

**Record of Proceedings of the National Programme
Coordination Committee (NPCC) for the PIP approval of
Bihar, held under the Chairmanship of Shri G.C. Chaturvedi,
Additional Secretary and Mission Director, NRHM for
approval of NRHM Programme Implementation Plans of
States and UTs for the year 2009-10**

A meeting of the NPCC of NRHM was held under the Chairmanship of AS & MD, NRHM, to approve the PIP of Bihar on 28 February 2009. The list of members who attended the meeting is placed at Annex. I. The NPCC meeting was convened after the Pre- Appraisal meeting for the State with written and oral comments provided to the State to modify the proposal before the NPCC.

It was clarified to the States that the proposal of the State under NRHM 2009-10 would comprise of the following resources:

- (A) Unspent balance under NRHM in the State on 1 April 2009.
- (B) Resource Envelope for the State under NRHM from the Ministry of Health and Family Welfare, GOI, as communicated by the Ministry to the States. It is proposed to increase the allocation for purposes of PIP approval, by 25% over the previous year. The actual release of funds will be as per the resource envelope provided in the vote on account Budget unless there are changes when the main Budget is presented in June 2009.
- (C) 15% State contribution to NRHM made as a grant to the State Health Society. The 15% contribution will be against the overall Resource envelope of NRHM proposed at "B" above.

Based on the above principle, the allocation for the State is as follows:
(Rs. in Crore)

1	Unspent Balance under NRHM on 1.4.2009.	Rs.251.25
2	GOI Resource Envelope for 2009-10 under NRHM (including a 25% higher allocation for purposes of PIP approval)	Rs.895.54
3	15% State share of 2 above.	Rs.134.33
	Total	Rs. 1281.12

The Resource Pool wise break up of total NRHM resources is as follows:
(Rs. in Crore)

	Unspent balance on 1.4.2009.	Resource Envelope under NRHM
RCH Flexible Pool (including Immunization)		Rs. 278.87
NRHM Flexible Pool	Rs.250.00	Rs. 192.61
Pulse Polio		Rs. 76.98
NVBDCP		Rs. 37.73
RNTCP		Rs. 24.14
NPCB		Rs. 5.19
NIDDCP		Rs. 0.18
IDSP	Rs.1.25	Rs. 1.30
NLEP		Rs. 2.80
Infrastructure Maintenance (Treasury Route)		Rs. 157.22
15% State Share		Rs. 134.33
NPPCD (if any)		
25% above the GoI Resource envelope for purposes of NPCC approval.		Rs. 179.11
Total	Rs.251.25	Rs. 1090.46

Based on the State's PIP and deliberations thereon the Plan for the State is approved as per the detail of Annexure II (RCH Flexible Pool), Annexure III (NRHM Flexible Pool), Annexure-IV (Immunization) & Annexure -V (National Disease Control Programme).

Proposed amounts in the State PIP and approvals accorded are given in the table below.

Table 3
SUMMARY OF APPROVAL
(Details provided in respective Annexes)

	Scheme/ Programme	Approved Amount (In Rs. Crore)
1.	RCH Flexible Pool (Including Immunization)	Rs.448.78
2.	NRHM Flexible Pool	Rs. 514.90
3.	Pulse Polio	Rs. 76.98
4.	NVBDCP	Rs. 37.73
5.	RNTCP	Rs. 11.34
6.	NPCB	Rs. 3.48
7.	NIDDCP	Rs. 0.18
8.	IDSP	Rs. 1.48
9.	NLEP	Rs. 2.61
10.	Infrastructure Maintenance (Treasury Route)	Rs.157.22
	TOTAL	Rs. 1254.70

Note: The approvals include the unspent balance reported by the State as on 01/04/2009.

The following general conditions will apply:-

1. All posts under NRHM are on contract and based on local criteria. The appointment should be done by the Rogi Kalyan Samiti /District Health Society. Residence at place of posting is mandatory. All such appointments are for a particular institution and non transferable.
2. Blended payments comprising of a base salary and a performance based component, should be encouraged.

3. State Government must fill up its existing vacancies against sanctioned posts, preferably by contract.
4. Transparent transfer and career progression systems should be implemented in the State.
5. Delegation of administrative and financial powers should be completed during the current financial year.
6. State shall set up a transparent and credible procurement and logistics system on the lines of the Tamil Nadu Medical Services Corporation. State agrees to periodic procurement audit by third party to ascertain progress in this regard.
7. The State shall undertake institution specific monitoring of performance of Sub Centre, PHCs, CHCs, DHs, etc.
8. The State shall operationalize an on-line HMIS in partnership with MOHFW.
9. The State shall take up a massive capacity building exercise of Village Health and Sanitation Committees, Rogi Kalyan Samitis and other community /PRI institutions at all levels.
10. The State shall ensure regular meetings of all community Organizations /District /State Mission with public display of financial resources received by all health facilities.
11. The State Govts. shall also make contributions to Rogi Kalyan Samitis and transfer responsibility of maintenance of institutions to them.
12. The State shall endeavour to bring the Budget of Health facilities under the supervision of the concerned Rogi Kalyan Samitis.
13. The State shall prepare Essential Drug lists of generic drugs and Standard treatment Protocols, and give it wide publicity.
14. The State shall focus on the health entitlements of vulnerable social groups like SCs, STs, OBCs, Minorities, Women, migrants etc.
15. The State shall ensure timely performance based payments to ASHAs/Community Health Workers.
16. The State shall encourage in patient care and fixed day services for family planning.

17. The State shall ensure effective and regular organization of Monthly Health and Nutrition Days and set up a mechanism to monitor them.
18. All performance based payments/incentives should be under the supervision of Community Organizations (PRI)/RKS.
19. The State agrees to follow all the financial management systems under operation under NRHM and shall submit Audit Reports, FMRs, Statement of Fund Position, as and when they are due. State also agrees to undertake Monthly District Audit and periodic assessment of the financial system.
20. The State agrees to fast track physical infrastructure upgradation by crafting State specific implementation arrangements. State also agrees to external evaluation of its civil works programmes.
21. The State Govt. agrees to co-locate AYUSH in PHCs/CHCs, wherever feasible.
22. The State agrees to focus on quality of services and accreditation of government facilities.
23. The State/UT agrees to undertake community monitoring on pilot basis, wherever not tried out as yet, and scale up with suitable model wherever piloted earlier.
24. The State/UT agrees to undertake continuing medical and continuing nursing education.
25. The State agrees to make health facilities handling JSY, women and child friendly to ensure that women and new born children stay in the facility for 48 hours.
26. The State Government shall, within 45 days of the issue of the record of Proceedings, issue detailed District wise approvals and place them on their web site for public information.
27. State Government agrees to refund the unspent balances against specific releases made in 2005-06.
28. The second ANM is admissible to the extent that MPW(Male) is provided. Otherwise, State Government will bear the cost of the 2nd ANM.

Annex - I

List of participants of National Programme Coordination Committee of NRHM to consider the State PIP of Bihar held on 26.2.09

S. No.	Name & Designation	E-mail ID
1.	Shri G C Chaturvedi, AS&MD	chaturvedi_gc@nic.in
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Representatives from Govt. Of Bihar		
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APPROVAL OF RCH II PIP 2009-10: BIHAR

ANNEX-II

(Rs. Lakhs)

S. No.	BUDGET HEAD	PROPOSED	APPROVED
1	Maternal Health	169.26	169.26
2	Child Health	3142.69	1610.85
3	Family Planning	382.02	190.14
4	ARSH	49.05	39.05
5	Urban RCH	158.00	158.00
6	Tribal RCH	0.00	0.00
7	Vulnerable Groups	7937.28	0.00
8	Innovations/ PPP/ NGO	243.25	150.00
9	Infrastructure & HR	6642.60	6456.24
10	Institutional Strengthening	586.80	586.80
11	Training	2132.84	2124.84
12	BCC / IEC	834.89	681.89
13	Procurement	3378.70	67.50
14	Programme Management	989.34	829.14
15	Others/ Untied Funds	0.00	0.00
	Total RCH II Base Flexi Pool	26646.72	13063.71
16	JSY	22995.90	22995.90
17	Sterilisation & IUD Compensation, and NSV Camps	7100.50	5625.00
	GRAND TOTAL RCH II	56743.12	41684.61

**State's proposed budget does not include carried over balance reported in the detailed budget for specific activities (Annex 3e). Carried over balance (Rs. 2390.28 lakhs) has been added to proposed budget accordingly.*

Note:

1. Activities have been re-classified as per FMR/ Operating Manual heads; details are provided in attachment "A".
2. Details of activities approved/ not approved, and specific comments, are provided in attachment "A".
3. Expenses are to be booked as approved in attachment "A".

