



DISTRICT HEALTH PLAN 2013-14

Prepared by.

District Health Planning Team District Health Society Imphal East, Manipur

Subject: Submission of NRHM PIP of "Imphal East District" for Fiscal Year 2013-2014

The Proposed District NRHM Budget is Rs 4,87,89,000/- .

The Break up is given in the following table:

Part	Head	Budget 2013-14 (Rs. in Lakhs
A	RCH Flexible Pool	187.76
В	NRHM Flexible Pool	169.95
С	Immunization (from RCH Flexible Pool)	10.63
D	IDSP	4.932
E	NVBDCP	42.312
F	NLEP	5.866
G	RNTCP	45.20192
Н	DAPCU(AIDS)	21.24
	Grand Total	487.89

We are submitting NRHM PIP of Imphal East District for Fiscal Year 2013-14 with the proposed District Budget of Rs.487.89 (Rupees four crores eighty seven lacs eighty nine thousand) only after self appraisal of District Activities as specified in the Annexures.

Through this we have also been able to arrive at priority areas for our District as following:

- 1. To strengthen the delivery points at all CHCs/PHCs/PHSCs of Imphal East District.
- 2. To upgrade CHCs to FRU.
- 3. Strengthening of Immunization Programme at CHC, PHCs and PHSCs
- 4 Strengthening of Referral Transport services.
- 6. Institutional Mechanisms for Supportive and Monitoring at all levels
- 7. Strengthening of JSSK and MCTS scheme

Further, for the year 2013-14 Imphal East District intends to take up following new

initiative / Innovations:

1. Paying Incentive/allowance to Staff working at Health Facilities having 24x7 Services

(Staff having only Night Services).

FORMAT FOR SELF ASSESSMENT OF DISTRICT PIP AGAINST APPRAISAL CRITERIA

SI. No	CRITERIA	<i>REMARKS</i> {Yes (Y) or No (N)
1.	Has the District PIP been reviewed in detail by a single person to ensure internal consistency? If yes, by whom?	Y
2.	Has the District ensured that there is no double budgeting under any head?	Y
3.	Has a chartered accountant/Finance manager reviewed the budget in detail?	Y
4.	Has the District wise resource envelops conveyed to the Blocks? Has the District ensured that HF districts get at least 30% more (i.e. HF to be given a weight age of 1.3 Vs 1.0 against non high focus)?	Y
5.	Have DHAPs been prepared for all Blocks (as a minimum for all high focus)? If not, for how many?	Y
6.	Are the supportive supervision structures at state and district / sub-district levels consistent with expertise required for programme strategies? Are job descriptions including person specifications, delegation of powers and basis for assessment of performance in place?	Y
7.	Has the State taken steps to ensure establishment and functioning of quality assurance committees in the districts?	Y
8.	Have the 'new activities' and 'activities to be continued' clearly marked?	Y
9.	Has the District ensured that the HR sheet and infrastructure sheet given in annexure filled up accurately?	Y
10.	Has the District ensured that the statistics used in PIP (e.g. number of facilities DH/FRU etc., HR in each category, population etc.) have their source mentioned and are consistent throughout the document?	Y

MH Annexure and Formats for MH Portion PIP

MMR RGI(2004-06)	RGI(2007-09)	AHS(2010-1	.1)	
-	-	-	·	
Indicators (in %)	DLHS-III	CES(2009)	HMIS(2011-12)	HMIS (2012-13) upto Oct, 2012
Any ANC	85 %	-	128.79%	93.84%
3+ANC	73.4%	-	39.50%	37.12%
Registration within 12 weeks	68.8%	-	56.13%	54.43%
Full ANC	26.5%	-	21.45%	21.95%
Ins. Delivery.	66%	-	31.34%	14.90%
Safe Delivery	82%	-	33.35%	17.43%
Home Delivery	33.30%	-	2.015	2.59%
% of C-sections out of total reported institutional deliveries	-	-	5.09%	30.99%
At Public	-	-	0.14%	27.35%
At Private	-	-	4.95%	3.63%
% of anemic women out of total registered pregnancies	-	-	4.65%	9.49%
% of severely anemic women out of total anemic pregnant women	-	-	0	0

Achievements

Activity	Upto 2011-12 (cumulative)	In financial year 2012-13 (till Oct, 2012)
No. of fully functional FRUs	-	-
No. of fully functional 24X7 PHCs	1	4(PHC:Borobekra,Heingang,Sawombung,Akampat)
No. of Blood bank licensed and functional	0	0
No. of Blood Bank non functional due to any reason	NA	NA
No. of Blood Storage Units licensed and functional	0	0
No. of Blood Storage Units non functional due to any reason	NA	NA
No. of VHNDs held	1160	837
No. Trained in LSAS	0	0
No trained in BeMOC	0	0
No. Trained in EmOC	0	0
No. Trained in SBA	SN-9 ANM- 20	2 SN, 3 – AYUSH MO
No. Trained in MTP	MO – 18	1- MO
No. Trained in RTI/STI	ANM – 110 SN-60 MO - 36	0
No. of Maternal Deaths reported	1	0
No. of Maternal Deaths reviewed	0	0

MATERNAL HEALTH Annexures

Annexure-I

Total functional delivery points in Public Health Facilities of the States/UT

State/UT-

Date: (Monthly Avg of (Q1 + Q2) of 2012-13 i.e. April 2012 to Sep, 2012 to be taken for calculation purposes)

S.No	Indicator	Number
1	Total No. of SCs	52
Α	No. of SCs conducting >3 deliveries/month	1(Mantripukhri SC)
2	Total No. of 24X7 PHCs	4
А	No. of 24X7 PHCs conducting > 6 deliveries /month	0
3	Total No. of any other PHCs	7
А	No. of any other PHCs conducting > 6deliveries/ month	0
4	Total No. of CHCs (Non- FRU)	2
А	No. of CHCs (Non- FRU) conducting > 10 deliveries /month	0
5	Total No. of CHCs (FRU)	0
А	No. of CHCs (FRU) conducting > 20 deliveries /month	-
В	No. of CHCs (FRU) conducting C-sections	-
6	Total No. of any other FRUs (excluding CHC-FRUs)	1
A	No. of any other FRUs (excluding CHC-FRUs) conducting > 20 deliveries /month	1
В	No. of any other FRUs (excluding CHC-FRUs) conducting C-sections	1
7	Total No. of DH	0
А	No. of DH conducting > 50 deliveries /month	-
В	No. of DH conducting C-section	-
8	Total No. of District Women And Children hospital (if separate from DH)	0
A	No. of District Women And Children hospital (if separate from DH) conducting > 50 deliveries /month	-
В	No. of District Women And Children hospital (if separate from DH) conducting C-section	-
9	Total No. of Medical colleges	1
А	No. of Medical colleges conducting > 50 deliveries per month	1
В	No. of Medical colleges conducting C-section	1
10	Total No. of Accredited PHF	1
А	No. of Accredited PHF conducting > 10 deliveries per month	1
В	No. of Accredited PHF conducting C-sections	1

*Provide the status in a soft copy. No box should be left blank.

.*The Annexure I & II to be uploaded on the State/UT NRHM website.

* Send the name wise list of these delivery points, in soft copy in Annexure II eg. Names of all sub-centres conducting >3 deliveries per month; names of all DH conducting > 50 deliveries per month, etc.

Monthly Reporting Format on Delivery Points on key Performance Indicators (KPI)

	of the Stat	te - Monthly Avg of (Q1	+ 02) of 2012-12	e April 2012	to Sen 201'	2 to be taken fo	rcalculation	nurnoses	<u>, </u>				
Name of the District	Sl.No (Delive ry Point)	Name and Type of the Facility (MC,DH, DWH, SDH, CHC-FRU, CHC- Non-FRU, 24x7 PHC, Other PHC, SC, Any other Type of Facility	Total deliveries in the reporting month in the facility (including C- Section)	No. of C- sections (where applicabl e)	Total No. of PW detected with Hb level 7 gm and below	Number of Maternal Deaths in the facility in the reporting month	Fn LR with NBCC(Y/ N)	Fn OT (Y/N)	, BSU/ BB (Y/N)	Availab ility of Essen. Drugs (Y/N)	BMW (Y/N)	MOs & Specialist(Mention No of Anesth. OBG, Pedia. LSAS / EmOC/ BeMOC Trained MO and other MO	NO. of SNs/ ANMs posted at the facility
	1	SC-Mantripukhri	40	0	0	0	N	N	N	Y	N	1- MO	SN-1 ANM- 5
	2	PHF – CMC Koirengei	120	42	0	0	Y	Y	Y	Y	Y	-	-
	3	24x7 PHC- Akampat	0	0	0	0	N	N	N	Y	N	MO-6 AYUSH MO-1	SN-5 ANM-4
	4	Bashikhong PHC	3	0	0	0	N	N	N	Y	N	MO-3 AYSUH MO-1	SN-3 ANM-4
IE	5	24x7 - Sawombung PHC	6	0	0	0	N	N	N	Y	N	MO- 5 ayush mo - 1	SN-6 ANM-1
	6	24x7 - Heingang PHC	2	0	0	0	N	N	N	Y	N	MO-6 Dental - 1	SN-5 ANM-5
	7	24x7 – Borobekra PHC	10	0	0	0	N	N	N	Y	N	MO-1 AYUSH MO-2	SN-2 ANM-2
	8	Other FRU – JNIMS	871 (April – June 2012)	358 (April – June 2012)	0	0	Y	Y	Y	Y	Y	-	-

9	CHC – Non FRU : Sagolmang CHC	30	0	0	0	N	N	N	Y	N	MO-10 Dental - 2 1- AYUSH	SN-7 ANM- 4
10	CHC – Non FRU : Ji ribam CHC	41	0	0	0	N	N	N	Y	N	MO-4 AYUSH MO-1 Dental -1	SN-4 ANM-3
11	Lamlai PHC	0	0	0	0	N	N	N	Y	N	MO-3 Dental – 1 AYUSH MO-1	SN-2 ANM-2
12	Yaingangpokpi PHC	0	0	0	0	N	N	N	Y	N	MO-3 AYUSH MO-1	SN-1 ANM-4
13	Keirao Makting PHC	0	0	0	0	N	N	N	Y	N	MO-3 AYUSH MO - 1	SN-3 ANM-3
14	Andro PHC	0	0	0	0	N	N	N	Y	N	MO-2 AYSUH MO-1	SN-2 ANM-3
15	Yambem PHC	0	0	0	0	N	N	N	Y	N	MO-3 AYSUH MO-1	SN-3 ANM-2
16	UHC - Kshetrigao	0	0	0	0	N	N	Ν	Y	N	MO- 1	SN- 1 ANM-2

Note: HMIS report for JNIMS were not reported since June 2012. Essential Drugs available are not in adequate quantity.

