



ৰাষ্ট্ৰীয় স্বাস্থ্য অভিযান, অসম

DISTRICT OPERATIONAL GUIDELINES (DROP) 2021-22

NUTRITION

CHILD HEALTH DIVISION

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Preface

Nutrition is the science of nourishment. It is a fundamental stipulation of life in the world. Evolutions in technology, transformation in social structure and life style, economic alteration, globalization are some of the significant dynamics for which the world is facing with different public health nutrition problems today. Most of the public health nutrition issues are easily preventable and have great impact of human health and wellbeing. Realising the benefit of different nutritional welfare programmes on nation's development, Gol implemented various nutrition welfare programmes through the MoWD,&MoHFW.

MoHFW implements programmes for prevention and control of anaemia, vitamin A deficiency, iodine deficiency, fluorosis and protein energy mal nutrition through NHM. These programmes have optimistic impact on NFHS indicators from 2005 to 2020. Assam is considered as one of the well performing state on nutrition indicators and it is the result of continuous, dedicated and comprehensive efforts of all health service providers from field to district.

Keeping in view the decline in nutritional indicators from NFHS_4 to NFHS-5, in this FY 2021-22, main focus ate on strengthening of Anaemia Mukh Bharat and reduction in anaemia among all age groups by ensuring IFA availability to beneficiary and compliance. Identification of malnourished children, referral and improved bed occupancy in each Nutrition Rehabilitation Centre is the second important area of interest in this year. Concentrated efforts are stressed for Infant and Young Child feeding practices for reducing incidences of malnutrition, diarrhoea & pneumonia among children under 2 years and will have positive impact of IMR. Due to COVID - 19, other nutrition programmes such as Intensified Diarrhoea Control Fortnight, National Deworming Days, Mothers Absolute Affection, etc will be implemented based on the future guidelines received from Gol. But detailed plan and budget are provided in this guideline for your future reference.

Like previous years all ongoing nutrition programmes will be implemented in 2021-22. All health officials, programme officers are requested to go through this nutrition operation guidelines to develop proper block and district specific plans for better outcomes. In this guideline each programme is explained comprehensively including different activities such as orientation, IEC, ASHA incentive, printing etc together. Hence, please do the planning for programme implementation, monitoring and review in a team. **It is to be mentioned that all the guidelines for each and every activity continued from previous FY 2020-21 will remain unchanged unless Covid-19 specific guidelines issued from Government of India from time to time, which will be intimated prior implementation of each activity.**



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NUTRITION KEY DELIVERABLES UNDER ROP

1. Reduction of Neonatal Mortality Rate by 20/1000 live birth.
2. Reduction of Infant Mortality Rate by 38/1000 live birth
3. Reduction of U5 Mortality Rate by 44/1000 live birth.
4. NRC of the state should have bed occupancy of 75%.
5. The Cure Rate at NRC should be more than 90%.
6. All the delivery points in the state should be saturated with 4 days IYCF training under "MAA" programme.
7. Percentage of children 6-59 months given 8-10 days of IFA syrup every month should be more than 40%.
8. Percentage of children 5-9 years given 4-5 IFA tablets every month should be more than 40%.
9. Percentage of children 10-19 years given 4-5 IFA tablets every month should be more than 40%.

Summary of Approval				
FMR	Budget Head	Approved	State	District
1	Service Delivery - Facility Based	74.10	10.8059	63.2941
2	Service Delivery - Community Based	46.90	0.00	46.90
3	Community Interventions (Sub- Annexure)	567.78	0.00	567.78
4	Untied Fund	0.00	0.00	0.00
5	Infrastructure	0.00	0.00	0.00
6	Procurement (Sub-Annexure)	1367.10	1367.10	0.00
7	Referral Transport	0.00	0.00	0.00
8	Human Resource	0.00	0.00	0.00
9	Training and Capacity Building	128.35	2.60	125.75
10	Reviews, Research, Surveys and Surveillance	0.00	0.00	0.00
11	IEC/BCC	0.00	0.00	0.00
12	Printing (Sub- Annexure)	129.41	32.40	97.02
13	Quality/ Assurance	0.00	0.00	0.00
14	Drugs Ware Housing & Logistics	0.00	0.00	0.00
15	PPP	0.00	0.00	0.00
16	Programme Management (Sub- Annexure)	0.00	0.00	0.00
17	IT initiatives for Strengthening Service delivery	0.00	0.00	0.00
18	Innovations	0.00	0.00	0.00
Grand Total (In Lakh)		2313.64	1412.90	900.74

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SUMMARY SHEET OF ACTIVITY WISE ROP APPROVALS IN LAKHS (EXCLUDING HR)

FMR	Particulars	Approval in RoP 2021-22(In Lakhs)		
		Budget Approved	State Allocation	District Allocation
1.3.1.4	Operating Expenses for NRCs	74.10	10.8059	63.2941
2.3.1.1.1	Outreach Camps	46.90	0.00	46.90
3.1.1.1.2	ASHA incentive under MAA programme @ Rs 100 per ASHA for quarterly mother's meeting	73.23	0.00	73.23
3.1.1.1.5	Incentive for referral of SAM cases to NRC and for follow up of discharge SAM children from NRCs	2.55	0.00	2.55
3.1.1.1.6	Incentive for National Deworming Day for mobilising out of school children	65.09	0.00	65.09
3.1.1.1.7	Incentive for IDCF for prophylactic distribution of ORS to family with under-five children.	36.36	0.00	36.36
3.1.1.1.8	National Iron Plus Incentive for mobilizing WRA (Non-pregnant & Non-lactating Women 20-49 years)	117.17	0.00	117.17
3.1.1.1.9	National Iron Plus Incentive for mobilizing children and/or ensuring compliance and reporting (6-59 months)	273.39	0.00	273.39
6.2.1.5	IFA tablets for non-pregnant & non-lactating women in Reproductive Age (20-49 years)	43.94	43.94	0.00
6.2.1.6	Albendazole Tablets for non-pregnant & non-lactating women in Reproductive Age (20-49 years)	9.30	9.30	0.00
6.2.2.3	IFA syrups (with auto dispenser) for children (6-60months)	262.18	262.18	0.00
6.2.2.4	Albendazole Tablets for children (6-60months)	44.55	44.55	0.00
6.2.2.5	IFA tablets (IFA WIFS Junior tablets- pink sugar coated) for children (5-10 yrs)	249.16	249.16	0.00
6.2.2.6	Albendazole Tablets for children (5-10 yrs)	87.84	87.84	0.00
6.2.2.7	Vitamin A syrup	97.95	97.95	0.00
6.2.2.8.1	ORS	110.16	110.16	0.00
6.2.2.8.2	Zinc	11.42	11.42	0.00
6.2.4.1	IFA tablets under WIFS (10-19 yrs)	287.93	287.93	0.00
6.2.4.2	Albendazole Tablets under WIFS (10-19 yrs)	162.67	162.67	0.00
9.5.2.2	Orientation/Planning/Launch on SAANS initiative at state or district (Pneumonia)/IDCF Orientation	24.76	2.36	22.40
9.5.2.11	Training on facility-based management of Severe Acute Malnutrition (including refreshers)	0.24	0.24	0.00
9.5.2.18	4 days Trainings on IYCF for MOs, SNs, ANMs of all DPs and SCs (ToTs, 4 days IYCF Trainings & 1 day sensitization on MAA Programme	53.24	0.00	53.24

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9.5.2.19	Orientation on National Deworming Day	50.11	0.00	50.11
12.1.4	Printing cost for MAA Programme	15.25	0.00	15.25
12.2.3	Printing for Micronutrient Supplementation Programme	29.63	28.14	1.4968
12.2.6	Printing of IEC materials and reporting formats etc. for National Deworming Day	64.13	0.00	64.13
12.2.7	Printing of IEC Materials and monitoring formats for IDCF	20.40	4.26	16.14
	Total	2313.64	1412.90	900.74

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Nutrition Rehabilitation Centre

FMR Code-1.3.1.4	
Activity: Operating Expenses for Nutrition Rehabilitation Centres (NRCs)	
Justification: Day to day operational cost of NRCs	
FMR Owner:	
State: Consultant, Nutrition/Consultant, Child Health	
District: NRC Nodal Officer/Dietician	
Fund Allotment(In Lakh):State: 10.8059	District: 63.2941

Nutrition Rehabilitation Centers (NRC) are established in Health Facilities to provide appropriate and facility-based case management to children with SAM for all under 5 children.