GENERAL COMMENTS

- State should ensure quality of care for pregnant women at public healthcare institutions by ensuring :
 - adequate number of trained staff and doctors
 - improved physical infrastructure of the facility
 - post- delivery stay of 48 hours
 - provision/ assured linkage of blood storage unit at the FRUs
 - up-gradation of PHCs & CHCs into 24*7
- The state should improve implementation of JSY by ensuring that:

- Payment is made to the beneficiary at the time of delivery through bearer cheque
 - Referral package is as per guidelines.
 - Monitoring of JSY is as per directives of GOI.
 - Grievance redressal mechanism for JSY is set up at the local level; listing of beneficiaries outside the PHC/ CHC, etc should be instituted for ensuring transparency and for facilitating grievance redressal.
 - Quality of deliveries at public health facilities is monitored; private sector facilities are accredited and monitored.
- Incentives on per case basis are not permissible. There needs to be minimum threshold above which incentives should be allowed. Incentives should be consolidated wherever feasible. Clear performance benchmarks for the incentives as well as monitoring mechanisms (e.g. VHSC, RKS, District/ State level authorities, etc.) should be set.
 - State to update beneficiary/ eligible couple registers (ECR) in April to get the list of potential clients; give cards to clients and track services received at VHNDs and home visits; and match cards with ECR to track left outs.
 - New construction is not permissible under RCH II. Repairs/ renovations of existing OTs/ labour rooms for operationalisation of FRUs, 24/7 PHCs and SCs may be permitted.
 - Contractual staff has to be engaged on a consolidated amount. No other allowance is admissible to them.
 - Purchase of vehicles is not permitted under NRHM/ RCH II.
 - A system should be developed for holistic monitoring of the PIP based on outcomes, costs and activities. Further, underlying systems at the district and state level should be revamped for analysing variances against the set targets and corresponding budgets for the strategies /activities on a quarterly basis.
 - State needs to refund the unspent balance from RCH-I (Rs. 8.50 crores), to Gol.

ATTACHMENT "A"

BIHAR

(Rs. Lakhs)

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
A.1	MATERNAL HEALTH			
A.1.1	Operationalise facilities			
A.1.1.1	Operationalise FRUs	133.44	133.44	Operationalisation of BSUs also includes HR costs. These have been re-classified under Infrastructure and HR.
A.1.1.2	Operationalise 24x7 PHCs	9.50	9.50	
A.1.1.3	MTP services at health facilities			
A.1.1.4	RTI/STI services at health facilities			
A.1.1.5	Operationalise Sub-centres			
A.1.2	Referral Transport			
A.1.3	Integrated outreach RCH services			
A.1.3.1	RCH Outreach Camps	21.32	21.32	Focus on comprehensive VHND.
A.1.3.2	Monthly Village Health and Nutrition Days			
A.1.4	Janani Suraksha Yojana / JSY			
A.1.4.1	Home Deliveries	55.00	55.00	
A.1.4.2	Institutional Deliveries			Budget has been formulated considering ASHA package for all the beneficiaries (Rural/Urban). State may ensure that the ASHA completes the entire protocol mentioned in JSY guidelines.
A.1.4.2.1	Rural	20000.00	20000.00	
A.1.4.2.2	Urban	2400.00	2400.00	
A.1.4.2.3	Caesarean Deliveries	90.00	90.00	Rs. 1500/- per C-section
A.1.4.3	Other activities (JSY)	450.90	450.90	
A.1.5	Other strategies/activities			
A.1.5.1	Maternal Death Audit	5.00	5.00	State should use VHNDs as a platform for Verbal Autopsy and for Maternal Death Audit selected well functioning facilities should be chosen. GoI is organising a national workshop regarding this in April/ May. State may kindly wait till protocols are developed.
A.2	CHILD HEALTH			
A.2.1	Integrated Management of Neonatal & Childhood Illness/ IMNCI	36.00	36.00	State has budgeted for monitoring progress against plan: Rs. 36.00 lakhs. State should ensure quarterly reporting of progress of IMNCI implementation.
A.2.2	Facility Based Newborn Care/ FBNC	43.00	43.00	
A.2.3	Home Based Newborn Care/ HBNC			
A.2.4	School Health Programme	3063.69	1531.85	State may not have the required

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
				resources/ trained health personnel and trained teachers, to carry out more than one lakhs medical camps in schools, as proposed in the PIP. Since this is a new activity being proposed under RCH II/ NRHM, in light of the above, 50% of the amount proposed is approved.
A.2.5	Infant and Young Child Feeding/ IYCF			
A.2.6	Care of Sick Children and Severe Malnutrition			
A.2.7	Management of Diarrhoea, ARI and Micronutrient Malnutrition			
A.2.8	Other strategies/activities			
		3142.69	1610.85	
A.3	FAMILY PLANNING			
A.3.1	Terminal/Limiting Methods			
A.3.1.1	Dissemination of manuals on sterilisation standards & QA of sterilisation services	9.50	9.50	
A.3.1.2	Female Sterilisation camps			
A.3.1.3	NSV camps	50.00	50.00	
A.3.1.4	Compensation for female sterilisation	4100.00	4100.00	
A.3.1.5	Compensation for male sterilisation	750.00	350.00	State's demand is unrealistic, it has been reduced as per previous year's experience
A.3.1.6	Accreditation of private providers for sterilisation services	2200.50	1125.00	Remaining amount is actually part of the compensation for sterilization done in accredited private facilities. Therefore it has been added to the total pool of compensation for sterilisation pool. Unrealistic demand. Approved budget is based on previous years' performance.
A.3.2	Spacing Methods			
A.3.2.1	IUD camps	255.84	63.96	The same activity could not be initiated in 08-09. State may initiate this activity in 09-10 in a limited manner and scale up in 2010-11 if there is sufficient client load/ utilisation, especially since IUD training is yet to take off. State to note that any compensation for IUD insertion is to be restricted to Rs. 20/ case only.
A.3.2.2	IUD services at health facilities / compensation			
A.3.2.3	Accreditation of private providers for IUD insertion services			
A.3.2.4	Social Marketing of contraceptives			

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
A.3.2.5	Contraceptive Update seminars	9.75	9.75	
A.3.3	POL for FP/ Others	100.00	100.00	
A.3.4	Repairs of Laparoscopes	2.00	2.00	
A.3.5.	Other strategies/activities	4.93	4.93	
A.4	ARSH			
A.4.1	Adolescent services at health facilities.	49.05	39.05	(1) 4.2.1. Conducting ARSH Camp in 10% of Sub centres across the state (as Village ARSH Week): Rs. 10.00 lakhs: Not approved and it should be part of regular VHNDs. (2) 4.2.3 Establishing Youth friendly helpline/Website linkages (1 State level): Rs. 1.00 lakhs. Approved only for helpline and not website.
A.4.2	Other strategies/activities			
		49.05	39.05	
A.5	URBAN RCH			
A.5.1	Urban RCH Services	158.00	158.00	
A.5.2	Other strategies/activities			
		158.00	158.00	
A.6	TRIBAL RCH			
A.6.1.	Tribal RCH services			
A.6.2	Other strategies/activities			
		0.00	0.00	
A.7	VULNERABLE GROUPS			
A.7.1.	Services for Vulnerable groups	7937.28	0.00	Provision of food supplementation during pregnancy is done through ICDS department and is not the mandate of the Health department. State may restrict proposals to technical interventions - Not approved.
A.7.2	Other strategies/activities			
		7937.28	0.00	
A.8	INNOVATIONS/ PPP/ NGO			
A.8.1	PNDT and Sex Ratio	243.25	150.00	State had proposed Rs. 14.33 lakhs for PNDT awareness workshops at state, district and block levels in 08-09, which was not initiated. This has been increased ten-fold this year. Additionally, Rs. 100.00 lakhs for monitoring at district level and district level committee meeting have been proposed (new activity). Total Rs. 150.00 lakhs is approved.
A.8.2	Public Private Partnerships			
A.8.3	NGO Programme			
A.8.4	Other innovations (if any)			