Annexure-III

Key Performance Indicators (KPIs) for Maternal Health (District Compiled Sheet)

	Name of the District	Imphal East						
	For the month of	October 2012						
	Date of Submission of the data	1 st November 2012						
	Estimated No. of Pregnancies in the year	7750						
	Estimated No. of Deliveries in the year	7350						
SI. No.	Key Performance Indicators for Maternal Health	Reported during the month October 2012	Cumulative achievement for the current Fin. Yr. (April, 2012 to Oct 2012)					
1	Total No. of Registered pregnancies	566	7273					
	Pregnancies registered within 12 weeks	179	3959					
2	Deliveries conducted at Institution	32	1155					
	Public Health Facilities	32	1035					
	Private Accreditated Health Facilities	0	120					
	Other Private Health Facilities	0	0					
3	Total No of C-section	0	358					
	Public Health Facilities	0	316					
	Private Accreditated Health Facilities	0	42					
	Other Private Health Facilities	0	0					
4	Tracking of severe Anaemia							
	Total No. of PW detected with Hb level below 7 gm	0	0					
5	Total No. of Maternal Deaths	0	0					
	Public	0	0					
	Private	0	0					
	Home	0	0					

Annexure- IV

Availability of District-Wise Human Resource in the Imphal East District

S. No.	Name of District		Availa	ability (in positio	on) of Specia	list/PGMO,	MO, and oth	er Staff (Giv	e total N	umbers av	ailable in tl	ne district)		
		Paedi	atrics	Anaesthetics		Gynaecology		No. of	No of	f No of	MOs	Mos	No. of	No.
		Regular	Contract	Regular	Contract	Regular	Contract	MOs	SNs	ANMs	trained	trained	SBA	of
			ual		ual		ual				in LSAS	in EmOC	Trained	LTs
													SNs/	
													ANMs	
1	Imphal East	0	0	0	0	0	0	72	47	145	-	-	SN-9	13
													ANM-20	

Information required for LSAS & EmOC trained doctors by Govt. of India

Name of the District: Imphal East

		Posting and	performance of doctor	EmOC Trained	Posting and p	erformance of doctor	LSAS Trained
S.No.	Name of District	Name of EmOC Trained Doctor	Name and type of Facility where EmOC Trained doctor is posted	Performance of EmOC Trained doctor (No. of C-section and /Any other performance)	Name of LSAS Trained Doctor	Name and type of Facility where LSAS Trained doctor is posted	Performance of LSAS Trained doctor (No. of C-section assisted & No. of Spinal Anaesthesia given/Any other performance)
1	Imphal East	0	0	0	0	0	0

Annexure VI

Name of the I	-				-	ss of MH Tra			n	1	1
Type of Training	No. of Medical Colleges conducti ng training	No. of District Hospitals conducting training	Any other Facilities conducting training	No. of Master Trainers Trained	Total Target for NRHM period (up to 2017)	Total Achieve ment cumulati ve till March 2012	Target for 2012- 13	Achieve ment or Nos. trained in 2012- 13 (April 12-till Novemb er, 2012) *	Target for 2013- 14	No. of trained MOs posted at facilities where their skills are being utilised - eg. FRUs for LSAS & EmOC/ MTP; 24X7 PHCs for BeMOC/MTP; Facilities conducting delivery for SBA in the relevant column	Performance (Specify No. of deliveries, No. of C- section and No. of Spinal Anaesthesia, No. of MTPs, No. of any other complications attended in the relevant column) Cumulative since 2005 till date
LSAS	1	0	0	0	2	0	0	0	2	0	-
EmOC	1	0	0	0	MO-26	0	MO-6	0	MO-7	0	
BEmOC (MOs)	1	0	0	0	MO-26	0	-	0	MO-6	0	-
SBA (ANM/SN/L HV)	1	0		0	SN-47 ANM- 145	SN-9 ANM- 20	SN-11 ANM-15	SN-2	SN-12 ANM-30	19 PHSC	-
МТР	1	0	0	0	MO-52 SN-47	MO-18	MO-5 SN-12	MO-1	MO-17	7	-
RTI/STI	1	0	0	0	MO-52 ANM- 145	MO-36 ANM- 110 SN-60	ANM -36	0	ANM-36	7	-

FORMAT FOR RTI/ STI

Services	Sub Centre		Primary Health Centre		FRUs		Community Health Centre		District Hospital	
	М	F	М	F	М	F	М	F	М	F
Number of RTI/STI patients and their partners counseled at the health facilities	-	-		-	-	-	-	-	-	-
Number of RTI/STI patients identified at the facility	0	0	50	50	0	0	22	45	-	-
Number of RTI/STI patients treated at the facility	0	0	50	50	0	0	22	45	-	-
Other Key parameters										
Number of RTI/STI patients referred to higher facility for treatment		-	-		-		-		-	
Number of RPR/VDRL tests conducted		-	-			-		-		-
Number of pregnant women found reactive for syphilis		-	-			-		-		-
Number of pregnant women treated for syphilis using SCM Kits		-	-			-		-		-
Number of Whole Finger Prick Test Conducted		-	-		-			-	-	
Number of pregnant women found HIV –infected (of bove)		-	-		-		-		-	
Number of pregnant women referred to ICTC		-	-			-		-	-	
Number of pregnant women referred for ART services		-	-			-		-		-

SN.	Acti	vity	Status / Remarks
1	Name, contact no. and e-mail address of District Nodal Officer for MDR	Momota Mukherjee,CMO/Director,DHS Mobile No. : 9856043301	,IE
2		Medical College faculty	NA
	Number of medical/paramedical personnel trained or oriented on MDR	State officials (Directorate. SPMU, etc.)	-
		District Officials (CMO, DRCHO, DPMU, others)	CMO-1 DPM-1; MRO,JNIMS-1
		Others including I/Cs of private hospitals	1-HR Manager Langol View Clinic 1-Manager CMC,Koirengei
		Block Officials (BMOs, BPMU, etc.)	BPM-2
		MO I/Cs of public health facilities	MO-9
		ASHAs/ AWWs/ ANMs/ SHGs/ others	0
3		State Task Force (Yes/No)	No
		If yes, no. of meetings held in 2011-12	4
		Number of districts in the state	-
	Constitution of Maternal Death Review	Number of districts where MDR Committee has been constituted	Yes
	Committee / Task Force as per GOI guidelines { Give no. at each level}	Total number of functional "delivery points" (FRUs, DHs, private accredited hospitals) identified for FBMDR	-
		Number of functional "delivery points"(FRUs, DHs, private accredited hospitals) where FBMDR Committees have been constituted and are holding meetings for Review of deaths	-
4	Total number of MDs reported at the State level (April to the reporting month, 2012-13)		-
5	Total number of MDs reported at the State level (April to the reporting month,2012-13)	Through CBMDR (Community Based MDR)	-
		Through FBMDR (Facility Based MDR)	-
6	Total number of MDs reviewed by District MDR committees (CMO) (April to the reporting month, 2012-13)		-

7.	Number of MDs reviewed by State Task		
	Force out of total reported in column 4		-
8	Causes of maternal deaths reported in colu	umn 4 (in numbers)	
8.1	Haemorrhage		-
8.2	Sepsis		-
8.3	Abortion		-
8.4	Obstructed labour		-
8.5	Hypertensive disorders in pregnancy (includes eclampsia)		-
8.6	"Others" (include anaemia)		-
9	Analysis of MDR findings done by the State : major causes of MDs (medical/systemic/others), geographical distribution- concentration in specific districts/blocks, whether conforming to the AHS High Mortality districts etc.	-	
10	Compliance with regular submission of State Monthly MDR Reports for April to the reporting month (2012-13) reasons for non-compliance.	-	

Format for Performance on Comprehensive Abortion Care at State Level (April 12 to Sept 2012) Name of District/U.T: Imphal East Month and Year of reporting: October 2012

Number of districts in the State: Imphal East

1) Indicators:

Indicator		Numbers
Number of districts where District Level Committee (DLC)* have been constituted		-
Number of applications pending in	For one year	-
the districts with the DLCs More than one year		-
Is MVA equipment being procured an	Y	
Are the drugs for MMA included in th	Y	
	constituted Number of applications pending in the districts with the DLCs Is MVA equipment being procured an Are the drugs for MMA included in th	constituted Number of applications pending in For one year

* As per MTP Act, Rules and Regulations 2002-2003

2) Service Availability and Utilisation:

Availability: Number of institutions providing services				Utilisation: Number of MTPs performed-ar method(April – Oct2012)		
Type of Health Facility	Up to 12 weeks services (1 st trimester)	Up to 20 weeks services (both 1 st and 2 nd trimester)		Up to 12 weeks (1 st trimester)	12 -20 weeks (both 1 st and 2 nd trimester)	
Government (Total)	5	2		333	2	
Private certified (Total)						
"Delivery Points" pro	"Delivery Points" providing services.					
PHCs/non FRU CHCs	РНС -11 СНС - 2					
FRUs (CHCs, SDH etc.)	-					
DHs /DWH etc.	-					
Medical Colleges	1					
Private certified	1					

3) Does the District have an IEC/BCC plan for MTP Services(Y/N): N?

