## Ministry of Health & Family Welfare

# RECORD OF PROCEEDING (GOA)

2022-2024

National Health Mission



#### **Preface**

As we continue to successfully address the challenges posed by the COVID-19 pandemic, the time is opportune to strengthen the country's health systems and press forward with the National Health Mission (NHM) serving as the driving force. Under NHM, this Record of the Proceedings (ROP) document serves as the blueprint for the States for actualization of the Program Implementation Plans (PIP) and provides a ready reference for budgetary approvals for the FY 2022-23 and FY 2023-24. Actions taken in the next two years will be critical towards achievement of the National Health Policy targets and will enable the journey towards the Sustainable Development Goals (SDGs).

India is firmly committed to Elimination of Tuberculosis by 2025. Any deviations brought on by the pandemic will have to be combatted with doubling-up efforts to detect-treat-prevent and build in accord with the National and State Strategic Plans. Block by block, and district by district. The States need to achieve elimination of Malaria, Lymphatic Filariasis, Leprosy, Kala Azar and work consistently towards alleviating the burden of communicable and non-communicable diseases in the communities. An under- tapped resource within our communities are the youthful adolescents, for they possess immense potential to shape the future of the world. It is vital to actively engage them as Ambassadors, Peer Educators and Change-Makers for a healthier tomorrow. This entails strengthening the adolescent health component of RMNCH+A, while continuing to provide for safe motherhoods and thriving childhoods. From LaQshya certifications of the Labour Rooms to accreditation of the health facility with the National Quality Assurance Standards, I hope the States will also work towards

To further strengthen the health infrastructure of the country, the Ministry of Health and Family Welfare (MoHFW) has taken various initiatives in the recent past. The 15<sup>th</sup> Finance Commission Health Sector Grants (15<sup>th</sup> FC) and the Pradhan Mantri- Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) are supporting the development of Critical Care Blocks (CCBs), Integrated Public Health Laboratories (IPHLs), Block Public Health Units (BPHUs), Health and Wellness Centres (HWC), diagnostic infrastructure, as well as some Human Resources for Health (HRH). The States should judiciously utilize the grants and ensure that there is no overlap between the NHM and 15<sup>th</sup> FC funding. We hope that the simplified budget matrix and omission of budget lines in the new PIP format will provide sufficient flexibility to the States, and duplication of any funding sources must be avoided.

enhancing the quality of care provided, with patient safety being of prime importance.

While implementing the plans, the States should proceed with clear-sighted vision towards the key deliverables. Stringent review of the processes and immediate outputs should be done to ensure favorable outcomes at the end of FY 2023-24. The activities should be well-regulated and adequately paced throughout the two-year period, in coordination with the proposed fund-release structure. This time, funds will be released quarterly in four tranches, and the opportunity for a course-corrective supplementary PIP will not be available more than once.

I urge the States to not let minor impediments or challenges stall the implementation of the plans. All efforts should be made to achieve low hanging fruits and complete as many items on the agenda as feasible. States should also endeavor to undertake supportive supervision to ensure successful operationalization of the approved PIPs. A rigorous monitoring system with mechanisms to handhold

the peripheral health functionaries would go a long way in improving the scope and quality of health services provided. Several districts and blocks are outperforming the others in achievement of their objectives- What sets them apart? It is important that their Best Practices and Innovations not only be appreciated, but also documented and disseminated across the States to motivate others.

One of the good practices observed is the creation of Specialist Cadre and Public Health Cadre. These facilitate attracting Specialists to strengthen the secondary health care services, enable operationalizing First Referral Units and helps improve the management of Public Health services. Several incentives and provisions for motivating HRH to join the public health system are in place under NHM, specially for the High Priority and Aspirational Districts. The States are urged to leverage them and urgently fill the existing vacancies- after all, the presence of a motivated and skilled workforce is the backbone of any efficient health system.

This fact has been reiterated during the pandemic where our 'Corona Warriors' have valiantly been holding the fort, both in the hospitals, and in the communities. One of the key factors enabling the success of the COVID-19 vaccination program has been the untiring efforts of the health workers in motivating and pursuing eligible beneficiaries in the farthest corners of the country. It is imperative that HRH management also be strengthened across the country.

The pandemic has also birthed multiple avenues for the utilization and incorporation of Information Technology into healthcare. The urgency of capacity building coupled with the limitations of physical distancing has boosted online and web-based teaching-learning modalities. States should continue to leverage digital learning platforms and develop hybrid capacity building systems, imbibing the best of e-learning and classroom teaching. Digital academies may be created which promote self-paced learning and cultivates an environment of excellence and scientific advancement.

With the spirit of 'Leaving no one behind', we are striving to achieve Universal Health Coverage, and expanding the realms of Comprehensive Primary Health Care through establishment of 1.5 lakh Health and Wellness Centres. It is time to move beyond the provision of routine curative health services and invigorate the communities with concept of well-being to enable the prevention of non-communicable diseases and mental health issues.

While the MoHFW is navigating the health systems with the formulation of policies and guidelines, it is the program implementors at the State who know what strategies will best be suited to their socio-cultural, demographic, and epidemiological context. The States are always welcome to adapt and adopt them at their able discretion and to reach out to us for any support in this regard. Let us move ahead together with a renewed determination to augment our capacity as a sustainable health system and 'build back better'.

Roli Singh Additional Secretary and Mission Director, National Health Mission

## F.No. 10(3)/2022-NHM-I Ministry of Health and Family Welfare Government of India

(National Health Mission)

Nirman Bhawan, New Delhi Dated 23<sup>rd</sup>May, 2022

To,

Shri Y.V.V.J Rajshekhar Secretary Health & MD (NHM) Government of Goa, Secretariat, Porvorim, Goa – 403521

Subject: Administrative Approval of NHM Program Implementation Plan for the State of Goa for FY 2022-23 and FY 2023-24 - reg.

This refers to the Program Implementation Plan (PIP) for the FY 2022-23 & FY 2023-24 submitted by the State of Goa and subsequent discussions in the NPCC meeting held on  $5^{th}$  April 2022 at Nirman Bhawan, New Delhi.

2. The ROP includes approval of work plan and budget for two years. Against a Resource Envelope of **Rs 69.78 Crore** (calculated assuming State share of 40%), an administrative approval is conveyed for an amount of **Rs 129.61Crore**(including IM, Immunization Kind Grants and unspent balance to continue ongoing work of FY 21-22) for FY 2022-23. For FY 2023-24, against a Resource Envelope of **Rs 72.05Crore** (calculated assuming State share of 40 %, and an increase of 5% over the allocation of 2023-24), an administrative approval is conveyed for an amount of **Rs115.32Crore**(including IM and Immunization Kind Grants). Details of Resource Envelope are provided in Table 'A' and 'B' below:

Table 'A': Resource Envelope

(Rs. in Crore)

	Particulars	2022-23 (5% Increase)	2023-24 (5% Increase)
a.	GoI Support (Flexible Pool allocation including Cash and Kind minus Immunization Kind Grants)	20.85	21.89
b.	GoI Support for Incentive Pool based on last year's performance (assuming no incentive/ reduction on account of performance)	4.54	4.77
C.	GoI Support (under Infrastructure Maintenance)	14.71	14.71
d.	GoI Support (under Immunization Kind Grants)	1.77	1.86



Particulars	2022-23 (5% Increase)	2023-24 (5% Increase)	
e. Total GoI support (d = a + b + c+ d)	41.87	43.23	
f. State Share (40%)	27.91	28.82	
g. Total Resource Envelope (g = e + f)	69.78	72.05	
Unspent Balance (committed and uncommitted) as on 1 <sup>st</sup> April 2022 as communicated by State	14.06	-	
Total Resource Envelope including unspent balance	83.84	72.05	
Maximum Permissible Resource Envelope (including IM, Immunization Kind Grants, unspent balances)	97.17	85.92	

TABLE 'B': Breakup of Resource Envelope

(Rs. in Crore)

Sl.No.	Particulars	2022-23 (5%	Increase)	2023-24 (5% Incre	ease)
		Gol Share (including Incentive Pool)	State Share (40%)	GoI Share (including Incentive Pool)	State Share (40%)
1	RCH Flexible Pool (including RI, IPPI, NIDDCP)	6.30		6.62	
1 (i)	RCH Flexible Pool (including RI, IPPI, NIDDCP) Cash Grant Support	4.53	(a)	4.76	
1(ii)	RCH Flexible Pool (Kind Grant Support under Immunisation)	1.77	27.91	1.86	28.82
2	Health System Strengthening (HSS) under NRHM	12.71		13.34	
2 (i)	Other Health System Strengthening covered under NRHM	11.14		11.70	
2(ii)	Ayushman Bharat Health and Wellness centres under NRHM	1.57		1.64	,
2(iii)	Additional ASHA	0.00		0.00	25



Sl.No.	Particulars	2022-23 (5%		2023-24 (5% Incre	ease)			
		GoI Share (including Incentive Pool)	State Share (40%)	GoI Share (including Incentive Pool)	State Share (40%)			
	Benefit Package							
	including support to							
:	ASHA facilitators	4						
65	Total NRHM-RCH	40.04						
	Flexible Pool	19.01		19.96				
3	NUHM Flexible Pool	1.45		1.52				
7.	Other Health System							
3 (i)	Strengthening covered	1.07		1.12				
	under NUHM		=					
	Ayushman Bharat							
3 (i)  3 (ii)  4  i  ii  iii  v  V  Vi  (i)	Health and Wellness	0.38		0.40				
	centres under NUHM		=					
4	NDCP Flexible Pool	6.02		6.32				
	NVBDCP (Cash &	0.66						
1	Kind)	0.66		0.69				
ii	NTEP (Cash & Kind)	3.38		3.55				
iii	NVHCP (Cash & Kind)	0.78		0.82				
iv	NLEP	0.05		0.06				
v	IDSP	0.57		0.60				
	National Rabies	1						
vi	Control Programme	0.46		0.49				
	(NRCP)			5				
	Programme for			1				
vii	Prevention and	0.40	-					
VII	Control of	0.12		0.13				
	Leptospirosis (PPCL)			-				
5	NCD Flexible Pool	0.68		0.72				
	Infrastructure							
	Maintenance	44-4						
6	(including Direction	14.71		14.71				
	and Administration)	-1						
	Resource Envelope	41.87	27.91	43.23	28.82			
	Total Resource	(0.50						
	Envelope	69.78		72.05				

3. The State Share of **Rs 27.91Crore for FY 22-23** and **Rs 28.82 Crore for FY 23-24** could be added to any pool depending on the approvals and requirement of the State for that respective Financial Year. The



total funds provided to NHM should be equal to 40% as applicable. The Pool wise Summary of the approvals has been given in **Annexure-1**.

- 4. All unspent balance available under NHM with the State as on 1<sup>st</sup> April 2022, has become a part of the Resource Envelope of FY 2022-23. Similarly, all the unspent balance available as on 1<sup>st</sup> April 2023, would become a part of the Resource Envelope for FY 2023-24. If need be, a mid-term review at the end of FY 2022-23 would be carried out, either at the request of the Ministry or the State/UT concerned, to provide course correction in case of shifting of priorities.
- 5. MOHFW has been moving towards simplification of NHM budget process. Major reforms in this cycle of planning are introduction of two year PIPs, reduction in budget lines to facilitate flexibility and easier implementation of SNA and a shift in focus from mere inputs to outputs. The major outputs agreed with the State in the form of key deliverables have been placed at **Annexure-2**. These deliverables along with the agreed targets would be the part of the NHM MOU.
- 6. The Conditionalities Framework for FY 2022-23 and FY 2023-24 is given as **Annexure-3**. It is to be noted that Full Immunization Coverage (FIC)% will be treated as the screening criteria and Conditionalities would be assessed for only those States which achieve 90% Full Immunization Coverage. For EAG, NE and Hilly States, the FIC criteria would be 85%. The funds received from Incentive pool based on performance shall be utilized against the approved activities only.
- 7. States are encouraged to adopt decentralised planning based on local requirement. However, the State must ensure that there is no duplication or overlap between various sources of funds including the recently approved FC-XV Health Grants support and PM-ABHIM for the similar activities.
- 8. Any reallocation to be conducted by state is to be Approved the Executive Committee and the Governing body of the State Health Society. Maximum budget available for states to reallocate fund is 10% of the total approved budget for that program/activity. States must intimate FMG, MoHFW regarding reallocation of fund on quarterly basis along with the 'Financial Management Reports' in the following format:

FMR	Budget Head	Total amount approved in FY 2022-23/ 2023-24	Fund allocated from Budget Head/FMR	Fund allocated to Budget Head/FMR	Quantity & unit cost approved in PIP for undertaking the activity	Number of quantities increased	Remarks
		2023-24			activity		

The above details are to be submitted to FMG, MoHFW along with a signed letter from the Mission Director and a copy of minutes of meeting held with EC and GB based on which decision has been taken.

9. The support under NHM is intended to supplement and support and not to substitute State expenditure.

#### 10. Human Resources for Health

All the support for Human Resources for Health (HRH) will be to the extent of positions engaged over and above the regular positions as per IPHS norms and caseload. NHM aims to strengthen health

Union Territories are encouraged to create sanctioned regular positions as per the IPHS requirements. HRH should only be engaged when infrastructure, procurement of equipment etc. required to operationalize the facility or provide services, are in place. Moreover, HRH can only be proposed and approved under designated FMRs. HRH under any other FMRs or in any lumpsum amount of other proposals, would not be considered as approved. Please refer to AS&MD's letter dated 17th May 2018 in this regard (copy enclosed as **Annexure-4a**). All approved HRH under NHM have also been listed in **Annexure-4b** for ease of reference.

- i. Remuneration of existing posts as a lumpsum has been calculated based on the salary approved in FY 2021-22, 5% annual increment and 3% rationalization amount (if any) for 12 months. The budget proposed by the State for remuneration of existing staff has been approved for 12 months in principle. This is to save the efforts of the State in sending any supplementary HRH proposals to MoHFW. If there are funds left in HRH budget, it could be used to pay the approved HRH at the approved rate for rest of the months.
- ii. The maximum increase in remuneration of any staff is to be within 15% (in total based both on performance and rationalization). Overall increment and rationalization of HRH is to be within the 8% of HRH budget. In case performance appraisal of NHM staff is not carried out by the State, only 5% increase on the base salary can be given.
- iii. Salary rationalization exercise (to be done only in cases where HRH with similar qualification, skills, experience, and workload are getting disparate salaries) and its principles including increments to be approved by SHS GB under overall framework and norms of NHM. In cases where the salary difference is more than 15%, salary rationalization was to be done in instalments. Increase in salary beyond 15% in any year for any individual will have to be borne by the State from its own resources.
- iv. The States/UTs must ensure that achievement of performance above minimum performance benchmark, as guided by MoHFW and finalized by State Health Society, is included as a condition in the contract letter of every HRH engaged under the NHM. Before renewal of the contract, each employee must be appraised at least against these benchmarks.
- v. As we move towards making the approvals more flexible, we expect the States to follow the broad guidelines and administer the HR functions well. To ensure that it is done properly and to document the good practices, HRH team will undertake HR monitoring of a set number of States/UTs every year.
- vi. It may be noted that if any of the HRH positions approved (Annexure 4b) remain vacant from 01/07/2023 to 31/03/2024, then all such positions would be deemed to have been dropped/lapsed and a fresh assessment of positions to be supported under NHM shall be done in the next PIP cycle.

#### 11. Finance

A.

i. As communicated earlier through letter dated 7th January 2022 the National Health mission would now be operated through a Single Nodal Agency (SNA), for which a single nodal



- account must be opened in a scheduled commercial bank authorized to conduct government business.
- ii. Withdrawing limits for all Implementing Agencies (IAs), must be defined, by the SNA. The bank software should be able to monitor the withdrawals of the implementing agencies, on a real time basis from single nodal agency and when the payments are made.
- iii. The central share must be transferred within 21 days to the Single nodal account. Also, the corresponding state share is to be transferred as early as possible, but not later than 40 days of release of central share.
  - iv. The interest earned on the central share must be remitted to the consolidated funds of India.
  - v. Separate budget lines must be maintained for central and state share under NHM. SNA and IAs would need to use the IT module PFMS
  - vi. SNAs and IAs are to mandatorily use the EAT (Expenditure Advance and Transfer) module of PFMS. The SNA must also be mapped with PFMS and integrated with the State treasury.
- B. Action on the following issues would be looked at while considering the release of first tranche of funds:
  - i. State should not have more than 25% of the total release (central +State Share) as unspent amount
  - ii. State should have completed all the tasks related to SNA and implementing Agencies mapping.
  - iii. State should have deposited all the previous central share and corresponding State share in the SNA
  - iv. Interest earned on NRHM and NUHM for central share must be remitted to the consolidated funds of India.
- C. Action on the following issues would be looked at while considering the release of subsequent tranche of funds:
  - i. State must have spent at least 75% of the total release (central +State Share).
  - ii. State should have deposited all the previous central share and corresponding State share in the SNA
  - iii. Interest earned on NRHM and NUHM for central share in previous quarters have been remitted to the consolidated funds of India.

#### **Other Financial Matters**

- i. The State should convey the district approvals within 30 days of issuing of RoP by MoHFW to State or by 31<sup>st</sup> May 2022 (whichever is later).
- ii. The State must ensure due diligence in expenditure and observe, in letter and spirit, all rules, regulations, and procedures to maintain financial discipline and integrity particularly with regard to procurement; competitive bidding must be ensured, and only need-based procurement should take place as per ROP approvals.
- iii. The unit cost/ rate wherever approved for all activities including procurement, printing, etc. are only indicative for purpose of estimation. However, actuals are subject to transparent and



- open bidding process as per the relevant and extant purchase rules and upto the limit of unit cost approved.
- iv. Third party monitoring of civil works and certification of their completion through reputed institutions may be introduced to ensure quality. Also, Information on all ongoing works should be displayed on the NHM website.
- v. The State to ensure regular meetings of State and District Health Missions/ Societies. The performance of SHS/DHS along with financials and audit report must be tabled in governing body meetings as well as State Health Mission and District Health Mission meetings.
- vi. As per the Mission Steering Group (MSG) meeting decision, only up to 9% of the total Annual State Work Plan for that year could be budgeted for program management and M&E for bigger States, while the ceiling could go up to 14% for small States of NE and the UTs. The states/ UTs will have to ensure that overall expenditure under programme management and M&E do not exceed the limit of 9%/ 14% (as applicable) as mandated by MSG.
- vii. The accounts of State/ grantee institution/ organization shall be open to inspection by the sanctioning authority and audit by the Comptroller & Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare.
- viii. All approvals are subject to the Framework for Implementation of NHM and guidelines issued from time to time and the observations made in this document.
- 12. The RoP document conveys the summary of approvals accorded by NPCC based on the state PIP for FY 2022-23 and FY 2023-24.
  - i. The program wise details of approvals for FY 22-23 and FY 23-23 for the PIP appraised by NPCC have been given **Annexure-5** for reference and ease of implementation.
  - ii. The committed liabilities for the FY 21-22 will become the part of RE for FY 22-23.
  - iii. The activities approvals under NHM for FY 22-23 and FY 23-24 is to be reflected in NHM-PMS portal. State to ensure that the valid data entries are made in the portal and it will be analysed for progress under NHM along with key deliverables.

#### 13. Infrastructure

- i. The approval for new infrastructure is subject to the condition that the States will use energy efficient lighting and other appliances.
- ii. The States/UTs should submit Non-Duplication Certificate in prescribed format.
- iii. The States/ UTs should review quarterly performance of physical & financial progress of each project and share the progress report with MoHFW.
- 14. **Equipment:** The States/UTs should submit Non-Duplication Certificate in prescribed format.



- 15. **IT Solutions:** All IT solutions being implemented by the State must be EHR compliant. In cases where there is Central software and the State is not using it, the State/UT must provide APIs of its State software for accessing/viewing data necessary for monitoring.
- 16. **Mandatory Disclosures:** The State must ensure mandatory disclosures on the State NHM website of all publicly relevant information as per previous directions of CIC and letters from MoHFW.

#### 17. JSSK, JSY, NPY and other entitlement scheme

- i. The State must provide for all the entitlement schemes mandatorily. No beneficiary should be denied any entitlement because of any limitations of approved amount for such entitled bases schemes. Wherever required, the State must suitably increase the provision in such FMR. The ceiling of 10% as per Para 8 shall not apply in such cases.
- ii. The State/UT to ensure that JSY and NPY payments are made through Direct Benefit Transfer (DBT) mechanism through 'Aadhaar' enabled payment system or through NEFT under Core Banking Solution.

#### 18. Resources Envelope and approvals:

**Approvals over and above the Resource Envelope is** accorded with the condition that there would be no increase in Resource Envelope and the State will have to prioritize and undertake the approved activities under existing RE. Any subsequent modification (if any) in the RE after approval of RoP shall be communicated separately.

Yours sincerely,

(Harsh Mangla)

Director (NHM-I)

## Annexure1:Budget Summary

FY 2022-23	Budget Proposed (in Lakhs)	Budget Approved (in Lakhs)
RCH Flexible Pool (including RI, IPPI, NIDDCP)	926.01	854.731
NDCP Flexible Pool (RNTCP, NVHCP, NVBDCP, NLEP, IDSP, NRCP, PPCL)	1051.75	1027.19
NCD Flexible Pool (NPCB&VI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPPCCHH)	1803.07	1802.07
NUHM Flexible Pool	203.03	172.61
Health System Strengthening (HSS) under NRHM	6679.64	6323.07
Total	10663.50	10179.671
Infrastructure Maintenance (IM)	1471.00	1471.00
Immunization Kind Grants	177.00	177.00
Grand Total Amount approved including IM & kind grants	12311.50	11827.671

FY 2023-24	Budget Proposed (in Lakhs)	Budget Approved (in Lakhs)
RCH Flexible Pool (including RI, IPPI, NIDDCP)	862.71	807.0327
NDCP Flexible Pool (RNTCP, NVHCP, NVBDCP, NLEP, IDSP, NRCP, PPCL)	1047.04	1030.23
NCD Flexible Pool (NPCB&VI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPPCCHH)	1780.77	1771.77
NUHM Flexible Pool	215.28	181.27
Health System Strengthening (HSS) under NRHM	6493.38	6085.1766
Total	10399.18	9875.4793
Infrastructure Maintenance (IM)	1471.00	1471.00
Immunization Kind Grants	186.00	186.00
Grand Total Amount approved including IM & kind grants	12056.18	11532.4793



## Annexure2:Key Deliverables of FY 2022-24

### RCH flexipool including Routine Immunization Programme, Pulse Polio ImmunizationProgram

N	l Indic ato r . Type	Indicator Statement	Indicator	Unit	Target 2021-22	Progress 2021 - 22	Likely achieve ment 2021- 22	get		
			MaternalHealt	h						
1.	Out	ANCCoverage	Percentage of PWregisteredfo rANC  Numerator: Total number ofPW registered for ANCDenominator: Total numberofestimatedpregna ncies	Percer tage	Benchmar k: Atlea st90 %	100%	100%	100 %	100 %	HM IS
2.	Out	ANC registration in1 <sup>st</sup> trimesterofpre gnancy(within 12weeks)	Percentage of PWregisteredforANCi n1sttrimester  Numerator: Total number ofPW registered in 1st TrimesterDenominator: Total numberofPW registered forANC	Percen tage	Benchmark Atlea st75 %	58%	65%	75 %	75 %	HM IS
3.		PregnantWomen whoreceived4orm ore ANCcheck-ups	%ofPWreceived4or moreANCcheck-ups  Numerator: Total number ofPW received 4 or more ANCDenominator: Total numberofPW registered forANC		Benchma k: Atlea st80 %	74%	80%	85 %	85 %	HM IS



S		t Indicator	Indicator	Unit	Target	Progr ess	Likely achieve	Target	Target	Source
N	o. or Type	Statement			2021-22	2 2021	ment 2021-22	2022-23	2023- 24	of Data
4.	Outpu	Identific	%ofhighriskpregn anciesidentified Numerator:Totalno .ofPWidentified as High RiskPregnancy (HRP)Denominator : Total numberofPW registered forANC	Perc enta ge	Bench mark Atl eas t1 0	3.29 %	5 %	10 %	10 %	RCH Portal
5.	Output	Managem ent ofHRP	%ofHRPManaged  Numerator: Total no. ofHigh Risk Pregnancies (HRP)managed Denominator: Total numberof High Risk Pregnanciesidentifie d	Perc enta ge	Bench mark 100%	Nota	available i	n the RCH	portal	RCH Portal
6.	Output	Institu tional Delive ries	%ofinstitutionalde liveriesout of total ANCregistration  Numerator: Total number ofinstitutionaldeliver ies(public +private) Denominator: Total numberofPW registered forANC	Perc enta ge	Bench mark: Mainta inat least9 0%	57%	65%	90%	90%	HMIS
7.	Output		%ofnationallyc ertifiedLRs and OTs underLaQshyaa gainsttarget  Numerator: Total number ofnationallycertified LRs&OTs. Denominator: Total numberof LaQshya identified LRsandOTs	Perc enta ge	1 out of 5 LRs 1 out of 4OTs	of 5 LRs	5 LRs 1 out of	l out of 5 LRs 3 out of 40Ts	5 LRs 1 out of	NHSRC report
8.	Output	Public Healthfa cilitiesn otified	Percentageofpubli chealthfacilities notified underSUMANagai	Perc enta ge	5	33	100%	100%		St at er ep

Sl No		t Indicator Statement MAN	Indicator  nst target	Unit	Target 2021-22		achieve	2022-23		Source of Data or t
9.	Output	Maternal deathrevi ewmecha nism	% of maternal deathsreviewed against thereportedmate rnaldeaths.Nume rator: Total no. ofmaternal deaths reviewedDenomi nator: Total no. ofmaternaldeathsr eported	Perc enta ge	Bench mark: At least 70% ofma tern alde aths tobe revie wed	88.9%	100%	100%	100%	HMIS
10.	Output	JSY Beneficiari es	Percentage of beneficiariesavaile d JSY benefits againstRoPapprova l  Numerator: Total no. of JSYbeneficiaries paidJSYbenefits Denominator: Total no. ofbeneficiariesappro vedinRoP	Perc enta ge		11.3%	20%	50%	60%	Sta teR ep ort
			Chi	ld Healt						
11.	Output	uldischa rgerate	SNCUsuccessfuldis chargerate out of total admission(%)  Numerator: No. of sick andsmall newborns discharged successfully (Unsuccessfuldenot es Death, LAMA andreferral)  Denominator: Total no. of sick newborns admitted in SNCUs.	Perc enta ge		83%	1	minim umben chmar k:susta inedab ove80		SN CU MI S Onl ine Por tal



SI No	Indicat o r Type	t Indicator Statement	Indicator	Unit	Target 2021-22		achieve	2022-23		Source of Data
SI No			Indicator	. Unit	Target 2021-22	2021-	Likely achieve ment 2021-22	<b>Target</b> 2022-23	Target 2023-24	Source of Data
12.	Output	Functiona lityofSNC Us	PercentageofDistri ctswithfunctional SNCU out oftotalapproval in RoP  Numerator: Total number ofdistricts with functionalSNCUs (with functionalequipment , trained HR as perFBNCguideline)  Denominator:	Perc enta ge	100%	100%	100%	Minimu mBenc hmark: 90%	100%	SN CU MI S Onl ine Por tal
		2	Total numberof district with approvedSNCU inRoP					-		
13.	Output	HRtraini nginNew born	Percentage of HR trained inNewborn and Child Health (NSSK,FBNC, FBNC Observership, NBSU,SAANSa ndF-IMNCI) againsttheapproval ofRoP.	Perc enta	100%	75%	75%	100%		Quart erlySt
		andChild Health	Numerator: Total no. of HR(MOs/SNs/ANMs ) trained inNew- born and Child Health(NSSK,FBNC, FBNC Observershi p, NBSU,SAANS ,F-IMNCI) Denominator: Total no. ofHR (MOs/SNs/ANMs)ap proved in RoP for traininginNew-	ge				Minimu mBenc hmark: 90%	- 1	ateRe port

SI No.	Indicat o r Type	Indicator Statement	Indicator	Unit	Target 2021-22	achieve	2022-23	Source of Data
			bornandChildHealth( NSSK,FBNC,FBNC Observershi p, NBSU,SAANS ,F-IMNCI)	-				
2			,					
					-			
-								



SI No		t Indicator Statement	Indicator	Unit	Target 2021-		achieve	2022-23	Target 2023-	Source of Data
14.	Output	Infant Death Repor ting	Percentage of Child DeathReportedagai nstEstimateddeath s  Numerator:Tot alno.ofChilddeat hsreported.  Denominator: Estimatednumbe r of Child Deathsbasedonla testSRSreport	Perc enta ge	100%	100%	100%	100%  At le as t8 0 %	100%	Quart erlyC DR State Repo rt /MP CDS RPortal
15.	Outco me	StillbirthRat e	Numerator: Total no. ofStillbirth ReportedDenomi nator: Total no. ofReportedDeliveries	Percent age	NA	0.88%	1%	1% Less than 10 %	1%	HMIS Report
16.			Percentage of Districtsimpleme ntedSAANSIEC/BC C Campaign (100%)againstRo P approval  Numerator:Tot alno.ofDistricts implementingS AANS Campaign(Nove mber- February)	Perc enta ge	100%	100%	100%	100%	100%	Quart erlySt ateRe port
*			Denominator: Total no. ofDistricts approved forimplementatio n of SAANSCampaign (November – February)in RoP							



SI		t Indicator Statement	Indicator	Unit	Target 2021-	Progress 2021-22	achieve	2022-23		Source of Data
17.	Output	Home visits byASHAs forNew- borns	Percentage of newbornsreceived complete scheduleof home visits against totalreportedliveb irths.  Numerator: Total no. ofnewbornsreceivedcompletescheduledofhom e visits	Perc enta ge	NA	NA	NA	Expecte dAchiev ement: 90%	NA	Quart erlyH BNC Report
			Denominator: Total no. ofnew- borns							
18.	Output	Roll out ofHBYC visits inalldistri cts	Percentage of District Rollout HBYC visits againstRoPappro valwithtrainedAS HAs  Numerator: Total no. ofdistrictsimplement ingHBYCvisitswith trainedASHAs	Perc e n ta g e	NA	NA	NA	NA Atl ea st7 5 %	NA	Quart erlyH BYC Report
			Denominator: Total no.districtsapprove dinRoPforHBYCimp lementation							
19.	Output	Paediatric HDU/ICUu nit	PercentageofDistri ctswithfunctional Paediatric HDU/ICU unit out of totaldistricts.  Numerator: Total no. ofdistricts with functionalPaediatri c HDU/ICU unitDenominator: Total no. ofdistricts with the approvedPaediatric HDU/ICUunitinRoP/ECRP.	Perc enta ge	100%	20%		100% Expecte dAchiev ement: 80%	100%	Quart erlySt ateRe port



SI	Indicat	Indicator Statement	Indicator	Unit	Target 2021-22		achieve	Target 2022-23	Target	Source of Data
	Туре					22	2021-22		24	
			Percentage of identifiedfacili ties certified underMusQan (National)					50%		
20.	Output	MusQan	Numerator: Total no. ofidentifiedfacilitie s(SNCUs/NBSUs/Paediatric Unitscertified under MusQan(National).	Perc enta ge	NIL	NIL	NIL	Expecte dAchiev ement: 30%  (90% complet ionof	100%	Quart erlySt ateRe port
		,	Denominator: Total no. ofidentified facilities (SNCUs/NBSUs/Pa ediatricUnits)bySta te/ UT for certificationunder MusQan(National).		57 <sub>70</sub>			base lineAss essmen t)		
21.	Output		%of Live Birth  Numerator: Total number ofLiveBirth reported  Denominator: Estimatednumber ofLiveBirth(SRS)	Perc enta ge	> 5 0 %	54%	78%	80% minim umben chmar k:80%	90%	RCH Port al &SR S Report
22.	Output	New- bornScre ening atDeliver ypoints	Percentage of NewbornsScreenedatth etimeofbirthoutofto talLiveBirths  Numerator: Number ofNewborns Screened at thetime ofbirth Denominator: Total numberofLive Birth Reported.	Percent age	100%	100%	100%	100%	100%	State Quart erlyR eport



SI		Indicator Statement	Indicator	Unit	Target	Progr ess 2021-	Likely achieve ment	Target 2022-23	Target 2023-	Source of Data
1,40	Туре	Jeacement			22	22	2021-22		24	OI Data
z ( t		ejeri - Jer	Percentage of DEICfunctional withInfrastructure		100%	100%	100%	100%	100%	
23.	Output	Func tiona IDEI Cs	EssentialEquipme nt and HR as perGuidelines against the RoPapproval.	Percen tage				Expecte dAchiev ement:		State Quart erlyR eport
			Numerator: Number ofDEICs functional withInfrastructure, EssentialEquipmen t,HRandtrainingasp er Guidelines. Denominator: Total numberofDEICsappr ovedinRoP.					80%		
24.	Output	RBSKMHTs	PercentageofGove rnment& Government aidedschools and AnganwadiCentre covered by RBSKMHTs	Perce	95%	NIL	NIL	95%	95%	State Quart
			Numerator: Number ofGovernment & Governmentaidedsc hoolsandAnganwadi Centre covered by RBSKMHTs as per RBSKGuideline. Denominator: Total numberof Public Schools andAnganwadi Centre in theblock	ntage				Expecte dAchiev ement: 80%		erlyR eport



