

सहसंचालक,  
आरोग्य सेवा तथा प्रकल्प समन्वयक,  
पुणे - ४११ ००१.

- १) बेसीक हेल्थ प्रोग्राम महाराष्ट्र (जर्मन प्रकल्प)
- २) युरोपीयन कमिशन प्रोग्राम

यांची माहितीचा अधिकार या विषयाबाबतची माहिती

कलम ४ ( १ ) ब (IX)

सहसंचालक, आरोग्य सेवा तथा प्रकल्प संमन्वयक, जर्मन प्रकल्प

पुणे कार्यालयातील अधिकारी व कर्मचारी यांची नावे, फोन नं., फॅक्स नं. आणि त्यांचे

मासीक वेतन

अनु. क्र	पदनाम	अधिकारी / कर्मचारी नाव	वर्ग	रुजू झाल्याची तारीख	फोन नं., फॅक्स नं	एकूण वेतन
१	सहसंचालक	डॉ. वि. धो. माले	वर्ग - १	-	२६०५८९९६ २६०५८७६६	३६,७८६/-
२	सहाय्यक संचालक	डॉ. एस. जी. चौगुले	वर्ग - २	०३/११/७८	२६०५९१५२ २६०५४१७३	३६,८३६/-
३	सांख्येकी अधिकारी	श्री. एस. एम. उरणकर	वर्ग - २	१८/०९/७२	२६०५८९१४ २६०५४१७३	२०,२४३/-
४	अधिक्षक	श्री. व्ही. डी. सांगळे	वर्ग - २	११/०६/६८	२६०५८९१४ २६०५४१७३	१५,०४२/-
५	लघुटंकलेखक	श्री. व्ही. आर. बोलोपल्ली	वर्ग - ३	१२/०७/८२	२६०५८९१४ २६०५४१७३	१४,६९५/-
६	कॅशिअर / वरिष्ठ लिपीक	श्री. के. एस. भोसले	वर्ग - ३	१८/१२/८५	२६०५८९१४ २६०५४१७३	१०,५४०/-
७	कनिष्ठ लिपीक	श्री. एस. सी. बंड	वर्ग - ३	३१/१२/०३	२६०५८९१४ २६०५४१७३	६,४३८/-

**Form 4 (1) B (IX)**

**Jt. Director Health Services (Project Coordinator (German Project, Pune)**

**Details of pay and allowances of Project Staff**

<b>Sr. No.</b>	<b>Designation</b>	<b>Officer Name</b>	<b>Class</b>	<b>Date of joining</b>	<b>Phone no Fax No</b>	<b>Salary</b>
1	Jt Director	Dr. V. D. Male	Class - I	-	26058996 26058766	36,786/-
2	Asst. Director	Dr. G. S. Chougule	Class - II	03/11/78	26059152 26054173	36,836/-
3	Statistical Officer	Mr. S. M. Urankar	Class - II	18/09/72	26058914 26054173	20,243/-
4	Supdt.	Mr. V. D. Sangle	Class - II	11/06/68	26058914 26054173	15,042/-
5	Steno - Typist	Mr. V. R. Bollupalli	Class - III	12/07/82	26058914 26054173	14,695/-
6	Cashier - Sr. Clerk	Mr. K. S. Bhosle	Class - III	18/12/85	26058914 26054173	10,540/-
7	Jr. Clerk	Mr. S. C. Band	Class - III	31/12/03	26058914 26054173	6,438/-

कलम ४ ( १ ) ब ( V ) नमुना ( इ )

सहसंचालक, आरोग्य सेवा तथा प्रकल्प संमन्वयक, जर्मन प्रकल्प

पुणे कार्यालयातील उपलब्ध दस्तावेजांची यादी

दस्तऐवजाचा विषय

अनु. क्र	दस्तऐवजांचा प्रकार	विषय	संबंधित व्यक्ती / पदनाम	व्यक्तीचे ठिकाण / उपरोक्त कार्यालयात उपलब्ध नसल्यास
१		बेसीक हेल्थ प्रोग्राम महाराष्ट्र (जर्मन प्रकल्प) व इ.सी.एस.आय.पी यांचे कामकाजाचे नियंत्रण	डॉ. वि. धो. माले, सहसंचालक	—
२		बेसीक हेल्थ प्रोग्राम महाराष्ट्र (जर्मन प्रकल्प) व इ.सी.एस.आय.पी यांचे कामकाजाचे सुसुत्रीपणा आणून कामकाज करून घेणे	डॉ. एस. जी. चौगुले, सहाय्यक संचालक	—
३	नस्ती	इ. सी. एस. आय. पी. प्रकल्पाचे कामकाज हातळणे व आहरण व संवीतरण अधिका-याचे कामकाज पाहणे	श्री. एस. एम. उरणकर, सांख्येकी अधिकारी	—
४	नस्ती	बेसीक हेल्थ प्रोग्राम महाराष्ट्र (जर्मन प्रकल्प) व इ.सी.एस.आय.पी यांचे कामकाजाचे नियंत्रण व करणे	श्री. व्ही. डी. सांगळे, अधिक्षक	—
५	नस्ती	बेसीक हेल्थ प्रोग्राम महाराष्ट्र (जर्मन प्रकल्प) व इ.सी.एस.आय.पी यांचे कामकाजाचे यांचे डिक्टेसन घेणे व टाईप करून सादर करणे.	श्री. बी. आर. बोलोपल्ली, लघुटंकलेखक	—
६	नस्ती	बेसीक हेल्थ प्रोग्राम महाराष्ट्र (जर्मन प्रकल्प) व इ.सी.एस.आय.पी यांचे कामकाजाच्या विषयासंदर्भात देयके सादर करून त्यांचे वाटप करणे	श्री. के. एस. भोसले, रोखपाल	—
७	नस्ती	आवक - जावक शाखेचे कामकाज पाहणे व प्रकल्पामधील कर्मचा-यांचे देयके तयार करणे	श्री. एस. सी. बंड, कनीष्ठ, लिपीक	—

