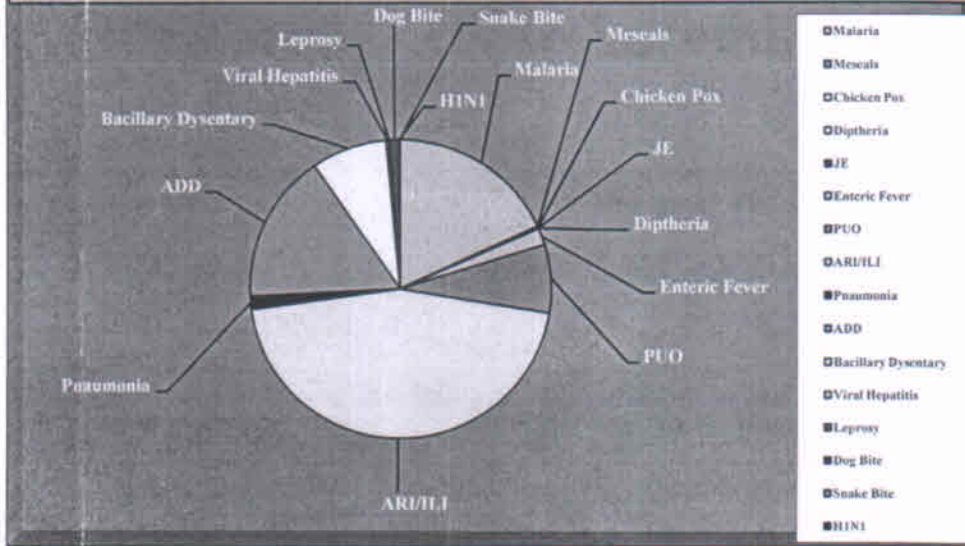


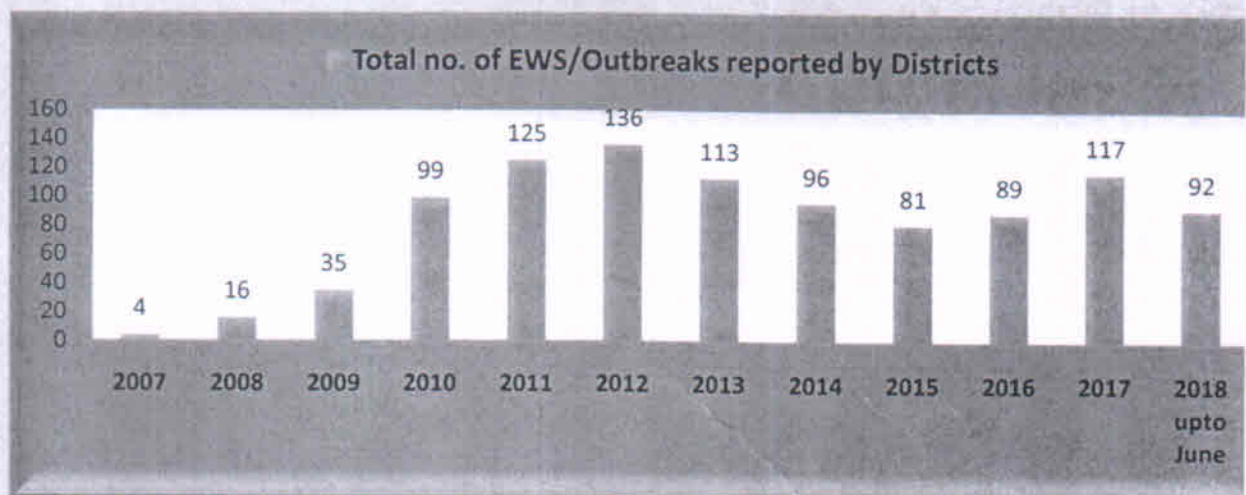


# Integrated Disease Surveillance Programme, ASSAM

## Disease wise surveillance report for the year 2018 of Assam



## OPERATIONAL GUIDELINES FOR 2018-19



### OFFICE OF THE NATIONAL HEALTH MISSION

SAIKIA COMMERCIAL COMPLEX, SRI NAGAR PATH, CHRISTIANBASTI, GUWAHATI - 781005  
 Phone: 0361-2349918  
 Fax : 0361-2349918  
 E-mail-ssoidspassam@gmail.com



42



31

| Contents:  | Page No: |
|--|----------|
| <b>IDSP At a Glance</b>  |          |
| 1. Introduction & Objectives of IDSP                                       | : 1-2    |
| 2. Flow Chart of Surveillance system of IDSP                               | : 3      |
| 3. Reporting percentage of P.L S Forms                                     | : 4      |
| 4. Organization Structure of IDSP in state                                 | : 5-6    |
| 5. Details of Human Resources under IDSP                                   | : 7      |
| 6. Progress report of Training under IDSP                                  | : 8      |
| 7. Reporting system under IDSP   | : 9-10   |
| 8. Feedback system under IDSP  | : 11     |
| 9. Convergence with other programme  | : 12-13  |
| 10. Importance of Surveillance   | : 14     |
| 11. Health facility of Assam   | : 15     |
| 12. Case definition under IDSP   | : 16-19  |
| 13. IT infrastructure under IDSP   | : 20     |
| 14. Laboratory support under IDSP  | : 21     |
| <b>Financial Guidelines</b>  |          |
| 15. FMR Code wise approved fund breakup                                    | : 23-28  |
| 17. Details fund breakup with guidelines for Training activities           | : 29-38  |
| 18. Details fund breakup with guidelines for Laboratory support activities | : 39-43  |
| 19. Details fund breakup with guidelines for Programme activities          | : 44-47  |
| 20. Details fund breakup with guidelines for HR activities                 | : 48     |
| 21. Summary of district fund allocation as per RoP                         | : 49     |
| 22. ToR of Contractual staffs under IDSP                                   | : 50-51  |

## 1. Introduction of IDSP

### 1.1 Background :

The Government of India initiated a decentralized state based Integrated Disease Surveillance Programme (IDSP) in the country in year 2004-05 in response to a long felt need expressed by various expert committees. IDSP (Phase I) was launched by Govt. of India in Nov 2004. Assam state was included in phase III of the The Government of India initiated a decentralized state based Integrated Disease Surveillance Project (IDSP) in the country in year 2004-05 in response to a long felt need expressed by various expert committees. IDSP (Phase I) was launched by Govt. of India in Nov 2004. Assam state was included in phase III of the project and IDSP was launched in Assam on November 2007. Having recognized the crucial importance of disease surveillance for improving the health of our people., the Government of India constituted a National Apical Advisory Committee for National Disease Surveillance and Response System. The Govt. of India has launched National Surveillance Program for communicable diseases (NSPCD).



Cholera patients under treatment

### 1.2 Specific Objectives of IDSP :

- To integrate and decentralize surveillance activities.
- To established systems for data collection, reporting, analysis and feedback using information technology.
- To improve laboratory support for disease surveillance.
- To develop Human resources for disease surveillance and action.
- To involve all stakeholders including private sector and communities in surveillance.

General objective of the programme is to establish a decentralize state based system of surveillance for communicable and non-communicable diseases, so that timely and effective public health actions can be initiated in response to health challenges in the country at state and national level and to improve the efficiency of existing surveillance system of disease control programme and facilitate sharing of relevant information with health administration, community and other stakeholders so as to detect disease trends over time and evaluate control strategies.



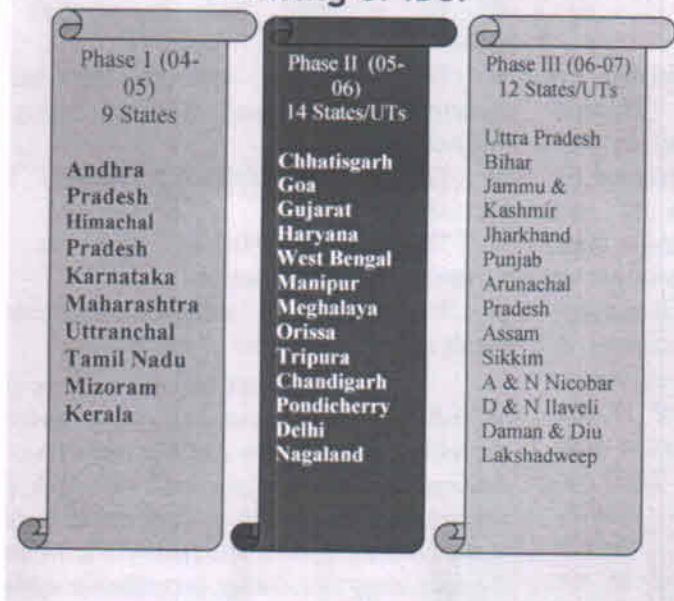
Implementation of IDSP in India

### 1.3 Overview of IDSP programme in Assam State:

Because of several Epidemics of Malaria & ADD faced by the state during las decades of 20<sup>th</sup> century, the Health & FW deptt. Of Govt. of Assam felt a dire need of constant disease surveillance to check morbidity and mortality due to communicable diseases.

With the Grant in Aid of Govt. of India, the Assam. State has successfully developed web based weekly surveillance system capable of forecasting an epidemic, analysis of weekly surveillance data on regular basis, providing feedback to reporting units and early actions by reporting units has lead containment of diseases ultimately reducing mortality and morbidity.

### Phasing of IDSP



Phassing of IDSP

Before the IDSP was established, the disease surveillance data was being collected on monthly basis thus, there was no system of ongoing surveillance in the state and because of that the system of early warning signal was non existing.

The mortality and morbidity due to communicable diseases have alarmingly reduced in Assam state over last few years. This is evident from the weekly surveillance data collected, compiled and analyzed under Integrated Disease Surveillance Programme implemented in the state since year 2007.

### Background

- Disease Surveillance observed to have deficiencies
- During Plague outbreak in 1994, the country sustained huge economic loss
- Need for a dedicated disease surveillance system recommended by high power committees
- 1997-National Surveillance Programme for Communicable Diseases (NSPCD) piloted.
- Expended to conceive

(IDSP) in 2003

Source:NCDC

### 1.4 Indicators & Vision:

- To establish state based a comprehensive surveillance information system covering public and private hospitals.
- To build capacities to analyze and use surveillance information at all levels to identify communicable disease outbreaks early.
- Ensure that all outbreaks will have high quality investigation by multi-specialty rapid response teams supported by laboratory confirmation.
- Deployment of epidemiologist at all 27 districts.
- District supported by a well performing laboratory with State Referral Lab. Network.
- Training of Municipal Corporation staff to strengthen Urban surveillance.
- Training at Block level for data analysis.

### Indicators

| Component                           | Indicators for each component   |
|-------------------------------------|---|
| Surveillance preparedness           | <ul style="list-style-type: none"> <li>• 80% of districts should have full time epidemiologist.</li> <li>• 80% of with fully IT system and online data entry &amp; use of toll free no 1075 or 1800-11-4377</li> <li>• 50% Develop priority labs and referral labs at least.</li> </ul> |
| Outbreak investigation and response | <ul style="list-style-type: none"> <li>• 50% referral labs maintain EQAS standards.</li> <li>• 50% Outbreak detection by system with in week.</li> <li>• 80% outbreaks/rumor must be verified.</li> <li>• 50% of outbreak sample should reach lab.</li> </ul>                           |
| Analysis and use of data            | <ul style="list-style-type: none"> <li>• 50% of outbreak sample should reach lab.</li> <li>• 80% districts undertake weekly surveillance and data analysis.</li> <li>• 80% district must provide feedback to sub unit and policy makers.</li> </ul>                                     |



40



### 3. A Journey of IDSP Assam

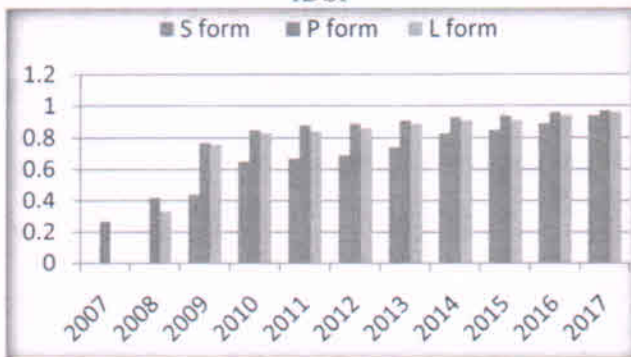
#### 3.1 Overview of IDSP Assam:

Government of India launched Integrated Disease Surveillance Programme in the year 2004. The Assam state implemented establishment of IDSP in the year 2007. Analysis of weekly surveillance data on regular basis, providing feedback to reporting units and early actions initiated by reporting units has lead containment of reducing mortality and morbidity due to communicable diseases. Before the IDSP was established, concepts were not present, the disease surveillance data was being collected on monthly basis thus, there was no proper system of ongoing surveillance.

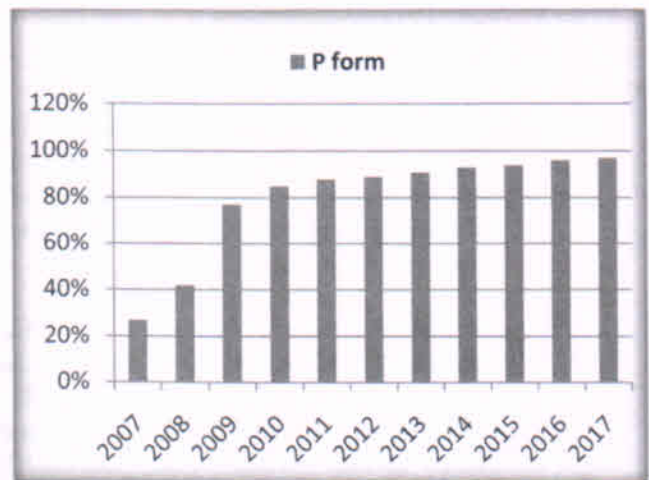
Now, disease surveillance system of Assam has been upgraded and strengthened by the support of Govt. of Assam and Govt. of India. Regular consistency has been maintained by the most of the reporting units. Timeliness and completeness have been followed by 100% reporting units. The IDSP proposes a comprehensive strategy for improving disease surveillance and response through an integrated approach. This approach provides for a rational use of resources for disease control and prevention. It is intended to detect early warning signals of impending outbreaks and help initiate an effective response in a timely manner. It is also expected to provide essential data to monitor progress of on-going disease control programmes and help allocate health resources more efficiently. All outbreaks cannot be predicted or prevented. However, precautionary Surveillance is defined as the ongoing systematic collection, collation, analysis, and interpretation of data and dissemination of information to those who need to know in order that action is taken. During the cholera outbreak in Golaghat district in 2007, IDSP is formally initiated in state of Assam

#### 3.2 Status of increasing Reporting Units under IDSP Assam from the period of 2007 to 2017.:

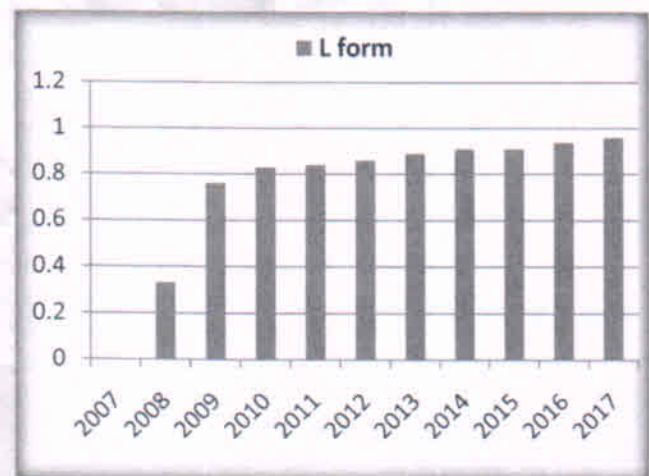
Increasing Status & Process in Reporting Unit under IDSP



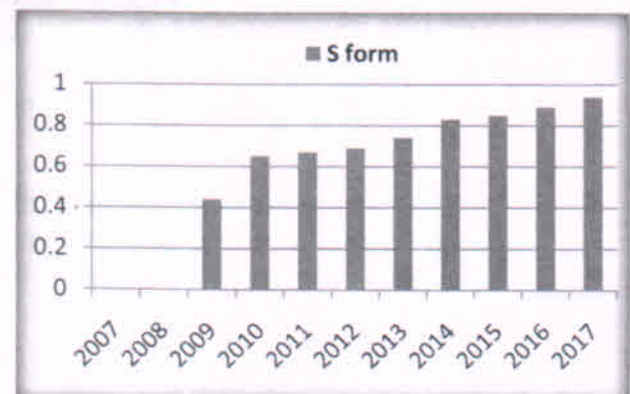
Progress of involvement P Form Reporting Unit under IDSP Assam from starting of the IDSP Programme 2007 to 2017.



Progress of involvement L Form Reporting Unit under IDSP Assam from starting of the IDSP Programme 2007 to 2017.



Progress of involvement S Form Reporting Unit under IDSP Assam from starting of the IDSP Programme 2007 to 2017.



## 4. Organization Structure of IDSP in State

### 4.1 State Surveillance Unit:

Active and passive surveillance is done by grass root functionaries and health facilities. No additional structure is created for surveillance system except few support persons at the district and state level.

Addl. Chief Secretary (Health) is overall in charge at the apex level. Commissioner (Health & FW) and Mission Director, NRHM guide and supervise surveillance activities at the state level. State Surveillance Officer is designated as State Nodal Officer –IDSP. State Surveillance Unit is headed by State Nodal Officer and located in O/o the Mission Director, NRHM, Saikia Commercial Complex, Sree Nagar, Christianbasti, G S Road, Guwahati-22. State Nodal Officer is overall in charge of surveillance activities that monitors technical, administrative and financial activities of the programme. He is assisted by contractual staff such as Epidemiologist (1), Entomologist (1), Microbiologist (1), Account Manager(1), Data Manager(1) and Data Entry Operator(1).

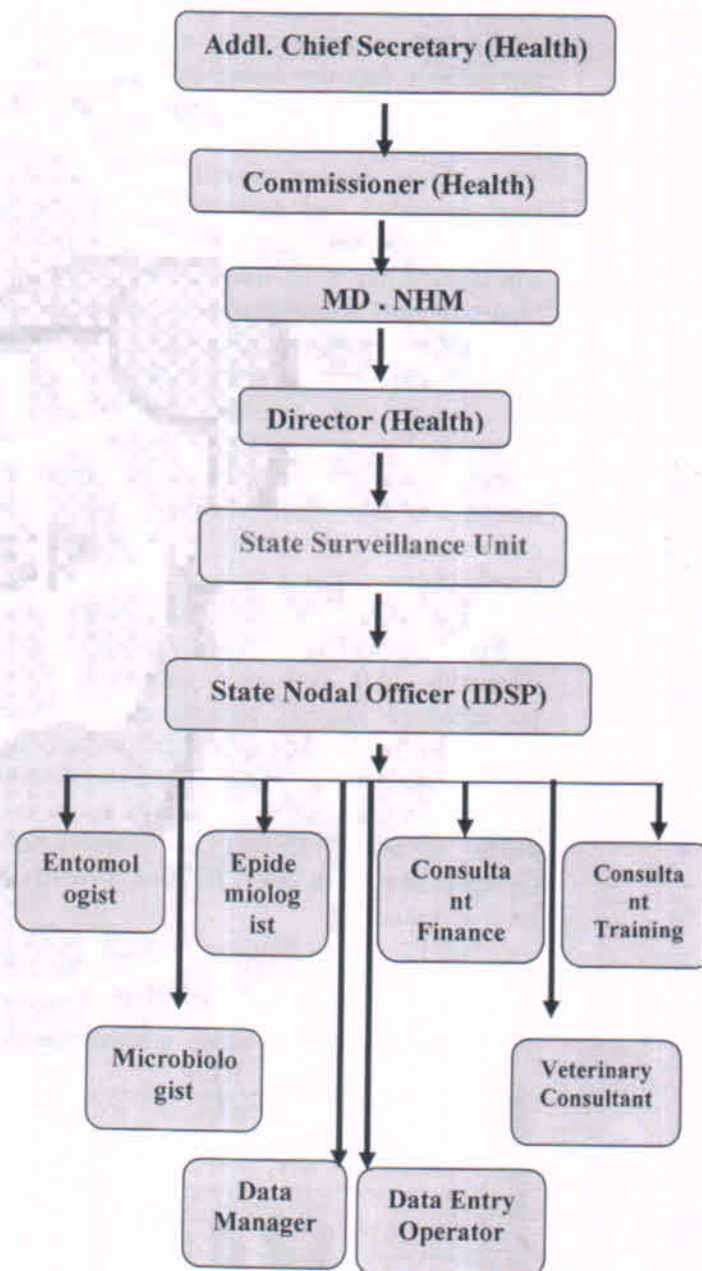
State nodal Officer is responsible for all activities and finance, State Epidemiologist, State Microbiologist, State Entomologist assists the State Nodal officer to monitor the IDSP activities. The Data Manager is responsible to compile and manage data along with alert generation. The Data Entry is managed by DEOs. Accountant is looking after finance.

The functions of the State Surveillance unit include:

- Collation and analysis of data received from districts and transmitting to Surveillance Unit..
- Coordinating activities of rapid Response teams and deputing them to the field.
- Monitoring and reviewing the activities of the district surveillance units including checks on validity of data, responsiveness and functioning of the laboratories
- Coordinating the activities of the state public health laboratories, medical colleges, and other state level institutions.

- Sending regular feedback to the District units on the trend analysis of data in the format Alert.
- Coordinating all training activities under the programme.
- Organizing meetings of the state IDSP sub-committee.

**Organogram of SSU, Assam**

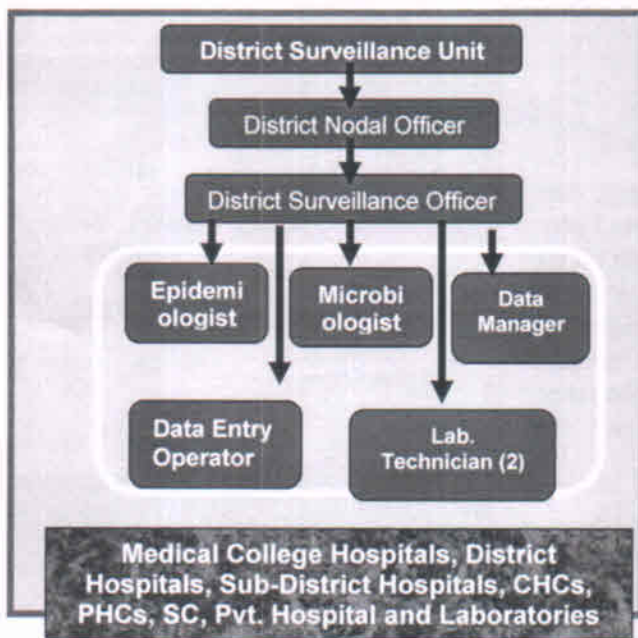


#### 4.2 District Surveillance Unit:

District Surveillance Units are established in all 27 districts. District Surveillance Officer is designated by Joint director of Health Services and notified by govt. of Assam is looking after IDSP activities in the district. District Surveillance Officer is assisted by Epidemiologist (1), Data Manager(1), Data Entry Operator(1).

The data compilation, analysis, alert generation and feedback has been done by data managers who is also responsible for management of IDSP portal in regards to districts level data. Data Entry is done by the DEOs dealing with disease surveillance activities.

Organogram of DSU



#### The functions of the district surveillance unit:

- Collation and analysis of data received from districts and transmitting to State Surveillance Unit.
- To Constitute rapid response teams and deputing them to the field whenever needed.
- Coordinating with public health laboratories, medical colleges, NGOs and private sector within the District.
- Sending regular feedback to the reporting units on analysis of data.
- Coordinating training and IEC activities within the district.
- Organizing meetings of the district IDSP committee.

#### 4.3 Medical colleges

Six Medical colleges (Guwahati, Dibrugarh, Silchar, Jorhat , Barpeta & Sonitpur) carry out surveillance activities and report directly to District surveillance Officer of the same district. In three Govt. Medical Colleges, viz-Guwahati Medical College & Hospital (GMCH), Assam Medical College & Hospital (AMCH), Silchar Medical College & Hospital(SMCH) IDSP unit established with IT equipments. Data Entry Operator enters surveillance data of Medical Colleges & Hospital in IDSP Portal on weekly basis. Another Three newly established Govt. Medical College & Hospital viz-Jorhat Medical College & Hospital and Fakuruddin Ali Ahmed Medical College & Hospital is established IDSP unit without VSAT.

#### 4.4 Private Sectors

150 private reporting units are submitting weekly surveillance report. The SSU has planned to arrange workshops with private sectors to increase the number of reporting units in year 2018-19.

#### 4.5 IDSP Committee

The state & district IDSP is a part of state/district health society. The state and district committee is responsible for the regular running of the program at the state/district level. The state surveillance committee is chaired by Commissioner & Secretary , health & FW deptt. , Govt. of Assam. The district IDSP committee is chaired by the Deputy Commissioner. State Surveillance officer notified as state IHR focal point and District Surveillance Officer notified as district IHR focal point.

#### 4.6 Reporting

Reporting formats developed by central surveillance unit had been continued in September 2009. The reporting formats "S", "P" and "L" as prescribed by Govt. of India have been reproduced in sufficient quantity and supplied to reporting units. After September, new P format was introduced by the CSU, the data entry in new format was started to perform immediately after its launch throughout the state.