If yes, please indicate frequency/ periodicity of IEC/BCC activities

SN	IEC/BCC Activity	Frequency/ periodicity
1	Print	NA
2	Audio	NA
3	Video	NA
4	Any Other (specify)	NA

Proposed Budget 2013-14:

Area	Budget Head & FMR Activity code	Unit Cost	Budget proposed in PIP 2013-14
MMA Drugs	Annexure enclosed	-	-
MVA/ EVA Equipments	Annexure enclosed	-	-
MTP-Training MOs	13	-	State Subject
MTP training of other field functionaries (counselling and post abortion care)	-	-	-
MTP-IEC/BCC activities	-	-	-

IMPLEMENTATION STATUS OF JANANI SHISHU SURAKSHA KARYAKARAM (JSSK): STATE LEVEL

State/ UT: Manipur No. of districts: Imphal East No. of Blocks: Reporting Month/Year:October 2012

District Nodal Officer in place (Y/N):Y District Grievance Redressal Officer in place (Y/N): Y.

Name, email id and Mobile no. of District Nodal Officer (JSSK).....

No. of District Nodal Officers in place: K. MeghaChandra Singh No. of District Grievance Redressal Officers in place:1

A) ENTITLEMENTS: CASHLESS SERVICES & USER CHARGES

Sno.	Provision for Cashless deliveries for all pregnant women and sick newborns at all public health facilities	Whether G.O. issued (Y/ N)	Month when started / proposed timeline	No. of districts implementing
1.	Provision of Free drugs/ consumables	Ν	NA	NA
2.	Provision of Free Diagnostics	Y	October 2012	JNIMS,PHC- Sawombung ,Heingang;CHC – Sagolmang,Jiribam
3.	Provision of Free Diet	Y	October 2012	-do-
4.	Provision of Free blood (inclusive of testing fee)	Y	October 2012	-do-
5.	Provision of free treatment to Sick newborns up to 30 days	Ν	NA	-do-
6.	Free Referral Transport for PW (to & fro, 2 nd referral)	Y	October 2012	-do-
7.	Free Referral Transport for Sick newborns (to & fro, 2 nd referral)	Ν	NA	NA
8.	Exemption from all user charges for all PW and sick newborns	Y	October 2012	-do-
9.	Empowerment of MO in-charge to make emergency purchases of drugs/investigations	Y	October 2012	-do-

NOTE: Pls. provide a copy of relevant Govt. Order(s)(provide one time, and when any updation/revision is done)

B) ENTITLEMENTS: REFERRAL TRANSPORT (RT)

1. Total number of ambulances/ referral vehicles in the State/ UT NA NA	NA
	INA
2.Whether vehicles fitted with GPS (specify no.)NANA	NA

3. Call centre(s) for the ambulance network: Districts (no.s) – NA State (Y/N):

4. Toll free number (provide number, if available):NA

C) IMPLEMENTATION: CASHLESS SERVICES

Sno.	Provision for Cashless deliveries for all pregnant women and sick newborns at all Govt. health facilities	Status		
1.	No. of districts where free entitlements are displayed at all health facilities	1		
2.	No. of districts where free diet is available to PW (at all facilities 24x7 PHC and above level)			
3.	No. of districts where lab is functional for basic tests for PW (at all facilities 24x7 PHC and above level)			
3a.	No. of districts where any facility has stock outs of lab reagents / equipment not working			
4.	No. of districts where any facility has stock outs of essential drugs / supplies for PW and sick newborns			
5.	No. of districts where any facility has user charges for PW / sick newborns for: i. OPD	1		
	ii. Admission / delivery / C-section	-		
	iii. Lab tests / diagnostics	-		
	iv. Blood	-		
6.	Total no. of govt. medical colleges in the State	1		
7.	Total no. of govt. medical colleges not levying any type of user charges	0		
מ	Service Delivery (April 2012 to September 2012)			

D) Service Delivery (April 2012 to September, 2012)

Sno.	JSSK service delivery	Free Drugs & Consumables	Free Diet	Free Diagnostics	Free blood
	Total No. of p.w. who availed the free entitlements in the reporting month in the State	NA	NA	NA	NA
2.	Total No. of sick neonates who availed the free entitlements in the reporting month in the State	NA	\searrow	NA	NA

E) SERVICE UTILISATION: REFERRAL TRANSPORT (RT) (April 2012 to September, 2012)

Sno.	Referral transport services	State vehicles	EMRI/ EMTS	PPP	Other	
1.	No. of PW who used RT services for:	-	NA	NA	NA	
	i. Home to health institution	-	NA	NA	NA	
	ii. Transfer to higher level facility for complications	-	NA	NA	NA	
	iii. Drop back home	-	NA	NA	NA	
2.	No. of sick newborns who used RT services for:	-	NA	NA	NA	
	i. Home to health institution	-	NA	NA	NA	
	ii. Transfer to higher level facility for complications	-	NA	NA	NA	
	iii. Drop back home	-	NA	NA	NA	
F)	GRIEVANCE REDRESSAL					
Sno.	Grievance redressal	Status detail				
1.	No. of complaints/ grievance cases related to free entitleme	f complaints/ grievance cases related to free entitlements NA				
2.	No. of cases addressed / no. of cases pending		NA			

Annexure-XII

PERFORMANCE BASED INCENTIVES under MH

Name of the Scheme/ Activity	Type of worker	Type of work being incentivized	Level of Facility (CHCs/ PHCs/ Sub- Centers	Amount Of Incentive	Performance Expected	No of workers given incentive	Quantifiable Output
JSY-Institutional	ASHA	Accompany PW	PHC/CHC/SC	Rs 350 per case	PW:15000	ASHA	1000
Routine Immunization Strengthen	ASHA	Social Mobilization of pregnant women during VHND	PHC/CHC/SC	Rs.150 Per Case	3000	ASHA	25000
Sterilization	ASHA	Mobilization/Mo tivation for sterilization during VHND	РНС/СНС	Rs 200 per case – NSV Rs 150 per case - Tubectomy	340	ASHA	250

Background Information Required for Approval of State PIPs for 2013-14

F.M.R. Code: A.2- Child Health

CH- Annexure- I

S.No.	of the ex	No. of existing	NBCCs				NBSU			SNCUs		NRCs		
	district	delivery points	Cumulati ve Number of Units Approve d till 2012-13	No. of Units operati onal as on 30 th Septem ber 2012	No. of Units propos ed (2013- 2014)	Cumulati ve Number of Units Approve d till 2012-13	No. of Units operatio nal	No. of Units propos ed (2013- 2014)	Cumulative Number of Units Approved till 2012-13	No. of Units operatio nal	No. of Units proposed (2013- 2014)	Cumulative Number of Units Approved till 2012-13	No. of Units operation al	No. of Units propose d (2013- 2014)
Health	facilities (F	PHC/CHC/UF	IC)					•		•				
1	IE	14	0	0	14	-	-	1 (Sagol mang CHC)	-	-	-	-	-	-
Total		14	0	0	14	-	-	-	-	-	-	-	-	-

Information on New Born Care Units & Management of Children with SAM

Note : CHC = 2 (CHC Sagolmang & CHC Jiribam)

UHC = 2 (UHC Mantripukhri & Kshetrigao)

PHC = 10 (PHC – Akampat, Keiraomakting, Andro, Bashikhong, Yaingangpokpi, Sawombung, Lamlai, Heingang, Borobekra, Yambem)

Line listing of SNCU

Sr. No	Name of the district; if HFD , mention in bracket	Whether High Focus District (Yes/No)	Block	Facility type (DH/SDH/Area Hospital/CHC/PHC)	Address of the facility	Date of operationalization	Contact details of the facility in charge	No. of beds in the SNCU
Α.	Currently function	onal						
	NA							
В.	Under progress							
	NA							
C.	Proposed (New)							
	NA							
Total								

Note: For facilities under progress/proposed (new) provide the tentative month of operationalization

Line Listing of NBSU

Sr. No	Name of the district; if HFD , mention in bracket	Whether High Focus District (Yes/No)	Block	Facility type (DH/SDH/Area Hospital/CHC/PHC)	Address of the facility	Date of operationalization	Contact details of the facility in charge	No. of beds in the NBSU
Α.	Currently functiona	al						
	NA							
В.	Under progress							
	NA							
C.	Proposed (New)							
1	I/E	N	Sawombung Block	СНС	Sagolmang	-	-	-
Total								

Note: For facilities under progress/proposed (new) provide the tentative month of operationalization

Line Listing of functional NBCC

Sr. No	Designated delivery points	Name of the district	Whether HFD (Yes/No)	Block	Facility type	NBCC in place (Y/N); If more than one, indicate number in bracket	Functional Radiant warmer (Y/N)	No. of NSSK trained personnel at facility
CHC/FRU								
1	CHC Sagolmang	IE	N	Sawombung Block	24x7	N	Y	0
2	CHC Jiribam	-		Jiribam Block	24x7			
24x7 PHC				·				
3	PHC Borobekra			Jiribam Block	24x7			
4	PHC Heingang			Sawombung	24x7			
5	PHC Sawombung	-		Block	24x7	-		
6	PHC Lamlai	-			6 hrs			
7	РНС	-			6 hrs			
	Yaingangpokpi		N			- N	Y	0
8	PHC Bashikhong	IE	IN	Keirao Bitra	12 hrs		T	0
9	PHC Andro			Block	6 hrs			
10	PHC Keirao				6 hrs			
	Makting							
11	PHC Yambem				6 hrs			
12	PHC Akampat				24 x7			
Other PHC	c/sc							
13	UHC			Sawombung	6 hrs			
	Mantripukhri	IE	N	Block		N	N	0
14	UHC Ksherigao		IV.	Keirao Bitra Block	6 hrs		N	0

Note: NBCC in labor room and OT both should be reflected in the list

NBCC essential equipments & trained staff personnel both to handle NBCC equipments and in NSSK are not available in the delivery point facilities and in the District as a whole. This is the point to be addressed.

