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Preface

State Programme Implementation Plans and NPCC meetings give us an opportunity to jointly review the progress made in the previous year, share our common vision for the future and take decisions on the activities to be carried out in the coming year. This RoP document summarizes our aspirations and the strategies we have jointly agreed to invest our efforts and resources in 2016-17.

As we look back at the ten years of NHM implementation, we find that substantial investments have been made and in many areas, we have made considerable progress especially in access to RMNCH+A services. While we commend States for the stellar efforts made and successes achieved, a lot still remains to be done. As we move from RMNCH centric MDGs to a much wider SDGs, we need to approach them from a health systems perspective. This will require us to systematically address the challenges posed by emerging lifestyle diseases. Further, we need to move faster on the path to UHC to reduce impoverishment on account of catastrophic health expenditure and loss of wages and productivity due to ill health.

Among many new initiatives that have been launched recently, roll out of free drugs and free diagnostics are expected to reduce OOPE substantially. Emphasis on quality assurance and ‘Kayakalp’ initiatives to promote cleanliness, hygiene and infection control practices is expected to further encourage people to come to our public health facilities where the healthcare costs are considerably lower. We also intend to focus on client/patient satisfaction through a well-designed grievance redressal system that captures patient feedback and leverages IT based systems to do this.

With improvements in access, moving to a comprehensive primary care with effective system of referrals is the key critical strategy in the path towards universal health coverage. This calls for strengthening our primary and secondary healthcare facilities on priority. States should continue strengthening of district hospitals for multi-specialty care as per IPHIS and as training hubs for advanced and specialized trainings for nurses and paramedical staff. This will serve dual purposes of improving access to multi-specialty secondary care and address our HR requirement. This will also ease the unnecessary strain on tertiary care facilities and help improve overall quality of care in tertiary facilities. Budget announcement of provision of dialysis in district hospitals through PPP also synchronizes with this strategy. Guidelines for operationalising the ‘National Dialysis Programme’ has been shared with States and I look forward to its implementation in the States in the spirit with which it was announced.
As we try to get more resources for health, it is equally important to look into the effectiveness and efficiency of programme implementation and fund utilization. I expect that the States will analyze and use the various data sources available to us in the form of HMIS, MCTS, DV/DMS and survey data for assessing implementation of our initiatives and their impact. I would urge you not to hesitate to propose mid-course corrections through supplementary PIPs if you come up with evidence based context specific interventions based on your analysis which you think will fetch us better health outcomes. In case you have any query please feel free to reach out to me or my team in MoHFW.

With the increased devolution to States, it is expected the State governments would prioritize health spending and to ensure smooth implementation of interventions, timely release of NHM funds from treasury should be ensured by States. Let us re-affirm our commitment for providing access to equitable, affordable and quality health care.

I look forward to hearing from you on the progress against the approvals. Wishing you all the best in this endeavor

Arun. K. Panda
Additional Secretary & Mission Director, NHM
To,
Mission Director, NHM
National Health Mission
Om Kailash Tower 19-A
Vidhan Sabha Marg
Lucknow-226001

Subject: Approval of NHM State Programme Implementation Plan for Uttar Pradesh for
the financial year 2016-17.

This refers to the Programme Implementation Plan (PIP) for the year 2016-17 submitted
by the State of Uttar Pradesh and subsequent discussions in the NPCC meeting held on May 31st,
2016 at Nirman Bhawan, New Delhi.

2. Against a resource envelope of Rs. 4,532.66 Crore, (calculated assuming State Share of 40 %)
an administrative approval of the PIP for your State is conveyed for an amount of Rs. 5,286.93
Croc.

3. Unspent balance available under NHM as on 01.04.2016 – Rs. 3,275.47 Crore, would also be a
part of the resource envelope. Details are provided in Table I, II and III below:

**TABLE I - Resource Envelope**

<table>
<thead>
<tr>
<th>Particular</th>
<th>(Rs. in crore)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unspent balance available as on 01.04.2016</td>
<td>3,275.47</td>
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<tr>
<td>GOI support (assuming no reduction on account of non-fulfillment of conditionalities)</td>
<td>2,063.29</td>
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<td>Assuming 10% incentive earned by state</td>
<td>229.25</td>
</tr>
<tr>
<td>40% State share</td>
<td>1,528.36</td>
</tr>
<tr>
<td><strong>Total Resource Envelope</strong></td>
<td><strong>7,096.37</strong></td>
</tr>
<tr>
<td>Less, Amount from unspent balance to be used for on going activities (committed expenditure)</td>
<td>2,563.71</td>
</tr>
<tr>
<td><strong>Fund available for other Approvals</strong></td>
<td><strong>4,532.66</strong></td>
</tr>
</tbody>
</table>
### TABLE 'II' - Break up of Resource Envelope

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name of Programme</th>
<th>Rs. in Crore</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>RCH Flexible Pool</td>
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</tr>
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<td>2</td>
<td>Health System Strengthening under NRHM</td>
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<td>3</td>
<td>Immunization from (RCH Flexible Pool)</td>
<td>30.00</td>
</tr>
<tr>
<td>4</td>
<td>PPI Operational Cost</td>
<td>49.20</td>
</tr>
<tr>
<td>5</td>
<td>NIDDCP</td>
<td>0.62</td>
</tr>
<tr>
<td>6</td>
<td>NUHM Flexible Pool</td>
<td>90.54</td>
</tr>
<tr>
<td>7</td>
<td>IDSP</td>
<td>4.50</td>
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<tr>
<td>8</td>
<td>NVBDCP</td>
<td>36.50</td>
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<tr>
<td>9</td>
<td>NLEP</td>
<td>4.80</td>
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<td>10</td>
<td>RNTCP</td>
<td>73.38</td>
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<tr>
<td>11</td>
<td>NCD</td>
<td>71.81</td>
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<tr>
<td>12</td>
<td>Infrastructure &amp; Maintenance</td>
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<tr>
<td>13</td>
<td>40% State Share</td>
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<tr>
<td>14</td>
<td>Unspent balance available as on 01.04.2016</td>
<td>3,275.47</td>
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</table>

**Total Resource Envelope** 7,096.37

Less, Amount from Unspent balance to be used for on going activities (committed expenditure) 2,563.71

**Fund available for other Approvals** 4,532.66

### TABLE III - Summary of Approval- Major Heads.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name of Programme</th>
<th>Amount Proposed</th>
<th>Approved Amount for 2016-17</th>
<th>Amount Approved as per Table-D of ongoing activities out of unspent balance</th>
<th>Total Approval</th>
<th>Annex Ref.</th>
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<tbody>
<tr>
<td>1</td>
<td>RCH Flexible Pool</td>
<td>2,287.16</td>
<td>1,961.64</td>
<td>276.39</td>
<td>2,238.04</td>
<td>Annexe A</td>
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<tr>
<td>2</td>
<td>Mission Flexible Pool (including NOHP, NPPCD, NPPCF, Palliative Care and Assistance to State for Capacity building for Burns &amp; Injury)</td>
<td>3,361.09</td>
<td>1,981.50</td>
<td>2,093.95</td>
<td>4,075.46</td>
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<tr>
<td>3</td>
<td>Immunization from (RCH Flexible Pool)</td>
<td>161.95</td>
<td>152.48</td>
<td>12.63</td>
<td>165.11</td>
<td>Annexure C</td>
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<tr>
<td>4</td>
<td>PPI Operational Cost</td>
<td>148.74</td>
<td>141.96</td>
<td>9.72</td>
<td>151.69</td>
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<tr>
<td>5</td>
<td>NIDDCP</td>
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<td>0.28</td>
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</tr>
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<td>6</td>
<td>NUHM Flexible Pool</td>
<td>291.61</td>
<td>207.68</td>
<td>47.00</td>
<td>254.68</td>
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</tr>
<tr>
<td>7</td>
<td>IDSP</td>
<td>12.01</td>
<td>9.83</td>
<td>0.41</td>
<td>10.24</td>
<td>Annex G</td>
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<tr>
<td>8</td>
<td>NVBDCP</td>
<td>66.24</td>
<td>28.08</td>
<td>38.57</td>
<td>66.65</td>
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## TABLE IV - Summary of Approval

<table>
<thead>
<tr>
<th>S. No</th>
<th>Budget Head</th>
<th>Amount Proposed ( Rs. lakhs )</th>
<th>Amount Approved ( Rs. lakhs )</th>
<th>%</th>
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</thead>
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<tr>
<td>1. RCH FLEXI POOL</td>
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<tr>
<td>A1</td>
<td>Maternal Health</td>
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<td>Child Health</td>
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<table>
<thead>
<tr>
<th>S. No</th>
<th>Name of Programme</th>
<th>Amount Proposed</th>
<th>Approved Amount for 2016-17</th>
<th>Amount Approved as per Table-D of ongoing activities out of unspent balance</th>
<th>Total Approval</th>
<th>Annex Ref.</th>
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<td>9</td>
<td>NLEP</td>
<td>21.84</td>
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<td>10</td>
<td>RNTCP</td>
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<td>36.98</td>
<td>202.49</td>
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<td>11</td>
<td>NPCB</td>
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<td>NPCDCS</td>
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<td>NTCP</td>
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<td>14</td>
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<td>13.53</td>
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<td>16</td>
<td>Infrastructure &amp; Maintenance</td>
<td>470.41</td>
<td>470.41</td>
<td>470.41</td>
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**Grand Total**: 7310.01, 5286.93, 2563.71, 7850.64
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<th>S. No</th>
<th>Budget Head</th>
<th>Amount Proposed ( Rs. lakhs )</th>
<th>Amount Approved ( Rs. lakhs )</th>
<th>%</th>
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<td>A3</td>
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<td>A5</td>
<td>RBSK</td>
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<td>A6</td>
<td>Tribal RCH</td>
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<td>0.00</td>
<td>-</td>
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<tr>
<td>A7</td>
<td>PNDT &amp; Sex Ratio</td>
<td>281.55</td>
<td>144.67</td>
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<td>A8</td>
<td>HR</td>
<td>64434.27</td>
<td>52821.46</td>
<td>9.99</td>
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<td>A9</td>
<td>Training</td>
<td>5642.16</td>
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<td>Programme Management</td>
<td>38840.18</td>
<td>22527.59</td>
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<td>Vulnerable groups</td>
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<td><strong>Total Base Flexi Pool</strong></td>
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<td>51128.786</td>
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<td>A13</td>
<td>Sterilisation &amp; IUD Compensation, and NSV Camps</td>
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<td>11972.17</td>
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<td><strong>63100.95</strong></td>
<td><strong>11.94</strong></td>
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<td><strong>Total RCH Flexi Pool</strong></td>
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<td><strong>196164.45</strong></td>
<td><strong>37.10</strong></td>
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</table>

2. MISSION FLEXI POOL

<p>| B1    | ASHA                                            | 47237.79                      | 45637.64                     | 0.00 |
| B2    | Untied Funds                                    | 25078.15                      | 7329.58                      | 1.39 |
| B3    | Roll out of B.sc.                               | 0.00                          | 0.00                        | 0.00 |
| B4    | Hospital Strengthening                          | 22615.16                      | 7113.31                      | 1.35 |
| B5    | New Constructions/ Renovation and Setting up    | 55296.19                      | 15074.08                     | 2.85 |
| B6    | Implementation of Clinical establishment Act     | 623.20                        | 5.46                         | 0.00 |
| B7    | District Action Plans                           | 50.00                         | 50.00                        | 0.01 |
| B8    | Panchayati Raj Initiative                       | 124.40                        | 37.40                        | 0.01 |
| B9    | Mainstreaming of AYUSH                          | 8826.75                       | 8407.53                      | 1.59 |
| B10   | IEC-BCC NHM                                      | 12595.80                      | 9656.76                      | 1.83 |
| B11   | Mobile Medical Units                            | 108.00                        | 45.22                        | 0.01 |
| B12   | Referral Transport                              | 39606.04                      | 29764.01                     | 5.63 |</p>
<table>
<thead>
<tr>
<th>S. No</th>
<th>Budget Head</th>
<th>Amount Proposed ( Rs. lakhs )</th>
<th>Amount Approved ( Rs. lakhs )</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>B13</td>
<td>PPP/ NGOs</td>
<td>16355.64</td>
<td>2235.56</td>
<td>0.42</td>
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<td>B14</td>
<td>Innovations (if any)</td>
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<td>Planning, Implementation and Monitoring</td>
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<td>Procurement</td>
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<td>Drug Ware Houses</td>
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<td>New Initiatives</td>
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<td>NPPCD</td>
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<td>NOHP</td>
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<td>0.00</td>
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<td>B29</td>
<td>NPPCF</td>
<td>485.04</td>
<td>60.30</td>
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<td><strong>Sub Total MFP Flexipool</strong></td>
<td><strong>336108.91</strong></td>
<td><strong>198150.38</strong></td>
<td><strong>37.48</strong></td>
</tr>
</tbody>
</table>

3. IMMUNIZATION

|   | RI strengthening project (Review meeting, Mobility support, Outreach services etc) | 8447.45                     | 7534.17                       | 1.43 |
|   | Salary of Contractual Staffs                                                  | 116.63                      | 111.33                        | 0.02 |
|   | Training under Immunisation                                                   | 334.15                      | 334.15                        | 0.06 |
|   | Cold chain maintenance                                                        | 20.74                       | 19.94                         | 0.00 |
|   | ASHA Incentive                                                               | 6861.19                     | 6861.19                       | 1.30 |
|   | Pulse Polio Operational Cost                                                  | 14874.39                    | 14196.37                      | 2.69 |
| C7 | Civil work for District Vaccine Store (New Construction / Repair and Renovation) | 414.90                      | 387.23                        |     |
|   | **Total RI & PPO costs**                                                      | **31069.45**                | **29444.37**                  | **5.57** |
| D  | NIDDCP                                                                       | 870.95                      | 28.00                         | 0.01 |

4. NUHM
<table>
<thead>
<tr>
<th>S. No</th>
<th>Budget Head</th>
<th>Amount Proposed ( Rs. lakhs )</th>
<th>Amount Approved ( Rs. lakhs )</th>
<th>%</th>
</tr>
</thead>
<tbody>
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<td>1</td>
<td>Planning &amp; Mapping</td>
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<td>Programme Management</td>
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<td>Training &amp; Capacity Building</td>
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<td>Strengthening of Health Services</td>
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<td>Human Resource</td>
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<td>Procurement (drugs and consumable)</td>
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<td>Other services</td>
<td>3,083.70</td>
<td>2702.70</td>
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<td>Regulation &amp; Quality Assurance</td>
<td>-</td>
<td>0.00</td>
<td>0.00</td>
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<td>6</td>
<td>Community Processes</td>
<td>968.69</td>
<td>705.15</td>
<td>0.13</td>
</tr>
<tr>
<td>7</td>
<td>Innovative Actions &amp; PPP</td>
<td>0.00</td>
<td>0.00</td>
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</tr>
<tr>
<td>8</td>
<td>Monitoring &amp; Evaluation</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
<td>9</td>
<td>HR increment calculated @ 5% for above approvals</td>
<td>453.03</td>
<td>0.09</td>
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<tr>
<td></td>
<td><strong>Sub Total NUHM</strong></td>
<td><strong>29160.69</strong></td>
<td><strong>20767.91</strong></td>
<td><strong>3.93</strong></td>
</tr>
<tr>
<td>6A</td>
<td>IDSP</td>
<td>1200.90</td>
<td>983.44</td>
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<tr>
<td>6B</td>
<td>NVBDCP</td>
<td>6623.96</td>
<td>2808.35</td>
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<tr>
<td>6C</td>
<td>NLEP</td>
<td>2183.80</td>
<td>1862.54</td>
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<tr>
<td>6D</td>
<td>RNTCP</td>
<td>19834.46</td>
<td>16551.52</td>
<td>3.13</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL</strong></td>
<td><strong>29843.13</strong></td>
<td><strong>22205.86</strong></td>
<td><strong>4.20</strong></td>
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<tr>
<td>7A</td>
<td>NPCB</td>
<td>7796.36</td>
<td>2481.94</td>
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<tr>
<td>7B</td>
<td>NPCDCS</td>
<td>10189.87</td>
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<tr>
<td>7C</td>
<td>NTCP</td>
<td>3473.60</td>
<td>3001.28</td>
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<td>7D</td>
<td>NPHCE</td>
<td>4452.50</td>
<td>2550.92</td>
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<td>7E</td>
<td>NMHP</td>
<td>2278.74</td>
<td>1481.88</td>
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<td></td>
<td><strong>Sub Total NCDs</strong></td>
<td><strong>28,191.07</strong></td>
<td><strong>14891.02</strong></td>
<td><strong>2.82</strong></td>
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<tr>
<td>8</td>
<td><strong>INFRASTRUCTURE MAINTENANCE</strong></td>
<td></td>
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<tr>
<td></td>
<td>Total Infrastructure Maintenance</td>
<td>47,041.00</td>
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<td></td>
<td><strong>GRAND TOTAL</strong></td>
<td></td>
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</table>
## Uttar Pradesh: Administrative Approval of PIP 2016-17

### Table D - List of Ongoing Activities to be executed out to unspent balance during financial year 2016-17

<table>
<thead>
<tr>
<th>S. No</th>
<th>Budget Head</th>
<th>Name of the activities</th>
<th>Out of Advance Released (A)</th>
<th>Out of Bank Balance (B)</th>
<th>Total amount to be spent in the current year (A+B)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1.</td>
<td>A</td>
<td>RCH-Flexible Pool</td>
<td>3741.92</td>
<td>23897.30</td>
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<td></td>
<td>A.1</td>
<td>MATERNAL HEALTH</td>
<td>95.08</td>
<td>10131.75</td>
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<td></td>
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<td>CHILD HEALTH</td>
<td>52.86</td>
<td>977.76</td>
<td>1030.62</td>
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<td>A.3</td>
<td>FAMILY PLANNING</td>
<td>765.60</td>
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<td>A.4</td>
<td>RKSK</td>
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<td>471.42</td>
<td>471.42</td>
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<tr>
<td></td>
<td>A.5</td>
<td>RBSK</td>
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<td>869.70</td>
<td>869.70</td>
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<td></td>
<td>A.6</td>
<td>Tribal RCH</td>
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<tr>
<td></td>
<td>A.7</td>
<td>PNDT Activities</td>
<td>5.88</td>
<td>52.13</td>
<td>58.01</td>
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<tr>
<td></td>
<td>A.8</td>
<td>INFRASTRUCTURE &amp; HUMAN RESOURCES</td>
<td>46.78</td>
<td>1974.04</td>
<td>2020.82</td>
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<tr>
<td></td>
<td>A.9</td>
<td>TRAINING</td>
<td>1999.70</td>
<td>6784.42</td>
<td>8784.12</td>
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<tr>
<td></td>
<td>A.10</td>
<td>PROGRAMME/NRHM MANAGEMENT COST</td>
<td>776.02</td>
<td>998.20</td>
<td>1774.22</td>
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<td></td>
<td>B</td>
<td>Mission Flexible Pool</td>
<td>77684.53</td>
<td>131710.69</td>
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<tr>
<td></td>
<td>B.1</td>
<td>ASHA</td>
<td>35.30</td>
<td>11153.35</td>
<td>11188.65</td>
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<tr>
<td></td>
<td>B.2</td>
<td>Untied Fund/Annual Maintenance Grants/Corpus Grant to HMS/RKS</td>
<td>0.00</td>
<td>14756.52</td>
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<td></td>
<td>B.3</td>
<td>Rollout of B.Sc (Community Health)</td>
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<td></td>
<td>B.4</td>
<td>Hospital Strengthening</td>
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<td>40153.77</td>
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<td></td>
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<td>New Construction/Renovation and Setting Up</td>
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<td>7687.01</td>
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<td>B.6</td>
<td>Implementation of Clinical Establishment Act</td>
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<td></td>
<td>B.7</td>
<td>District Action Plan (Including Block, Village)</td>
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<td>10.51</td>
</tr>
<tr>
<td>Budget Head</td>
<td>Name of the activities</td>
<td>Out of Advance Released (A)</td>
<td>Out of Bank Balance (B)</td>
<td>Total amount to be spent in the current year (A+B)</td>
<td></td>
</tr>
<tr>
<td>-------------</td>
<td>-------------------------------------------------------------</td>
<td>----------------------------</td>
<td>-------------------------</td>
<td>-----------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>B.8</td>
<td>Panchayti Raj Initiative</td>
<td>7.95</td>
<td>2257.87</td>
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<tr>
<td>B.9</td>
<td>Mainstreaming of AYUSH</td>
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<td>283.35</td>
<td>305.87</td>
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<td>B.10</td>
<td>IEC-BCC NRHM</td>
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<td>7605.74</td>
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<tr>
<td>B.11</td>
<td>Mobile Medical Units (Including recurring expenditures)</td>
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<td>7196.77</td>
<td>7196.77</td>
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<tr>
<td>B.12</td>
<td>Referral Transport (National Ambulance Services)</td>
<td>70.62</td>
<td>11297.72</td>
<td>11368.34</td>
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<tr>
<td>B.13</td>
<td>PPP/NGOs</td>
<td>1253.03</td>
<td>1223.12</td>
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<tr>
<td>B.14</td>
<td>Innovations if any (Kawela Yojna)</td>
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<td>3338.47</td>
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<tr>
<td>B.15</td>
<td>Planning Implementation and Monitoring</td>
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<td>1574.82</td>
<td>7237.82</td>
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<td>B.16</td>
<td>PROCUREMENT</td>
<td>3791.45</td>
<td>21960.18</td>
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<td>B.17</td>
<td>Drugs Warehouses</td>
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<td>97.45</td>
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<tr>
<td>B.18</td>
<td>New Initiatives/ Strategic Interventions</td>
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<td>234.44</td>
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<td>B.19</td>
<td>Health Insurance Scheme</td>
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<td>Research, Studies, Analysis</td>
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<td>B.21</td>
<td>SHSRC &amp; ARC</td>
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<tr>
<td>B.22</td>
<td>Support Services</td>
<td>48.15</td>
<td>162.13</td>
<td>210.28</td>
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<tr>
<td>B.23</td>
<td>Other Expenditures (Power Backup, Convergence etc)</td>
<td>0.00</td>
<td>172.95</td>
<td>172.95</td>
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<tr>
<td>B.24</td>
<td>Collaboration with Medical Colleges and Knowledge partners</td>
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<td>0.00</td>
<td>0.00</td>
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</tr>
<tr>
<td>B.25</td>
<td>National Programme For prevention &amp; Control of Deafness</td>
<td>0.78</td>
<td>318.94</td>
<td>319.72</td>
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<td>National Oral Health Programme</td>
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<td>B.27</td>
<td>National Program for Palliative Care (New Initiatives under NCD)</td>
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<td>176.75</td>
<td>176.75</td>
<td></td>
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<tr>
<td>B.28</td>
<td>Assistance to State for Capacity building (Burns &amp; injury)</td>
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<td>0.00</td>
<td>0.00</td>
<td></td>
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<tr>
<td>B.29</td>
<td>National Programme for Fluorosis</td>
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<td>0.00</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>RI and PPI</td>
<td>12.86</td>
<td>2456.88</td>
<td>2469.74</td>
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</table>
### Uttar Pradesh: Administrative Approval of PIP 2016-17

<table>
<thead>
<tr>
<th>Budget Head</th>
<th>Name of the activities</th>
<th>Out of Advance Released (A)</th>
<th>Out of Bank Balance (B)</th>
<th>Total amount to be spent in the current year (A+B)</th>
</tr>
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<tbody>
<tr>
<td>C.1</td>
<td>Routine Immunization</td>
<td>12.14</td>
<td>1251.27</td>
<td>1263.41</td>
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<td>C.6</td>
<td>Pulse Polio</td>
<td>0.72</td>
<td>971.68</td>
<td>972.40</td>
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<td></td>
<td>IODINE DEFICIENCY DISORDER CONTROL PROGRAMME</td>
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<td>233.93</td>
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<td>B. Communicable Disease Control Flexible Pool</td>
<td>110</td>
<td>7725.68</td>
<td>7835.68</td>
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<tr>
<td>a</td>
<td>National Vector Borne Diseases Control Programme</td>
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<td>3806.50</td>
<td>3857.10</td>
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<td>Revised National Tuberculosis Control Programme</td>
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<td>3659.27</td>
<td>3697.64</td>
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<td>Integrated Disease Surveillance Programme</td>
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<tr>
<td>C. Non Communicable Disease Flexible Pool</td>
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<td>4256.257</td>
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<tr>
<td>a</td>
<td>National Programme For prevention and Control of Cancer, Diabetes, Cardiovascular diseases and stroke (NPCDCS)</td>
<td>0</td>
<td>847.7</td>
<td>847.71</td>
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<tr>
<td>b</td>
<td>National Programme For Control of Blindness</td>
<td>0</td>
<td>1095.3</td>
<td>1095.35</td>
</tr>
<tr>
<td>c</td>
<td>National Mental Health Programme.</td>
<td>75.48</td>
<td>1277.4</td>
<td>1352.92</td>
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<tr>
<td>d</td>
<td>National Programme for the Healthcare of the Elderly</td>
<td>0</td>
<td>824.7</td>
<td>824.68</td>
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<tr>
<td>e</td>
<td>National Tobacco Control Programme.</td>
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<td>211.1</td>
<td>211.08</td>
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<tr>
<td>D. National Urban Health Mission-Flexible Pool</td>
<td>21.42</td>
<td>4678.2</td>
<td>4699.65</td>
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<td>Grand Total</td>
<td>81646.21</td>
<td>174725.03</td>
<td>256371.25</td>
<td></td>
</tr>
</tbody>
</table>

* The State need to provide activity which is not included PIP for the year 2015-16

3. All buildings supported under NHM should prominently carry NHM logo in English/ Hindi & regional languages.

4. All ambulances supported under NHM to be branded as ‘National Ambulance Services’ and adhere to the colour, design and logo as communicated by MOHFW.
5. All MMUs to be branded as ‘National Mobile Medical Unit’ and adhere to the colour, design and logo scheme as communicated by MOHFW. All MMUs should be utilized for IEC purpose.

6. The support under NHM is intended to supplement and support and not to substitute state expenditure. All the support for HR will be to the extent of positions engaged over and above the regular positions

**Release of funds**

7. Action on the following issues would be looked at while considering the release of second tranche of funds:

   - Compliance with conditionalities as prescribed by Department of Expenditure (DoE) under the Ministry of Finance.
   - Physical and financial progress made by the State.
   - Pendency of the State share, if any, based on release of funds by Government of India.
   - Timely submission of Statutory Audit Report for the year 2015-16 and laying of the same before the General Body and intimated to the Ministry.
   - Before the release of funds beyond 75% of BE for the year 2016-17, State needs to provide Utilization Certificates against the grant released to the State up to 2015-16 duly signed by Mission Director, Auditor and State Government.
   - Average annual increase in State Budget by 10%.
   - Funds will be released to States Pool wise instead of scheme wise.
   - State to open accounts of all agencies in PFMS and ensure expenditure capturing.

**Other aspects**

8. State shall ensure submission of quarterly report on physical progress against targets and expenditure including an analysis of adverse variances and corrective action proposed to be taken.

9. The State shall not make any change in allocation among different budget heads without approval of GoI, unless it has been expressly allowed under GoI Instructions.

10. All approvals are subject to the Framework for Implementation of NHM & guidelines issued from time to time & the observations made in this document.

11. State should adhere to the clauses mentioned in the MOU signed and achieve the agreed performance benchmarks.
12. The accounts of State/ grantee institution/ organization shall be open to inspection by the sanctioning authority and audit by the Comptroller& Auditor General of India under the provisions of CAG (DPC) Act 1971 and internal audit by Principal Accounts Officer of the Ministry of Health & Family Welfare.

13. State shall ensure submission of details of unspent balance indicating inter alia, funds released in advance & funds available under State Health Societies. The State shall also intimate the interest amount earned on unspent balance which includes the interest earned on the funds. This amount can be spent only against approved activities.

Yours faithfully,

(Limatula Yaden)

Director -NHM
KEY CONDITIONALITIES AND INCENTIVES

1. The following conditionalities shall be adhered to by the States and are to be treated as non-negotiable:

1.1 HR integration

(i) States should integrate all service delivery HR (both regular and contractual from NHM and other sources) using health systems approach and ensure postings in health facilities only as per IPHS and caseloads. The facility having HR as per IPHS would be required to then provide the full range of services as per IPHS and optimize utilization of HR. In case it is not possible to cater to the HR requirements of all levels of facilities as per IPHS in the first year, it can be phased as per the requirement of the State. In the first phase, district hospitals and CHCs could be prioritized. This would help in strengthening the district hospitals and CHCs as the hub of secondary health care services and decrease the patient load in tertiary centers. However only additional HR posted in the facilities should be shifted. In SC, PHC, CHC of peripheral and far flung difficult/tribal areas, it is more important to provide HR. In no case HR from such facilities should be shifted to DH unless peripheral facilities are saturated. NHM aims to strengthen health systems by supplementing and not to substitute regular HR. State should fill in all regular posts and only additional requirements for gap filling (if required) is to be proposed under NHM. Where ever required, state should also increase the sanctioned posts of regular staff. Rational deployment of all available staff should be a priority.

1.2 Increments

(ii) This year all increments are being calculated on the base compensation @5%. The level of increment to be given across the HR is to be decided between 0-10% by the SHS based on performance appraisal and rationalization requirement. However, State should ensure that total amount given as increment do not exceed the average amount approved in the RoP. HR/Staff who have completed one year will be eligible for increment.

1.3 Recruitment

(iii) Quality of HR should be ensured through merit and appropriate skill based competency test, through transparent recruitment process. Residence at place of posting should be
ensured. Comprehensive Baseline Skills Assessment must be part of the recruitment/confirmation test for all frontline workers especially ANMs, SNs and LTs. State should utilize empanelled agencies for fair and transparent recruitment as per GoI instructions.

1.4 Stability of tenure

(iv) State should ensure stability of tenure of at least three years for key posts at State and district level. A full time Mission Director is a prerequisite.

1.5 HR on deputation:

(v) Ideally finance and personnel involved in implementation of regulations should be from regular cadres on deputation.

(vi) A regular full time Director/ Joint Director/ Deputy Director (Finance) (depending on resource envelope of State), from the State Finance Services not holding any additional charge outside the Health Department must be put in place, if not already done, considering the quantum of funds under NRHM and the need for financial discipline and diligence.

(vii) State should integrate activities like Training, monitoring, review meetings etc. to the extent possible to optimize resources especially time of service delivery personnel.

1.6 Supportive Supervision and Monitoring

(viii) State should identify Nodal persons for each programme so that proper monitoring of programs could be carried out regularly. To the extent possible all the components of the programme should be with the programme officer

(ix) All LHV positions should be filled on a priority basis. The block PHN and DPHN should be part of block and district programme management unit respectively. Similarly a Nursing nodal person should be a part of SPMU. Nursing should be made an integral part of all planning, implementation and monitoring activities.

1.7 Finance
(x) State to convey the district approvals to the districts within 15 days of receiving the State RoP approvals. High priority districts must receive at least 30% more budget per capita compared to the other districts. State should share the district wise total approvals conveyed with MoHFW.

(xi) The state must ensure due diligence in expenditure and observe, in letter and spirit, all rules, regulations, and procedures to maintain financial discipline and integrity particularly with regard to procurement; competitive bidding must be ensured and only need-based procurement should take place.

(xii) All procurement to be based on competitive and transparent bidding process.

(xiii) The unit cost/rate approved for all activities including procurement, printing etc are indicative for purpose of estimation. However actuals are subject to transparent, and open bidding process as per the relevant and extant purchase rules.

(xiv) Third party monitoring of works and certification of their completion through reputed institutions to be introduced to ensure quality. Also Information on all ongoing works to be displayed on the NRHM website.

(xv) State to ensure regular meetings of state and district health missions/ societies. The performance of SHS/DHS along with financials and audit report must be tabled in governing body meetings.

(xvi) As per the Framework for Implementation of NHM, 2012-2017, upto 5.5 % of the total Annual State Work Plan for that year could be budgeted for programme management; while the ceiling could go up to 10% for small states and UTs. The M & E budget is to be within 1% of annual work plan.

(xvii) The activities to be included in Programme management and M & E heads are following:

1. Managerial HR at State, regional, district and block levels, Hospital managers, Finance and accounts personnel including accountants, Data Entry Operators, ASHA resources centre, SHSRC HR etc.

2. Office cost/expenses rent, electricity, housekeeping, support staff etc. Office equipment including computers, UPS, photocopiers, Printers, laptops, software, and stationery, contingency, logistics etc.

3. Review/orientation meetings, supervision/mobility cost across programmes.
4. HMIS, MCTS, e-monitoring system, monitoring software, all budget items under M & E head, CUG connections and monthly charges

5. Entire Programme management of Part A has been approved under A.10 as a lump sum except the salaries. No expenditure under other heads to be made on above mentioned/similar activities.

1.8 Infrastructure

(xviii) The approval for new infrastructure is subject to the condition that States will use energy efficient lighting and appliances.

(xix) State/UTs to submit Non Duplication Certificate as per prescribed format

1.9 Equipment

(xx) State/UTs to submit Non Duplication Certificate as per prescribed format

MANDATORY DISCLOSURES

2. The State must ensure mandatory disclosures on the state NHM website of the following and act on the information:

- Facility wise deployment of all HR including contractual staff engaged under NHM with name and designation. This information should also be uploaded on HMIS

- Facility wise service delivery data particularly on OPD, IPD, Institutional Delivery, C-section, Major and Minor surgeries etc. on HMIS

- MMUs- total number of MMUs, monthly schedule format and service delivery data on a monthly basis capturing information on all fields mentioned in the specified format

- Patient Transport ambulances and emergency response ambulances- total number of vehicles, types of vehicle, registration number of vehicles, service delivery data including clients served and kilometer logged on a monthly basis.

- All procurements- including details of equipment procured (as per directions of CIC which have been communicated to the States by this Ministry vide letter No 'No.Z.28015/162/2011-H' dated 28th November 2011.) in specified format
• Buildings under construction/renovation – total number, name of the facility/hospital along with costs, executing agency and execution charges (if any), date of start & expected date of completion in specified format.

• Supportive supervision plan and reports shall be part of mandatory disclosures. Block-wise supervisory plan and reports should be uploaded on the website.

• NGOs/PPP funded under NHM would be treated as 'public authority' and will fall under the ambit of the RTI Act 2005 under Section 2(h). Further, details of funds allotted /released to NGOs/PPP to be uploaded on website.

• Facility wise list of package of services being provided through the U-PHCs & U-CHCs

3. State/UT to ensure that JSY payments are made through Direct Benefit Transfer (DBT) mechanism through AADHAAR enabled payment system, through NEFT under Core Banking Solution or through A/C payee check (Cash payment or bearer cheque payment is categorically disallowed across the States unless specifically agreed in case of certain areas in hilly States and NE States where presence of bank network is inadequate).

4. Timely updation of MCTS and HMIS data including facility wise reporting

5. Line listing of high risk pregnant women, including extremely anaemic pregnant women and Low Birth Weight (LBW) babies.
<table>
<thead>
<tr>
<th>S. No</th>
<th>Conditionality</th>
<th>Description</th>
<th>Source for verification &amp; indicators.</th>
<th>Incentive/ Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Reduction in IMR</td>
<td>Percentage decrease over last year</td>
<td>SRS</td>
<td>Maximum incentive of 5% - \textbf{Weightage=5}</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
<td>• If decrease less than 5% - No incentive</td>
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<td></td>
<td>• If decrease between 5%-7% - Incentive of 3%</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>• If decrease greater than 7% - Incentive of 5%</td>
</tr>
<tr>
<td>2</td>
<td>Reduction in MMR</td>
<td>Percentage decrease over last year (only for 16 states for which MMR is available)</td>
<td>SRS</td>
<td>Maximum incentive of 5% - \textbf{Weightage=5}</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• If decrease less than 5% - No incentive</td>
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<td></td>
<td></td>
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<td></td>
<td>• If decrease between 5%-10% - Incentive of 3%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• If decrease greater than 10% - Incentive of 5%</td>
</tr>
<tr>
<td>3</td>
<td>Full Immunization Coverage</td>
<td>During the current FY, as on November 30\textsuperscript{th} – infants fully immunized vs. estimated beneficiaries</td>
<td>MCTS (For EAG/NE States)</td>
<td>Maximum penalty and incentive of 5%. \textbf{Weightage = 5}/(-5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• If coverage less than 35% - Penalty of 5%</td>
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<td></td>
<td>• If coverage between 35%-45% - No penalty</td>
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<td></td>
<td></td>
<td>• For coverage above 45% up to 100% - Incentive up to maximum of 5%, calculated as:</td>
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<td></td>
<td>\textbf{Coverage above 50%} \quad 10</td>
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<td></td>
<td></td>
<td></td>
<td>i.e. if coverage is 65%, then incentive of 1.5%; and if coverage is 87%. Then incentive is 3.7%</td>
</tr>
</tbody>
</table>

<p>| MCTS (For Other States) | Maximum penalty and incentive of 5%. \textbf{Weightage = 5}/(-5) | • If coverage less than 40% - Penalty of 5% |
|                        |                                                                      | • If coverage between 40%-50% - No penalty |
|                        |                                                                      | • For coverage above 50% up to 100% - Incentive up to maximum of 5%, calculated as: |
|                        |                                                                      | \textbf{Coverage above 50%} \quad 10 |
|                        |                                                                      | i.e. if coverage is 65%, then incentive of 1.5%; and if coverage is 87%. Then incentive is 3.7% |</p>
<table>
<thead>
<tr>
<th>S. No</th>
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<th>Incentive/ Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Functionality of FRUs/ CEmOC facilities (excluding stand-alone Medical Colleges)</td>
<td>Adequacy of “functional” FRUs (conducting C-sections)</td>
<td>HMIS Facilities conducting C-sections: 1. For Large States  • Avg. 10 CS/month at DH level  • Avg. 5 CS/month at SDH and CHC level 2. For NE states (excl. Assam), Hilly States (Uttarakhand, HP, J&amp;K), and UTs (excl. Delhi)  • Avg. 6 CS/month at DH level  • Avg. 3 CS/month at SDH and CHC level</td>
<td>Maximum penalty and incentive of 5%. <em>Weightage = 5/(-) 5</em> Compared to required number of FRUs: 1. On a state wide basis  • If 50%-75% FRUs “functional” – 3% penalty  • If less than 50% FRUs “functional” – 5% penalty 2. On a State-wide basis, if more than 90% FRUs “functional”, and in each HPD:  • If 75% - 90% FRUs “functional” – 3% incentive  • If more than 90% FRUs “functional” – 5% incentive States which have earned incentive /no penalty for FRU conditionality must fulfill HPD criteria to earn incentive this year #</td>
</tr>
<tr>
<td>5</td>
<td>Quality Certification</td>
<td>Percentage District hospitals and CHCs quality certified by State level body in rural and urban areas.</td>
<td>NHSRC Report</td>
<td>Maximum incentive of 5%. <em>Weightage = 5</em>  • 3% incentive if at least 20% of DHs certified  • 2% incentive if at least 10% of CHCs/ Block PHCs certified</td>
</tr>
<tr>
<td>6</td>
<td>Governance: Quality of services and functionality of public health facilities</td>
<td>Star rating of facilities based on the extent to which CHCs meet the benchmark Five star indicator criteria:</td>
<td>HMIS Report (both rural and urban)</td>
<td>Maximum Penalty / incentive of 5% <em>Weightage = 5/(-) 5</em>  • To avoid penalty, minimum 50% of CHCs to have 3 or more star rating  • Incentive of 3% if more than 75% of CHCs have 3 or more star rating  • Incentive of 5% if more than 90% of CHCs have 3 or more star rating#</td>
</tr>
<tr>
<td>S. No</td>
<td>Conditionality</td>
<td>Description</td>
<td>Source for verification &amp; indicators.</td>
<td>Incentive/ Penalty</td>
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</tbody>
</table>
| 7     | Implementation of Free Drugs Service Initiative | Free drugs to be implemented as per GOI mandate | District report certified by State Nodal Officers. Assessments made by NHSRC teams and MCTFC. In case no reports are available, data from MCTFC calls to PWs would be taken as proxy data | Maximum incentive of 5%. Weightage = 5  
- = or >90% institutions effectively implementing free drugs 5%  
- 60% to 90% institutions effectively implementing free drugs 3%  
- Less than 60% institutions implementing free drugs  No incentive  
(Based on survey/MCTFC calls) |
| 8     | Implementation of Free Diagnostic Services Initiative | Free diagnostics to be implemented as per GOI mandate | District report certified by State Nodal Officers. Assessments made by NHSRC teams and MCTFC. In case no reports are available, data from MCTFC calls to PWs would be taken as proxy data | Maximum incentive of 5%. Weightage = 5  
- 90% and above institutions effectively implementing free diagnostics 5%  
- 60% to 90% institutions effectively implementing free diagnostic services – 3%  
- Less than 60% institutions implementing free diagnostic services – No incentive  
(Based on survey/MCTFC calls) |
| 9     | Implementation of integrated HRIS and HMIS | State which has integrated HRIS (for regular and contractual HR) | HRIS generated summary and pay roll HMIS report | Maximum incentive/penalty of 10% Weightage = 10/ (-) 10  
- 5% penalty if HRIS not implemented fully  
- 5% penalty if HMIS data in annual format not
<table>
<thead>
<tr>
<th>S. No</th>
<th>Conditionality</th>
<th>Description</th>
<th>Source for verification &amp; indicators.</th>
<th>Incentive/ Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>updated annual formats of HMIS</td>
<td>with updated information and from which pay slips are generated every month. Also updated HR and other information in annual HMIS which is in sync with HRIS</td>
<td>updated and is not in sync with HRIS • 5% incentive if HRIS fully implemented • 5% incentive if HMIS annual format is updated and is in sync with HRIS</td>
<td></td>
</tr>
</tbody>
</table>

Note: 1) EAG states would be evaluated as a separate category.

# Incentive only till the highest slab is achieved.

a) State should ensure expenditure upto 15% by June 2016 and another 30% by September 2016 of their approved budget under each pool in the FY 2016-17.

b) Expand the Governing Body (GB) and the Executive Committee of the State Health Mission/Society to include Minister(s) in charge of Urban Development and Housing, and Secretaries in charge of the Urban Development and Housing departments.

c) Urban Health planning cell should be established in the State Health Society (SPMU)\(^1\). However, the thematic areas will be appropriately strengthened at the State Health Society and District Health Societies to support both NUHM and NRHM. Parallel structures shall not be created for NRHM and NUHM.

d) All services under National Health Programme/Schemes should be provided free of cost.

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\(^1\) Not applicable in NE States (except Assam) and UTs (except Bihar)
e) Investments in U-PHCs must lead to improved service off take at these facilities, which should be established through a baseline survey & regular reporting through HMIS.

f) The UPHCs should provide the whole range of services enumerated in the NUHM Implementation Framework.
ROAD MAP FOR PRIORITY ACTION

NHM must take a ‘systems approach’ to Health. It is imperative that States take a holistic view and work towards putting in place policies and systems in several strategic areas so that there are optimal returns on investments made under NHM. For effective outcomes, a sector wide implementation plan would be essential; states would be expected to prepare such a plan with effect from next year. Some of the key strategic areas in this regard are outlined below for urgent and accelerated action on the part of the State:

<table>
<thead>
<tr>
<th>S. NO.</th>
<th>STRATEGIC AREAS</th>
<th>ISSUES THAT NEED TO BE ADDRESSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBLIC HEALTH PLANNING &amp; FINANCING</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Planning and financing</td>
<td>Mapping of facilities, differential planning for High priority districts and blocks with poor health indicators; resources not to be spread too thin / targeted investments; at least 10% annual increase in state health budget; addressing verticality in health programmes and planning for integrated delivery of full spectrum of health services; emphasis on quality assurance at least in delivery points.</td>
</tr>
<tr>
<td>2.</td>
<td>Management strengthening</td>
<td>Full time Mission Director for NRHM and a full-time Director/ Jt. Director/ Dy. Director Finance, not holding any additional responsibility outside the health department; fully staffed programme management support units at state, district and block levels; selection of staff to key positions such as head of health at the district and block level and facility-in charge to be based on performance; stability of tenure to be assured; training of key health functionaries in planning and use of data. Strong integration with Health &amp; FW and AYUSH directorates strengthened DPMUs particularly in HPDs.</td>
</tr>
<tr>
<td>3.</td>
<td>Developing a strong Public Health focus</td>
<td>Separate public health cadre, induction training for all key cadres; public health training for doctors working in health administrative and programme management positions; strengthening of public health nursing cadre, enactment of Public Health Act.</td>
</tr>
</tbody>
</table>

HUMAN RESOURCES
<table>
<thead>
<tr>
<th>S. NO.</th>
<th>STRATEGIC AREAS</th>
<th>ISSUES THAT NEED TO BE ADDRESSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>HR policies for doctors, nurses paramedical staff and programme management staff</td>
<td>Minimizing regular vacancies; expeditious recruitment (eg. taking recruitment of MOs out of Public Service Commission purview and having campus recruitments/walk in interview); Recruitment of paramedics including ANM, Nurses, LTs etc only after through competency assessment; merit – based public service oriented and transparent selection; opportunities for career progression and professional development; rational and equitable deployment; effective skills utilization; stability of tenure; sustainability of contractual human resources under RCH / NRHM, performance measurement and performance linked payments.</td>
</tr>
<tr>
<td>5.</td>
<td>HR Accountability</td>
<td>Facility based monitoring; incentives for sub-centre team of ANMs, ASHAs and AWWs, the health service providers both individually and for team, for facilities based on functioning; performance appraisal against benchmarks; renewal of contracts/promotions based on performance; incentives for performance above benchmark; incentives for difficult areas, performance based incentives.</td>
</tr>
<tr>
<td>6.</td>
<td>Medical, Nursing and Paramedical Education (new institutions and upgradation of existing ones)</td>
<td>Planning for enhanced supply of doctors, nurses, ANMs, and paramedical staff; mandatory rural posting after MBBS and PG education; expansion of tertiary health care; use of medical colleges as resource centres for national health programmes; strengthening/revamping of ANM/GNM training centres and paramedical institutions; re-structuring of pre service education; developing a highly skilled and specialized nursing cadre, ensuring availability and use of skill labs, Use of tele-education</td>
</tr>
<tr>
<td>7.</td>
<td>Training and capacity building</td>
<td>Strengthening of State Institute of Health &amp; Family Welfare (SIHFW)/ District Training Centres (DTCs); quality assurance; availability of centralized training log; monitoring of post training outcomes; expanding training capacity through partnerships with NGOs/institutions; up scaling of multi skilling initiatives, accreditation of training and trainers</td>
</tr>
</tbody>
</table>

STRENGTHENING SERVICES
<table>
<thead>
<tr>
<th>S. NO.</th>
<th>STRATEGIC AREAS</th>
<th>ISSUES THAT NEED TO BE ADDRESSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.</td>
<td>Policies on drugs, procurement system and logistics management</td>
<td>Articulation of policy on entitlements on free drugs for out / in patients; rational prescriptions and use of drugs; timely procurement of drugs and consumables; smooth distribution to facilities from the district hospital to the sub centre; uninterrupted availability to patients; minimization of out of pocket expenses; quality assurance; prescription audits; essential drug lists (EDL) in public domain; computerized drugs and logistics MIS system; setting up dedicated corporation on the lines of eg: TNMSC/RMSC etc.</td>
</tr>
<tr>
<td>9.</td>
<td>Equipments</td>
<td>Availability of essential functional equipments in all facilities; regular needs assessment; timely indenting and procurement; identification of unused/ faulty equipment; regular maintenance by competitive and transparent bidding processes. RFP for adopting biomedical equipment maintenance may be used.</td>
</tr>
<tr>
<td>10.</td>
<td>Ambulance Services and Referral Transport</td>
<td>Universal availability of GPS fitted ambulances; reliable, assured free transport for pregnant women and newborn/ infants; clear policy articulation on entitlements both for mother and newborn; establishing control rooms with toll free 102/108 for timely response and provision of services; drop back facility; a prudent mix of basic level ambulances and emergency response vehicles</td>
</tr>
<tr>
<td>11.</td>
<td>New infrastructure and maintenance of buildings; sanitation, water, electricity, laundry, kitchen, facilities for attendants</td>
<td>New infrastructure, especially in backward areas; 24x7 maintenance and round the clock plumbing, electrical, carpentry services; power backup; cleanliness and sanitation; upkeep of toilets; proper disposal of bio medical waste; drinking water; water in toilets; electricity; clean linen; kitchens, facilities for attendants</td>
</tr>
<tr>
<td>12.</td>
<td>Diagnostics</td>
<td>Rational prescription of diagnostic tests; reliable and affordable availability to patients; partnerships with private service providers as per Free Diagnostics Guidelines; prescription audits, free for pregnant women and sick neonates, free essential diagnostics.</td>
</tr>
<tr>
<td></td>
<td>COMMUNITY INVOLVEMENT</td>
<td>Feedback from patients; expeditious grievance redressal; analysis of feedback for corrective action, toll free help line, clear SOP and protocols to address grievances.</td>
</tr>
<tr>
<td>S. NO.</td>
<td>STRATEGIC AREAS</td>
<td>ISSUES THAT NEED TO BE ADDRESSED</td>
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<tr>
<td>14.</td>
<td>Community participation</td>
<td>Active community participation; empowered PRIs; strong VHSNCs; social audit; effective Village Health &amp; Nutrition Days (VHNDs); strengthening of ASHAs; policies to encourage contributions from public/ community</td>
</tr>
<tr>
<td>15.</td>
<td>IEC</td>
<td>Comprehensive communication strategy with a strong Behavior Change Communication(BCC) component in the IEC strategy; dissemination in villages/ urban slums/ peri urban areas , using mobile networks for BCC/IEC</td>
</tr>
<tr>
<td>16.</td>
<td>Inter sectoral convergence</td>
<td>Effective coordination with key departments to address health determinants viz. water, sanitation, hygiene, nutrition, infant and young child feeding, gender, education, woman empowerment.</td>
</tr>
<tr>
<td>17.</td>
<td>NGO/ Civil Society</td>
<td>Mechanisms for consultation with civil society; civil society to be part of active communitisation process; involvement of NGOs in filling service delivery gaps; active community monitoring and action.</td>
</tr>
<tr>
<td>18.</td>
<td>Private Public Partnership (PPP)</td>
<td>Partnership with private service providers to supplement governmental efforts in underserved and vulnerable areas for deliveries, family planning services and diagnostics</td>
</tr>
<tr>
<td>19.</td>
<td>Regulation of services in the private sector</td>
<td>Implementation of Clinical Establishment Act; quality of services, e.g. safe abortion services; adherence to protocols; checking unqualified service providers; quality of vaccines and vaccinators, enforcement of PC-PNDT Act</td>
</tr>
<tr>
<td>20.</td>
<td>Strengthening data capturing, validity / triangulation</td>
<td>100% registration of births and deaths under Civil Registration System (CRS); capturing of births in private institutions; data collection on key performance indicators; rationalizing HMIS indicators; reliability of health data / data triangulation mechanisms</td>
</tr>
<tr>
<td>21.</td>
<td>Supportive Supervision</td>
<td>Effective supervision of field activities/ performance; handholding; strengthening of Lady Health Visitors (LHVs), District Public Health Nurses (DPHNs), Multi Purpose Health Supervisors (MPHS) etc.</td>
</tr>
<tr>
<td>S. NO.</td>
<td>STRATEGIC AREAS</td>
<td>ISSUES THAT NEED TO BE ADDRESSED</td>
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<tr>
<td>22.</td>
<td>Monitoring and Review</td>
<td>Regular meetings of State/ District Health Mission/ Society for periodic review and future road map; clear agenda and follow up action; Regular, focused reviews at different levels viz. Union Minister/ Chief Minister/ Health Minister/ Health Secretary/ Mission Director/ District Health Society headed by Collector/ Officers at Block/ PHC level; use of the HMIS/ MCTS data for reviews and corrective action; concurrent evaluation</td>
</tr>
<tr>
<td>23.</td>
<td>Quality assurance</td>
<td>Quality assurance at all levels of service delivery; quality certification/ accreditation of facilities and services; institutionalized quality management systems, achieving Quality Assurance standards for at least 20% of DH&amp;CHCs, adherence to QA guidelines</td>
</tr>
<tr>
<td>24.</td>
<td>Surveillance</td>
<td>Epidemiological surveillance; maternal and infant death review at facility level and verbal autopsy at community level to identify causes of death for corrective action; tracking of services to pregnant women and children under MCTS</td>
</tr>
<tr>
<td>25.</td>
<td>Leveraging technology</td>
<td>Use of GIS maps and databases for planning and monitoring; GPS for tracking ambulances and mobile health units; mobile phones/tablets for real time data entry; video conferencing for regular reviews; closed user group mobile phone facility for health staff; telemedicine and tele education; use of ICT technologies in E- Governance; development of Human Resource Information System (HRIS) and Hospital Management Information System endless opportunities-sky is the limit!</td>
</tr>
</tbody>
</table>
ROADMAP FOR ACTION UNDER NUHM

This section outlines the broad overview of some of the key activities that are to be undertaken under NUHM as well as clearly defines the priority activities that have to be focused on in the current financial year.

I. Broad Overview of Activities to be undertaken under NUHM

SERVICE DELIVERY INFRASTRUCTURE:
- **Urban - Primary Health Centre (U-PHC):** Functional for approximately 50,000 population, the U-PHC would be located within or 500 metres of the slum. The working hours of the U-PHC would be from 12.00 noon to 8.00 pm. The services provided by U-PHC would include OPD (consultation), basic lab diagnosis, drug /contraceptive dispensing and delivery of Reproductive & Child Health (RCH) services, as well as preventive and promotive aspects of all communicable and non-communicable diseases.
- **Mobile PHCs:** Could be utilized to promote services to the homeless, migrant workers etc.
- **Urban-Community Health Centre (U-CHC) and Referral Hospitals:** 30-50 bedded U-CHC providing inpatient care in cities with population of above five lakhs, wherever required and 75-100 bedded U-CHC facilities in metros. Existing maternity homes, hospitals managed by the state government/ULB could be upgraded as U-CHCs.
- In towns/ cities, where some sorts of public health institutions like Urban Family Welfare Centres, Urban Health Posts, Maternity Homes etc. run by State Govt/ ULBs exist, such facilities will be efforts will be made to strengthened as U-PHC and U-CHC.

OUTREACH:
- Outreach services will be provided through Female Health Workers (FHWs)/ Auxiliary Nursing Midwives (ANMs) headquartered at the UPHCs.
- ANMs would provide preventive and promotive health care services to households through routine outreach sessions. The special outreach sessions would be conducted for the homeless, migrant workers, street children etc.
- Existing AWCs, infrastructure created under JNNURM and RAY should be utilised for holding of outreach sessions.
- Various services to be delivered at the community level, UPHC and UCHC levels have been elaborated in Table 17-1 of the NUHM Implementation Framework.
- Services under RBSK should also be extended to slum areas.

COMMUNITY MOBILISATION:
- **Mahila Arogya Samiti (MAS)** – will act as community based peer education group in slums, involved in community mobilization, monitoring and referral with focus on preventive and promotive care, facilitating access to identified facilities and management of grants received.
- Existing community based institutions created under different programme may be utilized for above purpose.
ASHA - One frontline community worker (ASHA) would serve as an effective and demand-generating link between the health facility and the urban slum population. ASHA would have a well-defined service area of about 1000-2,500 beneficiaries (between 200-500 households) based on spatial consideration. ASHAs will be paid performance based incentive at the same rate as under NRHM. However, the states would have the flexibility to either engage ASHA or entrust her responsibilities to MAS. In that case, the incentives accruing to ASHA would accrue to the MAS.

PUBLIC PRIVATE PARTNERSHIPS:

- In view of presence of large number of private (for-profit and not-for-profit) health service providers in urban areas, public-private partnerships particularly with not-for-profit service providers will be encouraged. However, clear and monitorable Service Level Agreements (SLAs) need to be developed for engagement with Private Sector. The performance of the private service providers should be regularly and strictly monitored.

ROLE OF URBAN LOCAL BODIES

- The NUHM envisages active participation of the ULBs in the planning and management of the urban health programmes.

FUNDING/BUDGET MECHANISM

- Funds will flow to the City Urban Health Society/ District Health Society as the case may be, through the State Government / State Health Society. The SHS/DHS will have to maintain separate accounts for NUHM. State Health Society (SHS) will sign a MoU with the City Health Mission/ Society to ensure that the funds are utilized only for the activities under NUHM.