	Indico. or	Statement	Indicator	Unit	Target 2021-	Progr ess 2021- 22	achieve	Target 2022-23	Target 2023-	Source of Data
25	. Outp	Screening ofChildre n inGovern ment &Govern mentaide d schoolsan dAnganw adiCentre	Percentage of childrenscreened by RBSKMHTs  Numerator: Number of Children in Government aided schoolsand Anganwadi Centrescreened by RBSKMHTs asper RBS KGuideline.  Denominator: Total number of Children in Government & Government & Government aided schoolsand Anganwa di Centre	Percent	100%	NIL	NIL	100%	100%	State Quart erlyR eport
26.	Outpu	Secondar y/Territo rymanage mentofCo nditionss pecified underRBS K	Number of beneficiaries rece ived Secondary/Territ ory managementagai nst RoP approval (for surgical intervention specified under RBSK).	Num ber		Cardia c 10% Plastic Surger y 50%	Cardiac 10% Plastic Surgery 50%	100%	100%	State Quart erlyR eport
			Routii	neImmu	nization					
27.	Outpu	ncovera ge	Percentage of FullImmunizati on Coverage(FIC)  Numerator: Total number ofchildren aged 9-11 monthsfully immunized with BCG+Three doses of pentavalent +three doses of OPV + Onedoseof MRCV Denominator: Total No.	Perce ntage	90%	70%	90%	95%	97%	HMIS



	Sl Indic	Statement	Indicator	Unit	Target 2021-	Progress 2021-22	achieve	2022-23	Target 2023-	Source of Data
			oftargetchildren in9-11 months'agegroup							
28	3. Outp	ut Cover ageofb irth doseH epatiti sB	Percentageofc hildrenreceiv ing birth doseHepatitis B as againstinstitu tionaldeliveri es Numerator: Total no. ofinfants immunized with birthdose of Hepatitis B.Denominator: Total no.	Perce ntage	-	87.65	90%	95%	97%	HMIS
29.	Outpu	of Dropout % ofchildr en	ofinstitutionaldelive ries  Percentage dropout ofchildrenfromPen tavalent1toPentava lent 3  Numerator: Total no. ofchildren immunized withPentavalent 1 – Total no. ofchildren immunized withPentavalent 3Denominator: Total no. ofchildren immunized withPentavalent 3Denominator: Total no. ofchildren immunized withPentavalent withPentavalent 1	Perce	Nil	8.88%	2%	1%	1%	HMIS
30.	Output		Percentage dropout ofchildrenfromPen tavalent3toMR 1 Numerator: Total no. ofchildren immunized withPentavalent 3 – Total no. ofchildren immunized withMcV/MR 1	Perce ntage	Nil	21.69	Nil	Nil	Nil	HMIS



SI No.	Indicat or Type	Indicator Statement	Indicator	Unit	Target 2021-	Progr ess 2021- 22	Likely achieve ment 2021-22	2022-23	Target 2023-	Source of Data
	1	* 4	Denominator: Total no. ofchildren immunized withPentavalent3	- 1						
SI No.	Indicat o r Type	Indicator Statement	Indicator	Unit	Target 2021-	Progr ess 2021- 22	Likely achieve ment 2021-22	Target 2022-23	Target 2023-	Source of Data
31.	Output	Dropout % ofchildr en	Percentage dropout ofchildrenfrom MR 2  Numerator: Total no. ofchildrenimmunize dwithMR1 – Total no. of childrenimmunized with MR 2  Denominator: Total no. ofchildrenimmunize dwithMR1	Perc entag e	Nil	-5%	Nil	Nil	Nil	HMIS
32.	- 1	TT10covera ge	Percentageof childrenrecei vingTd10  Numerator:Tot alno.ofchildren ≥ 10 years oldimmunizedw ith Td10  Denominator: Total no. ofchildren≥ 10 yearsofage	Perc entag e	90%	54.69	80%	90%	95%	HMIS



SI No		Indicator Statement	Indicator	Unit	Target 2021-	2021-	achieve	Target 2022-23	Target 2023-	Source of Data
33.	Output	Early Initiationo fBreastfee ding	Percentage of newbornbreastfeed within one-hourbirthagainsttot allivebirth.  Numerator:Numbe rofnewborn breastfeed within onehourof birth.  Denominator: Total livebirths registered in that period.	Perc entag e	100%	73%	75%	85%	90%	HMIS report
34.	Output		Bed Occupancy Rate atNutrition RehabilitationC entres(NRCs)  Numerator- Total inpatientdays of care from 1st April2022 to 31st March 2023/1stApril 2023 to 31st March2024  Denominator- Totalavailable bed days during thesamereporting period	Perc entag	NA	NA	NA	NA	NA	Stat erep orts



	Indica	Statement	Indicator	Unit	Target 2021-	Progress 2021-22	Likely achieve ment 2021-22	2022-23	Target 2023-	Source of Data
1			Successful Discharge Rateat Nutrition RehabilitationCen tres(NRCs)							
35		Successfu lDischarg e Rateat Nutrition Rehabilit ationCent re(NRC)	Numerator- Total number ofunder-five childrendischarged with satisfactoryweight gain for 3 consecutivedays(>5 gm/kg/day) from 1st April 2022 to 31stMarch2023/1st April2023to31stMar ch 2024  Denominator-Total No. ofunder-five children	Perc entag e	NA	NA	NA	NA	NA	Stat erep orts
			exitedfrom the NRC during thesamereporting period.		1					
36.	Output	-	Percentage of pregnantwomen given 180 IFAtablets as against pregnantwomenr egisteredforANC Numerator: Number ofpregnantwomen	Perc entag e	86%	79%	85%	88%	***************************************	HMIS report
			givenIFAtablets.  Denominator:Nu mber ofpregnant women registeredforANC inthat period.							



SI No		t Indicator Statement	Indicator	Unit .	Target 2021-	Progress 2021-22	Likely achieve ment 2021-22	2022-23	Target 2023-	Source of Data
37.	Output	IFAcoverage Anaemia MuktBha rat	Percentage of children 6-59months given 8-10 doses of IFA syrup everymonth  Numerator: Total number of children 6-59months given 8-10 doses of IFA syrup in the reporting month  Denominator: Number of children 6-59months covered under the programme (Target Beneficiaries)	Perc entag e	100%	32.51	40%	100%	100%	HMIS report
38.	Output	IFAcoverage Anaemia MuktBha rat	Percentage of children 5-9years given 4-5 IFA tabletseverymont h  Numerator: Total number of children 5-9 years given 4-5 IFA tablets in the reportingmonth  Denominator: Num berof children 5-9 years covered under the programme (Target Ben eficiaries)	Perc entag e	100%	24.69	30%	100%	100%	HMIS report
				ehensive Care(CA	eAbortio (C)					
39.	Outco me	Ind uce dA bor tio	Numerator: Total Number ofInduced Abortion ReportedDenominat or: Total numberofregistered pregnancy	NA	NA	0.13	NA	NA	11	RCH Portal

	SI No.	Indicat o r Type	Indicator Statement	Indicator	Unit	Target 2021-	Progr ess 2021- 22	achieve	Target 2022-23	Target 2023-	Source of Data
	40.	Outco	Sponta neousA bortio n	Numerator: Total Number ofSpontaneous AbortionReported Denominator: Total numberofregistered pregnancy	NA	NA	0.63	NA	NA	NA	RCH Portal
4	1.	Output		Public health facilities CHCand above equipped withDrugs(MMA Combi pack/Mifepristone & Misoprostol),Equip ment(MVA/EVA)an d Trained Provider (MTPTrained MO/OBGYN) forproviding CAC servicesagainst the total number ofCHCs & above facilities asper Rural Health Statistics,2020	Percen	5	45%	45%	55%		CAC Quart erlyan dAnnu alRep ort

SI No.	Indicat o r Type	Indicator Statement	Indicator	Unit	Target 2021-22		achieve	2022-23	Target 2023-	Source of Data
42.	Output	MOtraining	Medical Officer trained inCAC against the RoPapproval  Numerator: Total no. ofMedical Officer trained.Denominato r:TargetofMOstobetr ainedasperRoP.	Perc entag e	100%	-	-	Expecte dAchiev ement: 100%	100%	CAC Quart erlyan dAnnu alRep ort
70			Fam	ilyPlan	ning(FP)					
43.	Output	PPIUCD acceptance	PercentageofP PIUCDaccepta nce amongInstitut ionaldeliverie s  Numerator: Number ofPPIUCDs inserted in publicfacilities Denominator: Number ofinstitutional deliveries inpublicfacilities	Percen tage	1%	10%	1%	2%	2%	HMIS
14.		Injectable MPAusers	LitgibleCouples	Percen tage	720 doses	0.05%	0.1%	0.5%	0.570	HM IS/ RC H registe



	Indica	Statement	Indicator	Unit	Target 2021-	Progress 2021-22	achieve	2022-23	Target 2023-	Source of Data
45	. Outpu	Operation t alizationof FPLMIS	Percentage of Facilities indenti ngandissuing the stockin FPLMIS out of total facilities (excluding SC)  Numerator: Number of Facilities indenting and issuing the stock in FPLMIS (excluding SC) Denominator: Total Number of facilities registered in FPLMIS (excluding SC)	Perc entag e	100%	100%	100%	100%	100%	FPLMI S
				centHea						
				ishorSwa akram(R						
46.	Output	HC	AveragemonthlyCli entload at AFHC/month in PEDistricts at DH/SDH /CHClevel to increase by 25% in2022-23and50%in2023-24 from the baseline data of2021-22.	Nos	NA	42	50	70		(HMIS / Quart erlyA FHC Report )
			Numerator: Total Clientsregistered atAFHC.Denomin ator: Number ofAFHCs divided by no. ofmonths (per AFHC							

SI		Statement	Indicator	Unit	Target 2021-	Progress 2021-22	Likely achieve ment 2021-22	Target 2022-23		Source of Data
47.	Outpu	t WIFScovera ge	Percentage coverage of in- school beneficiaries underWIFS Programme everymonth.  Numerator- Total no inSchoolbeneficiari escoveredDenomin ator- Targetedbeneficiari es(InSchool)	Perc entag e	100%	48%	55%	100%	100%	HMIS
48.	Output	WIFScovera ge	Percentage coverage of out-of- school (girls) underWIFS Programme everymonth.  Numerator- Total no out ofSchoolbeneficiari escoveredDenomin ator- Targetedbeneficiari	Perc entag e	100%	20%	30%	100%	100%	HMIS
49.	Output	Selectionof PeerEducat or	es(outofSchool)  Percentage of PeerEducatorsel ectedagainstthet arget  Numerator- Total no PEsselected Denominator- Total No. ofPEsto be selected	Perc entag e	100%	0%	0%	100%	100%	State PER epor ts
50.		Trainingof PeerEduca tor	Percentage of PeerEducator trained againstthePeerEd ucatorselected.  Numerator- Total no PEsTrained	Perc entag e	100%	0%	0%	100%	100%	State PER epor ts



SI No.	Indicate or Type	Indicator Statement	Indicator	Unit	Target 2021-	Progr ess 2021- 22	Likely achieve ment 2021-22	Target 2022-23	Target 2023-	Source of Data
\$	9		Denominator- Total No. ofPEsselected							
				,						
51.	Output	Menstrual Hygiene Schemecov erage	Percentage coverage ofAdolescentGirlsa gainstthetarget under MenstrualHygiene SchemeNumerator- Total no, ofadolescent girls receivingsanitary napkins under MHSDenominator- Total No.of adolescentgirlstobeco vered	Perc entag e	100%	0%	0%	100%	100%	HMIS
52.			Percentage of the selectedDistricts implementingSchoo I Health & WellnessProgramm eagainsttheRoPapp roval.  Numerator- Total no districtsimplementin g SHP.Denominator-Total No. ofDistrictselected for SHP	Perc entag e	100%	100%	100%	100%	100%	SHWP Report



SI No		t Indicator Statement	Indicator	Unit	Targe 2021-22	t ss	achiev - ment 2021-2	e Target 2022-23		Source of Data
53.	Outpu	SchoolHea lth&Welln essProgra mmeimpl ementatio n	Percentage of Health &Wellness Ambassadorstrai nedtotransactwe eklyactivities in schools in theselectdistt  Numerator- Total no ofHealth &WellnessAmbassad ors(HWAs)trainedDe nominator- Total no ofHWAsto betrained	Percen tage	100%	82%	82%	100%	100%	SHWP Report
			Nata	Concept lDiagnos	ticTechn					
54.	Outpu		Percentage of DistrictAdvisoryCo mmittee(DAC)meet ings conducted asmandated by Law (6meetings/Year/ District)  Numerator- Number ofDistrictAdvisoryC ommittee(DAC) meetings conductedDenomin ator-Number ofmeeting prescribed under thelaw.(6 meetings /Year/District).	Percen tage	SSB- 100% SAA- 100% DAA/DA C-100%	AC 58.3%		100%	100%	Minute s of the meetin g
SI .	Indicat o r Type	Indicator Statement	Indicator	Unit	Target 2021-	2021-	Likely achieve ment 2021-22	Target 2022-23		Source of Data
			cyDi	nalIodine sorders( ramme(N	Control				<b>.</b>	



S		Statement	Indicator	Unit	Target 2021-22	ss	e Likely achieve ment 2021-22	2022-23		Source of Data
55		Monitori ng ofsalt & urine intheSta te/UT	Percentage of salt samplestested using Salt TestingKits (Qualitative testing) byASHAinidentified District.  Numerator: Total Number ofsample tested by ASHA.Denominator: Number ofASHA *50 samples*12months.	Perce ntage	1200	78 (Due to 2nd& 3rd wave of 2021)	400	1200	1200	Stat eRe por t
56.	Output	Monitori ng ofsalt & urine intheSta te/UT	Percentageof salt samplestested (Quantitative) in Lab(Volumetric method) forestimationofiodi necontent.  Numerator: Number of saltsamplestested(Quantitative) in Lab (Volumetric method). Denominator: Number of District*25 samples*12months.	Perce	600 Sampl es	NIL (As lab techni cian post was vacant )	600 Sampl es	600 Samples	600 Sampl es	Stat eRe por t
57.	Output	ng ofsalt & urine intheSta te/UT	Percentage of urine samplestested for Urinary iodineestimation. Numerator:	Percenta ge of urine samplest ested for Urinary odineest mation	600 samples	NIL	NIL (Testing facility will be establis hed in 2022- 23)	600 Samples S		Sta teR ep ort



SI No.	Indica or Type	Statemen	Percentage of district IDDsurveys/ resurveysconduc ted in State/UTagainst RoP approval.	Percent age		Targe 2021 22  1 Distri IDD Surve	et ss 202 222	2021-2	e Target 2022-23		Source of Data Sta teR ep ort
	Outpu t	Implementationof RCHapplication - RegistrationCoverage ofPregnantWomenandChild(0-1Year)	Percentage of RegistrationCove rage of PregnantWomen and Child on pro- ratabasis  Numerator:Total No. ofRegisteredPWand ChildonRCHPortal	perce ntage	(a)1 Regition erage Pregitwor ando drer onprinatal s[Fo tes] (b)1 % Regi	00% istra cov geof gnan men Chil Pobasi rSta	d Pregnan Women legistra ion= 65%	ANTA	dren onpro-ratabas is[ForS tates] (b)100% Registr	(a)100 % Regist ration covera geofPr egnant wome nandC hildre nonpr orataba sis[For States] (b)100 %	
			<b>Denominator:</b> Estimated PWandChildon pro- ratabasis.		rage regn wom and dren onpr ratals s [Fort andN tates	ofP R ant len Chil o-pasi	egistrat ion= 54%		ofPreg nantwo men andChil dren onpro- ratabas is [ForUT sandNE	Regist ration covera geofPr egnant wome nandC hildre nonpr o-rataba sis	



SI No.	Indicat o r Type	Indicator Statement	Indicator	Unit	Targe 2021-22	achieve	2022-23		Source of Data
	3		1 . 1	- 3			:	Ts andNE States]	
60	Output	Implement ationof RCHapplic ation - ServiceDeli veryCovera ge ofPW	Percentage of ServiceDeliveryCove rageofentitledPregn ant Womenfor ANCservices.  Numerator: Total No. of PWreceived All ANC services(ANC1 + ANC2 + ANC3 +ANC4+TT1/TT2+18 0IFA tablet)  Denominator: Total PWexpectedforServic ebasedonreportingpe riod	Perc enta ge	(a)>80 % AllA NCse rvice sofPr egna ntwo men[ ForSt ates] (b)>70 % All ANCser vices ofPregn antwo men [ForUT sandNE States]		ANCser vices of Pregnantwomen For UT sand N EStates	(a) >80% A II A N C servi cesof Preg nant wom en[F orSt ates] (b)>70 % All ANCse rvices of Preg nantwomen[For JTsan d NEStat es]	



SI No.	Indicat or Type	Indicator Statement	Indicator	Unit		Targ 2021 22	et	Prog ss 2022 22	1- 	Likely ichieve ment 021-22	2022-23		Source of Data
61	Output	Implemen tationof RCHappli cation- ServiceDeli veryCover ageofChild	PercentageofServ iceDeliveryCover ageofentitledChil d[0-1Year]for Imm unizationservices  Numerator:Total No. ofChildreceivedAllI mmunizationservi ces(asper National ImmunizationSche dule)  Denominator:Tot alchildexpected for Servicebasedonrep orting period	Perce	Nil		28	3%	50%		(a)>80% AllIm muniz ations ervice sofChi ld(0- 1Year )[ForS tates] (b)>70 % AllIm muniz ations ervice sof	(a) >80% AllI mm uniz atio nser vice sofC hild( 0-1Ye ar)[ ForS tate s] (b) >70% AllI mmu nizat ions ervic esof Child [For UTsa ndN E States]	



SI No.	Indicat or Type	Indicator Statement	Indicator	Unit	Target 2021-		achieve		Target 2023-24	
62	Output	Implemen tationof RCHapplic ation- TotalDeliv eriesRepo rted	Percentageoftotal Deliveryreported ofPregnantWome n.  Numerator:Total No. ofDeliveryreported  Denominator:Tota IPWexpected for Delivery basedonreporting period	Percen tage	90%	70%	85%	(a)>90 % Deli very rep orte d[F orSt ates ] (b)>85 % Deliv eryre porte d[For UTsa nd N	(a) >90% Deliv eryr epor ted[ ForS tates ] (b) >85% Deliv eryr epor ted[ ForU Tsan dNE States]	
63	ut	Implemen tationofA NMOL application	Healthprovider(A NM)using  ANMOLapplicatio nforenteringData  Numerator:TotalN o.ofUsers(ANM)doi ngdataentry.  Denominator:Tot alno.activeusers(A NMs)registeredinR CHPortal.	Percen1	00% 7		(b)>7 5% Health brovid er(AN MandA SHA) arereg istere dwith valida edMo	lthp rovi	(a) >90% Healt hpro vider (AN M) ared oing datae ntryo nAN MO L [ ForSt ates] (b) >75% Healt hpro vider (AN M and ASH A)	



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	ferrer i i	14			ber	

## **NDCPFlexiPool**

	Indica						Likely		Target	
SI. No	tor Type	Indicator Statement	Indicator	Unit		Progress 2021-22	achievemen t 2021-22	Target 2022-	2023-	Source of data
Inte	gratedI	DiseaseSurv	eillanceProgra	amme(ID:	SP)					
64	Outp ut	WeeklyRe porting– Sform	% of Reporting UnitsRepo rtedinS form	Perce nta ge	51%	64%	5 1 %	61%	71%	IDSPIH IP
65	Outp ut	WeeklyRe porting- Pform	% of Reporting UnitsRepo rtedinP form	Perce nta ge	56%	66%	5 6 %	66%	75%	IDSPIH IP
66	Outp ut	WeeklyRe porting- Lform	% of Reporting UnitsRepo rtedinLfor m	Perce nta ge	52%	67%	5 2 %	62%	72%	IDSPIH IP
67		Weekly Reporti ng-Lab Access ofOutbr eaks	Lab Access ofOutbreak s reportedun der IDSP excludingC hickenpox, FoodPoison ing, Mushroom Poisoning	Perce nta ge	76%	85%	7 6 %	80%	83%	IDSPIH IP



SI. No	Indica tor Type	Indicator Statement		Unit			Likely achievemen t 2021-22	Target 2022-23	Target 2023-24	Source of data
Nati	onalTu	berculosis	EliminationPro	gramme(	NTEP)					
68	Outp ut	Total TB casesno tified (Both publica ndpriva tesector s	% of cases notifiedagain st targetNumer ator: No. of TBcases notified (public +private) Denominat or:Targetap provedby GoI	Perce ntage	3200	2021	63.2%	100% (2400)	100% (2200)	Nikshay Report
69	ut	Expansi on of rapidmo leculardi agnostic sforTB	% of blocks withrap idmolec ulardiag nostics	Perce ntage	12	08	66%	66.1%	100% (12)	
70			% Improvem ent inAnnual TB ScoreNum erator: (StateAnnu al TB Score inCurrent Yr- StateAnnua l TB Score inlast yr)Denomi nator: StateAnnua l TB Score	Perce ntage	85	-	77.49	85	90	Nikshay Reports



Sl. No		Indicator Statement	Indicator	Unit		Progress 2021-22	Likely achievement t 2021-22	Target 2022-	Target 2023-24	
71	Outp	Niks hayP osha nYoj ana	% Of eligible patientsrec eiving at least firstinstalm ent ofDBT	Percen tage						
			r: No. ofeligible patientsre ceivingatle astfirstinst almentof DBT		100%	60%	60%	100%	100%	Nikshay
			<b>Denomina</b> <b>tor:</b> No. ofeligiblep atients		34					- 2
	ut	Districtsw ithTBfreeS	No. of districts toachieveTB freeStatus	No.	-	-	-	Silver (State)	Gold (State)	MIS NTEP division
72								(State)		MOHFW



No	Indic a tor Type	Indicator Statement		Unit	Target 2021-22	Progre ss 2021- 22	Likely achievem ent 2021- 22		Target 2023- 24	Source of data
73	Out put	Availability ofRabiesVa ccine and RabiesImm unoglobuli ns	ARV available at theHealth Facilities as perEssenti alMedicalL ist  Numerato r- Total No.of Health Facility tillPHCleve lhavingstoc ksofARV  Source - DVDMS Portal/ State Monthl yreport  Denominat or- Total No.of Health Facilities tillPHClevel (Source-Rural Health Statistic-MoHFW)	Perc e n ta g e	Availabil it y of Stock as per EML at 80% Health Faciliti estill PHC Level	100%	100%	Availab ility of Stock as per EML at 80% health Faciliti estill PHC Level	Availab ility of Stock as per EML at 80% Health Facilitie s till PHC Level	DVDMS Portal/State Monthly report  Rural Health Statistic- MoHFW)



SI No	Indicator Statement		Unit	Target 2021-22	Progress 2021-	Likely sachieveme nt 2021- 22	Target 2022-23	Target 2023-24	Source of data
74		RabiesImm unoglobulin savailableat theHealthFa cilities as perEssentia IMedicalList  Numerator- Total No.of Health Facility tillCHClevelha vingstocksofA RS  Denominator - Total No.of Health Facilities tillCHC level (Source-Rural Health Statistic- MoHFW)	Percen tag e 100%	Availabil it y of Stock as per EML at <b>70%</b> Health Faciliti estill CHC Level	100%	100%	Availabi lity of Stock as per EML at 70% health Facilitie still CHC Level	Availabi lity of Stock as per EML at 70% Health Facilitie s till CHC Level	DVDMS Portal/ State Monthly report  Rura l Healt h Stati stic- MoH FW
<b>Nati</b> 75	Manage I	Percentage of Hepatitis C	Percen tage	VHCP)					NVHCD
	tisC- underth eprogra m r	enefited enumber vho eceivedtrea mentagainst arget.		90	73.33	90	90	90	NVHCP MIS Portal



Sl.	Indica tor Type	Indicator Statement	Indicator	Unit	Target 2021-22	Progres s 2021- 22	Likely achievemen t 2021-22	Target 2022-	Target 2023-24	Source of data
76	Output	Managemen t ofHepatitis B- underthepr ogram	Percentage of HepatitisB Patients benefited i.enumber who receivedtrea tmentagains ttarget	Perce ntage	90	81.25	90	90	90	NVHCP MIS Portal
77	Outp ut	Pregnant womenscre enedforhep atitisB	Percentage of pregnantwo men screened forhepatitis B (HBsAg)again st thetarget(Ins titutionalDeli veries)	Perce ntage	100	100	100	100	100	RCH Portal
78	ut	wbornsofH BsAg positivepre gnantwome n	Percentage ofnewbornsad ministeredHB IG among new bornsdelivere d toHBsAgpositi vepregnantwo menathealth carefacility	Perce ntage	100	100	100	100	100 l	RCH Portal



Sl. No Nati	Indica tor Type	Indicator Statement	Indicator	Unit	2021-22	Progress 2021-22	Likely achievemen t 2021-22	Target 2022-23	Target 2023-24	Source of data
79	Outp ut	Percentage ofGradeII Disability (G2D)amo ngnewcase s	No of Districts withGrade II Disability(G 2D)percent agelessthan 2% among newcases	2	2	2	2	2	2	Monthly / Quarterl y Reports
80	Outp ut	Certificati on ofDistricts asLeprosy Free	NoofDistricts certifiedasLe prosyFree	2	2	2	0	2	2	Monthly / Quarterl y Reports
81	ut	Clearanceof backlogof Reconstruct iveSurgerie s(RCS)	Numbe r of RCScon ducted against backlog of RCS	2	2	2	2	2		Monthly / Quarterl y Reports



Sl.		Indicator Statemen		Unit		Progress 2021-22	Likely achievemen t 2021-22	Target 2022-23	Target 2023- 24	Source of data
Nat	ionalVe	ctorBorne	DiseaseControl	programi	me(NVBDC	CP)				
82		Malaria	No. of distr icts with API< 1	Numbe rs	2	2	2	2	2	Report from peripher al health centres. Complie d at NVBDCP, DHS.
83	Outp ut	Reductio ninAPIat Districtle vel	Annual bloodExa mination Rate	Perce nta ge	>10%	10.93%	10.93%	>10%	>10 %	Report from peripher al health centres. Complie d at NVBDCP , DHS.
84			%IRSpopul ationcoveragei	IRound	>85%		ucted in the s public refusal		to high	
85		e e	neachround	IIRoun d	>85%	at .				
86			No. of DistrictsCe rtifiedasMa lariaFree	Numbe r	2	Nil	Nil	2	2	Report from peripher al health centres. Complie d at NVBDCP , DHS.
87		Lympha ticFilari asis	The proportion ofdistricts/IUs withcoverage> 65%forDA	Perce nta ge	DA district s-		NA			



	Sl. No		Indicator Statemen t		Unit	Target 2021-22		Likely achievemen t 2021-22	Target 2022-	Targe 2023- 24	
: 17.	88	Outp ut		and 85% for IDA of thetotal population (admincoverage/ independentasse ssment)		ľDA districts -	·	NA			
	89	Outp ut		Morbiditymanag ementand disease prevention(MMD P) services forhydrocele	Numb er	Lymphe dema casesdis tributed MMDP kits-	87	87	87	87	Report from peripher al health centres. Complie d at NVBDCP , DHS.
	90	Outp ut		andLymphoedem acases	Numb er	Hydroc eleoper ated-	Nil	Nil	Nil	Nil	Report from peripher al health centres. Complie d at NVBDCP , DHS.
	91	Outp ut		Cumulative number ofendemicdistrict swhichachieved mf rate <1%verifiedby TAS1	Numb er		Alre	eady conducte	d in 2013	3	Report from peripher al health centres. Complie d at NVBDCP , DHS.
Ç	92	Outp ut		Cumulative number ofdistricts to achieveDisease Free Status- LFasperTAS3Clea rance	Numb er		Alre	ady conducte	d in 2019	)	Report from peripher al health centres. Complie d at NVBDCP , DHS.