## Form 4 (1) B (V) form E

### Jt. Director Health Services (Project Coordinator (German Project, Pune)

#### Details of files

<b>Sr. No</b>	<b>Nature of file</b>	<b>Subject</b>	<b>Name of officer dealing subject</b>	<b>Place where officer available</b>
1		ECSIP / BHP Project controlling	Dr. V. D. Male, Jt. Director	office
2		ECSIP / BHP Project Supervision	Dr. G. S. Chougule, Assist. Director	office
3	file	ECSIP / BHP Project handling and drawing and disbursing officer	Mr. S. M. Urankar, Statistical Officer	office
4	file	ECSIP / BHP Project work supervision	Mr. V. D. Sangle, Supdt.	office
5	file	ECSIP / BHP Project work doing by taking dictation and typing work	Mr. B. R. Bollupalli, Steno - Typist	office
6	file	ECSIP / BHP Project preparing bills and disbursing payments to concern	Mr. K. S. Bhosle, Cashier - Sr. Clerk	office
7	file	ECSIP / BHP Project inward - outward work and preparing pay bills of staff	Mr. S. C. Band, Jr. Clerk	office

## मूलभूत आरोग्य प्रकल्प, महाराष्ट्र (बेसिक हेल्थ प्रोग्राम)

प्रकल्पाचे कार्यक्षेत्र - पुणे, रायगड, रत्नागिरी, सिंधुदूर्ग (फेज १)  
बीड, हिंगोली, परभणी, औरंगाबाद, जालना तसेच फेज १ जिल्हयांसहित  
(फेज २)

प्रकल्प अनुदान - केएफडब्ल्यू - रु. ४५.४० कोटी  
जीटीझेड - रु. २२.७० कोटी  
महाराष्ट्र शासन  
(केएफडब्ल्यू अनुदानाच्या १०%) - रु. ०४.५४ कोटी  
एकुण - रु. ७२.६४ कोटी

प्रकल्प कालावधी - जून १९९६ ते जून २००१ (फेज १)  
ऑक्टोबर ०३ ते सप्टेंबर ०६ (फेज २) - जी.टी.झेड.  
वाढीव कालावधी : जीटीझेड - डिसेंबर ते जून २००३  
जुलै ते सप्टेंबर २००३  
केएफडब्ल्यू - डिसेंबर २००५  
वाढीव कालावधी : केएफडब्ल्यू - डिसेंबर २००६

प्रकल्पांतर्गत सप्टेंबर २००५ अखेर खर्च केएफडब्ल्यू - रु. ३५.०१ कोटी  
जीटीझेड - रु. २२.०० कोटी  
एकुण - रु. ५७.०१ कोटी

### प्रकल्पाचा उद्देश -

प्रकल्प जिल्हयातील कार्यरत असलेल्या विविध आरोग्य संस्थांमार्फत राबविण्यात येणाऱ्या मूलभूत आरोग्य सेवांची गुणवत्ता वाढविणे, आरसीएच कार्यक्रमातील सर्व सेवा प्राधान्याने देणे.

### प्रकल्पांतर्गत अपेक्षित ध्येय -

क - १ : समाजाच्या सहभागाने कार्यरत आरोग्य सुविधांचा समाजासाठी जास्तीत जास्त वापर करणे - प्रकल्प क्षेत्रातील विविध स्वयंसेवी संस्था व समाजाच्या उन्नतीसाठी जागरूक असलेल्या महिला मंडळे, तरुण मंडळे यांच्यामार्फत प्रकल्पांतर्गत विविध उपक्रमांविषयी माहिती देणे व उपलब्ध आरोग्य सुविधांचा समाजासाठी वापर करणे.

क - २ : प्रकल्पांतर्गत असलेले कार्यक्रम यशस्वीपणे राबविण्यासाठी प्रशिक्षित व कुशल मनुष्यबळ उपलब्ध करणेबाबत - प्रकल्पांतर्गत वैद्यकीय अधिकारी, आरोग्य कर्मचारी, अंगणवाडी कर्मचारी, ग्रामीण आरोग्य मार्गदर्शक (स्त्री) इ. चे प्रशिक्षण.

क - ३ : निवडक आरोग्य संस्थांचे बळकटिकरण करणे - यामध्ये इमारतीची दुरुस्ती, सुधारणा तसेच औषधी, साधनसामुग्री व वाहनांचा पुरवठा करणे.

क - ४ : आरोग्य विषयक संशोधन करून प्राप्त निकषानुसार कार्यक्रम अंमलबजावणी करणे.

क - ५ : कार्यक्रमाची रचना व त्यांचे व्यवस्थापन करण्यात येऊन प्रत्यक्षात त्यांचे कार्य सुरु करणे.

### जीटीझेड सहाय्यित कार्यक्रम -

पुणे व बुलढाणा जिल्हयात हेल्थ इन्शूरन्स सिमक राबविण्यात येते. बुलढाण्यात बुलढाणा अर्बन क्रेडिट कोऑप संस्थेमार्फत चालविली जाते. ग्राम आरोग्य समिती, आरोग्य प्रसविका व्यवसाय योजना, ग्राम आरोग्य अग्रिम योजना इ. अभिनव योजना प्रकल्प जिल्हयात राबविल्या जातात.