CONVERGENCE:

- Inter-sectoral convergence with Departments of Urban Development, Housing and Urban Poverty Alleviation, Women & Child Development, School Education, Minority Affairs, Labour will be established through city level Urban Health Committees headed by the Municipal Commissioner/Deputy Commissioner/District Collector/ SDM, as the case may be.

- States are also encouraged to explore possibility of engaging the Railways, ESIC and corporate sector (through Corporate Social Responsibility i.e. CSR) for optimising utilization of resources & service delivery.

- Intra-sectoral convergence is envisaged to be established through integrated planning for implementation of various health programmes like RCH, RNTCP, NVBDCP, NPCB, National Mental Health Programme, National Programme for Health Care of the Elderly, etc. at the city level. However, support for various interventions under NCDs &
Communicable diseases, RMNCH+A should be arranged separately under the respective National health Programmes.

OTHER ASPECTS:
- All the U-PHCs & U-CHCs supported under NUHM will be covered under MCTS, HMIS, NIKSHAY, etc. Use of Information Technology would be encouraged for hospital management, adoption of EHR, etc.
<table>
<thead>
<tr>
<th>S. No</th>
<th>Budget Head</th>
<th>Amount Proposed (Rs. lakhs)</th>
<th>Amount Approved (Rs. lakhs)</th>
<th>%</th>
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<td>1. RCH FLEXI POOL</td>
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<td>Maternal Health</td>
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<td>Sterilisation &amp; IUD Compensation, and NSV Camps</td>
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<td>District Action Plans</td>
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<td>Amount Proposed (Rs. lakhs)</td>
<td>Amount Approved (Rs. lakhs)</td>
<td>%</td>
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</table>

3. IMMUNIZATION

| C1    | RI strengthening project (Review meeting, Mobility support, Outreach services etc) | 8447.45                    | 7534.17                     | 1.43|
| C2    | Salary of Contractual Staffs                                                  | 116.63                     | 111.33                      | 0.02|
| C3    | Training under Immunisation                                                   | 334.15                     | 334.15                      | 0.06|
| C4    | Cold chain maintenance                                                        | 20.74                      | 19.94                       | 0.00|
| C5    | ASHA Incentive                                                               | 6861.19                    | 6861.19                     | 1.30|
| C6    | Pulse Polio Operational Cost                                                 | 14874.39                   | 14196.37                    | 2.69|
| C7    | Civil work for District Vaccine Store (New Construction / Repair and Renovation) | 414.90                     | 387.23                      |
|       | **Total RI & PPO costs**                                                      | **31069.45**               | **29444.37**                | **5.57** |

4. NUHM

<p>| 1     | Planning &amp; Mapping                                                           | 1234.41                    | 754.81                      | 0.14|
| 2     | Programme Management                                                         | 15                         | 11.25                       | 0.00|
| 3     | Training &amp; Capacity Building                                                 | 26942.59                   | 18843.67                    | 3.56|
| 4     | Strengthening of Health Services                                             | 14331.05                   | 10679.46                    | 2.02|
| 4.a   | Human Resource                                                               | 1399.84                    | 1101.77                     | 0.21|
| 4.b   | Infrastructure                                                               | 690.50                     | 363.75                      | 0.07|
| 4.d   | Procurement (drugs and consumable)                                           | 7437.50                    | 3996.00                     | 0.76|
| 4.e   | Other services                                                               | 3,083.70                   | 2702.70                     | 0.51|
| 5     | Regulation &amp; Quality Assurance                                               | -                          | 0.00                        |
| 6     | Community Processes                                                          | 968.69                     | 705.15                      | 0.13|
| 7     | Innovative Actions &amp; PPP                                                     | 0.00                       | 0.00                        | 0.00|
| 8     | Monitoring &amp; Evaluation                                                      | 0.00                       | 0.00                        | 0.00|</p>
<table>
<thead>
<tr>
<th>S. No</th>
<th>Budget Head</th>
<th>Amount Proposed ( Rs. lakhs )</th>
<th>Amount Approved ( Rs. lakhs )</th>
<th>%</th>
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<td>9</td>
<td>HR increment calculated @ 5% for above approvals</td>
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<td><strong>INFRASTRUCTURE MAINTENANCE</strong></td>
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<td>Total Infrastructure Maintenance</td>
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<td><strong>GRAND TOTAL</strong></td>
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<td><strong>5,28,692.99</strong></td>
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## RCH Flexi pool

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<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In Lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>A</td>
<td>REPRODUCTIVE AND CHILD HEALTH</td>
<td>2,28,715.92</td>
<td>1,96,164.45</td>
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<td>MATERNAL HEALTH</td>
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<td>A.1.1</td>
<td>Operationalise Facilities (Any cost other than infrastructure, HR, Training, Procurement, Monitoring etc.) may include cost of mapping, planning-identifying priority facilities, etc)</td>
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<td>A.1.1.1</td>
<td>Operationalise Safe abortion services (including MVA/EVA and medical abortion) at health facilities</td>
<td>1</td>
<td>9.00</td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10 for Regional/Divisional Level CAC orientation workshops for Divisional/District level officers and District Data Manager for ensuring quality of reporting by public and private sites. Rs 6.0 lakhs approved last year is also approved for re-validation. The approval is subject to: a) This orientation/sensitization should also include guidance to ensuring access to safe abortion and addressing gender bias sex selection.</td>
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<table>
<thead>
<tr>
<th>FM R code</th>
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<td>Operationalise RTI/STI services at health facilities</td>
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<td>b) Ipas can be roped in as a partner.</td>
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<td>A.1.2</td>
<td>Integrated outreach RCH services (state should focus on facility based services and outreach camps to be restricted only to areas without functional health facilities)</td>
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<td>51,884.42</td>
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<td>A.1.3.1</td>
<td>Home deliveries</td>
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<td>43.36</td>
<td>43.36</td>
<td>Rs. 43.36 lakhs approved for 8672 home delivery cases @ Rs. 500 per case.</td>
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<td>A.1.3.2.a</td>
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<td>1,400.00</td>
<td>24,0828.9</td>
<td>33,716.05</td>
<td>33,547.74</td>
<td>Rs. 33547.74 lakhs approved for 2396267 rural institutional deliveries @Rs. 1400 per case.</td>
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<td>A.1.3.2.b</td>
<td>Urban</td>
<td>1,000.00</td>
<td>2,83039</td>
<td>2,830.39</td>
<td>2,609.72</td>
<td>Rs. 2609.72 lakhs approved for 260972 urban institutional deliveries @Rs. 1000 per case.</td>
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<td>C-sections</td>
<td>8,000.00</td>
<td>3,364</td>
<td>269.12</td>
<td>269.12</td>
<td>Rs. 269.12 lakhs approved for 3364 C-Section cases @ upto Rs. 8000 per case.</td>
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<td>Administrative Expenses</td>
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<td>2,457.87</td>
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<td>Rs. 2434.70 lakhs approved for administrative expenses.</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<td>Amount Proposed (Rs. Lakhs)</td>
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<td>Incentives to ASHA</td>
<td>600.00</td>
<td>20,9460</td>
<td>12,567.63</td>
<td>12,224.15</td>
<td>Rs. 12224.15 lakhs approved for 2037358 rural institutional deliveries facilitated by ASHAs @ Rs. 600 per case.</td>
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<td>Maternal Death Review (both in institutions and community)</td>
<td>600.00</td>
<td>8,770</td>
<td>26.31</td>
<td>52.62</td>
<td>Approved for Rs 26.31 lakhs for CBMDR of 8770 maternal deaths @ Rs 300/ maternal deaths</td>
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<td>A.1.5</td>
<td>Other strategies/activities (please specify)</td>
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<td>卷宗</td>
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<td>A.1.5.1</td>
<td>Line listing and follow-up of severely anemic women</td>
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<td>卷宗</td>
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<td>Printing of Formats for MDR</td>
<td>1,500.00</td>
<td>896</td>
<td>13.44</td>
<td>13.44</td>
<td>Approved Rs 13.44 lakhs for printing of formats for MDR at block level @ Rs 1500/- for 896 blocks and urban areas</td>
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<td>Alternate month district MDR Review</td>
<td>5,000.00</td>
<td>450</td>
<td>22.50</td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10 for District level MDR review meeting every alternate month. The approval is subject to a) Review should also focus on various issues and corrective action plan b) Action plan also needs to be shared with GOI along-with quarterly reports.</td>
</tr>
<tr>
<td>A.1.5.4</td>
<td>Quarterly Divisional MDR Review</td>
<td>25,000.00</td>
<td>72</td>
<td>18.00</td>
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<td>Expenditure to be met out of programme management cost approved under A.10 for quarterly Divisional level MDR review meeting for 18 divisions. The approval is subject to a) Review should also focus on various issues and corrective action plan b) Action plan also needs to be shared with GOI along-with quarterly reports.</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amoun t Proposed (Rs. Lakhs)</td>
<td>Amoun t Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>Amoun t Approved (In Lakhs)</td>
<td>Remarks</td>
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</table>
| A.1. 5.5  | MDR by Impendent Evaluation Teams | 200.00 | 3,00,000 | 600.00 | 600.00 | Action plan 
  b) action plan also needs to be shared with GOI along-with quarterly reports |
<p>| A.1. 5.6  | Maternal Health Review and Orientation Workshops (Regional/State) | 400.00 | 3,00,000 | 1,200.00 | 900.00 | Approved Rs 900.00 lakhs for Tracking of HRPs for Institutional deliveries as - Incentive for ASHA@ Rs 300/- per HRP for 3 HRPs subject to ensuring that ASHA accompany HRP PW for check up at higher center, ensure prior admission and safe Institutional delivery and also entry in MCTS/ RCH portal. State also needs to share the no of HRPs screened along-with % segregation of various HRPs in the final report after each period |
| A.1. 5.7  | CME for Gynaecologists at FRUs | 200.00 | 3,00,000 | 600.00 | 600.00 | Approved Rs 600.00 lakhs for an estimated 3.0 lakh HRPs @Rs 200 per HRP as an incentive to ANM subject to ensuring that all HRPs needs to be line listed and ensure referral of such high risk women to higher centre through ASHA |
| A.1. 5.8  | Identification of HRPs - Incentive for ANM | 200.00 | 3,00,000 | 600.00 | 600.00 | Approved Rs 600.00 lakhs for an estimated 3.0 lakh HRPs @Rs 200 per HRP as an incentive to ANM subject to ensuring that all HRPs needs to be line listed and ensure referral of such high risk women to higher centre through ASHA |
| A.1. 5.9  | Tracking of HRPs for Institutional deliveries - Incentive for ASHA | 200.00 | 3,00,000 | 600.00 | 600.00 | Approved Rs 600.00 lakhs for an estimated 3.0 lakh HRPs @Rs 200 per HRP as an incentive to ANM subject to ensuring that all HRPs needs to be line listed and ensure referral of such high risk women to higher centre through ASHA |</p>
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quan tity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.1. 5.10</td>
<td>Ensuring tracking of HRPs for Institutional deliveries - Incentive for ASHA facilitator</td>
<td>100.00</td>
<td>3,00,000</td>
<td>300.00</td>
<td>00</td>
<td>Not approved incentive to ASHA Facilitator for tracking of HRPs for Institutional deliveries</td>
</tr>
<tr>
<td>A.1. 5.11</td>
<td>Quarterly meeting of District Level Committee</td>
<td>1</td>
<td>15.00</td>
<td>00</td>
<td></td>
<td>Expenditure to be met out of programme management cost approved under A.10 for conducting DLC meetings by 75 districts to be conducted quarterly every district subject to state needs to share no of accredited facilities for CAC services in the quarterly CAC reports</td>
</tr>
<tr>
<td>A.1. 5.12</td>
<td>Annual State level review meeting cum workshop of district nodal officers at state level</td>
<td>1</td>
<td>1.00</td>
<td>00</td>
<td></td>
<td>Expenditure to be met out of programme management cost approved under A.10 for Annual Review meetings of district CAC nodal officer to review the district wise program performance subject to ensuring that regular quarterly CAC reports needs to be shared highlighting the achievements and ab reif 1 page analysis of status of CAC in the State</td>
</tr>
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</table>

A.1. 6 JSSK- Janani Shishu Surakhsha Karyakram | | | | | | |
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<th>Budget Head</th>
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<th>Quantity / Target</th>
<th>Amoun t Proposed (Rs. Lakhs)</th>
<th>Amou nt Approved (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
</table>
| A.1.6.1  | Drugs and consumables   |                | 50,000            | 24,300.06                   | 24,300.00                   | Approved Rs 24300.00 lakhs the following  
a) 50.0 lakhs ANC cases for ensuring quality ANC, 720 tab of Calcium, 360 Iron tablets and also screening for PW for Hypothyroidism and GDM @ Rs 250.0 per case - Rs 12500.00 lakhs  
b) 1.0 lakh C-sections @ Rs 1800/ case - Rs 1800.00 lakhs  
c) 25.0 lakh normal deliveries @ Rs 400 per N.D – Rs 10000.00 lakhs. The approval is subject to ensuring that all pregnant women delivering in public health institutions are given free drugs during ANC, INC and PNC and no out of pocket expenditure is incurred from the pregnant women.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
<p>| A.1.6.2  | Diagnostic               | 200.00         | 50,000            | 10,000.02                   | 10,000.00                   | Approved Rs 10,000.00 lakhs @ Rs 200/ case for provision of free diagnostics under JSSK. The approval is subject to ensuring that all pregnant women delivering in public health institutions are given free diagnostics during ANC, INC and PNC and no out of pocket expenditure is incurred from the pregnant women.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| A.1.6.3  | Blood Transfusion        |                |                   |                             |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |</p>
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
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<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.1. 6.4</td>
<td>Diet (3 days for Normal Delivery and 7 days for Caesarean)</td>
<td>17,45,042</td>
<td>3,790.2</td>
<td>3,790.00</td>
<td>Approved Rs 3790.00 lakhs for the following: a) 1.0 lakh C-section cases @ Rs 100/ day for 5 days - Rs 500.00 lakhs b) 16.45 lakhs normal deliveries @ Rs 100/ day for 2 days-Rs 3290.00 lakhs. The approval is subject to ensuring that all pregnant women delivering in public health institutions are given free diet during delivery and no out of pocket expenditure is incurred from the pregnant women b) As per HMIS, 2015-16, nearly 24.0 lakh deliveries happen in public health institutions, so state should also make provisions for diet for remaining 6.5 lakh public health deliveries being conducted at PHC and below which has not being budgeted</td>
<td></td>
</tr>
<tr>
<td>A.1. 6.6</td>
<td>Other JSSK activity</td>
<td>450.00</td>
<td>180.00</td>
<td>Approved Rs 180 Lacs for 4 Prenatal Diagnostic Equipments @ 45 Lacs/equipment. However HB1AC machines are already sanctioned for the state at PHC level. It is a better option to utilize those machines for screening purpose. This was also discussed during NPCC meetings. State to expedite the procurement of HB1AC machines for thalassemia and other variants anemias screenings as well.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.1. 6.6.1</td>
<td>Antenatal Screening of all pregnant women coming to the facilities in their first trimester for Sickle cell trait, β Thalassemia, Haemoglobin variants esp. Haemoglobin E and Anemia -Refer prevention and Management of Hemoglobinopathies</td>
<td>-</td>
<td>450.00</td>
<td>180.00</td>
<td></td>
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</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<tr>
<td></td>
<td>Sub-total Maternal Health (excluding JSY)</td>
<td>40,745.55</td>
<td>39,836.06</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Sub-total JSY</td>
<td>51,884.42</td>
<td>51,128.79</td>
<td></td>
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<tr>
<td>A.2.</td>
<td>CHILD HEALTH</td>
<td>2,208.66</td>
<td>1,665.08</td>
<td></td>
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<tr>
<td>A.2. 1</td>
<td>IMNCI (including F-IMNCI; primarily budget for planning for pre-service IMNCI activities in medical colleges, nursing colleges, and ANMTCs other training)</td>
<td></td>
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<tr>
<td>A.2. 2</td>
<td>Facility Based Newborn Care/FBNC (SNCU, NBSU, NBCC - any cost not budgeted under HR, Infrastructure, procurement, training, IEC etc.) e.g. operating cost rent, electricity etc. imprest money</td>
<td>1,073.38</td>
<td>914.50</td>
<td></td>
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</tr>
</tbody>
</table>

Remarks

- Sub-total Maternal Health (excluding JSY)
- Sub-total JSY
- CHILD HEALTH
- IMNCI (including F-IMNCI; primarily budget for planning for pre-service IMNCI activities in medical colleges, nursing colleges, and ANMTCs other training)
- Facility Based Newborn Care/FBNC (SNCU, NBSU, NBCC - any cost not budgeted under HR, Infrastructure, procurement, training, IEC etc.) e.g. operating cost rent, electricity etc. imprest money
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<thead>
<tr>
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<tbody>
<tr>
<td>A.2. 2.1</td>
<td>SNCU</td>
<td>18,000.00</td>
<td>94</td>
<td>911.38</td>
<td>908.50</td>
<td>Approved Rs. 908.50 Lakhs for operational cost as per details provided in Annexure-SNCU. This includes the additional cost of Rs 1lakh per unit for establishing KMC services. The traveling allowance for 16 Refrigerator mechanics is not approved as a separate proposal; this may be budgeted from the district programme unit or the State resources.</td>
</tr>
<tr>
<td>A.2. 2.1.1</td>
<td>SNCU Data management</td>
<td>-</td>
<td>156</td>
<td>156.00</td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10 for SNCU Data Management for 50 operational units and for the remaining may be budgeted in supplementary PIP and for 4 Camera for 50 operational units and for the remaining may be budgeted in supplementary PIP as and when they are surplus.</td>
</tr>
<tr>
<td>A.2. 2.2</td>
<td>NBSU</td>
<td>5,000.00</td>
<td>120</td>
<td>6.00</td>
<td>6.00</td>
<td>Approved Rs. 6 Lakhs for 120 NBSUs as operational cost @ Rs 0.05 Lakh</td>
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<tr>
<td>A.2. 2.3</td>
<td>NBCC</td>
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<tr>
<td>A.2. 3</td>
<td>Home Based Newborn Care/HBNC</td>
<td></td>
<td>11.20</td>
<td>-</td>
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<tr>
<td>A.2. 3.1</td>
<td>Visiting newborn in first 42 days of life</td>
<td></td>
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<td></td>
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<tr>
<td>A.2. 3.2</td>
<td>Line listing &amp; follow up of LBW babies and SNCU discharges</td>
<td></td>
<td></td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<td>Remarks</td>
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<tr>
<td>A.2.3.3</td>
<td>Others (if any)</td>
<td></td>
<td>1</td>
<td>11.20</td>
<td></td>
<td>Approved for creating HBNC cell at the state child health division. <strong>Expenditure to be met out of programme management cost approved under A.10</strong></td>
</tr>
<tr>
<td>A.2.4</td>
<td>Infant and Young Child Feeding/IYCF</td>
<td></td>
<td></td>
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<tr>
<td>A.2.5</td>
<td>Care of Sick Children and Severe Malnutrition (e.g. NRCs, CDNCs, and Community Based Programme etc.)</td>
<td>76</td>
<td>866.40</td>
<td>561.60</td>
<td></td>
<td>Operational cost for 68 NRCs approved @ Rs 7.8 lakhs for 12 months and for 8 NRCs @ Rs 3.9 lakhs for 6 months. Use of 102 approved for NRCs referral and drop back. Rs 100 proposed for mother's and sibling's diet is approved, and may be derived from the unspent amount in NRCs budget line.</td>
</tr>
<tr>
<td>A.2.6</td>
<td>Management of Diarrhoea &amp; ARI &amp; micronutrient malnutrition</td>
<td></td>
<td>67.50</td>
<td></td>
<td></td>
<td><strong>Expenditure to be met out of programme management cost approved under A.10</strong></td>
</tr>
<tr>
<td>A.2.7</td>
<td>Micronutrient Supplementation Programme (cost of activities except cost of procurement of supplements)</td>
<td>161,20,000.00</td>
<td>1</td>
<td>162.40</td>
<td>161.20</td>
<td>Approved Rs. 161.20 Lakhs for Micronutrient Supplementation Program</td>
</tr>
<tr>
<td>A.2.8</td>
<td>Child Death Review</td>
<td></td>
<td>2</td>
<td>27.78</td>
<td>27.78</td>
<td>Approved Rs. 27.78 Lakhs as per below breakups: 1. Rs. 50 per case as an ASHA Incentive for 14148 cases (14148<em>0.00050) 2. Rs. 100 per case as Honorarium to ANM (14148</em>0.001)</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<tr>
<td>A.2. 10</td>
<td>JSSK (for Sick infants up to 1 year)</td>
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<tr>
<td>A.2. 10.1</td>
<td>Drugs &amp; Consumables (other than reflected in Procurement)</td>
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<tr>
<td>A.2. 10.2</td>
<td>Diagnostics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No budget is proposed for JSSK for sick infants. Assuming that State has resources/funds available for ensuring that under JSSK all sick infants are entitled for free drugs, free diagnostics and free treatment if they come in public health facilities including free referral transport from Home to facility and drop back.</td>
</tr>
<tr>
<td>A.2. 10.3</td>
<td>Free Referral Transport</td>
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<tr>
<td>A.2. 11</td>
<td>Any other interventions (eg; rapid assessments, protocol development)</td>
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<tr>
<td>A.2. 11.1</td>
<td>HBNC Formats-Module 6-7 (no. of ASHA*3/month)</td>
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<td>A.2. 11.2</td>
<td>State level Child Health Meeting</td>
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<td>A.2. 11.3</td>
<td>Regional Level Child Health Review Meeting</td>
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<td>A.2. 11.4</td>
<td>Intensified Diarrhoea Control Forthnight (IDCF) Programme</td>
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<td>A.2. 11.5</td>
<td>NRC Software Maintenance Cost</td>
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</tbody>
</table>

3. Honorarium for verbal autopsy investigation team @ Rs. 500/case (1152*0.005)
4. Printing of 1.60364 Lakhs CDR Formats @ Rs. 0.5/copy
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<th>FM R code</th>
<th>Budget Head</th>
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<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td>A.2.12</td>
<td>National Iron Plus Initiative (procurement to be budgeted under B.16.2.6 &amp; printing under IEC)</td>
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<td>A.2.12.1</td>
<td>Provision for State &amp; District level (Dissemination/Trainings/meetings/workshops/review meetings)</td>
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<td>A.2.12.2</td>
<td>Others (if any)</td>
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<td>Sub-total Child Health</td>
<td>2,208.6</td>
<td>6</td>
<td>1,665.08</td>
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<td>A.3</td>
<td>FAMILY PLANNING</td>
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<td>A.3.1</td>
<td>Terminal/Limiting Methods</td>
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<td>13,111.65</td>
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<td>A.3.1.1</td>
<td>Female sterilization camps</td>
<td>3,500.00</td>
<td>7,50 0</td>
<td>262.50</td>
<td>262.50</td>
<td>Rs. 262.5 lakh is approved for 7500 female sterilization camps @ Rs. 3500/camp</td>
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<tr>
<td>A.3.1.2</td>
<td>NSV camps</td>
<td>3,500.00</td>
<td>150</td>
<td>5.26</td>
<td>5.25</td>
<td>Rs. 5.25 lakh is approved for 150 NSV camps @ Rs. 3500/male sterilization camp</td>
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<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<tr>
<td>A.3. 1.3</td>
<td>Compensation for female sterilization (Provide breakup: APL (@Rs 650)/BPL (@Rs 1000); Public Sector (@Rs 1000)/Private Sector (@Rs 1500))</td>
<td>-</td>
<td>4,69, 250</td>
<td>11,032.46</td>
<td>11,031.97</td>
<td>Rs. 11031.97 lakh is approved for 12817 PPS cases @ Rs. 3000/case; 307373 interval sterilization cases @ Rs. 2000/case in public health facilities and for 150000 cases @ Rs. 3000/case in private accredited facilities under Hausala Sajhedari.</td>
</tr>
<tr>
<td>A.3. 1.4</td>
<td>Compensation for male sterilization/NSV (@Rs 1500)</td>
<td>2,700.00</td>
<td>6,12 1</td>
<td>165.27</td>
<td>165.27</td>
<td>Rs. 165.27 lakh is approved for 6121 NSV cases in public health facilities @ Rs. 2700/case</td>
</tr>
<tr>
<td>A.3. 1.5</td>
<td>Processing accreditation/empanelment for private facilities/providers to provide sterilization services</td>
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<td>A.3. 2</td>
<td>Spacing Methods</td>
<td>1,130.43</td>
<td>774.93</td>
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<td>A.3. 2.1</td>
<td>IUCD camps</td>
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<tr>
<td>A.3. 2.2</td>
<td>Compensation for IUCD insertion at health facilities (including fixed day services at SHC and PHC) [Provide breakup: Public Sector (@Rs. 20/insertion)/Private Sector (@Rs. 75/insertion for EAG states)]</td>
<td>20.00</td>
<td>16,2 4,67 3</td>
<td>324.93</td>
<td>324.93</td>
<td>Rs. 324.93 lakh is approved for 1624673 IUCD insertions in public facilities @ Rs. 20/insertion. State may utilize the budget for promotion and quality improvement of IUCD services.</td>
</tr>
<tr>
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<td>PPIUUDC services (Incentive to provider @Rs 150 per PPIUUCD insertion)</td>
<td>150.00</td>
<td>3,00,000</td>
<td>450.00</td>
<td>450.00</td>
<td>Rs. 450 lakh is approved for 300000 PPIUUDC insertions @ Rs. 150/insertion/provider</td>
</tr>
<tr>
<td>A.3. 2.3</td>
<td>Processing accreditation/empalement for private facilities/providers to provide IUCD services</td>
<td>3,361</td>
<td>338.50</td>
<td>00</td>
<td></td>
<td></td>
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<tr>
<td>A.3. 2.4</td>
<td>Orientation/review of ASHA/ANM/AWW (as applicable) for Scheme for home delivery of contraceptives (HDC), Ensuring spacing at birth (ESB {wherever applicable}), Pregnancy Testing Kits (PTK)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
</tr>
<tr>
<td>A.3. 2.5</td>
<td>Dissemination of FP manuals and guidelines</td>
<td>50,000.00</td>
<td>79</td>
<td>17.00</td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
</tr>
<tr>
<td>A.3. 2.6</td>
<td>POL for Family Planning/ Others (including additional mobility support to surgeon's team if req)</td>
<td>1,000.00</td>
<td>7,500</td>
<td>75.00</td>
<td>75.00</td>
<td>Rs. 75 lakh is approved @ Rs.1000/-, in which Surgeon Team mobilize from other facility</td>
</tr>
<tr>
<td>A.3. 3</td>
<td>Repairs of Laparoscopes</td>
<td>25,000.00</td>
<td>446</td>
<td>111.50</td>
<td>50.00</td>
<td>Rs. 50 lakh is approved for repair of 200 laparoscopes @ Rs. 25000/laparoscope</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>A.3.5</td>
<td>Other strategies/activities</td>
<td></td>
<td></td>
<td>843.56</td>
<td>610.12</td>
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<tr>
<td>A.3.5.1</td>
<td>Orientation workshop, QAC meetings</td>
<td></td>
<td>304</td>
<td>6.40</td>
<td></td>
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<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<tr>
<td>A.3.5.2</td>
<td>FP review meetings</td>
<td></td>
<td>76</td>
<td>22.40</td>
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<td>Expenditure to be met out of programme management cost approved under A.10</td>
</tr>
<tr>
<td>A.3.5.3</td>
<td>Performance reward if any</td>
<td></td>
<td>76</td>
<td>38.50</td>
<td>38.50</td>
<td>Rs. 38.5 lakh is approved for Rs.1.00 Lakhs for State and Rs.0.50 Lakhs for district level activities. No cash awards permissible.</td>
</tr>
<tr>
<td>A.3.5.4</td>
<td>World Population Day’ celebration (such as mobility, IEC activities etc.): funds earmarked for district and block level activities</td>
<td></td>
<td>162</td>
<td>162.00</td>
<td>162.00</td>
<td>Rs. 162 lakh is approved for state level activity @ Rs. 5 lakh; district level activities in all districts @Rs. 1 lakh/district and for block level activity @ Rs. 10000/block</td>
</tr>
<tr>
<td>A.3.5.5</td>
<td>Other strategies/activities (such as strengthening fixed day services for IUCD &amp; Sterilisation, etc.)</td>
<td></td>
<td></td>
<td>614.26</td>
<td>409.62</td>
<td></td>
</tr>
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<tr>
<td>A.3. 5.5.1</td>
<td>Printing of FP Manuals, Guidelines, etc.</td>
<td></td>
<td>76</td>
<td>115.44</td>
<td>104.96</td>
<td>Rs. 104.96 lakh is approved for printing as mentioned below: a) 1050 sterilization registers, 17876 IUCD registers, 793 PPIUUCD registers, 1492 injectable registers, 909 counselling register @ Rs. 150/register b) 358887 each consent forms, medical record checklist for sterilization cases, post operative instruction cards, sterilization certificate @ Rs. 5/unit. State to note that as per GoI's guidelines PPIUUCD insertion requires verbal informed consent and not the written consent so Rs. 10.5 lakh for printing of PPIUUCD consent forms is not approved</td>
</tr>
<tr>
<td>A.3. 5.5.2</td>
<td>Enhance Contribution of PRIs and Family members of eligible couples in 75 districts with high unmet need and TFR</td>
<td></td>
<td>42</td>
<td>54.40</td>
<td>54.40</td>
<td>Rs. 54.4 lakh is approved for district level activity (NSV satisfied client meet) @ Rs. 20000/district for 42 districts and for Block level activity (Panch Sarpanch Sammellan) @ Rs.10000/block for 460 blocks</td>
</tr>
<tr>
<td>A.3. 5.5.3</td>
<td>Counselling Corner/Room</td>
<td>35,000.00</td>
<td>102</td>
<td>39.67</td>
<td>36.52</td>
<td>Rs. 36.52 is approved for 102 counselling corners @ Rs. 35000/counselling corner and for apron for new counsellors @ Rs.800/counsellor for 102 counsellors</td>
</tr>
<tr>
<td>A.3. 5.5.4</td>
<td>PPIUUCD Supportive supervision by trainers and review at state</td>
<td></td>
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<tr>
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<tr>
<td>A.3. 5.5.5</td>
<td>Comprehensive Website for Family Planning programme</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>A.3. 5.5.6</td>
<td>World NSV Week</td>
<td></td>
<td>95</td>
<td>102.75</td>
<td></td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<tr>
<td>A.3. 5.5.7</td>
<td>Orientation/Training of Front line Workers on proposed new contraceptive (injectable/OCP pills)</td>
<td>125</td>
<td>88.25</td>
<td></td>
<td></td>
<td>The activity is duplication of A.3.2.5 and not approved</td>
</tr>
<tr>
<td>A.3. 5.5.8</td>
<td>Govt. COT at Divisions level for FP Services</td>
<td>6,00,000.00</td>
<td>17</td>
<td>213.75</td>
<td>213.75</td>
<td>Rs. 213.75 lakh is approved for 17 divisional level COT. Rs. 102 lakh is approved for hiring 17 COT vehicles @ Rs. 50000/month/vehicle. Rs. 111.75 lakh is approved for additional incentive for surgeon team. Additional incentive of Rs. 130/surgeon team/case is approved for interval sterilization and Rs. 155/surgeon team/case is approved for NSV. State to note that additional incentive is only permissible beyond 5 sterilization cases per day.</td>
</tr>
<tr>
<td>A.3. 6</td>
<td>Family Planning Indemnity Scheme</td>
<td>50.00</td>
<td>3,20,190</td>
<td>160.10</td>
<td>136.61</td>
<td>Rs. 136.61 is approved based on last three years' average performance.</td>
</tr>
<tr>
<td></td>
<td>Sub-total Family Planning Compensation</td>
<td></td>
<td></td>
<td>11,972.6</td>
<td>11,972.6</td>
<td></td>
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<tr>
<td></td>
<td>Sub-total Family Planning (excluding compensation)</td>
<td></td>
<td></td>
<td>1,813.41</td>
<td>1,139.48</td>
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<tr>
<td>A.4</td>
<td>ADOLESCENT HEALTH / RSK (Rashtriya Kishore Swasthya Karyakram)</td>
<td>1,652.9 7</td>
<td>1,259.61</td>
<td></td>
<td></td>
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<tr>
<td>A.4.1</td>
<td>Facility based services</td>
<td>111.67</td>
<td>39.03</td>
<td></td>
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<tr>
<td>A.4.1.1</td>
<td>Dissemination/meetings/workshops/review for AH (including WIFS, MHS)</td>
<td>325</td>
<td>28.25</td>
<td></td>
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<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<td>A.4.1.2</td>
<td>Establishment of new clinics at DH/Medical college level</td>
<td>50,000.00</td>
<td>7</td>
<td>3.50</td>
<td>3.50</td>
<td>Approved. New clinic at District level @ Rs. 50000 per clinic for 6 Districts and one at MC</td>
</tr>
<tr>
<td>A.4.1.3</td>
<td>Establishment of new clinics at CHC/PHC level</td>
<td></td>
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<tr>
<td>A.4.1.4</td>
<td>Operating expenses for existing clinics</td>
<td>3,600.00</td>
<td>963</td>
<td>35.52</td>
<td>35.53</td>
<td>Approved. @ Rs 600 per AFHCs at DH/HC for 12 months (for 7 new for 6 months) @ Rs 400 Per AFHC per month for 294 CHC level clinics for 12 months @ Rs. 200 per AFHC per month for 588 PHC level clinics</td>
</tr>
<tr>
<td>A.4.1.5</td>
<td>Mobility support for ARSH/ICTC counsellors</td>
<td>1,000.00</td>
<td>354</td>
<td>44.40</td>
<td></td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
</tr>
<tr>
<td>A.4.1.6</td>
<td>Others (Please specify)</td>
<td></td>
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<td>Budget Head</td>
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<tr>
<td>A.4.2</td>
<td>Community level Services</td>
<td></td>
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<tr>
<td>A.4.2.1</td>
<td>Incentives for Peer Educators</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved Rs. 105.84 lakh may be <a href="#">revalidated</a> and State to ensure availability of funds</td>
</tr>
<tr>
<td>A.4.2.2</td>
<td>Organizing Adolescent Health day</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved. Rs 29.4 lakhs may be <a href="#">revalidated</a>. AHD to be conducted quarterly at village level @ Rs 2500 per AHD.</td>
</tr>
<tr>
<td>A.4.2.3</td>
<td>Other (please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved. Rs 26.46 lakhs may be <a href="#">revalidated</a> for monthly AFC meeting in 1764 subcentres @ Rs. 500 per month for 3 months</td>
</tr>
<tr>
<td>A.4.3</td>
<td>Weekly Iron and Folic Acid</td>
<td></td>
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<td></td>
<td>Supplementation Programme</td>
<td></td>
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<td></td>
<td>activities (procurement to be</td>
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<td></td>
<td>budgeted under B16.2.6)</td>
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<td>A.4.4</td>
<td>Scheme for Promotion of</td>
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<td></td>
<td>Menstrual Hygiene activities</td>
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<td>(procurement to be budgeted under</td>
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<td>B16.2.11)</td>
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<tr>
<td>A.4.5</td>
<td>Other strategies/activities</td>
<td>1,541.30</td>
<td></td>
<td>1,220.58</td>
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<td></td>
<td>(please specify)</td>
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<tr>
<td>A.4.5.1</td>
<td>State level awareness workshop</td>
<td></td>
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<td></td>
<td>for MHS (including mobilizing</td>
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<td></td>
<td>the community and safe disposal</td>
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<td>FM R code</td>
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<td>A.4. 5.2</td>
<td>District level awareness workshop for MHS</td>
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<tr>
<td>A.4. 5.3</td>
<td>Incinerators for safe disposal of sanitary Napkins in Girls Schools</td>
<td>3,000.00</td>
<td></td>
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<tr>
<td>A.4. 5.4</td>
<td>Pilot of finding out Anaemia Prevalance in school going Adolescent Girls of one District through True HB method</td>
<td></td>
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<tr>
<td>A.4. 5.5</td>
<td>Anaemia screening in School going Adolescent Girls through RBSK Teams by using strips methods</td>
<td></td>
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<tr>
<td>A.4. 5.6</td>
<td>PE Kits and Diaries</td>
<td></td>
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<tr>
<td>A.4. 5.7</td>
<td>WIFS Register</td>
<td>120.00</td>
<td>6,14, 643</td>
<td>737.58</td>
<td>614.64</td>
<td>Approved Rs. 141.12 lakhs for revalidation and State to ensure availability of funds</td>
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<td>A.4. 5.8</td>
<td>NIPI Register</td>
<td>120.00</td>
<td>5,63, 073</td>
<td>675.69</td>
<td>563.08</td>
<td>Approved for 563073 NIPI Register @ Rs.100/-per register.</td>
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<td>A.4. 5.9</td>
<td>WIFS Reporting Formats</td>
<td>0.50</td>
<td>126, 27, 895</td>
<td>63.14</td>
<td>42.87</td>
<td>Approved for 17420 AWC and 62745 upper primary schools</td>
</tr>
<tr>
<td>A.4. 5.10</td>
<td>Chuppi Todo Abhiyan and Celebration of Girl Child Day</td>
<td>1</td>
<td>64.90</td>
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<td></td>
<td>Not approved</td>
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**Remarks**
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<td>5.11</td>
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<td>A.4. 5.12</td>
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<tr>
<td></td>
<td>Sub-total Adolescent Health</td>
<td></td>
<td>1,652.9 7</td>
<td>1,259.61</td>
<td></td>
<td></td>
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<tr>
<td>A.5</td>
<td>RBSK</td>
<td></td>
<td>9,240.0 8</td>
<td>8,674.43</td>
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<tr>
<td>A.5.1</td>
<td>Operational Cost of RBSK (Mobility support, DEIC etc)</td>
<td></td>
<td>9,240.0 8</td>
<td>8,674.43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.5.1.1</td>
<td>Prepare and disseminate guidelines for RBSK</td>
<td></td>
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<tr>
<td>A.5.1.2</td>
<td>Prepare detailed operational plan for RBSK across districts (cost of plan/convergence/monitoring meetings should be kept seperately)</td>
<td></td>
<td>2,671</td>
<td>128.40</td>
<td></td>
<td>Rs 11.35 lakhs approved under A.10.1.11.4</td>
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</table>

1) Rs 4.1 lakhs for one meeting per block @ Rs 500 per block, Block official of education, ICDS, Social justice and empowerment, tribal welfare for Ashram Schools, Kasturba Gandhi Balika Vidlaya, Kendriya vidlaya. Conditionality Each team to have early micro plan for screening at Schools and Anganwadis. For screening at Anganwsadis 0-6 population of villages to be considered. Each team microplan to be shared with concerned ANM and ASHA and AWW. State may consider team participation in the monthly meetings of ANM ASHA and AWW at block and district level.
<table>
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<tr>
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<tbody>
<tr>
<td>A.5.1.3</td>
<td>Mobility support for Mobile health team</td>
<td>3,60,000.00</td>
<td>1,640</td>
<td>5,904.00</td>
<td>5904.00</td>
<td>Approved for 820 vehicles for 6 months and for 1640 vehicles for 12 months @ Rs 30000 per month. Conditionality State rules and regulation of tendering process for hiring of vehicle is applicable. Expenditure is as per actual. Each vehicle to display RBSK vehicle visibility protocol as per GoI RBSK IEC guidelines.</td>
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<td></td>
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<td></td>
<td>2) RBSK is under supportive supervision structure of NHM and RMNCH+A, thus no separate monitoring travel support is approved. 3) Rs 50000 is approved for one Orientation workshop for RBSK software at State level @ 50000 4) Rs 75000 is approved for 75 District level workshop @ Rs. 1000 per block for 75 Districts 5) Rs 6 lakhs is approved for Regional level review Meeting with District nodal officer and DEIC Manager at Division for RBSK implementation @ Rs. 1.00 lakh per meeting for 6 meeting 6. Transport of referred children at Tertiary level (Medical College) is not approved, State to use patient transport facilities under NHM. RBSK dedicated vehicle may be used on weekly off days of RBSK screening.</td>
</tr>
</tbody>
</table>

Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
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<td>A.5.1.4</td>
<td>Operational cost of DEIC</td>
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<td>1</td>
<td>2,709.69</td>
<td>2289.36</td>
<td>Rs 2289.36 lakhs is approved for 4 turnkey DEICs at Noida, Gaziabad, Lucknow and Aligarh. This project is proposed to be managed by respective partners for a period of three years with support from NHM Uttar Pradesh. DEICs are to be functionally and structurally integrated with MCH wing and SNCUs, and as per RBSK DEIC operational guidelines. State to ensure that these turnkey projects are developed in consultant with National RBSK unit through time bound planning and progress reviews and actional taken follow-up with respective partners. STATE to ENSURE that each infrastructure of DEICs proposed is approved by NHM infrastructure wing at NHM GoI. 1) Rs 672.25 lakhs is approved for nodal DEIC at Noida is a teaching, training and practising centre. details in RBSK Annexure-1. Human resources who are to be selected for training of other DEICs and management of children referred in the DEIC is approved for 6 months. Services like Data entry operator, Receptionist, Security staff and group d staffs are to be outcourced and is approved.</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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</table>

under Administrative cost. Visit of Specialist is approved for 3 months and is applicable for functional DEIC. DEIC Staffs to be trained at RBSK Nodal Centre at IPGMER in 15 days basic training.

2) Rs 78.11 lakhs is approved for DEIC at Gaziabad. details in RBSK Annexure-2. Human resources is approved for 6 months, expenditure is as per actuals. Services like Data entry operator, Receptionist, Security staff and group d staffs are to be outsourced and is approved under Administrative cost. Visit of Specialist is approved for 3 months and is applicable for functional DEIC. DEIC Staffs to be trained at RBSK Nodal Centre at IPGMER in 15 days basic training.

3) Rs 742.18 lakhs is approved for Model DEIC at Aligarh at JAWAHARLAL NEHRU MEDICAL COLLEGE, Aligarh Aligarh Muslim University (AMU), is a teaching, training and practicing centre. details in RBSK Annexure-3. Human resources who are to be selected for training of other DEICs and management of children referred in the DEIC is approved for 6 months.
<table>
<thead>
<tr>
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<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity/Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
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<td></td>
<td>Services like Data entry operator, Receptionist, Security staff and group d staffs are to be outcourced and is approved under Administrative cost. Visit of Specialist is approved for 3 months and is applicable for functional DEIC. DEIC Staffs to be trained at RBSK Nodal Centre at IPGMER in 15 days basic training as per applicable RCH/University training norms. Expenditure is as per actuals.</td>
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<td>4) Rs 796.82 lakhs is approved for Model DEIC at Lucknow at K.G. MEDICAL UNIVERSITY, is a teaching, training and practicing centre. details in RBSK Annexure-4. Human resources who are to be selected for training of other DEICs and management of children referred in the DEIC is approved for 6 months. Services like Data entry operator, Receptionist, Security staff and group d staffs are to be outcourced and is approved under Administrative cost. Visit of Specialist is approved for 3 months and is applicable for functional DEIC. DEIC Staffs to be trained at RBSK Nodal Centre at IPGMER in 15 days basic training as per applicable RCH/University training norms. Expenditure is as per actuals.</td>
</tr>
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<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>A.5.1.5</td>
<td>New born screening- Inborn error of metabolism (please give details per unit cost of screening, number of children to be screened and the delivery points Add details)</td>
<td>1</td>
<td>206.07</td>
<td></td>
<td>206.07</td>
<td>Rs. 206.07 lakhs is approved. Note: Rs 125.49 lakhs approved in FY 2014-15 is to be used. Conditionality - Existing HR at facilities (delivery points under this initiative) to be involved in blood sample collection. To make the initiative sustainable existing HR at facilities to be involved rather hiring staffs exclusively. IEM screening to be universally offered to all children born in respective facilities under this initiative, State to ensure that newborns in selected facilities are comprehensively screened as per RBSK comprehensive defect at birth screening guidelines for visual and structural defects at births. Newborns to be tracked with their MCTS numbers. Identified positive children has to be appropriately managed and to be notified to respective RBSK Mobile health teams for followup for developmental delay. Identification and management protocol to be standardised through human ethics board of university and to be shared with National RBSK unit. The modalities to be finalised in consultation with National RBSK unit for screening of inborn error of metabolism as</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<tr>
<td>A.5. 1.6</td>
<td>Booklet for ASHAs for Identification of Birth Defects</td>
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<td></td>
<td>per RBSK comprehensive defects at birth screening Guidelines.</td>
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<td>A.5. 1.7</td>
<td>Spectacle for children</td>
<td>275.00</td>
<td>1,00,000</td>
<td>275.00</td>
<td>275.00</td>
<td>Approved for Spectacles for school children not covered under NPCB. Under NPCB Guidelines children are covered in the age group of above 14 years. State to use NPCB which has a logistics arrangement at States/UTs, for children who need spectacles even below the age groups covered under NPCB. Note State has an approval of Rs 200 lakhs in FY 2015-16 for this activity, of this only Rs 2.78 lakhs has been indicated as expenditure. State to update physical and financial achievement of the approval</td>
</tr>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<tr>
<td>A.5. 1.8</td>
<td>School Mental Health Programme</td>
<td>1 1.17</td>
<td>00</td>
<td>Not approved as per RBSK guidelines. National Mental health programme may include component.</td>
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<td>A.5. 1.9</td>
<td>Monitoring Meeting at State level</td>
<td>25,000 3 0.75</td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<tr>
<td>A.5. 1.10</td>
<td>Monitoring Meeting at District level</td>
<td>5,000 00 300 15.00</td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<tr>
<td>A.5. 2</td>
<td>Referral Support for Secondary/ Tertiary care (pl give unit cost and unit of measure as per RBSK guidelines)</td>
<td>2,500 00</td>
<td>00</td>
<td>State to use Rs 467.1 lakhs approved in FY 2014-15 for 21,123 children. As proposed by State to amount to be used in FY 2016-17. Illustrative Details is in Annexure. Expenditure is as per actuals. Conditionality State to follow RBSK Procedure and model costing guidelines for details of procedure. State to maintain and submit Name wise details of children who accessed the secondary and tertiary support under RBSK in RBSK monthly reporting format.</td>
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<td>Sub-total RBSK</td>
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<td>9,240.0 8</td>
<td>8,674.43</td>
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A.6. TRIBAL RCH

A.6. 1 Special plans for tribal areas

A.6. 2 HR for tribal areas (in addition to normative HR)

