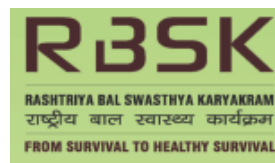


Operational Guideline of Rashtriya Bal Swasthya Kaykram (RBSK) ROP 2021-22



Rastriya Bal Swasthya Karyakram (RBSK)

National Health Mission, Assam



Preface

Rashtriya Bal Swasthya Karyakram (RBSK) is an important initiative aiming at early identification and early intervention for children from birth to 18 years to cover 4 'D's viz. Defects at birth, Deficiencies, Diseases, Development delays including disability. Child Health Screening and Early Intervention Services also aims at reducing the extent of disability, at improving the quality of life and enabling all persons to achieve their full potential. It is quite important that RBSK complete functionality and success is dependent on early screening and identification of Birth Defects and Disabilities. It is also important to manage the identified children with defects & disabilities at the earliest to avoid the risk of any kind of congenital disabilities.

Priority should be given to cover high delivery load and LaQshya facilities during the birth defect trainings and every newborn (as per HMIS) to be screened for all birth defects at all facilities & SNCUs at the time of birth and treated under JSSK up to 1 year of age and beyond 1 year children will be treated under RBSK.

Quality of screening at field level by RBSK MHT and ASHAs are to be improved and monitored by District and Block level officials regularly. Operationalisation of DEICs and reporting is also one of the concerned areas of RBSK Program

Apart from the above mentioned activities, all districts/blocks should give emphasis to the convergence of RBSK programme with line departments i.e. Education, Social Welfare including vertical programs.

Newborns are the future of this country. Our effort through the RBSK program is to strengthen the foundation of our country and the generation to come by proper detection and elimination of all Birth Defects, Disease, Deficiencies and Disabilities. To make RBSK program a success contribution from Jt. DHS, DPMU, BPMU and field level workers is very crucial. District ROP is the blueprint and structured defined process to achieve the desired outcome.

**Consultant RBSK
NHM, Assam**

District wise Budget Approvals for FY 2021-22, NHM Assam

Component : Assam

S N	New FMR Code	Budget Head(RBSK)	Budget Approved in ROP 2021-22	State Allocation	District Allocation	Page No	Remarks
1	1.1.2.2	New born screening as per RBSK Comprehensive Newborn Screening: Handbook for screening visible birth defects at all delivery points.	1.9	0	1.9	5-7	
2	1.1.2.3	Referral Support for Secondary/ Tertiary care (pl give unit cost and unit of measure as per RBSK guidelines) – RBSK	400.03	169.8	230.23	7-38	a) @Rs. 378.61 lakh for referral support for Secondary /Tertiary care b) @Rs. 21.43 lakh for holding confirmatory Multispeciality Camps(153 Camps)
3	1.3.1.7	DEIC (Operational Cost)	6.00	0	6.00	39-40	
4	2.2.3	Mobility support for RBSK Mobile health team	1211.76	0	1211.76	40-43	a) State regulation and procurement policy for vehicle hire is applicable. b)Each vehicle to be branded as per RBSK visibility protocol. The State/District to follow National branding materials.

5	2.2.4	Support for RBSK: CUG connection per team and rental	11.38	0	11.38	43-45	
6	6.2.5.1	Medicine for Mobile Health Team	87.33	87.33	0.00	70	
7	6.1.1.5.2	Equipments for DEIC	33.55	0	33.55	45-46	
8	6.1.1.5.3	Other Equipments(ECD Kits)	73.73	73.73	0.00	70	
9	9.5.5.1	RBSK Training -Training of Mobile health team – technical and managerial (5 days)	18.9	5	13.90	46-49	A) @ Rs. 5.00 lakh is approved for newly recruited MHTs(5 days). B) @Rs. 13.90 lakh for MHTs(Online portal)
10	9.5.5.3	One day orientation for MO / other staff Delivery points (RBSK trainings)	9.33	0	9.33	49-54	
11	12.5.4	Printing of RBSK card and registers	84.34	0	84.34	55-57	
12	12.5.6	Any other(1000 days booklet)	12.07	12.07		70	
13	16.1.2.1.7	RBSK Convergence/Monitoring meetings	14.21	0.8	13.41	58-61	
14	16.3.5	Operational cost of ECD call center(456 lakh)				71	
15		Supervision & Monitoring -Dist. & Block Level				61-63	Expenditure will be booked as per actual
		Monitoring Checklists				64-69	
Grand Total			1964.53	348.73	1615.8		

Activity I: New born screening as per RBSK Comprehensive Newborn Screening: Handbook for screening visible birth defects at all delivery points.(Printing of Birth Defect materials for Delivery point)

FMR Code 1.1.2.2		
Total Approval: 1.90 lakh		
District Allocation: 1.90 lakh		
FMR Owner		
At State HQ	At District Level	At Block level
Consultant RBSK	District Co-coordinator & DME	Block Coordinator, RBSK/RKSK/WIFS

1. The fund is approved for printing of screening, referral form and register for birth defect, Handbook and Poster which are to be available in each and every delivery points of every District.
2. District Media Experts (DMEs) will be responsible along with DCO, RBSK/RKSK and WIFS for completing this activity as per need which will be completed within the month of September 2021.
3. Concerned officials must be proceed as per official norms & procedures for selecting parties for printing with the approval of Jt. DHS and needs to be documented properly.
4. If any changes require in case of rate and quantity, District RBSK committee in the presence of Jt. DHS can take decisions and documentation should be maintained properly.
5. District wise Budget break up is attached at **Annexure I**. (formats are attached with this guideline).

Annexure I

FMR Code: 1.1.2.2. - New born screening as per RBSK Comprehensive Newborn Screening: Handbook for screening visible birth defects at all delivery points										
Sn	District	Total Delivery Point	Total tentative Live birth for fy 2020-21	Tentative Bith defect detection in FY 2021-22(9% of total delivery)	Total Budget for Screenin g form for Birth Defect cases@ Rs 0.75 per form in Rs.	Total Budget for Referral form for Birth Defect cases@Rs. 0.75 per form in lakhs	Budget for Poster @0.75 Rs per Poster 2 Posters per DP (2 Posters per DP)	Handbo ok on Birth Defect @Rs. 99 per Module	Total Budget sanction in Rs	Total Budg et sancti on in Lakh
1	Baksa	23	18577	1672	1253.93	1253.93	46	2277	4830.86	0.05
2	Barpeta	57	40204	3618	2713.74	2713.74	114	5643	11184.48	0.11
3	Biswanath	18	12865	1158	868.36	868.364	36	1782	3554.73	0.04
4	Bongaigaon	33	16382	1474	1105.76	1105.76	66	3267	5544.52	0.06
5	Cachar	44	50646	4558	3418.62	3418.62	88	4356	11281.24	0.11
6	Charaideo	8	9096	819	614.01	614.009	16	792	2036.02	0.02
7	Chirang	15	9837	885	664.03	664.028	30	1485	2843.06	0.03
8	Darrang	36	22179	1996	1497.06	1497.06	72	3564	6630.12	0.07
9	Dhemaji	28	17829	1605	1203.47	1203.47	56	2772	5234.94	0.05
10	Dhubri	46	36307	3268	2450.70	2450.7	92	4554	9547.40	0.10
11	Dibrugarh	16	27231	2451	1838.07	1838.07	32	1584	5292.13	0.05
12	Dima Hasao	12	4263	384	287.78	287.776	24	1188	1787.55	0.02
13	Goalpara	52	25612	2305	1728.79	1728.79	104	5148	8709.58	0.09
14	Golaghat	24	24721	2225	1668.68	1668.68	48	2376	5761.36	0.06
15	Hailakandi	33	23514	2116	1587.22	1587.22	66	3267	6507.43	0.07
16	Hojai	20	25833	2325	1743.71	1743.71	40	1980	5507.41	0.06
17	Jorhat	9	18618	1676	1256.70	1256.7	18	891	3422.41	0.03
18	Kamrup Metro	6	25262	2274	1705.20	1705.2	12	594	4016.40	0.04
19	Kamrup Rural	35	29882	2689	2017.00	2017	70	3465	7569.00	0.08
20	Karbi Anglong	35	15476	1393	1044.62	1044.62	70	3465	5624.25	0.06

21	Karimganj	43	36791	3311	2483.36	2483.36	86	4257	9309.73	0.09
22	Kokrajhar	49	20023	1802	1351.55	1351.55	98	4851	7652.10	0.08
23	Lakhimpur	36	27263	2454	1840.25	1840.25	72	3564	7316.50	0.07
24	Majuli	5	3368	303	227.31	227.311	10	495	959.62	0.01
25	Morigaon	42	26068	2346	1759.57	1759.57	84	4158	7761.15	0.08
26	Nagaon	40	52501	4725	3543.80	3543.8	80	3960	11127.61	0.11
27	Nalbari	20	15262	1374	1030.16	1030.16	40	1980	4080.33	0.04
28	Sivasagar	7	13734	1236	927.06	927.055	14	693	2561.11	0.03
29	Sonitpur	16	27403	2466	1849.72	1849.72	32	1584	5315.44	0.05
30	South Salmara	12	14456	1301	975.81	975.81	24	1188	3163.62	0.03
31	Tinsukia	26	30074	2707	2029.99	2029.99	52	2574	6685.98	0.07
32	Udalguri	21	17755	1598	1198.44	1198.44	42	2079	4517.88	0.05
33	West Karbi Anglong	15	6920	623	467.12	467.123	30	1485	2449.25	0.02
Total		882	745950	67135	50351.59	50351.6	1764	87318	189785	1.90

Activity II: Referral support for secondary / tertiary care

FMR Code 1.1.2.3		
Total Approval: 400.03 Lakhs		
State HQ Allocation: 169.80 lakhs		
District Allocation: 230.23 lakh		
FMR Owner		
At State HQ	At District Level	At Block level
Consultant RBSK	District Co-coordinator/DEIC Manager/BAM of DH/BPM & BAM of MCH	Block Coordinator

FMR: 1.1.2.3 Referral Support for Secondary Tertiary care				
Sl. No	Activity	Target	Budget in Rs.	Budget in Lakh
A.	Budget for Secondary/Tertiary Care	53153	20880000	208.80
B.	Block wise Multi Specialty Medical Camp (Block level) under RBSK	153	2143000	21.43
Total		53306	23023000	230.23

Budget breakup(Rs. & Lakh)				
SN	District	Budget in lakhs	Budget in lakhs	Total Budget
		A	B	(A+B)
1	Baksa	3.42	0.84	4.26
2	Barpeta	6.99	0.98	7.97
3	Biswanath	0.05	0.42	0.47
4	Bongaigaon	4.36	0.56	4.92
5	Cachar	10.88	1.12	12
6	Charaideo	0.05	0.28	0.33
7	Chirang	1.95	0.28	2.23
8	Darrang	3.24	0.56	3.8
9	Dhemaji	2.86	0.7	3.56
10	Dhubri	3.45	0.7	4.15
11	Dibrugarh	7.64	0.84	8.48
12	Dima Hasao	1.43	0.42	1.85
13	Goalpara	3.73	0.7	4.43
14	Golaghat	1.68	0.7	2.38
15	Hailakandi	3.48	0.56	4.04
16	Hojai	0.08	0.28	0.36
17	Jorhat	8.79	0.84	9.63
18	Kamrup Metro	98.86	0.7	99.56
19	Kamrup Rural	4.83	1.68	6.51
20	Karbi Anglong	1.73	0.56	2.29
21	Karimganj	1.87	0.7	2.57
22	Kokrajhar	1.43	0.56	1.99
23	Lakhimpur	4.43	0.84	5.27
24	Majuli	0.05	0.14	0.19
25	Morigaon	3.2	0.42	3.62
26	Nagaon	10.16	1.26	11.42
27	Nalbari	4.26	0.56	4.82
28	Sivasagar	2.61	0.84	3.45
29	Sonitpur	5.84	0.56	6.4
30	South Salmara	0.08	0.28	0.36
31	Tinsukia	3.61	0.56	4.17
32	Udalguri	1.71	0.43	2.14
33	West Karbi Anglong	0.05	0.56	0.61
Total		208.80	21.43	230.23

A.

Children (0-18 years) diagnosed with illnesses under RBSK shall receive follow up including surgeries at tertiary level, free of cost under NHM Assam. Children identified with selected health condition will be treated at suitable medical facility. The treatment processes to be undertaken is detailed below:

1. District wise budget break up is attached at **Annexure II**, illustration of budget expenditure is attached with guideline.
2. Any kind of changes require in case of expenditure from this fund in favour of children referred under RBSK, District committee can take decisions with proper justification and proper documentation is to be maintained.