### केएफडब्ल्यू सहाय्यित कार्यक्रम :

प्रकल्पांतर्गत प्रकल्प जिल्हयातील निवडक ५ ग्रामीण रुग्णालये, ३० प्राथमिक आरोग्य केंद्रे व २६ उपकेंदांचे बांधकाम (नवी बांधकामे, दुरुस्त्या) सार्वजनिक बांधकाम खात्याच्या ९ पॅकेजस मार्फत चालू आहे. तसेच औषधे, साधनसामुग्री व सोशल मार्केटिंग व सोशल फ्रान्चायसिंग ह्या बाबी राबविण्यात येत आहेत.

## युरोपियन कमिशन सहाय्यित सेक्टर इन्व्हेस्टमेंट प्रोग्राम

युरोपियन कमिशनच्या सहाय्याने राज्यात सेक्टर इन्व्हेस्टमेंट प्रोग्राम राबविण्यात येत आहे.

प्रकल्पाचे कार्यक्षेत्र -

- राज्य स्तर
- सातारा जिल्हा व
- औरंगाबाद मनपा

प्रकल्प कालावधी - मे २००१ ते डिसेंबर २००६

प्रकल्प अनुदान - रु.३०.६४ कोटी (बेंचमार्क प्रमाणे अनुदान वाटप)

प्रकल्पांतर्गत सप्टेंबर २००५ अखेर खर्च - रु.१७.३४ कोटी (निव्वळ)  
रु. २२.४३ कोटी (अग्रीमसहीत)

प्रकल्पाचा उद्देश -

प्रजनन व बाल आरोग्य कार्यक्रमात सातत्याने वाढ करणे व आरोग्य व कुटुंब कल्याण कार्यक्रमात सकारात्मक (रिफॉर्म) बदल करणे.

सेक्टर रिफॉर्मच्या प्रमुख बाबी -

- △ आरोग्य व कुटुंब कल्याण कार्यक्रमाच्या पुढील २० वर्षाकरिता सर्वकष आराखडा तयार करणे.
- △ आरोग्य केंद्र स्तरावर असलेल्या समित्यांना जादा अधिकार देणे.
- △ आरोग्य सेवा पुरविणाऱ्या कर्मचाऱ्यांचे बळकटिकरण करणे.
- △ प्रकल्पांतर्गत पुरविण्यात येणाऱ्या आरोग्य सेवांची व्याप्ती वाढविणे.
- △ प्रकल्पांतर्गत पुरविण्यात येणाऱ्या आरोग्य सेवांचा गुणात्मक दर्जा वाढविणे.



## **BASIC HEALTH PROGRAMME, MAHARASHTRA**

- Project Area** : Pune, Raigad, Ratnagiri, Sindhudurg (P-I)
- Project Partners** : Govt. of Maharashtra, Public Health Dept.  
Govt. of Federal Republic of Germany  
TC/KfW (German Financial Co-operation)  
FC/GTZ (German Technical Co-operation)
- Implementing Agency** : Govt. of Maharashtra, Public Health Dept.  
TC/KfW (German Financial Co-operation)  
FC/GTZ (German Technical Co-operation)
- Financial Outlay** : KfW : Rs. 45.40 crores  
GTZ : Rs. 22.70 crores  
GOM share 10% of the KfW contribution  
(Rs.4.54 crores) TOTAL : Rs.72.64 crores
- Project Period** : June 1996 to June 2001  
Extended upto December 2005  
Re-extended upto December 2006.
- Project Goal** : Consistent improvement of Health of the people, particularly women and children from project area
- Component Goals** :
- ◆ C-1 : Community Mobilization
  - ◆ C-2 : Capacity Building
  - ◆ C-3 : Rehabilitation of Health Institutions
  - ◆ C-4 : Health Systems Research
  - ◆ C-5 : Management Information System

### **TECHNICAL SUPPORT:**

The Basic Health Programme is being implemented by the Public Health Department of Govt. of Maharashtra with German Development Bank (KfW) & German Technical cooperation (GTZ) in the four districts covering a population of 9 million spread over 6 thousand villages. The immediate target group of the project is entire family in particular women, mothers, adolescent girls & infants.

#### **1. Health Promotion :**

- TV spots on RCH components have been developed
- Essay and debate competitions – these competitions are being held in project districts.
- Awareness activities for HIV/AIDS are being carried out.
- "Hallo Sakhi" and "Hallo Doctor" programmes on Television have been launched by the Dept. all the 21 episodes have been carried out successfully. Participation by eminent personalities in the medical field was a unique feature.
- Photo competition "ANM at Work"

## 2. Health Insurance :

### Community Mobilization

#### 22 NGO partners

- implemented innovative interventions
- active liaison with PHC staff
- specialized inputs like training & research
- NGO – PHC linkages well established.
- NGOs providing inputs for health systems development, research, training etc. on a regular basis.

#### Linking women's Self-Help Groups (SHG)

- Training and health promotion
- Health insurance

#### Health Promotion

- Communication materials on RCH, HIV-AIDS, STI/RTI - manuals, flip charts, film, TV spots
- PHC Reference library - Books on PHC management, Adolescent health, Women's Reproductive Health, First Contact Care
- District level competitions on RCH issues
- HIV-AIDS posters and painting of car
- 'ANM at Work' photo competition held in project dist in Dec.03 and calendars prepared for the year 2004.