SI.	Indi a to	r Indicato		Unit			Likely achieveme nt 2021-22		Target 2023- 24	Source of data
93	Outr ut	Dengu e &Chikun gunya	aseFatal	Perce nt ag e	CFR<1 %	0%	0%	CFR <1%	CFR <1%	
94	a ·		Number ofblocksach ievedKala- azarelimina tion i.e. <1 caseper100 00populatio natblocklev el	Numb er			e e		,	
95	Outp	Kala-az	Numbe r of blockss ustaine d Kala- azareli minatio n	Numb er		State of C				
96			%IRSpo pulationco	Perce ntage	IRoun d >85 %		oa has nil Ka rector not pre		ases as	
97		*	verageinea chround	Perce ntage	IIRoun d >85%					
98		*	%Completet reatmentof KA Cases andHIV/VL	Perce nt ag e	100%					
99			%Complet etreat mentof PKDL Cases	Perce nt ag e	100%	= "				



## **NCDFlexiPool**

Sl. No	Indicat or Type	Indicator Statement	Indicator	Unit		Progress 2021-22	Likely achieveme n t 2021-22	Target 2022-	Target 2023-	Source of Data
			National	TobaccoC	ontrolPro	ogramme	(NTC			
100	Output	Increase in availabilit yof Tobacco Cessation Servicesa vailable	No. of districts withTob acco Cessatio nCenter s	Numb er	2	2	2	2	2	DTCC Data
101	Outco me	Impro vedacc essfor Tobacc o Cessati onServ ices	No.ofPeo pleavaile dtobacco cessation servicesin 2022-24	Numb er	-	2044	3600	3960	4356	DTCC Report
			National	MentalHea	lthProgr	amme(NI	МНР			
			Percentage		)					
102		ofmental	of districtscove redDistrictM entalHealth Unitsoperati onalized.	Percent age	100%	100%	100%	100%	100%	DMHP Report
103	Output	Improve d coverage ofmental	Percentage increaseNu mber of personscate redthrough DistrictMH U	Numb er	12,000	9,100	12,000	10%	15%	DMHP Report



Sl. No	Indicat For Type	Indicator Statement		Unit	Target 2021-	Progress 2021-22	Likely achieveme n t 2021-22	Target 2022-23	Target 2023-	Source of Data
			Nationa	alProgram rly	meforHe		ofElde			
104	Output	Provisio n of primary andseco ndaryGe riatriche alth care services atDistric t Hospital andbelo w	Numerator: No. of DHwith Geriatric Unit (atleast10 beds)  Denomina tor : No. oftotalDH inthe state	Numb er	2/2	2/2	2/2	2/2	2/2	NPHCE Report
105	output	Provisio n of primary andseco ndaryGe riatriche alth care services atDistric t Hospital andbelo w	Numerator: No.ofDHwith physiother apyunitfore Iderly Denomina tor:No.oft otalDH inthe state	Numb er	2/2	2/2	2/2	2/2	2/2	NPHCE Report



Sl. No		Indicator Statement	Indicator	Unit		Progress 2021-22	Likely achieveme n t 2021-22	Target 2022-	Target 2023-	Source of Data
106	Outpu t	Provision of primaryan dsecondary Geriatriche alth care services atDistrict Hospital andbelow.	Numerato r: No. ofCHCs withphysi otherapyu nit  Denominator : No oftotalCHCsin thestate	Numb er	4/6	4/6	4/6	5/6	6/6	NPHCE Report
			ogrammeforPreve llardiseasesandSt			Cancer,di	abetes,			
107	Outpu t	NCDApp	%registratio ndoneinthe NCD App against30+po pulationtarge t	Percen tage	80%	27%	70%	90%	90%	NCD Portal
				2727 120						
	Outpu t	Settin g up of NCDCl inics at Distric tHospi tals	PercentageofD HswithNCDClin ics	Numb er	2/2	2/2	2/2	2/2	2/2	NCD Portal



SI. No	Indicat or Type		Indicatore	- Unit	Target 2021-	Progress 2021-22	Likely achieveme n t 2021-22	Target 2022-	Target 2023-	Source of Data
110	Output	Eyecareser vicesunder NPCB and VI providedat primary,se condaryat District level andbelowl evel	Percentage achievemen tof Cataract operationsa gainsttarget s	Percen tage	12000	11654	2600	12000	12000	Monthly Reports NPCBVI
111	Output	Eyecareser vicesunder NPCB and VI providedat primary,se condaryat District level andbelowl evel	Percentage achievement ofCollection ofdonatedey es for cornealTran splantation againsttarge ts	Percen tage	20	0	0	20	20	Monthly Reports NPCBVI
112	Output	Eyecareser vicesunder NPCB and VI providedat District level andbelowD istrictlevel	No.ofFreeSpe ctaclestoscho ol children sufferingfro mRefractivee rrors	Numb er	1000	19	100	1000	1000	Monthly Reports NPCBVI
112	me	Cataractb acklogFr eeCertific ation	No.ofDistrict sCertifiedasC ataractbackl og Free	Numb er	-	-7	-	01	01	Monthly Reports NPCBVI
			PradhanM	AantriNati (PM	onalDialy NDP)	ysisProgr	am			
114	i	Dialysisfac ilitiesinall districts	No. of districts withDialy sisfacility underPM	Numb er	2/2	2/2	2/2	2/2	2/2	PMNDP Report



			NDP	v		=	9			
115	Output	Numbe rofSessi onshel din the month	Estimate dnumber ofdialysi s session (inLakhs	Numb er	0.95	0.46	0.95	1.19	1.19	PMNDP Report
SI. No	Indicat or Type	Indicator Statement	Indicator	Unit	Target 2021-	Progres s 2021- 22	Likely achievem en t 2021-22	Target 2022-23		Source of Data
116	Output	Peritoneal dialysisservic esunderPMN DP	Estimat ednumb erofpati ents planned forperit oneal dialysiss ervices	Numb er	20	4	20	20	20	Monthly Report
			NationalPr nt	ogramme rolofFluor			dCo			
117	me	Improvement insampletesti ng in fluorideaffect eddistricts	Percentageof watersample stestedforFl uoridelevela gainstnumbe rofsamplesas pernorms.	Percen tage	NA	NA	NA	5% increa sefro mpre vious year		State Repo rts
112	Outco me	Medical managemen tofdiagnose dfluorosisca ses includingsu pplementati on,surgery, andrehabilit	Percentage of patientsprov ided medicalman agement todiagnosedf luorosiscase soutofthetot aldiagnosedc ases.	Percen tage	NA	NA	NA	90% oftota Idiagn osedc ases		State Repo rts
			NationalPro ro	ogrammef lofDeafne			ont			



Sl. No	Indica or Type	t Indicator Statement	Indicator	- Unit	Target 2021-	Progres s 2021- 22	Likely achieveme n t 2021-22	Target 2022-	Target 2023-	Source of Data
119	Outpu t	HearingAid	TotalNo.ofHe aringAidfitte d	Num ber	-	13	-	13	13	NPPCD Report
120	Outpu t	AudiometryFac ilities	No.ofDistri ctshavinga udiometryf acilities	Num ber	2	2	2	2	2	NPPCD Report
			NationalPr	ogrammef PC		tiveCare	(NP			
121	Outpu	Palliativecare servicesunde r NPPCprogra mme	Total no. of DistrictHo spitals providingp alliativecar eservices	Num ber	Targ etto befix edinc onsul tatio nwit hStat e	2	2	2	2	NPPC Report
			NationalO	ralHealthP	rogram	me(NOH	P)			
122	Outpu t	ningOral HealthSer vices	uptoCHClev elagainst total PHFs	10/10 Total facilities 33 up to level of PHC/ CHC/ UHC/RMD	-	100%	-	-		HMIS (Den talO PD)



## Health Systems Strengthening (HSS)-Rural and Urban

Sl. No	Indica tor Type	Indicator Stateme nt	Indicator	Unit		Progress 2021-22	Likely achievem ent 2021-22		Target 2023-24	Source
			Natio		banHealth NUHM)	ıMission				
12 3	Outp ut	Impro vingac cess toheal thcare in urbanI ndia	Number of operational urbanhealth facilities (UPHCs andUCHCs)increased .  (a) OperationalUCHC:	Num ber	All(100 %)	(a) 0 (b) 4	(a) 0 (b) 4	All( 100 %)	All(10 0%)	MIS- QPR/ Approv edState RoPs
12 4	Outp ut	Impro vingac cess toheal thcare in urbanI ndia	No.ofUPHCsconvert edtoHealth wellness centres(HWCs)incr eased.	Num ber	All(100 %)	4	4	All( 100 %)	All(10 0%)	AB- HWC Portal /Appr ovedS tateRo Ps
	ut	vingac cess toheal thcare	Increased number of UCHCsand UPHC- HWCs offeringspecialistserv ices.	Num ber	Baseli neyear Datato bereco rdedin numbe rsason 31stMa rch,20 22	Nil		5% incre asefr om theb aseli ne	5% incr eas efro m the pre vio usF	AB- HWC Portal /Appr oved StateR oPs



Sl.		Stateme		Unit		Progress 2021-22	Likely achievem ent 2021-22		Target 2023-24	Source
12 6	Outp ut	Impro vingac cess toheal thcare in urbanI ndia	Annual utilisation of urbanhealth facilities (UPHC-HWCs)increasedwitha tleast50%visits madebywomen.	Perc enta ge	Bas elin eye ar. Data to bereco rdedin numbe rsason 31stMa rch,20 22	67.30%	80%	10% incre asefr om theb aseli ne	10% incr ease fro mpr evio usF	AB- HWC Portal
12	Outp ut	vingac cess	Annual number of NCDscreenings at Urban UPHC- HWCincreased.	Perc enta ge	Bas elin eye ar. Data to bereco rdedin numbe rsason 31stMa rch,20 22	73%	100%	10% incre asefr om theb aseli ne	10% incr eas efro m the pre vio usF Y	AB- HWC Portal
- 1	ut	ingqua lityhe althca reserv ices	Jrban pregnant vomenaccessinga ntenatalcareatUP IC-HWCand JCHC ncreased.	Perc enta ge	Base line year . Data to bereco rdedin numbe rsason 31stMa rch,20 22	80%	100%	50%	60%	HMIS



SI. No	Indica tor Type	Stateme	Indicator	Unit		Progress 2021-22	Likely sachievem ent 2021-22	But the Ballion	Target 3 2023-24	
12 9	Outp ut	ingqua lityhe	NumberofUrbanHeal thandNutrition Day (UHND) heldagainstplanned	Perc enta ge	As perSta te ROPa pprov alund er FY202 1-22	100%	123%	2% incr ease fro m theb aseli ne	3% incr ease from thep revi ousF Y	MI S /H MI S portal/ Approv ed StateRo Ps
13 0	Output	ingqua lityhe althca	No.ofpatientstrea tedfor(a)diabetes (b)hypertension atUPHC-HWC		bereco		(b)100%	m theb	5% incr ease from thep revi ousF Y	AB-HWC Portal



SI		aIndicator Stateme		Unit	Target 2021-22	Progres s 2021- 22	Likely achievem ent 2021-22	Target 2022-23	Target 2023-24	Source
				D	VDMS					
13	Outp ut	Implem entatio n of DVD MS in PHCs	Percentage of Health Facilitiesupto PHCs implementing theDVDMS	Perc enta ge	100%	-	100%	100%	100%	
			Q	ualityAs	ssurance(	QA)				
13 2	Outp ut		Cumulative Number of NQAScertifiedpublichea lthfacilities	Num ber	03	03	03	20	36	NHSRC Quality Certific ation Unit
13 3	Outp ut	Publi cheal thfaci lities with Kaya kalps coreg reate rthan 70%	Number of public healthfacilitieswithKa yakalpscoremore than 70% (on externalassessment)	Num ber	18	18	18	20	22	Sour ce:N HSR C Quality Certific ation Unit
			FreeDia	gnostic	ServiceIn	itiative				
13 4	ut	FreeDi agnosti cs Service sMay bekept	NewHubLabs	Num ber	2	2	2	-	-	
			Bloo	dServic	es&Disor	ders			1 = 1 h	



Sl.		Indicator Stateme		Unit	Target 2021-22	PARTE BUILDING	Likely achievem ent 2021-22	Target 2022-	Target 2023-24	Source
13 5	Outp	Numbe rofDist rictHos pitalsh avingB loodBa nks	Percentage (%) of DistrictHospitalsha vingfunctionalBlood Bank	Perc enta ge	-	2	-		-	ERaktko sh ,Blood Cell
13 6	Outp	NoofIC HHcent res inthe state athighp revalen cedistri cts	Number of integrated centres forhemoglobinopathies &haemophiliainthedistrictagainstno. of identified districts withhigh prevalence ofhemoglobinopathies&haemophilia	Numb er	-	2	-	-	-	Bloo dCel l
			Compre		ePrimary CPHC)	Healthc				
13 7		Numbe r	Numerator:Totaloperati onalAB-HWCs in the stateDenominator:Totalt argetofAB-HWCs to	Perc enta ge	100%	100%	100%	100%	100%	AB HWC Porta I
100001	Outp ut	HWCs satisfyi	Numerator: No. of AB- HWCsprovidingall12exp andedrangeof services. Denominator: Total functionalAB-HWCs	Perc enta ge	NA	100%	100%	100%	100%	AB HWC Porta I

SI. No		Indicator Stateme		Unit	Target 2021-22		Likely achievem ent 2021-22	Target 2022-	Target 2023-24	Source
13 9	Outp	Footfal l atAB- HWCs (Receivi ngservi cesforP reventi ve,pro motive, curativ e,rehabi litative andpalli ativecar e)	A. Numerator:No.ofA B-HWCs in rural areasreporting  B. Numerator:No.ofA B-HWCs in urban areasreportingmin imum15%annualin creaseinfootfallsov er preceding year.Denominator :Numberofoperatio nalAB- HWCsinurban	Perce ntage	A.100% B.100%	82.9%	100%	30% annua increm nt	30% l annual e increm ent	AB HWC Portal
	Outp ut	Medic ine at AB- HWC	PercentageofAB- HWCfulfillingminimu m80%ofexpandedrang eofmedicinesasperEss entiallist(Medicines: SHC-HWC- 105;PHC- HWC-172)	Perce ntage	100%	100%	100%	100%	100%	AB HWC Portal
	Outp :	Diagno stics at AB-	lange on	Perce ntae	100%	100%	100%	100%	100%	AB HWC Portal



SI. No		Indicator Stateme 'nt		- Unit	Personal Property and the second	Progress s 2021-	Likely achievem ent 2021-22	Target 2022-	Target 2023-24	Source
14 2	Output	nexpa ndeds ervic epack	Numerator: Total number ofAB-HWC primary healthcareteam members (ASHA, MPW,CHO, SN and MO) trained onexpandedservicepa ckages  Denominator: Total number ofprimaryhealthcarete ammembers(ASHA,MP W,CHO,SN andMO)inthestate	Perce ntage	90%	70%	100%	90%	90%	AB- HWC Portal and SASH AK T
14	ut	CBAC form upda tion	Numerator: Number ofIndividualsforwho mCBACformwas filled. Denominator: Total catchmentpopulation(30+) underalloperational AB-HWCs in thestate.	Perce ntage	100% annuall y	90%	100%	100% annuall y	100% annuall y	AB HWC Portal



SJ.		Indicator Statemen		Unit	Target 2021-22	Progres s 2021- 22	Likely achievem ent 2021-22	Target 2022-	Target 2023-24	
14 4	Outp ut	Functio nalAB- HWCs provi dingw ellnes sservi ces	Numerator: Number ofwellnesssessionscon ductedatoperational AB-HWCs in thestate Denominator:Totalnum berofwellness sessions (at the rateof minimum 10wellnesssessions per month for alloperational AB-HWCs in thestate)	Perc enta ge	100%	100%	100%	100%	100%	AB HWC Portal
14 5	Outp	Tele- consult atio ns started at AB- HWCs	Numerator: Number ofteleconsultationscon ductedatoperational AB-HWCs in thestate  Denominator: Total number ofteleconsultations(att herateofminimum 25 teleconsultationsper month for all operationalAB-HWCsin thestate)	Perc enta ge	100%	60%	80%	100%	100%	AB HWC Portal
. 16	Outp	Treatm entcom	Numerator: Total no. ofIndividualsreceivedt reatmentforHypertensi on  Denominator: Totalindividuals liagnosed orHypertension	Perc enta ge	70%	60%	70%	70%	70%	AB HWC Portal
14		pliance N o r I T d	Numerator: Total no. ofIndividualsreceivedt eatmentforDiabetes Denominator:	Perc enta ge	70%	70%	70%	100%	100%	AB HWC Portal



Sl. -No		Indicator Statemen	Indicator work		Target 2021-22		Likely achievem ent 2021-22	Target 2022-	Target 2023-24	
14 8	Outp ut	JAS functioni ng	Numerator: Number of JASconducted at least 10 meetingsina year Denominator: Totaloperation alAB-HWCs	Perc enta ge	80%	In process	In process	80%	80%	AB HWC Portal
14 9	Outp	Functi onalAB -HWC awar dedK ayaka lpAw	Numerator: Number offacilitiesawarde ddistrictlevelKay akalpawards Denominator:Totalnum beroffunctionalAB-	Perc enta ge	In process	In process	100%	100%	AB HWC Portal	ABHW C Portal
15 0	ut	Functi oning ofVHS NC (inr ural area	Numerator: Number of VHSNCs that conducted atleast 10 meetings in the year (against the norm of minimumonemeeting every month)  Denominator: Total VHSNCsformed	Perc enta ge	80%	100%	100%	100%	HWC	AB- HWC Portal



Sl. No		Indicator Statemen	Indicator	Unit	Target 2021-22		Likely achievem ent 2021-22	Target 2022-23	Target 2023-24	
15 1	Output	incenti ves	a) Numerator: Number of AB-HWCs whose primaryhealthcareteam shavereceivedtimelyinc entives(PerformanceLinked Payment and Team BasedIncentives) minimum 12 timesayear  Denominator: Totalnum berofoperational AB-HWCs  b) Numerator: Numberof ASHAs who received timelyincentives (Routine-recurring and program incentives) minimum 12 timesayear  Denominator: Totalnum berofin-position ASHAs	Output	100% of AB- HWCs	In process	In process	100%	100%	AB- HWC Portal
				AY	USH					
	Outp ut	Co- locatio	OCALEUA I USTIOFIJSEI VI	Num ber	to befixed		Total nos. of patients in the AYUSH OPDs 82827	•	-	-

							Likely			
SI.	Indica	Indicator	Indicator	Unit	Target	Progres	achievem	Target	Target	Source
No	tor	Stateme			2021-22	s 2021-	ent	2022-	2023-24	
	Туре	nt				22	2021-22	23		



SI. No	Indica tor Type	Indicator Stateme nt	Indicator	Unit	Target 2021-22	s 2021- 22	2021-22	Target 2022- 23	Target 2023-24	Source
			Huma	пкеѕо	ırceforHe )	aitn(HRF	1			
15 3	Outp ut		Percentage of HRH in Positionout of total posts approvedunderNHM*  (*Depending on the actual status, the targetmaybechanged asperNPCC discussion)	Perce ntage	70% ofNH MHR arein place	72.97%	75% ofNH MHR arein place	At least8 0%oft he NHMp osts to befille d	At least85 % of theNH M poststo befille d	NHS RCH RH Divis ion
15 4	Outp ut	HRH availab ilityas perIPH	PercentageofHRHava ilableas per IPHS (HR inPlace/IPHSrequire mentx 100) forsixke ystaffcategor ies* (*Depending on the actual status, the targetmaybechanged asperNPCC discussion)	Perc enta ge						NHS RCH RH Division
2	=		o MPW(Male+Femal e)		60%	95.02%	100.00%	65%	70%	
			StaffNurses		50%	127.55 %	127.55%	53%	55%	
			<ul> <li>Labtechnicians**         (**Reduction in gap%         applicable only         forthose levels of         facilities where lab         servicesincludingHRf         orlabhavebeenoutsou         rced)</li> </ul>		45%	128.71	128.71%	50%	55%	
			> Pharmacists		80%	183.61	183.61%	83%	85%	



	a tor	Indicat or Statem ent		Unit	Target 2021-		Likely eachieve ment 2021- 22		Target 2023-	
			<ul> <li>MedicalOffice r-MBBS</li> </ul>		80%	273.75 %	273.75 %	83%	85%	
			<ul> <li>Clinicalspecia lists</li> </ul>		45%	100.79 %	100.79 %	48%	50%	
							nentMar eProgra			
1 5 5	Outp ut	ntCA MC/ AMC	Percentage of	Perc enta ge	82.45%	-	-	81 %	85%	BMMP Dashboard/StateEquipme ntInventorySoftware (e- upkaran)
	Outp 1	Equip mentU okeept me	Percentage of	enta ge	30% CHC- 90% CH -	99.7% CHC- 100% CH -	99.7% CHC- 100% OH -	80% (CHC- (CHC-) (CHC-) (CHC-) (CHC-) (CHC-) (CHC-) (CHC-) (CHC) (	PHC- 30% CHC- 90% OH - 95%	BMMP Dashboard/StateEquipme ntInventorySoftware (e- upkaran)



Sl. No	tor	Indicato - r m Stateme nt		Unit	Target 2021-22	Progres s 2021- 22	Likely achieve ment 2021-22	Target 2022-23	Target 2023-24	Source
15 7	Outpu t	AERB Complia nce	Percentage of Public HealthFacilitycertifie dasperAERBcomplian ce	Perce ntage	-	50%	- -	-	<u>-</u>	AERB Compli ancece rtificati ondash board
			Healt		gementIn tem(HMIS		n			
15	ut	Reporti ng	Ensuring timely reporting ofdata by the State DataManager/M&E/H MISpersonnel by 20 <sup>th</sup> of followingmonth.  Numerator: No. of healthfacilitiesreporte ddataby20thoffollowing month.  Denominator: Fotal no. of healthfacilities.	Perc enta ge	>97% repo rting (Hea lthFa ciliti esun der theSt ate)	100%	100%	>9 7 % repor ting( Healt hFaci lities unde r theSt ate)	>97% repo rting (Heal thFa ciliti esun dert heSt ate)	HMIS



Sl.		Indicator Statemen	Indicator:		Target 2021-22	Progres s 2021- 22	Likely achievem ent 2021-22	Target 2022-	Target 2023-24	
			Public		dministra Division	ation(P				
15 9		Infrastr ucture (Rural andUrb anhealt hcarefa cilities- a. DH, b. SDH, c. CHCs, d. UCHCs , e. UPHCs g. S ubH ealt hCe nter s, h. Others	Numberofnewconstru ctionscompleted and handed overagainst the projectssanctioned.	Num	30%	<u>-</u>	-	70%	100%	State Report
0	Out	complian	%Ofhealthcarefacilities achieved IPHS compliance.	Perc enta ge	10%	4.89%	10%	20%	40%	State Report
16	]	Health phelpD desk n	Average calls received ber lay(outputmeasureme atbycallefficiency): - tumerator- Totalcalls eceived per day per alloperatoragainstthed nominator-average130call eceived per Call peratorper day with vg. call handlingtime f3 minutes.	Perc enta ge	70%	74%	74%	75%	80%	State Report



SI.		Indicat Statem	tor and a Indicator	1	Unit	Target 2021-22	s 20	gres )21- 2	Likel achiev ent 2021-	em	Targ 2022 23		Targ 2023-	No.	Source
16 2	Outp ut	GRS& Health HelpD esk	%Ofcallsresolvedout otalcallsreceivedserve	vice	Perc enta ge	75%	(He Infor or Sum No rece after laur ECD-	n) ian- Call ived the ich. not	launch	ch ntio n- ll ed ne n. ot	1009	%	1009	%	State Report
16 3	Outp ut	Nationa lAmbul anceSer vices	nalas per population	1	Perc enta ge	80%	100	1%	100%		100%	6	1009	6	State Report
16 4	Outp ut	-	Averagerespons etimepervehicle	I	Minut es	30 min	and 0:15:	d 07 0 al d	0:14:24 and 0:15:07 (Rural and Jrban)	20	min	20	min		tate eport
16 5	Outp ut		Avg.no.of tripsper MMUpermonth	Nu s	mber	25	0		0	2	25	2	25		tate
16	Outp ut	t	Averageno.oflabinves igationsperMMUper day.	Nu	mber	30in plain and 20 inh illy	0		0		h		i il		rate port



Sl.	Indica tor Type	Indicat Statem			Target 2021-22			em Ta		Targe 2023-2	Source
16 7	Process	DH Stre ngth enin g askn owle dge Hub	% of District hospitals- initiatedanyofthefol lowingcourses:- a. DNBcourses b. Nursingcourse s c. Alliedhea lthcarecour ses	Percent age	50%	50 %	50%	100	%	100%	State Report



## Annexure3: Conditionalities Framework 2022-24

Full Immunization Coverage (%) to be treated as the screening criteria. Conditionalities to be assessed only for those EAG, NE and hilly states which achieve at least 85% full Immunization Coverage. For rest of the States/UTs, the minimum full Immunization Coverage to be 90%.

S. No.	Conditionalities <sup>[1]</sup>	Indicators of 2022-24	Source of verification	% Incentive/ Penalty [2]
1.	Incentive or penalty based on NITI Aayog ranking of states on 'Performance on Health Outcomes'	Based on the ranking which will measure incremental changes over the base:  a. States showing overall improvement to be incentivized: +40  b. States showing no overall increment get no penalty and no incentive: 0  c. States showing decline in overall performance to be penalized: -40  % of incentive/penalty to be in proportion to overall improvement shown by the best performing state and the worst performing state: +40 to -40 points	NITI Aayog report	+40 to -40
2.	DH Ranking	At least 75% (in Non EAG) and 60% (in EAG and NE states) of all District Hospitals to have at least 8 fully functional specialties as per IPHS: 10 points incentive.  Less than 40% in Non EAG and 30% in EAG to be penalized up to 10 points	NITI Aayog DH ranking report	+10 to -10
3.	AB-HWCs State/UT Score	Based on overall score of HWC conditionality (out of 100 marks)  a. Score more than 75: +25  b. Score more than 50 or less than or equal to 75: +15  c. Score more than 25 but less than or equal to 50: -15  d. Score less than or equal to 25: -25	AB-HWC portal	+25 to -25
4.	Implementation of Ayushman Bharat-	Percentage of Health and Wellness Ambassadors (HWAs) trained to	AH division, MOHFW	+5 to -5



S. No.	- Conditionalities <sup>[1]</sup>	Conditionalities <sup>[1]</sup> Indicators of 2022-24		% Incentive/ Penalty [2]
	School Health and Wellness Ambassador initiative	transact weekly activities in schools in the selected districts  a. >75%: 5 points incentive (+5)  b. 25%-75%: 3 points incentive (+3)  c. < 25%: 3 points disincentive (-3)  d. NIL 5-point disincentive (-5)		
5.	Implementation of DVDMS or any other logistic management IT software with API linkages to DVDMS up to PHC level	DVDMS implementation up to PHC/UPHC* a. in 100%PHC/UPHC: +5 b. 80% or above but less than 100%: +3 c. 50% or above but less than 80%: -3 d. in less than 50%: -5	DVDMS Portal or Any other similar system with API linkages to DVDMS	+5 to -5
6.	Registration of pregnant women and children (0-1) on RCH or equivalent portal	% Registration against estimated beneficiaries (Pregnant woman & Child registration 0-1 yr) on Pro-rata basis a. 100% Registration: +5 b. 80% or above but less than 100%: +3 c. 50% or above but less than 80%: No Penalty d. less than 50%: -5	RCH Portal or similar state portal	+5 to -5
7.	A. Increase 'inplace' regular service delivery HR	Increase in 'in-place' Regular service delivery cadres of MPW (Male & Female), Staff Nurses, laboratory technicians, Medical Officers, and specialists as on 31st March 2023 against 31st March 2022 and as on 31st March 2024 against 31st March 2023.  a. More than 80%: +7.5 b. More than 50% but up to 80%: +5 c. More than 20% but up to 50%: +3 d. Up to 20% - Nil e. Increase in vacancy-7.5	State notifications, advertisements, and PIP HRH Division NHSRC	+7.5 to -7.5
residence di salamani carantena	B. Increase 'in - place'	Increase in 'in-place' contractual service delivery cadres of MPW	State notifications,	+7.5 to -7.5



S. No.	Conditionalities <sup>[1]</sup>	Indicators of 2022-24	Source of verification	% Incentive/ Penalty [2]
	contractual HR	(Male & Female), Staff Nurses, laboratory technicians, Medical Officers, and specialists as on 31st March 2023 against 31st March 2022 and as on 31st March 2024 against 31st March 2023.  a. More than 80%: +7.5 b. More than 50% but up to 80%: +5 c. More than 20% but up to 50%: +3 d. Up to 20% Nil e. Increase in vacancy-7.5	advertisements, and PIP HRH Division NHSRC	
8.	District wise RoP uploaded on NHM website	District wise RoP uploaded on NHM website within 30 days of issuing of RoP by MoHFW to State or by 31st May 2022 (whichever is later) a. 100% districts whose ROPs for FY 2022-24 are uploaded on state NHM website: +5 b. Fewer than 100% districts whose ROPs for FY 2022-24 are uploaded on state NHM website: -5	State NHM website and D.O. letter	+5 to -5
	Implementation of Nat	ional Viral Hepatitis Control Programme	(NVHCP)	
	A. Percentage put on treatment for hepatitis B against the target	<ul> <li>a. More than 90%: incentive 3 points (+3)</li> <li>b. More than 60% upto 90%: incentive 1 points (+1)</li> <li>c. More than 30% upto 60%: penalty 1 points (-1)</li> <li>d. 30% or Less: penalty 3 points (-3)</li> </ul>	Report from NVHCP Division, MoHFW	+3 to -3
9.	hepatitis C against the target	<ul> <li>a. More than 90%: incentive 3 points (+3)</li> <li>b. More than 60% to 90%: incentive 1 points (+1)</li> <li>c. More than 10% to 60%: penalty 1 points (-1)</li> <li>d. 10% or Less: penalty 3 points (-3)</li> </ul>	Report from NVHCP Division, MoHFW	+3 to -3
	C. Percentage of pregnant women	a. More than 90%: incentive 3 points (+2)	Report from NVHCP	+2 to -2



S. No.	- Conditionalities <sup>[1]</sup>	Indicators of 2022-24	Source of verification	% Incentive/ Penalty [2]
	screened for hepatitis B (HBsAg) against the target (Institutional Deliveries)	1 points (+1) c. More than 50% to 70%: penalty 1	Division, MoHFW	
	D. Percentage of newborns administered HBIG among newborns delivered to HBsAg positive pregnant women at health care facility	<ul> <li>a. More than 90%: incentive 3 points (+2)</li> <li>b. More than 70% to 90%: incentive 1 points (+1)</li> <li>c. More than 50% to 70%: penalty 1 points (-1)</li> <li>d. 50% or Less: penalty 2 points (-2)</li> </ul>	Report from NVHCP Division, MoHFW	+2 to -2
1.0	A. % districts covered under Mental health program and providing services as per framework	a. 100% of the districts covered: incentive 5 points (+5) b. 70% districts in Non-EAG and 60% districts in EAG states covered: incentive 3 points (+3) c. Less than 60% districts in EAG states and less than 70% districts in Non EAG states covered: penalty 3 points (-3) d. If less than 40% districts covered: penalty 5 points (-5)	Report from Mental Health Division, MoHFW	+5 to -5
10.	B. Actions taken for fulfilment of provisions under Mental Healthcare Act, 2017 (MHCA 2017)	State has established State Mental Health Authority:  a. If Yes: +2 b. If not: -2 State has established Mental Health Review Boards:  a. If Yes: +2 b. If not: -2 State has created State Mental Health Authority Fund:  a. If yes: +1 b. If not: -1	Report from Mental Health division, MoHFW	+5 to -5
11.		imination Programme (NTEP)  a. More than 80% of districts	NTEP Nikshay	+5 to -5



Conditionalities <sup>[1]</sup> Indicators of 2022-24		Source of	% Incentive/
		verification	Penalty [2]
Districts achieving 90% of TB Notification targets	achieving 90% of target: +5 b. 60% to 80% of districts achieving 90% of target: +2.5 c. Less than 60% of districts achieving 90% of target: -2.5 d. Less than 40% of districts achieving 90% of TB Notification target: -5	Reports	
B. Percentage of Districts achieving more than 85% of treatment success rate	<ul> <li>a. More than 80% of districts achieving 90% of target: +5</li> <li>b. 60% to 80% of districts achieving 90% of target: +2.5</li> <li>c. Less than 60% of districts achieving 90% of target: -2.5</li> <li>d. Less than 40% of districts achieving 90% of target: -5</li> </ul>	NTEP Nikshay Reports	+5 to -5
C. Percentage of AB- HWCs providing drugs to TB patients	<ul> <li>a. More than 80% of AB-HWCs providing drugs to TB patients: +5</li> <li>b. 60% to 80% of AB-HWCs providing drugs to TB patients: +2.5</li> <li>c. Less than 60% of AB-HWCs providing drugs to TB patients: -2.5</li> <li>d. Less than 40% of AB-HWCs providing drugs to TB patients: -5</li> </ul>	HWC report	+5 to -5
Implementation of Natio	nal Quality Assurance Programme and La	aOshva	
A. NQAS certification (against the target)	<ul> <li>a. More than 80% of the targets achieved for the FY: Incentive 10 points (+10)</li> <li>b. Between 51-80% of the targets achieved for the FY: Incentive 5 points (+5)</li> <li>c. Between 25-50% of the targets achieved for the FY: Penalty 5 points (-5)</li> <li>d. Less than 25% of the targets achieved for the FY: Penalty 10 points (-10)</li> <li>* Target for percent of public health</li> </ul>	Quality and Patient Safety Division, NHSRC	+10 to-10
	Districts achieving 90% of TB Notification targets  B. Percentage of Districts achieving more than 85% of treatment success rate  C. Percentage of AB-HWCs providing drugs to TB patients  Implementation of Natio  A. NQAS certification (against the	Districts achieving 90% of target: +5 Notification targets  b. 60% to 80% of districts achieving 90% of target: +2.5 c. Less than 60% of districts achieving 90% of target: -2.5 d. Less than 40% of districts achieving 90% of TB Notification target: -5 a. More than 80% of districts achieving 90% of target: +5 b. 60% to 80% of districts achieving 90% of target: +5 c. Less than 60% of districts achieving 90% of target: +5 d. Less than 60% of districts achieving 90% of target: +2.5 c. Less than 60% of districts achieving 90% of target: -2.5 d. Less than 40% of districts achieving 90% of target: -5 d. Less than 40% of districts achieving 90% of target: -5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +5 b. 60% to 80% of AB-HWCs providing drugs to TB patients: +2.5 c. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs	Districts achieving 90% of target: +5 Notification targets  B. Percentage of Districts achieving 90% of target: +2.5 d. Less than 60% of districts achieving 90% of target: +2.5 d. Less than 40% of districts achieving 90% of target: +2.5 d. Less than 80% of districts achieving 90% of target: +2.5 d. Less than 60% of districts achieving 90% of target: +2.5 d. Less than 60% of districts achieving 90% of target: +2.5 d. Less than 60% of districts achieving 90% of target: +2.5 d. Less than 60% of districts achieving 90% of target: -2.5 d. Less than 40% of districts achieving 90% of target: -2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 60% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 40% of AB-HWCs providing drugs to TB patients: +2.5 d. Less than 40% of the targets achieved for the FY: Incentive 10 points (+10) b. Between 51-80% of the targets achieved for the FY: Incentive 5 points (+5) c. Between 55-50% of the targets achieved for the FY: Penalty 5 points (-5) d. Less than 25% of the targets achieved for the FY: Penalty 5 points (-50) points (-10) brits (-10) brits (-10) brits (-10) brits (-10) brits (-10) brits (-10)

S. No.	- Conditionalities [1]	Indicators of 2022-24	Source of verification	% Incentive/ Penalty [2]
Comment of the Commen		facilities certified under NQAS (as per level of the facilities) will be taken from the attached DO letter as Annexure-A		
	B. LaQshya certification (Labour Room and Maternity Operation Theatre)	<ul> <li>a. More than 80% of the targets achieved for the FY: Incentive 5 points (+5)</li> <li>b. Between 51-80% of the targets achieved for the FY: Incentive 3 points (+3)</li> <li>c. Between 25-50% of the targets achieved for the FY: Penalty 3 points (-3)</li> <li>d. Less than 25% of the targets achieved for the FY: Penalty 5 points (-5)</li> </ul>	Quality and Patient Safety Division, NHSRC	+5 to-5
13.	Compliance to IPHS for infrastructure	<ul> <li>FY 2022-23</li> <li>a. more than 15%: incentive: 20 points</li> <li>b. More than 10% up to 15%: 12 points</li> <li>c. More than 5% to 10%: Incentive 6 points</li> <li>d. Up to 5%: 3 points</li> <li>e. No increase: no penalty and no incentive: 0</li> <li>f. Any decline: penalty 20 points</li> <li>FY 2023-24</li> <li>a. more than 30%: incentive: 20 points</li> <li>b. More than 20% up to 30%: 12 points</li> <li>c. More than 10% to 20%: Incentive 6 points</li> <li>d. Up to 10%: 3 points</li> <li>e. No increase: no penalty and no incentive: 0</li> <li>f. Any decline: penalty 20 points</li> <li>All facilities put together: HWC, PHC,</li> </ul>	State Reports	+20 to -20



S. No.	Conditionalities <sup>[1]</sup>	Indicators of 2022-24	Source of verification	% Incentive/ Penalty [2]
1 1 1 1	Salaran ar en er e	CHC, SDH and DH, cumulative compliance would be taken	ORGANI SIBANTININI NI SIBANTINI	
14.	Implementation of National Ambulance Services as per norms:	Sufficient fleet of ALS (one per 5 lakh population) and BLS (one per 1 lakh population) deployed as per norms  a. Sufficient Fleet of ALS (one per 5 lakh population) deployed as per norms - +5  b. Sufficient Fleet of BLS (one per 1 lakh population) deployed as per norms- +5  c. If ambulances not as per norms: No penalty or incentive	NHM PIP	+10 to 0
15.	Increase in State Health Budget	<ul> <li>a. Increase in State heath budget by 10% or more over previous year's budget: incentive 10 points</li> <li>b. Less than 10% increase:0</li> <li>For calculation of increase in budget, entire State budget for public health, medical education, and AYUSH would be considered</li> </ul>	State reports State Health Budget	10 to 0

[1] The Conditionalities apply to both urban as well as rural areas/facilities.