RBSK Team has great role in identification & referral of children with SAM and their admission in NRC from the community. They may do mapping of the block based on malnutrition. Same information may be used by DCM & BCM to prevent and control malnutrition in respective area of action through community mobilization.

Fund Allotment

SN	District	Name of the NRC	Operational Cost Allotted for FY 2021-22 (In lakhs)
1	Barpeta	Howly, CHC	3.08750
2	Bongaigaon	Bogaigaon Civil Hospital	3.08750
3	Cachar	SM Dev Civil Hospital	1.54380
4	Chirang	JSB Civil Hospital, Chirang	1.54380
5	Darrang	Kharupetia, BPHC	3.08750
6	Dhemaji	Silapathar, FRU	1.54380
7	Dhubri	Dhubri, Civil Hospital	3.08750
8	Dibrugarh	Moran Tiloj, FRU	3.08750
9	Goalpara	Goalpara, Civil hospital	3.08750
10	Golaghat	Bokakhat, FRU	3.08750
11	Hailakandi	SK Roy Civil Hospital	0.00000
12	Jorhat	JMCH	3.08750
13	Kamrup M	GMCH	3.08750
14	KarbiAnglong	KarbiAnglong Civil Hospital	1.54380
15	Karimganj	Karimganj , Civil Hospital	1.54380
16	Kokrajhar	K.R.N.B Civil hospital, Gosaigaon	3.08750
17	Lakhimpur	Bhipuria, BPHC	3.08750
18	Morigaon	Morigaon,Civil hospital	3.08750
19	Nagaon	Raha CHC	3.08750
20	Nagaon	SamaguriBPHC	1.54380
21	Nalbari	Nalbari,Civil hospital	3.08750
22	Sonitpur	TMCH	3.08750

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23	Tinsukia	DH	3.08750
24	Udalguri	Udalguri Civil Hospital	3.08750
25	Baksa	Baksa Civil Hospital	1.54380
Total			63.2941

N:B: Fund allotted to NRCs are based on the current Bed Occupancy and functionality. As the Hailakandi NRC is not functional, therefore no fund allotted. If become functional fund will be allotted on request from district. In case of shortage of fund due to increase of bed occupancy for any NRC, additional fund will be sanctioned on request.

Recurrent Expenditure Estimate for 10 bedded NRC with 100% Bed Occupancy

SN	Item	Annual cost
1	Kitchen Supply	1,80,000
2	Pharmacy Supplies and Consumable	1,80,000
3	Other Cost	3,60,000
4	Wage Compensation	42,000
5	Maintenance of equipment, Linen, Cleaning supplies, Contingency	18,000
Total		7,80,000

Recurring Expenditure of the NRC is to be proportionate to bed occupancy. (Each NRC will receive operational Cost based on bed occupancy & Gol approval. Additional fund may be allotted to NRCs with good performance)

FMR Code-3.1.1.1.5	
Activity: ASHA Incentive for referral to and follow up of SAM children discharged from NRCs	
Justification: ASHAs are responsible for screening of U5 Children in her area to identify the SAM children in collaboration with AWWs and refer the identified SAM children to NRCs for treatment. They are also need to ensure to complete 4 follow up visit by each SAM children discharged from NRCs referred by her.	
FMR Owner:	
State: Consultant, Nutrition/State Community Mobilizer	
District: District Community Mobilizer	
Fund Allotment(In Lakh):State: 0.00	District: 2.55

Fund Allotment

SN	District	Expected No. of SAM Children to be referred & followed up	ASHA Incentive @Rs-150/ per SAM Child (In Lakh)
1	Baksa	25	0.0378
2	Barpeta	89	0.1334
3	Bongaigaon	52	0.0774
4	Cachar	199	0.2985
5	Chirang	18	0.0270

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6	Darrang	57	0.0851
7	Dhemaji	15	0.0220
8	Dhubri	107	0.1608
9	South Salmara	43	0.0640
10	Dibrugarh	81	0.1221
11	Dima Hasao	4	0.0054
12	Goalpara	75	0.1129
13	Golaghat	46	0.0686
14	Hailakandi	59	0.0889
15	Jorhat	37	0.0552
16	Majuli	7	0.0100
17	Kamrup Metro	37	0.0558
18	Kamrup Rural	75	0.1127
19	KarbiAnglong	39	0.0578
20	West KarbiAnglong	17	0.0258
21	Karimganj	86	0.1286
22	Kokrajhar	42	0.0627
23	Lakhimpur	41	0.0608
24	Morigaon	36	0.0535
25	Nagaon	93	0.1390
26	Hojai	46	0.0684
27	Nalbari	31	0.0468
28	Sivasagar	15	0.0228
29	Charaideo	10	0.0151
30	Sonitpur	79	0.1180
31	Biswanath	37	0.0551
32	Tinsukia	59	0.0889
33	Udalguri	43	0.0649
Total		1700	2.55

N: B: Rest of the guidelines, reporting formats and other rules such as Guideline for utilization of Operational Cost, NRC Protocols, Benchmark Performance of NRC, Monitoring, NRC Registers/Formats/Cards and Patient Follow ups etc will remain same as mentioned in the District Operational Guidelines 2020-21.

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Mother's Absolute Affection (MAA) Programme

Delayed initiation of breastfeeding followed by inappropriate feeding practices in the new-born leads to undernutrition in infants and children. The 1,000 days between conception and child's second birthday offer a unique window of opportunity to shape healthier and more prosperous future. Infant and Young Child Feeding (IYCF) practices are set of well-known, common and scientific recommendations for appropriate feeding of newborn and children under two years. To improve the breastfeeding and young child feeding practices in the country, the nationwide programme - 'MAA' (Mothers' Absolute Affection) was launched in August 2016. It involves a comprehensive set of activities on protection, promotion and support of breastfeeding and child feeding at community as well as at facility levels.

Components of MAA

- ✚ Building an enabling environment & demand generation through Mass media and Mid media
- ✚ Capacity building of community health workers – ASHAs, AWWs & ANMs – on breastfeeding
- ✚ Community dialogue – by ASHAs through mother's meetings; & lactation support and interpersonal communication – by skilled ANMs at VHNDs/sub-centres
- ✚ Capacity building of auxiliary nurse midwives (ANMs)/nurses doctors on lactation support and management at facilities
- ✚ Role reinforcement on breastfeeding – at all delivery points
- ✚ Monitoring and Awards/Recognition.

Activities under MAA for 2020-21

- ✚ Sensitization of health service providers on IYCF.
- ✚ Mother's meeting

FMR Code- 9.5.2.18	
Activity: 1 day sensitization/orientation/refresher Training of IYCF under MAA Programme	
Justification: One the main objective of the MAA programme is to sensitize health care staff on IYCF practices and their importance in reducing NMR, IMR & U5MR.	
FMR Owner:	
State: Consultant, Nutrition/State Community Mobilizer	
District: District Community Mobilizer	
Fund Allotment(In Lakh):State: 0.00	District: 53.24

One Days Sensitization on IYCF under MAA (Mother's Absolute Affection) Programme

One day sensitization module aims to provide a brief orientation to all frontline workers including AHSAs, ASHA Supervisors, ANMs, Nurses and doctors on essential knowledge of successful breastfeeding promotion and supporting the mothers for breastfeeding both in facility and community.