#### *Hello Sakhi & Hello Doctor Programmes –*

- Telecast twice in a month on Doordarshan in "Sahyadri" channel
- RCH topics & health service systems
- One minute TV spots shown during these programmes

#### **Subjects covered uptill now under “Hallo Sakhi” & “Hallo Doctor” Programmes:**

- Mother to child HIV transmission
- RCH
- Age at Marriage
- Polio Eradication
- Normal Menstruation
- Women's empowerment
- Health Problems in Post-Menopausal women
- Public Health System in Maharashtra
- Common Infections of female reproductive tract
- P.N.D.T.
- Common cancers of female reproductive tract
- Harmful drugs in children
- Breast cancer
- Population stabilization
- Harmful drugs in women

- Adolescent health
- Infertility
- Sexually transmitted diseases
- Sex education
- Osteoporosis
- Violence against women

## **M I S**

### ***Human Resources MIS:***

The software has been developed and tested. It will be utilised to maintain the upto date information regarding service details of Medical Officers and higher officials.

### ***HIVS:***

Software for the Survey of Cause of Death (SCD) and Medical Certification of Cause of Death (MCCD) has been developed. This will support in maintaining the data about SCD and MCCD up to date and will serve as linkage between State and District.

## **Capacity Building**

### ***NGO staff:***

- Managerial - Organizational Development
- Extension - Team building, Women's development, Exposure visit to NGOs

Grassroots workers' training (AWW/CHV/TBA)

- for improved RCH services and coordination (13,000)
- Increased cooperation among PHC staff & Grass roots workers and NGOs.

Management Training for Medical Officers

## **Health Insurance Scheme**

### **1. Buldhana**

#### Target Group

- Borrowers of Buldhana Urban Co-operative Credit Society (BUCCS)
- Low – Income Group Households from rural Buldhana
- Any other member family interested in joining the scheme.

#### Implemented through Buldhana Urban Cooperative Credit Society (BUCCS)

- Organization: Credit Cooperative, Charitable initiatives
- Membership: 7500 members enrolled •Insurance Policy: Janashree + Rural women's package with family rider / Universal HI
- Additional benefits: Spectacles for school children, maternity support for insured families - (Not implemented) Parallel activity of ambulance for body transport, health camps
- Premium Rs. 250
- Hospitalization Coverage: 5000
- Provider link: Trying to establish cashless system

- Claims - 105, processed -105 settled - 49 +, rejected - 20

### Janshri Life Insurance scheme

Premium – Rs. 100 / year / person in a group

1. Natural Death Rs. 20,000/
2. Accident related:
  - Partial Permanent Disablement Rs.25,000/-
  - Permanent Disablement Rs. 50,000/-
  - Accidental Death Rs. 50,000/-

Scholarship for up to two children - Quarterly Rs. 300/- per child for up to one year

### United India's Scheme: Rural Women's Package

1. Accident cover
  - Death - Rs. 15000.00
  - Death of spouse - Rs. 15000.00
  - Permanent total disability - Rs. 15000.00
  - Partial disablement - Rs.7500.00
  - Scholarship – up to two children Rs. 500/- per child
2. Hospitalization expense cover
  - Indoor treatment up to Rs. 5000.00
  - Family floater option

### Premium & Other

- Insurance - Premium Rs. 250 / family of four
  - Janashri life (group) Rs. 100 – for husband
  - Rural Women's Package Rs. 144
  - BUCCS Insurance Fund Rs. 6 +
- Health promotion activities
- Quality initiatives in Government hospitals
- Cashless service in district hospital.

### Scheme administration

- State level Insurance Committee – technical advice, support to Quality initiatives and health promotion
- District Coordination Committee –for progress review, dispute settlement
- Core Group at BUCCS – day to day management of scheme, liaison with Govt. hospital and insurance co.

## **2. Dist. Pune (implemented through BAIF )**

- *Membership:* Indv. Woman SHG member - 872 members enrolled
- *Insurance Policy:* Janashree + Janaarogya – including maternity
- Additional benefits:Health check up every two years, nature cure discount, investigations discount (shikshan sahayog scholarships)
- Premium Rs. 225

- Hospitalization Coverage: 5000
- Provider link: Discounts / package rates in private
- Claims - 40, processed - 37 settled - 30, rejected - 3

### **3. Dist. Pune (implemented through NGO - Chaitanya, Pune )**

- Organization: is an NGO, Women's empowerment
- Membership: Indv. Woman SHG member
- Total 276 members enrolled
- Insurance Policy: Rural women's package (Janashree)
- Premium Rs. 150
- Hospitalization Coverage: 5000
- Claims - 13, processed - 13

### **4. Dist. Osmanabad (implemented through NGO - Halo Medical Foundation, Anadur)**

- Membership: Individual Woman Self Help Group Member
- Total 850 members enrolled.
- Insurance Policy : Janashree + Rural women's package including maternity
- Additional benefits : Bharat Vaidya (CHV) for first contact care, concession in diagnostics and hospital (shikshan sahayog scholarships)
- Premium Rs. 250
- Hospitalization Coverage: 5000•Claims – 12, Processed - 12, Settled – 12, rejected - 0

### **Continuous Quality Improvement Programme (CQIP):**

#### **Objectives:**

- Educate, encourage and support all concerned to transform the existing quality of health care delivery and management system into a better quality of health care delivery system.
- Initiate and support quality improvement programmes.
- Encourage all level participation.
- Initiated at Dist. Hospitals Buldhana and Sindhudurg (Oras)
- Hospital Development Committee established for monitoring the quality initiatives
- Learning group of specialists established for defining protocols and guidelines
- Resource generation group established for exploring resources for developmental activities
- Human Development group - behavioural and motivational aspects for staff and community
- Quality circles established for regular monitoring
- Indian Medical Assn. involved and core quality group established.
- Quality manual under publication

## **Health System Reforms**

### *Activation of Village Health Committees*

- Sensitization of members of Village Health Committees for their involvement in planning, implementation and monitoring of various activities in the village.
- Continuous process of imparting knowledge and managerial skills to the members.

