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Government of India
Ministry of Health and Family Welfare
Department of Health and Family Welfare

Nirman Bhavan, New Delhi
Dated the 1st February, 2016

To,
Principal Secretary (Health & Family Welfare) & (Medical Education)
Of concerned States

Subject: Rashtriya Varishth Jan Swasthya Yojana (RVJSY) – Continuation and Expansion of Tertiary Level Activities of National Programme for Health Care of the Elderly (NPHCE) during 12th Five Year Plan

Sir/Madam,

I am directed to state that the Government of India has since approved the proposal for continuation, expansion and implementation of various tertiary level care and other related activities to be undertaken under the National Programme for Health Care of the Elderly (NPHCE) during the 12th Five Year Plan. These activities include, inter alia, continuation of 8 Regional Geriatric Centres and setting up of 12 new Regional Geriatric Centres, setting up of two National Centres for Ageing, special initiatives for 75+ population, National level activities including IEC, Research Activity, Survey through LASI, staff and State level activities (review, monitoring, IEC etc.). A total amount of Rs. 477.49 crores has been earmarked under the Scheme. However, the funds would be released to States/UTs/Institutes/NCAs/RGCs etc. only after the budget is provided to the programme Division. It may be recalled that NPHCE was initiated during the year 2010-11 and now it has been approved to continue and expand the programme (including tertiary level activities) during 12th Five Year Plan period.

2. The estimated cost of the tertiary level activities of the programme are as per details in the following table:-

*Expenditure during 12th Plan Period

Item/Component	(Rs. in lakhs)	
	Non Recurring	Recurring (for the Plan Period)
Regional Geriatric Centre (8 existing and 12 new)		
i) Civil works and furniture of 30 bedded Geriatric Unit @ Rs. 200.00 lakh per unit for 12 new units	2400	
ii) Machinery and Equipment @ Rs. 50 lakh	600	

(Rs. in lakhs)		
Item/Component	Non Recurring	Recurring (for the Plan Period)
per unit for 12 new units.		
iii) Drugs and Consumables		1200
iv) Research Activities		2400
v) Human Resources (Contractual)		5023
vi) Training activities		260
vii) Pilot vaccination to 75+ elderly		1200
viii) Meeting/ Review/ IEC		306
ix) Machinery & Equipment		600
x) Home visits and home based care		220
Special initiatives for the 75+ population		2000
National Level Activities Including IEC, Research Study, Survey, Staff		
i) IEC, Monitoring and Evaluation		1000
ii) Research Study		507
iii) Survey (through LASI)		2000
iv) Staff		580
v) Contingency/TA/DA/Training/Others		400
State Level Activities (Review/Monitoring/IEC/ Meetings/Training etc.)		1680

3. It has been decided with the approval of Competent Authority to rename the tertiary component of the Programme as Rashtriya Varishth Jan Swasthya Yojana (RVJSY). It has also been decided to give special focus to the 75+ population under the Scheme (RVJSY) which would include:

- a. Earmarking of 50% of all hospital beds for the 75+ population created under this Scheme.
- b. Development of a home health care service: A new service will be provided from the Regional Geriatric Centres (8+12) under this Scheme for population with age above 75 years. The service will include visit by a team of paramedical health professionals (one nurse and/or one physiotherapist) once in two weeks, to the homes of patients receiving treatment from the OPD or discharged from the ward but not in a position to visit hospital and provision of nursing care (clinical evaluation, administration of parenteral medication and training of family members in feeding, bathing, wound care, bed sore prevention etc.) and rehabilitation in training of activities of daily living, physiotherapy etc.

- c. Development of a service for “yoga” therapy for senior citizens especially for 75+ population in National Centers for Ageing and Regional Geriatric Centres (8+12).
- d. Convergence with AYUSH interventions: The National Centers for Ageing and Regional Geriatric Centres(8+12) will coordinate with local AYUSH practitioners for convergence of interventions for the very old population.
- e. Screening for early diagnosis: In addition to passive screening for early diagnosis of health conditions during out-patient consultation, the 75+ population will be subjected to a focused screening program for certain common health conditions.
- f. Special IEC activities targeting the very old and their care-givers: This would comprise identification of health problems in the very old and information about the services available under various schemes
- g. The current research activities under Regional Geriatric Centres and National Centres of Ageing will have special focus on health and well-being of the very old population.
- h. “Mobile elderly” project: A pilot project will be initiated at selected Regional Geriatric Centres to establish use of mobile telephones for greater connectivity and consultation regarding day to day health issues of the 75+ population who want to avoid repeated visits to hospitals. Depending on its feasibility, the program will be extended to other Regional Geriatric Centres and District hospitals.
- i. Vaccination project for 75+. A vaccination program (for Influenza & Preumonia) for such select group of 75+ patients will be considered on a pilot basis.

