

# **District Operational Guidelines**

**FY-2021-2022**



## **NATIONAL URBAN HEALTH MISSION**

**National Urban Health Mission(NUHM),**  
**Assam**

## **Preface**

NUHM envisages to meet health care needs of the urban population with the focus on urban poor, by making available to them essential primary health care services and reducing their out of pocket expenses for treatment. This will be achieved by strengthening the existing health care service delivery system, targeting the people living in slums and converging with various schemes relating to wider determinants of health like drinking water, sanitation, school education, etc.

All the services delivered under the urban health delivery system through the Urban-PHCs and Urban-CHCs will be universal in nature, whereas the outreach services will be targeted to the target groups (slum dwellers and other vulnerable groups). Empowerment of community through awareness generation, whereby they are able to demand services from the Health System will be an important area of emphasis in the NUHM.

NUHM through the urban HWCs will specifically address the peculiarities of urban health needs through package of services, which constitutes non communicable diseases (NCDs) as a major proportion of the burden of disease. The primary health care system being envisaged under NUHM will screen, diagnose and refer the cases of chronic diseases to the secondary and tertiary level through a system of referral. A major thrust this year will also be on the family planning services like the IUCD and injectable contraceptive which will go a long way in curbing the uncontrolled population growth and reduce the fertility rates. Vector control, environmental health, water, sanitation, housing, all require a public health thrust.

Certain new activities will be started this year. With the implementation of Ayushman Bharat scheme, all the UPHCs have been converted into HWC. Wellness and Yoga Activities under HWC have been started using experience Yoga trainers once in a week in all the Urban Health and Wellness Centres. To augment the HWC activities ASHA incentives has been released for filling up the CBAC forms and mobilisation for screening of NCDs. Funds are also released for incentives of ASHA for the follow up of NCD cases. Team based incentives has been approved for ASHA, ANM and UPHC team for 53 UPHCs. To increase the package of services under HWC, injectable contraceptive (ANTARA) has been introduced to boost the family planning services in the Urban areas. Incentives for Clients and motivators for injectable contraceptives has been released. To increase the spectrum of services by the Urban Health institutes, Specialist evening OPDs has been started in may of the UPHCs. These OPDs will deal with specialities like Dental, Dermatology, Ophthalmology and Psychiatry. There will also be the implementation of the National programmes like National Vector Borne Disease Control Programme (NVBDCP), Revised National Tuberculosis Control Programme (RNTCP), Integrated Disease Surveillance Project (IDSP) and National Leprosy Elimination

Programme (NLEP). To equip the health care providers with skills to manage and refer cases ,trainings will be done on Mental Health and ENT. This will expand the services under Comprehensive Primary Health Care in the UPHCs. To augment eye care in the urban community, vision centres will be set up in six UPHCs viz. Satgaon, Garigaon, Kharguli, Lokhra, Ferryghat and Goalpara UPHC.

In order to protect the Rag pickers from getting different infectious diseases, a new initiative will be taken up to distribute certain protective materials under the innovation named “**SURAKSHA**” which will be piloted in Dhubri district to start with. Moreover to improve the ambience and to conduct UHNDs in organised way, 75 no. of canopies will be distributed to the UPHCs under Kamrup Metro district.

The standard of services in the urban areas will be ensured through proper training of the service provider so that the various facility based and the community based outreach programmes like the UHNDs, special outreach camps, other health camps render highest quality of service.

**BUDGET SUMMARY SHEET, FY 2021-22  
NATIONAL URBAN HEALTH MISSION(NUHM), ASSAM**

Sl. No	FMR Code	Activity	ROP 2021-22 Approval (Rs. In Lakhs)	Allocation at State HQ (Rs in Lakhs)	Allocation for Districts (Rs in Lakhs)	Official responsible at State level
<b>U.1 Service Delivery- Facility based (Approved amount Rs. 97.22 Lakhs )</b>						
1	U.1.1.1.2	Support for implementation of NVBDCP	10.00	10.00	0	SPO, NVBDCP/ Consultant NUHM
2	U.1.2.2	Family Planning	20.02	0	20.02	SPO, NUHM
3	U.1.3.1	Operational expenses of UPHCs(excluding rent)	64.80	0	64.80	Accounts Manager, NUHM
4	U.1.3.4	Others (Operational expenses of UCHCs)	2.40	0	2.40	Accounts Manager NUHM
<b>U.2 Service Delivery- Community based (Approved amount Rs. 60.74 Lakhs)</b>						
5	U.2.2.1	Mobility support for ANM/LHV	11.700	0	11.700	Consultant, NUHM
6	U.2.3.1	UHNDs	8.850	0	8.850	Partha Saikia, SCM
7	U.2.3.2	Special Outreach camps in slums and similar areas	9.100	0	9.100	Consultant, NUHM
8	U.2.3.6	Community based service delivery by AB-H&WCs	29.04	0	29.040	SPO, NCD/ Consultant NUHM
9	U.2.3.7	Others(Health check-up of sanitary workers)	2.050	0	2.050	SPO,NUHM
<b>U.3 Community Interventions (Approved amount Rs. 403.82 Lakhs )</b>						
10	U.3.1.1.1	Incentives for routine activities	290.880	0	290.880	Consultant, NUHM/ SCM
11	U.3.1.1.2	ASHA incentives for Ayushman Bharat Health & Wellness Centres (H&WC)	66.290	0	66.290	SPO,NUHM/ SPO,NCD Consultant, NUHM
12	U.3.1.3.1	Supportive provisions(Uniform/ awards etc	8.480	8.480	0	SCM, NHM
13	U.3.2.1.1	Training of MAS	38.170	0	38.170	Consultant, NUHM/ SCM
<b>U.4 Untied grants(Approved amount Rs. 118.15 Lakhs )</b>						

14	U.4.1.1.1	Government Building	47.250	0	47.250	Consultant(P)/ Finance Manager, NHM
15	U.4.1.1.2	Rented Building	28.000	0	28.000	Consultant(P)/ Finance Manager, NHM
16	U.4.1.2	Untied grants to UCHCs	10.000	0	10.000	Consultant(P)/ Finance Manager ,NHM
17	U.4.1.4	Untied grants to MAS	32.900	0	32.900	AM, NUHM
<b>U.5 Infrastructure(Approved amount Rs. 174.78 Lakhs )</b>						
18	U.5.1.1	UPHC(Renovation of Laboratories for DMC)	1.600	1.600	0	Daisy Ahmed, AE
19	U.5.1.4	Rent for UPHC	51.740	0	51.740	AM,NUHM
20	U.5.3.1	Infrastructure strengthening of UPHC to H&WC	121.440	121.440	0	Daisy Ahmed, AE
<b>U.6 Procurement(Approved amount Rs. 439.13 Lakhs )</b>						
21	U.6.1.1	Equipment for AB-HWCs	26.120	26.120	0	Sristi Sut, BME
22	U.6.1.7.1	Provision of Free diagnostics at Ayushman Bharat Health & Wellness Centres	51.000	0	51.000	SPO, NUHM/ Mamtaz Mazumdar, PE, Free Diagnostics
23	U.6.2.1.1	Procurement of Drugs for AB-H&WCs	309.000	309.000	0	Sanjeeb Das, DSM
24	U.6.2.4.1	Supplies for Ayushman Bharat Health & Wellness Centres(AB-H&WC)	53.01	53.010	0	RKSK, Consultant/Consult ant, NUHM
<b>U.8 Service Delivery- Human Resources(Approved amount Rs. 1439.54 Lakhs )</b>						
25	U.8.1.1.1	UPHC(ANMs Salary)	361.440	0	361.440	HRD, Consultant
26	U.8.1.2.1	UPHC(Staff nurses Salary)	265.810	0	265.810	HRD, Consultant
27	U.8.1.3.1	UPHC(Lab. Techs Salary)	101.050	0	101.050	HRD, Consultant
28	U.8.1.4.1	UPHC(Pharmacists Salary)	108.200	0	108.200	HRD, Consultant
29	U.8.1.8.1.1	MO, Full time (Salary)	226.960	0	226.960	HRD, Consultant
30	U.8.1.8.1.2	MO, Part time (Salary)	74.640	0	74.640	HRD, Consultant
31	U.8.1.10.1	Other Support Staff (Salary)	65.270	0	65.270	HRD, Consultant
32	U.8.1.10.2	DEO cum Accountant(Salary)	100.990	0	100.990	HRD, Consultant
33	U.8.2	Annual increment for all the existing positions	26.630	26.630	0	HRD, Consultant
34	U.8.3	EPF(Employer's contribution) @13.36% for salaries <=Rs. 15,000 pm	77.220	77.220	0	HRD, Consultant

35	U.8.4.1	Team based incentives for Ayushman Bharat Health & Wellness Centers(H&WC)	31.330	31.330	0	SPO, NCD/ Consultant NUHM
<b>U.9 Training &amp; Capacity Building(Approved amount Rs. 61.63 Lakhs )</b>						
36	U.9.2.7.1	Training of MO and Staff Nurse for H&WC	10.470	10.470	0	SPO, NUHM
37	U.9.2.7.2	Multi-skilling of ASHA for H&WC	38.67	0	38.67	Consultant, NUHM
38	U.9.5.7.3	Multi-skilling of MPW for H&WC	5.43	5.43	0	SPO, NUHM
39	U.9.2.1.3	Any Other(ULB Members and DUHC/ Accountant Cum Sect. Staff)	7.07	2.966	4.104	Consultant, NUHM
<b>U.11 IEC/BCC(Approved amount Rs. 76.79 Lakhs )</b>						
40	U.11.5	IEC activities for Health & Wellness centre(H&WC)	76.790	67.900	8.890	SME/ Consultant, NUHM
<b>U.12 Printing(Approved amount Rs. 9.09 Lakhs )</b>						
41	U.12.2	Printing activities for H&WC	9.090	9.090	0	SPM/ Consultant, NUHM
<b>U.13 Quality Assurance(Approved amount Rs. 24.59 Lakhs )</b>						
42	U.13.1.1	Quality Assurance Assessments(State & National)	10.000	10.000	0	Consultant, Quality Assurance
43	U.13.1.3	Quality Assurance incentives	2.000	2.000	0	Consultant, Quality Assurance
44	U.13.1.4	Quality Assurance Implementation(for traversing gaps)	3.280	0	3.280	Consultant, Quality Assurance/ Consultant, NUHM
45	U.13.2.1	Kayakalp Awards	8.000	8.000	0	Consultant, Quality Assurance
46	U.13.2.3	Support for implementation of Kayakalp	1.310	0	1.310	Consultant, Quality Assurance
<b>U.16 Programme Management(Approved amount Rs. 90.59 Lakhs )</b>						
47	U.16.1.2.1	QA committees at city level (meetings, workshops etc)	1.100	0	1.100	Consultant, Quality Assurance/ Consultant, NUHM
48	U.16.1.3.2	Mobility support for SPMU	3.600	3.600	0	Pranjal Borah AM, NUHM
49	U.16.1.3.3	Mobility support for DPMU	18.300	0	18.300	Pranjal Borah AM, NUHM

50	U.16.1.4.2	Administrative expenses (including Review meetings, workshops etc) for SPMU	<b>3.000</b>	3.000	0	Pranjal Borah AM, NUHM
51	U.16.1.4.3	Administrative expenses (including Review meetings, workshops etc) for DPMU	<b>4.500</b>	1.500	3.000	Pranjal Borah AM, NUHM
52	U.16.4.1.1	Human Resource (SPMU staff salary)	<b>13.17</b>	13.17	0	HRD, Consultant
53	U.16.4.2.1	Human Resource (DPMU staff salary)	<b>45.17</b>	0	45.17	HRD, Consultant
54	U.16.4.4	PM HR Increment	<b>1.75</b>	1.75	0	HRD, Consultant
<b>U. 18 Innovations (Approved amount Rs. 5.39 Lakhs)</b>						
55	U. 18.1	"SURAKSHA"/ "Canopies"/ "APONAR POCHONDO"	<b>5.39</b>	0	5.39	Consultant, NUHM
<b>TOTAL</b>			<b>3001.46</b>	<b>803.696</b>	<b>2197.764</b>	

## **Activity: Family Planning (ASHA incentives for injectable contraceptive)**

### **FMR Code: U.1.2.2**

Activity owner

- At State level – Dr. Manash Katakya, SPO, NUHM
- At District level – District Urban Health Coordinator, NUHM/ DFPC

ASHA incentives for injectable contraceptive (Antara)

In the district Rs 100.00 will be provided per dose of Inj MPA the ASHA for accompanying the client to the health facility and also ensuring follow up. The service provider will counsel the beneficiary about the follow up visit and ASHA will ensure the next visit. The Antara injection needs to be administered to the clients every 3 months. ASHAs need to motivate the clients by counselling them on the effects of the injection. Proper counselling will reduce the loss to follow up of the clients for subsequent doses.