Regular platform of monthly meetings at Sector, Block and district are to be used to sensitized all health service providers.

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1. The sensitization programme will be of One day duration and 40 participants per batch.
2. The Master Trainers of IYCF already trained at state and Mos/SNs trained in 4 Days IYCF training will be the Resource Persons.
3. The District Community Mobilizer (DCM) of the respective district will be responsible for co-ordination and organization of the programme under the supervision of the District Programme Manager (DPM).
4. Training will be as per the module (One Day MAA Sensitization Module) prescribed under MAA Guidelines
5. DCM of the respective district will be responsible for submission of the completion report to the CH section within one week of completion of the training in their respective district with following enclosures-
 - A) Detailed participants list. B) Photographs

Fund and Batch Allotment

SN	District	No. Batches Approved	Total Budget(In Lakhs)
1	Baksa	8	1.76
2	Barpeta	13	2.86
3	Biswanath	6	1.32
4	Bongaigaon	6	1.32
5	Cachar	11	2.42
6	Charaideo	4	0.88
7	Chirang	5	1.10
8	Darrang	8	1.76
9	Dhemaji	5	1.10
10	Dhubri	9	1.98
11	Dibrugarh	10	2.20
12	Dima Hasao	4	0.88
13	Goalpara	8	1.76
14	Golaghat	9	1.98
15	Hailakandi	4	0.88
16	Hojai	4	0.88
17	Jorhat	7	1.54
18	Kamrup M	6	1.32
19	Kamrup R	15	3.30
20	KarbiAnglong	6	1.32
21	Karimganj	10	2.20
22	Kokrajhar	9	1.98
23	Lakhimpur	8	1.76
24	Majuli	2	0.44
25	Marigaon	7	1.54
26	Nagaon	15	3.30
27	Nalbari	9	1.98
28	Sibsagar	7	1.54
29	Sonitpur	7	1.54
30	South Salmara	3	0.66

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31	Tinsukia	7	1.54
32	Udalguri	7	1.54
33	West Karbianglong	3	0.66
Grand Total		242	53.24

Tentative Budget for One Day Sensitization on IYCF under MAA Programme				
SN	Particulars	Unit	Unit cost (in Rs.)	Total Amount
1	TA of Participants (on actual)	40	150	6000
2	TA of Resource Persons (on actual)	2	300	600
3	Training materials (includes Photocopy, pen, pad, folder, pen etc.) including printing of training module	40	100	4000
4	Tea/ Lunch (including officials)	50	100	5000
5	Contingency	1		0
6	Laptop/projector hiring and venue hiring	1	5000	5000
7	Honorarium to resource person (per day)	2	700	1400
Budget Per Batch in Rs				22000

Agenda For One Day Sensitization

SN	Topic	Duration
1	Early Initiation of Breastfeeding	45 minutes
2	Exclusive Breastfeeding	60 minutes
3	Positioning and Attachment for Breastfeeding	60 minutes
4	Expressing Breastmilk	30 minutes
5	Continued Breastfeeding	30 minutes
6	Complementary Feeding	60 minutes
7	Closing Session	15 minutes

FMR Code-3.1.1.1.2

Activity: ASHA Incentive under MAA Programme

Justification: For ASHA Incentive for organising 6-8 quarterly Mother's Meeting by each ASHAs @Rs-100/ per ASHA per quarter. These meetings are intended to create awareness among pregnant & lactating mothers on IYCF practices to protect & prevent children from malnutrition.

FMR Owner:

State: Consultant, Nutrition/State Community Mobilizer

District: District Community Mobilizer

Fund Allotment(In Lakh):State: 0.00

District: 73.23

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Fund Allotment

SN	District	No of ASHA	Fund Allotted (L)
1	Baksa	950	2.138
2	Barpeta	1610	3.623
3	Bongaigaon	752	1.692
4	Cachar	1826	4.109
5	Chirang	742	1.670
6	Darrang	978	2.201
7	Dhemaji	746	1.679
8	Dhubri	1651	3.715
9	South Salmara	345	0.776
10	Dibrugarh	1299	2.923
11	Dima Hasao	238	0.536
12	Goalpara	1067	2.401
13	Golaghat	1057	2.378
14	Hailakandi	715	1.609
15	Jorhat	967	2.176
16	Majuli	298	0.671
17	Kamrup Metro	676	1.521
18	Kamrup Rural	1744	3.924
19	KarbiAnglong	739	1.663
20	West KarbiAnglong	390	0.878
21	Karimganj	1235	2.779
22	Kokrajhar	1377	3.098
23	Lakhimpur	1308	2.943
24	Morigaon	948	2.133
25	Nagaon	1742	3.920
26	Hojai	701	1.577
27	Nalbari	775	1.744
28	Sivasagar	774	1.742
29	Charaideo	482	1.085
30	Sonitpur	1160	2.610
31	Biswanath	786	1.769
32	Tinsukia	1403	3.157
33	Udalguri	1065	2.396
Total		32546	73.23

N: B: In this FY year state has proposed to conduct regular quarterly mother's meeting by 75% (24410) of the in place ASHAs (32546).The Reporting for MAA Quarterly Mother's meeting is same as previous year.

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Celebration of Breast-feeding Week

World Breastfeeding Week (WBW) is a global campaign to raise awareness and galvanise action on themes related to breastfeeding

WBW is celebrated every 1-7 August in commemoration of the 1990 Innocenti Declaration. WBW started in 1992, with annual themes including healthcare systems, women and work, the International Code of Marketing of Breast milk Substitutes, community support, ecology, economy, science, education and human rights. Since 2016, WBW is aligned with the Sustainable Development Goals (SDGs). In 2018, a World Health Assembly resolution endorsed WBW as an important breastfeeding promotion strategy.

For this FY, state has kept fund for Celebration through organising rallies, Focus Group Dissuasions, Quiz Competition or any other event as decided by districts as per local priorities. To create awareness on breastfeeding, fund also budgeted for printing of leaflets and posters.

FMR Code-12.1.4	
Activity: Printing for and celebration of World Breastfeeding Week	
Justification: World Breastfeeding Week (WBW) is global campaign to raise awareness and galvanize actions on themes related to breastfeeding.	
FMR Owner:	
State: Consultant, Nutrition/Consultant, Child/SME	
District: District Media Expert	
Fund Allotment(In Lakh):State: 0.00	District: 15.25

Fund Allotment

SN	District	No of SC	No. of HI	Cost for 150 leaflets @Rs 3.5+ 1 Poster @Rs 8/- per HI (L)	BFW celebration Rs 25000/- per district (L)	Cost of 1 Poster per SC@ Rs 8/-	Total
1	Baksa	157	44	0.23452	0.25	0.01256	0.4971
2	Barpeta	264	62	0.33046	0.25	0.02112	0.6016
3	Bongaigaon	108	34	0.18122	0.25	0.00864	0.4399
4	Cachar	270	40	0.2132	0.25	0.0216	0.4848
5	Chirang	87	29	0.15457	0.25	0.00696	0.4115
6	Darrang	159	41	0.21853	0.25	0.01272	0.4813
7	Dhemaji	98	29	0.15457	0.25	0.00784	0.4124
8	Dhubri	183	43	0.22919	0.25	0.01464	0.4938
9	South Salmara	55	11	0.05863	0.25	0.0044	0.3130
10	Dibrugarh	234	41	0.21853	0.25	0.01872	0.4873
11	Dima Hasao	76	16	0.08528	0.25	0.00608	0.3414
12	Goalpara	155	46	0.24518	0.25	0.0124	0.5076
13	Golaghat	144	49	0.26117	0.25	0.01152	0.5227
14	Hailakandi	107	18	0.09594	0.25	0.00856	0.3545