A.6. 3 Outreach activities
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In Lakhs)</th>
<th>Remarks</th>
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<tr>
<td>A.6.4</td>
<td>Other Tribal RCH strategies/activities (please specify)</td>
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<td>Sub-total Tribal Health</td>
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<td>A.7</td>
<td>PNDT Activities</td>
<td>281.55</td>
<td>144.67</td>
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<td>A.7.1</td>
<td>Support to PNDT cell</td>
<td>93</td>
<td>186.45</td>
<td>144.67</td>
<td></td>
<td>Expenditure for contingency per district and per division to be met out of programme management cost approved under A.10. Further, 18 Divisional Level Data Assistants approved @ Rs 18,743 pm for 12 months. DEOs not approved, lump sum amount of Rs 104.19 lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
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<td>A.7.2</td>
<td>Other PNDT activities (please specify)</td>
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<td>A.7.2.1</td>
<td>Review meetings of district nodal officers at state level</td>
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<td>0.90</td>
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<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<td>A.7.2.2</td>
<td>Visit of state inspection and monitoring committees and divisional level inspection committees (including TA/DA)</td>
<td>2,00,000.00</td>
<td>19</td>
<td>3.80</td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<td>State level Orientation Workshop</td>
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<td>FM R code</td>
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<td>Quantity/Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<td>A.7.2.4</td>
<td>Gender Sensitization workshop for 25 High Focus Districts- By SIFPSA</td>
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<td>Orientation of members of the District Advisory Committees at Division Level</td>
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<td>12.00</td>
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<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<td>A.7.2.6</td>
<td>District Level Sensitization Workshops</td>
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<td>Observing the Girl Child Day</td>
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<td>A.7.2.8</td>
<td>Upgradation and Maintenance of PC-PNDT Website</td>
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<td>A.7.2.9</td>
<td>Capacity building of DGCs, CJMs, District Officers, Nodal officers, Ultrasound owners, ASHAs and AWWs Workshops at State, Regional, Division, Districts and Block level</td>
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<td>76</td>
<td>78.40</td>
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<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<td>A.7.2.10</td>
<td>Trackers for 10 selected district with lowest sex ratio</td>
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<td>A.7.3</td>
<td>Mobility support</td>
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<td><strong>Sub-total PNDT activities</strong></td>
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<td>Contractual Staff &amp;</td>
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<td>Quantity / Target</td>
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<td>Amount Approved (In Lakhs)</td>
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<tr>
<td>1</td>
<td>Services</td>
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<td>64,434.27</td>
<td>52,821.46</td>
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<td>A.8.1.1</td>
<td>ANMs, Supervisory Nurses, LHV</td>
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<td>24,356.79</td>
<td>18,026.46</td>
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<td>A.8.1.1.1.a</td>
<td>DH</td>
<td>1,52,460.00</td>
<td>172</td>
<td>262.23</td>
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<td>Approved for 6418 ANMs @ Rs 11,550 pm (as proposed by the State) - 3639 existing posts for 12 months and 779 vacant and 2000 new posts for 6 months. State should share a list of Sub-centres where these new ANMs will be posted. It should prioritize SCs catering to a higher population having single ANMs and which are delivery points. Increment has been approved separately.</td>
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<td>A.8.1.1.1.b</td>
<td>FRUs</td>
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<td>SNCU/ NBSU/NRC etc</td>
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<td>Quantity / Target</td>
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<td>A.8.1.1.2</td>
<td>FRUs</td>
<td>2,51,592.00</td>
<td>4,03</td>
<td>10,139.16</td>
<td>8,703.94</td>
<td>Approved for 4030 Staff Nurse @ Rs 19,060 pm (as proposed by the State) - 3581 existing posts for 12 months and 449 vacant posts for 6 months. Increment has been approved separately.</td>
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<td>SNCU/ NBSU/NRC etc</td>
<td>1,344</td>
<td>3,143.9</td>
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<td>Approved as follows: For SNCUs - 192 existing SNs @ Rs 19,060 pm for 12 months and 216 vacant SNs, 278 new SNs @ Rs 18,150 pm for 6 months. For NBSUs- 360 SNs @ Rs 18,150 pm for 12 months. For NRCs - 214 existing SNs @ Rs 19,060 pm for 12 months and 84 new SNs @ Rs 18,150 pm for 6 months. Increment has been approved separately.</td>
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<td>Approved for 5 existing Staff Nurses @ Rs 18,150 pm for 12 months. Increment has been approved separately.</td>
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<td>LHV/supervisory nurses</td>
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<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>650.03</td>
<td>484.45</td>
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<td>FRUs</td>
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<td>A.8.1.2.1.c</td>
<td>Non FRU SDH/ CHC</td>
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<td>A.8.1.2.1.f</td>
<td>Others</td>
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<tr>
<td>A.8.1.2.2</td>
<td>MPWs (this cell needs to be frozen). As per MSG the MPWs should not be supported by NRHM</td>
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<tr>
<td>A.8.1.3</td>
<td>Specialists (Anesthetists, Pediatricians, Ob/Gyn, Surgeons, Physicians, Dental Surgeons, Radiologist, Sonologist,)</td>
<td>8,906.30</td>
<td></td>
<td>7,919.73</td>
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Approved for 358 Lab Technicians @ Rs 13,755 pm (as proposed by the State) - 229 existing posts for 12 months and 129 vacant posts for 6 months. Increment has been approved separately.
<table>
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<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
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<th>Remarks</th>
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<tr>
<td>A.8.1.3.1</td>
<td>Obstetricians and Gynecologists</td>
<td>4,156.80</td>
<td>4,156.80</td>
<td>4,156.80</td>
<td>Approved for 433 Obstetricians and Gynecologists @ Rs 80,000 pm for 12 months.</td>
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<td>Approved for 224 Anesthetists @ Rs 80,000 pm for 12 months.</td>
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<td>A.8.1.3.3.c</td>
<td>Non FRU SDH/CHC</td>
<td>9,60,000.00</td>
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<td>2,150.40</td>
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<td>A.8.1.3.3.d</td>
<td>Others (Please specify)</td>
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<td>A.8.1.3.5</td>
<td>Specialists for CH (Pediatrician etc) in</td>
<td>1,735.39</td>
<td>978.12</td>
<td>978.12</td>
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**Uttar Pradesh: Administrative Approval of PIP 2016-17**
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<td>A.8.1.3.5.a</td>
<td>SNCU,NBSU,NRC</td>
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<td>204</td>
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<td>Approved for 20 existing Pediatricians @ Rs 78,650 pm for 12 months; 169 vacant and 15 new positions @ Rs 71,500 pm for 6 months.</td>
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<td>A.8.1.3.7.b</td>
<td>Radiologists</td>
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<td>A.8.1.3.7.d</td>
<td>Dental surgeons and dentists</td>
<td>164</td>
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<td>Approved for 164 Dental Surgeons @ Rs 39,900 pm (as proposed by the State) - 101 existing posts for 12 months and 63 vacant posts for 6 months. Increment has been approved separately.</td>
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<td>A.8. 1.3.7.d</td>
<td>24 X 7 PHC</td>
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<td>A.8. 1.3.7.e</td>
<td>Non- 24 X 7 PHCs</td>
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<td>A.8. 1.3.7.f</td>
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<td>A.8. 1.4</td>
<td>PHNs at CHC, PHC level</td>
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<td>5,48,8 56.00</td>
<td>404</td>
<td>2,217.3 8</td>
<td>1,332.22</td>
<td>Approved for 404 medical Officers @ Rs 41,580 pm (as proposed by the State) - 130 existing posts for 12 months and 274 vacant posts for 6 months. Increment has been approved separately.</td>
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<td>MOs for SNCU/NBSU/NRC etc</td>
<td>5600</td>
<td>76</td>
<td>393.19</td>
<td>253.76</td>
<td>Approved for 28 existing MOs for NRCs @ Rs 41,580 pm for 12 months and for 48 vacant MOs for NRCs @ Rs 39,600 pm for 6 months. Increment has been approved separately.</td>
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<td>A.8.1.5.7</td>
<td>Other MOs</td>
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<td>14</td>
<td>73.34</td>
<td>51.56</td>
<td>Approved for 9 Training Coordinators MC - 3 existing posts @ Rs 41,580 pm for 12 months and 6 vacant posts @ Rs 39,600 pm for 6 months For PICU - 4 existing MOs @ Rs 41,580 pm for 12 months and 1 vacant post @ Rs 39,600 pm for 6 months. Increment has been approved separately.</td>
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<td>Additional Allowances/ Incentives to M.O.s</td>
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<td>Others - Computer Assistants/ BCC Co-ordinator etc</td>
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<td>A.8.1.7.4</td>
<td>RBSK teams (Exclusive mobile health team &amp; DEIC Staff)</td>
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<td>Sub Total RBSK mobile teams</td>
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<td>MOs- AYUSH/MBBS</td>
<td>3,280</td>
<td>12,806.51</td>
<td>10,847.70</td>
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<td>Approved for 3280 MOs as follows: 1) 347 MBBS MOs @ Rs 39,690 pm (as proposed by the State) - 180 in-position for 12 months and 167 vacant positions for 6 months. 2) 465 Dental MOs @ Rs 38,588 pm (as proposed by the State) for 12 month. 4) 2468 AYUSH MOs @ Rs 26,460 pm (as proposed by the State) - 2218 in-position for 12 month and 250 vacant positions for 6 months. Increment has been approved separately.</td>
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<td>Staff Nurse/ ANM</td>
<td>1,640</td>
<td>3,187.80</td>
<td>2,746.49</td>
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<td>Approved for 1640 SNs/ANMs as follows: 1) 847 in-position SNs @ Rs 18,190 pm for 12 months 2) 793 ANMs @ Rs 11,025 pm (as proposed by the State) - 564 in-position for 12 months and 229 vacant for 6 months. Increment has been approved separately.</td>
</tr>
<tr>
<td>FM R code</td>
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<tr>
<td>A.8. 1.7.4 .3</td>
<td>Pharmacists</td>
<td>1,640</td>
<td>1,640</td>
<td>2,893.65</td>
<td>2,516.58</td>
<td>Approved for 1640 paramedics and pharmacists as follows: 1) 1231 in-position paramedics (Optometrist - 905, Dental hygienist - 70, Physiotherapist - 256) @ Rs 13,098 pm for 12 months. 2) 409 Pharmacists @ Rs 14,175 pm (as proposed by the State) - 275 in-position for 12 months and 134 vacant positions for 6 months. Increment has been approved separately. Paramedics and Pharmacists are responsible for data entry in the online RBSK MIS each month. State to give details of existing paramedics except the pharmacists.</td>
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<td>A.8. 1.7.4 .4</td>
<td>DEIC</td>
<td>70</td>
<td>70</td>
<td>88.26</td>
<td>84.79</td>
<td>State to hire quality HR as per RBSK guidelines. Expenditure is approved as per actuals.</td>
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<td>Pediatrician</td>
<td>3,90,000.00</td>
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<td>Approved for 5 Pediatricians one per DEIC @ Rs 65,000 pm (as proposed by the State) for 6 months.</td>
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<td>A.8. 1.7.4 .4.b</td>
<td>MO, MBBS</td>
<td>2,26,800.00</td>
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<td>11.34</td>
<td>11.34</td>
<td>Approved for 5 MBBS MOs one per DEIC @ Rs 37,800 pm (as proposed by the State) for 6 months.</td>
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<td>A.8. 1.7.4 .4.c</td>
<td>MO, Dental</td>
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<td>10.20</td>
<td>Approved for 5 Pedodontists one per DEIC @ Rs 34,000 pm (as proposed by the State) for 6 months.</td>
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<td>10.89</td>
<td>10.89</td>
<td>Approved for 10 Staff Nurses one per DEIC @ Rs 18,150 pm (as proposed by the State) for 6 months.</td>
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<td>Physiotherapist</td>
<td>82,326.00</td>
<td>5</td>
<td>4.12</td>
<td>4.12</td>
<td>Approved for 5 Physiotherapists one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
</tr>
<tr>
<td>A.8.1.7.4 .4.f</td>
<td>Audiologist &amp; speech therapist</td>
<td>82,326.00</td>
<td>5</td>
<td>4.12</td>
<td>4.12</td>
<td>Approved for 5 Audiologist &amp; Speech Therapists one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
</tr>
<tr>
<td>A.8.1.7.4 .4.g</td>
<td>Psychologist</td>
<td>82,326.00</td>
<td>5</td>
<td>4.12</td>
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<td>Approved for 5 Psychologists one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
</tr>
<tr>
<td>A.8.1.7.4 .4.h</td>
<td>Optometrist</td>
<td>82,326.00</td>
<td>5</td>
<td>4.12</td>
<td>4.12</td>
<td>Approved for 5 Optometrists one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
</tr>
<tr>
<td>A.8.1.7.4 .4.i</td>
<td>Early interventionist cum special educator</td>
<td>82,326.00</td>
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<td>4.12</td>
<td>4.12</td>
<td>Approved for 5 Early interventionist cum special educators one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
</tr>
<tr>
<td>A.8.1.7.4 .4.j</td>
<td>Social worker</td>
<td>82,326.00</td>
<td>5</td>
<td>4.12</td>
<td>4.12</td>
<td>Approved for 5 Social workers one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
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<tr>
<td>A.8.1.7.4 .4.k</td>
<td>Lab technician</td>
<td>81,000.00</td>
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<td>4.05</td>
<td>Approved for 5 LTs one per DEIC @ Rs 13,500 pm (as proposed by the State) for 6 months.</td>
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<tr>
<td>A.8.1.7.4 .4.l</td>
<td>Dental technician</td>
<td>82,326.00</td>
<td>5</td>
<td>4.12</td>
<td>4.12</td>
<td>Approved for 5 Dental technicians one per DEIC @ Rs 13,721 pm (as proposed by the State) for 6 months.</td>
</tr>
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</tr>
<tr>
<td>A.8. 1.7.4 .4m</td>
<td>Data entry operator</td>
<td>69,300.00</td>
<td>5</td>
<td>3.47</td>
<td>00</td>
<td>Not Approved for approval.</td>
</tr>
<tr>
<td>A.8. 1.7.4 .5</td>
<td>Honorarium for Pediatric ECO, ENT specialist, Orthopediatrician, Ophthalmologist, Psychiatrics</td>
<td>6,00,000.00</td>
<td>5</td>
<td>30.00</td>
<td>30.00</td>
<td>Approved for Pediatric ECO, ENT specialist, Orthopediatrician, Ophthalmologist, Psychiatrics. 8 visit in a month for 6 months for 5 DEICs @ Rs 2,500 per visit for functional DEIC only. Expenditure is as per actuals.</td>
</tr>
<tr>
<td>A.8. 1.7.5</td>
<td>Others</td>
<td></td>
<td></td>
<td>1,240.7</td>
<td>1,079.74</td>
<td></td>
</tr>
<tr>
<td>A.8. 1.7.5 .1</td>
<td>RMNCH/FP Counselors</td>
<td>-</td>
<td>302</td>
<td>386.16</td>
<td>341.31</td>
<td>Approved for 290 RMNCH Counsellors - 241 existing positions @ Rs 10,760 pm for 12 months and 49 vacant positions @ Rs 10,250 for 6 months. No new counsellor is approved. State to re-allocate the existing counsellors sanctioned under various programmes based on facility load.</td>
</tr>
<tr>
<td>A.8. 1.7.5 .2</td>
<td>Adolescent Health counselors</td>
<td>399</td>
<td>668.02</td>
<td>603.29</td>
<td></td>
<td>Approved for 370 existing AH Counsellors @ Rs 13,230 pm for 12 months and 21 vacant positions @ Rs 12,600 pm for 6 months. No new counsellor approved. State to re-allocate the existing counsellors sanctioned under various programmes based on facility load.</td>
</tr>
<tr>
<td>A.8. 1.7.5</td>
<td>Honorarium to ICTC counselors for AH</td>
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<td>FM R code</td>
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<tr>
<td>A.8.1.7.5.4</td>
<td>Other (please specify)</td>
<td></td>
<td>76</td>
<td>186.59</td>
<td>135.14</td>
<td>Approved for 55 existing Nutritionists @ Rs 17,325 pm for 12 months and 21 vacant positions @ Rs 16,500 pm for 6 months.</td>
</tr>
<tr>
<td>A.8.1.7.6</td>
<td>All Technical HR for State Specific Initiatives</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved for Rs 231.85 lakhs for Cold Chain Staff as follows: 1 Assistant Cold Chain Officer @ Rs 41,930 pm; 97 Cold Chain Handlers @ Rs 11,430 pm (4 at State level, 18 at divisional level and 75 at district level); 21 Technicians/Refrigerator Mechanics @ Rs 19,060 pm (9 at divisional level and 12 at district level); 9 Vaccine Storekeepers at divisional level @ Rs 25,410 pm and 8 Vaccine Van Drivers at divisional level @ Rs 19,060 pm for 12 months. Increment has been approved separately. Error in budget proposed for staff at District Blood Bank. Approved for Rs 2,375.89 lakhs for manpower for Blood Services. Refer to HR annexure Blood Services for details.</td>
</tr>
<tr>
<td>A.8.1.7.7</td>
<td>Others (pl specify)</td>
<td></td>
<td>3</td>
<td>3,982.9</td>
<td>2,607.74</td>
<td></td>
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<tr>
<td>A.8.1.7.8</td>
<td>Staff for Training Institutes/ SIHFW/ Nursing Training</td>
<td>-</td>
<td>-</td>
<td>694.84</td>
<td>607.20</td>
<td>Approved for existing HR at ANM and GNM Schools for 12 months as follows: 67 Nursing Faculty (GNMTCs), 15 Nursing Faculty (CoN Varanasi) @ Rs 35,000 pm; 4</td>
</tr>
<tr>
<td>FM R code</td>
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<td></td>
<td>Nursing Mid-wifery Tutors (SNC Meerut &amp; Varanasi) @ Rs 45,000 pm; 2 Program Assistants @ Rs 22,660 pm. New HR approved for 6 months as follows: 1 new Data Assistant @ Rs 23,800 pm; 1 Accountant @ Rs 25,500 pm; and 92 Nursing Faculty (ANMTCs) @ Rs 35,000 pm subject to ensuring that all regular positions in ANM/GNM schools are filled within 1 year and these are purely temporary positions. 8 new Nursing Faculty for CoN (Meerut) not Approved as gap analysis has not been shared by the State in terms of 1:20 ratio of faculty vs students.</td>
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<td>For SIHFW, Approved for 6 clinical consultant (2 MH, 2 CH, 2 Public Health) @ Rs 55,000 pm. The above faculty positions under NHM are subject to ensuring that all regular positions are filled in by the State for ANMTC/ GNMTC on priority and State will need to apprise GOI on the same. These are purely temporary positions and only gap filling of HR will be approved over and above regular positions.</td>
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<tr>
<td>A.8. 1.8</td>
<td>Incentive/ Awards etc. to SN, ANMs etc.</td>
<td>-</td>
<td>1,21,500</td>
<td>796.50</td>
<td>586.50</td>
<td>Approve as follows: a) Rs 90 lakhs as incentive for L1 SCs @ Rs 300 per delivery for 30,000 deliveries. b) Rs 16.50 lakhs as incentive for APHCs/PHCs @ Rs 300 per delivery for 5500 deliveries. c) Rs 210 lakhs as incentive for BPHC/ non-FRU CHC/SDH@ Rs 300 per delivery for 70,000 deliveries d) Rs 270 lakhs as incentive for 9,000Cs at district and CHC EOC teams @ Rs 3,000 e) C-sections in CHC-FRUs for non-HPDs – Not approved The above approval is subject to: a) Facility-wise list of FRUs where PBI incentive is envisaged to be provided and shared b) Regular monitoring of all FRUs need to be done for ensuring performance c) Conditionalities as per PBI document need to be adhered while disbursing incentives to the facilities.</td>
</tr>
<tr>
<td>A.8. 1.9</td>
<td>Human Resources Development (Other than above)</td>
<td>1,34,448.00</td>
<td>154</td>
<td>207.05</td>
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<td>Approval shifted to A.10.2.6</td>
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<tr>
<td>A.8. 1.10</td>
<td>Other Incentives Schemes (Pl.Specify)</td>
<td></td>
<td></td>
<td>774.06</td>
<td>774.04</td>
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<tr>
<td>A.8. 1.10.1</td>
<td>Fixed difficult area Incentive</td>
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<th>Remarks</th>
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</table>
| A.8. 1.10.2 | FRU Operationalization for Gynae & anaesthetist specialist on call from govt sector for NHPDs & HPDs | 3,000.00       | 10,000            | 300.00                      | 300.00                    | Approved for Rs 300 lakhs for 10,000 cases @ Rs 3,000 per case for FRU Operationalization for Gynecologists & Anesthetists on call from govt sector for NHPDs & HPDs. The approval is subject to:
  a) Facility-wise list of FRUs where these on call specialists will be provided to be shared and these should be only for those places which are not conducting C-sections
  b) State should take steps to fill regular and contractual specialists
  c) Regular monitoring of all FRUs needs to be done for ensuring performance
  d) Details of all FRUs where in-house Anesthetists/LSAS and Gynecologists/EmOC and provision for on-call specialists is made needs to be shared. |
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</table>
| A.8. 1.10. 3 | FRU Operationalization Gynaecologists specialist on call for NHPDs & HPDs | 4,500.00 | 5,000 | 225.00 | 225.00 | Approved for Rs 225 lakhs for 5,000 cases @ Rs 4,500 per case for FRU Operationalization for Gynaecologists on call from NHPDs & HPDs. The approval is subject to: 
a) Facility-wise list of FRUs where these on call specialists will be provided to be shared and these should be only for those places which are not conducting C-sections 
b) State should take steps to fill regular and contractual specialists 
c) Regular monitoring of all FRUs needs to be done for ensuring performance 
d) Details of all FRUs where in-house Anesthetists/ LSAS and Gynecologists/EmOC and provision for on-call specialists is made needs to be shared. |
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<tbody>
<tr>
<td>A.8.110.4</td>
<td>FRU Operationalization anaesthetist specialist on call for NHPDs &amp; HPDs</td>
<td>3,000.00</td>
<td>8,00 0</td>
<td>240.00</td>
<td>240.00</td>
<td>Approved for Rs 240 lakhs for 8,000 cases @ Rs 3,000 per case for FRU Operationalization for Anesthetists on call for NHPDs &amp; HPDs. The approval is subject to: a) Facility-wise list of FRUs where these on call specialists will be provided to be shared and these should be only for those places which are not conducting C-sections b) State should take steps to fill regular and contractual specialists c) Regular monitoring of all FRUs needs to be done for ensuring performance d) Details of all FRUs where in-house Anesthetists/LSAS and Gynecologists/EmOC and provision for on-call specialists is made needs to be shared.</td>
</tr>
<tr>
<td>A.8.110.5</td>
<td>Performance based Incentives to RMNCH+A Counsellors in Family Planning</td>
<td>18,0 84</td>
<td>9.06</td>
<td>9.04</td>
<td>Rs. 9.04 lakh is approved for PBI for RMNCH+A counselors @ Rs. 50/ PPIU/CD insertion and Rs. 50/PPS</td>
<td></td>
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<tr>
<td>A.8.110.6</td>
<td>Incentives to Pediatricians/Mos-SNCUs</td>
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<tr>
<td>A.8.110.7</td>
<td>Govt. COT at Divisions level for FP Services</td>
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<td>A.8.110.8</td>
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<td>1.10.9</td>
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<tr>
<td>A.8.1.10</td>
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<tr>
<td>A.8.1.11</td>
<td>Support Staff for Health Facilities</td>
<td>1,016</td>
<td>813.45</td>
<td>2,631.52</td>
<td></td>
<td></td>
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<td>A.8.1.11.a</td>
<td>DH</td>
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<td>A.8.1.11.b</td>
<td>FRUs</td>
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<td>A.8.1.11.c</td>
<td>Non FRU SDH/CHC</td>
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<tr>
<td>A.8.1.11.d</td>
<td>24 X 7 PHC</td>
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<tr>
<td>A.8.1.11.e</td>
<td>Non-24 X 7 PHCs</td>
<td></td>
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<tr>
<td>A.8.1.11.f</td>
<td>SNCU/NBSU/NBCC/NRC etc</td>
<td>57,600.00</td>
<td>1,016</td>
<td>813.45</td>
<td>544.69</td>
<td>Lump sum amount approved for outsourcing support staff to the extent possible for SNCUs, NRCs &amp; PICUs to the extent possible. Amount calculated for vacant &amp; new support staff is for 6 months.</td>
</tr>
<tr>
<td>A.9</td>
<td>TRAINING</td>
<td>5,642.1</td>
<td></td>
<td>4,995.0</td>
<td></td>
<td>HR increment calculated @ 5% for above approvals</td>
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</table>

Sub-total HR  | -                              | 64,434.27      | 52,821.46         |                             |                            |                                                                         |

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<thead>
<tr>
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<td>A.9.1</td>
<td>Skill lab</td>
<td></td>
<td>3.13</td>
<td>3.13</td>
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<td>A.9.1.1</td>
<td>Setting up of Skill Lab</td>
<td></td>
<td>10</td>
<td>1.45</td>
<td>1.45</td>
<td>Approved Rs 1.45 lakhs for Annual recurring cost of consumables for skills lab at 3 CoN i.e. Kanpur, Meerut and Varanasi@ Rs 0.25 lakhs per CoN and 7 GNMTCs@ Rs 10000/- per GNMTC</td>
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<td>A.9.1.2</td>
<td>Human Resources</td>
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<td>A.9.1.3</td>
<td>Training Motivation and follow up visit</td>
<td></td>
<td>24</td>
<td>1.68</td>
<td>1.68</td>
<td>Approved Rs 1.68 lakhs for SSV @ Rs 7000/ visit for 24 such visits by the Nurse midwifery tutor to ANM and GNM schools after 6 weeks training given by them to tutors of these institutions</td>
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<td>A.9.1.4</td>
<td>Onsite mentoring at Delivery Points</td>
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<td>A.9.1.5</td>
<td>Other skill lab training</td>
<td></td>
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<td>A.9.2</td>
<td>Development of training packages</td>
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<td>60.30</td>
<td>60.30</td>
<td>60.30</td>
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<tr>
<td>A.9.2.1</td>
<td>Development/translation and duplication of training materials</td>
<td></td>
<td></td>
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<tr>
<td>A.9.2.2</td>
<td>Other activities (pl. specify)</td>
<td></td>
<td>60.30</td>
<td>60.30</td>
<td>60.30</td>
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<tr>
<td>A.9.2.2.1</td>
<td>Virtual Class Rooms in 11 RHWTCs as District Knowledge Centres</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>State may use the amount</td>
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<tr>
<td>A.9.2.2.2</td>
<td>Workshop/Study tours/Seminar/Meeting/CME registration fees, etc. - SIHFW</td>
<td>50.00</td>
<td>50.00</td>
<td>Approved</td>
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<td>A.9.2.2.3</td>
<td>Contingency support for library, communication, transportation, POL, electricity, etc. - SIHFW</td>
<td>10.30</td>
<td>10.30</td>
<td>Approved</td>
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<td>A.9.2.2.4</td>
<td>Maternal Health Training</td>
<td>944.12</td>
<td>777.03</td>
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<td>A.9.3.1</td>
<td>Skilled Attendance at Birth / SBA</td>
<td>263.98</td>
<td>263.98</td>
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<tr>
<td>A.9.3.1.1</td>
<td>Setting up of SBA Training Centres</td>
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<tr>
<td>A.9.3.1.2</td>
<td>TOT for SBA</td>
<td>1,52,000.00</td>
<td>6</td>
<td>9.12</td>
<td>9.12</td>
<td>Approved Rs 9.12 lakhs for a) 3 batches of AYUSH doctors @ Rs 1.52 lakhs - Rs 4.56 lakhs. b) 3 batches for MBBS doctors as TOT @ Rs 1.52 lakhs- Rs 4.56 lakhs The approval is subject to all Master trainers for SBA training needs to undergo 6 days Skills Lab training at National Skills Lab in Delhi.</td>
</tr>
<tr>
<td>A.9.3.1.3</td>
<td>Training of Staff Nurses in SBA</td>
<td></td>
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<th>Amoun t Approved (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.9. 3.1.4</td>
<td>Training of ANMs / LHV s in SBA</td>
<td>1,27,4 29.00</td>
<td>200</td>
<td>254.86</td>
<td>254.86</td>
<td>Approved Rs 254.86 lakhs for cluster based SBA training for 200 additional batches @ Rs 1.27429 lakhs per batch subject to (a) Ensuring that nurse mentors will constantly mentor all 4 trainees with the help of job aids and mini skills lab at the identified training sites post-training. (b) Clinical roster for 16 days needs to be ensured and facility incharges needs to closely monitor that log books are completely filled and skills are observed, assisted and performed as per the SBA guidelines. (c) Post OSCE of the SBA Trained ANMs/ LHV s needs to be conducted ensuring that they get more than 70% in post OSCE before certifying them, that they are SBA trained</td>
</tr>
<tr>
<td>A.9. 3.2</td>
<td>EmOC Training</td>
<td></td>
<td>53.63</td>
<td>53.63</td>
<td>18.43</td>
<td>Approved Rs 18.43 lakhs for 1 batch of training of MBBS doctors in EmOC subject to (a) Ensuring that all willing candidates are nominated for the training. (b) Their posting orders at the designated FRUs to be issues simultaneously at the time of nomination of the training. (c) The designated FRUs where they will be posted should be in readiness in all other parameters necessary for making FRU operational.</td>
</tr>
<tr>
<td>A.9. 3.2.1</td>
<td>Setting up of EmOC Training Centres</td>
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<td>18.43</td>
<td></td>
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<tr>
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<td>TOT for EmOC</td>
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<td>A.9. 3.2.3</td>
<td>Training of Medical Officers in EmOC</td>
<td></td>
<td></td>
<td>35.20</td>
<td>35.20</td>
<td>Approved Rs 35.20 lakhs for 16 contractual doctors to be trained in EmOC Training subject to the following conditionalities. (a) Proper selection of the trainees need to be done and those whose are willing to perform at the designated CHC-FRUs. (b) FRUs should be in readiness for conducting C-section with all other parameters once the trained MOs is posted to the designated FRUs. (c) All these trained MOs should be monitored for performance at the designated FRUs along-with taking an undertaking to perform in this regard. (d) A bond also needs to be taken with the contractual doctors for performing at the designated FRUs. (e) EmOC Training norms needs to be adhered to</td>
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<tr>
<td>A.9. 3.3</td>
<td>Life saving Anaesthesia skills training</td>
<td></td>
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<tr>
<td>A.9. 3.3.1</td>
<td>Setting up of Life saving Anaesthesia skills Training Centres</td>
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<tr>
<td>A.9. 3.3.2</td>
<td>TOT for Anaesthesia skills training</td>
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<tr>
<td>A.9. 3.3.3</td>
<td>Training of Medical Officers in life saving Anaesthesia skills</td>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<tr>
<td>A.9. 3.4</td>
<td>Safe abortion services training (including MVA/EVA and Medical abortion)</td>
<td></td>
<td>60.35</td>
<td>45.75</td>
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</tr>
<tr>
<td>A.9. 3.4.1</td>
<td>TOT on safe abortion services</td>
<td>3,09,000.00</td>
<td>1</td>
<td>3.09</td>
<td>3.09</td>
<td>Approved Rs 3.09 lakhs for 1 batch of TOT comprising of 15 OBGYN for CAC Training</td>
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<tr>
<td>A.9. 3.4.2</td>
<td>Training of Medical Officers in safe abortion</td>
<td>1,81,200.00</td>
<td>27</td>
<td>48.92</td>
<td>42.66</td>
<td>Approved Rs 42.66 lakhs for 27 batches @ Rs 1.58 lakhs subject to ensuring that training batches to first taken from delivery points and saturated. Performance monitoring of the trained medical officers to be done with the help of IPAS</td>
</tr>
<tr>
<td>A.9. 3.4.3</td>
<td>Training of Obs/Gyn in safe abortion</td>
<td>92,650.00</td>
<td>9</td>
<td>8.34</td>
<td></td>
<td>Not approved. Already TOT for Obs and Gynac is approved above. This training is not clear</td>
</tr>
<tr>
<td>A.9. 3.5</td>
<td>RTI / STI Training</td>
<td></td>
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<tr>
<td>A.9. 3.5.1</td>
<td>TOT for RTI/STI training</td>
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<tr>
<td>A.9. 3.5.2</td>
<td>Training of laboratory technicians in RTI/STI</td>
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<tr>
<td>A.9. 3.5.3</td>
<td>Training of Medical Officers in RTI/STI</td>
<td></td>
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<tr>
<td>A.9. 3.6</td>
<td>B-Emoc Training</td>
<td></td>
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<tr>
<td>A.9. 3.6.1</td>
<td>TOT for BEmOC training</td>
<td></td>
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<td></td>
<td></td>
<td>No budget proposed as budget approved in 2015-16 has been kept as committed</td>
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<tr>
<td>A.9. 3.6.2</td>
<td>BEmOC training for MOs/LMOs</td>
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<tr>
<td>FM R code</td>
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<tr>
<td>A.9.3.7</td>
<td>Other maternal health training (please specify)</td>
<td></td>
<td></td>
<td>566.16</td>
<td>413.67</td>
<td>Approved Rs 48.20 lakhs for 210 batches of training @Rs 22950/batch for training of BCPMs and ASHA Sangini on MDR for reporting and quality review of all reported maternal deaths. The approval is subject to ensuring that they should start reporting maternal deaths and also make community aware about reporting of each and every maternal deaths</td>
</tr>
<tr>
<td>A.9.3.7.1</td>
<td>MDR training of District and Block level officials</td>
<td></td>
<td></td>
<td>48.20</td>
<td>48.20</td>
<td>Approved for orienting ANM on newer guidelines as under: a) 7 batches of State TOTs @ Rs 1.22 lakhs - Rs 8.56 lakhs b) 179 batches of district training @Rs 29400/- per batch - Rs 52.62 lakhs c) 820 batches of block level training @Rs 31050 per batch - Rs 254.61 lakhs The approval is subject to ensuring that 1) day integrated training package should cover all newer MH guidelines and ANMs need to be continously re-</td>
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<tr>
<td>A.9.3.7.2</td>
<td>ANM Refresher Trainings</td>
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<tr>
<td>A.9.3.7.3</td>
<td>Strengthening of 9 CAC training centres</td>
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<td>A.9.3.7.4</td>
<td>Uterine Pelvic Model-UPMS for 9 CAC training centres</td>
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<tr>
<td>A.9.3.7.5</td>
<td>ANM Training on new ANC guidelines and HRPsin</td>
<td></td>
<td></td>
<td>315.76</td>
<td>315.78</td>
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<tr>
<td>A.9. 3.7.6</td>
<td>SBA Training for AYUSH Doctors-Field Training</td>
<td>1,42,400.00</td>
<td>142</td>
<td>202.21</td>
<td>49.70</td>
<td>Approved Rs 49.7 lakhs i.e. 25% of the batches proposed i.e. 35 batches @ Rs 1.42 lakhs per batch subject to the following conditionalities : a) Training Duration needs to be increased to 28 days by increasing the clinical roster duty by 1 week b) Ensuring that nurse mentors will constantly mentor AYUSH doctors who have been trained as SBA with the help of job aids and mini-skills lab post training b) Clinical roster for 23 days needs to be ensured and facility in charges needs to closely monitor that log books are completely filled and skills are observed, assisted and performed as per the SBA guidelines c) AYUSH doctors to be nominated from high case load delivery points where they are co-located and also willing to conduct deliveries after training d) Post OSCE of the SBA Trained AYUSH doctors needs to be conducted ensuring that they get more than 70% in post OSCE before certifying them, that they are SBA trained</td>
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<td>FM R code</td>
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<td>A.9. 3.7.7</td>
<td>Blood Storage Unit (BSU) Training</td>
<td></td>
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<td>e) Close monitoring by the State and District needs to be undertaken and performance evaluation to be conducted and shared with GOI before upscaling</td>
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<td>A.9. 3.7.8</td>
<td>IMEP Training</td>
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<tr>
<td>A.9. 3.7.9</td>
<td>Child Health Training</td>
<td></td>
<td></td>
<td>287.62</td>
<td>287.62</td>
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<tr>
<td>A.9. 3.8</td>
<td>IMNCI Training (pre-service and in-service)</td>
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<td>A.9. 5</td>
<td>F-IMNCI Training</td>
<td></td>
<td></td>
<td>15.27</td>
<td>15.27</td>
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<tr>
<td>A.9. 5.2.1</td>
<td>TOT on F-IMNCI</td>
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<tr>
<td>A.9. 5.2.2</td>
<td>F-IMNCI Training for Medical Officers</td>
<td>2,54,500.00</td>
<td>6</td>
<td>15.27</td>
<td>15.27</td>
<td>Approved Rs. 15.27 Lakhs for F-IMNCI &amp; Physicians Training Programme - newborn babies @ Rs. 2.545 Lakh/batch for 6 batches.</td>
</tr>
<tr>
<td>A.9. 5.2.3</td>
<td>F-IMNCI Training for Staff Nurses</td>
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<tr>
<td>A.9. 5.3</td>
<td>Home Based Newborn Care</td>
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<td>FM R code</td>
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<td></td>
<td>HBNC</td>
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<td>A.9. 5.3.1</td>
<td>TOT on HBNC</td>
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<td>A.9. 5.3.2</td>
<td>Training on HBNC for ASHA</td>
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<tr>
<td>A.9. 5.4</td>
<td>Care of sick children and severe malnutrition at FRUs</td>
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<tr>
<td>A.9. 5.4.1</td>
<td>TOT on Care of sick children and severe malnutrition</td>
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<tr>
<td>A.9. 5.4.2</td>
<td>Training on Care of sick children and severe malnutrition for Medical Officers</td>
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<tr>
<td>A.9. 5.5</td>
<td>Other child health training</td>
<td>272.35</td>
<td>272.35</td>
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<tr>
<td>A.9. 5.5.1</td>
<td>NSSK Training</td>
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<td>A.9. 5.5.2</td>
<td>Other Child Health training</td>
<td>272.35</td>
<td>272.35</td>
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<tr>
<td>A.9. 5.5.2 .a</td>
<td>4 days Training for facility based newborn care</td>
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<tr>
<td>A.9. 5.5.2 .b</td>
<td>2 weeks observership for facility based newborn care</td>
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<td>A.9. 5.5.2 .c</td>
<td>Trainings on IYCF</td>
<td>64</td>
<td>142.12</td>
<td>142.12</td>
<td>Approved Rs. 142.12 Lakhs @ Rs. 2.206 Lakh/batch for 64 Batches.</td>
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<tr>
<td>A.9. 5.5.2 .d</td>
<td>10 Days CCSP-Physician training (on IMNCI Plus)- Pre-service and in-service- Physician at state level - Med.</td>
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<td>A.9. 5.5.2.c</td>
<td>Colleges</td>
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<td></td>
<td>A.9. 5.5.2.e</td>
<td>Printing of training module of CCSP - ANM/LHV and printing of set of job aids and tools</td>
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<td></td>
<td>A.9. 5.5.2.f</td>
<td>Capacity building of medical officer incharge (MOICs) on malnutrition magement</td>
<td></td>
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<td>A.9. 5.5.2.g</td>
<td>SNCU Data management</td>
<td>2,95,500.00</td>
<td>6</td>
<td>17.73</td>
<td>Rs. 17.73 Lakhs for training of SNCU Data Management @ Rs. 2,955 Lakhs per batch. State may book expenditure as per revised RCH training norms.</td>
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<tr>
<td></td>
<td>A.9. 5.5.2.h</td>
<td>One day orientation at PHC/Block level-IDCF</td>
<td>1,50,000.00</td>
<td>75</td>
<td>112.50</td>
<td>Rs. 112.50 Lakhs for orientation on IDCF @ Rs. 1.5 Lakhs/batch for 75 batches</td>
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<tr>
<td>A.9. 6</td>
<td>Family Planning Training</td>
<td></td>
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<tr>
<td>A.9. 6.1</td>
<td>Laparoscopic Sterilization Training</td>
<td></td>
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<tr>
<td></td>
<td>A.9. 6.1.1</td>
<td>TOT on laparoscopic sterilization</td>
<td>51,815.00</td>
<td>10</td>
<td>5.18</td>
<td>Rs. 4.61 lakh is approved for 10 batches with 4 participants/batch @ Rs. 46115/batch. Honorarium for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
</tr>
</tbody>
</table>
| | A.9. 6.1.2 | Laparoscopic sterilization training for doctors (teams of doctor, SN and OT assistant) | 1,37,410.00 | 20 | 27.48 | Rs. 24.93 lakh is approved for 20 batches with 4 participants/batch @ Rs. 124660/ batch. Honorarium for MO is approved as per RCH training norms (Rs.
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In Lakhs)</th>
<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td>A.9. 6.1.3</td>
<td>Refresher training on Laproscopic Sterilization</td>
<td>51,815.00</td>
<td>18</td>
<td>9.33</td>
<td>8.30</td>
<td>Rs. 8.3 lakh is approved for 18 batches with 4 participants/batch @ Rs. 46115/batch. Honorarirum for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
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<tr>
<td>A.9. 6.2</td>
<td>Minilap Training</td>
<td></td>
<td></td>
<td></td>
<td>92.85</td>
<td>83.92</td>
</tr>
<tr>
<td>A.9. 6.2.1</td>
<td>TOT on Minilap</td>
<td>51,815.00</td>
<td>18</td>
<td>9.33</td>
<td>8.30</td>
<td>Rs. 8.3 lakh is approved for 18 batches with 4 participants/batch @ Rs. 46115/batch. Honorarirum for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
</tr>
<tr>
<td>A.9. 6.2.2</td>
<td>Minilap training for medical officers</td>
<td>1,37,410.00</td>
<td>54</td>
<td>74.20</td>
<td>67.32</td>
<td>Rs. 67.32 lakh is approved for 54 batches with 4 participants/batch @ Rs. 124660/batch. Honorarirum for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
</tr>
<tr>
<td>A.9. 6.2.3</td>
<td>Refresher training on Minilap</td>
<td>51,815.00</td>
<td>18</td>
<td>9.33</td>
<td>8.30</td>
<td>Rs. 8.30 lakh is approved for 18 batches with 4 participants/batch @ Rs. 46115/batch. Honorarirum for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
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<tr>
<td>A.9. 6.3</td>
<td>Non-Scalpel Vasectomy (NSV) Training</td>
<td></td>
<td></td>
<td></td>
<td>15.81</td>
<td>13.96</td>
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<tr>
<td>A.9. 6.3.1</td>
<td>TOT on NSV</td>
<td>51,815.00</td>
<td>2</td>
<td>1.04</td>
<td>0.92</td>
<td>Rs. 0.92 lakh is approved for 2 batches with 4 participants/batch @ Rs. 46115/batch. Honorarirum for</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<tr>
<td>A.9.6.3.2</td>
<td>NSV Training of medical officers</td>
<td>81,025.00</td>
<td>8</td>
<td>6.48</td>
<td>5.66</td>
<td>MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
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<tr>
<td>A.9.6.3.3</td>
<td>Refresher training on NSV</td>
<td>51,815.00</td>
<td>16</td>
<td>8.29</td>
<td>7.38</td>
<td>Rs. 7.38 lakh is approved for 16 batches with 4 participants/batch @ Rs. 46115/batch. Honorarium for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
</tr>
<tr>
<td>A.9.6.4</td>
<td>IUCD Insertion Training</td>
<td>118.41</td>
<td>74.69</td>
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<td>A.9.6.4.1</td>
<td>TOT</td>
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<tr>
<td>A.9.6.4.2</td>
<td>Training of Medical officers</td>
<td></td>
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<tr>
<td>A.9.6.4.3</td>
<td>Training of AYUSH doctors</td>
<td>1,49,375.00</td>
<td>50</td>
<td>74.69</td>
<td>74.69</td>
<td>Rs. 74.69 lakh is approved for 50 batches @ Rs. 149375/batch</td>
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<td>A.9.6.4.4</td>
<td>Training of staff nurses</td>
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<tr>
<td>A.9.6.4.5</td>
<td>Training of ANMs / LHVs</td>
<td>87,450.00</td>
<td>50</td>
<td>43.73</td>
<td>00</td>
<td>Budget already covered under A.9.6.6.1 Not approved</td>
</tr>
<tr>
<td>A.9.6.5</td>
<td>PPIUCD insertion training</td>
<td>157.24</td>
<td>149.44</td>
<td></td>
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<tr>
<td>A.9.6.5.1</td>
<td>TOT</td>
<td>1,16,600.00</td>
<td>10</td>
<td>11.66</td>
<td>9.94</td>
<td>Rs. 9.94 lakh is approved for 10 batches @ Rs. 99350/batch. Honorarium for MO is approved as per RCH training norms (Rs.</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<td>Quantity/Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>A.9. 6.5.2</td>
<td>Training of Medical officers</td>
<td>99,110.00</td>
<td>50</td>
<td>49.56</td>
<td>46.11</td>
<td>Rs. 46.11 lakh is approved for 50 batches @ Rs. 92210/batch. Honorarium for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
</tr>
<tr>
<td>A.9. 6.5.3</td>
<td>Training of AYUSH doctors</td>
<td>1,04,600.00</td>
<td>50</td>
<td>52.30</td>
<td>49.68</td>
<td>Rs. 49.68 lakh is approved for 50 batches @ 99350/batch. Honorarium for MO is approved as per RCH training norms (Rs. 500/participant/day)</td>
</tr>
<tr>
<td>A.9. 6.5.4</td>
<td>Training of Nurses</td>
<td>87,450.00</td>
<td>50</td>
<td>43.73</td>
<td>43.73</td>
<td>Rs. 43.73 lakh is approved for 50 batches @ Rs. 87450/batch. Honorarium has been revised as per RCH training norms</td>
</tr>
<tr>
<td>A.9. 6.6</td>
<td>Other family planning training (please specify)</td>
<td></td>
<td></td>
<td>420.19</td>
<td>413.71</td>
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<tr>
<td>A.9. 6.6.1</td>
<td>Capacity building for health providers in IUCD Trainings</td>
<td></td>
<td>250</td>
<td>353.46</td>
<td>353.46</td>
<td>Rs. 353.46 lakh is approved for 5 day integrated IUCD training (including PPIUCD) of 5000 participants of batch size of not more than 10 participant/batch and for one day refresher skill enhancement training of IUCD. The organization has to periodically submit the details and progress to State NHM.</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<tr>
<td>A.9.6.6.2</td>
<td>Extended support for support staff of COE and NSV Satellite Centers</td>
<td>66.73</td>
<td>60.25</td>
<td>Rs. 60.25 lakh is approved for COE and NSV centers as follows: Rs. 26.57 lakh for recurring expenditure, Rs. 2.88 lakh for administrative cost, Rs. 15.78 lakh for NSV awareness creation and printing of training material, Rs. 5.65 lakh for 8 induction trainings @ Rs. 70725/batch, Rs. 7.38 lakh for 16 refresher trainings @ Rs. 46115/batch, Rs. 0.92 lakh for 2 TOT @ Rs. 46115/batch, Rs. 0.50 lakh for mobility support at COE and Rs. 0.55 lakh (10% of total) for administrative cost to STSU.</td>
<td></td>
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</tr>
<tr>
<td>A.9.6.7</td>
<td>Contraceptive Update Seminar/Meeting</td>
<td></td>
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<tr>
<td>A.9.6.8</td>
<td>Training of RMNCH+A/ FP Counsellors</td>
<td>8.40</td>
<td>113.75</td>
<td>Rs. 105.35 lakh is shifted from B.13.2.5. (Rs. 76.6 lakh is approved for training of 4600 ANMs and SN for 2 day training on new contraceptives of batch size not exceeding to 30. Rs. 15 lakh is approved for training material and training aid @ Rs. 300/participant and Rs. 13.8 lakh for contingency and administrative overheads of SIFSA.) Rs. 8.4 lakh is approved for training on involvement of</td>
<td></td>
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<tr>
<td>A.9.6.9</td>
<td>Training / Orientation technical manuals</td>
<td></td>
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<td>FM R code</td>
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<tr>
<td>A.9. 7</td>
<td>Adolescent Health Trainings / Rashtriya Kishor Swasthya Karyakram Training</td>
<td></td>
<td></td>
<td>5.47</td>
<td>5.48</td>
<td>ANM/Staff Nurse/LHV in counselling of FP services. Total Approval=Rs. 113.75 lakh</td>
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<tr>
<td>A.9. 7.1</td>
<td>RKSK trainings</td>
<td></td>
<td></td>
<td>5.47</td>
<td>5.48</td>
<td></td>
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<tr>
<td>A.9. 7.1.1</td>
<td>TOT for Adolescent Friendly Health Service training</td>
<td>2,74,650.00</td>
<td>1</td>
<td>2.75</td>
<td>2.75</td>
<td>Approved. 5 days ANM TOT @ Rs 2.75 lakhs per batch for remaining one batch as approved in 2015-16</td>
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<tr>
<td>A.9. 7.1.2</td>
<td>AFHS training of Medical Officers</td>
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<td></td>
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<tr>
<td>A.9. 7.1.3</td>
<td>AFHS training of ANM/LHV</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>As per the information from State, funds are kept for this activity.</td>
</tr>
<tr>
<td>A.9. 7.1.4</td>
<td>AFHS training of AWW/MPW</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>As per the information from State, funds are kept for this activity.</td>
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<tr>
<td>A.9. 7.1.5</td>
<td>Training of counselors</td>
<td>2,72,700.00</td>
<td>1</td>
<td>2.73</td>
<td>2.73</td>
<td>Approved training of one batch of AH Counsellors</td>
</tr>
<tr>
<td>A.9. 7.2</td>
<td>Training of Peer Educators</td>
<td></td>
<td></td>
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<tr>
<td>A.9. 7.2.1</td>
<td>State level</td>
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<tr>
<td>A.9. 7.2.2</td>
<td>District level</td>
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<td>As per the information from State, funds are kept for this activity.</td>
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<tr>
<td>A.9. 7.2.3</td>
<td>Block Level</td>
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<td>As per the information from State, funds are kept for this activity.</td>
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<tr>
<td>A.9. 7.3</td>
<td>WIFS trainings</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
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<th>Budget Head</th>
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<tr>
<td>A.9.7.4</td>
<td>MHS trainings</td>
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<td>A.9.7.6</td>
<td>Other Adolescent Health training</td>
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<td>A.9.8</td>
<td>Programme Management Training (e.g. M&amp;E, logistics management, HRD etc.)</td>
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<td>562.83</td>
<td>62.83</td>
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<td>A.9.8.1</td>
<td>Training of SPMSU staff</td>
<td>4,23,840.00</td>
<td>5</td>
<td>21.19</td>
<td>21.19</td>
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<td>A.9.8.2</td>
<td>Training of DPMSU staff</td>
<td></td>
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<tr>
<td>A.9.8.3</td>
<td>Training of BPMSU staff</td>
<td></td>
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<tr>
<td>A.9.8.4</td>
<td>Other training (pl. specify)</td>
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<td>541.64</td>
<td>41.64</td>
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<tr>
<td>A.9.8.4.1</td>
<td>Other Program Management Trainings</td>
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<td>A.9.8.4.2</td>
<td>Quality Assurance-Oriention Workshops and Trainings</td>
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<td>33</td>
<td>41.64</td>
<td>41.64</td>
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<tr>
<td>A.9.8.4.3</td>
<td>Financial Management (including CPSMS &amp; Tally) Trainings</td>
<td>200,00,000.00</td>
<td>1</td>
<td>200.00</td>
<td>00</td>
<td>Pended</td>
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<tr>
<td>A.9.8.4.4</td>
<td>Special Training Courses for Medical/Paramedicals</td>
<td></td>
<td>300.00</td>
<td>00</td>
<td></td>
<td>In principal activity is Approved but state needs to provide the details such as Training Site, Type of trainee, Batch size Level and qualification of participants. And same may be proposed in supplementary PIP</td>
</tr>
<tr>
<td>FM R Code</td>
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<tr>
<td>A.9. 8.4.5</td>
<td>Capacity Building of BPMs and DCPMs on Family Planning Counseling Skill</td>
<td></td>
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<tr>
<td>A.9. 9</td>
<td>PC/PNDT training</td>
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<td>A.9. 9.1</td>
<td>PC/PNDT training</td>
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<tr>
<td>A.9. 9.2</td>
<td>Others</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.9. 10</td>
<td>Training (Nursing)</td>
<td></td>
<td>2,245.8</td>
<td>0</td>
<td>2,245.80</td>
<td>Approved for the following a) Rs 1658.80 lakhs for Strengthening of 40 ANMTCs, 7 GNMTCs, 3 CoN and State Nursing Cell in terms of Mobility/ POL for community and clinical site visits, contingency, AV aids, Office set up for classrooms for ANMTCs, strengthening of classrooms, school library for ANMTCs, miniskills lab and IT lab in ANMTC as per the annexure. The approval is subject to the conditionality that state needs to ensure that ANMTCs are not closed and they continue to run as lot of investment is being now put in these ANMTCs and they should be now regularly conducting ANM batches. And b) Rs. 473.00 lakhs for Strengthening for existing 11 RHFWTWCs. (State has provided</td>
</tr>
<tr>
<td>A.9. 10.1</td>
<td>Strengthening of Existing Training Institutions/Nursing School excluding infrastructure and HR.</td>
<td></td>
<td>2</td>
<td>2,131.8</td>
<td>0</td>
<td>2,131.80</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<tr>
<td>A.9.10.2</td>
<td>New Training Institutions/School</td>
<td>1,52,000.00</td>
<td>75</td>
<td>114.00</td>
<td>114.00</td>
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<tr>
<td>A.9.11</td>
<td>Training (Other Health Personnel)</td>
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<td></td>
<td></td>
<td>285.42</td>
<td>273.50</td>
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<tr>
<td>A.9.11.1</td>
<td>Promotional Training of ANMs to lady health visitor etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>A.9.11.2</td>
<td>Training of ANMs, Staff nurses, AWW, AWS</td>
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<tr>
<td>A.9.11.3</td>
<td>Other training and capacity building programmes (nursing tutors etc.)</td>
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<td></td>
<td>257.92</td>
<td>246.00</td>
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<td>A.9.11.3.1</td>
<td>PGDHM Courses</td>
<td>2,75,000.00</td>
<td>10</td>
<td>27.50</td>
<td>27.50</td>
<td>Approved</td>
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<tr>
<td>A.9.12</td>
<td>RBSK training</td>
<td></td>
<td></td>
<td></td>
<td>392.56</td>
<td>392.11</td>
</tr>
<tr>
<td>A.9.12.1</td>
<td>RBSK Training - Training of Mobile health team – technical and managerial (5 days)</td>
<td></td>
<td></td>
<td>165</td>
<td>392.56</td>
<td></td>
</tr>
</tbody>
</table>

- Approved Rs. 246.00 Lakhs for NDD- Orientation meeting at District level @ Rs. 5000 per meeting for 75 Districts and at Block level @ Rs. 100 per participant for 820 block for 300 participant per block.
- Approved Rs. 27.50 lakhs for PGDHM courses.
- Rs 392.11 lakhs is approved for training of 1272 teams in 165 batches at RHFWTC - Agra (22), Varanasi (17), Gorakhpur (27), Jhansi (12), Kanpur (10), Lucknow (25), Meerut (12), and Moradabad (23). As decided in NPCC, training of RBSK Mobile Health teams to be completed within first 2 quarters of the financial year 2016-17.
- 1) Rs 356.06 lakhs is for training cost at RHFWTCs @ Rs
<table>
<thead>
<tr>
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<th>Remarks</th>
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<tbody>
<tr>
<td>A.9. 12.2</td>
<td>RBSK DEIC Staff training (15 days)</td>
<td></td>
<td></td>
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<td>Rs 40 lakhs approved in FY 2015-16 to be used for training of DEIC staffs at RBSK Nodal centre, IPGMER to make the DEICs functional. Expenditure is as per actuals and according to RCH training norms.</td>
</tr>
<tr>
<td>A.9. 12.3</td>
<td>One day orientation for MO / other staff Delivery points</td>
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<td></td>
<td><strong>Note: State to update</strong> Committed unspent amount of Rs 38.21 lakhs was to be used for training of staffs from 3200 existing (L1, L2 and L3) delivery points. Conditionality State to</td>
</tr>
</tbody>
</table>

221250 per batch in 5 days RBSK screening and monitoring and reporting, Conditionality - State to follow RBSK training of 5 days with field visit, Expenditure is as per actuals and RCH training norms
2) Rs 2.97 lakhs is for monitoring of 20% of batches @ Rs 9000 per monitoring, Conditionality State to maintain batch wise monitoring report and action taken report.
3) Rs 1.6 lakhs for procurement of RBSK screening tools as per RBSK job Aids @ Rs 32000 per set; Expenditure is as per actuals and screening tools as per RBSK Job aids
4) Rs 22.48 lakhs for printing of 4496 number of Job aids and participant manuals @ Rs 500 per set. Expenditure is as per actuals and State to follow RBSK GoI materials for printing

392.11
<table>
<thead>
<tr>
<th>FM R code</th>
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<th>Remarks</th>
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<td>A.9. 12.4</td>
<td>Training/Refresher training -ANM (one day)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>start report screening of defects of birth in each month in RBSK MIS along with MCTS number of the baby delivered in these delivery points.</td>
</tr>
<tr>
<td>A.9. 12.5</td>
<td>Training/Refresher training -ASHA (one day)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>start report screening of defects of birth in each month in RBSK MIS along with MCTS number of the baby delivered at home.</td>
</tr>
<tr>
<td><strong>Sub-total Training</strong></td>
<td></td>
<td></td>
<td></td>
<td><strong>5,642.1 6</strong></td>
<td><strong>4,995.11</strong></td>
<td>Note: State to update Committed unspent amount of Rs 116.55 lakhs was to be used for training of ANMs. Conditionality State to start report screening of defects of birth in each month in RBSK MIS along with MCTS number of the baby delivered at home.</td>
</tr>
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<td>A.10</td>
<td>PROGRAMME MANAGEMENT</td>
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<td><strong>38,840.18</strong></td>
<td><strong>22,527.59</strong></td>
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<tr>
<td>A.10 .1</td>
<td>Strengthening of State society/ State Programme Management Support Unit</td>
<td></td>
<td></td>
<td><strong>3,424.5 7</strong></td>
<td><strong>10,872.74</strong></td>
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</tr>
<tr>
<td></td>
<td>Contractual Staff for SPMSU recruited and in position</td>
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<td></td>
<td><strong>3,424.5 7</strong></td>
<td><strong>10,872.74</strong></td>
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<tr>
<td>FM Code</td>
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<td>A.10 .1.1</td>
<td>State Programme Manager</td>
<td>39</td>
<td>557.80</td>
<td>476.04</td>
<td>Rs 476.04 lakhs approved for 36 existing positions. New positions not approved, vacant positions approved for 6 months. Refer to annexure for details.</td>
<td></td>
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<td>A.10 .1.2</td>
<td>State Accounts Manager</td>
<td>5</td>
<td>39.00</td>
<td>25.10</td>
<td>Rs 25.10 lakhs approved for 5 existing positions. Vacant positions approved for 6 months. Refer to annexure for details.</td>
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<td>A.10 .1.3</td>
<td>State Finance Manager</td>
<td>3</td>
<td>38.84</td>
<td>33.03</td>
<td>Rs 33.03 lakhs approved for 3 existing positions. Vacant positions approved for 6 months. Refer to annexure for details.</td>
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<td>A.10 .1.4</td>
<td>State Data Manager</td>
<td>22</td>
<td>71.18</td>
<td>49.74</td>
<td>Rs 49.74 lakhs approved for 17 existing positions. New positions not approved, vacant positions approved for 6 months. Refer to annexure for details.</td>
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<tr>
<td>A.10 .1.5</td>
<td>Consultants/Programme Officers (including for MH/CH/FP/PNDT/ AH including WIFS, RBSK, MHS etc.)</td>
<td>61</td>
<td>437.50</td>
<td>279.50</td>
<td>Rs 279.50 lakhs approved for 74 existing positions. New positions not approved, vacant positions approved for 6 months. Refer to annexure for details.</td>
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<tr>
<td>A.10 .1.6</td>
<td>Programme Assistants</td>
<td>14</td>
<td>51.18</td>
<td>41.11</td>
<td>Rs 41.11 lakhs approved for 13 existing positions. New position not approved, vacant positions approved for 6 months. Refer to annexure for details.</td>
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<td>A.10 .1.7</td>
<td>Accountants</td>
<td>16</td>
<td>59.88</td>
<td>47.41</td>
<td>Rs 47.41 lakhs approved for 16 existing positions. Vacant positions approved for 6 months. Refer to annexure for details.</td>
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<td>FM R Code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>A.10 .1.8</td>
<td>Data Entry Operators</td>
<td>341</td>
<td>41</td>
<td>83.64</td>
<td>42.00</td>
<td>Data entry operators not approved. Lump sum amount of Rs 42 lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
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<td>A.10 .1.9</td>
<td>Support Staff (Kindly Specify)</td>
<td>325</td>
<td>25</td>
<td>30.74</td>
<td>27.04</td>
<td>Positions not approved. Lump sum amount of Rs 27.04 lakhs approved for outsourcing support staff.</td>
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<tr>
<td>A.10 .1.10</td>
<td>Salaries for Staff on Deputation (Please specify)</td>
<td>325</td>
<td>25</td>
<td>30.74</td>
<td>27.04</td>
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<td>A.10 .1.11</td>
<td>Others (Please specify)</td>
<td>325</td>
<td>2054.81</td>
<td>9,851.77</td>
<td>9,851.77</td>
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<td>A.10 .1.11 .1</td>
<td>Divisional PMU personal &amp; operational cost</td>
<td>318</td>
<td>18</td>
<td>904.06</td>
<td>453.60</td>
<td>Rs 297.11 lakhs approved for 36 existing positions. Refer to annexure for details. Lumpsum amount of Rs 156.49 approved for outsourcing support staff to the extent possible. Refer to approvals under A.10.1.1.1.4 for operational cost for Divisional PMU.</td>
</tr>
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<td>A.10 .1.11 .2</td>
<td>Regional Coordinators-RBSK</td>
<td>318</td>
<td>3</td>
<td>22.01</td>
<td>0.00</td>
<td>Not approved as per RBSK Guidelines</td>
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<td>A.10 .1.11 .3</td>
<td>Other - SPMU Staff</td>
<td>328</td>
<td>8</td>
<td>41.74</td>
<td>19.46</td>
<td>Rs 19.46 lakhs approved for 6 existing positions. New position not approved, vacant positions approved for 6 months. Refer to annexure for details.</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>A.10.1.11.4</td>
<td>Operational Expenses - SPMU</td>
<td>987,00,000</td>
<td>1</td>
<td>987.00</td>
<td>9,378.71</td>
<td>5.5% of total approvals under RMNCH &amp; MFP is approved for PM cost.</td>
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<td>A.10.1.11.5</td>
<td>Recruitment and Training Cost - SPMU/DPMU/BPMU and NUHM</td>
<td>100.00</td>
<td>1</td>
<td>100.00</td>
<td>0</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<tr>
<td>A.10.2</td>
<td>Strengthening of District society/ District Programme Management Support Unit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Contractual Staff for DPMSU recruited and in position</td>
<td>2224.07</td>
<td></td>
<td>2224.07</td>
<td>1,403.04</td>
<td></td>
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<tr>
<td>A.10.2.1</td>
<td>District Programme Manager</td>
<td>4,98,960.00</td>
<td>75</td>
<td>374.22</td>
<td>340.20</td>
<td>Approved for 75 District Programme Managers @ Rs 37,800 for 12 months. Increment has been approved separately.</td>
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<tr>
<td>A.10.2.2</td>
<td>District Accounts Manager</td>
<td>4,06,104.00</td>
<td>75</td>
<td>304.58</td>
<td>276.89</td>
<td>Approved for 75 District Accounts Managers @ Rs 30,765 for 12 months. Increment has been approved separately.</td>
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<tr>
<td>A.10.2.3</td>
<td>District Data Manager</td>
<td>2,77,200.00</td>
<td>75</td>
<td>207.90</td>
<td>189.00</td>
<td>Approved for 75 District Data Managers @ Rs 21,000 for 12 months. Increment has been approved separately.</td>
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<td>A.10.2.4</td>
<td>Consultants/ Programme Officers (Kindly Specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved as per additional letter from MD, NHM after Post NPCC PIP submission for 25 RKSK coordinators @ Rs 25,000 per month for 9 months.</td>
</tr>
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<td>A.10.2.5</td>
<td>Accountants</td>
<td></td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td>A.10 .2.6</td>
<td>Data Entry Operators</td>
<td>61,200.00</td>
<td>75</td>
<td>45.90</td>
<td>243.53</td>
<td>Data Entry Operators not approved. Lump sum amount of Rs 243.53 lakhs approved for outsourcing data entry operation on task basis to the extent possible. This also includes approval shifted from A.8.1.9.</td>
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<td>A.10 .2.7</td>
<td>Support Staff (Kindly Specify)</td>
<td>1,03,956.00</td>
<td>75</td>
<td>77.97</td>
<td>74.42</td>
<td>Lump sum amount of Rs 74.42 lakhs approved for outsourcing support staff to the extent possible.</td>
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<tr>
<td>A.10 .2.8</td>
<td>Others (Please specify)</td>
<td></td>
<td></td>
<td>841.50</td>
<td>222.75</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>A.10 .2.8.1</td>
<td>Operational Cost for DPMU unit</td>
<td>11,22,000.00</td>
<td>75</td>
<td>841.50</td>
<td></td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>A.10 .2.8.2</td>
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<td>A.10 .2.8.4</td>
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<tr>
<td>A.10 .2.8.5</td>
<td>DEIC Managers</td>
<td>297.00</td>
<td></td>
<td>222.75</td>
<td></td>
<td>Approved as per additional letter from MD, NHM after Post NPCC PIP submission for 75 DEIC managers @ Rs 33,000 per month for 9 months. Conditionality DEIC managers are responsible for District level screening and service access of the children of the district. Once the DEICs are established they would be relocated at DEIC.</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td>A.10 .3</td>
<td>Strengthening of Block PMU</td>
<td></td>
<td>5,647.70</td>
<td>3,409.56</td>
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<td>A.10 .3.1</td>
<td>Block Programme Manager</td>
<td>3,04,920.00</td>
<td>820</td>
<td>2,500.34</td>
<td>2,273.04</td>
<td>Approved for 820 Block Programme Managers @ Rs 23,100 for 12 months. Increment has been approved separately.</td>
</tr>
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<td>A.10 .3.2</td>
<td>Block Accounts Manager</td>
<td>1,98,000.00</td>
<td>820</td>
<td>1,623.60</td>
<td>1,136.52</td>
<td>Approved for 820 Block Accounts Managers @ Rs 11,550 for 12 months. Increment has been approved separately.</td>
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<td>Block Data Manager</td>
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<td>A.10 .3.4</td>
<td>Accountants</td>
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<td>Data Entry Operators</td>
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<td></td>
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<td>A.10 .3.6</td>
<td>Support Staff (Kindly Specify)</td>
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<td>Others (Please specify)</td>
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<td></td>
<td>1,523.76</td>
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<td>Operational Cost for BPMU unit</td>
<td>1,98,000.00</td>
<td>820</td>
<td>1,523.76</td>
<td>00</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>A.10 .3.7.2</td>
<td>One time Establishment cost for BPMU</td>
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<td>A.10 .3.7.3</td>
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<td>A.10 .3.7.4</td>
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<td>A.10 .3.7</td>
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<td>FM R code</td>
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<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>A.10 .4</td>
<td>Strengthening (Others)</td>
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<td>46.65</td>
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<td>A.10 .4.1</td>
<td>Workshops and Conferences</td>
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<td>A.10 .4.2</td>
<td>Training &amp; Review Meeting</td>
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<td>46.65</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>A.10 .4.3</td>
<td>Monitoring and Supervision</td>
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<td>Audit Fees</td>
<td>40,00,000.00</td>
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<td>40.00</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>Concurrent Audit system</td>
<td>100,10,000.00</td>
<td>1</td>
<td>100.10</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>Mobility Support, Field Visits</td>
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<td>3,881.13</td>
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<td>SPMU/State</td>
<td>389,13,000.00</td>
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<td>389.13</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>DPMU/District</td>
<td>3,60,000.00</td>
<td>150</td>
<td>540.00</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>BPMU/Block</td>
<td>3,60,000.00</td>
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<td>2,952.00</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>A.10 .8</td>
<td>Other Activities</td>
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<td>A.10 .8.1</td>
<td>Vehicles for Divisional / AD office</td>
<td>3,60,000.00</td>
<td>36</td>
<td>129.60</td>
<td>Refer to approvals under A.10.1.11.4</td>
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<td>A.10 .8.2</td>
<td>POL for Additional Directors</td>
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<td>A.10 .8.3</td>
<td>Establishment of IMNCl Cell at</td>
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<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
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<tr>
<td>A.10 .8.4</td>
<td>Monitoring of progress at Nursing Schools (Supportive Supervision State Nodal Centre Mentorship Visit)</td>
<td>16.36</td>
<td></td>
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<td>Refer to approvals under A.10.1.11.4</td>
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<tr>
<td>A.10 .8.5</td>
<td>Employee Provident Fund (EPF) of Contractual Employees</td>
<td>23,330.00</td>
<td>6,584.14</td>
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<td>Approved for EPF @ 13.36% for staff drawing salary below Rs 15,000 pm. State to note that the calculation of EPF on salaries less than 15000 is done on actual salary and not Rs 15,000.</td>
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<td><strong>HR increment calculated @ 5% for above approvals</strong></td>
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<td>Sub-total Programme Management</td>
<td>38,468.18</td>
<td>22,527.59</td>
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<td>A.11 VULNERABLE GROUPS</td>
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<td>A.11 .1 Planning, including mapping and coordination with other departments</td>
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<td>A.11 .2 Services for Vulnerable groups</td>
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<td>A.11 .3 LWE affected areas special plan</td>
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<td>A.11 .4 Other strategies/activities (please specify)</td>
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<td>Sub-total Vulnerable Groups</td>
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## RCH Annexure