### **District wise budget break-up**

Sl. No	Name of District	ASHA incentive dose wise(Antara)	Unit cost per dose(@ Rs)	Total Amount (In Rs.)
1	Cachar	350	100	35000
2	Dhubri	393		39300
3	Dibrugarh	1050		105000
4	Goalpara	151		15100
5	Jorhat	754		75400
6	Kamrup Metro	3781		378100
7	Karbi Anglong	261		26100
8	Karimganj	353		35300
9	Lakhimpur	327		32700
10	Nagaon	826		82600
11	Sivsagar	456		45600
12	Sonitpur	350		35000
13	Tinsukia	958		95800
<b>TOTAL</b>		<b>10010</b>		<b>1001000</b>

## **Activity: Family Planning (Injectable MPA incentive for beneficiaries)**

### **FMR Code: U.1.2.2**

Activity owner

- At State level – Dr. Manash Katakya, SPO, NUHM
- At District level – District Urban Health Coordinator, NUHM/ DFPC

Incentives for beneficiaries for receiving injectable contraceptive (Antara)

The new Contraceptives programme -Injectable contraceptive (under Antara Program) and Centchroman (Chaya) has been rolled out up to Sub center level in one go. Counseling of clients is very essential and pertinent in MPA



inj. All providers have to be trained in the counseling part of MPA inj. The 1<sup>st</sup> dose of Inj MPA must be provided after thorough screening and counseling by a MPA trained medical officer. Subsequent doses may be offered by trained Ayush, SN/ANM. The client information has to be recorded in MPA register and all clients must be provided with MPA card. The follow up of clients is very critical for continuing the service. For each dose of Antara, the beneficiary will get an incentive of Rs. 100/-

Key Activities:

Following sets of activity are to ensure at districts level:

- 1) Identification and training of doctors, Staff Nurses and ANM.
- 2) Onsite and whole site orientation of staff on new contraceptives.
- 3) Commodity supply to these facilities with trained staff.
- 4) IEC and BCC activity by district IEC cell and ASHAs after orientation.
- 5) Service Provision for new contraceptive choices.
- 6) Post Training Follow up

**District wise budget break-up**

Sl. No	Name of District	Incentive for beneficiaries(Antara)	Unit cost per dose(@ Rs)	Total Amount(In Rs.)
1	Cachar	350	100	35000
2	Dhubri	393		39300
3	Dibrugarh	1050		105000
4	Goalpara	151		15100
5	Jorhat	754		75400
6	Kamrup Metro	3781		378100
7	Karbi Anglong	261		26100
8	Karimganj	353		35300
9	Lakhimpur	327		32700
10	Nagaon	826		82600
11	Sivsagar	456		45600
12	Sonitpur	350		35000
13	Tinsukia	958		95800
<b>TOTAL</b>		<b>10010</b>		<b>1001000</b>

**Activity: Operational Expenses of UPHCs (excluding rent)****FMR Code: U.1.3.1**

Activity owner

- At State level – Pranjal Borah, Accounts Manager, NUHM
- At District level – District Urban Health Coordinator, NUHM

Each UPHCs will be given lump sum of Rs. 10000/-per month for one year. Fund should be utilized for the payment of electricity bill, telephone bill, alternative power supply and stationery items etcfor smooth functioning of health institutions.

**Budget Details as follows:**

No. of Unit	Unit Cost (Rs)	Total Cost (In Rs.)	In lakh
54	120000	6480000.00	64.80

Sl. No.	Name of health institution	Remarks	District	Amount (Rs)
1	NATBOMA PHC	Govt	Kamrup Metro	4200000
2	SATGAON PHC	Govt		
3	KHARGHULI MPHIC	Govt		
4	ODALBAKRA MPHIC	Govt		
5	KHANAPARA SD	Govt		
6	CAPITAL SD	Govt		
7	WEST GHY SD	Govt		
8	EAST GHY SD	Govt		
9	GARIGAON SD	Govt		
10	BHETAPARA SD	Govt		
11	KAMAKHYA SD	Govt		
12	LOKHARA SD	Govt		
13	HENGRABARI MU	Govt		
14	ULUBARI UHC	Govt		
15	AMINGAON UPHC	Rented		
16	GARPANDU UPHC	Rented		
17	PANDU NATH UPHC	Rented		
18	FERRYGHAT UPHC	Rented		
19	GOTANAGAR UPHC	Govt		
20	FATASIL UPHC	Rented		
21	SERABHATI UPHC	Govt		
22	GANDHIBASTI UPHC	Rented		
23	MATHGHARIA UPHC	Rented		
24	BATAGHULI UPHC	Rented		
25	BIRKUCHI UPHC	Rented		
26	HATIGARH CHARIALI	Rented		
27	KAHILIPARA UPHC	Rented		
28	KOINADHARA UPHC	Rented		
29	NORTH GHY UPHC	Rented		

30	CHOONSALI UPHC	Rented		
31	BASISTHA MANDIR UPHC	Rented		
32	PANDU UPHC	Govt		
33	KRISHNANAGAR UPHC	Rented		
34	PIYALI PHUKAN NAGAR UPHC	Rented		
35	MEDICAL UNIT, ASSAM SECRETARIATE, DISPUR	Govt		
36	KAMPUR UPHC	Govt		
37	MAHKHULI UPHC	Rented	Nagaon	360000
38	DHING GATE, HOIBORGAON	Rented		
39	WOOD UPHC	Govt	Sivasagar	120000
40	SONARI UPHC	Govt	Charaido	120000
41	MISSIONPARA UPHC	Rented	Tinsukia	240000
42	MARGHERITA UPHC	Govt		
43	JORHAT UPHC	Govt	Jorhat	240000
44	MARIYONI UPHC	Rented		
46	DIBRUGARH UPHC	Govt	Dibrugarh	240000
47	DULIAJAN UPHC	Govt		
48	BHAWLAGURI UPHC	Rented	Bongaigaon	120000
49	SILCHAR UPHC	Govt	Cachar	120000
50	DHUBRI UPHC	Rented	Dhubri	120000
51	KARIMGANJ UPHC	Rented	Karimganj	120000
52	JAHAJGHAT UPHC	Rented	Sonitpur	120000
53	CHAPORIGAON UPHC	Rented	Lakhimpur	120000
54	GOALPARA UPHC	Govt	Goalpara	120000
55	DIPHU UPHC	Rented	Karbi Anglong	120000
<b>Total</b>				<b>64,80,000/-</b>

**Activity: Others (Operational Expenses of UCHC -excluding rent).**

**FMR Code: U.1.3.4**

Activity owner

- At State level – Pranjal Borah, Accounts Manager, NUHM
- At District level – District Urban Health Coordinator, NUHM

2 nos. of UCHCs will be provided Rs.10000/- per month for one year. Fund should be utilized for the payment of electricity bill, telephone bill, alternative power supply, stationery items etc.

**Budget Details as follows:**

No. of Unit	Unit Cost(Rs)		Total Cost (In Rs.)	In lakh
Dhirenpara CHC	120000	Kamrup Metro	2,40,000	2.40
Pandu CHC	120000			

## **Activity:-Mobility support for ANM/LHV**

### **FMR Code U.2.2.1**

Activity owner

- At State level – Hingulas Khakhalary, Consultant, NUHM
- At District level – DAM/ District Urban Health Coordinator, NUHM

Mobility expenses for ANM @ Rs.500/- per month per ANM. Mobility expenses to ANM should be paid for organizing and strengthening of Urban Health & Nutrition sessions, Outreach sessions and for National health Programmes as per actual/ as per Action Plan and program attained and organised.

District wise fund break-up

<b>District</b>	<b>Amount</b>	<b>Quantity</b>	<b>Total</b>
Kamrup Metro	6000	100	600000
Nagaon	6000	15	90000
Sivasagar	6000	5	30000
Charaido	6000	5	30000
Tinsukia	6000	10	60000
Jorhat	6000	10	60000
Dibrugarh	6000	10	60000
Bongaigaon	6000	5	30000
Cachar	6000	5	30000
Dhubri	6000	5	30000
Karimganj	6000	5	30000
Sonitpur	6000	5	30000
Lakhimpur	6000	5	30000
Goalpara	6000	5	30000
Karbi Anglong	6000	5	30000
<b>Total</b>		<b>195</b>	<b>1170000</b>

## **Activity: Urban Health and Nutrition Day (UHND)**

### **FMR Code: U.2.3.1**

Activity owner

- At State level – Mr. Partha Saikia, State Community Mobiliser
- At District level – DUHC, NUHM/DCM

The Urban Health and Nutrition Day (UHND) is a platform for the community people to access services for a package of preventive, promotive and basic curative care.

### **Guidelines for implementing UHND camps:**

Service Package to be provided at UHND:

(a) MATERNAL HEALTH

Early registration of pregnancies.

- Provision of full complement of ANC services with quality and accuracy, namely
  - o Weight measurement
  - o Abdominal Check-up
  - o TT injections
  - o BP measurement
  - o Haemoglobin Measurement
  - o Filling up of MCP Card with accurate & complete information
  
- Referral for women with signs of complications during pregnancy and those needing emergency care.
- Referral for safe abortion to approved MTP centres.
- Counselling on:
  - o Education of girls.
  - o Age at marriage.
  - o Care during pregnancy.
  - o Danger signs during pregnancy.
  - o Birth preparedness.
  - o Importance of nutrition.
  - o Institutional delivery.
  - o Identification of referral transport.
  - o Availability of funds under the JSY for referral transport.
  - o Post-natal care. o Breastfeeding and complementary feeding.
  - o Care of a newborn.
  - o Contraception.
  
- Organizing group discussions on maternal deaths, if any that have occurred during the previous month in order to identify and analyse the possible causes.

(b) CHILD HEALTH For Infants up to 1 year:

Registration of new births.

- Counselling for care of newborns and feeding
- Complete routine immunization.
- Immunization for dropout children.
- First dose of Vitamin A along with measles vaccine.
- Weighing

For Children aged 1-3 years:

- Booster dose of DPT/OPV.

- Second to fifth dose of Vitamin A.
- Tablet IFA - (small) to children with clinical anaemia.
- Weighing.
- Provision of supplementary food for grades of mild malnutrition and referral for cases of severe malnutrition.

For all children below 5 years:

- Tracking and vaccination of missed children by ASHA and AWW.
- Case management of those suffering from diarrhoea and Acute Respiratory Infections.
- Counselling to all mothers on home management and where to go in even of complications.
- Provide ORS packets.
- Counselling on nutrition supplementation and balanced diet.
- Counselling on and management of worm infestations.

#### (c) FAMILY PLANNING

Information on use of contraceptives.

Distribution - provision of contraceptive counselling and provision of non-clinic contraceptives such as condoms and OCPs.