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
		243.25	150.00	
A.9	INFRASTRUCTURE & HR			
A.9.1	Contractual Staff & Services			
A.9.1.1	ANMs	600.00	600.00	
A.9.1.2	Laboratory Technicians	177.84	177.84	
A.9.1.3	Staff Nurses			
A.9.1.4	Doctors and Specialists (Anaesthetists, Paediatricians, Ob/Gyn, Surgeons, Physicians)	2075.89	2075.89	
A.9.1.5	Other contractual staff	291.87	105.51	Honorarium for voluntary workers at sub-centre is restricted to Rs. 100/ per month for the current year only. Back payments are not permitted. Such honorarium must be linked with performance and outcomes.
A.9.1.6	Incentive/ Awards etc.	3360.00	3360.00	Incentive for ASHA at AWC and ANM should be well defined and linked to comprehensive MH and CH service provision. State needs to evaluate the on-going Muskaan scheme and share details with Gol.
A.9.2	Major civil works (new construction /extension/ addition)			
A.9.2.1	Major civil works for operationalisation of FRUS			
A.9.2.2	Major civil works for operationalisation of 24 hour services at PHCs			
A.9.3	Minor civil works			
A.9.3.1	Minor civil works for operationalisation of FRUs	37.50	37.50	State may note that fresh constructions are not allowed.
A.9.3.2	Minor civil works for operationalisation of 24 hour services at PHCs	99.50	99.50	
A.9.4	Operationalise IMEP at health facilities			
A.9.5	Other Activities			
		6642.60	6456.24	
A.10	INSTITUTIONAL STRENGTHENING			
A.10.1	Human Resources Development			
A.10.2	Logistics management/ improvement			
A.10.3	Monitoring & Evaluation / HMIS	50.40	50.40	State needs to share outcome of its efforts to improve programme monitoring, with Gol.
A.10.4	Sub Centre Rent and Contingencies	531.00	531.00	
A.10.5	Other strategies/ activities	5.40	5.40	
		586.80	586.80	
A.11	TRAINING			

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
A.11.1	Strengthening of Training Institutions			
A.11.2	Development of training packages			
A.11.3	Maternal Health Training			
A.11.3.1	Skilled Birth Attendance / SBA	533.50	533.50	
A.11.3.2	EmOC Training	22.50	22.50	
A.11.3.3	Life saving Anaesthesia skills training	67.58	67.58	
A.11.3.4	MTP training	12.35	12.35	
A.11.3.5	RTI / STI Training	25.00	25.00	
A.11.3.6	Dai Training			
A.11.3.7	Other MH Training			
A.11.4	IMEP Training			
A.11.5	Child Health Training			
A.11.5.1	IMNCI	1308.74	1308.74	
A.11.5.2	Facility Based Newborn Care	11.96	11.96	Trained manpower should be deployed at the centre for a period of 3 – 5 yrs.
A.11.5.3	Home Based Newborn Care			
A.11.5.4	Care of Sick Children and severe malnutrition			
A.11.5.5	Other CH Training			
A.11.6	Family Planning Training			
A.11.6.1	Laparoscopic Sterilisation Training			
A.11.6.2	Minilap Training	16.80	16.80	
A.11.6.3	NSV Training	20.14	20.14	
A.11.6.4	IUD Insertion Training	15.12	15.12	
A.11.6.5	Contraceptive Update Training			
A.11.6.6	Other FP Training			
A.11.7	ARSH Training	36.01	28.01	12.4.2 ARSH Training for Programme Officers and Adolescent Councillors of AIDS Control Society: Rs. 8.00 lakhs. This is not approved as already taken up by NACO
A.11.8	Programme Management Training			
A.11.8.1	SPMU Training	2.30	2.30	
A.11.8.2	DPMU Training	50.84	50.84	
A.11.9	Other training			
A.11.9.1.	Continuing Medical & Nursing Education	10.00	10.00	
		2132.84	2124.84	
A.12	BCC / IEC			
A.12.1	Strengthening of BCC/IEC Bureaus (state and district levels)			
A.12.2	Development of State BCC/IEC strategy	19.00	19.00	
A.12.3	Implementation of BCC/IEC strategy			

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
A.12.3.1	BCC/IEC activities for MH			
A.12.3.2	BCC/IEC activities for CH			
A.12.3.3	BCC/IEC activities for FP			
A.12.3.4	BCC/IEC activities for ARSH			
A.12.4	Other activities	815.89	662.89	(1) 13.15 Hiring a communication agency: Rs. 24.00 lakhs (this was earlier Rs. 6.00 lakhs). This task may be entrusted to already hired agency. Not approved. (2) State may kindly share the research studies as proposed under activity 13.20 Research, M&E, IEC prototypes (3) 13.21 IEC for Blood Storage Units: Rs. 129.00 lakhs - Not approved.
		834.89	681.89	
A.13	PROCUREMENT			
A.13.1	Procurement of Equipment			
A.13.1.1	Procurement of equipment: MH	3350.40	67.50	A. Following activities are approved: 1) 14.2 – Equipments for EmOC services (in Kishanganj & Jehanabad). 2) 14.4 – Equipments/ instruments for Blood bank/ storage facilities. 3) 14.6 - Equipments/ instruments for RTI/ STI services. B. Following may be budgeted under Mission flexi pool: (1) State has proposed Rs. 900.00 lakhs for '14.1. Procurement of equipments /instruments for Anaesthesia'. State needs to provide details (e.g. costing of equipments). (2) 14.7 Labour room equipment procurement: Rs. 1212.46 lakhs. State has not provided any details of this activity. Further details required before state plans for procurement. (3) 14.10. Equipments / instruments for ANC at Health facilities (other than Sub Centre): Rs. 19.00 lakhs. (4) 14.9. ICU Equipment procurement: Rs. 650.00 lakhs. C) Following procurements are not approved: (1) 14.8 Procurement of biometric system for Validation of payment to JBSY beneficiaries in all hospitals: Rs.