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15	Jorhat	111	41	0.21853	0.25	0.00888	0.4774
16	Majuli	34	12	0.06396	0.25	0.00272	0.3167
17	Kamrup Metro	51	50	0.2665	0.25	0.00408	0.5206
18	Kamrup Rural	279	80	0.4264	0.25	0.02232	0.6987
19	KarbiAnglong	104	31	0.16523	0.25	0.00832	0.4236
20	West KarbiAnglong	50	21	0.11193	0.25	0.004	0.3659
21	Karimganj	230	38	0.20254	0.25	0.0184	0.4709
22	Kokrajhar	162	50	0.2665	0.25	0.01296	0.5295
23	Lakhimpur	156	39	0.20787	0.25	0.01248	0.4704
24	Morigaon	122	41	0.21853	0.25	0.00976	0.4783
25	Nagaon	258	85	0.45305	0.25	0.02064	0.7237
26	Hojai	94	12	0.06396	0.25	0.00752	0.3215
27	Nalbari	122	56	0.29848	0.25	0.00976	0.5582
28	Sivasagar	143	33	0.17589	0.25	0.01144	0.4373
29	Charaideo	77	20	0.1066	0.25	0.00616	0.3628
30	Sonitpur	147	38	0.20254	0.25	0.01176	0.4643
31	Biswanath	137	30	0.1599	0.25	0.01096	0.4209
32	Tinsukia	166	31	0.16523	0.25	0.01328	0.4285
33	Udalguri	150	32	0.17056	0.25	0.012	0.4326
	Sub total	4690	1243	6.62519	8.25	0.3752	15.2504

N:B: Prototype for leaflets/posters and theme of WBW will be intimated later by GoI.

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Anaemia Mukh Bharat (AMB)

Anaemia is a major public health issue of India and 50% of total anaemia is caused by iron deficiency. Anaemia is the second highest cause of maternal mortality in Asia.

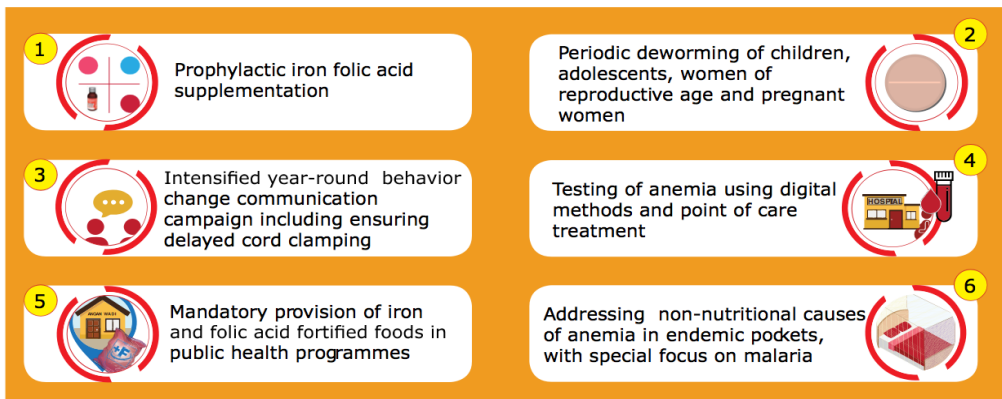
The Ministry of Health and Family Welfare (MoHFW) has launched Anaemia Mukh Bharat Programme with special focus on the health and nutrition needs of children, adolescents, women of reproductive age group and pregnant mothers and lactating mothers. Its main objectives are IFA distribution and compliance, anaemia detection, referral and treatment for achieving the goal of better haemoglobin status among the people of India.

This will be achieved through six interventions, implementation of which will be facilitated by six robust institutional mechanisms. To facilitate seamless implementation of the interventions, a training tool kit has been developed which will be used to orient and train different stakeholders at various levels for effective implementation of Anaemia Mukh Bharat (AMB) strategy.

Six Beneficiaries:

- Children 6-59 months
- Children 5-9 years
- Children 10-19 years
- Pregnant Women
- Lactating Women
- Women of Reproductive age

Six interventions:



Six Institutional Mechanisms



Signature

Prophylactic dose and regime for Iron Folic Acid supplementation

Age Group	Dose and regime
Children 6–59 months of age	Biweekly, 1 ml Iron and Folic Acid syrup Each ml of Iron and Folic Acid syrup containing 20 mg elemental Iron + 100 mcg of Folic Acid Bottle (50ml) with 'auto-dispenser'.
Children 5–9 years of age	Weekly, 1 Iron and Folic Acid tablet Each tablet containing 45 mg elemental Iron + 400 mcg Folic Acid, sugar-coated, pink colour
Children 10–19 years of age	Weekly, 1 Iron and Folic Acid tablet Each tablet containing 60 mg elemental iron + 500 mcg Folic Acid, sugar-coated, blue colour
Women of reproductive age (non-pregnant, non-lactating) 20–49 years	Weekly, 1 Iron and Folic Acid tablet Each tablet containing 60 mg elemental Iron + 500 mcg Folic Acid, sugar-coated, red colour
Pregnant women and lactating mothers (of 0–6 months child)	Daily, 1 Iron and Folic Acid tablet starting from the fourth month of pregnancy (that is from the second trimester), continued throughout pregnancy (minimum 180 days during pregnancy) and to be continued for 180 days, post-partum Each tablet containing 60 mg elemental Iron + 500 mcg Folic Acid, sugar-coated, red colour

ACTIVITIES UNDER AMB

FMR Code-2.3.1.1.1	
Activity: Outreach Camps	
Justification: For 1 Anaemia Detection Camp @ Rs 1000/- per Sub Centre. This activity based on the T3 Camps under AMB Programme to generate awareness, identify anaemic patients and treat them. These camps are preferably to be organised during Posahn Maah or Poshan Saptah from Health Departments as an activity for Poshan Abhiyan.	
FMR Owner:	
State: Consultant, Nutrition/Consultant, Child Health	
District: District Community Mobilizer and District Coordinator (RBSK)	
Fund Allotment(In Lakh):State: 0.00	District: 46.90

Fund Allotment

SN	District	No of SC	Unit cost	Fund Allotted (L)
1	Baksa	157	1000	1.57
2	Barpeta	264	1000	2.64
3	Bongaigaon	108	1000	1.08
4	Cachar	270	1000	2.70
5	Chirang	87	1000	0.87
6	Darrang	159	1000	1.59
7	Dhemaji	98	1000	0.98
8	Dhubri	183	1000	1.83
9	South Salmara	55	1000	0.55
10	Dibrugarh	234	1000	2.34
11	Dima Hasao	76	1000	0.76

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12	Goalpara	155	1000	1.55
13	Golaghat	144	1000	1.44
14	Hailakandi	107	1000	1.07
15	Jorhat	111	1000	1.11
16	Majuli	34	1000	0.34
17	Kamrup Metro	51	1000	0.51
18	Kamrup Rural	279	1000	2.79
19	KarbiAnglong	104	1000	1.04
20	West KarbiAnglong	50	1000	0.50
21	Karimganj	230	1000	2.30
22	Kokrajhar	162	1000	1.62
23	Lakhimpur	156	1000	1.56
24	Morigaon	122	1000	1.22
25	Nagaon	258	1000	2.58
26	Hojai	94	1000	0.94
27	Nalbari	122	1000	1.22
28	Sivasagar	143	1000	1.43
29	Charaideo	77	1000	0.77
30	Sonitpur	147	1000	1.47
31	Biswanath	137	1000	1.37
32	Tinsukia	166	1000	1.66
33	Udalguri	150	1000	1.50
	Total	4690	1000	46.90

FMR Code-3.1.1.1.8

Activity: NIPI Incentive for mobilizing WRA (non-pregnant & non-lactating Women 20-49 years

Justification: Incentive for 32546 ASHAs for mobilizing WRA for IFA supplementation and ensuring compliance @Rs-50/ per ASHA per month for 12 months for 60% coverage by her.