Information on compensation for loss of wages resulting from sterilization and insurance scheme for family planning.

#### (d) NON COMMUNICABLE DISEASES (NCD) SCREENING

Persons aged more than 30 years to be screened for NCDs, viz. Diabetes Mellitus, Hypertension and Oral cancer.

Monitoring of Blood Pressure (BP), Random Blood Sugar (RBS) and oral visual examination (OVE) to be done by ANMs assisted by ASHA.

### REPRODUCTIVE TRACT INFECTIONS AND OTHER RELATED CONDITIONS

- Counselling on prevention of RTIs and STIs, including HIV/AIDS, and referral of cases for diagnosis and treatment.
- Counselling for peri-menopausal and post-menopausal problems
- Communication on causation, transmission and prevention of HIV/AIDS and distribution of condoms for dual protection.
- Referral for VCTC and PPTCT services to the appropriate institutions.

#### (d) HEALTH PROMOTION

- Importance of clean drinking water, safe water handling practices, use of long handleladle, and ways to keep the water clean at point-of-use, using chlorine tablets, boiling, water filters, etc.

- Education on Healthy food habits, hygienic and correct cooking practices, and hand washing.
- Testing of household salt sample for Iodine (using the testing kits supplied under NIDDCP programme)
- Avoidance of breeding sites for mosquitoes.
- Mobilization of community action for safe disposal of household refuse and garbage.
- Gender issues
- Communication activities for prevention of pre-natal sex selection, illegality of pre-natal sex selection, and special alert for one-daughter families.
- Communication on the Prevention of Violence against Women and Children, Domestic Violence Act, 2006.
- Age at marriage, especially the importance of appropriate age at marriage for girls.
- Issues of Alcohol and drug abuse, tobacco and gender violence
- Nutrition issues
- Focus on adolescent pregnant women and infants aged 6 months to 2 years.
- Checking for anaemia, especially in adolescent girls and pregnant women; checking, advising, and referring.
- Checking, advising and referring for other deficiency disorders (Vitamin-A, Iodine deficiency, Protein Calorie Malnutrition, etc.)
- Weighing of infants and children.
- Supply of iron supplements, vitamins, and micronutrients
- A discussion about and review of the AWC's daily activities at the centre, supplementary nutrition services being provided for children and pregnant and lactating mothers, and growth charts being recorded at AWC.
- Sanitation issues
- Identification of space for community toilets.
- Guidance on where to go and who to approach for availing of subsidy for those eligible to get the same under the Jawaharlal Nehru National Urban Renewal Mission (JNNURM).

**Frequency:** Once in a month at a fixed place and fixed date/day. (1 UHND per ANM per month)

**Session site:** Micro plan to be prepared by the ANM with the help of AWW/ MAS etc and sessions will be conducted as per micro plan.

**Publicity:** 1. Publicity to be made for dates, place prior to the session.  
2. Prominent display on available services and other strategic points in front of Aganwadi Centre.

**Accountability:** The ANMs and Urban ASHAs of the operational area will be jointly responsible for organizing the event.

**Cost per session site:** A lump sum amount of Rs. 250/- is proposed for organizing each UHND session. The expenditure may be incurred in-

Refreshment, Contingency Event management cost like organizing event like quiz, story writing, drawing, mass meeting, day celebration on maternal health, child health, Adolescent health, safe water treatment, sanitation etc.

UHND Sites to be fixed as per beneficiary load and micro plan prepared by the ANM. All the Urban ASHAs and ANMs to have designated area of service. Total no. of 3540 UHNDs at 988 sites to be covered @ Rs.250/-.

The session site wise budget break-up for each district is as follows:-

Sl. No.	District	Quantity	Total (Rs)
1	Kamrup Metro	1982	495500
2	Nagaon	246	61500
3	Sivasagar	82	20500
4	Charaido	82	20500
5	Tinsukia	164	41000
6	Jorhat	164	41000
7	Dibrugarh	164	41000
8	Bongaigaon	82	20500
9	Cachar	82	20500
10	Dhubri	82	20500
11	Karimganj	82	20500
12	Sonitpur	82	20500
13	Lakhimpur	82	20500
14	Goalpara	82	20500
15	Karbi Anglong	82	20500
	<b>Total</b>	<b>3540</b>	<b>885000</b>

**Urban Health and Nutrition Day Monitoring format:**

A. Whether ANM provides following services during a UHND?

- 1) Routine immunization
- 2) Antenatal care ( essential diagnostics + counselling)
- 3) Family planning services and counselling
- 4) Post natal care ( essential diagnostics+ counselling)
- 5) Nutrition and health promotion and growth monitoring
- 6) Is Due list for Routine Immunization, ANC,PNC available with ASHA/ANM
- 7) Micro plan
- 8) Growth monitoring in MCP card

B. Are high risk pregnancies identified and separately line-listed at the health facility?

C. Does the ANM function as Treatment Supporter (DOT Provider)?

D. Does she refer case of presumptive TB to nearest microscopy centre for diagnosis?

E. Does she provide IEC and community awareness regarding TB symptoms and availability of free services?



F. Status of Population enumeration and CBAC form.

G. Have ASHAs mobilized individuals of 30 years and age above for NCD screening at SHC / SHC- HWC

H. Did the PW receive all services under Antenatal care?(ANC+1 USG+ Diagnostics, IFA, Calcium, Deworming, counselling etc. according to gestational age) under Antenatal care?

I. Is the PW counselled for Post-partum FP choices including PPIUCD by ASHA/ANM during ANC?

J. Counselling for healthy life style (from ASHAs or ANMs)

**K. Availability of essential commodities**

-

a	Pregnancy testing kit (Nischay kit)	Y/N	h	MBI kit to test iodine level in salt.	Y/N
b	COC (Mala N)	Y/N	l	ORS and Zinc	Y/N
c	Centchroman (CHHAYA)	Y/N	J	HBNC Kit (Newborn weighing Scale, Digital Thermometer, Baby Blanket & Stopwatch)	Y/N
d	ECP (EZY PILL)	Y/N	K	Sanitary napkins	Y/N
e	Condoms (NIRODH)	Y/N	l	Paracetamol	Y/N
m	Cotrimoxazole (Syp& Tab.)	Y/N	n	Syrup Amoxicillin	Y/N
<b>f</b>		<b>Availability of IFA with ASHA</b>		<b>g</b>	
				<b>Availability of IFA at school/AWCs</b>	
I	6 month - 5yrs - IFA syrup (Bi-weekly)	Y/N	I	5-10yrs-Tab. IFA (Pink colored sugar coated) WIFS	Y/N
II	Pregnant women and Lactating mothers -Red IFA Tab	Y/N	II	10-19yrs - Tab. IFA (Blue colored - Enteric coated)	Y/N
Other commodities	Weighing scale-adult, child Examination table Bed screen/curtain Haemoglobin metres, Kits for urine examination Gloves				

	Slides
	Stethoscope and blood pressure instrument
	Measuring tape
	Foetoscope
	Vaccine carrier with ice packs
	AD syringes in sufficient quantity
	IEC material for communication and counselling
	Blank MCP card

**Urban Health and Nutrition Day performance indicator:**

In order to monitor the performance of the UHNDs few impact indicators have been prepared based on which the service delivery through the UHNDs can be assessed on the health outcome in the urban population.

Indicators:

- 1) % of PW Received TT injections
- 2) % of PW registered in 1<sup>st</sup> trimester
- 3) % of PW who completed 4ANCs
- 4) % of PW Received IFA tablets
- 5) % of PW and child Weighed
- 6) % of PW Blood pressure measured
- 7) % of PW Abdominal check-up done 26.3 32.3
- 8) % of PW Participated in group meetings/discussion on health issues
- 9) Number of recently delivered women who participated in VHND
- 10) % of children fully immunized
- 11) % of children completely immunized
- 12) Number of SAM children identified.
- 13) Number of EC protected.

## Activity: Special Outreach Camp in slums/ vulnerable areas

### FMR Code: U.2.3.2

Activity owner

- At State level – Hingulas Khakhalary, Consultant, NUHM
- At District level – District Urban Health Coordinator, NUHM

#### Guidelines for implementing Special Outreach camps:

	Urban Health & Nutrition Day (Monthly outreach sessions/UHNDs) S	Special Outreach Sessions
WHO: Population to be covered	Slum and vulnerable population (predominantly women and children) in the catchment areas of the UPHC. The already identified patients needing follow-up may be catered to by providing medicines.	Vulnerable groups; emphasis on the most disadvantaged and hardest to reach (migrant labourers, homeless, etc.) Target population for the specific services i.e. All women in a special outreach session being conducted for screening for breast/cervical cancer.
WHAT: Service Coverage	ANC, Immunisation, Health Education, Child Growth Monitoring, Nutrition Supplementation, Nutrition Counselling, education on Water Sanitation and Hygiene, Use of RDK, Drug Dispensing.	Health check-up/Specific services/set of services (for locally endemic diseases and population sub group with specific problems), screening and follow-up (for chronic and non-communicable diseases), basic laboratory investigations (using portable /disposable kits), and drug dispensing.
WHERE: Site of providing the Service	Anganwadi Centre (AWC) or any other community level structure in slum.	Space or structure at the community level in slum/ near vulnerable population (Community Centre, School which may be near Railway Station, railway tracks, city outskirts, Bus Stand, underpasses, outside place of worship, etc.).
BY WHOM:	ANM supported by team of ASHA, AWW, and MAS members.	Doctors/Specialists, Lab Tech, Pharmacist, physiotherapists, social workers. Supported by MO-UPHC, with ANM and ASHA, MAS members and community volunteers.
WHEN: Frequency	Monthly	Periodic (as per the local needs in community).

#### Budget breakup per camp:

Cost head	Amount per session (Rs.)
Doctors and Specialists (outsourced, for paying their fees)	3000
Other paramedical staff (like Pharmacist, Lab Technician, etc. for paying their fees/ incentive)	1500
Transportation costs	1000
Publicity	1000
<b>Per Special Outreach Camp/Session</b>	<b>6500</b>

The district breakup of camps is as follows-

Sl. No	Name of the District	No. of Camps	Remarks	Fund Amount (Rs)
1	Cachar	8	Per Quarter 2 Camp	52000
2	Dhubri	8	Per Quarter 2 Camp	52000
3	Dibrugarh	8	Per Quarter 2 Camp	52000
4	Goalpara	12	Per Quarter 3 Camp	78000
5	Kamrup Metro	48	Per Quarter 12 Camp	312000
6	Karbi Anglong	6	Per Quarter 1 Camp	39000
7	Sivsagar	4	Per Quarter 1 Camp	26000
8	Charaido	4	Per Quarter 1 Camp	26000
9	Jorhat	4	Per Quarter 1 Camp	26000
10	Bongaigaon	4	Per Quarter 1 Camp	26000
11	Nagaon	12	Per Quarter 3 Camp	78000
12	Lakhimpur	6	Per Quarter 1 Camp	39000
13	Sonitpur	4	Per Quarter 1 Camp	26000
14	Karimganj	4	Per Quarter 1 Camp	26000
15	Tinsukia	8	Per Quarter 2 Camp	52000
<b>Total</b>		<b>140</b>		<b>910000</b>

**Activity 1: Community based service delivery by AB-H&WC(Health and Wellness through Yoga trainer)**

**FMR Code: U.2.3.6**

Activity owner

- At State level – SPO,NCD/ Consultant NUHM
- At District level – District Urban Health Coordinator, NUHM/ DPO/DPC, NCD

**Type of activity:** Wellness activity / Yoga in Health & Wellness Centers once in a week with trained Yoga trainer.

Each UPHC-HWC must conduct 1 wellness / yoga activity every week. An amount of Rs. 500/per week- per UPHC-HWC is allotted in the RoP.

