Cold Chain Management (number of functional ILR points)	WIC-5;WIF-1(CFC); ILR-1334; DF-1155 (as on Dec 09)	Not indicated	
37	Procurement System (implementation of ProMIS /	Not indicated	Not indicated	

	Activity / Measurable indicator	Achievement in/ up to 2009-10	Target (Cumulative) in/ up to 2010-2011	Addition during the year
	TNMSC like structure)			
VI	<i>Backward District Focus</i>			
38	Functional Mobile Medical Units	24	24	nil
39	Poor performing districts sub-plan made with targets, and quarterly review shows progress			
40	Difficult, Most Difficult, inaccessible area thrust in provision of infrastructure and human resources.	Areas identified base on service delivery	Due to good infrastructure there is hardly any most difficult/ difficult area but certain areas are inaccessible and infrastructure including manpower strengthening will be done on priority and provision of incentives for these areas.	

NATIONAL RURAL HEALTH MISSION
RECORD OF PROCEEDINGS 2010-11

Record of Proceedings of the National Programme Coordination Committee (NPCC) for Punjab held under the Chairmanship of Shri P.K. Pradhan, Additional Secretary and Mission Director, NRHM for approval of NRHM Programme Implementation Plan (PIP) of State and UTs for the year 2010-11.

I. A meeting of the NPCC of NRHM was held under the Chairmanship of AS & MD, NRHM, to approve the PIP of Punjab on 23.2.2010. The list of members who attended the meeting is placed at **Annex. VI**. The NPCC meeting was convened after the pre-appraisal meeting for the State, with written and oral comments provided to the State to modify the proposal before the NPCC.

II. State Government apprised about the likely uncommitted unspent balance available under NRHM as on 1.4.2010, and were apprised of the GOI Resource Envelope for 2010-11 under NRHM which is 15% higher than current year's Budget Estimate for over planning purpose and 15% State share. It was also clarified that the actual resource allocation shall be in accordance with the budgetary allocation of 2010-11 and may be lower than the resource envelope indicated. The Monitorable Targets for the State was also indicated. It was stated that the budgets may be realigned to achieve Monitorable Targets in case there has been inadequate provision in the PIP, to meet national goals. After detailed discussions and subsequent deliberations, the PIP was finalised for amounts indicated under different components as detailed in the Annexure I to V.

III. The attention of the State was drawn to the following areas for further action :

A. Planning

1. The State Government shall, within 45 days of the issue of Record of Proceedings by the Ministry of Health and Family Welfare, issue detailed Record of Proceedings for each district.

B. Human Resource

2. All posts under NRHM on contract and based on local criteria shall be done by the Rogi Kalyan Samiti /District Health Society. Residence at place of posting must be ensured.
3. Blended payments comprising of a base salary and a performance based component, should be encouraged.
4. Transparent transfer and career progression systems should be implemented in the State.
5. The State shall put in place a transparent and effective human resource policy so that difficult, most difficult and inaccessible areas attract and retain human resources for health.

C. Infrastructure

6. The State shall furnish list of facilities to be upgraded with identification of inaccessible and remote facilities and finalization of district action plans for the identified backward districts within three months.
7. The State shall furnish information relating to physical and financial status of infrastructure and building works already taken up every quarter to Infrastructure Division.
8. The State shall under take all construction activities in meeting health infrastructure gaps with particular focus in backward districts and inaccessible facilities.

D. Communitisation

9. The State shall take up capacity building exercise of Village Health and Sanitation Committees, Rogi Kalyan Samitis and other community /PRI institutions at all levels, involving Non Governmental organizations after a selection process.
10. The State shall ensure regular meetings of all community Organizations /District /State Mission with public display of financial resources received by all health facilities.
11. The State shall also make contributions to Rogi Kalyan Samitis besides introducing user charges wherever feasible protecting the interest of the poor.
12. All performance based payments/incentives should be under the supervision of Community Organizations (PRI)/RKS.
13. The State shall focus on the health entitlements of vulnerable social groups like SCs, STs, OBCs, minorities, women, disabled friendly, migrants etc.

E. HMIS

14. State shall set up a transparent and credible procurement and logistics system. State agrees to periodic procurement audit by third party to ascertain progress in this regard.

15. The State shall undertake institution specific monitoring of performance of Sub Centre, PHCs, CHCs, DHs, etc. in the prescribed format which is to be regularly uploaded as Monthly, Quarterly and Annual Data on the HMIS.

F. Specific Programme Related

16. The State shall operationalise fixed day services in family planning in addition to periodic camps.

17. The states shall henceforth provide only F-IMNCI training to doctors and staff nurses whilst IMNCI is to be provided only to ANMs/AWW and other field functionaries.

18. The State Govt. would co-locate AYUSH in PHCs/CHCs, wherever feasible.

19. Preparation and submission of action plan for establishing supportive supervision structure for RCH programme in the districts with low institutional deliveries.

20. State should operationalise blood storage units in the 111 facilities (designated FRUs) for making them fully functional as CEMoNC centres. Closing manpower gaps in these facilities should be undertaken on a priority basis for the low performing districts.

21. State should actively involve PRIs, VHSCs and RKS in monitoring districts with low sex ratio.

22. SHSRC should be made fully functional within the next three months.

23. State should operationalise the ASHA Resource Centre and ASHA Mentoring Group in the next three months.

24. Details on implementation of PROMIS and additional ILRs are to be indicated separately. Where information on PROMIS & ILR in monitoring targets is not available the state shall provide the same in a month's time.

IV. Based on the State's PIP and deliberations thereon the Plan for the State is finalised as per the detail of Annexure I (RCH Flexible Pool), Annexure II (NRHM Flexible Pool), Annexure-III (Immunization) & Annexure -IV (National Disease Control Programmes) with summary of Infrastructure, Human Resource and Training at Annexure V.

APPROVAL OF RCH II PIP 2010-11

(Rs. in Lakh)

S. No.	BUDGET HEAD	AMOUNT PROPOSED	AMOUNT APPROVED
1	Maternal Health	210.00	210.00
2	Child Health	122.44	122.44
3	Family Planning	69.55	69.55
4	ARSH	95.97	95.97
5	Urban RCH	190.44	190.44
6	Tribal RCH	0.00	0.00
7	Vulnerable Groups	0.00	0.00
8	Innovations/ PPP/ NGO	464.10	364.10
9	Infrastructure & HR	2632.00	2632.00
10	Institutional Strengthening	498.06	498.06
11	Training	829.24	813.73
12	BCC / IEC	442.65	422.00
13	Procurement	1837.25	1837.25
14	Programme Management	516.35	516.35
	Total RCH II Base Flexi Pool	7908.05	7771.89
15	JSY	612.00	612.00
16	Sterilisation & IUD Compensation, and NSV Camps	1059.00	1059.00
	Total RCH II Demand Side	1671.00	1671.00
	GRAND TOTAL RCH II	9579.05	9442.89

NOTE:

1. Activities have been re-classified as per FMR/ Operating Manual heads; details are provided in attachment "A".
2. Details of activities approved/ not approved, and specific comments, are provided in attachment "A".
3. Expenses are to be booked as approved in attachment "A".
4. There is a discrepancy of Rs. 36.23 lakhs from the amount proposed by the State, since this has been shown as available funds under training. State needs to reflect this under overall unspent / available funds.
5. The above includes Rs. 1375.25 lakhs for drugs, proposed by the State under Mission flexible pool, shifted to RCH II (see details in attachment "A", under A.13 - Procurement).
6. The supplies of the RCH drugs from the Ministry of Health and family Welfare are likely to reach the States by September 2010. Therefore, the State may assess its RCH drugs requirement against the present supplies made/ being made by MOHFW through UNOPS as well as the State's own procurement, and use the approved budget for procurement of RCH drugs only if required for meeting the need for the period up to September 2010.

ATTACHMENT "A"
(Rs. in Lakh)

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
A.1	MATERNAL HEALTH				
A.1.2	Referral Transport	200.00	200.00	Referral transport services to be availed by pregnant women.	
A.1.3	Integrated outreach RCH services				
A.1.3.1	RCH Outreach Camps	10.00	10.00	200 camps.	
A.1.4	Janani Suraksha Yojana / JSY				
A.1.4.1	Home Deliveries	240.00	240.00	48,000 deliveries	
A.1.4.2	Institutional Deliveries				
A.1.4.2.1	Rural	220.50	220.50	31,500 deliveries	
A.1.4.2.2	Urban	63.00	63.00	10,500 deliveries	
A.1.4.2.3	Caesarean Deliveries				
A.1.4.3	Other activities (JSY)	88.50	88.50	ASHA incentive for 42000 deliveries; printing of 1 lakh JSY cards;	(1) ASHA incentive for early registration of pregnancy and institutional delivery should also include 3 ANC, and at-least 2 PNC visits. (2) JSY cards - State should print only the Joint MCH Card of MOHFW and MOWCD.
	Sub-total Maternal Health (excluding JSY)	210.00	210.00		
	Sub-total JSY	612.00	612.00		
A.2	CHILD HEALTH				
A.2.1	Integrated Management of Neonatal & Childhood Illness/ IMNCI	4.20	4.20	IMNCI cell at State HQ	
A.2.2	Facility Based Newborn Care/FBNC	20.00	20.00	Operational expenses and consumables for 2 SNCUs	
A.2.5	Infant and Young Child	97.64	97.64	Breastfeeding	