A. Selection of Beneficiaries: Children who are suffering from any one of the 38 selected health conditions under RBSK Programme will get the benefit

B. What are the conditions

Defects at Birth	Deficiencies
Defects at Birth 1. Neural tube defect 2. Down's Syndrome 3. Cleft Lip & Palate / Cleft palate alone 5. Developmental dysplasia of the hip 6. Congenital cataract 7. Congenital deafness 8. Congenital heart diseases 9. Retinopathy of Prematurity 42. Microcephaly 43. Macrocephaly	10. Anaemia especially Severe anaemia 11. Vitamin A deficiency (Bitot's spot) 12. Vitamin D Deficiency (Rickets) 13. Severe Acute Malnutrition 14. Goiter 41. Severe Stunting 42. Vitamin B complex def.
Child hood Diseases	Development delays and Disabilities
15. Skin conditions (Scabies, fungal infection and Eczema) 16. Otitis Media 17. Rheumatic heart disease 18. Reactive airway disease 19. Dental caries 20. Convulsive disorders 40. Childhood T.B 39. Childhood leprosy Disease 40.1 Childhood Extra Pulmonary T.B	21. Vision Impairment 22. Hearing Impairment 23. Neuro-motor Impairment 24. Motor delay 25. Cognitive delay 26. Language delay 27. Behaviour disorder (Autism) 28. Learning disorder 29. Attention deficit hyperactivity disorder

30.Others- Congenital Hypothyroidism, Sickle Cell Anaemia, Beta Thalassemia (Optional)

Adolescent Health Concerns
31. Growing up concerns
32. Substance abuse
33. Feel depressed
34. Delay in menstruation cycles
35. Regular periods
36. Experience any pain or burning sensation while urinating
37. Discharge/foul smelling discharge from the genitor-urinary area
38.Pain during menstruation

Code number '30' is for "Others" disorders must be limited to treatment of Congenital Hypothyroidism, Sickle Cell Anaemia, Beta Thalassemia only, no other conditions should be included under Code no 30.

C. Target group

Category	Age group	Screening Team
Newborn at Public health facilities and at home At Home	0-6 weeks	Existing staff of Designated delivery points ASHAs as part of HBNC
Pre-school children in AWC	6 weeks to 6 years	Block MHT
Children enrolled in classes 1 st to 12 th standard in Govt. and Govt. aided schools and also included Govt. and NGO run Child Care Institutions.	6 to 18 years	MHT

Where to treat the beneficiaries

Referral nad Management Matrix under RBSK		
Health Condition	Confirmation	Mannagement
District at Birth	DEIC/DH	Tertiary Hospital
Deficiencies (upto 6 years)	PHC/CHC/DH	CHC/DEIC
Deficiencies (> 6 years)	PHC/CHC/DH	DH/CHC/PHC
Diseases(upto 6 years)	PHC/CHC/DH	CHC/DEIC
Diseases(>6 years)	PHC/CHC/DH	DH/CHC/PHC
Developmental Delay(upto 6 years)	DEIC/DH	DH/DEIC
Developmental Delay(>6 years)	DEIC/DH	Rehabilitation Centers # of District/DEIC
Learning Disabilities/ADHD(Between 6 to	DEIC/DH/MC	DEIC

9 yrs)		
Adolescent specific Conditions(10-18 years)	CHC/DH/AFHC	AFHC/DH

District Rehabilitation Centers or Rehabilitation units Govt. Hospital and Govt. Aided Rehab centers under MoSJE for select cases (or as per the convenience of the families)

Transportation of Patients :

- To bring Children to the Health Facility the existing Patient Transfer Network is to be used, that are Vehicle of MHT of the block, ambulances of PHC/CHC/SDCH/DH, 108 in case of emergency and 102 also.
-
- If a child /beneficiary are identified with a disorder that cannot be treated at PHC/CHC level and is requiring treatment at any high level facility, for example, at the District Civil Hospital, Medical College & Hospital or Private Hospital empanelled under RBSK Programme, the student will be mobilized to such facility. For this purpose also the same patient transfer network may be used.

Who will accompany the patient?

- If a child has to take treatment for any disorder at the District Civil Hospital, Medical College or Private Hospital empanelled under RBSK Programme, the Block Coordinator(BCo) along with one member of MHT and District Coordinator (DCo) would take the patient to that facility after establishing necessary communications only (i.e. after taking appointment with doctors /with hospital).

Technical Committee at District Level/ Medical College

Each **district must have a Technical Committee for RBSK treatment** and all decision regarding treatment related issues including expenditures of patient's treatment at Tertiary centre shall be decided and approved by the committee.

- Members of the Technical Committee for District Hospital
- Superintendent of District Hospital: Chairman
- MO (MBBS) who is designated as Nodal person for the District Hospital: Member Secretary
- Senior Pediatrician of District Hospital: Member
- District RBSK coordinator/ DEIC Manger: Member
- DAM: Member
- Hospital Administrator: member

Member of Technical Committee for Medical College:

- Principal/Superintendent of Medical College: Chairman
- HOD Pediatrics : Member Secretary
- Nodal Officer, RBSK: Member
- HOD, Pediatrics Surgery
- HOD, Dept of Ophthalmology
- HOD. Dept of ENT
- HOD. Dept of Orthopedics
- HOD. Dept of CTVS
- District RBSK coordinator/ DEIC Manger: Member
- BPM/BAM: Member
- Hospital Administrator: member

Role and responsibility of the Technical Committee:

- The committee will look after treatment related issue of the patients who are refereed under RBSK to the District Hospital
- If the treatment of a child with non-surgical conditions exceeds the upper limit of expense the committee can take a call to increase the amount of money to be used for the patient after proper discussion and approval from 2/3rd of the committee.
- Committee will look after the issue related to referral of patients to tertiary care hospital.
- Quotation for purchase of disposables, medicine, surgical items will be obtained and approved for any item costing more than Rs.500/- as per existing rule. All purchase of items costing more than Rs. 500/- may be purchased with approval of the Superintendent of the hospital.
- Bills will be paid after [physical verification and stock book entry through the BPM of the hospital as per existng rules of the hospital.
- Utilization certificate of the fund will be submitted to the Director of Finance, NHM, Assam and details of utlization item wise should be forwarded to RBSK section NHM, Assam.

Few points especially for Medical College

- For surgical cases management, particularly in Medical Colleges the Hospital Administrator/ DEIC manager/District Coordinator in consultation with Nodal officer, RBSK will put up the requirement in advance to Superintendent after getting approval from the technical committee.

- Most of the surgical cases under RBSK will be done in two medical colleges i.e. Assam Medical College, Dibrugarh and Gauhati Medical College, Guwahati where there are Pediatrics Surgery Dept are available. **Following points to be noted:**
- Once the patients are referred for surgical conditions, DEIC manager/District coordinator will complete the relevant investigations with the help of treating physician.
- Following investigations if it is confirmed that the patient requires surgical intervention then she/he will take to pre-authorization approval of surgery from respective HOD (Pediatrics Surgery/ Ophthalmology/ENT/Orthopedics/CTVS).
- Once the patient's condition is approved for surgical intervention, pre-operative photograph, pre-authorization approval, record of all relevant investigations should be kept in a file for reimbursement claim by the medical college later on from NHM, Assam.
- The following records will be checked for reimbursements and the amount will be disbursed as given in these guidelines, without any deviations:

a) Pre-authorization procedures followed including:

- Findings in Screening cum referral form
- Pre-authorization investigations done (bare minimum investigations should be conducted).
- Pre-authorization approval in writing for treatment undertaken
-

b) Operative procedures followed:

- Pre-operative and post-operative photographs
- Other evidence as per these procedures and model costing guidelines (Annexure 1)
- Case records

c) Post-operative procedures followed

- Documentation of post-operative hospital stay
- Records of post-operative follow up undertaken including investigations
- Documentation of any supportive care given.

'Letter of Disclaimer' is to be submitted by the Head of the Institution indicating that "No funds is collected /raised from quasi-government institutions, corporate, professional bodies or individuals towards the procedure before and after" before claims settlement is made for each case

All DPM/D Co to share the Operational Cost Guideline for surgery under RBSK (GOI) with Superintendent of Medical Colleges in their districts.

Who will be the contact person in the hospital?

- The DEIC manager/District coordinator will be contact person in the district hospital in the morning hours . He or she will sit in the DEIC/ Designated area for RBSK in this period. After 1 PM she/he will attend the duties in the district office.
- In absence of DEIC manager/District coordinator Hospital Administrator will be the contact person.
- DEIC manager/District coordinator and HA will work under the guidance of Nodal Officer, RBSK of the hospital.

How to provide medicines for patients under RBSK?

- The medicines prescribed by the treating doctors should be provided from hospital dispensary from EDL drugs.
- If the medicine is not available then it can be arranged from AMRIT PHARMACY. There will be an agreement between the technical committee and AMRIT PHARMACY that medicines for RBSK patients will be provided free of cost. The AMRIT PHARMACY will generate two copies of bill. One will be handed over to the BPA, who accompany the patients. The BPA will handover the bill to
- DEIC Manager/District Coordinator/ HA before leaving hospital. The AMRIT Pharmacy will submit the bills every 2 months and after verification of the bills the payment will be made.
- If any kind of changes needed in case of empanellment of Pharmacy, District Committee can take decisions regarding empanellment of pharmacy in Dist. Level or blocklevel with proper justification and documentation should also be maintained properly.

Where to do the investigations

- At district hospital under Chief Minister Free diagnostic schemes.
- At medical colleges, the investigations will be done without charging the patients. Payment will be done to Hospital User Fund from RBSK fund after verification of bills. The DEIC manager/District coordinator will keep the bills related to investigations in medical colleges.
- If prescribed investigations are not available in the district hospital/ Medical College, the investigations can be done in outside laboratory after taking approval from the Technical committee.

Treatment packages

Birth Defects: RBSK covers the 1st 9 birth defects. All visible birth defects are covered under JSSK up to 1 year. After 1 year most of the visible birth defects are covered under Atal AmritAbhiyan (AAA) or Ayushman Bharat scheme.

In case of investigations and treatment, the cost against different disease condition mentioned below (for disease, deficiency and disabilities) only for the investigations which are advised by treating doctor, not available under the Chief Minister free diagnostics facility as on actual.

SI No	Condition	Amount (Maximum)	Where to treat	Remarks
1	Neural Tube Defect:Spina Bifida surgery Hydrocephalous (Ventriculo-peritoneal shunt)	35000/- • 20,000/-	Dept of Neurosurgery(AM CH/GMCH)	
2	Down syndrome	Surgery will depend on associated congenital malformation like Congenital Heart Disease(See annexure 1) and Congenital Hypothyroidism		For Congenital Hypothyroidism Max Rs 1500/- (For Investigations like Thyroid function test, USG of Thyroid gland and medicines)
3	Cleft lip and palate			Refer the patient to Mission Smile program
4	Club foot	1250- Max 8000(Annexure 1)	District Hospital/Refer the patient to Cure International Centre where treatment is done free	Cure International Centers are available at: GMCH, AMCH, TMCH, JMCH, SMCH
5	DDH	1000- Max 60000/- (See Annexure 1)	GMCH/AMCH	
6	Congenital	20,000/-	Shankar Netralaya,	For Strabismus (Squint):

	cataract		Guwahati	Single muscle surgery: 8500/-, Two or more muscles surgery: 11,000/- This surgery is done in Shankardev Netralaya
7	Congenital Deafness	10,000/-	DH	Include investigation like PTA/BERA and Hearing aid (Behind the ear analouge type)
8	CHD	10,000/-	Narayan Hridayalaya	
9	ROP		Shankar Netralaya/ AMCH/GMCH	Treatment for ROP is available in SNN, GMCH Soon it will start in AMCH
10	All other visible birth defects	Up to 1 year free under JSSK	Dept of Pediatric Surgery AMCH/GMCH	Beyond 1 year these cases can be managed under AAA or Ayushman Bharat scheme

Deficiency:

SI	Condition	Amount (Max)	Where to treat	Remarks
1	Anemia specially Severe anemia	1500/-	DH/Medical College	Include Investigations like CBC, HPLC, Blood transfusion. An additional amount can be used for purchase of Iron chelator drugs for those on long-term blood transfusion to overcome iron overload after approval from Technical Committee.

2	Vitamin D deficiency	1500/-	DH/Medical College	Include investigations like S.Ca, Alkaline Phosphate, Vitamin D level, X-ray and medicines (only applicable for the investigations given by doctor, which are not available under the Chief Minister free diagnostics.)
3	Vitamin A deficiency	1000/-	DH/CHC/MC	Free Vitamin A solution is available in all hospital. The amount is for complicated cases who need other medications apart from Vitamin A solution
4	Goiter	1500/-	DH/MC	For investigations like Thyroid function test, USG Neck and other investigations and medications
5	Severe acute malnutrition		NRC	All treatment is free in NRC

Diseases

SI No	Condition	Amount(Max)	Where to treat	Remark
1	Skin condition	1000/-	PHC/CHC/DH/MC	The amount is for patients with severe skin problem when medications are not available under EDL
2	Otitis Media	10000-18000/-	DH/MC	For medical management the medications like antibiotics to be provided from EDL. The amount is for surgical intervention only when indicated.
3	Rheumatic Heart disease		MC/DH	Acute rheumatic fever cases are to be managed as per Guideline and drugs like

				Prednisolone are available in EDL. For Rheumatic Heart Diseases surgical package rates are in Annexure 1
4	Reactive airway disease	1000-1500/-	DH/MC/DEIC	Include investigations like Chest X-ray, CBC, Mantoux test and Medications like Inhaled corticosteroid(ICS) and Devices for ICS (Annexure 1)
5	Dental caries	200- 1000/-	DH/MC/DEIC	This amount is for Dental X-ray and material required for treatment. For more package see the Annexure 1
6	Convulsive disorder	1500/-	DH/MC	Include investigations like CT scan brain with or without contrast, EEG and medications

Developmental Delays and Disability:

- Children with these conditions will be managed at DEIC or PMRT dept of District Hospital. Most of the cases need special interventions. Associated problems like vision problem, hearing impairment, convulsive disorder can be managed as per rate mentioned above. If additional investigations and therapy are required then an additional amount of Rs. 2000/patient can be used after approval from the technical committee. **Code no:30 (Optional)** :3 conditions are included under this code. For congenital hypothyroidism, Beta thalassemia and Sickle cell anemia Max Rs. 2500/- for relevant investigations and treatment.