Line Listing of NRC

Sr. No	Name of the district	Whether HFD (Yes/No)	Block	Facility type	Address of the facility	Date of operationalization	Contact details of the facility in charge	No. of beds in the NRC					
	Currently funct	ional											
	NA												
	Under progress	Inder progress											
	NA												
	Proposed (new)											
	NA												
Total													
=													

Note: For facilities under progress/proposed (new) provide the tentative month of operationalization

Background Information Required for Approval of State PIPs for 2013-14

F.M.R. Code: A.3- Family Planning

FP: Annexure -1

SN.	Indicator	Target / ELA	Achievements (as on date)	Remarks
		2012-13		
1	Goal (target):			
1.1	Reduction in TFR – 2013	-		
2	Service delivery (ELA):			
2.1	IUCD:	1032		
2.1.1	Post-partum IUCD	-		
2.1.2	Interval IUCD	1032	497	SoE awaited.
2.2	Sterilisation:			
2.2.1	Tubectomy	344	97	SoE awaited
2.2.2	Post-partum sterilisation (subset of tubectomy)	-		
2.2.3	Vasectomy	34	17	SoE awaited
3	Training of personnel (target):			
3.1	Post-partum IUCD	-		
3.1.1	МО	-		
3.1.2	SN/ ANM	-		
3.2	Interval IUCD	60		Completed.
3.2.1	МО	0		
3.2.2	SN	30	30	
3.2.3	ANM/ LHV	30	30	
3.3	Minilap	-		
3.4	NSV	-		
3.5	Laparoscopic	-		
4	Others (target):	-		
4.1	Appointment of FP Counsellors	-		
4.3	Regular reporting of the scheme of "home delivery of contraceptives by ASHAs"	-		
4.4	Fixed Day Services for IUCD	_		
4.5	Fixed Day Services for Sterilisation	-		

FP: Annexure -II

FORMAT FOR FAMILY PLANNING FOR ACTIVITIES FOR 2013-14 PIP

SN.	STRATEGY / ACTIVITY	Cumulative achievement (as on 31 st March 2012)	PLANNE D	ACHIEV ED 2-13	WOR K PLAN	SCHEDULE D/ Trg. LOAD	BUDGET (In lakhs) 2013-14	REMARKS
1	FAMILY PLANNING MANAGEMENT	March 2012)	201	2-13			2013-14	
1.1	Review meetings on Family Planning performance and initiatives at the state and district level (periodic; including QAC meetings))	NR	1	1	-	Q1-Q4	0.20	District level :@ Rs 5000 per qtr. for 1 year . To review the performance of FP for the District and to enhance it
1.2	Monitoring and supervisory visits to districts/ facilities	NR	1	1	-	Q1-Q4	0.45	Monitoring and supervisory visits to Health facilities @ Rs 45000 per year.
1.3	Orientation workshops on technical manuals of FP viz. standards, QA, FDS approach, SOP for camps, Insurance etc.	NR	1	1	-	12 MO	State subject	To improve the technical knowhow of FP.
2	SPACING METHOD (Providing of IUCI) services by distr	icts)		•			
2.1	Plan for providing FDS (Fixed Day Static) IUCD services at health facilities in districts (at least 2 days in a week at SHC and PHC level) – number of facilities to be provided	-	1032	497	-	1500cases	0.30	@ Rs 20 per motivator for ASHA for 1500 cases.
2.2	No. of IUCD camps in districts	NR	-	-	-	Q2	0.90	Camps to be held at 3 Blocks @ Rs 30000 per block.
2.3	Compensation for IUCD	NR	-	-	-	-	-	-

SN.	STRATEGY / ACTIVITY	Cumulative achievement (as on 31 st	PLANNE D	ACHIEV ED	WOR K PLAN	SCHEDULE D/ Trg. LOAD	BUDGET (In lakhs)	REMARKS
		March 2012)	2012-13				2013-14	
2.4	Plan for strengthening PPIUCD services	NR	-	-	-	-	-	-
3	TERMINAL/LIMITING METHODS (Pr	oviding sterilisati	on services in	n districts)				
3.1	Plan for facilities providing FEMALE sterilisation services on fixed days at health facilities in districts (number of facilities)							
3.2	Plan for facilities providing NSV services on fixed days at health facilities in districts (number of facilities)	-	-	-	-	-	-	-
3.3	Number of FEMALE Sterilisation camps in districts.	NR	1	1	-	Q2	0.40	One each at 3 blocks and District @ Rs 10000 per block.
3.4	Number of NSV camps in districts.	NR	1	1	-	Q2	0.40	One each at 3 blocks and district @ Rs 10000 per block.
3.5	Compensation for sterilisation (female)	NR	344	97	-	300	3.0	@ Rs 1000 for tubectomy
3.6	Compensation for sterilisation NSV (male)	NR	34	17	-	40	0.60	@ Rs 1500 for NSV
3.7	Additional mobility support to surgeon's team (if required)	NR	-	-	-	-	-	-
3.8	Accreditation of private centres/ NGOs for sterilization services (number accredited)	-	-	-	-	-	-	-
3.9	Plan for post partum sterilisation	NR	-	-	-	-	-	-
4	Placement of counsellors at high case load facilities	-	-	-	-	-	-	-
5	Social marketing of contraceptives	NR	-	-	-	-	-	-
6	FAMILY PLANNING TRAINING							
6.1	IUCD 380 A Insertion training							

SN.	STRATEGY / ACTIVITY	Cumulative achievement (as on 31 st	PLANNE D	ACHIEV ED	WOR SCHEDULE K D/ Trg. PLAN LOAD		BUDGET (In lakhs)	REMARKS
		March 2012)	201	2-13			2013-14	
6.1.1	TOT for IUCD 380 A insertion							
6.1.2	Training of Medical officers in IUCD 380 A insertion							
6.1.3	Training of staff nurses in IUCD 380 A insertion							
6.1.4	Training of ANMs / LHVs in IUCD 380 A insertion							
6.1.5	Refresher training in IUCD 380 A							
6.2	PPIUCD training		1	1	1	1		
6.2.1	TOT for PPIUCD insertion							
6.2.2	Training of Medical officers in PPIUCD insertion							
6.2.3	Training of staff nurses in PPIUCD insertion							
6.3	Cu IUCD 375 Insertion training							
6.3.1	TOT for Cu IUCD 375 insertion							
6.3.2	Training of Medical officers in Cu IUCD 375 insertion							
6.3.3	Training of staff nurses in Cu IUCD 375 insertion							
6.3.4	Training of ANMs / LHVs in Cu IUCD 375 insertion							
6.4	Laparoscopic Sterilisation Training		1		1		1	
6.4.1	TOT on laparoscopic sterilisation							
	Laparoscopic sterilisation training for							
6.4.2	service providers (gynaecologists							
	/surgeons)							
6.4.3	Refresher training (if required)							
6.5	Minilap Training for MOs/ MBBS				•		I	
6.5.1	TOT on Minilap							

SN.	STRATEGY / ACTIVITY	Cumulative achievement (as on 31 st	PLANNE D	ACHIEV ED	WOR K PLAN	SCHEDULE D/ Trg. LOAD	BUDGET (In lakhs)	REMARKS
		March 2012)	201	2-13			2013-14	
6.5.2	Minilap training for service providers (medical officers)		8			8 MO	State Policy	-
6.5.3	Refresher training (if required)							
6.6	Non-Scalpel Vasectomy (NSV) Training							
6.6.1	TOT on NSV							
6.6.2	NSV training for medical officers		10			4 MO	0.26	Training for 6 days.
6.6.3	Refresher training (if required)							
6.7	No. of Contraceptive Update trainings for health providers in the districts							
6.8	Other family planning trainings (please specify)							
7	World Population Day ' celebration (such as mobility, IEC activities etc.): funds earmarked for district and block level activities.	NR	1	1		Q2	0.70	Celebration of World Population day.District level
8	BCC/ IEC activities – Campaigns/ melas / print/ audio/ video materials for family planning	NR						
9	PROCUREMENT of DRUGS/MATERIA	LS	•					
9.1	NSV Kits							
9.2	IUCD insertion Kits							
9.3	PPIUCD (Kelly's) forceps							
9.4	Minilap Set							
9.5	Procurement/ repair of laparoscopes							
10	Strengthening of programme management structures	NR						
11	Performance based rewards to institutions and providers for FP performance at state and district level	NR						
12	PROMOTIONAL SCHEMES							

SN.	STRATEGY / ACTIVITY	Cumulative achievement (as on 31 st March 2012)	PLANNE D	ACHIEV ED 2-13	WOR K PLAN	SCHEDULE D/ Trg. LOAD	BUDGET (In lakhs) 2013-14	REMARKS
12.1	Delivery of contraceptives by ASHA at door step	NR	201	2-13			2013-14	
12.2	Scheme of "utilising services of ASHAs for delaying first child birth after marriage and have 3 year's spacing between 1st and 2nd child"	NR						
13	Other activities	NR						

Background Information Required for Approval of State PIPs for 2013-14

F.M.R. Code: A.4.1 Adolescent Health

AH- Annexure-I

Name		DH				СНС РНС						
of District	Cumulati ve Number of AFHCs Approved till 2012- 13	No. of AFHCs operationa l as on 30 th September 2012	No. of AFHCs propose d (2013- 2014)	Averag e Case Load per AFHC	Cumulativ e Number of AFHCs Approved till 2012-13	No. of AFHCs operationa l as on 30 th September 2012	No. of AFHCs propose d (2013- 2014)	Averag e Case Load per AFHC	Cumulativ e Number of AFHCs Approved till 2012-13	No. of AFHCs operationa l as on 30 th September 2012	No. of AFHCs propose d (2013- 2014)	Averag e Case Load per AFHC
IE	NA	NA	NA	NA	0	0	2	0	0	0	11	0

ARSH Clinics

AH- Annexure-II

Counselors							
Existing counselors (Stand alone) Proposed counselors (Stand Existing counselors providing AFHC Proposed counselors providing							
alone)		services (ICTC)	AFHC services (ICTC)				
0	0	0	13				

AH-Annexure-III

WIFS

Total No. of Districts	No. of Districts covered	No. of School going girls and boys covered (10 to 19 years)	No. of out of schools girls covered	No. of IFA tablets required	No. of Albendazole tablets required
	IE	27000	7000	1296000	54000

F.M.R. Code: A.4.2 School Health Programme

SHP Annexure – I

S. No.	Activity	Details		As in approved RoP for 2012-13	Proposal for 2013-14
Targe	et audience				
1	Number of Schools in State	Government		104	639
		Government aided		-	-
2	Number of students (1st to 12th classes)	Government		-	-
		Government aided		-	-
3	Number of blocks in the District	- ·		3	-
4	Approach of SHP (tick in appropriate box)	Dedicated team	1	Y	4
		PHC base doctor supported by PHC Staffs	2	Y	11
		Campaign mode (eg. Gujarat)	3	NA	NA
		School /Cluster nurses (eg. Kerala/ Himachal Pradesh)	4	NA	NA
				Coverage in 2012-13	Proposal for 2013-14
5	Schools covered	Government		0	639
		Government aided			
6	Number of schools from where nodal teachers were trained	Government		0	0
		Government aided			
7	Total number of nodal teacher trained	Government		0	0
		Government aided			
8	Number of times children have been screened			0	0