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
	Feeding/ IYCF			scheme in 6 districts: training of 12 trainers and 166 batches of frontline workers; evaluation and supervision.	
A.2.8	Other strategies/ activities	0.60	0.60	Biannual review meeting of State Coordination Committee	
	Sub-total Child Health	122.44	122.44		
A.3	FAMILY PLANNING				
A.3.1	Terminal/Limiting Methods				
A.3.1.1	Dissemination of manuals on sterilisation standards & QA of sterilisation services	28.05	28.05	Printing of: 1.25 lakh sterilisation files, 1 lakh sterilisation cards, 0.25 lakh NSV cards, 1 lakh ECP and IUCD brochures, Operational Guidelines on Fixed Day Static (FDS) sterilisation services, Manuals on SOPs for Sterilisation Services in Camps, Manuals on Repositioning IUCD in FW Programme, IUCD Reference Manuals for MOs, Nursing Staff, Guidelines for Administration of ECPs by Health Care Providers	
A.3.1.2	Female Sterilisation camps	36.00	36.00	240 camps	

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
A.3.1.3	NSV camps	84.00	84.00	240 camps	
A.3.1.4	Compensation for female sterilisation	690.00	690.00	0.90 lakh cases	
A.3.1.5	Compensation for male sterilisation	225.00	225.00	0.15 lakh cases	
A.3.2	Spacing Methods				
A.3.2.2	IUD services at health facilities / compensation	60.00	60.00	3 lakh cases	
A.3.4	Repairs of Laparoscopes	5.00	5.00	AMC and repair of laparoscopes	
A.3.5.	Other strategies/ activities	0.50	0.50	Monitoring services quality and utilisation	
	Sub-total Family Planning (excluding compensation)	69.55	69.55		
	Sub-total Sterilisation & IUD compensation & NSV camps	1059.00	1059.00		
A.4	ARSH				
A.4.1	Adolescent services at health facilities.	28.50	28.50	Multi Purpose Youth Friendly Centres at 21 DH and 36 SDH	
A.4.2	Other strategies/ activities	67.47	67.47	600 ARSH Health strategy guide, 200 ARSH facilitators guide, 5000 orientation handouts and 300 CDs.	
	Sub-total ARSH	95.97	95.97		
A.5	URBAN RCH				
A.5.1	Urban RCH Services	190.44	190.44	230 contractual ANMs for 230 slum area clusters	
	Sub-total Urban RCH	190.44	190.44		
A.6	TRIBAL RCH				
	Sub-total Tribal RCH	0.00	0.00		
A.7	VULNERABLE GROUPS				
	Sub-total Vulnerable Groups	0.00	0.00		
A.8	INNOVATIONS/ PPP/ NGO				
A.8.1	PNMT and Sex Ratio	95.04	95.04	1 lawyer, 1	

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
				statistical assistant, 1 computer assistant, 2 orientations, 50 villages, 10 sting operations, 8 informers and 8 decoy patients	
A.8.3	NGO Programme	119.06	119.06	5 new MNGOs and 12 existing MNGOs; 2 new SNGOs and 2 existing SNGOs; external evaluation existing MNGOs and SNGOs; quarterly review meeting with NGO partners	
A.8.4	Other innovations (if any)	250.00	150.00	Adolescent Program in 2 districts through MNGOs; 4000 beneficiaries under Surakhit Janepa Yojana	(1) Surakhit Janepa Yojana- Approved Rs.100 lakhs. The scheme should be synchronized with GoI guidelines on accreditation of Private Health Facilities. State to inform the number of beneficiaries (2) Adolescent program in 2 districts with NGOs - Rs. 50.00 lakhs approved.
	Sub-total Innovations/PPP/NGO	464.10	364.10		

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
A.9	INFRASTRUCTURE & HR				
A.9.1	Contractual Staff & Services				
A.9.1.3	Staff Nurses	1533.60	1533.60	426 SNs	Approved subject to the following: Salary and incentives should be based on gradation of facilities based on their location (difficult/ most difficult, etc.). The same benchmarks should not be used for district hospitals and CHCs. State may revisit the above.
A.9.1.4	Doctors and Specialists (Anaesthetists, Paediatricians, Ob/Gyn, Surgeons, Physicians)	951.90	951.90	470 doctors.	
A.9.1.5	Other contractual staff	28.50	28.50	8 OT assistants, 1 MH specialists, 1 Hardware supervisor, 2 System analyst, 1 Public Health Specialist, 1 Family Welfare Specialist.	
A.9.3	Minor civil works				
A.9.3.2	Minor civil works for operationalisation of 24 hour services at PHCs	33.00	33.00	2 SNCUs and 2 BSUs.	
A.9.5	Other Activities	85.00	85.00	Vehicle maintenance and POL for State and district level	
	Sub-total Infrastructure & HR	2632.00	2632.00		
A.10	INSTITUTIONAL STRENGTHENING				
A.10.2	Logistics management/	17.09	17.09	Mobility support	Mobility support

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
	improvement			at state, district and block levels; 1 warehouse keeper	(Rs.16.49 lakhs) - Not to be given as fixed monthly emoluments. Vehicles can be hired for monitoring visits.
A.10.3	Monitoring & Evaluation / HMIS	430.97	430.97	Printing of NRHM formats, and registers for PW and child immunisation tracking; training of 20 district M&E officers, 90 block statistical assistants, and 5094 ANMs; HMIS co-ordinators (4 divisional and 1 state); One Information Assistant at each DH/SDH/ Block for PW and Child immunization tracking; 1 computer system for each DH/SDH/ Block (118 blocks); Internet connection and consumables for state, district and block etc	Approved, subject to proper utilization of existing resources, facility level capturing of data on HMIS portal, and complete tracking of pregnant women and children from April 2009 onwards.
A.10.5	Other strategies/ activities	50.00	50.00	5 DHs for NABH accreditation	
	Sub-total Institutional Strengthening	498.06	498.06		
A.11	TRAINING				
A.11.1	Strengthening of Training Institutions	153.36	153.36	Repairs/ renovations of	Approved subject to details being

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
				SIHFW (Mohali), HFWTC (Amritsar), MPHWS-M training centres (Kharar and Nabha), and ANMTCs (Sangrur, Nangal Hoshiarpur, and Gurdaspur,); Equipment and training aids to SIHFW (Mohali) & HFWTC (Amritsar)	provided by the State.
A.11.2	Development of training packages	4.00	4.00	Journal subscription; and development/ translation and duplication of training materials at SIHFW Mohali	
A.11.3	Maternal Health Training				
A.11.3.1	Skilled Birth Attendant / SBA	141.16	141.16	TOT - 1 batch, MOs - 1 batch, SNs-120 batches, ANM/LHVs - 120 batches.	As per new guidelines 3 weeks training can be given to all cadres (ANMs/ SN/ LHVs)
A.11.3.2	EmOC Training	21.20	21.20	5 batches of MOs	
A.11.3.3	Life saving Anaesthesia skills training	49.94	49.94	TOT - 1 batch, MOs - 24 batches	
A.11.3.4	MTP training	5.83	5.83	20 batches of MOs	
A.11.3.5	RTI / STI Training	26.52	26.52	MOs - 60 batches, SN/ ANM/ LHV - 60 batches	
A.11.4	IMEP Training	26.52	26.52	60 batches of medical officers, 60 batches of LHV/ SN/ HA (M)/ ANM/	

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
				MPHW (M).	
A.11.5	Child Health Training				
A.11.5.1	IMNCI	93.46	93.46	20 batches of LHV's/ ICDS supervisors, 30 batches ANMs, 30 batches AWWs	IMNCI is being advocated only for ANM and Health workers.
A.11.5.2	Facility Based Newborn Care	52.61	52.61	20 batches of medical officers, 26 batches of SNs	
A.11.5.5	Other CH Training	27.90	27.90	NSSK - 2 batches TOT, 20 batches each of MOs and SNs	
A.11.6	Family Planning Training				
A.11.6.1	Laparoscopic Sterilisation Training	4.98	4.98	20 batches (MO, SN, OT tech)	
A.11.6.2	Minilap Training	4.98	4.98	20 batches (MO, SN, OT tech)	
A.11.6.3	NSV Training	2.65	2.65	25 doctors	
A.11.6.4	IUD Insertion Training	43.52	43.52	20 batches medical officers, 80 batches ANMs/ LHV's	
A.11.7	ARSH Training	43.16	27.65	20 batches medical officers, 40 batches ANMs/ LHV's/ AWWs	ARSH Training for School Teachers at districts (Rs.15.51 lakhs) - Not Approved.
A.11.9	Other training	127.45	127.45	BCC skill building training: 20 batches of medical officers, 20 batches of DMEIO, Dy MEIO, BEE, HS (M), LHV, ANM, HW (M) HS (M); Training of 1000 ANMs in Lab Methods, Statistical and	

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
				Clinical Skills; Computer training for 96 MOs and statistical assistants/ clerks; Orientation training of 400 rural MOs and ANMs; Professional Development Course for 80 district level officers	
	Sub-total Training	829.24	813.73		
A.12	BCC/IEC				
A.12.1	Strengthening of BCC/IEC Bureaus	77.19	77.19	State & district level BCC coordinators; printing support at State; multimedia equipment	
A.12.3	Implementation of BCC/IEC strategy				
A.12.3.1	BCC/IEC activities for MH	7.70	7.70	Advocacy workshops: 118 block level, 20 district level, and 1 state level	
A.12.3.2	BCC/IEC activities for CH	36.45	21.70	Advocacy workshops: 118 block level, and 20 district level; focus group discussions in 2950 sub-centres	FGD on Adolescents Health Issues @ 250/- per S.C (Rs. 14.75 lakhs) - Not approved. This is a component of AEP of NACO.
A.12.3.3	BCC/IEC activities for FP	9.90	9.90	Advocacy meetings: 118 block level, 20 district level	

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
A.12.3.4	BCC/IEC activities for ARSH	13.60	7.70	Advocacy workshops: 118 block level (for IPC), 20 district level, and 1 state level	School Children Health Competition at Block Level (Rs.5.90 lakhs) - Not approved. This is a component of AEP of NACO.
A.12.4	Other activities	297.81	297.81	2400 Girl Child Competitions; district level IEC activities; State level fairs; World Population Day celebrations at state, district and block levels; Exhibitions at district and block levels; TV spots; production and telecast of documentaries on health issues; Radio Spot Jingles; Posters, comic books, leaflets/ handouts, newspaper advertisements, hoardings, etc.	
	Sub-total BCC/ IEC	442.65	422.00		
A.13	PROCUREMENT				
A.13.1	Procurement of Equipment				
A.13.1.2	Procurement of CH equipment	412.00	412.00	2 New Born Care Centres, 447 Baby Warmers and UV Light Units, 3.50 lakh Manual Mucus Suckers, equipment for 2	Approved. Bag and mask along with NSSK training could be considered for CHCs and 24x 7 PHCs.