### Illustrative costing for managing children under RBSK, Uttar Pradesh

<table>
<thead>
<tr>
<th>S N o.</th>
<th>Disease</th>
<th>Prevalance and conditionality</th>
<th>Target Group Population as per Census 2011, single age group</th>
<th>Estimated No.</th>
<th>RBSK Model Costing</th>
<th>Estimated No for FY 2016-17</th>
<th>Estimated Rs in Lakhs</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>1</td>
<td>Rheumatic Heart Disease</td>
<td>1.5 per 1000 children in the age groups 5 to 9, too early for surgical requirement</td>
<td>25061717</td>
<td>375 9</td>
<td>1100 00</td>
<td>0</td>
<td>0.00</td>
<td>too early for surgical requirement</td>
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<tr>
<td></td>
<td></td>
<td>0.13 to 1.1 per 1000 in the age group of 10-14 years (estimated 10 % children of this age would require surgical support as adult, as most of Rheumatic heart disease patients require surgery as adults, beyond age 16)</td>
<td>25869781</td>
<td>336</td>
<td>1100 00</td>
<td>50</td>
<td>55.49</td>
<td>15% is considered</td>
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<tr>
<td>2</td>
<td>Dental Conditions</td>
<td>50-60 % among preschool, below 6 years of age</td>
<td>22140202</td>
<td>110 701 01</td>
<td>300</td>
<td>11,070</td>
<td>33.21</td>
<td>0.1% considered for procedure</td>
</tr>
<tr>
<td>3</td>
<td>Otitis Media</td>
<td>8.6% among 3-6 years. Chronic suppuratide Otitis Media 6 % in 2-10 years</td>
<td>44646364</td>
<td>267 878</td>
<td>1000 0</td>
<td>1,339</td>
<td>133.94</td>
<td>Chronic suppuratide Otitis Media 6 % in 2-10 years, 0.5% is considered for the FY 2016-17</td>
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<tr>
<td></td>
<td>Condition</td>
<td>Incidence/1000 live births</td>
<td>FY 2016-17 Assistance Fund</td>
<td>10%</td>
<td>28.55</td>
<td>Description</td>
<td></td>
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<tr>
<td>4</td>
<td>Neural Tube Defect</td>
<td>4.1 per 1000 live births, (of this 1.5 per 1000 live birth NTD cases will benefit from surgery)</td>
<td>5437995</td>
<td>815</td>
<td>3500</td>
<td>82</td>
<td>28.55</td>
<td>1.5 per 1000 live birth NTD cases will benefit from surgery, 1% of the total estimated is considered for FY 2016-17</td>
</tr>
<tr>
<td>5</td>
<td>Down Syndrome</td>
<td>1.09 per 1000 live births</td>
<td>0</td>
<td></td>
<td></td>
<td>Surgery will depend on associated congenital malformations</td>
<td></td>
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<tr>
<td>6</td>
<td>Cleft Lip + Cleft Palate</td>
<td>Cleft Lip+ Cleft Palate 0.93 per 1000 live births</td>
<td>5437995</td>
<td>505</td>
<td>1500</td>
<td>5,057</td>
<td>21 Smile train treatment centres are there in State. Surgeires in these centres are conducted by plastic surgeons especially trained to do the procedures and the treatment centres have facility to do the surgeries, free of Cost. State is encouraged to enter in MoU with these facilities. If formally agreed, these procure should not be costed.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cleft Palate 0.17 for every 1000 live birth</td>
<td>5437995</td>
<td>924</td>
<td>1800</td>
<td>924</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Talipes (Club foot)</td>
<td>1-2 in every 1000 live birth</td>
<td>5437995</td>
<td>543</td>
<td>3000</td>
<td>544</td>
<td>16.31</td>
<td>10% is considered in FY 2016-17</td>
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<td>8</td>
<td>Development Dysplasia of the hip</td>
<td>one in 1000 children is born with dislocated hip, and 10 in 1000 may have hip subluxation</td>
<td>5437995</td>
<td>543</td>
<td>1000</td>
<td>653</td>
<td>6.53</td>
<td>12% is considered in FY 2016-17</td>
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<td>9</td>
<td>Congenital Heart Disease</td>
<td>8-10 per 1000 live births</td>
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<td>435</td>
<td>1600</td>
<td>44</td>
<td>69.61</td>
<td>Proposed for 119 cases (0.1% of estimated cases) are considered in FY 2016-17</td>
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<td>Condition Description</td>
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<td>Linkage</td>
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<td>10</td>
<td>Congenital Deafness</td>
<td>1 per 1000 live births are profoundly deaf (≥90 dB in better ear) only these cases require hearing aid</td>
<td>5437995</td>
<td>5438</td>
<td>0.00</td>
<td>Proposed for 2% of estimated cases in FY 2016-17. Linkage with National Deafness control programme to be established.</td>
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<td>Hearing Aid</td>
<td>5438</td>
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<td>Congenital Cataract</td>
<td>1-15/ 10,000 newborn</td>
<td>5437995</td>
<td>4078</td>
<td>0</td>
<td>Proposed for 1% of estimated cases in FY 2016-17. Linkage with National Blindness control programme to be established.</td>
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<td>Retinopathy of prematurity</td>
<td>20-22% in SNCU and 1/3rd require laser to prevent loss</td>
<td>10349</td>
<td>690</td>
<td>1000</td>
<td>103</td>
<td>10.35</td>
<td>Proposed for 15% of estimated cases in FY 2016-17. Linkage with National Blindness control programme to be established.</td>
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<td></td>
<td>690</td>
<td>1000</td>
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<td>Vision Impairment (Strabismus)</td>
<td>2-4 percent in preschool children, 5% would require ocular surgery, others would require ocular patching</td>
<td>22140202</td>
<td>22140</td>
<td>8500</td>
<td>1107</td>
<td>94.10</td>
<td>Proposed for 5% of estimated cases in FY 2016-17 Linkage with National Blindness control programme to be established.</td>
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<td>8500</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
### Budget for One COE DEIC & Training Center in Noida Uttar Pradesh

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<th>Mon (Rs.) Year 1</th>
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<td>6 3,00,000</td>
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<td><strong>Sub Total Human Resource</strong></td>
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<td><strong>b) Staff for COE (Training Center)</strong></td>
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<td>3</td>
<td><strong>Administrative Cost</strong></td>
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<td></td>
<td>Including outsourcing of services of group D staffs - 3 for 6 months, security staff -1 and receptionist -1 and data entry operator - 1 for 6 months.</td>
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### Annexure - A.5.1.4

**Budget for One DEIC in Ghaziabad Uttar Pradesh**

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<th>Mon s</th>
<th>Amount (Rs.) Year 1</th>
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<td>Personnel Cost</td>
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<tr>
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<td>6</td>
<td>82,326</td>
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<td>6</td>
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<td>6</td>
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| Sub total (1) | 50,09,442 |

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<th>One Time (Capital exp) Cost</th>
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<td>Equipments &amp; peripheral support for DEIC with lab</td>
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| III | Institutional Overheads (@15% of I) | 7,51,416 |

Total (1+2+3) | 78,10,858 |
Total RS in Lakhs | 78.11 |

Note: Space would be provided by the State Govt/ health Facility and construction will be based of porta cabins.
### CENTRE OF EXCELLENCE, TRAINING AND REFERRAL FOR DISTRICT EARLY INTERVENTION CENTRES (DEICS) OF WESTERN UTTAR PRADESH

Budget for One DEIC in Aligarh, at JAWAHARLAL NEHRU MEDICAL COLLEGE, ALIGARH MUSLIM UNIVERSITY, Uttar Pradesh

<table>
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<tr>
<th>S. No</th>
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<th>Unit Cost (Rs.)</th>
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<th>Amount (Rs.) Year 1</th>
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<td></td>
<td></td>
</tr>
<tr>
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<tr>
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<tr>
<td>4</td>
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<td>50,000</td>
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<td>3,00,000</td>
</tr>
<tr>
<td>5</td>
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<td>35,000</td>
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</tr>
<tr>
<td>8</td>
<td>Special Educator cum counsellor</td>
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<td>35,000</td>
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</tr>
<tr>
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<tr>
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<td>25,000</td>
<td>6</td>
<td>3,00,000</td>
</tr>
<tr>
<td>13</td>
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<td>1</td>
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</tr>
<tr>
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<td>2,000</td>
<td>24</td>
<td>48,000</td>
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<tr>
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<td>24</td>
<td>48,000</td>
</tr>
<tr>
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<td>48,000</td>
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<tr>
<td>17</td>
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<td>24</td>
<td>48,000</td>
</tr>
<tr>
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<td>2,000</td>
<td>24</td>
<td>48,000</td>
</tr>
<tr>
<td>19</td>
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<td>10,000</td>
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<td>-</td>
</tr>
<tr>
<td>20</td>
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<td>30,000</td>
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<td>-</td>
</tr>
<tr>
<td>21</td>
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<td>6</td>
<td>-</td>
</tr>
<tr>
<td>22</td>
<td>Group D staff</td>
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<td>6</td>
<td>-</td>
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<tr>
<td>b)</td>
<td>Staffs for training Centre</td>
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<tr>
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<td>Clerk cum accountant</td>
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<td>25,000</td>
<td>6</td>
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</tr>
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</table>

**Sub Total Human Resource**

42,18,000

| 2     | Training & related Activities for DEIC Staff | 15,00,000 | 1 | 15,00,000 |

---

Annexure A.5.1.4
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<th>Administrative Cost</th>
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<tbody>
<tr>
<td></td>
<td>Including outsourcing of services of group D staffs - 3 for 6 months, security staff -1 and receptionist -1 and data entry operator -1 for 6 months and Electrician 1 for 6 months.</td>
</tr>
<tr>
<td></td>
<td>7,50,000</td>
</tr>
<tr>
<td>4</td>
<td>Consummables</td>
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<tr>
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<tr>
<td>6</td>
<td>Maintenance Expenses, including training of other DEIUC Staffs.</td>
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</table>

| Sub total (1) | 97,18,000 |

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<tr>
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<td>1</td>
<td>Construction of DEIC (inclusive of sensory garden)</td>
</tr>
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<td>345,00,000</td>
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</table>

| Sub total (2) | 645,00,00 |

| Total (1+2) | 742,18,00 |
| Total RS in Lakhs | 742.18 |

Note:
1) As indicated in the PIP the JN Medical College Hospital, Aligarh will provide the required land free of cost for the construction of the centre as per RBSK DEIC OPerational Guidelines. The area has already been identified and is near to Obstetrics and Gynecology and Neonatal Intensive Care Unit Block as well as Pediatric Wards.

2) Estimate prepared by the Building Department of A.M.U. Aligarh based on CPWD plinth area rate of 01.10.2012 and as per design in RBSK DEIC guidelines. This includes the area for training also.
## K.G. MEDICAL UNIVERSITY: Budget for One COE DEIC & Training Center in Lucknow Uttar Pradesh

<table>
<thead>
<tr>
<th>S. No</th>
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<th>Mon</th>
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<td>Personnel Cost</td>
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<td></td>
</tr>
<tr>
<td>a)</td>
<td>DEIC Staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Pediatrician</td>
<td>1</td>
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<td>6,00,000</td>
</tr>
<tr>
<td>2</td>
<td>Medical Officer</td>
<td>1</td>
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</tr>
<tr>
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<td>Dental surgeon/ Dentist</td>
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<td>70,000</td>
<td>6</td>
<td>4,20,000</td>
</tr>
<tr>
<td>4</td>
<td>Ped Audiologist cum speech specialist</td>
<td>1</td>
<td>50,000</td>
<td>6</td>
<td>3,00,000</td>
</tr>
<tr>
<td>5</td>
<td>Pathologist</td>
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<td>1,00,000</td>
<td>6</td>
<td>6,00,000</td>
</tr>
<tr>
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<td>35,000</td>
<td>6</td>
<td>2,10,000</td>
</tr>
<tr>
<td>7</td>
<td>Physiotherapist</td>
<td>1</td>
<td>35,000</td>
<td>6</td>
<td>2,10,000</td>
</tr>
<tr>
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<td>2,10,000</td>
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<tr>
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<tr>
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<td>Nutritionist</td>
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<tr>
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</tr>
<tr>
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<tr>
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<td>6</td>
<td>3,00,000</td>
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<tr>
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<td>3,000</td>
<td>12</td>
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</tr>
<tr>
<td>18</td>
<td>Parttime E&amp;T surgeon (twice a week) for 3 months</td>
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<td>12</td>
<td>60,000</td>
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<tr>
<td>21</td>
<td>Parttime Psychiatrist (twice a week) for 3 months</td>
<td>1</td>
<td>4,000</td>
<td>24</td>
<td>96,000</td>
</tr>
<tr>
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</tr>
<tr>
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<tr>
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b) Staff for COE (Training Center)
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<tbody>
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<tr>
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<td>Nurse</td>
<td>0</td>
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<td>6</td>
<td>-</td>
</tr>
<tr>
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<td>Ped Optamerist</td>
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<td>35,000</td>
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<td>2,10,000</td>
</tr>
<tr>
<td>5</td>
<td>Physiotherapist</td>
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<td>35,000</td>
<td>6</td>
<td>2,10,000</td>
</tr>
<tr>
<td>6</td>
<td>Clinical Psycologist</td>
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<td>35,000</td>
<td>6</td>
<td>2,10,000</td>
</tr>
<tr>
<td>7</td>
<td>Special Educator</td>
<td>1</td>
<td>35,000</td>
<td>6</td>
<td>2,10,000</td>
</tr>
<tr>
<td>8</td>
<td>Ped Audiolgist cum speech speacialist</td>
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<tr>
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Sub Total Human Resource 16,80,000

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<td>Including outsourcing of services of group D staffs - 3 for 6 months,security staff -1 and receptionist -1 and data entry operator -1 for 6 months.</td>
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Sub total (I) 120,78,000

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<tbody>
<tr>
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<td>500,00,000</td>
</tr>
<tr>
<td>2</td>
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Sub total (2) 670,00,000

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<tr>
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<th>Institutional Overheads (@5% of I)</th>
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Total (1+2+3) 796,81,900

Total in RS Lakhs 796.82

Note: Space would be provided by the State Govt/ health Facility and construction will be based of porta cabins.
### SPMU - A.10

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Designation</th>
<th>No. of Positions</th>
<th>Salary per month</th>
<th>No of mont hs</th>
<th>Total amount (Rs. In lakhs)</th>
<th>Comments/ Remarks</th>
</tr>
</thead>
<tbody>
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<td>A.1</td>
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<td>7.50</td>
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<tr>
<td></td>
<td>General Manager (on deputation)</td>
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<td>12</td>
<td>290.40</td>
<td>1 each for MH, CH, RKS, RBSK, Routine Immunisation, NDCP &amp; NCD, M&amp;E for QA, Planning, FP, AYUSH, EMTS, HR, Procurement, IEC, HMIS/ MCTS, and State Blood Cell</td>
</tr>
<tr>
<td></td>
<td>Dy. General Manager (on deputation)</td>
<td>9</td>
<td>96,800</td>
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<td>104.54</td>
<td>2 HR/ DAP; and 1 each MH, FRU Operationalisation (new), CH, RKS, RBSK, Routine Immunisation, NDCP, NCD, M&amp;E for QA, Planning, FP, AYUSH, EMTS, Procurement, IEC, and HMIS/ MCTS.(Salary as proposed by the State)</td>
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<tr>
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<td>88,000</td>
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<tr>
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<td>33.60</td>
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</table>

**Sub-total** 36  476.04

| A.1   | State Accounts Manager/ Finance     | 4                | 46,725           | 12            | 22.43                      |                                                                                  |
| 0.1.2 | State Accounts Manager/ Finance     | 1                | 44,500           | 6             | 2.67                       |                                                                                  |

**Sub-total** 5  25.10

| A.1   | Finance Controller (on deputation) | 1                | 1,51,250         | 12            | 18.15                      |                                                                                  |
| 0.1.3 | Sr Manager - Finance                | 1                | 84,000           | 12            | 10.08                      |                                                                                  |
|       | Sr Manager - Finance                | 1                | 80,000           | 6             | 4.80                       |                                                                                  |

**Sub-total** 3  33.03

<p>| A.1   | Statistical assistant (NDCP)        | 1                | 22,660           | 6             | 1.36                       | Salary as proposed by the State.                                                 |
| 0.1.  |                                      |                  |                  |               |                            |                                                                                  |</p>
<table>
<thead>
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<th>S. No.</th>
<th>Designation</th>
<th>No. of Positions</th>
<th>Salary per month</th>
<th>No of mont hs</th>
<th>Total amount (Rs. In lakhs)</th>
<th>Comments/ Remarks</th>
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<tbody>
<tr>
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<td>Data Analysts (HMIS/MCTS)</td>
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<td>5.54</td>
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<tr>
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<td>Data Analysts (HMIS/MCTS)</td>
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<td>1.32</td>
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<tr>
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<td>Data Analysts</td>
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<td>4.09</td>
<td>1 each for Finance, M&amp;E for QA, and DFW Rural. (Salary as proposed by the State)</td>
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<td>26,681</td>
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<td>Approved Rs 305.32 Lakhs as bellow: Rs 4.9 Lakhs for training of ToT Rs .26 Lakh for monitoring of ToT training Rs 298.8 Lakhs for Training of ASHA for 228 batches and Rs 1.37 Lakhs monitoring of ASHA training (State level- Rs .98 Lakhs Div- .09 Lakhs and District – Rs .30 Lakhs)</td>
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<td>Approved an amount of Rs 3315.21 lakhs for ASHA training @ Rs 74650 for 4441 batches and Rs 28.15 Lakhs for State level monitoring @ Rs. 6500 for 433 batches, Rs. 1.30 Lakhs @ Rs. 600/monitoring visit for 217 monitoring for Division level and for District level Rs. 1.30 Lakhs @ Rs. 600 per visit for</td>
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<td>B1.1.3.3</td>
<td>TOT of ASHA Trainers -II Round (State TOT)</td>
<td>1.25</td>
<td>1.25</td>
<td>1.25</td>
<td>1.25</td>
<td>Approved</td>
</tr>
<tr>
<td>B1.1.4</td>
<td>Post training support and supervision</td>
<td>4,211.67</td>
<td>4,089.00</td>
<td>4,089.00</td>
<td>4,089.00</td>
<td></td>
</tr>
<tr>
<td>B1.1.4.1</td>
<td>Supervision costs by ASHA facilitators(12 months)</td>
<td>48,000.00</td>
<td>6,815</td>
<td>4,089.00</td>
<td>4,089.00</td>
<td>Approved Rs 4089 Lakhs @ Rs 250 for 6815 AF for 20 visit per month for 12 months</td>
</tr>
<tr>
<td>B1.1.4.2</td>
<td>Monthly Review meeting of ASHA facilitators with BCM at block level-cost of travel and</td>
<td>1,800.00</td>
<td>6,815</td>
<td>122.67</td>
<td>122.67</td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity/Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td>B1.1.5.1</td>
<td>Training of ASHA facilitator</td>
<td>-</td>
<td>109.92</td>
<td>105.43</td>
<td>Approved an amount of Rs 105.43 lakhs for Training of ASHA facilitator. Project coordinator is not Approved: - State to utilize existing ARC team to support and over see the training of ASHA Sangini.</td>
<td></td>
</tr>
<tr>
<td>B1.1.5.2</td>
<td>Training of District trainers and cost of state and district training sites</td>
<td></td>
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<tr>
<td>B1.1.2.1</td>
<td>New Kits</td>
<td>750.00</td>
<td>6.812</td>
<td>51.09</td>
<td>51.09</td>
<td>Approved</td>
</tr>
<tr>
<td>B1.1.2.2</td>
<td>Replenishment</td>
<td>300.00</td>
<td>1.57.363</td>
<td>472.09</td>
<td>0.00</td>
<td>Approved. Replenishment to be done from PHC and SHC level. Approval shifted to FMR code B16.2.5.2</td>
</tr>
<tr>
<td>B1.1.2.3</td>
<td>Procurement of ASHA HBNC Kit</td>
<td></td>
<td></td>
<td>132.56</td>
<td>132.56</td>
<td></td>
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<tr>
<td>B1.1.2.3.1</td>
<td>New Kits</td>
<td></td>
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<tr>
<td>B1.1.2.3.2</td>
<td>Replenishment</td>
<td>300.00</td>
<td>6.815</td>
<td>132.56</td>
<td>132.56</td>
<td>Approved of an amount of Rs 132.56 lakhs @ Rs 150 per ASHA for Replenishment of 88373</td>
</tr>
<tr>
<td>B1.1.6</td>
<td>Performance</td>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<td>1.3</td>
<td>Incentive/Other Incentive to ASHAs (if any)</td>
<td></td>
<td></td>
<td>35,94 6.12</td>
<td>35,540.65</td>
<td></td>
</tr>
<tr>
<td>B1.1.3.1</td>
<td>ASHA incentives under Maternal Health</td>
<td></td>
<td></td>
<td>40.00</td>
<td>32.00</td>
<td></td>
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<tr>
<td>B1.1.3.1.1</td>
<td></td>
<td></td>
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<tr>
<td>B1.1.3.1.2</td>
<td>Maternal Death Audit Information</td>
<td>200.00</td>
<td>20.000</td>
<td>40.00</td>
<td>32.00</td>
<td>Approved Rs 32.0 lakhs as an incentive for ASHA for reporting estimated 16000 maternal deaths @ Rs 200/ case subject to ensuring the regular quarterly reports are shared with GOI</td>
</tr>
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<td>B1.1.3.1.3</td>
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<tr>
<td>B1.1.3.2</td>
<td>Incentive to ASHA under Child Health</td>
<td></td>
<td></td>
<td>11,00 2.07</td>
<td>10,975.58</td>
<td></td>
</tr>
<tr>
<td>B1.1.3.2.1</td>
<td>Incentive for Home Based Newborn Care programme</td>
<td></td>
<td></td>
<td></td>
<td>10,628.73</td>
<td>Shifted from FMR B1.1.3.2.6. approved Rs. 10628.73 Lakhs for 4251492 HBNC Visit @ Rs 250</td>
</tr>
<tr>
<td>B1.1.3.2.2</td>
<td>Incentive for follow up of LBW babies</td>
<td></td>
<td></td>
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<tr>
<td>B1.1.3.2.3</td>
<td>Incentive to ASHA for follow up of SNCU discharge babies</td>
<td></td>
<td></td>
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<tr>
<td>B1.1.3.2.4</td>
<td>Incentive for referral of SAM cases to NRC</td>
<td>100.00</td>
<td>17.66</td>
<td>17.66</td>
<td>8.83</td>
<td>Approved of Rs. 8.83 lakhs @ Rs 50 per case for referral to NRC</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<tr>
<td>B1.1.3.2.5</td>
<td>Incentive for follow up of discharge of SAM children from NRCs</td>
<td>150.00</td>
<td>70, 65, 6</td>
<td>35.33</td>
<td>17.66</td>
<td>Approved of Rs. 17.66 lakhs @ Rs 100 for all 4 follow ups per case.</td>
</tr>
<tr>
<td>B1.1.3.2.6</td>
<td>Incentive for 6 &amp; 7 Module Trained ASHA under HBNC Programme</td>
<td>250.00</td>
<td>42, 51, 49, 2</td>
<td>10,62, 8.73</td>
<td>00</td>
<td>Shifted to FMR B.1.1.3.2.1</td>
</tr>
<tr>
<td>B1.1.3.2.7</td>
<td>Incentive for Diarrhoeal Case Referral</td>
<td></td>
<td></td>
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<tr>
<td>B1.1.3.2.8</td>
<td></td>
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<tr>
<td>B1.1.3.2.9</td>
<td>ASHA Incentives for IDCF</td>
<td>200.00</td>
<td>1.6, 0.1, 75</td>
<td>320.35</td>
<td>320.35</td>
<td>Approved for ASHA incentive for IDCF @ Rs. 200 per ASHA (Rs. 100 per week)</td>
</tr>
<tr>
<td>B1.1.3.3</td>
<td>ASHA Incentives under family planning (ESB/ PPIUCD/ Others)</td>
<td></td>
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<tr>
<td>B1.1.3.3.1</td>
<td>ASHA PPIUCD incentive for accompanying the client for PPIUCD insertion</td>
<td>150.00</td>
<td>3.0, 0.0, 0.0, 0.0</td>
<td>450.00</td>
<td>300.00</td>
<td>Rs. 300 lakh is approved for 2 lakh PPIUCD insertions @ Rs. 150/ASHA/insertion</td>
</tr>
<tr>
<td>B1.1.3.3.2</td>
<td>ASHA incentive under ESB scheme for promoting spacing of</td>
<td>500.00</td>
<td>1.1, 0.2, 0.0, 0.21</td>
<td>551.10</td>
<td>1,095.87</td>
<td>Rs. 1095.87 lakh is approved @ Rs. 500/ASHA/client for 110221 clients for ensuring three year spacing between births and for 108953 clients for ensuring two year spacing after</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td></td>
<td>births</td>
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<td></td>
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<td></td>
<td>marriage. Rs. 544.76 lakh shifted from B.1.1.3.3.4</td>
</tr>
<tr>
<td>B1.1.3.3.3</td>
<td>ASHA Incentive under ESB scheme for promoting adoption of limiting method upto two children</td>
<td>1,00 0.00</td>
<td>1,1,6,3 37</td>
<td>1,163,37</td>
<td>1,163.3 7</td>
<td>Rs. 1163.37 lakh is approved for 116337 clients @ Rs. 1000/ASHA/client</td>
</tr>
<tr>
<td>B1.1.3.3.4</td>
<td>Spacing for 2 years after marriage</td>
<td>500.00</td>
<td>1,0 8,9 53</td>
<td>544,7 6</td>
<td>00</td>
<td>Budget shifted to B.1.1.3.3.2</td>
</tr>
<tr>
<td>B1.1.3.3.5</td>
<td>Incentives to ASHA Sanginies for FP Activities</td>
<td>75</td>
<td>107,2 8</td>
<td>00</td>
<td>Not Approved</td>
<td></td>
</tr>
<tr>
<td>B.1.1.3.4</td>
<td>ASHA Incentives (Rashtriya Kishor Swasthya Karyakram)</td>
<td></td>
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<tr>
<td>B.1.1.3.4.1</td>
<td>Incentive for support to Peer Educator</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved the revalidation of Rs. 35.28 lakhs (35280*100) and State to ensure availability of funds</td>
</tr>
<tr>
<td>B.1.1.3.4.2</td>
<td>Incentive for mobilizing adolescents for AHD</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Approved the revalidation for incentives for 8820 ASHAs @ Rs200 per AHD per quarter for two quarters. Rs. 35.28 lakhs (8820<em>200</em>2) revalidated and State to ensure availability of funds.</td>
</tr>
<tr>
<td>B.1.1.3.4.3</td>
<td>Other incentives under RSKS</td>
<td></td>
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<tr>
<td>B1.1.3.5</td>
<td>Incentive for National Iron Plus Initiative</td>
<td>321.5 5</td>
<td></td>
<td>320.35</td>
<td></td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>B1.1.3.5.1</td>
<td>Incentive for mobilizing WRA (non pregnant &amp; non-lactating Women 20-49 years)</td>
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<tr>
<td>B1.1.3.5.2</td>
<td>Incentive for mobilizing children (6-60 months)</td>
<td></td>
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<tr>
<td>B1.1.3.5.3</td>
<td>Others</td>
<td>100.00</td>
<td>3.2 0.9 50</td>
<td>321.5 5</td>
<td>320.35</td>
<td>Approved of Rs. 320.35 lakhs as ASHA Incentives for mobilizing and ensuring albendazole tab. Administration - Incentive @ Rs. 100 per ASHA for 160175 ASHAs for 75 Districts for 2 rounds</td>
</tr>
<tr>
<td>B1.1.3.6</td>
<td>ASHA Incentives (other)</td>
<td>20,22 8.61</td>
<td>20,116.11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1.1.3.6.1</td>
<td>Incentives for routine activities</td>
<td>12,0 00.0 0</td>
<td>1.6 0.1 75</td>
<td>19.22 1.00</td>
<td>19221.00</td>
<td>Approved</td>
</tr>
<tr>
<td>B1.1.3.6.2</td>
<td>PPIUCD services (Incentive to ASHA @Rs 150 per PPIUCD insertion)</td>
<td></td>
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<tr>
<td>B1.1.3.6.3</td>
<td>Death Registration (For 9 deaths/ASHA)</td>
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<tr>
<td>B1.1.3.6.4</td>
<td>Incentive to ASHA Facilitator</td>
<td>6.8 15</td>
<td>245.3 4</td>
<td>245.34</td>
<td>245.34</td>
<td>Approved for incentives @ Rs. 300 per month per ASHA Sangini for 6815 ASHA Sangini</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs, Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<tr>
<td>B1. 1.3. 6.5</td>
<td>Reimbursement of travel expenses for accompanying a woman to facility for surgical abortion (MVA/EVA)</td>
<td>150.00</td>
<td>14,335</td>
<td>21.50</td>
<td>21.50</td>
<td>Approved Rs 21.50 lakhs for 14335 cases being accompanied by ASHA for MVA/EVA@Rs 150 per case for Reimbursement of travel expenses for accompanying a woman to facility for surgical abortion (MVA/EVA) subject to sharing the revised quarterly reports on CAC with GOI</td>
</tr>
<tr>
<td>B1. 1.3. 6.6</td>
<td>Reimbursement of travel expenses for accompanying a woman to facility for medical abortion (MMA)</td>
<td>225.00</td>
<td>13,555</td>
<td>20.33</td>
<td>30.50</td>
<td>Approved Rs 20.33 lakhs for 13555 cases being accompanied by ASHA for MMA @Rs 225 per case for Reimbursement of travel expenses for accompanying a woman to facility for MMA subject to sharing the revised quarterly reports on CAC with GOI</td>
</tr>
<tr>
<td>B1. 1.3. 6.7</td>
<td>Incentive for ASHA Sanginies for attending PHC monthly meeting</td>
<td>1,800.00</td>
<td>6,815</td>
<td>122.67</td>
<td>0.00</td>
<td>Not Approved</td>
</tr>
<tr>
<td>B1. 1.3. 6.8</td>
<td>ASHA Beema and ASHA Sahayata Kosh</td>
<td>92.00</td>
<td>1,73828</td>
<td>159.92</td>
<td>159.92</td>
<td>Approved</td>
</tr>
<tr>
<td>B1. 1.3. 6.9</td>
<td>ASHA torch</td>
<td>16,690.00</td>
<td></td>
<td>437.85</td>
<td>437.85</td>
<td>Approved @ Rs. 262.20/torch for 166990 torchs</td>
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<tr>
<td>B1. 1.3. 7</td>
<td>Other (support provisions to ASHA such as uniform, diary, ASHA Ghar etc)</td>
<td></td>
<td></td>
<td>1,537.37</td>
<td>1,537.37</td>
<td></td>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<td>B1. 1.3. 7.1</td>
<td>ASHA Divas/ Annual ASHA Samellan</td>
<td>250.00</td>
<td>1.5 0.9 86</td>
<td>377.4 7</td>
<td>377.47</td>
<td>Approved</td>
</tr>
<tr>
<td>B1. 1.3. 7.2</td>
<td>ASHA Payment Voucher, Payment Register &amp; VHIR Register</td>
<td>75</td>
<td>324.9 5</td>
<td>324.95</td>
<td></td>
<td>Approved as per last year's approval</td>
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<tr>
<td>B1. 1.3. 7.3</td>
<td>State level ASHA Awards</td>
<td></td>
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<tr>
<td>B1. 1.3. 7.4</td>
<td>Ta/Da For Attending Monthly Meeting</td>
<td>1.6 6.9 90</td>
<td>834.9 5</td>
<td>834.95</td>
<td></td>
<td>Approved @Rs. 450 per ASHA as per guidelines</td>
</tr>
<tr>
<td>B1. 1.4</td>
<td>Awards to ASHA's/Link workers</td>
<td>5.00 0.00</td>
<td>54</td>
<td>52.25</td>
<td>48.50</td>
<td>Approved for- a) Rs 41 lakhs for ASHA awards @ 5000 per block for 820 blocks b) Rs 7.50 lakhs for awards for AF @ Rs. 10,000 per district</td>
</tr>
<tr>
<td>B1. 1.5</td>
<td>ASHA Resource Centre/ASHA Mentoring Group</td>
<td>2,201.75</td>
<td>1,548.8 8</td>
<td></td>
<td></td>
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<tr>
<td>B1. 1.5. 1</td>
<td>HR at State Level</td>
<td>22</td>
<td>132.5 0</td>
<td>91.19</td>
<td></td>
<td>a) Rs 91.19 lakhs approved for 21 positions including 1 new position of Deputy General Manager. Vacant positions approved for 6 months. Refer to annexure Part B for details. Increment approved separately. b) Expenditure for Monitoring cost @ Rs 3 lakhs per annum, Office expenditure @ Rs 60,000 pm and Overhead admin. Expenses @ Rs 4.20 lakhs per annum to be met out of programme management cost approved</td>
</tr>
<tr>
<td>FM R Code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<td>B1. 1.5. 2</td>
<td>HR at District Level (including Grievance Redressal Committee)</td>
<td></td>
<td>75 304.58</td>
<td></td>
<td>276.89</td>
<td>Approved for 75 District Community Process Managers @ Rs 30,765 pm for 12 months. Increment approved separately.</td>
</tr>
<tr>
<td>B1. 1.5. 3</td>
<td>HR at Block Level</td>
<td></td>
<td>82 1,702.32</td>
<td></td>
<td>1,180.80</td>
<td>Approved for 820 Block Community Process Managers @ Rs 12,000 pm for 12 months. Increment approved separately.</td>
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<tr>
<td>B1. 1.5. 4</td>
<td>Mobility Costs for ASHA Resource Centre/ASHA Mentoring Group (Kindly Specify)</td>
<td></td>
<td>30 62.35</td>
<td></td>
<td>00</td>
<td>Expenditure to be met out of programme management cost approved under A.10</td>
</tr>
<tr>
<td>B1. 1.6</td>
<td>Capacity Building of ASHA Resource Centre</td>
<td></td>
<td>47.58</td>
<td></td>
<td>122.60</td>
<td></td>
</tr>
<tr>
<td>B1. 1.6. 1</td>
<td>HR at State Level</td>
<td>86,955.00</td>
<td>1</td>
<td>0.87</td>
<td>0.70</td>
<td>An amount of Rs .70 lakh is Approved with contingency @ Rs. 150 and food @ 200 for all trainers and participants</td>
</tr>
<tr>
<td>B1. 1.6. 2</td>
<td>HR at District Level</td>
<td>85,732.50</td>
<td>3</td>
<td>2.57</td>
<td>2.23</td>
<td>Approved with contingency @ Rs. 150 with 10% IOH (Institutional over head) and classroom rent is not Approved</td>
</tr>
<tr>
<td>B1. 1.6. 3</td>
<td>HR at Block Level</td>
<td></td>
<td>34</td>
<td>44.14</td>
<td>44.13</td>
<td>Approved with contingency @ Rs. 125</td>
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<tr>
<td>B1. 1.2</td>
<td>Certification of ASHA by</td>
<td></td>
<td></td>
<td></td>
<td>75.54</td>
<td>HR increment calculated @ 5% for above approvals</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
</tr>
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<tr>
<td>B2.1</td>
<td>District Hospitals</td>
<td>10,00,000.00</td>
<td>15</td>
<td>1,570.00</td>
<td>697.58</td>
<td>Approved Rs 697 Lakhs for 157 DHs @ Rs 10 Lakhs based on fund available (committed) with the State</td>
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<td>B2.2</td>
<td>SDH</td>
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<tr>
<td>B2.3</td>
<td>CHCs</td>
<td>5,00,000.00</td>
<td>96</td>
<td>4,830.00</td>
<td>2471.56</td>
<td>Approved 2471.56 Lakhs for 966 CHCs @ Rs 5 Lakhs based on fund available with the State.</td>
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<tr>
<td>B2.4</td>
<td>PHCs</td>
<td>1,75,000.00</td>
<td>2,696</td>
<td>4,711.75</td>
<td>3750.36</td>
<td>Approved 3750.36 Lakhs for 2696 PHCs @ Rs 1.75 Lakhs based on fund available with the State.</td>
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<td>B2.5</td>
<td>Sub Centres</td>
<td>20,00,00.00</td>
<td>20,40</td>
<td>4,080.80</td>
<td>410.08</td>
<td>Approved 410.08 Lakhs for 16714 SCs @ Rs 20000 for Gov. building and 3690 SCs @ 10000 for rented building based on fund available with State.</td>
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<tr>
<td>B2.6</td>
<td>VHSC</td>
<td>10,00,00.00</td>
<td>98,856</td>
<td>9,885.60</td>
<td>0.00</td>
<td>In principal an amount of Rs 5141.30 Lakhs is Approved @ Rs 10000 per VHSNC for 51413 VHSNCS. But State already has required fund so no fund is approved for the year 2016-17.</td>
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<td>B2.7</td>
<td>Others</td>
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<td>B3.1</td>
<td>Rollout of B.Sc (Community Health)</td>
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<td>B3.2</td>
<td>Infrastructure (if any)</td>
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<td>B3.3</td>
<td>Human</td>
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<td>B.4</td>
<td>Hospital Strengthening</td>
<td>22,61 5.16</td>
<td>7,113.3 1</td>
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<tr>
<td>B.4.1</td>
<td>Up gradation of CHCs, PHCs, Dist. Hospitals</td>
<td>22,61 5.16</td>
<td>7,113.3 1</td>
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<td>Sub Centres</td>
<td>106.84</td>
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<td>B4.1.4.1</td>
<td>Additional Building/ Major Upgradation of existing Structure</td>
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<td>Repair/ Renovation</td>
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<td>B4.1.4.3</td>
<td>Spillover of Ongoing Works</td>
<td>106, 84,000.0</td>
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<td>106.84</td>
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<td>ANM Quarters</td>
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<td>B4.</td>
<td>Others (MCH)</td>
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An amount of Rs 106.84 is approved as final installment.
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<tr>
<td>1.5</td>
<td>Wings)</td>
<td></td>
<td>22.50 8.32</td>
<td>7,006.4</td>
<td></td>
<td>Approved Rs 4482.00 for 12 fifty bedded MCH wings i.e. 50% of the total projected cost of Rs 8964.00 lakhs as 1st installment. The cost for each 50 bedded MCh wings is Rs 747.0 lakhs. The 50 bedded MCh wings are approved at CHC, Kakori, CHC Gosaiganj, Female Hospital, Pilibhit, CHC Aawala, CHC Bahedhi, CHC Powayan, CHC Bidhuna, CHC Bhangel, CHC Saraswa, CHC, Nanawta, CHC Khatauli and CHC Lalganj. The approval is subject to : a) Ensuring provision of BeMONC and CeMONC services as majority of these are not conducting C-sections and those which are conducting are very minimal (1-3 CS/month) and essentially these CHCs are providing normal deliveries b) 50 bedded MCh wings should be operationalized as per MNH tool kit and should have all components as per MNH tool kit c) The total project cost is the final cost being approved including the cost of equipments. Any escalation in cost due to delay in project will have to bear by the State out of State funds. d) Advance HR planning needs to be done by the State for operationalizing these CHCs for CeMONC services. e) Time-line for completion of these MCh wings in 2 years. State to adhere to the time-lines</td>
</tr>
<tr>
<td>B4. 1.5. 1</td>
<td>New wings (to be initiated this year)</td>
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<td>32 10,14 2.00</td>
<td>4482.00</td>
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<td>Additional requirement</td>
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<td>9,841</td>
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<table>
<thead>
<tr>
<th>FM R code</th>
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<th>Amount Proposed (Rs, Lakhs)</th>
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<tr>
<td>2</td>
<td>from previous work</td>
<td>56,000.00</td>
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<td>Carry forward/Spillover of Ongoing Works</td>
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<td>B4. 1.5. 4</td>
<td>Other construction</td>
<td>2,524.47</td>
<td></td>
<td></td>
<td>2,524.47</td>
<td>Approved Rs 1524.47 lakhs as 2nd and final installment for a 100 bedded Maternity wing in queen merry hospital, KGMU, Lucknow) subject to the following conditionalities. a) The progress of the 100 bedded MCH wing now needs to be accelerated as per assurance given vide DO letter dated 02.03.2016 by VC, KGMU as the earlier timeline for completion within 3 years has already gone b) conditionality as per the approval given at the time of sanction needs to be adhered to c) This is the final installment which includes the cost of equipments and furniture and any further escalation in cost due to project delay etc needs to be borne by the State</td>
</tr>
<tr>
<td>B4. 1.5. 4.1</td>
<td>Carry forward/Spillover of Ongoing Works (100 bedded Maternity wing in queen merry hospital, KGMU, Lucknow)</td>
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<td>1,524.47</td>
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<td>Carry forward/Spillover of Ongoing Works (100 bedded Maternity wing in S. N. Medical)</td>
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<td></td>
<td>College, Agra</td>
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</table>
| B4, 1.5.4.3 | Center for excellence nursing & midwifery center at KGMU, Lucknow |                    |                   | 1,000.00 00 | 1,000.00 | Approved Rs 1000.00 lakhs as 2nd and final installment for Center for excellence nursing & midwifery center at KGMU, Lucknow subject to the following conditionalities  
  a) The progress of Center for excellence nursing & midwifery center at KGMU, Lucknow now needs to be accelerated as per assurance given vide DO letter dated 02.03.2016 by VC, KGMU as the earlier timeline for completion within 3 years has already gone  
  b) conditionalities as per the approval given at the time of sanction needs to be adhered to  
  c) This is the final installment which includes the cost of equipments and furniture and any further escalation in cost due to project delay etc needs to be borne by the State |
<p>| B4, 1.5.4.4 | 200 Bedded state referral maternity and child hospital, Gomti Nagar, Lucknow |                    |                   |                             |                   |         |
| B4, 1.5.4.5 | 200 Bedded MCH Hospital at infrastructure less district |                    |                   |                             |                   |         |
| B4, 1.6 | SDH |                    |                   |                             |                   |         |
| B4, 1.6.1 | Additional Building/ Major Upgradation of existing |                    |                   |                             |                   |         |</p>
<table>
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<td>Structure</td>
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<td>Repair/ Renovation</td>
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<td>Spillover of Ongoing Works</td>
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<td>Staff Quarters</td>
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<td>B 4.2</td>
<td>Strengthening of Districts, Sub Divisional Hospitals, CHCs, PHCs</td>
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<td>Sub Centre Rent and Contingencies</td>
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<td>B5</td>
<td>New Constructions</td>
<td>55,296.19</td>
<td>15,074.08</td>
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<td>B5. 1</td>
<td>CHCs</td>
<td>8,343.60</td>
<td>2,601.00</td>
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<td>B5. 1.1</td>
<td>New construction (to be initiated this year)</td>
<td>563,000.000.00</td>
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<td>2,601.00</td>
<td>2601.00</td>
<td>Approved 9 CHCs @ Rs. 578 lakhs per CHC as per the enlisted names. As per the State proposal, civil construction also includes residential quarters for Medical Officer(4 nos), Type 2 (6 nos) &amp; Type 1 (6 nos), tubewell, boundary wall, solar back up and Third party evaluation etc. As proposed 50% (i.e. Rs. 2601 lakhs) of the construction cost for 9 CHCs is being approved. The list of CHCs approved are as follows: 1- Dihdhuggapur - Dist Sultanpur 2- Khutar - Dist Sahjahanpur</td>
</tr>
<tr>
<td>FM R code</td>
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<td>5742,60,000.00</td>
<td>17</td>
<td>5,742.60</td>
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<td>Not Approved State first utilized the available fund and if required more, may be propose in supplementary PIP.</td>
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<td>PHCs</td>
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<td>New construction (to be initiated this year)</td>
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<td>35</td>
<td>2,712.50</td>
<td>387.50</td>
<td>An amount of Rs 387.50 lakhs (50% of total cost of Rs 775 Lakhs) is approved only for five PHC in HPDs @ Rs 155.00 Lakhs/PHC</td>
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<td>B5. 2.2</td>
<td>Carry forward of new construction initiated last year, or the year before</td>
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<td>SHCs/Sub Centres</td>
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<td>Carry forward of new construction initiated last year, or the year</td>
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<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<td>B5. 4</td>
<td>Setting up Infrastructure wing for Civil works</td>
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<td>107.50</td>
<td>77.63</td>
<td>Rs 77.63 lakhs approved for 18 positions. Vacant positions approved for 6 months. Refer to annexure for details. Increment approved separately.</td>
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<td>Staff at State level</td>
<td>97.3</td>
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<td>107.50</td>
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<td>Staff at District level</td>
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<td>Construction of BEmONC and CEmONC centres</td>
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<td>B5. 6.1</td>
<td>new SNCU/NBSU/NBCC to be initiated this year</td>
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<td>Carry forward /Spillover from previous year’s sanction for SNCU, NBSU, NBCC</td>
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<td>Additional requirement for SNCU, NBSU, NBCC</td>
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<td>Major civil works for operationalizati</td>
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<td>B.5 .8</td>
<td>Major civil works for operationalization of 24 hour services at PHCs</td>
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<td>Civil Works for Operationalising Infection Management &amp; Environment Plan at health facilities</td>
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<td>Infrastructure of Training Institutions --</td>
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<td>160.00</td>
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<td>Additional Building/ Major Upgradation of existing Structure</td>
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<tr>
<td>B.5 .10.1.2</td>
<td>Repair/ Renovation</td>
<td></td>
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<tr>
<td>B.5 .10.1.3</td>
<td>Spillover of Ongoing Works</td>
<td>40</td>
<td>160.00</td>
<td>160.00</td>
<td>Approved Rs 160.0 lakhs for minor repair renovation and refurbishment of 40 ANMTCs @ Rs 4.0 lakh per</td>
<td></td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
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<tr>
<td>B.5 .10. 1.4</td>
<td>Quarters and hostels/residential facilities</td>
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<td></td>
<td>ANMTCs subject to ensuring that all these ANMTCs to be repair and renovated strictly as per the gap analysis and the report on the same needs to be shared with GOI</td>
</tr>
<tr>
<td>B.5 .10. 2</td>
<td>New Training Institutions/School (Other than HR)</td>
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<tr>
<td>B.5 .10. 3</td>
<td>New construction (to be initiated this year)</td>
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<tr>
<td>B.5 .10. 4</td>
<td>Carry forward of new construction initiated last year, or the year before</td>
<td>1000 00,000.00</td>
<td></td>
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<tr>
<td>B.5 .11</td>
<td>SDH</td>
<td></td>
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<tr>
<td>B.5 .11. 1</td>
<td>New construction (to be initiated this year)</td>
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<tr>
<td>B.5 .11. 2</td>
<td>Carry forward of new construction initiated last year, or the year before</td>
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<tr>
<td>B.5 .12</td>
<td>DH</td>
<td>42,672.75</td>
<td>10,774.74</td>
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<tr>
<td>B5.</td>
<td>New</td>
<td>0.00</td>
<td></td>
<td>Not Approved</td>
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<td>FM R code</td>
<td>Budget Head</td>
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<tr>
<td>B5.13.1</td>
<td>Civil work of DEIC (RBSK)</td>
<td>1055,80,000.00</td>
<td>2</td>
<td>335.16</td>
<td>106.36</td>
<td>Rs 106.36 lakhs is approved (25% of cost) for Dist Jhansi@212.74 Lacs, Dist Unnao@212.68 Lacs. With conditionalities that DEICs are to be functionally and structurally integrated with MCH wing and SNCUs, thus location of DEICs as in case of Dist Jhansi and for Dist Unnao are to be in female hospitals and within the MCH wing complex of respective districts. DEIC in the campus of men hospitals is not approved.</td>
</tr>
<tr>
<td>B5.13.2</td>
<td>Carry forward of new construction initiated last year</td>
<td>2689,4,75,000.00</td>
<td>5</td>
<td>26,894.75</td>
<td>10774.74</td>
<td>Approved for Tanda and Sonebhadra remaining 60%.</td>
</tr>
<tr>
<td>B6.1</td>
<td>Human Resources</td>
<td>299.40</td>
<td>5.46</td>
<td>5.46</td>
<td>State has adopted the Clinical Establishment Act (CEA) in the year</td>
<td></td>
</tr>
<tr>
<td>B6</td>
<td>Implementation of Clinical Establishment Act</td>
<td>623.20</td>
<td>5.46</td>
<td>5.46</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
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<tr>
<th>FM R code</th>
<th>Budget Head</th>
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<tr>
<td>B6.2</td>
<td>Mobility Support</td>
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<td>B6.3</td>
<td>Training</td>
<td></td>
<td></td>
<td>193.50</td>
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<tr>
<td>B6.4</td>
<td>Others</td>
<td></td>
<td></td>
<td>130.30</td>
<td></td>
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<tr>
<td>B7</td>
<td>Health Action Plans (Including Block, Village)</td>
<td>50.00</td>
<td>50.00</td>
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<td>B7.1</td>
<td>State</td>
<td>76</td>
<td>50.00</td>
<td>50.00</td>
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<td>B7.2</td>
<td>District</td>
<td></td>
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<tr>
<td>B7.3</td>
<td>Block</td>
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<tr>
<td>B8</td>
<td>Panchayati Raj Institutions</td>
<td>124.40</td>
<td>37.40</td>
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</tr>
<tr>
<td>B8.1</td>
<td>Orientation of Community</td>
<td></td>
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</table>

2011. However the Rules under CEA have not yet been notified and the State is still in the process of formulating the Rules. Hence, Rs 5.46 lakhs is approved for the functioning of the State Unit.

Approved of HR at State level as follows:

2 State Coordinators @ 35,000 Rs pm for 6 months. 1.26 lakhs approved for outsourcing DEO cum administrative assistants on task basis to the extent possible.