Important Points:

- The district is to submit the details of cases referred for treatment and treated at different levels of health institutions as per the format shared by State HQ.

- Maintaining of records and reporting would continue as per the existing formats. District should strictly monitor the proper documentation of screening and referrals at block level (fill up of Screening Tool cum referral Card, Screening Register of MHT, Log book etc.).
- The amount of money under this FMR should be used for treatment only, not for referral and refreshment of the patients and attendants.

Annexure II. A

Budget breakup(Rs. & Lakh)						
SN	District	Expected Nos. of Referrals	Fund for Districts	Fund for DH/DEIC	Fund for MCH/DEIC	Total budget in lakhs
1	Baksa	2138	2.42	1		3.42
2	Barpeta	2348	2.99	1	3	6.99
3	Biswanath	412	0.05			0.05
4	Bongaigaon	2484	3.36	1		4.36
5	Cachar	4900	5.88	0	5	10.88
6	Charaideo	231	0.05			0.05
7	Chirang	854	0.95	1		1.95
8	Darrang	1699	2.24	1		3.24
9	Dhemaji	1561	1.86	1		2.86
10	Dhubri	1778	2.45	1		3.45
11	Dibrugarh	1479	2.64	0	5	7.64
12	Dima Hasao	1029	0.43	1		1.43
13	Goalpara	1882	2.73	1		3.73
14	Golaghat	1121	0.68	1		1.68
15	Hailakandi	432	2.48	1		3.48
16	Hojai	932	0.08			0.08
17	Jorhat	1904	3.79	0	5	8.79
18	Kamrup Metro	3580	1.86	1	96	98.86
19	Kamrup Rural	3203	3.83	1		4.83
20	Karbi Anglong	1142	0.73	1		1.73
21	Karimganj	1191	0.87	1		1.87
22	Kokrajhar	1031	0.43	1		1.43
23	Lakhimpur	1346	1.43		3	4.43
24	Majuli	211	0.05			0.05
25	Morigaon	1342	2.2	1		3.2
26	Nagaon	4264	9.16	1		10.16
27	Nalbari	2077	3.26	1		4.26
28	Sivasagar	1465	1.61	1		2.61
29	Sonitpur	1181	1.84	1	3	5.84
30	South Salmara	743	0.08			0.08

31	Tinsukia	1838	2.61	1		3.61
32	Udalguri	1133	0.71	1		1.71
33	West Karbi Anglong	221	0.05			0.05
Total		53152	65.8	23	120	208.80

Remark:

- a) GoI has not recommended transport & refreshment cost proposed is not as per RBSK guidelines and not approved. Patient transport system approved under **FMR. 2.2.3**
- b) District to submit financial achievement and physical achievement (name wise details).
Any kind of changes require in case of expenditure from this fund only the favour of the children referred under RBSK, District RBSK committee in the presence of Jt. DHS can take decisions and documentation should be maintained properly.

Details annexures

7.2 Model Costing of Surgical Packages

This section outlines the Model costs of surgical packages under RBSK to be used as a reference by the states. A surgical package includes the cost of all pre-operative investigations, cost of surgery, cost of post-operative care including hospital stay and follow up care. (Any additional stay in case of undue and unforeseen complications may be included separately provided proper justification has been made)

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
DEFECTS AT BIRTH								
1	Neural tube defects	Anencephaly Spina Bifida	Spina Bifida Surgery	No surgical procedure is required 2.1 (cerebral) / 3.5 (spinal)	1	35,000	MRI local area/ X-ray dorso-lumbar spine/ CT spine (cervical, dorsal, lumbar, sacral) without contrast	Clinical photograph (Cl. photo)/ X-ray dorso-lumbar spine
			Ventriculo-peritoneal shunt for hydrocephalus	2.34	2	20,000	CT scan head without contrast/ CT angio of brain (head)/ MRI brain without contrast/ X-ray skull	Cl. photo/ Scan head without contrast, CT angio of brain (head)/ MRI brain without contrast, Cerebrospinal Fluid (CSF) analysis cell count
2	Down Syndrome		Surgery will depend on associated congenital malformations					
3	Cleft lip and Cleft palate	Cleft lip Cleft palate	Repair of Cleft lip Correction of Cleft palate	27.54 27.62	3 4	15,000 18,000	Cl. photo Cl. photo	Cl. photo, Case sheet with operation notes Cl. photo, Case sheet with operation notes

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
4	Talipes (club foot)	Talipes	CTEV correction - Casting (UL)	83.84	5	1,250	Cl. photo	Cl. photo
			CTEV correction - Casting (BL)	83.84	6	2,500	Cl. photo	Cl. photo
			CTEV correction -Tenotomy (UL)	83.84	7	1,000	Cl. photo	Cl. photo
			CTEV correction -Tenotomy (BL)	83.84	8	1,500	Cl. photo	Cl. photo
			CTEV correction - Bracing	83.84	9	2,000	Cl. photo	Cl. photo
			CTEV correction - Ponseti (Total)	83.84	10	8,000 (maximum)	Cl. photo	Cl. photo
			Pavlik Harness	93.5	11	1,000	X-ray/Cl. photo	Physiotherapy Report
			Closed reduction and Hip spica	79.7 & 93.5	12	15,000	X-ray Hip - AP/lateral view/ Cl. photo	Physiotherapy Report
			Open reduction and Hip spica	79.8 & 93.5	13	30,000	X-ray Hip - AP/lateral view/ Cl. photo	X-ray, Intra-op photo, Case Sheet with operation notes,
			Open reduction with Femoral Osteotomy	79.8 & 86.89	14	45,000	X-ray/ MRI / Cl. photo	X ray, Intra-op photo, Case Sheet with operation notes, Physiotherapy Report
5	Developmental Dysplasia of the Hip (DDH)	DDH						

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
	Developmental Dysplasia of the Hip (DDH) (Contd.)		Open reduction with Femoral and Acetabular Osteotomy	79.8 & 86.89	15	60,000	X-ray/ MRI / Ci. photo	X ray, Intra-op photo, Case Sheet with operation notes, Physiotherapy Report
			Femoral Osteotomy	77.3	16	30,000	X-ray/ MRI / Ci. photo	X ray, Intra-op photo, Case Sheet with operation Notes, Physiotherapy Report
			Acetabular Osteotomy	77.35	17	40,000	X-ray/ MRI / Ci. photo	X ray, Intra-op photo, Case Sheet with operation notes, Physiotherapy Report
			Pelvic Support Osteotomy	77.3	18	40,000	X-ray/ MRI / Ci. photo	X ray, Intra-op photo, Case Sheet with operation notes, Physiotherapy Report
6	Congenital Cataract	Congenital Cataract	Paediatric Cataract Surgery (Phacoemulsification IOL)	13.71.3	19	20,000	Fundus florescence photo	Ci. photo, Fundus florescence

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
7	Congenital Deafness	Congenital Deafness	Cataract surgery (Phacoemulsification)	13.41	20	20,000	Fundus fluorescence photo	Cl. photo, Fundus fluorescence
			Behind Ear Analogue Hearing Aid	20.95	21	10,000	Pure Tone Audiometry (PTA)/ Impedance Audiometry (IA) (with Stapedial Reflex)	Cl. photo with hearing aid
			Cochlear Implant Surgery for children below 2 years	20.9	22	5,20,000	Hearing Aid Trial/ IA (with Stapedial Reflex)/ Brainstem Auditory Evoked Response (BERA)/ MRI Brain with Contrast/ CT scan Brain-plain and contrast	PTA, IA (with Stapedial Reflex), Implant registration form, Warranty, invoice, Telemetry report, Scar photo
8	Congenital Heart Disease (CHD)*	Atrial Septal Defect (ASD)	ASD Device Closure	35.51	23	95,000	Echocardiogram (Echo) / ECG (Electro Cardiogram)/ Chest X-ray PA view (1 film)/ Cardiac CATH/ TEE (Transesophageal Echocardiogram)	Echo, ECG, Procedure CD
			ASD Surgical Closure (Intracardiac repair)	35.71	24	85,000	Echo/ ECG / Chest X-ray PA view (1 film)/ TEE / CT angiography (Coronary angiography)	Echo

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
	CHD (-cont-)	AV Canal defect	AVSD / AV Canal Defect repair	35.71	25	1,60,000	Echo/ ECG/ Chest X-ray PA view (1 film)/ TEE / CT angiography	Echo
		Ventricular Septal Defect (VSD)	VSD Device Closure with PDA device	35.53	26	75,000	Echo/ ECG / Chest X-ray PA view (1 film)	Echo, ECG, Procedure CD
			VSD Device Closure with VSD device	35.53	27	95,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo, ECG, Procedure CD
			VSD Device Closure with VSD device in infants	35.53	28	125,000	Echo/ ECG / Chest X-ray PA view (1 film)	Echo, ECG, Procedure CD
			VSD Surgical Closure (Intracardiac repair)	35.72	29	90,000	Echo/ ECG/ Chest X-ray PA view (1 film)/ CT angiography	Echo
		Patent Ductus Arteriosus (PDA)	PDA Device Closure	35.83.2	30	75,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG, Procedure CD, Device empty pouch
			PDA coil closure: single coil	35.83.3	31	30,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo-showing Stent In Situ, Chest X-Ray PA View (1 film), Procedure CD, Device empty pouch

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUIPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE	
	CHD (-cont-)		PDA coil closure: multiple coil	35.83.4	32	40,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG, Procedure CD, Device empty pouch	
			Surgical closure of PDA (PDA ligation)	35.83	33	45,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Scar photo/ Echo/ ECG/ Chest X-ray PA View (1 film)	
			PDA stenting	35.83.1	34	80,000	Echo/ ECG/ Chest X-ray PA view (1 film)/ TEE	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG	
			Truncus Arteriosus Surgery	35.83	35	1,50,000	Echo/ ECG/ Chest X-ray PA view (1 film)/ CT angiography	Echo, ECG, Procedure CD	
		CHD (-cont-)	Tetralogy of Fallot (TOF)	Surgical correction of TAPVC	35.82	36	1,50,000	Echo/ ECG/ Chest X-ray PA view (1 film)/ TEE/ CT angiography	Echo-showing Stent In Situ, Chest X-ray PA view (1 film)
				Total correction of TOF	35.81	37	1,50,000	Echo/ ECG/ CT angio/ Chest X-ray PA view (1 film)/ MRI angio/ Cardiac CATH	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG
				Systemic Pulmonary Shunts with graft	39	38	60,000	ECG/ Echo/ CT angiography/ Cardiac CATH	Echo-showing Graft In Situ, Procedure CD, Scar photo, Chest X-ray PA view (1 Film)

Procedures and Model Costing for Surgeries

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
	CHD (-cont-)	Pulmonary Atresia /	Open pulmonary valvotomy	35.13	39	90,000	Echo/ ECG	Echo, ECG, Procedure CD, Chest X-Ray PA View (1 film)
		Pulmonary Stenosis	Balloon pulmonary valvotomy	35.03	40	40,000	Echo/ ECG	Echo-Showing Stent In Situ, Chest X-ray PA view (1 film), ECG, Procedure CD
		Tricuspid Atresia / Tricuspid Stenosis and Ebstein's Anomaly	Glenn procedure	35.94	41	1,00,000	ECG/ Echo/ CT angiography/ Cardiac CATH	Echo-showing Graft In Situ, Procedure CD, Scar photo, Chest X-Ray PA view (1 film)
			Fontan procedure	35.94	42	1,70,000	ECG/ Echo/ CT Angiography/ Cardiac CATH	Echo-showing Graft In Situ, Procedure CD, Scar photo, Chest X-Ray PA view (1 film)
		Aortic valve Stenosis	Aortic valve replacement (with valve)	35.23	43	1,45,000	Echo/ ECG/ Chest X-ray PA view (1 film)/ Cardiac CATH/ TEE	Echo-showing Stent In Situ, Procedure CD
			Aortic valve replacement (with Bioprosthetic valve)	35.22.3	44	1,60,000	Echo/ ECG / Chest X-Ray PA View (1 Film)/ Cardiac CATH/ TEE	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), Procedure CD
			Open aortic valvotomy	35.11	45	90,000	Echo/ ECG / CT Angiography / Cardiac CATH	Echo, ECG, Procedure CD, Chest X-Ray PA View (1 film)