\*PHC/UPHC data as per RHS 2021-22

<sup>\*\*</sup>Estimated births, new-borns, PWs as per RGI estimates as communicated by the HMIS division



 $<sup>^{[2]}</sup>$  Numbers given in the table are indicative of weights assigned. Actual budget given as incentive /penalty would depend on the final calculations and available budget. The total incentives to be distributed among the eligible states would be 20% of the total NHM budget.

### Integrated Disease Surveillance Programme (IDSP): Conditionality Framework for FY 2022-24

S. No	Conditionalities	Inance Programme (IDSP): Condition	Source of Verification	% Incentive/Penalty
1.	% Reporting in IHIP	<ul> <li>a. Regular reporting in IHIP by more than 60% of Districts in all 3 reporting formats (S, P, and L): + 2 points</li> <li>b. Regular reporting in IHIP by half (50%) of Districts in all 3 reporting formats (Range 50-60%): + 1 point</li> <li>c. Reporting in one or two reporting formats (S, P, and L) of less than 50%: -1 point</li> <li>d. Reporting in all 3 reporting formats (S, P, and L) of less than 50%: -2 points</li> </ul>	IHIP reporting weekly assessment would be done.	+2 to -2
2	Presence of essential IDSP-IHIP staff at district level	<ul> <li>a. 80% or more district having essential IDSP-IHIP staff (District Epidemiologist, District Data Manager along with NHM DEO): +2 points 60-80% of district having essential IDSP-IHIP staff: +1 point 50-60% of district having essential IDSP-IHIP staff: -1 point Less than 50% of district having essential IDSP-IHIP staff: -2 points</li> </ul>	As reported to CSU, IDSP and/or updated on IHIP platform	+2 to -2
3	District Public Health Labs (DPHLs) sanctioned/strengthened for diagnosis/testing of epidemic prone diseases	<ul> <li>a. 75% or more Districts having sanctioned DPHLs: + 2 points</li> <li>b. At least 50 -75% Districts of State/UT having sanctioned DPHLs: + 1 point Only 25-50% Districts in</li> <li>c. State/UT having sanctioned DPHLs: - 1 point Less than 25% districts having DPHL or</li> <li>d. total lack of DPHL in State/UT: - 2 points</li> </ul>	Annual ROPs or Communication from State/UT	+2 to -2



sa te 4 la	Functionality/capacity of anctioned DPHLs for esting and abconfirmation of pidemic prone diseases ander IDSP mandate.	c.	performing only Rapid Ag Test(s) for all infection/disease conditions : - 1 point State/UT having more than	Monthly DPHL report or Weekly L form reporting or IHIP data	+2 to -2
u	nder IDSP mandate.	d.	performing only Rapid Ag Test(s) for all infection/disease conditions : - 1 point	IHIP data	



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

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

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

			FY 2	022-23	FY 2023-24	
S. No	Criterion	Proposed Indicator	Max Score for SHC- HWC	Max Score for PHC- HWC	Max Score for SHC- HWC	Max Score for PHC- HWC
1	Functional AB-HWCs satisfying advanced HWCs providing all expanded range of services Criteria		15	10	15*	10*
2	Footfall at AB-HWCs  (Receiving services for Preventive, promotive, curative, rehabilitative and palliative care)	HWC-02:  AB-HWCs in rural areas reporting minimum 5% annual increase in footfalls over preceding year  AB-HWCs in urban areas reporting minimum 15% annual increase in footfalls over preceding year.	10	10	10	10
3	Medicine & Diagnostics at AB- HWC	HWC-03: AB-HWC fulfilling expanded range of medicines and diagnostics as per Essential list of both  (Medicines: SHC-HWC- 105; PHC-HWC-172 & diagnostics: SHC-HWC- 14; PHC-HWC- 63)	10	10	10	10
4	Functional HWCs providing wellness	HWC-04: AB-HWCs providing a minimum of 10	10	10	10	10



			FY 20	022-23	FY 2023-24	
S. No	Criterion 3	Criterion Proposed Indicator		Max Score for PHC- HWC	Max Score for SHC- HWC	Max Score for PHC- HWC
	Services	Wellness sessions per month	HWC			
6	Quality Care  HWC-06: Functional AB-HWCs scoring more than 70% in Kayakalp peer assessment		5	10	5	10
7	Leveraging IT	HWC-07: Utilization of CPHC-NCD App for screening and tracking of all NCD patients	5	10	5	10
8	Continuum of Care	HWC-08: Number of AB- HWCs conducting minimum 25 teleconsultations per month.	5	5	5	5
9	Community Engagement	<b>HWC-09</b> : Constitution of JAS and conduction of at least 10 meetings in a year.	10	5	10	5
Payment of PLPs and TBIs		HWC-10: AB-HWCs whose primary healthcare teams have received timely incentives (Performance Linked Payment and Team Based Incentives) at least 10 times a year	5	5	5	5
		75	14/2	75	75	75

<sup>\*</sup>States/UTs are to operationalize additional SHC and PHC as AB-HWC as per RHS 2019



### **HWC-01: Functionality Criteria indicator**

Basic Functionality Criteria	Provision of services all 12 expanded range of service packages
<ol> <li>HR availability</li> <li>Infrastructure Strengthening/Branding</li> <li>Availability of Free Medicines</li> <li>Availability of Free Diagnostics</li> <li>Completion of CBAC enumeration for ALL 12 packages as per revised CBAC form</li> <li>Capacity Building of primary healthcare team on         <ul> <li>expanded package of services</li> <li>'Eat Right'</li> </ul> </li> </ol>	<ol> <li>Care in pregnancy and Childbirth</li> <li>Neonatal and Infant health services</li> <li>Childhood and Adolescent Health services including immunization</li> <li>Family Planning, Contraceptive services and other Reproductive Health Services</li> <li>Management of Communicable diseases:         <ul> <li>National Health programmes (Tuberculosis, leprosy, Hepatitis, HIV- AIDS, Malaria, Kalaazar, filariasis and Other vector borne diseases)</li> </ul> </li> <li>Management of Communicable diseases and General outpatient care for acute simple illnesses and Minor ailments</li> <li>Prevention, Screening and Management of non-Communicable diseases</li> <li>Care for Common Ophthalmic and ENT problems</li> <li>Basic Oral Health Care</li> <li>Elderly Care and Palliative Healthcare</li> <li>Emergency medical services including, including for Trauma and burn.</li> <li>Screening and basic management of Mental health ailments</li> </ol>

#### **HWC-04: Criteria for Wellness Indicator**

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



राजेश भूषण, आईएएस सचिव RAJESH BHUSHAN, IAS SECRETARY



भारत सरकार स्वास्थ्य एवं परिवार कल्याण विभाग स्वास्थ्य एवं परिवार कल्याण मंत्रालय

Government of India
Department of Health and Family Welfare
Ministry of Health and Family Welfare
DO No. Z-18015/26/2020-NHM-II

1st October, 2021



Dear Colleague,

Ministry of Health & Family Welfare has undertaken a thorough revision of Quality Assurance Framework in the Country and has finalized the revised "Operational Guidelines for Improving Quality in Public Healthcare Facilities – 2021". The Guidelines have been released by Hon'ble Union Minister of Health & Family Welfare on 17<sup>th</sup> September, 2021. Services provided by Public Health Facilities need to be bench marked against National Quality Assurance Standards which are internationally accredited by International Society for Quality in Health Care (ISQua). Formal certification against these standards assures the patients that the care delivered to them is at par with the best in country.

Ensuring Quality is also one of the focus areas of the National Health Policy (NHP-2017). The Ministry is committed to support the States/UTs in achieving the Quality certification against National Quality Assurance Standards (NQAS). Proposed targets for the State/UTs are given in Annexure—I. These targets may please be kept in mind preparing the NHM PIPs for the coming years.

For achieving these targets, you are requested to include status of NQAS certified facilities in your regular review of districts and monitoring dashboard.

In addition, following actions may be thought-of for achieving tangible progress:-

- a. Sensitization of District Magistrates on the Quality Assurance Program.
- b. Identification of the technical support institutions for harnessing their capacities for achieving quality certification for the facilities.
- c. Allocating targets to CMOs/Civil Surgeon (equivalent) for achieving NQAS certification of health facilities.
- d. Surakshit Matritva Aashwashan (SUMAN) notified facilities, LaQshya certified and Kayakalp winner facilities could be taken on priority for NQAS certification.
- e. Identification of individual subject matter experts who could be trained and empanelled for providing hand-holding support to the facilities.
- f. Strengthening the State/UT NQAS certification mechanism.
- g. Filling all vacant positions of state & district consultants under the National Quality Assurance Program.

Room No. 156, A-Wing, Nirman Bhawan, New Delhi-110 011 Tele: (O) 011-23061863, 23063221, Fax: 011-23061252, E-mail: secyhfw@nic.in



Should the State need technical assistance, this Ministry/National Health Systems Resource Centre (NHSRC) may please be contacted.

Harm Legards.

Yours sincerely,

Encl.: as above

(Rajesh Bhushan)

ACS/Pr.Secy./Secy., Health - All States/UTs

CC to Mission Director, National Health Mission - All States/UTs

#### Annexure

(Ref. DO. No. Z- 18015/26/2020-NHM-II, dated 22<sup>nd</sup> September)

#### Targets for NQAS certification of Public Health Facilities

(Denominator - Number of Institutions as per RHS 2019-20)

Level of Health	Cumulative Certified	Cumulative Certified	Cumulative Certified	Cumulative Certified	Cumulative Certification
Facilities	FY 2021-22 (Percentage)	FY 2022-23 (Percentage)	FY 2023-24 (Percentage)	FY 2024-25 (Percentage)	FY 2025-26 (Percentage)
1.District Hospital	40	50	60	70	75
2.Sub-district Hospital	12	25	40	50	60
3.Community Health Centre	12	25	40	50	60
4.Primary Health Centre	12	25	40	50	60
5.Urban Primary Health Centre	12	25	40	50	60
6.HWC (SC)	2	10	20	40	60



#### Annexure 4a: HRH approvals





Manoj Jhalani Additional Secretary & Mission Director, NHM Telefax: 23063687, 23063693

E-mail: manoj.jhalani@nic.in

भारत सरकार स्वारथ्य एवं परिवार कल्याण मंत्रालय निर्माण भवन, नई दिल्ली - 110011 GOVERNMENT OF INDIA MINISTRY OF HEALTH & FAMILY WELFARE NIRMAN BHAVAN, NEW DELHI - 110011

D.O.No.10(36)/2017-NHM-I 17th May 2018

Dear Colleague,

Subject: PIP and HR Approvals

MoHFW with the aim of strengthening and simplifying the planning process, has brought in major changes in the PIP budget sheet in FY 2018-19. Adopting health system approach, the PIP has been categorised into 18 heads required for implementation of any programme.

As mentioned in PIP guidelines any programme/ initiative planned were to be broken and budgeted in 18 given heads, as applicable. However, appraisal of PIPs show that few states have clubbed many activities together thereby defeating the very purpose of budget revamp. As informed in the NPCC meetings, any human resource (Programme Management or Service Delivery) proposed in the clubbed activities, which has not been proposed under dedicated heads for HR will not be considered for appraisal. Even if the lump sum amount is approved unknowingly by the programme divisions, no HR would be considered as approved.

Further, to initiate HR integration and ensure rationalization of salaries of staff with similar qualification, workload and skills, additional budget (3% of the total HR budget) was approved by NPCC in FY 2017-18 as per state's proposal. This budget was approved with the condition that the exact amount of individual increase should be decided by state in its EC and HR rationalization exercise and its principles including increases to be approved by SHS GB. States were directed to ensure that increases are approved in such a way that it smoothens the process of HR integration. In cases where the salary difference among similar category position with similar qualifications and experience is very high (say more than 15%), it was to be done in parts as it may take 2-3 years to rationalize it fully. The same principle applies to the approvals of FY 2018-19. Therefore, we continue to approve additional 3% of the total HR budget in FY 2018-19 for HR integration, subject to the states asking for it.



Salaries of all staff have been approved in the ROP (FY 2018-19) as proposed by the state assuming that any increase/ decrease of salary has been approved by the EC and GB. In case, any of the proposed salary has not been approved by the State EC and GB, the individuals will not be eligible to receive higher salary as approved in the ROP FY 2018-19 and only 5% of annual increase is to be provided on base salary approved in FY 2017-18. Any additional amount already paid would have to come from state budget. States must undertake HR integration process using the additional budget approved last year and this year. The details are to be submitted to MoHFW along with a signed letter from Mission Director and a copy of minutes of meeting held with EC and GB based on which decision has been taken.

Any deviation from the above would be treated as contravention of Record of Proceedings of NPCC and would apart from inviting audit objection would be flagged to Chief Secretary for disciplinary action.

Wilm regards,

Yours sincerely,

(Manoj Jhalani)

Principal Secretary (Health) / Secretary (Health)/Commissioner (Health) of all States / UTs

Copy to:

Mission Director (NHM) of all States / UTs

#### Principles for calculation of remuneration

- 1. The amount available for remuneration of existing posts has been calculated considering the maximum eligible budget as per budget approved in FY 2021-22.
- 2. In case the budget proposed for remuneration of existing staff is within the available limit, the same has been approved as lump sum for 12 months in principle. In case, any position has been dropped by the state, the available limit excludes the budget approved for those positions in the previous FY.
- 3. Budget proposed for any new position has been calculated separately over and above the available limit.
- 4. Additional 5% of the total HR budget is approved as increment and 3% of the total HR budget is approved for HR rationalisation, correction of typographical errors and experience bonus (as per eligibility and principles of rationalization) with the condition that:
  - 4.1. Only those who have completed minimum one year of engagement under NHM and whose contract (in case of annual contract) gets renewed will be eligible for annual increment.



- 4.2. The maximum increase in remuneration of any staff is to be within 0% to 15% (based on performance and rationalization). The total budget used in increment and for rationalization should not exceed 8% of total HR budget. HR rationalization exercise and its principles including increments to be approved by SHS GB.
- 4.3. In cases where the salary difference is more than 15%, salary rationalization may be done in parts as it may take 2-3 years to rationalize it fully.
- 4.4. In case performance appraisal of NHM staff is not carried out by the state, only 5% increase on the base salary is to be given.
- 4.5. In case any amount out of the 3% rationalization amount is used for correcting typographical error in approvals (if any), details for the same is to be shared with MoHFW/ NHSRC HRH division.
- 4.6. If any state disburses flat 8% increment to all irrespective of performance and salary disparity, or gives salary increases beyond 15% without approval of MoHFW the amount of 3% will be deducted from HR budget. Any decrease of salary resulting from this will have to be borne from the State budget.
- 5. EPF (Employer's contribution) has been approved @ 13.36% for staff drawing salary <= Rs.15000 per month as on 1st April 2015 and any other staff hired at Rs.15,000 or less after 1st April 2015. The State Administrative Officer looking after Salary must ensure proper calculation and disbursal as mentioned. Please refer to JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM(F)) regarding EPF and AS&MD's letter dated 2 August 2019 (D.O.No. G-27034/182/2018/NHM (F)) for ESI.
- 6. The budget approved as remuneration/ hiring of specialists may be utilised as per guidance provided via AS&MD's letter dated 30 June 2017 (D.O.No.Z.18015/6/2016-NHM-II (Pt. III).
- 7. State will implement Minimum Performance Benchmark for all NHM staff shared by MoHFW and will link it to renewal of contract.
- 8. In any case (without written approval of MoHFW), NHM funds cannot be used to support staff over and above the requirement as per IPHS.



## Annexure 4b: Summary of HRH Approvals under NHM

	NF	RHM	NU	NUHM (In lakhs)	
Budget Approved	(In I	akhs)	(In I		
	FY	FY	FY	FY	
	2022-23	2023-24	2022-23	2023-24	
Service Delivery HRH	2100.05	2268.05	88.99	96.11	
Programme Management HRH	417.98	451.42	10.60	11.45	
Budget for data entry operation	131.82	142.37	4.77	5.15	
Budget for engaging support services on	9				
outsource basis/ Support Staff at facility	11.26	12.16	2.86	3.09	
level					
Budget for engaging support services on	8.04	0.60	4.05	1.13	
outsource basis/ Support Staff in offices	6.04	8.68	1.05		
Annual Increment and rationalization	224.29	220.61			
budget for ongoing positions	224.29	230.61	8.66	9.35	
EPF (Employer's contribution @ 13.36%	122.72	122.72	10.00	10.03	
for salaries <= Rs 15000 pm)	123.72	123.72	10.03		
Total Budget approved	3017.16	3237.02	126.96	136.32	

## List of Service DeliveryPositions under NRHM:

Old FMR (FY 2021- 22)	Name of Posts	No. of Ongoing Posts 2022	No. of new posts approved
8.1.1.1	ANM	82	
8.1.1.2	Staff Nurse	86	
8.1.1.3.1	Psychiatric nurse	2	
8.1.1.3.2	Palliative care nurse	2	
8.1.1.3.3	Community nurse	2	
8.1.1.4	LHV/ supervisory nurse	5	
8.1.1.5.1	Lab technician	57	
8.1.1.5.2	Sr. Lab technician	2	
8.1.1.7	Technical Officer-Viral Hep. C	1	
8.1.1.9	Radiographers	12	



Old FMR (FY 2021- 22)	Name of Posts	No. of Ongoing Posts 2022	No. of new posts approved
8.1.1.10	Physiotherapist	4	
8.1.1.11	Nutrition Officer	2	
8.1.1.11	Asst. Nutrition Officer	2	,
8.1.1.12	Immunization Field Monitors	6	
8.1.2.1	OBGY	4	·
8.1.2.2	Paediatricians	4	,
8.1.2.3	Anaesthetists	2	2
8.1.2.4	Ophthalmic Surgeons	6	
8.1.2.5	Radiologists	2	-
8.1.2.5	Sonologists	2	2 8
8.1.2.6	Pathologist	1	*
8.1.3.1	Physician	6	,/
8.1.3.2	Psychiatrist	3	
8.1.3.4	ENT Surgeon	2	40
8.1.3.8	Microbiologist	2	
8.1.3.10	Specialist - Cardiology	1	
8.1.3.10	Specialist (MD General Medicine)	1	*
8.1.3.10	Specialist - Cardiology (ECHO)	1	r
8.1.4.1	Dental Surgeon- Full time	1	
8.1.4.1	Dental Surgeon part time	12	
8.1.4.1	Honorarium for Dental MO- Specialists	3	
8.1.4.3.3	Dental Assistants part time	13	
8.1.5.1	Medical Officers	6	
8.1.6.1	AYUSH doctors	52	
8.1.6.2	AYUSH pharmacists	28	
8.1.6.3	Panchkarma Therapist	2	
8.1.7.1.1	Medical Officers, AYUSH	30	9 1
8.1.7.1.4	ANM	15	
8.1.7.1.5	Pharmacists	15	



Old FMR (FY 2021- 22)		No. of Ongoing Posts 2022	No. of new posts approved
8.1.7.2.1	Paediatricians	2	
8.1.7.2.2	Medical Officers, MBBS	2	
8.1.7.2.3	Medical Officers, Dental	2	
8.1.7.2.4	Staff Nurse	2	4
8.1.7.2.5	Physiotherapist	2	
8.1.7.2.6	Audiologist & speech therapist	2	
8.1.7.2.7	Psychologist	2	
8.1.7.2.8	Optometrist	2	
8.1.7.2.9	Early interventionist cum special educator	2	
8.1.7.2.10	Social worker	2	
8.1.7.2.11	Lab technician	2	
8.1.7.2.12	Dental technician	2	
8.1.7.2.13	Occupational Therapist	0	A
8.1.7.2.13	Autism Interventionalist	0	
8.1.8.6	IYCF Counsellors (outsourced to NGO) (budget proposed as lumpsum)	4 lumpsum	
8.1.9.2	Medical Officers	4	
8.1.9.4	Lactation Counsellor (Staff Nurse)	3 .	
8.1.13.1	Counsellor	39	
8.1.13.2	Psychologist	4	
8.1.13.4	Microbiologist	2	
	Audiologist	2	
8.1.13.6	Multi Rehabilitation Workers	6	
8.1.13.8	Social Worker	4	
8.1.13.10	TBHV Medical College	10	-
1	Lab Assistant (on deputation under NIDDCP)	1	
8.1.13.11	Lab attendant	1 lumpsum	



Old FMR		W 60 .	
(FY 2021-	Name of Posts	No. of Ongoing	No. of new posts approved
22)		Posts 2022	
8.1.13.15	Cold Chain & Vaccine Logistic	1	
	Assistant	1	
8.1.13.16	Ophthalmic Assistant	9	
8.1.13.17	Storekeepers	2	
8.1.13.18	Audiometric Assistant	2	
8.1.13.19	Instructor for Hearing	2	
	Impaired Children	2	
8.1.13.20	Field Worker	132	2
8.1.13.21	Biomedical Engineer	2	*
8.1.14.1	Pathologist (MD)	1	
8.1.15.7	Medical Records Asstt. / Case	2	~ 2
	Registry Asstt.	2	
8.1.16.2	Cold Chain Technician-	1	
	Immunization	1	
8.1.16.3	Multitask Worker	3 lumpsum	
8.1.16.4	Hospital attendants	2 lumpsum	
8.1.16.5	Sanitary Attendants	4 lumpsum	
9.2.2	Principal	1	
9.2.2	Support Staff	4 lumpsum	F .
14.1.1.2	Pharmacist – SDS	1	
14.1.1.2	Store Assistant - SDS	1	
14.1.1.2	District Pharmacist	1	
14.1.1.2	Peon/Hamal	1 lumpsum	
16.4.1.4.2	State Epidemiologist	1	
16.4.1.4.2	State Microbiologist	1	
16.4.1.4.2	Entomologists	1	
16.4.1.4.6	STS	6	8
16.4.1.5.1	State Epidemiologist	1	
16.4.2.2.2	District Epidemiologists	2	8
16.4.2.3.1	Epidemiologist	1	



### List of Program Management positions under NRHM

Old FMR (FY	Name of the Post	No. of ongoing	New posts
21-22)	Name of the Post	posts 2022	approved
8.1.9.6	Computer Assistants	3 Lumpsum	
8.1.13.22	Technical supervisor	3	
8.1.13.22	Male Supervisor	1	
8.1.13.22	Female supervisor	1	
9.2.2	Consultant	1	
9.2.2	Secretarial Assistant	1	:
9.2.2	Accountant cum Cashier	1	
9.2.2	Computer Assistant	3 Lumpsum	
16.2.1	Legal Assistant	1	
16.2.1	Technical officers	3	
16.2.1	Demographer	3	
16.2.1	Program Coordinator	1	
16.2.1	DEO	3 Lumpsum	7.
16.3.1	Data assistants/ M&E DEOs	33 Lumpsum	
16.4.1.1	Director Finance	1	
16.4.1.1	State Finance Manager	1	
16.4.1.1	Technical Officer (on deputation)	1	8
16.4.1.1	Statistical officer (deputation)	1	
16.4.1.1	LDC Typist (deputation)	1	
16.4.1.3.1	State Programme Manager	1	
16.4.1.3.1	State Accounts Manager	1	
16.4.1.3.1	State Data Manager	1	
16.4.1.3.2	IEC Officer	1	
16.4.1.3.2	Consultants MH	1	
16.4.1.3.2	Consultants CH	1	,
16.4.1.3.2	Consultants School Health	1	
16.4.1.3.2	Consultants ARSH	1	
16.4.1.3.2	State consultant QA	1	
16.4.1.3.4	State Administrative Officer	1	
16.4.1.3.4	Secretarial Assistant	2	



Old FMR (FY	Name of the Door	No. of ongoing	New posts
21-22)	Name of the Post	posts 2022	approved
16.4.1.3.6	Social scientist cum PO (RKSK)	1	
16.4.1.3.6	M&E assistant	1	я
16.4.1.3.6	Data Assistant	1	
16.4.1.3.7	IEC Supervisors	10	
16.4.1.3.8	Accountants	2	
16.4.1.3.10	Computer Assistants	3 Lumpsum	
16.4.1.3.11	Driver	1 Lumpsum	(9
16.4.1.3.12	VCCM	2	ez
16.4.1.4.1	Project Co-ordinator (Viral Hep)	1	
16.4.1.4.2	State Veterinary Consultant	1	+1
16.4.1.4.2	Consultant - Training/ Technical	1	
16.4.1.4.2	Consultant-Finance/ Procurement	1	
16.4.1.4.2	Medical Officers – STC	1	
16.4.1.4.2	State IEC Officer/ ACSM Officer	1	12
16.4.1.4.2	Technical officer	1	7
16.4.1.4.2	APO	1	
16.4.1.4.4	TB HIV Coordinator	1	
16.4.1.4.4	District Program Coordinator	2	E.
16.4.1.4.5	State Data Manager	1	
16.4.1.4.5	Statistical Assistant	1	
16.4.1.4.6	STLS	5	и (
16.4.1.4.7	Accounts Officer/ State Accountant	1	
16.4.1.4.8	Admin. Asst.	1	
16.4.1.4.8	Secretarial asst	1.	
16.4.1.4.9	DEO	10 Lumpsum	
16.4.1.5.2	Consultant - NPPCD	1	2
16.4.1.5.2	Legal/finance consultant	1	é
16.4.1.5.2	Consultant for Climate Change	1	a
16.4.1.5.2	Fin. Cum Logistic Consultant	1	
16.4.1.5.4	State Program Coordinator (MBBS)	1	
16.4.1.5.7	Accounts Staff- NCD	1	
16.4.1.5.7	Administrative Assistant	1	



Old FMR (FY	Name of the Post	No. of ongoing	New posts
21-22)	Traine of the 1 ost	posts 2022	approved
16.4.1.5.8	Administrative Staff	1	
16.4.1.5.9	Data Entry Operation	2 Lumpsum	
16.4.2.1.1	DEIC Manager	2	
16.4.2.1.2	District QA Consultant	2	
16.4.2.1.3	Programme cum administrative assistant (QA)	2	·
16.4.2.1.7	District Accounts Managers	2	
16.4.2.1.8	District Data Manager	2	
16.4.2.1.9	Data entry operator	5 Lumpsum	
16.4.2.2.4	District PPM Coordinator	2	
16.4.2.2.4	PMDT Supervisor	2	
16.4.2.2.5	District data manager	2	
16.4.2.2.7	Accountant	1	
16.4.2.2.9	Data entry operator	5 Lumpsum	7.
16.4.2.2.10	Driver	1 Lumpsum	
16.4.2.3.2	District Consultant	1	
16.4.2.3.2	District Finance cum Logistic Consultant	1	
16.4.2.3.4	District Program Coordinator	1	
16.4.2.3.9	DEO	7 Lumpsum	
16.4.3.1.7	Accountants	12	
16.4.3.1.8	Programme cum administrative assistant QA	1	
16.4.3.3.11	16.4.3.3.11 Monitoring & Evaluation (M&E) Officer- HWC		
16.4.3.3.2	Consultant HWC (MBBS)	0	1

# List of Service Delivery Positions under NUHM

Old FMR (FY 2021- 22)	Name of Posts	No. of Ongoing Posts 2022
U.8.1.1.1	ANM	32



Old FMR (FY 2021- 22)	Name of Posts	No. of Ongoing Posts 2022
U.8.1.2.1	Staff Nurse	4
U.8.1.3.1	Lab technician	4
U.8.1.4.1	U.8.1.4.1 Pharmacists 4	
U.8.1.5.3	Support Staff	4 Lumpsum
U.8.1.8.1.1	Medical Officers - Full Time	4

### List of Program Management Positions under NUHM (Goa)

Old FMR (FY 2021-22)	Name of Posts	No. of Ongoing Posts 2022
U.8.1.10.1	LDC	2 Lumpsum
U.16.4.1.1	Program Coordinator	1
U.16.4.1.1	M&E Officer	1
U.16.4.1.1	Data entry operator	1 Lumpsum
U.16.4.2.1	DAM	12
U.16.4.2.1	DEO	2 Lumpsum



## **Annexure 5: Programme Wise Summary**

## RCH Flexible Pool (including RI, IPPI, NIDDCP)

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount Approved		Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
RCH.1	Maternal Health	1	Village Health & Nutrition Day (VHND)	11.81	11.81	11.8005	11.8005	FY 2022-23 and FY 2023-24:  Activity 1) Ongoing activity; Approved 6667 VHNDs @ Rs. 150/- each VHND (6667 x 150 = 1000050/-)  Activity 2) Ongoing activity; Approved 360 outreach camps @
			Pregnancy Registratio n and Ante-Natal Checkups	14.00	14.00	14.00	14.00	Rs. 500/- each camp (360 x 500 = 180000/-)  Ongoing Activity: Approved Rs. 14.00 lakhs in FY 2022-33 and FY 2023-24.
			Janani Suraksha Yojana (JSY)	3.99	3.99	3.99	3.99	For FY 2022-23 and FY 2023-24 respectively (Rs. 3.99 lakh) details as under:  (1) Under JSY DBT: Rs 3.80 lakh is Approved [i.e. Rs. 3.50 lakh for 500 number of Rural institutional deliveries @ Rs 700 per case; Rs 0.30 lakh for 50 number of Urban institutional deliveries @ Rs 600 per case.  (2) Administrative Expenses: Rs. 0.19 Lakh is Approved JSY administrative expenses as per the Provision of Administrative Expenses in the JSY guidelines [Upto 4 % and 1% of the fund released could be utilized towards administrative expenses for implementation of JSY by the district and state authorities respectively].