FMR Code	ACTIVITY	AMOUNT PROPOSED	AMOUNT APPROVED	EXPECTED OUTPUT	REMARKS
				SNCUs (Bathinda & Patiala).	
A.13.2	Procurement of Drugs and supplies				
A.13.2.2	Drugs & supplies for CH	50.00	50.00	IFA tablets procured	
A.13.2.5	General drugs & supplies	1375.25	1375.25		The following are shifted from Mission flexi pool: Rs. 556.25 lakhs for PHC kits; Rs. 387.00 lakhs for CHC kits; and Rs. 252.00 lakhs for DH kits; Rs. 180.00 lakhs for SDH kits.
	Sub-total Procurement	1837.25	1837.25		Please see additional comments in Annex 2, below summary of RCH II approvals.
A.14	PROGRAM MANAGEMENT				
A.14.1	Strengthening of State society/ SPMU	83.35	83.35		
A.14.2	Strengthening of District society/ DPMU	216.00	216.00		
A.14.4	Other activities (Program mgmt. expenses, mobility support)	217.00	217.00		
	Sub-total Program Management	516.35	516.35		
	Total RCH II Base Flexi Pool	7908.05	7771.89		
	Total RCH II Demand Side	1671.00	1671.00		
	GRAND TOTAL RCH II	9579.05	9442.89		

RECLASSIFICATION OF ACTIVITIES

Activities from the revised PIP sent by the state (post NPCC) have been reclassified as per the FMR/ operating manual heads. State needs to comply with this while booking the expenses and reporting in FMR:

1. Activity 1.4.3 'Other Activities (JSY)' includes
 - 1.4.3.1 Monitor quality and utilisation of services.- Rs.0.50 lakhs
 - 1.4.3.2 JSY Cards (100000) – Rs. 4 lakhs
 - 1.4.3.3. Incentive to ASHA for early registration of pregnancy, Institutional delivery @ Rs. 200/- for 42000 beneficiaries – Rs.84 lakhs

2. Activity 4.2 'Other ARSH strategies/ activities' includes
 - 4.1.1.1 – 4.1.1.5
 - 4.2.2 Sanitary Napkins to adolescent girls- Rs.50 lakhs
 - Operational expenses – Rs. 0.50 lakhs

3. Activity 8.4 'Other innovations' includes
 - 8.4.1 Surakhit Janepa Yojna – Rs.200 lakhs
 - 8.4.4 Implementation of Adolescent Programme through MNGOs in 2 districts – Rs.50 lakhs

4. Activity 9.3 'Minor civil works for operationalisation of 24 hour services at PHCs' includes
 - 9.3.1 Minor Civil Work Blood Storage Units 2 to be set up @ Rs.1.5 lakh per unit – Rs.3 lakhs
 - 9.3.2 Civil Work/ Renovation for SNCU in Women and Children Hospital, Bathinda and MKH Patiala – Rs.30 lakhs

5. Activity 10.3 'Monitoring and Evaluation/HMIS'
 - 10.3.1 Operationalising the new MIES formats/PW and Child Immunization tracking formats
 - 10.3.2 Training
 - 10.3.3 Review Meetings
 - 10.3.4 Other M & E activities

6. Activity 10.5 'Other strategies/ activities' includes
 - Accreditation of District Hospitals for NABH/other certification – Rs.50 lakhs

7. Activity 11.1 'Strengthening of Training Institutions' includes
 - 11.1.1 Carry out repairs/ renovations of the training institutions (SIHFW) – Rs. 15.00 lakhs
 - Carry out repairs/ renovations of the training institutions (HFWTC) – Rs. 15.00 lakhs
 - Carry out repairs/ renovations of the training institutions (MPHW-M Training Centres Kharar & Nabha) – Rs. 10.00 lakhs
 - Carry out repairs/ renovations of the training institutions (ANM Training Centres Hoshiarpur, Gurdaspur, Sangrur, Nangal) – Rs. 30.00 lakhs
 - 11.1.2 Provide equipment and training aids to the training institutions (SIHFW, Mohali and HFWTC, Amritsar) – Rs. 20.00 lakhs

- Provide Training Aids, Computers, Printers, LCD Projectors, Digital Visualisers etc. to Nursing College, Jalandhar – Rs. 30.00 lakhs
 - 11.2.3.12 a Provide District Training Centres at 2 districts – Rs. 16.00 lakhs
 - 11.2.3.12 b Carry out repairs/ renovations of the training institutions (DTCs) – Rs. 15.00 lakhs
 - 11.2.3.12 c Strengthening of State Training Cell – Rs. 2.36 lakhs
8. Activity 11.5.5 'Other CH Training' includes
- 11.5.1.4 NSSK Training for District Trainers at Medical College – Rs.1.94 lakhs & NSSK Training for Medical Officers at District Level – Rs.16.30 lakhs
 - 11.5.1.5 NSSK Training for staff nurses – Rs.9.66 lakhs
9. Activity 11.9 'Other Training' includes
- 11.2.3.6 BCC Skill Building Training for MO at SIHFW, Mohali & HFWTC, Amritsar - Rs. 25.60 lakhs
 - 11.2.3.7 BCC Skill Building Training for District MEIO, Dy MEIO, BEE, HS (M), LHV, ANM, HW (M) HS (M) at SIHFW, Mohali - Rs. 19.60 lakhs
 - 11.2.3.8(a) Computer Training for Medical Officers - Rs. 6.48 lakhs
 - 11.2.3.8(b) Computer Training for Statistical Assistants, Clerks etc. at SIHFW, Mohali - Rs. 10.22 lakhs
 - 11.2.3.9a,b Orientation Training of Rural Medical Officers in NRHM at SIHFW Mohali & HFWTC Amritsar - Rs. 22.60 lakhs
 - 11.2.3.9c,d Orientation Training of Contractual ANMs in NRHM at SIHFW Mohali & HFWTC Amritsar - Rs. 19.60 lakhs
 - 11.2.3.11 Meeting to be organized with DRME for Training of MBBS Students on Basic Obst. Skills at State level - Rs. 0.50 lakhs
 - Training of ANMs recruited under NRHM in Lab Methods, Statistical and Clinical Skills at Block - Rs. 22.85 lakhs

APPROVAL OF MISSION FLEXIBLE POOL PIP 2010-11

(Rs. in Lakh)

S. No	Item	Amount Proposed	Amount Approved	Expected Output	Remarks
B	ASHA selection, training and drug kits				
B1.1	Selection and Training of ASHA				
B1.1.1	Training and Refresher Training of ASHA	416.64	416.64	All 17360 ASHAs to be trained for 23 days over the year and provided drug kits, mentoring support and regular performance incentives	Approved for 17360 ASHAs @ Rs 2400/- per ASHA
B1.1.2	DA to ASHA for Monthly Meeting at PHC level (208.32	208.32		Approved for 17360 ASHAs @ Rs 1200/- per ASHA
B1.1.3	ASHA Uniform and ID card	52.08	52.08		Approved @ Rs. 300 per ASHA for 17360 ASHAs.
B1.2	Drug Kit for ASHA				
B1.2.1	Replenishment of ASHA Drug Kit for	65.25	65.25		Approved for 14500 ASHAs @ Rs 450/- per ASHA
B1.2.2	New Drug Kit for	17.16	17.16		Approved for 2860 ASHAs @ Rs 600/- per ASHA
B1.3	Performance Related Incentives to ASHAs	615.5	620		Approved as proposed by the state. Synergy across JSY and other programmes to be ensured
B1.4	Support Structure for ASHA	95.86	95.86	The detailed mentoring structure for ASHAs as proposed in the PIP is approved.	
Total Budget for ASHA		1470.81	1475.31		
B2	Untied Funds				
B2.1	Untied Funds for CHCs	64.5	64.5	Untied funds to be utilised at all levels as per guidelines	Approved for 129 CHCs @ Rs. 50,000 per annum.
B2.2	Untied Funds to PHCs	111.25	111.25		Approved for 445 PHCs including Rural Hospitals and