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
			Ross procedure without conduits	35.22.1	46	1,20,000	Echo/ ECG/ CT angiography/ Cardiac CATH/ Chest X-ray PA view (1 film)/ MRI angiogram	Echo-showing Prosthetic Ring In Situ
	CHD (-cont-)	Aortic valve Stenosis (-cont-)	Ross procedure with conduits	35.22.1	47	1,55,000	Echo/ ECG/ CT angiography/ Cardiac CATH/ Chest X-ray PA view (1 film)/ MRI angiogram	Echo-showing Prosthetic Ring In Situ
			Balloon aortic valvotomy	35.01	48	40,000	Echo/ TEE/ Chest X-ray PA view (1 film)/ ECG	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG
			Surgery not covered under RBSK					
		Hypoplastic Left Heart Syndrome						
		Transposition of the great arteries (TGA)	TGA Arterial Switch	35.84	49	1,55,000	Echo/ CT scan Chest without contrast/ CT angiography/ Chest X-ray PA view (1 film)	Chest X-ray PA view (1 film), Echo
			TGA Sennings Procedure	35.91	50	1,55,000	Echo/ CT scan Chest without contrast/ CT angio	Echo, Chest X-ray PA view (1 film)
			TGA Mustards Procedure	35.91	51	1,55,000	Echo/ CT scan Chest without contrast/ CT angio	Chest X-ray PA view (1 film), Echo

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
	CHD (-cont-)	Coarctation of the aorta (COA)	Coarctation dilatation	39.5	52	40,000	Echo/ CT angiography/ Chest X-ray PA view (1 film)	Doppler
			Coarctation dilatation with stent	39.5	53	80,000	Echo/ CT angiography/ Chest X-ray PA view (1 film)	Doppler
			Coarctation aorta repair with graft	39.5	54	1,00,000	Echo/ CT angiography , Color doppler sonography/ Chest X-ray PA view (1 film)	Color doppler sonography single study, Scar photo
			Coarctation aorta repair without graft	39.5	55	70,000	Echo/ CT angiography/ Chest X-ray PA view (1 film)	Color doppler sonography single study, Scar photo
9	Retinopa -thy of Pre- maturity	ROP	Photocoagulation for ROP	14.25	56	10,000	Fundus photo	Cl. photo, Fundus florescence
DEFICIENCIES								
10	Anaemia especially Severe Anaemia							
11	Vitamin A deficiency (Bitot spot)							
12	Vitamin D deficiency (Rickets)							
13	Severe Acute Malnutrition / Stunting							
14	Goiter							
CHILDHOOD DISEASES								
15	Skin conditions							
			Appropriate medical management					
			Appropriate medical management					

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
16	Otitis Media	Acute and Chronic Suppurative Otitis Media (ASOM and CSOM)	Myringotomy with grommet for one ear	20.01	57	10,000	PTA/ IA (with stapedial reflex)/ OTO endoscopy/ OTO endoscopy photos	PTA, IA (with stapedial reflex), Grommet in position photo
			Myringotomy with grommet for both ears	20.01	58	15,000	PTA/ IA (with Stapedial Reflex)/ OTO endoscopy/ OTO endoscopy photos	PTA, IA (with stapedial reflex), Grommet in position photo
			Myringoplasty	19.4	59	16,000	PTA	PTA
		Chronic Suppurative Otitis Media (CSOM)	Myringoplasty with ossiculoplasty	19.4	60	17,000	PTA/ IA (with stapedial reflex)/ X-Ray of both Mastoids/ OTO endoscopy/ OTO endoscopy photos	PTA
			Tympanoplasty / Cortical mastoidectomy	19.5	61	17,000	PTA/ IA (with stapedial reflex)/ X-Ray of both Mastoids/ OTO endoscopy/ OTO endoscopy photos	X ray, PTA, Scar and graft photos
			Radical / Modified radical Mastoidectomy	20.4	62	18,000	PTA / IA (with stapedial reflex)/ X-Ray of both Mastoids/ OTO endoscopy/ OTO endoscopy photos	X ray, PTA, Scar and graft photos, IA (with stapedial reflex), X-ray both mastoids after 6 weeks, Scar photo

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
17	Rheumatic Heart Disease*	Mitral valve Stenosis	Closed mitral valvotomy	35.02	63	40,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo, Chest X-ray PA view (1 film)
			Open mitral valvotomy	35.12	64	1,10,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG, Procedure CD
			Balloon Mitral valvotomy	35.02	65	30,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo-showing Stent In Situ, Chest X-ray PA view (1 film), ECG, Procedure CD
			Mitral valve replacement (with valve)	35.23	66	1,45,000	Echo/ ECG/ Chest X-Ray PA view (1 film)/ Cardiac CATH/ TEE	Echo-showing Valve In Situ, Procedure CD
			Mitral valve replacement (Bioprosthetic valve)	35.24	67	1,60,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo-showing Valve In Situ, Procedure CD
			Mitral valve repair (without Prosthetic ring)	35.24	68	1,10,000	Echo/ ECG/ Chest X-ray PA view (1 film)	Echo Showing Valve In Situ, Procedure CD
			Mitral valve repair (with Prosthetic ring)	35.24	69	1,40,000	Echo/ ECG/ Chest X-Ray PA View (1 Film)	Echo Showing Valve In Situ, Procedure CD
			Double valve replacement (with valve)	35.20.2	70	1,80,000	Echo/ ECG/ Cardiac CATH/ Chest X-ray PA view (1 film)	Echo, Chest X-ray PA view (1 film)

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
			Double valve replacement (Bioprosthetic valve)	35.20.3	71	2,00,000	Echo/ ECG/ Cardiac CATH/ Chest X-Ray PA View (1 Film)	Echo Showing Valve In Situ, Procedure CD
18	Reactive Airway Disease			Appropriate medical management				
19	Dental Caries	Dental Caries	Extraction of Tooth	23.01	72	200	X ray/ Intra Oral Periapical (lopa) / RVG (Radiovisiography)	X ray, lopa/ RVG
	Dental Caries (-cont-)	Dental Caries (-cont-)	Application of Pit & Fissure Sealants (Pedo Full mouth)	23.2.1	73	300	Cl. photo/ RVG	Cl. photo, lopa/ RVG
			Amalgam Restoration Per Tooth	23.2.2	74	150	X-ray/ lopa	X-ray, lopa/ RVG
			Temporary Filling Per Tooth	23.2.3	75	100	X-ray/ photo/ lopa	X-ray/ photo, lopa/ RVG
			Tooth Coloured Restoration Per Tooth (GIC)	23.2.4	76	200	X-ray/ photo/ lopa	X-ray/ photo, lopa
			Tooth Coloured Restoration Per Tooth (Composite)	23.2.4	77	250	X-ray/photo/ lopa	X-ray/photo, lopa
			Flouride Varnish Application (Pedo Full mouth)	23.4.1	78	150	Cl. photo	Intra-op photo
			Atraumatic Restorative Treatment	23.4.6	79	200	X-ray/ photo/ lopa	X-ray/ photo, lopa

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
			Pulpectomy With Ssc (Stainless Steel Crown)	23.4.7	80	700	X-ray/ lopa /RVG	X-ray, lopa/ RVG
			Root Canal Treatment – Deciduous Tooth	23.7.1	81	500	X-ray/ OPG	X-ray, lopa
	Dental caries (-cont-)	Dental caries (-cont-)	Anterior Root Canal Treatment	23.7.2	82	1,200	X-ray/ lopa	X-ray, lopa
			Apicectomy	23.7.3	83	2,000	X-ray/ lopa	X-ray, lopa
			Posterior Root Canal Treatment with Permanent Restoration	23.7.5	84	1,800	X-ray/ lopa	X-ray, lopa
			Extraction Of Ill Molar / Impacted Tooth under L.A	23.19.1	85	2,000	X-ray/ OPG	X-ray, lopa/ RVG
			Surgical Extraction of Tooth	23.19.2	86	1,000	X-ray/ OPG	X-ray, lopa/ RVG
			Fabrication & Cementation of Metal Ceramic Crown per unit	23.41.2	87	800	Cl. photo/ lopa/ Lab charges - Model pouring (Gingival mollage)	Cl. photo, Case sheet with operation notes
			Placement of Stainless Steel crown perTooth	23.41.4	88	500	Cl. photo/ lopa	Cl. photo, lopa
			Metal Post & Core Restoration with Metal Ceramic Crown (Anterior)	23.41.7	89	2,290	X-ray & Cl. photo/ lopa/ Lab charges - Model pouring (Gingival mollage)	X-ray & Cl. photo, lopa, Case sheet with operation notes

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE
			Treatment with Expansion Plate	23.42.2	90	1,500	Cl. photo/ OPG/ Lab charges - Model pouring (Gingival mollage)	Cl. photo, OPG
	Dental caries (-cont-)	Dental caries (-cont-)	Fabrication & Insertion of Removable Appliance (Upper/ Lower)	23.43.2	91	1,200	Cl. photo/ Lab charges - Model pouring (Gingival mollage)	Cl. photo, Case sheet with operation notes
			Fabrication & Insertion of Removable Partial Denture - Single Tooth (Anterior)	23.43.4	92	550 (+ 50 per tooth)	Cl. photo/ Lab charges - Model pouring (Gingival mollage)	Cl. photo, Case sheet with operation notes
			Fabrication & Insertion of Fixed Space Maintainers / Space Retainer	23.43.6	93	1280	Cl. photo/ OPG/ Lab charges - Model pouring (Gingival mollage)	Cl. photo, Intra-op photo, Study model
			Fabrication & Insertion of Removable Space Maintainers (Pedo)	23.43.7	94	1,000	Cl. photo/ OPG/ Lab charges - Model pouring (Gingival mollage)	Cl. photo, Case sheet with operation notes
			Fixed Orthodontics Treatment-Metal Braces for Cleft palate only	24.7.5	95	10,680	X-ray & Cl. photo/ OPG/ Lab charges - Model pouring (Gingival mollage)/ Lateral Cephalogram	X ray & Cl. photo, OPG, Lab charges - Model pouring (Gingival mollage), Lateral Cephalogram

S. No	HEALTH CONDITION	DISEASE	SURGICAL PROCEDURE	ICD-9 PROCEDURE CODE	RBSK PROCEDURE CODE	RBSK MODEL COSTING (RUPEES)	PRE-OPERATIVE INVESTIGATIONS	POST-OPERATIVE EVIDENCE	
			Fabrication & Insertion of Feeding Plate (Acrylic)	24.7.8	96	1,200	Cl. photo/ OPG/ Lab charges - Model pouring (Gingival mollage)		
	Dental caries (-cont-)	Dental caries (-cont-)	Fabrication & Insertion of Obturator -Acrylic	24.7.9	97	1,200	Cl. photo/ Lab charges - Model pouring (Gingival mollage)/ RVG	Cl. Photo, Case sheet with operation notes	
			Fabrication & Insertion of Obturator & Speech Bulb-Acrylic	24.7.10	98	1,500	Cl. photo/ Lab charges - Model pouring (Gingival mollage)/ RVG	Cl. photo, Case sheet with operation notes	
			Incision & Drainage of Simple Abscess (per Tooth)	27.10	99	500	Cl. photo/ OPG/ Cl. photo	Cl. photo, lopa, Intra-op photo	
			Incision & Drainage of Facial Abscess Under LA	27.30	100	2,500	X-ray & Cl. photo/ OPG	X-ray & Cl. photo, lopa, Intra-op photo	
			Oral Prophylaxis - calculi (Upper/ Lower)	96.54.2	101	250	Cl. photo	Cl. photo	
			Dental IOPA X ray		102	50		X ray	
20	Convulsive Disorders		Appropriate medical management						
DEVELOPMENTAL DELAYS									
21	Vision Impairment	Strabismus	Single muscle surgery	15.2.	103	8,500	Cl. photo	Cl. photo	
			Two or three muscles surgery	15.4	104	11,000	Cl. photo	Cl. photo	

*** The following additional instructions apply for cardiac surgery (Congenital Heart Disease and Rheumatic Heart Disease):**

- Procedures on neonates (0-1 month age) will have additional package costs of Rs. 30,000/- besides costs stated above to account for longer ICU/hospital stay, except where already mentioned in the package.
- Cardiac procedures on infants (1month-1 year) will have additional package costs of Rs. 20,000/- besides costs stated above to account for longer ICU/hospital stay, except where already included in the package.
- In general, all cyanotic cases should be operated. Silent PDAs, small shunt lesions and mild valve obstructions should not be operated.
- However, all cardiac procedures will be routed through RBSK identified specialists for preauthorization/preoperative approvals.
- Refer to Guidelines on Indications and Timing of Interventions for Congenital Heart Disease under Section 5.8. These are to be followed in letter and spirit under RBSK.