There are total 4655 S reporting units (Syndromic surveillance), around 1135 P reporting

units (surveillance based on presumptive diagnosis) & 976 “L” reporting units (based on laboratory diagnosis) through out the state. This has included district and sub-district hospitals, CHCs, PHCs, SC and private hospitals & laboratories. Active surveillance is carried out by health Workers (male & Female) who collect the surveillance data at grass-root functionaries. 27 districts reported surveillance data on weekly basis in IDSP portal.

Every Wednesday all districts send weekly disease surveillance report to SSU, higher authority through E-mail/FAX. 22 nos. communicable diseases reported under IDSP Assam. EWS/Outbreak report reported immediately as soon as detected in district. Accordingly SSU send the weekly compile report to CSU and higher authority on weekly basis.

### 5. Human Resource under IDSP

One Epidemiologist, one Microbiologist, one Entomologist, one Data Manager and one Data Entry Operator sanctioned for State Surveillance Unit under Integrated Disease Surveillance Programme. For 27 nos. District Surveillance Units one Epidemiologist, one Data Manager and One Data Entry Operator sanctioned under IDSP. One post of Microbiologist at District priority lab Golaghat sanctioned in programme.

As per Govt. Letter no. T18015/150/2010-IDSP, dated 13th December 2010, up gradation of five District Microbiological Laboratory approved under NRHM and two Microbiologist already appointed. Recruitment of Epidemiologist and Microbiologist are being done by NRHM as per State Health Society decision. 3 nos. Data Entry Operates are appointed at Govt. Medical Colleges & Hospital viz-Guwahati Medical College & Hospital (GMCH), Assam Medical Colleges & Hospital (AMCH) & Silchar Medical Colleges & Hospital (SMCH). Two data Entry Operators in the new Govt. Medical Colleges are yet to be appointed. One Account Manager appointed at State HQ by State Health Society.

Table : Status on availability of human resource as on 30<sup>th</sup> June 2018

| HR at State Surveillance Unit, IDSP Assam |                       |            |             |         |
|---|-----------------------|------------|-------------|---------|
| Sl No                                     | Category              | Sanctioned | In Position | Vacancy |
| 1   | Epidemiologist        | 1          | 0           | 1       |
| 2   | Entomologist          | 1          | 1           | 0       |
| 3   | Microbiologist        | 1          | 0           | 1       |
| 4   | Veterinary Consultant | 1          | 1           |         |
| 5   | Training Consultant   | 1          | 1           |         |
| 6   | Account Manager       | 1          | 0           | 1       |
| 7   | Data Manager          | 1          | 1           | 0       |
| 8   | Data Entry Operator   | 1          | 1           | 0       |

| HR at District Surveillance Unit, IDSP Assam |                       |                                   |    |    |
|--|-----------------------|-----------------------------------|----|----|
| 1  | Epidemiologist        | 27                                | 3  | 24 |
| 2  | Microbiologist        | 14                                | 9  | 5  |
| 3  | Data Manager          | 27                                | 28 | 0  |
| 4  | Data Entry Operator   | 33 (including 6 Govt. Medcl.Colg) | 27 | 6  |
| 5  | Laboratory Technician | 20                                | 20 | 0  |

### 6. Training status under IDSP

The Training in IDSP is three-tiered:

- Master Trainers State and District Surveillance Officers and RRT members are trained at identified National level institutes.
- The Medical Officers and District Lab Technicians are trained by Master Trainers at State level.
- Health Workers & Lab Technician/Assistants at peripheral institutions are trained by District Surveillance officers/Medical Officers at District level.



### 6.1 Status of Training of Medical and Paramedical Staff: Training are completed under IDSP

**Training of RRT:** The training of 94 Members of State and District Rapid Response Team is completed from 27 districts of Assam by All India Institute of Hygiene & Public Health, Kolkata..



5<sup>th</sup> Batch ToT of RRT members

❖ **23 nos.** District Surveillance Officer is trained for 14 days FETP training. Out of this 6 nos. are already retired/promoted and 17 nos. District Surveillance Officers are in position, **11 nos.** of DSOs are yet to be trained for FETP training.

- Training for **3250 nos.** of Medical Officers already completed in 27 districts for 3 days for disease surveillance.

- One day training on ADD for District Surveillance Officers at state HQ for management & surveillance of ADD.

- Two days Workshop in Measles surveillance with DSOs at State HQ supported by WHO.

- **53.Nos.** of Physician/Administrative Head are trained for One day on IHR 2005 at state HQ.

- Two days Training for **7965 nos** of HW already completed in 27 districts. 8860 nos. HWs are yet to be trained.

- Training of Laboratory technician from District Public Health Laboratory for 23 districts for 6 days already completed with **44 nos.** participants in GMCH Microbiology deptt.

- **1051 nos.** Peripheral laboratory Technician are already trained for 3 days.

- 1584 nos. Doctors are trained in 14 districts for One day training on management of **Acute Diarrheal Disease** funded by UNICEF.

- **107 nos.** participants from Medical Officers from H&FW deptt./ CDPO from Social Welfare deptt./ Engineer from PHE deptt are trained in **Public Health in Emergencies** supported by UNICEF.

- Health Workers training on Surveillance & Primary Management on ADD is completed in 10 districts. (Viz- Barpeta, Darrang, Dibrugarh, Goalpara, Golaghat, Jorhat, Morigaon, Lakhimpur, Sivasagar, Sonitpur) supported by UNICEF.

- All the District Data Managers & Epidemiologist are trained on Data Management and IDSP portal.

- **1027 nos.** of Medical Officers are trained on IHR 2005 in 19 district (viz- Barpeta, Bongaigaon, Chirang, Darrang, Dhemaji, Dhubri, Dibrugarh, Golaghat, Jorhat, kamrup(M), Kamrup(R), Karbi Anglong, Karimganj, Lakhimpur, Morigaon, Nagaon, Nalbari, Sonitpur, Udalguri).

Table : Training status as on 30<sup>th</sup> June 2018

| Sl. No. | Category  | Training Days | Training Load | Trained |
|---------|---|---------------|---------------|---------|
| 1       | FETP training for District Surveillance Officer | 14 days       | 27            | 23      |
| 1       | Members of Rapid Response Team                  | 6 Days        | 124           | 94      |
| 3       | Medical Officers                                | 3 Days        | 3952          | 3167    |
| 4       | Health workers                                  | 2 Days        | 16812         | 7965    |
| 5       | District Laboratory Technician                  | 6 Days        | 55            | 45      |
| 6       | Peripheral Laboratory Technicians               | 3 Days        | 1220          | 1085    |

### 6.3 Annual Action Plan

Integrated Disease Surveillance Programme- Annual Action Plan for year 2012-13 had been prepared and submitted to Ministry of Health and Family Welfare, Government of India as a part of NRHM action plan after approval by governing body of state health mission.

## 7. Data Collection and Reporting under IDSP

7.1 To establish systems for data collection, reporting, analysis and feedback using information technology

### 7.2 Data Management status:

- ❖ State has continued weekly surveillance system established by CSU in year 2007. Hospital based passive surveillance data on cases and deaths of selected epidemic prone diseases and laboratory reports on confirmed cases were collected. In 2009 as per GOI guidelines, syndromic surveillance has been initiated at sub-center level.

- ❖ Data on presumptive surveillance are collected from outpatient and indoor registers of primary health center, community health center, sub district hospitals, district hospitals and medical college hospitals.

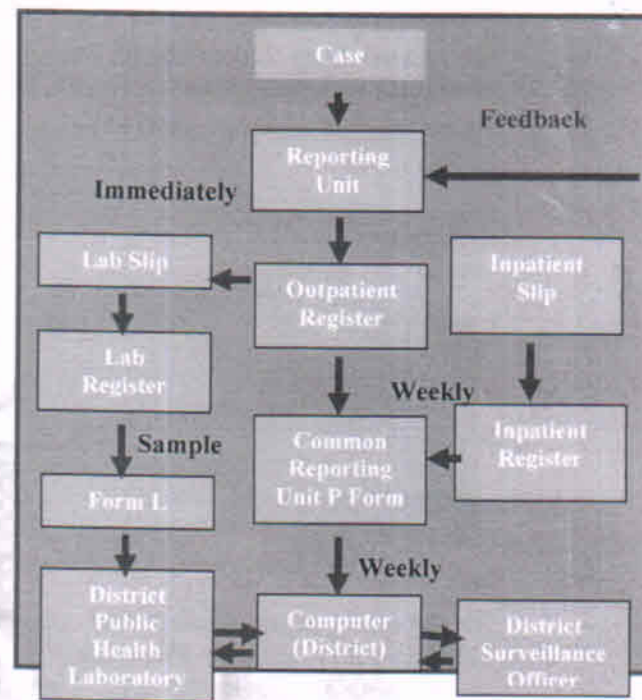
- ❖ Weekly reports are prepared by reporting units on every Monday which includes data of previous week beginning from Monday and ending of Sunday.

- ❖ Syndromic surveillance in form 'S' presumptive Surveillance in form 'P' and laboratory Surveillance in form "L" as prescribed by Central surveillance Unit-IDSP has been initiated.

- ❖ Weekly reports of S,P&L forms are submitted to Block Health officers and CDHO by reporting units on every Monday through e-mail /Hardcopy.

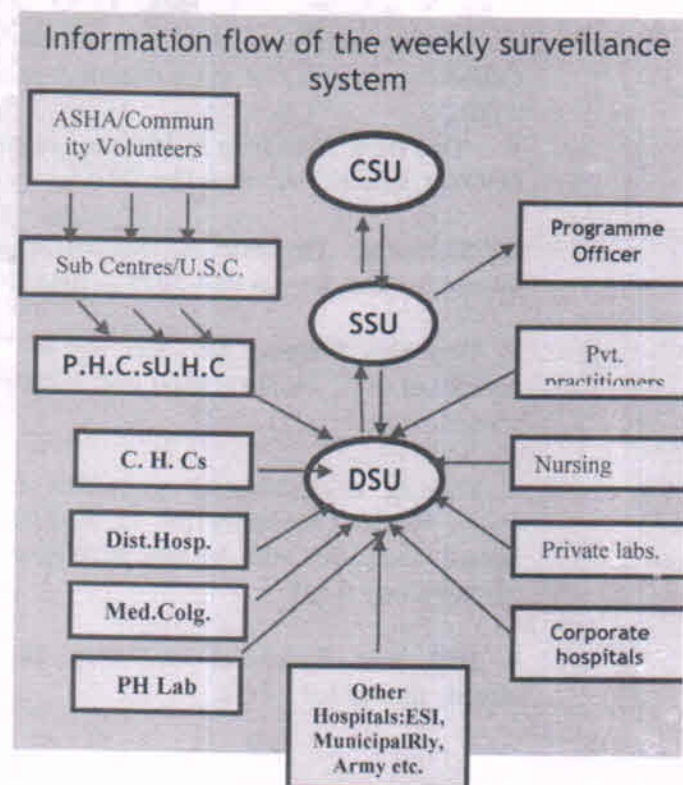
- ❖ Data entry is done at district/block level on every Monday to Wednesday and data transmitted online. State is using [www.idsp.nic.in](http://www.idsp.nic.in) portal which maintained by GOI.

- ❖ These data can be accessed by any or all reporting units, distributed and State Surveillance Units.



Source: IDSP Medical Officer Manual

### 7.3 Information flow in an integrated disease surveillance system:-



### 6.3 Annual Action Plan

Integrated Disease Surveillance Programme-Annual Action Plan for year 2012-13 had been prepared and submitted to Ministry of Health and Family Welfare, Government of India as a part of NRHM action plan after approval by governing body of state health mission.

## 7. Data Collection and Reporting under IDSP

7.1 To establish systems for data collection, reporting, analysis and feedback using information technology

### 7.2 Data Management status:

- ❖ State has continued weekly surveillance system established by CSU in year 2007. Hospital based passive surveillance data on cases and deaths of selected epidemic prone diseases and laboratory reports on confirmed cases were collected. In 2009 as per GOI guidelines, syndromic surveillance has been initiated at sub-center level.

- ❖ Data on presumptive surveillance are collected from outpatient and indoor registers of primary health center, community health center, sub district hospitals, district hospitals and medical college hospitals.

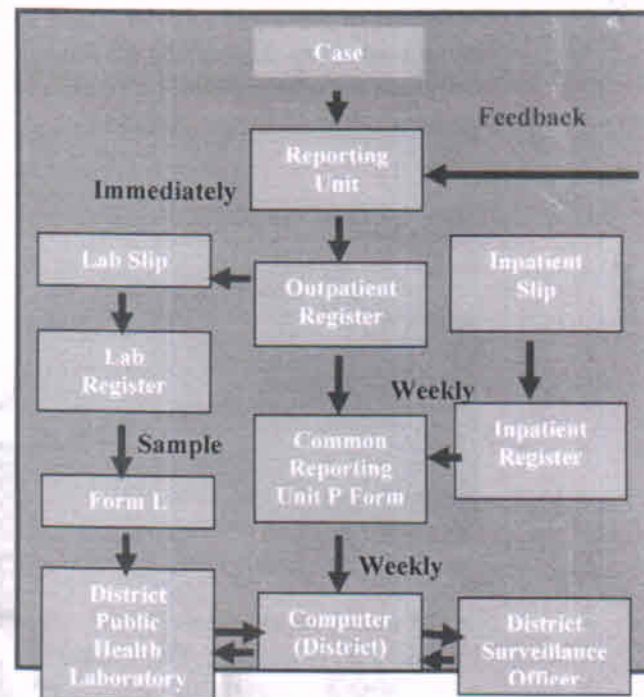
- ❖ Weekly reports are prepared by reporting units on every Monday which includes data of previous week beginning from Monday and ending of Sunday.

- ❖ Stndromic surveillance in form 'S' presumptive Surveillance in form 'P' and laboratory Surveillance in form "L" as prescribed by Central surveillance Unit-IDSP has been initiated.

- ❖ Weekly reports of S,P&L forms are submitted to Block Health officers and CDHO by reporting units on every Monday through e-mail /Hardcopy.

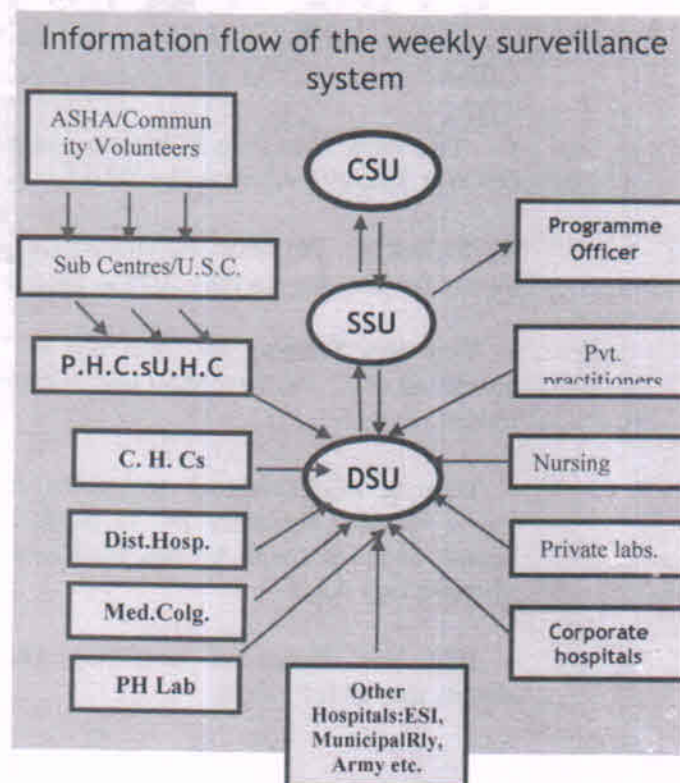
- ❖ Data entry is done at district/block level on every Monday to Wednesday and data transmitted online. State is using [www.idsp.nic.in](http://www.idsp.nic.in) portal which maintained by GOI.

- ❖ These data can be accessed by any or all reporting units, distributed and State Surveillance Units.



Source: IDSP Medical Officer Manual

### 7.3 Information flow in an integrated disease surveillance system:-



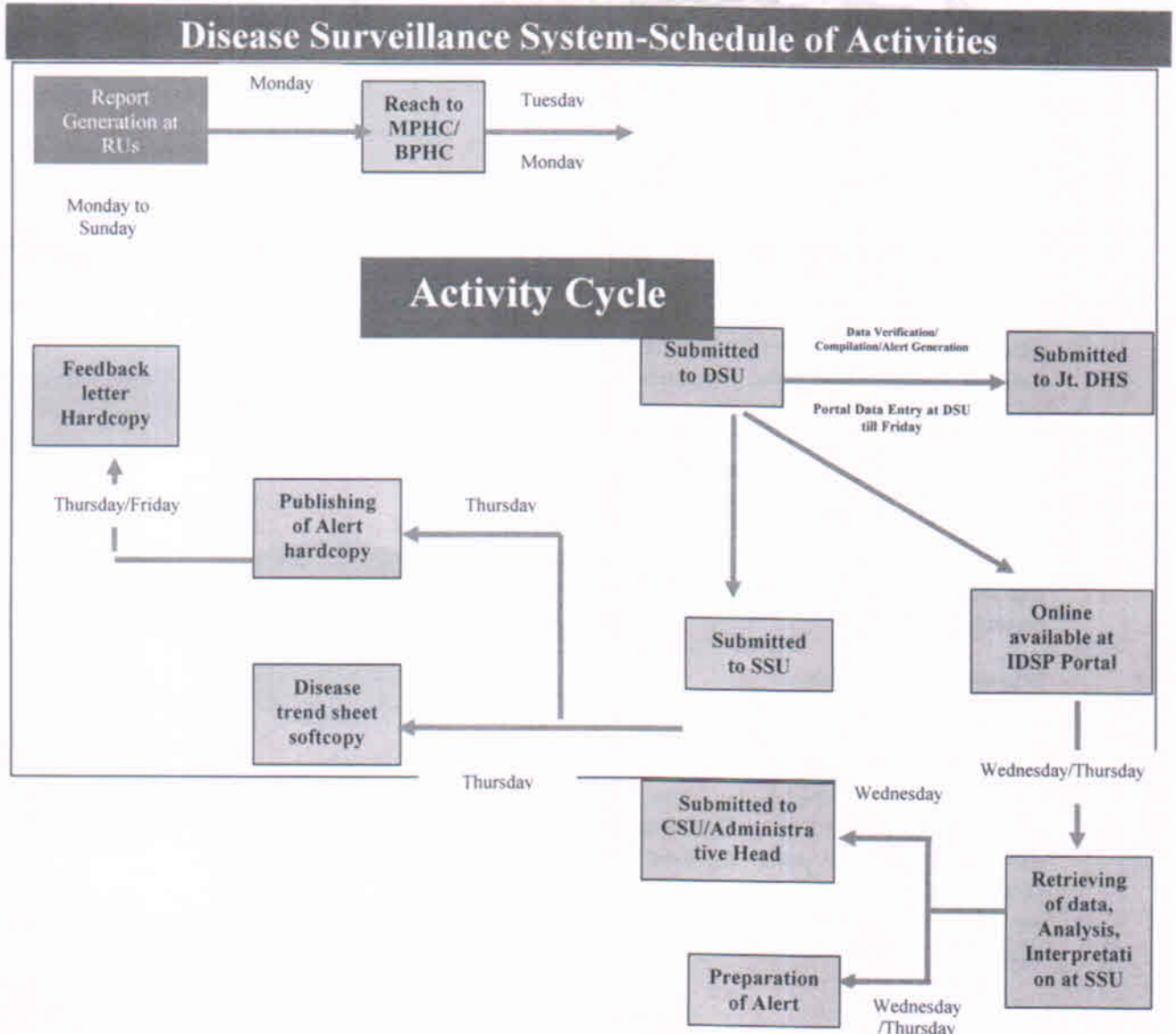
#### 7.4 Feedback:

- ❖ Feedback about disease trend , early warning Signal(EWS), Weekly alert to policy makers. Also provide feedback about RU reporting, RU Defailter , data Validation, false reporting to concern.
- ❖ Line list confirmation, Outbreak Investigation & Reporting Portal.
- ❖ Review Meeting for feedback at state & district level.

#### 7.5 Networking for Reporting:

Reporting formats developed by central surveillance unit had been continued in September 2009. The reporting formats S, P and L as prescribed by Govt. of India are used for providing information. After 2009, new P format was introduced by the CSU, the data entry in new format was started to perform immediately after its launch throughout the state.

There are 4651 S reporting units (syndromic surveillance), around 1100 P reporting units (surveillance based on presumptive diagnosis) & 945 L reporting units (based on laboratory diagnosis) throughout the state. This has included district and sub-district hospitals, CHCs, PHCs, SC and private hospitals & laboratories. Active surveillance is carried out by Health Workers (Male & Female) in both urban & rural areas who collect the surveillance data at grass-root functionaries.



## 7.5 Networking status of Private Labs under IDSP Assam as RUs:

### Networking with Private Sectors

Private sector capture more than 50% of OPD cases in comparison to govt. sector. Private sector has been also involved in state IDSP and encouraged for weekly reporting in PPP mode and their data are also very important for early warning signals and in detection of outbreaks. Orientation has been given to administrators and in-charge doctors of private/public sectors hospitals and private/corporate laboratories to increase the number of reporting units to develop good surveillance mechanism in the state.

### Hospital based surveillance:

**Importance of Surveillance in Hospitals:** Hospitals cater to large populations capture crucial data on many communicable diseases, the potential of causing large outbreaks, timely notification and report of sudden increase in the number of cases of an infectious disease or clustering of cases in an area can prevent spread of the outbreak.

### Key Stakeholders for surveillance:

Hospital superintendent is designated as Nodal Officer, Doctors (Clinicians), paramedical staff and laboratory staff.

### Key Activities:

Case definitions under IDSP are available at the OPD, Doctors sitting in OPD are writing provisional diagnosis and fill tally sheet daily. On the basis of weekly Tally sheet paramedical worker will fill the P form and Nodal Officer will monitor that data, if they see increase in any IDSP P form disease than they communicate the present status to IDSP Coordinator of Medical College and DSO. On the regular basis weekly data shared with the district authorities. After that DSO takes the action according to disease trend, pattern and EWS.

### Weekly data Analysis

SSU compile the weekly disease surveillance report and weekly data analysis done by Data Manager. Every Wednesday data collected from DSU and compile. Thursday/Friday analysis the data and check the IDSP portal for data entry of all 27 DSU. State Data Manager prepared a feedback report on Wednesday evening to DSU for percentage of RUs. Of S, P & L form reporting.

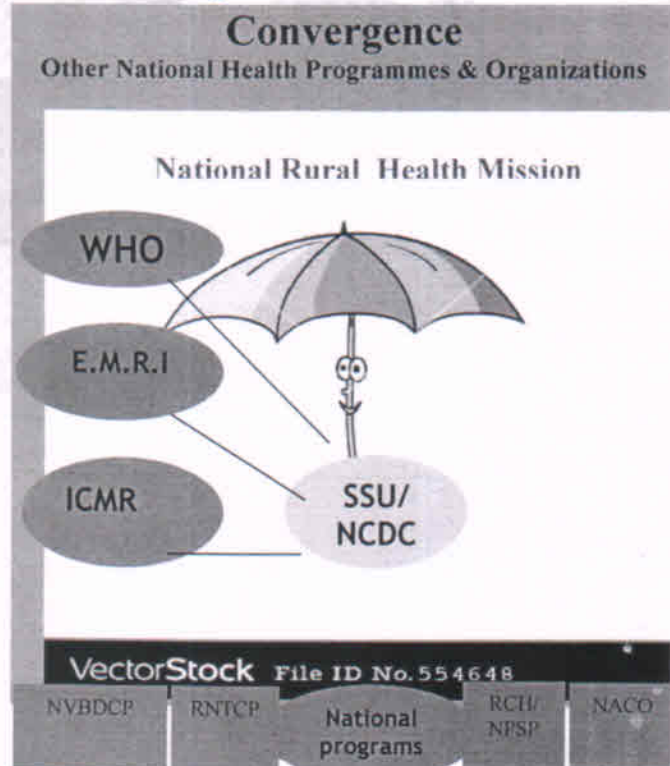
## 8. Strategies for Surveillance and Integration with other Departments under IDSP

### 8.1- Components & Strategy of IDSP:

To integrate and decentralize surveillance activities, networking is important for programs from bottom to top. Integration of the various vertical programs information flow into a single channel. Certainly the same staffs are reporting communicable diseases like Malaria, TB, JE, Hepatitis, etc. in all different formats. By integrating the flow of information, duplication can be minimized and workload can be reduced. Integration of data from Public sector as well as private sector gives true picture of disease pattern in community.

### 8.2- Integration with NHM program:

- ❖ Involvement of ASHA in active disease surveillance during outbreak .
- ❖ Involvement of exiting human resources under NRHM
- ❖ Provision of Additional manpower for IDSP.
- ❖ Use of flexible funds to improve disease surveillance at all levels.
- ❖ Involvement of Village Health Sanitation Committee to improve wash.
- ❖ Effective utilization of HMIS at all level.
- ❖ Monitoring and evaluation



### 8.3 Integration with NVBDCP program:

- ❖ All acute febrile illness those can cause outbreaks are included in MF-11 and has been regularly sent to State/Districts IDSP/NVBDCP officials.
- ❖ District Malaria Officer sends copy of reports to DSO on routinely bases.
- ❖ DSO also share IDSP data as well as weekly report to District Malaria Officer on routine basis.
- ❖ District Malaria Officer is part of the district RRT.