					Satellite Hospitals @ Rs. 25,000 per annum
B2.3	Untied Funds SCs	295	295		Approved for 2950 SCs @ Rs. 10,000 per annum
B2.4	Untied Funds to VHSC	1329.8	1329.8		Approved for 13298 VHSCs @ Rs. 10,000 per VHSC per annum
Total Budget for Untied Funding		1800.55	1800.55		
B3	Infrastructure Related Matter				
B3.1.1.1	Major Repair & Renovation of the DHs	1000	1000	All DH to be made fully operational by March 2011	Approved as continuation of activity in progress from 08-09
B3.1.1.2	Drugs for DH	252	0		Shifted under RCH Flexipool
B3.1.1.3	Equipment/Furniture for DH	105	105		Approved for 21 DH @ Rs 5 lakh each as upgradation of DH
B3.1.1.4	Diaylsis Units at 14 DHs	224	224	Dialysis units to be operationalised at all DHs by March 2011	14 Machine Units comprising 2 machines and RO Plant @ Rs. 16.00 Lakh
B3.1.1.5	Construction of new area for Diaylsis Machine	48	48		at Ropar, Mansa, Ludhiana, Ferozepur, Tarn Taran and Nawanshahar @ Rs. 8.00 Lakh each
B3.1.1.6	Augmentation of Maternity Wards in DHs	1000	1000		Approved. The activity to be considered on submission of details.
B3.1.1.7	Dental Chair for all DHs	103.4	103.4	All DHs to run regular dental OPD and	Approved for 20 DH @ Rs. 5.17 lakh each

				undertake dental procedures by march 2011	
B3.1.1.8	RVG for all DHs	72	0		Not approved
B3.1.2.1	Construction of New building of CHC	450	450		Approved for construction of new buildings at Lambi & Apra
B3.1.2.2	Drugs at CHCs	387	0		Shifted under RCH Flexipool (A.13.2.5)
B3.1.2.3	Equipment and Furniture at CHCs	129	129		Approved @ Rs 1 lakh each for 129 CHCs
B3.1.2.4	Dental Chair at CHCs	209.88	209.88	All CHCs to run regular dental OPD by March 2011	Approved for 44 CHCs @ Rs. 4.77 lakh each
B3.1.3.1	Construction of new PHC	122	122		Approved at Bhani Sahib and of PHC Purkhali
B3.1.3.3	Upgradation of 50 PHCs for 24x7 delivery services	750	750		Approved for 50 PHC @ Rs. 15.00 lakh per PHC during 2010-11.
B3.1.3.4	Upgradation of remaining all the 39 PHCs/RHs	897	897	All PHCs in the state to become operational on 24x7 basis by March 2011 to provide service guarantees as per NRHM	Approved for upgradation of all the remaining 39 PHCs/RHs in 4 high focused districts for 24x7 delivery services @ Rs.23.00 lakh per PHC/RH/SH
B3.1.3.5	Equipment and Furniture for PHCs	58.5	58.5		Approved for 39 PHCs including Rural Hospitals and Satellite Hospitals @ Rs. 1,50,000 per PHC

B3.1.3.6	Drugs for 24x7 PHCs including Rural Hospitals and Satellite Hospitals	556.25	0		Shifted under RCH Flexipool (A.13.2.5)
	Provision for sitting arrangement for ANMs in the Non Sub Centre Villages	250	0		Not approved.
B3.1.5.1	Computerization of Selected CHCs/SDHs/DHs in Phased manner including software migration cost & Hardware cost.	200	200		Approved
B3.1.5.2	Referral Ambulances for FRUs	348.5	348.5	Assured referral transport to be made available at all FRUs	Approved for 41 Ambulances @ Rs. 8.50 Lacs each
B3.2.1	Major Repair & Renovation @ SDH	600	600		Approved for 4 SDHs where repair & renovation is in progress. State has proposed partial budget in the current year. The SHS may appraise and approve each DPR before work is started
B3.2.2	Construction of SDH Abohar	525	525	Construction at SDH completed.	Approved for new construction
B3.2.3	Upgradation of Sub Divisional Hospital Khanna	47.21	47.21	Up-gradation at SDH completed.	Approved
B3.2.4	Upgradation of Sub Divisional Hospital Jagraon	12	12	Up-gradation at SDH completed.	Approved

B3.2.5	Equipment and Furniture at SDH	108	108		Approved @ Rs 3 lakh each for 36 SDH
B3.2.6	Drugs at SDH	180	0		Shifted under RCH Flexipool (A.13.2.5)
B3.2.7	Dental Chair at SDH	124.02	124.02	Regular dental OPDs to be started at all SDH by March 2011	Approved for 26 SDHs @ Rs. 4.77 lakh each
Total Infrastructure related budget		8758.76	7061.51		
B4	Annual Maintenance Grant				
B4.1	AMG at CHCs	129	129	AMG to 129 CHCs	Approved for 129 CHCs @ Rs. 100,000 per CHC each to be routed through the account of the RKS at the respective facility
B4.2	AMG at PHCs	222.5	222.5	AMG to 445 PHCs	Approved for 445 PHCs including Rural Hospitals and Satellite Hospitals @ Rs. 50,000 Per annum to be routed through the account of the RKS at the respective facility
B4.3	AMG at HSCs	287.1	287.1	AMG to 2871 HSCs	Approved for 2871 SCs @ Rs. 10,000 Per SC to be routed through the joint account of the ASHA and Pradhan.
Total Annual Maintenance Grants Budget		638.6	638.6		
B6	Rogi Kalyan Samiti				
B6.1	RKS Grant to DH	105	105	RKS funds to 21 DH	Approved for 21 DH @ Rs. 5.00 lakh each
B6.2	RKS Grant to CHCs	129	129	RKS funds to	Approved for 129

				129 CHCs	CHCs @ Rs. 1.00 lakh
B6.3	RKS Grant to PHCs	445	445	RKS funds to 445 PHCs	Approved for 445 PHCs including Rural Hospitals and Satellite Hospitals @ Rs. 1.00 lakh
B6.4	RKS Grant to SDH	36	36	RKS funds to 36 SDH	Approved for 36 SDHs @ Rs 1 lakh
Total RKS corpus grants Budget		715	715		
B7	Preparation on District Action Plans	10	0		Not Approved, Funds available under the management costs overheads may be used
B8	Panchayati Raj Initiative				
B8.1	Preparation of guideline on role of PRIs printed and disseminated in local language to all PRI members and other key stakeholders in NRHM.	15	15		Approved for preparation of guidelines and publishing of 3 lakh copies
B8.2	Organise advocacy meetings with PRIs on	20	20		Approved @ Rs 1 lakhs per district made, detailed budget to be prepared by each district and appraised/approved by the SHS before funds are utilised
Total Budget for engagement with PRIs		45	35		
B9	Mainstreaming of AYUSH				
B9.1	Contractual appointment of AYUSH MO at PHCs	608.88	608.88	MO AYUSH in position at 236 PHCs	Approved at 236 PHCs @ Rs. 21500 per MO

B9.2	Contractual appointment of one Dispenser at PHCs	226.56	226.56	Dispenser Ayurveda in position at 236 PHCs	Approved at in 236 PHCs (Ayurveda) @ Rs. 8,000 per Dispenser
B9.3	Contractual appointment of one AYUSH MO	443.76	492.78	172 AYUSH Mos (Homoeo) in position	Approved for MO (Homeo) at 115 CHCs, 36 SDH and 21 MO at DH @ Rs. 21500 per MO.
B9.4	Contractual appointment of one Dispenser	165.12	183.36	173 Dispenser (Homoeo) in position	Approved at 115 CHCs, 36 SDH and 21 at DH @ Rs. 8,000 per Dispenser
Total Budget for AYUSH Human Resources		1444.32	1511.58		
B10.1	Special Innovative Programme for Minorities				
B10.1.1	Camps for providing FW services and dissemination of information on RCH components and also counselling on various issues like FP, Adolescent health and early registrations of pregnancies	12	12	Camps organised	Approved for holding 10 camps every month @ Rs. 10000 per camp for providing Family Welfare services etc.
B10.1.2	Peer Educator	2.4	2.4		Approved for 20 educators @ Rs. 1000/-p.m
B10.1.3	Audience specific communication material in Urdu, Punjabi pertaining to various themes	6	6		
B10.1.4	Meetings/Workshops with Stakeholders and opinion leaders	1.05	1.05		
Total Budget for innovative programmes for minorities		21.45	21.45		

B10.3	IEC/ BCC Convergence With DWSS				
B10.3.1	IEC/BCC Campaign for Health and Hygiene	10	10		
B10.3.2	State Level Workshop on Sanitation and Health	1.5	1.5		
Total Budget IEC/ BCC Convergence With DWSS		11.5	11.5		
B11	Mobile Medical Unit				
B11.1	Recurring cost of MMUs	480	480		Approved recurring cost @ Rs. 20.00 lakhs per MMU per annum for 24 MMUs
Total Budget for MMUs		480	480		
B12	Emergency Respon Services				
B12.1	Capital cost	1491.8	0		Approved capital & recurring cost of 90 Ambulances (Phase 1) & IT Infrastructure cost to be met out from the funds provided for ERS in the last year. No fresh budgetary allocation during FY 10-11 proposed by the state
B12.2	Recurring cost of	388.8	0		
Total Budget for EMRI		1880.6	0		
B13	School Health Programme				
B13.1	Providing Iron Folic Acid for control of anemia	120	120		Approved for 100 tablets per child for 30 Lakh students
B13.2	Providing Albendazole Tablets	50	50		Approved two tablets per child (For Deworming)
B13.3	Providing Scadies lotion for skin	30	30		

	diseases				
B13.4	Providing emergency kits in all schools	60	60		Approved at 20,000 schools @ Rs. 300 per kit
B13.5	Incentives to RMO / MO, ANMs etc. for examining and screening of all children during the year.	50	50		
B13.6	Recruiting contractual staff as per Govt. of India's guidelines along with operational expenses from them	50	50		Approved
B13.7	POL, stationary and other operational expenses at State Head Quarter and District Head Quarters	20	20		
B13.8	IEC material, Health cards, referral cards etc.	10	10		
B13.9	Complicated Disease among the children and adolescents i.e RHD,CHD, Thelesemia, Cancer, Cleft palate & Juvenile diabetics	300	300		
Total Budget for School Health Programme		690	690		
B14	Additional Contractual staff				
B14.2	Remuneration to contractual ANM	1168.308	1168.308		Approved @ Rs. 6900/- per ANM for an additional ANM at 1411 SCs (including all SCs of high focus Districts)