B.**Multi Specialty Medical Camp (Block level) under RBSK**

Multispecialty camp is to be organized at 153 blocks once in a year in collaboration with the Mission Smile (Operation Smile), Cure International (Club foot) team for

- Proper identification & follow up of the pre & post operative cleft lip & palate children and those children with club foot.
- To provide treatment of all referral cases identified with non surgical health condition under RBSK at block level.
- Before the camp, line listing of children whom treatment could not be provided early should be prepared. During the multi-speciality camp these children should be mobilized to the camp with the help of MHT, ANM, MPW, ASHA, AWC worker and school teacher.
- Spot treatment to be done at the camp.
- Publicity of the camp should be done at each block to provide benefit to maximum children, which will be the prime responsibility of DME for necessary arrangement.
- Avoid patients who come to the block hospital for routine treatment for other conditions on the day of the camp. Preference should be given to the line listed RBSK patients only, otherwise it will unnecessarily increase the load of patients in the camp.
- Report of each camp is to be submitted to District/State Head Quarter. The report should be as per the monthly reporting format of MHT. It should contain patients details including PF code, Disease code.
- District wise budget break up is attached at **Annexure II.**

Remarks: Approved for confirmation of health condition during annual camps at block level. Expenditure to be as per actual. District to submit details in monthly reporting format of RBSK. DCM/ BCM will also be responsible to mobilize the referred cases by RBSK MHT, which will be shared (line listing of Referred cases) prior to the management camp.

Annexure III. B

B) Block wise Multi Specialty Medical Camp (Block level) under RBSK						
Estimated Budget for Multi-Specialty Medical Camp(Yearly)						
SN	Component	Unit Cost in Rs.	Unit	Duration	Total	Remarks
1	Honorarium for Visiting Doctors (two speciality)	2,500.00	2	1	5,000	Preferably from public hospital. In case of shortage of Specialist doctors at public hospital, Doctors
2	TA for Visiting Doctors	1,000.00	2	1	2,000	
3	Refreshment for Doctors and patients	5,000.00	1	1	5,000	

	with guardians					from private/ppp mode health facility will be called.
4	Contingency	2,000.00	1	1	2,000	
Total for 1 Medical Camp Rs.					14,000	
Total cost for 153 camp					21,43,000	
Total Cost in lakhs					21.43	

District wise budget

Sl. No.	Name of the District	BPHC	Total Camp (1 camp per block)	Total Cost of Medical Camp@Rs. 14000 per camp	Total in Lakh
1	Baksa	6	6	84000	0.84
2	Barpeta	7	7	98000	0.98
3	Biswanath	3	3	42000	0.42
4	Bongaigaon	4	4	56000	0.56
5	Cachar	8	8	112000	1.12
6	Charaideo	2	2	28000	0.28
7	Chirang	2	2	28000	0.28
8	Darrang	4	4	56000	0.56
9	Dhemaji	5	5	70000	0.7
10	Dhubri	5	5	70000	0.7
11	Dibrugarh	6	6	84000	0.84
12	Dima Hasao	3	3	42000	0.42
13	Goalpara	5	5	70000	0.7
14	Golaghat	5	5	70000	0.7
15	Hailakandi	4	4	56000	0.56
16	Hojai	2	2	28000	0.28
17	Jorhat	6	6	84000	0.84
18	Kamrup M	5	5	70000	0.7
19	Kamrup R	12	12	168000	1.68
20	Karbi Anglong	4	4	56000	0.56
21	Karimganj	5	5	70000	0.7
22	Kokrajhar	4	4	56000	0.56
23	Lakhimpur	6	6	84000	0.84
24	Majuli	1	1	14000	0.14
25	Marigaon	3	3	42000	0.42
26	Nagaon	9	9	126000	1.26

27	Nalbari	4	4	56000	0.56
28	Sibsagar	6	6	84000	0.84
29	Sonitpur	4	4	56000	0.56
30	South Salmara	2	2	28000	0.28
31	Tinsukia	4	4	56000	0.56
32	Udalguri	3	3	43000	0.43
33	West Karbianglong	4	4	56000	0.56
Total		153	153	2143000	21.43

Activity III: DEIC (Operational Cost)

FMR Code: 1.3.1.7	
Total Approval: 6.00 Lakhs	
District Allocation: 6.00 Lakhs	
FMR Owner	
At State HQ	At District Level
Consultant RBSK	District Co-coordinator/DEIC Manager

Fund released for operation cost of amount @ Rs. 10,000/- (Rupees ten thousand only) per month per DEIC for 12 months for 5 DEICs (Bongaigaon, Darrang, Jorhat, Kamrup M and Lakhimpur) which includes,

- Arranging day to day required stationary and banner
- Printing reporting formats/forms,
- Refreshment of referral cases and provision of safe drinking water.
- Room decoration as per DEIC Manual.
- One half day orientation program in the district hospital to make awareness on different benefits under RBSK among various departments who will involve in the management of patients referred under RBSK like Dept of Pediatrics, Dept of Ophthalmology, Dept of ENT, Dept Surgery, Dept of Orthopedics, Dept of Psychiatry and department of Physiotherapy. Superintendent of the hospital should attend this orientation program. This will help to create better coordination among different departments and also with DEIC staff. For this one-day program **Rs. 5000/-** can be spent for arrangement and refreshment from the operational cost of DEIC.
- Any kind of changes require in case of expenditure from this fund, DH / MCH Technical committee can take decisions with proper justification and proper documentation to be maintained.

- District wise Budget break up is attached at **Annexure IV**.

Annexure IV

Budget Breakup:

FMR: 1.3.1.7 Operation cost of DEIC						
Sl. No.	District	No. of DEIC	No. of Months	Operation Cost @ 10000 per month.	Total Budget (In Lakh)	Remarks
1	Bongaigaon	1	12	120000	1.20	Operation cost including contingency
2	Darrang	1	12	120000	1.20	
3	Jorhat	1	12	120000	1.20	
4	Kamrup (M)	1	12	120000	1.20	
5	Lakhimpur	1	12	120000	1.20	
Total		5	60	600000	6.00	

Activity IV: Mobility support for RBSK Mobile Health Team

FMR Code: 2.2.3		
Total Approval: 1211.76 Lakh		
District Allocation: 1211.76 Lakh		
FMR Owner		
At State HQ	At District Level	At Block level
Consultant RBSK	District Coordinator/DEIC Manager	Block Coordinator

Mobility support for RBSK Mobile Health Team is to utilize for hiring of vehicles for visiting Anganwadi Centers and Schools.

1. An amount of **Rs. 30000/-**(Rupees Thirty thousand only) maximum per month per RBSK Mobile Health Team (2 teams per Block) have been sanctioned for the fy 2021-22 in respect of mobility support which includes hiring charge of vehicle/ Boat / any other means of transport as per the requirements of locations and POL.
2. **@Rs. 3000/-**(Rupees Three thousand only) per month per RBSK MHT have sanctioned for transportation of referral cases to the higher level facilities for management including refreshment & accommodation(depends on case to case basis) of patients along with 2

guardians and concerned MHT staff who accompanies @ Rs. 100-200 per case. And Reimbursement of the patients can also be done from this fund with prior approval of the District level RBSK committee.

3. Procurement policy for hiring of vehicle is applicable. For regular screening at school & AWC hiring charge of vehicle will not exceed **Rs. 30000/-** (Rupees Thirty thousand only) and vehicle should be SUV category such as Bolero, Mahindra XUV, Mahindra TUV 300 etc.
4. Selection of vehicles should be through tender process, L1 rated vehicle to be selected and **rest of the fund from this FMR is to be used for hiring vehicle for transportation or referral of referred cases under RBSK to the higher level facility.**
5. In case of type of vehicle or rate of vehicle, if any changes require decision needs to be taken in the meeting of District level RBSK committee with proper justification and documentation.
6. District wise break up is attached at **Annexure V.**

Following are the necessary conditions to hire the vehicle for MHT –

- The vehicle must be in Road worthy condition and may not be more than 3 years old from the date of initial registration and must have valid Registration Certificate, Insurance Certificate, Fitness Certificate, valid Contract Carriage Permit and up to date tax payment etc.
- Vehicle should have commercial registration.
- The Driver of the vehicle must have a valid Driving License.
- Hire charges shall be paid on monthly basis.
- Block to ensure that the proper vehicle log book shall be maintained for vehicle used for mobility support of Mobile Health Team.
- State/District may immediately cancel the agreement of vehicle for violation of the above condition, if any.
- **Each vehicle to be branded as per RBSK visibility protocol.**
- No MHT vehicles should belong to the staff of health department including NHM staff.

- Hiring and finalization of vehicles to be done centrally from district level for all the blocks, this will ensure good & competitive rates.

Annexure V

District wise break up:

FMR 2.2.3 Mobilty Support for RBSK Mobile Health Teams						
SI	District	BPHC	Total No. of Team	Fund for Mobilty(MHT Vehicle)	Fund for transportation of referral cases for treatment(@Rs.3000/ per month per MHTs	Total cost in lakhs
				Unit cost		
				(@ Rs. 30000/- Per month per Team for 12 months		
A	B	C	D	E	F	G
1	Baksa	6	12	4320000	432000	47.52
2	Barpeta	7	14	5040000	504000	55.44
3	Biswanath	3	6	2160000	216000	23.76
4	Bongaigaon	4	8	2880000	288000	31.68
5	Cachar	8	16	5760000	576000	63.36
6	Charaideo	2	4	1440000	144000	15.84
7	Chirang	2	4	1440000	144000	15.84
8	Darrang	4	8	2880000	288000	31.68
9	Dhemaji	5	10	3600000	360000	39.60
10	Dhubri	5	10	3600000	360000	39.60
11	Dibrugarh	6	12	4320000	432000	47.52
12	Dima Hasao	3	6	2160000	216000	23.76
13	Goalpara	5	10	3600000	360000	39.60
14	Golaghat	5	10	3600000	360000	39.60
15	Hailakandi	4	8	2880000	288000	31.68
16	Hojai	2	4	1440000	144000	15.84
17	Jorhat	6	12	4320000	432000	47.52
18	Kamrup M	5	10	3600000	360000	39.60
19	Kamrup R	12	24	8640000	864000	95.04
20	Karbi Anglong	4	8	2880000	288000	31.68
21	Karimganj	5	10	3600000	360000	39.60
22	Kokrajhar	4	8	2880000	288000	31.68
23	Lakhimpur	6	12	4320000	432000	47.52
24	Majuli	1	2	720000	72000	7.92
25	Marigaon	3	6	2160000	216000	23.76

26	Nagaon	9	18	6480000	648000	71.28
27	Nalbari	4	8	2880000	288000	31.68
28	Sibsagar	6	12	4320000	432000	47.52
29	Sonitpur	4	8	2880000	288000	31.68
30	South Salmara	2	4	1440000	144000	15.84
31	Tinsukia	4	8	2880000	288000	31.68
32	Udalguri	3	6	2160000	216000	23.76
33	West Karbianglong	4	8	2880000	288000	31.68
Grand Total		153	306	110160000	11016000	1211.76

Remark: As per GoI, State or district regulation and procurement policy for vehicle hire is applicable. Each vehicle to be branded as per RBSK visibility protocol. State to follow National branding materials.

Activity V: Support for RBSK: CUG connection per team and rental

FMR Code: 2.2.4		
Total Approval: 11.38 Lakhs		
District Allocation: 11.38 Lakhs		
FMR Owner		
At State HQ	At District Level	At Block level
MIS Manager & Consultant RBSK	District Coordinator/DEIC Manager/DDM	Block Coordinator

- The CUG has already been provided by the state which will be utilized for uploading the service delivery data in block level.
- The CUG connection has been given as per GOI remark i.e. Monthly rental for Data Card and internet connection for 306 MHTs and for 10 DEICs is @Rs. 300 per connection per month for 12 months,.
- District wise budget break up is attached at **Annexure VI**.

Annexure VI.

FMR: 2.2.4 Support for RBSK: CUG connection per team and rental including Data Card internet connection								
Sl. no	Name of Districts	Nos of Blocks	Data Connection for DEIC	Data Connection Rental for DEIC@ Rs. 300 per month per connection for 12 months	Data Connection for MHTs(Per block 2 MHTs & 1 connection per MHTs)	Data Connection Rental for MHTs@ Rs. 300 per month per connection for 12 months	Grand total in Rs.	Grand total in Lakhs.
1	Baksa	6	0	0	12	43200	43200	0.43
2	Barpeta	7	1	3600	14	50400	54000	0.54
3	Biswanath	3	0	0	6	21600	21600	0.22
4	Bongaigaon	4	1	3600	8	28800	32400	0.32
5	Cachar	8	0	0	16	57600	57600	0.58
6	Charaideo	2	0	0	4	14400	14400	0.14
7	Chirang	2	0	0	4	14400	14400	0.14
8	Darrang	4	1	3600	8	28800	32400	0.32
9	Dhemaji	5	0	0	10	36000	36000	0.36
10	Dhubri	5	0	0	10	36000	36000	0.36
11	Dibrugarh	6	1	3600	12	43200	46800	0.47
12	Dima Hasao	3	1	3600	6	21600	25200	0.25
13	Goalpara	5	0	0	10	36000	36000	0.36
14	Golaghat	5	1	3600	10	36000	39600	0.40
15	Hailakandi	4	0	0	8	28800	28800	0.29
16	Hojai	2	0	0	4	14400	14400	0.14
17	Jorhat	6	1	3600	12	43200	46800	0.47
18	Kamrup M	5	1	3600	10	36000	39600	0.40
19	Kamrup R	12	0	0	24	86400	86400	0.86
20	Karbi Anglong	4	0	0	8	28800	28800	0.29
21	Karimganj	5	1	3600	10	36000	39600	0.40
22	Kokrajhar	4	0	0	8	28800	28800	0.29
23	Lakhimpur	6	1	3600	12	43200	46800	0.47
24	Majuli	1	0	0	2	7200	7200	0.07
25	Marigaon	3	0	0	6	21600	21600	0.22
26	Nagaon	9	0	0	18	64800	64800	0.65
27	Nalbari	4	0	0	8	28800	28800	0.29
28	Sibsagar	6	0	0	12	43200	43200	0.43

29	Sonitpur	4	0	0	8	28800	28800	0.29
30	South Salmara	2	0	0	4	14400	14400	0.14
31	Tinsukia	4	0	0	8	28800	28800	0.29
32	Udalguri	3	0	0	6	21600	21600	0.22
33	West Karbianglong	4	0	0	8	28800	28800	0.29
Total		153	10	36000	306	1101600	1137600	11.38

Remark: District to ensure that each team uploads screening and service delivery data in the online RBSK MIS. Expenditure of data card rental is as per actual according to State/District rules and regulation for RBSK MHTs and DEIC as per guidelines. Data card is not approved for Block coordinators as per RBSK guideline.