### *Village Health Fund:*

- Availability of emergency health fund to needy patients in the village
- Corpus Fund will be created. - Rs. 10,000 for each of the non-tribal villages and Rs. 20,000 for the tribal villages.
- The 50% of the amount collected would go towards the Corpus Fund and remaining 50 % to be utilized as per the demands by the beneficiary for emergency health services like transportation of the patient to the health institute or some specialized treatment. The existing Village Health Committee to take this decision.
- Developing Village Health Fund – VHC would collect contributions from the community. GTZ will support by contributing matching grants maximum upto Rs.10,000-00.
- Nandvi village Health Committee (Raigad dist.) has collected village health fund of Rs. 10000/- and is supported by an equal amount by GTZ.
- The decision to pay cash loan to beneficiary would be left to the community.
- There would be no 2<sup>nd</sup> loan to a member till the first loan was refunded.
- The Village Health Committee to select a person to keep records of all transactions.
- Village Nandvi from Raigad has been selected for this scheme.

### **Selection Criteria**

- Village willing to participate
- Active village health committee
- One person from VHC willing to keep the record of money transaction.

### **INFRASTRUCTURAL STRENGTHENING:**

- I. Rehabilitation of Health Facilities
- II. Support for Mobility - Supply of Vehicles
- III. Supply of Bio Medical Equipments
- IV. Supply of Drugs
- V. Social Marketing & Social Franchising
- VI. Consultancy Services

### **Rehabilitation of Health Facilities:**

Survey of Health facilities indicated the need for repairs / renovation of 105 Health facilities including rural hospitals, primary health centres and subcentres. Out of these

105 facilities, 62 (5 RH, 30PHCs and 2 SCs) have been selected for repairs and rehabilitation in initial phase.

The civil works are being carried out through Public Works Dept. in 9 divisions. SANIPLAN has been appointed as consulting agency.

Health facilities rehabilitation by PWD division Ratnagiri (North), Ratnagiri (South) Chiplun, Kankavli and Mahad have already been handed over the Health Dept.

Rehabilitation facilities in Pune (north), Pune (Integrated), Alibag & Savantwadi will be completed by March 2005 except PHC Apta which rehabilitation work included

### **Repair**

- PHC Main building
- Dharmashala
- Staff Quarters

### **New Construction**

- Operation theaters
- Dharmashala
- Staff quarters
- Garages

Water supply, Electrification, Infrastructure Roads, landscaping, Fencing

### **Pune Dist.**

- Pune (North)
- Pune (Integrated)

### **Ratnagiri Dist.**

- Ratnagiri (South)
- Ratnagiri (North)
- Chiplun

### **Sindhudurg Dist.**

- Sawantwadi
- Kankavali

### **Raigad Dist.**

- Alibag
- Mahad
  - Rehabilitation of Health facilities in Pune (I), Pune (N), Alibag and Savantwadi will be completed by Dec. 2005 except PHC Apta which will completed by March 2006
  - Intermediate maintenance activities has been started and guidelines have been distributed to all four-project districts.

## **Vehicles Supplied**

- In total 28 vehicles procured through KfW support & provided to health facilities in project districts.
- This has helped in enhancing mobility resulting in increased efficiency in implementation of various National Health Programmes & also in strengthening of supervision & monitoring.

## **Bio Medical Equipments**

- Institutional strengthening through supply of Bio Medical Equipments to Health facilities rehabilitated
- X- Ray Machine
- ECG Machine
- Anesthesia Trolley
- Operation Table
- Shadow less Lamps
- Generator
- Solar Water Heater
- Auto clave
- Computer & Furniture
- Other Medical Equipments

The procurement was carried out under supervision of Ms. Annie Low, Mediconsult, Malaysia

## **Dispensary Boats supplied:**

The Dispensary Boats have provided to following areas.

- Mulshi Dam
- Panshet Dam
- Bhatghar Dam
  
- The boats are functioning as mobile dispensaries & they are also supporting in referral of emergency patients
- Villages / Hamlets separated from the main area due to water reservoirs, get access to medical treatment as well as health activities due to the boat dispensaries.

## **Medicines Supplied:**

- Inj. Betamethasone
- Inj. Theothynnione
- Inj. Oxytocin
- Tab Sparfloxacin
- Tab Ofloxacin



- Tab Cotramazom
- Tab Griseofulvin 125 mg
- Tab Nimesulide M. D. 100 Mg
- Other General Drugs