Code	ACTIVITY	PROPOSED	APPROVED	REMARKS
				1.44 lakhs may be procured under administrative charges under JSY. (2) 14.11. Equipments / instruments for ANC at Health facilities for Sub Centre: Rs. 500.00 lakhs. Equipments for sub-centre are very limited and can be purchased out of untied fund at the sub-centre.
A.13.1.2	Procurement of equipment: CH			
A.13.1.3	Procurement of equipment: FP	28.30	0.00	May be budgeted under Mission flexi pool
A.13.1.4	Procurement of equipment: IMEP			
A.13.2	Procurement of Drugs & supplies			
A.13.2.1	Drugs & supplies for MH			
A.13.2.2	Drugs & supplies for CH			
A.13.2.3	Drugs & supplies for FP			
A.13.2.4	Supplies for IMEP			
A.13.2.5	General drugs & supplies for health facilities			
		3378.70	67.50	
A.14	PROGRAMME MANAGEMENT			
A.14.1	Strengthening of State society/ SPMU	62.78	62.78	
A.14.2	Strengthening of District society/ DPMU	280.89	280.89	
A.14.3	Strengthening of Financial Management systems	136.52	136.52	
A.14.4	Other activities (Programme management expenses, mobility support to state, district, block)	509.15	348.95	1) Up-gradation of SHSB office: approved for Rs. 30.00 lakhs. 2) Following are not approved: – Purchase of furniture (for 38 districts): Rs. 91.20 lakhs - also approved last year. – Purchase of furniture (for state): Rs. 3.00 lakhs - also approved last year.
		989.34	829.14	
A.15	OTHERS/ UNTIED FUNDS			
	Total RCH II Base Flexi Pool	26646.72	13063.70	
	Total JSY, Sterilisation and IUD Compensation, and NSV Camps	30096.40	28620.90	
	GRAND TOTAL RCH II	56743.12	41684.60	

RECLASSIFICATION OF ACTIVITIES

Activities from the revised PIP sent by the state (post NPCC) have been reclassified as per the FMR/ operating manual heads. State needs to comply with this and submit a revised quarterly budget:

1. Activity code 1.1.1. Operationalise FRUs includes:
 - 1.1.1.1 Operationalise Blood Storage units in FRU
 - 13.21 – Activity no. 4 – Organisation of Blood donation camps (Rs. 24.00 lakhs)

2. Activity code 1.4.2.3. Caesarean Deliveries includes:
 - 10.3.1 Incentive for C-section(@1500/-/facility Gynec. Anesth. & paramedic)

3. Activity code 1.4.3. Other activities (JSY) includes:
 - 1.4.2 Piloting for Accreditation of private nursing homes in Jehanabad district for conduct of Institutional delivery @Rs.1400
 - 1.4.3. Monitor quality and utilisation of services@ 2% of total JBSY budget

4. Activity code 1.5.1. Maternal Death Audit includes
 - 1.1.3 Survey on maternal and peri-natal deaths by verbal autopsy method

5. Activity code 3.1.4. Compensation for female sterilisation includes:
 - 3.1.2.1. Provide female sterilisation services on fixed days at health facilities in districts (Mini Lap)
 - 3.1.2.3. Compensation for female sterilisation at PHC level in camp mode

6. 3.1.3.1 Compensation for sterilization done in Pvt. Accredited Hospitals (1.50 lakh cases) ahs been merged with “3.1.6. Accreditation of private providers for sterilisation services”.

7. Activity code 3.5. Other strategies/activities include:
 - 3.1.4. Monitor progress, quality and utilisation of services
 - 3.5. Establishing Community Based Condom and OCP Distribution Centres (pilot in one district/1 PHC)

8. Activity code 4.1. Adolescent services at health facilities include:
 - 4.1.1. Disseminate ARSH guidelines.
 - 4.1.2. Establishing ARSH Cells in Facilities
 - 4.1.2.1. Developing a Model ARSH Cell for the facilities
 - 4.1.2.2. Establishing ARSH Cell at Patna District Hospital
 - 4.1.2.3. Establishing ARSH Cell is 50% PHCs of Patna District
 - 4.2 Conducting ARSH Camps at all PHCs for a week (as ARSH Week)

- 4.2.1. Conducting ARSH Camp in 10% of Sub-centres across the state (as Village ARSH Week)
- 4.2.2 Establishing Youth friendly health clinics in Urban Area/ Universities Campus / Market Place
- 4.2.3 Establishing Youth friendly helpline/Website linkages (1 State level)

9. Activity code 9.1.1. ANMs include:

- 10.1.1.2. Hiring of 1000 Retired ANMs or ANMs from other states for out reach services @ Rs. 5000 / month / ANM

10. Activity code 9.1.2. Laboratory Technicians includes

- 1.1.1.1 Operationalise Blood Storage units in FRU
 - Salary of 3 Lab Technicians @ Rs. 6500/- pm

11. Activity code 9.1.4. Doctors and Specialists (Anaesthetists, Paediatricians, Ob/Gyn, Surgeons, Physicians) includes:

- 1.1.1.1 Operationalise Blood Storage units in FRU
 - Salary of One Medical Officer
- 10.1.2.1. Empanelling Gynaecologists on CALL BASIS
- 10.1.2.2. Empanelling Gynaecologists for gynaecology OPD in under or unserved areas @ Rs. 1000 / week x 52 weeks
- 10.1.2.3. Empanelling Gynaecologists for PHCs to provide OPD services @ Rs. 300 / week x 52 weeks
- 10.1.2.4. Hiring Anaesthetists for facilities that have vacant Anaesthetist positions @ Rs. 1000 per case x 120000
- 10.1.2.5. Hiring Paediatrician for facilities where there are vacant Paediatricians positions @ Rs. 35,000 / month (2 per district)
- Hiring Gynaecologists for facilities that have vacant positions @ Rs. 650 per case x 75000 cases

12. Activity code 9.1.5. Others - Computer Assistants/ BCC Co-ordinator/ ASHA Link Worker etc include:

- 9.1 Fast-Track Training Cell in SIHFW
- 9.2 Filling Vacant Position at SIHFW/Hiring Consultant at SIHFW
- 10.1.1 Honorarium of Voluntary workers
- Consultant - Maternal Health: Rs. 3.30 lakhs
- Consultant-Child Health: Rs. 3.30 lakhs
- Media Expert: Rs. 2.64 lakhs

13. Activity code 9.1.6. Incentive/ Awards etc. to ASHA Link worker/ SN/ MOs etc includes:

- 8.2.1 Incentive for ASHA per AWW centre (80000x200 per month)

14. 10.4.1 Facility improvement for establishing New Born Centres at 76 FRUs across the state has been merged with “9.3.1. Minor civil works for operationalisation of FRUs”
15. 10.4.2. Facility improvement for establishing New Born Centres at PHCs across the state has been merged with “9.3.2. Minor civil works for operationalisation of 24 hour services at PHCs”.
16. Activity code 10.3. Monitoring & Evaluation / HMIS includes:
- 11.3 Monitoring & evaluation through monitoring cell at SIHFW
17. Activity code 10.4. Sub Centre Rent and Contingencies includes:
- 11.4 Sub-centre rent and contingencies
18. Activity code 10.5. Other strategies/ activities include:
- 11.1.1.1. TA & DA for the 30 days contact programme
19. Activity code 11.3.1. Skilled Birth Attendance / SBA include:
- 11.5. Creating 38 Additional SBA training centres @ Rs.15000 x 38 districts
 - 12.1.2 Skilled Attendance at Birth / SBA--Two days Reorientation of the existing trainers in Batches
 - 12.1.3 Strengthening of existing SBA Training Centres
 - 12.1.4 Setting up of additional SBA Training Centre- one per district
 - 12.1.5 Training of Staff Nurses in SBA (batches of four)
 - 12.1.6 Training of ANMs / LHVs in SBA (Batch size of four)
20. 12.1.3 EmOC Training of Medical Officers in EmOC has been merged with “11.3.2. EmOC Training”.
21. 12.1.5 Training of Medical Officers in Life Saving Anaesthesia Skills (LSAS) has been merged with “11.3.3. Life saving Anaesthesia skills training”.
22. Activity code 11.3.4. MTP training includes:
- Training of nurses/ANMs in safe abortion
 - 12.1.8 Training of Medical Officers in safe abortion
23. 12.1.9 RTI/STI Training has been merged with “11.3.5. RTI / STI Training”
24. Activity code 11.5.1. IMNCI includes:
- 12.2.1.1. TOT on IMNCI for Health and ICDS worker
 - 12.2.1.2. IMNCI Training for Medical Officers (Physician)
 - 12.2.1.3. IMNCI Training for all health workers