FMR Owner:

State: Consultant, Nutrition/State Community Mobilizer

District: District Community Mobilizer

Fund Allotment(In Lakh):State: 0.00

District: 117.17

Fund Allotment

SN	Name of the District	No of ASHA	Fund Allotted (L)
1	Baksa	950	3.4200
2	Barpeta	1610	5.7960
3	Bongaigaon	752	2.7072
4	Cachar	1826	6.5736

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5	Chirang	742	2.6712
6	Darrang	978	3.5208
7	Dhemaji	746	2.6856
8	Dhubri	1651	5.9436
9	South Salmara	345	1.2420
10	Dibrugarh	1299	4.6764
11	Dima Hasao	238	0.8568
12	Goalpara	1067	3.8412
13	Golaghat	1057	3.8052
14	Hailakandi	715	2.5740
15	Jorhat	967	3.4812
16	Majuli	298	1.0728
17	Kamrup Metro	676	2.4336
18	Kamrup Rural	1744	6.2784
19	KarbiAnglong	739	2.6604
20	West KarbiAnglong	390	1.4040
21	Karimganj	1235	4.4460
22	Kokrajhar	1377	4.9572
23	Lakhimpur	1308	4.7088
24	Morigaon	948	3.4128
25	Nagaon	1742	6.2712
26	Hojai	701	2.5236
27	Nalbari	775	2.7900
28	Sivasagar	774	2.7864
29	Charaideo	482	1.7352
30	Sonitpur	1160	4.1760
31	Biswanath	786	2.8296
32	Tinsukia	1403	5.0508
33	Udalguri	1065	3.8340
Total		32546	117.17

N: B: Reporting mechanism, formats, supply chain and other guidelines are same as like previous year.

FMR Code-3.1.1.1.9	
Activity: NIPI Incentive for mobilizing children and ensuring compliance and reporting (6-59 months)	
Justification: Incentive for 32546 ASHAs for mobilizing children 6-59 months IFA supplementation and ensuring compliance @Rs-100/ per ASHA per month for 12 months for 70% coverage by her.	
FMR Owner:	
State: Consultant, Nutrition/State Community Mobilizer	
District: District Community Mobilizer	
Fund Allotment(In Lakh):State: 0.00	District: 273.39

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Fund Allotment

SN	District	No. of ASHA	Fund Allotted (L)
1	Baksa	950	7.980
2	Barpeta	1610	13.524
3	Bongaigaon	752	6.317
4	Cachar	1826	15.338
5	Chirang	742	6.233
6	Darrang	978	8.215
7	Dhemaji	746	6.266
8	Dhubri	1651	13.868
9	South Salmara	345	2.898
10	Dibrugarh	1299	10.912
11	Dima Hasao	238	1.999
12	Goalpara	1067	8.963
13	Golaghat	1057	8.879
14	Hailakandi	715	6.006
15	Jorhat	967	8.123
16	Majuli	298	2.503
17	Kamrup Metro	676	5.678
18	Kamrup Rural	1744	14.650
19	KarbiAnglong	739	6.208
20	West KarbiAnglong	390	3.276
21	Karimganj	1235	10.374
22	Kokrajhar	1377	11.567
23	Lakhimpur	1308	10.987
24	Morigaon	948	7.963
25	Nagaon	1742	14.633
26	Hojai	701	5.888
27	Nalbari	775	6.510
28	Sivasagar	774	6.502
29	Charaideo	482	4.049
30	Sonitpur	1160	9.744
31	Biswanath	786	6.602
32	Tinsukia	1403	11.785
33	Udalguri	1065	8.946
Total		32546	273.39

N:B: Reporting mechanism, formats, supply chain and other guidelines are same as like previous year.

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Vitamin A Supplementation (Bi-annual) Rounds

Vitamin A deficiency has been recognized as one of the major preventable public health and nutritional challenge. An estimated 5.7% children in India suffer from eye signs of Vitamin A deficiency. Recent evidence suggested that even mild form of Vitamin A deficiency increases morbidity and mortality among the U-5 children. Under the National Prophylaxis Programme for Prevention of Blindness due to Vitamin A deficiency, there is a provision of administration of Vitamin A on a periodic basis.

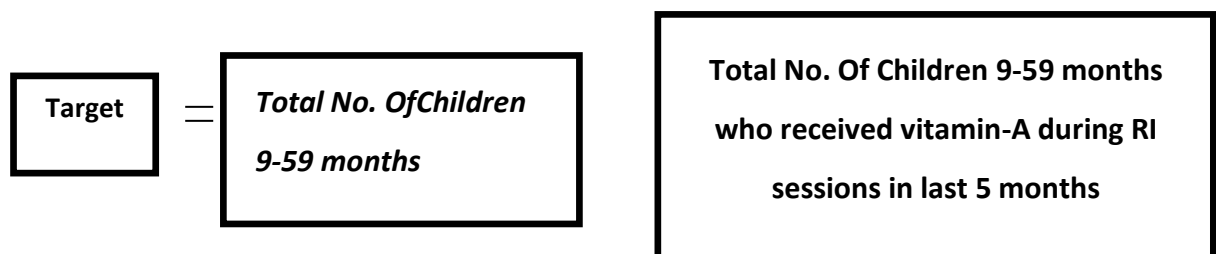
Vitamin A is stored in body for 6 months, so bi-annual administration ensures adequate Vitamin A supplementation in the body. Administration of Vitamin A to the pre-school children at periodic interval is a simple, effective and most direct intervention strategy. Under the strategy of Biannual supplementation of Vitamin A, the schedule and dose of Vitamin A supplementation is as follows:

Age	Dose	Remark
Just after 9 completed months	100000 IU. 1 ml or inner mark on the measuring spoon (available with Vitamin A bottle)	During administration of MR 1 st dose is most appropriate for administering 1 st dose of Vitamin A
1 - 5 years	200000 IU. 2 ml or full measure spoon (available with Vitamin A bottle).	In every 6 months interval thereafter till 5 years.

A child should receive 9 doses of Vitamin A from 9 months to 5 years of age.

N:B: Date of opening of the Vitamin-A bottles to be mentioned on the carton as well as on the label of the bottle. Once opened, the Vitamin-syrup can be used for 2 months provided it is within the date of expiry.