**Financial Expenditure for BHP (Basic Health Programme) Project:**

<b>DETAILS OF PROJECT COST</b>			
<b>Sr. No.</b>	<b>Item</b>	<b>Cost</b>	<b>Expenditure upto Sept 05</b>
<b>A. KfW SUPPORTED ACTIVITIES</b>			
<b>NON- RECURRING</b>			
i)	Civil Works	17.02	14.48
ii)	Equipment	2.88	2.88
iii)	Vehicles	0.98	0.98
iv)	Consultancy	8.74	8.58
v)	Maintenance	1.83	0.017
vi)	Social Marketing & Social Franchising	7.26	4.29
vii)	Drugs	0.91	0.91
<b>TOTAL</b>		<b>39.62</b>	<b>32.14</b>
<b>RECURRING</b>			
i)	Salary	2.20	2.11
ii)	Travel Expenses	0.30	0.15
iii)	Operational Expenses	1.00	0.43
iv)	Other Consumables	0.36	0.18
<b>TOTAL</b>		<b>3.86</b>	<b>2.87</b>
	CONTINGENCY	6.46	0.00
<b>TOTAL</b>		<b>49.94</b>	<b>35.01</b>
<b>B. GTZ SUPPORTED ACTIVITIES</b>			
<b>Total GTZ Cost</b>		<b>22.7</b>	<b>22.00</b>
<b>C. GRAND TOTAL</b>		<b>72.64</b>	<b>57.01</b>

# HEALTH AND FAMILY WELFARE SECTOR INVESTMENT PROGRAMME (SIP) IN PARTNERSHIP WITH EUROPEAN UNION (ECSIP)

## General approaches of the Programme

- Main focus is health sector reform (esp. structures and systems) with aim of achieving greater benefits from ALL health investments (from GoI, EU & others)
- Concentrating on PHC up to first referral level (esp. EmOC)
- EC funds support to GoI policies (NPP, NHP)
- Programme Management:
  - Joint Steering Committee (national, dealing with policy)
  - Programme Management Board ( National concerned with operational Management)
  - State Sector Reform cells (Govt. officials, NGOs and devt. Partners) responsible for planning, implementing and monitoring state activities
  - District Health and FW agencies (Govt. officials and NGOs) responsible for planning, implementing and monitoring district activities.
  - State and district level management bodies build on existing arrangements where possible
  - Spending based on national, state, district level plans
  - Flexibility in use of funds
  - Performance – based funds flow
  - System reforms earn money (eg. Devolution of financial powers, block level supervision, rational referral system)
  - Money earned is used to finance an agreed spending plan (eg training courses, minor civil works, health promotion)

MoU Signed in 2001

Programme ends by December 2006.

### ● Objectives:

- To assist the Central, State & District levels to implement the Policy Reforms signaled in 'The Paradigm Shift' document of Gol.
- Implement Management & Financing systems reforms to make RCH services more effective.

### ● Anticipated Outcomes:

- An agreed sectoral Policy Framework.
- A reformed sector as described in 'Paradigm Shift'.
- Increased resources available for the sector.

### ● Priorities:

- Local (district or lower) level Operational reforms.
- State & National level Policy and Operational reforms.
- Pilots & Developmental activities.
- Addonality support to RCH/FW Programme.

- **Sector:**
  - National Family Welfare Programme.
  - Primary Health Care.
  - Public Health Activities up to the FRU level.
  - Adoption of 'SECTOR WIDE APPROACH' i.e. general budgetary support to the sector rather than a traditional 'Project' support.
  
- **Types of system reform supported by the SIP**
  - Effective decentralisation : broad-based corporate health management bodies at State and district levels for integrated planning and management, and new role for centre
  - Plans based on explicit and agreed policies
  - Capacity building
  - Partnerships with non-government providers (Private sector or NGOs)
  - Community participation
  - Emphasis on quality and sustainability: making the very most of what already exists (less may be more)
  
- **Funding:**
  - European Commission to Gol.
  - Untied, non-lapsing, fully performance linked & not automatic.
  - Benchmark system for release of funds.
  - Unattained Benchmarks will invite corrective action at appropriate levels.
  - **Funding up to December 2006.**

**Action Plan :** Longer term perspective - plans for year I to 'roll-over' into the next year.

**Project Area:** State; Satara district & Aurangabad Municipal Corporation.

**State Action Plan I:** commissioned in 2001 - Activities completed.

**State Action Plan II:** commissioned from Oct 03.

**State Action Plan III:** Approved by Gol

**State Action Plan**

- **Reform Oriented & focused on:**
  - Decentralization
  - Improving the Quality of Services.
  - Capacity Building.
  - Public Private Partnership.
  - Policy Reviews:
    - Workforce Management Options.
    - Performance Based Funding Options.
    - Optimum use of Infrastructure.
    - Tribal health Policies.

**Project Period -**

2001 - Dec. 2006

**Project Outlay-** Rs. 46.90 Crores

## Expenditure (Up to Sept 2005)

Total Funds received: **Rs. 30.64 crore.**

Total Expenditure (Actual): **Rs. 17.34 crore.**

Total Expenditure (including Advances) **Rs. 22.43 Crores.**

### ▪ Release of Funds

On attaining Benchmarks agreed in the Proposal.

Benchmarks are either Input, Process or Impact indicators.

Performance based (against achievement of mutually agreed reforms)

Milestones given a monetary value.

Subject to utilization of atleast 50% of released funds.

## COMPONENT WISE PROGRESS:

### Component ID No. 1: Streamlining the Procurement & Distribution System.

Budget: Rs. 16,00,000/-      Expenditure: Rs. 16,83,000/- (Adv. Rs. 1,63,800)  
Total : Rs. 15,14,700/-

➤ **Activity completed.**

### Component ID No.2: Operationalizing the District Health & Family welfare Soc.

Budget: Rs. 1,06,00,000/-      Expenditure: Rs. 60,82,704/- (Adv. Rs.663,188/- )  
Total: 67,45,892/-

- Satara, Buldhana, Akola, Nandurbar, Yavatmal, Chandrapur, districts have been formed umbrella society. Other districts being followed up.