### 8.4 Integration with Other program:

#### • NACO

- ❖ Sentinel data regarding HBV, HCV and HIV is shared with IDSP.
- ❖ NACO BB lab facilities for confirmation of HBV, HCV is coordinated with IDSP.

#### • RNTCP

- ❖ Consultants under RNTCP help for routine disease surveillance.
- ❖ There is good coordination of work between QA Network of RNTCP and IDSP
- ❖ Adoption of Public-private partnership mode.

#### • NPSP

- ❖ Consultants under NPSP can help IDSP for effective polio surveillance.

## 9. Disease Surveillance under IDSP

### 9.1- Definition and Overview

Surveillance is defined as “ the ongoing Systematic collection, collation, analysis and interpretation of data, and the dissemination of information to those who need to know in order that action may be taken”.

Detecting disease and its distribution in time and space offers clues to the silent background phenomena of amplification and transmission of infectious agents. Surveillance is the first step in intervention and disease control which serves to

detect early outbreaks of diseases. Surveillance is also essential for the early detection of emerging (new) and re-emerging (resurgent) diseases. Emerging infectious diseases encompass those diseases which are caused by new pathogens (e.g. HIV/AIDS, V. Cholera O139, Hanta Virus, Ebola virus and recently novine Influenza A (H1N1). The reemerging diseases are those which are mainly due to the reappearance of pathogens previously under control (e.g. Yersinia/prevalence ( e.g. Malaria. Leptospirosis) are also included in the surveillance . The other categories of disease those need routine surveillance such as recognized diseases which are appearing in new territories ( e.g. dengue Hemorrhagic fever), zoonotic disease affecting humans (e.g. anthrax), and diseases due to pathogens showing newly acquired anti-microbiological resistance (e. g. typhoid fever).

**Community:** Represented by basic village –level services such as trained birth attendants, village leaders, school teachers, and village health workers (ASHA) or similar care provides.

**Health facility:** Defined by each country. For example , for surveillance purposes , all institutions with outpatient and in-patient facilities are defined as a “health facility”.

### 9.2 Importance of Disease Surveillance

Communicable disease are the most common causes of death, disability and illness in any region. While these disease present a large threat to the well-being of communities, there are well-known interventions that are available for controlling and preventing them.

■ Surveillance data can guide health personnel in the decision making needed to complement the proper strategies for disease control and lead to activities for preventing future cases.

■ Surveillance is a watchful, vigilant approach to information gathering that serves to improve or maintain the health of the population. A functional disease surveillance system is essential for defining problems and taking action. Using epidemiological methods in the service of surveillance equips district and local health staff to set priorities , plan interventions, mobilize and allocate resources and predict or provide early detection out breaks.



■ Surveillance is basically collecting the critical data about disease conditions so that action can be taken. Action may be in the form of improvement of services when gaps are identified or in the form of outbreak response when an outbreak is detected. The key output of a good surveillance system is the early detection of outbreaks.

■ Depending on the goal of the disease prevention program, the surveillance activity objectives guide program managers towards selecting data that would be the most useful to collect and use for making evidence-based decisions for public health actions.

■ A disease control program may want to know what progress is being made with its prevention activities. The program collects the data of various diseases including age, sex, and different time periods. If the program's goal is to prevent outbreaks, the surveillance unit can monitor the epidemiologist of a particular disease so that the program can more accurately identify where the next cases might occur or the populations at highest risk. In addition, improving laboratory support for disease surveillance is essential for confirming causes of illness and early detection of outbreaks.

■ Investigation and laboratory confirmation provide the most precise information about where action must be taken to achieve an elimination target. Monitoring populations at highest risk for a particular disease can help to predict future outbreaks and focus prevention activities in the areas where they are most needed. Too often, however, surveillance data for communicable disease is neither reported nor analyzed. As a result, the opportunity to take action with an appropriate public health response and save lives is lost. Even in cases where adequate information is collected, it is often not available for use at the local level.

■ The Outbreaks of malaria in 2007, cholera in 2007 and H1N1 in 2009 and Dengue 2010 highlighted the urgent need for disease surveillance system so that early warning signals are recognized and appropriate control measures are initiated in a timely manner. The importance of surveillance can be understood with the more recent example of pandemic Influenza A (H1N1) where routine surveillance has been playing crucial role to curb this health problem.

### 9.3 Importance of Disease Surveillance

These guidelines assume that all levels of the health system are involved in conducting surveillance activities for detecting and responding to priority disease and conditions and include the following:

**Step 1- Identify cases.** Using basic, standard case definitions, identify priority diseases and conditions.

**Step 2-Report.** Suspected cases or conditions to the next level. If this is an epidemic prone disease, or a disease targeted for control, elimination or eradication, investigate and respond immediately.

**Step 3-Analyze and interpret data.** Compile the data, and analyze it for trends. Compare information with previous periods and summarize the results.

**Step 4-Investigate and confirm suspected cases and outbreaks.** Take action to ensure that the case or outbreak is confirmed including laboratory confirmation including laboratory confirmation wherever it is feasible. Gather evidence about what may have caused the outbreak and use it to select appropriate control and prevention strategies.

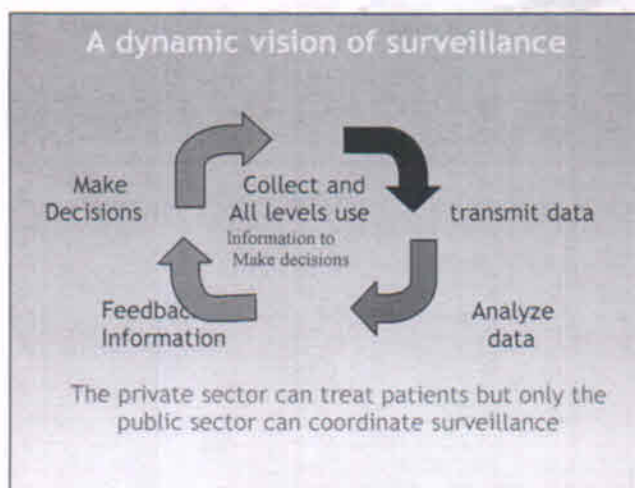
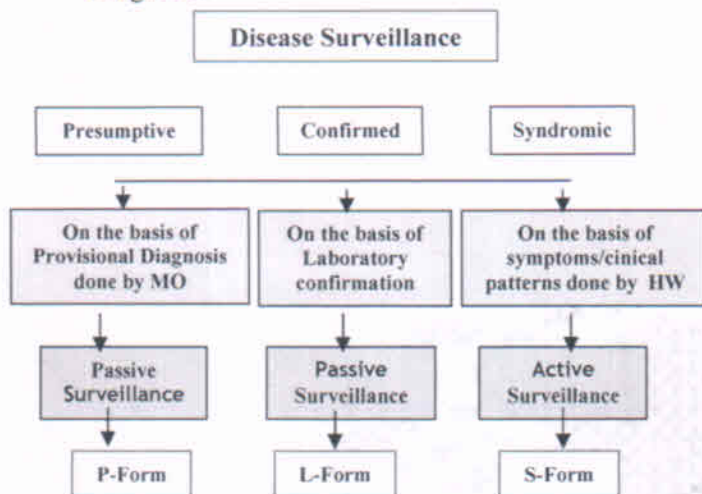
**Step 5- Respond.** Mobilize resources and personnel to implement the appropriate outbreak or public health response.

**Step 6- Provide feedback.** Encourage future cooperation by communicating with levels that reported outbreaks and cases about the investigation outcome and success of response efforts.

**Step 7- Evaluate and improve the system.** Assess the effectiveness of the surveillance system, in terms of timeliness, quality of information, preparedness, thresholds, case management and overall performance. Take action to correct problems and make improvements. There is a role for each surveillance function at each level of the health system. The levels are defined as follows.

### Types of Surveillance in IDSP as per New System

- Under GOI's new Surveillance System, depending upon level of expertise and specificity, disease surveillance in IDSP will be following three categories:



#### 9.4 Strategies for surveillance:

- Decentralization:** Currently the process of data entry is being performed only at district and state level ; however , in near future the facility could be extend to the block level to make the process of surveillance more accurate and simple.
- Co-ordination:** All the relevant agencies should have coordination to make the process of surveillance and outbreak investigation more accurate.

- Capacity building of the staff: Ongoing training and education is necessary to improve the quality of task performed by public health staff.

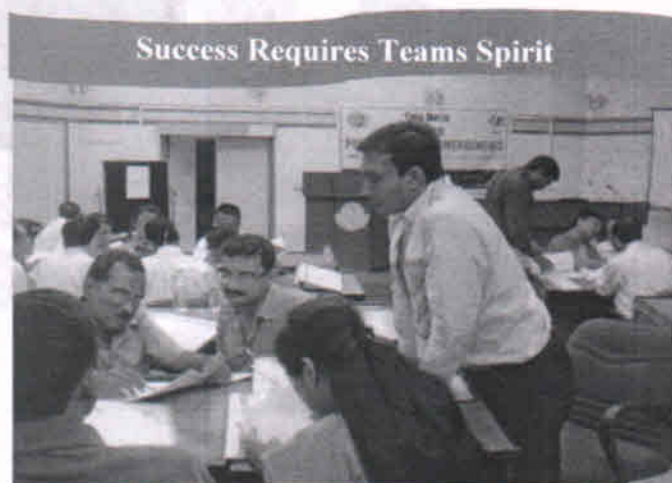
- Rapid Response Teams at district & Peripheral Level: Ideal RRT should be identified and active throughout the district to improve the quantity of outbreak investigation along with preventing and controlling measures.

- Integration of all activities from grass root level (sub centre) up to state is most important. Integration of private and public health care agencies, integration of both communicable and non communicable diseases, integration both rural & urban health system and integration of both private and public medical colleges to improve the disease surveillance.

- Strengthening labs: The referral lab network plan is in process for approval.

- Improve communication facilities with use of information technology.

- Rated disease Surveillance Programme.



A training program on Public Health in Emergencies



### Health Infrastructure involved under IDSP:

| Sl. no       | District   | Block      | CHC        | MPHC       | Public Sector Hospitals including ID, General and Med. Colg. Hosp. | Govt. Lab  | Private Lab | SC          |
|--------------|------------|------------|------------|------------|--|------------|-------------|-------------|
| 1            | Baksa      | 6          | 45         | 17         | 1  | 36         | 0           | 157         |
| 2            | Barpeta    | 8          | 6          | 20         | 4  | 53         | 3           | 264         |
| 3            | Bongaigaon | 4          | 3          | 16         | 1  | 29         | 4           | 107         |
| 4            | Chirang    | 2          | 27         | 6          | 1  | 25         | 1           | 76          |
| 5            | Cachar     | 8          | 1          | 7          | 1  | 28         | 0           | 76          |
| 6            | Darrang    | 4          | 3          | 14         | 1  | 18         | 3           | 164         |
| 7            | Dhemaji    | 5          | 3          | 12         | 1  | 22         | 2           | 98          |
| 8            | Dhubri     | 8          | 5          | 18         | 1  | 26         | 0           | 246         |
| 9            | Dibrugarh  | 6          | 5          | 10         | 5  | 27         | 0           | 231         |
| 10           | Dima Hasao | 3          | 2          | 2          | 1  | 14         | 2           | 65          |
| 11           | Goalpara   | 5          | 1          | 14         | 1  | 31         | 0           | 151         |
| 12           | Golaghat   | 5          | 5          | 25         | 1  | 38         | 0           | 144         |
| 13           | Hailakandi | 4          | 1          | 5          | 1  | 12         | 0           | 104         |
| 14           | Jorhat     | 7          | 5          | 18         | 1  | 33         | 0           | 144         |
| 15           | Kamrup (R) | 12         | 74         | 23         | 1  | 69         | 0           | 273         |
| 16           | Kamrup (M) | 7          | 74         | 8          | 3  | 47         | 21          | 52          |
| 17           | K Anglong  | 8          | 5          | 23         | 2  | 47         | 0           | 145         |
| 18           | Karimganj  | 6          | 1          | 7          | 1  | 24         | 0           | 251         |
| 19           | Kokrajhar  | 4          | 2          | 17         | 2  | 31         | 0           | 158         |
| 20           | Lakhimpur  | 6          | 6          | 11         | 1  | 23         | 5           | 156         |
| 21           | Morigaon   | 3          | 2          | 3          | 0  | 27         | 0           | 125         |
| 22           | Nagaon     | 11         | 10         | 23         | 1  | 57         | 1           | 364         |
| 23           | Nalbari    | 4          | 6          | 27         | 1  | 39         | 3           | 121         |
| 24           | Sivasagar  | 8          | 2          | 19         | 4  | 45         | 4           | 223         |
| 25           | Sonitpur   | 7          | 4          | 22         | 1  | 52         | 0           | 279         |
| 26           | Tinsukia   | 4          | 5          | 10         | 1  | 24         | 0           | 162         |
| 27           | Udalguri   | 3          | 3          | 10         | 1  | 21         | 1           | 142         |
| <b>Total</b> |            | <b>158</b> | <b>306</b> | <b>387</b> | <b>40</b>  | <b>898</b> | <b>50</b>   | <b>4478</b> |



**Case Definitions of Health Conditions under surveillance-**

| Sl. No. | Disease                  | Modified case definition (for P-form only)  |
|---------|--------------------------|---|
| 1.      | Diarrhoeal               |   |
| A       | Acute Diarrhoeal Disease | Acute watery diarrhoeal (passage of 3 or more loose or watery stools in the past 24 hours) with or without dehydration.<br><br>(Source: Medical Officers' Manual, IDSP, 2006)   |
| B       | Cholera                  | <ul style="list-style-type: none"> <li>■ In an area where the disease is not known to be present: Severe dehydration or death from acute watery diarrhea in a patient aged 5 years or more.</li> <li>■ In an area where Cholera is endemic: Acute watery diarrhea, with or without vomiting in a patient aged 5 years or more.</li> <li>■ In an area where there is a cholera epidemic: Acute watery diarrhea, with or without vomiting, in any patient.</li> </ul><br>(Source: Medical Officers' Manual, IDSP, 2006) |
| 2.      | Bacillary Dysentery      | Acute diarrhea with visible blood in the stool.<br><br>(Source: Medical Officers' Manual, IDSP, 2006)   |
| 3.      | Acute Viral Hepatitis    | Acute illness typically including acute jaundice, dark urine, anorexia, malaise, extreme fatigue, and right upper quadrant tenderness. Biological signs include increased urine urobilinogen and >2.5 times the upper limit of serum alanine aminotransferase.<br><br>(Source: WHO Recommended Surveillance Standard, 1999)   |
| 4.      | Enteric Fever            | Any patient with fever for more than one week and with any two of the following: <ul style="list-style-type: none"> <li>■ Toxic look</li> <li>■ Coated tongue</li> <li>■ Relative bradycardia</li> </ul>  |

|    |              |  |
|----|--------------|--|
|    |              | <ul style="list-style-type: none"> <li>■ Splenomegaly</li> <li>■ Exposure to confirmed case</li> <li>■ Clinical presentation with complications e.g. GI bleeding, perforation, etc.</li> </ul><br>(Source: Medical Officers' Manual, IDSP, 2006)   |
| 5. | Malaria      | <p>A case of fever which may be accompanied with any of the following:</p> <ul style="list-style-type: none"> <li>■ Headache, backache, chills, rigors, sweating, myalgia, nausea and vomiting</li> <li>■ Splenomegaly and anemia</li> <li>■ Generalized convulsions, coma, shock, spontaneous bleeding, pulmonary edema, renal failure and death (untreated falciparum infection)</li> </ul> <p>Any case of fever in an endemic area may be considered as malaria.</p><br>(Source: NVBDCP Guidelines)   |
| 6  | Dengue       |  |
| A. | Dengue Fever | <p>An acute febrile illness of 207 days duration with two or more of the following:</p> <ul style="list-style-type: none"> <li>■ Headache,</li> <li>■ Retro-orbital pain.</li> <li>■ Myalgia,</li> <li>■ Arthralgia,</li> <li>■ Rash</li> <li>■ Haemorrhagic manifestations,</li> <li>■ Leucopenia</li> </ul> <p>And with one or more of the following:</p> <ul style="list-style-type: none"> <li>■ Supportive serology (reciprocal haemagglutination-inhibition antibody titer, comparable IgG EIA titer or positive IgM antibody test in late acute or convalescent-phase serum specimen).</li> <li>■ Epidemiologically linked with a confirmed case of dengue fever (occurrence</li> </ul> |

|                |                                |  |  |       |   |
|----------------|--------------------------------|--|--|-------|---|
|                |                                | at same location and time as other confirmed cases of dengue fever).<br><br>(Source: NVBDCP Guidelines)  |  | (DSS) | and weak pulse, and narrow pulse pressure ( $\leq 20$ mm Hg) or hypotension for age, cold clammy skin and altered mental status.<br><br>(Source: Medical Officers' Manual, IDSP, 2006)  |
| <b>SL. No.</b> | <b>Disease</b>                 | <b>Modified case definition (for P-form only)</b>  |  |       |   |
| B.             | Dengue Hemorrhagic Fever (DHF) | A probable or confirmed case of dengue with the following signs:<br>❖ Haemorrhagic tendencies evidence by one or more of the following:<br>• Positive tourniquet test<br>• Petechiae, echymoses or purpura<br>• Bleeding mucosa, gastrointestinal tract, injection sites or other<br>• Haematemesis or melaena<br>❖ And thrombocytopenia (100,000 platelets or less permm <sup>3</sup> )<br>❖ And evidence of plasma leakage due to increased vascular permeability, manifested by one or more of the following:<br>▪ 20% rise in average haematocrit for age and sex<br>▪ 20% drop in haematocrit following volume replacement treatment compared to base line.<br>▪ Signs of plasma leakage (pleural effusion, ascites, and hypoproteinaemia)<br><br>(Source: NVBDCP Guidelines) |  | 7.    | <b>Chikungunya</b><br>An acute illness characterized by sudden onset of fever with any of the symptoms like headache, backache, photophobia, severe arthralgia, rash and positive serology (when single serum sample is obtained during acute phase or during the convalescence).<br><br>(Source: WHO Recommended Surveillance Standard, 1999)  |
|                |                                |  |  | 8     | <b>Acute encephalitis Syndrome</b><br>A person of any age with acute onset of fever and any of the following:<br>■ Change in mental status (confusion, disorientation, coma, inability to talk)<br>■ New onset of seizures (excluding simple febrile seizures)<br>■ Other early clinical findings like an increase in irritability, somnolence or abnormal behavior greater than seen with usual febrile illness.<br>Probable JE ( Japanese Encephalitis): A suspected case that occurs in close geographic and temporal relationship to a laboratory-confirmed case of JE, in the context of an outbreak.<br>(Source: NVBDCP Guidelines) |
|                |                                |  |  | 9     | <b>Meningitis</b>   |
| C.             | Dengue Shock Syndrome          | All the above criteria, plus evidence of circulatory failure manifested by rapid   |  | A.    | <b>Meningococcal Disease</b><br>An illness with sudden onset of fever ( $>38.5$ C rectal or $38.0$ C axillary) and one or more of the following:  |



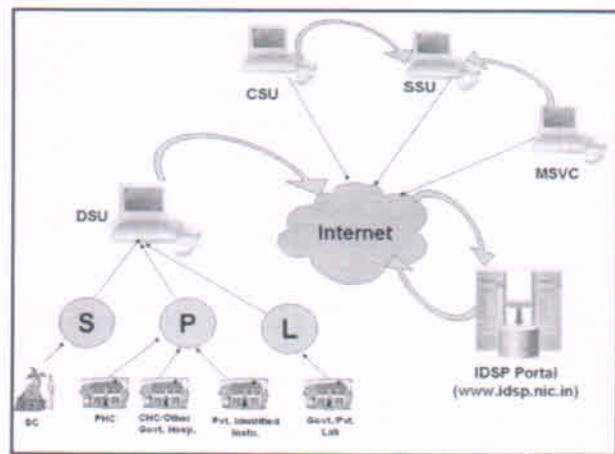
|     |                  |   |  |     |  |
|-----|------------------|---|--|-----|--|
|     |                  | <ul style="list-style-type: none"> <li>■ Neck stiffness</li> <li>■ Altered consciousness</li> <li>■ Other meningeal sign or p</li> <li>■ Turbid CSF (with or without positive Gram stain) or</li> <li>■ Ongoing epidemic and epidemiological link to a confirmed case</li> </ul> <p>In patients &lt;1 year, suspect meningitis when fever accompanied by bulging fontanelle.</p> <p>(Source: WHO Recommended Surveillance Standard, 1999)</p>   |  |     | <ul style="list-style-type: none"> <li>■ (Source: Immunization Handbook for Medical Officers, MOHFW)</li> </ul>  |
| B.  | Viral Meningitis | <p>A case with fever <math>\geq 38.5</math> C and one or more of the following:</p> <ul style="list-style-type: none"> <li>■ Neck stiffness, severe unexplained headache, neck pain</li> </ul> <p>And 2 or more of the following</p> <ul style="list-style-type: none"> <li>■ Photophobia, nausea, vomiting, abdominal pain, pharyngitis with exudates</li> </ul> <p>For children &lt;2 years of age, a case is defined as a child with fever <math>\geq 38.5</math> C and irritability or bulging fontanelle.</p> <p>(Source: WHO Recommended Surveillance Standard, 1999)</p> |  | 12. | <p><b>Pertusis</b></p> <p>A person with a cough lasting 2 weeks with at least one of the following:</p> <ul style="list-style-type: none"> <li>■ Paroxysms (i.e. fits) of coughing</li> <li>■ Inspiratory whooping</li> <li>■ Post-tussive vomiting (i.e. vomiting immediately after coughing) without other apparent cause.</li> </ul> <p>■ (Source: Immunization Handbook for Medical Officers, MOHFW)</p> |
| 10. | Measles          | <p>Any person with:</p> <ul style="list-style-type: none"> <li>■ Fever and</li> <li>■ Maculopapular rash lasting for more than 3 days and</li> <li>■ Cough or coryza (i.e. running nose) or conjunctivitis (i.e. red eyes).</li> </ul> <p>(Source: Immunization Handbook for Medical Officers, MOHFW)</p>   |  | 13. | <p><b>Chicken pox</b></p> <p>A febrile illness with acute onset of diffuse (generalized) maculopulovesicular rash without other apparent cause.</p> <p>(Source: Manual for surveillance of vaccine Preventable Diseases, 3<sup>rd</sup> Edition, 2002, CDC)</p>  |
| 11. | Diphtheria       | <p>An illness of the upper respiratory tract characterized by the following:</p> <ul style="list-style-type: none"> <li>■ Laryngitis or pharyngitis or tonsillitis</li> <li>■ And adherent membranes of tonsils, pharynx and/or nose.</li> </ul>  |  | 14. | <p><b>Fever of Unknown Origin (PUO)</b></p> <p>Fever of more than 101F (38.3C), either continuous or intermittent, for a least two weeks, or Fever above 101F with no known cause even after extensive diagnostic testing</p> <p>(Source: <a href="http://www.umm.edu/altmed/articles/fever">www.umm.edu/altmed/articles/fever</a>)</p>  |
|     |                  |   |  | 15. | <p><b>Allness (ARI)/Influenza Like Illness (ILI)</b></p> <p>A person with sudden onset of fever of &gt;38C and cough or more throat in the absence of other diagnosis.</p> <p>(Source: WHO Recommended Surveillance Standards, 1999)</p>   |

|     |                  |  |  |     |  |   |
|-----|------------------|--|--|-----|--|---|
| 16. | <b>Pneumonia</b> | <p>Any case clinically diagnosed as pneumonia with symptoms of fever and cough and/or difficult breathing <math>\pm</math> chest X-ray confirmation.</p> <p>Or</p> <p>In a child-</p> <p>Pneumonia: Cough or difficult breathing and</p> <ul style="list-style-type: none"> <li>• Breathing rate &gt;50/minute for infant aged 2 months to &lt;1 year</li> <li>• Breathing rate &gt;40/minute for child aged 1 to 5 years and no chest indrawing, stridor or danger signs</li> </ul> <p>Severe Pneumonia: Cough or difficult breathing + any general danger sign or chest indrawing or stridor in a calm child.</p> <p>(General danger signs: For children aged 2 months to 5 years, the four general danger signs are unblable to drink/breast feed, vomit everything, convulsions, and lethargic/unconscious)</p> <p>(Source: WHO Recommended Surveillance Standard, 1999;IMNCI)</p> |  | 17. | <b>Leptospirosis</b>                               | <p>Acute febrile with headache, myalgia and prostration associated with any of the following:</p> <ul style="list-style-type: none"> <li>■ Conjunctival suffusion</li> <li>■ Meningeal irritation</li> <li>■ Anuria or oliguria and/or proteinuria</li> <li>■ Jaundice</li> <li>■ Haemorrhages (from the intestines, lung)</li> <li>■ Cardiac arrhythmia or failure</li> <li>■ Skin rash</li> </ul> <p>And a history of exposure to infected animals or an environment contaminated with animal urine.</p> <p>Other common symptoms include nausea, vomiting, abdominal pain, diarrhea and arthralgia.</p> <p>(Source: WHO Recommended Surveillance Standard)</p> |
|     |                  |  |  | 18. | <b>Acute Flaccid Paralysis (&lt;15 yrs of age)</b> | <p>A case of AFP is defined as any child aged &lt;15 years who has acute onset of flaccid paralysis for which no cause (such as severe trauma or electrolyte imbalance) is found and which is epidemiologically linked with a case of polio. Any person with:</p> <p>(Source: Immunization Handbook for Medical Officers, MOHFW)</p>  |
|     |                  |  |  | 19. | <b>Diphtheria</b>                                  | <p>An illness of the upper respiratory tract characterized by the following:</p> <ul style="list-style-type: none"> <li>■ Laryngitis or pharyngitis or tonsillitis</li> <li>■ And adherent membranes of tonsils, pharynx and/or nose.</li> </ul> <p>(Source: Immunization Handbook for MO, MOHFW)</p>   |

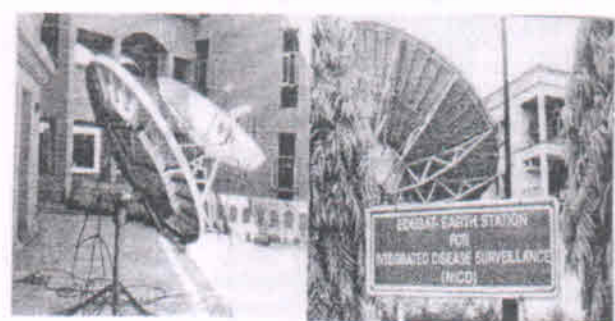
# 10. IT use under IDSP

## 10.1. EDUSATs

The state has received 24 EDUSATs till now, to additional EDUSATs are requested. The student end facility is provided to all the EDUSATs.