Target Fixation For Each Vitamin-A Bi-annual Round



VERY IMPORTANT: The Vitamin A administration should be recorded in MCP cards

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FMR Code- 12.2.3	
Activity: Printing for Micronutrient Supplementation Programme (VAS)	
Justification: Printing for Vitamin A supplementation bi-annual rounds.	
FMR Owner:	
State: Consultant, Nutrition/SME	
District: District Media Expert	
Fund Allotment(In Lakh):State: 0.00	District: 1.4968

Fund Allotment

S N	District	No. of Blocks	No. of SCs	1 SC Micro Planning cum Reporting Formats per SC @Rs-1 per format	1 Tally Sheet per session (5 sessions per SC) @Rs-1/ per sheet	60 Monitoring formats per block @Rs-1/ per format	1 Poster on Vitamin A per SC@Rs-8/ per poster	Total budget for 2 rounds
1	Baksa	6	157	157	785	360	1256	0.0512
2	Barpeta	7	264	264	1320	420	2112	0.0823
3	Bongaigaon	4	108	108	540	240	864	0.0350
4	Cachar	8	270	270	1350	480	2160	0.0852
5	Chirang	2	87	87	435	120	696	0.0268
6	Darrang	4	159	159	795	240	1272	0.0493
7	Dhemaji	5	98	98	490	300	784	0.0334
8	Dhubri	5	183	183	915	300	1464	0.0572
9	South Salmara	2	55	55	275	120	440	0.0178
10	Dibrugarh	6	234	234	1170	360	1872	0.0727
11	Dima Hasao	3	76	76	380	180	608	0.0249
12	Goalpara	5	155	155	775	300	1240	0.0494
13	Golaghat	5	144	144	720	300	1152	0.0463
14	Hailakandi	4	107	107	535	240	856	0.0348
15	Jorhat	6	111	111	555	360	888	0.0383
16	Majuli	1	34	34	170	60	272	0.0107
17	Kamrup Metro	5	51	51	255	300	408	0.0203
18	Kamrup Rural	12	279	279	1395	720	2232	0.0925
19	KarbiAnglong	4	104	104	520	240	832	0.0339
20	West KarbiAnglong	4	50	50	250	240	400	0.0188
21	Karimganj	5	230	230	1150	300	1840	0.0704
22	Kokrajhar	4	162	162	810	240	1296	0.0502

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23	Lakhimpur	6	156	156	780	360	1248	0.0509
24	Morigaon	3	122	122	610	180	976	0.0378
25	Nagaon	9	258	258	1290	540	2064	0.0830
26	Hojai	2	94	94	470	120	752	0.0287
27	Nalbari	4	122	122	610	240	976	0.0390
28	Sivasagar	6	143	143	715	360	1144	0.0472
29	Charaideo	2	77	77	385	120	616	0.0240
30	Sonitpur	4	147	147	735	240	1176	0.0460
31	Biswanath	3	137	137	685	180	1096	0.0420
32	Tinsukia	4	166	166	830	240	1328	0.0513
33	Udalguri	3	150	150	750	180	1200	0.0456
Total		153	4690	4690	23450	9180	37520	1.4968

N: B: Implementation guidelines, Reporting mechanism, formats, supply chain and other guidelines are same as like previous year.

Stapanika

National Deworming Day(NDD)

Soil Transmitted Helminths (STH) are significant public health concern for Assam. Around 68% children of 1-14 years of age are estimated to be at risk of parasitic intestinal worm infestation in India. Evidence has shown detrimental impact of STH infestation on physical growth-anaemia, undernutrition and cognitive development as well as school attendance. Periodic deworming can reduce the transmission of STH infections. Ministry of Health & Family Welfare, Government of India, in collaboration with Ministry of Women & Child Development, Department of School Education & Literacy (under Ministry of Human Resource Development), Ministry of Drinking Water and Sanitation and Ministry of Panchayati Raj has decided to conduct annual mass deworming day observing National Deworming Day (NDD). From the year 2015, mass deworming is conducted across 27 districts of Assam as a fixed day strategy to reduce the harm caused by STH on millions of children in a cost effective, simple and safe manner.

Objective:

The objective of NDD is to deworm all preschool and school-age children between the ages of 1-19 years through the platform of schools and anganwadicenters in order to improve their overall health, nutritional status, access to education and quality of life.

Strategy:

- Fixed day approach leads to effective mobilization of stakeholders and communities essential for high coverage
- An optimal and cost-effective mechanism
- Campaign style messaging to increase awareness across the country
- Support structures in place to easily track and respond to any case of adverse events
- Effective monitoring of program for improving implementation quality
- Leveraging of existing infrastructure rather than creating new channels of service delivery

Targets:

- Children enrolled in all government and government-aided schools
- Children enrolled in central schools
- Children enrolled in private schools
- Children registered at anganwadicenters
- Unregistered and out-of-school children in anganwadis and schools, respectively
- Rag pickers, children working in hotel, restaurants, garages other commercial establishment & children and adolescents living in slum/street through NULM.
- Children and adolescents living in orphanages, children's homes, Juvenile Jails and Jails with prisoner mothers.

Doses:

Age	Dosage	Administration
1-2 Years	Half Tablet	Crush the half tablet between two spoons, then add safe water to help administer the tablet
2-3 Years	Full Tablet	
3-19 years	Full Tablet	<ul style="list-style-type: none">• Ask the children aged 3-19 to chew the tablet properly• Ensure drinking water available• Use a spoon to administer one full tablet to the child yourself

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Activities under NDD

FMR Code- 9.5.2.19	
Activity: Orientation on National Deworming Day (NDD)	
Justification: For organising orientation and convergence meeting with participants from Health and Education department for one round of NDD at District and Block Level.	
FMR Owner:	
State: Consultant, Nutrition/State Community Mobilizer	
District: District Community Mobilizer/District Coordinator (RBSK)	
Fund Allotment(In Lakh):State: 0.00	District: 50.11

SN	District	No of blocks	District level Orientation & Convergence	Block Level Orientation and Convergence				Total Fund for one round (Lakh)
			(in Lakhs)	No of school	Health staff & others	No. of participants	Total Budget in Lakh (Rs-70/ per participant)	
1	Baksa	6	0.025	2531	10	2541	1.779	1.804
2	Barpeta	7	0.025	3700	10	3710	2.597	2.622
3	Bongaigaon	4	0.025	1556	10	1566	1.096	1.121
4	Cachar	8	0.025	3273	10	3283	2.298	2.323
5	Chirang	2	0.025	1327	10	1337	0.936	0.961
6	Darrang	4	0.025	1781	10	1791	1.254	1.279
7	Dhemaji	5	0.025	2354	10	2364	1.655	1.680
8	Dhubri	5	0.025	3718	10	3728	2.610	2.635
9	South Salmara	2	0.025	874	10	884	0.619	0.644
10	Dibrugarh	6	0.025	2274	10	2284	1.599	1.624
11	Dima Hasao	3	0.025	1071	10	1081	0.757	0.782
12	Goalpara	5	0.025	2584	10	2594	1.816	1.841
13	Golaghat	5	0.025	2194	10	2204	1.543	1.568
14	Hailakandi	4	0.025	3229	10	3239	2.267	2.292
15	Jorhat	6	0.025	2049	10	2059	1.441	1.466
16	Majuli	1	0.025	943	10	953	0.667	0.692
17	Kamrup Metro	5	0.025	1150	10	1160	0.812	0.837
18	Kamrup Rural	12	0.025	3257	10	3267	2.287	2.312
19	KarbiAnglong	4	0.025	1808	10	1818	1.273	1.298
20	West KarbiAnglong	4	0.025	990	10	1000	0.700	0.725
21	Karimganj	5	0.025	3178	10	3188	2.232	2.257
22	Kokrajhar	4	0.025	2795	10	2805	1.964	1.989

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23	Lakhimpur	6	0.025	3415	10	3425	2.398	2.423
24	Morigaon	3	0.025	1963	10	1973	1.381	1.406
25	Nagaon	9	0.025	3312	10	3322	2.325	2.350
26	Hojai	2	0.025	1260	10	1270	0.889	0.914
27	Nalbari	4	0.025	1856	10	1866	1.306	1.331
28	Sivasagar	6	0.025	1784	10	1794	1.256	1.281
29	Charaideo	2	0.025	940	10	950	0.665	0.690
30	Sonitpur	4	0.025	1709	10	1719	1.203	1.228
31	Biswanath	3	0.025	1464	10	1474	1.032	1.057
32	Tinsukia	4	0.025	1902	10	1912	1.338	1.363
33	Udalguri	3	0.025	1837	10	1847	1.293	1.318
Total		153	0.825	70078	330	70408	49.286	50.11