### Component ID No.3: Modifying the Health Management & Information System

Budget: Rs. 35,00,000/-      Expenditure: Nil

Revised Proposal awaited from DGHS (Dr. Archana Patil, DDHS)

### Component ID No.4: Concurrent Evaluation of the Agreed Reforms & Devt.

#### Agenda.

Budget: Rs. 15,00,000/-      Expenditure: Rs.60,258.80 (Adv. Nil)

- Concurrent Evaluation of state components as well as district components will be done through external agencies especially govt. Medical Colleges, Aurangabad and Pune.

### Component ID No.5: Policy Review on Performance Based Funding Options

Completed

Budget: Rs. 5,00,000/-      Expenditure: Rs. 4,57,066.08/- (Adv. Nil)

➤ **Activity Completed.**

**Component ID No.6: Developing & Adopting a Rational Drug Policy.**

Budget: Rs. 16,00,000/- Expenditure: Rs. 1,25,337/-  
(Adv. Rs. 1,89,663/-)  
Total : Rs. 3,15,000/-

- CEHAT has been assigned the task.
- Study report to be submitted to Govt. for approval.

**Component ID No.8: Developing a Strategy for Behavior Change Communication at District Level.**

Budget: Rs. 40,00,000/- Expenditure: Nil

- Working group discontinued.
- Agency is being finalized for strategy development on pilot basis in one district. No proposal received from EPOS.

**Component ID No.9: Telemedicine for Health Institutions.**

Budget: Rs. 13,80,000/- Expenditure: Nil

- Telemedicine service centre to be established at Ghodegaon and Indapur RHs
- Apollo Health Street, Hyderabad has been selected & awarded the contract.

**Component ID No.10: Policy Review on Optimum use of Infrastructure.**

Completed

Budget: Rs. 5,00,000/- Expenditure: Rs.4,64,577.10/- (Adv. Nil)

➤ **Activity completed.**

**Component ID No.12: Policy Review on Design of Buildings.**

Budget: Rs. 5,00,000/- Expenditure: Rs. 1,28,901/-  
(Adv. Rs. 3,63,399/-)  
Total Rs. 4,92,400/-

➤ **Activity completed.**

**Component ID No.14: Provision of Solar Power to Health Institutions.**

Budget : Rs. 20,00,000/- Expenditure: Nil

➤ **Component Deleted.**

**Component ID No.15: Policy Review on Tribal Health Policies.**

Completed

Budget : Rs. 5,00,000/- Expenditure: Rs. 5,64,216.38 (Adv. Nil)

➤ **Activity completed.**

**Component ID No.16: Evolving a Strategy for RCH in Tribal Area.**

Budget: Rs. 200,00,000/- Expenditure: 94,585/-  
Adv. Rs. 14,10,880/-  
Total : Rs. 15,05,465/-

- Proposal approved and activities are in progress.

**Component ID No.17: Programme Support to Aurangabad, Nashik, Nagpur and Kolhapur Municipal Corporation.**

**Budget: Rs. 100,00,000/-** Taken under Urban RCH

**Component ID No.19: Addressing Work Force Management issues.**

**Budget: Rs. 12,80,000/-**

- Govt. Orders regarding Constitution of Working Group Issued
- The 1st Meeting of the working group was organized on 22-2-2005 at Mumbai and the proposal on the recommendation will be submitted shortly.

**Component ID No.20: Expansion of Taluka Health Officer scheme**

**Budget: Rs. 10,22,90,000/-** Expenditure: Rs. 7,19,89,239/-  
Adv. Rs. 87,64,320/-  
Total: Rs. 8,07,53,559/-

- THOs identified, appointed office established and equipped.
- Operational Guidelines finalized
- Govt. orders to be issued

**Component ID No.21: Appointment of Urban District Health / Disease Surveillance Officers**

**Budget: Rs. 41,00,000/-** Expenditure: Rs. 60,52,704/-  
Total Rs. 60,52,704/-

- District Leprosy Officers and RMO in some districts appointed as Urban DHOs / District Surveillance Officer and they have been provided with Office Furniture, Computer, Xerox machine etc.
- Govt. order will be issued after proposal regarding reorganization of District Health System is approved Govt.

**Component ID No.22: Continuing Medical Education**

**Budget: Rs. 71,00,000/-** Expenditure: Rs.27,15,537/-  
Adv. Rs. 28,78,365/-  
Total : Rs. 55,93,902/-

- 12th module completed and circulated.
- Training of MOs in Essential Neonatal Care organized in Jalna, Parbhani and Buldhana districts through NNF, Mumbai.
- CME sessions held at Pune and Kolhapur for MO-PHC from neighboring districts and sessions during monthly meeting of MOs.
- FOGSI is being followed up for organization of training of MOs in Essential and Emergency Obstetric Care.
- Training in Nutrition of LBW babies to be organized at Cama and Alless Hospital, Mumbai.
- Training in New Born and Childcare to be organized through Govt. Medical College, Nagpur / Govt. Medical College, Aurangabad.
- Discussions of technical topics by experts during monthly meetings of Medical Officers.