SHP Annexure – II

S.No.	I	As in 2012-13			
1	No of Children (Age brackets, Boys and Girls) screened for Disease, Deficiency and Disability.			First round	Second round
	Indicate biannual screening data separately	Children below 6 years in	Boys	0	0
	for rounds.	Anganwadi centres	Girls	0	0
		School	·		0
		6-9 years	Boys	0	0
			Girls	0	0
		10-14 years	Boys	0	0
			Girls	0	0
		15-18 years	Boys	0	0
			Girls	0	0
		Total in school	Boys	0	0
			Girls	0	0
2 Number of screened children referred for services		s to public health facilities	Boys	0	0
			Girls	0	0
3	Number of referred children accessed services fro	om public health facilities	Boys	0	0
	-		Girls	0	0

SHP Annexure – III

Μ	Manpower								
				As in approved RoP for 2012-13	Achievement against plan till 31.12.2012	Remarks [include reason(s) of less than proposed (in PIP 2012-13) achievement]	Proposed for 2013-14		
1	Number of dedicated SHP teams			0	0	-	4		
2	Number of SHP team members	Doctor (AYUSH)	Μ	0	0	-	6		
			F	0	0	-	4		
		Doctor Dental	Μ	0	0	-	1		
		H	F	0	0	-	1		
		Pharmacist		0	0	-	11		
		ANM		0	0	-	11		
3	Number of Teams per Block			0	0	-	3		
4	Number of block without dedicated team			0	0	-	0		

Background Information Required for Approval of State PIPs for 2013-14

F.M.R. Code: A.5- Urban RCH

Urban RCH- Annexure -I

Name of	Urban Health Posts/ Centres					
District	Cumulative Number of UHCs/ UHPs	No. of UHCs/ UHPs operational	No. of UHCs/ UHPs	Average Monthly OPD		
	Approved till 2012-13	till date	proposed (2013-2014)			
IE	3	3	0	663		

Urban RCH- Annexure -II

Human Resources for UHCs/ UHPs								
Name of Post	Total No. of Existing	Monthly Salary of HR	Monthly Proposed	Total No. of New HR	Monthly Salary of			
	HR	approved in 2012-13	Salary for 2013-14	Proposed	Newly Proposed HR			
MO	2	-	-	1	-			
ANM	11	-	-	7	-			
LHV	0	-	-	0	-			
SN	3	-	-	2	-			
LT	1	-	-	2	-			
Other	3	-	-	2	-			
Tribal RCH- Annexure -I

FMR: A.6: TRIBAL RCH

Name of the District	% of tribal population	Details of Outreach Camps	Details of Other Activities	Total RCH budget (Rs. Lakhs)	Budget allocated to tribal districts or facilities located in tribal blocks / villages* (Rs. Lakhs)	% against total RCH budget
IE	Around 25000	Immunization,MH & CH programme,FP	-	0.90 @ Rs 30000 per	Block level	-
		programmes		block		

F.M.R. Code- A.8. – Human Resources

HR-ANNEXURE-I

Category/ type of personnel	District total							High focus district total						Total posts proposed in 2013-14 PIP (existing+new)		
	*Req uired	F	Regular		Contractu	ıal	Total	Req Regular uire		Contractual				District total	HF dist.	
		Sanct ioned posts	In position (A)	Sa nc tio ne d po sts	In position (through state/other sources) (B)	In position from NRHM (C)	in posit ion A+B +C	d	Sanct ioned posts	In positio n from NRH M (D)	Sanct ioned posts	In position (through state/other sources) (E)	In positio n from NRH M (F)	Total in positio n D+E+ F		
1 st ANM			76	505	3		79									
2 nd ANM					-	66	66								6	
MPW/ Male HW			10		6		16								-	
Staff Nurse total			29			18	47									
DH																
FRU																
24X7 PHCs			8			12									1	
Other facilities (Pls. specify)			9(PHC – KB Block) 3 – PHC Sawombun g Block 6 – CHC Sagolmang 3 – CHC Jiribam			3-PHC - KB Block 1- Mantrip ukhri UHC 1- CHC Miriam 1 – CHC Sagolma ng									4	
LHV/ PHNs						1									1	

OVERALL HUMAN RESOURCE SHEET

Other supervisory									
cadre									
LTs	7	1	5	13				6	
DH									
FRU									
24X7 PHCs		1	2					3	
Other facilities	7							3	
(Pls. specify)									
Pharmacists	24	1	2	27					
AYUSH			11	11				2	
Pharmacists									
MOs total	49	1	2	52					
AYUSH MOs		2	13	15					
DENTAL MOs	5			5					
Specialists total									
Obstetricians								2	
&Gynaecologist									
Anaesthetist								2	
Paediatrician								2	
All other staff									
employed under									
the Mission in the									
following Rows.									

*The Basis of requirement to be spelt out clearly (e.g. IPHS, State Norms etc.)

HR- Annexure-II

Status of Technical HR

Sr.	Category	Existing s	staff in 2012-13 (App	roved by GoI)	Propo	osed staff in 2	2013-14
No		No. of existing staff	Salary per month	Total amount approved (Rs. In lakhs)	No. of staff proposed	Salary per month	Total amount approved (Rs. In lakhs)
1	Specialists	0	-	-	6	-	-
2	MOs	52	-	-	0	-	-
3	AYUSH MO	15	-	-	0	-	-
4	Dental MO	5	-	-	0	-	-
5	SN	47	-	-	0	-	-
6	LHV/PHN	1	-	-	0	-	-
7	ANMs	142	-	-	6	-	-
8	LT	10	-	-	6		
9	Pharmacists	27	-	-	0	-	-
10	AYUSH Pharmacists	11	-	-	2		
11	MPWs	16	-	-	0	-	-
12	Others (OT technician Radiographer/	0	-	-	2	-	-
	Dental technician/ lab assistant/ ward						
	boy/ sweeper/ data entry						
	operators/computer assistants/						
	counsellors/ cook/ dietician/ etc.)						

Status of Newly proposed Technical HR

Sr. No	Category	Total No. Of existing staff in 2012-13	Total No. Of proposed staff for 2013-14	No. Of additional staff proposed for 2013-14	Out of the additional staff how many are proposed in High Focus Districts	Out of additional staff how many are proposed in Delivery Points	Justification for the additional posts proposed in the year 2013- 14 (Include facility wise Gap Analysis/ patient load etc for each new post)
1	Specialists	0	6	0	0	6	CHC Sagolmang & CHC Jiribam are delivery points and doing 24x7 services .Delivery conducted for CHC Sagolmang and CHC Jiribam are 34 and 53 respectively (April- Oct. 2012). The 2 CHCs are even proposed to promote to level 2 Status.
2	MOs	52	0	0	0	0	-
3	AYUSH MO	15	0	0	0	0	-
4	Dental MO	5	0	0	0	0	-
5	SN	47	0	0	0	0	-
6	LHV/PHN	1	0	0	0	0	-
7	ANMs	142	6	6	0	0	6 ANM proposed for all 6 SC under Jiribam Block as one ANM could not handle the Workload such as conducting VHND ,routine immunization ,outreached programmes etc over and above running and maintenance of SC.

8	LT	10	6	3	0	6	Proposed LT will be utilized at
							Health facilities (delivery point)
							and 24x7 PHCs. PHC- Akampat,
							Bashikhong, heingang,
							Sawombung, Lamlai&
							Yaingangpokpi
9	Pharmacists	27	0	0	0	0	-
10	AYUSH Pharmacists	11	2	0	0	0	For CHC Jiribam & PHC
							Borobekra (24x7 services) where
							there is no AYUSH Phamacists.
11	MPWs	16	0	0	0	0	-
12	Others (OT technician	0	2	0	0	1	1 Sweeper – for District Head Qtr.
	Radiographer/ Dental						1 Computer Assistant- for handling
	technician/ lab assistant/						JSY,MCTS,HMIS reporting for
	ward boy/ sweeper/ data						JNIMS. This is very much needed,
	entry operators/computer						an area where DHS,IE is facing a
	assistants/ counsellors/						lot of problem.
	cook/ dietician/ etc.)						

F.M.R. Code: A.9.5- Child Health Training

CH Trg- Annexure 2

CH Trainings		IMNCI		F-IMNCI			NSSK		
	Cumulative Target (from inception till date)	Cumulative Achievement (Since inception - till date)	Proposed numbers to be trained in 13-14	Cumulative Target (from inception till date)	Cumulative Achievement (Since inception - till date)	Proposed numbers to be trained in 13-14	Cumulative Target (from inception till date)	Cumulative Achievement (Since inception - till date)	Proposed numbers to be trained in 13-14
AWW	-	0	24	-	-	-	-	-	
ASHA	-	0	431	-	-	-	-	-	
ANM	-	60	54	-	-	-	-	-	
MPW (M)	0	0	2	-	-	-	-	-	
LHV	0	0	0	-	-	-	-	-	
Supervisor (M)	0	0	6	-	-	-	-	-	
SN	-	16	36	-	-	26	-	-	26
МО	-	15	26	-	-	26	-	-	24
Others	-	-	-	-	-	-	-	-	-
Total	-	92	579	-	-	52	-	-	50

F.M.R. Code- A.10. – Programme Management

PM- Annexure-I

Sr. No	Category	Existing staff in	2012-13 (Appr	oved by GoI)		Proposed staff in 2	013-14
NU		No. of existing staff	Salary per month	Total amount approved (Rs. In lakhs)	No. of staff proposed	Salary per month	Total amount approved (Rs. In lakhs)
1	SPMU/DHS						
	(Specify categories)						
2	DPMU	3			3	-	-
	(Specify	DPM-1	24000	288000			
	categories)	DDM-1	20000	240000			
		DFM-1	20000	240000			
		Computer Assistant to					
		be posted at JNIMS for	-	-	1		
		HMIS ,MCTS,JSY				-	-
		reporting for JNIMS					
3	BPMU	9			9	-	-
	(Specify	BPM-3	15000	180000			
	categories)	BFM-3	14500	174000			
		BDM-3	14500	174000			