### Health centre wise budget break-up-

Sl.No	District	No. of UPHC	Payment for yoga and other wellness activity			
			Unit cost(Rs) /per week	No of Units Per week	Total no. of units in a year	Total Cost(Rs)
1	Bongaigaon	1	500	1	48	24000
2	Cachar	1			48	24000
3	Dibrugarh	2			96	48000
4	Dhubri	1			48	24000
5	Goalpara	1			48	24000
6	Jorhat	2			96	48000
7	Kamrup Metro	35			1680	840000
8	Karbi Anglong	1			48	24000
9	Karimganj	1			48	24000
10	Lakhimpur	1			48	24000
11	Nagaon	3			144	72000
12	Sibsagar	1			48	24000
13	Charaido	1			48	24000
14	Sonitpur	1			48	24000
15	Tinsukia	2			96	48000
TOTAL						1296000

### **Activity 2: Community based service delivery by AB-H&WCs (Specialist OPD services)**

#### **FMR Code: U.2.3.6**

Activity owner

- At State level – SPO, NUHM/ Consultant NUHM
- At District level – District Urban Health Coordinator, NUHM/ Accountant Cum Sect. Staff of UPHC.

In the urban context, the Urban Primary Health Centres, have been strengthened as HWCs to deliver Comprehensive Primary Health Care. All the key principles of HWCs will be applicable to PHCs in urban areas. Initial action for upgrading UPHCs to HWCs would require capacity building of staff and field functionaries in the expanded range of services. To extend the range of services Specialist OPD services are proposed to be introduced in selected UCHC/UPHC.

**Specialist OPD services:** The UPHC/UCHC will provide free consultation on specialist services as per the need. It is proposed to engage **Dermatology, Ophthalmology, Dental and Psychiatry OPD specialist** –one day in a week in **Dhirenpara FRU, Pandu FRU, Satgaon UPHC Lakhra UPHC, Dibrugarh UPHC, Dhing gate UPHC, Bhawlaguri UPHC, Dhubri UPHC, Mariyoni UPHC, Jahajghat UPHC, Goalpara UPHC, Serabhati UPHC, Sonari UPHC and Dhuliajan UPHC**. The Specialist OPD will be conducted one day in a week per speciality. The specialists will be contracted from other tertiary level hospital or private practitioners. This service can be extended more days based on the available of resources/need. Further, as per the availability of specialists, the designated day can be modified. The specialist will be available in the evening session(4pm to 7pm). The remuneration of the specialists will be paid on monthly basis by the respective UPHC through PFMS. The MO I/C, UPHC will certify the availability of the Specialists in the UPHC for payment of remuneration.

Fund break-up for health centre-

Sl. No.	Name of the UPHC	No. of OPDs to be conducted	Unit cost OPD/ for a day	Total Amount(In Rs.)
1	Satgaon UPHC	53	2166	114798
2	Lokhra UPHC	53	2166	114798
3	Serabhati UPHC	53	2166	114798
4	Dhirenpara UCHC	53	2166	114798
5	Pandu UCHC	53	2166	114798
6	Dibrugarh UPHC	53	2166	114798
7	Dhuliajan UPHC	53	2166	114798
8	Dhing gate UPHC	53	2166	114798
9	Bhawlaguri UPHC	53	2166	114798
10	Dhubri UPHC	53	2166	114798
11	Mariyoni UPHC	53	2166	114798
12	Jahajghat UPHC	53	2166	114798
13	Goalpara UPHC	53	2166	114798
14	Sonari UPHC	53	2166	114798

## Activity: Others (Health check-up of sanitary workers under GMC).

### FMR Code: U.2.3.7

#### Activity owner

- At State level – Dr. Manash Katakya, SPO, NUHM
- At District level – District Urban Health Coordinator, NUHM, Kamrup(M)

#### Implementation by: District (Kamrup Metro)

#### Guideline

For periodic health surveillance of sanitary workers to detect early signs of diseases, a periodic health check-up camp is to be done to minimize the risk of health hazards in Guwahati, Kamrup Metro district. The services to be provided are

1. Basic investigations,
2. NCD screening,
3. De-worming will be ensured besides treatment
4. referral and
5. Any other identified disease.

#### Work to be done by DUHC:-

- Venue to be fixed, Doctor & Specialist to be arranged along with team.
- List of the sanitation workers employed with the ULBs (including contractual) is to be carried during the camp along with a secondary list of sanitation workers who are self-employed or are in private employment. In order to track that service delivery is provided to the right beneficiaries and keep tracking of the drop outs or those who were not present during for the camp.
- Each worker must be linked through the Urban ASHA around the geographical area of the UPHC closest to his/her residence to follow up of treatment.
- Preventive care and referral services to be ensured.
- Availability of the drugs to be ensured.
- Physical performance and financial expenses to be documented and reported.

#### Budget break-up per camp as below:-

Total no of Sanitary Worker-950

No. of Zones in Kamrup Metro-4

Zone wise no of Sanitary workers will receive check-ups= 50/day (Considering the duty schedule of Sanitary Workers)

Total no of Camp =20 Nos.

Sl. No	Component	Amount per session/camp (Rs.)
1	Doctor & Specialist (for paying their fees)	3000.00

2	Other paramedical staff (like Pharmacist, Lab Technician, Nurse etc. for paying their fees)	1500.00
3	Working Lunch( @ Rs.250/ member for 5 members)	1250.00
4	Medicines, drugs and consumables (including consumables for rapid diagnostic kits)	3500.00
5	Transportation costs	1000.00
6	Publicity (Booked on IEC/BCC FMR Code: U.11.5).	
<b>Total amount for one check-up camp</b>		<b>10250.00</b>
<b>Grand total budget for 20 check-up camp</b>		<b>2,05,000.00</b>

### **Activity:- Incentives for routine activities**

#### **FMR Code: U.3.1.1.1**

Activity owner

- At State level – Partha Saikia, State Community Mobiliser/ Consultant, NUHM
- At District level – DCM/District Urban Health Coordinator, NUHM

#### **Guideline for payment of incentives for routine activities of ASHA:**

<b>FMR Code</b>	<b>SI No</b>	<b>Activity</b>	<b>Rate of Incentive</b>
U.3.1.1.1.	1	Mobilizing and attending Urban Health and Nutrition Day	Rs 200/-
	2	Convening and guiding monthly Urban Health Sanitation and Nutrition meeting	Rs 150/-
	3	Attending PHC Review Meeting	Rs 150/-
		a) Line listing of household done at beginning of the year and updated after every six months	Rs 500/- (Rs100x5)
		b) Maintaining Urban health register and supporting universal registration of births and deaths	



		c) Preparation of due list of children to be immunized updated on monthly basis	
		d) Preparation of list of ANC beneficiaries to be updated on monthly basis	
		e) Preparation of list of eligible couples updated on monthly basis	

**For activity no 1:** The ASHA will organize the UHND on the due date in her area. She will ensure proper cleanliness of the AWC before the scheduled date of the UHND. She will also prepare the due list of beneficiaries and ensure participation of the same on the day of UHND.

The ASHA Supervisor will ensure the proper arrangement of the UHND by the concerned ASHA and she will also verify the due list prepared by ASHA in coordination with the ANM and ensure participation during the day of UHND. She will certify in the prescribed format and forward it to the PHC accountant for payment. The amount should be transferred to the ASHA's account on the same day.

**For activity no 2:** The ASHA will fix the date of UHSNC meeting every month in consultation with the PRI member. She will prepare the agenda of the meeting on the basis of the need of the village. She will ensure the participation of the PRI member along with other members of the committee. The minutes and attendance sheet of the meeting convened should be maintained by the ASHA. The ASHA Supervisor will verify the minute and attendance sheet of the meeting and certify in the prescribed format and forward it to the PHC accountant for payment. The amount should be transferred to the ASHA's account on the same day.

**For activity no 3:** The ASHA should attend monthly meeting along with Dairy and HBNC Module. The ASHA Supervisor will maintain the attendance sheet and certify in the prescribed format and forward it to the PHC accountant for payment. The amount should be transferred to the ASHA's account on the same day.

**For activity no 4:**

- a) The ASHA will maintain the linelisting in the dairy provided to her. The ASHA Supervisor will verify the line listing done by her concerned ASHAs and ensure the same in coordination with the ANM and PRI member. After verification she will certify the same in the prescribed format and forward it to PHC accountant for payment.
- b) The ASHA will maintain the village health register on monthly basis and ensure registration of each case of birth and death. The ASHA Supervisor will verify the village health registers of her concerned ASHAs and ensure the same in coordination with the ANM and PRI member. She will also ensure the registration of birth and death case reported by ASHA. After verification she will certify the same in the prescribed format and forward it to PHC accountant for payment.
- c) The ASHA will prepare the due list of children up to 16 years of age and record it on monthly basis. The due list needs to be presented during VHND and ensure the vaccination as per the due list. The ASHA Supervisor will verify the due list prepared by her concerned ASHAs in coordination with the ANM. After verification she will certify the same in the prescribed format and forward it to PHC accountant for payment.

- d) The ASHA will prepare the list of beneficiaries (pregnant women) for the ANC to be provided. During VHND she will ensure that the due ANCs are provided and will also follow up of the missed ANCs so that it can be provided at SC. The ASHA Supervisor will verify the list of beneficiaries (pregnant women) prepared by her concerned ASHAs in coordination with the ANM. After verification she will certify the same in the prescribed format and forward it to PHC accountant for payment.
- e) The ASHA will prepare the list of eligible couple in her village. It also needs to be ensured that the list is updated every month. The ASHA Supervisor will verify the list of eligible couple prepared by her concerned ASHAs in coordination with the ANM and PRI member. After verification she will certify the same in the prescribed format and forward it to PHC accountant for payment.

**Financial:**

- a) On receipt of the claims form from ASHA supervisor the PHC account BAM will verify the same and the payment shall be made by DBT.
- b) Separate register to be maintained for the purpose and all financial guidelines to be follow.

District wise budget break-up:-

Sl.No.	District	No. of Urban ASHA	Amount(Rs)
1	Bongaigaon	52	1248000
2	Cachar	81	1944000
3	Dhubri	85	2040000
4	Dibrugarh	81	1944000
5	Goalpara	42	1008000
6	Jorhat	55	1320000
7	Kamrup Metro	465	11160000
8	Karbi Anglong	32	768000
9	Karimganj	30	720000
10	Lakhimpur	35	840000
11	Nagaon	60	1440000
12	Sivsagar	35	840000
13	Charaido	15	360000
14	Sonitpur	61	1464000
15	Biswanath	26	624000
16	Tinsukia	57	1368000
	<b>Total</b>	<b>1212</b>	<b>29088000</b>

## Activity 1: ASHA incentives for Ayushman Bharat Health & Wellness Centres (H&WC)

### FMR Code: U.3.1.1.2

Activity owner

- At State level – SPO,NCD/ Consultant NUHM
- At District level – District Urban Health Coordinator, NUHM/ DPO/DPC, NCD

**Guideline for the activity:** An amount of Rs. 26.52 Lakhs have been approved for paying incentives to ASHAs @Rs.10.00 for filling up the Community Based Assessment Checklist form and mobilization during the day of screening.

- ASHAs are to be paid incentive @ Rs. 10 for filling up each CBAC form and mobilization of the individual to the HWC for NCD screening.
- Verification to be done by the ANM and countersigned by the MO-I/c
- The monthly incentive claim to be submitted to the Accountant cum Sect. staff of the UPHC for verification and ASHA payment every month.