**Component ID No.25: Training of Sr. Officers in Health Management & Leadership & Capacity Building Initiatives for District Level Officers**

Budget Rs. 1,77,00,000/-

Expenditure Rs.: - 54,89,322/-

Advance Rs.: - Nil

Total Rs.: - 54,89,322/-

**Component ID No.27: Capacity Building initiatives for District level officers.**

Budget for Component ID NO. 25: Rs. 24,00,000/- &

Budget for Component No. 27: Rs. 153,00,000/-

Expenditure: Rs. 53,93,740/-

- 3 batches of DHO Cadre Training in Hospital Management at Apollo Hospital, Hyderabad have been completed
- 3 batches of Civil Surgeons Cadre Training in Health Management IIHMR Jaipur have been completed.
- 4 batches of Training in Management Development at IIM, Ahmedabad have been completed

**Component ID No.28: Implementing the Subsidized Medical Practitioner Scheme**

Budget: Rs. 45,00,000/-

Expenditure: 25,70,110.04/-

(Adv. given of Rs. 24,21,889.96/-)

Total: Rs. 50,62,000/-

- 6 NGOs identified and selected. SMP Centres functioning in 24 remote villages. Progress to be followed up.
- A meeting was organized on 3-1-2005 and 31-5-2005 at SFWB, Pune to review the progress of 6 NGOs.

**Component ID No.32: Marketing the Training Facilities & Skills of the H & FW Sector.**

Budget : Rs. 1,10,000/-

Expenditure: Rs. 99,125/-

- Activity Completed.

**Component ID No.33: Marketing the Health Management / Epidemiological skills of the staff of the H & FW sector.**

Budget: Rs. 7,00,000/-

Expenditure: Nil

Letter to be sent Principal, PHI, Nagpur & Proposal to be received from PHI, Nagpur

**Component ID No.34: Satara DAP**

Budget: Rs. 200,00,000/-

Expenditure shown separately.

- DAP II will be completed shortly.
- It was decided in the last subcommittee meeting to include the awareness regarding availability of MTP services and regarding safe abortion Practices under Satara DAP III.

**Component ID No.35: Support to DAPs.**

Budget for travel, administrative and technical support for the DAPs by the SFWB.

Budget: Rs. 2,40,000/-

**Component ID No.36: Support for Office Staff.**

Staff on contract basis, necessary furniture and equipments.

Budget: Rs. 55,20,000/-                      Expenditure: Rs. 28,35,869/-  
Advance : Rs. 97,550/-  
Total : Rs. 29,33,419/-

**Component ID No.37: Support to BAIF as State Facilitator**

Budget: Rs. 55,20,000/-                      Expenditure: Rs. 198340.05/-

BAIF is discontinued as state facilitator.

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**STATE ACTION PLAN - III****Component ID No. 1: Accreditation Scheme for the NGO / Private Sector Hospitals**

Budget: Rs. 46,00,000/-

- Govt. orders regarding constitution of taskforce issued
- Scheme being finalized.

**Component ID No. 2: Launch Services in Nandurbar District**

Budget: Rs. 45,00,000/-                      Exp. Rs. 19,50,330/- (Adv. Nil)

- Contract award given.

**Component ID No. 3: Involvement of NGOs in a Model RCH Programme**

Budget: Rs. 2,00,00,000/-                      Expenditure: Rs 1,22,37,155.32/-  
Advance : Rs 1,85,844/-  
Total : Rs 1,24,23,000/-

- Ongoing scheme from March 2004
- Approval received from GOI.

**Component ID No. 4: Training of Health Assistants**

Budget: Rs. 34,00,000/-                      Advance Rs. 34,00,000/-

- Training curriculum being developed.

**Component ID No. 5: Training of Leprosy Technicians**

Budget: Rs. 70,00,000/-                      Expenditure: Rs. 2,55,095/-  
Advance : Rs. 25,16,995/-

- Ongoing activity to be completed by Dec. 2005.

**Component ID No. 6: Rewarding the work of Staff and Institutions**

Budget: Rs. 20,50,000/-                      Exp.: Rs. 1,99,500/- (as advance)

- It is decided to give the Awards in the form of some useful equipment to all DDHS and DHOs, not be in the form of cash.
- Awaited for the list of 3 best performing Subcentres from each district, Rural Hospitals / Urban Health Functionaries.
- State Govt. has already declared a scheme of Dr. Anandi Bai Joshi Award. Hence, it is proposed to utilise funds for that scheme instead of running a parallel Scheme.



### **Component ID No. 7: Pre-placement Training for Officers**

Budget: Rs. 50,00,000/-                      Expenditure Rs. 2,48,283/-  
Advance Rs. 29,01,217/-  
Total Rs. 31,49,500/-

- Training curriculum finalized and training proposed from Oct. 2005.

### **Component ID No. 8: Expanding the SIP in Other Districts**

Budget: Rs. 19,62,36,000/- (for 1 yr)      Exp.: Rs. 2,24,693/-  
(Adv. Rs. 2,40,62,000/-)  
Total: Rs. 2,42,86,693/-

- Nine District Action plans have been approved by the Subcommittee
- A meeting was organized at PHI, Nagpur during 13th and 16th of June to finalize the Microplans by the 9 districts. Another meeting was organized at SFWB, Pune on 24th June, 2005 to finalize training strategy.

### **Component ID No. 9: Improving the Efficiency of Operations at the State Family Welfare**

Budget: Rs. 25,00,000/-

- It was decided to consider the proposal for establishing LAN system at SFWB, when the issue of shifting of SFWB, Pune to Mumbai is settled.

### **Component ID No. 10: Community Based Distribution of Contraceptives**

Budget: Rs. 1,45,88,000/-

- Component deleted from SAP - III

### **SECTOR REFORMS - Assistance required from Govt.**

- Govt. orders regarding Dist. Health reorganization to be issued
- Govt. orders regarding Taluka Health Officers scheme to be issued