- 12.2.1.4. IMNCI Training for ANMs / LHVs/AWWs
 - 12.2.1.6. Follow-up training (HEs, LHVs)
25. Activity code 11.5.2. Facility Based Newborn Care includes:
- 12.2.2.1. SNCU Training
 - 12.2.2.2. NSU (TOT)
26. Activity code 11.6.2. Minilap Training includes:
- 12.3.2.1. Minilap training for medical officers/staff nurses (batch size of 4)
27. Activity code 11.6.3. NSV Training includes:
- 12.3.3 Non-Scalpel Vasectomy (NSV) Training
28. Activity code 11.6.4. IUD Insertion Training includes:
- 12.3.4.1 State level (TOT for the districts)
 - 12.3.4.2 District level training (one district total)
 - 12.3.4.3 PHC level training (for one district only)
29. Activity code 11.7. ARSH Training includes:
- 12.4.1 ARSH training for medical officers
 - 12.4.2 ARSH Training for Programme Officers and Adolescent Councillors of AIDS Control Society
 - 12.4.3 One Day ARSH Orientation by the MOs of 25% ANMs
 - 12.4.4 One Day ARSH Orientation of PRI by the MOs of 50% ANMs
30. 15.5.4. State PMU to be trained/attend workshops in various areas like HR, Procurement & Logistics, PPP, FRU review and/or undertake study of various programmes in one good and one poor performing districts has been merged with "11.8.1. SPMU Training".
31. Activity code 11.8.2. DPMU Training includes:
- 12.5.1 Training of DPMU staff @ 38 x Rs.10,000
 - 12.5.2. Training of SHSB/DAM/BHM on accounts at Head Quarter level @
 $6 \times 1500 \times 12 = 1,08,000/-$ +
 $DAM = 38 \times 1500 \times 4 + BHM = 538 \times 1500 \times 4$
 - 12.5.3 Training for ASHA Help Desk to DPMs (38), Block level organisers (533) and MOICs (533), @ 1104 x 1000/-
32. Activity code 11.9.1. Continuing Medical and Nursing Education include:
- 11.2 Training of 20 (for total state) regular Government doctors in Public Health at Public Health Institute, Gujarat or at Wardha institute or Vellore institute
33. Activity code 12.2. Development of State BCC/IEC strategy includes:
- 13.3 Concept and material development workshops by State BCC/IEC Cell

- 13.8 Establishment cost of the State BCC/IEC Cell
- 13.10 Technical support at District level

34. Activity code 12.4. Other activities include:

- 13.4 State Level events
- 13.5 District Level events (Radio, TV, AV, Human Media as per IEC strategy dissemination)
- 13.6 Printed material (posters, bulletin, success story reports, health calendar, Quarterly magazines & diaries etc)
- 13.7 Block level BCC interventions (Radio, kalajaththa and for IEC strategy dissemination)
- 13.11 Media Advertisements on various health related days
- 13.12 Various advertisements/tender advertisements/EOIs in print media at State level
- 13.13 Developing Mobile Hoarding Vans and A V Van for State and District
- 13.14 Hiring an IEC Consultancy at state level for operationalisation of BCC Strategy. (@ Rs. 50000 x 1 x 12)
- 13.15 Hiring a Communication agency to make and implement need based BCC Plan @ 50000 x 2 x 6
- 13.16 Implementation of specific interventions including innovations of BCC strategy/plans block level (Rs. 6000 x 397 x 12)
- 13.17 Implementation of specific interventions including innovations of BCC strategy/plans District level (Rs. 5000 x 38 x 12)
- 13.18 Implementing need based IEC Activities in Urban Areas (Support for Organization of need based IEC Activities in Urban Areas) (Rs. 50000 x 9 x 2)
- 13.19 Capacity building of frontline functionaries (ANM, ASHA) in IPC skills building
- 13.20 Research, M&E, IEC prototypes etc
- 13.21 IEC for Blood Storage Units, including:
 - Posters
 - Hoardings
 - Stickers/ badges

35. Activity code 13.1.1. Procurement of equipment: MH includes:

- 14.1. Procurement of equipments/instruments for Anaesthesia
- 14.2. Equipments for EmOC services for identified facilities (PHCs, CHCs) @ Rs 1 Lac / facility / year (in two districts - kishanganj and jehanabad)
- 14.4. Equipments / instruments for Blood Storage Facility / Bank at facilities
- 14.6. Equipments / instruments, reagents for STI / RTI services @ Rs. 1 Lac per district per year
- 14.7 Labour room equipment procurement
- 14.8 Procurement of biometric system for Validation of payment to JBSY beneficiaries in all hospitals @ 16000 each (Pilot in Jehanabad)

- 14.9. ICU Equipment procurement
- 14.10. Equipments / instruments for ANC at Health facilities (other than Sub Centre) @ Rs. 50,000/ district / year
- 14.11. Equipments / instruments for ANC at Health facilities for Sub Centre @ Rs. 5,000/ Sub centre / year

36. Activity code 13.1.3. Procurement of equipment: FP include

- 14.5. Procurement of Minilap sets for 500 FP centres
- 14.13. Procurement of 18 NSV kits per district @ Rs. 1100 / kit x 380
- 14.14.1. IUD insertion kit

37. Activity code 14.1. Strengthening of State society/ SPMU includes:

- 16.1.1. Contractual Staff for SPMU recruited and in position
 - State Programme Manager: Rs. 4.36 lakhs
 - Consultant NRHM: Rs. 3.96 lakhs
 - Data Asstt. Cum System Analysis: Rs. 3.30 lakhs
 - Consultant Accounts Manager (Salary Rs.15000/- Pension Rs.Rs.7495.00): Rs. 0.99 lakhs
 - Accountant: Rs. 1.98 lakhs
 - Store Keeper: Rs. 2.11 lakhs
 - Clerk cum Steno: Rs. 1.452 lakhs
 - Data Assistant: Rs. 7.128 lakhs
 - Computer Operator: Rs. 1.056 lakhs
 - Accountant: Rs. 1.98 lakhs
 - Executive Assistant: Rs. 9.504 lakhs
 - Computer Operator-cum-Steno: Rs. 10.56 lakhs
- 16.5.1. Last pay drawn – Pension = Approx exp of Rs.20,000/-PM @ 20,000x6x12

38. Activity code 14.2. Strengthening of District society/ DPMU includes:

- 16.2.1. Contractual Staff for DPMSU recruited and in position

39. Activity code 14.3. Strengthening of Financial Management systems includes:

- 16.3.1. Training in accounting procedures
- 16.3.2. Audits
 - 16.3.2.1. Audit of SHSB/DHS by CA for 2009-10
- 16.4 Appointment of CA
 - 16.4.1 At State level
 - 16.4.2 At District level
- 16.5 Constitution of Internal Audit wing at SHSB
 - 16.5.2. TA/DA for Audit @ 1000x6x30x12

40. Activity code 14.4.

- 16.1.2. Provision of equipment/furniture and mobility support for SPMU staff @ 12 months x Rs.10.00 lakhs
 - Mobility: Rs. 6.00 lakhs
 - Office expenses (Stationary, Photocopy & Telephone): Rs. 12.00 lakhs
 - Meeting expenses :Rs. 3.00 lakhs
 - Up-gradation of SHSB office: Rs. 96.00 lakhs
 - Purchase of furniture: Rs. 3.00 lakhs
- 16.2.2.Provision of equipment/furniture and mobility support for DPMU staff @ 12 months x 38 districts x Rs.85340/-

Approval under NRHM Mission Flexible Pool.