B14.5	Incentive to Doctors working in the extremely remote areas	20	0		Not approved
B14.5	Travelling allowance to ANMs	33.864	33.864		Approved for 1411 ANMs @ Rs. 200.00 per month
B14.6	Remuneration yo Contractual Gynaecologist at DH	42	42		Approved Rs. 35,000/- per month for 10 DH
Total Budget for contractual health human resources		1264.172	1244.172		
B18	Community Action Programme				
B18.1	Community Based Survey and community hotline	300	300		Approved. The state may synergise with the work done by the Advisory Group on Community Action in various states for operationalising Community monitoring and utilise the resource material prepared by the group.
B18.2	Community Monitoring	80	80		
Total Budget Community Action Programme		380	380		
B19	Procurement of medicines				
B19.1	Procurement of Calcium tablets	18	18		
B19.1	Procurement of Zinc sulphate tablets	23	23		
Total Budget for procurement of medicines		41	41		
B22	Dental Health Programme				
B22.1	Operationalization of Mobile Dental Vans				

B22.1. 1	Major repair of vehicles	0	0		
B22.1. 2	Operational expenditure like POL	4.32	4.32		Approved @ Rs. 4,000 per month for 9 mobile dental vans
B22.1. 3	Dental material	10.8	10.8		Approved @ Rs. 10000 per month in 9 mobile dental vans
B22.1. 4	Maintenance of equipments for Dental Vans	1.8	1.8		Approved for maintaincne of equipment @ Rs. 20000 per annum per vehicle for 9 mobile dental vans
B22.1. 5	Maintenance of Vans (20000X9)	1.8	1.8		Approved for maintainence of the vehicle @ Rs. 20000 per annum per vehicle for existing 9 mobile dental vans, provided to state by GOI
Budget for Mobile Dental Vans		18.72	18.72		
B22.2	Dental Fortnight twice an year				
B22.2. 1	At District Hospitals (20000X21X2)	8.4	8		Approved @ Rs. 20,000 per DH, Rs. 15,000 per SDH and Rs. 10,000 per CHC per fortnight on two occassions in the year
B22.2. 2	Sub Divisional Hospitals (15000X36X2)	10.8	10.8		
B22.2. 3	CHCs (10000X129X2)	25.8	25.8		
Total Budget for Dental Fortnight		45	44.6		
B25	State Health Resource Centre		0	0	From the funds already available. No additional funding support proposed during FY 2010-11 by the state

B27	Strengthening of Programme Management				
B27.1.1	Support for Block Programme Management Unit.	130.272	130.27		Salary for Block Statistical Asstt. @ Rs.9200 x 118 Blocks approved from Operational Expenditure
B27.1.2	Support for Block Programme Management Unit	130.272	130.27		Salary for Block Accountant Cum Cashier @ Rs. 9200 x 118 Blocks From Operational Expenditure
B27.1.3	Computer operator for strengthening of District Society and BPMU	145.32	145.32		Approved for 173 Computer operator @ Rs. 7000 per month for strengthening of District Society and BPMU. Salary from Operational Expenditure
B27.2	Maintenance Engineer @ Rs. 15000 x 20 districts	36	0		Rs. 36 lakh proposed under RCH
Total Budget for Programme Management		441.864	405.86		
B27.7	Provision of Cell Phone				
B27.7.1	Mobile phones for ANMs	13.71	13.71		Capital cost of 457 Mobile Handsets for newly recruited ANMs
B27.7.2	Reimbursement of monthly cell phone bill to ANM/LHV/Block SA and accountant	145.37448	145.37		Approved for ANM/LHV/ Block SA and Accountant @ Rs.222/- PM from Operational Expenditure
B27.7.3	Reimbursement of monthly cell phone bill to BSMOs	4.72	4.72		Approved for BSMOs @ Rs.333/- per month from Operational Expenditure

Total Budget for mobile phones	163.80	163.8		
Grand Total	21437.15	16739.15		

ANNEX-III

APPROVAL OF IMMUNISATION STRENGTHENING PROGRAMME PIP 2010-11

(Rs. in Lakh)

S. No.	Activities	Amount Proposed	Amount Approved	Outcome
1.	Mobility support for Supervision and Monitoring at districts and state level.	11.00	11.00	Improved supervision for programme
2	Cold Chain Maintenance	4.42	4.42	Strengthening of cold chain
3	Alternate Vaccine Delivery to Session sites	54.87	54.87	Timely supply of vaccine to 109740 session sites
4	Social Mobilization by ASHA /Link workers	180.54	180.54	Ensure universal access
5	Computer Assistants support at State Level	1.44	1.44	
6	Computer Assistants support at District Level	24.00	24.00	
7	Printing and dissemination of immunization cards, tally sheets, charts, registers, receipt book, monitoring formats etc.	25.00	25.00	Strengthen Monitoring
8	Quarterly review meeting at state level	3.00	3.00	Regular meeting for Programme Review
9	Quarterly review meeting at District level	1.60	1.60	
10	Quarterly review meeting at block level	21.24	21.24	
11	District level Orientation for 2 days ANMs, MPHW,LHV	22.25	22.25	Capacity building of Medical Officers, Health Workers and other Immunization related staffs
12	To develop micro plan at sub-centre level	2.95	2.95	Conduction of session regularly
13	For consolidation of micro plan at block level	1.58	1.58	
14	POL for vaccine delivery from state to District and PHC/CHCs	20.00	20.00	
15	Consumables for computer including provision for internet access	1.05	1.00	
16	Red/Black/Zipper bags	2.82	2.82	Injection waste disposal as per CPCB guidelines
17	Bleach/Hypochlorite solution	0.59	0.59	
18	Twin Bucket	0.47	0.47	

19	Hiring of Vaccinators for uncovered urban area	6.40	6.40	
20	Procurement of tracking bags for all ANMs	16.25	0.00	
Total		401.47	385.17	

Strengths

As per the evaluated survey the full immunization has improved from 72.9% (DLHS-2) to 79.9% in 2007-08 (DLHS 3).

Monitoring of sessions by districts is appreciated. As mentioned more than 22,000 sessions have been monitored; it will be appreciated if the outcomes could be projected.

It is highly appreciated that the state has provided component-wise expenditure along with physical progress for past five years; this has facilitated in the proper appraisal of the PIP.

Areas for Improvement and Actions by State

There is high dropout from BCG to DPT 3 at 9.3%. This needs to be addressed through better tracking of beneficiaries by ensuring availability of beneficiary/due list with the ANM/AWW/ASHAs at the session sites.

There is wide inter-district variation in coverage as per the DLHS 3 report; districts like Mansa, Sangrur have low coverage; and 8 out of 21 districts are showing decline in Full immunization coverage compared to DLHS-2. Moreover, the PIP does not have any strategic plan for further improvement in coverage in the state or in the low performing districts. The state should identify the best practices in the well performing districts so as to replicate them in other districts as well as look into reasons for decrease in BCG coverage in many districts compared to DLHS2 survey to take remedial measures.

The State has been lagging behind compared to other states in conduction of immunization trainings even though support for the activity has been provided under the PIP. The state needs to complete Immunization trainings of Health Workers and expedite trainings of Medical Officers and other field staff.

The state has not reported any physical or fiscal progress for last year against the approved activity of microplan development. However, the number of sessions in rural areas has been reduced by 16824 sessions.

There are no details of VPD cases and deaths; state needs to strengthen the VPD surveillance system. The PIP is silent on injection safety and waste management.

Item restricted or not permissible under Immunization PIP

1. Procurement of tracking bags for all ANMs- Rs. 16.25 lakh

APPROVAL UNDER THE NATIONAL DISEASE CONTROL PROGRAMME

Revised National Tuberculosis Control Programme (RNTCP)

(Rs. in Lakh)

Sr. No.	Activity Proposed	Amount Approved	Expected Output by March 2011	Remarks
1	Civil works	5.4	1) Civil work Upgradation and maintenance	
2	Laboratory materials	31.2	1) Sputum of TB Suspects Examined per lac population per quarter;	Utilized only 23.5 Lac in the last 4 qtrs (53% of the estimated budget). 70% of estimated amount approved.
			2) All districts subjected to IRL OSE and Panel Testing in the year;	
			3) IRLs accredited and functioning optimally;	
3	Honorarium	15	1) All eligible Community DOT Providers are paid honorarium in all districts in the FY;	Utilized only 4.9 Lac in the last 4 qtrs. 40% of estimated amount approved.
4	IEC/ Publicity	17.5	1) All IEC/ACSM activities proposed in PIP	Utilized only 1.8 Lac in the last 4 qtrs . 50% of estimated amount approved.
			2) Increase in case detection and improved case holding;	
5	Equipment maintenance	8.4	1) Maintenance of Office Equipments at State/Districts and IRL equipments	Utilized only 1.7 Lac in the last 4 qtrs . 50% of estimated amount approved.
			2) All BMs are in functional condition;	

6	Training	18.9	1) Induction training, Update and Re-training of all cadre of staff completed as planned;	
7	Vehicle maintenance	30.9	1) All 4 wheelers and 2 wheelers in the state are in running condition and maintained;	Utilized only 19 Lac in the last 4 qtrs. 75% of estimated amount approved.
8	Vehicle hiring	14.4	1) Increase in supervisory visit of DTOs and MOTCs;	No amount utilized in the last 4 qtrs. 40% of estimated amount approved.
			2) Increase in case detection and improved case holding;	
9	NGO/PP support	24.3	1) Increase in number of NGOs/PPs involved in signed schemes of RNTCP;	Amount spent in last 4 qtrs is only 0.9 Lacs, 30% of the estimated amount approved. More amount can be allotted based on the progress made
			2) Contribution of NGOs/PPS in case detection and provision of DOT	
10	Miscellaneous	27.3	1) All activities proposed under miscellaneous head in PIP completed;	Utilized only 21.6 Lac in the last 4 qtrs . 60% of estimated amount approved.
11	Contractual services	425.1	1) All contractual staff appointed and paid regularly as planned;	No provision of additional staff under revised financial norm.
12	Printing	21	1) All printing activities at state and district level completed as planned;	Utilized only 1lac in the last 4 qtrs. 50% of estimated amount approved.