Expenditure for 2 Computer & Printer @ 50000/computer & Printer, 6 meeting at State Level @ Rs 5000/meeting, 12 Workshops for dissemination & Capacity building @ Rs 50000/workshop and Rs 3 lakhs for Operational expenses to be met out of programme management cost approved under A.10
<table>
<thead>
<tr>
<th>FM R code</th>
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<th>Amount (In Lakhs)</th>
<th>Remarks</th>
</tr>
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<tbody>
<tr>
<td>B8.2</td>
<td>Orientation Workshops, Trainings and capacity building of PRI for RKS at District Health Societies, CHC and PHC</td>
<td>187.00</td>
<td>87.00</td>
<td>0.00</td>
<td>Not Approved</td>
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<tr>
<td>B8.3</td>
<td>Others</td>
<td>37.40</td>
<td>37.40</td>
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<tr>
<td>B8.3.1</td>
<td>VHSC Registers</td>
<td>150.00</td>
<td>24,935</td>
<td>37.40</td>
<td>37.40</td>
<td>Last year’s amount is kept committed. Approved for 24935 VHSC register @ 150 per register</td>
</tr>
<tr>
<td>B8.3.2</td>
<td>Registers for Sub Centres</td>
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<td>B8.3.3</td>
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<td>B8.3.4</td>
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<td>B8.3.5</td>
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<tr>
<td>B9.1</td>
<td>Mainstreaming of AYUSH</td>
<td>8,826.75</td>
<td>8,407.53</td>
<td></td>
<td></td>
<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to existing HR. Employer's contribution towards EPF, if applicable, has been approved under A.10.8.5.</td>
</tr>
<tr>
<td>B9.1.1</td>
<td>Medical Officers at CHCs/ PHCs</td>
<td>7,481.04</td>
<td>6,799.16</td>
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<td>FM R Code</td>
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<tr>
<td>B.9 .1.1</td>
<td>DH</td>
<td>23</td>
<td>3</td>
<td>852.7</td>
<td>6,799.16</td>
<td>Approved for 2044 existing Medical Officers (AYUSH) @ Rs 27,720 pm for 12 months. Increment approved separately.</td>
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<td>B.9 .1.2</td>
<td>FRUs</td>
<td>27</td>
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<td>995.5</td>
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<tr>
<td>B.9 .1.3</td>
<td>Non FRU SDH/CHC</td>
<td>72</td>
<td>9</td>
<td>2,668.14</td>
<td>6,799.16</td>
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<td>B.9 .1.4</td>
<td>24 X 7 PHC</td>
<td>57</td>
<td>0</td>
<td>2,086.20</td>
<td>6,799.16</td>
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<tr>
<td>B.9 .1.5</td>
<td>Non- 24 X 7 PHCs/ APHCs</td>
<td>24</td>
<td>0</td>
<td>878.40</td>
<td>6,799.16</td>
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<tr>
<td>B.9 .2</td>
<td>Other Staff Nurses and Supervisory Nurses/ AYUSH pharmacists (Only AYUSH)</td>
<td></td>
<td></td>
<td>1,047.26</td>
<td>6,799.16</td>
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<td>B.9 .2.1</td>
<td>DH</td>
<td>98</td>
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<td>134.48</td>
<td>6,799.16</td>
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<td>B.9 .2.2</td>
<td>FRUs</td>
<td>10</td>
<td>7</td>
<td>146.83</td>
<td>6,799.16</td>
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<td>B.9 .2.3</td>
<td>Non FRU SDH/CHC</td>
<td>30</td>
<td>4</td>
<td>417.15</td>
<td>6,799.16</td>
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<td>B.9 .2.4</td>
<td>24 X 7 PHC</td>
<td>20</td>
<td>3</td>
<td>278.56</td>
<td>6,799.16</td>
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<td>B.9 .2.5</td>
<td>Non- 24 X 7 PHCs</td>
<td>47</td>
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<td>64.49</td>
<td>6,799.16</td>
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<td>B.9 .2.6</td>
<td>Other</td>
<td>5,76, 1</td>
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<td>5.76</td>
<td>5.83</td>
<td>Approved as follows: a) 2 Panchkarma Technicians @ Rs</td>
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<tr>
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<td>B9. 3</td>
<td>Other Activities (Excluding HR)</td>
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<td>298.46</td>
<td>655.76</td>
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<td>B9. 3.1</td>
<td>Contingency</td>
<td>20,000.00</td>
<td>84</td>
<td>16.80</td>
<td>16.80</td>
<td>Rs 16.80 lakhs Approved @ Rs 20000 for 85 AYUSH wings.</td>
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<td>B9. 3.2</td>
<td>IEC/BCC Activities for Promotion of AYUSH</td>
<td>34,15,500.00</td>
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<td>34.16</td>
<td>34.16</td>
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<td>B9. 3.3</td>
<td>Establishment of Panchkarma Unit</td>
<td>5,000,000.00</td>
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<td>7.50</td>
<td>7.50</td>
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<td>B9. 3.4</td>
<td>Construction of AYUSH Wing</td>
<td>30,000.00</td>
<td>8</td>
<td>240.00</td>
<td>210.00</td>
<td>An amount of Rs. 210 Lacs is approved for the establishment of 7 AYUSH wings (Azamgarh, Ballia, G.B Nagar, Gazipur, Kasganj, Shamli and Shrawasti) @ Rs.30 Lacs/AYUSH Wing at district male / combined hospitals each at Azamgarh, Ballia, G.B Nagar, Gazipur, Kasganj, Shamli and Shrawasti.</td>
</tr>
<tr>
<td>B9. 4</td>
<td>Training</td>
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<td>387.30</td>
<td>HR increment calculated @ 5% for above approvals</td>
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<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<tr>
<td>B1 0</td>
<td>IEC-BCC NRHM</td>
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<td>9,656.76</td>
<td>Approved for 1 IEC Specialist cum consultant @ Rs 50,000 pm and 1 Programme Assistant @ Rs 21,000 pm for 12 months. Increment approved separately. State to ensure that both the positions approved should be working as part of NHM SPMU and not State IEC Bureau. Approved for Programme Management cost for logistics @ Rs 20,000 pm.</td>
</tr>
<tr>
<td>B.1 0.1</td>
<td>Strengthening of BCC/IEC Bureaus (state and district levels)</td>
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<td></td>
<td></td>
<td>10.92</td>
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<tr>
<td>B.1 0.2</td>
<td>Development of State Communication strategy (comprising of district plans)</td>
<td></td>
<td></td>
<td>351.3</td>
<td>345.38</td>
<td>Approved for: 1) Rs.300 lakhs as a conditional sanction to all documentation and impact assessment through third party as per procurement and financial rules of NHM. 2) Capacity Building of all District and Block level IEC/BCC Nodal Officers, Total Budget- Rs 39.38. 3) Rs.6.00 lacs (50%) for Quarterly News Letter on RMNCH+A @ Rs.15/-</td>
</tr>
<tr>
<td>B.1 0.3</td>
<td>Implementation of BCC/IEC strategy</td>
<td></td>
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<tr>
<td>B.1 0.3.1</td>
<td>BCC/IEC activities for MH</td>
<td></td>
<td></td>
<td></td>
<td>1,393.48</td>
<td>Approved for: 1) 3 Press advt. for IWD, Safe Motherhood day and one advt. on Maternal week campaign at state level @ RS 6.50 lakh/and for all editions of popular news paper size: 16X25 cm on DAVP Rates Total-Rs.19.50 lacs. 2) Telecast of film @Rs.7500/-per 15 minutes episode twice a week for 50 weeks = Rs.8.625</td>
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<tr>
<td>B.1 0.3.1.1</td>
<td>Media Mix of Mid Media/ Mass Media</td>
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<td>FM R code</td>
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<tr>
<td>B.1 0.3. 1.2</td>
<td>Inter Personal Communication</td>
<td>-</td>
<td>20.00</td>
<td></td>
<td></td>
<td>Not approved</td>
</tr>
<tr>
<td>B.1 0.3. 2</td>
<td>BCC/IEC activities for CH</td>
<td>2,701.05</td>
<td>1,449.72</td>
<td></td>
<td></td>
<td>Approved for: 1) 4 Press ad (New born care week and Breast feeding day, Diarohhea managmnet day, other as per need) at state level @ Rs.6.50 lakh/ad in all editions of popular news paper on DAVP Rates, size: 16X25 cm Total-Rs 26.00 Lacs. 2) WORKSHOPS for BF week &amp; New Born Care week not approved, Rs.40 lakhs approved for miking and sessions with breastfeeding mothers at facilities etc. 3) Rs.100 lakhs for IDCF IEC across all districts Condition to State specifying the activities that will be carried out. 4) The proposed mass media on new born not approved. 5) Rs.1323.72 lakhs for 4 rounds of MI Condition to State specifying the activities that will be carried out. 6) Banners not approved</td>
</tr>
<tr>
<td>B.1 0.3. 2.1</td>
<td>Media Mix of Mid Media/ Mass Media</td>
<td>-</td>
<td>2701.054</td>
<td>1,449.72</td>
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<tr>
<td>B.1 0.3. 2.2</td>
<td>Inter Personal Communication</td>
<td>-</td>
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<tr>
<td>FM R code</td>
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</tbody>
</table>
| B.1 0.3.3 | BCC/IEC activities for FP | 1,327.51 | - | 1,191.82 | Approved for: | 1) 2 Press advt. (one on WPD and One on NSV Day) at state level @ RS 6.50 lakh /ad in all editions of popular newspapers on DAVP, Rates, size: 16X25 cm (Total budget-Rs 13 lacs) + One advt. each month for 12 months on family planning messaging@Rs.6.00lacsx12=Rs.72.00 lacs.  
2) 2 posters for RMNCH+A Counseling Center (2 type-limiting and spacing methods) for 290 centers in state @Rs 30/poster Total- Rs.0.17 lacs,  
3) Rs. 100 lakhs for wall paintings as per plan submitted by State,  
4) Family Planning related messages on 82489320 Unreserved tickets of N &E Railway® 4 paisa/ticket. Total-Rs. 33.00 lakhs.  
5) Media campaign through Digital Cinema slides in 46 theatres, Total Budget- Rs 59.02 lakhs.  
6) Rs.165.09 lakhs for re-appropriation for utilization of Bus panels for IEC.  
6) Comprehensive Safe Abortion Campaign-Kalyani Posters@Rs.10/-x11250=Rs.1.13 lacs.  
7)Technical Posters(MVA Steps etc.)@Rs12/-per poster for 11250 posters=Rs.1.35 lacs.  
8) Family Planning mass media campaign through AIR, DD and Pvt FM Radio spots per day for 180 days-Rs.759.78 lakhs as per media plan |
<p>| B.1 0.3.3.1 | Media Mix of Mid Media/ Mass Media | - | 1185.274 | 1,074.42 | | |</p>
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
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<th>Remarks</th>
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<tr>
<td>B.1 0.3. 3.2</td>
<td>Inter Personal Communication</td>
<td>142.2</td>
<td>1</td>
<td>117.40</td>
<td>Approved for: 1) folk shows in 460 blocks of 42 high TFR Districts, 1840 shows per block @Rs.6100/-per show=Rs112.24 lacs. 2) Rs. 5 lakhs for pamphlets to be distribute along the folk show. Kit not approved.</td>
<td>submitted by State. 9) Glow Sign, size 4x6ft @180 square fit for 1000 hospitals part of 'Hausla Sajhedaari' PPP activity for Family Planning @Rs.1500/glow board + 5% admin cost for hiring agency to develop as well as install the boards.. 10) Set of 6 posters on FP Methods for all 4429 DHs, CHCs and PHCs@Rs.30=Rs.7.97 11) Stencil for new logo of Family Planning 900 pieces@Rs.500 Rs.4.50 lacs. State to note that all FP material has to be as per the new FP2020 Campaign material.</td>
<td></td>
</tr>
<tr>
<td>B.1 0.3. 4</td>
<td>BCC/IEC activities for AH/ Rashtriya Kishore Swasthya Karyakram</td>
<td>36.50</td>
<td>36.50</td>
<td>36.50</td>
<td>Approved for: 1)1 press ad on NDD Day , 1 advt. on RBSK and 3 RKSK advt. on Anemia, MHM &amp; AFHS Clinic @ Rs 6.50 lakh/ad in all popular news papers, Total Budget-Rs.32.50 lacs condition to state specifying the NUMBER of news papers. 2) National De Worming Campaign (two rounds)-(radio/tv spots, newspaper apeal@Rs.4.00 lacs, 3) State Launch &amp; Press Conference on NDD@Rs.3.90 lacs for 2 rounds</td>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td>B.1 0.3.4.2</td>
<td>Inter Personal Communication</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Budget to be revalidated.</td>
<td></td>
</tr>
<tr>
<td>B.1 0.3.5</td>
<td>Creating awareness on declining sex ratio issue (PNDT)</td>
<td></td>
<td></td>
<td>98</td>
<td>198.2 4</td>
<td>94.74</td>
<td>Approved for 1) Rs.2.74 lakhs - 2 posters for all Sub centers (5473) in state @Rs 50/- . 2) Rs.92 lakhs - Awareness campaign on Girl child day (24th Jan.) at State/district and block @Rs 92 lakh @ Rs.1 lakh at State, Rs.50000 at Divisional level and Rs.10000/block.</td>
</tr>
<tr>
<td>B. 10.4</td>
<td>Interpersonal Communication Tools for the frontline health workers</td>
<td></td>
<td></td>
<td>-</td>
<td>209.2 9</td>
<td>31.79</td>
<td>Approved only for the VHND protocol posters as Set of 10 posters for 6953 sub centers and selective set of 4 posters (out of 10) for 1975580 Session sites in 25 HPDs @Rs.9.5 per poster for total 69530 poster for sub centers and 220177 posters for session sites(total-289707 poster @Rs.31.79 lacs. The flipbook not approved as State should first utilize the available funds first.</td>
</tr>
<tr>
<td>B.1 0.5</td>
<td>Targetting Naturally Occuring Gathering of People/ Health Mela</td>
<td></td>
<td></td>
<td>0</td>
<td>117.5</td>
<td>99.25</td>
<td>Approved as 1) Rs.1 lakh/divisional HQ + Rs.1.25 lakhs/distt for Set of one Kanopie with 10 standeez for exhibition stalls at the local level + Rs.10 lakhs at State level for major mahotsav viz. Taj mahotsav, Kumbh mela etc.</td>
</tr>
<tr>
<td>B. 10.6</td>
<td>Others</td>
<td></td>
<td></td>
<td>2,513.34</td>
<td>2,342.7 9</td>
<td></td>
<td>Approved as under: 1) Rs. 150.00 lakh for NDD to be revalidated. 2) Rs. 2 lakhs for website <a href="http://www.iecrmncha.in">www.iecrmncha.in</a>, used to provide IEC material to all districts at any given time.</td>
</tr>
<tr>
<td>B.1 0.6.1</td>
<td>Innovative IEC/ BCC Strategies</td>
<td></td>
<td></td>
<td>0</td>
<td>2511.34</td>
<td>2,340.7 9</td>
<td></td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
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<td>3) Kayakalp set of 10 Posters with mounting &amp; installation for 157 DHs and 189 FRU CHCs and (24X7) 369 PHCs total 715 facility and 10 sets for state @ Rs.1000x10x725 =Total Rs.72.50 lacs.</td>
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<td>4) Rs.1504.79 lakhs as the difference amount of Facility Branding (cost including documentation and service tax) Approval now stands as 192 L3 facilities @ Rs.2.87 lakhs and 093 @ facilities @ Rs.2.03 lakhs.</td>
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<td>5) Rs. 3 lakhs for Monthly Media Briefing workshops to share updates and new initiatives on RMNCH+A at state level @Rs.25000/-per workshop for 12 months. And</td>
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<td>6) Rs.758.50 lakhs for IEC component of the Q+ (Rs. 301.00 lakhs) and 7+ (Rs. 457.50 lakhs) for Health Facility branding. Facility branding as well as Q+ &amp; 7+ activities approved condition to the fact that they will be at the high case load facilities where all services are being provisioned. Proposal of IEC under for Q+ Strategy is Shifted from B.18.3 and 7+ Strategy is shifted from B.18.4.</td>
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<thead>
<tr>
<th>B. 10. 6.2</th>
<th>Mobile based IEC/ BCC Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. 10. 6.3</td>
<td>District IEC/ BCC/ Engagement of Youth through Social Media</td>
</tr>
</tbody>
</table>
| B. 10. 6.4 | Monitoring of IEC/ BCC Activities | 0 | 2.00 | 2.00 | Approved for Quarterly Monitoring and review workshop at State level Quarterly Monitoring Workshop @
<table>
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<tr>
<th>Code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>B.1 0.7</td>
<td>Printing activities (please specify)</td>
<td>-</td>
<td>3,062.82</td>
<td>2,660.37</td>
<td>Rs.50000x4=Rs.2.00 lakhs</td>
<td></td>
</tr>
<tr>
<td>B.1 0.7.1</td>
<td>Printing of MCP cards, safe motherhood booklets etc</td>
<td>62,36,820</td>
<td>1,871.05</td>
<td>1,871.05</td>
<td>Approved Rs 1871.05 lakhs for Printing of 62,36,820 MCP cards@Rs.10/-per card, and printing of 62,36,820 Safe motherhood booklets @Rs. 20/- per booklet subject to ensuring that</td>
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<tr>
<td>B.1 0.7.2</td>
<td>Printing of WIFS cards etc</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>Rs. 45 Lakhs revalidated for printing of 15 lakhs WIFS card @ Rs 3 each. State to ensure availability of funds</td>
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<tr>
<td>B.1 0.7.3</td>
<td>Printing of IUCD cards, FP manuals, guidelines etc</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>B.1 0.7.4</td>
<td>Other printing</td>
<td>-</td>
<td>1,191.77</td>
<td>789.33</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>B.1 0.7.4.1</td>
<td>Printing of compliance cards for National Iron Plus Initiative</td>
<td>-</td>
<td>812.56</td>
<td>546.59</td>
<td>Approved as bellow: 1. Approved Rs 28000 per block (Total 1640 Blocks) for printing of -IEC Material, Poster, Banner and Teaching and Community Hand bills/ pamphlets. This is approved for two rounds (1640*0.28= 459.20 Lakhs) Approved for 4400 Flipcharts @ Rs. 200 per flipchart Rs. 8.8 Lakh; 385869 AWW and Teacher handouts @ Rs. 7 per hand out for 2 round Rs. 54.0 lakh and 160175 ASHA hand out @ Rs. 2.00 per hand out for 2 round Rs. 6.41 lakh. Total amount to be added is Rs 69.21 Lakh. 2. Rs.18.178 lakhs approved for printing of NIPI Card @ Re.1 per card for 1817825 children.</td>
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<td>FM R code</td>
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<td>Quantity / Target</td>
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<tr>
<td>B.1 0.7.4.2</td>
<td>AFHC cards</td>
<td>1.05,783</td>
<td>1.05,783</td>
<td>22.05</td>
<td>14.21</td>
<td>Approved 2000 AFHC cards per facility per year @ Re 0.5 each and 3 registers per facility per year for 980 AFHCs @ Rs 150 each.</td>
</tr>
</tbody>
</table>
| B.1 0.7.4.3 | Printing of RBSK card and registers | 1.799          | 1.799             | 131.21                       | 128.10            | Rs 103.5 lakhs is approved for printing of 59500 registers of 0-6 years, 44000 registers of 6-18 years @ Rs 100 per registers. Each register contains 500 records. State to follow RBSK job aids for register format. Rs 24.6 lakhs is approved for incidental printing at block level @ Rs 3000 per block for 820 blocks. Expenditure is as per actual. Note: Rs 876.83 lakhs was approved in FY 2015-16 and Rs 1201 lakhs in FY 2014-15. Of this Rs 614.58 lakhs is revalidated in FY 2016-17. State has to print RBSK screening format - 29728235 formats for 0-6 years (as per census 2011, 0-6 population) @ Rs 1.2 per format, 21962466 formats for 6-18 years enrolled in Govt and Govt aided schools @ Rs 0-75 per format, 15000 Delivery point formats @ Rs 1.5 per format, procedure and costing manual, MIS manual and RBSK EDL. Conditionality State to follow only RBSK guidelines for printing. Expenditure is as per actuals. Note: State has approval of Rs 1201 lakhs in FY 2014-15 for 595 lakhs cards of 0-6 years for twice a year screening @ Rs 1 per card and 220 lakhs cards for 6-18 years once a year screening @ Rs 0.50 per card and 1.63 lakhs registers with 500 records each @
<table>
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<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
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<tr>
<td></td>
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<td>Rs 250 per register, 4000 sets of participant manual job aids, procedure and costing manual, MIS manual and RBSK EDL @ Rs 1200 per set. Rs 5000 per block are approved for printing at local level. State also has Committed unspent amount of Rs 90 lakhs of FY 2013-14. Committed unspent amounts to be used.</td>
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<tr>
<td>B.1 0.7. 4.4</td>
<td>Printing cost for DEIC</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>B.1 0.7. 4.5</td>
<td>IEC/BCC for Routine Immunization</td>
<td>1</td>
<td>225.9 5</td>
<td>100.00</td>
<td>Approved for various posters, State to negotiate rate contract.</td>
<td></td>
</tr>
<tr>
<td>B1 1</td>
<td>National Mobile Medical Units (Including recurring expenditures)</td>
<td></td>
<td>108.0 0</td>
<td>45.22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1 1.1. 1</td>
<td>Capex</td>
<td></td>
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<tr>
<td>B1 1.2</td>
<td>National Mobile Medical Vans (smaller vehicles) and specialised Mobile Medical Units</td>
<td></td>
<td>108.0 0</td>
<td>45.22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1 1.2. 5</td>
<td>Others</td>
<td>18</td>
<td>108.0 0</td>
<td>45.22</td>
<td>An Amount of Rs 45.22 Lakhs Approved as per the blood cell annexure</td>
<td></td>
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<tr>
<td>B1 1.2.</td>
<td>Mobile Medical Vans (Smaller</td>
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<td>FM R code</td>
<td>Budget Head</td>
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<td>5.1</td>
<td>Vehicles)</td>
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<tr>
<td>B1 2</td>
<td>National Ambulance Service</td>
<td></td>
<td>39,60 6.04</td>
<td>29,764.01</td>
<td></td>
<td></td>
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<tr>
<td>B1 2.1</td>
<td>Ambulance/EM RI Capex</td>
<td></td>
<td></td>
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<tr>
<td>B1 2.1.1</td>
<td>State basic ambulance/ 102 Capex</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>B1 2.2</td>
<td>Operating Cost /Opex for ambulance</td>
<td></td>
<td>33,26 4.00</td>
<td>29,764.01</td>
<td></td>
<td>Approved operational cost for running 2472 ambulances @ Rs. 1 Lakh/month, (which is all inclusive) with following conditionalities: 1- Availability of round the clock trained EMT 2- All equipment in functional state, including drugs and emergency tray 3- Monthly certification on operational status of ambulance by district Anaesthetist/surgeon 4- Servicing log book of the vehicle should be available with each vehicle along with updated information on last servicing as per company norms 5- Clauses for deduction of operational cost if any ambulance is found running with non-functional equipment, untrained technician (not knowing the protocols) and poorly maintained vehicle.</td>
</tr>
<tr>
<td>B1 2.2.1</td>
<td>State basic ambulance/102 Opex</td>
<td>396. 00</td>
<td>84, 00, 00</td>
<td>33,26 4.00</td>
<td>29664</td>
<td></td>
</tr>
<tr>
<td>B1 2.2.9</td>
<td>Others</td>
<td></td>
<td>6,342. 04</td>
<td>100.01</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1 2.2</td>
<td>Third Party concurrent</td>
<td>189. 1</td>
<td>189.9</td>
<td>90.75</td>
<td></td>
<td>Approved an amount of Rs 90.75 Lakhs with 10% increment.</td>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<tr>
<td>9.1</td>
<td>evaluation of 102 and 108</td>
<td>94,00,000.00</td>
<td>4</td>
<td>94,00,000.00</td>
<td>4</td>
<td>State needs to provide the evaluation report for the verification</td>
</tr>
<tr>
<td>B1 2.2. 9.2</td>
<td>Monitoring cell for 102 and 108</td>
<td>-</td>
<td>2</td>
<td>9.60</td>
<td>8.82</td>
<td>Approved for 2 IT Consultants @ Rs 36,750 pm for 12 months. Increment approved separately.</td>
</tr>
<tr>
<td>B1 2.2. 9.3</td>
<td>Cardiac Ambulances - Capex ( B 18.3 in FY 2014-15)</td>
<td>-</td>
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<tr>
<td>B1 2.2. 9.4</td>
<td>Cardiac Ambulances - Opex ( B 18.3 in FY 2014-15)</td>
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<td>B1 2.2. 9.5</td>
<td>Maintenance Of Up Ambulance Seva Vehicles</td>
<td>-</td>
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<tr>
<td>B1 2.2. 9.6</td>
<td>Pool ambulance- Capex</td>
<td>9,55,000.00</td>
<td>15 0</td>
<td>1,432.50</td>
<td>0.00</td>
<td>Not approved</td>
</tr>
<tr>
<td>B1 2.2. 9.7</td>
<td>Pool ambulance- Opex</td>
<td>5,40,000.00</td>
<td>15 0</td>
<td>810.00</td>
<td>0.00</td>
<td>Not approved</td>
</tr>
<tr>
<td>B1 2.2. 9.8</td>
<td>Project Management Unit for 102 &amp; 108</td>
<td>-</td>
<td>1</td>
<td>600.00</td>
<td>0.00</td>
<td>Not Approved State is suggested to strengthen their own program management cell and drive the existing district units, utilizing the DPMs, BPMs, DCMs, BCMs and other such managerial staff to regularly monitor the ambulance plying their area with a uniform checklist and regular reporting to district and state.</td>
</tr>
<tr>
<td>B1 2.2. 9.9</td>
<td>First Responder Services(Capex)</td>
<td>1,000.00</td>
<td>0.00</td>
<td>1,000.00</td>
<td>0.00</td>
<td>Pended</td>
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<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<tr>
<td>B1 2.2.9.10</td>
<td>First Responder Services (Oapex)</td>
<td>87</td>
<td>2,300.00</td>
<td>0.00</td>
<td>0.44</td>
<td>HR increment calculated @ 5% for above approvals</td>
</tr>
<tr>
<td>B1 3</td>
<td>PPP/ NGOs</td>
<td></td>
<td></td>
<td></td>
<td>2,235.5</td>
<td></td>
</tr>
<tr>
<td>B1 3.1</td>
<td>Non governmental providers of health care RMPs</td>
<td></td>
<td></td>
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<tr>
<td>B1 3.2</td>
<td>Public Private Partnerships (Out Sourcing set up, if applicable for State, to be budgeted under this head)</td>
<td></td>
<td></td>
<td>14,910.60</td>
<td>795.47</td>
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<tr>
<td>B1 3.2.1</td>
<td>Merrygold Health Network – A initiative for Improving Family planning through Private Health Facilities</td>
<td>1</td>
<td>357.75</td>
<td>357.75</td>
<td>Rs. 357.75 is approved. State to note that only GoI guidelines and manuals to be printed under the printing head. State to also note that FP logo to be put under branding of hospitals. The organization has to periodically submit the details and progress to State NHM.</td>
<td></td>
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<tr>
<td>B1 3.2.2</td>
<td>Engaging Private Providers For Family Planning</td>
<td>1</td>
<td>384.50</td>
<td>384.50</td>
<td>Rs. 384.5 lakh is approved. Rs. 6.65 lakh for training and QA expenses; Rs. 339 lakh for BCC and program activities; Rs. 6 lakh for administrative expenses and Rs. 3.95 lakh for institutional development. The organization has to periodically submit</td>
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<td>FM R code</td>
<td>Budget Head</td>
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<tr>
<td>B1 3.2.3</td>
<td>Enhanced Private Sector Participation in Family Planning to Contribute to FP2020 Goals</td>
<td>81.36</td>
<td>1</td>
<td>53.22</td>
<td></td>
<td>Rs. 53.22 lakh is approved. 1- Rs. 10.08 lakh is approved for personnel cost (New position of account officer is not approved). 2- Rs. 4.3 lakh is approved for infrastructure support (Rs. 6 lakh for laptop purchase is not approved), 3- Rs. 33.5 lakh is approved for promotion of scheme (For Refresher cum standardization workshop Rs. 22.5 lakh is approved as per last year's approval), 4- Rs. 50000 as a contingency cost and 5- Rs. 4.8 lakh is approved as a management cost to SIFSA. 6- Rs. 7 lakh for felicitation of champions is not approved and Rs. 4 lakh for monitoring and supervision is not approved</td>
</tr>
<tr>
<td>B1 3.2.4</td>
<td>Expansion of mSehat scheme in another ten districts of Uttar Pradesh</td>
<td>4,000.00</td>
<td>10</td>
<td>0.00</td>
<td></td>
<td>Not approved</td>
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<tr>
<td>B1 3.2.5</td>
<td>Capacity Building of Service Providers on new contraceptives</td>
<td>105.35</td>
<td>1</td>
<td>0.00</td>
<td></td>
<td>Budget shifted to A.9.6.9</td>
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<td>B1 3.2.6</td>
<td>Helpline for Confidential Family Planning Counselling</td>
<td>313.35</td>
<td>1</td>
<td>0.00</td>
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<td>B1 3.2.7</td>
<td>Operationalization of Newly</td>
<td>9,668.00</td>
<td></td>
<td>0.00</td>
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<td>7</td>
<td>Constructed MCH Wings in PPP Mode</td>
<td></td>
<td>29</td>
<td></td>
<td></td>
<td>Not approved</td>
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<tr>
<td>B1 3.3</td>
<td>NGO Programme/ Grant in Aid to NGO</td>
<td></td>
<td>1</td>
<td>1,445.04</td>
<td>1,440.09</td>
<td></td>
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<tr>
<td>B1 3.3.1</td>
<td>Social Mobilization Net. Transition Plan- Routine Immunization</td>
<td></td>
<td>1</td>
<td>1,440.09</td>
<td>1,440.09</td>
<td>Approved as per the minutes and the clarification given by UNICEF.</td>
</tr>
<tr>
<td>B1 3.3.2</td>
<td></td>
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<tr>
<td>B1 3.3.3</td>
<td>Innovative Communication for FP</td>
<td>7,50 0.00</td>
<td>29</td>
<td>4.95</td>
<td>0.00</td>
<td>Not approved</td>
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<tr>
<td>B1 4</td>
<td>Innovations (if any)</td>
<td></td>
<td></td>
<td></td>
<td>22,33 2.64</td>
<td></td>
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<td>B1 4.1</td>
<td>Intersectoral convergence</td>
<td></td>
<td></td>
<td></td>
<td>13,234.60</td>
<td></td>
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<tr>
<td>B1 4.2</td>
<td>Setting up Paediatric ICU (10 bedded) in Lucknow at Dr. Shayma Prasad Mukharjee Hospital</td>
<td></td>
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<tr>
<td>B1 4.3</td>
<td>Free Diagnosis and treatments of patients with Hemophilia</td>
<td>3602 15,000.0 0 0</td>
<td>1</td>
<td>2,892.87</td>
<td>1850.65</td>
<td>An amount of Rs 1850.66 lakhs is Approved as bellow: 1- Rs 1800 lakhs for Hemophilia patient treatment at 25 hemophilia treatment centres 2- Rs 45 lakhs for Hemophilia Diagnosis at SGPGI, Lko and HTC</td>
</tr>
<tr>
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<td></td>
<td>3- Rs 5.67 lakhs for HR at Hemophilia care centre at KGMU as follows:</td>
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<td></td>
<td>1 Junior Resident @ Rs 41,900 pm, 1 Physiotherapist @ Rs 20,000 pm, 1</td>
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<td></td>
<td>Counsellor @ Rs 12,000 pm for 6 months. Position of DEO &amp; Attendant not</td>
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<td></td>
<td>approved. Lumpsum amount of Rs 1.23 lakhs approved for outsourcing staff.</td>
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<tr>
<td>B1 4.4</td>
<td>Free diagnosis and treatment of Thalassemic patients</td>
<td>500,00,0000</td>
<td>1</td>
<td>500.00</td>
<td>500.00</td>
<td>Approved</td>
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<tr>
<td>B1 4.5</td>
<td>Establishing “Demonstration &amp; Cross Learning Centres for Routine Immunization” in 22 districts of Uttar Pradesh</td>
<td></td>
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<tr>
<td>B1 4.6</td>
<td>Religious and Community Leaders Meet</td>
<td>10,00,0000</td>
<td>75</td>
<td>7.50</td>
<td>7.50</td>
<td>An amount of Rs 7.5 Lakhs is approved @ Rs 10000 per district for Religious and Community Leaders Meet under the leadership of DM.</td>
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<tr>
<td>B1 4.7</td>
<td>Additional incentive schemes for service providers in HPD</td>
<td></td>
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<td>B1 4.8</td>
<td>Scale up of “My Village My Home” for tracking of immunization</td>
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<td>B1 4.9</td>
<td>beneficiaries in 08 districts of Uttar Pradesh</td>
<td>4.9</td>
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<tr>
<td>B1 4.1 0</td>
<td>Piloting of solar photo voltaic systems</td>
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<tr>
<td>B1 4.1 1</td>
<td>Establishment of Divisional Monitoring &amp; Evaluation Hub (M&amp;E Hub)</td>
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<tr>
<td>B1 4.1 2</td>
<td>Rogi Sahayata Kendra</td>
<td>7,00,000.00</td>
<td>50</td>
<td>346.20</td>
<td>332.10</td>
<td>Approved Rs 332.1 Lakhs @ Rs 664200/RSK for 50 RSK with the increment of 5% in HR cost</td>
</tr>
<tr>
<td>B1 4.1 3</td>
<td>AAA Platform - Monitoring &amp; Microplanning meeting for frontline workers</td>
<td>600.00</td>
<td>1.25</td>
<td>1,128.38</td>
<td>1101.37</td>
<td>Approved @ 900*122375</td>
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<td>B1 4.1 4</td>
<td>Facility mapping for Non-HPDs</td>
<td></td>
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<td>B1 4.1 5</td>
<td>Establishment of Data Management and Analysis Unit</td>
<td></td>
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<td>B1 4.1 6</td>
<td>Administering Case Sheets for Institutional Deliveries at Govt. Facilities in UP</td>
<td></td>
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<td>B1 4.1 6</td>
<td>Quarterly RMNCH+A state level</td>
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<tr>
<td>B1 4.1 7</td>
<td>Internal Mentoring Programme in High Case Load Facilities (L3) in HPDs</td>
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<tr>
<td>B1 4.1 8</td>
<td>Contact Centre (UPHHL) for Performance Management and Grievance Redressal in Uttar Pradesh</td>
<td>1</td>
<td>405.46</td>
<td>0.00</td>
<td>Not approved</td>
<td></td>
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<tr>
<td>B1 4.1 9</td>
<td>Nurse Mentor Programme and Establishment of Mini Skill Lab</td>
<td>-</td>
<td>1,767.64</td>
<td>360.00</td>
<td>Approved for 100 Nurse Mentors @ Rs 40,000 pm - 50 posts for 12 months and 50 vacant posts for 6 months. Increment has been approved separately.</td>
<td></td>
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<tr>
<td>B1 4.2 0</td>
<td>Interactive Voice Response System (IVRS) based Maternal Death Review (MDR) Monitoring System</td>
<td></td>
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<tr>
<td>B1 4.2 1</td>
<td>Establishment of Comprehensive Family Planning Training Centres in Uttar Pradesh</td>
<td></td>
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<tr>
<td>B1</td>
<td>Training</td>
<td></td>
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<td>Approved as per bellow:</td>
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<td>FM R code</td>
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<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<tr>
<td>4.22</td>
<td>Strategy for Village Health and Nutrition Days (VHNDs)</td>
<td></td>
<td>475.51</td>
<td>475.51</td>
<td></td>
<td>Rs. 2.8 lakhs for printing of VHND tally sheet including 10% wastage, cost of printing monitoring format @0.50 paisa/format for 20% of sessions and cost of session monitoring @100/session. for all 399927 VHND sessions</td>
</tr>
<tr>
<td>B1 4.23</td>
<td>Transfusion Support to patients with blood disorder and prevention programmes</td>
<td></td>
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<tr>
<td>B1 4.24</td>
<td>E-Blood Banking</td>
<td>2</td>
<td>200.21</td>
<td>130.00</td>
<td></td>
<td>Rs 90 lakhs approved for e-blood banking infrastructure for 47 blood banks only and Rs 40 lakhs approved for SGPGI project.</td>
</tr>
<tr>
<td>B1 4.25</td>
<td>Free Transport Facilities to PLHIV(People Living with HIV) for treatment</td>
<td>1,3500</td>
<td>750.00</td>
<td>750.00</td>
<td></td>
<td>Approved @ Rs100/ patient/visit</td>
</tr>
<tr>
<td>B1 4.26</td>
<td>Establishing Shelter Homes for HIV infected orphan children</td>
<td></td>
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<tr>
<td>B1 4.27</td>
<td>National Programme for Prevention and Control of Flurosis(NPPC F)</td>
<td>1</td>
<td>485.04</td>
<td>00</td>
<td></td>
<td>Budget shifted in B.29</td>
</tr>
<tr>
<td>B1 4.28</td>
<td></td>
<td>-</td>
<td>399.22</td>
<td>389.22</td>
<td></td>
<td>Approved - a) HR: 29 mid-level services provide (GNM) @ Rs 20000/month &amp; Rs 15000 PI, 29 MPW/BHW Rs. 15000 /</td>
</tr>
<tr>
<td>FMR code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<td></td>
<td>Comprehensive Primary Health Care – District-Shrawasti-Block-Srisia</td>
<td></td>
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<td></td>
<td>month and Add. Salary for exiting 38 ANM (For additional task envisaged) 20% of salary (max 3600/month) b) Training- Rs 29 lakhs for Bridge course and Multiskilling c) Rs 11.02 lakhs for IEC d) Infrastructure strengthening for SCs - 12 SCs (Delivery points) @ Rs. 5 L and for 17 SHC (non delivery points) @ Rs. 1L. e) Infrastructure strengthening @ Rs. 2L for 3 PHCs f) Infrastructure strengthening @ Rs. 3 L for 1 CHC State has also proposed for additonal activities (overall budget is less than the cost norms) g) 2 days oreintation cum training of FLWs h) Health cards@ 10 per individual i) Computer j) Incentive for data entry operator @ Rs. 2000 pm.</td>
</tr>
<tr>
<td>B1 4.29</td>
<td>Kayakalp Award</td>
<td>1</td>
<td>608.78</td>
<td>608.78</td>
<td>Rs. 608 Lakhs approved with conditionality – State document and share the improvement and best practices observed during implementing kayakalp scheme.</td>
<td></td>
</tr>
<tr>
<td>B1 4.30</td>
<td>Detection and treatment of High Risk Pregnant Women due to anaemia using True Hb in VHND sessions in 25 HPDs</td>
<td></td>
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<td>B1</td>
<td>Roll out</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
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<tbody>
<tr>
<td>4.31</td>
<td>Treatment and Follow-up Cards for Sepsis Management in Newborns aged 0-2 months</td>
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<tr>
<td>B1 4.32</td>
<td>Tracking of Sepsis Cases among Newborns Aged 0-2 Months through Integrated Call Centre</td>
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<tr>
<td>B1 4.33</td>
<td>Matritwa Saptah</td>
<td></td>
<td></td>
<td>860.21</td>
<td>860.20</td>
<td>Approved Rs 860.21 lakhs for organizing 2 Matritwa Saptah @ Rs 430.10 lakhs which shall include District level activities @Rs 50000/-, Mobility support @ Rs 17600/ block, printing of formats, reports @Rs 50/ ANM and IEC Banners/ Hoardings subject to ensuring state should clearly bring out how many high risk pregnancies identified, how many have been monitored and followed up during PMMSA on 9th of very month. The detail report needs to be shared covering all the above statistics to GOI</td>
</tr>
<tr>
<td>B1 4.34</td>
<td>Gestational</td>
<td></td>
<td></td>
<td>2,745.00</td>
<td>2,745.00</td>
<td>Approved Rs 2745.0 lakhs as proposed in the annexure for rolling out GDM programme in the 18 districts for the following activities: a)Rs 2537.04 lakhs for Procurement of 7775 Glucometers @ Rs 3000/- per unit, Glucose packets (@ Rs 20), Insulin syringe with lancets (@ Rs 20), Insulin Vials (@ Rs 50), b) Rs 150.40 lakhs</td>
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<tbody>
<tr>
<td>B1 4.35</td>
<td>Diabetes Mallitius Pilot - 18 districts</td>
<td>-</td>
<td>112.26</td>
<td>112.26</td>
<td>for training of GDM in 18 districts. c) Rs 54.60 lakhs for IEC in each of the facilities in 18 districts including medical colleges. The approval is subject to all procurement needs to be as per gap analysis and Glucometers have been provided by NPCDS need not be duplicated the procurement should be based on competitive bidding and following established government procurement procedures</td>
<td></td>
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<tr>
<td>B1 4.36</td>
<td>Misoprost Distribution for Home Deliveries</td>
<td>-</td>
<td>0.00</td>
<td>Not approved</td>
<td>Approved Rs 112.26 lakhs for the following a) Rs 40.95 lakhs for Trainings which include State TOT, 2 batches of District TOTs in both th pilot districts of Bijnor and Pilibhit and 165 batches of block trg for ANMs and ASHA b) Rs 22.36 lakhs for procurment of Mesoprestol tablets c) Rs 46.68 lakhs as ASHA incentive for an stimatd 46689 targeted home deliveries @ Rs 100/- d) Rs 2.25 lakh reportingr register @ Rs 50/- for 4500 registers The approval is subject to: The RC to be done if possible for single tablets of 600 microgram is advisable for ease of sock keeping and patient compliance and impact evaluation report in these 2 pilot districts needs to be shared with GOI</td>
<td></td>
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<tr>
<td>B1 4.37</td>
<td>Integrated Morbid Foot Care Unit for Filaria, Leprosy and Diabetes affected person at district</td>
<td>75</td>
<td>93.75</td>
<td>0.00</td>
<td>Not approved</td>
<td></td>
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<td>FM R code</td>
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<td>hospitals</td>
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<td>B1 4.3 7</td>
<td>Male member of VHSNC as Family Planning Mentors</td>
<td>-</td>
<td>281.4 1</td>
<td>0.00</td>
<td>Not Approved</td>
<td></td>
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<tr>
<td>B1 4.3 8</td>
<td>Establishment of Training Labs at 11 RHFWTCs and 7 DTCs (In all 18 divisional HQs)</td>
<td>18</td>
<td>125.6 4</td>
<td>0.00</td>
<td>Not Approved</td>
<td></td>
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<tr>
<td>B1 4.3 9</td>
<td>Tablet based RCH application</td>
<td>1</td>
<td>66.55</td>
<td>0.00</td>
<td>Not approved..</td>
<td></td>
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<td>e-hospital implementation at District Hospitals</td>
<td>50</td>
<td>6,323.62</td>
<td>3000.0</td>
<td>Approved Rs. 3000 Lakh. State is requested to choose to implement eHospital of NIC in phased manner. In Phase-I, eHospital may be implemented in 30 District hospitals where sufficient infrastructure and internet connectivity is available. State is requested to do a pilot in two DHs where it can be done without creation of much infrastructure and complete it in two months period and submit the implementation report to the Ministry at the earliest. State Govt is requested to submit the implementation strategy &amp; blueprint for implementation of eHospital application to the Ministry in coordination with State NIC. State must ensure interoperability of Health Records among the hospitals covered for eHospital Implementation.</td>
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<td>B1 4.4</td>
<td>Establishment of Health Care Centre at Widow Ashram, Vrindavan, Mathura</td>
<td>1</td>
<td>40.40</td>
<td>0.00</td>
<td></td>
<td>The Hospital Management System (HMS) application should auto linked with other applications like MCTS, Health Management Information System (HMIS), DVDMS (eAushadhi). The data must be reflected on MCTS &amp; HMIS portal. All the procurement should be done as per DGS &amp; D rate contract or after competitive bidding following Government protocols. No HR is Approved</td>
</tr>
<tr>
<td>FM Code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quanity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks and Monitoring</td>
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<tr>
<td>B1 5.1</td>
<td>Community Action for Health (Visioning workshops at state, dist, block level, Training of VHSNC, Training of RKS)</td>
<td></td>
<td></td>
<td>156.92</td>
<td>23.31</td>
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<tr>
<td>B1 5.1.1</td>
<td>State level</td>
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<tr>
<td>B1 5.1.2</td>
<td>District level</td>
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<td>B1 5.1.3</td>
<td>Block level</td>
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<tr>
<td>B1 5.1.4</td>
<td>Other</td>
<td></td>
<td></td>
<td>156.92</td>
<td>23.31</td>
<td></td>
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<tr>
<td>B1 5.1.4.1</td>
<td>Constitution / Reconstitution of VHSNC</td>
<td></td>
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<tr>
<td>B1 5.1.4.2</td>
<td>State level TOT of VHSNC Trainer</td>
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<tr>
<td>B1 5.1.4.3</td>
<td>MoU signing and orientation of NGO Heads</td>
<td></td>
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<tr>
<td>B1 5.1.4.4</td>
<td>Orientation of NGO Staff and Review Meetings</td>
<td></td>
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<tr>
<td>B1 5.1</td>
<td>Orientation of Community</td>
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<tr>
<td><strong>FM R code</strong></td>
<td><strong>Budget Head</strong></td>
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<td><strong>Quantity / Target</strong></td>
<td><strong>Amount Proposed (Rs. Lakhs)</strong></td>
<td><strong>Amount (In Lakhs)</strong></td>
<td><strong>Remarks</strong></td>
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<td>4.5</td>
<td>Facilitators</td>
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<tr>
<td>B1 5.1.4.6</td>
<td>Printing and IEC</td>
<td></td>
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</tr>
<tr>
<td>B1 5.1.4.7</td>
<td>Remuneration of Staffs &amp; Office Expenses</td>
<td>8</td>
<td>156.92</td>
<td>22.20</td>
<td>Approved for 2 Training &amp; Monitoring officers @ Rs 55,000 pm, 1 Documentation officer @ Rs 45,000 pm and 1 Accounts Officer @ Rs 30,000 pm for 12 months. Increment approved separately.</td>
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<tr>
<td>B1 5.1.4.8</td>
<td>Supportive Supervision</td>
<td></td>
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<tr>
<td>B1 5.1.4.9</td>
<td>Management Cost (District &amp; Block level)</td>
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<tr>
<td>B1 5.1.4.10</td>
<td>Field Appraisal of NGOs</td>
<td></td>
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<tr>
<td>B1 5.2</td>
<td>Quality Assurance</td>
<td></td>
<td></td>
<td>1,468.29</td>
<td>1,449.83</td>
<td>HR increment calculated @ 5% for above approvals</td>
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<tr>
<td>B1 5.2.1</td>
<td>Quality Assurance Committees at State level</td>
<td>4</td>
<td>18.24</td>
<td>18.24</td>
<td>Approved as follows: 1 State Consultant Quality Assurance and 1 State Consultant Public Health @ Rs 50,000 pm each; 1 State Consultant Quality Monitoring @ Rs 40,000 pm; 1 Programme cum Admin Asst. @ Rs 12,000 pm (salary as proposed by the State) for 12 months.</td>
<td></td>
</tr>
<tr>
<td>B1 5.2.2</td>
<td>Quality Assurance Committees at Division/</td>
<td>279</td>
<td>1,021.32</td>
<td>1,003.32</td>
<td>Approved as follows: a) 18 Division Consultant Quality Assurance and 18 Division Consultant Public Health @ Rs 45,000 pm each; 18</td>
<td></td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<td>B1 5.2.3</td>
<td>District level</td>
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<td></td>
<td>Programme cum Admin Asst. @ Rs 12,000 pm for 12 months. b) 75 District Consultant Quality Assurance @ Rs 40,000 pm; 75 District Hospital Quality Manager @ Rs 35,000 pm each; 75 Programme cum Admin Asst. @ Rs 12,000 pm for 12 months.</td>
</tr>
<tr>
<td>B1 5.2.4</td>
<td>Grievance handling system</td>
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<td>B1 5.2.4.1</td>
<td>State</td>
<td>6</td>
<td>3.13</td>
<td>2.63</td>
<td>12.23</td>
<td>Rs 2.63 lakhs is approved</td>
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<td>B1 5.2.4.2</td>
<td>District</td>
<td>37</td>
<td>9.60</td>
<td>9.60</td>
<td>12.73</td>
<td>Approved</td>
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<td>B1 5.2.4.3</td>
<td>Block</td>
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<td>B1 5.2.5</td>
<td>Others</td>
<td></td>
<td></td>
<td></td>
<td>416.00</td>
<td>416.04</td>
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<td>B1 5.2.5.1</td>
<td>Monitoring and Supportive Supervision Visits-State QA</td>
<td>1</td>
<td>13.46</td>
<td>13.46</td>
<td>12.73</td>
<td>Rs. 13.46 Lac 2.63 approved</td>
</tr>
<tr>
<td>B1 5.2.5.2</td>
<td>Monitoring and Supportive Supervision Visits-District &amp; Division QA</td>
<td>11, 16</td>
<td>146.80</td>
<td>146.88</td>
<td>12.23</td>
<td>Approved Rs. 146.88 lakh</td>
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<td>B1 5.2.5.3</td>
<td>Certification - QA</td>
<td>1</td>
<td>52.80</td>
<td>52.80</td>
<td>12.23</td>
<td>Approved Rs. 52.80 Lac</td>
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<td>B1</td>
<td>Office</td>
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<td>FM R code</td>
<td>Budget Head</td>
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<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<tr>
<td>5.2.5.4</td>
<td>Equipments-State</td>
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<tr>
<td>B1 5.2.5.5</td>
<td>Office Equipments-District &amp; Division</td>
<td>201.22</td>
<td>Approved</td>
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<td></td>
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<tr>
<td>B1 5.2.5.6</td>
<td>Operational Cost for District Hospitals</td>
<td>1.64</td>
<td>Approved</td>
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<tr>
<td>B1 5.3</td>
<td>Monitoring and Evaluation</td>
<td>4,348.35</td>
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<td>B1 5.3.1</td>
<td>HMIS</td>
<td>1,683.11</td>
<td></td>
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</tr>
<tr>
<td>B1 5.3.1.1</td>
<td>Statistical Assistant/Data Analyst/MIS Officer/M&amp;E Assistant at Block level (personnel forming part of SPMU/DPMU are to be proposed under budget head of HR for SPMU/DPMU)</td>
<td>364.72</td>
<td>0.00</td>
<td>These positions were approved under A.10 last year and have been continued under A.10 this year as well.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1 5.3.1.2</td>
<td>Data Entry Operators at Block level</td>
<td>1252.96</td>
<td>Lumpsum amount of Rs 1,252.96 lakhs approved for outsourcing data entry operation on task basis to the extent possible. State may continue with the existing DEO if so it consider appropriate. Outsourcing should be based on competitive bidding following Government protocols. State should formulate qualifications and experience</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
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<td>Amount (In Lakhs)</td>
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<tr>
<td>B1 5.3. 1.3</td>
<td>Other Human Resource (HR)</td>
<td>275.0</td>
<td></td>
<td>3</td>
<td>275.00</td>
<td>Approved for outsourcing data entry at Block and District level by hiring external agency. Outsourcing should be based on competitive bidding following Government protocols. Payment norms should be worked out on per data entry basis and payment should be done accordingly. State must ensure 100% facility based reporting on HMIS portal and improvement in the registration and service delivery updation status of the beneficiary on MCTS portal. State should ensure that payment is made only once i.e., either to external agency or to ANM (for data updation through USSD) for updation of data in any field of any beneficiary.</td>
</tr>
<tr>
<td>B1 5.3. 1.3. 1</td>
<td>HR and Infrastructure for 100% service updation on HMIS/MCTS Portal</td>
<td>-</td>
<td></td>
<td>275.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1 5.3. 1.3. 2</td>
<td>Training cum review meeting for HMIS &amp;</td>
<td></td>
<td></td>
<td>25.41</td>
<td>25.41</td>
<td></td>
</tr>
</tbody>
</table>

The candidates shortlisted by the agency should be screened by District Health Society / State Health Society to ensure quality of the selected candidates. State must ensure improvement in the registration and service delivery updation status of the beneficiary on MCTS portal and 100% facility based reporting on HMIS portal.
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1 5.3.1.4.1</td>
<td>Training cum review meeting for HMIS &amp; MCTS at State level</td>
<td>-</td>
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<td>-</td>
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</tr>
<tr>
<td>B1 5.3.1.4.1</td>
<td>Training cum review meeting for HMIS &amp; MCTS at District level</td>
<td>25,41</td>
<td>1</td>
<td>25.41</td>
<td>25.41</td>
<td>Approved Rs 25.41 Lakh for District level 3 days training cum review meeting per quarter for HMIS &amp; MCTS / RCH combined. Expenses for food to participants, accommodation for trainers, accommodation for participants, incidental expenses and charges for venue hiring as per RCH norms subject to following extant rules. Expected participants: 5 from District and 2 from each Block.</td>
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<tr>
<td>B1 5.3.1.5</td>
<td>Mobility Support for HMIS &amp; MCTS</td>
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<tr>
<td>B1 5.3.1.5</td>
<td>Mobility Support for HMIS &amp; MCTS at State level</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>B1 5.3.1.5</td>
<td>Mobility Support for HMIS &amp; MCTS at District level</td>
<td>3,60</td>
<td>82</td>
<td>29.52</td>
<td>29.52</td>
<td>Approved Rs 29.52 Lakh. TA / DA should be as per extant rules.</td>
</tr>
<tr>
<td>B1 5.3.1.6</td>
<td>Printing of HMIS Formats</td>
<td>240</td>
<td>2</td>
<td>55.22</td>
<td>55.22</td>
<td>Approved Rs 55.22 Lakh. Printing should be done following competitive bidding as per Government protocol. State may consult MoHFW before printing as the formats are under</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>B1 5.3.1.7</td>
<td>Other (Please specify)</td>
<td></td>
<td>61.00</td>
<td>45.00</td>
<td></td>
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</tr>
<tr>
<td>B1 5.3.1.7.1</td>
<td>Internet Connectivity through LAN / data card-HMIS</td>
<td>9,00 0.00</td>
<td>-</td>
<td>-</td>
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</tr>
<tr>
<td>B1 5.3.1.7.2</td>
<td>HMIS Operational Cost-SPMU</td>
<td>61.00 0.00</td>
<td>1</td>
<td>61.00</td>
<td>45.00</td>
<td>Approved Rs. 45.00 Lakh. 20.00 Lakh for Internet connectivity for 2 buildings of SPMU NRHM, 6.00 Lakh for Dedicated Broadband Internet connection for 20 cells of SPMU, 14.00 Lakh for Procurement of Desktop / Laptop / Printer / UPS etc @Rs. 50000/- per unit, 3.00 Lakh for AMC / Repair charges for hardware and 2.00 Lakh for Website AMC / Maintenance / Upgradation etc. These are indicative rates, final rates are to be arrived at as per DGS &amp; D rate contract or after competitive bidding following Government protocols. State must ensure that these equipments are not covered by post-sale warranty / guarantee. State should ensure regular updates of data and information available on the proposed website.</td>
</tr>
<tr>
<td>B1 5.3.2</td>
<td>MCTS</td>
<td>1,125.10</td>
<td>284.49</td>
<td></td>
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<tr>
<td>B1 5.3.2.1</td>
<td>Printing of RCH Registers</td>
<td>250.00 2.0</td>
<td>37.84</td>
<td>509.46</td>
<td>0.00</td>
<td>Not approved. Rs 240.28 Lakh have been approved in FY 2014-15 and Rs 376.50 Lakh have been approved in FY 2015-16. Information of 160 Eligible Couples and 35 Pregnant Women can</td>
</tr>
</tbody>
</table>
be captured in one RCH register and one register is applicable for two years. It is understood that Integrated RCH Register has been partially in FY 2015-16.

Printing should be done based on competitive bidding and by following Government protocols. Specifications are as under:
1. Size: 11" X 17"
2. Inner page: 90 GSM
3. Inner cover page: 120 GSM
4. Outer cover: Gatta 24 ounce.