Sl. No.	Activities	Amount Proposed (Rs. In Lakhs)	Amount Approved (Rs. in lakhs)	Remarks
1	Decentralization			
1.11	ASHA Support System at State Level	407.04		Approved @ of Rs.10,000 ASHAs for 66701 ASHAs, as per guidelines which includes selection, training, drug kit and support system. Funds available with the state government may be used in the FY 2009-10.
1.12	ASHA Support System at District Level	21.60		
1.13	ASHA Support System at Block Level	799.50		
1.14	ASHA Support System at Village Level	45.00		
1.15	ASHA Trainings	2583.95		
1.16	ASHA Drug Kit & Replenishment	225.56		
1.17	Emergency Services of ASHA	66.00		
1.18	Motivation of ASHA	631.73		
1.19	Capacity Building/Academic Support Programme	10.00		
1.20	ASHA Divas	812.30		
	Total ASHA	5602.68	5602.68	
1.21	Untied Fund for Health Sub-Center, Additional Primary Health Center and Primary Health Center	1348.07	1348.07	Annual Untied funds should be provisioned for 533 PHCs @ Rs. 50,000, for 1243 APHCs @ Rs. 25,000 and for 8858 Sub Centres @ Rs. 10,000 each.
1.22	Village Health and Sanitation Committee	4013.32	4013.32	Approved for each VHSCs @ Rs. 10,000/-.
1.23	Rogi Kalyan Samiti	853.00	853.00	Annual Corpus Funds for RKS should be provisioned for 27 DH, 23 SDH @ Rs. 5 lakh, and for 70 RH & 533 PHCs @ Rs. 1,00,000/-.

	Total Decentralization	6214.39	6214.39	
2	Infrastructure Strengthening			
2.1	Construction of HSCs(315 HSCs)	2992.5	2992.5	Approved for 315 HSCs@ Rs.9.5 lakh each.
2.2	Construction of PHCs	6379.67	4000.00	Approved.
2.3	Upgradation of CHCs as per IPHS standards	8040.00	8040.00	Approved.
2.4	Infrastructure and service improvement as per IPHS in 48 (DH & SDH) hospitals for accreditation or ISO : 9001 certification	1860.00	1860.00	Approved.
2.5	Upgradation of ANM Training Schools	700.2	700.2	In Principle approval subject to approval by Executive Committee of State Health Society.
2.6	Annual Maintenance Grant	820.80	820.80	Approved.
	Total Infrastructure strengthening	20793.17	18413.50	Approved.
3	Contractual Manpower			
3.1	Contractual (PHC doctors and staffs, contractual staff nurses ANM, mobile services)	6767.02	6767.02	Approved.
3.2	Block Programme Management Unit	2895.24	2895.24	Approved.
3.3	Addl. Manpower for SHSB	68.64	62.04	Approved. Existing manpower of Directorate may be utilized for R.I. activities
3.4	Addl. Manpower for NRHM	254.79	254.79	Approved.
	Total Contractual Manpower	9985.69	9979.09	
4	PPP Initiatives			
4.1	102-Ambulance service	40.32	40.32	Approved.
4.2	1911-Doctor on Call and Samadhan	8.16	8.16	Approved.
4.3	Addl. PHC management by NGOs	398.64	398.64	Approved for 17 Addl.PHC. Management

				of addl.PHC may be done on pilot basis for capacity building to the extent of 1% of total Addl.PHC.
4.4	American Association of Physicians of Indian Origin (AAPIO)	56.00	0	Not approved
4.5	SHRC	100.00	100.00	Approved. State may utilize the fund available in 2008-09 and setup SHRC and make functional for strengthening technical resources at state level.
4.6	Services of Hospital Waste Treatment and Disposal in all Government Health facilities up to PHC in Bihar (IMEP)	947.16	947.16	Approved
4.7	Dialysis unit in various Government Hospitals of Bihar	300	300	Approved. Funds may be utilized for the FY 2009-10
4.8	Setting up of of Ultra – Modern Diagnostic Centers in Regional Diagnostic Centers (RDCs) and all Government Medical College Hospitals of Bihar	360.00	360.00	Approved subject to utilization of money provided through Finance Commission for same activities.
4.9	Providing Telemedicine Services in Government Health Facilities	300.00	0	Not approved. State to access funds from Telemedicine division.
4.10	Outsourcing of Pathology and Radiology Services from PHCs to DHs	30.00	0.00	Not Approved.
4.11	Operationalising MMU	1600.56	1600.56	Approved.

4.14	Monitoring and Evaluation (State, District, Block Data Centre)	2086.22	637.50	Approved. The services of PHC accountants may be utilized.
4.15	Generic Drug Shop	0.00	0.00	
4.16	Nutritional Rehabilitation Centre	49.34	49.34	Approved
4.17	Hospital Maintenance	0.00	0.00	
4.18	Providing Ward Management Services in Government Hospitals	30.00	0.00	Not Approved
4.19	Provision for HR Consultancy Services	22.5	22.5	Approved
4.20	Advanced Life Saving Ambulance	89.01	89.01	Approved. it should be provided as a part of emergency response system.
	Total PPP Initiatives	6417.91	4553.19	
5	Procurement of Supplies			
5.1	Delivery Kits at HSC/ANM/ASHA	50.00	50.00	Approved. The procurement may be done after bidding and as per procedures laid down by State Government.
5.2	SBA Drug Kits with SBA-ANMs/Nurses	61.25	61.25	
5.3	Sanitary Napkins at Govt. Hospital	9.5	9.5	
5.4	Procurement of Beds for PHCs to DHs	402.86	402.86	
	Total_Procurement of Supplies	523.61	523.61	
6	Procurement of Drugs			
6.1	Cost of IFA for pregnant & lactating Mothers	239.44	239.44	Approved. The procurement may be done after bidding and as per procedures laid down by State Government.
6.2	Cost of IFA for (1-5) yrs children	409.23	409.23	
6.3	Cost of IFA for adolescent girls	375.41	375.41	
	Total-Procurement of Drugs	1024.08	1024.08	
7	Mobilization & Management support for Disaster Management	100.00	0.00	Not approved

8	Health Management information System(Web server and training at block level)	48.74	32.89	Approved. Web server system may be synergized with IDSP and other programmes or taken on hire basis.
9	Strengthening of Cold Chain	334.3	334.3	Approved
10	Preparation of Action Plan			
10.1	Preparation of District Health Action Plan (Rs. 1 lakhs per district x 38)	38.00	38.00	Approved
10.2	Preparation of State Health Action Plan @ 3 lakhs	3.00	3.00	Approved
	Total-Preparation of Action Plan	41.00	41.00	
11	Mainstreaming AYUSH under NRHM	3915.85	3915.85	Approved
12	Continuing Medical & Nursing Education	1000.00	500.00	Approved
13	RCH Procurement			
13.1	Procurment of equipments for Anesthesia	900	900	Approved. The procurement may be done after bidding and as per procedures laid down by State Government.
13.2	Procurement of ICU Equipments	648.0	648.0	
13.3	Equipments for ANC at Health facilities(Other than SC)	19.00	0	Not approved. Funds may be utilized through RKS funds
13.4	Labour room equipments	1212.46	1212.46	Approved. The procurement may be done after bidding and as per procedures laid down by State Government.
13.5	Procurement for setting up SNCU and NSU	1300.00	1300.00	
13.6	NSV Kits	7.6	7.6	
13.7	IUD insertion Kit	5.7	5.7	
13.8	Minilap sets	15	15	
	Total-RCH Procurements	4107.76	4088.76	
14	Additionalities for NVBDCP under NRHM	1869.3	1869.3	Approved

	Total	61978.48	51489.96	
15	Intersectoral Convergence: <ul style="list-style-type: none"> • Joint meeting at Village level- Mahila mandal meetings • Incentive to AWW for social mobilization in Muskan Abhiyan 	2004.00	0	Not Approved. Services for such activities may be done from VHSC funds.
	Grand Total for Part B	63982.48	51489.96	