### District wise budget break-up

Sl. No	Name of District	ASHA Incentive for no. of CBAC form filling	Unit cost (In Rs)	Total Amount(In Rs.)
1	Bongaigaon	1345	10	13450
2	Cachar	9016		90160
3	Dhubri	10261		102610
4	Dibrugarh	27537		275370
5	Goalpara	4048		40480
6	Jorhat	19771		197710
7	Kamrup Metro	101891		1018910
8	Karbi Anglong	7390		73900
9	Karimganj	9203		92030
10	Lakhimpur	8593		85930
11	Nagaon	21203		212030
12	Sivsagar	12151		121510
13	Sonitpur	8962		89620
14	Tinsukia	23826		238260
<b>TOTAL</b>		<b>265197</b>		<b>2651970</b>

## Activity 2: ASHA incentives for Ayushman Bharat Health & Wellness Centres (H&WC)

### FMR Code: U.3.1.1.2

Activity owner

- At State level – SPO,NCD/ Consultant NUHM
- At District level – District Urban Health Coordinator, NUHM/ DPO/DPC, NCD

**Guideline for the activity:** An amount of Rs. 39.76 Lakhs have been approved for the state for paying incentives to ASHAS @ Rs. 50/- per patient every 6 months for initiation of treatment and treatment compliance of patients diagnosed with the 5 common NCDs.

- ASHAs are to be paid incentive @ Rs. 50 once every 6 months for follow up and uninterrupted treatment of patients diagnosed with Diabetes or hypertension or 3 common cancers (breast, cervix and oral cavity)
- Verification to be done by the ANM and countersigned by the MO i/c.
- The monthly incentive claim to be submitted to the Accountant cum Sect. staff of the UPHC for verification and ASHA payment every month.

### District wise budget break-up

Sl. No	Name of District	ASHA Incentive for follow-up of no. of NCD Patients	Unit cost (In Rs)	Total Amount(In Rs.)
1	Bongaigaon	202	100	20200
2	Cachar	1352		135200
3	Dhubri	1539		153900
4	Dibrugarh	4130		413000
5	Goalpara	607		60700
6	Jorhat	2965		296500
7	Kamrup Metro	15273		1527300
8	Karbi Anglong	1108		110800
9	Karimganj	1381		138100
10	Lakhimpur	1289		128900
11	Nagaon	3181		318100
12	Sivsagar	1823		182300
13	Sonitpur	1345		134500
14	Tinsukia	3574		357400
<b>TOTAL</b>		<b>39769</b>		<b>3976900</b>

**Activity: 2days capacity building workshop for 3245 MAS members will be trained in 14 districts.**

**FMR Code: U.3.2.1.1**

Activity owner

- At State level – Consultant, NUHM/SCM
- At District level – DUHC, NUHM/DCM

**Guideline on two day orientation of MAS Members**

In order to sensitize and strengthen the MAS members on Social Audit, NCD and Social mobilisation, 2 days non-residential capacity building training should be imparted to the MAS members. HWC / facility monitoring pictorial tool kit by VHSNC members (as developed by CP division of NHM) will be used. This is a community empowerment process, which will help the community members to ensure the proper functioning of Health facilities. Resource person for the training are DPO/DPC, NCD, DUHC, DCM and BCM.

**Agenda for MAS training**

Day 1		
Time	Topics	Facilitator
10.30 a.m. -11.00 a.m.	Welcome and Introduction	
11.00 a.m. -11.15 a.m.	Tea	
11.15 a.m. -12.15 p.m.	What is NCD, Why NCD is given so much importance, Types of NCD being covered	
12.15 p.m. -1.00 p.m.	Management of NCD and contribution of life style in managing the NCD load	
1.00 pm to 1.45 pm	Lunch	
1.45 p.m. – 4.30. p.m.	Role of MAS members to mobilise NCD patients, How to draw Health Plan for identified slums, Resource Mobilization for addressing the urban slum needs, documentation and record keeping, discussion among inter MAS groups and sharing of good practices	

10.00 a.m. -10.15 a.m.	Recap	
10.15 a.m. -10.30 a.m.	Tea	
10.30 a.m. -1.00 pm	Session on Social Audit - what is social audit, its components, process of social audit, role of MAS member, How to report findings of Social Audit	
1.00 pm – 1.45 pm.	Lunch	
1.45 pm – 3.00pm	Social Mobilisation and Referral System and role to be played by MAS members	
3.00 pm to 4.00 pm.	Evaluation of training and way forward	

### Training budget Break-up:

Budget details for 2 days capacity building workshop for 3340 MAS members					
SI No	Component	Unit cost	Unit	Duration	Total Amount
		(In Rs.)			(In Rs.)
1	TA to participants ( subject to actual )	200	30	2	12000
2	DA to Participants	100	30	2	6000
3	Honorarium for Resource Persons	300	3	2	1800
4	Training Material (Bag, Pad, Pen, Pencil, Highlighter etc.)	100	30	1	3000
5	Working lunch, snacks and Tea	150	33	2	9900
6	Venue hiring Charge	1000	1	2	2000
<b>A</b>	<b>Total amount for one batch (in Rs.)</b>				<b>34700</b>
	<b>Total amount for 2 days capacity building workshop for 110 Batches</b>				<b>3817000</b>

**No. of training to be organised by the District and budget breakup:**

Sl.No	District	No. of batches	Amount (Rs)
1	Bongaigaon	2	69400
2	Cachar	8	277600
3	Dibrugarh	10	347000
4	Dhubri	9	312300
5	Goalpara	10	347000
6	Jorhat	6	208200
7	Kamrup Metro	43	1492100
8	Karbi Anglong	6	208200
9	Karimganj	2	69400
10	Lakhimpur	2	69400
11	Nagaon	6	208200
12	Sibsagar	2	69400
13	Sonitpur	2	69400
14	Tinsukia	2	69400
	<b>Total</b>	<b>110</b>	<b>3817000</b>

## Untied Grants

### Activity:-Untied Grants to UPHCs in Government building.

#### FMR Code: U.4.1.1.1

Activity owner

- At State level – Consultant(P)/ Finance Manager
- At District level – DAM/District Urban Health Coordinator, NUHM

#### **Suggested areas where untied fund may be used:**

**Group-A: Hospital cleaning:** “Maximum” 30% fund of untied grant may be utilised (nothing beyond this ceiling will be allowed)

- 1) Cleaning up of the facility especially in emergency, Labour room, hospital laboratory, OPD, IPD wards and post-partum areas, cleaning and maintenance of the campus to ensure a pleasing appearance.
- 2) Outsourcing of non-clinical services, Computer Operator, Attendant/helper, driver of Ambulance only (if regular man in position are not available)

**Group –B Hospital Infrastructure:** Up to 30% fund of Untied Grant may be utilised

- 3) Minor repairs on building & furniture
- 4) Building/repairing Septic Tanks/toilets
- 5) Improved signage in the facility
- 6) Making arrangement for disposal of wastage etc. including bio-medical wastage disposal
- 7) Purchase/Maintenance of Medical equipment's
- 8) Fuel for power backup/ ambulance (if available)

**Group C: Patient amenities:** At least 40% fund of Untied Grant shall be utilised

- 9) Provision of safe drinking water to patients
- 10) Seating arrangement and separate toilets for patients
- 11) Transport of emergencies to referral centres/ Referral Transport
- 12) Transport of laboratories samples during epidemics.
- 13) Arrangement of stay for poor parents and their attendants.
- 14) Setting up RogiSahayata Kendra/help desk
- 15) Providing for medicines and Diagnostics for needy people. (In case not available of EDL drugs or free drugs services)
- 16) Arrangement for hygienic environment for washroom and toilets
- 17) Providing security at Hospital Premises for safety/Security of patients through outsourcing

**N.B:**

- a. List of people drawing wages from the Untied Grant shall be submitted on a yearly basis to the respective Jt. DHS cum Member Secretary, District Health Society.
- b. The untied grant shall be utilised with the approval of RKS/HMC
- c. No new engagement of support staffs under RKS/HMC will not be done beyond 30% limit above (Group-A)
- d. No activity shall be implemented beyond allocated fund provisions
- e. The united fund and user charges fund shall be parked in the same A/C as per letter no NHM/Accounts/07-08/422/Pt-III/2013-14/4584 dtd.22nd May 2015

**Budget detail as follows-**

No. of Unit	Unit Cost	Total Cost (In Rs.)	Rs. in lakh
27 UPHC	1,75,000	47,25,000	47.25

**List of Health Institutes:**

Sl. No	Name of Institute	Type of Institute		District	Rs. in lakh
1	NATBOMA PHC	PRIMARY HEALTH CENTRE	Govt	Kamrup Metro	29.75
2	SATGAON PHC	PRIMARY HEALTH CENTRE	Govt		
3	KHARGHULI MPHC	PRIMARY HEALTH CENTRE	Govt		
4	KHANAPARA SD	PRIMARY HEALTH CENTRE	Govt		
5	CAPITAL SD	PRIMARY HEALTH CENTRE	Govt		
6	WEST GHY SD	PRIMARY HEALTH CENTRE	Govt		
7	EAST GHY SD	PRIMARY HEALTH CENTRE	Govt		
8	GARIGAON SD	PRIMARY HEALTH CENTRE	Govt		
9	BHETAPARA SD	PRIMARY HEALTH CENTRE	Govt		
10	KAMAKHYA SD	PRIMARY HEALTH CENTRE	Govt		
11	LOKHARA SD	PRIMARY HEALTH CENTRE	Govt		
12	HENGRABARI MU	PRIMARY HEALTH CENTRE	Govt		
13	ULUBARI UHC	PRIMARY HEALTH CENTRE	Govt		
14	GOTANAGAR UPHC	URBAN PRIMARY HEALTH CENTRE	Govt		
15	SERABHATI UPHC	URBAN PRIMARY HEALTH CENTRE	Govt		



16	PANDU UPHC	URBAN PRIMARY HEALTH CENTRE	Govt		
17	MEDICAL UNIT, ASSAM SECRETARIATE, DISPUR	URBAN PRIMARY HEALTH CENTRE	Govt		
18	KAMPUR UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Nagaon	1.75
19	WOOD UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Sivasagar	1.75
20	SONARI UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Charaido	1.75
21	MARGHERITA UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Tinsukia	1.75
22	GOALPARA UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Goalpara	1.75
23	JORHAT UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Jorhat	3.5
24	CINAMORA UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Jorhat	
25	DIBRUGARH UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Dibrugarh	3.5
26	DULIAJAN UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Dibrugarh	
27	SILCHAR UPHC	URBAN PRIMARY HEALTH CENTRE	Govt	Cachar	1.75

### **Activity: Untied Grants to UPHCs in Rented building.**

#### **FMR Code:U.4.1.1.2**

Activity owner

- At State level – Consultant(P)/ Finance Manager
- At District level – DAM/District Urban Health Coordinator, NUHM

The same guideline to be followed as mention above both for Govt. building or rented building (UPHC/CHC)for the expenses of Untied fund.