<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td>B1 5.3.2.2</td>
<td>Printing of MCTS follow-up formats/services due list/work plan</td>
<td>24,000</td>
<td>1.60,175</td>
<td>57.66</td>
<td>54.85</td>
<td>Approved Rs 54.85 Lakh for printing of follow-up formats to capture the service delivery data @ Rs 3/- per ASHA per month. Printing should be done based on competitive bidding and by following Government protocols.</td>
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<td>B1 5.3.2.3</td>
<td>Procurement of Computer/Printer/UPS</td>
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<tr>
<td>B1 5.3.2.4</td>
<td>Procurement of Laptop</td>
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<tr>
<td>B1 5.3.2.5</td>
<td>AMC of Computer/Printer/UPS</td>
<td>5,000</td>
<td>1.846</td>
<td>92.30</td>
<td>74.14</td>
<td>Approved Rs 74.14 Lakh for AMC @ Rs 4,000/- per year per computer / printer / UPS for 1,771 equipments (820 Block MCTS + 823 Block HMIS + 128 DH) and @ Rs 4,400/- per year per computer / printer / UPS for 75 DPM Units. These are indicative rates, final rates are to be arrived at as per DGS &amp; D rate contract or after competitive bidding following Government protocols. State must ensure that these equipments are not</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<tr>
<td>B1 5.3.2.6</td>
<td>AMC of Laptop</td>
<td></td>
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<td></td>
<td></td>
<td>covered by post-sale warranty / guarantee.</td>
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<tr>
<td>B1 5.3.2.7</td>
<td>Internet Connectivity through LAN / data card</td>
<td>18,000</td>
<td>95</td>
<td>171.18</td>
<td>122.40</td>
<td>Approved Rs 122.40 Lakh for internet connectivity through LAN / data cards @ Rs 5,000/- per month for State M&amp;E Cell, @ Rs 1,500/- per month per District Hospital for 128 District Hospitals and @ Rs 1,000/- per month per block for 823 blocks. This is subject to 100% facility based reporting on HMIS &amp; MCTS portal and improvement in data quality thereof. These are indicative rates, final rates are to be arrived at as per DGS &amp; D rate contract or after competitive bidding following government protocols. Fund for internet connectivity for State HQ, SPMU and other staff has been Approved under B15.3.1.7.2.</td>
</tr>
<tr>
<td>B1 5.3.2.8</td>
<td>Procurement &amp; Installation of VSAT (Capex)</td>
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<tr>
<td>B1 5.3.2.9</td>
<td>Internet Connectivity through VSAT (Opex)</td>
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<tr>
<td>B1 5.3.2.10</td>
<td>Call Centre (Capex)</td>
<td>2,00,000</td>
<td>1</td>
<td>2.00</td>
<td>2.00</td>
<td>Approved. Procurement should be done based on competitive bidding and by following Government protocols. State has intimated that a similar amount approved earlier is unspent and it will not be utilized.</td>
</tr>
<tr>
<td>B1 5.3.</td>
<td>Call Centre (Opex)</td>
<td>65,5</td>
<td>1</td>
<td>65.50</td>
<td>0.00</td>
<td>Not approved. State should resubmit the proposal as per template shared by</td>
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<td>FMR code</td>
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<td>Unit Cost (Rs)</td>
<td>Quantity/Target</td>
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<td>Amount (In Lakhs)</td>
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<td>2.1</td>
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<td>MoHFW.</td>
</tr>
<tr>
<td>B1 5.3. 2.1 2</td>
<td>Other office expenditure</td>
<td>-</td>
<td>951</td>
<td>171.18</td>
<td>0.00</td>
<td>Rs 163.50 Lakh for other office expenditure @ Rs 1,500/- per month per block for 823 blocks and @ Rs 1,000/- per month per District Hospital for 128 District Hospitals approved under A.10.1.11.4 This is subject to 100% facility based reporting on HMIS &amp; MCTS portal and improvement in data quality thereof. Procurement should be done based on competitive bidding and by following Government protocols.</td>
</tr>
<tr>
<td>B1 5.3. 2.1 3</td>
<td>Mobile reimbursement (CUG SIM)</td>
<td>-</td>
<td>31,098</td>
<td>31.10</td>
<td>31.10</td>
<td>Approved for RCH register instruction manual for record of information in RCH register @ Rs 100 per manual for 1 manual for 31,114 ANMs (as per annexure shared by the State). The specifications are as under: (i) cover and back page (coloured) – 220 GSM (ii) Inside pages (black and white) – 75 GSM. Printing should be done based on competitive bidding and by following Government protocols.</td>
</tr>
<tr>
<td>B1 5.3. 2.1 4</td>
<td>Other (Please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Approved</td>
</tr>
<tr>
<td>B1 5.3. 2.1 4.1</td>
<td>Mobile Academy/Kunji Technical Opex. For 3 months</td>
<td>8,23, 805.00</td>
<td>3</td>
<td>24.71</td>
<td>0.00</td>
<td>Not Approved</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 4.2</td>
<td>updation of real time services in MCTS/RCH database through USSD</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>B1 5.3.3</td>
<td>Drugs &amp; Vaccines Distribution Management System (DVDMS)</td>
<td></td>
<td>90.00</td>
<td>-</td>
<td>Not approved. In 2nd supplementary RoP of 2014-15, Rs 330.38 Lakh has been approved. State has intimated that this fund is unspent. State may first utilize this amount.</td>
<td></td>
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<tr>
<td>B1 5.3.3.1</td>
<td>Implementation of DVDMS</td>
<td>90.00</td>
<td>1</td>
<td>90.00</td>
<td>0.00</td>
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<tr>
<td>B1 5.3.4</td>
<td>Hospital Management System</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>B1 5.3.4.1</td>
<td>Implementation of Hospital Management System</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B1 5.3.5</td>
<td>Other e-Governance initiatives</td>
<td></td>
<td>2,784.48</td>
<td>2,380.75</td>
<td>On-going activity. Approved Rs 2,364.67 Lakh including 15% service tax for talk time based mobile connections for 12 months @ 99/- per month per ANM for 20,717 ANMs and @ 99/- per month per ASHA for 1,52,367 ASHAs (as per MCTS portal). Continuation of this activity in future may be considered only for those ANMs in respect of whom the registration status and service delivery updating of beneficiaries in MCTS is</td>
<td></td>
</tr>
<tr>
<td>B1 5.3.5.1</td>
<td>Talktime based mobile connection for MO I/C, ANMs and ASHAs.</td>
<td>1,954.71</td>
<td>2,706.74</td>
<td>2364.67</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
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<th>Amount (In Lakhs)</th>
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<tbody>
<tr>
<td>B1 5.3.5.2</td>
<td>PFMS Helpline and Tally implementation at State/District/Block level</td>
<td>41.3 4,00 0.00</td>
<td>1</td>
<td>41.34</td>
<td>15.42</td>
<td>Approved on existing HR as follows: a) 4 Technical Support Executive for PFMS @ Rs 27,500 pm for 12 months. b) Positions not approved. Lumpsum amount of Rs 2.22 lakhs approved for outsourcing support staff to the extent possible. Increment approved separately. No approval given for New Tally Software License and State to focus on PFMS</td>
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<tr>
<td>B1 5.3.5.3</td>
<td>Video Conferenceing Service at State Level</td>
<td>36.4 0.00 0.00</td>
<td>1</td>
<td>36.40</td>
<td>0.00</td>
<td>Not approved</td>
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<tr>
<td>B1 5.6.1</td>
<td>PROCUREMENT</td>
<td>37.26 2.05</td>
<td></td>
<td>29,698.65</td>
<td></td>
<td></td>
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<tr>
<td>B1 5.1</td>
<td>Procurement of Equipment</td>
<td>3.871.33</td>
<td></td>
<td>1,209.50</td>
<td></td>
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</table>

more than 80%. The State must ensure that all the phone numbers of ASHA / ANM should be updated and validated on MCTS portal. Procurement should be done following competitive bidding and by following government protocols. The Telecom Service Provider should be able to integrate with USSD gateway of NIC. Remaining Mobile reimbursement for MO I/Cs and ASHA Sangini should be proposed under programme management budget head.
<table>
<thead>
<tr>
<th>FM R</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Proposed (In Lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>6.1.1</td>
<td>equipment: MH</td>
<td></td>
<td>825.45</td>
<td>559.34</td>
<td></td>
<td></td>
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<tr>
<td>B1 6.1.1.1</td>
<td>Equipments for Blood Banks/ BSUs</td>
<td></td>
<td>536.95</td>
<td>467.65</td>
<td></td>
<td>An amount Rs 467.65 approved as per annexure blood equipment</td>
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<tr>
<td>B1 6.1.1.2</td>
<td>MVA /EVA for Safe Abortion services</td>
<td>2,500.00</td>
<td>561</td>
<td>14.03</td>
<td>14.03</td>
<td>Approved Rs 14.03 lakhs for procurement of MVA Kit @ Rs 2500/kit for 561 MVA Kits subject to all procurement needs to be based on competetive bidding and following established procurement procedures and no duplication of drugs under NHM Free drug initiative</td>
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<tr>
<td>B1 6.1.1.3</td>
<td>Others (please specify)</td>
<td></td>
<td>274.47</td>
<td>77.67</td>
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<td>B1 6.1.1.3.1</td>
<td>Suction Machine for child (foot operated)</td>
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<td>B1 6.1.1.3.2</td>
<td>Boyle’s apparatus</td>
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<td>B1 6.1.1.3.3</td>
<td>Pulse Oxymeter</td>
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<td>B1 6.1.1.3.4</td>
<td>Autoclave</td>
<td></td>
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<tr>
<td>B1 6.1.1.3.5</td>
<td>Normal Delivery Set</td>
<td></td>
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<td>B1 6.1.</td>
<td>CS Delivery Kit</td>
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<td>FM R code</td>
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<tr>
<td>1.3.6</td>
<td>Other Essential Instruments for CAC (Sim's speculum, Aneterior vaginal wall retractor, valseellum, sponge holding forces)</td>
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<tr>
<td>B1 6.1.1.3.7</td>
<td>Establishment Of New Sub Centres With Funitures And Equipments</td>
<td></td>
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<tr>
<td>B1 6.1.1.3.8</td>
<td>Detection and treatment of High Risk Pregnant Women due to anaemia using Haemoglobin auto-analyser in VHND sessions in 25 HPDs</td>
<td></td>
<td></td>
<td></td>
<td>77.67</td>
<td>Approved Rs 77.66 lakhs as a pilot in only 7 districts as part of 7+ initiative. The approval is as under : a) 2000 Hb autoanalizers@Rs 1955/- Rs 39.10 lakhs b)3600 Hb strips@ Rs 948.75- Rs 34.15 lakhs c) 1 day district level orientation of MO I/c and BPMs@rs 15000/- for 7 districts-Rs 1.05 lakhs d)1 day block level orientation of HEOs, LHV's SNs &amp; ANMs @ rs 4000 for approx 84 blocks -Rs 3.36 lakhs</td>
</tr>
<tr>
<td>B1 6.1.1.3.10</td>
<td>Equipment maintenance (applies for all equipment - not restricted to Maternal Health)</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
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<td>Amount (In Lakhs)</td>
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<tr>
<td>B1 6.1.2</td>
<td>Procurement of equipment: CH</td>
<td>294.04</td>
<td>293.04</td>
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<tr>
<td>B1 6.1.2.1</td>
<td>Procurement of equipments for NRC</td>
<td></td>
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<tr>
<td>B1 6.1.2.2</td>
<td>Procurement of equipments for SNCU-Phototheary Unit</td>
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<tr>
<td>B1 6.1.2.3</td>
<td>Procurement of equipments for SNCU-Radiant Warmer</td>
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<tr>
<td>B1 6.1.2.4</td>
<td>Procurement of equipments for NBSU-Phototheary Unit</td>
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<tr>
<td>B1 6.1.2.5</td>
<td>Procurement of equipments for NBSU-Radiant Warmer</td>
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<tr>
<td>B1 6.1.2.6</td>
<td>Procurement of equipments for NBCC-Radiant Warmer</td>
<td>35,000.00</td>
<td>65</td>
<td>228.55</td>
<td>228.55</td>
<td>Approved for 653 Radiant Warmers at NBCC @ Rs 0.35</td>
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<tr>
<td>B1 6.1.2.7</td>
<td>Procurement of Computer/Printer/UPS/Data Card -NRCs</td>
<td>60,000.00</td>
<td>76</td>
<td>45.60</td>
<td>45.60</td>
<td>Approved for procurement of computers for NRCs @ Rs. 0.60 Lakh/NRC for 76 NRC</td>
</tr>
<tr>
<td>B1 6.1.2.8</td>
<td>Procurement of Computer/Printer/UPS/Data Card -SNCUs</td>
<td>60,000.00</td>
<td>1</td>
<td>0.60</td>
<td>0.60</td>
<td>Approved of Rs. 0.60 Lakhs for Procurement of Computer/Printer/UPS/Data Card -SNCUs.</td>
</tr>
<tr>
<td>B1 6.1.</td>
<td>Procurement of Equipments for</td>
<td>1</td>
<td>19.29</td>
<td></td>
<td></td>
<td>Approved Rs. 18.29 Lakhs as per below details for Procurement of Equipments</td>
</tr>
<tr>
<td>FMR code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td>2.9</td>
<td>SNCUs in Medical Colleges</td>
<td></td>
<td></td>
<td>18.29</td>
<td>for SNCUs in Veeragana Awanti Bai Female Hospital, Lucknow</td>
<td></td>
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<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>1. Baby warmers (Units 12) @ Rs. 35000/unit</td>
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<tr>
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<td></td>
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<td></td>
<td>2. Phototherapy LED (Units 6) @ Rs. 50000/unit</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>3. Basinet (Units 6) @ Rs. 11000/unit</td>
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<td>4. Pulse Oximeter (Units 6) @ Rs. 33000/unit</td>
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<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>5. C-PAP (Units 20 @ Rs. 90000/unit</td>
<td></td>
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<tr>
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<td></td>
<td>6. Flux Meter (Unit 1) @ Rs. 50000/unit</td>
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<td></td>
<td></td>
<td>7. Transcutaneous bilirubin meter (Unit 1) @ Rs. 3.25 Lakh/unit</td>
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<td></td>
<td>8. Portable X-ray Machine (Unkit 1) @ Rs. 1.5 Lakh/unit</td>
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<td></td>
<td></td>
<td></td>
<td>9. Oil Emerson Heter (Units 4) @ Rs. 10000/unit</td>
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<td></td>
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<td></td>
<td></td>
<td>10. Split AC (Units 2) @ Rs. 50000/unit</td>
<td></td>
</tr>
</tbody>
</table>

| B1       | Tablets for learning, training, counselling documentation & reporting for high case load facilities | | | | | |

<p>| B1       | Procurement of equipment: FP | | 335.74 | 336.13 | | |
| B1       | NSV kits | 1.00 | 48 | 4.86 | 4.86 | Rs. 4.86 lakh is approved for 486 NSV kits @ Rs. 1000/kit |
| B1       | IUCD kits | 3.00 | 7.9 | 236.90 | 237.30 | Rs. 237.30 lakh is approved for 7910 IUCD kits @ Rs. 3000/kit |
| B1       | minilap kits | | | | | Rs. 13.34 lakh is approved for 667 |</p>
<table>
<thead>
<tr>
<th>Code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
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<tr>
<td>6.1.3.3</td>
<td>2.00 0.00</td>
<td>66 7</td>
<td>13.35</td>
<td>13.34</td>
<td>minilap kits @ Rs. 2000/kit</td>
<td></td>
</tr>
<tr>
<td>B1 6.1.3.4</td>
<td>Laparoscopes</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>B1 6.1.3.5</td>
<td>PPIUCD forceps</td>
<td>600.00</td>
<td>1.9 46</td>
<td>11.68</td>
<td>11.68</td>
<td>Rs. 11.68 lakh is approved for 1946 PPIUCD forceps @ Rs. 600/PPIUCD Forceps</td>
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<tr>
<td>B1 6.1.3.6</td>
<td>Other (please specify)</td>
<td></td>
<td></td>
<td>68.95</td>
<td>68.95</td>
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<td>B1 6.1.3.6.1</td>
<td>ZOE Model</td>
<td></td>
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</tr>
<tr>
<td>B1 6.1.3.6.2</td>
<td>Audio Visual Aids, Computer, Printer &amp; basic furnitures required for establishing 8 new training sites</td>
<td></td>
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<tr>
<td>B1 6.1.3.6.3</td>
<td>Manual OT table for 18 training sites</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>B1 6.1.3.6.4</td>
<td>Lap Kits</td>
<td></td>
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</tr>
<tr>
<td>B1 6.1.3.6.5</td>
<td>Establishment of IUCD Kiosks (Area of IUCD insertion/removal in health)</td>
<td>35.0 00.00</td>
<td>19 7</td>
<td>68.95</td>
<td>68.95</td>
<td>Rs. 68.95 lakh is approved for IUCD kiosks @ Rs. 35000/kiosk for 197 kiosks</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
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<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
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<tr>
<td>B1 6.1.4</td>
<td>Procurement of equipment: IMEP</td>
<td>-</td>
<td>-</td>
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<td>-</td>
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<tr>
<td>B1 6.1.4.1</td>
<td>Procurement of equipment other than above</td>
<td>2,045.12</td>
<td>2,045.12</td>
<td>-</td>
<td>-</td>
<td></td>
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<tr>
<td>B1 6.1.5</td>
<td>Installation of OptiMaser Microwave Medical Disinfection &amp; Sterilization System (MMDSS) in CHCs</td>
<td>1370,000.00</td>
<td>1370</td>
<td>1,370.12</td>
<td>0.00</td>
<td>Not approved. The state is suggested to utilize previous two years available budget of Rs. 1629.88 Lakhs as a token amount. State may request for additional budget in the supplementary PIP if the tendered value exceeds this approved amount</td>
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<tr>
<td>B1 6.1.5.2</td>
<td>Annual Maintenance Contract for valuable medical equipments</td>
<td>1370,000.00</td>
<td>1</td>
<td>1,370.12</td>
<td>0.00</td>
<td>Not approved</td>
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<tr>
<td>B1 6.1.5.3</td>
<td>Mapping of Bio-medical equipments</td>
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<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
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<tr>
<td>B1 6.1.5.4</td>
<td>Equipments for Cardio Thorasic Surgery at SPM Civil Hospital Lucknow</td>
<td>675.00</td>
<td>675.00</td>
<td>0.00</td>
<td>Not approved</td>
<td></td>
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<td>B1 6.1.5.5</td>
<td>Equipments for</td>
<td>-</td>
<td>-</td>
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<td></td>
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<td>FM R code</td>
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<td>6.1.6</td>
<td>RKSK &amp; RBSK</td>
<td></td>
<td>0.49</td>
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<tr>
<td>B1 6.1.</td>
<td>Equipments for AFHCs</td>
<td>7.00</td>
<td>7</td>
<td>0.49</td>
<td>0.49</td>
<td>Approved 7 new AFHCs @ Rs 7000 per clinic</td>
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<td>6.2</td>
<td>Others</td>
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<td>B1 6.1.</td>
<td>Equipments for RBSK</td>
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<tr>
<td>6.3.1</td>
<td>Equipment for Mobile health teams</td>
<td></td>
<td></td>
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<td></td>
<td>Note: State was to use committed unspent amount of Rs 524.8 lakhs in Fy 2015-16. As proposed by State, Rs 270.17 lakhs is revalidated to be used. Conditionality State to follow RBSK Job Aids for procurement of standardized screening tools only.</td>
</tr>
<tr>
<td>B1 6.1.</td>
<td>Equipment for DEIC</td>
<td></td>
<td></td>
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<td></td>
<td>Note: State was to use committed unspent of Rs 285.66 lakhs in Fy 2015-16. As proposed by State Rs 285.66 lakhs is revalidated to be used in Fy 2016-17.</td>
</tr>
<tr>
<td>6.3.2</td>
<td>Laptop for mobile health teams</td>
<td></td>
<td></td>
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<td></td>
<td>As proposed by State, Rs 738 lakhs approved in Fy 2013-14 is revalidated to be used in Fy 2016-17. Each team to upload screening data in the RBSK online MIS.</td>
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<td>B1 6.1.</td>
<td>Desktop for DEIC</td>
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<td>As proposed by State, Rs 5 lakhs approved in 2015-16 is revalidated to be used in Fy 2016-17.</td>
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<td>6.3.3</td>
<td>Data card internet connection for laptops and DEIC and rental</td>
<td></td>
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<td></td>
<td>Rs 32.8 lakhs approved in FY 2013-14 for procurement of data card and rental is revalidated to be used in FY 2016-17. Each team to upload screening data in RBSK online MIS.</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<tr>
<td>B1 6.1. 6.3. 6</td>
<td>CUG connection per team and rental</td>
<td>-</td>
<td>20.50</td>
<td>20.50</td>
<td>Approved for the following a) Rs 6.0 lakhs for Equipments for other learning labs at 3 coN such as Nursing lab, Nutrition lab, Community Lab and Psychiatry Lab @ Rs 2.0 lakhs per CoN b) Rs 12.0 lakhs for Equipments for other learning labs at 6 GNM Schools @ Rs 2.0 lakhs per GNM c) Rs 2.50 lakhs for Air conditioners for Skills Labs at NNC Kanpur</td>
<td></td>
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<tr>
<td>B1 6.1. 7</td>
<td>Equipments for Training Institutes</td>
<td>35,000.00</td>
<td>88.2</td>
<td>350.00</td>
<td>0.00</td>
<td>Not Approved</td>
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<tr>
<td>B1 6.1. 8</td>
<td>Equipments for AYUSH</td>
<td>4,960.58</td>
<td>58.00</td>
<td>295.78</td>
<td>295.78</td>
<td>Approved Rs 226.27 lakh for procurement of RTI/STI drug kits subject to all procurement needs to be based on competitive bidding and following established procurement</td>
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<tr>
<td>B1 6.2. 1</td>
<td>Procurement of Drugs and supplies for MH</td>
<td>4,960.39</td>
<td>40.00</td>
<td>226.27</td>
<td>226.27</td>
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<tr>
<td>B1 6.2. 1.1</td>
<td>RTI/STI drugs and consumables</td>
<td>50.00</td>
<td>4.5</td>
<td>226.27</td>
<td>226.27</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
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<tr>
<th>FMR code</th>
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<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>B.1 6.2.1.2</td>
<td>Drugs for Safe Abortion</td>
<td>100.00</td>
<td>43,495</td>
<td>43.50</td>
<td>43.50</td>
<td>Approved Rs 43.50 lakhs for procurement of combipack of Mife+ Miso @ Rs 100/ pack for 43495 combipack subject to all procurement needs to be based on competitive bidding and following established procurement procedures and no duplication of drugs under NHM Free drug initiative</td>
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<tr>
<td>B.1 6.2.1.3</td>
<td>Others (Please specify)</td>
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<td>26.01</td>
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<tr>
<td>B.1 6.2.1.3.1</td>
<td>Thermo Coagulator for Women Screened VIA positive for pre-cancerious lesion of cervix at 5 Sampoorna Clinics</td>
<td></td>
<td>5</td>
<td>16.80</td>
<td>16.80</td>
<td>Approved for necessary equipment for Cryotherapy as per the standard treatment practices for Cancer Cervix, and not for Thermo-coagulation.</td>
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<tr>
<td>B.1 6.2.1.4</td>
<td>RPR Kits</td>
<td>100.00</td>
<td>9,209</td>
<td>9.21</td>
<td>9.21</td>
<td>Approved Rs 9.21 lakhs for procurement of RPR kits subject to all procurement needs to be based on competitive bidding and following established procurement procedures and no duplication of drugs under NHM Free drug initiative</td>
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<tr>
<td>B.1 6.2.1.5</td>
<td>Whole blood finger prick test for HIV</td>
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<td>B.1 6.2.2</td>
<td>Drugs &amp; supplies for CH</td>
<td>1,914.83</td>
<td>1,894.30</td>
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<td>B.1 6.2</td>
<td>Zinc and ORS for Childhood</td>
<td>11</td>
<td>760.9</td>
<td>760.94</td>
<td>Approved of Rs. 760.94 Lakhs for procurement of Zinc and ORS for</td>
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<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<td>2.1</td>
<td>Diarrhoea Programme</td>
<td></td>
<td>3.8, 5.9, 17</td>
<td>4</td>
<td></td>
<td>Childhood Diarrhoea Programme as per below details: 1. Zn tablets: 187688438 @ Rs. 0.124 per tablet 2. ORS packets: 26812634 @ Rs. 1.97 per packet (Annexure ORS-Zinc attached) Rs 165.85 lakhs from 2015-16 is also revalidated</td>
</tr>
<tr>
<td>B.1 6.2.2</td>
<td>Procurement of drugs under child health (Vitamin A for BSPM)</td>
<td>58.00</td>
<td>10, 26, 33, 1</td>
<td>615.80</td>
<td>595.27</td>
<td>Approved of Rs. 595.27 Lakhs for Procurement of Vitamin A as an ongoing activity.</td>
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<tr>
<td>B.1 6.2.2.3</td>
<td>Drugs &amp; Consumables for NRC</td>
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<tr>
<td>B.1 6.2.2.4</td>
<td>Drugs &amp; Consumables for SNCU</td>
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<td></td>
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<tr>
<td>B.1 6.2.2.5</td>
<td>Mid Upper Arm Circumference (MUAC) Tapes for NRCs</td>
<td>-</td>
<td>60, 00, 00</td>
<td>2.42</td>
<td>2.41</td>
<td>Recommended for approval of Rs. 2.41 Lakhs for procurement of MUAC tapes @ Rs. 4.02/tape for ANMs.</td>
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<tr>
<td>B.1 6.2.2.6</td>
<td>Procurement of ZINC and ORS for IDCF Activity</td>
<td>75</td>
<td></td>
<td>535.67</td>
<td>535.67</td>
<td>Recommended for approval of Rs. 535.67 Lakhs for procurement of ORS and setting up of ORS zinc corners as per below details: 1. ORS packets: 26633724 @ Rs. 2 Per pkt 2. ORS and Zn Corners: Rs. 0.04 Lakh/district for 75 Districts. Details in IDCF Annexure attached.</td>
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<tr>
<td>B.1 6.2.3</td>
<td>Drugs &amp; supplies for FP</td>
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<td>B.1 6.2.</td>
<td>Supplies for IMEP</td>
<td>10,10</td>
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<td>10,087.</td>
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<td>Code</td>
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<td>Unit Cost (Rs)</td>
<td>Quantity/Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
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<td>4</td>
<td>B.1 6.2.4.1</td>
<td>Biomedical waste management - District level</td>
<td>9.11</td>
<td>37</td>
<td>1313.82</td>
<td>1313.82</td>
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<td></td>
<td>B.1 6.2.4.2</td>
<td>Biomedical waste management - CHC/PHC level</td>
<td>16 3</td>
<td>1,313.82</td>
<td>1234.87</td>
<td>1234.87</td>
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<td></td>
<td>B.1 6.2.4.3</td>
<td>Cleaning/washing, housekeeping and laundry management - District level</td>
<td>16 4</td>
<td>3,588.41</td>
<td>3566.67</td>
<td>3566.67</td>
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<td>FM R code</td>
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<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>B.1 6.2.4.4</td>
<td>Cleaning/washing, housekeeping and laundry management - CHC/PHC level</td>
<td>-</td>
<td>78 5</td>
<td>1,549.64</td>
<td>1549.64</td>
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<td>B.1 6.2.4.5</td>
<td>Biomedical waste management - MCH Wings (100/50/30 bed)</td>
<td>-</td>
<td>14 0</td>
<td>224.09</td>
<td>224.09</td>
<td>Approved</td>
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<td>B.1 6.2.4.6</td>
<td>Cleaning/washing, housekeeping and laundry management - MCH Wings(100/50/30) bed</td>
<td>-</td>
<td>14 0</td>
<td>967.02</td>
<td>967.02</td>
<td>Approved</td>
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<tr>
<td>B.1 6.2.4.7</td>
<td>Cleanliness of Sub Centres</td>
<td>-</td>
<td>20 52 1</td>
<td>1,231.26</td>
<td>1231.26</td>
<td>Rs. 1231.26 is approved with following conditionality- 1. Cleaning personnel will be engaged on purely part time basis as a outside service provider. There should be not contractual obligation to NHM/ State Government. Mechanism for monitoring of cleaning activities should be implemented including random assessment of cleanliness level by quality assurance</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<tr>
<td>B.1 6.2. 5</td>
<td>General drugs &amp; supplies for health facilities</td>
<td></td>
<td></td>
<td>1,787.20</td>
<td>2,259.09</td>
<td>units on sample basis. Monitoring activities should be documented and shared.</td>
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<td>B.1 6.2. 5.1</td>
<td>NHM Free Drug services</td>
<td>3</td>
<td>1,787.20</td>
<td>1787.00</td>
<td>472.09</td>
<td>An amount of Rs 1787 lakhs is Approved under free drug policy.</td>
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<td>B.1 6.2. 5.2</td>
<td>Other Free Drug Services (State not opted 16.2.5.1)</td>
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<td>1,857.34</td>
<td>Amount shifted from B1.1.2.2</td>
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<td>B.1 6.2. 6</td>
<td>National Iron Plus Initiative (Drugs&amp;Supplies)</td>
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<td>1,769.90</td>
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<td>B.1 6.2. 6.1</td>
<td>Children (6m - 60months)</td>
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<td>B.1 6.2. 6.1. a</td>
<td>IFA syrups (with auto dispenser)</td>
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<td>B.1 6.2. 6.1. b</td>
<td>Albendazole Tablets</td>
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<td>B.1 6.2. 6.2</td>
<td>Children 5 - 10 years</td>
<td>699.50</td>
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<td>612.06</td>
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<td>B.1 6.2. 6.2. a</td>
<td>IFA tablets</td>
<td>10.00</td>
<td>39, 85, 33, 38, 31</td>
<td>557.70</td>
<td>470.27</td>
<td>Rs. 470.27 lakhs approved for procurement of 398533381 WIFS junior tablets @unit cost of Rs. 0.118 per tablet. State to procure pink colored sugar coated IFA tablets only.</td>
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<td>B.1</td>
<td>Albendazole</td>
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<td>Approved Rs. 141.79 Lakhs for</td>
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<td>Amount (In Lakhs)</td>
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<td>6.2.6.2.b</td>
<td>Tablets</td>
<td>2.00</td>
<td>16 9.8 0.4 55</td>
<td>141.7 9</td>
<td>141.79</td>
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<td>B.1 6.2.6.3</td>
<td>WIFS (10-19 years)</td>
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<td>1157.84</td>
<td>1157.84</td>
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<tr>
<td>B.1 6.2.6.3.a</td>
<td>IFA tablets</td>
<td>15.0 0</td>
<td>55 10.98 24.6</td>
<td>970.08</td>
<td>970.08</td>
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<td>B.1 6.2.6.3.b</td>
<td>Albendazole Tablets</td>
<td>2.00</td>
<td>22 6.5 1.7 28</td>
<td>187.7 6</td>
<td>187.76</td>
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<td>B.1 6.2.6.4</td>
<td>Women in Reproductive Age (non-pregnant &amp; non-lactating) (20-49 years)</td>
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<td>IFA tablets</td>
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<td>B.1 6.2.6.5</td>
<td>Pregnant &amp; Lactating Mothers</td>
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<td>IFA tablets</td>
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<td>B.1 6.2. 6.5. b</td>
<td>Folic Acid Tablets (400 mcg) for pregnant women</td>
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<td>B.1 6.2. 6.7</td>
<td>Drugs &amp; supplies for RBSK</td>
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<td>82.00</td>
<td>82.00</td>
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<td>B.1 6.2. 7.1</td>
<td>Medicine for Mobile health team</td>
<td>5,00 0.00</td>
<td>82 0</td>
<td>82.00</td>
<td>82.00</td>
<td>Approved @ Rs 5000 per team for 1640 teams. State to match State EDL with RBSK EDL to identify the drugs not part of State EDL and procure only these drugs with unit rate and unit cost as per required. Consistency each team to have all the drugs as per RBSK EDL, for drugs as per State EDL team to procure from block PHC. Each team to maintain stock register and report on number of children managed on spot in the monthly reporting format. Note : State had approval of RS 328 lakhs in Fy 2015-16. State was also to use, in Fy 2015-16, committed unspent amount of RS 295.2 lakhs of Fy 2014-15.</td>
</tr>
<tr>
<td>B.1 6.2. 6.8</td>
<td>Drugs &amp; supplies for AYUSH</td>
<td>1,00,000 0.00</td>
<td>2.0 19</td>
<td>2,019.0 0</td>
<td>2,019.0 0</td>
<td>An amount of Rs 2019 Lakhs is Approved @ Rs 1 lakhs per doctor/facility</td>
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<tr>
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<td>Drugs and Supplies for RKSK</td>
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<td>B.1</td>
<td>Sanitary</td>
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<td>FM R code</td>
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<tr>
<td>6.2.9.1</td>
<td>napkins procurement</td>
<td>-</td>
<td>167.52</td>
<td></td>
<td></td>
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<tr>
<td>B.1 6.2.10</td>
<td>Others</td>
<td>-</td>
<td>420.00</td>
<td>420.00</td>
<td></td>
<td>Approved Rs 420 Lakhs for Drugs and Supplies for blood services and blood related disorders- Haemoglobinopathies -For blood bags and diagnostic kits for 93 blood banks</td>
</tr>
<tr>
<td>B.1 6.3</td>
<td>National Free Diagnostic services</td>
<td>14,73 7.95</td>
<td>9,661.73</td>
<td></td>
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</tr>
<tr>
<td>B.1 6.3.1</td>
<td>Free Pathological services</td>
<td>-</td>
<td>4.451</td>
<td>5,475.00</td>
<td>5475.00</td>
<td>Approved subject to adherence to GoI guidelines. Suggestive model is a centralized model at state level with a maximum of 5 clusters to avoid district level tendering</td>
</tr>
<tr>
<td>B.1 6.3.2</td>
<td>Free Radiological services</td>
<td>-</td>
<td>43.50</td>
<td>690.00</td>
<td>690</td>
<td>Approved as bellow: 1- CT Scan Services - Rs 746.53 lakhs is Approved subject to adherence to GoI guidelines. Suggestive model is a centralized model at state level with a maximum of 5 clusters to avoid district level tendering. No capital procurement of equipment shall be supported. 2- AERB Compliance Exercise – Rs 1086 lakhs is Approved 3- Free MRI Services - Rs. 613 Lakhs is approved. The State is suggested to provide MRI services in PPP mode. 4- Dialysis Initiative - Rs 1051.20 Lakhs is Approved @ Rs.800 per session. Suggestive model is a centralized model at state level with a maximum of 5 clusters to avoid district level tendering.</td>
</tr>
<tr>
<td>B.1 6.3.3</td>
<td>Others</td>
<td>-</td>
<td>8,572.95</td>
<td>3496.73</td>
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<td>B.1</td>
<td>Drug Ware</td>
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<tr>
<td>7</td>
<td>Housing</td>
<td>-</td>
<td>15,039.99</td>
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<tr>
<td>B.1 7.1</td>
<td>Drug warehouses (include all operating costs)</td>
<td>-</td>
<td>360.93</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>B.1 7.1.1</td>
<td>Human Resources</td>
<td>89</td>
<td>311.43</td>
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<td></td>
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<tr>
<td>B.1 7.1.2</td>
<td>Others</td>
<td>19</td>
<td>44.17</td>
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**Remarks**

Approved as follows:

a) State level: 1 position each for 12 months; Accountant @ Rs 11000 pm, Computer Operator / Store keeper @ Rs 11550 pm. Lumpsum amount of Rs 4.29 lakhs approved for outsourcing IV Class Loader, Generator Operator cum Electrician, Sweeper, Armed Guards, General Guards and Gardener to the extent possible.

b) Regional level: 11 positions each for 12 months; Accountant @ Rs 11550 pm, Computer Operator/Store keeper @ Rs 11550 pm. Lumpsum amount of Rs 65.50 lakhs approved for outsourcing Fork-Lift Operator cum Mechanic, IV Class Loader, Generator Operator cum Electrician, Sweeper, Armed Guards, General Guards and Gardener to the extent possible..

c) District level: 53 Computer Operator/Store keeper @ Rs 11550 pm for 12 months. Lumpsum amount of Rs 134.98 lakhs approved for outsourcing Generator Operator cum Electrician, Loader, Chowkidar and part time staff to the extent possible.

Increment has been approved separately.

Approved for operational expenses of warehouses as per last year.
<table>
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<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
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<tr>
<td>B.1 7.2</td>
<td>Supply chain logistic system</td>
<td>-</td>
<td>-</td>
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<tr>
<td>B.1 7.3</td>
<td>Others</td>
<td>16,197.44</td>
<td>14,679.06</td>
<td></td>
<td></td>
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<tr>
<td>B.1 7.3.1</td>
<td>Logistic Management Information System - Family Planning</td>
<td>1</td>
<td>15.00</td>
<td>00</td>
<td></td>
<td>Not Approved</td>
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<tr>
<td>B.1 7.3.2</td>
<td>Strengthening of Drug Quality Process in Uttar Pradesh</td>
<td>1</td>
<td>318.00</td>
<td>225.00</td>
<td></td>
<td>Rs. 225 Lakh Approved for Quality Testing. Strengthen the Drug testing lab at UPDPL is not Approved</td>
</tr>
<tr>
<td>B.1 7.3.3</td>
<td>District Drugwaare House, Regional Drug Ware House and Tranportation of drug and medical supplies from district Drugware houses to Govt. Health Facilities</td>
<td>1</td>
<td>15.864.44</td>
<td>14454.06</td>
<td></td>
<td>Approved as bellow: 1- an amount of Rs11368 lakhs is Approved for 69 districts. The cost estimate is based on the model estimate. As discussed with State NRHM Chief Engineer, the drug ware house operation from the ground floor building will continue during construction of additional floors and will not hamper the drug distribution. State has to take all safety measures during construction. The estimate cost is inclusive of 1 % for Construction workers welfare Cess, 3rd party examination of works, one no 2 ton capacity luggage lift, earth quake measures cent age charges, contingency. State will take all necessary approvals from local authorities. 2- Rs 1269 Lakhs for Storage</td>
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<td>FM R code</td>
<td>Budget Head</td>
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|           |             |                 |                   |                             |                   | 3- HR: Rs 33.30 lakhs @ Rs 15000/pharmacist/months for 6 months for 37 pharmacist. Pharmacist will do the entry of stock in compute and only one pharmacist will be post in each drug ware house irrespective of population of the district. Night Duty Guard, generator operator cum electrician, guard and sweeper will be out sourced. The post of Computer operator cum store keeper is not approved. Night duty guard, loader, generator operator cum electrician, guard and sweeper post is not approved. A lumpsum amount Rs 50 Lakhs is approved for outsourcing of these activities.
|           |             |                 |                   |                             |                   | 4- Rs 120.48 for equipmmt cost
|           |             |                 |                   |                             |                   | 5- Rs 382.69 lakhs for amenities cost
|           |             |                 |                   |                             |                   | 6- Rs 784.49 lakhs for strengthening of regional grug ware house
<p>|           |             |                 |                   |                             |                   | 7- Rs 446.10 Lakhs for transportation of rug and medical supplies from district drug ware house to government facilities (CHC/PHC/Scs |
| B.1 8     | New Initiatives/ Strategic Interventions | 10,330.69         |                   | 2,983.1                   |                   |
| B1 8.1    | Universal Health Coverage (pilot))         |                 |                   |                             |                   |
| B1 8.2    | Others                  | 322, 01, 50, 00  | 1                 | 3,454.11                   | 1,584.00          | Approved for: 1) This proposal is an innovation , however one time approval is being accorded for the activity looking at the high burden of malnutrition in the State. |</p>
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<tr>
<th>FM R code</th>
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<th>Amount (In Lakhs)</th>
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<tbody>
<tr>
<td>B1 8.3</td>
<td>Q+ Strategy</td>
<td>1</td>
<td>2,094.92</td>
<td>363.17</td>
<td></td>
<td>In the proposal for treatment of SUW children, transportation cost of children is approved @ Rs 1.5 lakh for 823 blocks i.e. Rs 12.34 Crores is Approved as a onetime activity. Approval is provided on the conditionality that quarterly reports would be provided for physical and financial progress of each component. State to ensure that there is no duplication of these activities under Nutrition Mission. Once the State Nutrition Mission is streamlined, this activity may be budgeted under Nutrition Mission. Other components such as cost of medicine should be borne from Free drug policy, IEC, printing and data entry for SUW may be taken from State Nutrition Mission and hence no separate budget is being approved for the same. 2) Approved Rs 350 lakhs for Screening of Ca-Cervix as per last year's approval.</td>
</tr>
<tr>
<td>B1 8.4</td>
<td>7+ Strategy</td>
<td>7</td>
<td>4,781.66</td>
<td>1,035.96</td>
<td></td>
<td>Approved as per annexure B18.4</td>
</tr>
<tr>
<td>B.1 9</td>
<td>Health Insurance Scheme</td>
<td></td>
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<tr>
<td>B.2 0</td>
<td>Research, Studies, Analysis</td>
<td>90,9 9,20 0.00</td>
<td>4</td>
<td>519.44</td>
<td>50.00</td>
<td>The evaluation and survey of indicator related to FP is already done annually by Track 20. Not approved. Other three Research studies are also</td>
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<td>FM R code</td>
<td>Budget Head</td>
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<td>not approved. An amount of Rs 50 Lakhs is Approved for research, but state need to develop a research study based on the acual need with the consultation of GoI.</td>
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<td>B.2</td>
<td>State level health resources centre(SHSRC)</td>
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<tr>
<td>B.2</td>
<td>B.2.1 SHSRC - HR</td>
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<td>Revalidated as bellow: An amount of Rs 200 Lakhs was approved in FY 2013-14 under B.2.1 and an amount of Rs 500 Lakhs was approved under A.9.10.2 in FY 2014-15 to establish a new training institution/school. But as per discussion with MD-NHM UP, and Director SIHFW, it was concluded that State health resource center dedicated to Health System strengthening and generating data for policy reform and programme implementation exclusively is highly desirable. The revalidated amount may be used for this purpose. This center irrespective of its location should be primarily responsible to the state health system and its budget utilization and work will be monitor by State health Mission.</td>
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<tr>
<td>B.2</td>
<td>B.2.2 Other cost</td>
<td></td>
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<tr>
<td>B2</td>
<td>B2.1 Support Services</td>
<td>6,442.47</td>
<td></td>
<td></td>
<td>887.07</td>
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<td>B2</td>
<td>B2.2 Support Strengthening NPCB</td>
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<td>B2</td>
<td>B2.2.1 Support Strengthening NPCB</td>
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<td>B2</td>
<td>B2.2.2 Support Strengthening</td>
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<td>B2 2.3</td>
<td>Support Strengthening NVBDCP</td>
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<td>Approved of Rs 792.81 lakhs. Refer to details provided in the HR annexure B 22.3.</td>
</tr>
<tr>
<td>B2 2.4</td>
<td>Support Strengthening RNTCP</td>
<td>318, 99.7, 80.0</td>
<td>20</td>
<td>547.4 1</td>
<td>80.00</td>
<td>An amount of Rs 141.38 lakhs is Approved as bellow: a) Rs 80 lakhs for follow up services at SGPGI &amp; IMSRML, Lucknow and RTPMUs. b) 4 Consultants RTPMU @ Rs 57,750 pm - 3 posts for 12 months and 1 vacant post for 6 months. c) DEOs not approved. Lump sum amount of Rs 11.63 lakhs approved for outsourcing data entry operation on task basis to the extent possible. d) Office Assistants not approved. Lump sum amount of Rs 6.98 lakhs approved for outsourcing staff to the extent possible 3- Following activities are not approved. Honorarium for Pediatric TB Suspects Sample collection from Private Sector, Regional TB Programme Management Unit budget beyond HR, Accountant at STDC, CCTV Surveillance for security of IRL, STDC, Hostel &amp; training Halls, Intercom facility, Furniture - Training hostel,Hostel rooms, Seminar hall, training hall, Library at STDC Agra, AC for Training Facility ( 2 ton x 4 ) at STDC Agra, AC for hostel rooms ( 1.5 ton x 30 ) at STDC Agra, Enhancement of power load for hostel &amp; training hall at STDC Agra, Mini Bus (Tempo</td>
</tr>
<tr>
<td>FMR code</td>
<td>Budget Head</td>
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<td>Quantity / Target</td>
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<td>B2 2.5</td>
<td>Contingency support to Govt. dispensaries</td>
<td>-</td>
<td>2</td>
<td>1,744.15</td>
<td>94.51</td>
<td>Not approved for establish palliative care center as a part of center of excellence to provide training and other management care. An amount of Rs 94.51 Lakhs is Approved for palliative care as below: 1- Rs 81 Lakhs for Misc. (Workshop/Stationery/POL/Communication etc. Rs. 1.00 lacs per year for State and District level Palliative Care Cell HR at State level: 1 Coordinator @ Rs 35,000 pm for 6 months. Data Entry Operators not approved. Lump sum amount of Rs 0.72 lakhs approved for outsourcing data entry operation on task basis to the extent possible. HR at district level: 1 Palliative Care Physician @ Rs 90,000 pm; 4 Nurse @ Rs 19,060 pm; and 1 Multi Task Worker @ Rs 12000 pm for 6 months.</td>
</tr>
<tr>
<td>B2 2.6</td>
<td>Other NDCP Support Programmes</td>
<td>-</td>
<td>2</td>
<td>1,744.15</td>
<td>94.51</td>
<td></td>
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<tr>
<td>B2 2.7</td>
<td>Non communicable diseases</td>
<td>340, 75,000</td>
<td>1</td>
<td>340.75</td>
<td>0.00</td>
<td>Not Approved</td>
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<td>B2 2.8</td>
<td>Non communicable</td>
<td>13,9</td>
<td>1</td>
<td>10.96</td>
<td>0.75</td>
<td>Rs 5 lakhs for approval for Renovation and furnishing, furniture, computers,</td>
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<td>FM R code</td>
<td>Budget Head</td>
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<td>diseases</td>
<td>1,00 0.00</td>
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<td>office equipments approved under A.10.1.11.4 One Programme Assistant approved @ Rs. 25000.00 for 03 months</td>
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<td>B.2 3</td>
<td>Other Expenditures (Power Backup, Convergence etc)</td>
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<td></td>
<td>POL for Generators - District level Hospitals</td>
<td>5,34,000.00</td>
<td>16 4</td>
<td>2,884.00</td>
<td>2,404.20</td>
<td>Approved @ Rs. 35000 per month for 156 DH. State to share the utilization status of funds.</td>
</tr>
<tr>
<td>B.2 3.2</td>
<td>POL for Generators - CHCs/PHCs</td>
<td>2,37,000.00</td>
<td>87 7</td>
<td>1,841.70</td>
<td>1722.00</td>
<td>Approved @ Rs. 17500 per month for CHC/PHC delivery points in 820 blocks. State to share the utilization status of funds.</td>
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<tr>
<td>B.2 3.3</td>
<td>Installation of Solar Lights at District Level Hospitals</td>
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<td>B.2 3.4</td>
<td>Powerbackup - Generator 5 KVA</td>
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<tr>
<td>B.2 3.5</td>
<td>Installation of Centralized Oxygen Supply System in SNCUs</td>
<td>2,00,000.00</td>
<td>50</td>
<td>100.00</td>
<td>0.00</td>
<td>Not Approved. The availability of centralised oxygen supply system in SNCU is critical for ensuring continuous oxygen supply in sick babies. However this upgradation should be used for improving the care at other areas like emergency, OT, Labour room and ICU also. The proposal may be revised for the facility as a whole and not only at SNCU.</td>
</tr>
<tr>
<td>B.2 3.6</td>
<td>POL for Generators - MCH Wing(100/50/3)</td>
<td>14 0</td>
<td>199.5 0</td>
<td>0.00</td>
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<td>Not Approved. State to give status of operationalization of MCH wings and also those under PPP mode. Once they become fully operational, then the</td>
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<td>same can be proposed</td>
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<tr>
<td>B.2 3.7</td>
<td>Powerbackup - Generator 5 KVA</td>
<td>36</td>
<td>54.00</td>
<td>27.00</td>
<td>Approved 18 Divisional blood banks @ Rs.1.5 lakhs per BB.</td>
<td></td>
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<tr>
<td>B.2 4</td>
<td>Collaboration with Medical Colleges and Knowledge partners</td>
<td>1</td>
<td>1,582.08</td>
<td>1573.13</td>
<td>Approved for Establishment of Pediatric Cardiac Evaluation and Cardiac Surgery Unit at Aligarh Muslim University, Aligarh. Modalities would be finalised in discussion with National RBSK unit. HR approval for Rs lakhs for 6 months is as follows: 3 Assistant Professors - Cardiac Anaesthesia, Pediatric Cardiology and Pediatric Intensive care @ Rs 71,000 pm; 14 Nursing Staff @ Rs 30,000 pm; 8 Anaesthetic Technician @ Rs 13,250 pm; 4 Perfusionist/ Cath lab Technician @ Rs 30,000 pm; 3 OT technicians @ Rs 13,250 pm; 2 Accountants @ Rs 30,000 pm; and 13 MTS @ Rs 20,000 pm. The centre would offer following Services - ü Cardiac screening-fetal and pediatric ü Cardiac surgery and interventions- All congenital heart defects and also RHD (PTMC/ CMV and valve repairs/replacements). ü Holistic approach towards child development especially post cardiac surgery patients, that includes adequate stimulation and proper rehabilitation. ü A centre for the structured training of Pediatric Cardiology fellows. ü A resource centre for training of Pediatricians on basics of Echocardiography. Such a progressive centre would require</td>
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<td>FM R code</td>
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<tr>
<td>B.2 5</td>
<td>National Programme for Prevention and control of deafness</td>
<td></td>
<td>1,216.59</td>
<td>1,041.27</td>
<td></td>
<td>a dedicated infrastructure with NHM and RBSK Visibility. AMU to ensure that The dedicated centre has a dedicated infrastructure.</td>
</tr>
<tr>
<td>B.2 5.1</td>
<td>Recurring Grant-in-aid</td>
<td></td>
<td>245.39</td>
<td>231.80</td>
<td></td>
<td></td>
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<tr>
<td>B.2 5.1.1</td>
<td>Manpower at State Level</td>
<td></td>
<td>9.30</td>
<td>7.80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.2 5.1.1.a</td>
<td>Consultant @Rs.50,000/-pm</td>
<td></td>
<td>4.50</td>
<td>4.50</td>
<td>3.00</td>
<td>Approved for 1 new Consultant @ Rs 50,000 pm for 6 months.</td>
</tr>
<tr>
<td>B.2 5.1.1.b</td>
<td>Programme Assistant @ Rs.15,000/-pm</td>
<td></td>
<td>3.00</td>
<td>3.00</td>
<td>3.00</td>
<td>Approved for 1 Programme Assistant @ Rs 25,000 pm for 12 months.</td>
</tr>
<tr>
<td>B.2 5.1.1.c</td>
<td>Data Entry Operator @Rs.15,000/-pm</td>
<td></td>
<td>1.80</td>
<td>1.80</td>
<td>1.80</td>
<td>Data Entry Operators not approved. Lump sum amount of Rs 1.80 lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
</tr>
<tr>
<td>B.2 5.1.2</td>
<td>Public Private Partnership</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>B.2 5.1.3</td>
<td>Manpower at District level</td>
<td></td>
<td>216.09</td>
<td>204.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.2 5.1.3.a</td>
<td>ENT Surgeon @Rs.60,000/-pm</td>
<td></td>
<td>-</td>
<td>28.80</td>
<td>21.6</td>
<td>Approved @ Rs.80,000/- p.m. for 9 months for 3 ENT surgeons in Basti, Gorkhpur and Saharanpur as requested by state and as per discussion in NPCC meeting.</td>
</tr>
<tr>
<td>B.2</td>
<td>Audiologist@R</td>
<td></td>
<td></td>
<td>91.2</td>
<td></td>
<td>Approved @ Rs.30000/pm for 12</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity</td>
<td>Amoun Proposed (Rs. Lakhs)</td>
<td>Amoun (In Lakhs)</td>
<td>Remarks</td>
</tr>
<tr>
<td>-----------</td>
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<td>----------</td>
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</tr>
<tr>
<td>5.1.3.b</td>
<td>s.30,000/-pm</td>
<td>-</td>
<td>36</td>
<td>93.64</td>
<td></td>
<td>months for 20 Audiologist for 20 old districts and for Rs.30000/-pm for 4 months for 16 Audiologist of 16 new districts. State to ensure that these Audiologists are placed in districts other than those where DEICs have been established.</td>
</tr>
<tr>
<td>B.2 5.1.3.c</td>
<td>Audiometric Assistant @Rs.1 5,000/-pm</td>
<td>-</td>
<td>36</td>
<td>46.84</td>
<td>45.60</td>
<td>Approved for 36 Audiometric Assistants @ Rs 15,000 pm - 20 existing for 12 months and 16 new for 4 months. Increment has been approved separately for 2 existing positions.</td>
</tr>
<tr>
<td>B.2 5.1.3.d</td>
<td>Instructor for Hearing Impaired Children @Rs.15,000/-pm</td>
<td>-</td>
<td>36</td>
<td>46.82</td>
<td>45.60</td>
<td>Approved for 36 Instructor for Hearing Impaired Children @ Rs 15,000 pm - 20 existing for 12 months and 16 new for 4 months. Increment has been approved separately for 1 existing position.</td>
</tr>
<tr>
<td>B.2 5.1.4</td>
<td>IEC</td>
<td></td>
<td></td>
<td>20.00</td>
<td>20.00</td>
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</tr>
<tr>
<td>B.2 5.1.4.a</td>
<td>State Level @Rs.20 lakh</td>
<td>20.00</td>
<td>1</td>
<td>20.00</td>
<td>20.00</td>
<td>Approved as per operational guidelines.</td>
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<tr>
<td>B.2 5.1.4.b</td>
<td>District level @Rs.2 lakh</td>
<td>-</td>
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<tr>
<td>B.2 5.2</td>
<td>Non recurring Grant-in-aid</td>
<td></td>
<td></td>
<td>971.20</td>
<td>809.20</td>
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<tr>
<td>B.2 5.2.1</td>
<td>Training @Rs.10 lakh/ Distt. for 7 level training</td>
<td>-</td>
<td>36</td>
<td>128.00</td>
<td>128.00</td>
<td>Approved However, funds may be utilised as per previous approvals/fund released. Approval of 40 lakh has been given in 2015-16 and funds are released @84% for 5 existing districts during 2008-19 and 50% for 3 existing districts during 2009-10. If the funds are not utilised for approvals in 2015-</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount (In Lakhs)</td>
<td>Remarks</td>
</tr>
<tr>
<td>-----------</td>
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<td>-----------------------------</td>
<td>-------------------</td>
<td>---------</td>
</tr>
<tr>
<td>B.25.2.1.a</td>
<td>Procurement of Equipment</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>545.00</td>
<td>Approved. However, funds may be utilized as per previous approvals/fund released. Approval of 100 lakhs has been given in 2015-16 and funds are released @ 100% for two pilot districts, 70% for 3 existing districts in 2008-09 and 50% for 3 existing districts in 2009-10. If the funds are not utilised for approvals in 2015-16, may be revalidated.</td>
</tr>
<tr>
<td>B.25.2.1.b</td>
<td>District Hospital @Rs.20 lakh/ Distt.</td>
<td>36</td>
<td>545.00</td>
<td>545.00</td>
<td>Approved for 16 new districts. However, funds may be utilised as per previous approvals/fund released. Approval of 37.50 lakhs has been given in 2015-16 and funds are released @ 100% for two pilot districts, 70% for 3 existing districts in 2008-09 and 50% for 3 existing districts in 2009-10. If the funds are not utilised for approvals in 2015-16, may be revalidated</td>
<td></td>
</tr>
<tr>
<td>B.25.2.1.c</td>
<td>CHC/Sub-Divisional Hospital @Rs.50,000/- Kit</td>
<td>34</td>
<td>51.00</td>
<td>23.40</td>
<td>Approved for 16 new districts. However, funds may be utilised as per previous approvals/fund released. Approval of 37.50 lakhs has been given in 2015-16 and funds are released @ 100% for two pilot districts, 70% for 3 existing districts in 2008-09 and 50% for 3 existing districts in 2009-10. If the funds are not utilised for approvals in 2015-16, may be revalidated</td>
<td></td>
</tr>
<tr>
<td>B.25.2.1.d</td>
<td>PHC@RS.15,000/- kit</td>
<td>1.648</td>
<td>247.20</td>
<td>112.80</td>
<td>Approved for 16 new districts. However, funds may be utilised as per previous approvals/fund released. Approval of 114.03 lakhs has been given in 2015-16 and funds are released @ 100% for two pilot districts, 70% for 3 existing districts in 2008-09 and 50% for 3 existing districts in 2009-10. If the funds are not utilised for approvals in 2015-16, may be revalidated</td>
<td></td>
</tr>
<tr>
<td>HR increment calculated @ 5% for above approvals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.27</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.2 9</td>
<td>National Programme for Prevention and Control of Flurosis (NPPCF)</td>
<td>1</td>
<td>485.04</td>
<td></td>
<td>60.30</td>
<td>Approved of 5 District Consultants @ Rs 40,000 pm and 5 Lab Technicians @ Rs 11,000 pm for 6 months. Not approved: Field Investigators MOBILITY: Travel Cost, POL, vehicle etc. Office expenses on telephone, Broadband Expenses, Annual Disease Surveillance report, Meetings and other miscellaneous expenditures etc.</td>
</tr>
<tr>
<td>B.2 9.2.1</td>
<td>Manpower</td>
<td></td>
<td></td>
<td></td>
<td>15.30</td>
<td></td>
</tr>
<tr>
<td>B.2 9.2.2</td>
<td>Health Education and Publicity</td>
<td>309.00</td>
<td></td>
<td></td>
<td>15.00</td>
<td>Approved as per the norms for 5 districts</td>
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<tr>
<td>B.2 9.2.4</td>
<td>Medical Management including treatment Surgery and rehab-supplementation of vitamins &amp; minerals</td>
<td>30.00</td>
<td></td>
<td></td>
<td>30.00</td>
<td>Approved. The approved budget doesn’t cover the machine, furniture and A.C expenses.</td>
</tr>
<tr>
<td>B.2 9.2.5</td>
<td>Coordination meeting at district level</td>
<td>60.00</td>
<td></td>
<td></td>
<td>0.00</td>
<td>Not Approved</td>
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</table>
## MFP Annexure

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Designation</th>
<th>No. of Positions</th>
<th>Salary per month</th>
<th>No. of months</th>
<th>Total amount (Rs. In lakhs)</th>
<th>Comments/Remarks</th>
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### Community Process (HR at State Level) - B.1.5

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<tr>
<td>GM Community process (on deputation)</td>
<td>1</td>
<td>1,37,500</td>
<td>12</td>
<td>16.50</td>
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<td>DGM Community process (on deputation)</td>
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<td>80,000</td>
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<tr>
<td>Consultants</td>
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<td>46,200</td>
<td>12</td>
<td>11.09</td>
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<tr>
<td>Programme Coordinator</td>
<td>1</td>
<td>34,650</td>
<td>12</td>
<td>4.16</td>
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<td>Programme Assistants</td>
<td>1</td>
<td>28,875</td>
<td>12</td>
<td>3.47</td>
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<tr>
<td>Team Leader</td>
<td>1</td>
<td>57,750</td>
<td>12</td>
<td>6.93</td>
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<td></td>
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<tr>
<td>ASHA Program Manager</td>
<td>1</td>
<td>45,000</td>
<td>12</td>
<td>5.40</td>
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<tr>
<td>State Coordinator</td>
<td>1</td>
<td>36,750</td>
<td>12</td>
<td>4.41</td>
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<td></td>
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<tr>
<td>Regional Coordinators</td>
<td>4</td>
<td>36,750</td>
<td>12</td>
<td>17.64</td>
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<td></td>
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<tr>
<td>Regional Coordinators (vacant)</td>
<td>8</td>
<td>35,000</td>
<td>6</td>
<td>16.80</td>
<td>Salary as proposed by the State.</td>
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<tr>
<td><strong>Total - B.1.5</strong></td>
<td><strong>21</strong></td>
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<td><strong>91.19</strong></td>
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### Infrastructure Development Wing (HR at State Level) - B.5.4.1

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Chief Engineer</td>
<td>1</td>
<td>1,25,000</td>
<td>6</td>
<td>7.50</td>
<td>Salary as proposed by the State.</td>
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<tr>
<td>Executive Engineer</td>
<td>1</td>
<td>92,400</td>
<td>12</td>
<td>11.09</td>
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<td></td>
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<tr>
<td>Advisor - Technical</td>
<td>1</td>
<td>45,000</td>
<td>6</td>
<td>2.70</td>
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<tr>
<td>Asst. Engineer (Civil/E/M)</td>
<td>2</td>
<td>51,980</td>
<td>12</td>
<td>12.48</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asst. Engineer (Civil)</td>
<td>1</td>
<td>50,000</td>
<td>6</td>
<td>3.00</td>
<td>Salary as proposed by the State.</td>
<td></td>
</tr>
<tr>
<td>Architect</td>
<td>1</td>
<td></td>
<td>12</td>
<td>6.24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S.No.</td>
<td>Designation</td>
<td>No. of Positions</td>
<td>Salary per month</td>
<td>No of months</td>
<td>Total amount (Rs. In lakhs)</td>
<td>Comments/Remarks</td>
</tr>
<tr>
<td>-------</td>
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<td>--------------</td>
<td>-----------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td></td>
<td>Junior Engineer (Civil/E/M)</td>
<td>3</td>
<td>45,000</td>
<td>12</td>
<td>16.20</td>
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<tr>
<td></td>
<td>Junior Engineer (Civil/E/M)</td>
<td>1</td>
<td>45,000</td>
<td>6</td>
<td>2.70</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(vacant)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accountant</td>
<td>1</td>
<td>28,050</td>
<td>12</td>
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<tr>
<td></td>
<td>Accountant (vacant)</td>
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<td>28,050</td>
<td>6</td>
<td>1.68</td>
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<tr>
<td></td>
<td>Data Assistant</td>
<td>1</td>
<td>26,180</td>
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<td>Salary as proposed by the State.</td>
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<tr>
<td></td>
<td>Computer Operator</td>
<td></td>
<td>Lumpsum</td>
<td></td>
<td>2.90</td>
<td>Computer operators not approved. Lump sum amount approved for outsourcing data entry operation on task basis to the extent possible.</td>
</tr>
<tr>
<td></td>
<td>Programme Assistant</td>
<td>2</td>
<td>22,660</td>
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<td>Salary as proposed by the State.</td>
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<td></td>
<td>Office Assistant</td>
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<td>Total - B.5.4.1</td>
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<td>18</td>
<td></td>
<td></td>
<td>77.63</td>
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</tbody>
</table>
All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to existing HR. Employer's contribution towards EPF, if applicable, has been under A.10.8.5.