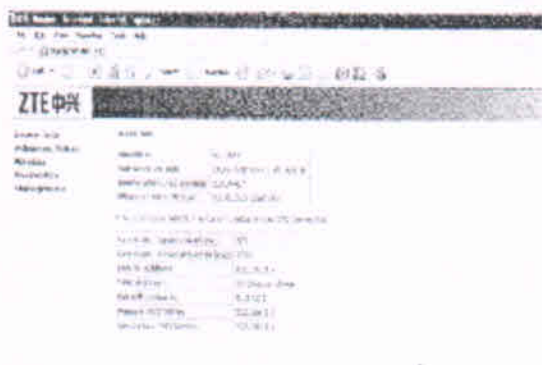
Source: IDSP Data Manager Manual



EDUSAT Installation Site

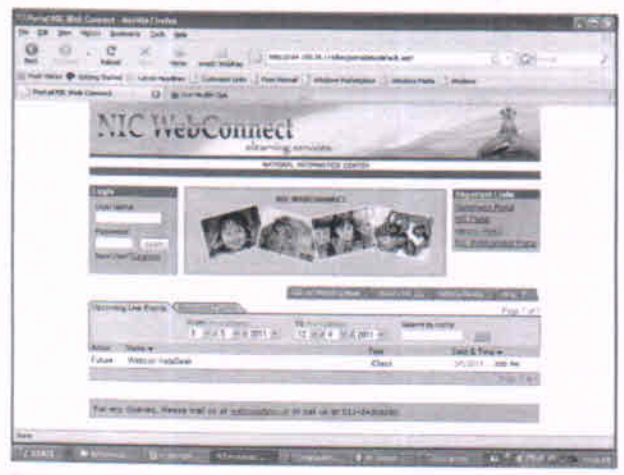
Data Validation & communication at SSU

## 10.2. VPN :



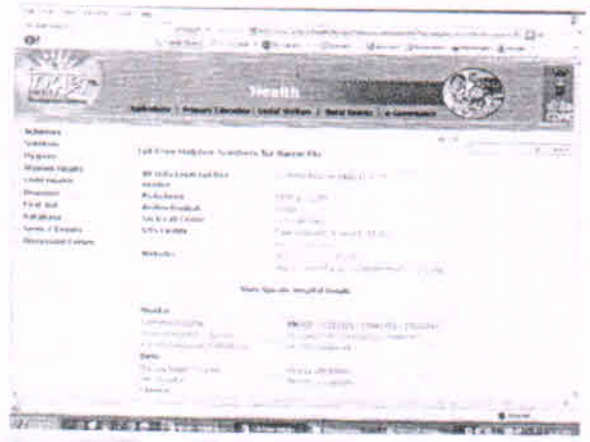
Used for training and two-way communication

## 10.3. Broad Band :



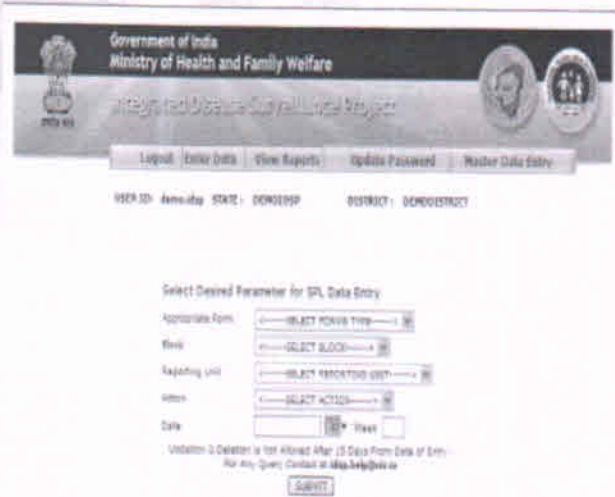
Used for exchange of information and data entry

## 10.4. 1075 Toll Free Number:



Toll free no. 1075 used for reporting

## 10.5. IDSP Portal



IDSP Portal

## 11. District Priority laboratory under IDSP

### Strengthening of Public Health Laboratories:

- Already 14 District priority lab being strengthened for diagnosis of epidemic prone diseases at Golaghat, Dhubri, Lakhimpur, Goalpara, Nalbari, Nagaon, Sivasagar, Tinsukia, K Anlong & Kamrup Metro District, Dima Hasao, Dhemaji, Darrang, Kokrajhar.
- This year 2 approved in FY 2018-19 viz- Bongaigaon, Udalguri District.

### Strengthening of State Referral Laboratories:

- Establish referral lab network in 5 Govt. Medical Colleges viz-GMCH, AMCH, SMCH, JMCH, FAAMCH for investigation of outbreaks with specific districts to each SRL.
- This year TMCH approved in FY 2018-19 as SRL.

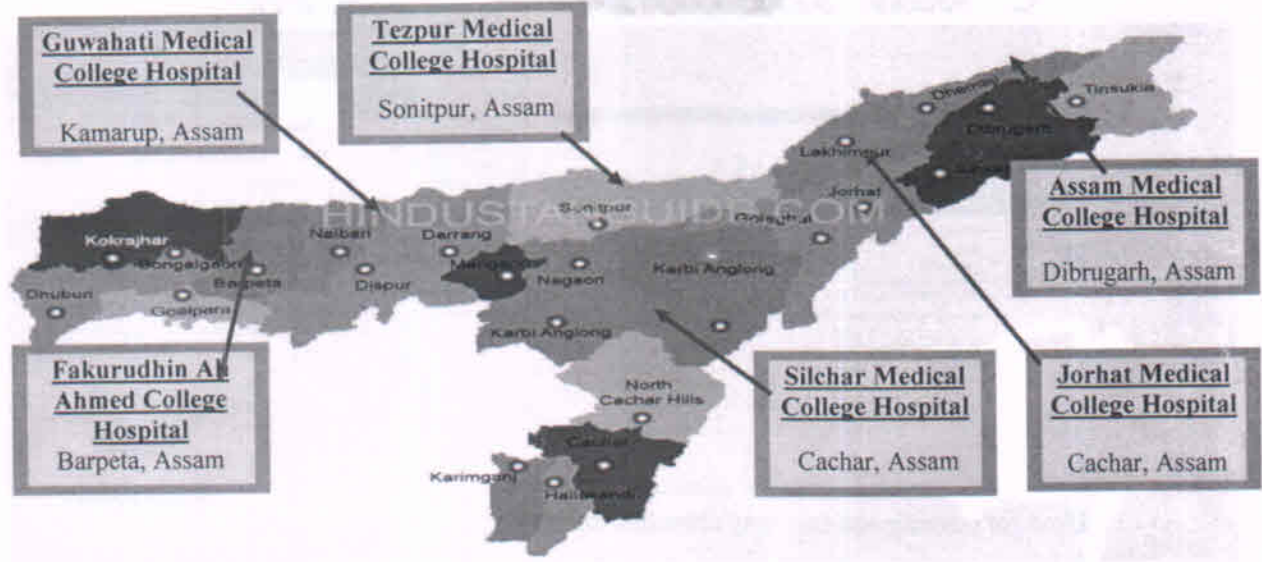
District laboratories are being strengthened for diagnosis of epidemic prone diseases in a phased manner. These labs are being supported by trained manpower, funds for essential equipment and an annual grant of Rs 2 lakh per annum per lab for reagents and consumables. A State based referral laboratory network has been established by utilizing the existing functional labs in the identified medical colleges and other major centers in the states and linking them with adjoining districts for providing diagnostic services for epidemic prone diseases during outbreaks. Presently this network is functional in 5 Govt. Medical Colleges in Assam. These labs are being supported by trained manpower, funds an annual grant of Rs 2 lakh per annum per lab for reagents and consumables.

| Sl. No. | Name of the Diseases         | Name of the test               |
|---------|------------------------------|--------------------------------|
| 1       | Acute Encephalitis Syndromes | IgM Elisa                      |
| 2       | Cholera                      | Culture for Vibrio cholera     |
| 3       | Dengue                       | IgM Elisa                      |
| 4       | Diphtheria                   | Diphtheria culture             |
| 5       | Enteric Fever                | Typhi Dot Test                 |
| 6       | Leptospirosis                | Rapid Dot Test                 |
| 7       | Measles                      | IgM Elisa                      |
| 8       | Meningococcal Meningitis     | Rapid Latex Agglutination Test |
| 9       | Viral Hepatitis A & E        | IgM Elisa                      |

### Test Done at DPHL:

Table: Govt. Medical Colleges in Assam State with Relevant Districts

| S No | Name of Medi. Cole.                  | District  | District Covered |
|------|--------------------------------------|-----------|------------------|
| 1    | Guwahati Medical College Hospital    | Guwahati  |                  |
| 2    | Assam Medical College Hospital       | Dibrugarh |                  |
| 3    | Silchar Medical College Hospital     | Cachar    |                  |
| 4    | Jorhat Medical College Hospital      | Jorhat    |                  |
| 5    | Fakrudhin Ali Ahmed College Hospital | Barpeta   |                  |
| 6    | Tezpur Medical College Hospital      | Sonitpur  |                  |



## Financial Guidelines for FY 2018-19 under IDSP Assam

### Activities under IDSP

- ❖ HR
- ❖ Training
- ❖ Laboratory Support
- ❖ Operational Cost

Budget Head:

**Total Approval amount for all activities under IDSP Assam as per RoP FY 2018-19**

| ASSAM RoP 2018-19 | Particulars                    | Quantity | RoP     |                               | Owner of the Activities |                   | State HQ Allocation |                    |                     | District Total |                    |                     | Total Allocation against 27 Districts |                    |                     |         | Remarks |
|-------------------|--------------------------------|----------|---------|-------------------------------|-------------------------|-------------------|---------------------|--------------------|---------------------|----------------|--------------------|---------------------|---------------------------------------|--------------------|---------------------|---------|---------|
|                   |                                |          | 2018-19 | Total Approval, 2018-19 (A+B) | At State HQ             | At District Level | Ph y. Target        | Unit Cost (in Rs.) | Fresh RoP approvals | Ph y. Target   | Unit Cost (in Rs.) | Fresh RoP approvals | Ph y. Target                          | Unit Cost (in Rs.) | Fresh RoP approvals | in lakh |         |
|                   | <b>IDSP</b>                    |          | 623.035 | 623.035                       | 623.035                 | 623.035           | 623.035             | 623.035            | 623.035             | 623.035        | 623.035            | 623.035             | 623.035                               | 623.035            | 623.035             | 623.035 |         |
| 3.3.3.1           | One day sensitization for PRIs | 5        | 0.410   |                               |                         | DSO               |                     |                    |                     | 8              | 5125               | 41000.00            | 8                                     | 5125               | 41000.00            | 0.410   |         |



|                |   |    |        |                         |     |  |  |  |  |  |  |  |    |         |            |    |         |            |         |            |    |         |            |         |            |            |         |            |            |         |            |            |         |            |            |      |
|----------------|---|----|--------|-------------------------|-----|--|--|--|--|--|--|--|----|---------|------------|----|---------|------------|---------|------------|----|---------|------------|---------|------------|------------|---------|------------|------------|---------|------------|------------|---------|------------|------------|------|
| 6.1.1<br>.15.a | Non-recurring costs on account of equipment for DPH Labs requiring strengthening. | 2  | 35.800 | SSO/AE, Instrument      |     |  |  |  |  |  |  |  | 2  | 1790000 | 3580000.00 | 2  | 1790000 | 3580000.00 | 1790000 | 3580000.00 | 2  | 1790000 | 3580000.00 | 1790000 | 3580000.00 | 3580000.00 | 1790000 | 3580000.00 | 3580000.00 | 1790000 | 3580000.00 | 3580000.00 | 1790000 | 3580000.00 | 3580000.00 |      |
| 9.5.1<br>1.1   | Medical Officers (1 day)  | 30 | 6.720  | SSO/Training Consultant | DSO |  |  |  |  |  |  |  | 2  | 61765   | 123530.00  | 19 | 28875   | 548625.00  | 90640   | 672155.00  | 21 | 90640   | 672155.00  | 90640   | 672155.00  | 672155.00  | 90640   | 672155.00  | 672155.00  | 90640   | 672155.00  | 672155.00  | 90640   | 672155.00  | 672155.00  |      |
| 9.5.1<br>1.2   | Medical College Doctors (1 day)   | 6  | 2.480  | SSO/Training Consultant | DSO |  |  |  |  |  |  |  | 6  | 0.00    | 248058.00  | 6  | 41343   | 248058.00  | 41343   | 248058.00  | 6  | 41343   | 248058.00  | 41343   | 248058.00  | 248058.00  | 41343   | 248058.00  | 248058.00  | 41343   | 248058.00  | 248058.00  | 41343   | 248058.00  | 248058.00  |      |
| 9.5.1<br>1.3   | Hospital Pharmacists/Nurses Training (1 day)                                      | 29 | 6.940  |                         | DSO |  |  |  |  |  |  |  | 27 | 0.00    | 693981.00  | 27 | 25703   | 693981.00  | 25703   | 693981.00  | 27 | 25703   | 693981.00  | 25703   | 693981.00  | 693981.00  | 25703   | 693981.00  | 693981.00  | 25703   | 693981.00  | 693981.00  | 25703   | 693981.00  | 693981.00  |      |
| 9.5.1<br>1.4   | Lab. Technician (3 days)  | 1  | 1.900  | SSO/Training Consultant |     |  |  |  |  |  |  |  | 1  | 190210  | 0.00       | 1  |         | 0.00       | 190210  | 0.00       | 1  | 190210  | 0.00       | 190210  | 0.00       | 0.00       | 190210  | 0.00       | 190210     | 0.00    | 190210     | 0.00       | 190210  | 0.00       | 190210     | 0.00 |
| 9.5.1<br>1.5   | Data Managers (2days)   | 1  | 1.200  | SSO/Training Consultant |     |  |  |  |  |  |  |  | 1  | 120290  | 0.00       | 1  |         | 0.00       | 120290  | 0.00       | 1  | 120290  | 0.00       | 120290  | 0.00       | 0.00       | 120290  | 0.00       | 120290     | 0.00    | 120290     | 0.00       | 120290  | 0.00       | 120290     | 0.00 |
| 9.5.1<br>1.6   | Date Entry Operators cum Accountant (2 days)                                      | 1  | 1.200  | SSO/Training Consultant |     |  |  |  |  |  |  |  | 1  | 120290  | 0.00       | 1  |         | 0.00       | 120290  | 0.00       | 1  | 120290  | 0.00       | 120290  | 0.00       | 0.00       | 120290  | 0.00       | 120290     | 0.00    | 120290     | 0.00       | 120290  | 0.00       | 120290     | 0.00 |
| 9.5.1<br>1.7   | ASHA & MPWs, AWW & Community volunteers (1 day)                                   |    | 2.570  |                         | DSO |  |  |  |  |  |  |  | 10 | 0.00    | 257030.00  | 10 | 25703   | 257030.00  | 25703   | 257030.00  | 10 | 25703   | 257030.00  | 25703   | 257030.00  | 257030.00  | 25703   | 257030.00  | 257030.00  | 25703   | 257030.00  | 257030.00  | 25703   | 257030.00  | 257030.00  |      |

|              |  |    |        |  |                          |                              |  |        |           |    |        |           |    |        |           |        |
|--------------|--|----|--------|--|--------------------------|------------------------------|--|--------|-----------|----|--------|-----------|----|--------|-----------|--------|
| 9.5.1<br>1.8 | One day training for Data entry and analysis for Block Health Team (including Block Programme Manager)   | 16 | 2.750  |  | SSO/Training Consultant  | DSO                          |  |        | 0.00      | 10 | 27543  | 275430.00 | 10 | 275433 | 275430.00 | 2.754  |
| 9.5.1<br>1.9 | Any other (please specify)   | 29 | 8.320  |  | SSO/Training Consultant  |                              |  | 277323 | 831969.00 |    |        | 0.00      | 3  | 277323 | 831969.00 | 8.320  |
| 10.4.<br>2   | Recurring costs on account of Consumables, kits, communication, misc. expenses etc. at each district public health lab (applicable only for functional labs having requisite manpower) | 14 | 28.000 |  | SSO/PE (Mamtaz)          | DSO /District Microbiologist |  |        | 0.00      | 14 | 200000 | 280000.00 | 14 | 200000 | 280000.00 | 28.000 |
| 10.4.<br>3   | Referral Network of laboratories (Govt. Medical College labs) Reimbursement based payment for laboratory tests (to be calculated for already   | 6  | 12.000 |  | SSO/State Microbiologist | DSO                          |  |        |           | 6  | 200000 | 120000.00 | 6  | 200000 | 120000.00 | 12.000 |

|        |  |    |       |                          |     |   |          |    |      |           |    |      |           |       |      |           |       |  |   |
|--------|--|----|-------|--------------------------|-----|---|----------|----|------|-----------|----|------|-----------|-------|------|-----------|-------|--|---|
|        | approved labs in previous PLPs of States for corresponding next years)   |    |       |                          |     |   |          |    |      |           |    |      |           |       |      |           |       |  |   |
| 10.4.4 | Expenses on account of consumables, operating expenses, office expenses, transport of samples, miscellaneous etc.                                | 6  | 3,600 | SSO/State Microbiologist | DSO | 2 | 1,00,000 | 6  | 6000 | 360000.00 | 6  | 6000 | 360000.00 | 6     | 6000 | 360000.00 | 3,600 |  | A budget of Rs 6.4 Lakhs approved for conducting IDSP meetings. |
| 16.1   | IDSP Meetings  | 28 | 6,400 | SSO                      | DSO | 2 | 1,00,000 | 54 |      | 540000.00 | 56 | 0    | 640000.00 | 6,400 |      |           |       |  | A budget of Rs 7 Lakhs approved for mobility at SSU.            |
| 16.1   | State-MOBILITY: Travel Cost, POL, etc. during outbreak investigations and field visits for monitoring programme activities at SSU on need basis. | 1  | 7,000 | SSO                      |     | 1 | 700000   | 0  |      | 0.00      | 1  | 0    | 700000.00 | 7,000 |      |           |       |  |   |



|      |   |    |        |             |     |  |  |  |  |    |                |    |   |                |            |  |
|------|---|----|--------|-------------|-----|--|--|--|--|----|----------------|----|---|----------------|------------|--|
| 16.1 | District-<br>MOBILITY:<br>Travel Cost, POL,<br>etc. during<br>outbreak<br>investigations and<br>field visits for<br>monitoring<br>programme<br>activities at DSU<br>on need basis | 33 | 81,000 |             | DSO |  |  |  |  | 27 | 8100000.<br>00 | 27 | 0 | 81000<br>00.00 | 81,00<br>0 | A budget of<br>Rs 81 Lakhs<br>approved for<br>mobility at<br>DSU.  |
| 16.1 | Information,<br>Communication<br>and Technology<br>under IDSP   | 1  | 18,900 | SSO/SD<br>M |     |  |  |  |  | 27 | 1890000.<br>00 | 27 | 0 | 18900<br>00.00 | 18,90<br>0 | In RoP 17-18,<br>a budget of<br>Rs 7 lakhs was<br>approved for<br>replacement of<br>equipment at<br>ICT<br>equipment at<br>10 DSUs<br>(Barpeta,<br>Cachar,<br>Darrang,<br>Dhubri,<br>Lakhimpur,<br>Nagaon,<br>Morigaon,<br>Sivasagar,<br>Tinsukia,<br>Udalguri).<br>Hence, A<br>budget of Rs<br>11.90 Lakhs<br>approved for<br>replacement of<br>old ICT<br>equipment at |

|      |  |   |       |     |   |               |   |      |   |   |               |       |   |
|------|--|---|-------|-----|---|---------------|---|------|---|---|---------------|-------|---|
| 16.1 | Office expenses on telephone, fax, Broadband Expenses & Other Miscellaneous Expenditures | 1 | 6,000 | SSO | 1 | 60000<br>0.00 | 0 | 0.00 | 1 | 0 | 60000<br>0.00 | 6,000 | rest of 17 DSUs. However, laptops as proposed by the State are not approved under IDSP. |
|      |  |   |       |     |   |               |   |      |   |   |               |       | A budget of Rs 6 Lakhs Approved for Office expenses.                                    |



|      |   |    |         |     |    |                |    |   |                |            |  |
|------|---|----|---------|-----|----|----------------|----|---|----------------|------------|--|
| 16.1 | District-Minor repairs and AMC of IT/office equipment supplied under IDSP | 27 | 81.0000 | DSO | 33 | 8100000.<br>00 | 33 | 0 | 81000<br>00.00 | 81.00<br>0 | A budget of Rs 81 Lakhs Approved for mobility at DSU. Breakup of approval amount Rs. 81.00-<br>a. Total Rs=12.60<br>Minor repairs for 27 DSU @ Rs-45000/-per annum + 5 Medical Colleges @Rs-9000/- per annum<br>b. Total Rs=68.40<br>Office expenses for 27 DSU @ Rs-20000 and 6 nos. Govt. Medical Colleges @ Rs-5000 |
|------|---|----|---------|-----|----|----------------|----|---|----------------|------------|--|



|            |                                       |    |             |     |     |   |     |  |                |    |                 |    |            |                 |             |
|------------|---------------------------------------|----|-------------|-----|-----|---|-----|--|----------------|----|-----------------|----|------------|-----------------|-------------|
| 16.8.1.4.2 | Consultants/<br>Programme<br>Officers | 5  | 29.080      | SSO |     | 5 |     |  | 29082<br>24.00 | 0  | 0.00            | 5  | 0          | 29082<br>24.00  | 29.08<br>2  |
| 16.8.1.4.5 | MIS/ IT Staff                         | 1  | 3.720       | SSO |     | 1 |     |  | 37200<br>0.00  | 0  | 0.00            | 1  | 0          | 37200<br>0.00   | 3.720       |
| 16.8.1.4.7 | Accounts Staff                        | 1  | 3.720       | SSO |     | 1 |     |  | 37200<br>0.00  | 0  | 0.00            | 1  | 0          | 37200<br>0.00   | 3.720       |
| 16.8.1.4.9 | Data Entry<br>Operation               | 1  | 2.005       | SSO |     | 1 |     |  | 20050<br>0.00  | 0  | 0.00            | 1  | 0          | 20050<br>0.00   | 2.005       |
| 16.8.2.2.2 | Consultants/<br>Programme<br>Officers | 27 | 129.03<br>0 |     | SSO |   | DSO |  |                | 27 | 12903003<br>.00 | 27 | 4778<br>89 | 12903<br>003.00 | 129.0<br>30 |
| 16.8.2.2.5 | MIS/ IT Staff                         | 27 | 85.620      |     |     |   | DSO |  |                | 27 | 8562024.<br>00  | 27 | 3171<br>12 | 85620<br>24.00  | 85.62<br>0  |
| 16.8.2.2.9 | Data Entry<br>Operation               | 33 | 55.615      |     |     |   | DSO |  |                | 33 | 5561490.<br>00  | 33 | 1685<br>30 | 55614<br>90.00  | 55.61<br>5  |



27

**FMR Code breakup fund details****FMR-3.3.3- PRI Sensitization/Trainings**

**One day sensitization for PRIs members consisting of planning for 8 batches in Kamrup Rural district**  
5 nos GP members from each GP as a pilot for IDSP Syndromic Surveillance-S Form reporting

viz-1. **Under Bezera Block under North Guwahati BPHC-** Agdola GP, Bezera GP, Dhopatari GP, Lachitgarh GP, Mandakata GP, Rudreswar GP, Saraighat GP,

**2.Under Sualkuchi Block under Sualkuchi BPHC-**Bongshor GP, Dadara GP, Gandhmau GP, Madhya Sualkuchi GP, Pacharia GP, Pachim Sualkuchi GP, Pub Sualkuchi GP, Singimari GP,

**3. Under Chaygaon Block under Chaygaon BPHC-**Bamunigaon GP, Champaknagar GP, Chaygaon GP, Dakhinpantan GP, Gumi Bankakata GP, Pachim Chaygaon GP, Sat Taluk GP

**4. Under Goroimari Block under Goroimari BPHC-**Achalpara GP, Batahidia GP, Bhouriavitha GP, Hatichala Bhalukamari GP, Hatipara GP, Jorsimalu GP, Majartop GP, Tukrapara GP

Unit cost per batch= Rs.5125/-

Total Batch= 8 nos.