Approval under Immunization

S. No.	Activity Proposed	Amount Proposed (Rs. In Lakhs)	Amount Approved (Rs. in Lakhs)	Remarks
1.	Mobility support for Supervision and Monitoring at districts and state level.	45.16	20.00	
2	Cold chain maintenance for AMC etc.	57.70	50.00	
3.	Alternate Vaccine Delivery to Session sites in hard to reach areas and other areas.	938.00	938.00	
4.	Focus on urban slum & underserved areas	3015.60	753.90	
5.	Social Mobilization by ASHA /Link workers	600.00	600.00	
6.	Computer Assistants support at State and district level	51.00	39.36	
7	Printing and dissemination of immunization cards, tally sheets, charts, registers, receipt book, monitoring formats etc.	173.48	173.48	
8	Quarterly review meeting at state level	5.70	5.70	
9	Quarterly review meeting at district level	10.30	10.30	
10	Quarterly review meetings at block level	240.00	240.00	
11	Two days Training of Health workers(ANMs, LHV, MPHWH etc)	264.22	21.83	
12	Three day Training of MOs on RI	112.72	112.72	
13	One day refresher training of Comp. Assistants	0.88	0.62	
14	One day Training of cold chain handlers	7.05	7.05	
15	One day Training of block level Data handlers on vaccine & cold chain logistics	7.05	7.05	
16.	Micro planning at SC level	17.00	17.00	
17.	Micro planning at block and district level	5.91	5.91	
18.	POL for vaccine delivery from State to district and from district to PHC/ CHC level	218.10	38.00	
19.	Consumables for computer including internet access	1.82	1.82	
20.	Purchase of red/black polythene bags, bleach/hypochlorite solution, twin buckets	57.68	12.80	
21.	Ticklers bags for RI card	229.26	137.55	
22.	POL for generators for cold chain	843.15	0.00	
23.	Catch up campaigns in flood prone areas	144.40	0.00	
Total		7046.18	3193.09	

Comments:

1. As per the various evaluated surveys the immunization coverage shows an improving trend with full immunization increasing to **41.4 %** in **2007-08 (DLHS 3)**. The state initiative of **Muskaan** is apparently showing good results including immunization coverage.
2. There has been a very good progress in immunization trainings of the health workers (11478/12675) with 90 % of training completed.
3. The State continues to have **high dropout from BCG to DPT 3** which is critical for further improvement in full immunization coverage. As per DLHS3 Survey there are **45.6 %** unimmunized children (based on DPT3 Coverage) which translates to around **12 lakh** children per year.
4. Revision of Microplans to strengthen outreach services especially in the districts with low BCG coverage reflecting poor accessibility.
5. Increased involvement of the Block & District Officials for development of State PIP to ensure bottom-up planning.
6. Better tracking of beneficiaries by ensuring availability of beneficiary/due list with the ANM/AWW/ASHAs at the session sites. Counterfoils with tracking bags also need to be used for reducing dropouts.
7. Improved fund management at the block and district levels.

The State needs to :

1. The State needs to submit the requirement of **JE vaccine for routine immunization** for 2009-10 & 2010-11.
2. Strengthen AEFI reporting further to improve reporting of AEFI cases.
3. The State may allocate differently the funds provided for mobility support for supervision at district and state level officer including cold chain officer.
4. The funds have been provided for AMC of cold chain equipments. However, the award of AMC should be done as per Gol norm and procedure or state procedure.
5. The funds for focus on slums and under served areas should be utilized as per Gol norm of Rs. 300 per session of honorarium and Rs. 50 per session of contingency.
6. The computer Assistance support provided two at State level and one at every district may be utilized for the purpose of maintaining data of vaccines as well as cold chain items. The honorarium of Comp. Assistants at district level is @ Rs. 8000 per month per person and @ Rs. 12000/- per month per person at state level.
7. The expenditure on trainings should be incurred as per revised Gol norm for training under RCH. The batch size should be 25.30 persons in each batch. Training should be given to those who have not trained during last years conducted, if any. The state should furnish the details of persons trained during the year.
8. The two days training of Health workers (ANMs, LHV, MPHWH etc) related to Immunization should be organized together with other training programme of Health workers under RCH. From Next year onwards the training of Health workers should be integrated with other training under RCH and funds should be projected in RCH.
9. The sessions should be based on rational micro plans. The micro plans should be shared with Gol.
10. The State may undertake printing of all materials like Immunization cards, formats, charts, tally sheets, tickler box, registers, receipt books etc. required for immunization. The printing should be done as per Gol norms and provision. The detail of expenditure incurred during last year on each item may be furnished to the Gol. The funds for printing activities should not be utilized for IEC activities.
11. The purchase of polythene bags (red & black), Hypochlorite solution, twin bucket etc required for safe injection should be done as per Gol norms under NRHM and as per State procedure. The detail of purchase should be furnished to Gol.
12. The State should maintain proper records for expenditure incurred on POL for transporting of vaccines and cold chain items etc.
13. Catch-up activities if required may be conducted during village health and nutrition days (VHND) utilizing funds given for conducting immunization sessions.

Items restricted or not permissible under Immunization PIP

1. POL for generators for cold chain Rs. 843.15 lakh- Funds provided under Rogi Kalyan Samiti may be utilized.
2. Catch up campaigns in flood prone areas- Rs. 144.40 lakh- Not admissible.

Approvals under National Disease Control Programmes

RNTCP

Programme performance --- The performance of programme in the state of Bihar needs improvement.

Annualised NSP Case Detection Rate (3Q) -- 48%

Cure Rate among NSP Cases -- 78%

Comments on RNTCP activities & budget in NRHM PIP:

- The activities and the budget proposed in the state PIP is as per programme guidelines except under the head civil works, IEC/publicity, training, vehicle maintenance, NGP/PP support and medical colleges. Funds under action plan have been clubbed for 2009-10 and last quarter 2008-09 that is causing confusion.
- The overall utilization of funds by the state has been poor. However during discussions it was informed that state could spend funds due to some administrative problem in the state, which has since been rectified. The budget has been rationalized keeping in view previous trends in expenditure and commitment by the state to fast track implementation in the coming year.
- Based on the programme norms of costing and trend of expenditure in the past, currently budget has been approved which has been explained below. However based upon the trend of expenditure in the first six months, the state may submit additional request for funds at a later date.

Particulars	Proposed budget (GFATM districts)	Approved Budget (GFATM districts)	Proposed Budget (World Bank districts)	Approved Budget (World Bank districts)	Total Approval (GF+WB)
1. Civil Works-a-Maint.	46.39	9.48	9.28	1.49	10.97
b- one time	42.55	42.55	26.55	26.55	69.10
2. Laboratory Materials	91.17	54.70	35.93	26.95	81.65
3. Counselling Charges (Honorarium)	43.98	21.99	14.5	10.88	32.87
4. IEC/Publicity	57.43	28.72	37.96	17.45	46.17
5. Equip. Maintenance	14.77	8.86	5.82	5.82	14.68
6. Training	59.5	28.25	32.77	12.07	40.32
7. Vehicle Maintenance	33.95	18.94	21.46	12.25	31.19
8. Vehicle Hiring	109.74	54.87	25.48	15.29	70.16
9. NGO/PP Support	25.81	15.49	59.25	21.86	37.34
10. Medical Colleges	17.27	17.27	29.42	24.02	41.29
11. Office Operations (Miscellaneous)	85.89	42.95	25.15	20.12	63.07
12. Contractual Services	563.72	396.49	202.51	151.55	548.04
13. Printing	40.1	20.05	5.9	11.80	31.85
14. Res. and Studies			0		0.00
15. Proc. of Vehicle	3.55	4.50	10	6.50	11.00
16. Proc. of equipments	3.25	2.44	2.95	1.77	4.21
Total	1239.07	767.54	544.93	366.36	1133.90

NVBDCP

ROP comments on Bihar

- For Prevention and control of Vector borne diseases, Bihar has requested for Rs.3009 lakhs cash assistance in which the request for Kala-Azar elimination is for Rs.2269.30 lakhs including the incentive to ASHAs and wage loss which is already being paid from NRHM. Considering the goal of elimination by 2010, the over and above allocation under NVBDCP, it is recommended that support for Kala-Azar elimination may be made from NRHM additionality with strict supervision and monitoring. The funds allocated under NVBDCP and the comments for additional activities is indicated below