FMR Code-3.1.1.1.6	
Activity: ASHA Incentive for National Deworming Day(NDD)	
Justification: ASHA Incentive for National Deworming Day for mobilising out of school children and ensuring albendazole administration @Rs-100/ per ASHA per round for two rounds of NDD	
FMR Owner:	
State: Consultant, Nutrition/State Community Mobilizer	
District: District Community Mobilizer	
Fund Allotment(In Lakh):State: 0.00	District: 65.09

Fund Allotment NDD

SN	District	No of ASHA	Fund Allotted (L)
1	Baksa	950	1.900
2	Barpeta	1610	3.220
3	Bongaigaon	752	1.504
4	Cachar	1826	3.652
5	Chirang	742	1.484
6	Darrang	978	1.956
7	Dhemaji	746	1.492
8	Dhubri	1651	3.302
9	South Salmara	345	0.690
10	Dibrugarh	1299	2.598
11	Dima Hasao	238	0.476
12	Goalpara	1067	2.134
13	Golaghat	1057	2.114
14	Hailakandi	715	1.430
15	Jorhat	967	1.934
16	Majuli	298	0.596
17	Kamrup Metro	676	1.352
18	Kamrup Rural	1744	3.488
19	KarbiAnglong	739	1.478

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20	West KarbiAnglong	390	0.780
21	Karimganj	1235	2.470
22	Kokrajhar	1377	2.754
23	Lakhimpur	1308	2.616
24	Morigaon	948	1.896
25	Nagaon	1742	3.484
26	Hojai	701	1.402
27	Nalbari	775	1.550
28	Sivasagar	774	1.548
29	Charaideo	482	0.964
30	Sonitpur	1160	2.320
31	Biswanath	786	1.572
32	Tinsukia	1403	2.806
33	Udalguri	1065	2.130
Total		32546	65.09

N: B: The Operational Guidelines/Reporting Formats/Supply Chain mechanism for conducting will be issued prior each round as per Gol instructions amid Covid-19, otherwise will remain unchanged from previous FY. Round wise dates of implementation will be intimated later based on Gol instructions and albendazole stock availability.

FMR Code- 12.2.6	
Activity: Printing of IEC materials and reporting formats for National Deworming Day	
Justification: Printing of below mentioned IEC materials and reporting formats-	
1. Printing of 2 poster per School/AWC/SC per round @Rs-5/ per poster	
2. Printing of 1 banner per SC per round for display in prominent place@Rs-150/ per banner.	
3. Printing of 1 reporting format per School/AWC/SC/ASHA per round @Rs-2/ per format.	
4. Miking/ group counselling, street play@ Rs 5000/- per block per round	
FMR Owner:	
State: Consultant, Nutrition/State Program Manager	
District: District Media Expert	
Fund Allotment(In Lakh):State: 0.00	District: 64.13

Fund Allotment

SN	District	Budget for 2 Rounds of NDD (L)
1	Baksa	2.387
2	Barpeta	3.207
3	Bongaigaon	1.421
4	Cachar	3.478
5	Chirang	1.051
6	Darrang	1.901
7	Dhemaji	1.786

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8	Dhubri	2.761
9	South Salmara	0.602
10	Dibrugarh	2.473
11	Dima Hasao	0.960
12	Goalpara	2.262
13	Golaghat	3.262
14	Hailakandi	1.880
15	Jorhat	2.027
16	Majuli	0.448
17	Kamrup Metro	1.213
18	Kamrup Rural	3.734
19	KarbiAnglong	1.937
20	West KarbiAnglong	0.815
21	Karimganj	2.434
22	Kokrajhar	2.056
23	Lakhimpur	2.713
24	Morigaon	1.716
25	Nagaon	3.559
26	Hojai	1.297
27	Nalbari	1.638
28	Sivasagar	1.817
29	Charaideo	0.855
30	Sonitpur	1.408
31	Biswanath	1.490
32	Tinsukia	1.935
33	Udalguri	1.606
Total		64.13

Steganika

Intensified Diarrhoea Control Fortnight(IDCF)

The Ministry of Health and Family Welfare regularly implements the Intensified Diarrhoea Control Fortnight (IDCF) in order to intensify efforts to reduce child deaths due to diarrhoea. It aims to create mass awareness about the most effective and low-cost diarrhoea treatment of a combination of Oral Rehydration Salt (ORS) solution and Zinc tablets. Almost all the deaths due to diarrhoea can be averted by preventing and treating dehydration by use of ORS (Oral Rehydration Solution), administration of Zinc tablets along with adequate nutritional intake by the child. Diarrhoea can be prevented with safe drinking water, sanitation, breastfeeding /appropriate nutrition and hand-washing.

ASHA worker would undertake distribution of ORS packets to households with under-five children in her village. ORS-Zinc Corners will be set-up at health care facilities and non-health facilities such as Schools and Anganwadi centres. Frontline workers will hold demonstration of ORS preparation, along with counselling on feeding during diarrhoea and hygiene and sanitation.

Objectives of IDCF:

- ✚ To ensure high coverage of ORS and Zinc use rate in children with diarrhoea
- ✚ Inculcation of appropriate behaviour in care givers for diarrhoea prevention and management
- ✚ Special focus on high priority area and vulnerable community
- ✚ Improvement of awareness on use of ORS and Zinc for child hood diarrhoea
- ✚ Strategies:
 - ✚ Improved availability and use of ORS and Zinc at the community
 - ✚ Facility level strengthening to manage cases of dehydration
 - ✚ Enhanced advocacy and communication on prevention and control of diarrhoea through IEC campaign

Target Beneficiaries:

- ✚ All U5 children of each household
- ✚ U5 children suffering from diarrhoea
- ✚ Secondary
- ✚ Household members like mothers/ Caregivers
- ✚ School Teachers/School going children
- ✚ PRI members
- ✚ Health and ICDS functionaries
- ✚ Private caregivers

Pre campaign Planning

- ✚ Activation of steering committees at state & district level and conduction of the meeting.
- ✚ Assessment of availability of ORS and Zinc at all levels of the district
- ✚ Stock assessment and indent for ORS and Zinc to the state.
- ✚ District drug distribution plan of ORS and Zinc.
- ✚ Planning of orientation at district and block.
- ✚ IEC plan based on guidelines for Launching and community awareness activity
- ✚ Plan of printing of IEC materials and other requisite formats

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Priority Area:

- ✚ Areas with vacant sub-centres: No auxiliary nurse midwife (ANM) posted for more than three months
- ✚ Villages/areas with ANMs on long leave or other similar reasons.
- ✚ High risk areas (HRAs) with populations living in areas such as:
 - Urban slums with migration
 - Underserved and hard to reach populations (forested and tribal populations, hilly areas etc.).
- ✚ Other migrant settlements (fisherman villages, riverine areas with shifting populations)
- ✚ Nomadic sites/Brick kilns
- ✚ Construction sites
- ✚ Orphanage/ Street children
- ✚ Areas known for or with diarrhoeal outbreaks, in last two years.
- ✚ Areas known for poor sanitation and water supply.
- ✚ Small villages, hamlets
- ✚ Tea garden population

N: B: The guidelines for conducting the community and facility level activity wise implementation will be remain same as previous years unless special guidelines issued from GoI/State amid Covid-19 pandemic.