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		4	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)	109.10	109.10	109.10	109.10	FY 2022-23 and FY 2023-24:  Activity 1) Approved free Drugs and consumables under JSSK for 12000 deliveries (8,400 normal deliveries + 3,600 C-sections.) @ Rs. 350/- per Normal delivery and C-sections, Total = (Rs.350 x 12000 = Rs. 42,00,000/-)  Activity 2) Ongoing Activity: Approved Rs 3 lakh for procurement of 30000 folic acid strips for pregnant women @ Rs 10/strip  Total = 30000 x 10 = 300000/-  Activity 3) Approved free blood transfusion under JSSK @ Rs. 300/- for 1500 cases (1500 x 300 = 4,50,000/-)  Activity 4) Approved free diagnostics under JSSK @ Rs. 200/-per case for 10000 cases (10000 x 200 = 2000000/-)
ē				2	,	5		Activity 5) Approved Rs. 39.69 lakhs for: (a): Diet services under JSSK @ Rs. 100/- for 3 days for 5850 normal deliveries (5850 x 100 x 3 = 1755000/-) (b): @ Rs. 100/- for 7 days for 3150 C-section deliveries (3150 x 100 x 7 = 2205000/-) (Total = 1755000 + 2205000 = 3960000/-)
8		5	Janani Shishu Suraksha Karyakram (JSSK) -	12.50	12.50	12.50	12.50	FY 2022-23 and FY 2023-24:  Approved Rs. 12.5 lakhs for free transport under JSSK @ Rs. 250/- per PW for 5000 cases (5000 x 250 = 1250000/-)

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
			transport			100		
		6	Pradhan Mantri Surakshit MatritvaA bhiyan (PMSMA)	0.40	0.40	0.40	0.40	FY 2022-23 and FY 2023-24:  Approved Rs. 40000/- for PMSMA sessions at 40 centers @ Rs 250 per session for 4 sessions per year (250 x 40 x 4 = 40000/-)
40		7	Surakshit MatritvaAa shwasan (SUMAN)	0.10	0.10	0.10	0.10	FY 2022-23 and FY 2023-24:  Approved Rs. 10000/as incentive to 1st responder of maternal death under suman @ Rs. 1000/- per death for 10 deaths $(1000 \times 10 = 10000/-)$
		8	Midwifery	0.00	0.00	0.00	0.00	20000/ )
		9	Maternal Death Review	0.49	0.79	0.19	0.79	FY 2022-23 and FY 2023-24:  Activity 1) 4 Quarterly review meeting @ 2500/-each, & incentive for 20 cases to be audited @Rs. 450/- per case for FY 2022-23 & 2023-24
			20					$(2500 \times 4) + (450 \times 20) = 19000/$ <b>Activity 2)</b> for MDSR training for 1 batch of Gynec 20 nos. and1 batch of ANMs 30 nos @ RS 30000/- per batch for FY 2023-24 (30000 x 2 = 60000/- ) State to ensure MPCDSR software orientation for both the districts and its roll out.
			Comprehe nsive Abortion Care	7.30	7.10	7.3	7.1	For FY 2022-23 Rs. 7.3 Lakhs Approved MVA & MMA procurement, MMA Only Training, IEC and Printing.  For FY 2023-24 Rs.7.1 Lakhs Approved MVA & MMA procurement, MMA Only Training, IEC and Printing.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		11	MCH wings	0.00	0.00	0.00	0.00	
		12	FRUs	0.00	0.00	0.00	0.00	*
		13	HDU/ICU - Maternal Health	0.00	0.00	0.00	0.00	
	181 0	14	Labour Rooms (LDR + NBCCs)	0.00	0.00	0.00	0.00	
		15	LaQshya	12.35	16.20	12.35	16.20	For FY 2022-23 and 2023-24:  Activity 1) State dropped the proposal of OT Table at MOT of GMC Goa;  Activity 2) Approved for 3 hand hold foetaldopplers for NGDH && SDH Ponda. Rs. 30000 @ 10000 per hand held foetaldoppler is Approved. However, the state may undertake gap assessment and may hold competitive bidding for value-based procurement process of medical equipment.  Activity 3) Approved training of quality circles @ Rs. 30000/-for one batch (only for FY 2022-23)  (30000 x 1 = 30000/-)  Activity 4) Approved: (a) Rs. 30000/- for state mentoring visits @ Rs. 2500/- per visit for 12 visits  (2500 x 12 = 30000/-)  (b) Rs. 50000/- for DCT mentoring visits @ Rs. 2083.33/- per visit for 24 visits by 2 DCTs  (2083.33 x 24 = 50000/-)  (Total = 30000 + 50000 = 80000/-)

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
-			e v			z a	et j	For FY 2022-23:- 5) LaQshya State certification of three facilities @ Rs. 30,000, Total Rs. 90,000/ 7) For LaQshya incentives lump sum money of Rs 5 Lakhs.
					7			For FY 2023-24:- 6) LaQshya State certification of 2 facilities @ Rs. 30,000/., Total Rs. 60,000/ 8) Incentive for LaQshya certification lump sum money of Rs 10 lakhs.
				*:		5		Note:- State to ensure incentive money to be released after submission of all documents and approval from MoHFW.
								Activity 9) Rs. 1.55 Lakhs Approved for mannequins for Goa Medical College for Mamanatalie, Premenatalie, Babynatalie and Uterus Collection comprising of Mama U and Sister U. However, the state may undertake gap assessment and may hold competitive bidding for value-based procurement process of medical equipment.
			. A					<b>Activity 10)</b> Approved IEC activities, posters ,badges etc @10,000/- per facility for 5 LaQshya identified facilities $(10000 \times 5 = 50000/-)$
8	3		. :					Activity 11) Approved: (i) 50 Labour room registers @ Rs 4000 /- each Total Rs. 2,00,000/- (ii) 2000 case sheets @ Rs 50/- per case sheet for all delivery points total Rs. 1,00,000/- (Total = 200000 + 100000 = 300000/-).  State to get printing done from Govt press or follow the



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
gode	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
					15			best discovered price through tendering process.
		16	Implement ation of RCH Portal/AN MOL/MCT S	6.00	6.00	4.00	4.00	Approved Rs 4.00 Lakh for Training of ANMs on ANMOL and allied application in both FY
		17	Other MH Componen ts	92.48	101.88	78.24	74.94	For FY 2022-23:  Activity 1) Approved 4 dummy pelvis models @ Rs. 4000 for training purpose at 2DHs & 2SDHs Total Rs.4,000 x 2 = Rs. 8,000/- (2 DH in FY 2022-23)  Activity 2) Approved 5000 RPR Kits @ Rs. 30/- per test kit, (Total = 5000 x 30 = 1,50,000/-)  Activity 3) Approved for 60,000 Dual Test Kits (RDT) for HIV and syphilis screening of pregnant women in the state along with spouse testing @ Rs. 25/- per kit, (Total = 60000 x 25 = 15,00,000/-)  Activity 4) (a) Approved 6 batches of SBA trainings @ Rs. 50000/- per batch Total = 50000 x 6 = 300000/- (b) Approved for training in STI/RTI for one batch of 30 ANMs @30000 per batch (Total = 30000 x 1 = 30,000/-)

FMR Code	Program me/ Theme	S. No.	Scheme/ Activity	Amount	Proposed	Amount Approved		GoI Remarks
				FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								(Total = 300000 + 30000 = 330000/-)
								Activity 5) Activity Approved for FY 2023-24
						2		<b>Activity 6)</b> Approved for GDM training for 1 batch for MOs (30 participants) and 1 batch for ANMs @ Rs. 30,000/- per batch for 2 batches (Total = $30000 \times 2 = 60000/-$ )
								<b>Activity 7)</b> Approved for 3 days Dakshata Training for MOs/SNs/ANMs of intervention facilities. For 2 batches of 15 participants training at state level for each district @ Rs. $30000$ /- per batch for 2 batches (Total = $30000 \times 2 = 60,000$ /-)
								Activity 8) DakshataToT For 4 persons @ Rs.50000 each person (Total = 50000 x 4 = 200000/-)
								<b>Activity 9)</b> Not Approved for continuous recurring expense of 29.16 lakhs for Medical Genetic Unit at GMC, Goa.
						-	2	<b>Activity 10)</b> Approved printing of 25,000 MCP Cards @Rs. $50$ /- per card, Total = $25000 \times 50 = 12,50,000$ /-
								State to get printing done from govt press or follow the best discovered price through tendering process.
	é							Activity 11) ApprovedIEC & printing activity as: a) Electronic Media 8 programmes @ Rs.20,000/- per program Total = 20000 x 8 = 1,60,000/- ( Talk shows, interviews, quiz etc.)



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
gode	Theme	•••		FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								b) Newspaper advertisement 12 @ Rs.40,000/- per advertisement  Total = 40000 x 12 = 4,80,000/- (like health tips ,quiz contest etc.)  c) Observance of 37 National Nutrition week programme (PoshanMaah) @ Rs. 2000/- per health unit  Total = 2000 x 37 = Rs.74,000/-
34								d) Cotton bags with message print on it for ANC mothers to carry MCP cards and other IEC material 20,000 begs @Rs.20/per beg (Total = 20000 x 20 = 4,00,000/-)  e) Scroll messages on 5 channels @Rs. 15000/- per channel (Total = 15000 x 5 = 75,000/-)
							- - 1	f) 25,000 colour coded stickers to stick on MCP cards for identifying High risk preganancies under PMSMA @ Rs. 1 per sticker  Total = 250000 x 1 = 25,000/-)  g) Printing of 25000 IEC booklets on Anaemia for ANC women @Rs.4/-per booklet
								(Total = 25000 x 4 = 1,00,000/-)  (Grand Total = 60000 + 480000 + 74000 + 400000 + 75000 + 25000 + 100000 = 1314000/-)  State to get printing done from Govt. press or follow the L1 discovered price through tendering process.



Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
					2023-24	2022-23		Activity 12) Approved IEC wall at the entrance of 6 CHCs where TV, Notice board, suggestion/complaint box, LED board will be displayed. so for 6 CHCs @ Rs.40,000/- (Total = 40000 x 6 = 2,40,000/-)  Activity 13) Approved Performance based awards for health facilities for various initatives like JSSK, JSY, SUMAN, LaQshya, etc, including innovative IEC activities for 4 SCs, 4 UHC/CHC/PHCs, 2 SDH/DH @ Rs.10,000/- per facility (Total = 10000 x 10 = 1,00,000/-)  Activity 14) Approved Quarterly printing of Newsletters which will consist most of the activities of DHS Qty: 100 @ Rs.230/-=Rs. 23,000/- for each quarter for 4 quarters (Total = 230 x 100 x 4 = 92,000/-)  Activity 15) Activity is Approved for FY 2023-24  Activity 16) Approved IEC posters on the Kadamba buses @ Rs. 10,000/- per bus for 40 buses. The posters will be on various initiatives on MH like JSSK, PMSMA, SUMAN, Antenatal care, etc.  Total = 40000 x 10 = 4,00,000/-  Activity 17) Approved:  (a) making & playing of Radio jingles on most heard radio channels @Rs. 3 lakhs per month on qtr basis.  Total = 300000 x 4 = 1200000/-  (b) same jingles will be played at 12 prominent bus stands in the State @ Rs. 1.40 lakhs per month on qtr basis.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount A	Approved	GoI Remarks
Code	Theme		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								students on the topic of safe motherhood and respectful maternity care in public health facilities. Prizes amounting to Rs. 0.50 lakhs and miscellaneous charges which includes showcasing, editing of the films, honorarium for the judges, etc @Rs. 0.50 lakhs. Total cost Rs. 1.00 lakhs. The wining short films will be projected at various public places, cinema theatres@ Rs. 1.00 lakhs on qtr basis. Total cost Rs. 4.00 lakhs. Total = 50000 + 50000 + (4 x 100000) = 500000/-
				20			7.4	For FY 2023-24:
								<b>Activity 1)</b> Approved 4 dummy pelvis models @ Rs. 4000 for training purpose at 2DHs & 2SDHs Total Rs.4,000 x 2 = Rs. 8,000/- (2 SDH in FY 2023-24)
								<b>Activity 2)</b> Approved 5000 RPR Kits @ Rs. 30/- per test kit, (Total = 5000 x 30 = 1,50,000/-)
								<b>Activity 3)</b> for 60,000 Dual Test Kits (RDT) for HIV and syphilis screening of pregnant women in the state alongwith spouse testing @ Rs. $25/$ - per kit, (Total = $60000 \times 25 = 15,00,000/$ -)
	~			20			6	Activity 4) Activity Approved for FY 2022-23
	e a	×			e .			Activity 5) Approved for training in STI/RTI for a batch of 30 Lab Tech @30000 batch Total Rs. 30,000/-
	ø.							<b>Activity 6)</b> Approved for GDM training for 1 batch for MOs (30 participants) and 1 batch for ANMs @ Rs. 30,000/- per batch for 2 batches (Total = $30000 \times 2 = 60000/-$ )



FMR Code	Program me/ Theme	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
				FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		2	9 9	2	e 9			<b>Activity 7)</b> Approved for 3 days Dakshata Training for MOs/SNs/ANMs of intervention facilities. For 2 batches of 15 participants training at state level for each district @ Rs. $30000/$ - per batch for 2 batches (Total = $30000 \times 2 = 60,000/$ -)
						**************************************	g.	Activity 8) Approved DakshataToT For 4 persons @ Rs.50000 each person (Total = 50000 x 4 = 2,00,000/-)
	*	2						<b>Activity 9)</b> Not Approved for continuous recurring expenses of 29.16 lakhs for Medical Genetic Unit at GMC, Goa. <b>Activity 10)</b> Approved printing of 25,000 MCP Cards @Rs. 50/- per card, Total = 25000 x 50 = 12,50,000/- State to get printing done from Govt. press or follow the best discovered price through tendering process.
							2.1	<b>Activity 11</b> ) Approved IEC & printing activity as: a) Electronic Media 8 programmes @ Rs.20,000/- per program Total = 20000 x 8 = 1,60,000/- ( Talk shows, interviews, quiz etc.)
			*				A	b) Newspaper advertisement 12 @ Rs.40,000/- per advertisement Total = $40000 \times 12 = 4,80,000/$ - (like health tips ,quiz contest etc.)
	122			ă.				c) Observance of 37 National Nutrition week programme (PoshanMaah) @ Rs. 2000/- per health unit Total = 2000 x 37 = Rs.74,000/-



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
Gode	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								d) Cotton bags with message print on it for ANC mothers to carry MCP cards and other IEC material 20,000 begs @Rs.20/-per beg (Total = 20000 x 20 = 4,00,000/-)  e) Scroll messages on 5 channels @Rs. 15000/- per channel (Total = 15000 x 5 = 75,000/-)
				a a			-	f) 25,000 colour coded stickers to stick on MCP cards for identifying High risk pregnancies under PMSMA @ Rs. 1 per sticker  Total = 250000 x 1 = 25,000/-)  g) Printing of 25000 IEC booklets on Anaemia for ANC women
	8		e s				8	@Rs.4/-per booklet (Total = 25000 x 4 = 1,00,000/-) (Grand Total = 60000 + 480000 + 74000 + 400000 + 75000 + 25000 + 100000 = 1314000/-)
		12	- B			e.	9	State to get printing done from govt press or follow the best discovered price through tendering process.
		-		2				<b>Activity 12)</b> Approved IEC wall at the entrance of 6 CHCs where TV, Notice board, suggestion/complaint box, LED board will be displayed. so for 6 CHCs @ Rs.40,000/- (Total = $40000 \times 6 = 2,40,000/-$ )
				,	,	2	i.	Activity 13) Approved Performance based awards for health facilities for various initiatives like JSSK, JSY, SUMAN, LaQshya, etc, including innovative IEC activities for 4 SCs, 4 UHC/CHC/PHCs, 2 SDH/DH @ Rs.10,000/- per facility (Total = 10000 x 10 = 1,00,000/-)

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								Activity 14) Approved Quarterly printing of Newsletters which will consist most of the activities of DHS Qty: 100 @ Rs.230/-=Rs. 23,000/- for each quarter for 4 quarters (Total = 230 x 100 x 4 = 92,000/-)  Activity 15) Approved Rs.1.80 lakhs for registration counters with MH branding in 18 Health centres @ Rs. 10000/- per registration counter (Total = 10000 x 18 = 1,80,000/-)  Activity 16) Approved IEC posters on the Kadamba buses @ Rs. 10,000/- per bus for 40 buses. The posters will be on various initiatives on MH like JSSK, PMSMA, SUMAN, Antenatal care, etc.  Total = 40000 x 10 = 4,00,000/-  Activity 17) Approved: (a) making & playing of Radio jingles on most heard radio channels @Rs. 3 lakhs per month on qtr basis.  Total = 300000 x 4 = 1200000/-  (b) same jingles will be played at 12 prominent bus stands in the State @ Rs. 1.40 lakhs per month on qtr basis.  Total = 140000 x 4 = 420000/-  Activity 18) Approved short film competition for fine arts students on the topic of safe motherhood and respectful maternity care in public health facilities. Prizes amounting to Rs. 0.50 lakhs and miscellaneous charges which includes showcasing, editing of the films, honorarium for the judges, etc @Rs. 0.50 lakhs. Total cost Rs. 1.00 lakhs. The wining short films will be projected at various public places, cinema



Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
				9		:	theatres@ Rs. 1.00 lakhs on qtr basis. Total cost Rs. 4.00 lakhs. Total = 50000 + 50000 + (4 x 100000) = 500000/-
	-						
	18	State specific Initiatives and Innovation s	0.00	0.00	0.00	0.00	
PC & PNDT Act	19	PC & PNDT Act	12.21	15.00	12.21	15.00	Rs12.21 Lakhs may be Approved financial year (2022-23) as per details below:
Title 2		e e	e:		ø	E E	<ul> <li>Rs.5.3 lakhs for Planning &amp; Monitoring and Evaluation</li> <li>Rs 5.33 lakhs for IEC activities and printing</li> <li>Rs 0.08 lakhs for others including operating costs (OOC)</li> <li>Rs. 0.50 lakhs for Surveillance, Research, Review, Evaluation (SRRE)</li> <li>Further, 15 Lakhs may be Approved financial year (2023-24)</li> </ul>
	20	Gender Based Violence & Medico Legal Care For Survivors Victims of	0.00	0.00	0.00	0.00	
	me/ Theme  PC & PNDT Act	me/ No. Theme 18	Theme  18 State specific Initiatives and Innovation s  PC & PNDT Act  20 Gender Based Violence & Medico Legal Care For Survivors	Theme  No. Activity FY 2022-23   18 State specific Initiatives and Innovation s  PC & PNDT Act  20 Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual	Theme  No. Activity FY 2022-23  18 State specific Initiatives and Innovation s  PC & PNDT Act  19 PC & PNDT Act  20 Gender Based Violence & Medico Legal Care For Survivors Victims of Sexual	No.   Activity   FY   2022-23   2023-24   2022-23	No.   Activity   FY   FY   FY   2022-23   2023-24   2022-23   2023-24



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
RCH.3	Child Health	21	RashtriyaB alSwasthy aKaryakra m (RBSK)	102.25	104.25	93.60	93.60	Approved FY 22-23 for a sum of Rs. 93.6 lakh towards (1) Mobility support for RBSK Mobile health team for 15 for MHT @ Rs 25000/pm – Rs. 45 lakh (2) Replenishment of equipments for 15 RBSK Mobile Health Teams Rs. 0.75 lakh (3) Printing of RBSK Cards and registers for MHT– Rs 21.75 lakh (4) RBSK Convergence meeting cum review meeting – R 0.1 lakh (5) ECD Call Centre – Rs. 26 lakh  FY 23-24 for a sum of Rs. 93.6 lakh towards (1) Mobility support for RBSK Mobile health team for 15 for MHT @ Rs 25000/pm – Rs. 45 lakh (2) Replenishment of equipments for 15 RBSK Mobile Health Teams Rs. 0.75 lakh (3) Printing of RBSK Cards and registers for MHT– Rs 21.75 lakh (4) RBSK Convergence meeting cum review meeting – Rs. 0.1 lakh (5) ECD Call Centre – Rs. 26 lakh
								Shift (1) Rs. 5.5 lakh Referral support for sec/ter care (2) Rs. 1.42 lakh training for CNS and 1000 days (3) Rs. 0.125 lakh CNS guidelines shifted from RCH.3.21 to RCH.3.22
			RBSK at Facility Level including District Early Interventi on Centers (DEIC)	38.46	36.34	26.035	8.055	Approved for FY 22-23 for a sum of Rs. 26.035 lakh towards  Referral Support for Secondary/ Tertiary care – Rs. 5.5 lakh (2) Operational cost for 2 functional DEIC for internet and data card– Rs. 1.43 lakh (3) CNS guidelines @ Rs. 250 for 5 books – Rs. 0.125 lakh (4) Desktop for 2 DEIC – Rs. 1.6 lakh (5) Training - Rs 0.60 for 1 batch for MOs , Rs 0.30 for 1 batch for ANM @, Rs 0.26 for 1 batch of CNS training for MOs, Rs 0.26 for 1 batch of first 1000 days training for MOs – Rs. 1.42 lakh (6) Printing of DEIC registers for 2 functional DEIC – Rs. 1 lakh (7) Purchase of DEIC equipment for South Goa DEIC – Rs. 8.92 lakh & North Goa DEIC – Rs. 2.1 lakh totalling - Rs. 11.02 lakh (8) Specialized tools for assessment and management of the



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								children with Autism for both DEIC – Rs. 1 lakh (9) Training for strengthening DEIC – (a) Developmental Assessment Scale for Indian Infants (DASII) (b) BayleyScale's of Infant Development (BSID) (c) DEST 2 and DST JR (d) Refresher Training for DEIC staff –Rs. 2.94 lakh  FY 23-24 for a sum of Rs. 8.055 lakh towards (1) Referral Support for Secondary/ Tertiary care – Rs. 5.5 lakh (2) Operational cost for 2 functional DEIC for internet and data card– Rs. 1.43 lakh (3) CNS guidelines @ Rs. 250 for 5 books – Rs. 0.125 lakh (4) Printing of DEIC registers for 2 functional DEIC– Rs. 1 lakh  Note: State to ensure that the DEIC Equipments are in line with the GoI DEIC guidance document  Shift (1) Rs. 5.5 lakh Referral support for sec/ter care (2) Rs. 1.42 lakh training for CNS and 1000 days (3) Rs. 0.125 lakh CNS guidelines shifted from RCH.3.21 to RCH.3.22
	3	23	Communit y Based Care - HBNC & HBYC	3.96	3.96	0.00	0.00	Not Approved. HBNC/HBYC programme not implemented in Goa.
		24	Facility Based New born Care	12.91	13.42	17.96	17.96	Rs. 0.30 lakh Approved FBNC training for MOs Rs. 0.40 lakhs Approved training under MusQan. For FY 2022- 23 & 2023-24  Rs. 10.61 lakh Approved (a) Operational cost for SNCU and NBCC and (b) MusQan assessment and mobility support for MusQan.
								Rs. 9 lakh Approved SNCU Opex,

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount Approved		GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								Rs. 0.42 lakhs Approved MusQan and Rs. 0.40 lakhs Approved mobility support under MusQan as proposed by the State. For FY 2022-23 & 2023-24  Approved Rs. 1 Lakh as proposed by State for Operational Cost of 1 functional NBSU including Data management, Stationary etc for the year 2022-23 and 2023-24.  Rs. 1 lakh Approved printing works SNCU, Rs. 0.20 lakhs Approved printing under MusQan, Rs. 0.10 lakh Approved foam boards on Newborn care to display at 10 delivery points and 2 SDH, 2 DHs Rs.0.10 lakhs. For FY 2022-23 & 2023-24.  Shifted from RCH.3.27 Rs. 0.30 lakh Approved NSSK training for Staff Nurses/MOs/ANMs. Rs. 0.25 lakh Approved printing of NSSK training modules. Shifted from RCH.3.30 Rs. 4.5 lakh Approved IEC/BCC activities for National Newborn week. For FY 2022-23 & 2023-24 as proposed by the State. State to follow GoI National New-born Week guideline and book the expenditure as per actual.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount A	Approved	GoI Remarks
Goue	Theme			FY	FY	FY	FY	
				2022-23	2023-24	2022-23	2023-24	
		25	Child Death Review	1.88	1.88	1.88	1.88	Approved Rs. 1 .88 Lakh as proposed by State for Child Death Review for the year 2022-23 and 2023-24 as per below details:
	48						_ *	1. Rs. 0.60 Lakh for CDR training cum orientation of Health Officers and ANMs @ Rs. 30,000 per batch for 2 batches
						u u		2. Rs. 0.15 Lakh for printing of CDR formats as per CDR guideline based on State proposal.
							10	3. Rs. 1.13 Lakh for CDR mechanism considering State will review all facility and community level deaths as per guidance.
		26	SAANS	1.65	1.65	1.65	1.65	Approved Rs. 1 .65 Lakh as proposed by State for Capacity Building and printing of Modules, leaflet under SAANS for the year 2022-23 and 2023-24 as per below details:
	¥ .						e e	1. Rs. 0.60 Lakh for SAANS training cum orientation of MOs and SNs @ Rs. 30,000 per batch for 2 batches
			8			ā		2. Rs. 0.05 Lakh for printing of SAANS training modules (50 modules @ Rs. 100 each) based on State proposal.
			84		9			3. Rs. 1.0 Lakh for printing of leaflets on SAANS program (1 Lakh leaflet @ Rs. 1) each) as per State proposal.
		27	Paediatric Care	1.15	1.15	0.6	0.6	Approved Rs. 0.60 Lakh for 1 batch of IMNCI and 1 batch of F-IMNCI @ Rs. 0.30 Lakh each for the year 2022-23 and 2023-24.
			a.					NSSK training and NSSK module printing shifted to RCH.3.24 (Rs. 0.55 lakh)



FMR Code	Program me/	S. No.	CONTRACTOR OF THE PERSON NAMED OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED I	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		28	Janani Shishu Suraksha Karyakram (JSSK) (excluding transport)	11.24	11.24	10.00	10.00	Rs. 10 lakh Approved JSSK drugs, diagnostics and consumables for 2000 sick infants up to one year. For FY 2022-23 & 2023-24  The budget is indicative and State to follow Gol JSSK Guidelin and book the expenditure as per actual.
		29	Janani Shishu Suraksha Karyakram (JSSK) - transport	0.00	0.00	0.00	0.00	
			Other Child Health Componen ts	17.54	17.54	4.75	4.75	Approved Rs. 4.75 Lakhs for IEC/BCC activities for SAANS Program for the year 2022-23 and 2023-24 as per below details:  (a) Electronic Media 8 programmes @ Rs.20,000/-=Rs.1,60,000/-(like talk shows, interviews, quiz etc), (b) Newspaper advertisement 6 @ Rs.40,000/-=Rs.2,40,000/-(like Health tips, quiz, advertisements etc.), (c) Scroll messages on 5 channels @Rs. 15,000/-=Rs.75,000/-
							-	<b>Shifted to RCH.3.57:</b> State, District & Peripheral level IEC activities on IDCF @ Rs. 2,25,000/- and Orientation & Sensitisation activities on IDCF @ Rs. 52500/- (35 units @ Rs. 1500);
								National New-born week activity shifted to RCH.3.24 (Rs. 4.5 lakh)
			al FV 2022-22 & F	-	,			Not Approved for Rs. 5.71 lakhs for Breastfeeding week and



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount A	Approved	GoI Remarks
Couc	Theme	NO.		FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
							10	MAA activities and Nutrition booklet.
	207		13					
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				17				
		31	State specific Initiatives and Innovation s	1.60	0.60	0.00	0.00	Not Approved no details provided in the PIP.
RCH.4	Immuniz ation	32	Immunizat ion including Mission Indradhan ush	71.66	56.66	70.81	55.81	Approved Rs. 70.81 lakhs for the FY 2022-23 and Rs. 55.81 lakhs for the FY 2023-24. Approval for 1 tab at state level and 1 scanner cum printer for has been shifted under programme management (Sr No 194)
		33	Pulse polio Campaign	10.34	10.34	10.34	10.34	Approved Rs. 10.34 lakhs for both the years as proposed by the state

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	1) ;; ) 2
		34	eVIN Operationa l Cost	19.19	19.52	18.19	18.52	Approved Rs. 18.19 lakhs for the FY 2022-23 and Rs. 18.52 lakhs for the FY 2023-24. Laptop maintenance cost, cost for mobile handset and internet for CCH not Approved as per new norms.
RCH.5	Adolesce nt Health	35	Adolescent Friendly Health Clinics	9.26	7.61	9.26	7.61	Approved FY 2022-23 a) Establishment of 5 new AFHCs at PHC level @Rs 2500 per AFHC (Under Infrastructure) b)2 days training of 1 batch of MOs on AFHS @Rs 60000, 2 days training of 1 batch of ANMs on AFHS @Rs 60000 (Under Capacity Building) c) Operating cost of 34 existing AFHCs @Rs 2500 per annum per AFHC (Under Operational Cost) d) Printing of AFHC IEC, training materials, AFHC registers @Rs 50000 per district (Under IEC and Printing) e) Mobility support to 34 AH Counsellors @Rs 250 per visit for 2 outreach visits in a month and for 2 state coordinators @Rs 500 per visit for 2 visits in a month for a year (Under Planning and M&E) f) RKSK review workshops on a quarterly basis at state level @Rs 30000 per meeting (Under Planning and M&E) g) Establishment of 2 M-AFHCs at DH in 2 districts @Rs 100000 per M-AFHC
2			al FY 2022-23 & F					Approved FY 2023-24 a)2 days training of 1 batch of MOs on AFHS @Rs 60000, 2 days training of 1 batch of ANMs on AFHS @Rs 60000, 2 days training of 1 batch of AH Counsellors @Rs 60000 (Under Capacity Building) b) Operating cost of 34 existing AFHCs @Rs 3500 per annum per AFHC and 5 new AFHCs @Rs 2700 per annum per AFHC



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								(Under Operational Cost) d) Printing of AFHC IEC, training materials, AFHC registers @Rs 50000 per district (Under IEC and Printing) e) Mobility support to 34 AH Counsellors @Rs 250 per visit for 2 outreach visits in a month and 2 state coordinators @Rs 500 per visit for 2 visits in a month for a year (Under Planning and M&E) f) RKSK review workshops on a quarterly basis at state level @Rs 30000 per meeting (Under Planning and M&E)
		36	Weekly Iron Folic Supplemen t (WIFS)	48.18	48.52	44.02	44.33	a) Contingency charges for IFA supplies 5 times a year @ Rs. 2000/- each time (Under Diagnostics) b) 1 day training of 1 batch of Health officials @Rs 30000 and orientation of teachers, ASHAs, AWWs on WIFS at 34 health centers @Rs 3000 per center (Under Capacity Building) c)Printing of WIFS IEC Material and reporting formats @Rs 50000 per district (Under Printing and IEC) d) Procurement of 8320000 Blue IFA tablets @Rs 0.50 per tablet for 52 weeks to cover 160000 beneficiaries (Under Drugs and Supplies)
			9					Albendazole tablet procurement has been budgeted under NDD. State to ensure provision of both tablets to all target beneficiaries  Approved FY 2023-24 a)Contingency charges for IFA supplies 5 times a year @ Rs. 2000/- each time (Under Diagnostics) b) 1 day training of 1 batch of Health officials @Rs 30000 and
a)		-	·					orientation of teachers, ASHAs, AWWs on WIFS at 34 health centers @Rs 3000 per center (Under Capacity Building) c)Printing of WIFS IEC Material and reporting formats @Rs 50000 per district (Under Printing and IEC)

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								d)Procurement of 8382400 Blue IFA tablets @Rs 0.50 per tablet for 52 weeks to cover 161200 beneficiaries (Under Drugs and Supplies)  Albendazole tablet procurement has been budgeted under NDD. State to ensure provision of both tablets to all target beneficiaries
		37	Menstrual Hygiene Scheme (MHS)	10.39	10.92	6.03	6.29	Approved FY 2022-23 a)Procurement of 10 sanitary napkins per month per beneficiary for 12 cycles in a year for the target 1627 adolescent girls @ Rs.2 as normative cost per napkin (Under Drug &Supplies) b)Contingency charges for sanitary napkins distribution 5 times a year @ Rs. 2000/- each time (Under Diagnostics) c) 1 day training of 1 batch of health officials on MHS @Rs 30000 and training of AWWs, ASHAs, Teachers in 4 batches @Rs 10000 per batch (Under Capacity Building) d) Printing of MHS IEC, training materials and reporting formats @Rs 50000 per district (Under Printing and IEC)
								Approved FY 2023-24 a) Procurement of 10 sanitary napkins per month per beneficiary for 12 cycles in a year for the target 1727 adolescent girls Rs.2 as normative cost (Under Drug &Supplies) b) Contingency charges for sanitary napkins distribution 5 times a year @ Rs. 2000/- each time (Under Diagnostics) c) 1 day training of 1 batch of health officials on MHS @Rs 30000 and training of AWWs, ASHAs, Teachers in 4 batches @Rs 10000 per batch (Under Capacity Building) d) Printing of MHS IEC, training materials and reporting formats @Rs 50000 per district (Under Printing and IEC)



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
0040	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		38	Peer Educator Programm e	40.04	41.48	40.04	41.38	a)2 days training of 40 batches of new PEs from both districts @Rs 60000 per batch (Under Capacity Building) b) Non-financial incentives to 1200 new PEs from both districts @Rs 50 per month for 12 months (Under Operating Cost) c) Printing of PE kits and diaries for 1200 PEs in 2 districts @Rs 200 per Kit and printing of PE IEC and training materials @Rs 50000 per district (Under Printing and IEC) d) Organisation of AFC at 34 health centers @Rs 500 per month for 12 months (Under Planning and M&E) e) Organisation of 136 AHWDs at 34 health centers @Rs 2500 per AHWD for 4 quarters in a year (Under Planning and M&E)  Approved FY 2023-24 a) 2 days training of 40 batches of new PEs from both districts @Rs 60000 per batch (Under Capacity Building) b) Non-financial incentives to 1200 new PEs from both districts @Rs 60 per month for 12 months (Under Operating Cost) c) Printing of PE kits and diaries for 1200 PEs in 2 districts @Rs 175 per kit and printing of PE IEC and training materials @Rs 50000 per district (Under Printing and IEC) d) Organisation of AFC at 34 health centers @Rs 500 per month for 12 months (Under Planning and M&E) e) Organisation of 136 AHWDs at 34 health centers @Rs 2500 per AHWD for 4 quarters in a year (Under Planning and M&E) f) Award and recognition for good performing PEs in 2 PE districts @Rs 10000 per district (Under Planning and
		39	School	5.20	2.80	5.20	2.80	M&E) Approved FY 2022-23
			Health And Wellness					a) Printing of merchandise for HWM and HWA @Rs 150000 per district for 2 SHWP districts (Under Printing and IEC)