13	Research and studies	5	1) Proposed Research has been initiated or completed in the FY as planned;	
14	Medical Colleges	36.6	1) All activities proposed under Medical Colleges	Utilized only 21.4 lacs in the last 4 qtrs. 75% of estimated amount approved.
15	Procurement - vehicles	0.5	1) Procurement of vehicles	Condemnation criteria for 4 wheelers not met. Replacement of 4 wheelers only permissible only for tribal / hilly districts
16	Procurement - equipment	0	1) Procurement of equipments	No provision under revised financial norm.
Total		681.5		
In addition to this, a commodity grant of Rs. 233.74 lacs has been approved for central level procurement of Anti TB Drugs and Laboratory Equipments for sputum culture & drug sensitivity.				

PERFORMANCE

State	Annualized NSP case detection rate	Success rate of NSP
Punjab	62%	87%

- (i) Targets to be achieved during 2010-11:
- Detection rate of at least 70% and maintain treatment success rate above 87%.
 - All RNTCP districts have supervisory structure for disease control programme.

- (ii) Information under 29:

- The state needs to strengthen the services in the districts of:

District	ANSP CDR (2009)	District	ANSP CDR (2009)
Amritsar	66%	Ludhiana	59%
Barnala	63%	Moga	66%
Fatehgarh Sahib	65%	Mohali	69%

Firozpur	53%	Muktsar	67%
Gurdaspur	58%	Patiala	55%
Hoshiarpur	59%	Sangrur	59%
Jalandhar	65%	Tarn Taran	62%
Kapurthala	55%		

Annualized new sputum positive case detection rate (ANSP CDR) of at least 70% should be achieved.

HUMAN RESOURCE:

Vacancy position of various categories of staff and the training status of existing staff is placed below:

DTO			MOTC			STS			STLS			DMC LT/Microscopist		
Sanctioned	Vacancy	Total in place & trained	Sanctioned	Vacancy	Total in place & trained	Sanctioned	Vacancy	Total in place & trained	Sanctioned	Vacancy	Total in place & trained	Sanctioned	Vacancy	Total in place & trained
20	0	16	56	6	41	57	3	45	57	2	52	353	36	312

Medical Officer (at BPHC /PHC/CHC/district hospital/other)		Paramedical staff including health workers	
Vacancy	In place and yet to be trained	Vacancy	In place and yet to be trained
636	416	1719	1681

New Contractual Position:

The following new contractual positions have been sanctioned under the revised financial norm of RNTCP for building capacity of districts and states to implement new initiatives like TB HIV Collaborative services and programmatic management of MDR TB:

State Level Positions:

- Asst. Programme Officer/Epidemiologist - 1 per state
- DOTS Plus Site Sr. Medical Officer - 1 per DOTS Plus site
- DOTS Plus Site Statistical Assistant - 1 per DOTS Plus site
- Sr. LT at IRL - 1 per IRL
- Store Assistant (SDS) - 1 per SDS
- DEO (IRL) - 1 per IRL

District Level Positions:

- Sr. DOTS Plus and TB HIV Supervisor - 1 per district (as per phased expansion of DOTS Plus and intensified TB-HIV activities)

- State will fill up all existing vacancies of regular staff as mentioned above by June 2010.
- State will fill up all existing vacancies as well as new contractual positions mentioned above by June 2010.
- State will arrange for the training of all untrained staff mentioned above as per plan.

National Vector Borne Disease Control Programme (NVBDCP)

(Rs. in Lakh)

Sl.No.	Activity Proposed	Amount Proposed	Amount Approved	Expected Output	Remarks
1	Domestic Budget support (DBS)				
1.1	Malaria				
a	IEC	17.60	15.00	Enhanced Awareness for Malaria Control	To meet the gap ,IEC activities may be integrated with NRHM IEC activities
b	ASHA				
c	MPWs				
d	Training	5.00	5.00	Improve capacity of Medical &Paramedical	
e	M&E	20.00	20.00	Faster Transmission of Data to electronic means	
f	DDT 50%wdp	0.00	0.00		
g	Operational Cost				
1.2	Filaria - Non-endemic state				
1.3	Dengue & Chikungunya				
a.	Sentinel surveillance hospital	3.00	3.00	Early diagnosis & treatment to reduce case fatality rate	
b.	Monitoring and evaluation andrapid response	10.00	10.00	Assessment at local level	
c.	Epidemic preparedness (Logistics + operational cosst)	14.00	10.00	change in community behaviour for personal protectiona nd readiness to tackle the epidemic outbreak	The funds include mobility support to combat outbreak/epidemic & preparedness to combat

d.	Fogging machines	4.00	3.05		
e.	IEC/BCC for Dengue (chikungunya)	8.00	8.00	social mobilization on prevention of mosquito breeding in & around houses and early reporting to hospitals	
	Training /Workshop	4.00	4.00	more medical officers will be trained on management of dengue/chikungunya cases	
1.4	AES/JE Non-endemic				
2	Kala-azar - Non-endemic state				
3	Cash for Decentralized Commodities	85.40	36.33		All insecticides and laravicides as per the approved decentralized item by GOI and not supplied by centre
	Total cash assistance including cost of decentralized drugs	171.00	114.38		
4	Commodity support for VBD	24.03	24.03		
	GRAND TOTAL	195.03	138.41		
Punjab (Physical Targets)					
	Activity	State Average (5 Years)	Target for 2010-2011	Remarks	
	ABER	10.55%	11.00%	Filling up of the MPWs (875 out of 2858) posts will be	

				needed for improving surveillance	
	API	0.11 per thousand population	0.13 per thousand population		
	Percent Coverage of Targetted Population under Insecticidal Residual Spray (IRS)	78.84% coverage of population (2009) 63.73% coverage of rooms (2009)	Minimum target of population coverage is 80%	For better analysis of IRS, Room coverage of more than 70% is to be achieved	
	Training	-	Minimum 2 batches of MOs, 1 batch of DMOs and 30% of ASHAs, LTs and MPWs to be trained for malaria and other VBD activities	Priority in training should be given to untrained people	
	Appointment of Human Resource	Out of 20 districts 20 DMOs are sanctioned but 11 are in position	9 DMOs post need to be filled by state		
	Distribution and utilization of LLINs	Not applicable	Not applicable	-	

Integrated Disease Surveillance Project (IDSP)

(Rs. in Lakh)

Activity Proposed	Amount proposed	Amount Approved	Expected Outcome	Remarks
4. Surveillance preparedness, training & staff salary 5. Outbreak investigation 6. Analysis & use of data	232.00	198.00	1. Training of professionals (DSO, Epidemiologists, Microbiologists, Entomologists 2. IT network for transmission of data and outbreak reporting 3. Strengthening of lab. 4. Surveillance and reporting of disease outbreaks 5. Strengthening of AI surveillance	would be met from EAP

Activity	Sub-activity	Tasks		2010 - 11 (In Rs.)	Remarks
Surveillance Preparedness	1. Training	1.1	Training of Hospital Doctors	3,08,000.00	20 per district, 10 per batch, 2 batch per district Per head training cost = Rs.1100/-. Unit cost per participant: training material Rs.100; travel: Rs.300; Food: 250 (10
		1.2	Training of Hospital Pharmacist / Nurses	4,20,000.00	40 per district, 20 per batch, 2 batch per district per head training cost = Rs.750/-. Unit cost per participant: training material Rs.50; travel: Rs.100; Food: 150 (20 x 300) + Other exp

	1.3	Training of Medical College Doctors	72,240.00	16 per medical college, per head training cost = Rs.2150/- Unit cost per participant: training material Rs.150; travel: Rs.1000; Food: 250 (20 x 1400) + Other expenses Rs.5000 ; Trainer charges: Rs.10000 = Total Rs.43,000/- per batch
	1.4	Training of Medical College Pharmasist/ Nurses/ Medical Record Technician	21,420.00	12 per college, Per head training cost = Rs.850/-. Unit cost per participant: training material Rs.50; travel: Rs.200; Food: 150 (20 x 400) + Other expenses Rs.5000 ; Trainer charges: Rs.4000 = Total Rs.17,000/- per batch
	1.5	Data entry and analysis training for Block Health Team	2,10,000.00	15 per district, per head training cost = Rs.1000/-. Unit cost per participant: training material Rs.50; travel: Rs.300; Food: 200 (20 x 550) + Other expenses Rs.5000 ; Trainer charges: Rs.4000 = Total Rs.20,000/- per district
	1.6	DM & DEO training	72,000.00	Per head training cost= Rs.1600 /-, 2 days training Unit cost per participant: {[training material Rs.50 + Food 150 x 2] + travel: Rs.500} x 20 + Other expenses (computer hiring) Rs.10000; Trainer charges: Rs.4000 = Total Rs.31,000/- per batch
			SUB TOTAL	11,03,660.00

	2. Staff Salary	2.1	Epidemiologists (21)	52,92,000.00	Rs 30000 per month
		2.2	Microbiologists (2)	4,80,000.00	Rs 20000 per month
		2.3	Entomologists(1)	2,40,000.00	Rs 20000 per month
		2.4	Consultants (Finance) (1)	1,68,000.00	Rs 14000 per month
		2.4.1	Consultants (Training) (1)	3,36,000.00	Rs 28000 per month
		2.5	Data Mangers (21)	34,08,000.00	Rs 13500 per month
		2.6	Data Entry Operators (24)	24,48,000.00	Rs 8500 per month
		2.7	Mobility Support	24,00,000.00	(Rs 1000 per visit x 10 visits)/ per month per district
		2.8	Office Expenses @ Rs.2000 P.M.	5,40,000.00	Rs 2000 at districts and Rs 5000 at SSU per month
				SUB TOTAL	1,53,12,000.00
	3. Community Surveillace	3.1	Community Sensitisation		Rs 1 20 000 per State
		3.2	Review meetings (monthly) at PHC level		Rs 1400 per month in States where CBS is planned
		3.3	Contingency		Rs 2000 per month in States where CBS is planned
		3.4	Evaluation		Rs 25 000 per state per year
		Sub TOTAL			
		Sub Total of Surv.Prepare			
Outbreak investigation and response	4	4.1	ASHA incentives for Outbreak reporting	2,40,000.00	Estimated to get 10 informations per month from volunteers a total of 120 such information in a year per district. Each informant to be given an incentive of Rs.100/-