Total Participants=160 nos.

Total Amount = Rs.41000/-

**Fund Allocation-State/District:**

| Total Fund Approved (in Lakhs) | State/District | Allocation Fund | In Lakhs |
|--------------------------------|----------------|-----------------|----------|
| 0.41                           | Kamrup R       | 41000.00        | 0.41     |
|                                | State HQ       | 0.00            |          |

**Estimated budget breakup for One Days Training course for PRIs at District HQ (participant 20 Nos)**

| Training                       | Sl. No.                            | Component  | Unit Cost (Rs.) | Unit | Duration (Days) | Total Amount (Rs.) |                |
|--------------------------------|------------------------------------|--|-----------------|------|-----------------|--------------------|----------------|
| One day sensitization for PRIs | 1                                  | Tea, Lunch@ 250/person + 5persons extra                    | 110.00          | 23   | 1               | 2530.00            |                |
|                                | 2                                  | Hiring of hall   | 1095.00         | 1    | 1               | 1095.00            |                |
|                                | 3                                  | Incidental expenses(Photocopy, job aids, flip charts etc.) | 50.00           | 20   | 1               | 1000.00            |                |
|                                | 4                                  | Honorarium for resource person@500/personX3person          | 500.00          | 1    | 1               | 500.00             |                |
|                                | <b>Sub Total:</b>                  |  |                 |      |                 |                    | <b>5125.00</b> |
|                                | Incidental expenses 15 % of budget |  |                 |      |                 |                    | 0.00           |
| <b>Total</b>                   |                                    |  |                 |      |                 | <b>5125.00</b>     |                |



## Agenda:

### One Day PRI Training

#### Venue : Local GP Area

| Time        | Duration    | Session  | Felicitation                        |
|-------------|-------------|--|-------------------------------------|
| 09:15-09:30 | 15 min      | Introduction of Participants                     |                                     |
| 09:30-09:45 | 15 min      | Welcome address                                  | By DSO, IDSP, Assam                 |
| 09:45-10:30 | 20 min      | objective of the training                        | By Consultant Training, IDSP, Assam |
| 10:30-10:45 | 15 min      | Tea Break  |                                     |
| 10:45-11:00 | 15 min      | S form   | By DSO, IDSP, Assam                 |
| 11:00-01:30 | 2 hr 30 mnt | Case definition of Syndromic surveillance report | By Consultant Training, IDSP, Assam |
| 13:30-14:15 | 45 min      | Lunch Break                                      |                                     |
| 14:15-15:45 | 1 hr        | Open discussion                                  |                                     |
| 15:45-16:45 | 1 hr        | Feedback & Issues from Participants              |                                     |
| 16:45-17:00 | 15 min      | Vote of Thanks                                   | By Epidemiologist, IDSP, Assam      |

#### FMR-9.5.11.1- Medical Officers Trainings

##### At State HQ-

##### One day Medical Officers training 2 batches will be held-

1/2 participants from two poor performance Block PHC from each districts as District ToT, viz (**Baksa**-Mushalpur & Talumpur BPHC, **Barpeta**-Mandia BPHC, **Bongaigaon**-Boitamari BPHC, **Cachar**-Udharbond BPHC, **Chirang**-Ballamguri BPHC, **Darrang**-Patharighat & Sipajhar BPHC, **Dhemaji**-Gogamukh & Sisiborgaon BPHC, **Dhubri**-South Salmara & Halakura BPHC, **Dibrugarh**-Panitola BPHC, **Dima Hasao**-Langting BPHC, **Goalpara**- Lakhipur & Matia BPHC, **Golaghat**-Sarupathar BPHC, **Hailakandi**-Lala & Katlichera BPHC, **Jorhat**- Kamalabari BPHC, **K Anglong**-Baithalangchu BPHC, **Kamrup M**-Sonapur BPHC, **Kamrup R**-Rampur BPHC, **Karimganj**-Girisganj & Nilombazar BPHC, **Kokrajhar**- Dotoma BPHC, **Lakhimpur**-Nowboicha BPHC, **Morigaon**- Laharighar BPHC, **Nagaon**- Jigijan & Simonabasti BPHC, **Nalbari**-Ghoghrapar BPHC, **Sivasagar**-Sapekhati BPHC, **Sonitpur**-Gohpur BPHC, **Tinsukia**-Na Sadiya BPHC, **Udalguri**-Orang BPHC.

Unit cost per batch= Rs.61775/-

Total Batch= 2 nos.

Total Participants=40 nos.

Total Amount = Rs.123550/-

**Fund Allocation-State/District**

| FMR-9.5.11.1            |       |                |                  |              |
|-------------------------|-------|----------------|------------------|--------------|
| Total Fund Approved     | Sl.No | State/District | Allocation fund  | in Lakhs     |
| 6.722                   | 1     | State HQ       | 123550.00        | 1.236        |
|                         | 2     | Baksa          | 28875.00         | 0.289        |
|                         | 3     | Bongaigaon     | 28875.00         | 0.289        |
|                         | 4     | Cachar         | 28875.00         | 0.289        |
|                         | 5     | Darrang        | 28875.00         | 0.289        |
|                         | 6     | Dhemaji        | 28875.00         | 0.289        |
|                         | 7     | Dhubri         | 28875.00         | 0.289        |
|                         | 8     | Dima Hassao    | 28875.00         | 0.289        |
|                         | 9     | Goalpara       | 28875.00         | 0.289        |
|                         | 10    | Hailakandi     | 28875.00         | 0.289        |
|                         | 11    | Jorhat         | 28875.00         | 0.289        |
|                         | 12    | Kamrup ( R)    | 28875.00         | 0.289        |
|                         | 13    | Karbi Anglong  | 28875.00         | 0.289        |
|                         | 14    | Karimganj      | 28875.00         | 0.289        |
|                         | 15    | Kokrajhar      | 28875.00         | 0.289        |
|                         | 16    | Lakhimpur      | 28875.00         | 0.289        |
|                         | 17    | Nagaon         | 28875.00         | 0.289        |
|                         | 18    | Nalbari        | 28875.00         | 0.289        |
|                         | 19    | Sivsagar       | 28875.00         | 0.289        |
|                         | 20    | Sonitpur       | 28875.00         | 0.289        |
| <b>Total allocation</b> |       |                | <b>672175.00</b> | <b>6.722</b> |

| <b>One Days Training course for Medical Officer at State HQ (participant 20 Nos)</b> |  |  |                |      |                 |                   |                 |
|--|--|--|----------------|------|-----------------|-------------------|-----------------|
|  | Sl. No.                                | Component  | Unit Cost(Rs.) | Unit | Duration (Days) | Total Amount(Rs.) |                 |
| Medical Officers (1 days)  | 1                                      | DA for participants@ Rs 500 / person/day                       | 500.00         | 20   | 1               | 10000.00          |                 |
|  | 2                                      | TA for participants (to & fro) @ 1500/ person or as per actual | 1500.00        | 20   | 1               | 30000.00          |                 |
|  | 4                                      | Tea, Lunch@ 350/person/day + 5person extra                     | 350.00         | 25   | 1               | 8750.00           |                 |
|  | 5                                      | Hiring of hall   | 3000.00        | 1    | 1               | 3000.00           |                 |
|  | 6                                      | Incidental expenses(Photocopy, job aids, flip charts etc.)     | 100.00         | 23   | 1               | 2300.00           |                 |
|  | 7                                      | Honorarium for resource person@700/personX3person              | 700.00         | 3    | 1               | 2100.00           |                 |
|  | <b>Sub Total:</b>                      |  |                |      |                 |                   | <b>56150.00</b> |
|  | Institutional over head 10 % of budget |  |                |      |                 |                   | 5625.00         |
| <b>Total:</b>  |  |  |                |      |                 | <b>61775.00</b>   |                 |

## **AGENDA**

**One Day Training of Medical Officers as District ToT**

**Venue : SIHFW, Khanapara, Guwahti-22**

| <b>Time</b> | <b>Duration</b> | <b>Session</b>   | <b>Felicitation</b>   |
|-------------|-----------------|--|---|
| 09:00-09:10 | 10 min          | Registration of Participants   |   |
| 09:10-09:15 | 5 min           | Pre Test   |   |
| 09:15-09:30 | 15 min          | Introduction of Participants   |   |
| 09:30-09:50 | 15 min          | Welcome address and objective of the meeting                         | By SSO, IDSP, Assam   |
| 09:50-10:30 | 15 min          |  | Speech From<br>1. MD, NHM, Assam<br>2. ED, NHM, Assam<br>3. DHS Assam |
| 10:30-10:45 | 15 min          | Tea Break  |   |
| 10:45-11:00 | 15 min          | IDSP Reporting System  | By SSO, IDSP, Assam   |
| 11:00-11:30 | 30 min          | Case Definition & Epidemiology for disease surveillance              | Dr. Jutika Ojah, Professor of Community Medicine Deptt. GMCH          |
| 11:30-12:00 | 30 min          | Data Management and outbreak   | By Consultant Training/SDM  |
| 12:00-01:30 | 1 hr            | Laboratory Network under IDSP  | Dr.Daisy Gogoi Mohan, Asst. Professor of Microbiology Deptt. GMCH     |
| 13:30-14:15 | 45 min          | Lunch Break  |   |
| 14:15-15:30 | 1 hr 15 mnt     | Emerging & Reimeerging diseases & roll of intersactoral coordination | By Veterinary Consultant, IDSP, Assam                                 |
| 15:30-16:30 | 30 min          | Entomological Surveillance   | By Entomologist, IDSP, Assam  |
| 16:30-17:00 | 30 min          | Open discussion  |   |
| 17:00-17:15 | 15 min          | Post Test  |   |
| 17:15-17:30 | 15 min          | Vote of Thanks   |   |

Pre/Post Test annexed herewith.

### **At District HQ-**

**One day Medical Officers training 18 batches will be held -**

1 batch from 19 districts for low performance of SPL reporting, viz Baksa, Bongaigaon, Cachar, Darrang, Dhemaji, Dhubri, Dima Hasao, Goalpara, Hailakandi, Jorhat, K Anglong, Kamrup R, Karimaganj, Kokrajhar, Lakhimpur, Nagaon, Nalbari, Sivasagar, Sonitpur district.

Unit cost per batch= Rs.28875/-

Total Batch= 19 nos.

Total Participants=380 nos.

Total Amount = Rs.548625/-



| Training                        | One Days Training course for Medical Officer at District HQ (participant 20 Nos) |   |                |      |                 |                   |                 |
|---------------------------------|--|---|----------------|------|-----------------|-------------------|-----------------|
|                                 | Sl. No.  | Component   | Unit Cost(Rs.) | Unit | Duration (Days) | Total Amount(Rs.) |                 |
| Medical College Doctors (1 day) | 1  | DA for participants@ Rs 500 / person                          | 500.00         | 20   | 1               | 10000.00          |                 |
|                                 | 2  | TA for participants (to & fro) @ 300/ person or as per actual | 300.00         | 20   | 1               | 6000.00           |                 |
|                                 | 3  | Tea, Lunch@ 250/person/day + 5person extra                    | 250.00         | 23   | 1               | 5750.00           |                 |
|                                 | 4  | Hiring of hall  | 2000.00        | 1    | 1               | 2000.00           |                 |
|                                 | 5  | Incidental expenses(Photocopy, job aids, flip charts etc.)    | 50.00          | 20   | 1               | 1000.00           |                 |
|                                 | 6  | Honorarium for resource person@500/personX3person             | 500.00         | 3    | 1               | 1500.00           |                 |
|                                 | <b>Sub Total:</b>  |   |                |      |                 |                   | <b>26250.00</b> |
|                                 | Institutional over head 10 % of budget   |   |                |      |                 |                   | 2625.00         |
| <b>Total:</b>                   |  |   |                |      |                 | <b>28875.00</b>   |                 |

### AGENDA

#### One Day Training of Medical Officers

Venue : District HQ

| Time        | Duration    | Session   | Felicitation   |
|-------------|-------------|---|--|
| 09:00-09:10 | 10 min      | Registration  |  |
| 09:10-09:15 | 5 min       | Pre Test  |  |
| 09:15-09:30 | 15 min      | Introduction  |  |
| 09:30-09:50 | 15 min      | Welcome address and objective of the meeting                        | By DSO, IDSP, Assam  |
| 09:50-10:30 | 15 min      |   | Speech From<br>1. Deputy Commissioner<br>2. Jt. DHS            |
| 10:30-10:45 | 15 min      | Tea Break   |  |
| 10:45-11:00 | 15 min      | IDSP Reporting System   | By DSO, IDSP, Assam  |
| 11:00-11:30 | 30 min      | Case Definition & Epidemiology for disease surveillance             | Near by Medical College Professor of Community Medicine Deptt. |
| 11:30-12:00 | 30 min      | Data Management and outbreak  | By Consultant Training/District Epidemiologist                 |
| 12:00-01:30 | 1 hr        | Laboratory Network under IDSP                                       | Near by Medical College Professor of Microbiology Deptt. GMCH  |
| 13:30-14:15 | 45 min      | Lunch Break   |  |
| 14:15-15:30 | 1 hr 15 mnt | Emerging & Remerging diseases & roll of intersectional coordination | ToT of District RRT  |
| 15:30-16:30 | 30 min      | Entomological Surveillance  | ToT of District RRT  |
| 16:30-17:00 | 30 min      | Open discussion   |  |
| 17:00-17:15 | 15 min      | Post Test   |  |
| 17:15-17:30 | 15 min      | Vote of Thanks  |  |

Pre/Post Test annexed herewith.

### FMR-9.5.11.2- Medical College Doctors Trainings at District level

**One day Medical College Doctors training -6 batches in 6 Medical Colleges viz-GMCH-Guwahati, AMCH-Dibrugarh, SMCH-Cachar, JMCH-Jorhat, FAAMCH-Barpeta, TMCH-Sonitpur**

Unit cost per batch= Rs.41343/-

Total Batch= 6 nos.

Total Participants=120 nos.

Total Amount = Rs.248058/-

#### Fund Allocation-State/District:

| FMR-9.5.11.2            |       |                 |                  |              |
|-------------------------|-------|-----------------|------------------|--------------|
| Total Fund Approved     | Sl.No | State/District  | Allocation fund  | in Lakhs     |
| 2.481                   | 1     | Barpeta, FAAMCH | 41343.00         | 0.413        |
|                         | 4     | Cachar, SMCH    | 41343.00         | 0.413        |
|                         | 5     | Dibrugarh, AMCH | 41343.00         | 0.413        |
|                         | 6     | Jorhat, JMCH    | 41343.00         | 0.413        |
|                         | 7     | Kamrup M, GMCH  | 41343.00         | 0.413        |
|                         | 8     | Sonitpur, TMCH  | 41343.00         | 0.413        |
| <b>Total allocation</b> |       |                 | <b>248058.00</b> | <b>2.481</b> |

| Training                        | <u>One Days Training course for Medical College Officer at District level (participant 20 Nos)</u> |   |                |      |                 |                    |                 |
|---------------------------------|--|---|----------------|------|-----------------|--------------------|-----------------|
|                                 | Sl. No.  | Component   | UnitCost (Rs.) | Unit | Duration (Days) | Total Amount (Rs.) |                 |
| Medical College Doctors (1 day) | 1  | DA for participants@ Rs 500 / person                          | 500.00         | 20   | 1               | 10000.00           |                 |
|                                 | 2  | TA for participants (to & fro) @ 500/ person or as per actual | 500.00         | 20   | 1               | 10000.00           |                 |
|                                 | 3  | Tea, Lunch@ 250/person/day + 5person extra                    | 250.00         | 25   | 1               | 6250.00            |                 |
|                                 | 4  | Hiring of hall  | 3000.00        | 1    | 1               | 3000.00            |                 |
|                                 | 5  | Incidental expenses(Photocopy, job aids, flip charts etc.)    | 200.00         | 23   | 1               | 4600.00            |                 |
|                                 | 6  | Honorarium for resource person@500/personX3person             | 700.00         | 3    | 1               | 2100.00            |                 |
|                                 | <b>Sub Total:</b>  |   |                |      |                 |                    | <b>35950.00</b> |
|                                 | Institutional over head 15 % of budget   |   |                |      |                 |                    | 5393.0          |
| <b>Total:</b>                   |  |   |                |      |                 | <b>41343.00</b>    |                 |

**AGENDA**

**One Day Training of Medical Officers**

**Venue : District HQ**

| Time        | Duration    | Session   | Felicitation  |
|-------------|-------------|---|---|
| 09:30-09:40 | 10 min      | Registration of Participants                            |   |
| 09:40-10:00 | 20 min      | Introduction of Participants                            |   |
| 10:00-11:30 | 15 min      | Welcome address and objective of the meeting            | By DSO, IDSP, Assam   |
| 10:30-10:45 | 15 min      | Tea Break   |   |
| 10:45-11:30 | 15 min      | IDSP Reporting system                                   | By DSO, IDSP, Assam   |
| 11:00-12:00 | 30 min      | Case Definition & Epidemiology for disease surveillance | Nodal Officer of IDSP of Community Medicine Deptt. of concern Medical College |
| 12:00-13:30 | 30 min      | Data Management and outbreak                            | By Consultant Training/District Epidemiologist                                |
| 13:30-14:15 | 45 min      | Lunch Break   |   |
| 14:15-15:30 | 1 hr 15 mnt | Laboratory Network under IDSP                           | Nodal Officer of IDSP of Microbiology Deptt. of concern Medical College       |
| 15:30-16:30 | 30 min      | Open discussion   |   |
| 16:30-16:45 | 30 min      | Vote of Thanks  |   |

**FMR-9.5.11.3- ANM/MPW/Pharmacist/Nurses Trainings at District level**

One day ANM/MPW/Pharmacist/Nurses training for 27 batches will be held at District HQ- 1 batch for each district for refreshment of Health Workers for quality of SPL reporting

Unit cost per batch= Rs.25702/-  
 Total Batch= 27 nos.  
 Total Participants=540 nos.  
 Total Amount = Rs.693954/-

| Training   | One Days Training course for ANM/MPW/Pharmacist/ Nurses District HQ(participant 20 Nos) |  |                |      |                 |                   |                 |
|--|---|--|----------------|------|-----------------|-------------------|-----------------|
|  | Sl. No.   | Component  | Unit Cost(Rs.) | Unit | Duration (Days) | Total Amount(Rs.) |                 |
| ANM/MPW/<br>Pharmacists/Nurses<br>Training (1 day) | 1   | TA/DA for participants @ Rs 400 / person                   | 400.00         | 20   | 1               | 8000.00           |                 |
|  | 2   | Tea, Lunch@ 250/person + 5persons extra                    | 250.00         | 25   | 1               | 6250.00           |                 |
|  | 3   | Hiring of hall   | 2000.00        | 1    | 1               | 2000.00           |                 |
|  | 4   | Incidental expenses(Photocopy, job aids, flip charts etc.) | 200.00         | 23   | 1               | 4600.00           |                 |
|  | 5   | Honorarium for resource person@500/personX2person          | 500.00         | 3    | 1               | 1500.00           |                 |
|  | <b>Sub Total:</b>   |  |                |      |                 |                   | <b>22350.00</b> |
|  | Incidental expenses 15 % of budget  |  |                |      |                 |                   | 3352.00         |
| <b>Total:</b>                                      |   |  |                |      |                 | <b>25702.00</b>   |                 |

**Fund Allocation-State/District:**

| FMR-9.5.11.3            |       |                |                  |              |
|-------------------------|-------|----------------|------------------|--------------|
| Total Fund Approved     | Sl.No | State/District | Allocation fund  | in Lakhs     |
| 6.940                   | 1     | Baksa          | 25702.00         | 0.257        |
|                         | 2     | Barpeta        | 25702.00         | 0.257        |
|                         | 3     | Bongaingaon    | 25702.00         | 0.257        |
|                         | 4     | Cachar         | 25702.00         | 0.257        |
|                         | 5     | Chirang        | 25702.00         | 0.257        |
|                         | 6     | Darrang        | 25702.00         | 0.257        |
|                         | 7     | Dhemaji        | 25702.00         | 0.257        |
|                         | 8     | Dhubri         | 25702.00         | 0.257        |
|                         | 9     | Dibrugarh      | 25702.00         | 0.257        |
|                         | 10    | Dima Hassao    | 25702.00         | 0.257        |
|                         | 11    | Goalpara       | 25702.00         | 0.257        |
|                         | 12    | Golaghat       | 25702.00         | 0.257        |
|                         | 13    | Hailakandi     | 25702.00         | 0.257        |
|                         | 14    | Jorhat         | 25702.00         | 0.257        |
|                         | 15    | Kamrup ( M)    | 25702.00         | 0.257        |
|                         | 16    | Kamrup ( R)    | 25702.00         | 0.257        |
|                         | 17    | Karbi Anglong  | 25702.00         | 0.257        |
|                         | 18    | Karimganj      | 25702.00         | 0.257        |
|                         | 19    | Kokrajhar      | 25702.00         | 0.257        |
|                         | 20    | Lakhimpur      | 25702.00         | 0.257        |
|                         | 21    | Morigaon       | 25702.00         | 0.257        |
|                         | 22    | Nagaon         | 25702.00         | 0.257        |
|                         | 23    | Nalbari        | 25702.00         | 0.257        |
|                         | 24    | Sivsagar       | 25702.00         | 0.257        |
|                         | 25    | Sonitpur       | 25702.00         | 0.257        |
|                         | 26    | Tinsukia       | 25702.00         | 0.257        |
|                         | 27    | Udalguri       | 25702.00         | 0.257        |
| <b>Total allocation</b> |       |                | <b>693954.00</b> | <b>6.940</b> |

**AGENDA****One Day Training of ANM/MPW/Pharmacist/Nurses- Venue : District HQ**

| Time        | Duration  | Session                                      | Felicitation                                   |
|-------------|-----------|--|--|
| 09:00-09:10 | 10 min    | Registration                                 |  |
| 09:10-09:15 | 5 min     | Pre Test                                     |  |
| 09:15-09:30 | 15 min    | Introduction                                 |  |
| 09:30-09:50 | 15 min    | Welcome address and objective of the meeting | By DSO, IDSP, Assam                            |
| 09:50-10:45 | 15 min    | Tea Break                                    |  |
| 10:45-11:00 | 15 min    | IDSP Reporting System                        | By DSO, IDSP, Assam                            |
| 11:00-11:30 | 30 min    | Case Definition                              | By District ToT                                |
| 11:30-12:00 | 30 min    | Data Management and outbreak                 | By Consultant Training/District Epidemiologist |
| 12:00-01:30 | 1 hr      | Epidemiology for disease surveillance        | By District ToT                                |
| 13:30-14:15 | 45 min    | Lunch Break                                  |  |
| 14:15-15:30 | 1 hr 15 m | S,P,L forms details                          | By DSO, IDSP, Assam                            |
| 15:30-16:30 | 30 min    | Early Warning Signal                         | By District Epidemiologist                     |
| 16:30-17:15 | 45 min    | Open discussion & Post Test                  |  |
| 17:15-17:30 | 15 min    | Vote of Thanks                               |  |

Pre/Post Test annexed herewith.



23

**FMR-9.5.11.4- Laboratory Technician Trainings at State level**

Three days Hands on Training of District Laboratory Technicians for 1 batch will be held at Microbiology deptt. GMCH - 1 no LT from District CH will be participants viz- Baksa, Bongaigaon, Cachar, Darrang, Dhemaji, Dhubri, Dima Hasao, Goalpara, Golaghat, Hailakandi, Jorhat, K Anglong, Kamrup R, Karimganj, Kokrajhar, Lakhimpur, Nagaon, Nalbari, Sivasagar, Sonitpur district.

Unit cost per batch= Rs.190210/-

Total Batch= 1 no.

Total Participants=20 nos.