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
			Program under Ayushman Bharat					b) Printing of IEC materials for schools @Rs 50000 per distrifor 2 SHWP districts (Under Printing and IEC) c) Quarterly SHWP coordination meetings at state level @Rs 30000 per meeting (Under Planning and M&E)  Approved FY 2023-24 a) Printing of merchandise for HWM and HWA @Rs 30000 per district for 2 SHWP districts (Under Printing and IEC) b) Printing of IEC materials for schools @Rs 10000 per district for 2 SHWP districts (Under Printing and IEC) c) Quarterly SHWP coordination meetings at state level @Rs 30000 per meeting (Under Planning and M&E) d) Award and recognition for good performing HWAs in 2 SHWP districts @Rs 8000 per district (Under Planning and M&E) e) Refresher training of HWAs and Principals in 2 SHWP districts @Rs 32000 per district (Under Capacity Building)
		40	Other Adolescent Health Componen ts	1.95	2.05	0.00	0.20	Approved FY 2022-23  a) Approval shifted under sl no 194  Approval shifted under sl no 194  Approval shifted under sl no 194  b) Half day sensitisation workshop for staff of 2 M-AFHCs @Rs 10000 per M-AFHC (Under Capacity Building)
			State specific Initiatives and Innovation s	8.40	8.82	8.40	8.82	Approved FY 2022-23 a) Organisation of 34 IEC/BCC activities (Folk troupes) on RKSK @Rs 10000 per year (Under IEC and Printing) b) Celebration of National Youth Day through Cyclothon/Marathon/Walkathon in 2 districts @Rs 100000 per district (Under IEC and Printing) c) Airing of 20 TV Shows (Yuva Health) in a year on local TV channels @Rs 10000 per TV show (Under IEC and Printing) d) Promotion of Social Media activities on RKSK @Rs 100000



FMR Code	Code me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
Gode	Theme		, ,	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								for a year (Under IEC and Printing)  Approved FY 2023-24 a) Organisation of 34 IEC/BCC activities (Folk troupes) on RKSK @Rs 10000 per year (Under IEC and Printing) b) Celebration of National Youth Day through Cyclothon/Marathon/Walkathon in 2 districts @Rs 100000 per district (Under IEC and Printing) c) Airing of 20 TV Shows (Yuva Health) in a year on local TV channels @Rs 10000 per TV show (Under IEC and Printing) d) Promotion of Social Media activities on RKSK @Rs 100000 for a year (Under IEC and Printing) e) Organisation of 3 day youth festival at 2 M-AFHCs @Rs 21000 per M-AFHC (Under IEC and Printing)
RCH.6	Family Planning	42	Sterilizatio n - Female	18.48	6.23	18.48	6.13	1). Approved Rs.5.55 lakhs under DBT as compensation to beneficiary for female sterilization @ ₹.650 per case for APL for 700 cases and @ ₹.1000 per case for BPL for 100 cases.  2). Approved Rs.12.25 lakhs under Equipment (Including Furniture, Excluding Computers) for 1 Laparoscope for Goa Medical College @ Rs. 12,00,000/- and 1 Laparoscopic trolley for Goa Medical College @ Rs. 25,000/- (FY 2022-23 only)  3). Approved Rs.0.50 Lakhs under Capacity building incl. training for Laparoscopic sterilization training for 2 candidates for 12 days @ ₹ 25000/- per candidate.  4). Approved Rs.0.18 Lakhs under IEC & Printing for 15 Reference Manual for female sterilization manuals @ ₹ 1200 per manual  Total amount approved- Rs.18.48 lakhs Approved under Sterilization Female for FY 2022-23 (Amount Approved for FY

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
							SP	2023-24- Rs. 6.13 lakhs)
						4		
		43	Sterilizatio	0.60	0.15	0.60	0.15	1). Approved Rs. 0.15 lakhs under DBT as compensation to
			n - Male					beneficiary for male sterilization @ ₹.1500 per case for 10 cases.
		2						2). Approved Rs. 0.20 lakhs under Equipment (Including Furniture, Excluding Computers) for 10 NSV Kits @ ₹ 2000 per kit (FY 2022-23)
							1	3). Approved Rs.0.25 Lakhs under Capacity building incl. training for 1 Batch of 4 surgeons for 3 day TOT on NSV in the State @ Rs. 25,000/- for 1 batch (FY 2022-23)
			al FY 2022-23 & F				/* a	Total amount approved- Rs 0.6 lakhs Approved under Sterilization male for FY 2022-23 (Amount Approved for FY 2023-24- Rs.0.15 lakhs)



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount A	Approved	GoI Remarks
Goue	Theme	1101	Accession	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		44	IUCD Insertion (PPIUCD and PAIUCD)	1.66	1.50	1.84	1.58	<ul> <li>1). Approved Rs.0.60 Lakhs under DBT for:</li> <li>a) Approved ₹ 0.42 lakh as compensation for PPIUCD insertion to the beneficiary @ ₹ 300/PPIUCD Insertion for 140 cases b) Approved ₹ 0.18 lakh as compensation for PAIUCD insertion to the beneficiary @ ₹ 300/PAIUCD Insertion for 60 cases</li> <li>2). Approved Rs.0.16 lakhs under Equipment (Including Furniture, Excluding Computers) for 20 PPIUCD forceps @ ₹ 800 per forceps (FY 2022-23).</li> <li>3). Approved Rs.0.50 Lakhs under Capacity building incl. training for 2 batches of MOs @ Rs 25,000/- per batch for 3 day PPIUCD Training with a batch size of 10 participants per batch.</li> </ul>
								4). Approved Rs. 0.3 Lakhs under ASHA incentive:  a) Approved ₹ 0.21 lakh as ASHA incentive for PPIUCD insertion @ ₹ 150 per PPIUCD insertion for ANM/ MPHA motivating the beneficiary for PPIUCD insertion for 140 cases. b) Approved ₹ 0.09 lakh as ASHA incentive for PAIUCD insertion @ ₹ 150 per PAIUCD insertion for ANM/ MPHA motivating the beneficiary for PAIUCD insertion for 60 cases 5). Approved Rs.0.28 Lakhs under IEC & Printing:  a). Approved Rs.0.10 Lakh for 1000 IUCD cards @ ₹ 10 per card b). Approved Rs. 0.18 Lakhs for 15 Reference Manual for IUCD services @ ₹ 1200 per manual (This budget head has been shifted from 49 - other FP components)



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		-						Total amount - Rs. 1.84 lakhs Approved under IUCD insertion for FY 2022-23 (Amount Approved for FY 2023-24- Rs. 1.58 lakhs)
		44	ANTARA	1.30	1.30	1.3	1.3	1) Approved Rs.1.20 Lakhs under Capacity building incl. training: a) Approved Rs.0.60 Lakhs for Training of MOs on Injectable Contraceptive for 2 batches @ Rs. 30,000/- per batch (20 MOs for 1 day per batch). b) Approved Rs.0.60 Lakhs for Training of Nurses (Staff Nurse/LHV/ANM) on Injectable Contraceptive for 2 batches @ Rs. 30,000/- per batch (25 participants for 1 day per batch) 2). Approved Rs. 0.10 Lakhs under IEC & Printing for 1000 MPA cards @ ₹ 10 per card:
			*				×	Total amount - Rs. 1.30 lakhs Approved under Antara Program for FY 2022-23 (Amount Approved for FY 2023-24- Rs. 1.30 lakhs)
			MPV(Missi on ParivarVik as)	0.00	0.00	0	0	
			Family Planning Indemnity Scheme	3.00	3.00	3.00	3.00	1). Approved Rs. 3 Lakhs under DBT for Family Planning Indemnity Scheme.  Total amount - Rs.3.00 lakhs Approved under FPIS for FY 2022-23 (Amount Approved for FY 2023-24- Rs. 3.00 lakhs)
NUM 4			FPLMIS al FY 2022-23 & F	3.65	1.20	3.66	0.79	1). Approved Rs. 0.60 Lakhs under Capacity building incl. training for training of ANMs/DEOs on FPLMIS for two batches @ ₹30000 per batch (25 participants for 2 day per batch).



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
Couc	Theme	110.	neuvies	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								2). Approved Rs. 2.30 Lakhs under Others including operating costs (OOC) (FY 2022-23)  a) Store Racks (to store the contraceptive commodities) (5 x ₹ 20000) = ₹ 1,00,000/- b) Table for store keeper (1 x ₹20000) = ₹ 20,000/- c) Chair for store keeper (1 x ₹5000) = ₹ 5,000/- d) Trolly to lift the boxes (1x ₹20000) = ₹ 20,000/- e) Not Approved Tab for indenting/issuing stock (1 x ₹ 15000) = ₹ 15,000/- f) Pedestal Fan for store keeper (1x ₹5000) = ₹ 5,000/- g) PC/Computer + Printer with scanner for FPLMIS application (1 x ₹80000) = ₹ 80,000 TOTAL ₹ 2,45,000/- 3) Approved Rs. 0.59 Lakhs under IEC & Printing for 37 FPLMIS manuals @ ₹ 1600 per manual
	19		-				=	Total amount - Rs.3.49 lakhs Approved under FPLMIS for FY 2022-23 (Amount Approved for FY 2023-24- Rs. 0.79 lakhs)
	×	48	World Population Day and Vasectomy fortnight	3.66	3.66	3.66	3.66	1) Approved Rs. 3.66 Lakhs under IEC & Printing a). Approved Rs. 2.00 Lakhs under WPD - @ Rs. 4500/- facility for 37 centres + Rs. 34,000/- at state level b). Approved Rs. 1.66 Lakhs under Vasectomy Fortnight - @ Rs 3000/- per centre for 27 centres plus Rs. 5000/- for 2DH, 2SDH & 7 PHC/UHC & Rs 30000/- for state level activities
12								Total amount- Rs. 3.66 lakhs Approved under World Population Day and Vasectomy fortnight for FY 2022-23 (Amount Approved for FY 2023-24- Rs. 3.66 lakhs).



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
	Theme	49	Other Family Planning Componen ts	The Party of the P		Control of the last of the las		1). Approved Rs. 2.60 Lakhs under Capacity building incl. training  a) Approved Rs. 0.80 Lakhs under Orientation of ANM/AWW on FP program updates @ ₹ 2000/- for 40 centres b) Approved Rs. 0.60 Lakhs under Dissemination of FP manuals and guidelines - 2 Batches (One batch per district) @ ₹ 30000/- per batch of 25-30 participants for 1 day (Team of MO incharge/HO & LHV/PHN/ANM) c) Approved Rs. 1.20 Lakhs under Training of RMNCH+A/FP Counsellors on Reference manual for Integrated RMNCAH+N counselling for 2 batches of 25 participants for 6 day training total cost @ Rs. 60,000/- per batch  2). Approved Rs. 9.79 Lakhs under IEC & Printing a). Approved Rs. 8.00 Lakhs under Electronic Media 4 programmes @ Rs.20,000/- =Rs.80,000/- (like Talk shows, quiz, interviews etc), Newspaper advertisment 6 @ Rs.40,000/- = Rs.2,40,000/-(like health tips, quiz, advertisements etc.), Advertisement on Bus shelter @ Rs.12,000/- / month for 1 month for 10 bus shelters @Rs.1,20,000/-, Billboard Advertisement on FP @ Rs. 1,20,000/- per month for 3 months=Rs.3,60,000/-
								b). Approved Rs. 0.45 Lakhs for 45,000 Leaflets on FP @ Rs.1/- Total Rs. 45,000/- c). State has proposed Rs. 0.18 Lakhs for 15 Reference Manual for IUCD services @ ₹ 1200 per manual (This budget head has been shifted to budget head 44 - IUCD insertion PPIUCD and PAIUCD) d). Approved Rs. 0.74 Lakhs for 37 Integrated manual on RMNCAH+N Counselling @ ₹ 2000 per manual, (FY 2022-23) e). Approved Rs. 0.60 Lakhs for 300 MEC wheels @ ₹ 200 per



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
Gode	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								wheel (FY 2022-23) 3) Approved Rs. 0.40 Lakhs under Planning & M&E for total 10 meetings (8 meetings at district level on quarterly basis @ Rs 4000/- per meeting per district per quarter and 2 meeting biannually at state level @ Rs 4000/- per meeting) 4) Approved Rs 1.30 lakhs for installation of the condom boxes at 260 subcentres+40 health centres (total 260 centres) @ Rs 500/box; 500*260=Rs.1.30 lakhs
						9		Total amount: Rs. 14.09 lakhs Approved under Other FP components for FY 2022-23. (Amount Approved for FY 2023-24- Rs. 12.75 lakhs).
	Ŧ.	50	State specific Initiatives and Innovation s	0.00	0.00	0.00	0.00	
RCH.7	Nutrition	51	AnaemiaM ukt Bharat	125.07	78.97	123.97	123.97	Procurement (2022-23-24) Procurement for Pregnant women is done by State Government Approved Rs 26.13 lakhs for the procurement of 209000 IFA syrup (50ml bottle) for 2 bottle/child for the 95000 children (6-60 months) @ Rs 12.50/bottle Approved Rs 26.60 lakhs for the procurement of 5319600 IFA pink cosated sugar tablet for the 93000 children (5-10 year) @ Rs 0.50/tablet Approved Rs 46.10 lakhs for the procurement of 9220640 IFA blue tablet for the 160000 children (10-19 years) @ Rs 0.50/tablet Approved Rs 3 lakhs for the procurement of 30000 Folic acid tablets @Rs 10/- per strip for pregnant women. (Shifted

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount Proposed		Amount Approved		Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								from Sr.No 4 under RCH 1) ASHA Incentives (2022-23-24) Anaemia prevalence in the State has increased in WRA (from 31.4% to 39%) as per NFHS-5. The State to ensure mobilising WRA in the State by leveraging VHSND Anaemia prevalence in the State has increased in the children (6-59months) (from 48.3% to 53.2%) as per NFHS-5. The State to ensure the IFA supplementation and reporting Orientation and Capacity Building(2022-23-24) Approved Rs. 0.90 lakhs for training 3 batches of AMB @Rs. 0.30 per batch for MOs, ANMs, SNs. IEC/BCC and Printing (2022-23-24) Approved Rs 21.24 lakhs for IEC/BCC Approved for the Rs. 17.59 lakhs under printing of compliance cards & reporting formats under AMB (Rs. 14.59 for compliance cards & reporting formats & Rs. 3.00 lakhs for guidelines & Training materials) Approved Rs 1.60 lakhs for 1800 posters for Schools + 1300 posters for AWCs+500 for Health Centres , so total 3600 X 2 types=7200(round 8000) 8000 paper posters @Rs.20/-Approved Rs 0.05 lakhs for Anemia Counselling Cards for RMNCH+A counsellors& EE 100 Qty @Rs.50 Approved Rs 1 lakh for 4 Exhibition set to display at SDHs/DHs and can be moved to periphery Approved Rs 1 lakh for State level competition / rally/walkathon on AMB during POSHAN Maah @Rs.1,00,000/ As per NPCC discussion, Not Approved for receipebookelt, Slipstickers, Dialouge card adn placard on AMB
	5	]	National Dewormin g Day	17.99	17.99	17.89	17.89	Procurement (2022-23-24) Approved Rs 2.72lakhs for the procurement of 209000 albendazole tablets for 2tablets/year for the 95000 children aged(1-5 years) @ Rs 1.30/tablet for NDD Approved Rs 2.66lakhs for the procurement of 204600



FMR Program Code me/	S. No.	Scheme/ Activity	Amount	Amount Proposed		Approved	GoI Remarks	
Couc	Theme		-33	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								albendazole tablets for the 93000 <b>children aged (5-10 years)</b> @Rs 1.30/ tablet for NDD Approved Rs 4.57 Lkahs for the procurement of 352000 albendazole tablets for the 160000 <b>children aged (10-19 years)</b> @Rs 1.30/tablet for NDD <b>Diganostic (2022-23-24)</b> As per NPCC discussion, Not Approved for labour charges for loading/unloading of supplies (5times/year) @ Rs 2000 each time
	O'A							Capacity building and training (2022-23-24) Approved Rs 2.04 lakhs for the teachers, AWW and oter stakeholders for the 2 rounds of NDD programe in all 34 health centres @60 participants per Health centred @ Rs 50/participant (Rs 50*60*34*2 rounds) IEC/Printing (2022-23-24) Approved Rs 4 lakhs Approved Rs 1 lakh for the printing of NDD IEC material and related formats @Rs 50000/district for 2 district Approved Rs 3 lakhs for newspaper advertisement of NDD @ Rs 1.5 lakh per NDD for 2 rounds of NDD Planning and M&E (2022-23-24) Approved RS 0.20 lakhs for the for expenses for State Level Function of NDD @ Rs. 10000/- per NDD round for 2 rounds Approved RS 1.70 lakhs for Supportive Supervision @ Rs. 5000/- per Health Centre to review and supervise NDD for 34 centres
		53	Nutritional Rehabilitat ion Centers	0.00	0.00	0.00	0.00	

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks U
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		54	Vitamin A Supplemen tation	4.00	4.00	4.00	4.00	Vitamin A Supplementation:  (a) Vitamin A 100 ml solution: Rs. 4.00 lakh for Procurement of 4000 bottles for of Vitamin A 100 ml solution @ Rs.100 per unit as proposed by the state for 2022-23 & FY 2023-24 respectively.  However, the State to ensure procurement as per competitive bidding process and purchase to be done on market explored price following due process. The budget to be booked as per active.
	4 N	55	Mother's Absolute Affection (MAA)	3.00	3.00	3.00	3.00	actual.  Rs. 3.00 lakh is Approved FY 2022-23 and FY 2023-24 respectively under MAA.  Details shared by state are as under:  a) Training: Rs. 1.00 lakhs for training under MAA program (Rs. 0.60 for 2 batches of MOs & SNs, Rs. 0.40 for training on IYCF. For FY 2022-23, Rs 1.00 Lakh and for FY 2023-24, Rs. 1.00 lakh.  b) IEC/BCC and Printing: Approved Supply of Cubicle/BF corner with IEC material display to SDH/DH and 6 CHCs @ Rs.20,000/-=Rs. 2.00 lakh for FY 2022-23 and FY 2023-24 respectively.
	-		Lactation Manageme nt Centers	10.65	10.65	10.65		FY 2022-23, Approved Rs. 10.65/- lakh as under: 1. Equipment- Rs. 9.6/- lakh for procurement of equipment for one LMU. 2. Operational cost- Rs. 1.05/- lakh Approved for one LMU FY 2023-24, Rs. 1.05/- lakh is Approved as operational cost for one LMU.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
oute	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		57	Intensified Diarrhoea Control Fortnight	8.37	8.37	10.62	10.62	Approved Rs. 10.62 Lakh for procurement of ORS/Zinc, Orientation cum training, Incentive for distribution of ORS, printing of formats, and IEC/BCC under IDCF program for the year 2022-23 and 2023-24 as per below details:  1. Rs. 5.5 Lakh for procurement of ORS and Zinc for IDCF Program.
			, A			N		2. Rs. 3.36 Lakh for orientation under IDCF for 37 units based on State proposal. (Rs. 2.25 Lakhs proposed under RCH.3.30 for the same activity, shifted to this budget head.)
	ū.					*	e <sup>12</sup>	3. Rs. 0.35 Lakh for Incentives for paramedical worker (Counsellor/ANM/RBSK doctor) @Rs 100 per worker for 350 workers as per State proposal.
						a a		4. Rs. 1.41 Lakh for printing of IDCF formats @ Rs. 0.705 per district for 2 districts as per State proposal.
		58	Eat Right Campaign	0.00	0.00	0.00	0.00	
		59	Other Nutrition Componen ts	1.60	1.60	0.00	0.00	Not Approved this is the duplication of AMB IEC/BCC Proposal.
a		60	State specific Initiatives and Innovation s	4.10	4.10	0.00	0.00	As per NPCC discussion, Not Approved
RCH.8	National Iodine	61	Implement ation of	4.45	4.45	3.03	3.03	Approved Rs. 3.03 lakhs each for FY 2022-23 & 2023-24 for NIDDCP.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
DOW	Deficienc y Disorder s Control Program me (NIDDCP )		NIDDCP					1) The State has proposed fund for procurement of 6000 Salt testing Kits for 324 ANM's @Rs. 20/- per kit. As per programme norms, for 324 ANMs, 3888 kits are required. Hence, Rs. 0.78 lakhs (324*12*20=77760/-) may be Approved.  2) No provision as per programme norms. Hence, not Approved.  3) The State has proposed for IEC activities and celebration of global IDD Prevention day. The proposed amount may be Approved.  4) The state has proposed Rs.50000/- for IDD survey & Rs.25000/- for Management of IDD monitoring Lab. No details have been mentioned for the proposed amount for IDD survey. Hence, not Approved. The amount of Rs.25000/- for Management of IDD monitoring Lab may be Approved.
RCH Sub Total		62		926.01	862.71	854.730 7	807.032	be Approved.

## **NDCP Flexi Pool**

FMR Code	Program me/	S. No.	Scheme/ Activity	Amount Proposed		Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount P	roposed	Amount	Approved	Gol Remarks
Cour	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
NDCP.	Integrated Disease Surveillanc e Programm e (IDSP)	63	Impleme ntation of IDSP	32.10	32.10	32.1	32.1	Approved Rs. 32.10 lakhs for FY 2022-23 and FY 2023-24 as follows:  1. Capacity Building & Training - Rs. 3.20 lakhs 2. Surveillance, Research, Review, Evaluation (SRRE) - Rs. 10.40 lakhs 3. Others including operating costs (OOC) - Rs. 18.00 lakhs 4. IEC & Printing - Rs. 0.50 lakhs
NDCP.	National Vector Borne Disease Control Programm e (NVBDCP)	64	Malaria	52.70	54.00	52.70	54.00	Approved Rs. 52.70 lakhs in FY 2022-23 and Rs. 54.00 lakhs in FY 2023-24 as follows:  1) Construction and maintenance of Hatcheries 6.00 lakhs (4 new Hatcheries @1.00 lakhs each and maintenance 2.00 lakhs)  2) Drugs and supplies 12.5 lakhs (1.5 lakhs form Chloroquine, primaquine [2.5 & 7.5mg], 3.00 lakhs for ACT & 8.00 Lakhs for 400 lts. cyphenothrin)  3) Diagnostics & consumable 6.6. lakhs (3.00 lakhs for RDT, 2.0 lakhs for 8 new microscope, 1.0 lakhs microscope maintenance, 0.40 lakhs for Slide box and 0.2 lakhs for MLoil  4) Capacity building incl. training 6.00 lakhs (TOT training Delhi, MO, Supervisor, Health workers, lab technician, LTS, Spray supervisor & training in private sector IMA)  5) Others including operating costs (OOC): Rs. 4.00 lakhs for Biological and Environmental Management through VHSCs  6) IEC & Printing 8.00 lakhs for Awareness Drives, Advertisements in newspapers, Electronic media, Folk media and Monitoring & Evaluation by Independent body  7) Planning & M&E 8.6 lakhs (a. 6.10 lakhs for quality assurance of diagnostics and drugs, Monitoring of LLINs, Review meetings, Printing of formats & Monitoring of data



FMR Code	Program me/	No.	Scheme/ Activity	Amount l	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	- Dr
is-								b. 2.5 lakhs for Mobility Expenses 8) SRRE 1.00 lakhs for Zonal entomological unit
		65	Kala-azar	0.00	0.00	0.00	0.00	×11.
-		66	AES/JE	0.50	0.50	0.50	0.50	Approved Rs. 0.50 lakhs in both FYs as follows:  1) Capacity building incl. training 0.25 lakhs for a. Training of Medical and other paramedical staff and b. Capacity building for community leaders, VHSNCs and local body members.  2) 0.25 lakhs for IEC/BCC specific to J.E. in endemic areas
			Dengue & Chikungu nya	65.89	70.39	65.89	,	Approved Rs. 65.89 lakhs in FY 2022-23 and Rs. 70.39 lakhs in FY 2023-24 as follows:  1) Drugs and supplies 12.89 lakhs (a. 6.69 lakhs for IgM Mac ELISA kits, b. 4.00 lakhs for 200 lts telephone and c. 2.20 lakhs for 100 lts pyrethrum)  2) Diagnostics: 4.00 lakhs for NS1 ELISA kits  3) Capacity building incl. training 1.00 lakhs for Training of medical and other paramedical staff at State and district level  4) Others including operating costs (OOC) 33.5 lakhs (a. 18.00 lakhs for Hiring of119 field workers for source reduction for 4 months @ 379/ day, b. 4.80 lakhs for 6 fogging machine to replace not working/repairable machine, maintenance and repair of all existing equipments for vector control at the peripheral units: 1.50 lakhs, d. For procurement of fogging machine fund required for publishing of tender notices in newspapers (local and National) are Rs. 2.50 lakhs, e. 1.7 lakhs for 20 Hand Compression Spray Pumps (HCSP) @ 8,500, f. 3.00 lakhs for Case management mosquito proofing of wards and g. 2.00 lakhs for Inter-sectoral convergence: All department and stake holders need to be sensitized about



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount F	Proposed	Amount Approved		GoI Remarks
gode	Theme		,	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		40	Lymphati	3.94	3.94	3.34	3.34	the disease to avoid breeding of mosquitoes by organizing meetings at State level/ district level/Block Level for better coordination as Goa is in elimination phase)  5) IEC & Printing 6.00 lakhs for a. Preparatory phase IEC material, updates, planning, b. Observation of National Dengue day, c. Advertisements in newspapers, Electronic media, Folk media and d. Source reduction and cleanliness drives with involvement of RKS and community members 6) Planning & M&E 4.5 lakhs (a. 0.50 lakhs for Printing of 1.00 lakhs Dengue investigations forms and b. 4.00 lakhs for Epidemic preparedness 7) Rs. 4.00 Lakhs for 4 Sentinel Surveillance Hospital Approved Rs. 3.34 lakhs in FY 2022-23 and FY 2023-24.
		68	Lymphati c Filariasis	3.94	3.94	3.34	3.34	
NDCP.	National Leprosy Eradicatio n Programm	69	Case detection and Managem ent	2.96	2.96	2.96	2.96	Approved Rs. 2.96 lakhs in FY 2022-23 and FY 2023-24.
	e (NLEP)	70	DPMR Services: Reconstr uctive surgeries	0.26	0.26	0.26	0.26	Approved Rs. 0.26 lakhs in FY 2022-23 and FY 2023-24.
		71	District Awards	0.00	0.00	0.00	0.00	

FMR Code	AND DESCRIPTION OF THE PERSON	S. No		Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
	<i>}</i>	72	Other NLEP Compone nts	18.96	18.96	3.00	3.00	Approved Rs. 3.00 lakhs in FY 2022-23 and FY 2023-24 for Planning and M&E.  Not Approved Rs. 15.96 lakhs for drugs, ASHA incentive, OCC, IEC & BCC and capacity building.
NDCP.	National Tuberculo sis Eliminatio	73	Drug Sensitive TB (DSTB)	160.14	135.93	152.39	135.93	Approved. Approval for HRH under NTEP Drug store is shifted under 185
	n Programm e (NTEP)	74	NikshayP oshan Yojana	79.80	79.80	79.80	79.80	Approved.
		75	PPP	43.20	45.40	43.20	45.40	Approved.
	×	76	Latent TB Infection (LTBI)	83.25	83.25	83.25	83.25	Approved.
		77	Drug Resistant TB(DRTB	328.26	324.51	328.26	324.51	Approved.
	d d	78	TB HaregaD eshJeeteg a Campaig	83.00	101.25	83.00	101.25	Approved.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount F	roposed	Amount	Approved	Gol Remarks
Goule	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		79	State specific Initiative s and Innovatio	3.00	0.00	3.00	0.00	Approved.
NDCP. 5	National Viral Hepatitis Control Programm e (NVHCP)	80	ns Preventio n	6.25	6.25	6.25	6.25	Approved Rs. 6.25 lakhs in FY 2022-23 and FY 2023-24 as follows:  1. OOC: Approved Rs 2.75 lakhs for SVHMU Cost of Travel (Rs 0.75 lakh) and SVHMU Meeting Costs, Office Expenses, Contingency (Rs 2 lakhs) for FY 2022-23 and FY 2023-24 each.  2. IEC & Printing: Approved Rs 2 lakhs for IEC and Printing for FY 2022-23 & FY 2023-24  3. Planning M & E: Approved Rs 1.50 lakhs for State review meetings (Rs 0.50 lakh) and SVHMU Non-recurring Grant (Rs 1 lakh) for FY 2022-23 & FY 2023-24 each.
	(t)	81	Screenin g and Testing through facilities	48.77	48.77	48.77	48.77	Approved Rs. 6.25 lakhs in FY 2022-23 and FY 2023-24 as follows:  1. Diagnostics: Approved Rs 44.27 lakhs for kits, consumables and sample transportation for FY 2022-23 and FY 2023-24.  2. Capacity Building: Approved Rs 0.5 lakh for training of Lab technicians for FY 2022-23 & 2023-24 each.  3. OOC: Approved Rs 1 lakhs for State Lab Meeting Cost/Contingency for FY 2022-23 & FY 2023-24 each.  4. IEC & Printing: Approved Rs 3 lakhs for Printing for FY 2022-23 & FY 2023-24 each.

FMR Code	me/	S. No	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		82	Screenin g and Testing through NGOs	0.00	0.00	0.00	0.00	
		83	Treatme	20.97	20.97	20.97	20.97	Approved Rs. 20.97 lakhs in FY 2022-23 and FY 2023-24 as follows:  1. Drugs & Supplies: State has proposed Rs 16.97 lakhs for Drugs (Central Supplies) but budget is Approved Rs 10.81 lakhs for Drugs & Supplies (Kind Grant) for FY 2022-23 & FY 2023-24 each and budget is Approved Rs 6.16 lakhs for procurement of HBIG (Rs 2.16 lakhs) and vaccination of HRG (Rs 3 lakhs) and Management of Hepatitis A & E (Rs 1 lakh) under Drugs & Supplies (Budget for procurement done by States) for FY 2022-23 and FY 2023-24 each.  2. Capacity Building: Approved Rs 0.50 lakhs for training of Medical Officers for FY 2022-23 and FY 2023-24 each.  3. OOC: Approved overs Rs 3.5 lakhs for Model Treatment Centres (Rs 1.5 lakh) and Treatment centre (Rs 0.5 lakh) - Meeting Cost/ Contingency and Vaccination of HRG (Rs 1.5 lakh) for FY 2022-23 & FY 2023-24 each but State to budget vaccination for HRG under Drugs & Supplies (Budget Procurement done by States).
NDCP. 6	National Rabies Control Programm e (NRCP)	84	Impleme ntation of NRCP	9.80	9.80	9.80	9.80	Approved Rs. 9.80 lakhs in FY 2022-23 & 2023-24 as follows:  1. Capacity building - Rs. 1.50 lakhs 2. IEC & Printing - Rs. 4.00 lakhs 3. Surveillance & Research - Rs. 4.30 lakhs. The budget is shifted under Planning & M&E.

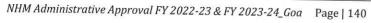


GoI Remarks	Approved	Amount	Proposed	Amount I	Scheme/ Activity	S. No.	Program me/	FMR Code
	FY 2023-24	FY 2022-23	FY 2023-24	FY 2022-23			Theme	
d Rs. 7.75 lakhs in FY 2022-23 & 2023-24 as stics - Rs. 5.00 lakhs y building - Rs. 1.00 lakhs rinting - Rs. 1.00 lakhs g & M&E - Rs. 0.75 lakhs	7.75	7.75	8.00	8.00	Impleme ntation of PPCL	85	Programm e for Prevention and Control of Leptospiro sis (PPCL)	NDCP. 7
	0.00	0.00	0.00	0.00	Impleme ntation of State specific Initiative s and Innovatio ns	86	State specific Initiatives and Innovation s	NDCP. 8
	1030.23	1027.19	1047.04	1051.75	specific Initiative s and Innovatio		and Innovation	ND



## **NCD Flexi Pool**

FMR Code	Program me/	S. No.	Scheme/ Activity		Proposed	Amount Approved		Gol Remarks	
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24		
Pr for Blin and Imp	Program for Control of Blindness and Vision Impairmen t (NPCB+VI)	87	Cataract Surgeries through facilities	70.00	70.00	70.00	70.00	Approved.	
		88	Cataract Surgeries through NGOs	0.00	0.00	0.00	0.00	Approved.	
		c	Ophthalmi c	0.00	0.00	0.00	0.00	Approved.	
			Interventi ons through facilities						
			Other Ophthalmi c Interventi ons through NGOs	0.00	0.00	0.00	0.00	Approved.	
	ž		Mobile Ophthalmi c Units	0.00	0.00	0.00	0.00	Approved.	
				Collection of eye balls by eye	0.40	0.40	0.40	0.40	Approved.





FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
Jour	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
			banks and eye donation centres					9
		93	Free spectacles to school children	3.50	3.50	3.50	3.50	Approved.
		94	Free spectacles to others	7.00	7.00	7.00	7.00	Approved.
		95	Grant in Aid for the health institution s, Eye Bank, NGO,	40.00	40.00	40.00	40.00	Approved.
			Private Practioner s					
		96	Other NPCB+VI componen ts	29.50	29.50	29.50	29.50	Approved.
NCD.2	National Mental Health Program (NMHP)	97	Implement ation of District Mental Health Plan	44.40	44.40	44.40	44.40	Approved.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks	
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24		
	-	98	State specific Initiatives and Innovation s	0.00	0.00	0.00	0.00		
NCD.3	National Programm e for Health Care for the Elderly (NPHCE)	10 0	Geriatric Care at DH  Geriatric Care at CHC/SDH	24.60	24.60	1.80	1.80	Approved Rs. 24.60 lakhs in FY 2022-23 & 2023-24 as follows:  Approved Rs. 3.00 lakhs for each year 22-23 & 23-24 under Machinary& Equipments for recurring cost of 2 DHs @ 1.5 lakh per DH.  Approved Rs. 20.00 lakhs for each year 22-23 & 23-24 for drugs & consumables.  Approved Rs. 1.60 lakhs for each year for 22-23 & 23-24 under training for 3 days CGA Module (developed by CPD) Trainings of MO, SN & Physiotherapists at all DHs.  Approved Rs. 1.80 lakhs in FY 2022-23 & 2023-24 as follows:  Approved Rs. 1.00 lakhs as per cost norms for each year 22-23 & 23-24 under Machinery & Equipment: for CHC	
									Pernem in 2022-23 and CHC Canacona in 2023-24 for upgradation and procurement of physiotherapy equipments as per list Annexed.  Approved Rs. 0.80 lakhs for each year for 22-23 & 23-24 under training 3 days CGA Module (developed by CPD) Trainings of MO, SN & Physiotherapists at all CHCs.
		10 1	Geriatric Care at PHC/SHC	0.80	0.80	0.80	0.80	Approved Rs. 0.80 lakhs for each year for 22-23 & 23-24 under training 3 days CGA Module (developed by CPD) Trainings of MO, SN & Physiotherapists at all PHCs.	
		10 2	Communit y Based Interventi on	2.10	2.10	2.10		Approved Rs. 2.10 lakhs in FY 2022-23 & 2023-24 as follows:  Approved Rs. 2.10 lakhs for each year 22-23 & 23-24 for IEC activities including celebration of IDOP at all districts	



FMR Code	Program me/ Theme	S. No.	Scheme/ Activity	Amount Proposed		Amount Approved		Gol Remarks
				FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
			, , , , , , , , , , , , , , , , , , ,	9				for conducting multispecialty camps (with provision of Geriatrician, Orthopaedic, Ophthalmology, ENT, Dental, Neuro& Psychiatry etc. for comprehensive geriatric assessment for 15 days in the month of October at DH level.
		10 3	State specific Initiatives and Innovation s	0.00	0.00	0.00	0.00	
NCD.4	National Tobacco Control Programm e (NTCP)	10 4	Implement ation of COTPA - 2003	22.60	22.60	22.60	22.60	Approved.
		10 5	Implement ation of ToEFI guideline	0.00	0.00	0.00	0.00	
	-	10 6	Tobacco Cessation	31.80	31.80	31.80	31.80	Approved.
NCD.5	National Programm e for Prevention and Control of Diabetes,	10 7	NCD Clinics at DH	14.00	14.00	14.00	14.00	FY 2022-23 Rs 12 lakhs may be Approved drugs and supplies. Rs. 2 lakhs may be Approved Contingency FY 2023-24 Rs 12 lakhs may be Approved drugs and supplies. Rs. 2 lakhs may be Approved Contingency



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
	Cardiovasc ular Disease and Stroke (NPCDCS)	10 8	NCD Clinics at CHC/SDH	12.00	12.00	12.00	12.00	FY 2022-23 Rs. 8 lakhs may be Approved drugs and supplies for 6 CHC/2SDH. Rs. 4 lakhs may be Approved Contingency for 6 CHC/2 SDH
		3			2			FY 2023-24 Rs. 8 lakhs may be Approved drugs and supplies for 6 CHC/2SDH. Rs. 4 lakhs may be Approved Contingency for 6 CHC/2 SDH
		10 9	Cardiac Care Unit (CCU/ICU) including STEMI	21.05	21.05	21.05	21.05	FY 2022-23 Rs. 11.05 lakhs may be Approved maintenance of Tele ECG machine with IT system for 17 centres, Tele ECG reading for 17 centres, ECG rolls and consumables for 17 centres. Rs. 10 lakhs may be Approved drugs and supplies for 2 CCUs
								FY 2023-24 Rs. 11.05 lakhs may be Approved maintenance of Tele ECG machine with IT system for 17 centres, Tele ECG reading for 17 centres, ECG rolls and consumables for 17 centres. Rs. 10 lakhs may be Approved drugs and supplies for 2 CCUs



FMR Code	Program me/	Program S. Scheme/ Amount Proposed Amount me/ No. Activity		Amount	Approved	GoI Remarks		
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		11 0	Other NPCDCS Componen ts	88.20	88.20	88.20	88.20	FY 2022-23 Rs 28.11 lakhs may be Approved consumables for PHC, SC and PBS. Rs. 19.49 lakhs may be Approved training for MO's, RBSK doctors, Staff Nurses, etc such as LEAD trainings, ACLS/BLS trainings, ToT trainings, Changing Diabetes Barometer (CDB) Trainings, etc. and PBS training. Rs 28.60 lakhs may be Approved IEC and Printing Rs 12 lakhs may be Approved programme management cost st state and district level
			e e e e e e e e e e e e e e e e e e e					Rs 28.11 lakhs may be Approved consumables for PHC, SC and PBS. Rs. 19.49 lakhs may be Approved training for MO's, RBSK doctors, Staff Nurses, etc such as LEAD trainings, ACLS/BLS trainings, ToT trainings, Changing Diabetes Barometer (CDB) Trainings, etc. and PBS training. Rs 28.60 lakhs may be Approved IEC and Printing. Rs 12 lakhs may be Approved programme management cost st state and district level
	er en	11 1	State specific Initiatives and Innovation s	17.80	10.00	17.80	10.00	FY 2022-23 Rs 17.80 lakhs may be Approved equipment for Foot care (Podiatry) Clinic for South Goa District Hospital. NHSRC comments may be obtained on the unit cost of equipment.  FY 2023-24 Rs 10 lakhs may be Approved Recurring cost of Foot Care Clinic for South Goa District Hospital.
NCD.6	Pradhan Mantri National	11 2	Haemodial ysis Services	1147.65	1147.65	1147.65	1147.65	For FY 2022-23 & FY 2023-24 Rs. 1147.65 Lakhs for Hemodialysis services @ INR 1025.88 per session for 111870 sessions is Approved.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
	Dialysis Programm e (PMNDP)	11 3	Peritoneal Dialysis Services	69.12	69.12	69.12	69.12	For FY 2022-23 & FY 2023-24 Rs. 69.12 Lakhs for Peritoneal services @ INR 24000 per session for 24 patients for 12 months is Approved.
NCD.7	National Program for Climate Change and Human Health (NPCCHH)	11 4	Implement ation of NPCCHH	30.55	16.05	30.55	16.05	Approved.
NCD.8	National Oral health	11 5	Implement ation at DH	36.20	36.20	36.2	36.2	Approved Rs. 36.20 lakhs in FY 2022-23 & 2023-24.
	programm e (NOHP)	11 6	Implement ation at CHC/SDH	41.20	41.20	41.2	41.2	Approved Rs. 41.20 lakhs in FY 2022-23 & 2023-24.
		11 7	Mobile Dental Units/Van	0.00	0.00	0.00	0.00	
		- 1	State specific Initiatives and Innovation s	5.00	5.00	5.00	5.00	Approved Rs. 5.00 lakhs in FY 2022-23 & 2023-24.



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
NCD.9	National Programm e on palliative care (NPPC)	11 9	Implement ation of NPPC	21.80	21.80	21.80	13.80	Approved Rs. 21.80 lakhs in FY 2022-23 & Rs. 13.80 lakhs in FY 2023-24 as follows: Approved Rs. 10.00 Lakhs for drugs and consumables including morphine for 2022-23 and @ Rs. 05.00 Lakhs for 2023-24. Approved Rs. 02.80 Lakhs for 2022-23 and Rs. 02.80 Lakhs for 2023-24 for 10 days training of Two MO's Na Two SN's from each DH, CHC, and PHC for 10days course through IAPC. Approved Rs. 05.00 Lakhs for 2022-23 for Others includes operating costs (OOC) for Mobility support for 2 districts @ 2.50 lakhs per District and Rs. 05.00 Lakhs for 2023-24. Approved Rs. 01.00 Lakhs for 2022-23 for Printing of awareness material or cards for palliative care and Rs. 01.00 Lakhs for 2023-24. Approved Rs. 03.00 Lakhs for 2022-23 for Rs. 1.50 Lakhs per District hospital for Planning & Monitoring and Evaluation under NPPC. Operational expenses of district centres - telephone expenses, internet charges, ambulatory services and other office expenses.
NCD.1 0	National Programm e for Prevention and Control of Fluorosis (NPPCF)	12 0	Implement ation of NPPCF	0.00	0.00	0.00	0.00	



FMR Code	Program me/	S. No.	Scheme/ Activity	Amount	Proposed	sed Amount Approved		GoI Remarks
	Theme	NO.	Activity	FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
NCD.1	National Programm e for Prevention and	12	Screening of Deafness	15.00	15.00	15.00	15.00	Approved.
	Control of Deafness (NPPCD)	12 2	Manageme nt of Deafness	4.00	4.00	4.00	4.00	Approved.
		12 3	State Specific Initiatives	0.00	0.00	0.00	0.00	
NCD.1 2	National programm e for	12 4	Support for Burn Units	0.00	0.00	0.00	0.00	
	Prevention and Manageme nt of Burn & Injuries	12 5	Support for Emergency Trauma Care	0.00	0.00	0.00	0.00	
NCD.1 3	State specific Programm e Interventi ons	12 6	Implement ation of State specific Initiatives and Innovation s	0.00	0.00	0.00	0.00	
NC	D Sub Total			1803.07	1780.77	1802.07	1771.77	



## Health System Strengthening (HSS) - Urban

FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
HSS (U).1	Compre hensive Primary Healthc are (CPHC)	127	Developm ent and operations of Health & Wellness Centers - Urban	0.00	0.00	0.00	0.00	
		128	Wellness activities at HWCs- Urban	0.00	0.00	0.00	0.00	
		129	Teleconsul tation facilities at HWCs- Urban	0.00	0.00	0.00	0.00	
HSS(U ).2	Commu nity Engage ment	130	ASHA (including ASHA Certificatio n and ASHA benefit package)	0.00	0.00	0.00	0.00	
	V	131	MAS	0.60	0.60	0.6	0.6	Approved Rs. 0.60 lakhs for training of 12 MAS @ of Rs 5000/MAS in both FYs.
	. B = .	132	JAS	0.00	0.00	0.00	0.00	
		133	RKS	0.00	0.00	0.00	0.00	



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	āl, j. H
		134	Outreach activities	0.44	0.44	0.44	0.44	Approved Rs. 0.44 lakhs in both FYs as follows:  Activity 1: Special outreach camp per quarter @Rs.2000/- per UPHC-HWC/Qtr for 4 UPHCs = Rs.0.32 lakhs  Activity 2: UHND @Rs.250/month/UPHC for 4 UPHC- HWC for 12 months = Rs. 0.12 lakhs.
=		135	Mapping of slums and vulnerable population	0.00	0.00	0.00	0.00	
(2) (4)		136	Other Communit y Engageme nt Componen ts	0.00	0.00	0.00	0.00	
HSS(U ).3	Public Health Instituti ons as per IPHS norms	137	Urban PHCs	32.20	32.20	28.20		Approved Rs. 28.20 lakhs in both FYs as follows: Activity 1: Purchase of Furniture/ Equipment @ Rs.1.00 lakhs/UPHC-HWC for 4 UPHCs = Rs. 4.00 lakhs. Activity 2: Procurement of Drugs @ Rs. 5.00 lakhs/UPHC/annum for 4 UPHC -HWC = Rs. 20.00 lakhs Activity 3: Procurement of Consumables @ Rs.50000/annum/UPHC for 4 UPHC-HWC= Rs.2.00 lakhs - Not Approved. State is advised to meet the expense for diagnostic infrastructure under FC-XV grants.
6					3			Activity 4: Refresher Training of peripheral staff @ Rs.1.00 lakhs/annum. Activity 5: Operating Cost for UPHCs @ Rs. 0.50 /- per UHWC X 4 UHWC = Rs.2.00 lakhs - Not Approved. Funds to be met out from untied grants.

NHM Administrative Approval FY 2022-23 & FY 2023-24\_Goa Page | 150



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								Activity 6: Rent of 2 UPHC @ Rs.5000/- per rented premise x 2 premise x 12 months = Rs.1.20 Lakhs. Activity 7: IEC & Printing @ Rs.50000/- per UPHC-HWC for 4 UPHCs = Rs. 2.00 lakhs
a.		138	Urban CHCs and Maternity Homes	0.00	0.00	0.00	0.00	
HSS(U ).4	Quality Assuran ce	139	Quality Assurance Implement ation &MeraAsp ataal	2.40	2.40	2.40	2.40	Approved Rs. 2.40 lakhs in both FYs for QA Implementation and MeraAspataal. A. Capacity building: Rs 40,000/- for "MeraAspataal" training. B. Others including operating cost: Rs 2.00 Lakhs for purchase of computers and others accessories for effective implementation of "MeraAspataal" in 4 Urban health facilities.
		140	Kayakalp	0.00	0.00	0.00	0.00	
		141	Swacch Swasth Sarvatra	0.00	0.00	0.00	0.00	
HSS(U ).5	HRH	142	Remunerat ion for all NHM HR	138.73	149.83	126.96	136.32	Approved 48 positions of service delivery staff and 4 programme management staff as per discussion in NPCC. Details of the Posts Approved are provided in the HR Annexure.
-	· · · · · · · · · · · · · · · · · · ·							Lumpsum amount of Rs. 3.91 lakhs in FY 2022-23 and Rs 4.22 lakhs for FY 2023-24 is Approved for support staff. Rs 4.77 lakhs in FY 2022-23 and Rs 5.15 lakhs in FY 2023-24 is Approved for data entry operations for 12 months in principle. The services may be outsourced to the extent possible. State to refer to JS (Policy)'s letter dated 22 July



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	i i
								2016 (D.O.No.10(36)/2016-NRHM-I) for details.  Salary for staff on deputation is to be paid as per extant state Govt norms. Approved Annual Increment as per the principles mentioned in the HR Annexure. EPF (Employer's contribution) @ 13.36% is Approved only for staff drawing salary <= Rs 15000 pm as on 1st April 2015 and any other staff engaged @ Rs 15000 pm or less after 1st April 2015. The State Administrative Officer looking after Salary must ensure proper calculation and disbursal as mentioned. Please refer to JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM (F)).  All the positions are Approved for FY 2022-23. Details of the approved posts and budget are provided in the HR annexure. Actual amount is to be calculated by the state based on principles mentioned in the HR Annexure.  The approvals will continue in FY 2023-24 based on midterm assessment (if any).
		143	Incentives( Allowance, Incentives, staff welfare fund)	14.36	15.51	2.21	2.21	A. Approved Rs 1.7 Lakhs for service delivery HR and Rs 0.3 Lakhs for programme management HR under NUHM as staff welfare fund. As approved in case of Chhattisgarh/ Odisha, state to follow same norms and may explore insurance model through trust mode/ co-payment or any other model available within the state.
					-		2 B	Performance based incentives: In principle Approved. The framework shared by state is for performance appraisal for which annual increment is provided. For providing Performance Based Incentives, State should share the performance framework along with objective estimated



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount A	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								levels of achievement, which must be above the current average performance.  Experience bonus: The state has already been given the approval for additional amount as experience bonus in FY 2018-19 for bringing pay parity. It was applicable only for personnel getting lesser than the more recent recruits for similar positions, with similar education qualifications, skills and workload and was not to be distributed as a yearly bonus for staff. Amount proposed in this year's PIP is not Approved.  B. Incentive to provider for PPIUCD services & PAIUCD services - Approved Rs.0.21 Lakh a) State has proposed Rs 0.06 Lakh for Incentive of service providers for 40 PPIUCD insertions in the urban area @Rs 150/- per insertion (This budget head has been shifted to budget head 143) b). Rs 0.15 Lakh is Approved for Incentive of service providers for 100 PPIUCD insertions in the rural area @Rs 150/- per insertion c) State has proposed Rs 0.03 Lakh for Incentive of service providers for 20 PAIUCD insertions in the urban area @Rs 150/- per insertion (This budget head has been shifted to budget head 143) d). Rs 0.06 Lakh is Approved for Incentive of service providers for 40 PAIUCD insertions in the rural area @Rs 150/- per insertion  Total Approved Amount under Incentives is Rs.0.21 Lakhs for FY 2022-23 (Approved Amount for FY 2023-24 is Rs.0.21 Lakhs)

FMR Code	THE R. P. LEWIS CO., LANSING, MICH. LANSING, MICH. LANSING, MICH. LANSING, MICH. LANSING, MICH. LANSING, MICH.	No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	· · · · · · · · · · · · · · · · · · ·
		144	Incentives under CPHC	0.00	0.00	0.00	0.00	
5	1	145	Costs for HR Recruitme nt and Outsourcin g	0.00	0.00	0.00	0.00	
HSS(U ).6	Technic al Assista nce	146	Planning and Program Manageme nt	5.70	5.70	5.70	5.00	Ongoing activities as per last year's approval are Approved in principle. Final budget will be Approved based on PM Cost available at the time of draft ROP finalization.
2			# # # # # # # # # # # # # # # # # # #	95°	2			Rs. 5.70 lakhs in FY 2022-23 & Rs. 5.00 lakhs in FY 2023-24 is Approved as follows.
n.				±	a			Activity 1: Attending national and regional workshops @ Rs.200000/- per year – Approved.
				29 90		2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		Activity 2: Mobility support @ Rs.100000/- per year – Approved.
								Activity 3: Purchase of 1 desktop computer @ Rs.40000/-with printer and UPS @ Rs.30000/ Approved Rs. 0.70 lakhs in FY 2022-23.
HSS(U	Aggaga	147	DDD	0.00				Activity 4: Other activities & technical assistance @ Rs.200000/ Approved.
).7	Access	147	PPP	0.00	0.00	0.00	0.00	



FMR Code			Amount Proposed		Amount Approved		GoI Remarks	
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
HSS(U ).8	Innovat ion	148	State specific Programm e Innovation s and Interventi ons	0.00	0.00	0.00	0.00	
HSS(U ).9	Untied Grants	149	Untied Fund	8.60	8.60	6.10	6.10	Activity 1: Approved Rs 0.60 lakhs @ Rs 5000/MAS for 12 MAS as untied grants for each FY 2022-23 and 2023-24. Activity 2: Approved Rs 3.5 lakhs @ Rs 1.75 lakhs/UPHC for 2 UPHCs in Government building and Rs 2 lakhs @ Rs 1 lakh/UPHC for 2 UPHCs in rented building as untied grants for each FY 2022-23 and 2023-24.
NUH	NUHM Sub Total			203.03	215.28	172.61	181.27	

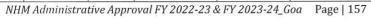


## Health System Strengthening (HSS) Rural

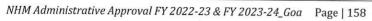
FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
HSS.1	Compre hensive Primary Healthc are (CPHC)	150	Developm ent and operations of Health & Wellness Centers - Rural	289.50	11.70	277.8	0.00	FY 2022-23: Activity 1: Infrastructure Civil Works - Rs. 270.00 Lakhs for upgradation of 135 Health HSC (96 Existing SC + 39 New SC) to HWCs at Rs.2 lakh per HWC for infrastructure, repairs and maintenance. Activity 2: Diagnostics - Not Approved for Rs.11.70 Lakhs proposed for 39 HWC for procurement of consumables such as reagents, gloves, syringes, vacutainers, etc. (Rs.30000 x 39 = 11.70 Lakhs). State is advised to propose all diagnostic support under FC-XV. Activity 3: Operating Cost - Rs. 7.80 lakhs for purchase of 39 tablets for 39 New HSC- HWC (Rs.20000 x 39) = Rs. 7.80 lakhs.  FY 2023-24: Activity: Diagnostics- Not Approved for Rs.11.70 Lakhs proposed for 39 HWC for procurement of consumables such as reagents, gloves, syringes, vacutainers, etc. (Rs.30000 x 39 = 11.70 Lakhs). State is advised to propose all diagnostic support under FC-XV.



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
Jour	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
		151	Wellness activities at HWCs- Rural	99.50	39.20	99.5	39.2	Approved Rs. 99.50 Lakhs for the following activities in FY 2022-23:  1.Capacity building of AB-HWC team in expanded service packages, Eat right, JAS at Rs 20.75 Lakhs per year  2. Rs 19 Lakhs towards HWC adoption by medical college and  3. Rs 60.30 Lakhs towards wellness activities.
			5	5				Approved Rs. 39.20 Lakhs for the following activities in FY 2023-24:  1.Capacity building of AB-HWC team in expanded service packages, Eat right, JAS at Rs 20.75 Lakhs per year  2. Rs 19 Lakhs towards HWC adoption by medical college
		152	Teleconsul tation facilities at HWCs- Rural	133.05	10.80	133.05	10.8	Approved Rs 133.05 Lakhs including IT equipment (desktop, printer, camera, UPS) cost of Rs 29.25 L per AB-HWC @Rs 75000 for 39 AB-HWCs for FY 22-23.  Approved Rs 10.80 Lakhs for FY 23-24 for Repairs, maintenance and internet connectivity for existing/new equipment's @ Rs.10000 each for 108 HWC (60 Existing HWC + 39 New HSC - HWC + 5 CHC's Spokes + 4 Hubs (NGDH, SGDH, SDH Ponda and SDH Chicalim).
		153	CHO Mentoring	2.54	2.54	2.54	2.54	Approved at Rs 2.54 Lakhs @ Rs 150 for 141 AB-HWC for FY 22-23 and FY 23-24.
HSS.2	Blood Service s &	154	Screening for Blood Disorders	0.00	0.00	0.00	0.00	
CV	Disorde rs	155	Support for Blood Transfusio	0.00	0.00	0.00	0.00	



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
			n					
		156	Blood Bank/BCS U/BSU/Th alassemia Day Care Centre	0.00	0.00	0.00	0.00	
		157	Blood collection and Transport Vans	70.00	0.00	70.00	0.00	Approved Rs. 70.00 lakhs in FY 2022-24 @ Rs. 35.00 lakhs for 2 new vans for NGDH Mapusa& SGDH Margao for transportation of Blood and arranging Blood donation camps under GSACS.
		158	Other Blood Services & Disorders Componen ts	0.00	0.00	0.00	0.00	
HSS.3	Commu nity Engage ment	159	ASHA (including ASHA Certificatio n and ASHA benefit package)	0.00	0.00	0.00	0.00	
			VHSNC	0.00	0.00	0.00	0.00	
			JAS	0.00	0.00	0.00	0.00	
	-		RKS	0.00	0.00	0.00	0.00	
			Other Communit	0.00	0.00	0.00	0.00	





FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount A	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
			y Engageme nts Componen ts		¥		6	
HSS.4	Public Health Instituti	164	District Hospitals	25.00	0.00	0.00	0.00	Funds for installation of LIMS at Hospicio South Goa District Hospital can be met from funds for Integrated Public Health Laboratories under PM-ABHIM. Therefore, not Approved.
	ons as per IPHS	165	Sub- District Hospitals	0.00	0.00	0.00	0.00	
	norms	166	Communit y Health Centers	0.00	0.00	0.00	0.00	
21		167	Primary Health Centers	0.00	0.00	0.00	0.00	
		168	Sub-Health Centers	0.00	0.00	0.00	0.00	
		169	Other Infrastruct ure/Civil works/exp ansion etc.	49.08	19.64	45.08	19.64	There is a mismatch in the amount proposed (Rs 49.08 lakhs in FY 2022-23) and the justification provided (Rs 45.08 lakhs in 2022-23).  Activity 1 (Ongoing): a) Approved Rs 26 lakhs for the FY 22-23 as capex for drug warehouse. b) Approved Rs 14.28 Lakhs for FY 22-23 and Rs 14.84 lakhs for FY 23-24 as opex for drug warehouse. Activity 2: Approved Rs 4.80 lakhs as sub-centre rent and contingencies for each FY 22-23 and 23-24.

FMR	Progra	S.	Cahama /	A				
Code		No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY	FY	FY	FY	
				2022-23	2023-24	2022-23	2023-24	
		170	Renovatio n/Repair/ Upgradatio n of facilities for IPHS/ NQAS/ MUSQAN/ SUMAN Compliant	186.98	177.50	186.98	177.5	Activity 1: Approved an amount of Rs.177.50 for minor repair, renovation and upgradation works for all the facilities for each FY 2022-23 and 2023-24.  Activity 2: Amount of Rs 9.48 lakhs for FY 2022-23 for procurement of LCDs, laptops, desktops and printers in FY 20232-23.
HSS.5	Referral Transp ort	171	Advance Life Saving Ambulance s	470.00	500.00	452.00	452.00	Activity 1: Approved Rs 432.00 lakhs @ Rs 1.44 lakhs/ambulance/month for 25 ALS ambulances for 12 months as opex for each FY 22-23 and 23-24. Activity 2: Approved Rs 20.00 lakhs for training of household members in first aid to help in any medical emergency for each FY 22-23 and 23-24.
		172	Basic Life Saving Ambulance s	0.00	0.00	0.00	0.00	cucii i i 22 23 anu 23-24.
	_ 8	173	Patient Transport Vehicle	0.00	0.00	0.00	0.00	
=		174	Other Ambulance s	0.00	0.00	0.00	0.00	
HSS.6	Quality Assuran ce	175	Quality Assurance Implement ation &MeraAsp ataal	103.95	103.95	97.71	90.26	Approved Rs 96.71 Lakhs in FY 2022-23 & Rs 90.26 Lakhs for FY 2023-24 Approved as follows:  A. Equipment:- For calibration and EQAS Total Rs 4.5 Lakhs, for 3 bucket system of cleaning @ Rs 8000 for 37 HCFs= 2.96 lakhs, 2 Bucket system for 70 HWCs @ Rs 6000= Rs 4.2



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	GoI Remarks
	Theme			FY	FY	FY	FY	
				2022-23	2023-24	2022-23	2023-24	
				2022-23	2023-24	2022-23	2023-24	Lakhs, Total Rs 11.66 lakhs for FY 2022-23 & 2023-24.  B. Capacity Building training - IA CUM SPT @ Rs 0.8 lakhs for 2 trainings= 1.6 Lakhs, Trainings for nursing excellence @ Rs 2.5 Lakhs for 2 trainings= Rs 5 lakhs, Total Rs 6.6 Lakhs may be approved for FY 2022-23 & 2023-24.  C. Others including Operating Cost - Illumination board @ Rs 1 lakh for 7 board= Rs 7 lakhs, complaint box @ Rs 2000 for 10= Rs 20,000, National certification of 18 HCFs @ Rs 2.1 Lakhs= Rs 37.8, State certification of 18 HCFs @ Rs 0.5 lakhs= Rs 9 Lakhs, CCTV camera @ Rs 10,000 for 25 HCFs= Rs 2.5 Lakhs, Total Rs 56.5 Lakhs may be approved for FY 2022-23 & 2023-24.  D. IEC & Printing- IEC activities @ Rs 6000 for 37 HCFs= Rs 2.22 lakhs, SOPs @ Rs 4000 for 37 HCFs= Rs 1.48 Lakhs, Total Rs 3.7 Lakhs may be approved for FY 2022-23 & 2023-24.  E. Planning & ME - FY 2022-23:- For one time establishment cost of SQAU= Rs 2.15 Lakhs, One time establishment cost of two DQAU @ Rs 2.15 lakhs= Rs 4.30, State monitoring visits= Rs 2.88 Lakhs, District Monitoring visits @ Rs 2.26 lakhs= Rs 4.52 Lakhs, Quality Assurance meeting= Rs 4.4 Lakhs, Total Rs 18.25
			2			-		Lakhs for FY 2022-23. FY 2023-24:- State monitoring visits= Rs 2.88 Lakhs, District Monitoring visits @ Rs 2.26 lakhs= Rs 4.52 Lakhs, Quality Assurance meeting= Rs 4.4 Lakhs, Total Rs 11.8 Lakhs for FY
						-		Assurance meeting= Rs 4.4 Lakhs, Total Rs 11.8 Lakhs for F 2023-24.



FMR Code	e mme/ No. Activity		Proposed	Amount Approved		GoI Remarks		
	Theme			FY 2022-23	FY 2023-24	FY. 2022-23	FY 2023-24	
		176	Kayakalp	63.50	63.50	55.5	55.5	Approved Rs. 55.50 Lakhs in both FYs Approved as follows:  A. Capacity Building trainings:- Kayakalp training @ Rs 50,000/- B. Others including Operating cost:- 1. For purchase of BMW bags, liners, trollies etc lump sum amount of Rs 10 Lakhs. 2. Kayakalp Assessments:- Limp sum amount of Rs 12 Lakhs. 3. Kayakalp Awards- Lump sum amount of Rs 31 Lakhs. 4. Contingency for Kayakalp @ Rs 2 Lakhs.
		177	Swacch Swasth Sarvatra	0.00	0.00	0.00	0.00	1. Contingency for Kayakaip @ RS 2 Lakiis.
HSS.7	Other Initiativ es to improv e access	178	Comprehe nsive Grievance Redressal Mechanis m	60.00	60.00	32.76		Approved Rs 32.76 lakhs @ Rs 39000/seat/month for total 7 personnel in 3 shifts for 12 months in each FY 22-23 and 23-24 with the following conditionality:1. It will be an integrated call centre for GR, Health advice, ECD, Mental health, SUMAN etc.  2. All operational costs will be included in this.  3. This will be comprehensive call centre for redressal of grievances, health helpline, ECD, SUMAN and any other services.  4. State needs to issue a G.O. for time bound escalation and addressing of grievance.  5. State should generate awareness regarding the help line with adequate IEC.  6. Monthly monitoring of following KPIs by state:  a) Average calls received per day and per month.  b) % of calls attended by Call Operator, Medical Officer (MO) and Counselling Officer (CO).  c) Total average handling time (AHT) of call operator, MO and CO at the centre.



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								d) % dropped, missed, silent, abandoned, valid incomplete, noise / disturbance calls of the total calls/month. e) % of calls service wise- Grievance, Health Information, Counselling, SUMAN, ECD.
		179	PPP	0.00	0.00	0.00	0.00	
6		180	Free Drugs Services Initiative	807.00	807.00	807.00	807.00	Approved Rs 800 lakhs for FY 2022-23 & FY 2023-24 under free drugs initiatives. For annual maintenance of DVDMS @ Rs 7 Lakhs is also Approved approved. The State must ensure followings:- 1. Purchase of drugs from the State EDL. 2. Drugs should be purchase for DHs and below facilities and not for Medical colleges. 3. Quality of drugs should be tested from NABL accredited lab.
	# .	181	Free Diagnostic s Services Initiative	0.00	0.00	0.00	0.00	
	26 M	182	Mobile Medical Units	0.00	0.00	0.00	0.00	



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amoun	t Proposed	Amount	Approved	Gol Remarks
	Theme			FY	FY	FY	FY	
				2022-23	2023-24	2022-23	2023-24	
	1	183	State specific Programm	21.20	21.20	21.2	21.2	Rs. 21.2 Lakhs proposed each for FY 2022-23 & 2023-24 for following IEC Activities
			e Interventi ons and		5			<ul><li>1. Hiring Vehicle for IEC team to conduct supervises and monitor IEC Activities at the periphery- Rs. 8 Lakhs</li><li>2. Taluka wise canopy for conducting exhibition during</li></ul>
	30.1	8	Innovation s					various occasion like youth festival, health mela, other exhibitions etc. Rs. 1.2 Lakhs
								3 LED Boards for CHCs/SDH/DH with GPRS (General packet Radio services) Facility- Rs. 10 Lakhs 4. Social media advertisements- Rs. 2 Lakhs May be Approved.
HSS.8	Invento ry manage ment	184	Biomedical Equipment Manageme nt System and AERB	255.55	260.00	255.55	260.00	Rs. 252.55 Lakhs for biomedical equipment maintenance @ 5.99% of total asset value and an amount of INR 3.00 Lakhs for Maintenance of Diesel Generator (10KV) supplied under NHM Approved.  Total amount of INR 255.55 is Approved.
HSS.9	HRH	185	Remunerat ion for all NHM HR	3009.41	3250.17	3017.16	3237.02	Approval for HRH under NTEP Drug store is shifted from 73 Approved 756 positions of service delivery staff and 115 programme management staff as per discussion in NPCC. Details of the Posts Approved are provided in the HR Annexure.
								Lumpsum amount of Rs. 19.30 lakhs in FY 2022-23 and Rs 20.84 lakhs for FY 2023-24 is Approved for support staff. Rs 131.82 lakhs in FY 2022-23 and Rs 142.37 lakhs in FY 2023-24 is Approved for data entry operations for 12 months in principle. The services may be outsourced to the extent possible. State to refer to JS (Policy)'s letter dated 22 July 2016 (D.O.No.10(36)/2016-NRHM-I) for details.