		4.2	Medical college/Institute participation in outbreak investigation	1,00,000.00	At an average cost of Rs.5000/- per outbreak x 2 outbreaks per year. In the current year only 1 investigation in 225 districts is expected.
		4.3	Consumables and kits for lab	4,00,000.00	Rs 200 000 per lab (17 total - 2 labs in 8 states + 1 lab in Punjab)
		4.4	Collection & Transpotation of samples	1,20,000.00	Rs 6000 per district per year
		4.5	Referral lab network	20,00,000.00	Rs 5 00 000 per referral lab per year
			Sub Total of Outbreak Investigation and response	28,60,000.00	
Analysis and use of data	5	5.1	State IDSP Weekly Alert Bulletin	30,000.00	Rs 30 000 per SSU per year
		5.2	Annual IDSP report	20,000.00	Rs 20 000 per SSU per year
		5.3	Printing of Reporting Forms	2,30,000.00	Rs 10000 per district and Medical College per year
		5.4	Broadband Expenses	2,88,000.00	Rs 1000 per district+SSU+Medical Colleges per month
		5.5	Meetings State Epidemiologists and Microbiologists	50,000.00	Rs 50 000 per State
			Sub Total Of Analysis and use of Data	6,18,000.00	
			TOTAL (Priority States)	1,98,93,660.00	

National Programme for Control of Blindness (NPCB)

(Rs. in Lakh)

Sr. No.	Particulars	PIP for 2010-11	Amount Approved	Remarks
1	Grant-in-Aid to NGOs for free Cataract (Annual target for free catops 1,80,000 & for IOL 1,62,000 for which the achievement of the State is 107% in the year 2007-08 & 94.8% in the year 2008-09	425.00	625.00	Approved under the head GIA for Catops and various other schemes
2	GIA for School Eye Screening. Provision for supply of spectacles, medicines and other supplied for school eye care programme.			Approved under the head GIA for Catops and various other schemes
	Year Refractive Error Spectacles No. of student distributed not provided spectacles (due to paucity of funds) 2008-09 35,876 5,924 29,952 2009-10 18,712 5,919 12,793 (upto 10/09) Funds required for 2010-11 for 25,000 spectacles @ Rs.200/- per spectacles	50.00		Approved under the head GIA for Catops and various other schemes
3	1) Distt. Hospitals Purchasing of 2 Phaco Machines @ 12 lacs = 24.00 for Civil Hospital Mukatsar & Hoshiarpur	261.00		Approved under the head GIA for Catops and various other schemes
	2) 5 Yag Laser for 5 District hospital @ 12 lacs = 60.00			Approved under the head GIA for Catops and various other schemes

	3)	Maintenance of ophthalmic equipments 16 lacs = 16.00			Approved under the head GIA for Catops and various other schemes
	4)	Applanation Tonometer for district hospitals i.e. (10x60,000) = 6.00			Approved under the head GIA for Catops and various other schemes
	5)	Auto refractometer for each districts hospitals i.e. (20x3.50) = 70.00			
	6)	Fluorescein Angiography (10,00,000x2) = 20.00			Approved under the head GIA for Catops and various other schemes
	7)	Flash Autoclave for each districts hospitals i.e (20x2.50)=50.00			Approved under the head GIA for Catops and various other schemes
	8)	Non contact tonometer for 5 districts i.e. (5x3.00) = 15.00			Not approved
4		Recurring GIA to Eye Banks (there are 4 eye banks in the State). Which has got collection of more than 100 eye balls.	6.00		
5		Recurring GIA to Eye Donation Centres	5.00		Approved under the head GIA for Catops and various other schemes
6		Training of PMOAs and MPHWs Training of eye surgeons in identified institutes in following areas: ECCE/IOL implantation Surgery, small incision Cataract Surgery Phaco-emulsification, low vision services, Glaucoma, Pediatric Ophthalmology, Indirect Ophthalmology & Laser	5.00		Approved under the head GIA for Catops and various other schemes

	Techniques, Vitreoretinal Surgery, Eye Banking & Corneal Transplantation Surgery etc.)			
7	IEC activities World Sight Days and Fortnight at 20 districts @ 50,000 and 100 eye donation awareness camps in remote and border areas at PHCs and CHCs level	15.00		Approved under the head GIA for Catops and various other schemes
8	SBCS Remuneration other activities & Contingency - Furniture, Stationery, Honorarium of Staff, Maintenance work - Other contingency etc.	14.00		Approved under the head GIA for Catops and various other schemes
9	Financial assistance for other Eye diseases @ 1000 tentatively for 500 cases - Glucoma, Diabetic Retinopathy, Laser Tech., Corneal transplantation, Childhood blindness, Squint surgery etc.	5.00		Approved under the head GIA for Catops and various other schemes
10	Regional Institute of Ophthalmology (RIO) as per Annexure III	60.00		
11	Grant for Medical Colleges (there are 3 Medical Colleges in the State). Grant-in-Aid for Govt. Medical College Faridkot & Medical College Patiala @ 30.00 lakh each. As per Annexure III	60.00	30.00	Approved
12	Establishing & Strengthening and supply to New Vision Centres at CHCs and Sub-Distt. Hospitals at 30 centres @ 50,000 in the border and remote areas of the State.	15.00	15.00	Approved
13	Non-recurring Grant-in Aid to Eye Donation Centre @ Rs. 1 lac for 10 eye donation centers	5.00	9.60	Approved
14	For recruitment of Ophthalmic Assistant 10 @ 8,000	9.60	6.00	Approved
15	For recruitment of Eye Donation Counsellor 5 @ 10,000	6.00	5.00	Approved
TOTAL		941.60	690.60	

Physical Targets:

State/UTs	Minimum Physical Targets 2010-11			
	Cataract Operations (with 95% IOL)	Other Eye Diseases (Glaucoma, Diabetic Retinopathy, Trachoma etc)	Eye Donation	Spectacles to School Children
Punjab	180,000	3000	1000	7000

**National Iodine Deficiency Disease Control Programmes
(NIDDCP)**

(Rs. in Lakh)

S.No	Activity proposed	Amount Approvedl	Expected Output	Remarks
1	Establishment of IDD Control Cell	6	Better implementation and monitoring of programme activities.	Filling up of all sanctioned vacant posts of IDD Cell and IDD Lab by the state government on regular or contractual basis.
2	Establishment of IDD Monitoring Lab	3.5	Monitoring of iodine content of salt and urine samples in districts.	
3	a)Health Education and Publicity		Increased awareness about IDD and iodated salt.	Survey should be conducted as per GOI guidelines of NIDDCP @ Rs. 50,000/- per district
	b) Salt Testing Kits supplies by GOI (1,60,000 No)	8	Creating iodated salt demand and monitoring of the same at community level.	
4	IDD surveys	2.5	Prevalence of IDD in 5 districts of state	
	Total	20		

National Leprosy Eradication Programme (NLEP)

(Rs. in Lakh)

S. No.	Activity proposed	Amount proposed	Amount Approved	Expected Outcome	Remarks
1)	Contractual Services				
	State - SMO, BFO cum AO, DEO, Administrative Assistant, Driver, NMS (20 Nos.)	33.33	32.00	Functional leprosy cell at state/district level	
	District - Drivers (10)				
2)	Services through ASHA/USHA				
	Honararium to ASHA, sensitization of ASHA	2.00	2.00	Increase in percentage of cases reported by ASHA	
3)	Office expenses & Consumables				
		7.36	7.50	Functional leprosy cell at state/district level	
4)	Capacity building				
	4 days training of newly appointed MO (rural & urban)				
	3 days training of newly appointed health worker & health supervisor	19.52	15.00	Improvement in skills in diagnosis & treatment of leprosy	Training plan needs to be clearly articulated
	2 days refresher training of MO				
	5 days training of newly appointed Lab. Technician				
5)	Behavioral Change Communication				
	Quiz, folk show, IPC workshop, Meeting of opinion leaders, Health melas	30.72	20.00	Better self reporting as a result of increased awareness	IEC activities needs to be integrated with other programs under NRHM
	Wall painting, Rallies, Hoardings etc				
6)	POL/Vehicle operation & hiring				
	2 vehicles at state level & 1 vehicle at district level	3.00	3.00	Improvement in mobility of SLOs & DLOs	
7)	DPMR	10.50	10.50	Decrease in	

	MCR footwear, Aids and appliances, Welfare allowance to BPL patients for RCS, Support to govt. institutions for RCS			recurrence of foot ulcers and reduction in grade II disability through RCS	
8)	Material & Supplies				
	Supportive drugs, lab. reagents & equipments and printing forms	10.40	10.50	Management of reaction cases	
9)	Urban Leprosy Control				
		8.00	8.00	Better diagnosis & treatment of leprosy in urban areas	
10)	Supervision, Monitoring & Review				
	Review meetings and travel expenses	1.00	2.50	Better, supervision & monitoring of programme	
11)	Cash assistance				
		5.00	4.00	Better, supervision & monitoring of programme	
	TOTAL	130.83	115.00		

The approved amount for Punjab State under National Leprosy Eradication Programme for 2010-11 is 1.15 crores. Targets to be achieved during 2010-11 are as follows -

1. Annual New Case Detection Rate - 3.10 per 1,00,000 population
2. Reconstructive Surgery for disability correction in leprosy affected persons - 20
3. Completion of all sanctioned training activities.