#### **Budget detail as follows-**

No. of Unit	Unit Cost	Total Cost (In Rs.)	Rs. in lakh
28 UPHC	1,00,000	28,00,000.00	<b>28.00</b>

#### **List of Health Institutes:**

SL. NO.	NAME OF HEALTH INSTITUTION	TYPE OF HEALTH INSTITUTION	REMARKS	DISTRICT	Rs. in lakh
1	ODALBAKRA MPHC	PRIMARY HEALTH CENTRE	Rented	Kamrup Metro	18
2	AMINGAON UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
3	GARPANDU UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
4	PANDU NATH UPHC	URBAN PRIMARY HEALTH	Rented		

		CENTRE			
5	FERRYGHAT UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
6	FATASIL UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
7	GANDHIBASTI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
8	MATHGHARIA UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
9	BATAGHULI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
10	BIRKUCHI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
11	HATIGARH CHARIALI	URBAN PRIMARY HEALTH CENTRE	Rented		
12	KAHILIPARA UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
13	KOINADHARA UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
14	NORTH GHY UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
15	CHOONSALI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
16	BASISTHA MANDIR UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
17	KRISHNANAGAR UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
18	PIYALI PHUKAN NAGAR UPHC	URBAN PRIMARY HEALTH CENTRE	Rented		
19	MAHKHULI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Nagaon	
20	DHING GATE, HOIBORGAON	URBAN PRIMARY HEALTH CENTRE	Rented	Nagaon	2
21	MISSIONPARA UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Tinsukia	1
22	MARIYONI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Jorhat	1
23	BHAWLAGURI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Bongaigaon	1
24	DHUBRI UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Dhubri	1
25	KARIMGANJ UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Karimganj	1
26	JAHAJGHAT UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Sonitpur	1
27	CHAPORIGAON UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Lakhimpur	1
28	DIPHU UPHC	URBAN PRIMARY HEALTH CENTRE	Rented	Kabi Anglong	1

## **Activity:-Untied Grants to UCHCs**

### **FMR Code: U.4.1.2**

Activity owner

- At State level – Consultant(P)/ Finance Manager
- At District level – DAM/District Urban Health Coordinator, NUHM

The same guideline to be followed as mention above both for Govt. building or rented building (UPHC/CHC)for the expenses of Untied fund.

No. of Unit	Unit Cost	Total Cost (In Rs.)	Rs. in lakh
2 UHC	5,00,000	10,00,000.00	<b>10.00</b>

#### **List of Health Institutes:**

<b>1</b>	<b>DHIRENPARA FRU</b>	<b>Urban CHC</b>	Govt	Kamrup Metro
<b>2</b>	<b>PANDU FRU</b>	<b>Urban CHC</b>	Govt	Kamrup Metro

## **Activity:-Untied Grants to MAS**

### **FMR Code: U.4.1.4**

Activity owner

- At State level – Pranjal Borah, Account's Manager, NUHM
- At District level – DUHC, NUHM / DAM

The main purpose of the untied fund is not simply to spend it but to use it as a catalyst for community health planning and for executing the plan.

Untied funds:

- Promote decentralization, i.e. allow the slum residents to take decisions about spending on community health.
- Create opportunities for the community to gain capacity for collective decision making around health.
- Provide support to the MAS in executing a plan of action. Any action plan developed by the MAS to address local issues would include some activities for which funds are required.
- Untied fund helps to undertake those activities requiring funds.
- Community is also encouraged to contribute a revolving fund to the MAS; which may be in terms of money or labour.

#### **Principles of Utilization of Untied Fund**

The MAS can use these funds for any purpose aimed at improving the health of the slum. Being an untied fund, it is to be utilized as per decision of the MAS. Nutrition, education, sanitation, environmental protection, public health measures are key areas where this fund could be utilized. Decision on the utilization of funds should be taken during the monthly MAS meetings and should be based on the following principles:

- The fund shall be used for activities that benefit the community and not just one or two individuals
- However in exceptional cases such as that of a destitute women or very poor household, the untied fund could be used for health care needs of the poor household especially for enabling access to care. For example, MAS identified a suspected pneumonia patient who did not have money to go to the U- CHC for treatment. MAS provided funds for her treatment at the U- CHC and one of the members also accompanied her to the U- CHC.
- The fund shall not be used for works or activities for which an allocation of funds is already available through the urban local body or other departments. For example, the fund should not be used in activities like construction of drainage system or roads as these activities are already budgeted in the concerned departments like PHED and PWD.
- In special circumstances the U-PHC or the City/ District PMU could give a direction or a suggestion to all MAS to spend on a particular activity, but even then it should be approved first by the MAS.
- MAS will not be directed to contract with specific service providers for specific activities, regardless of the nature of the activity. For example, if MAS wants to engage someone for providing emergency transport services in the slum, neither health department staff nor anyone else can direct it to give the contract to any particular service provider.
- All payments from the untied fund must be done by the MAS directly to the service provider without involvement of any third party.

Indicative list of activities that may be undertaken with the help of untied fund

- ❖ Slum level public health activities like cleanliness drive, insecticide spraying etc.
- ❖ Awareness generation in the slum on various govt. schemes for urban poor like JSY, RSBY, JSSK, BSUP, RBSK etc.
- ❖ Repair/ installation of community water supply points like public taps, stand posts
- ❖ Minor repair of the community toilets to make them functional
- ❖ IEC/BCC activities like wall writings, puppet shows, film shows for awareness generation on MNCHN and WASH related issues
- ❖ Providing equipments like weighing machine etc. to the Anganwadis
- ❖ Helping destitute women or very poor slum households in accessing health care
- ❖ Logistic arrangements for Urban Health and Nutrition Days (UHND)
- ❖ Paying for emergency transport when 102/108 services are not available

**Budget detail as follows-**

No. of Unit	Unit Cost	Total Cost (In Rs.)	Rs. in lakh
658 MAS	5,000	3290000	<b>32.90</b>

**Budget break up:**

Sl.No	District	No. of MAS	Amount (Rs)
1	Bongaigaon	14	70,000
2	Cachar	50	250,000
3	Dibrugarh	60	300,000
4	Dhubri	55	275,000
5	Goalpara	56	280,000
6	Jorhat	35	175,000
7	Kamrup Metro	265	1,325,000
8	Karbi Anglong	33	165,000
9	Karimganj	9	45,000
10	Lakhimpur	11	55,000
11	Nagaon	39	195,000
12	Sibsagar	11	55,000
13	Sonitpur	10	50,000
14	Tinsukia	10	50,000
	<b>Total</b>	<b>658</b>	<b>3,290,000</b>

**Activity: Rent for UPHC****FMR Code: U.5.1.4**

Activity owner

- At State level – Pranjal Borah, Accounts Manager, NUHM
- At District level – DUHC, NUHM / DAM/ Accountant Cum Sect. Staff of the UPHC

Fund should be utilised for rented buildings for the payment of rent on monthly basis as per actual(Maximum @15399/ per month).28 nos. rented UPHCs @ Rs.184788.00/ year.

No. of Unit	Unit Cost	Total Cost (In Rs.)	In lakh
28	Rs.184788.00	51,74000.00	<b>51.74</b>

**District Budget Breakup:**

Sl. No	District	No. of HI	Amount(Rs)
1	Kamrup Metro	18	3326120
2	Nagaon	2	369576
3	Tinsukia	1	184788
4	Jorhat	1	184788
5	Bongaigaon	1	184788
6	Dhubri	1	184788
7	Karimganj	1	184788
8	Sonitpur	1	184788
9	Lakhimpur	1	184788
10	Karbi Anglong	1	184788
<b>Total</b>		<b>28</b>	<b>5174000</b>

**Activity: Provision of Free diagnostics at Ayushman Bharat Health & Wellness Centres(AB-H&WC)**

**FMR Code: U.6.1.7.1**

Activity owner

- At State level – SPO, NUHM/Mamtaz Muzumdar, PE, Free Diagnostics.
- At District level – District Urban Health Coordinator, NUHM

**Brief about the Activity :**

Under this activity, health facility will have to utilize the fund in procuring requisite reagents and consumables required for the purpose of performing all 19 tests. Expenditure to be booked under this head for providing free laboratory service to patients in the UPHC under Ayushman Bharat Health & Wellness Centres (AB-H&WC). Cost per test as given in Annexure-I shall be the basis of deriving the total cost for the month.

Sl. No	Name of District	Estimated no. of Patients avail lab service in FY 2020-21	Fund Sanctioned (in lakhs)
1	Bongaigaon	484	0.24
2	Cachar	987	0.49
3	Dhubri	570	0.29
4	Dibrugarh	1558	0.78
5	Goalpara	611	0.31
6	Jorhat	1359	0.68

7	Kamrup Metro	89709	44.85
8	KarbiAnglong	48	0.02
9	Karimganj	488	0.24
10	Lakhimpur	879	0.44
11	Nagaon	2245	1.12
12	Sivsagar	1738	0.87
13	Sonitpur	583	0.29
14	Tinsukia	750	0.38
<b>TOTAL</b>		<b>102009</b>	<b>51.00</b>

**Annexure- I**

<b>Annexure I</b>			
<b>REIMBURSEMENT FORMAT FOR FREE PATHOLOGICAL SERVICES</b>			
<b>MONTH:</b>		<b>YEAR:</b>	
<b>DISTRICT:</b>		<b>NAME OF HI :</b>	
<b>Name of test</b>	<b>Estimated cost per test (in Rs.)</b>	<b>Number of tests done</b>	<b>Total cost for the test</b>
1) Hemoglobin	3		
2) TLC			
3) DLC	13		
4) TRBC	9		
5) Platelet count	10		
6) Total eosinophil count	10		
7) ESR	7		
8) PCV	7		
9)a) Bleeding time			
b) Clotting time	3		
10) Reticulocyte count	4		
11) PT- INR	21		

12) Blood grouping and Rh typing	6		
13) Malarial parasite (slide method)	3		
14) Blood glucose	7		
15) Blood Urea	34		
16) Serum creatinine	17		
17) Total bilirubin	16		
18) Direct bilirubin	16		
19) SGOT	37		
20) SGPT	39		
21) S. ALP	43		
22) Total protein	12		
23) S. Albumin	13		
24) S. Cholesterol	26		
25) S. Triglyceride	64		
26) S. HDL	27		
27) S. LDL	44		
28) S. Amylase	98		
29) VDRL and RPR	29		
30) HIV kit test	36		
31) Hepatitis kit test	17		
32) Malaria kit test			
33) Dengue kit test	163		
34) Widal test	12		
35) Sputum for AFB			
36) Urine stick (2 parameters)	8		
37) Urine for pregnancy	21		
38) Urine stick (10 parameters)	17		
39) Urine microscopy	6		



40) Stool RE/ for ova & cyst/ occult blood	7		
<b>TOTAL NUMBER OF TESTS DONE IN THE MONTH:</b>			
<b>TOTAL EXPENDITURE ON ALL TESTS IN THE MONTH:</b>			
<b>Signature of Lab Tech</b>		<b>Signature of Accountant</b>	<b>Signature of Hospital In-charge</b>

### Activity: -1 ASHA Training

#### FMR Code- U.9.2.7.2

Activity owner

- At State level – SPO, NUHM
- At District level – District Urban Health Coordinator, NUHM

Training for 1212 ASHAs (40 batches) of 14 districts The training will be held on Mental Health. Training will be imparted by the Medical Officer's. Handbook for the training will be send along with the ROP 2021-22.

DUHC and DCM will organise the training program with the guidance from the Medical Officials.

#### Budget break up :

5 days training of 1212 ASHAs of 14 districts					
Sl No	Component	Unit cost	Unit	Duration	Total Amount
		( in Rs. )			( in Rs.)
1	TA for Participants subject to actual	200	30	2	12000
2	DA to Participants	100	30	5	15000
3	Honorarium for Resource Persons	300	3	5	4500
4	Accommodation for the participants including(L/F)	150	33	5	24750
5	Training Material (folder, note Pad, Pen, Pencil, Highlighter etc.)	50	37	1	1850
6	Working lunch, snacks and Tea	150	33	5	24750
8	Venue hiring Charge	1000	1	5	5000
	<b>Total amount for one batch (in Rs.)</b>				<b>87850</b>

#### District wise fund allocation for Mental Health Training

Sl. No	Name of District	Total no of training batch on Mental Health	Total Amount (in Rs.)
1	Bongaigaon	1	87850
2	Cachar	2	175700
3	Dhubri	3	263550
4	Dibrugarh	2	175700
5	Goalpara	1	87850
6	Jorhat	2	175700
7	Kamrup Metro	17	1493450
8	KarbiAnglong	1	87850
9	Karimganj	1	87850
10	Lakhimpur	1	87850
11	Nagaon	2	175700
12	Sivsagar	2	175700
13	Sonitpur	3	263550
14	Tinsukia	2	175700
<b>TOTAL</b>		<b>40</b>	<b>3514000</b>

### FMR Code: U.9.2.7.2

#### Activity -2 Trainings of ASHA (DOTS)

##### Activity owner

- At State level – SPO, NUHM
- At District level – District Urban Health Coordinator, NUHM

The vision of Government of India is TB free India with reduction in the burden of disease until it ceases to be a public health problem. To achieve this vision, NTEP program needs to be rolled out in the urban areas also as there is inadequate diagnostics, inadequate treatment facilities, poor TB risk perception and inadequate efforts for advocacy and social mobilization.