Activity VI: Equipments for DEIC

FMR Code 6.1.1.5.2		
Total Approval: 33.55 Lakhs		
District Allocation: 33.55 Lakhs		
FMR Owner		
At State HQ	At District Level	
RBSK Consultant & BME	District Coordinator and Engineer Instrumentation	

Procurement of required furniture for **5 DEICs namely Barpeta, Dibrugarh, Golaghat, Karimganj and Sonitpur** are to be completed within August 2021. An amount of **@Rs. 6.71 akh** maximum per DEIC considering the conditions mentioned below:

1. Procurement procedures to be followed and will not exceed the sanctioned budget.
7. Selection of furniture should be through tender process, L1 rate to be selected and rest of the fund can be used for other miscellaneous items related to DEICs (if any saving fund available).
8. In case of type of furniture or rate of furniture, if any changes require decision needs to be taken in the meeting of District level RBSK committee with proper justification and documentation.

9. Budget break up is attached at **Annexure VII**.

Annexure VII

FMR 6.1.1.5.2 Equipments for DEIC (Furniture)						
Required Furniture for 1 DEIC						
Sl. No	Name of Articles	Quantity	Unit Cost per Article	Total cost in Rs	Total cost in Lakhs	Remarks
1	Office Table	15	5,970	89550	0.90	
2	Office Chair	15	4,800	72000	0.72	
3	Examination Bed/Table	13	15200	197600	1.98	
4	Almirah	14	8000	112000	1.12	
5	Chairs (5 Chairs per room)	75	2220	166500	1.67	
6	Chairs for waiting areas	15	2220	33300	0.33	
Total		147	38410	670950	6.71	
Total Budget for 1 DEIC is @Rs. 6.71 Lakhs, total budget for 5 DEICs					33.55	

District wise Budget Break up				
Sl.no	District	Quantity	Total Cost in Rs.	Total Cost in lakh.
1	Barpeta	147	670950	6.71
2	Dibrugarh	147	670950	6.71
3	Golaghat	147	670950	6.71
4	Karimganj	147	670950	6.71
5	Sonitpur	147	670950	6.71
Total		735	3354750	33.55

Activity VII: RBSK Training -Training of Mobile health team – technical and managerial (Training of MHT staff on RBSK online Training)

FMR Code 9.5.5.1		
Total Approval: 18.90 Lakhs		
State Allocation: 5.00 Lakhs		
District Allocation: 13.90 Lakhs		
FMR Owner		
At State HQ	At District Level	At Block level
Consultant Training & RBSK Consultant & MIS Manager	District Coordinator and DDM/ADDM	Block Coordinator

Fund sanction for training on RBSK software for RBSK online portal, an amount @Rs. 27,800/- per batch of 10 participants per batch (maximum 15 participants) to the districts. Expenditure is as per actual and according to RCH training norms. Conditionally, districts are to follow below mention criteria to conduct the training-

- Each district should finish the training within 2nd quarter of 2021-22
- The training to be conducted at district level as per convenience. The venue should have adequate facilities to conduct such training.
- The training will be conducted as per the agenda and at the end of the training feedback from the participants will be taken.
- Two numbers of District officials like DCo, RBSK/RKSK/WIFS and ADDM from each district and BCo, RBSK/RKSK/WIFA, each pharmacist or MO (who is willing to attend) where pharmacist position is lying vacant should be attended the training.
- The district Coordinator RBSK/WIFS/ARSH and DDM/ADDM of NHM will be responsible for successful completion of training within the time line.
- Training should be completed within the budget of District Operational Guideline 2021-22.
- District wise budget break up is attached at **Annexure VIII**.

Annexure VIII

FMR 9.5.5.1 Two days District level RBSK online training of MHT under RBSK						
Budget for Training						
SN	Head of expenditure	Unit Cost (In Rs)	Unit	Duration	Total (In Rs)	Remarks
1	TA for Participants (on actual)	200.00	10	2	4,000.00	Reorientation is required for using of RBSK online Portal
2	DA for Participants	300.00	10	2	6,000.00	
3	Honorarium for Resource Persons	500.00	3	2	3,000.00	
4	TA for resource Person	300.00	3	2	1,800.00	
6	Training Material (Bag, Pendrive, Pad, Pen, etc.)	150.00	10	1	1,500.00	
8	Working lunch,		15	2	10,500.00	

	break fast	350.00			
12	Contingency	1,000.00	1	1	1,000.00
A- Total for 1 batch (10 participants)					27,800
Total budget required for 50 batches					13,90,000
Total amount in Lakh					13.90

District wise Budget Break up						
SI	District	BPHC (Total 153 BPHC)	Total Participants(Bco &Pharmacists)	Total Batch(10 Participants per Batch)	Total Budget in Rs @ Rs. 27800 per batch with 10 Participants	Total cost in Lakhs
1	Baksa	6	18	2	55600	0.56
2	Barpeta	7	21	2	55600	0.56
3	Biswanath	3	9	1	27800	0.28
4	Bongaigaon	4	12	1	27800	0.28
5	Cachar	8	24	2	55600	0.56
6	Charaideo	2	6	1	27800	0.28
7	Chirang	2	6	1	27800	0.28
8	Darrang	4	12	1	27800	0.28
9	Dhemaji	5	15	2	55600	0.56
10	Dhubri	5	15	2	55600	0.56
11	Dibrugarh	6	18	2	55600	0.56
12	Dima Hasao	3	9	1	27800	0.28
13	Goalpara	5	15	2	55600	0.56
14	Golaghat	5	15	2	55600	0.56
15	Hailakandi	4	12	1	27800	0.28
16	Hojai	2	6	1	27800	0.28
17	Jorhat	6	18	2	55600	0.56
18	Kamrup M	5	15	2	55600	0.56
19	Kamrup R	12	36	4	111200	1.11
20	Karbi Anglong	4	12	1	27800	0.28
21	Karimganj	5	15	2	55600	0.56
22	Kokrajhar	4	12	1	27800	0.28
23	Lakhimpur	6	18	2	55600	0.56
24	Majuli	1	3	0	0	0.00
25	Marigaon	3	9	1	27800	0.28
26	Nagaon	9	27	3	83400	0.83
27	Nalbari	4	12	1	27800	0.28
28	Sibsagar	6	18	2	55600	0.56

29	Sonitpur	4	12	1	27800	0.28
30	South Salmara	2	6	1	27800	0.28
31	Tinsukia	4	12	1	27800	0.28
32	Udalguri	3	9	1	27800	0.28
33	West Karbianglong	4	12	1	27800	0.28
Total		153	459	50	1390000	13.90

Remark: Orientation is required for using of RBSK online Portal; expenditure is as per actual and according to RCH training norms. Training is to be organized zonal wise.

Activity VIII: One Day orientation for MO/other staff Delivery points

FMR Code 9.5.5.3		
Total Approval: 9.33 Lakh		
District Allocation: 9.33 Lakh		
FMR Owner		
At State HQ	At District Level	At Block level
Consultant Training & RBSK Consultant	District Coordinator	Block Coordinator

Fund release for training on Screening for Visible Birth Defects at delivery points, an amount @Rs. **32,158/-** per batch of 30 participants per batch (maximum 30 participants) to the districts. Expenditure is as per actual and according to RCH training norms. Conditionally, districts are to follow below mention criteria to conduct the training-

- Each district should finish the training within 2nd quarter 2021-22.
- The training to be conducted at district level as per convenience. The venue should have adequate facilities to conduct such training.
- The training will be conducted as per the agenda and at the end of the training feedback from the participants will be taken.
- Priority should be given to cover high delivery load LaQshya facilities at the earliest.
- One GNM/MO from each delivery point of LaQshya facilities and also from each delivery point of the district shall be trained.
- State level ToT on birth defect will be the trainer.
- BCos of RBSK/RKSK/WIFS are also being invited.

- The district Coordinator RBSK/WIFS/ARSH and DCM of NHM will be responsible for successful completion of training within the time line.
- Training shall be completed within the budget of District RoP 2021-22.
- DCos should focus on LaQshya facilities and all districts SNCU for birth defect screening and reporting. Monitor of the the facilities to ensure that the screening is happening properly.
- District Coordinator and block coordinator should ensure:
 - Nos. of MO/Staff nurse/ANM/ CHO posted in labour room.
 - Nos. of MO/Staff nurse/ANM/CHO is trained.
 - Identify the non trained MO/GNM/ANM/CHO and plan for training in the FY 2019-20
 - Re orientation of MO/GNM/ANM/CHO on birth defect screening and reporting.
 - Nos. of children screened for birth defect at birth in Delivery point against the total delivery (as per HMIS)
 - Delivery point wise line listing of children with birth defect to be recorded and submitted to state HQ.

FMR: 9.5.5.3 RBSK Training - MO and other staff of Delivery Points (District level)					
Estimated Budget for District level RBSK one Days training for MO/ GNM from Delivery Points (1 person from each Delivery point total DP 882 nos)					
SN	Component	Unit Cost (In Rs)	Unit	Duration	Total (In Rs)
1	TA for Participants	200	30	1	6000
2	DA to Participants	400	30	1	12000
3	Honorarium for Resource Persons	500	1	1	500
4	TA for resource Person (On Actual)	400	1	1	400
5	Training Material (Plastic Folder,Pad, Pen etc.)	50	30	1	1500
6	Working lunch, snacks and Tea	300	35	1	10500
8	Contingency including venue charge	1258	1	1	1258
Total for 1 batch (30 participants)					32158
Total budget required for 29 batches (870 participants)					932582
Total Amount in Lakhs					9.33

District wise Budget break up

SN	District	Total Delivery Point	Total Participants(GNM/MO)	No of batch	Total Budget in lakh(@Rs.32,158/- per batch)	Remarks
1	Baksa	23	30	1	0.32	
2	Barpeta	57	60	2	0.64	
3	Biswanath	18	0	0	0.00	Sanctioned along with Sonitpur
4	Bongaigaon	33	30	1	0.32	
5	Cachar	44	30	1	0.32	
6	Charaideo	8	0	0	0.00	Sanctioned along with Sivasagar
7	Chirang	15	30	1	0.32	
8	Darrang	36	30	1	0.32	
9	Dhemaji	28	30	1	0.32	
10	Dhubri	46	30	1	0.32	
11	Dibrugarh	16	30	1	0.32	
12	Dima Hasao	12	30	1	0.32	
13	Goalpara	52	30	1	0.32	
14	Golaghat	24	30	1	0.32	
15	Hailakandi	33	30	1	0.32	
16	Hojai	20	0	0	0.00	Sanctioned along with Nagaon
17	Jorhat	9	30	1	0.32	
18	Kamrup Metro	6	30	1	0.32	
19	Kamrup Rural	35	30	1	0.32	
20	Karbi Anglong	35	30	1	0.32	
21	Karimganj	43	30	1	0.32	
22	Kokrajhar	49	30	1	0.32	
23	Lakhimpur	36	30	1	0.32	
24	Majuli	5	0	0	0.00	Sanctioned along with Jorhat
25	Morigaon	42	30	1	0.32	
26	Nagaon	40	30	1	0.32	
27	Nalbari	20	30	1	0.32	
28	Sivasagar	7	30	1	0.32	
29	Sonitpur	16	30	1	0.32	
30	South Salmara	12	30	1	0.32	
31	Tinsukia	26	30	1	0.32	
32	Udalguri	21	30	1	0.32	
33	West Karbi Anglong	15	0	0	0.00	Sanctioned along with Karbi Anglong
Total		882	870	29	9.33	

Agenda for One day orientation for MO/ other staff delivery points:

Topic	Time	Resource person
Registration	9.45 am to 10.00 am	
Welcome Speech and Inauguration	10.00 am to 10.15 am	
Tea Break (10.15 am to 10.30 am)		
Overview of RBSK Overview of New born Screening	10.30am to 11.15 am	
Screening Methodology	11.15 am to 12.00 am	
Head to Toe Examination	12.00 am to 1.30 pm	
Lunch break 1.30 pm to 2.15 Pm		
Recording and Reporting	2.15 pm to 2.45 pm	
Initial Management	2.45 pm to 3.15 pm	
Counselling the parents	3.15 pm pm to 3.45pm	
Know your referral service (KYRS)	3.45 pm to 4.10pm	
ICD 10 Coding system	4.10 pm to 4.30 pm	
Wrap up	4.30 pm	