4. **Regional Geriatric Centres:** The following RGCs will continue to run during 12th Five Year Plan:-

- i) All India Institute of Medical Sciences (AIIMS), New Delhi
- ii) Banaras Hindu University, Varanasi -, Uttar Pradesh
- iii) Grants Medical College & JJ Hospital, Mumbai
- iv) Guwahati Medical College, Guwahati, Assam
- v) Trivandrum Medical College, Thiruvananthapuram, Kerala
- vi) Madras Medical College, Chennai, Tamil Nadu
- vii) Sher-a-Kashmir Institute of Medical Sciences, Srinagar, Jammu & Kashmir
- viii) Dr. S.N. Medical College, Jodhpur, Rajasthan

The regions and Medical College proposed to be added, for setting up new RGCs during the 12th Five Year Plan are given below:-

1. Haryana, Punjab and Chandigarh- PGIMER, Chandigarh
2. Uttar Pradesh- KGIMS, Lucknow
3. Jharkhand- Ranchi Medical College, Ranchi
4. West Bengal- Kolkatta Medical College, Kolkata
5. Andhra Pradesh- Nizam Institute of Medical Sciences, Hyderabad
6. Karnataka- Bangalore Medical College, Bangluru
7. Gujarat- B.J.Medical College, Ahmedabad
8. Maharashtra- Government Medical College, Nagpur

9. Odisha- S.C.B. Medical College, Cuttack
10. Tripura- Agartala Medical College, Agartala
11. Madhya Pradesh- Gandhi Medical College, Bhopal
12. Bihar- Patna Medical College, Patna

The RGCs will implement special programme for the 75+ population as listed in Para 3 and shall function as per guidelines that shall be issued separately for service delivery in geriatric care, HRD development, training of manpower, research and IEC activities. The RGCs should have a 30 bedded facility for health care delivery. Financial assistance will be given for non-recurring and recurring activities as per para 2. Human Resources are to be on contractual basis.

5. **Human Resource Development:** MD in Geriatric Medicine is an approved course of Medical Council of India. Medical colleges to be covered under the scheme of Regional Geriatric Centre will have provision for 2 PG seats in Geriatric Medicine. Regional Geriatric Centres will also organise short term courses.

6. **Research:** Research areas will be identified on priority which will include clinical, programmatic and operational research. Grants made available to Regional Geriatric Centres and NCAs will be used for this purpose.

7. **Information, Education and Communication (IEC) activities:**

Dissemination of awareness is the single most important step for any strategy to succeed. Health and quality of life in old age is adversely affected by myths, stereotyping, social attitudes and beliefs. It is, therefore, important that information based on scientific evidence should be disseminated. Following activities may be undertaken in this regard:-

- Preparation and distribution of pamphlet/booklet on healthy life style
- Preparation and distribution of pamphlet/booklet on various commonly occurring disease conditions such as coronary artery disease, stroke, osteoporosis, dementia, tuberculosis, COPD, BPH, cataract, etc.

The above material should be available in English, Hindi and regional languages for distribution to the users of geriatric services. The information should also be provided to the general population through print and electronic media.

8. **Training:** Training shall be an integral part and shall involve preparation of training modules, training & trainers and training at various levels i.e. doctors, paramedics, field workers, community based workers and care givers.

9. **Monitoring and Evaluation/Audit:** Union Ministry of Health and Family Welfare and Directorate General of Health Services shall continue to monitor and evaluate the programme at all levels. However, the State Governments/UT Administrations would also monitor the programme and will submit the Financial & Physical Progress Reports and Utilization Certificates to the Central Government and Directorate General of Health Services regularly. The Programme will be subject to audit by the Comptroller & Auditor General of India and internal audit by Chief Controller of Accounts, Ministry of Health and Family Welfare.

10. Draft MoUs to be signed between the Department of Health & Family Welfare and the State Governments/RGCs are enclosed. The existing RGCs are to send all pending Utilization Certificates along with audit reports so that the UCs can be settled and further release can be made.

Yours faithfully,

(S.K. Gupta)
Under Secretary to the Government of India

Copy for information and necessary action to:-

- i) Principal Secretary, Department of Health and Family Welfare, Chennai.
- ii) Principal and Dean, Madras Medical College, Chennai-600 003
- iii) Registrar, Banaras Hindu University, Varanasi, Uttar Pradesh
- vi) Principal and Dean, Grants Medical College & JJ Hospital, Mumbai
- v) Principal and Dean, Guwahati Medical College, Guwahati, Assam
- vi) Principal and Dean, Trivandrum Medical College, Thiruvananthapuram, Kerala
- vii) Director, Sher-a-Kashmir Institute of Medical Sciences, Srinagar, Jammu & Kashmir
- viii) Principal and Dean, Dr. S.N. Medical College, Jodhpur, Rajasthan
- ix) Director, PGIMER, Chandigarh
- x) Principal and Dean, KGIMS, Lucknow
- xi) Principal and Dean, Ranchi Medical College, Ranchi

- xii) Principal and Dean, Kolkatta Medical College, Kolkata
- xiii) Principal and Dean, Nizam Institute of Medical Sciences, Hyderabad
- xvi) Principal and Dean, Bangalore Medical College, Bangluru
- xv) Principal and Dean, B.J.Medical College, Ahmedabad
- xvi) Principal and Dean, Government Medical College, Nagpur (Maharashtra)
- xvii) Principal and Dean, S.C.B. Medical College, Cuttack (Odisha)
- xviii) Principal and Dean, Agartala Medical College, Agartala (Tripura)
- xix) Principal and Dean, Gandhi Medical College, Bhopal
- xx) Principal and Dean, Patna Medical College, Patna (Bihar)
- xxi) DDG(PH), Directorate General of Health Services, Nirman Bhawan, New Delhi
- xxii) IFD, Ministry of Health and Family Welfare, New Delhi
- xxiii) PPS to Secretary (H&FW)/AS (H)/JS (DP)

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