Total Amount = Rs.190210/-

**Fund Allocation-State/District:**

| FMR-9.5.11.4                   |                |                 |          |
|--------------------------------|----------------|-----------------|----------|
| Total Fund Approved (in Lakhs) | State/District | Allocation Fund | In Lakhs |
| 1.902                          | State HQ       | 190200          | 1.902    |
|                                | District       | 0.00            |          |

**Three Days Training course for Lab Tech at State /Zonal HQ (participant 20 Nos)**

|  | Sl. No.                  | Component  | Unit Cost (Rs.)                               | Unit   | Duration (Days) | Total Amount (Rs.) |
|--|--------------------------|--|---|--------|-----------------|--------------------|
|  | Lab. Technician (3 days) | 1  | DA for participants @ Rs 400 / person X 4days | 400.00 | 20              | 4                  |
| 2                                      |                          | TA for participants (to & fro) @ 1000/ person or as per actual | 1000.00                                       | 20     | 1               | 20000.00           |
| 3                                      |                          | Accommodation @ 1000/day/person X 3days                        | 1000.00                                       | 20     | 3               | 60000.00           |
| 4                                      |                          | Tea, Lunch @ 300/person/day + 3person extra                    | 300.00  | 25     | 3               | 22500.00           |
| 5                                      |                          | Hiring of hall   | 5000.00                                       | 1      | 3               | 15000.00           |
| 5                                      |                          | Incidental expenses (Photocopy, job aids, flip charts etc.)    | 300.00  | 23     | 1               | 6900.00            |
| 6                                      |                          | Honorarium for resource person @ 1000/person X 3person X 3days | 1000.00                                       | 3      | 3               | 9000.00            |
| <b>Sub Total:</b>                      |                          |  |   |        |                 | <b>165400.00</b>   |
| Institutional over head 15 % of budget |                          |  |   |        |                 | 24810.00           |
| <b>Total:</b>                          |                          |  |   |        |                 | <b>190210.00</b>   |



## Agenda

Venue-Microbiology deptt. GMCH

Three days training schedule of laboratory technicians of DPHL under IDSP, Assam

| Day 1               |  |                     |
|---------------------|--|---------------------|
| Time                | Session  | Format              |
| 10:30-11:00 AM      | Registration of Participants and Pre-evaluation tests  |                     |
| 11:00-11:30 AM      | Introduction to IDSP &<br>Role of laboratories in disease surveillance   | Lecture/ Discussion |
| 11:30-12:30 PM      | Common staining techniques including smear preparation from different samples (Gram stain, Albert's stain, Z-N stain, JSB staining etc) &                      | Lecture/ Discussion |
| 12:30- 1:30 PM      | Microscopic examination for AFB  | Dem/Prac            |
| <b>1:30-2:00 PM</b> | <b>Lunch</b>   |                     |
| 2:00-3:30 PM        | Collection, storage and transport of clinical samples  | Lecture/ Discussion |
| Day 2               |  |                     |
| Time                | Session  | Format              |
| 10:30-11:30 AM      | Preparation of common culture media &<br>Introduction to different culture media using different clinical samples including cholera culture, hanging drop, etc | Lecture/ Discussion |
| 11:30-12:30 PM      | -do- (media prep & plating)  | Dem/Prac            |
| 12:30-1:30 PM       | Laboratory diagnosis of enteric fever (Widal, TyphiDot test, Blood culture) & Data management on reporting formats in disease surveillance                     | Lec/Dem/Prac        |
| <b>1:30-2:00 PM</b> | <b>Lunch</b>   |                     |
| 2:00-3:30 PM        | Sterilization and disinfection & Biosafety issues including Waste management   | Lec/Dem/Prac        |
| Day 3               |  |                     |
| Time                | Session  | Format              |
| 10:30- 12:00 PM     | Culture plate reading, Biochemicals and AST & AST reading and diagnosis of cholera   | Lec/Dem/Prac        |
| 12:00- 1:30 PM      | Rapid serological tests & Maintenance of laboratory equipments & Quality assurance in laboratory   | Lec/Dem/Prac        |
| <b>1:30-2:00 PM</b> | <b>Lunch</b>   |                     |
| 2:00-3:30 PM        | Bacteriological water quality monitoring (Rapid H <sub>2</sub> S test, MPN test) & Water tests reading   | Lec/Dem/Prac        |
| 03:30-04:00 PM      | Presentation by participants<br>Open discussion and post-evaluation tests  |                     |

Pre/Post Test annexed herewith.

### EMR-9.5.11.5- Data Managers Trainings at State level

Two days Data Managers Training 1 batch for 27 districts for improvement of S,P,L data reporting. Improvement of Timeliness & consistency report of S,P,L analysis with - Training must be done with internet connectivity

Unit cost per batch= Rs.120290/-

Total Batch= 1 no.

Total Participants=20 nos.

Total Amount = Rs.120290/-

**Fund Allocation-State/District:**

| FMR-9.5.11.5                   |                |                 |          |
|--------------------------------|----------------|-----------------|----------|
| Total Fund Approved (in Lakhs) | State/District | Allocation Fund | In Lakhs |
| 1.203                          | State HQ       | 120290          | 1.203    |
|                                | District       | 0.00            |          |

| Training              | <u>Two Days Training course for Data Managers at State HQ (participant 20 Nos)</u> |  |               |      |                  |                    |                  |
|-----------------------|--|--|---------------|------|------------------|--------------------|------------------|
|                       | SI N   | Component  | Unit Cost(Rs) | Unit | Durati on (Days) | Total Amount (Rs.) |                  |
| Data Managers (2days) | 1  | DA for participants @ Rs 400 / person                      | 400.00        | 20   | 3                | 24000.00           |                  |
|                       | 2  | TA for participants (to & fro)@ 500/ person/ as per actual | 500.00        | 20   | 1                | 10000.00           |                  |
|                       | 3  | Accommodation@1000/day/personX2days                        | 1000.00       | 20   | 2                | 40000.00           |                  |
|                       | 4  | Tea, Lunch@ 350/person + 5persons extra                    | 350.00        | 25   | 2                | 17500.00           |                  |
|                       | 5  | Hiring of hall   | 1000.00       | 1    | 2                | 2000.00            |                  |
|                       | 6  | Incidental expenses(Photocopy, job aids, flip charts etc.) | 300.00        | 23   | 1                | 6900.00            |                  |
|                       | 7  | Honorarium for resource person@700/personX2person          | 700.00        | 3    | 2                | 4200.00            |                  |
|                       | <b>Sub Total:</b>  |  |               |      |                  |                    | <b>104600.00</b> |
|                       | Institutional over head 15 % of budget   |  |               |      |                  |                    | 15690.00         |
| <b>Total:</b>         |  |  |               |      |                  | <b>120290.00</b>   |                  |

**Agenda**
**Two Days Data Manager Training**
**Venue:Administrative Staff College, Khanapara,Guwahati-22**

| Day One          |   |  |
|------------------|---|--|
| Time             | Objectives/Outcomes                           | Facilitators                             |
| 09.30 AM-10.00AM | Registration                                  |  |
| 10.00 AM-10.30AM | welcome & Program Introduction                | By SSO IDSP Assam                        |
| 10.30 AM-11.30AM | Objective of IDSP                             | By Consultant Training                   |
| 11.30AM-12.00 AM | Tea Break                                     |  |
| 12.00AM-12.45 PM | IDSP reporting system                         | By SSO IDSP Assam                        |
| 12.45 PM-1.30 PM | Overview of IDSP                              | By CSU NCDC new Delhi                    |
| 1.30 PM-2.00AM   | Strengthening of Epidemiological surveillance | By State Epidemiologist                  |
| 2.00 PM-3.00 PM  | Lunch   |  |
| 3.00 PM-4.00 PM  | Analysis of S,P,L data                        | By CSU NCDC new Delhi                    |
| 4.00PM-4.30 PM   | Case Definition                               | By Consultant Training                   |
| Day Two          |   |  |
| 10.00 -11.00 AM  | State referral laboratory networking          | by CSU                                   |
| 11.00 -12.00 AM  | S,P,L portal data entry                       | By State Epidemiologist/SDM              |
| 12.00 AM-1.00 AM | Offline S,P,L data maintenance                | By State Consultants                     |
| 1.00 AM-1.30 PM  | IDSP activities in Assam-                     | By SSO                                   |
| 1.30 PM-2.30 PM  | Lunch   |  |
| 2.30 PM-4.30 PM  | Overview of the progress of IDSP & issues     | Presentation by DSU of all 27 districts: |

Pre/Post Test annexed herewith.



### FMR-9.5.11.6- Data Entry Operator Training at State level

Two days Data Entry Operator Training 1 batch for 27 districts for improvement of S,P,L portal data reporting including private sectors - Training must be done with internet connectivity

Unit cost per batch= Rs.120290/-

Total Batch= 1 no.

Total Participants=20 nos.

Total Amount = Rs.120290/-

#### Fund Allocation-State/District:

| FMR-9.5.11.6                   |                |                 |          |
|--------------------------------|----------------|-----------------|----------|
| Total Fund Approved (in Lakhs) | State/District | Allocation Fund | In Lakhs |
| 1.203                          | State HQ       | 120290          | 1.203    |
|                                | District       | 0.00            |          |

| Training              | Two Days Training course for Data Entry Operators at State HQ (participant 20 Nos) |  |                |      |                 |                    |                  |
|-----------------------|--|--|----------------|------|-----------------|--------------------|------------------|
|                       | Sl. No.  | Component  | UnitCost (Rs.) | Unit | Duration (Days) | Total Amount (Rs.) |                  |
| Data Managers (2days) | 1  | DA for participants @ Rs 400 / person                        | 400.00         | 20   | 3               | 24000.00           |                  |
|                       | 2  | TA for participants (to & fro)@ 500/ person or as per actual | 500.00         | 20   | 1               | 10000.00           |                  |
|                       | 3  | Accomodation@1000/day/personX2days                           | 1000.00        | 20   | 2               | 40000.00           |                  |
|                       | 4  | Tea, Lunch@ 350/person + 5persons extra                      | 350.00         | 25   | 2               | 17500.00           |                  |
|                       | 5  | Hiring of hall   | 1000.00        | 1    | 2               | 2000.00            |                  |
|                       | 6  | Incidental expenses(Photocopy, job aids, flip charts etc.)   | 300.00         | 23   | 1               | 6900.00            |                  |
|                       | 7  | Honorarium for resource person@700/personX2person            | 700.00         | 3    | 2               | 4200.00            |                  |
|                       | <b>Sub Total:</b>  |  |                |      |                 |                    | <b>104600.00</b> |
|                       | Institutional over head 15 % of budget   |  |                |      |                 |                    | 15690.00         |
|                       | <b>Total:</b>  |  |                |      |                 |                    | <b>120290.00</b> |

## Agenda

### Two Days Data Entry OPERators Training

Venue: Administrative Staff College, Khanapara, Guwahati-22

| Day One           |   |  |
|-------------------|---|--|
| Time              | Objectives/Outcomes                           | Facilitators                                 |
| 09.30 AM-10.00AM  | Registration                                  |  |
| 10.00 AM-10.30AM  | welcome & Program Introduction                | By SSO IDSP Assam                            |
| 10.30 AM-11.30AM  | Objective of IDSP                             | By Consultant Training                       |
| 11.30AM-12.00 AM  | Tea Break                                     |  |
| 12.00AM-12.45 PM  | IDSP reporting system                         | By SSO IDSP Assam                            |
| 12.45 PM-1.30 PM  | Overview of IDSP                              | By CSU NCDC new Delhi                        |
| 1.30 PM-2.00AM    | Strengthening of Epidemiological surveillance | By State Epidemiologist                      |
| 2.00 PM-3.00 PM   | Lunch   |  |
| 3.00 PM-4.00 PM   | Analysis of S,P,L data                        | By CSU NCDC new Delhi                        |
| 4.00PM-4.30 PM    | Case Definition                               | By Consultant Training                       |
| Day Two           |   |  |
| 10.00 AM-11.00 AM | State referral laboratory networking          | by CSU                                       |
| 11.00 AM-12.00 AM | S,P,L portal data entry                       | By State Epidemiologist/SDM                  |
| 12.00 AM-1.00 AM  | Offline S,P,L data maintenance                | By State Entomologist/Veterinary Consultant) |
| 1.00 AM-1.30 PM   | IDSP activities in Assam-                     | By SSO                                       |
| 1.30 PM-2.30 PM   | Lunch   |  |
| 2.30 PM-4.30 PM   | Overview of the progress of IDSP & issues     | Presentation by DSU of all 27 districts:     |

Pre/Post Test annexed herewith.

### FMR-9.5.11.7- CHO/ASHA/MPW/AWW Trainings at District level

**One day CHO/ASHA/MPW/AWW training for 10 batches will be held at District HQ-**

1 batch for 10 poor performance block PHC of district for quality of Syndromic surveillance under IDSP, viz-  
 1 batch for Baksa-Mushalpur BPHC, Chirang-Ballamguri BPHC, Dhubri-South Salmara BPHC, Halakua BPHC, Hailakandi-Lala BPHC, Jorhat-Kamalabari BPHC, K Anglong- Baithalangcho BPHC, Karimganj-Patharkandi BPHC, Morigaon- Laharighat BPHC, Nagaon- Jugijan BPHC,

Unit cost per batch= Rs.25703/-

Total Batch= 10 nos.

Total Participants=200 nos.

Total Amount = Rs.257025/-

**Fund Allocation-State/District:**

| FMR-9.5.11.7            |       |                |                  |              |
|-------------------------|-------|----------------|------------------|--------------|
| Total Fund Approved     | Sl.No | State/District | Allocation fund  | in Lakhs     |
| 2.570                   | 1     | Baksa          | 25703.00         | 0.257        |
|                         | 2     | Chirang        | 25703.00         | 0.257        |
|                         | 3     | Dhubri         | 51406.00         | 0.514        |
|                         | 4     | Hailakandi     | 25703.00         | 0.257        |
|                         | 5     | Jorhat         | 25703.00         | 0.257        |
|                         | 6     | Karbi Anglong  | 25703.00         | 0.257        |
|                         | 7     | Karimganj      | 25703.00         | 0.257        |
|                         | 8     | Morigaon       | 25703.00         | 0.257        |
|                         | 9     | Nagaon         | 25703.00         | 0.257        |
| <b>Total allocation</b> |       |                | <b>257030.00</b> | <b>2.570</b> |

**One Days Training course for CHO/ASHA/MPWs/AWW at DistrictHQ(participant 20 Nos)**

|  | Sl. No.           | Component  | Unit Cost (Rs.) | Unit | Duration | Total Amount    |
|--|-------------------|--|-----------------|------|----------|-----------------|
| ANM/MPW/<br>Pharmacists/Nurses<br>Training (1 day) | 1                 | TA/DA for participants @ Rs 400 / person                   | 400.00          | 20   | 1        | 8000.00         |
|  | 2                 | Tea, Lunch@ 250/person + 5persons extra                    | 250.00          | 25   | 1        | 6250.00         |
|  | 3                 | Hiring of hall   | 2000.00         | 1    | 1        | 2000.00         |
|  | 4                 | Incidental expenses(Photocopy, job aids, flip charts etc.) | 200.00          | 23   | 1        | 4600.00         |
|  | 5                 | Honorarium for resource person@500/personX2person          | 500.00          | 3    | 1        | 1500.00         |
|  | <b>Sub Total:</b> |  |                 |      |          |                 |
| Incidental expenses 15 % of budget                 |                   |  |                 |      |          | 3352.00         |
| <b>Total:</b>                                      |                   |  |                 |      |          | <b>25702.00</b> |

**AGENDA**
**One Day Training of CHO/ASHA/MPWs/AWW**
**Venue : District HQ**

| Time        | Duration    | Session                                      | Felicitation                                   |
|-------------|-------------|--|--|
| 09:00-09:10 | 10 min      | Registration                                 |  |
| 09:10-09:15 | 5 min       | Pre Test                                     |  |
| 09:15-09:30 | 15 min      | Introduction                                 |  |
| 09:30-09:50 | 15 min      | Welcome address and objective of the meeting | By DSO, IDSP, Assam                            |
| 09:50-10:45 | 15 min      | Tea Break                                    |  |
| 10:45-11:00 | 15 min      | IDSP Reporting System                        | By DSO, IDSP, Assam                            |
| 11:00-11:30 | 30 min      | Case Definition                              | By District ToT                                |
| 11:30-12:00 | 30 min      | Data Management and outbreak                 | By Consultant Training/District Epidemiologist |
| 12:00-01:30 | 1 hr        | Epidemiology for disease surveillance        | By District ToT                                |
| 13:30-14:15 | 45 min      | Lunch Break                                  |  |
| 14:15-15:30 | 1 hr 15 mnt | S,P,L forms details                          | By DSO, IDSP, Assam                            |
| 15:30-16:30 | 30 min      | Early Warning Signal                         | By District Epidemiologist                     |
| 16:30-17:00 | 30 min      | Open discussion                              |  |
| 17:00-17:15 | 15 min      | Post Test                                    |  |
| 17:15-17:30 | 15 min      | Vote of Thanks                               |  |

**FMR-9.5.11.8- Block Health Team for Data Entry and Analysis one day Trainings at District level**

**One day Block Health Team training for 10 batches will be held at District HQ-**

1 batch for 10 poor performance block PHC of district for reporting of S,P,L surveillance under IDSP, viz- 1 batch for 10 districts viz- Baksa, Bongaigaon( including Chirang district 2 blocks), Dhemaji, Dhubri, Hailakandi, Jorhat, K Anglong, Karimganj, Nalbari, Sonitpur.

Unit cost per batch= Rs.27543/-  
 Total Batch= 10 nos.  
 Total Participants=200 nos.  
 Total Amount = Rs.275430/-

**Fund Allocation-State/District:**

| FMR-9.5.11.8            |       |                |                  |              |
|-------------------------|-------|----------------|------------------|--------------|
| Total Fund Approved     | Sl.No | State/District | Allocation fund  | in Lakhs     |
| 2.754                   | 1     | Baksa          | 27543.00         | 0.275        |
|                         | 2     | Bongaigaon     | 27543.00         | 0.275        |
|                         | 3     | Dhemaji        | 27543.00         | 0.275        |
|                         | 4     | Dhubri         | 27543.00         | 0.275        |
|                         | 5     | Hailakandi     | 27543.00         | 0.275        |
|                         | 6     | Jorhat         | 27543.00         | 0.275        |
|                         | 7     | Karbi Anglong  | 27543.00         | 0.275        |
|                         | 8     | Karimganj      | 27543.00         | 0.275        |
|                         | 9     | Nalbari        | 27543.00         | 0.275        |
|                         | 10    | Sonitpur       | 27543.00         | 0.275        |
| <b>Total allocation</b> |       |                | <b>275430.00</b> | <b>2.754</b> |

| Training   | One day training for Data entry and analysis for Block Health Team including Block Programme Manager (participant 20 Nos) |  |                |      |                 |                    |
|--|---|--|----------------|------|-----------------|--------------------|
|  | Sl. No.   | Component  | UnitCost (Rs.) | Unit | Duration (Days) | Total Amount (Rs.) |
| One day training for Data entry and analysis for Block Health Team (including Block Programme Manager) | 1   | TA/DA for participants @ Rs 400 / person                   | 400.00         | 20   | 1               | 8000.00            |
|  | 2   | Tea, Lunch@ 250/person + 5persons extra                    | 250.00         | 25   | 1               | 6250.00            |
|  | 3   | Hiring of hall   | 3000.00        | 1    | 1               | 3000.00            |
|  | 4   | Incidental expenses(Photocopy, job aids, flip charts etc.) | 200.00         | 23   | 1               | 4600.00            |
|  | 5   | Honorarium for resource person@700/personX3person          | 700.00         | 3    | 1               | 2100.00            |
|  | <b>Total:</b>   |  |                |      |                 | <b>23950.00</b>    |
|  |   | Incidental expenses 15 % of budget                         |                |      |                 |                    |
| <b>Total:</b>  |   |  |                |      | <b>27542.50</b> |                    |



## **AGENDA**

### **One Day Training of Block Health Team**

**Venue : District HQ**

| <b>Time</b> | <b>Duration</b> | <b>Session</b>                               | <b>Felicitation</b>                            |
|-------------|-----------------|--|--|
| 09:00-09:10 | 10 min          | Registration                                 |  |
| 09:10-09:15 | 5 min           | Pre Test                                     |  |
| 09:15-09:30 | 15 min          | Introduction                                 |  |
| 09:30-09:50 | 15 min          | Welcome address and objective of the meeting | By DSO, IDSP, Assam                            |
| 09:50-10:45 | 15 min          | Tea Break                                    |  |
| 10:45-11:00 | 15 min          | IDSP Reporting System                        | By DSO, IDSP, Assam                            |
| 11:00-11:30 | 30 min          | Case Definition                              | By District ToT                                |
| 11:30-12:00 | 30 min          | Data Management and outbreak                 | By Consultant Training/District Epidemiologist |
| 12:00-01:30 | 1 hr            | Epidemiology for disease surveillance        | By District ToT                                |
| 13:30-14:15 | 45 min          | Lunch Break                                  |  |
| 14:15-15:30 | 1 hr 15 mnt     | S,P,L forms details                          | By DSO, IDSP, Assam                            |
| 15:30-16:30 | 30 min          | Early Warning Signal                         | By District Epidemiologist                     |
| 16:30-17:00 | 30 min          | Open discussion                              |  |
| 17:00-17:15 | 15 min          | Post Test                                    |  |
| 17:15-17:30 | 15 min          | Vote of Thanks                               |  |

Pre/Post Test annexed herewith.

### **FMR-9.5.11.9- Three days training course for District Rapid Response Team Members at State level**

**Three days training course for District Rapid Response Team Members at State level for 3 batches will be held at State HQ-**

#### **1<sup>st</sup> Batch-**

**Notified RRT members:** 1 Physician from **Karimganj**, 2-1 Physician & 1 Epidemiologist from **Hailakandi**, 3-1 Microbiologist ,1 Physician & 1 Epidemiologist from **Kamrup Rural**, 3-1 Microbiologist ,1 Physician & 1 Epidemiologist from **K Anglong**, 4- 1 Microbiologist ,1 Physician, 1 Epidemiologist & 1 Food Inspector from **Dima Hasao**, 3-1 Food Inspector ,1 Physician & 1 Epidemiologist from **Morigaon**, 1 DSO from **Goalpara**, 1 Microbiologist from **Dhubri**, 2-1 Epidemiologist & 1 Microbiologist from **Nalbari**

#### **2<sup>nd</sup> Batch-**

**Notified RRT members** 4- 1 Microbiologist ,1 Physician, 1 Epidemiologist & 1 Food Inspector -from **Baksa**, 4- 1 Microbiologist ,1 Physician, 1 Epidemiologist & 1 Food Inspector From **Barpeta**, 4- 1 Microbiologist ,1 Physician, 1 Epidemiologist & 1 Food Inspector from **Golaghat**, 3-1 Microbiologist ,1 Physician & 1 Epidemiologist from **Kokrajhar**, 2-1 Epidemiologist & 1 Microbiologist from **Dibrugarh**, 2- 1 Epidemiologist & 1 Microbiologist from **Sonitpur**, 2-1 DSO & 1 Epidemiologist from **Udalguri**,

**3<sup>rd</sup> Batch-**

**Notified RRT members-** 6-1 Nodal Officer IDSP Community Medicine deptt., FAAMCH, 1 Nodal Officer IDSP Microbiology deptt. FAAMCH 1 Microbiologist ,1 Physician, 1 Epidemiologist & 1 Food Inspector from **Barpeta**, 3 from **Kamrup Metro**, 3-1 Microbiologist ,1 Physician & 1 Epidemiologist from **Lakhimpur**, 3-1 Microbiologist ,1 Physician & 1 Epidemiologist from **Dhemaji**, 3-1 Microbiologist ,1 Physician & 1 Epidemiologist from **Jorhat**, 2-1 Epidemiologist & 1 Microbiologist from **Sivasagar**

Unit cost per batch= Rs.277322/-  
 Total Batch= 3 nos.  
 Total Participants=60 nos.  
 Total Amount = Rs.831968/-

**Fund Allocation-State/District:**

| FMR-9.5.11.9                   |                |                 |          |
|--------------------------------|----------------|-----------------|----------|
| Total Fund Approved (in Lakhs) | State/District | Allocation Fund | In Lakhs |
| 8.319                          | State HQ       | 831968          | 8.319    |
|                                | District       | 0.00            |          |

| Training   | <u>Three Days Training course for District Rapid Response Team Members at State HQ (participant 20 Nos)</u> |  |               |      |          |                  |
|--|---|--|---------------|------|----------|------------------|
|  | Sl. No.   | Component  | UnitCost(Rs.) | Unit | Duration | Total Amount     |
| Others (District Rapid Response Team Members - 3 days)** | 1   | DA for participants@ Rs 500 / person/day                       | 500.00        | 20   | 4        | 40000.00         |
|  | 2   | TA for participants (to & fro) @ 1500/ person or as per actual | 1500.00       | 20   | 3        | 90000.00         |
|  | 3   | Accomodation@1000/day/person/day                               | 1000.00       | 20   | 3        | 60000.00         |
|  | 4   | Tea, Snacks & Lunch@350/person/day+ 5ns                        | 350.00        | 25   | 3        | 26250.00         |
|  | 5   | Hiring of hall   | 3000.00       | 1    | 3        | 9000.00          |
|  | 6   | Incidental expenses(Photocopy, job aids, flip charts etc.)     | 300.00        | 23   | 1        | 6900.00          |
|  | 7   | Honorarium for resource person@1000/personX3personX3days       | 1000.00       | 3    | 3        | 9000.00          |
|  | <b>Sub Total:</b>   |  |               |      |          |                  |
| Institutional over head 15 % of budget                   |   |  |               |      |          | 36172.50         |
| <b>Total</b>   |   |  |               |      |          | <b>277322.50</b> |





## Agenda

### District Rapid Response Team Training

Venue: SIHFW, Sixmile, Khanapara Guwahati-22

| Day-1           |   |   |
|-----------------|---|---|
| Time            | Topic   | Resource person                                       |
| 9:30 – 10:00 am | Registration  |   |
| 10:00-10:15 am  | Inauguration of the Training and Overview of IDSP Assam   | By SSO  |
| 10:15- 10:30 am | Objective, methodology and expected outcome   | By Training Consultant                                |
| 10:30-10:45 am  | Pretest<br>Tea break  |   |
| 10:45-11:30     | Epidemiology in public health Practice- Public Health surveillance  | By Nodal Officer, IDSP, HOD, Community Medicine, GMCH |
| 11:30-12:15     | IDSP Implementation process-<br>Outbreak investigation and response-  | By Training Consultant                                |
| 12:15-01:00 PM  | Emerging and re-emerging of diseases- Disaster preparedness   | By Nodal Officer, IDSP, Microbiology deptt. GMCH      |
| 01:00-01:45     | Lunch   |   |
| 01:45-02:30     | Entomological Surveillance  | By State Entomologist, IDSP                           |
| 02:30-03:15 pm  | Laboratory support: standard operating procedures for sample collection, storage, packaging and transportation. | By Nodal Officer, IDSP, Microbiology deptt. GMCH      |
| 03:15-03:30     | Tea break   |   |
| 03:30-05:00     | Exercise: Case definition and Analysis of Surveillance Data   | IDSP state team                                       |
| Day-2           |   |   |
| 09:30-09:45     | Summary of the previous day   |   |
| 09:45-10:30     | S,P, L surveillance flowchart details   | By State Veterinary Consultant,                       |
| 10:30-10:45 am  | Tea break   |   |
| 10:45-11:30     | IDSP Portal online demonstration  | By Training Consultant/ SDM                           |
| 11:30-01:00 PM  | What is Early Warning Signal & Outbreak   | By Nodal Officer, IDSP, HOD, Community Medicine, GMCH |
| 01:00-01:45     | Lunch   |   |
| 01:45-03:15PM   | Group presentation  |   |
| 03:15-03:3      | Tea break   |   |
| 03:30-03:45     | Post test   |   |
| 03:45-04:30     | Valedictory Session   |   |
| Day-3           |   |   |
| 09:30-09:45     | Summary of the previous day   |   |
| 09:45-10:30     | Intersectoral Coordination and Zoonotic Diseases of public health importance                                    | By State Veterinary Consultant, IDSP                  |
| 10:30-10:45 am  | Tea break   |   |
| 10:45-11:30     | International Health Regulations (IHR-2005)—A legal instrument to achieve Global Health Security                | By Nodal Officer, IDSP, Microbiology deptt. GMCH      |
| 11:30-12:15     | Exercise: Trigger level for action Card Exercise  | IDSP state team                                       |
| 12:15-01:00 PM  | Exercise: Trigger level for action Card Exercise  | IDSP state team                                       |
| 01:00-01:45     | Lunch   |   |
| 01:45-03:45PM   | Group presentation & Tea break & Post test  |   |
| 03:45-04:30     | Valedictory Session   |   |

Pre/Post Test annexed herewith.