Rs. In Lakhs

Activity proposed	By State	Amount approved under NVBDCP	Comments
Malaria			
DBS			
ASHA	37.08	0	NVBDCP supports for high malaria risk areas in identified Districts and the surveillance workers are to be met from state fund.
NAMMIS	11.96	0.5	
IEC		20	
Training	4.29	2	
Spray supervision	88.3		
Total - Malaria	141.63	22.5	
Elimination of Lymphatic Filariasis (preparatory activities including BCC, Training, Filaria Day observance, Mf survey and monitoring & evaluation and honorarium to drug distributors etc.)	422.35	474.28	
Kala-azar			
Spray Wages	1225.30		From NRHM additionality after utilizing the operational cost provided under NVBDCP. Spray wages to be paid by VHSCs.
Office & emergency exp.	10.68		
DDT - Transportation	9.30		
Spray equipments	17.82		
Spray, supervision (four months)	32.44		
DA for supervisors	6.20		
IEC	6.20		
Supervision by 4 zonal mal.office	1.60		
Supervision by state HQ	1.30		
ASHA incentive @ 100 per case	33.00		
Wage loss payment @ 50 for 30 days	495.00		Already from NRHM additionality

Bed ext. in Block hospitals	31.00		From NRHM additionality
Supervision & monitoring for treatment (CS, DMO, MI, KTS)	277.88		
Amphotiricin -B Storage (Distt. Level)	1.86		From NRHM additionality
Amphotiricin -B Storage (State Level)	0.18		
Treatment	1.65		
Register for registration at PHC	0.15		
DDT Storage	18.60		
Kala-azar fortnight	13.52		
Institutional strengthening of State HQ trg.	14.73		
Training	70.89		From NVBDCP Operational cost
Sub Total Operational cost Kala Azar	2269.3	400	
Additional support under World Bank for Kala Azar			
Human Resource		90	
Capacity Building in project areas		50	
Mobility Support		20	
Total : Kala-azar	2269.3	560	
Japanese Encephalitis			
Diagnostics and Management		6	As per NVBDCP fund allocation
Training		5	
IEC		2	
Technical Malathion		2	
Monitoring & Evaluation		1	
Other charges		0	
Total - J.E.	139.5	16	
Dengue & Chikungunya			
Apex Referral labs		0	As per NVBDCP fund allocation
Sentinel surveillance hospital		0.5	
Monitoring & Evaluation and rapid response		1	
Epidemic preparedness (logistics + operational cost)		4.2	
Fogging Machine		0	
Training/Workshop		2	
Total - Dengue & Chikungunya	36.5	7.7	
Total Allocation under NVBDCP	3009.28	1080.48	
Commodity		2692.43	
Grand Total	3009.28	3772.91	

IDSP

In the PIP Bihar state has asked Rs 600.77 lacs under different IDSP activities during 2009-10 activities against approved budget of Rs. 135.97 lacs during 2008-09. The PIP has been examined and the amount proposed and admissible as per the guidelines of IDSP, NICD is as under:

S.N.	Activity	Amount proposed by the State (Rs in Lacs)	Amount approved by IDSP, NICD (Rs in Lacs)	Remarks
1	Incremental staff/ personnel + Operational cost	No head wise breakup is given	(191.88+51.6) = 243.48	Including salary of newly posted Epidemiologists, Microbiologists & Entomologist
2.	Training cost		20.00	As per norms
3.	IEC		10.00	As per norms
4.	Lab. equipment etc.		0.00	district priority lab not identified
	Total	600.77	273.48	

Amount approved under different activities above by IDSP, NICD is Rs. **273.48** lacs for the year 2009-10. However present allocation as per fund availability with IDSP, NICD is Rs. **148.48** lacs and unspent balance of Rs **125.00** lacs will be available for expenditure.

NPCB

1. The Programme Implementation Plan 2009-10 from Govt. of Bihar has been examined as per the existing pattern of assistance under National Programme for Control of Blindness during the 11th Five Year Plan. Component wise details are as under:-

S.No	Component	Funds Proposed (in lakh)	Approved	Comments of NPCB as per approved scheme for 11th Five Year Plan
1	Grant-in-aid for free cataract operations	1050	294.90	Approved under GIA for catops and various schemes
2	Management of State Health Society (NPCB)	18.72		Approved under GIA for catops and various schemes as in sr. no 1 with the limitation of 14 lakh rupees
3	Recurring GIA for Eye Donation	5.00		Approved under GIA for catops and various schemes as in sr. no 1
4	Vision Centres (50@ 25,000/- per vision center)	12.50	12.50	Approved for 25 units @ Rs. 50,000
5	Eye Banks	10.00		Not Approved
6	Eye donation center	1.00	1.00	
7	Non-recurring GIA to NGOs	50.00		Not Approved
8	Training	7.50		Approved under GIA for catops and various schemes as in sr. no 1
9	IEC	15.91		Approved under GIA for catops and various schemes as in sr. no 1
10	GIA for School Eye Screening	20.00		Approved under GIA for catops and various schemes as in sr. no 1
11	Up-gradation of District Hospitals	60.00		Not Approved.
12	Up-gradation of Sub-District Hospitals	15.00		Not Approved- may be obtained from NRHM flexipool @ 5 lakhs rs. Per unit for 3 units
13	Medical college upgradation	0.00	40.00	For one unit @ Rs. 40 lakh
	Total	1265.63	348.40	

NB:-

- **All the expenditures from the NPCB budget allocations and from the funds obtained from NRHM flexi-pool should be done strictly according to the Physical norms and Financial Norms approved in the 11th Plan five year plan of NPCB as communicated earlier.**
- **The above said allocations are as per the requirements proposed by the state and in case the funds in a specific allocation are exhausted the funds from other unspent allocations for NPCB activities can be utilized ; with due intimation to GOI.**
- **Grant-in-aid for free cataract operation, other eye diseases, School Eye Screening Programme, training, IEC, Private Practitioners, management of State Health Society and District Health Society, recurring GIA to Eye Donation Centres and Eye Banks, maintenance of Ophthalmic Equipments, Remuneration, other activities & Contingency etc.**

NIDDCP

	Activity	Amount proposed	Amount Approved	Remarks
1	Establishment of IDD Control Cell	No PIP proposal	6.00	The State Government may carry out the activities as per the fund allocation of GOI.
2	Establishment of IDD Monitoring Lab		3.50	
3	Health Education and Publicity		7.50	
4	IDD surveys		1.00	
	Total	17.81	18.00	

NLEP

(Rs. in lakhs)					
S. No.	Activity proposed	Amount proposed	Amount approved	Remarks	
1)	Contractual Services			ASHA incentive to be given only for the cases referred and completed treatment through ASHA.	
	State - SMO, BFO cum AO, DEO, Administrative Assistant, Driver	32.36	14.40		
	District - Drivers				
2)	Services through ASHA/USHA				
	Honararium to ASHA, sensitization of ASHA	74.26	21.36		
3)	Office expenses & Consumables	16.24	13.12		
4)	Capacity building				Number of batches to be trained needs to be reduced.
	4 days training of newly appointed MO (rural & urban)	99.98	25.00		
	3 days training of newly appointed health worker & health supervisor				
	2 days refresher training of MO				
	5 days training of newly appointed Lab. Technician				
5)	Behavioral Change Communication			Funds for hoarding, wall paintings, etc. should be reduced. IEC activities needs to be integrated with NRHM IEC activities. More focus should be on IPC.	
	Quiz,folk show,IPC workshop,Meeting of opinion leaders,Health melas	255.32	45.00		
	Wall painting,Rallies,Hoardings etc				
6)	POL/Vehicle operation & hiring				
	2 vehicles at state level & 1 vehicle at district level	30.20	30.20		
7)	DPMR	63.51	36.15		

	MCR footwear, Aids and appliances, Welfare allowance to BPL patients for RCS, Support to govt. institutions for RCS		
8)	Material & Supplies		
	Supportive drugs, lab. reagents & equipments and printing forms	22.34	19.76
9)	Urban Leprosy Control		
		27.00	18.28
10)	NGO - SET Scheme		
11)	Supervision, Monitoring & Review		
	Review meetings and travel expenses	1.20	7.40
12)	Cash assistance		
		-	30.00
	TOTAL	622.41	260.67