FEEDBACK FORM FOR PARTICIPANTS:

NAME OF TRAINIG: Comprehensive new born screening for visible birth defects at delivery points

NAME OF DISTRICT:

DATE:

Read the following and give your opinion

- 1) What are the new things you have learnt in this training?
 -
 -
 -
 -
- 2) Was the training session interactive? Yes/No
- 3) If yes, mention themethods used by trainers for interaction
 -
 -
 -
- 4) Did the trainer explain the processes of identification by illustrating good examples related to the field to make the understanding clear? Yes/No
- 5) Did you need any support from block, district and state for better implementation of the programme? Yes/No
- 6) If yes mention the need

-
-
-

7) **Has the** training covered all the **topics as** per agenda? Yes/No

Any other remarks

Guideline for Delivery points

Guideline for Delivery points

1. The SNCU and Delivery point reports on birth defects should be merged and send to state every month. The submission date should not be exceeded up to 9th of every month.
2. MO and GNM/ANM of the delivery point will do head to toe examination for all visible birth defects at delivery point.
3. GNM/ANM will fill up the screening cum reporting form and keep it in the delivery point.
4. The delivery point register will remain same which you received earlier, when they find any visible birth defects apart from the previously reported 9 birth defects they will put the code number of the visible birth defects in the column of "**no defects observed**" which is present in the delivery point register.
5. GNM/ANM will fill up the referral form at delivery point and give to the patient party at the time of referral.
6. Block coordinator will collect data from the screening cum reporting forms from the delivery points, and DCOs will collect data from DH. Further district coordinator will compile the report from all the delivery points and DH and submit to State Head Quarter.
7. The current incidence of birth defects in India is 1 per case after 25 case screening. As per NPCC meeting held on 12/2/19 our state's detection rate is 0.1% only. Kindly monitor your delivery point performance on detection of visible birth defects.
8. All district coordinator will monitor the delivery points to enhance the screening and detection of birth defect and submit their monitoring form to state regarding the DP visit. We are sending one new reporting format for the detection of birth defect reporting from the districts. This is enclosed with this email.
9. The new DP report exist 66 diseases to detect. Delivery point will go as per the new report. Attached in Annexure-I.
10. The Block Coordinator and District coordinator will keep the referral line listing and treatment line listing on birth defect separately and submit to State Head Quarter along with the MPR and Line listing of referral and treatment of AWC and School.

Handwritten signature
Coordinator (CA)
NHM, Panam
16/2/19

Activity IX: Printing of RBSK card and registers

FMR Code 12.5.4		
Total Approval: 84.34 Lakhs		
District Allocation: 84.34 Lakhs		
FMR Owner		
At State HQ	At District Level	At Block level
Consultant RBSK	District Coordinator and DME	Block Coordinator

1. The fund is approved for printing of screening forms cum referral forms for AWC & School children, different registers for School, AWC, Logbook, ASHA, HI, and Referral etc.
2. District Media Experts (DMEs) will be responsible along with DCO, RBSK/RKSK and WIFS for completing this activity as per need which will within the month of September 2021.
3. Concerned officials must be proceed as per official procedures for selecting parties for printing with the prior approval of Jt. DHS and needs to be documented properly.
4. If any changes require in case of rate and quantity, District RBSK committee in the presence of Jt. DHS can take decisions and documentation should be maintained properly.
5. Printing material for new Districts namely Biswanath, Charaideo, Hojai, Majuli, South Salmara and West Karbi Anglong, old District like Sonitpur, Sivasagar, Nagaon, Jorhat, Dhubri and Karbianglong will be responsible for printing and distribute to the new Districts accordingly.
6. District wise Budget break up attached **Annexure**.

FMR Code: 12.5.4 - Printing of RBSK Cards and Registers

S N	District	AWC Children 0-6 yrs		School Children 6-18 yrs		Registers												Grand Total in Lakhs
		Screening tool cum referral card for(0 to 6 years) to be printed for the fy 2020-21	Tentative Budget for Screening cum referral card for 0 to 6 years of Children@ Rs0.75 per card in lakhs	Screening tool cum referral card for(6 to 18 years) to be printed for the fy 2020-21	Tentative Budget for Screening cum referral card for6 to 18 years of Children@Rs 0.50 per card in lakhs	Register for MHT(1000 records per Register for MHT 0-6 yrs for fy 2020-21 to be printed	Tentative Budget for Register for MHT 0-6 yrs@ Rs. 117/-	Register for MHT(1000 records per Register for MHT 6-18 yrs for fy 2020-21 to be printed	Tentative Budget for Register for MHT 6-18 yrs @ Rs. 117/	Log book Register for MHT vehicles @ 2 register per MHT Vehicle)	Tentative Budget for Log book Register @ Rs. 117 /	Registers for HI(D EIC)(Treatment)Per block 1 register Block and 26 register per DEIC	Tentative Budget for HI Register @ Rs. 117/	Referral Register 1 register per block	Tentative Budget for referral Register @ Rs. 117/	ASHA Register(45 % of total ASHAs	Tentative Budget for ASHA Register @ Rs. 117 /	
1	Baksa	139989	1.05	166203	0.83	140	0.16	166	0.19	24	0.03	6	0.007	6	0.007	428	0.50	2.78
2	Barpeta	269425	2.02	272674	1.36	269	0.32	273	0.32	28	0.03	33	0.039	7	0.008	725	0.85	4.95
3	Bongaigao	134012	1.01	148739	0.74	134	0.16	149	0.17	16	0.02	30	0.035	4	0.005	315	0.37	2.51

	n																	
4	Cachar	220296	1.65	278994	1.39	220	0.26	279	0.33	32	0.04	8	0.009	8	0.009	792	0.93	4.61
5	Chirang	62153	0.47	94047	0.47	62	0.07	94	0.11	8	0.01	2	0.002	2	0.002	334	0.39	1.52
6	Darrang	91418	0.69	147024	0.74	91	0.11	147	0.17	16	0.02	30	0.035	4	0.005	440	0.51	2.27
7	Dhemaji	153395	1.15	124415	0.62	153	0.18	124	0.15	20	0.02	5	0.006	5	0.006	336	0.39	2.53
9	Dhubri	280831	2.11	380016	1.90	281	0.33	380	0.44	28	0.03	7	0.008	7	0.008	860	1.01	5.83
10	Dibrugarh	132959	1.00	187253	0.94	133	0.16	187	0.22	24	0.03	32	0.037	6	0.007	548	0.64	3.02
8	Dima Hasao	26557	0.20	31309	0.16	27	0.03	31	0.04	12	0.01	3	0.004	3	0.004	112	0.13	0.58
11	Goaghat	199668	1.50	211872	1.06	200	0.23	212	0.25	20	0.02	31	0.036	5	0.006	476	0.56	3.66
12	Goalpara	100136	0.75	194645	0.97	100	0.12	195	0.23	20	0.02	5	0.006	5	0.006	469	0.55	2.65
13	Hailakandi	88877	0.67	121063	0.61	89	0.10	121	0.14	16	0.02	4	0.005	4	0.005	322	0.38	1.92
14	Jorhat	133825	1.00	162057	0.81	134	0.16	162	0.19	28	0.03	33	0.039	7	0.008	545	0.64	2.88
16	Kamrup Rural	81155	0.61	97990	0.49	81	0.09	98	0.11	48	0.06	12	0.014	12	0.014	778	0.91	2.30
15	Kamrup(m)	208977	1.57	307492	1.54	209	0.24	307	0.36	20	0.02	31	0.036	5	0.006	95	0.11	3.89
17	Karbi Anglong	145017	1.09	183157	0.92	145	0.17	183	0.21	32	0.04	8	0.009	8	0.009	479	0.56	3.00
18	Karimganj	128895	0.97	176794	0.88	129	0.15	177	0.21	20	0.02	31	0.036	5	0.006	542	0.63	2.91
19	Kokrajhar	111166	0.83	147753	0.74	111	0.13	148	0.17	16	0.02	4	0.005	4	0.005	621	0.73	2.63
20	Lakhimpur	209919	1.57	197283	0.99	210	0.25	197	0.23	24	0.03	32	0.037	6	0.007	573	0.67	3.78
21	Morigaon	93862	0.70	118945	0.59	94	0.11	119	0.14	12	0.01	3	0.004	3	0.004	427	0.50	2.07
22	Nagaon	362731	2.72	455612	2.28	363	0.42	456	0.53	44	0.05	11	0.013	11	0.013	1072	1.25	7.29
23	Nalbari	84153	0.63	113478	0.57	84	0.10	113	0.13	16	0.02	4	0.005	4	0.005	347	0.41	1.86
24	Sivasagar	115033	0.86	170814	0.85	115	0.13	171	0.20	32	0.04	8	0.009	8	0.009	533	0.62	2.73
25	Sonitpur	226324	1.70	335157	1.68	226	0.26	335	0.39	28	0.03	33	0.039	7	0.008	806	0.94	5.05
26	Tinsukia	165765	1.24	171808	0.86	166	0.19	172	0.20	16	0.02	4	0.005	4	0.005	606	0.71	3.23
27	Udalguri	81171	0.61	95833	0.48	81	0.09	96	0.11	12	0.01	3	0.004	3	0.004	479	0.56	1.88
Total		4047707	30.36	5092426	25.46	4048	4.74	5092	5.96	612	0.72	413	0.483	153	0.179	14058	16.45	84.34

Activity X: RBSK Convergence/Monitoring meetings

FMR Code- 16.1(16.1.2.1.7)		
Total Approval: 14.21 Lakh		
State HQ Allocation: 0.80 Lakh		
District Allocation: 13.41 Lakh		
FMR Owner		
At State HQ	At District Level	At Block level
RBSK Consultant	District Coordinator, RBSK/RKSK/WIFS	Block Coordinator RBSK/RKSK/WIFS

In case of new Districts, kindly organize the District level meeting with old Districts

Meetings to prepare Micro plan (Block Action Plan):

For the effective implementation of RBSK Programme proper planning is highly required. The SDM & HO i/c of Block PHC, BEEO, CDPOs, BPM, BCo, RBSK Mobile Health Team and ASHA /ASHA Supervisors under the health block should be present in the meeting and planning process. Cost for preparation of Micro plan @ Rs. 3000/- per Health Block for 153 Block. **(Two micro plan preparation meeting to be conducted in 2021-22)**

- Preparation of micro plan to be submitted to State HQ along with the allied Dept.

Prepare detailed operational plan for RBSK across districts:

Fund to be utilized for half yearly Monitoring/Review meetings at District and Block level to be strengthen, monitor, support and for reviewing the performance of RBSK teams. District should ensure to organize two review meetings before 31st March'22. Conditionally district should review MHT performance, issues regarding Screening, Referral, Treatment and Action point for further improvement. Minutes of the meeting should be shared with State HQ, NHM and other departments within 7th day after the meeting.

District Level Review Meeting:

Rs.5,000/- (Rupees Five Thousand only) is sanctioned per review **meeting (2 nos of review meeting to be conducted in 2021-22)** i.e. refreshment, banner, stationeries etc. Expenditure should be as per actual. District to ensure that following member shall be present in the meeting –

- Additional Deputy Commissioner (Health)
- Joint Director of Health Services
- Additional Chief Medical and Health Officer(FW)
- SDM & HO (School Health& District Nodal Officer, RBSK)
- District officer/Coordinator of NPPCD, NPCB, NMHP, NOHP.
- Sub Divisional Medical & Health Officer (In-Charge of Block PHC),all blocks under the respective district.
- Superintendent (AMCH/ GMCH/ SMCH/ JMCH/ FAAMCH)
- Superintendent of Civil Hospital
- District Elementary Education Officer
- Inspector of Schools
- District Social Welfare Officer
- District Programme Manager, NHM
- Representative from tribal welfare.
- District Media Expert, NHM
- District Data Manager, NHM
- District Accounts Manager, NHM
- District Community Mobilizer , NHM
- District Coordinator, RBSK, NHM
- Block Programme Manager, NHM, All blocks under the respective district.
- Block Programme Assistant, NHM, All blocks under the respective district.
- RBSK MHT members (Two members from each team).

Block Level Review Meeting and Micro Plan preparation meeting:

Rs. 2,000/- (Rupees Two Thousand only) is sanctioned per review meeting i.e. refreshment, banner, stationeries etc. Expenditure is as per actual. Blocks to ensure

that following member shall be present in the meeting –(2 nos of review meeting to be conducted in 2021-2022) .

- Circle Officer
- SDM & HO (School Health & District Nodal Officer, RBSK)
- Sub Divisional Medical & Health Officer (In-Charge of Block PHC)
- Block Elementary Education Officer
- Representative of Inspector of Schools
- Representative from Tribal welfare
- Representative from local governance-Panchayati Raj institute.
- Child Development & Project Officer
- All members of RBSK Mobile health Team, NHM
- Block Programme Manager, NHM
- Block Data Manager, NHM
- Block Programme Assistant, NHM
- Block Accounts Manager, NHM
- Block Community Mobilizer, NHM
- RBSK MHT members (all)
- RMNCHA counselor / ARSH counselor/Nutrition Counselor.

District wise Budget break up is attached at **Annexure XI**.