SUMMARY OF MAIN APPROVED ACTIVITIES
INFRASTRUCTURE, HUMAN RESOURCE & TRAINING

(Rs. in Lakh)

S.No.	Activity	Amount Approved	Expected Output	Budgeted Under
INFRASTRUCTURE				
1	Minor civil works for operationalisation of 24 hour services at PHCs	33	2 SNCUs and 2 BSUs.	RCH
2	Strengthening of Training Institutions	153.36	Repairs/ renovations of SIHFW (Mohali), HFWTC (Amritsar), MPHW-M training centres (Kharar and Nabha), and ANMTCs (Sangrur, Nangal Hoshiarpur, and Gurdaspur,); Equipment and training aids to SIHFW (Mohali) & HFWTC (Amritsar)	RCH
3	Procurement of CH equipment	412	2 New Born Care Centres, 447 Baby Warmers and UV Light Units, 3.50 lakh Manual Mucus Suckers, equipment for 2 SNCUs (Bathinda & Patiala).	RCH
4	Drugs & supplies for CH	50	IFA Tablets procured	RCH
5	General drugs & supplies	1375.25	The following are shifted from Mission flexi pool: Rs. 556.25 lakhs for PHC kits; Rs. 387.00 lakhs for CHC kits; and Rs. 252.00 lakhs for DH kits; Rs. 180.00 lakhs for SDH kits.	RCH
6	Integrated Management of Neonatal & Childhood Illness/ IMNCI	4.2	IMNCI cell at State HQ	RCH
7	Adolescent services at health facilities.	28.5	Multi Purpose Youth Friendly Centres at 21 DH and 36 SDH	RCH
8	Major Repair & Renovation of the DHs	1000	All DH to be made fully operational by March 2011	MFP
9	Drugs for DH	252		MFP
10	Equipment/Furniture for DH	105		MFP

11	Diaylsis Units at 14 DHs	224	Dialysis units to be operationalised at all DHs by March 2011	MFP
12	Construction of new area for Diaylsis Machine	48		MFP
13	Augmentation of Maternity Wards in DHs	1000		MFP
14	Dental Chair for all DHs	103.4	All DHs to run regular dental OPD and undertake dental procedures by march 2011	MFP
15	RVG for all DHs	72		MFP
16	Construction of New building of CHC	450		MFP
17	Drugs at CHCs	387	All essential drugs to be made available at all CHCs by March 2011 and state budget for medicines to be enhanced.	MFP
18	Equipment and Furniture at CHCs	129		MFP
19	Dental Chair at CHCs	209.88	All CHCs to run regular dental OPD by March 2011	MFP
20	Construction of new PHC	122		MFP
21	Upgradation of 50 PHCs for 24x7 delivery services	750	All PHCs in the state to become operational on 24x7 basis by March 2011 to provide service guarantees as per NRHM	MFP
22	Upgradation of remaining all the 39 PHCs/RHs	897		MFP
23	Equipment and Furniture for PHCs	58.5		MFP
24	Drugs for 24x7 PHCs including Rural Hospitals and Satellite Hospitals	556.25	Essential drugs to be availble at all PHCs and state budget for medicines to be enhanced.	MFP
25	Provision for sitting arrangement for ANMs in the Non Sub Centre Villages	250		MFP

26	Computerization of Selected CHCs/SDHs/DHs in Phased manner including software migration cost & Hardware cost.	200		MFP
27	Referral Ambulances for FRUs	348.5	Assured referral transport to be made available at all FRUs	MFP
28	Major Repair & Renovation	600		MFP
29	Construction of SDH Abohar	525		MFP
30	Upgradation of Sub Divisional Hospital Khanna	47.21		MFP
31	Upgradation of Sub Divisional Hospital Jagraon	12		MFP
32	Equipment and Furniture at SDH	108		MFP
33	Drugs at SDH	180	All essential drugs to be made available at all SDH s by March 2011 and state budget for medicines to be enhanced	MFP
34	Dental Chair at SDH	124.02	Regular dental OPDs to be started at all SDH by March 2011	MFP
35	Mobile phones for ANMs	13.71		MFP
Sub- total (Infrastructure)-		10828.78		
Human Resources				
1	Staff Nurses	1533.6	426 SNs	RCH
2	Doctors and Specialists (Anaesthetists, Paediatricians, Ob/Gyn, Surgeons, Physicians)	951.9	470 doctors.	RCH
3	Other contractual staff	28.5	8 OT assistants, 1 MH specialists, 1 Hardware supervisor, 2 System analyst, 1 Public Health Specialist, 1 Family Welfare Specialist.	RCH
4	Urban RCH Services	190.44	230 contractual ANMs for 230 slum	RCH

			area clusters	
5	PNDT and Sex Ratio	95.04	1 lawyer, 1 statistical assistant, 1 computer assistant, 2 orientations, 50 villages, 10 sting operations, 8 informers and 8 decoy patients	RCH
6	Contractual appointment of AYUSH MO at PHCs	608.88		MFP
7	Contractual appointment of one Dispenser at PHCs	226.56		MFP
8	Contractual appointment of one AYUSH MO	492.78		MFP
9	Contractual appointment of one Dispenser	183.36		MFP
10	Peer Educator	2.4		MFP
11	Incentives to RMO / MO, ANMs etc. for examining and screening of all children during the year.	50		MFP
12	Recruiting contractual staff as per Govt. of India's guidelines along with operational expenses from them	50		MFP
13	Remuneration to contractual ANM	1168.308		MFP
14	Incentive to Doctors working in the extremely remote areas	20		MFP
15	Travelling allowance to ANMs	33.864		MFP
16	Remuneration yo Contractual Gynaecologist at DH	42		MFP
17	Support for Block Programme Management Unit.	130.27		MFP

18	Support for Block Programme Management Unit	130.27		MFP
19	Computer operator for strengthening of District Society and BPMU	145.32		MFP
Sub-total (Human Resources)		6083.492		
Training				
1	Development of training packages	4	Journal subscription; and development/ translation and duplication of training materials at SIHFW Mohali	RCH
	Maternal Health Training			RCH
2	Skilled Birth Attendance / SBA	141.16	TOT - 1 batch, MOs - 1 batch, SNs- 120 batches, ANM/LHVs - 120 batches.	RCH
3	EmOC Training	21.2	5 batches of MOs	RCH
4	Life saving Anaesthesia skills training	49.94	TOT - 1 batch, MOs - 24 batches	RCH
5	MTP training	5.83	20 batches of MOs	RCH
6	RTI / STI Training	26.52	MOs - 60 batches, SN/ ANM/ LHV - 60 batches	RCH
7	IMEP Training	26.52	60 batches of medical officers, 60 batches of LHV/ SN/ HA (M)/ ANM/ MPHw (M).	RCH
	Child Health Training			RCH
8	IMNCI	93.46	20 batches of LHVs/ ICDS supervisors, 30 batches ANMs, 30 batches AWWs	RCH
9	Facility Based Newborn Care	52.61	20 batches of medical officers, 26 batches of SNs	RCH
10	Other CH Training	27.9	NSSK - 2 batches TOT, 20 batches each of MOs and SNs	RCH
	Family Planning Training			RCH
11	Laparoscopic Sterilisation Training	4.98	20 batches (MO, SN, OT tech)	RCH
12	Minilap Training	4.98	20 batches (MO, SN, OT tech)	RCH
13	NSV Training	2.65	25 doctors	RCH
14	IUD Insertion Training	43.52	20 batches medical officers, 80 batches ANMs/ LHVs	RCH

15	ARSH Training	27.65	20 batches medical officers, 40 batches ANMs/ LHV's/ AWWs	RCH
16	ARSH other activities+B40	67.47	600 ARSH Health strategy guide, 200 ARSH facilitators guide, 5000 orientation handouts and 300 CDs.	RCH
17	Other training	127.45	BCC skill building training: 20 batches of medical officers, 20 batches of DMEIO, Dy MEIO, BEE, HS (M), LHV, ANM, HW (M) HS (M); Training of 1000 ANMs recruited under NRHM in Lab Methods, Statistical and Clinical Skills; Computer training for 96 each MOs and statistical assistants/ clerks; NRHM orientation training of 400 each rural MOs and ANMs; PDC training (Professional Development Course) for 80 district level officers	RCH
18	Dissemination of manuals on sterilisation standards & QA of sterilisation services	28.05	Printing of: 1.25 lakh sterilisation files, 1 lakh sterilisation cards, 0.25 lakh NSV cards, 1 lakh ECP and IUCD brochures, 1000 Operational Guidelines on Fixed Day Static (FDS) approach for sterilisation services, 1000 Manuals on SOPs for Sterilisation Services in Camps, 1000 Manuals on Repositioning IUCD in FW Programme, 5000 IUCD Reference Manuals for MOs, 6000 IUCD Reference Manuals for Nursing Staff, 6000 Guidelines for Administration of ECPs by Health Care Providers	RCH
19	Infant and Young Child Feeding/ IYCF	97.64	Breastfeeding scheme in 6 districts: training of 12 trainers and 166 batches of frontline workers; evaluation and supervision.	RCH
20	Preparation of guideline on role of PRIs printed and disseminated in local language to all PRI members and other key	15		MFP

	stakeholders in NRHM.			
	Sub-total Training	868.53		
	Total Infrastructure, HR and Training	17780.802		

**List of participants for the meeting of the Sub Group appraisal Committee held on 23rd Feb
2010 to consider the PIPs of Punjab, FY 2010-11**

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