ACTIVITIES UNDER IDCF

FMR Code- 9.5.2.2	
Activity: Orientation/Planning/Launch on IDCF at state or district.	
Justification: Prior implementation, district and block level concerned officials need to be oriented for re-orientation of guidelines and orientation of any new guidelines. Two activities on IDCF budgeted under this FMR A. Orientation workshop at district level @ 2500/per district. B. Orientation workshop at block level @ 50/ per participants (ASHA/ ASHA supervisor/ ANM/ Urban ASHA/ AYUSH MOs/1 RBSK Mos	
FMR Owner: State: Consultant, Nutrition/State Community Mobilizer District: District Community Mobilizer	
Fund Allotment(In Lakh):State: 2.36	District: 22.40

Fund Allotment

SN	District	No. of Block	No. of Health Facility	No. of ASHAs	No. of ASHA Supervisors	No. of ANM	Budget for District level Orientation (Rs)	No. of Block Level Participants	Budget for Block level Orientation (In Lakh)	Total Budget per district (In lakh)
1	Baksa	6	44	950	95	157	2500	1320	0.660	0.685
2	Barpeta	7	62	1610	145	264	2500	2178	1.089	1.114
3	Bongaigaon	4	34	752	67	108	2500	1015	0.508	0.533
4	Cachar	8	40	1826	152	270	2500	2368	1.184	1.209
5	Chirang	2	29	742	54	87	2500	951	0.476	0.501
6	Darrang	4	41	978	71	159	2500	1310	0.655	0.680

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7	Dhemaji	5	29	746	64	98	2500	991	0.496	0.521
8	Dhubri	5	43	1651	119	183	2500	2064	1.032	1.057
9	South Salmara	2	11	345	6	55	2500	438	0.219	0.244
10	Dibrugarh	6	41	1299	95	234	2500	1740	0.870	0.895
11	Dima Hasao	3	16	238	20	76	2500	381	0.191	0.216
12	Goalpara	5	46	1067	93	155	2500	1432	0.716	0.741
13	Golaghat	5	49	1057	95	144	2500	1419	0.710	0.735
14	Hailakandi	4	18	715	64	107	2500	942	0.471	0.496
15	Jorhat	6	41	967	83	111	2500	1273	0.637	0.662
16	Majuli	1	12	298	24	34	2500	385	0.193	0.218
17	Kamrup Metro	5	50	676	17	51	2500	869	0.435	0.460
18	Kamrup Rural	12	80	1744	152	279	2500	2395	1.198	1.223
19	KarbiAnglong	4	31	739	62	104	2500	987	0.494	0.519
20	West KarbiAnglong	4	21	390	33	50	2500	535	0.268	0.293
21	Karimganj	5	38	1235	97	230	2500	1663	0.832	0.857
22	Kokrajhar	4	50	1377	127	162	2500	1786	0.893	0.918
23	Lakhimpur	6	39	1308	99	156	2500	1671	0.836	0.861
24	Morigaon	3	41	948	79	122	2500	1246	0.623	0.648
25	Nagaon	9	85	1742	136	258	2500	2351	1.176	1.201
26	Hojai	2	12	701	59	94	2500	888	0.444	0.469
27	Nalbari	4	56	775	64	122	2500	1093	0.547	0.572
28	Sivasagar	6	33	774	68	143	2500	1081	0.541	0.566
29	Charaideo	2	20	482	42	77	2500	651	0.326	0.351
30	Sonitpur	4	38	1160	101	147	2500	1504	0.752	0.777
31	Biswanath	3	30	786	69	137	2500	1067	0.534	0.559
32	Tinsukia	4	31	1403	110	166	2500	1761	0.881	0.906
33	Udalguri	3	32	1065	99	150	2500	1393	0.697	0.722
Total		153	1243	32546	2661	4690	82500	43148	21.57	22.40

FMR Code-3.1.1.1.7

Activity: ASHA Incentive for IDCF for prophylactic distribution of ORS U5 children.

Justification: Each ASHA will get Rs 1/ per child for pre-positing of 1 ORS packet/per U5 Child at houses with U5 child/children in her area.

FMR Owner:

State: Consultant, Nutrition/State Community Mobilizer

District: District Community Mobilizer

Fund Allotment(In Lakh):State: 0.00

District: 36.36

Fund Allotment

SN	District	Total U5 Children	Budget for ASHA Incentive (L)
1	Baksa	90,925	0.91
2	Barpeta	1,96,197	1.96
3	Bongaigaon	80,088	0.80
4	Cachar	2,45,779	2.46

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5	Chirang	48,094	0.48
6	Darrang	1,08,234	1.08
7	Dhemaji	86,764	0.87
8	Dhubri	1,76,852	1.77
9	South Salmara	70,418	0.70
10	Dibrugarh	1,33,128	1.33
11	Dima Hasao	20,874	0.21
12	Goalpara	1,24,787	1.25
13	Golaghat	1,20,464	1.20
14	Hailakandi	1,13,650	1.14
15	Jorhat	91,006	0.91
16	Majuli	16,461	0.16
17	Kamrup Metro	1,23,802	1.24
18	Kamrup Rural	1,46,440	1.46
19	KarbiAnglong	75,482	0.75
20	West KarbiAnglong	33,753	0.34
21	Karimganj	1,78,491	1.78
22	Kokrajhar	97,451	0.97
23	Lakhimpur	1,32,568	1.33
24	Morigaon	1,26,799	1.27
25	Nagaon	2,55,181	2.55
26	Hojai	1,25,560	1.26
27	Nalbari	74,699	0.75
28	Sivasagar	67,167	0.67
29	Charaideo	44,486	0.44
30	Sonitpur	1,34,037	1.34
31	Biswanath	62,592	0.63
32	Tinsukia	1,46,743	1.47
33	Udalguri	86,645	0.87
Total		36,35,617	36.36

FMR Code- 12.2.7	
Activity: Printing of IEC materials and monitoring formats for IDCF	
Justification: Printing of below mentioned IEC materials and reporting formats-	
<ol style="list-style-type: none"> 1. Printing of 1 Banner for ORS & Zinc Corners per HIs (Size-3.5X5.5 feet) @Rs-280/ each 2. Printing of 1 Banner for ORS & Zinc Corners per SC (Size-2X3 feet) @Rs-124/ each 3. Printing of 10 reporting cum line list format per ASHAs@ Rs.1.5 per format 4. Printing of 6 Nos village planning formats per SC @Re.1.5 per format 5. Printing of 1 SC reporting format@ Rs-1.5 per format. 	
FMR Owner:	
State: Consultant, Nutrition/Consultant, Child Health/SME	
District: District Media Expert	
Fund Allotment(In Lakh):State: 4.26	District: 16.14

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Fund Allotment

SN	District	No. of	No.	No. of	Total
1	Baksa	44	157	950	0.526
2	Barpeta	62	264	1610	0.851
3	Bongaigaon	34	108	752	0.388
4	Cachar	40	270	1826	0.827
5	Chirang	29	87	742	0.338
6	Darrang	41	159	978	0.525
7	Dhemaji	29	98	746	0.356
8	Dhubri	43	183	1651	0.670
9	South Salmara	11	55	345	0.173
10	Dibrugarh	41	234	1299	0.693
11	Dima Hasao	16	76	238	0.206
12	Goalpara	46	155	1067	0.547
13	Golaghat	49	144	1057	0.537
14	Hailakandi	18	107	715	0.333
15	Jorhat	41	111	967	0.446
16	Majuli	12	34	298	0.135
17	Kamrup Metro	50	51	676	0.333
18	Kamrup Rural	80	279	1744	0.949
19	KarbiAnglong	31	104	739	0.371
20	West KarbiAnglong	21	50	390	0.202
21	Karimganj	38	230	1235	0.668
22	Kokrajhar	50	162	1377	0.617
23	Lakhimpur	39	156	1308	0.564
24	Morigaon	41	122	948	0.461
25	Nagaon	85	258	1742	0.930
26	Hojai	12	94	701	0.292
27	Nalbari	56	122	775	0.480
28	Sivasagar	33	143	774	0.445
29	Charaideo	20	77	482	0.256
30	Sonitpur	38	147	1160	0.524
31	Biswanath	30	137	786	0.428
32	Tinsukia	31	166	1403	0.570
33	Udalguri	32	150	1065	0.497
Total		1243	4690	32546	16.14

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