### FMR-6.1.15- Procurement of bio-medical Equipment: IDSP

- As per D.O. letter No. T18015/150/2010-IDSP, dated 13rd December'2010 , There is an urgent need to develop laboratories at the district level for conducting diagnosis services for epidemic prone diseases so as to cater to the health care needs of the community and generate a quality lab based surveillance data.
- Laboratory plays an important role in establishing diagnosis of these and other endemic communicable diseases. Also, reliable laboratory based surveillance data are essential for establishing health care priorities and planning health care programmes.
- The labs at the district hospitals mainly carry out diagnostic tests related to haematology and biochemistry and are not equipped to conduct tests for diagnosis of outbreak prone diseases. Infact such laboratory should exist in all the district hospitals since the labs are expected to provide laboratory services to the patients and for outbreak investigations in the districts for diagnosis of various epidemic prone disease including Typhoid, Cholera, Dengue, Chikungunya, Measles, Hepatitis A & E, Meningococcal Meningitis, Diphtheria, Leptospirosis etc.
- Accurate laboratory data can also help evaluate the effectiveness of health care programmes, drug treatments and immunization programmes. Unless the importance of laboratory in generating valid health data is recognised district health programs will be unable to respond adequately to local health care needs and priorities and national health planning will lack a scientific foundation on which to develop and evaluate its health strategies.
- Currently labs at the district hospitals carry out diagnostic tests related to haematology and biochemistry only and are not equipped to conduct tests for diagnosis of outbreak prone diseases. Despite various efforts, including the efforts made under IDSP, strengthening of district labs has been found to a very difficult task.
- Upgrading the microbiology and serology component of the district labs, mobilization of adequate routine clinical samples and making available resources in terms of consumables & kits, trained technicians & microbiologists etc.
- In addition districts are the first referral units for the community and must have at least one well established laboratory to cater to the health care needs of the community and generate a quality lab based surveillance data.
- Additional technical strengthening technical support from the CDC/Global Disease Detection –India Centre (GDD-IC) through a standardized assessment of its public health laboratories and laboratory system. Assessments were conducted by using the standardized WHO Laboratory Assessment Tools (LAT), adapted to the Indian context.
- A training workshop on LQMS is conducting in phase manner for IDSP microbiologists to equip them with skills to strengthen quality management in DPHL.

Already 14 District Public Health lab being strengthened for diagnosis of epidemic prone diseases at Golaghat, Dhubri ,Lakhimpur, Goalpara, Nalbari, Nagaon, Sivasagar, Tinsukia , K Anlong & Kamrup Metro, Dima Hasao, Dhemaji, Darrang, Kokrajhar District in phase manner. **Already 18 nos. Lab Tests are provided to the patients free of cost as per GOI guidelines annexed in 2.**

**In FY 2018-19 another two DPHL approved i.e. Bongaigaon & Udalguri.**

After Gap analysis of basic equipments required for upgradation of District Civil Hospital Laboratory to District Public Health Laboratory is found that we may upgraded another 5 nos District CH Laboratory viz- Baksa, Chirang, Hailakandi, Karimaganj, Morigaon as follows:

**Fund allocation:**

| FMR-9.5.11.9                   |                |                 |          |
|--------------------------------|----------------|-----------------|----------|
| Total Fund Approved (in Lakhs) | State/District | Allocation Fund | In Lakhs |
| 35.80                          | State HQ       | 3580000         | 35.80    |
|                                | District       | 0.00            |          |

**Up gradation of DPHL:**

| Approved/Proposed year              | SINO | District                   | Biosafety cabinet class | Autoclave (sterilization) | Autoclave for decontamination (vertical) | Hot air oven | Incubators  | Binocular microscopes | ELISA reader and washer | Refrigerator (285 ltrs capacity) | Deep Freezer (-20°C) | Centrifuge  | Micro pipette: (0.2 – 10 µl, 20 – 200 µl, 100–1000µl) | Water bath  | Weighing scale & Mixer | Needle Destroyer | Total        |
|-------------------------------------|------|----------------------------|-------------------------|---------------------------|--|--------------|-------------|-----------------------|-------------------------|----------------------------------|----------------------|-------------|---|-------------|------------------------|------------------|--------------|
|                                     |      | Approved Amount (in Lakhs) | 3.00                    | 1.50                      | 1.50                                     | 1.00         | 0.50        | 0.80                  | 5.00                    | 0.20                             | 2.00                 | 0.40        | 0.30  | 0.40        | 0.20                   | 0.10             | 16.90        |
| Approved in Fy 2018-19              | 1    | Bongaigaon                 |                         |                           |  |              |             |                       |                         | 0.20                             | 1.45                 |             |   | 0.40        | 0.20                   |                  | 2.25         |
|                                     | 2    | Udalguri                   | 3.00                    | 1.45                      |  |              |             |                       |                         |                                  | 1.45                 |             |   |             |                        |                  | 5.90         |
| To be upgraded and proposed in SPIP | 3    | Baksa                      | 3.00                    | 1.45                      |  |              | 0.50        |                       |                         |                                  | 1.45                 | 0.40        |   |             |                        |                  | 6.80         |
|                                     | 4    | Chirang                    | 3.00                    | 1.45                      |  |              |             |                       |                         | 0.20                             | 1.45                 |             |   |             | 0.20                   |                  | 6.30         |
|                                     | 5    | Hailakandi                 | 3.00                    |                           |  |              |             |                       |                         |                                  | 1.45                 | 0.40        |   |             | 0.20                   |                  | 5.05         |
|                                     | 6    | Karimganj                  | 3.00                    |                           |  |              |             |                       |                         | 0.20                             | 1.45                 |             |   |             |                        |                  | 4.65         |
|                                     | 7    | Morigaon                   | 3.00                    |                           |  |              |             |                       |                         |                                  | 1.45                 | 0.40        |   |             |                        |                  | 4.85         |
| <b>Total</b>                        |      |                            | <b>18.00</b>            | <b>4.35</b>               | <b>0.00</b>                              | <b>0.00</b>  | <b>0.50</b> | <b>0.80</b>           | <b>0.00</b>             | <b>0.60</b>                      | <b>10.15</b>         | <b>1.20</b> | <b>0.00</b>   | <b>0.40</b> | <b>0.60</b>            | <b>0.00</b>      | <b>35.80</b> |

Another 2 Lakhs approved for Computer with printer, scanner, UPS for Bongaigaon & Udalguri, but we may process later on for Computer with printer, scanner, UPS for 7 nos DPHL.

### FMR-10.4.-Other Recurring Cost- Laboratory Support under IDSP

#### FMR-10.4.2- Recurring costs on account of Consumables, kits, communication, misc. expenses etc. at each district public health lab

An amount of Rs-2 Lakhs approved for each DPHL for Recurring costs on account of Consumables, kits, communication, misc. expenses etc. under IDSP details as given below:

##### Fund allocation: At District:

| FMR-10.4.2          |       |               |                 |          |
|---------------------|-------|---------------|-----------------|----------|
| Total Fund Approved | Sl.No | District      | Allocation fund | in Lakhs |
| 28.000              | 1     | Darrang       | 200000.00       | 2.000    |
|                     | 2     | Dhemaji       | 200000.00       | 2.000    |
|                     | 3     | Dhubri        | 200000.00       | 2.000    |
|                     | 4     | Dimahasao     | 200000.00       | 2.000    |
|                     | 5     | Goalpara      | 200000.00       | 2.000    |
|                     | 6     | Golaghat      | 200000.00       | 2.000    |
|                     | 7     | Karbi Anglong | 200000.00       | 2.000    |
|                     | 8     | Kamrup Metro  | 200000.00       | 2.000    |
|                     | 9     | Kokrajhar     | 200000.00       | 2.000    |
|                     | 10    | Lakhimpur     | 200000.00       | 2.000    |
|                     | 11    | Nagaon        | 200000.00       | 2.000    |
|                     | 12    | Nalbari       | 200000.00       | 2.000    |
|                     | 13    | Sivasagar     | 200000.00       | 2.000    |
|                     | 14    | Tinsukia      | 200000.00       | 2.000    |
| Total allocation    |       |               | 2800000.00      | 28.000   |

#### FMR-10.4.3- Referral Network of laboratories (Govt. Medical College labs) Reimbursement based payment for laboratory tests

In Assam Establish referral lab network in 5 Govt. Medical Colleges viz-GMCH, AMCH & SMCH,FAAMCH Barpeta, In FY 2018-19 TMCH is approved as State Referral Laboratory.

##### Fund Allocation-State/District:

| FMR-10.4.3          |       |                 |                 |          |
|---------------------|-------|-----------------|-----------------|----------|
| Total Fund Approved | Sl.No | State/District  | Allocation fund | in Lakhs |
| 12.00               | 1     | Barpeta, FAAMCH | 200000.00       | 2.00     |
|                     | 4     | Cachar, SMCH    | 200000.00       | 2.00     |
|                     | 5     | Dibrugarh, AMCH | 200000.00       | 2.00     |
|                     | 6     | Jorhat, JMCH    | 200000.00       | 2.00     |
|                     | 7     | Kamrup M, GMCH  | 200000.00       | 2.00     |
|                     | 8     | Sonitpur, TMCH  | 200000.00       | 2.00     |
| Total allocation    |       |                 | 1200000.00      | 12.000   |

### FMR-10.4.4- Expenses on account of consumables, operating expenses, office expenses, transport of samples, miscellaneous etc.

An amount of Rs-60000/- approved for expenses on account of consumables, operating expenses, office expenses, transport of samples, miscellaneous etc for each SRL . viz-GMCH, AMCH , SMCH, JMCH, FAAMCH, TMCH,

#### Fund Allocation-State/District:

| FMR-10.4.4          |                  |                 |                 |           |
|---------------------|------------------|-----------------|-----------------|-----------|
| Total Fund Approved | Sl.No            | State/District  | Allocation fund | in Lakhs  |
| 3.60                | 1                | Barpeta, FAAMCH | 60000.00        | 0.60      |
|                     | 4                | Cachar, SMCH    | 60000.00        | 0.60      |
|                     | 5                | Dibrugarh, AMCH | 60000.00        | 0.60      |
|                     | 6                | Jorhat, JMCH    | 60000.00        | 0.60      |
|                     | 7                | Kamrup M, GMCH  | 60000.00        | 0.60      |
|                     | 8                | Sonitpur, TMCH  | 60000.00        | 0.60      |
|                     | Total allocation |                 |                 | 360000.00 |

### FMR-16.1-Programme Management under IDSP

#### FMR-16.1-IDSP Meeting under IDSP

**IDSP Meeting-** In State HQ, Total approved amount Rs-1 Lakhs- to be conducted 2 nos in FY 2018-19 @ Rs-50000/-per meeting. In District HQ, Total approval amount Rs-540000/- for 27 districts to be conducted 2 nos in FY 2018-19 @ Rs-10000/- per meeting per district

#### Fund Allocation: At State/District:

| FMR-16.2            |       |                |                 |          |
|---------------------|-------|----------------|-----------------|----------|
| Total Fund Approved | Sl.No | State/District | Allocation fund | in Lakhs |
| 6.400               | 1     | State HQ       | 100000.00       | 1.000    |
|                     | 2     | Baksa          | 20000.00        | 0.200    |
|                     | 3     | Barpeta        | 20000.00        | 0.200    |
|                     | 4     | Bongaingaon    | 20000.00        | 0.200    |
|                     | 5     | Cachar         | 20000.00        | 0.200    |
|                     | 6     | Chirang        | 20000.00        | 0.200    |
|                     | 7     | Darrang        | 20000.00        | 0.200    |
|                     | 8     | Dhemaji        | 20000.00        | 0.200    |
|                     | 9     | Dhubri         | 20000.00        | 0.200    |
|                     | 10    | Dibrugarh      | 20000.00        | 0.200    |
|                     | 11    | Dima Hassao    | 20000.00        | 0.200    |
|                     | 12    | Goalpara       | 20000.00        | 0.200    |
|                     | 13    | Golaghat       | 20000.00        | 0.200    |
|                     | 14    | Hailakandi     | 20000.00        | 0.200    |
|                     | 15    | Jorhat         | 20000.00        | 0.200    |
|                     | 16    | Kamrup ( M)    | 20000.00        | 0.200    |
|                     | 17    | Kamrup ( R)    | 20000.00        | 0.200    |
|                     | 18    | Karbi Anglong  | 20000.00        | 0.200    |
|                     | 19    | Karimganj      | 20000.00        | 0.200    |
|                     | 20    | Kokrajhar      | 20000.00        | 0.200    |
|                     | 21    | Lakhimpur      | 20000.00        | 0.200    |
|                     | 22    | Morigaon       | 20000.00        | 0.200    |
|                     | 23    | Nagaon         | 20000.00        | 0.200    |
|                     | 24    | Nalbari        | 20000.00        | 0.200    |
|                     | 25    | Sivsagar       | 20000.00        | 0.200    |
|                     | 26    | Sonitpur       | 20000.00        | 0.200    |
|                     | 27    | Tinsukia       | 20000.00        | 0.200    |
|                     | 28    | Udalguri       | 20000.00        | 0.200    |
| Total allocation    |       |                | 640000.00       | 6.40     |

### FMR-16.1 –Mobility Support

#### For State

Mobility Support- For State HQ—Rs-700000 i.e. approx. Rs-58000/-per month

#### Fund Allocation: At State HQ

| FMR-16.1            |         |                |                   |           |          |
|---------------------|---------|----------------|-------------------|-----------|----------|
| Total fund approval | Sl. No. | State/District | For Mobility cost |           |          |
|                     |         |                | Per month         | Per annum | in lakhs |
| 7.00                | 1       | State HQ       | 58000             | 700000    | 7.00     |

#### For District HQ-

Mobility Support for FY 2018-19 –Rs-810000 i.e. approx. Rs-675000/- required per month for 27 districts  
**Hiring of vehicle for field visit as approved by NHM norms. Minimum 10 Days field visit must be done by DSU staffs.**

The Mobility support fund calculated on the basis of Nos. of Reporting Units as follows:

#### Fund Allocation: At District Level

| FMR-16.1            |         |                |  |                |              |
|---------------------|---------|----------------|--|----------------|--------------|
| Total fund approval | Sl. No. | State/District | For Mobility cost (Mobility Cost calculated on the basis of No. of Reporting Units.) |                |              |
|                     |         |                | Per month  | Per annum      | in lakhs     |
| 81.00               | 1       | BAKSA          | 21988  | 263856         | 2.64         |
|                     | 2       | BARPETA        | 35144  | 421728         | 4.22         |
|                     | 3       | BONGAIGAON     | 16284  | 195408         | 1.95         |
|                     | 4       | CACHAR         | 33028  | 396336         | 3.96         |
|                     | 5       | CHIRANG        | 12144  | 145728         | 1.46         |
|                     | 6       | DARRANG        | 20516  | 246192         | 2.46         |
|                     | 7       | DHEMAJI        | 14260  | 171120         | 1.71         |
|                     | 8       | DHUBRI         | 29072  | 348864         | 3.49         |
|                     | 9       | DIBRUGARH      | 30636  | 367632         | 3.68         |
|                     | 10      | DIMA HASAO     | 13888  | 166656         | 1.67         |
|                     | 11      | GOALPARA       | 21988  | 263856         | 2.64         |
|                     | 12      | GOLAGHAT       | 23552  | 282624         | 2.83         |
|                     | 13      | HAILAKANDI     | 12880  | 154560         | 1.55         |
|                     | 14      | JORHAT         | 22540  | 270480         | 2.70         |
|                     | 17      | K ANGLOG       | 26956  | 323472         | 3.23         |
|                     | 16      | KAMRUP         | 38916  | 466992         | 4.67         |
|                     | 15      | KAMRUP M       | 19504  | 234048         | 2.34         |
|                     | 18      | KARIMGANJ      | 24748  | 296976         | 2.97         |
|                     | 19      | KOKRAJHAR      | 23092  | 277104         | 2.77         |
|                     | 20      | LAKHIMPUR      | 24748  | 296976         | 2.97         |
|                     | 21      | MARIGAON       | 16928  | 203136         | 2.03         |
|                     | 22      | NAGAON         | 46460  | 557520         | 5.58         |
|                     | 23      | NALBARI        | 26680  | 320160         | 3.20         |
|                     | 24      | SIBSAGAR       | 33580  | 402960         | 4.03         |
|                     | 25      | SONITPUR       | 42596  | 511152         | 5.11         |
|                     | 26      | TINSUKIA       | 21988  | 263856         | 2.64         |
|                     | 27      | UDALGURI       | 20884  | 250608         | 2.51         |
|                     |         | <b>Total</b>   | <b>675000</b>  | <b>8100000</b> | <b>81.00</b> |

**FMR-16.1 – Operational Cost (Expenses on account of consumables, operating expenses, office expenses, admin expenses, contingencies, transport of samples, miscellaneous etc.)**

**FMR-16.1 – Information, Communication and Technology under IDSP**

An amount of Rs-18.9 Lakhs approved for ICT equipments. Total In RoP 17-18, a budget of Rs 7 lakhs was approved for replacement of ICT equipment at 10 DSUs (Barpeta, Cachar, Darrang, Dhubri, Lakhimpur, Nagaon, Morigaon, Sivasagar, Tinsukia, Udalguri). Hence, A budget of Rs 11.90 Lakhs approved for replacement of old ICT equipment at rest of 17 DSUs. i.e. Baksa, Bongaigaon, Chirang, Dhemaji, Dibrugarh, Dima Hasao, Goalpara, Golaghat, Hailakandi, Jorhat, Kamrup Metro, Kamrup R, K Anglong, Karimganj, Kokrajhar, Nalbari, Sonitpur  
Unit cost @ Rs70000/-

**Fund allocation: At District**

| FMR-16.1            |         |                |                 |              |
|---------------------|---------|----------------|-----------------|--------------|
| Total fund approval | Sl. No. | State/District | IT Equipments   |              |
|                     |         |                | Allocation fund | in lakhs     |
| 18.90               | 1       | BAKSA          | 70000           | 0.70         |
|                     | 2       | BARPETA        | 70000           | 0.70         |
|                     | 3       | BONGAIGAON     | 70000           | 0.70         |
|                     | 4       | CACHAR         | 70000           | 0.70         |
|                     | 5       | CHIRANG        | 70000           | 0.70         |
|                     | 6       | DARRANG        | 70000           | 0.70         |
|                     | 7       | DHEMAJI        | 70000           | 0.70         |
|                     | 8       | DHUBRI         | 70000           | 0.70         |
|                     | 9       | DIBRUGARH      | 70000           | 0.70         |
|                     | 10      | DIMA HASAO     | 70000           | 0.70         |
|                     | 11      | GOALPARA       | 70000           | 0.70         |
|                     | 12      | GOLAGHAT       | 70000           | 0.70         |
|                     | 13      | HAILAKANDI     | 70000           | 0.70         |
|                     | 14      | JORHAT         | 70000           | 0.70         |
|                     | 17      | K ANGLOG       | 70000           | 0.70         |
|                     | 16      | KAMRUP         | 70000           | 0.70         |
|                     | 15      | KAMRUP M       | 70000           | 0.70         |
|                     | 18      | KARIMGANJ      | 70000           | 0.70         |
|                     | 19      | KOKRAJHAR      | 70000           | 0.70         |
|                     | 20      | LAKHIMPUR      | 70000           | 0.70         |
|                     | 21      | MARIGAON       | 70000           | 0.70         |
|                     | 22      | NAGAON         | 70000           | 0.70         |
|                     | 23      | NALBARI        | 70000           | 0.70         |
|                     | 24      | SIBSAGAR       | 70000           | 0.70         |
|                     | 25      | SONITPUR       | 70000           | 0.70         |
|                     | 26      | TINSUKIA       | 70000           | 0.70         |
|                     | 27      | UDALGURI       | 70000           | 0.70         |
|                     |         | <b>Total</b>   | <b>1890000</b>  | <b>18.90</b> |

**FMR-16.1 – Office expenses on telephone, fax, Broadband Expenses & Other Miscellaneous Expenditures**

For State HQ- An amount for Rs -600000/- approved for FY 2018-19 i.e. @Rs-50000/- per month.

**Fund Allocation: At State HQ**

| FMR-16.1           |         |                |                   |           |          |
|--------------------|---------|----------------|-------------------|-----------|----------|
| Total fundapproval | Sl. No. | State/District | For Mobility cost |           |          |
|                    |         |                | Per month         | Per annum | in lakhs |
| 6.00               | 1       | State HQ       | 50000             | 600000    | 6.00     |



**FMR-16.1 – Minor repairs and AMC of IT/office equipment supplied under IDSP(Office expenses)**

A budget of Rs 81 Lakhs Approved for mobility at DSU & Minor Repairing of IT equipments.

**Breakup of approval amount Rs. 81.00-**

**a. Total Rs=12.60 Lakhs**

Minor repairs for 27 DSU @ Rs-45000/-per annum + 5 Medical Colleges @Rs-9000/- per annum

**b. Total Rs=68.40 Lakh**-Office expenses for 27 DSU @ Rs-18500/-per month and 6 nos. Govt. Medical Colleges @ Rs-5000 per month. Total Rs-76.23 Lakhs to be released to districts for office expenses including printing of S,P,L forms & tally sheet of 27 districts.