DUHC and DCM will organise the training program with the guidance from DTO.

##### Budget Break-up

DOTS provider training to AHSA'S					
Sl no	Component	Unit cost	Participants per batch	Duration per batch	Total Amount
1	TA to participants (on actual)	200	30	1	6000
2	DA to participants	100	30	1	3000
3	Training materials (Folder, pen, pad, highlighter, etc)	100	30	1	3000
4	Food cost(Breakfast, working lunch, snacks & tea)	200	30	1	6000

Sl no	Component	Unit cost	No of Resource Persons	Duration per batch	Total	18000
					Total Amount	
5	Honorarium to 2 Resource Person @ Rs.1000/- per person per batch.	1000	2	1	2000	
6	Venue cost @ Rs. 3500/- per day	3500		1	3500	
<b>Total</b>					<b>5500</b>	

#### DISTRICT WISE FUND ALLOCATION FOR DOTS TRAINING

Sl. No	Name of District	Total no. of training batch on DOTS	Total Amount(in Rs.)
1	Bongaigaon	1	23500
2	Cachar	1	23500
3	Dhubri	1	23500
4	Dibrugarh	1	23500
5	Goalpara	1	23500
6	Jorhat	1	23500
7	Kamrup Metro	2	47000
8	KarbiAnglong	1	23500
9	Karimganj	1	23500
10	Lakhimpur	1	23500
11	Nagaon	1	23500
12	Sivsagar	1	23500
13	Sonitpur	1	23500
14	Tinsukia	1	23500
<b>TOTAL</b>		<b>15</b>	<b>352500</b>

**Activity:-Any Other (Training for ULB Members)**

**FMR Code: U.9.2.1.3**

Activity owner

- At State level – Hingulas Khakhalary, Consultant, NUHM
- At District level – District Urban Health Coordinator, NUHM

Non-Health Departments such as Urban Development, Housing and Urban Poverty Alleviation, Women and Child Development, School Education, Labour, Water and Sanitation, etc. are also important stakeholders for successful implementation of NUHM. Thus, these entities must be given a basic orientation towards urban health issues and NUHM, in order to facilitate identification of areas of collaboration.

One day district level orientation of ULB Members on concepts of H&WC Services and healthy lifestyle focusing on exercise and wellness activities.

No of batch will be =18. Each batch contains 24 nos participant.

(For Kamrup Metro, 5 batches are proposed as the Guwahati Municipal Corporation has 6 members).

Total no of participant =431 participants.

The resource person for the program is MO, I/C Urban PHC, DUHC and DCM.

Venue: District

### **Agenda on Capacity Building workshop for ULB Members**

Day 1		
Time	Topics	Facilitator
10.30 a.m. -11.00 a.m.	Welcome and Introduction	
11.00 a.m. -11.15 a.m.	Tea	
11.15 a.m. -12.15 p.m.	Sharing the concept of Health & Wellness Centre – Ayushman Bharat	
12.15 p.m. -1.30 p.m.	Eat Right Campaign Concept	
1.30 pm to 2.15 pm	Lunch break	
2.15 p.m. – 5.00 p.m.	Guidelines of Fit India Movement and its concept	
5.00 pm to 5.30 pm.	Vote of Thanks	

### **Budget Break-up**

Sl. No.	Component	Unit Cost	Unit	Duration	Total (In Rs.)
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1	DA to Participants	400	24	1	9600.00
2	DA for Resource person	1000	2	1	2000.00
2	Training Material (Bag, Pad, Pen, Pencil, Highlighter etc.)	150	24	1	3600.00
3	Hall Charge	2000	1	1	2,000.00
4	Working lunch, snacks and Tea	200	28	1	5,600.00
<b>Total amount for one batch (inRs.)</b>					<b>22800.00</b>
<b>Total budget for 18 batches in Rs.</b>					<b>4,10,400.00</b>
<b>Rs. In Lakh</b>					<b>4.10</b>

**Districts wise budget break-up:**

Sl.No	District	No. of Batch	Amount(Rs)
1	Bongaigaon	1	22800
2	Cachar	1	22800
3	Dibrugarh	1	22800
4	Dhubri	1	22800
5	Goalpara	1	22800
6	Jorhat	1	22800
7	Kamrup Metro	5	114000
8	Karbi Anglong	1	22800
9	Karimganj	1	22800
10	Lakhimpur	1	22800
11	Nagaon	1	22800
12	Sibsagar	1	22800
13	Sonitpur	1	22800
14	Tinsukia	1	22800
	<b>Total</b>	<b>18</b>	<b>410400</b>

## IEC/BCC

**Activity:-** IEC activities for Health & Wellness centre(H&WC)

**FMR Code** U.11.2

Activity owner

- At State level –SME, NHM / Consultant, NUHM
- At District level – DME/District Urban Health Coordinator, NUHM

**Plan:** In order to strengthen the IEC BCC activities **Street play** to be undertake on the following issues in slum areas with the help of MAS members:

**Issues:** Promoting correct behavior, H&WC services, Life style diseases or need base.

Proper strategic plan should be made by the DUHC/ DME of the concern district among the officials and associated members for the National Urban Health Mission to successfully organized the street play.

### **Budget break up:**

Sl.No	District	No. of UPHC/CHC	Street Play	
			Unit cost(Rs)	Total Cost(Rs)
1	Bongaigaon	1	3000	3000
2	Cachar	1		3000
3	Dibrugarh	2		6000
4	Dhubri	1		3000
5	Goalpara	1		3000
6	Jorhat	3		9000
7	Kamrup Metro	36		108000
8	Karbi Anglong	1		3000
9	Karimganj	1		3000
10	Lakhimpur	1		3000
11	Nagaon	3		9000
12	Sibsagar	2		6000
13	Sonitpur	1		3000
14	Tinsukia	2		6000
<b>TOTAL</b>				<b>168000</b>

**Activity:- IEC activities for Health & Wellness centre(H&WC)****FMR Code U.11.2**

## Activity owner

- At State level –SME, NHM/Consultant, NUHM
- At District level – DME/District Urban Health Coordinator, NUHM

**Plan:** District will do outdoor publicity on NUHM through the means of Installation of Retro Vinyl Board, Sun pack Sheet ,Leaflet, Poster, Banner. Theme of publicity will be NUHM framework, H&WC Services, Japanese Encephalitis, Dengue, cleanliness and sanitation, Safe Sex, Family Planning and other program based IEC etc.

1. Installation of Retro Vinyl Board at prominently visible location nearby Urban Health Facility under NUHM.
2. Sunpack sheets are cost effective IEC tool for dissemination of short information. The Sunpack sheet will also be an effective campaign tool for delivering short information like family planning, Slogan for Behavior Change Communication on cleanliness, Sanitation etc. Proposed size of sunpack sheet is 15 x 15 inch multicolor.

**A. Budget Break up:**

Sl.No	District	No. of UPHC/CHC	Retro Vinyl Board		
			Unit cost(Rs)	No of Units	Total Cost(Rs)
1	Bongaigaon	1	2500	5	12500
2	Cachar	1		5	12500
3	Dibrugarh	2		10	25000
4	Dhubri	1		5	12500
5	Goalpara	1		5	12500
6	Jorhat	3		15	37500
7	Kamrup Metro	36		180	450000
8	Karbi Anglong	1		5	12500
9	Karimganj	1		5	12500
10	Lakhimpur	1		5	12500
11	Nagaon	3		15	37500
12	Sibsagar	2		10	25000
13	Sonitpur	1		5	12500
14	Tinsukia	2		10	25000
TOTAL				280	700000

## B. Budget break up:

Sl.No	District	No. of UPHC/CHC	Sun pack sheet		
			Unit cost(Rs)	No of Units	Total Cost(Rs)
1	Bongaigaon	1	75	5	375
2	Cachar	1		5	375
3	Dibrugarh	2		10	750
4	Dhubri	1		5	375
5	Goalpara	1		5	375
6	Jorhat	3		15	1125
7	Kamrup Metro	36		180	13500
8	Karbi Anglong	1		5	375
9	Karimganj	1		5	375
10	Lakhimpur	1		5	375
11	Nagaon	3		15	1125
12	Sibsagar	2		10	750
13	Sonitpur	1		5	375
14	Tinsukia	2		10	750
TOTAL				280	21000

## Quality Assurance

### Activity: Quality Assurance Implementation (for traversing gaps)

#### FMR Code: U.13.1.4

##### Activity owner

- At State level – Dr. Rohini Kumar, Consultant, Quality Assurance, NHM
- At District level – District Urban Health Coordinator, NUHM/ District Quality Consultant

In terms of fire safety, the fire extinguishers should be refilled with proper labelling of expiry dates on them. No fire extinguishers should be beyond the expiry date.

For the safety of the patients and the health centre staffs proper fire alarm should be place in the proper location



**Budget break up:-**

Sl.No	District	No. of UPHC	Refill of Fire Extinguisher	
			Unit cost(Rs)	Total Cost(Rs)
1	Bongaigaon	1	2000	2000
2	Cachar	1		2000
3	Dibrugarh	2		4000
4	Dhubri	1		2000
5	Goalpara	1		2000
6	Jorhat	3		6000
7	Kamrup Metro	34		68000
8	Karbi Anglong	1		2000
9	Karimganj	1		2000
10	Lakhimpur	1		2000
11	Nagaon	3		6000
12	Sibsagar	2		4000
13	Sonitpur	1		2000
14	Tinsukia	2		4000
<b>Total</b>				<b>108000</b>

**Budget break-up**

Sl.No	Name of the Health centre	Up gradation of Laboratory	
		Unit cost(Rs)	Total Cost(Rs)
1	Khanapara UPHC	20000	20000
2	Lokhara UPHC		20000
3	Gotanagar UPHC		20000
4	Satgaon UPHC		20000
5	Serabhati UPHC		20000
6	Wood UPHC		20000
7	Dibrugarh UPHC		20000
8	Silchar UPHC		20000
9	Dhubri UPHC		20000
10	Goalpara UPHC		20000
11	Chaporigaon UPHC		20000

## **Activity: Support for Implementation of Kayakalp**

### **FMR Code: U.13.2.3**

Activity owner

- At State level – Dr. Rohini Kumar, Consultant, Quality Assurance, NHM
- At District level – District Urban Health Coordinator, NUHM/ District Quality Consultant

White puncture proof box, flush toilet and elbow tap to be procured as per fund allocated to the district as per the NHM guidelines and norms.