Status of Programme Management staff

Imp: Please furnish an updated organogram of the health department showing both SHS and Directorate at State, district and block level

F.M.R. Code- B 1 : ASHA

ASHA- Annexure-I

Number of ASHA Required as per Rural population	Number of ASHA engaged (Atleast trained in 1 st Module)	Shortfall	Target for 2013-14
436	431	5; KB Block– 2 Jiribam Block – 2	436
		Sawombung Block - 1	

ASHA- Annexure-II

Status of ASHA Training

Sl. No	Cumulative Achievement (Since inception -till date)	Proposed numbers to be trained in 13-14
Module 1	431	-
Module 2	431	-
Module 3	431	-
Module 4	431	-
Module 5	431	-
Module 6 & 7 Round One	431	-
Module 6 & 7 Round Two	431	-
Module 6 & 7 Round Three	431	-
Module 6 & 7 Round Four		431

ASHA Drug Kits

Number of ASHA Engaged (Trained in Module-I)	431
Number of ASHA with Drug Kits	431
Number of ASHA with HBNC Kits	0
No. of New Drug Kits Required	0
No. of Drug kits to be Replenished	431
No. of New HBNC Kits required	431
No. of HBNC Kits to be Replenished	NA

Sr. No.	Name of Drug in Drug Kit
1	PCM,Pivodine Ointment,Metron,
	EyedropVelocit, bandage, Cotton, Plaster, Hydrogen peroxide, Dettol, Cord clamp.

Sr. No.	Name of Instrument/ drug/ communication material in HBNC Kit
1	Weighing machine, Digital Thermometer, Digital watch

Incentives for ASHAs

SI.			Target Population	Total Amount Proposed
No	Incentive	Amount proposed per ASHA		
1	Incentive under JSY	600	1696	1696000
2	Incentive under Maternal Health	-	-	-
3	Incentive under Child Health	250	5668	1417000
4	Incentive under immunization programme	150	1953	293000
		NSV-200	40	8000
5	Incentive under Family Planning	Tubectomy-150	300	45000
6	Incentive under DOTS Programme	-	-	-
7	Incentive under leprosy Programme	-	-	-
8	Incentive under Disease control Programmes	-	-	-
9	Any other (please specify)	-	-	-

Note: Incentive for ASHAs for Vertical programmes are reflected on their respective Health Action Plan 2012-2013 . Annexure enclosed.

ASHA- Annexure-V

Human Resource	Required as per norms	A	Approved 2012-13	Pr	Proposed 2013-14			
		No. In position	Monthly Remuneration	Total Amount Approved	No.	Monthly Remuner ation	Total Amount	
ASHA Coordinator at State Level	-	-	-	-	-	-	-	
ASHA Coordinator at District Level	1	1	-	-	1	-	-	
ASHA Coordinator at Block Level/ Block Community Mobilizer for ASHA	3 (proposed)	0	-	-	3	-	-	
ASHA Facilitator	22	22	-	-	22	-	-	
Any other please specify	-	-	-	-	-	-	-	

F.M.R. Code- B.3 : Annual Maintenance Grants

AMG- Annexure-I

Facility level	Number of facilities for which AMG	% Expenditure of AMG	Number of facilities in Govt	P	roposal for 201	3-14
	for which AMG approved in 2012-13	ANG	Buildings as per RHS 2011	Number of Units as per State	Unit Cost	Total Amount Proposed
AMG for SCs	36	Rs.3540 (Expenditure incurred from last year.)	-	36	10000	360000
AMG for the facility below PHC & above SC	3 UHC	0	-	3 UHC	10000	30000
AMG for PHCs	11	13% (Expenditure incurred from last year.)	-	11	50000	550000
AMG for CHCs	2	0	-	2	100000	200000
AMG for SDH	NA	NA	-	NA	NA	NA
AMG for DH	NA	NA	-	NA	NA	NA

F.M.R. Code- B.2 : Untied Funds

UF- Annexure-I

Village Health & Sanitation Committees

Activity	Cumulative Achievements so far
No. of Revenue Villages	244 – Courtesy : NIC, IE
Level at which VHSNCs are formed (Village/ Gram Panchayat/ Wards, etc) as per the State policy	Village
Total Target number of villages/ Gram Panchayats/ Wards in the State for VHSNCs	431
Number of Village Health Sanitation & Nutrition committees constituted	431
Number of villages/ Gram Panchayats/ Wards where VHSNCs are yet to be constituted (reasons for the delay in constitution)	50 – because of panchayat election, changing of pradhans, chairpersons
No. of Joint Account opened	381
No of joint accounts yet to be opened (reasons for the delay)	50- because of panchayat election, changing of pradhans, chairpersons
Total funds released to VHSNCs in 2012-13	Rs 2586000
Total amount spent by VHSNCs in 2012-13 so far	Rs 29998 – upto Oct. 2012
Total unspent balance	Rs 2556002
Number of VHSNC utilized less than 50% of fund (2011-12)	17
Number of VHSNC members to be trained by the State	50
No of VHSNC members already trained	381
No. of Village Health Plan Prepared in the State	-
No. of Village Health Plan Prepared	184

Untied Funds

Facility level	Number of facilities for which	% Expenditure of Untied Funds	Number of facilities as per		Proposal for 201	3-14
	Untied Funds approved in 2012- 13	United Funds	RHS 2011	Number of Units as per State	Unit Cost	Total Amount Proposed
Untied Fund for SCs	52	12% (Expenditure incurred from last year)	-	52	10000	520000
Untied fund for the facility below PHC & above SC	-	-	-	-	-	-
Untied Fund for PHCs	11	14% (Expenditure incurred from last year)	-	11	25000	275000
Untied Fund for CHCs	2	0	-	2	50000	100000
Untied Fund for SDH	-	-	-	-	-	-
Untied Fund for DH	-	-	-	-	-	-

F.M.R. Code- B.6 :

Rogi Kalyan Samitis

Facility level	Number of facilities for which RKS Funds	% Expenditure of RKS		Proposal fo	or 2013-14
	approved in 2012-13	KK5	Number of RKS	Unit Cost	Total Amount Proposed
District Hospital	NA	NA	NA	NA	NA
Sub Divisional Hospital	NA	NA	NA	NA	NA
Community Health Centres	2	0	2	100000	200000
Primary Health Centres	11	29% (Expenditure incurred from last year)	11	100000	1100000
Other health facilities (Please Specify)	NA	NA	NA	NA	NA

F.M.R. Code- B 4 & 5: infrastructure

Infrastructure- Annexure -I

Name of the District	Type and Name of the Facility	No. of Beds Proposed	Population to be covered by the facility	Timeline for completion	Total Project cost (Rs. In lakhs)	Total funds proposed for 2013-14 (Rs. In lakhs)	Justification for Facility
Sawombung B	lock						
Imphal East	PHSC						
	Sajor leikai	2	5249		-	-	
	Makeng Chenglou	2	3029		-	-	
	Khabeisoi	3	8042		-	-	
	Khurai laiwangma	2	6819		-	-	
	Laipham khunou	2	8231	Q3	-	-	No building
	Kairang Muslim	2	4352	-	-	-	
	Kairang Meitei	2	4560	-		-	
	Lairikyenbam Leikai(Newly proposed)	2	7000		-	-	
Jiribam Block							
	Jakuradhor	2	>3000	Q2	-	-	No building.
	Kashimpur	2	>2500	Q2	-	-	No building.
Keirao Bitra B	Block PHSC						
	Waithou Chiroo	2	>5000	Q2	-	-	Approved in FY 2012- 13 but not constructed till now.
	Naharup Makhapat	2	>5000	Q2	-	-	No building. Attached in the local club.
	Ningomthongjao UHC	4	>15000	Q3	-	-	Presently situated in the market area just near to the main road without any fencing and also

New Constructions – I - (To include Absolutely New Constructions only)

						conjested.New construction needed for shifting. Land donated by local MLA.
Gate and wall fencing for 5 PHC- Bashikhong , Andro,Akampat,Yambem,Keirao Makting	-	-	Q2	-	-	To gate and wall fencing there is no compromise as the building needs protection .
Gate and wall fencing for 16 SCs except Sagaipat and - Ningomthongjao UHC	-	-	Q2	-	-	Very much needed as all the SCs are without gate and fencing.
Water pipie line for Andro PHC	-	-	Q2	-	-	There is scarcity of water and for regular source, this is needed from Andro PHC to water reservoir- 3 km away from PHC.

Infrastructure- Annexure –II

New Constructions II – (Rented to own Building/ Additional Building/ Major upgradation/ MCH Wings)

Name of the District	Type and Name of the Facili ty	Populat ion covered by the facility	No. of exist ing bed	No. of addition al bed propose d	Any additiona l infrastru cture proposed	OPD/m onth (average since April 2012)	IPD/mon th (average since April 2012)	Normal Deliveri es per month (averag e since April 2012)	C- section per month (avera ge since April 2012)	Bed occupa ncy per month (averag e since April 2012)	Timeli ne for comple tion	Total Projec t cost (Rs. In lakhs)	Total funds propos ed for 2013- 14 (Rs. In lakhs)	Justificati on
IE	Nong pok keithe lamnb i PHC	>5000	2	-	-	99	0	0	-	-	-	-	-	Already constructe d but could not shifted as there is dispute between the land owner and the PHC
	Bashi khong PHC	>40000	6	2	OPD block and ward exrension	1135	0	1 upto oct. 2012	-	-	Q2		-	Staff Qtr. Approved but not constructed so far. 12 hrs services being implemente d &delivery point.