HR at BRD Medical College, Gorakhpur

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Designation</th>
<th>No. of Positions</th>
<th>Salary per month</th>
<th>No of months</th>
<th>Total amount (Rs. In lakhs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Professor - Balrog</td>
<td>1</td>
<td>99,750</td>
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<tr>
<td>2</td>
<td>Asst. Professor</td>
<td>2</td>
<td>88,935</td>
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<tr>
<td>3</td>
<td>Lecturer - Balrog</td>
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<td>63,000</td>
<td>12</td>
<td>15.12</td>
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<tr>
<td>4</td>
<td>Lecturer – Microbiology</td>
<td>1</td>
<td>63,000</td>
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<td>5</td>
<td>Senior Resident</td>
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<td>44,468</td>
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<tr>
<td>6</td>
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<td>41,927</td>
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<tr>
<td>7</td>
<td>Sister In charge</td>
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<td>12</td>
<td>8.23</td>
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<tr>
<td>8</td>
<td>Staff Nurse</td>
<td>37</td>
<td>21,599</td>
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<td>9</td>
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<td>10</td>
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<td>9.15</td>
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<td>11</td>
<td>ECG Technician</td>
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<td>8,589</td>
<td>12</td>
<td>1.03</td>
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<tr>
<td>12</td>
<td>Lab Technician</td>
<td>5</td>
<td>14,496</td>
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<tr>
<td>13</td>
<td>Lab Attendant</td>
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<td>8,118</td>
<td>12</td>
<td>3.90</td>
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<tr>
<td>14</td>
<td>OT Technician</td>
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<td>13,274</td>
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<td>15</td>
<td>Radiographer</td>
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<td>14,496</td>
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<td>3.48</td>
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<tr>
<td>16</td>
<td>EEG Technician</td>
<td>1</td>
<td>8,588</td>
<td>12</td>
<td>1.03</td>
</tr>
<tr>
<td>17</td>
<td>Physiotherapist</td>
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<td>17,787</td>
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<td>18</td>
<td>Occupational Therapist</td>
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<td>17,787</td>
<td>12</td>
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<tr>
<td>S.No.</td>
<td>Designation</td>
<td>No. of Positions</td>
<td>Salary per month</td>
<td>No of months</td>
<td>Total amount (Rs. In lakhs)</td>
</tr>
<tr>
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<td>19</td>
<td>Medical Record Technician</td>
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<td>8,589</td>
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<td>1.03</td>
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<td>20</td>
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<td>Driver</td>
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<td>10,162</td>
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<td>Laundary Attendant</td>
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<td>23</td>
<td>Kitchen Attendant</td>
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<td>Security Staff</td>
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<td>25</td>
<td>Supporting Staff</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>122</strong></td>
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<td><strong>368.21</strong></td>
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</table>

HR for 100 Bedded JE/AES Ward at BRD medical college, Gorakhpur

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Designation</th>
<th>No. of Positions</th>
<th>Salary per month</th>
<th>No of months</th>
<th>Total amount (Rs. In lakhs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Professor - Balrog</td>
<td>1</td>
<td>99,750</td>
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<td>11.97</td>
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<tr>
<td>2</td>
<td>Asst. Professor</td>
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<td>3</td>
<td>Lecturer - Balrog</td>
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<td>6</td>
<td>Sister In charge</td>
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<td>22,869</td>
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<td>7</td>
<td>Ward Staff Nurse</td>
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<td>8</td>
<td>Pharmacists</td>
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<td>11</td>
<td>Supporting Staff</td>
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<td><strong>Total</strong></td>
<td><strong>105</strong></td>
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<td><strong>388.83</strong></td>
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<td>S.No.</td>
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<td>Salary per month</td>
<td>No of months</td>
<td>Total amount (Rs. In lakhs)</td>
</tr>
<tr>
<td>-------</td>
<td>----------------------------------</td>
<td>------------------</td>
<td>------------------</td>
<td>--------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td></td>
<td><strong>HR increment calculated @ 5% for above approvals</strong></td>
<td></td>
<td></td>
<td></td>
<td><strong>35.77</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Grand Total</strong></td>
<td><strong>227</strong></td>
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<td><strong>792.81</strong></td>
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<td>FM R</td>
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<td>Proposed Budget (Rs. lakh)</td>
<td>Amount (Rs. in lakhs)</td>
<td>Remarks</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
<td>-----------------------------</td>
<td>-----------------------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Maternal Health: Additional contractual Staff Nurses, Dress code, PBI for LSCS &amp; normal delivery</td>
<td>1452.67</td>
<td></td>
<td>Approval pended as per revised proposal submitted by the State under Q+ Maternal health. The State needs to share a) For Additional 1339 SNs, share facility-wise gap analysis for 150 facilities Also needs to share OPD, IPD, Avg Normal deliveries per month, Avg CS per month for ascertaining additional SNs requirements as per MNH Tool kit. This will also facilitate the state to do a rationalization of HR and placing of SNs in facilities having additional load. b) &amp; c) With regard to incentive for non-HPDs facilities, again the state has to share facility-wise calculation in excel sheet for additional incentives likely to be given in terms of normal deliveries and C-sections. Here the proposal is generic with estimated additional 3.0 lacs normal deliveries proposed and 10000 CS proposed which is generic.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Child Health Additional contractual Staff Nurses for NBSUs, Dress code, Operationa l cost/ Kangaroo Mother Care, Photothera py Machine &amp; Radiant Warmers for NBSUs</td>
<td>458.81</td>
<td>354.17</td>
<td>Approved of Rs. 354.17 Lakhs as budgeted for Child health activities with the conditionality of sharing gap analysis report with Division. The State should ensure that there is no duplication of NBSUs where they already exist. Additional HR to be provided only as per norms. HR approval as follows: 183 Staff Nurses @ Rs 19,060 pm for 6 months = Rs 209.28 lakhs.</td>
<td></td>
</tr>
<tr>
<td>FM R</td>
<td>Budget head</td>
<td>Proposed Budget (Rs. lakh)</td>
<td>Amount (Rs. in lakhs)</td>
<td>Remarks</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
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<td>----------------------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td><strong>Family Planning</strong> Additional contractual Family Planning Counsellors, Dress code for RMNCH+ A Counselors, Establishment cost of Family Welfare Counselling Corners, Incentive for motivators &amp; service providers</td>
<td>432.72</td>
<td>9.00</td>
<td>State has proposed Rs.432.72 lakh for Family planning initiatives under Q+Strategy. Rs. 110.72 lakh has been proposed for additional counsellors, counselling corners, uniform for counsellors, IUCD Kiosks. These activities has already been approved under respective heads and is a duplication so not approved. Rs. 313 lakh has been proposed for additional incentives for service providers and IUCD/PPIUCD. As per GoI guidelines no additional incentive is permissible and hence not approved. Rs. 7.5 lakh is approved for PBI @ Rs. 50 additional incentive for PPIUCD insertion beyond 30% acceptance. Rs. 1.5 lakh is approved for PBI @ Rs. 200 additional incentive for PPS beyond 15% acceptance rate.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>RKS K</strong> Establish AFHS Clinics (DHS 20 &amp; CHCs 68), Equipment for new AFHS Clinics, Operation expenses for 88 AFHS Clinics, Additional</td>
<td>119.04</td>
<td>0.00</td>
<td>Activity is not approved-- All District Hospitals have dedicated AH counselors in place. In the RKS K districts counselors have been approved up to the CHC level</td>
<td></td>
</tr>
<tr>
<td>FM R</td>
<td>Budget head</td>
<td>Proposed Budget (Rs. lakh)</td>
<td>Amount (Rs. in lakhs)</td>
<td>Remarks</td>
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<td>-----------------------------</td>
<td>-----------------------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td></td>
<td>contractual Adolescent Health Counsellors</td>
<td>301.00</td>
<td>0.00</td>
<td>IEC component proposed under Q+ Strategy is already under <strong>FMR B.10.6.1</strong></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>IEC Facility branding, Kayakalp poster, Digital Scroller, Media workshop, Press advertisement, Hoarding, May I Help You KIOSK</td>
<td>301.00</td>
<td>0.00</td>
<td></td>
<td></td>
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<tr>
<td>6</td>
<td>Quality Assurance Facility branding, training of facility staff in infection prevention &amp; biomedical waste management (Budgetary provision made)</td>
<td>0.00</td>
<td>0</td>
<td></td>
<td></td>
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<tr>
<td>FM R</td>
<td>Budget head</td>
<td>Proposed Budget (Rs. lakh)</td>
<td>Amount (Rs. in lakhs)</td>
<td>Remarks</td>
<td></td>
</tr>
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<td>------</td>
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<tr>
<td>7</td>
<td>Routine Immunization</td>
<td>301.40</td>
<td>0.00</td>
<td><strong>Not approved.</strong> No civil work is recommended. Funds for Maintenance of cold chain points is already in C.4. State should do gap analysis for 150 identified delivery points. Only after gap analysis ANMs recruitment can be considered. HR Rationalisation should be done by the State in total considering other activities as well e.g. activities for Maternal Health. Activity is subjected to pooled activity after the gap analysis and HR rationalization. Incentives should be performance based. State is to share the plan for performance based incentives.</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>FM R</td>
<td>Budget head</td>
<td>Proposed Budget (Rs. lakh)</td>
<td>Amount (Rs. in lakhs)</td>
<td>Remarks</td>
</tr>
<tr>
<td>----</td>
<td>------</td>
<td>-------------</td>
<td>----------------------------</td>
<td>-----------------------</td>
<td>---------</td>
</tr>
<tr>
<td>8</td>
<td>Blood Bank Bench Top Centrifuge, Microscope, Refrigerator, Blood Transportation Boxes</td>
<td>481.95</td>
<td>0</td>
<td>Not Approved.</td>
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**Total** 2094.92 363.17
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<th>FM R</th>
<th>Budget head</th>
<th>Budge t Proposed (Rs. lakh)</th>
<th>RCH Recommendations</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Maternal Health: Additional contractual Staff Nurses, Strengthening of Labour room, PBI, Nurse Mentors in HPD</td>
<td>55.20</td>
<td>Approval pended- Under the revised proposal for 7+ state has proposed difficult area allowance for 21 FRUs in 7 districts, however no detailing has been given and no details have been shared regarding facility-wise categorization into A, B, C categories for which differential allowance is proposed @Rs 50000/-, @Rs 80000/- and @ Rs 100000/- fo A, B, C categories. Detail excel sheet needs to be shared. It is also not clear that other parameters of strengthening like LR/OT strengthening for L1, L2 and L3 facilities, additional SNs proposed in pre-NPCC PIP, standard protocols to be displayed at all the facilities etc are the part of the strategy under 7+. State to give a clear revised proposal under MH along-with facility-wise excelsheets and detail calculation needs to be worked out before this can be further perused and approved.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Child Health SNCU allowance (Paediatricians, SN, Class IV employee), additional contractual Staff Nurses, Operational cost for KMC, Phototherapy machine &amp; Radiant Warmers for NBSUs &amp; incentive</td>
<td>738.55</td>
<td>627.05</td>
<td>The State has identified seven worst districts under this initiative. These are- Bahraich, Balrampur, Gonda, Kheri, Shrawasti, Siddharthnagar and Sitapur. State has proposed to top up the salary of paediatricians, nurses and class-IV staff with incentive. While the incentive may be, State should set up minimum performance benchmarks for the service providers to become eligible for incentive and share the same with CH Division, MoHFW. State has also proposed to set up 59 NBSUs in these districts. State needs to share gap analysis or case load with Division. HR approval as follows: 177 Staff Nurses @ Rs 19,060 pm for 6 months = Rs 202.42 lakhs.</td>
</tr>
<tr>
<td>FMR</td>
<td>Budget head</td>
<td>Budget Proposed (Rs. lakh)</td>
<td>RCH Recommendations</td>
<td>Remarks</td>
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<td>---------------------------</td>
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<td>---------</td>
</tr>
<tr>
<td></td>
<td>to MOs &amp; SNs, PBI for MOs, SNs, Nutritionists, Cooks, Cleaners, ASHA &amp; Caretakers at NRCs</td>
<td>171.59</td>
<td>Rs. 171.58 lakh is proposed for Family Planning activities. Rs. 25.2 lakh for COT vehicle is approved; Rs. 57.07 lakh for extra incentive to surgeon for mobile team is approved (All incentives to be provided through DBT and not cash). Total Approval= 82.27 lakh. Rs. 89.31 lakh for extra incentive to motivators and for extra incentive for PPIUCD insertion is not approved</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Family Planning Hire vehicles, Sterilization (NSV), Incentive for Motivators &amp; Service Providers</td>
<td>1606.4 8</td>
<td>306.6 4</td>
<td>Comments from CP:</td>
</tr>
<tr>
<td></td>
<td>Approved - 1. VHSNC FP Mentor - for approval-  a) State level TOT - with contingency @ Rs. 150  b) District level orientaion of BPM/ BCM and MOICI- with contingency @ 100  c) Block level training of FP mentors - with contingency @ Rs. 100  Not for approval-  a) Budget for meeting at block level has been proposed for 30 participant per meeting  b) State level sammelan State may propose for biannual meetings and awards in the supplementary PIP depending on the progress made by state. 2. Refresher training for ASHAs - for approval  a) Block level training of ASHAs  b) Budget proposed for TOT is on higher side - State had</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FM R</td>
<td>Budget head</td>
<td>Budget Proposed (Rs. lakh)</td>
<td>RCH Recommendations</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
<td>---------------------------</td>
<td>---------------------</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Performance Based team Incentive</td>
<td>received approval for Rs. 2.49 L for 7 days TOT at state level in FY 2015-16. TOT may be approved as per budget approved for state level TOT in FY 2014-15-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>IEC Facility Branding, Procure Digital Scroller, press advertisement, Procure May I Help You KIOSK etc.</td>
<td>457.50</td>
<td>IEC component proposed under 7+ Strategy is already under FMR B.10.6.1</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Quality Assurance Implement Quality Assurance activities in 75 delivery points of 7+ districts – A lump sum provision @ Rs. 50000.00 per facility has been made for 40 delivery points in the 7+ districts.</td>
<td>20.00 20.00</td>
<td>for approval</td>
<td></td>
</tr>
<tr>
<td>FMR</td>
<td>Budget head</td>
<td>Budget Proposed (Rs. lakh)</td>
<td>RCH Recommendations</td>
<td>Remarks</td>
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<td>-----</td>
<td>-------------</td>
<td>---------------------------</td>
<td>---------------------</td>
<td>---------</td>
</tr>
<tr>
<td></td>
<td>Soak Pit/Sharp Pit to be made according to the gap analysis and payment will be made as per actual.</td>
<td></td>
<td></td>
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<tr>
<td>7</td>
<td>Routine Immunisation Incentive to ANMs &amp; ASHA on Full Immunisation of children, incentive to Data Entry Operators for updation of data on MCTS portal</td>
<td>1456.94</td>
<td>Not Approved. No incentives for the said activities as ANM is a salaried staff and it falls under the ambit of her duties. However HR Rationalisation should be done by the State in total considering other activities as well e.g. activities for Maternal Health. Activity is subjected to pooled activity after the gap analysis and HR rationalization. Incentives should be performance based. State is to share the plan for performance based incentives.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Blood Storage Centre Bench Top Centrifuge, Microscope, Refrigerator</td>
<td>275.40</td>
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</tr>
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<td>FM R</td>
<td>Budget head</td>
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<td>RCH Recommendations</td>
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<td>-------------</td>
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<td>---------------------</td>
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</tr>
<tr>
<td></td>
<td>r, Blood Transportat ion Boxes</td>
<td>4781.66</td>
<td>1035.96</td>
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**Annexure B.24**

**Establishment of Pediatric Cardiac Evaluation and Cardiac Surgery under Rashtriya Bal Swasthya Karyakram (RBSK) in JLN Medical college, Aligarh**

<table>
<thead>
<tr>
<th>Budget head</th>
<th>Unit</th>
<th>Unit cost / Salary per month</th>
<th>Month</th>
<th>Total / Salary per month</th>
<th>in lakh</th>
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<tr>
<td><strong>Recurring Costs</strong></td>
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<td></td>
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<tr>
<td><strong>Personnel Cost</strong></td>
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<tr>
<td>Teaching Faculty :</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assistant Professors Cardiac Anaesthesia</td>
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<td>71,000</td>
<td>6</td>
<td>4,26,000.00</td>
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</tr>
<tr>
<td>Assistant Professors Pediatric Cardiology</td>
<td>1</td>
<td>71,000</td>
<td>6</td>
<td>4,26,000.00</td>
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<tr>
<td>Assistant Professors Pediatric Intensive care</td>
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<td>71,000</td>
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<td>4,26,000.00</td>
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<tr>
<td>Non Teaching/ Support Staff</td>
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<td>Nursing</td>
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<td>Anaesthetic Technician/TA/LDC</td>
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<td>Perfusionist/Cath lab Technician/UDC</td>
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<td>4,50,000.00</td>
<td>4.5</td>
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<td>Accounts (UDC)</td>
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<tr>
<td>MTS</td>
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<td>20,000</td>
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<td>15,60,000.00</td>
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<tr>
<td><strong>Sub Total Recurring cost</strong></td>
<td>46</td>
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<td>80,28,000.00</td>
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### One Time (Capital exp) Cost:

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<tr>
<th></th>
<th>Description</th>
<th>Cost (in lakh)</th>
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<tr>
<td>a</td>
<td>Cardiac Catheterisation Lab (5yrs warranty-CMC)</td>
<td>700.0</td>
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<tr>
<td>b</td>
<td>Open Heart surgery equipments</td>
<td>300.0</td>
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<tr>
<td>c</td>
<td>Dedicated Pediatric cardiac ICU- (6 bedded)</td>
<td>200.0</td>
</tr>
<tr>
<td>d</td>
<td>Echocardiography Lab (two dedicated 3D ECHO machines with TEE probe- 1 crore each)</td>
<td>200.0</td>
</tr>
<tr>
<td>e</td>
<td>Dedicated Fetal Cardiology Clinic (dedicated Fetal Echo machine with 3D imaging)</td>
<td>100.0</td>
</tr>
</tbody>
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**Sub Total equipment**: 1500.00

**Total (HR + Equipment)**: 1580.28

---

### IDCF Plan

**IDCF Plan and district wise financial allotment for year 2016-17**

<table>
<thead>
<tr>
<th>Sl.No</th>
<th>Name of Districts</th>
<th>Population</th>
<th>No of Under 5 Children (As per GOI 10% of Population)</th>
<th>Procurement B.16.2.2</th>
<th>Funds for Additional ORS Procurement as per @2.00/Pkt</th>
<th>Fund for Zinc&amp;ORS Corner at Health Facilities (Govt.&amp;Pvt.) as per @2.00/pkt</th>
<th>Total (14+15)=16</th>
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<tbody>
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<td>1</td>
<td>Agra</td>
<td>5845990</td>
<td>584599</td>
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<td>1169198</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17  |  Page 234
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<td>112.50</td>
<td>Approved</td>
</tr>
<tr>
<td>C.1.n</td>
<td>Consumables for computer including provision for internet access</td>
<td>0.05</td>
<td>900</td>
<td>3.60</td>
<td>3.60</td>
<td>Approved</td>
</tr>
<tr>
<td>C.1.o</td>
<td>Red/Black plastic bags etc.</td>
<td>0.00</td>
<td>22,16,458</td>
<td>132.98</td>
<td>132.98</td>
<td>Approved</td>
</tr>
<tr>
<td>C.1.p</td>
<td>Hub Cutter/Bleach/Hypochlorite solution/Twin bucket</td>
<td>0.01</td>
<td>1,073</td>
<td>12.88</td>
<td>12.88</td>
<td>Approved</td>
</tr>
<tr>
<td>C.1.q</td>
<td>Safety Pits</td>
<td>0.05</td>
<td>622</td>
<td>32.66</td>
<td>32.66</td>
<td>Approved</td>
</tr>
<tr>
<td>C.1.r</td>
<td>State specific requirement</td>
<td>199.15</td>
<td>1</td>
<td>199.15</td>
<td>188.40</td>
<td>Continuous activity. Approved.</td>
</tr>
<tr>
<td>C.1.s</td>
<td>Teeka Express</td>
<td></td>
<td></td>
<td></td>
<td>62.75</td>
<td>Approved for</td>
</tr>
<tr>
<td>FMR code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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</tr>
<tr>
<td></td>
<td>Operational Cost</td>
<td>62.75</td>
<td>1</td>
<td>62.75</td>
<td></td>
<td>operational cost of teeka express</td>
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<tr>
<td>C.1.t</td>
<td>Measles SIA operational Cost</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>C.1.u</td>
<td>JE Campaign Operational Cost</td>
<td>1,000.00</td>
<td>1</td>
<td>1,000.00</td>
<td>100.00</td>
<td>The allocation for JE campaign is tentative</td>
</tr>
<tr>
<td>C.2</td>
<td>Salary of Contractual Staffs</td>
<td></td>
<td></td>
<td>116.63</td>
<td>111.33</td>
<td></td>
</tr>
<tr>
<td>C.2.1</td>
<td>Computer Assistants support for State level</td>
<td>2.29</td>
<td>1</td>
<td>2.29</td>
<td>2.18</td>
<td>Computer Operators not approved. Lump sum amount of Rs 2.18 lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
</tr>
<tr>
<td>C.2.2</td>
<td>Computer Assistants support for District level</td>
<td></td>
<td>75</td>
<td>114.35</td>
<td>109.14</td>
<td>Computer Operators not approved. Lump sum amount of Rs 109.15 lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
</tr>
<tr>
<td>C.2.3</td>
<td>Others(service delivery staff)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.3</td>
<td>Training under Immunisation</td>
<td></td>
<td></td>
<td>334.15</td>
<td>334.15</td>
<td></td>
</tr>
<tr>
<td>C.3.1</td>
<td>District level Orientation training including Hep B, Measles &amp; JE(wherever required) for 2 days ANM, Multi Purpose</td>
<td>0.46</td>
<td>542</td>
<td>250.33</td>
<td>250.33</td>
<td>Approved, All the activities as mentioned in C.3.1 to C.3.5 and any other training</td>
</tr>
<tr>
<td>FMR code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>C.3.2</td>
<td>Health Worker (Male), LHV, Health Assistant (Male/Female), Nurse MidWives, BEEs &amp; other staff (as per RCH norms)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>program approved by the Immunization division from time to time can be met out of this budget head. However the expenditure has to be as per RCH norms.</td>
</tr>
<tr>
<td>C.3.3</td>
<td>Three day training including Hep B, Measles &amp; JE (wherever required) of Medical Officers of RI using revised MO training module</td>
<td>0.66</td>
<td>90</td>
<td>59.04</td>
<td>59.04</td>
<td></td>
</tr>
<tr>
<td>C.3.4</td>
<td>One day refresher training of district Computer assistants on RIMS/HMIS and immunization formats</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.3.5</td>
<td>Two days cold chain handlers training for block level cold chain handlers by State and district cold chain officers</td>
<td>0.27</td>
<td>75</td>
<td>19.94</td>
<td>19.94</td>
<td></td>
</tr>
<tr>
<td>C.4</td>
<td>Cold chain maintenance</td>
<td>-</td>
<td>1,158</td>
<td>20.74</td>
<td>19.94</td>
<td>Approved, however restricted as per norms. Re-appropriation of funds within part C can be considered on full utilization of funds</td>
</tr>
<tr>
<td>C.5</td>
<td>ASHA Incentive</td>
<td>0.00</td>
<td>45,74,128</td>
<td>6,861.19</td>
<td>6861.19</td>
<td>Approved</td>
</tr>
<tr>
<td>C.6</td>
<td>Pulse Polio operating costs</td>
<td>13,000</td>
<td>1</td>
<td>14,87</td>
<td>14196.37</td>
<td>The provision proposed by the</td>
</tr>
<tr>
<td>FMR code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
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</tr>
<tr>
<td>C.7</td>
<td>Others</td>
<td>00</td>
<td>4.39</td>
<td>2</td>
<td>414.90</td>
<td>387.23</td>
</tr>
</tbody>
</table>

**division for the PPI is tentative**

**New Activity: Approved** for upgradation of all 18 Regional/Divisional vaccine stores and 10 identified District vaccine stores as per EVM standards. **Not approved** for District level mobility support as the same is provided under c.1.a & State level ToT of divisional cold chain handlers, it may be shifted to training component. **New Activity:** Approved for Coverage of Mobility support for construction sites for strengthening of RI.
<table>
<thead>
<tr>
<th>FM R code</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakhs)</th>
<th>Quantit y / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In Lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td>National Iodine Deficiency Disorders Control Programme (NIDDCP)</td>
<td></td>
<td></td>
<td>870.95</td>
<td>28.00</td>
<td></td>
</tr>
<tr>
<td>D.1</td>
<td>Establishment of IDD Control Cell</td>
<td></td>
<td></td>
<td>9.00</td>
<td>8.00</td>
<td></td>
</tr>
<tr>
<td>D.1. a</td>
<td>Technical Officer</td>
<td>6.00</td>
<td>1</td>
<td>6.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D.1. b</td>
<td>Statistical Officer / Staffs</td>
<td>3.00</td>
<td>1</td>
<td>3.00</td>
<td>8.00</td>
<td>These are sanctioned regular posts presently T.O &amp; S.A posts are vacant and need to be filled on regular/contract basis on priority by the State Government for smooth functioning of the IDD Cell and implementation of programme in the State. As per information from State LDC is filled from State budget.</td>
</tr>
<tr>
<td>D.1. c</td>
<td>LDC Typist</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D.2</td>
<td>Establishment of IDD Monitoring Lab</td>
<td>8.00</td>
<td>1</td>
<td>8.00</td>
<td>2.00</td>
<td></td>
</tr>
<tr>
<td>D.2. a</td>
<td>Lab Technician</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D.2. b</td>
<td>Lab Assistant</td>
<td></td>
<td>1</td>
<td>1.44</td>
<td>2.00</td>
<td>As per information from State LT is filled from State budget. The vacant sanctioned post of Lab Asst. should be filled on regular/contract basis on priority. State Government may</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantit y / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>---------</td>
</tr>
<tr>
<td>D.3</td>
<td>Health Education and Publicity</td>
<td>14.00</td>
<td>1</td>
<td>14.00</td>
<td>10.00</td>
<td>conduct quantitative analysis of salt &amp; urine as per NIDDCP Guidelines and furnish monthly/quarterly statements. The approved fund includes some amount for reagents.</td>
</tr>
<tr>
<td>D.4</td>
<td>IDD Surveys/Re-surveys</td>
<td>8.00</td>
<td>1</td>
<td>8.00</td>
<td>8.00</td>
<td>IDD publicity activities including Global IDD Day celebrations at various levels in all the districts of State.</td>
</tr>
<tr>
<td>D.5</td>
<td>Supply of Salt Testing Kit (form of kind grant)</td>
<td>203.78</td>
<td>1</td>
<td>106.90</td>
<td>0.00</td>
<td>Not approved</td>
</tr>
<tr>
<td>D.6</td>
<td>ASHA Incentive</td>
<td>0.00</td>
<td>59,388</td>
<td>712.66</td>
<td>0.00</td>
<td>As per this Directorates record the State Government has funds already released by GOI earlier for these activities and they should utilize the same. In case the released funds are utilized, the State may demand funds in Supplementary PIP 2016-17. As per NIDDCP norms the State Government has to monitor the quality of iodated salt at household/ community level by STK through</td>
</tr>
<tr>
<td>FM R code</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantit y / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In Lakhs)</td>
<td>Remarks</td>
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<td>---------</td>
</tr>
<tr>
<td>D.7</td>
<td>Other activities (if any, pls. specify)</td>
<td>-</td>
<td>24</td>
<td>10.96</td>
<td>0.00</td>
<td>Not approved</td>
</tr>
</tbody>
</table>

ASHA and IDD awareness activities as well as promotion of consumption of iodated salt in 24 endemic districts i.e. Agra, Aligarh, Azamgarh, Behraich, Bareilly, Basti, Bijnor, Deoria, Faizbad, Ghaziabad, Gonda, Gorakhpur, Jaunpur, Kheri, Mathura, Muzaffarnagar, Raibarely, Sultanpur, Varanasi, Shahzanpur, Rampur, Saharanpur, Pilibhit, Bhulandshehar.
## National Urban Health Mission (NUHM)

<table>
<thead>
<tr>
<th>FM</th>
<th>Budget Head</th>
<th>Quantity / Target</th>
<th>Amount proposed (Rs. Lakhs)</th>
<th>Amount Approved (In lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Planning &amp; Mapping</td>
<td></td>
<td></td>
<td></td>
<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions and has been calculated separately. Annual Increment will only be applicable to exiting HR. Employer's contribution towards EPF has been Approved under A10.8.5</td>
</tr>
<tr>
<td>2</td>
<td>Programme Management</td>
<td>-</td>
<td>1234.41</td>
<td>754.81</td>
<td></td>
</tr>
</tbody>
</table>
| 2.1| State PMU                 |                   | 353.06                     | 265.95                    | Approved as follows, existing positions approved for 12 months and vacant positions approved for 6 months:  
  a) 1 GM NUHM (on deputation) @ Rs 144,375 pm  
  b) 1 DGM NUHM (on deputation) @ Rs. 92,400 pm  
  c) 2 Consultant (Planning) vacant @ Rs. 50,000 pm (as proposed by the State)  
  d) 2 Programme Coordinators @ Rs. 34,650 pm  
  e) 1 Accountant @ Rs. 31,500 pm  
  f) 1 Data assistant @ Rs. 26,775 pm  
  g) 1 Programme Assistant @ Rs. 28,875 pm  
  h) 18 Divisional Urban Health Consultants (vacant) @ Rs. 40,000 pm  
  i) Data entry operators not approved. Lump sum amount of |
| 2.1| Human Resources           | 50                | 196.50                     | 127.19                    |                                                                                   |

Uttar Pradesh: Administrative Approval of PIP 2016-17
<table>
<thead>
<tr>
<th>FMR</th>
<th>Budget Head</th>
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<th>Amount Approved (In lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Rs 12.66 lakhs approved for outsourcing data entry operation on task basis to the extent possible at State and Divisional Level.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>j) Lumpsum amount of Rs 3.97 lakhs approved for outsourcing support services.</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>k) 1 Post of Additional Mission Director (Urban) on deputation @ Rs 157,500 pm for 9 months</strong></td>
</tr>
<tr>
<td>2.1</td>
<td>Mobility support</td>
<td>19</td>
<td>76.80</td>
<td>76.80</td>
<td><strong>Approved for</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(a) 1 lakh/month for 12 months for mobility support for SPMU.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(b) Rs. 30000/month for 12 months for 18 Divisional PMUs</td>
</tr>
<tr>
<td>2.1</td>
<td>Office Expenses</td>
<td>495</td>
<td>79.76</td>
<td>61.96</td>
<td><strong>Approved for</strong></td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>(a) Rs. 60000/month for 12 months for office expenses</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>(b) Rs. 15000/month/PMU for 12 months for 18 Divisional PMUs</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td><strong>Approved for (New)</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(a) Rs. 4 lakhs for one time establishment cost of SPMU</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(b) Rs 10000/-per person for induction training for 7 days at SIFHW(75 UHC, 83 DCAA, 18 Div. Urban Health Consultants).</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(c) Rs.200/-per month plus Service Tax on that @ 15%. per CUG mobile for 281 CUG Mobile Connections as recurring cost for 9 months as being given under NRHM Not approved for One time establishment cost of Rs 60000/- per Div.PUM for procurement of Laptop as the same activity was approved in FY 2015-16</td>
</tr>
<tr>
<td>2.2</td>
<td>District PMU</td>
<td>-</td>
<td>881.36</td>
<td>488.86</td>
<td><strong>Approved as follows:</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(a) 75 Urban Health Coordinators</td>
</tr>
<tr>
<td>2.2</td>
<td>Human Resources</td>
<td>159</td>
<td>476.36</td>
<td>240.91</td>
<td></td>
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<tr>
<td>FMR</td>
<td>Budget Head</td>
<td>Quantity / Target</td>
<td>Amount proposed (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
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</tr>
</tbody>
</table>
| 2.2 | Mobility support | 75 | 270.00 | 146.70 | @ Rs. 30,000 pm and 83 Data cum accounts assistants @ Rs. 20,000 pm for 6 months.  
(b) 1 Sr. Computer Operator @ Rs. 17,150 pm and 1 Store keeper cum care taker @ Rs. 11,435 pm.  
c) Positions not approved.  
Lumpsum amount of Rs 2.88 lakhs approved for outsourcing support services to the extent possible. |
<p>| 2.2 | Office Expenses | 75 | 135.00 | 101.25 | Approved for office expenses @ Rs. 15000 per month for 9 months for 75 DPMUs |
| 2.3 | City PMU | |
| 2.3 | Human Resources | |
| 2.3 | Mobility support | |
| 2.3 | Office Expenses | |
| 3 | Training &amp; Capacity Building | - | 15.00 | 11.25 |</p>
<table>
<thead>
<tr>
<th>FMR</th>
<th>Budget Head</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1</td>
<td>Orientation of Urban Local Bodies (ULB)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.2</td>
<td>Training of ANM/paramedical staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.3</td>
<td>Training of Medical Officers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.4</td>
<td>Orientation of Specialists</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.5</td>
<td>Constitution and Training of MAS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.6</td>
<td>Selection &amp; Training of ASHA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.7</td>
<td>Other Trainings/Orientations</td>
<td>300</td>
<td>15.00</td>
<td>11.25</td>
<td>Approved for District level quarterly review meetings @ Rs. 5,000 per District per quarter for 3 quarters for 75 Districts</td>
</tr>
<tr>
<td>4</td>
<td>Strengthening of Health Services</td>
<td></td>
<td>26942.59</td>
<td>18843.67</td>
<td>All the positions have been Approved at the previous year's salary. Overall 5% increment has been Approved for all the existing positions and has been calculated separately. Annual Increment will only be applicable to exiting HR. Employer's contribution towards EPF has been Approved under A10.8.5</td>
</tr>
<tr>
<td>4.a</td>
<td>Human Resource</td>
<td></td>
<td>14331.05</td>
<td>10679.46</td>
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<tr>
<td>4.b</td>
<td>Infrastructure</td>
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<td>1399.84</td>
<td>1101.77</td>
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<tr>
<td>4.c</td>
<td>Untied grants</td>
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<td>690.50</td>
<td>363.75</td>
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<tr>
<td>4.d</td>
<td>Procurement (drugs and consumable)</td>
<td></td>
<td>7437.50</td>
<td>3996.00</td>
<td></td>
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<tr>
<td>4.e</td>
<td>Other services</td>
<td></td>
<td>3083.70</td>
<td>2702.70</td>
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</tr>
<tr>
<td>4.1</td>
<td>Outreach services/camps/UHNDs</td>
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<td>Special outreach camps in slums/vulnerable areas</td>
<td>595</td>
<td>714.00</td>
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<td>ANM/LHV</td>
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<td>4,192.68</td>
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<td>Salary support for ANM/LHV</td>
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<td>Mobility support for ANM/LHV</td>
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<td>Urban PHC (UPHC)</td>
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<td>Renovation/upgradation of existing</td>
<td>595</td>
<td>669.00</td>
<td>660.00</td>
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<tr>
<td>facility to UPHC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Equipment (Mini Autoclave, Microscope and equipments to ANMs) for 558 UPHCs (b) Rs. 3.00 Lakhs per UPHC for Equipment &amp; Furniture for 34 New UPHCs. (Not Approved for 3 UPHCs in cities having less than 30000 population i.e. Kanpur Dehat, Amethi &amp; Shrawasti)</td>
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<td>4.3 .2</td>
<td>Building of new UPHC</td>
<td>3</td>
<td>261.87</td>
<td>135.00</td>
<td>Approved for (a) 60% of the total project cost for construction of 3 UPHCs in Gwaitoli, Kalyanpur &amp; Krishnanagar at Kanpur Nagar. Total Project cost Approved i.e. Rs. 75 lakh per UPHC. State has informed that land is available for construction of new UPHCs</td>
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<td>4.3 .3</td>
<td>Operating cost support for running UPHC (other than untied grants and medicines &amp; consumables)</td>
<td>-</td>
<td>11,666.95</td>
<td>8,455.00</td>
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<td>4.3 .3 .1</td>
<td>Human Resource</td>
<td>133</td>
<td>9,845.35</td>
<td>7,000.60</td>
<td>Approved as follows: (a) 231 Full time MOs shifted from Urban RCH @ Rs. 41,600 pm for 12 months (b) 100 Full time MOs @ Rs. 37,800 pm for 12 months. (c) 80 additional Full time MOs as per Gap analysis @ Rs. 36,000 pm for 6 months (d) 478 Part time MOs @ Rs. 21,600 pm for 12 months and 80</td>
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<td>4.3 .3 .1</td>
<td>MO salary</td>
<td>1,050</td>
<td>3,920.57</td>
<td>3,122.21</td>
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<tr>
<td>4.3</td>
<td>Salary of paramedical &amp; nursing staff (Staff Nurse/ Lab Technician/ Pharmacist/ Other)</td>
<td>2,320</td>
<td>4,414.67</td>
<td>3,182.49</td>
<td>additional part time MOs @ Rs. 21,600 pm for 6 months. Total 558 Full time MOs (including 147 Full time MOs already available in these urban areas supported from State budget) and 558 Part Time MOs approved for 558 UPHCs. The new MOs should be selected through SPMU. Retired doctors should not be engaged without explicit approval of Govt of India. Approved for 558 UPHCs as follows: (a) 231 SNs shifted from Urban RCH @ Rs. 19060 pm for 12 months (b) 315 SNs (2 SNs per UPHC for 100 new UPHCs &amp; 1 SN per UPHC for 115 old UPHCs) @ Rs. 17,325 pm for 12 months (c) 160 SNs additional Approved (2 SNs per UPHC for 80 new UPHCs &amp; 1 SN per UPHC for 32 UPHCs supported under State budget) @ Rs. 16,500 pm for 6 months. (Total SNs Approved - 738) Note: 3 SNs can be recruited for PHCs which will operate 24x7. Otherwise, no. of SNs per PHC be limited to 1 or 2 depending on the level of service delivered. (d) 478 Pharmacists @ Rs. 17,325 pm for 12 months (e) 80 Pharmacists @ Rs. 16,500 pm for 6 months. (Total Pharmacists approved - 558) (f) 478 LTs @ Rs. 12,400 pm for</td>
</tr>
<tr>
<td>FMR</td>
<td>Budget Head</td>
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<td>4.3.3.13</td>
<td>Salary of support staff (non clinical staff)</td>
<td>595</td>
<td>1,510.11</td>
<td>695.90</td>
<td>Positions not approved. Lumpsum amount of Rs 695.90 lakhs approved for outsourcing support staff services to the extent possible.</td>
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<td>4.3.3.14</td>
<td>Public Health Manager</td>
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<td>4.3.3.2</td>
<td>Office Expenses</td>
<td>595</td>
<td>571.20</td>
<td>483.00</td>
<td>Approved (a) 558 PHCs @ Rs. 7000/month for 12 months NEW (b) 34 new UPHCs @ Rs. 7000 per month for 6 months. (Not Approved for 3 UPHCs in cities having less than 30000 population i.e. Kanpur Dehat, Amethi &amp; Shrawasti)</td>
</tr>
<tr>
<td>4.3.3.3</td>
<td>Others</td>
<td>521</td>
<td>1,250.40</td>
<td>971.40</td>
<td>Approved for rent of ongoing (a) 385 PHCs @ Rs. 15000/month for 12 months (b) 99 UPHCs @ Rs. 20000 per month for 12 months. NEW (c) 34 new UPHCs @ Rs. 20000 per month for 6 months. However the State may use the rent differentially on actual basis. (Not Approved for 3 UPHCs in cities having less than 30000 population i.e. Kanpur Dehat, Amethi &amp; Shrawasti)</td>
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<td>FMR</td>
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<td>4.3</td>
<td>Untied grants to UPHC</td>
<td>595</td>
<td>650.50</td>
<td>323.75</td>
<td>Approved ongoing (a) Approved for 50% of the untied grant for 74 UPHCs functioning in government buildings @ Rs. 1.75 lakh per UPHC and 518 UPHCs @ Rs. 1 lakh per UPHCs functioning in rented buildings.</td>
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<td>Medicines &amp; Consumables for UPHC</td>
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<td>7,437.50</td>
<td>3996.00</td>
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<td>4.3</td>
<td>Emergency drugs</td>
<td>595</td>
<td>7,437.50</td>
<td>3996.00</td>
<td>Approved for drugs @ Rs. 6.75 lakh/PHC for 592 UPHCs. (Not Approved for 3 UPHCs in cities having less than 30000 population i.e. Kanpur Dehat, Amethi &amp; Shrawasthi)</td>
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<tr>
<td>4.3</td>
<td>Others</td>
<td>-</td>
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<td>4.4</td>
<td>Urban CHC (UCHC)</td>
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<td>984.70</td>
<td>650.33</td>
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<td>Capital cost support for new UCHC</td>
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<td>468.97</td>
<td>306.77</td>
<td>NEW Approved for Renovation of Chaukaghat Maternity Home @ Rs. 26.59 Lakhs, Durga Kund Maternity Home @ Rs. 36.87 Lakhs &amp; 60% of the total project cost of Rs. 405.51 Lakhs for new construction of Urban CHC at Shivpur, Varanasi. State has informed that the land is available with health department for construction of new UCHC.</td>
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<td>4.4</td>
<td>Human Resource</td>
<td>-</td>
<td>475.73</td>
<td>303.56</td>
<td>Approved as follows: (a) 8 Gynaecologist @ Rs. 75,000</td>
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<td>Specialists</td>
<td>48</td>
<td>396.00</td>
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<td>pm (1 at each of the 8 BMC) for 12 months.</td>
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<td>(b) 8 Pediatiricans @ Rs. 75,000 pm for 12 months.</td>
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<td>(c) 1 Radiologist, 1 Physician (specialist), 1 Anaesthetist @ Rs. 75,000 pm (1 at each of the 8 BMC) for 6 months.</td>
</tr>
<tr>
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<td></td>
<td>The specialist doctors should be recruited by the SPMU. Retired doctors should not be engaged without prior approval of the Govt. of India.</td>
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<td>4.4</td>
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<td>68</td>
<td>79.73</td>
<td>51.56</td>
<td>Approved for 8 Staff Nurses @ Rs. 19,060 pm and 8 Data Assistants @ Rs. 12,600 pm (1 at each of the 8 BMC) for 12 months.</td>
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<td>Positions not approved. Lumpsum amount of Rs 21.17 lakhs approved for outsourcing support staff to the extent possible.</td>
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<td>Untied grants for UCHC</td>
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<td>40.00</td>
<td>40.00</td>
<td>Approved for untied grant @ Rs. 5 lakh per BMC for 8 BMCs</td>
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<td>Medicines &amp; Consumables for UCHC</td>
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<td>Regulation &amp; Quality Assurance</td>
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<td>Community Processes</td>
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<td>MAS/community groups</td>
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<td>ASHA Incentives</td>
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<td>845.40</td>
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<td>Approved for 6813 ASHAs @ Rs. 1000/ month per ASHA for 9 months</td>
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<td>ASHA Drug kits and HBNC kits</td>
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<td>123.29</td>
<td>91.98</td>
<td>Approved Rs 750/- per ASHA kit, Rs 450/- per ASHA dress and Rs 150/- per ASHA for printing of registers</td>
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<td>Innovative Actions &amp; PPP</td>
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<td>8.1</td>
<td>Baseline/endline surveys</td>
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<td>8.2</td>
<td>Research Studies in Urban Public Health</td>
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<td>8.3</td>
<td>IT based monitoring initiatives</td>
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HR increment calculated @ 5% for above approvals: 453.03

TOTAL: 29,160.69, 20,767.91
### National Programme for Control of Blindness (NPCB)

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<td>National Programme for Control of Blindness (NPCB)</td>
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<td>Reimbursement for cataract operation for NGO and Private Practitioners as per NGO norms @Rs.1000/-</td>
<td>2,84,000</td>
<td>2,840.00</td>
<td>1,100.00</td>
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<td>Assistance for consumables/drugs/medicines to the Govt./District Hospital for Cat sx etc.@ Rs.450/- per case</td>
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<td>1,278.00</td>
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<td>Other Eye Diseases</td>
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<td>Diabetic Retinopathy @Rs.1500/-</td>
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<td>childhood Blindness @Rs.1500/-</td>
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<td>Glaucoma @Rs.1500/-</td>
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<td>Keratoplastiy @Rs.5000/-</td>
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<td>2,000</td>
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<td>Vitreoretinal Surgery @Rs.5000/-</td>
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<td>I.1.</td>
<td>Screening and free spectacles to school children @ Rs.275/-per case</td>
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<td>550.00</td>
<td>371.18</td>
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<td>I.1.</td>
<td>Screening and free spectacles for near work to Old Person</td>
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<td>100.00</td>
<td>100.00</td>
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<td>I.1.</td>
<td>Recurring GIA to Eye Bank @ Rs.2000/-per pair (Eye Bank will reimburse to</td>
<td>1,500</td>
<td>30.00</td>
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<td></td>
<td>Eye Donation Centre for eye collected by them @ Rs.1000/-per pair</td>
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<td>Training of PMOA @Rs.2 lakh per states</td>
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<td>State level IEC @Rs.5 lakh for Minor State and Rs.10 lakh for Major States</td>
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<td>I.1.</td>
<td>Procurement of Ophthalmic Equipment</td>
<td>54.00</td>
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<td>I.1.</td>
<td>Maintenance of Ophthalmic Equipments @Rs.5 lakh per unit</td>
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<td>188.00</td>
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<td>I.2.</td>
<td>Non Recurring Grant -in-Aid</td>
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<td>Grant-in-aid for strengthening of Distt. Hospitals @ Rs.40 lakh</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
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<td>I.2.</td>
<td>Grant-in-aid for Sub Divisional Hospitals @ Rs.20 lakh</td>
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<td>1,300.00</td>
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<td>I.2.</td>
<td>For Vision Centre (PHC) (Govt. + NGO) @ Rs.1 lakh</td>
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<td>I.2.</td>
<td>For Eye Bank Rs.25 lakh</td>
<td></td>
<td>2</td>
<td>50.00</td>
<td>25.00</td>
<td>Approved</td>
</tr>
<tr>
<td>I.2.</td>
<td>For Eye Donation Centre (New) @ Rs.1 lakh</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>I.2.</td>
<td>For GIA to NGOs for setting up/expanding eye care unit in semi-urban/rural area @ Rs.40 lakh</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>I.2.</td>
<td>For Construction of Eye Wards and Eye OTS (renamed as dedicated eye unit)@ Rs.100 lakh</td>
<td></td>
<td>100.00</td>
<td>2</td>
<td>200.00</td>
<td>Not Approved</td>
</tr>
<tr>
<td>I.2.</td>
<td>For Mobile Ophthalmic Units (renamed as Multipurpose distt. Mobile ophthalmic unit @ Rs.30 lakh</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I.2.</td>
<td>Fixed tele-ophthalmic network unit in Got. Set up/internet based ophthalmic consultation unit) @ Rs.15 lakh</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I.3.</td>
<td>Contractual Man Power</td>
<td></td>
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<table>
<thead>
<tr>
<th>FM</th>
<th>Budget Head</th>
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</tr>
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<tbody>
<tr>
<td>I.2.</td>
<td>Grant-in-aid for Sub Divisional Hospitals @ Rs.20 lakh</td>
<td></td>
<td>65</td>
<td>1,300.00</td>
<td>100.00</td>
<td>Approved</td>
</tr>
<tr>
<td>I.2.</td>
<td>For Vision Centre (PHC) (Govt. + NGO) @ Rs.1 lakh</td>
<td></td>
<td>75</td>
<td>75.00</td>
<td>25.00</td>
<td>Approved</td>
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<tr>
<td>I.2.</td>
<td>For Eye Bank Rs.25 lakh</td>
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<td>For GIA to NGOs for setting up/expanding eye care unit in semi-urban/rural area @ Rs.40 lakh</td>
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<td>Fixed tele-ophthalmic network unit in Got. Set up/internet based ophthalmic consultation unit) @ Rs.15 lakh</td>
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<td>I.2.</td>
<td>For Eye Bank Rs.25 lakh</td>
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<tr>
<td>I.3.1</td>
<td>Ophthalmic Surgeon @ Rs.60,000/- p.m.*</td>
<td>-</td>
<td>28</td>
<td>221.76</td>
<td>79.20</td>
<td>Approved for 10 existing positions @ Rs 66,000 pm (as discussed in NPCC) for 12 months.</td>
</tr>
<tr>
<td>I.3.2</td>
<td>Ophthalmic Assistant @ Rs.12,000/- p.m.*</td>
<td>-</td>
<td>28</td>
<td>44.35</td>
<td>21.60</td>
<td>Approved for 15 existing positions @ Rs 12,000 pm for 12 months. Increment approved separately.</td>
</tr>
<tr>
<td>I.3.3</td>
<td>Eye Donation Counsellors @ Rs.15000/- p.m.*</td>
<td>-</td>
<td>9</td>
<td>17.82</td>
<td>9.00</td>
<td>Approved for 5 existing positions @ Rs 15,000 pm for 12 months. Increment approved separately.</td>
</tr>
<tr>
<td>I.3.4</td>
<td>Data Entry Operator @ Rs.8,000/- p.m. for district level</td>
<td>-</td>
<td>75</td>
<td>83.16</td>
<td>34.93</td>
<td>Data Entry Operators not approved. Lump sum amount of Rs 34.93 lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
</tr>
<tr>
<td>I.4</td>
<td>Other activities (if any, pls. specify)</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other state and district level activities</td>
<td>30.00</td>
<td>76</td>
<td>268.27</td>
<td>37.50</td>
<td>Approved</td>
</tr>
<tr>
<td></td>
<td><strong>HR increment calculated @ 5% for above approvals</strong></td>
<td></td>
<td></td>
<td></td>
<td>1.53</td>
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### National Mental Health Programme (NMHP)

<table>
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<tr>
<th>FMR</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakhs)</th>
<th>Quanity /Targt</th>
<th>Amount proposed (Rs. Lakhs)</th>
<th>Amount Approved (In lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>J</td>
<td>National Mental Health programme (NMHP)</td>
<td></td>
<td></td>
<td>2,278.74</td>
<td>1,481.88</td>
<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which have been calculated separately. Annual Increment will only be applicable to existing HR. Employer's contribution towards EPF, if applicable, has been Approved under A.10.8.5.</td>
</tr>
<tr>
<td>J.1</td>
<td>District Mental Health Programme</td>
<td></td>
<td></td>
<td>2,278.74</td>
<td>1,481.88</td>
<td>In FY 2015-16 the programme is being implemented in 14 districts of UP namely Banda, Etawah, kanpur urban, Hardoi, Rae Bareilly, Sitapur, Unnao, Fatehpur, Mirzapur, baraanki, Faizabad, Sultanpur, Bahrailch, Moradabad. In 2016-17, the state has proposed expansion of the programmeto 22 more districts. However, as per decision taken at the NPCC meeting, only 10 new districts are approved for expansion of DMHP in 2016-17. These new districts are Agra, Mathura, Bareilly, Basti, Mahoba, Mazzaafarnagar, Ghaziabad, Saharanpur, Jhansi and Varansai.</td>
</tr>
<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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</tr>
<tr>
<td>J.1.1</td>
<td>Salary</td>
<td>-</td>
<td>36.00</td>
<td>781.70</td>
<td>561.60</td>
<td>Approved DMHP staff each in 14 exiting districts for 12 months and 10 new districts for 4 months as follows: a) Psychiatrist @ Rs 100,000 pm b) Clinical Psychologist @ Rs 35,000 pm c) Psychiatric Nurse @ Rs 35,000 pm d) Psychiatric Social Worker @ Rs 35,000 pm e) Community Nurse (Case Manager) @ Rs 25,000 pm f) M&amp;E Officer @ Rs 20,000 pm g) Case Registry Assistant @ Rs 10,000 pm h) Ward Orderly @ Rs 10,000 pm Increment for the existing staff has been approved separately.</td>
</tr>
<tr>
<td>J.1.2</td>
<td>(Non Recurring)</td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>a) Infrastructure for District DMHP Centre, Counseling Centre under psychology deptt. In a selected college including crisis helpline : setting up the centre, furniture, computer facilities, telephone etc.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>b) Preparatory phase : Recruitment of DMHP staff and development of district plan</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>FMR</td>
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</tr>
<tr>
<td>J.1 3</td>
<td>Training of PHC Medical Officers, Nurses, Paramedical Workers &amp; Other Health Staff working under the DMHP</td>
<td>-</td>
<td>22</td>
<td>88.00</td>
<td>40.00</td>
<td>Approved for trainings in 10 new districts at Rs. 4 lakhs per districts.</td>
</tr>
<tr>
<td>J.1 4</td>
<td>IEC and community mobilization activities</td>
<td>-</td>
<td>36</td>
<td>72.00</td>
<td>48.00</td>
<td>Approved for IEC material in 24 new districts at Rs 2 lakhs per district.</td>
</tr>
<tr>
<td></td>
<td>a) Procuring/translation of IEC material and distribution</td>
<td>-</td>
<td>36</td>
<td>72.00</td>
<td>48.00</td>
<td>Approved for awareness generation activities in 24 new districts at rs 2 lakhs per district</td>
</tr>
<tr>
<td></td>
<td>b) Awareness generation activities in the community, schools, workplaces with community involvement</td>
<td>-</td>
<td>36</td>
<td>72.00</td>
<td>48.00</td>
<td></td>
</tr>
<tr>
<td>J.1 5</td>
<td>Targeted interventions at community level Activities &amp; interventions targeted at schools, colleges, workplaces, out of school adolescents, urban slums and suicide prevention.</td>
<td>-</td>
<td>36</td>
<td>432.00</td>
<td>288.00</td>
<td>Approved for targeted intervention in 24 new districts at rs 12 lakhs per district</td>
</tr>
<tr>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
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<td>Remarks</td>
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</tr>
<tr>
<td>(Rs. 3 lakhs for district counseling centre (DCC) and crisis helpline outsourced to psychology department/ NGO per year, Rs. 1000 per high school for counseling sessions per year, training of master trainers &amp; school teachers in the skills, training of college teachers in counseling skills/orientation of psychology teachers in counseling and hiring the services of psychiatrists, psychologists from private sector)</td>
<td>-</td>
<td>36</td>
<td>360.00</td>
<td>240.00</td>
<td>Approved for drugs in 24 new districts at rs 10 lakhs per district</td>
<td></td>
</tr>
<tr>
<td>Drugs</td>
<td>-</td>
<td>36</td>
<td>216.00</td>
<td>74.00</td>
<td>Approved for equipments: a) at Rs 1 lakh per district in 14 existing DMHPs  b) at Rs 6 lakhs per district in 10 new districts</td>
<td></td>
</tr>
<tr>
<td>Equipments</td>
<td>-</td>
<td>36</td>
<td>8.64</td>
<td>2.40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operational expenses of the district centre : rent, telephone expenses, website etc.</td>
<td>-</td>
<td>432</td>
<td>86.40</td>
<td>57.60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
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</tr>
<tr>
<td>J.1.</td>
<td>Miscellaneous/ Travel/ Contingency</td>
<td>-</td>
<td>36</td>
<td>162.00</td>
<td>108.00</td>
<td>HR increment calculated @ 5% for above approvals</td>
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### National Programme for Health Care for Elderly (NPHCE)