Annexure XI

Budget Breakup

Budget for Review Meeting (Half Yearly)

Sl	District	District level Half yearly meeting @ Rs 5000/-	BPHC	Block level Half yearly review meeting @ Rs 2000/-	Cost for Microplan preparatory meeting @ Rs 3000/-	Total District budget	Total Buudget in Lakhs
1	Baksa	10,000	6	24,000	18,000	52,000	0.52
2	Barpeta	10,000	7	28,000	21,000	59,000	0.59
3	Bongaigaon	10,000	4	16,000	12,000	38,000	0.38

4	Cachar	10,000	8	32,000	24,000	66,000	0.66
5	Chirang	10,000	2	8,000	6,000	24,000	0.24
6	Darrang	10,000	4	16,000	12,000	38,000	0.38
7	Dhemaji	10,000	5	20,000	15,000	45,000	0.45
8	Dhubri	10,000	7	28,000	21,000	59,000	0.59
9	Dibrugarh	10,000	6	24,000	18,000	52,000	0.52
10	Dima Hasao	10,000	3	12,000	9,000	31,000	0.31
11	Goalpara	10,000	5	20,000	15,000	45,000	0.45
12	Golaghat	10,000	5	20,000	15,000	45,000	0.45
13	Hailakandi	10,000	4	16,000	12,000	38,000	0.38
14	Jorhat	10,000	7	28,000	21,000	59,000	0.59
15	Kamrup Metro	10,000	5	20,000	15,000	45,000	0.45
16	Kamrup Rural	10,000	12	48,000	36,000	94,000	0.94
17	Karbi Anglong	10,000	8	32,000	24,000	66,000	0.66
18	Karimganj	10,000	5	20,000	15,000	45,000	0.45
19	Kokrajhar	10,000	4	16,000	12,000	38,000	0.38
20	Lakhimpur	10,000	6	24,000	18,000	52,000	0.52
21	Morigaon	10,000	3	12,000	9,000	31,000	0.31
22	Nagoan	10,000	11	44,000	33,000	87,000	0.87
23	Nalbari	10,000	4	16,000	12,000	38,000	0.38
24	Sivasagar	10,000	8	32,000	24,000	66,000	0.66
25	Sonitpur	10,000	7	28,000	21,000	59,000	0.59
26	Tinsukia	10,000	4	16,000	12,000	38,000	0.38
27	Udalguri	10,000	3	12,000	9,000	31,000	0.31
Assam Total		2,70,000	153	6,12,000.00	4,59,000.00	13,41,000.00	13.41

Activity XI : a) Supervision & Monitoring – District level
b) Supervision & Monitoring - Block Level

FMR Owner		
At State HQ	At District Level	At Block level
RBSK Consultant	District Coordinator/DEIC Manager	Block Coordinator

1. District and Block RBSK Nodal officer will do supportive supervision & monitoring visit @ 1 visit per month for 12 months and District Coordinator & Block Coordinator RBSK/RKSK/WIFS will do supportive supervision & monitoring visit @4 visits per month for 12 months
2. Monitoring expenses can be claimed only after the submission of properly filled and completed RBSK monitoring checklist approved by SDM&HO in block level and by DPM and Jt. DHS in district level. RBSK Screening Monitoring Checklist is at **Annexure X**.

3. The amount for supportive supervision and monitoring should be released immediately after completing the visits and submission of monitoring and supervision format duly signed by SDM& HO and Jt. DHS.
4. The mobility fund for RBSK officials (DPMU/BPMU) shall be utilized from DPMU and BPMU mobility pool fund approved under different FMR codes.
5. District wise target for monitoring visits is attached at **Annexure XII**.

Annexure XII

FMR Mobility and communication support for District and Block officials under RBSK							
SN	District	No.of BPHC	Total No. of Team (2 team per block)	Supportive supervision visit of District Nodal Officer, RBSK @1 visit per month for 12 months	Supportive supervision visit of District Coordinator, RBSK, @4 visits per month for 12 months	Supportive supervision visit Block Nodal Officer, RBSK/SDM & HO @1 visit per month for 12 months	Supportive supervision visit of Block Coordinators RBSK, @4 visits per month for 12 months
1	Baska	6	12	12	48	12	48
2	Barpeta	7	14	12	48	12	48
3	Bongaigaon	4	8	12	48	12	48
4	Cachar	8	16	12	48	12	48
5	Chirang	2	4	12	48	12	48
6	Darrang	4	8	12	48	12	48
7	Dhemaji	5	10	12	48	12	48
8	Dhubri	7	14	12	48	12	48
9	Dibrugarh	6	12	12	48	12	48
10	Dima Hasao	3	6	12	48	12	48
11	Goalpara	5	10	12	48	12	48
12	Golaghat	5	10	12	48	12	48
13	Hailakandi	4	8	12	48	12	48
14	Jorhat	7	14	12	48	12	48
15	Kamrup Metro	5	10	12	48	12	48
16	Kamrup Rural	12	24	12	48	12	48
17	Karbi Anglong	8	16	12	48	12	48
18	Karimganj	5	10	12	48	12	48
19	Kokrajhar	4	8	12	48	12	48
20	Lakhimpur	6	12	12	48	12	48

21	Morigaon	3	6	12	48	12	48
22	Nagoan	11	22	12	48	12	48
23	Nalbari	4	8	12	48	12	48
24	Sivasagar	8	16	12	48	12	48
25	Sonitpur	7	14	12	48	12	48
26	Tinsukia	4	8	12	48	12	48
27	Udalguri	3	6	12	48	12	48
Total		153	306	324	1296	324	1296

District Level:

Contingency for printing reporting formats/forms, arranging day to day required stationary and banner etc. District level expenditure will be utilized from general DPMU office contingency fund. Expenditure should be as on actual.

Block level:

1. Contingency fund for printing reporting formats/forms, arranging day to day required stationary, Banner and refreshment of referral cases etc. This fund may also be used to hire vehicle to bringing referrals, identified with 4Ds as well as Adolescent Health Concerns during screening, to health facilities for treatment if regular transport facility under NHM like 108/102 is not available at that time.
2. TA of BCOs who is already ordered for additional duty can claim from this FMR as on actual.



ৰাষ্ট্ৰীয় স্বাস্থ্য অভিযান, অসম

Monitoring Check List for Delivery point under RBSK				
Name of the District				Remarks
Name of the Health Institution				
Type of Health Institution (DH/SDCH/CHC/PHC/SC/SNCU)		Whether the facility is Delivery Point (Yes/No)		
Whether functioning as FRU (Y/N)		Whether functioning as 24X7 Facility (Y/N)		
Whether the facility is LaQshy facility (Y/N)		Level of Monitoring (State/ District/ Block)		
Date & Time of Visit				
Status of facilities				
			Number	Remarks
1	HR:			
		Pediatrician		
		MO		
		GNM		
		ANM		
		CHO		
2	Training Status: Whether the visible birth defect training was taken or not			
		Pediatrician		
		MO		
		GNM		
		ANM		
		CHO		
3	Poster on visible Birth Defect at Labour room(yes/no)			
4	Poster on visible Birth Defect at CS OT(yes/no)			
5	Poster on visible Birth Defect SNCU(yes/no)			
6	Availability of birth defect register(yes/no)			
7	Availability of birth defect screening			

	format(yes/no)			
8	Availability of birth defect referral format(yes/no)			
9	Knowledge on birth defect screening referral and treatment process			
10	Whether the staff maintaining the register properly(yes/not)			
11	Whether the staff maintaining the screening and referral format properly (yes/no)			

Performance of the Health Institution as per record available in Register

SI	Monitorable Points	Last 3 month			Remarks
1	Total number of Institutional Delivery (including C-Section)				
2	Total nos of Normal Delivery				
3	Total nos of C-Section Delivery				
4	Total no of children screened for birth defect				
5	Total no of children with birth defect detected				
6	No of still birth with visible birth defect				
7	Specify the birth defect in the institution				
8	SNCU Functional Status(yes/no)				
9	No of admissions				

10	Total no of children with birth defect detected				
11	Specify the birth defect				
Other Major Observations / Gap of the Health Facility					
<i>Note: Please furnish photograph of the Health Institutions to create the baseline.</i>					

Name of the Monitoring Officer:

Designation:

Signature



RBSK Screening Monitoring Checklist

District _____ Name of the BPHC _____ Unique ID of
MHT _____

Name of the School where screening held _____ DISE
Code _____

Name of AWC where screening held _____ AWC
ID _____

Name of the Village _____ Date of visit _____ Time of Visit (Duration)

Name of the Monitoring officer _____ Designation _____

Level of Monitoring (State/ District/ Block) _____

Date of communication with AWW and School teacher by MHT for Screening at AWC & School.

- Total no of Screening conducted in AWC:
- Total no of Children registered under AWC:
- Total no Screening conducted in School:
- Total Enrolment in the school:

Names of the Staff present in the Screening Time

_____ Medical Officer (AYUSH)

_____ MO (Homeo)

_____ Dental Surgeon

_____ ANM/Staff Nurse

_____ Pharmacist

_____ Block Coordinator

_____ ASHA

_____ ASHA Supervisor

_____ Anganwadi Workers
 _____ ICDS Supervisor
 _____ Others (Please specify)

1. Screening held as per micro plan: Yes /No _____

2. If Screening not done as per micro plan please mention the reason :

3. Available documents with MHT (Please tick):

- Participants Manual
- Screening tool cum referral card
- MHT Register
- RBSK Job Aids
- Banner of RBSK

4. Available Equipments for Screening including Development Delays (6 weeks to 6 years):

A. Bell	Yes/No
B.Rattle	Yes/ No
C.Torch	Yes/No
D. One Inch Cubes	Yes/No
E. Small Bottle with raisins	Yes/ No
F. Squeaky toys	Yes/No
G. Colored Wool	Yes/No
H. Vision Charts (Snellen)	Yes/No
I. Reference Charts	Yes/ No
J. BP apparatus (Sphygmomanometer)	Yes/No
K.Stethoscope	Yes/No
K. Weighing scale (Mechanical newborn weighing scale, standing weighing scale)	Yes/No
L. Height Measuring (Stadiometers/ Infant meters)	Yes/ No

- M. Mid arm circumference tape/bangle Yes/No
- N. Non stretchable measuring tape for head circumference Yes/No
- O. Red Ring Yes/No
- P. Magnifying Lens Yes/No
5. MHT filled up Screening and Referral Card Properly Yes/No /Comments _____
6. MHT filled up School/Anganwadi Register Properly Yes/No/ Comments _____
7. MHT indicates proper Referral facility (CHC/DH/DEIC/NRC) Yes/No /Comments _____
8. MHT demonstrated Proper Brushing Techniques Yes/No/ Comments _____
10. Counseling given to Parents/Guardians/Care giver. Yes /No/ Comments _____
11. Whether MHT filled up the Unique ID of Referral Children Properly Yes/No/ Comments _____

12. Total no children identified with selected health conditions:

Sl no	Findings	No of beneficiaries identified at School	No of beneficiaries identified at AWC
1	Defects at Birth		
2	Deficiencies		
3	Childhood diseases		
4	Development delay and Disability		
5	Adolescent specific conditions		

13. No of Parents/Guardians were present and Counseled by the ANM:

14: Tentative date of follow up with MHT for referral and treatment information:

Name and Signature of Monitor With designation

State Level Activities:

1.

FMR Code	Activity	FMR Owner	Budget Approval
6.1.1.5.3	ECD Kits	BME & Consultant RBSK	73.73

Fund approved for ECD kits for all ASHAs for 7 Aspirational and HBYC implementing District. With the help of this kit, ASHA will be able to identify the developmentally delayed children and refer for early interventions.

2.

FMR Code	Activity	FMR Owner	Budget Approval
6.2.5.1	Medicine for Mobile Health Team	DSM(HQ) & Consultant RBSK	87.33 Lakhs

EDL for RBSK MHTs will be procured centrally and the medicines will be at District Drug store. Budget will be spent at State HQ.

3.

FMR Code	Activity	FMR Owner	Budget Approval
9.5.5.1	RBSK Training_ Training of Mobile Health Team	Consultant Training & Consultant RBSK	18.72 Lakhs

Approved 1 batch of 5 Days training will be organized and trained 40 nos newly recruited MHT members and the budget will be spent at State HQ.

4.

FMR Code	Activity	FMR Owner	Budget Approval
12.5.6	Printing of The first 1000 Days Booklet	SPM & Consultant RBSK	12.07 Lakhs

Journey of First 1000 Days Booklet will be printed for ASHA, ANM, ASHA Facilitator and MPW of another 6 HBYC implementing Districts namely Cachar, Jorhat including Majuli, Karimganj, Morigaon, Nagaon and Sonitpur including BNC at State level.

5 .

FMR Code	Activity	FMR Owner
16.3.5	Call Center for Early Childhood Development	MIS Manager & Consultant RBSK

GOI approved one Call center for Early Childhood Development to set up a helpline service for the people of the State that will enable free health counseling and advice on optimal development of cognitive potential; of our children from any mobile or landline phone, which already started from 1st January 2020.

The budget will be spent at State HQ.

(Dr. Lakshmanan S, IAS)
Mission Director
National Health Mission, Assam.