Yaing angpo kpi PHC	11837	4	4	Overhead reservoir, Drainage System	566		-	-	-	Q2	-	-	-
Lamla i PHC	19245	4	4	Overhead reservoir,f encing, Drainage System	214		-	-	-	Q2	-	-	-
Heing ang PHC	51124	6	2	Wall fencing, Drainage System	480	15	3(April- Oct. 2012)	-	-	Q2	-	-	-
Sawo mbun g PHC	38814	6	3	Drainage System	632	120	8 nos. (April – Oct 2012)	-	-	Q2	-	-	-
Sagol manh CHC	>50000	29	4	Repairing of whole building,3 staff qtrs	1024	37	34 (April – Oct 2012)	-	-	Q2	-	-	-

Repair & Renovation of existing structure:

Name of the Distri ct	Type and Name of the Facilit y	Populati on covered by the facility	No. of existin g bed	No. of addition al bed propose d	Any additional infrastruct ure proposed	OPD/mon th (average since April 2012)	IPD/mon th (average since April 2012)	Normal Deliveri es per month (averag e since April 2012)	C- section per month (avera ge since April 2012)	Bed occupan cy per month (average since April 2012)	Timeline for completi on	Total Project cost (Rs. In lakhs)	Total funds propose d for 2013-14 (Rs. In lakhs)	Justific ation
	PHC Andro	>40000				497	0	0	-	-		-	-	Deliver
	PHCAk ampat	>58000	4	2	РНС	343	0	0	-	-			-	y point- needs
	Bashik hong	>40000			Reparing	648	0	1	-	-		-	-	to pay these
IE	Yambe m PHC	>26000	6	2		570	0	0	-	-		-	-	attentio ns.
	SC Repairi ng and Renova tion	-	1	2	Repairing	20	0	0	-	-	Q2	-	-	
	ANM staff Qtr.; Urup Salang pham	-	1	2	Constructio n of ANM Qtr.	19	0	0	-	-		-		-

Infrastructure- Annexure -IV

Ongoing / Spill Over Works

Name of the District	Type and Name of the Facility	Year of Approval of Project	Total Project Cost	Amount Approved in 2011- 12 (if	Amount Approved in 2012- 13	Amount Proposed for 2013- 14 (if	Remaining Amount (if any)	Physical Progress till date	Time Line for Completion	Justification
				any)		any)				
IE	PHSC-	2012-13	3 lacs	NA	1.5 lacs	1.5 lacs	NA	50%	Depends on	-
	Nongren,Sanjenbam,Kangla								budget	
	Siphai,Keibi								sanctioned	

Achievements in Infrastructure Development -

		No.	Sanctioned		Progres	s of New (Constructio	ns	
					No. Completed		Under truction	No. Sancti Yet to	
Health Facility	Year	High Focus Districts	Non High Focus Districts	High Focus Districts	Non High Focus Districts	High Focus Distric ts	Non High Focus Districts	High Focus Districts	Non High Focus District s
DH	Start of NRHM till 2012-13								
	In 2012-13								
SDH and other	Start of NRHM till 2012-13								
hospitals above CHC	In 2012-13								
CHCs	Start of NRHM till 2012-13								
	In 2012-13								
PHCs	Start of NRHM till 2012-13								
	In 2012-13								
APHC/ Others	Start of NRHM till 2012-13								
	In 2012-13								
Sub-Centers	Start of NRHM till 2012-13								
	In 2012-13								

Note : Most of the construction /renovation/up-gradation work are directly handled by Engineering Cell, SHS, Manipur . Detailed information – State subject.

F.M.R Code – B.11 – Mobile Medical Units

MMU – Annexure-I

Sr.	Name of	Name/ Vehicle	Run by	Average No. of	Average No.	Average No.	Average	Per Trip
No.	District	Number of	State/ NGO/	OPD cases	of	of villages	No. of	Operational
	covered by	MMU	PPP Mode	/month	Diagnostic	covered by	AWCs	Cost
	MMU		(If	(average since	Tests	MMU/month	covered per	(Excluding
			NGO/PPP	April 2012)	conducted	(average	month	all Capital
			Mode		in MMU/	since April	(average	Costs)
			specify		month	2012)	since April	
			name of		(average		2012)	
			agency)		since April			
					2012)			
1	Imphal East	MN-01/1887;	DHS,IE	5499	40	108	72	Rs 4500 per
		MN -01/1886						trip on
								average.

Functional Status of Existing Regular MMUs

Functional Status of Existing Specialized MMUs (includes MHUs, Dental Units, Mammography Vans, Boat Clinics etc)

Sr. No.	Name of District covered by MMU	Name/ Vehicle Number of MMU	Run by State/ NGO/ PPP Mode (If NGO/PPP Mode specify name of agency)	Average No. of OPD cases /month (average since April 2012)	Average No. of Diagnostic Tests conducted in MMU/ month (average since April 2012)	Average No. of villages covered by MMU/month (average since April 2012)	Per Trip Operational Cost (Excluding all Capital Costs)
1	Imphal East	MN-01/1887; MN -01/1886	DHS,IE	NA	NA	NA	NA

Details of Newly Proposed MMUs

Sr. No.	Name of District	No. of Existing MMUs	No. of New MMUs Proposed	MMUs proposed to be run by State/ NGO/ PPP Mode (If NGO/PPP Mode specify name of agency)	Justification
1	Imphal East	2	0	0	NA

F.M.R Code – B.12 – Referral Transport

RT- Annexure- I

Sr. No.	Торіс	Vehicles only for Referral transport [Not ambulances e.g Mamta Wahan (Jharkhand), Janani Express (M.P)]		Basic Life Support Ambulances		Advanced Life Support Ambulances	
		State managed	EMRI/ NGO/ Other Private Provider managed Ambulances	State managed	EMRI/ NGO/ Other Private Provider managed Ambulances	State managed	EMRI/ NGO/ Other Private Provider managed Ambulances
1.	No. of Existing Ambulances	0	0	0	0	0	0
2.	No. of ambulances supported under NRHM	0	0	0	0	0	0
3.	No. of Districts covered by Ambulances	0	0	0	0	0	0
4.	Average Population covered per Ambulance (In lakhs)	0	0	0	0	0	0
5.	Average Response Time per call	0	0	0	0	0	0
6.	Average no. of trips per month per ambulance	0	0	0	0	0	0
7.	Monthly Operational Cost Per Ambulance (Excluding all Capital Costs)	0	0	0	0	0	0

8.	Average No. of	0	0	0	0	0	0
	Emergencies handled						
	per month per						
	ambulance (including						
	Pregnant Women &						
	Neonates) (average						
	since April 2012)						
9.	Average No. of	0	0	0	0	0	0
	Pregnant Women						
	transported per month						
	per Ambulance (average						
	since April 2012)						
10.	Average No. of	0	0	0	0	0	0
	Neonates transported						
	per month per						
	Ambulance (average						
	since April 2012)						
11.	No. of New Ambulances	5	0	5	0	0	0
	Proposed						

RT- Annexure- II

Financial Data on EMRI

	Type of			apital Cost	Operatir	ng Cast	% of NRHM Contribution in Operating Cost
Year	Ambulanc	No. of Ambulances	State Contribution	NRHM Contribution	State Contribution	NRHM Contribution	
	ALS	NA	NA	NA	NA	NA	NA
2006-07	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2007-08	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2008-09	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2009-10	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2010-11	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2011-12	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2012-13	BLS	NA	NA	NA	NA	NA	NA
	ALS	NA	NA	NA	NA	NA	NA
2013 -14 (Proposed							
)	BLS	NA	NA	NA	NA	NA	NA

F.M.R Code: B. 13 & 14 & B. 18 - PPP/NGOs/ Innovations/ New Initiatives

Activities Proposed:

- * Name of the Activity: Paying Incentive/Extra allowance to Staff posted at 24x7 services Health facilities (Having Night duty).
- **Whether New/ or being continued:** New
- * Achievements if continued from previous years: Nil
- Justification: Neither the State nor the District concerned anything about the welfare of those staff who are restlessly working round the clock leaving aside their home duty with this paltry amount they get as salary. The output and the input should be matched. So the question is "De we need to pay some attention to them now or never?" Hope the performance for them will increase a lot or they will discharge their duties faithfully if we give some extra incentive only for those staffs that are doing night duty at the 24x7 services health facilities where they have a very insecure life with no security at all. Incentive for them needs no question, it justify itself. If incentive to them is the answer what will be the question?
- Funding Proposed: 1. 2 MOs for 3(three) 24x7 health facilities(PHC Akampat,PHC Heingang,PHC Sawombung) and 2 CHC Sagolmang and Jiribam @ Rs 10,000 per month each for 12 months = Rs 12,00,000.

(Rupees twelve lacs only)

2. 3 (three) ANM & 3 SN for 3 24x7 health facilities and 2 CHC @ Rs 6000 per month for 12 months= Rs 21,60,000/-(Rupees twenty one lacs sixty thousand only)

> Total Budget proposed=33,60,000 (Rupees thirty three lacs sixty thousand only)

The roaster for all the staff having night duty will have to be submitted to the CMO/Mission Director, DHS, IE for every month and justification for paying the incentive will be decided by the CMO/Mission Director, DHS, IE.