#### **Budget break -up**

Sl.No	District	No. of UPHC	Procurement of White Puncture proof box	
			Unit cost(Rs)	Total Cost(Rs)
1	Bongaigaon	1	1400	1400
2	Cachar	1		1400
3	Dibrugarh	2		2800
4	Dhubri	1		1400
5	Goalpara	1		1400
6	Jorhat	3		4200
7	Kamrup Metro	34		47600
8	Karbi Anglong	1		1400
9	Karimganj	1		1400
10	Lakhimpur	1		1400
11	Nagaon	3		4200
12	Sibsagar	1		1400
13	Charaido	1		1400
14	Sonitpur	1		1400
15	Tinsukia	2		2800
<b>Total</b>				<b>75600</b>

## Budget break-up

Sl.No	Name of the Health centre	Procurement of flush toilet		Elbow tab	
		Unit cost(Rs)	Total Cost(Rs)	Unit cost(Rs)	Total Cost(Rs)
1	Sonari UPHC	3000	3000	2000	2000
2	Jorhat UPHC		3000		2000
3	Mariyoni UPHC		3000		2000
4	Bhawlaguri UPHC		3000		2000
5	Karimganj UPHC		3000		2000
6	Jahajghat UPHC		3000		2000
7	Pandu Nath UPHC		3000		2000
8	Fatasil UPHC		3000		2000
9	Hatigarh Chariali UPHC		3000		2000
10	Koinadhara UPHC		3000		2000
11	Piyali Phukan UPHC		3000		2000
<b>Total</b>			<b>33000</b>		<b>22000</b>

## Programme Management

### Activity: QA Committees at city level (meetings, workshops, etc.)

#### FMR Code: U.16.1.2.1

Activity owner

- At State level – Dr. Rohini Kumar, Consultant, Quality Assurance, NHM
- At District level –DQC/ District Urban Health Coordinator, NUHM

In order to improve the quality of facility based service delivery through systematic monitoring and feed-back, with the goal of improving client satisfaction. Every UPHC will organise meetings/ workshop in presence of DPM, DUHC and District Quality team.

District wise budget break up:

Sl.No	District	No. of UPHC	Meeting on Quality Assurance	
			Unit cost(Rs)	Total Cost(Rs)
1	Bongaigaon	1	2000	2000
2	Cachar	1		2000
3	Dibrugarh	2		4000
4	Dhubri	1		2000
5	Goalpara	1		2000
6	Jorhat	3		6000
7	Kamrup Metro	35		70000
8	Karbi Anglong	1		2000
9	Karimganj	1		2000

10	Lakhimpur	1	2000
11	Nagaon	3	6000
12	Sibsagar	2	4000
13	Sonitpur	1	2000
14	Tinsukia	2	4000
<b>Total</b>			<b>110000</b>

### **Activity: Mobility Support for DPMU**

#### **FMR Code: U.16.1.3.3**

Activity owner

- At State level – Pranjal Borah, AM, NUHM
- At District level – DAM/District Urban Health Coordinator, NUHM

Mobility support to DPMU @Rs. 10000/per month for 12 months for 13 District and for Kamrup(Metro) @Rs. 22500/per month. Fund should be utilised for vehicle expenses for field visits/session visit/special programs and official visits as per NHM norms.

Sl.No	District	Amount (Rs)
1	Bongaigaon	120,000
2	Cachar	120,000
3	Dibrugarh	120,000
4	Dhubri	120,000
5	Goalpara	120,000
6	Jorhat	120,000
7	Kamrup Metro	270,000
8	Karbi Anglong	120,000
9	Karimganj	120,000
10	Lakhimpur	120,000
11	Nagaon	120,000
12	Sibsagar	120,000
13	Sonitpur	120,000
14	Tinsukia	120,000
<b>Total</b>		<b>18,30,000</b>

**Activity: Administrative Expenses (including review meetin, workshops etc) for DPMU**

**FMR Code: U.16.1.4.3**

Activity owner

- At State level – Pranjali Borah, AM, NUHM
- At District level – DAM/District Urban Health Coordinator, NUHM

Fund should be utilised for Review meeting, Workshop, Office expenses @ Rs.5000.00/Per Qtr. Bills should be paid as per NHM norms

**District wise break-up**

Sl. No	District	Unit Cost /Per month qtr	Unit Cost /year (Rs)
1	Bongaigaon	5,000	20,000
2	Cachar	5,000	20,000
3	Dibrugarh	5,000	20,000
4	Dhubri	5,000	20,000
5	Goalpara	5,000	20,000
6	Jorhat	5,000	20,000
7	Kamrup Metro	10,000	40,000
8	Karbi Anglong	5,000	20,000
9	Karimganj	5,000	20,000
10	Lakhimpur	5,000	20,000
11	Nagaon	5,000	20,000
12	Sibsagar	5,000	20,000
13	Sonitpur	5,000	20,000
14	Tinsukia	5,000	20,000
	<b>Total</b>		<b>3,00,000</b>

**Activity-1: “SURAKSHA” Distribute certain protective materials - Rubber gloves and Gumboots to Rag Pickers of Dhubri Municipal Board, District – Dhubri, Assam**

**FMR Code: U.18.1**

Activity owner

- At State level – Consultant, NUHM
- At District level – DAM/District Urban Health Coordinator, NUHM

**Implementation by:** District (Dhubri)

With the increase of global population and the rising choice for restaurant made food and other essentials, there has been a sharp rise in the amount of waste being generated daily by each household. As there is no demarcated place to throw these wastes in all the places, these wastes are largely thrown into open space or municipal waste collection drums, where from municipal cleaning staff collect those wastes, which are thrown into the landfills and dumps.

Rag-pickers are the people, who rummage through garbage bins to pick out ‘rags’ for meeting their livelihood needs. Rag pickers sustain themselves by collecting, sorting and segregating wastes and then trading with the scrap merchant. These rag pickers somehow face the challenges of life and move ahead. Due to social stigma across India, rag pickers face terrible discrimination and their communities are often blighted by alcoholism, literacy and drug abuse and are highly vulnerable to sexual abuse. Every day, rag pickers are exposed to a cocktail of toxic substances and working without protective measures, are at high risk of infection. Despite performing a very useful social service at great risk; health needs of this underprivileged workforce, who contributes to the ecology and economy of the city need to be addressed.

In order to protect the Rag pickers from getting different infectious diseases, certain protective materials will be distributed under the innovation named “**SURAKSHA**”. To begin with, as Dhubri district, which has about 210 nos. of rag pickers under Dhubri Municipal Board. These workers will be provided with Rubber gloves and Gumboots, which will protect them from getting infectious diseases, while they carry out the job of collecting, sorting and segregating wastes. Before they are given these materials, they will be oriented for 1 day with the help of Dhubri Municipal Board on the importance of using gloves and gumboot while they are engaged in cleaning job.

**DUHC, Dhubri will consult with the State Team before implementation of the program.**

**Budget break up – SURAKSHA**

SI No.	Particulars	No. of Unit	Unit Cost	Total
1	Rubber gloves	210	300	63000
2	Gumboots	210	500	105000
3	One day orientation	210	100	21000
<b>Total (In Rupees)</b>				<b>189000</b>

**Activity-2 : Canopies for the UHND sites District – Kamrup Metro, Assam**

**FMR Code: U.18.1**

Activity owner

- At State level – Consultant, NUHM
- At District level – DAM/District Urban Health Coordinator, NUHM

**Implementation by:** District (Kamrup Metro)

There are 110 of UHND sites under Kamrup Metro District, which are organized in semi-open areas, constrained spaces offered by responsible individuals, clubs etc. Some of the pertinent challenges in such locations are –

1. Exposure of both pregnant women and children to sunlight, wind, dust.
2. Lack of private space for health check up of the pregnant women.
3. Lack of privacy for lactating mothers to feed the babies.
4. Difficulty of the FLWs of working under such difficult conditions for 4 -5 hours.

LEHSIWISH, considering the above, has provided 35 canopies (6' x 6') for use in difficult areas in Kamrup(M). LEHSIWISH would further propose towards procurement of similar canopies as multi-purpose, low-cost, replicable model that would contribute immensely towards successful conduct of the UHSND sites. Some of the imminent benefits are –

- i) Privacy for lactating mothers.
- ii) Proper monitoring of every vaccinated child for at least 30 minutes.
- iii) The canopies may be used for other events and outreach camps.
- iv) The canopies can be equipped with various IEC materials promoting various schemes and benefits meant for the people.
- v) Innovations like in-built height measuring tape, and other materials can be fixed to the canopies.

Provision for 75 canopies (at least 6' x 6') @ Rs. 2000 per unit.

**DUHC, Kamrup Metro will consult with State team and the Wish Foundation Team before the implementation / procurement of Canopies.**

**Budget break –up:-**

SI No.	Particulars	No. of Unit	Unit Cost	Total
1	Canopies	75	2000	150000
<b>Total (In Rupees)</b>				<b>150000</b>

**Activity-3: NCD Awareness Initiative namely “APONAR POCHONDO (Choice is yours)”**

**FMR Code: U.18.1**

Activity owner

- At State level – Consultant, NUHM
- At District level – DAM/District Urban Health Coordinator, NUHM

**Implementation by:** District (Dibrugarh)

On pilot basis, state has decided to generate awareness on NCD and the importance of introducing lifestyle changes and for this it is planned to target population when they gather at identified gathering spots. State has decided to pilot it at Dibrugarh Town of Assam. The name of the innovation is **NCD Awareness Initiative “APONAR POCHONDO (Choice is yours)”**. The following steps are proposed to be taken at Dibrugarh town by the district.

**How to roll out the proposed activity:**

1. Important points of mass gathering (5 big shopping malls, office of the Deputy Commissioner, Dibrugarh, 9 big renowned sweet and confectionery shops, office of the Joint Director of Health Services, Civil Hospital Registration Counter, office of the Sub Divisional Officer, Dibrugarh, Canteen of the Assam Medical College & Hospital and Dibrugarh University, office of the District Food Safety Officer, Dibrugarh, 2 Urban PHCs) at Dibrugarh Town will be listed.

2. At each of the identified place a “standi – with the bi-lingual messages (English & Assamese) on NCD and its ill effect and how one can get rid of NCD” will be put up and with the final tag line of the standi “APONAR POCHONDO (Decision is yours)”, whether to follow the suggested behavior or to face the ill consequences of non-communicable diseases.
3. The messages to be given in Standi will have to be finalized in consultation with state NUHM Team/State IEC Cell;
4. Good quality standi with steel fabrication will have to be used.
5. Support and guidance from the Deputy Commissioner, Dibrugarh and Joint Director of Health Services / District Food Safety Officer will have to be taken to inform all the owners of all these points that the standi has to be properly used and they are to support in this awareness drive.
6. Major focus will be given on big malls and sweet and confectionery shops so that they whole heartedly support this initiative. Representatives of the identified places will be called at district level, where they will be oriented under the chairmanship of the Deputy Commissioner, Dibrugarh about the ill effects and to request them to join in this initiative.
7. During the orientation, they will be requested to sell more of sugar free items or at least to give enough choice to buyers to buy non-sweet items or sugar free food product.
8. To understand the impact of this initiative, any of the social sciences departments like Sociology, Social Work, Mass Communication under Dibrugarh University will be contacted by the office of the Joint Director of Health Services, Dibrugarh with a request to engage 02 students for doing rapid assessment of awareness among urban citizens on NCD. The selected students of these department may be allowed to submit such assessment report as a part of their course curriculum assignment.
9. During rapid assessment, students will understand issues, challenges being faced by citizens, which will help them to suggest actions for improvement. The findings will help health department to take further actions for improving the scenario.
10. It is expected that regular persuasion with these messages through standi will definitely bring huge impact on buyers and the trend of sweet consumption among buyers will decrease.
11. A token amount of Rs. 1 lac (for engaging 2 students for 20 days to do rapid assessment and for the department for the university) will be spent. They will submit report after getting the report vetted by the concerned departmental guide.

#### Budget Break-up-

Sl. No.	Activity	Unit/year	Cost/Unit	Total	Total
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			(In Rs.)	(in Rs.)	(in Lac)
1.	District level orientation of representatives of the identified places of mass gathering on NCD and how to protect oneself from NCD		25000.00	25000.00	0.25
2.	Bilingual Standi - NCD Awareness Initiative namely "APONAR POCHONDO (Choice is yours)"	25	3000.00	75000.00	0.75
3.	Token amount of Rs. 1.00 Lac for the identified department of the university.				1.00
<b>Total</b>					<b>2.00</b>

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