**Out of Rs-81.00 Lakhs, Rs -76.23 lakhs to be released to District and Rs-477000/- will be deducted from district office expense fund for printing of training module at state hq**

| FMR Code: 16.7 breakup for Office Expenses at district level   |            |                  |                   |                   |                                   |                                |               |  |                                 |
|--|------------|------------------|-------------------|-------------------|-----------------------------------|--------------------------------|---------------|--|---------------------------------|
| Sl. No.  | District   | Medical Colleges | Per month for DSU | Per annum for DSU | For IT repairing per annum at DSU | Per month for Medical Colleges | Per annum     | For IT repairing per annum at Medical Colleges | Total Office expenses per annum |
|  |            |                  |                   | 1                 | 2                                 |                                | 3             | 4  | 5(1+2+3+4)                      |
| 1  | BAKSA      |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 2  | BARPETA    | FAAMC H          | 18500             | 222000            | 45000                             | 5000                           | 60000         | 9000   | 336000                          |
| 3  | BONGAIGAON |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 4  | CACHAR     | SMCH             | 18500             | 222000            | 45000                             | 5000                           | 60000         | 9000   | 336000                          |
| 5  | CHIRANG    |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 6  | DARRANG    |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 7  | DHEMAJI    |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 8  | DHUBRI     |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 9  | DIBRUGARH  | AMCH             | 18500             | 222000            | 45000                             | 5000                           | 60000         | 9000   | 336000                          |
| 10   | DIMA HASAO |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 11   | GOALPARA   |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 12   | GOLAGHAT   |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 13   | HAILAKANDI |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 14   | JORHAT     | JMCH             | 18500             | 222000            | 45000                             | 5000                           | 60000         | 9000   | 336000                          |
| 17   | K ANGLOG   |                  | 18500             | 222000            | 45000                             | 5000                           | 60000         | 9000   | 336000                          |
| 16   | KAMRUP     |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 15   | KAMRUP M   | GMCH             | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 18   | KARIMGANJ  |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 19   | KOKRAJHAR  |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 20   | LAKHIMPUR  |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 21   | MARIGAON   |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 22   | NAGAON     |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 23   | NALBARI    |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 24   | SIBSAGAR   |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 25   | SONITPUR   | TMCH             | 18500             | 222000            | 45000                             | 5000                           | 60000         | 9000   | 336000                          |
| 26   | TINSUKIA   |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| 27   | UDALGURI   |                  | 18500             | 222000            | 45000                             |                                |               |  | 267000                          |
| <b>Total</b>   |            |                  | <b>499500</b>     | <b>5994000</b>    | <b>1215000</b>                    | <b>30000</b>                   | <b>360000</b> | <b>54000</b>                                   | <b>7623000</b>                  |
| <b>Total approved amount in FY 2018-19</b>   |            |                  |                   |                   |                                   |                                |               |  | <b>8100000</b>                  |
| <b>Rs-477000/- deducted from the head of office expenses of district for printing of training module at State HQ</b> |            |                  |                   |                   |                                   |                                |               |  | <b>477000</b>                   |







## FMR-16. –PM-Human Resource

### FMR-16.8.1.4- State level HR under DCP

#### FMR-16.8.1.4.2- Consultants/ Programme Officers

**Sanction Position under IDSP at State HQ-5** position for State Microbiologist, State Epidemiologist, State Entomologist, Training Consultant, Veterinary Consultant

#### TERMS OF REFERENCE FOR Consultants:

1. Organize and monitor timely collection of data from all reporting districts. Administer collection, compilation and analysis of passive surveillance data not only from peripheral health institutions but also from hospitals and colleges in the state.
2. Analyse surveillance data and prepare weekly surveillance graphs and charts.
3. Identify outbreaks of diseases targeted in IDSP for all reporting districts using triggers agreed with Central Surveillance Unit.
4. Collect monthly summaries of the disease situation from the district surveillance units.
5. Prepare and send monthly summaries of the disease situation to the Central Surveillance Unit and Regional Project Coordinators.
6. Initiate outbreak investigations promptly following the standard operating guidelines of IDSP
7. Coordinate movement of Rapid Response Team & participate in all outbreak investigations
8. Ensure timely submission of FIR (First Information Report) and detailed Outbreak Report to SSU/CSU and Regional Project Coordinators.
9. Ensure timely submission of annual project report and annual surveillance report of DSUs, prepare and timely submit annual project report and annual surveillance report for the SSU to CSU and Regional Project Coordinators.
10. Support effective operational integration of disease control efforts based on the surveillance data
11. Coordinate involvement of Medical Colleges, Private Sector, Community and Media in surveillance activities
12. Provide regular feedback to all reporting districts on disease trends and outbreaks
13. Organize, coordinate & monitor training of state/district staff under IDSP.
14. Identify emerging training needs at the state/district and revise training calendars accordingly.
15. Organize dissemination of training manuals and materials for training courses.
16. Assist in organizing independent evaluation studies under IDSP and its outcome
17. Supervise Data Manager and Consultant Finance/Procurement appointed under IDSP to ensure timely submission of quality information required in relation to data and finance/ procurement matters
18. Monitor proper use of EDUSAT facility/IT networking towards data transfer, training, e-conferencing.
19. Coordinate regular meetings of State/District Surveillance Committee and assist in inter-sectoral coordination for effective IDSP implementation.
20. Organize regular meetings of IDSP stakeholders.
21. Make supervisory visits to DSUs to monitor implementation of project activity
22. Support state surveillance officer in carrying out other works related to effective implementation of IDSP

#### Fund allocation: at State HQ:

| Approved Fund | FMR-16.8.1.4.2            |                  |                   |              |
|---------------|---------------------------|------------------|-------------------|--------------|
|               | Name of Employee          | Per month in Rs. | Per Annum in Rs.  | in Lakhs     |
| 6.000         | State Epidemiologist      | 50000            | 600000            | 6.000        |
| 7.640         | State Microbiologist      | 63670            | 764040            | 7.640        |
| 5.557         | State Vet. Consultant     | 46305            | 555660            | 5.557        |
| 4.862         | State Training Consultant | 40517            | 486204            | 4.862        |
| 5.023         | State Entomologist        | 41860            | 502320            | 5.023        |
| <b>29.082</b> | <b>Total</b>              |                  | <b>2908224.00</b> | <b>29.08</b> |

**FMR-16.8.1.4.5- MIS/ IT Staff**

**Sanction Position under IDSP at State HQ-1 position for State Data Analyst**

**Fund allocation: at State HQ:**

| Approved Fund | FMR-16.8.1.4.5     |                  |                  |             |
|---------------|--------------------|------------------|------------------|-------------|
|               | Name of Employee   | Per month in Rs. | Per Annum in Rs. | in Lakhs    |
| 3.72          | State Data Analyst | 31000            | 372000           | 3.72        |
| <b>3.72</b>   | <b>Total</b>       |                  | <b>372000</b>    | <b>3.72</b> |

**TERMS OF REFERENCE FOR State Data Analyst:**

1. To assist State Surveillance Officer/District Surveillance Officer and other officials in carrying out the IDSP activities
2. Supervise functioning of MIS unit of Integrated Disease Surveillance Programme and IDSP Portal
3. Supervise functioning of Data Entry operators
4. Organize information received from District Surveillance Units
5. Preparation of reports required under the programme
6. Organize maintenance of IT hardware, software and WAN
7. Supervise & Maintain EDUSAT/VPN Network for Video Conferencing & Data Transference
8. Monitoring of 1075 connectivity in State/Districts
9. Familiarize and operate VC equipment, undertake preventive maintenance and trouble shooting for small problems, and coordinate with service providers for major breakdowns.
10. Analyze S,P,L data for time/place in spreadsheet for identifying Rising Trend of Disease over time /Early Warning Signals
11. Prepare Periodic and Annual Reports

**FMR-16.8.1.4.7- Accounts Staff**

**Sanction Position under IDSP at State HQ-1 position for Consultant Finance**

**TERMS OF REFERENCE FOR Consultant Finance:**

1. Organize all financial activities related to IDSP programme
2. Supervise filed visit activities of all idsp staffs
3. Preparation of all financial reports required under the programme
4. Support state surveillance officer in carrying out other works related to effective implementation of IDSP

**Fund allocation: at State HQ:**

| Approved Fund | FMR-16.8.1.4.7     |                  |                  |             |
|---------------|--------------------|------------------|------------------|-------------|
|               | Name of Employee   | Per month in Rs. | Per Annum in Rs. | in Lakhs    |
| 3.72          | Consultant Finance | 31000            | 372000           | 3.72        |
| <b>3.72</b>   | <b>Total</b>       |                  | <b>372000</b>    | <b>3.72</b> |





### FMR-16.8.1.4.9- Data Entry Operators

**Sanction Position under IDSP at State HQ-1** position for State Data Entry Operator

**TERMS OF REFERENCE FOR State Data Entry Operator:**

1. To assist State Surveillance Officer/District Surveillance Officer and other officials in carrying out the activities performed by Data Manager
2. Uploading / updating of information in MIS of Integrated Disease Surveillance Project and Portal
3. Compilation of reports required under the project
4. Operation of EDUSAT/VPN Network for Video Conferencing & Data Transference
5. Regular weekly/bi-weekly updating of 1075 connectivity in State/Districts
6. Assist Data Manager in compiling Periodic and Annual Report

**Fund allocation: at State HQ:**

| Approved Fund | FMR-16.8.1.4.9            |                  |                  |             |
|---------------|---------------------------|------------------|------------------|-------------|
|               | Name of Employee          | Per month in Rs. | Per Annum in Rs. | in Lakhs    |
| 2.01          | State Data Entry Operator | 16708            | 200500           | 2.01        |
| <b>2.01</b>   | <b>Total</b>              |                  | <b>200500</b>    | <b>2.01</b> |

### 16.8.2.2- District level HR under DCP

#### FMR-16.8.2.2.2- Consultants/ Programme Officers

Since April'2018, remuneration of district staffs made by State HQ.

**Sanction Position under IDSP at District HQ-1** position for District Epidemiologist for 27 districts

**TERMS OF REFERENCE FOR District Epidemiologist:**

1. Organize and monitor timely collection of data from all reporting districts. Administer collection, compilation and analysis of passive surveillance data not only from peripheral health institutions but also from hospitals and colleges in the state.
2. Analyse surveillance data and prepare weekly surveillance graphs and charts.
3. Identify outbreaks of diseases targeted in IDSP for all reporting districts using triggers agreed with Central Surveillance Unit.
4. Collect monthly summaries of the disease situation from the district surveillance units.
5. Prepare and send monthly summaries of the disease situation to the Central Surveillance Unit and Regional Project Coordinators.
6. Initiate outbreak investigations promptly following the standard operating guidelines of IDSP
7. Coordinate movement of Rapid Response Team & participate in all outbreak investigations
8. Ensure timely submission of FIR (First Information Report) and detailed Outbreak Report to SSU/CSU and Regional Project Coordinators.
9. Ensure timely submission of annual project report and annual surveillance report of DSUs, prepare and timely submit annual project report and annual surveillance report for the SSU to CSU and Regional Project Coordinators.
10. Support effective operational integration of disease control efforts based on the surveillance data
11. Coordinate involvement of Medical Colleges, Private Sector, Community and Media in surveillance activities
12. Provide regular feedback to all reporting districts on disease trends and outbreaks
13. 14. Identify emerging training needs at the state/district and revise training calendars accordingly.
16. Assist in organizing independent evaluation studies under IDSP and its outcome
17. Supervise Data Manager and Consultant Finance/Procurement appointed under IDSP to ensure timely submission of quality information required in relation to data and finance/ procurement matters
18. Monitor proper use of EDUSAT facility/IT networking towards data transfer, training, e-conferencing.
19. Coordinate regular meetings of State/District Surveillance Committee and assist in inter-sectoral coordination for effective IDSP implementation.
21. Make supervisory visits to DSUs to monitor implementation of project activity
22. Support state/district surveillance officer in carrying out other works related to effective implementation of IDSP



**Fund allocation: at District HQ:**

| Approved Fund | FMR-16.8.2.2.2 |                  |                     |                |
|---------------|----------------|------------------|---------------------|----------------|
|               | District       | Per month in Rs. | Per Annuum in Rs.   | in Lakhs       |
| 129.034       | Baksa          | 42000            | 504000.00           | 5.040          |
|               | Barpeta        | 38202            | 458424.00           | 4.584          |
|               | Bongaingaon    | 42000            | 504000.00           | 5.040          |
|               | Cachar         | 34729            | 416748.00           | 4.167          |
|               | Chirang        | 43659            | 523908.00           | 5.239          |
|               | Darrang        | 38202            | 458424.00           | 4.584          |
|               | Dhemaji        | 41840            | 502080.00           | 5.021          |
|               | Dhubri         | 38202            | 458424.00           | 4.584          |
|               | Dibrugarh      | 41840            | 502080.00           | 5.021          |
|               | Dima Hassao    | 34729            | 416748.00           | 4.167          |
|               | Goalpara       | 30683            | 368196.00           | 3.682          |
|               | Golaghat       | 44883            | 538596.00           | 5.386          |
|               | Hailakandi     | 38202            | 458424.00           | 4.584          |
|               | Jorhat         | 44883            | 538596.00           | 5.386          |
|               | Kamrup ( M )   | 34729            | 416748.00           | 4.167          |
|               | Kamrup ( R )   | 44883            | 538596.00           | 5.386          |
|               | Karbi Anglong  | 41840            | 502080.00           | 5.021          |
|               | Karimganj      | 44883            | 538596.00           | 5.386          |
|               | Kokrajhar      | 42000            | 504000.00           | 5.040          |
|               | Lakhimpur      | 41840            | 502080.00           | 5.021          |
|               | Morigaon       | 38202            | 458424.00           | 4.584          |
|               | Nagaon         | 38202            | 458424.00           | 4.584          |
|               | Nalbari        | 38202            | 458424.00           | 4.584          |
|               | Sivsagar       | 41840            | 502080.00           | 5.021          |
|               | Sonitpur       | 38202            | 458424.00           | 4.584          |
|               | Tinsukia       | 38202            | 458424.00           | 4.584          |
|               | Udalguri       | 38202            | 458424.00           | 4.584          |
|               | <b>Total</b>   |                  | <b>12903372.000</b> | <b>129.034</b> |

**FMR-16.8.2.2.5- MIS/ IT Staff**

**Sanction Position under IDSP at District HQ-1** position for District Data Manager for 27 districts

**TERMS OF REFERENCE FOR District Data Manager:**

1. To assist State Surveillance Officer/District Surveillance Officer and other officials in carrying out the IDSP activities
2. Supervise functioning of MIS unit of Integrated Disease Surveillance Programme and IDSP Portal
3. Supervise functioning of Data Entry operators
4. Organize information received from District Surveillance Units
5. Preparation of reports required under the programme
6. Organize maintenance of IT hardware, software and WAN
7. Supervise & Maintain EDUSAT/VPN Network for Video Conferencing & Data Transference
8. Monitoring of 1075 connectivity in State/Districts
9. Familiarize and operate VC equipment, undertake preventive maintenance and trouble shooting for small problems, and coordinate with service providers for major breakdowns.
10. Analyze S,P,L data for time/place in spreadsheet for identifying Rising Trend of Disease over time /Early Warning Signals
11. Prepare Periodic and Annual Reports

**Fund allocation: at District HQ:**

| Approved Fund | FMR-16.8.2.2.5 |                  |                            |
|---------------|----------------|------------------|----------------------------|
|               | District       | Per month in Rs. | Per Annuam in Rs. in Lakhs |
| 85.621        | Baksa          | 26623            | 319476.00 3.195            |
|               | Barpeta        | 26623            | 319476.00 3.195            |
|               | Bongaingaon    | 27781            | 333372.00 3.334            |
|               | Cachar         | 27781            | 333372.00 3.334            |
|               | Chirang        | 27781            | 333372.00 3.334            |
|               | Darrang        | 27781            | 333372.00 3.334            |
|               | Dhemaji        | 24000            | 288000.00 2.880            |
|               | Dhubri         | 26623            | 319476.00 3.195            |
|               | Dibrugarh      | 24000            | 288000.00 2.880            |
|               | Dima Hassao    | 26623            | 319476.00 3.195            |
|               | Goalpara       | 27781            | 333372.00 3.334            |
|               | Golaghat       | 26623            | 319476.00 3.195            |
|               | Hailakandi     | 24000            | 288000.00 2.880            |
|               | Jorhat         | 24000            | 288000.00 2.880            |
|               | Kamrup ( M)    | 26623            | 319476.00 3.195            |
|               | Kamrup ( R)    | 27781            | 333372.00 3.334            |
|               | Karbi Anglong  | 24000            | 288000.00 2.880            |
|               | Karimganj      | 24000            | 288000.00 2.880            |
|               | Kokrajhar      | 26623            | 319476.00 3.195            |
|               | Lakhimpur      | 24308            | 291696.00 2.917            |
|               | Morigaon       | 27781            | 333372.00 3.334            |
|               | Nagaon         | 26623            | 319476.00 3.195            |
|               | Nalbari        | 27781            | 333372.00 3.334            |
|               | Sivsagar       | 26623            | 319476.00 3.195            |
|               | Sonitpur       | 27781            | 333372.00 3.334            |
|               | Tinsukia       | 27781            | 333372.00 3.334            |
| Udalguri      | 27781          | 333372.00 3.334  |                            |
|               | <b>Total</b>   |                  | <b>8562072.000 85.621</b>  |

**FMR-16.8.2.2.9- Data Entry Operators**

**Sanction Position under IDSP at State HQ-1** position for District Data Entry Operator for 27 districts and 6 nos Medical Colleges

**TERMS OF REFERENCE FOR District Data Entry Operator:**

1. To assist State Surveillance Officer/District Surveillance Officer and other officials in carrying out the activities performed by Data Manager
2. Uploading / updating of information in MIS of Integrated Disease Surveillance Project and Portal
3. Compilation of reports required under the project
4. Operation of EDUSAT/VPN Network for Video Conferencing & Data Transference
5. Regular weekly/bi-weekly updating of 1075 connectivity in State/Districts
6. Assist Data Manager in compiling Periodic and Annual Report

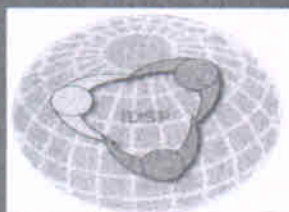
**Fund allocation: at District HQ:**

| Approved Fund | FMR-16.8.2.2.9      |                  |                    |               |
|---------------|---------------------|------------------|--------------------|---------------|
|               | District            | Per month in Rs. | Per Annuum in Rs.  | in Lakhs      |
| 55.614        | Baksa               | 14044            | 168528.00          | 1.685         |
|               | Barpeta & FAAMCH    | 28088            | 337056.00          | 3.371         |
|               | Bongaingaon         | 14044            | 168528.00          | 1.685         |
|               | Cachar & SMCH       | 28088            | 337056.00          | 3.371         |
|               | Chirang             | 14044            | 168528.00          | 1.685         |
|               | Darrang             | 14044            | 168528.00          | 1.685         |
|               | Dhemaji             | 14044            | 168528.00          | 1.685         |
|               | Dhubri              | 14044            | 168528.00          | 1.685         |
|               | Dibrugarh & AMCH    | 28088            | 337056.00          | 3.371         |
|               | Dima Hassao         | 14044            | 168528.00          | 1.685         |
|               | Goalpara            | 14044            | 168528.00          | 1.685         |
|               | Golaghat            | 14044            | 168528.00          | 1.685         |
|               | Hailakandi          | 14044            | 168528.00          | 1.685         |
|               | Jorhat & JMCH       | 28088            | 337056.00          | 3.371         |
|               | Kamrup ( M ) & GMCH | 28088            | 337056.00          | 3.371         |
|               | Kamrup ( R )        | 14044            | 168528.00          | 1.685         |
|               | Karbi Anglong       | 14044            | 168528.00          | 1.685         |
|               | Karimganj           | 14044            | 168528.00          | 1.685         |
|               | Kokrajhar           | 14044            | 168528.00          | 1.685         |
|               | Lakhimpur           | 14044            | 168528.00          | 1.685         |
|               | Morigaon            | 14044            | 168528.00          | 1.685         |
|               | Nagaon              | 14044            | 168528.00          | 1.685         |
|               | Nalbari             | 14044            | 168528.00          | 1.685         |
|               | Sivsagar            | 14044            | 168528.00          | 1.685         |
|               | Sonitpur & TMCH     | 28088            | 337056.00          | 3.371         |
|               | Tinsukia            | 14044            | 168528.00          | 1.685         |
| Udalguri      | 14044               | 168528.00        | 1.685              |               |
|               | <b>Total</b>        |                  | <b>5561424.000</b> | <b>55.614</b> |

## Total fund allocation of District:

| District              | FMR-3.3.3-9.5.11  | FMR-6.5           | FMR-10.4           | FMR-16.          |                   |                   | FMR-16.8           | Total State/District Release |
|-----------------------|-------------------|-------------------|--------------------|------------------|-------------------|-------------------|--------------------|------------------------------|
|                       | Training          | Lab Equipmenst    | Lab Recurring cost | Meetings         | Mobility support  | Office Expenses   | HR-Prog Mng        |                              |
| Baksa                 | 107823.00         |                   | 0.00               | 20000.00         | 263856.00         | 267000.00         | 992004.00          | 1650683.00                   |
| Barpeta               | 67045.00          |                   | 260000.00          | 20000.00         | 421728.00         | 336000.00         | 1114956.00         | 2219729.00                   |
| Bongaingaon           | 82120.00          |                   | 0.00               | 20000.00         | 195408.00         | 267000.00         | 1005900.00         | 1570428.00                   |
| Cachar                | 95920.00          |                   | 260000.00          | 20000.00         | 396336.00         | 336000.00         | 1087176.00         | 2195432.00                   |
| Chirang               | 51405.00          |                   | 0.00               | 20000.00         | 145728.00         | 267000.00         | 1025808.00         | 1509941.00                   |
| Darrang               | 54577.00          |                   | 200000.00          | 20000.00         | 246192.00         | 267000.00         | 960324.00          | 1748093.00                   |
| Dhemaji               | 82120.00          |                   | 200000.00          | 20000.00         | 171120.00         | 267000.00         | 958608.00          | 1698848.00                   |
| Dhubri                | 133526.00         |                   | 200000.00          | 20000.00         | 348864.00         | 267000.00         | 946428.00          | 1915818.00                   |
| Dibrugarh             | 67045.00          |                   | 260000.00          | 20000.00         | 367632.00         | 336000.00         | 1127136.00         | 2177813.00                   |
| Dima Hassao           | 54577.00          |                   | 200000.00          | 20000.00         | 166656.00         | 267000.00         | 904752.00          | 1612985.00                   |
| Goalpara              | 54577.00          |                   | 200000.00          | 20000.00         | 263856.00         | 267000.00         | 870096.00          | 1675529.00                   |
| Golaghat              | 25702.00          |                   | 200000.00          | 20000.00         | 282624.00         | 267000.00         | 1026600.00         | 1821926.00                   |
| Hailakandi            | 107823.00         |                   | 0.00               | 20000.00         | 154560.00         | 267000.00         | 914952.00          | 1464335.00                   |
| Jorhat                | 149166.00         |                   | 260000.00          | 20000.00         | 270480.00         | 336000.00         | 1163652.00         | 2199298.00                   |
| Kamrup ( M)           | 67045.00          |                   | 460000.00          | 20000.00         | 234048.00         | 336000.00         | 1073280.00         | 2190373.00                   |
| Kamrup ( R)           | 95577.00          |                   | 0.00               | 20000.00         | 466992.00         | 267000.00         | 1040496.00         | 1890065.00                   |
| Karbi Anglong         | 107823.00         |                   | 200000.00          | 20000.00         | 323472.00         | 267000.00         | 958608.00          | 1876903.00                   |
| Karimganj             | 107823.00         |                   | 0.00               | 20000.00         | 296976.00         | 267000.00         | 995124.00          | 1686923.00                   |
| Kokrajhar             | 54577.00          |                   | 200000.00          | 20000.00         | 277104.00         | 267000.00         | 992004.00          | 1810685.00                   |
| Lakhimpur             | 54577.00          |                   | 200000.00          | 20000.00         | 296976.00         | 267000.00         | 962304.00          | 1800857.00                   |
| Morigaon              | 51405.00          |                   | 0.00               | 20000.00         | 203136.00         | 267000.00         | 960324.00          | 1501865.00                   |
| Nagaon                | 80280.00          |                   | 200000.00          | 20000.00         | 557520.00         | 267000.00         | 946428.00          | 2071228.00                   |
| Nalbari               | 82120.00          |                   | 200000.00          | 20000.00         | 320160.00         | 267000.00         | 960324.00          | 1849604.00                   |
| Sivsagar              | 54577.00          |                   | 200000.00          | 20000.00         | 402960.00         | 267000.00         | 990084.00          | 1934621.00                   |
| Sonitpur              | 123463.00         |                   | 260000.00          | 20000.00         | 511152.00         | 336000.00         | 1128852.00         | 2379467.00                   |
| Tinsukia              | 25702.00          |                   | 200000.00          | 20000.00         | 263856.00         | 267000.00         | 960324.00          | 1736882.00                   |
| Udalguri              | 25702.00          |                   | 0.00               | 20000.00         | 250608.00         | 267000.00         | 960324.00          | 1523634.00                   |
| <b>District Total</b> | <b>2064097.00</b> | <b>0.00</b>       | <b>4360000.00</b>  | <b>540000.00</b> | <b>8100000.00</b> | <b>7623000.00</b> | <b>27026868.00</b> | <b>49713965.00</b>           |
| <b>State HQ</b>       | <b>1386309.00</b> | <b>3580000.00</b> | <b>0.00</b>        | <b>100000.00</b> | <b>700000.00</b>  | <b>1077000.00</b> | <b>3852500.00</b>  | <b>10695809.00</b>           |
| <b>Grand Total</b>    | <b>3450406.00</b> | <b>3580000.00</b> | <b>4360000.00</b>  | <b>640000.00</b> | <b>8800000.00</b> | <b>8700000.00</b> | <b>30879368.00</b> | <b>60309774.00</b>           |

\*\*\*\*\*



**National Health Mission, Assam**  
Integrated Disease Surveillance Programme, Assam  
Christianbasti, Guwahati-05