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FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								Salary for staff on deputation is to be paid as per extant state govt norms. Approved Annual Increment as per the principles mentioned in the HR Annexure. EPF (Employer's contribution) @ 13.36% is Approved only for staff drawing salary <= Rs 15000 pm as on 1st April 2015 and any other staff engaged @ Rs 15000 pm or less after 1st April 2015. The State Administrative Officer looking after Salary must ensure proper calculation and disbursal as mentioned. Please refer to JS (P)'s letter dated 8 March 2016 (D.O.No.G.27034-8/2015-NHM(F)).  Details of the approved posts and budget is provided in the HR annexure. Actual amount is to be calculated by the state based on principles mentioned in the HR Annexure.  The approvals will continue in FY 2023-24 based on midterm assessment (if any).  State has proposed amount of Rs 1.99 Lakhs for FY 2022-23 and Rs 2.15 lakhs for FY 2023-24 for HR for Genomic
#	#).							Sequencing Lab. As per NPCC Discussion, the same has been approved as project cost and shifted to Sr. No. 198
		186	Incentives( Allowance, Incentives, staff welfare fund)	280.55	302.99	8.30	8.30	Amount proposed is not matching HR Annexure.  Approved Rs 6.4 Lakhs for service delivery HR and Rs 1.6 Lakhs for programme management HR under NHM as staff welfare fund. As approved in case of Chhattisgarh/ Odisha, state to follow same norms and may explore insurance model through trust mode/ co-payment or any other model available within the state.
				a .	μ			<b>Performance based incentives:</b> In principle Approved. The framework shared by state is for performance appraisal for



FMR Code	Progra mme/	No.	Scheme/ Activity	Amount	Proposed	Amount	Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
								which annual increment is provided. For providing Performance Based Incentives, State should share the performance framework along with objective estimated levels of achievement, which must be above the current average performance.  Experience bonus: The state has already been given the approval for additional amount as experience bonus in FY 2018-19 for bringing pay parity. It was applicable only for personnel getting lesser than the more recent recruits for similar positions, with similar education qualifications, skills and workload and was not to be distributed as a yearly bonus for staff. Amount proposed in this year's PIP is not
								Approved.  Not Approved for incentives regarding Paediatric ECHO and DEIC.
		187	Remunerat ion for CHOs	240.00	350.40	240.00	350.40	Incentives under FP- Approved Rs. 0.30 lakhs in both FYs. Approved at Rs 240 Lakhs for FY 22-23 and Rs 350.40 Lakhs for FY 23-24.
		188	Incentives under CPHC	124.38	124.38	124.38	124.38	The state has proposed for team based incentive for only Medical Officers at PHC-HWC for 55 PHC-HWCs and ANMs at SHC-HWC team for 141 SHC-HWCs. This activity is Approved at Rs 124.38 Lakhs for FY 22-23 and Rs 124.38 Lakhs for FY 23-24. However, the state to note that the team based incentives at PHC-HWC level includes MO, SN and MPW and other staff as per State context. Similarly, at SHC-HWC level, TBI includes CHOs in addition to ANMs. The state is suggested to revise the proposal and budget for remaining team members at PHC-HWC and SHC-HWC.



FMR Code	Progra mme/			Amount A	Approved	Gol Remarks		
	Theme			FY	FY	FY	FY	
				2022-23	2023-24	2022-23	2023-24	
	* 4	189	Costs for HR Recruitme nt and Outsourcin g	12.59	12.00	12.59	12.00	Budget of Rs. 12.59 Lakhs in FY 21-22 and Rs. 12 Lakhs for 22-23 may be Approved towards costs for HR recruitment and outsourcing.  The proposal of Rs. 4.32 Lakhs for outsourcing PF related litigation issues to an external agency. May be met out of programme management cost approved under sl no 194. State to engage legal services for all legal matters under NHM and not separately for PF related issues.
		190	Human Resource Informatio n Systems	2.50	2.50	2.50	2.50	New activity: Rs. 2.5 Lakhs Approved in FY 22-23 and 23-24.
1100.1		101	(HRIS)	0.00	0.00	0.00	0.00	
HSS.1 0	Enhanci ng HR	191	DNB/CPS courses for Medical doctors	0.00	0.00	0.00	0.00	
	* 8	192	Training Institutes and Skill Labs	14.76	15.31	14.76	15.31	Approved Rs. 14.76 lakhs in FY 2022-23 & Rs. 15.31 lakhs in FY 2023-24 for operational cost of SIHFW.
HSS.1 1	Technic al Assista nce	193	SHSRC / ILC (Innovatio n & Learning Centre)	0.00	0.00	0.00	0.00	
		194	Planning and Program Manageme nt	84.60	84.60	91.72	91.72	Approval shifted from sl no 32, 40, 189 Rs 764.98 lakhs for 2022-23 and Rs 805.86 lakhs for FY 2023-24 PM and M&E cost has already been approved under various heads. An amount of Rs 91.72 lakhs for FY 2022-23 and Rs 91.72 lakhs for FY 2023-24 is Approved for the



FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount	Amount Proposed		Approved	Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
					·			activities mentioned under sl. no 194. No infrastructure activities, no HR and no vehicle can be purchased using the approved PM cost. State to ensure that overall expenditure under Program Management and M&E do not exceed the limit of 14% as mandated by Mission Steering Group.
HSS.1 2	IT interve ntions and systems	195	Health Manageme nt Informatio n System (HMIS)	4.00	4.00	3.00	3.00	Approved Rs. 3.00 Lakh for FY 2022-23 and Rs 3.00 Lakh for FY 2023-24 as follows:  Activity 1: Rs 1.00 Lakh for FY 2022-23 & 2023-24 for 2 State level 3 days training cum review meetings per year for HMIS & MCTS / RCH portal / ANMOL if launched. Expected participants: 10 from State and 5 from each District.
					* <sub>1</sub>		, a.	Activity 2: Rs 1.00 Lakh for FY 2022-23 & 2023-24 for printing of HMIS formats. Activity 3: Rs 1.00 Lakh for FY 2022-23 & 2023-24 for mobility at State & District Level. TA / DA should be as per extant rules.
25	-	196	Implement ation of DVDMS	0.00	0.00	0.00	0.00	
	H	197	eSanjeeva ni (OPD+HW C)	0.00	0.00	0.00	0.00	
HSS.1 3	Innovat ion	198	State specific Programm e Innovation s and Interventi ons	0.00	0.00	1.99	2.15	Shifted from Sr. No. 185- State has proposed amount of Rs 1.99 Lakhs for FY 2022-23 and Rs 2.15 lakhs for FY 2023-24 for HR for Genomic Sequencing Lab. As per NPCC Discussion, the same is Approved as project cost.

FMR Code	Progra mme/	S. No.	Scheme/ Activity	Amount Proposed		Amount Approved		Gol Remarks
	Theme			FY 2022-23	FY 2023-24	FY 2022-23	FY 2023-24	
HSS.1	Untied	199	Untied	270.00	270.00	270.00	270.00	Activity 1: Approved Rs 20 lakhs @ Rs 10 lakhs/DH for 2
4	Grants		Fund					District hospitals as untied grants as per GoI norms. Activity 2: Approved Rs 40 lakhs @ Rs 5 lakhs/facility for 8 SDH/CHCs as untied grants as per GoI norms. Activity 3: Approved Rs 40.25 lakhs @ Rs 1.75 lakhs/PHC for 23 Primary Health Centres as untied grants as per GoI norms. Activity 4: Approved Rs 54.75 lakhs @ Rs 0.25 lakhs/SHC for 219 Sub-Health Centres as untied grants as per GoI norms. Activity 5: Approved Rs 28.5 lakhs @ Rs 0.10 lakhs/VHSNC for 285 VHSNCs as untied grants as per GoI norms. Activity 6: Approved Rs 86.5 lakhs @ Rs 50000/HWC-SC as untied grants for Jan ArogyaSamiti for 173 HWC-SCs.
HS	S Sub Tota	11		6679.64	6493.38	6323.07	6085.17	
GRA	AND TOTA	L		10663.5	10399.18	10179.6 7	9875.48	



## Annexure 6: Committed Liabilities of FY 2021-22 as a part of ROP for FY 2023-24

The details of committed liabilities for FY 21-22 that will be part of RE for FY 22-23 and subsequently a part of ROP for FY 22-23 is placed as under:

(Rs. in Core)

PIP Code	FMR Code	Name of the Pools	Committed Liabilities for FY	Total
Couc			21-22	
a	A	REPRODUCTIVE AND CHILD HEALTH		1.16
b	A.1	MATERNAL HEALTH		
6.1.1. 1	A.1.10	Procurement of bio-medical and other equipment: MH	0.24	
9.1.1	A.1.12	Setting up Training Institutions for MH Services	0.21	
h	A.2	CHILD HEALTH		
1.3.1. 1	A.2.2.1	Operating expenses for SNCU	0.04	
6.1.1. 2	A.2.16	Procurement of bio-medical and other equipment: CH	0.40	
12.1. 2	A.2.23	Printing activities under CH	0.05	
m	A.3	FAMILY PLANNING	•	
u	A.4	ADOLESCENT HEALTH / RKSK (Rashtriya Kishore SwasthyaKaryakram)	A	
2.2.2	A.4.1.4	Mobility & Communication support for AH counsellors	0.02	
3.2.1. 2	A.4.2	Community level Interventions for AH Services	0.02	
9.2.1. 4	A.4.6	Adolescent Health Trainings	0.03	
w	A.5	RBSK		
1.1.2. 3	A.5.2	Referral Support for Secondary/ Tertiary care (pl give unit cost and unit of measure as per RBSK guidelines) - RBSK	0.11	
6.1.1. 5	A.5.6	Procurement of bio-medical and other equipment: RBSK	0.03	-
Z	A.6	TRIBAL RCH	-	
16.5	A.7	PNDT Activities	•	
aa	A.11	VULNERABLE GROUPS	-	e e
18.1	A.12	Innovations under RMNCH+A	-	
	В	Health System Strengthening	-	4.519
	B.2	Untied Funds/Annual Maintenance Grants /Corpus Grants to HMS/RKS		



PIP	FMR Code	Name of the Pools	Committed	Total
Code	Carrent Commence	3 4 1	Liabilities for FY	
			21-22	
ag	B.4	Hospital Strengthening		
5.1.1	B.4.2	Additional Building/ Major	0	=
.1		Upgradation of existing Structure	\$1	
5.1.1	B.4.1	Upgradation/ Renovation		
.2	D 4 4 7	D. W. I	0.400	
5.1.1. 2.11	B.4.1.7	Drug Warehouses	0.120	
5.1.1.	B.4.1.5	Others (setting up of solar PV	1.000	
2.14		System)		F5
aj	B.10	IEC-BCC NRHM		
11.2.	B.10.4	Other IEC/BCC activities	0.020	
7				
ak	B.11	National Mobile Medical Units		
		(Including recurring expenditures)		
an	B.15	Planning, Implementation and		
		Monitoring		
ao	B.15.2	Quality Assurance & Grievance	- 1	
		Redressal		
ap	B.15.2.1	Quality Assurance		
13.1.	B.15.2.1.9	Quality Assurance Implementation		
1	D152101	(for traversing gaps)	0.020	
13.1. 1.1	B.15.2.1.9.1	Calibration	0.030	
13.1.	B.15.2.1.9.2	AERB		
1.2	D.13.2.1.7.2	AEKD	6 P 8	u.
13.1.	B.15.2.1.9.3	EQAS for Labs	0.003	
1.3	D.13.2.1.7.3	EQUID TOT BADS	0.003	
13.1.	B.15.2.1.9.5	Specific Interventions for promotion	0.008	
1.5	D14012121710	of patient safety	0.000	
13.1.	B.15.2.1.9.6	Any other (please specify)		
1.6				
13.1.	B.15.2.1.10	Quality Assurance Assessment (State	0.002	
2		& district Level assessment cum		
		Mentoring Visit)		
13.1.	B.15.2.1.11	Quality Assurance Certifications, Re-	0.030	
3		certification (National & State		
	5.15.5.1.0	Certification) under NQAS		
13.1.	B.15.2.1.12	LaQshya certifications and	0.020	×
4		recertification (National & State		
20	B.15.2.1.13	Certification) under LaQshya  Misc. (Incentives, TISS Quality		
aq	D.13.2.1.13	Course & IT Based		
		application etc.)		
13.1.	B.15.2.1.13.1	Incentivisation on attainment of	0.160	
5		NQAS certification (Please provide	0.100	
		details in Annexure)		



Code		Name of the Pools	Committed	Total
Coue		A	Liabilities for FY	
			21-22	
ar	B.15.2.2	Kayakalp		
13.2.	B.15.2.2.2	Assessments	0.005	
13.2. 2	B.15.2.2.3	Kayakalp Awards	0.100	
13.2. 3	B.15.2.2.4	Support for Implementation of Kayakalp		
13.2. 3.1	B.15.2.2.4.1	Biomedical Waste Management	0.100	
13.2. 4	B.15.2.2.5	Contingencies	0.045	
13.3. 1	B.15.2.2.8	Comprehensive Grievance Redressal Mechanism	0.100	
as	B.15.3	Monitoring and Evaluation	=	
at	B.15.3.1	HMIS		
16.3. 5	B.15.3.2.10/ B.15.3.2.11	Call Centre (Capex/ Opex) (ECD-GVK)	0.280	
12.2. 4	B.15.3.6	Printing activities under HMIS/MCTS	0.009	
14.2. 2	B.15.3.3	Implementation of DVDMS		
av	B.16	PROCUREMENT		
aw	B.16.1	Procurement of Equipment		
6.1.6. 7	B.16.1.2	Any Other (AMC of 7 DG Set)	0.010	
6.2.2. 5	B.16.1.7	Free drug services	1.500	
8	B.30	Human Resources		
8.3	B.30.21	EPF (Employer's contribution) @ 13.36% for salaries <= Rs.15,000 pm	0.100	
az	B.32	PROGRAMME MANAGEMENT		
16.4.	B.32.6	EPF (Employer's contribution) @	0.020	
5		13.36% for salaries <= Rs.15,000 pm		
16.4. 6	B.32.7	Fund for NHM staff welfare		
	B.33	Innovations under HSS		
	B.33.1	Any Other - PACS system	0.340	
	B.34	HSS Others		
	B.34.1	Setting up of ECHO hub		
	B.34.2	Programme Management Activities under HSS -Voluntry contingency	0.080	
	B.34.4	Strengthening of Existing Training Institutions/Nursing School	0.140	
		(excluding infrastructure and HR)	I I	



Second   S	PIP	FMR Code	Name of the Pools	Committed	Total
9.2.2.   B.34.5.1   PMU Trainings	Code	DESCRIPTION TO S	* * 1	Liabilities for FY	
2   9.1.4.   B.34.5.2   HR for Nursing Schools/ Institutions/ Nursing Directorate/ SIHFW supported under NHM     9.2.2.   B.34.5.1.4   ASHA facilitator/ARC trainings     3   9.2.2.   B.34.5.1.5   Trainings on Outreach Services/ RT     4   9.2.2.   B.34.5.1.6   IMEP Training   0.017     9   9   9.2.2.   B.34.5.1.7.1   PGDHM Courses   0.060     10   bd   B.36   Ayushman Bharat Health & Wellness Centre (AB-H&WC)     6.1.2.   B.34.7   IT Equipment for HWC   0.100   0.100     C   IMMUNISATION   RI strengthening project (Review meeting, Mobility support, Outreach services etc.)     0   C   IMMUNISATION   C.1.f   Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)     2.3.1.   C.1.f   Focus on slum & underserved areas in vacant sub-centers (Rs.1.50/-)     14.2.   C.1.h   Alternative vaccine delivery in hard to reach areas   1.5     14.2.   C.1.h   Alternative vaccine delivery in other areas   1.5     14.2.   C.1.i   Alternative Vaccine Delivery in other areas   1.5     14.2.   C.1.i   Alternative Vaccine Delivery in other areas   1.5     14.2.   C.1.i   Alternative Vaccine Delivery in other areas   1.5     14.2.   C.1.i   Alternative Vaccine Delivery in other areas   1.5     14.2.   C.1.i   Consumables for computer including provision for internet access for strengthening RI   1.5     13.2.   C.1.n   Consumables for computer including provision for internet access for strengthening RI   1.5     15.   C.1.n   Supplies for Immunization   1.5     16.   C.1.o   Hub Cutter   1.5	0.2.2	D 24 F 1	DMII Tue in its and	21-22	
9.1.4.   B.34.5.2   HR for Nursing Schools/ Institutions/ Nursing Directorate/ SHFW supported under NHM     9.2.2.   B.34.5.1.4   ASHA facilitator/ARC trainings     9.2.2.   B.34.5.1.5   Trainings on Outreach Services/ RT     9.2.2.   B.34.5.1.6   IMEP Training     9.2.2.   B.34.5.1.7.1   PGDHM Courses     10	1	B.34.5.1	PMU Trainings		
2		R 34 5 2	HR for Nursing Schools / Institutions /	0.140	
Supported under NHM     9.2.2.     8.34.5.1.4   ASHA facilitator/ARC trainings     9.2.2.     8.34.5.1.5   Trainings on Outreach Services/ RT     4		D.54.5.2		0.140	
9.2.2.   B.34.5.1.4   ASHA facilitator/ARC trainings         9.2.2.   B.34.5.1.6   IMEP Training         9.2.2.   B.34.5.1.6   IMEP Training       9.2.2.   B.34.5.1.7.1   PGDHM Courses       10.00	_				
3   9.2.2   B.34.5.1.5   Trainings on Outreach Services / RT   4   9.2.2   B.34.5.1.6   IMEP Training   0.017   9   9.2.2   B.34.5.1.7.1   PGDHM Courses   0.060	9.2.2.	B.34.5.1.4		X	
4   9.2.2.   B.34.5.1.6   IMEP Training   0.017         9.2.2.   B.34.5.1.7.1   PGDHM Courses   0.060       10	3		,		
9.2.2.   B.34.5.1.6   IMEP Training   0.017     9   9.2.2.   B.34.5.1.7.1   PGDHM Courses   0.060     10   bd   B.36   Ayushman Bharat Health & Wellness Centre (AB-H&WC)     6.1.2.   B.34.7   IT Equipment for HWC   0.100   0.100     C   IMMUNISATION   RI strengthening project (Review meeting, Mobility support, Outreach services etc.)     2.3.1.   C.1.f   Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular AMM under NUHM not engaged)     2.3.1.   C.1.g   Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)     14.2.   C.1.h   Alternative vaccine delivery in hard to reach areas     14.2.   C.1.v   AVD in very hard to reach areas esp. notified by States/districts     14.2.   C.1.i   Alternative Vaccine Delivery in other areas     14.2.   C.1.i   Alternative Vaccine Delivery in other areas     14.2.   C.1.i   Alternative Vaccine delivery from State to district and from district to PHC/CHCs     13.2.   C.1.m   Consumables for computer including provision for internet access for strengthening RI     6.2.1.   C.1.n   Supplies for Immunization     6.3.1.   C.1.o   Hub Cutter	9.2.2.	B.34.5.1.5	Trainings on Outreach Services/RT	0.080	
9	4				
9.2.2.   B.34.5.1.7.1   PGDHM Courses   0.060	1	B.34.5.1.6	IMEP Training	0.017	
10   bd   B.36   Ayushman Bharat Health & Wellness Centre (AB-H&WC)					W.
bd B.36 Ayushman Bharat Health & Wellness Centre (AB-H&WC) 6.1.2. B.34.7 IT Equipment for HWC 0.100 0.100  C IMMUNISATION C.1 RI strengthening project (Review meeting, Mobility support, Outreach services etc.)  2.3.1. C.1.f Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)  2.3.1. C.1.g Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)  14.2. C.1.h Alternative vaccine delivery in hard to reach areas esp. notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCS  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter		B.34.5.1.7.1	PGDHM Courses	0.060	l'
Wellness Centre (AB-H&WC)   C.1   C.1   MI strengthening project (Review meeting, Mobility support, Outreach services etc.)   O.10   O.16		D.0.6			
6.1.2. B.34.7   IT Equipment for HWC   0.100   0.100    C   IMMUNISATION   C.1   RI strengthening project (Review meeting, Mobility support, Outreach services etc.)    2.3.1.   C.1.f   Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)    2.3.1.   C.1.g   Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)    4.2.   C.1.h   Alternative vaccine delivery in hard to reach areas   4.1    4.2.   C.1.v   AVD in very hard to reach areas esp. notified by States/districts    4.2.   C.1.i   Alternative Vaccine Delivery in other areas   4.2.    4.2.   C.1.i   Alternative Vaccine delivery from State to district and from district to PHC/CHCs    6.2.1.   C.1.m   Consumables for computer including provision for internet access for strengthening RI    6.2.1.   C.1.n   Supplies for Immunization    6.1.1.   C.1.0   Hub Cutter	ba	B.36		a 0 0	
C.1 IMMUNISATION  C.1 RI strengthening project (Review meeting, Mobility support, Outreach services etc.)  2.3.1. C.1.f Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)  2.3.1. C.1.g Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)  14.2. C.1.h Alternative vaccine delivery in hard to reach areas esp. notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.6.1.1. C.1.0 Hub Cutter	612	D 24 7		0.100	0.100
C.1 RI strengthening project (Review meeting, Mobility support, Outreach services etc.)  2.3.1. C.1.f Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)  2.3.1. C.1.g Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)  1.4.2. C.1.h Alternative vaccine delivery in hard to reach areas esp. notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening Rl  6.2.1. C.1.n Supplies for Immunization  6.6.1.1. C.1.0 Hub Cutter		D.54.7	11 Equipment for 11vvC	0.100	0.100
C.1 RI strengthening project (Review meeting, Mobility support, Outreach services etc.)  2.3.1. C.1.f Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)  2.3.1. C.1.g Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)  14.2. C.1.h Alternative vaccine delivery in hard to reach areas esp. notified by States/districts  14.2. C.1.v AVD in very hard to reach areas esp. notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.6.1.1. C.1.0 Hub Cutter	0	C	IMMUNISATION		
meeting, Mobility support, Outreach services etc.)  2.3.1. C.1.f Focus on slum & underserved areas in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)  2.3.1. C.1.g Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)  1.5. (Rs.1.50/-)  1.4.2. C.1.h Alternative vaccine delivery in hard to reach areas  14.2. C.1.v AVD in very hard to reach areas esp. notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.6.1.1. C.1.o Hub Cutter		17.77			
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9 in urban areas/alternative vaccinator for slums (only where regular ANM under NUHM not engaged)  2.3.1. C.1.g Mobility support for mobile health team/ TA/DA to vaccinators for coverage in vacant sub-centers (Rs.1.50/-)  1.5 (Rs.1.50/-)  14.2. C.1.h Alternative vaccine delivery in hard to reach areas  14.2. C.1.v AVD in very hard to reach areas esp. notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.1 POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter	8			an U	
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6.1.3.   coverage in vacant sub-centers   (Rs.1.50/-)    14.2.   C.1.h   Alternative vaccine delivery in hard   to reach areas    14.2.   C.1.v   AVD in very hard to reach areas esp.   notified by States/districts    14.2.   C.1.i   Alternative Vaccine Delivery in other   areas    14.2.   C.1.i   POL for vaccine delivery from State to   district and from district to   PHC/CHCs    1.3.2.   C.1.m   Consumables for computer including   provision for internet access for   strengthening RI    6.2.1.   C.1.n   Supplies for Immunization    6.1.1.   C.1.o   Hub Cutter		C.1.g		5	
1.5 (Rs.1.50/-)  14.2. C.1.h Alternative vaccine delivery in hard 4.1 to reach areas  14.2. C.1.v AVD in very hard to reach areas esp. 4.2 notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter				=======================================	= =
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4.1 to reach areas  14.2. C.1.v AVD in very hard to reach areas esp. 4.2 notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter		C1h			9
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4.2 notified by States/districts  14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter		C.1.v		=	
14.2. C.1.i Alternative Vaccine Delivery in other areas  14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter	Will District				11
14.2. C.1.l POL for vaccine delivery from State to district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter		C.1.i	· · · · · · · · · · · · · · · · · · ·	0.01	
district and from district to PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter	5	Ō	areas		
PHC/CHCs  1.3.2. C.1.m Consumables for computer including provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter	14.2.	C.1.l		0.0028	
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4 provision for internet access for strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter  10.1					
strengthening RI  6.2.1. C.1.n Supplies for Immunization  6.1.1. C.1.0 Hub Cutter  10.1	A CHARLES CONTRACTOR	C.1.m		= <u>6</u>	
6.2.1. C.1.n Supplies for Immunization 6.1.1. C.1.o Hub Cutter 10.1	4			:	2
6	(21	C1 n			
6.1.1. C.1.0 Hub Cutter 10.1		C.1.II	supplies for infinunization		
10.1		C10	Hub Cutter		
	Carrier Contraction (Contraction Contraction Contracti	G.1.0	Trub Gatter		
		C.1.p	Procurement of bio-medical and	0.0070	



PIP	FMR Code	Name of the Pools	Committed	Total
Code	ON CONTRACTOR AND ADDRESS		Liabilities for FY	
			21-22	
6		other equipment: RI		
2.2.6	C.1.r	Teeka Express Operational Cost	-1	
2.2.9	C.1.s	Measles Rubella SIA operational Cost		
2.2.7	C.1.t	JE Campaign Operational Cost		
14.2.	C.1.u	Operational cost of e-VIN(like	0.0024	
8/16		temperature logger sim card and		
.1.3.1		Data sim card for e-VIN)/Mobility		
.6		support for EVIN VCCM (Rs.1.20/-)		
13.3.	C.3	Quality Management System for AEFI	0.0025	
2/16	=	surveillance under Universal		2
.1.2.1		Immunisation Programme/support		
.13		for state level review meeting		
1 . 1		(Rs.0.36/-)		
9.2.1.	C.8	Trainings under Routine	0.068	
7		Immunisation	0.000	
11.1.	C.9	IEC/BCC activities under	0.035	
5		Immunization	0.000	4
12.1.	C.10	Printing activities under	0.020	
6		Immunization	01020	
14.2.	C.4	Cold chain maintenance	0.0060	-
7	G. 1	dora cham mameenanee	0.0000	
3.1.1.	C.11	Incentives to ASHA		
1.3				
2.2.8	C.6	Pulse Polio operating costs	0.034	0.034
		NIDDCP	0.001	0.001
D.1		IDSP		
16.1.		MOBILITY: Travel cost, POL, etc.		0.015
3.1.7		during outbreak investigation and	0.015	0.013
0.2		field visits for monitoring programme	0.013	
	2	activities at SSU on need basis.		
		NRCP		
9.5.2		Training:Capacity building of Medical	0.005	0.005
9.8		Officers and Health workers-NRCP	0.005	0.003
7.0		PPCL		
16.1.		Mobility Support	0.0075	0.0075
3.1.2		Mobility Support	0.0073	0.0073
0		*		
0		NATIONAL PROGRAMME ON		0.9875
-	5	CLIMATE CHANGE & HUMAN		0.9873
		HEALTH (NPCCHH)		
3.3.3.		Training of PRI	0.0144	
3		Training of Fix	0.0144	
5.1.1		Greening of Health Sectors DH/CHC	0.0646	
2.13		as per IPHS guidelines	0.9646	
11.2		IEC on climate sensitive Disease-Air	0.0025	
4.4.4		마마 (activity) 전 하다 있다면 1980 (1980 ) 2:10 1 He	0.0025	
7.7.4		pollution, Heart and other relevant		



PIP Code	FMR Code	Name of the Pools	Committed Liabilities for FY 21-22	Total
		Climate Sensitive disease	21-22	
12.1 7.3		Printing activities	0.001	
16.1. 2.1.2 4		Task force meeting to draft health sector plan for Het and Air Pollution	0.005	
		NVBDCP		0.20
		Infrastructure		
5.3.1 1	F.1.1.j	Construction and maintenance of Hatcheries	0.02	
6.2.3. 1	B.16.2.11.3.i	Temephos, Bti (AS) / Bti (wp) (for polluted &non polluted water)	0.02	
6.2.3. 1	B.16.2.11.3.j	Pyrethrum extract 2% for spare spray	0.03	
6.2.3. 1	B.16.2.11.3. m	Any other drugs & supplies (please specify)	0.01	
9.2.3. 2	F.1.1.f	Training / Capacity Building (Malaria)	0.03	
11.3. 1	B.10.6.9.a	IEC/BCC for Malaria	0.03	
11.3. 1	B.10.6.9.b	IEC/BCC for Social mobilization (Dengue and Chikungunya)	0.02	
11.3. 1	B.10.6.9.c	IEC/BCC specific to J.E. in endemic areas	0.01	
16.1. 2.2.5	F.1.1.d	Monitoring, Evaluation & Supervision (Malaria)	0.04	
16.1. 3.1.8	F.1.1.d	Monitoring, Evaluation & Supervision & Epidemic Preparedness (Only Mobility Expenses)	0.00	
16.1. 5.3.7	F.1.2.d	Epidemic preparedness (Dengue & Chikungunya)	0.00	
		NVHCP	0	0
		NLEP	0	0
	E	NTEP		
5.3.1 4		5.3.14 Civil works under RNTCP	0.02	0.085
6.1.1. 18		6.1.1.18 Procurement of Equipments	0.065	
		Other Health System Strengthening covered under NUHM		0.25
U.8		Strengthening of Health Services		
U.8. 1		Human Resource		



PIP	FMR Code	Name of the Pools	Committed	Total
Code	anni passi sur		Liabilities for FY	
1104			21-22	
U.8.1 .1		ANMs/LHVs	0.03	
U.8.1 .2		Staff nurse	0.01	
U.8.1		MOs	0.11	
.8 U.8.1		Lab Technicians	0.00	
.3			0.00	
U.8.1 .4		Pharmacists	0.01	
U.8.1 .5.3	*:	Others	0.00	
U.8.1		Support Staff for Health Facilities	0.00	
.10		Support Stair for Health Facilities	0.00	
ff		Any Other activities	0.01	
U.8.2		Annual increment for all the existing positions	0.01	. 11
U.8.3		EPF (Employer's contribution) @ 13.36% for salaries < Rs.15,000 pm	0.02	a
U.16 .1	- 7	Programme Management Activities	-	
U.16.	,	Monitoring, Evaluation and	0.01	
1.2.2 U.16.		Supervision Mobility Support	0.01	
1.3 U.16.		Operational Cost	0.00	- ,
1.4				
U.16 .4		Human Resources	<del>-</del> .	= =====================================
U.16. 4.1		State PMU	0.02	9
U.16. 4.2		District PMU	0.01	
fj		Ayushman Bharat Health and		
1,		Wellness centres under NUHM	*	
U.5.3 .1		Infrastructure strengthening of UPHC to H&WC	0.02	0.08
U.6.1		Equipment for AB-HWCs	0.05	
.1 U.6.2 .4.1		Supplies for Ayushman Bharat Health & Wellness Centres (AB-H&WC) lab consumable	0.01	
U.11. 2		IEC activities for Health & Wellness centre (H&WC)	0.00	
U.12. 2		Printing activities for H&WC	0.01	



PIP	FMR Code	Name of the Pools	Committed	Total
Code	01510101010101		Liabilities for FY	
		TOTAL	21-22	
		NPCBVI		
6.1.1 .19.4		Grant in Vision Centre Rs 0.089	0.089	0.089
ex	W	National Oral Health Programme (NOHP)		0.23
6.1.5. 8	W.1	Procurement of bio-medical and other Equipment: NOHP	0.13	
6.2.4. 7	W.2	Supplies for NOHP		-
11.4. 6	W.3	IEC/BCC under NOHP	-	
5.1.1. 2.2	W.4	Grant-in-aid for strengthening of Dist District Hospitals (Renovation, Dental Chair, Equipment)	0.10	
12.4. 10	W.5	Printing activities under NOHP		
9.5.2 9.5.4		training NOHP		
		NCDC Paogramme		3.4
Е	e a B	NCD Flexible Pool (NPCBVI, NMHP, NPHCE, NTCP, NPCDCS, PMNDP, NPCCHH)	4	
Z.1	. ,	Procurement of bio-medical and other Equipment: NPPCD	0.15	
Z.2.5		IEC for NPPCD	0.01	
6.1.5 .5		Non – recurring: Equipment for District NCD	0.3	- 2
6.2.4 .5		Drugs & consumables for NCD Management	0.03	а
17.2. 1	-	Tele medicine/Tele consultation under Ayushman Bharat Health and Wellness Centre	0.834	*
5.1.1. 2.8		Infrastructure strengthening to HWC	1.92	-
6.1.2.		IT Equipment for HWC	0.096	
6.2.2. 6	-	Lab strengthening of HWC	0.06	
			Total	11.33

# 23/05/22