FMR Code: B 15.1: Community Monitoring

Number of Visioning workshops for community monitoring held so far in the	26
state (UPTO 2012-13)	20
Number of Visioning workshops for community monitoring planned for 2013- 14 if any at State/ Distrit/ Block level and other	13
Officer responsible for community monitoring at each level (Designation). Also mention if the officer has any other charges.	District – CMO Block level-MO i/c
Whether a nodal agency at State has been identified already. If yes, then please give details.	No
Whether a State chapter of the Advisory Group of Community Action	NA
Whether Community Monitoring is being undertaken in the state for health (both under NRHM and under State budget - please specify)	Under NRHM
Number of blocks where Community Based Monitoring was being implemented in the State - activities undertaken	3 Blocks .Activities – JSY,VHSC,VHND,RKS
Number of districts where Community Based Monitring was being implemented - activities undertaken	0
Whether social audit / Jan Sunwai is being undertaken anywhere in the state for health	No

Measures to increase Accountability to community:

Whether citizen's charter is prepared and displayed on public domain. If yes, provide link:	Yes
Whether a grievance redressal mechanism is set-up. If yes, pleas eprovide details.	No
Whether an ombudsman is appointed for grievance redressal. If any please provide further details.	No
Whether a portal is prepared for mandatory disclosure of information needed as per instructions of CIC	No

F.M.R. Code: B.15.2: QUALITY ASSURANCE CELL

Annexure-VII

	QUALITY ASSURANCE CELL	
Has State established QA Cell?	YES	NO
If yes, at what level		
State level		
District level	Yes	-
Any other level		
Field Visits by QA Cell	No. of Proposed visits in 2012-13	No. of Visits conducted
State level		
District level	4	0
Any other level		
Meeting by QA Cell	No. of Proposed Meetings in 2012-13	No. of Meetings conducted
State level		
District level	8	4
Any other level		
Reports	No. of Reports Submitted	No. of Reports Analyzed
State level		
District level	0	4
Any other level		

FMR Code: B-15.3- Monitoring & Evaluation

Major Head	Minor Head		Budg et in Rs	Details (including cost per unit)	Remar ks	Amount approve d in 2012-13	Actual expendit ure in 2012-13
	Salaries of M&E, MIS & Data Entry Consultants	1.1		Salary for 3 HMIS Assistant for 3 Blocks .		168000	29160
1.Strengthening of M&E/HMIS/ MCH Tracking	Mobility for M & E Officers	1.2		@ 5000 per qtr each for3 block and District =Rs 80000			
	Workshops/Training on M & E			HMIS: 2 times per annum @ Rs 20000 per training each for 3 Blocks and District = Rs 320000 MCTS: 2 times per annum @ Rs30000 per training each for 3 Blocks and 1 training @ Rs 30000 for District = Rs 210000.		160000	123000
	M&E Studies	1.4					
	Others (specify)- review meetings	1.5		HMIS: 1 time per month @ Rs 5000 per month at District and 1 time per month @ Rs 3000 per month for 3 Blocks. = Rs 168000 MCTS: @ Rs 10000 per qtr. For 3 Blocks & District = Rs 160000		168000	80000
2. Procurement of HW/SW and other equipments	Hardware/Software Procurement	2.1		Procurement of Laptop: BlockLevel: 3 laptop @ Rs 50000 each for 3 HMIS Assistant & 3 BDM = Rs 30,0000 District level: 1 laptop@ Rs50000 for District Data Manager = Rs Rs 50000. Procurement of V-SAT /Installation of V-SAT = Budget State Policy	3 laptop at Block & 1 Lapto p at Distri ct		
	Internet connectivity	2.2		Internet data card preferably Photon Plus one for each for 3 HMIS asst. @ Rs.4000 = Rs		62400	7260

Major Head	Minor Head		Budg et in Rs	Details (including cost per unit)	Remar ks	Amount approve d in 2012-13	Actual expendit ure in 2012-13
				12000			
	Annual Maintenance	2.3		Rental charge for 3 blocks & District @ Rs 1300 per month for 1 year = Rs 62400 Maintenance of Computers & others @ Rs 6000 each for 3 Blocks & District for 1 year = Rs 24000 4 nos. Antivirus @ Rs 2000.= Rs 8000			
	Operational Costs (consumables etc)	2.4					
		2.5		Development of S/W for stock and OPD maintenance for 5 PHC /CHC @ Rs 50000 = Rs			
3.Operationalisi	Others (Specify) Review of existing registers – to make them compatible with National HMIS	3.1		250000			
ng HMIS at Sub District level	Printing of new registers/Forms	3.2					
	Training of staff	3.3					
	Printing and reproducing Registers/ Forms	4.1		Printing of workplan format for Mothers and Child for 65 Health Facilities for 1 year = Rs 30000		4000	4000
	Capacity building of teams	4.2					
4.Operationalisi ng MCH	Ongoing review of MCH tracking activities	4.3					
tracking	Monitoring data collection and data quality	4.4					
	Others (Specify)- operational cost for consumables items	4.5		Operational cost for consumable items viz cartridges, maintenance cost .@ Rs 10000 for 3 Blocks and 1 District		40000	6400

FMR. B.16 Drugs:

- Articulation of policy on entitlements, free drugs for delivery, rational prescriptions, timely procurement of drugs and consumables, smooth distribution to facilities from DH to SC, uninterrupted availability to patients, minimization of out-of-pocket expenses, quality assurance, prescription audits, EDL in public domain, computerized drugs and logistics MIS system.
- Essential drugs lists (EDL) is to be prepared by the State and budget should be projected accordingly.

S.	Name of	Requirement of drugs for the FY 2013-14			Justification
No.	essential drugs	Quantity Unit cost		Total Amount	
				(Rs. In lakhs)	
1	Annexure	-	-	-	Essential for delivery points
	enclosed				& all other health facilities
					for daily used.

• State needs to commit the amount for provision of essential drugs from State's budget during the year.

FMR. B.16.1 Equipments:

- Equipments procured and supplied to the health facilities should not be dumped and un-utilized. A facility wise gap analysis of equipments to done and projection to be made accordingly. ٠
- ٠

		Name o	of the Facility :	CHC Jiriba	m & CHC S	Sagolmang (Deli	ivery point – 24	x7 services)	
SI No.	Name of the Equipment	No. of existing equipment	No. of proposed equipment	IPD load/ day	OPD load/ day	No. of Normal Delivery per month	No. of C- sections per month	Bed Occupancy rate per month	Justification
	Equipment for MH, CH,FP & Others.	-	-	3 (average)	34 (average)	7 (average)	-	65%	They are the 2 CHCs in Imphal East where maximum delivery services are performed. Moreover, it may be claimed that CHC Jiribam is the only Health facility in Jiribam block where delivery are conducting not to mention PHC Borobekra .So more emphasis needs to be given or otherwise people has to go to Silchar which is around 10- 15 Km from Jiribam . The same attention needs to be given to CHC Sagolmang which is around 30 km away from JNIMS.

Note: ANNEXURE enclosed.

CI	Name of the	Name of the Facility : PHC – Borobekra,Heingang,Sawombung,Lamlai, Yaingangpokpi,Akampat, Keirao makting,Andro,Bashikhong,Nongpok Keithelamnbi(Delivery point(except Nongpok keithelmanbi PHC) /24 x7 services)							
SI No.	Name of the Equipment	No. of existing equipment	No. of proposed equipment	IPD load/ day	OPD load/ day	No. of Normal Delivery per month	No. of C- sections per month	Bed Occupancy rate per month	Justification
	Equipment for MH, CH,FP & Others.	-	-	0.51(average) PHC 24x7 services	19 (average)	1 (average)		7%	Reqd. for all health facilities – delivery points/24x7 services.

Note: ANNEXURE enclosed.

		Name of the Facility :3 UHC (2 delivery point – Kshetrigao, mantripukhri) ; 49 PHSCs							
Sl No.	Name of the Equipment	No. of existing equipment	No. of proposed equipment	IPD load/ day	OPD load/ day	No. of Normal Delivery per month	No. of C- sections per month	Bed Occupancy rate per month	Justification
	Equipment for MH, CH,FP & Others.	-	-	-	6 (Average)	6.7 (average for UHC mantripukhri)		-	Reqd. for all health facilities – delivery points & others.

Note: ANNEXURE enclosed.

Infrastructure Maintenance:

Sr. No.	Type of Institution	Category of Post	Number	Unit Cost	Amount Proposed
I	Direction & Administration		NA	NA	NA
		Salaries (Kindly Specify the position and the type of Staff)			
II	Sub-Centres	ANM	NA	NA	NA
		1/6th salary of LHV per Sub-Centre			
III	Urban Family Welfare Centres (UFWCs)	MPW (M)	NA	NA	NA
			NA	NA	NA
		MPW (F)	NA	NA	NA
		CLERK	NA	NA	NA
		MO PHN/LHV	NA	NA	NA
IV	Urban Revamping Scheme (Health Posts)	PHN/MPW (F)	NA	NA	NA
		MPW (M)	NA	NA	NA
		МО	NA	NA	NA
		CLERK	NA	NA	NA
V	Basic Training for ANM/LHVs	Nursing Officer	NA	NA	NA
		Sister Tutor	NA	NA	NA

Sr. No.	Type of Institution	Category of Post	Number	Unit Cost	Amount Proposed
		Public Health Nurse	NA	NA	NA
		Sr. Sanitary Inspector	NA	NA	NA
		Warden	NA	NA	NA
		U.D.C.	NA	NA	NA
		Domestic Staff	NA	NA	NA
VI	Maintenance and strengthening of Health and FW Training Centres (HFWTCs)	Principal	NA	NA	NA
			NA	NA	NA
		Medical Lecturer-cum-demonstrator			
			NA	NA	NA
		Health Education Instructor			
		Social Service Instructor	NA	NA	NA
		Public Health Nurse	NA	NA	NA
			NA	NA	NA
		Health Education Extension Officer			
		Senior Sanitarian	NA	NA	NA
			NA	NA	NA
		Senior Health Inspector (Communicable Diseases)			
		Statistics	NA	NA	NA
		Office Superintendent	NA	NA	NA

Sr. No.	Type of Institution	Category of Post	Number	Unit Cost	Amount Proposed
		Projectionist	NA	NA	NA
		Clerk-cum-Accountant/Store Keeper	NA	NA	NA
		Artist Computer	NA	NA	NA
		Steno typist	NA	NA	NA
			NA	NA	NA
		Clerk-cum-Typist	NA	NA	NA
		Driver-cum-Mechanic Peon-cum-attendant	NA	NA	NA
		Sweeper	NA	NA	NA
			NA	NA	NA
		Cleaner Chowkidar-cum-Mali	NA	NA	NA
VII	Basic Training for MPWs (Male)		NA	NA	NA
	At HFWTC	Epidemiologist			
		Management Instructor			
		Sanitary Engineer			
		Communication Officer			
		Public Health Nurse			

Sr. No.	Type of Institution	Category of Post	Number	Unit Cost	Amount Proposed
		Junior Accounts Officer			
		Class IV			
	At New Basic Training School	Medical Officer (I/C)	NA	NA	NA
		Public Health Nurse			
		Health Educator			
		Sr. Sanitary Inspector			
		UDC-cum-Accountant			
		UDC-cum-Typist			
		Class IV for Schools			
		Class IV for Hostel			

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Year	Amount Approved	Expenditure	Physical performance *
2007-08	NA	NA	NA
2008-09	NA	NA	NA
2009-10	NA	NA	NA
2010-11	NA	NA	NA
2011-12	NA	NA	NA

*Kindly provide details about research studies, policy documents prepared by SHSRC and all other contributions of SHSRC to NRHM in the State.