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<tbody>
<tr>
<td>K</td>
<td>National Programme for the Healthcare of the Elderly (NPHCE)</td>
<td>4,452.50</td>
<td>2,550.92</td>
<td></td>
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<tr>
<td>K.1</td>
<td>Recurring Grant-in-Aid</td>
<td>2,959.00</td>
<td>1,408.98</td>
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<td></td>
<td></td>
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<tr>
<td>K.1.1</td>
<td>District Hospital</td>
<td>1,142.80</td>
<td>1,106.20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K.1.1.1</td>
<td>Machinery &amp; Equipment @ Rs.3.00 lakh per unit</td>
<td>-</td>
<td>35</td>
<td>105.00</td>
<td>13.50</td>
<td>50% of the estimated funds for 9 existing Districts</td>
</tr>
<tr>
<td>K.1.1.2</td>
<td>Drugs and Consumable @ Rs.10 lakh per unit</td>
<td>-</td>
<td>35</td>
<td>350.00</td>
<td><strong>123.00</strong></td>
<td>50% of the estimated funds for 9 existing Districts and 30% for the new districts</td>
</tr>
<tr>
<td>K.1.1.3</td>
<td>Training of doctors and staff from CHCs and PHCs @ Rs.0.80 lakh per unit</td>
<td>-</td>
<td>35</td>
<td>28.00</td>
<td><strong>14.00</strong></td>
<td>50% of the estimated funds for 35 Districts</td>
</tr>
<tr>
<td>K.1.1.4</td>
<td>Public Awareness &amp; IEC @ Rs.2 lakh per unit</td>
<td>-</td>
<td>35</td>
<td>70.00</td>
<td><strong>35.00</strong></td>
<td></td>
</tr>
<tr>
<td>K.1.1.5</td>
<td>Human Resource (Contractual) @ Rs.32.40 lakh per unit</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td><strong>460.35</strong></td>
<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to existing HR. Employer's</td>
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Annexure-M
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<tbody>
<tr>
<td>K.1.1.6</td>
<td>Consultant Medicine 2 @ Rs.50,000 p.m.</td>
<td>-</td>
<td>70</td>
<td>224.00</td>
<td>168.00</td>
<td>contribution towards EPF has been Approved under A.10.8.5.</td>
</tr>
<tr>
<td>K.1.1.7</td>
<td>Nurses 6 @ Rs.20,000 p.m.</td>
<td>-</td>
<td>210</td>
<td>254.40</td>
<td>205.20</td>
<td>Approved of 210 Nurses @ Rs 20,000 pm - 44 existing positions for 12 months; 10 vacant and 156 new positions for 3 months.</td>
</tr>
<tr>
<td>K.1.1.8</td>
<td>Physiotherapist 1 @ Rs.20,000 p.m.</td>
<td>-</td>
<td>35</td>
<td>44.56</td>
<td>35.40</td>
<td>Approved of 35 Physiotherapist @ Rs 20,000 pm - 8 existing positions for 12 months; 1 vacant and 26 new positions for 3 months.</td>
</tr>
<tr>
<td>K.1.1.9</td>
<td>Hospital Attendants 2 @ Rs.7500 p.m.</td>
<td>-</td>
<td>70</td>
<td>33.42</td>
<td>26.55</td>
<td>Approved of 70 Hospital Attendants @ Rs 7,500 pm - 16 existing positions for 12 months; 2 vacant and 52 new positions for 3 months.</td>
</tr>
<tr>
<td>K.1.1.10</td>
<td>Sanitary Attendants 2 @ Rs.7500 p.m.</td>
<td>-</td>
<td>70</td>
<td>33.42</td>
<td>25.20</td>
<td>Approved of 70 Sanitary Attendants @ Rs 7,500 pm - 14 existing positions for 12 months; 4</td>
</tr>
<tr>
<td>FMR</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
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<td></td>
<td>vacan and 52 new positions for 3 months.</td>
</tr>
<tr>
<td>K.1.2</td>
<td>CHC</td>
<td></td>
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<tr>
<td>K.1.2.1</td>
<td>Training @ Rs.1.20 lakh per CHC</td>
<td>-</td>
<td>103</td>
<td>123.60</td>
<td>27.00</td>
<td>25% of the estimated funds for 90 CHCs in existing 9 Districts</td>
</tr>
<tr>
<td>K.1.2.2</td>
<td>Human Resource (Contractual) @ Rs.2.16 lakh per CHC</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>98.82</td>
<td></td>
</tr>
<tr>
<td>K.1.2.3</td>
<td>Rehabilitation Worker 1 @ Rs.18,000 p. m.</td>
<td>-</td>
<td>103</td>
<td>247.20</td>
<td>98.82</td>
<td>Approved for 103 Rehabilitation Workers @ Rs 18,000 pm - 31 existing positions for 12 months; 46 vacant and 13 new positions for 3 months.</td>
</tr>
<tr>
<td>K.1.3</td>
<td>PHC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K.1.3.1</td>
<td>Training &amp; IEC @ Rs.0.30 lakh per PHC</td>
<td>-</td>
<td>337</td>
<td>101.10</td>
<td>1.01</td>
<td>Approved for approval10% of the estimated funds</td>
</tr>
<tr>
<td>K.1.4</td>
<td>Sub-Centre</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K.1.4.1</td>
<td>Aids and Appliances @ Rs.0.30 lakh per Sub-Centre</td>
<td>-</td>
<td>4,481</td>
<td>1,344.30</td>
<td>77.13</td>
<td>10% of the estimated funds</td>
</tr>
<tr>
<td>K.2</td>
<td>Non-Recurring Grant-in-Aid</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K.2.1</td>
<td>District Hospital</td>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>FMR</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakh s)</th>
<th>Quan tity / Targe t</th>
<th>Budget (Rs. Lakhs)</th>
<th>Amoun t Appro ved(In lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>K.2.1. 1</td>
<td>Construction/renovation/extension of the existing building and Furniture of Geriatrics Unit with 10 beds and OPD facilities @ Rs.80 lakh per unit</td>
<td>26</td>
<td>1,040.0 0</td>
<td>1040</td>
<td>As proposed by State</td>
<td></td>
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<tr>
<td>K.2.1. 2</td>
<td>Machinery &amp; Equipment @ Rs.7.00 lakh per unit</td>
<td>26</td>
<td>182.00</td>
<td>91</td>
<td>50% of the estimated funds</td>
<td></td>
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<tr>
<td>K.2.2</td>
<td>CHC</td>
<td></td>
<td></td>
<td>103.00</td>
<td></td>
<td>Strengthening of Sub district Primary Health Care institutions will be considered after strengthening of District Hospitals</td>
</tr>
<tr>
<td>K.2.3</td>
<td>PHC</td>
<td></td>
<td></td>
<td>168.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Machinery &amp; Equipment @ 0.50 lakh per unit</td>
<td>337</td>
<td>168.50</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>HR increment calculated @ 5% for above approvals</td>
<td></td>
<td></td>
<td>10.94</td>
<td></td>
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### National Tobacco Control Programme (NTCP)

<table>
<thead>
<tr>
<th>FM R</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakhs)</th>
<th>Quantity / Target</th>
<th>Budget (Rs. Lakhs)</th>
<th>Amount Approved(In lakhs)</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>National Tobacco Control Programme (NTCP)</td>
<td>3,473.60</td>
<td></td>
<td>3,001.28</td>
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<tr>
<td>M.1</td>
<td>District Tobacco Control Cell (DTCC)</td>
<td>2,882.39</td>
<td></td>
<td>2,568.60</td>
<td></td>
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</tr>
<tr>
<td>M.1.1</td>
<td>Training/ Sensitization Prog.</td>
<td>375.00</td>
<td></td>
<td>360.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1.1</td>
<td>Orientation of Stakeholder organizations</td>
<td></td>
<td>150</td>
<td>82.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1.2</td>
<td>Training of Health Professionals</td>
<td></td>
<td>150</td>
<td>82.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1.3</td>
<td>Orientation of Law Enforcers</td>
<td></td>
<td>150</td>
<td>105.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1.4</td>
<td>Training of PRI's representatives/ Police personnel/ Teachers/ Transport personnel/ NGO personnel/ other stakeholders</td>
<td></td>
<td>75</td>
<td>63.38</td>
<td>360.00</td>
<td>There is a provision of Rs. 5.0 lakhs per district for training/ sensitization programmes under the NTCP. Rs. 360.0 lakhs are approved [at a rate of Rs. 5.00 lakhs per district for the 72 districts (15 existing and 57 new)]. All the activities need to be undertaken in accordance with the NTCP guidelines furnished by this Ministry.</td>
</tr>
<tr>
<td>M.1.5</td>
<td>Other Trainings/Orientation sessions incorporated in other’s training</td>
<td></td>
<td>75</td>
<td>41.63</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1.6</td>
<td>SBCC/IEC campaign</td>
<td></td>
<td></td>
<td>525.00</td>
<td>504.00</td>
<td></td>
</tr>
<tr>
<td>M.1.2</td>
<td>Development of posters/ stickers/ handouts/ wall paintings/ hoardings/ local advt/ etc.</td>
<td></td>
<td></td>
<td>225.00</td>
<td>504.00</td>
<td>There is a provision of Rs. 7.0 lakhs per district for SBCC/IEC campaigns under the NTCP. Rs. 504.0 lakhs are approved [at a rate of Rs. 7.00 lakhs per</td>
</tr>
<tr>
<td>M.1.2</td>
<td>Places covered with hoardings/ bill</td>
<td></td>
<td></td>
<td>225.00</td>
<td></td>
<td></td>
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<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Budget (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>boards/ signages etc.</td>
<td></td>
<td></td>
<td></td>
<td>district for the 72 districts (15 existing and 57 new). All the activities need to be undertaken in accordance with the NTCP guidelines furnished by this Ministry.</td>
</tr>
<tr>
<td>M.1. 2.3</td>
<td>Usage of Folk media such as Nukkad Natak/ mobile audio visual services/ local radio etc.</td>
<td>-</td>
<td>75</td>
<td>75.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1. 3</td>
<td>School Programme</td>
<td></td>
<td>524.65</td>
<td>504.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1. 3.1</td>
<td>Coverage of Public School</td>
<td>-</td>
<td>375</td>
<td>37.50</td>
<td></td>
<td>There is a provision of Rs. 7.0 lakhs per district for school programmes under the NTCP. Rs. 504.0 lakhs are approved [at a rate of Rs. 7.00 lakhs per district for the 72 districts (15 existing and 57 new)]. All the activities need to be undertaken in accordance with the NTCP guidelines furnished by this Ministry.</td>
</tr>
<tr>
<td>M.1. 3.2</td>
<td>Coverage of Pvt. School</td>
<td>-</td>
<td>525</td>
<td>78.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1. 3.3</td>
<td>Coverage of Public School in other's school programme</td>
<td>-</td>
<td>525</td>
<td>78.75</td>
<td>504.00</td>
<td></td>
</tr>
<tr>
<td>M.1. 3.4</td>
<td>Coverage of Pvt. School in other's school programme</td>
<td>-</td>
<td>451</td>
<td>67.65</td>
<td></td>
<td></td>
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<tr>
<td>M.1. 3.5</td>
<td>Sensitization campaign for college students</td>
<td>-</td>
<td>524</td>
<td>262.00</td>
<td></td>
<td></td>
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<tr>
<td>M.1. 4</td>
<td>Pharmacological Treatment</td>
<td></td>
<td>150.00</td>
<td>144.00</td>
<td></td>
<td>Funds are approved for 72 districts [Rs. 2.0 lakhs per year per district]</td>
</tr>
<tr>
<td>M.1. 4.1</td>
<td>Procurement of medicine &amp; consumables for TCC</td>
<td>75</td>
<td>150.00</td>
<td>144.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.1. 5</td>
<td>Flexible pool</td>
<td></td>
<td>703.40</td>
<td>518.40</td>
<td></td>
<td>These funds are to support 72 districts, at a rate of Rs. 7.2 lakhs/district per year.</td>
</tr>
<tr>
<td>M.1. 5.1</td>
<td>District level Coordination Committee</td>
<td>300</td>
<td>6.00</td>
<td>518.40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Budget (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
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</tr>
<tr>
<td>5.2</td>
<td>Committee on Section 5</td>
<td>300</td>
<td>4.50</td>
<td></td>
<td></td>
<td>State may use flexible pool as per its specific requirement and planning.</td>
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<tr>
<td>M.1. 5.3</td>
<td>Enforcement Squads</td>
<td>300</td>
<td>15.00</td>
<td></td>
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<tr>
<td>M.1. 5.4</td>
<td>Printing of Challan Books</td>
<td>3,75,000</td>
<td>375.00</td>
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<tr>
<td>M.1. 5.5</td>
<td>Baseline/Endline surveys/ Research studies</td>
<td>150</td>
<td>30.00</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>M.1. 5.6</td>
<td>Misc./Office Expenses/DEO</td>
<td>75</td>
<td>272.90</td>
<td></td>
<td></td>
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<tr>
<td>M.1. 6</td>
<td>Manpower Suppot</td>
<td></td>
<td></td>
<td>544.34</td>
<td>481.20</td>
<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to existing HR. Employer's contribution towards EPF, if applicable, has been Approved under A.10.8.5.</td>
</tr>
<tr>
<td>M.1. 6.1</td>
<td>District Consultant</td>
<td>-</td>
<td>75</td>
<td>168.64</td>
<td>163.20</td>
<td>Approved for 75 District Consultants @ Rs 40,000 pm - 15 existing for 12 months and 57 new for 4 months. Increment approved separately.</td>
</tr>
<tr>
<td>M.1. 6.2</td>
<td>Social Worker</td>
<td>-</td>
<td>75</td>
<td>105.70</td>
<td>102.00</td>
<td>Approved for 75 Social Workers @ Rs 25,000 pm - 15 existing for 12 months and 57 new for</td>
</tr>
<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Budget (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
</tr>
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<td>------------------------------------------------------------------------</td>
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<tr>
<td>M.1. 6.3</td>
<td>Mobility Support</td>
<td>-</td>
<td>75</td>
<td>270.00</td>
<td>216.00</td>
<td>4 months. Increment approved separately. The mobility support of Rs. 216.0 lakhs (Rs. 3 lakhs per district per year for 72 districts) is approved. Mobility support can be used for hiring operational vehicle under the NTCP.</td>
</tr>
<tr>
<td>M.1. 7</td>
<td>Non-Recurring Grants</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Rs. 57 lakhs are approved (Rs. 1 lakh per district for each of the 57 new districts)</td>
</tr>
<tr>
<td>M.1. 7.1</td>
<td>Procurement of equipment</td>
<td>-</td>
<td>62</td>
<td>60.00</td>
<td>57.00</td>
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<td>M.2</td>
<td>Tobacco Cessation Centre (TCC)</td>
<td></td>
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<td>M.2. 1</td>
<td>Training &amp; Outreach</td>
<td></td>
<td></td>
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<tr>
<td>M.2. 1.1</td>
<td>Weekly FGD with the tobacco users</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Rs. 72.00 lakhs are approved (@ Rs. 1 lakh per district per year for 72 districts as per NTCP PIP Guidelines)</td>
</tr>
<tr>
<td>M.2. 1.2</td>
<td>Monthly meeting with the hospital staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>M.2. 1.3</td>
<td>IEC/SBCC material used for patients counselling</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>M.2. 2</td>
<td>Manpower Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>M.2. 2.1</td>
<td>Psychologist/Counselor</td>
<td>-</td>
<td>75</td>
<td>106.30</td>
<td>102.00</td>
<td>Approved for 75 Psychologists @ Rs 25,000 pm - 15 existing for 12 months and 57 new for 4 months. Increment approved separately.</td>
</tr>
<tr>
<td>M.2. Contingency/ Misc.</td>
<td></td>
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<td>FM R</td>
<td>Budget Head</td>
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<td>Quantity / Target</td>
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<td>Amount Approved(In lakhs)</td>
<td>Remarks</td>
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</tr>
<tr>
<td>3</td>
<td>Mobility support</td>
<td>82.50</td>
<td>75</td>
<td>45.00</td>
<td>72.00</td>
<td>Rs. 72.00 lakhs are approved (@ Rs. 1 lakh per district per year for 72 districts as per NTCP PIP Guidelines)</td>
</tr>
<tr>
<td>M.2. 3.1</td>
<td>Office Expenses</td>
<td>75.00</td>
<td>75</td>
<td>37.50</td>
<td></td>
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<tr>
<td>M.2. 4</td>
<td>Non-Recurring Grants</td>
<td>150.00</td>
<td></td>
<td></td>
<td>142.50</td>
<td>Rs. 142.5 lakhs are approved (Rs. 2.5 lakhs per district for each of the 57 new districts)</td>
</tr>
<tr>
<td>M.2. 4.1</td>
<td>Procurement of equipment</td>
<td>-</td>
<td>60</td>
<td>150.00</td>
<td>142.50</td>
<td></td>
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<tr>
<td>M.3</td>
<td>State Tobacco Control Cell (STCC)</td>
<td>46.16</td>
<td></td>
<td></td>
<td>35.73</td>
<td></td>
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<td>M.3. 1</td>
<td>IEC/Advocacy Campaigns</td>
<td>15.00</td>
<td></td>
<td></td>
<td>15.00</td>
<td></td>
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<td>M.3. 1.1</td>
<td>Development of IEC Material</td>
<td>10.00</td>
<td>1</td>
<td>10.00</td>
<td></td>
<td>Rs. 15.0 lakhs are approved.</td>
</tr>
<tr>
<td>M.3. 1.2</td>
<td>State-level IEC Campaigns/Dissemination of IEC Material/Other IEC Campaigns</td>
<td>2.50</td>
<td>1</td>
<td>2.50</td>
<td>15</td>
<td>All the activities need to be undertaken in accordance with the NTCP guidelines furnished by this Ministry</td>
</tr>
<tr>
<td>M.3. 1.3</td>
<td>Use of innovative IEC tools, including m-Health</td>
<td>2.50</td>
<td>1</td>
<td>2.50</td>
<td></td>
<td></td>
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<tr>
<td>M.3. 2</td>
<td>Training/Sensitization Programmes</td>
<td>4.00</td>
<td></td>
<td></td>
<td>4.00</td>
<td></td>
</tr>
<tr>
<td>M.3. 2.1</td>
<td>State Level Advocacy Workshop</td>
<td>0.20</td>
<td>2</td>
<td>0.40</td>
<td></td>
<td>Rs. 4.0 lakhs is approved</td>
</tr>
<tr>
<td>M.3. 2.2</td>
<td>Training of Trainers, Refresher Training</td>
<td>0.20</td>
<td>8</td>
<td>1.60</td>
<td></td>
<td>All the activities need to be undertaken in accordance with the NTCP guidelines furnished by this</td>
</tr>
<tr>
<td>M.3. 2.3</td>
<td>Training on tobacco cessation for Health care providers</td>
<td>0.20</td>
<td>4</td>
<td>0.80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.3.</td>
<td>Law enforcers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Budget (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
</tr>
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<td>------</td>
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<td>-------------------------------------------------------------------------</td>
</tr>
<tr>
<td>2.4</td>
<td>training / sensitization Programme</td>
<td>0.20</td>
<td>1</td>
<td>0.20</td>
<td>Ministry</td>
<td></td>
</tr>
<tr>
<td>M.3.25</td>
<td>Any other training to facilitate implementation of provisions of COTPA 2003, FSSA 2006, and WHO FCTC implementation</td>
<td>0.20</td>
<td>5</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.3.3</td>
<td>Flexible Pool</td>
<td></td>
<td>8.68</td>
<td>5.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.3.31</td>
<td>State-level Coordination Committee</td>
<td>0.20</td>
<td>2</td>
<td>0.40</td>
<td>An amount of Rs. 5.0 lakhs is approved (as per NTCP PIP Guidelines)</td>
<td></td>
</tr>
<tr>
<td>M.3.32</td>
<td>Baseline/Endline surveys/ Research studies</td>
<td>1.00</td>
<td>1</td>
<td>1.00</td>
<td>State can use the flexible pool as per its specific planning and requirements</td>
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**National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)**

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All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to existing HR. Employer's contribution towards EPF, if applicable, has been Approved under A.10.8.5.

| O1.2.1. | State NCD Cell Salary of contractual staff | Epidemiologist/Public Health specialist @ Rs.60,000-80,000/month (Rs.7.2-9.6lakh/year) | 1 | 4 months | 60,000 | 3.20 | 2.40 |

| O1.2.1. | State Programme coordinator @ Rs. 50,000-60,000/month (Rs.6.0 -7.2 lakh/year) | 1 | 4 months | 45,000 | 2.40 | 1.80 |

| O1.2.1. | Finance cum logistics consultant @ Rs.40,000-50,000/month (Rs. 4.8- 6.0 lakh/ year) | 1 | 12 months | 50,000 | 6.60 | 6.00 |

| O1.2.1. | Data entry operator @ Rs.10000-12000/month [Rs.1.2- 1.44 lakh /year | Data Entry Operators not approved. Lump sum amount approved for outsourcing data entry operation on task basis to the extent possible | 1.98 | 1.26 |

<p>| O1.2.1. | District | Epidemiologist/ | 75 | 12 | 14.18 | 11.46 |</p>
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<th>Description</th>
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<th>No. of positions approved</th>
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<th>Cost per unit (Rs. / month)</th>
<th>As per State PIP</th>
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<td>months for 21 posts &amp; 4 months for 54 posts</td>
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<td>District Programme coordinator @ 30,000-40,000/month (Rs.3.6-4.8lakh/year)</td>
<td>75</td>
<td>12 months for 6 posts &amp; 4 months for 69 posts</td>
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<td>Finance cum logistics consultant @ Rs.30,000-40,000/month (Rs.3.6-4.8 Lakh/year)</td>
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<td>12 months for 35 posts &amp; 4 months for 40 posts</td>
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<td>Data entry operator @ Rs.10,000-12,000/month [Rs.1.2-1.44 lakh /year]</td>
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<td>12 months for 14 posts &amp; 4 months</td>
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**Total: 1,148.56  619.26**
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<td></td>
<td>Lakh/year)</td>
<td>for 61 posts</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 GNM @Rs. 18000-20000 /month (4.32-4.8 lakh/year)</td>
<td>150</td>
<td>12 months for 65 posts &amp; 4 months for 85 posts</td>
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<tr>
<td></td>
<td></td>
<td>1 Technician @Rs. 18000-20000 /month (Rs. 2.16-2.40 lakh/year)</td>
<td>75</td>
<td>12 months for 32 posts &amp; 4 months for 43 posts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 Physiotherapist @Rs. 20000-25000/month (Rs. 2.40-3.0 lakh/year)</td>
<td>75</td>
<td>12 months for 36 posts &amp; 4 months for 39 posts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 Counsellor @ Rs. 1 Rs. 10000-12000/month (Rs. 1.2-1.44 lakh/year)</td>
<td>75</td>
<td>12 months for 34 posts &amp; 4 months for 41 posts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 Data Entry Operator @Rs. 10000-</td>
<td>Data Entry Operators not approved. Lump sum amount approved for outsourcing</td>
<td>74.40</td>
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<tr>
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<td>Description</td>
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<td>Allocation 2016-17</td>
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<tr>
<td></td>
<td></td>
<td>No. of positions approved</td>
<td>No. of months for which position approved</td>
<td>Cost per unit (Rs. / month)</td>
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<tr>
<td></td>
<td></td>
<td>12000/month [Rs.1.2-1.44 lakh/year]</td>
<td>data entry operation on task basis to the extent possible</td>
<td>1,144.88</td>
</tr>
<tr>
<td>O1.2.1.3</td>
<td>Cardiac Care Unit</td>
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<tr>
<td></td>
<td>Salary of contractual staff</td>
<td>specialist (Cardiology/M. D. General Medicine) @ Rs.80,000-90000 /month [Rs.9.6-108.0 lakh/year] or General physician @ Rs.60000-70000/month [Rs.7.2 - 8.4.lakh/year]</td>
<td>5</td>
<td>4 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4 GNMs @ Rs. 18000-20000 /month (8.64 - 9.6 lakh /year)</td>
<td>20</td>
<td>12 months</td>
</tr>
<tr>
<td>O1.2.1.5</td>
<td>CHC NCD Clinic</td>
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<tr>
<td></td>
<td>Salary of contractual staff</td>
<td>1 Doctor @ Rs. 40000-50000/month [Rs. 4.80 lakh-6.00 lakh /year]</td>
<td>90</td>
<td>12 months for 14 posts &amp; 4 months for 76 posts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 Nurse @ Rs. 18000-20000/month</td>
<td>222</td>
<td>12 months for 69</td>
</tr>
<tr>
<td>FMR Code</td>
<td>Description</td>
<td>Position</td>
<td>2016-17</td>
<td>Allocation 2016-17</td>
</tr>
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</tr>
<tr>
<td></td>
<td></td>
<td>No. of position s approved</td>
<td>No. of months for which position approved</td>
<td>Cost per unit (Rs. / month)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>[Rs. 2.16-2.4 lakh/year]</td>
<td>posts &amp; 4 months for 153 posts</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Technician @ Rs. 18000-20000/month [Rs. 2.16 - 2.4lakh/year]</td>
<td>222</td>
<td>12 months for 77 posts &amp; 4 months for 145 posts</td>
<td>18,000</td>
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<td></td>
<td>1 counsellor @Rs.10000-12000/month [Rs.1.2- 1.44 lakh/year]</td>
<td>222</td>
<td>12 months for 76 posts &amp; 4 months for 146 posts</td>
<td>10,000</td>
</tr>
<tr>
<td></td>
<td>Data entry operator @ Rs.10000-12000/month [Rs.1.2- 1.44 lakh /year]</td>
<td>Data Entry Operators not approved. Lump sum amount approved for outsourcing data entry operation on task basis to the extent possible</td>
<td></td>
<td>205.92</td>
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**HR increment calculated @ 5% for above approvals**

| Grand Total | | 3,984.74 | 2,559.50 |
## Annexure-F

### Integrated Diseases Surveillance Programme (IDSP)

<table>
<thead>
<tr>
<th>FM R</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakhs)</th>
<th>Quantity / Target</th>
<th>Amount Proposed (Rs. Lakhs)</th>
<th>Amount Approved (In lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>E</td>
<td>INTEGRATED DISEASE SURVEILLANCE PROGRAMME (IDSP)</td>
<td></td>
<td>1,200.90</td>
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<td>983.44</td>
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<td>REMUNERATION FOR CONTRACTUAL HUMAN RESOURCE</td>
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<td>844.71</td>
<td>706.17</td>
<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to existing HR. State to provide increment on completion of one year of service in IDSP. Remuneration for vacant positions calculated for 3 months. Employer's contribution towards EPF (if applicable) has been Approved under A.10.8.5.</td>
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<tr>
<td>E.1 1</td>
<td>State Epidemiologist</td>
<td>6.60</td>
<td>1</td>
<td>6.60</td>
<td>6.30</td>
<td>Approved for 1 position @ Rs 52,500 pm for 12 months.</td>
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<tr>
<td>E.1 2</td>
<td>State Microbiologist</td>
<td>6.60</td>
<td>1</td>
<td>6.60</td>
<td>6.30</td>
<td>Approved for 1 position @ Rs 52,500 pm for 12 months.</td>
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<tr>
<td>E.1 3</td>
<td>State Veterinary Consultant</td>
<td>6.00</td>
<td>1</td>
<td>6.00</td>
<td>1.50</td>
<td>Approved for 1 position @ Rs 50,000 pm for 3 months.</td>
</tr>
<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
</tr>
<tr>
<td>------</td>
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<td>----------------------------</td>
<td>----------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>E.1.4</td>
<td>State Consultant (Training)</td>
<td>6.00</td>
<td>1</td>
<td>6.00</td>
<td>1.50</td>
<td>Approved for 1 position @ Rs 50,000 pm for 3 months.</td>
</tr>
<tr>
<td>E.1.5</td>
<td>State Entomologist</td>
<td>5.08</td>
<td>1</td>
<td>5.08</td>
<td>4.80</td>
<td>Approved for 1 position @ Rs 40,000 pm for 12 months.</td>
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<td>E.1.6</td>
<td>State Consultant (Finance/Procurement)</td>
<td>2.76</td>
<td>1</td>
<td>2.76</td>
<td>0.69</td>
<td>Approved for 1 position @ Rs 23,000 pm for 3 months.</td>
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<tr>
<td>E.1.7</td>
<td>State Data Manager</td>
<td>3.19</td>
<td>1</td>
<td>3.19</td>
<td>2.90</td>
<td>Approved for 1 position @ Rs 24,150 pm for 12 months.</td>
</tr>
<tr>
<td>E.1.8</td>
<td>State Data Entry Operator</td>
<td>2.22</td>
<td>1</td>
<td>2.22</td>
<td>2.12</td>
<td>Data Entry Operators not approved. Lump sum amount approved for outsourcing data entry operation on task basis to the extent possible.</td>
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<tr>
<td>E.1.9</td>
<td>District Epidemiologists</td>
<td>-</td>
<td>75</td>
<td>453.87</td>
<td>390.90</td>
<td>Approved for 58 positions @ Rs 52,500 pm for 12 months and 17 positions @ Rs 50,000 pm for 3 months.</td>
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<td>E.1.10</td>
<td>District Microbiologist at District labs</td>
<td>-</td>
<td>2</td>
<td>13.20</td>
<td>12.60</td>
<td>Approved for 2 position @ Rs 52,500 pm for 12 months.</td>
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<td>E.1.11</td>
<td>District Data Manager</td>
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<td>75</td>
<td>202.88</td>
<td>158.55</td>
<td>Approved for 58 positions @ Rs 21,315 pm for 12 months and 17 positions @ Rs 20,000 pm for 3 months.</td>
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<td>Data Entry Operator*</td>
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<td>85</td>
<td>136.31</td>
<td>118.01</td>
<td>Data Entry Operators not approved. Lump sum amount approved for outsourcing data entry operation on task basis to</td>
</tr>
<tr>
<td></td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
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<tr>
<td>E.1. 13</td>
<td>Others if any (pl specify)</td>
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<td></td>
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<tr>
<td>E.2</td>
<td>TRAINING</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Training at State/District Level (1 batch = 20 participants)</td>
<td>29.25</td>
<td>15.00</td>
<td></td>
<td></td>
<td>the extent possible.</td>
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<td>E.2. 1</td>
<td>Medical Officers (3 days)</td>
<td>0.50</td>
<td>36</td>
<td>18.00</td>
<td>0.00</td>
<td>Not Approved</td>
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<tr>
<td>E.2. 2</td>
<td>Medical College Doctors (1 day)</td>
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<td></td>
<td></td>
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<tr>
<td>E.2. 3</td>
<td>Hospital Pharmacists/Nurses Training (1 day)</td>
<td>0.45</td>
<td>25</td>
<td>11.25</td>
<td>15.00</td>
<td>Approved</td>
</tr>
<tr>
<td>E.2. 4</td>
<td>Lab. Tecnician (3 days)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>E.2. 5</td>
<td>Data Managers (2 days)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>E.2. 6</td>
<td>Date Entry Operators cum Accountant (2 days)</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>E.2. 7</td>
<td>ASHA &amp; MPWs, AWW &amp; Community volunteers (1 day)</td>
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<td></td>
</tr>
<tr>
<td>E.2. 8</td>
<td>One day training for Data entry and analysis for Block Health Team (including Block Programme Manager)</td>
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<td></td>
<td></td>
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<tr>
<td>E.2. 9</td>
<td>One day sensitization for PRI s</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>E.2. 10</td>
<td>Others (pl specify)**</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>FM R</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
</tr>
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<td>------</td>
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<tr>
<td>E.3</td>
<td>LABORATORY SUPPORT</td>
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</tr>
<tr>
<td></td>
<td>District Public Health Laboratory Strengthening</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>E.3.1</td>
<td>Non-recurring costs on account of equipment for district public health labs requiring strengthening.</td>
<td>15.00</td>
<td>7</td>
<td>105.00</td>
<td>45.00</td>
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<tr>
<td>E.3.2</td>
<td>Recurring costs on account of Consumables, kits, communication, misc expenses etc at each district public health lab (applicable only for functional labs having requisite manpower).</td>
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<tr>
<td>E.3.3</td>
<td>Equipment AMC cost***</td>
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<tr>
<td>E.3.4</td>
<td>Referral Network of laboratories (Govt. Medical College labs) Reimbursement based payment for laboratory tests. (to be calculated for already approved labs in previous PIPs of States for corresponding next years)****</td>
<td>3.00</td>
<td>8</td>
<td>24.00</td>
<td>4.00</td>
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<tr>
<td>E.3.5</td>
<td>Expenses on account of consumables, operating expenses, office expenses,</td>
<td>2.00</td>
<td>8</td>
<td>16.00</td>
<td>4.00</td>
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<td>FM</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount Proposed (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
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</tr>
<tr>
<td>E.4</td>
<td>OPERATIONAL COSTS</td>
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<td>181.94</td>
<td>181.94</td>
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<tr>
<td>E.4.1</td>
<td>MOBILITY: Travel Cost, POL, mobility cost at SSU &amp; DSU on need basis</td>
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<td></td>
<td>85</td>
<td>48.80</td>
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</tr>
<tr>
<td>E.4.2</td>
<td>Office expenses on telephone, fax, Broadband Expenses, Weekly Alert Bulletin/Annual Disease Surveillance report, minor repairs and AMC of IT/office equipment supplied under IDSP, Meetings and other miscellaneous expenditures etc.</td>
<td></td>
<td></td>
<td>86</td>
<td>133.14</td>
<td>Approved for approval</td>
</tr>
<tr>
<td>E.5</td>
<td>ANY STATE SPECIFIC ACTIVITY (Pl. Specify)</td>
<td></td>
<td></td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>HR increment calculated @ 5% for above approvals</td>
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<td></td>
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<td>27.33</td>
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</table>
National Vector Borne Disease Control Programme (NVBDCP)

Draft ROP in respect of National Vector Borne Disease Control Programme Uttar Pradesh - 2016-17

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Indicator</th>
<th>2015-16</th>
<th>Achievement</th>
<th>Proposed Target 2016-17</th>
<th>Remarks</th>
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<tr>
<td>1</td>
<td>Annual Blood Examine Rate (ABER)</td>
<td>10%</td>
<td>2.37%</td>
<td>&gt;10</td>
<td>To sustain above 10%</td>
</tr>
<tr>
<td>2</td>
<td>Annual Parasite Incidence (API)</td>
<td>&lt;1</td>
<td>0.20</td>
<td>&lt;1</td>
<td>API will be significant if ABER is increased</td>
</tr>
<tr>
<td>3</td>
<td>Sentinel Surveillance Hospital made functional for Dengue &amp; Chikungunya</td>
<td>37</td>
<td>3.3</td>
<td>37</td>
<td>Functionality to be ensured</td>
</tr>
<tr>
<td>4</td>
<td>Sentinel Surveillance Hospital made functional for JE</td>
<td>22</td>
<td>22</td>
<td>22</td>
<td>Functionality to be ensured</td>
</tr>
<tr>
<td>5</td>
<td>No. of districts with Mf rate less than 1% out of total endemic districts</td>
<td>&lt;1</td>
<td>0.16</td>
<td>&lt;1</td>
<td>Compliance during MDA to be ensured</td>
</tr>
<tr>
<td>6</td>
<td>No. of Kala-azar endemic Blocks with &lt; 1 case/10,0000 Population</td>
<td>To sustain &lt;1 case/10,000 Population in all 12 endemic blocks</td>
<td></td>
<td></td>
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</table>

Sr. No. Priority areas for focussed attention

1. AES/ JE is big concern in the state, activities should be prioritized to implement the GoI Strategy with focused monitoring.
2. Strengthening of the monitoring and surveillance for Dengue before the onset of transmission season.
3. Focussed monitoring of MDA activities and initiate Transmission Assessment Survey (TAS) to achieve elimination goal of Lymphatic Filariasis.
4. Identify areas based on malaria cases/situation for prioritization and focused intervention. Increase surveillance for malaria in areas with consistent foci of malaria I.e. slum/labour colonies, construction sites & migratory population.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Post</th>
<th>Vacant</th>
<th>Target for 2016-17</th>
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<tbody>
<tr>
<td>1</td>
<td>District Malaria Officer</td>
<td>27</td>
<td>The vacant posts should be filled up.</td>
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</table>

Annexure-G
| (DMO) |  |  |  |  |  |  
|---|---|---|---|---|---|---|
| 2 | Assistant DMO | 46 |  |  |  |  
| 3 | Lab Technicians | 156 |  |  |  |  
| 4 | Health Supervisors | 1059 |  |  |  |  
| 5 | MPHW(M) | 9080 |  |  |  |  
| 6 | Biologist | 11 |  |  |  |  

2. Quarterly review meetings to be conducted under the Chairmanship of Principal Secretary (Health)/Mission Director to assess the situation of AES/JE activities and actions taken. Also, the situation of other VBDs should be reviewed in addition to AES/JE.

**Desirable Conditionality:**

The vacant posts of AES/JE control programme and other regular posts for medical and Para medical staff should be filled up so as to strengthen the programme in the state.

### District wise goals (To be done by State)

<table>
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<tr>
<th>Deaths</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2016-17</td>
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</table>

### Deaths

To be filled and monitored

---

**Draft ROP in respect of National Vector Borne Disease Control Programme Uttar Pradesh - 2016-17**

<table>
<thead>
<tr>
<th>FMR</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakhs)</th>
<th>Quantity / Target</th>
<th>Budget (Rs. Lakhs)</th>
<th>Amount Approved( In lakhs)</th>
<th>GoI Comments</th>
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<td>6,623.96</td>
<td>2,808.35</td>
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<td>DBS (Domestic Budgetary Support)</td>
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<td>Malaria</td>
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<td>Contractual Payments</td>
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<td>MPW contractual</td>
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</tr>
<tr>
<td>F.1.1.a.i.i</td>
<td>Lab Technicians (against vacancy)</td>
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<td>F.1.1.a.i.ii</td>
<td>VBD Technical Supervisor (one for each block)</td>
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Pended
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<td>F.1.1.a.i</td>
<td>District VBD Consultant (one per district) (Non- Project States)</td>
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<td>19</td>
<td>52.20</td>
<td>26.10</td>
<td>Approved of 19 new District VBD consultants @ Rs 22,895 pm for 6 months.</td>
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<td>F.1.1.a.v</td>
<td>State Consultant (Non – Project States),</td>
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<td>M&amp;E Consultant (Medical Graduate with PH qualification)</td>
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<td>VBD Consultant (preferably entomologist)</td>
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<td>Approved of 1 new VBD Consultant @ Rs 22,500 pm for 6 months.</td>
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<td>ASHA Incentive</td>
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<td>Spray Wages</td>
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<td>Impregnation of Bed nets- for NE states</td>
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<td>F.1.1.d</td>
<td>Monitoring, Evaluation &amp; Supervision &amp; Epidemic Preparedness including mobility &amp; NAMMIS and MPW monitoring incentive</td>
<td>79</td>
<td>39.48</td>
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<td>IEC/BCC</td>
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<td>PPP / NGO and Intersectoral Convergence</td>
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<td>Zonal Entomological units</td>
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<td>Any other Activities (Pl. specify)</td>
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<td>F.1.1.l.a</td>
<td>Computers with all accessories etc</td>
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<td>Total Malaria (DBS)</td>
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<td>Dengue &amp; Chikungunya</td>
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<td>Apex Referral Labs recurrent</td>
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<td>Sentinel surveillance Hospital recurrent</td>
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<td>49</td>
<td>50.00</td>
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<td>Of the 37 SSHs 11 are common for JE. Proposal for new D&amp;C</td>
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<td>Amount Approved (In lakhs)</td>
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<td>ELISA facility to Sentinel Surv Labs</td>
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<td>SSHs is Approved.</td>
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<td>Test kits (Nos.) to be supplied by GoI (kindly indicate numbers of ELISA based NS1 kit and Mac ELISA Kits required separately)</td>
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<td>IgM test kit is a central supply and ELISA based NS1 kit is decentralized commodity reflected under F.6</td>
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<td>Monitoring/supervision and Rapid response</td>
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<td>77.10</td>
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<td>F.1.2.f</td>
<td>Vector Control, environmental management &amp; fogging machine</td>
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<td>75.12</td>
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<td>F.1.2.h</td>
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<td>Training &amp; printing of guidelines, formats etc. including operational research</td>
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<td><strong>Total Dengue/Chikungunya</strong></td>
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<td>F.1.3</td>
<td>AES/JE</td>
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<td>3,040.65</td>
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Uttar Pradesh: Administrative Approval of PIP 2016-17
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<tr>
<td>F.1.3.a</td>
<td>Strengthening of Sentinel sites which will include Diagnostics and Case Management, supply of kits by GoI</td>
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<td>20</td>
<td>47.16</td>
<td>11.00</td>
<td>There are 22 JE Sentinel Sites in Uttar Pradesh, out of which 11 sites are common with D&amp;C. Thus proposed to support 11 Sentinel Sites each @ Rs.1.00 Lac from JE/AES. Kits are being supplied by NVBDCP. Line list of JE/AES cases are not regularly received from the above Sentinel Sites. Line list being received from NIV field station at Gorakhpur which caters to Gorakhpur and adjoining districts only.</td>
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<td>F.1.3.b</td>
<td>IEC/BCC specific to J.E. in endemic areas</td>
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<td>119.90</td>
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<td>Capacity Building</td>
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<td>20.00</td>
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<td>F.1.3.d</td>
<td>Monitoring and supervision</td>
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<td>-</td>
<td>20</td>
<td>245.40</td>
<td>Approved of 8 Districts Consultants @ Rs 40,000 pm and 9 Technical Assistants @ Rs 15,000 pm for 12 months for monitoring supervision.</td>
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<td>F.1.3.e</td>
<td>Procurement of Insecticides (Technical Malathion)</td>
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<td>-</td>
<td>14</td>
<td>56.25</td>
<td>Technical Malathion is used during outbreak situations of JE. Amount allocated 2015-16 for 9 high endemic districts has not been utilized. Thus an amount as per GoI norms Rs.20.0 Lacs is Approved for Vector Control.</td>
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<tr>
<td>F.1.3.f</td>
<td>Fogging Machine</td>
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<td>F.1.3.g</td>
<td>Operational costs for malathion fogging</td>
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<td>-</td>
<td>22</td>
<td>297.00</td>
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<td>Operational Research</td>
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<td>Rehabilitation Setup for selected endemic districts</td>
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<td>ICU Establishment in endemic districts</td>
<td>-</td>
<td>18</td>
<td>2,245.94</td>
<td>774.60</td>
<td>Approved of HR for 10 functional PICUs as follows: a) 17 Doctors @ Rs 60,000 pm for 12 months b) 188 Nursing staff @ Rs 20,000 pm for 12 month c) Funds may be provided for establishment of one new PICU in identified endemic district - Rs. 2.01 cr. as proposed.</td>
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<td>F.1.3.k</td>
<td>ASHA Insentivization for sensitizing community</td>
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<td>F.1.3.l</td>
<td>Other Charges for Training/Workshop Meeting &amp; payment to NIV towards JE kits at Head Quarter</td>
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<td>ASHA incentive for referral of AES/JE cases to the nearest ETC/PHC/CHC/DH/Medical College</td>
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<tr>
<td>F.1.4.a</td>
<td>State Task Force, State Technical Advisory Committee meeting, printing of forms/registers, mobility support, district coordination meeting, sensitization of media etc., morbidity management, monitoring &amp; supervision and mobility support for Rapid Response Team and contingency support</td>
<td>3.00</td>
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<td>87.00</td>
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<td>Monitoring &amp; Evaluation (Post MDA assessment by medical colleges (Govt. &amp; private)/ICMR institutions)</td>
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<td>27</td>
<td>12.80</td>
<td>2.40</td>
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<td>Training/sensitization of district level officers on ELF and drug distributors including peripheral health workers</td>
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<td>F.1.4.e</td>
<td>Specific IEC/BCC at state, district, PHC, Sub-centre and village level including VHSC/GKs for community mobilization efforts to realize the desired drug compliance of 85% during MDA</td>
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<td>Honorarium for Drug Distribution including ASHAs and supervisors involved in MDA</td>
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<td>Verification and validation for stoppage of MDA in LF endemic districts</td>
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<td>Verification of LF endemicity in non-endemic districts</td>
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<td>a) LY &amp; Hy Survey in 350 distt</td>
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<td>F.1.4.j</td>
<td>ASHA incentive for one time linelisting of Lymphoedema and Hydrocele cases in non-endemic distt.</td>
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**Total Lymphatic**
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### National Leprosy Eradication Programme (NLEP)

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<td>G 6.1.ii</td>
<td>BFO cum Admin. Officer</td>
<td>-</td>
<td>1</td>
<td>6.78</td>
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<td>Approved for 1 position @ Rs 33,000 pm for 12 months. Increment approved separately.</td>
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<tr>
<td>G 6.1.iii</td>
<td>Admin. Asstt.</td>
<td>-</td>
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<td>Approved for 1 position @ Rs 22,000 pm for 12 months. Increment approved separately.</td>
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<td>DEO</td>
<td>-</td>
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<td>Data Entry Operators not approved. Lump sum amount of Rs lakhs approved for outsourcing data entry operation on task basis to the extent possible.</td>
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<tr>
<td>G 6.1.v</td>
<td>Driver</td>
<td>-</td>
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<td>2.61</td>
<td>Approved for 1 position @ Rs 21,780 pm for 12 months. Increment approved separately.</td>
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<td>G 6.2</td>
<td>Contractual Staff at District &amp; block level</td>
<td></td>
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<td>1,330.47</td>
<td>1,209.52</td>
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<tr>
<td>G 6.2.i</td>
<td>Driver</td>
<td>-</td>
<td>-</td>
<td>-</td>
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</tr>
<tr>
<td>S. No.</td>
<td>Budget Head</td>
<td>Unit Cost (Rs. Lakhs)</td>
<td>Quantity / Target</td>
<td>Amount proposed (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
</tr>
<tr>
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</tr>
<tr>
<td>G 6.2.ii</td>
<td>Contractual Staff in selected States, NMS</td>
<td>-</td>
<td>221</td>
<td>1,330.47</td>
<td>1,209.52</td>
<td>Approved as follows: a) 45 District Leprosy Consultants @ Rs 33,000 pm for 12 months. b) 45 Physiotherapists @ Rs 27,500 pm for 12 months. c) 418 PMWs @ Rs 17,600 pm for 12 months. Increment approved separately.</td>
</tr>
<tr>
<td>G 7.</td>
<td>Others</td>
<td></td>
<td></td>
<td>60.50</td>
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<tr>
<td>G 7.1</td>
<td>Travel expenses for regular staff for specific programme / training need, awards etc</td>
<td>-</td>
<td>54</td>
<td>15.00</td>
<td>11.76</td>
<td>Approved for approval</td>
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<tr>
<td>G 7.2</td>
<td>Support Staff Attendent</td>
<td>1.05</td>
<td>1</td>
<td>1.05</td>
<td>0.00</td>
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<td>G 7.3</td>
<td>Patient contact activity</td>
<td>0.00</td>
<td>-</td>
<td>44.45</td>
<td>0.00</td>
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<td>Leprosy Case Detection Campaign 2016-17 in 189 blocks of 15 districts of U.P.</td>
<td></td>
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<td>771.84</td>
<td>768.00</td>
<td>An amount of Rs 768 lakhs is Approved as per Annexure NLEP - 1</td>
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<td>HR increment calculated @ 5% for above approvals</td>
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<td>61.18</td>
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### Revised National Tuberculosis Control Programme (RNTCP)

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<th>S. No.</th>
<th>Budget Head</th>
<th>Unit Cost (Rs. Lakhs)</th>
<th>Quantity/Target</th>
<th>Budget (Rs. Lakhs)</th>
<th>Amount Approved (In lakhs)</th>
<th>Remarks</th>
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<td>Civil Works</td>
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<td>54</td>
<td>491.15</td>
<td>381.15</td>
<td>Link DRTB centres are approved but as per norms there is no separate budget allocation for the same. Additional DMCs are not approved</td>
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<td>2,643.9/7</td>
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<td>ACSM</td>
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<td>453.54</td>
<td>Approved. Hr approval as per RNTCP HR annexure</td>
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<td>673.00</td>
<td>572.05</td>
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<td>H.8</td>
<td>Vehicle hiring</td>
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<td>1,105.6/3</td>
<td>884.51</td>
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<td>Public Private Mix (PP/NGO Support)</td>
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<td>1,897.1/3</td>
<td>1238.67</td>
<td>Innovation under PPM is not approved due to lack of details. Approved as per RNTCP HR annexure</td>
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<td>Budget (Rs. Lakhs)</td>
<td>Amount Approved (In lakhs)</td>
<td>Remarks</td>
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<td>HR for 2 CDST labs are approved as sanctioned in NFM. Approval as per RNTCP HR annexure</td>
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<td>150.00</td>
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<td>121.00</td>
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<td>607.47</td>
<td>594.51</td>
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<tr>
<td></td>
<td><strong>Grand Total</strong></td>
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<td></td>
<td><strong>29,843.13</strong></td>
<td><strong>22,205.86</strong></td>
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## RNTCP HR Annexure

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Positions</th>
<th>No. of positions approved</th>
<th>Duration salary approved for (months)</th>
<th>Salary approved (per month)</th>
<th>Total Remuneration (Rs. In lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
<td></td>
<td>Contractual Salary Head</td>
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<td>All the positions have been approved at the previous year's salary. Overall 5% increment has been approved for all the existing positions which has been calculated separately. Annual Increment will only be applicable to exiting HR.</td>
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<td>State level:</td>
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<tr>
<td>1</td>
<td>Asst. Program Officer/Epidemiologist</td>
<td>2</td>
<td>12</td>
<td>57,750</td>
<td>13.86</td>
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<tr>
<td>2</td>
<td>Medical Officer STC</td>
<td>2</td>
<td>6</td>
<td>46,200</td>
<td>5.54</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>DRTB Coordinator</td>
<td>2</td>
<td>6</td>
<td>46,200</td>
<td>5.54</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>TB/HIV Coordinator</td>
<td>2</td>
<td>12 / 6</td>
<td>57,750</td>
<td>10.40</td>
<td></td>
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<tr>
<td>5</td>
<td>Microbiologist for IRL</td>
<td>2</td>
<td>12</td>
<td>57,750</td>
<td>13.86</td>
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</tr>
<tr>
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<td>Sr. LT at IRL</td>
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<td>12</td>
<td>23,100</td>
<td>5.54</td>
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<tr>
<td>7</td>
<td>Accounts Officer</td>
<td>2</td>
<td>12 / 6</td>
<td>46,200</td>
<td>8.32</td>
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<tr>
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<td>SDS Pharmacist</td>
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<td>12</td>
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<td>9.98</td>
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<tr>
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<td>Store Assistant SDS</td>
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<td>12 / 6</td>
<td>15,015</td>
<td>9.01</td>
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<td>DEO (State TB Cell)</td>
<td>Lumpsum</td>
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<td>S. No.</td>
<td>Positions</td>
<td>No. of positions approved</td>
<td>Duration salary approved for (months)</td>
<td>Salary approved (per month)</td>
<td>Total Remuneration (Rs. In lakhs)</td>
<td>Remarks</td>
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<td>11</td>
<td>DEO (IRL)</td>
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<td>4.37</td>
<td>outsourcing data entry operation on outsourcing basis to the extent possible</td>
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<td>Secretarial Asst.</td>
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<td>20,790</td>
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<td>13</td>
<td>DEO – STF (if approved)</td>
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<td></td>
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<td>1.46</td>
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<td>Technical Officer - procurement and logistics</td>
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<td>40,425</td>
<td>4.85</td>
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<td>Data Analyst</td>
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<td>34,650</td>
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<td>16</td>
<td>Driver</td>
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<td>12</td>
<td>20,790</td>
<td>2.49</td>
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<td><strong>TOTAL - STATE LEVEL</strong></td>
<td><strong>32</strong></td>
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<td><strong>110.41</strong></td>
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**District Level:**

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<tr>
<th>S. No.</th>
<th>Positions</th>
<th>No. of positions approved</th>
<th>Duration salary approved for (months)</th>
<th>Salary approved (per month)</th>
<th>Total Remuneration (Rs. In lakhs)</th>
<th>Remarks</th>
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<tbody>
<tr>
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<td>MO-DTC</td>
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<td>12 / 6</td>
<td>46,200</td>
<td>13.86</td>
<td>2 existing for 12 months and 1 new for 6 months</td>
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<td>Senior DOTS plus TB- HIV Supervisor</td>
<td>89</td>
<td>12 / 6</td>
<td>25,410</td>
<td>263.76</td>
<td>84 in-position for 12 months and 5 vacant for 6 months</td>
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<td>STS</td>
<td>997</td>
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<td>757 in-position for 12 months and 240 vacant for 6 months</td>
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<td>S. No.</td>
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<td>No. of positions approved</td>
<td>Duration salary approved for (months)</td>
<td>Salary approved (per month)</td>
<td>Total Remuneration (Rs. In lakhs)</td>
<td>Remarks</td>
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<td>Driver</td>
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<td>12 / 6</td>
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<td>7 in-position for 12 months and 9 vacant for 6 months</td>
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<td>DRTB Centre Senior MO</td>
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<td>12 / 6</td>
<td>57,750</td>
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<td>55.44</td>
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<tr>
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<td>MO - Medical College</td>
<td>36</td>
<td>12 / 6</td>
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<td>LT - Medical College</td>
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<td>12 / 6</td>
<td>15,593</td>
<td>59.88</td>
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<td>Positions</td>
<td>No. of positions approved</td>
<td>Duration salary approved for (months)</td>
<td>Salary approved (per month)</td>
<td>Total Remuneration (Rs. In lakhs)</td>
<td>Remarks</td>
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<tr>
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<td>TBHV - Medical College</td>
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<td>12/6</td>
<td>17,325</td>
<td>60.29</td>
<td>22 existing for 12 months; 10 vacant and 4 new for 6 months</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL - Medical College</strong></td>
<td><strong>112</strong></td>
<td><strong>269.86</strong></td>
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</tr>
<tr>
<td></td>
<td><strong>PP/NGO Head</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>1</td>
<td>PPM Coordinator</td>
<td>89</td>
<td>12/6</td>
<td>25,410</td>
<td>246.99</td>
<td>73 in-position for 12 months and 16 vacant for 6 months</td>
</tr>
<tr>
<td>2</td>
<td>TBHV</td>
<td>498</td>
<td>12/6</td>
<td>17,325</td>
<td>983.37</td>
<td>448 in-position for 12 months and 50 vacant for 6 months</td>
</tr>
<tr>
<td>3</td>
<td>State PPM Coordinator</td>
<td>2</td>
<td>12</td>
<td>34,650</td>
<td>8.32</td>
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</tr>
<tr>
<td></td>
<td><strong>TOTAL - PP/NGO</strong></td>
<td><strong>589</strong></td>
<td><strong>1,238.67</strong></td>
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<td><strong>ACSM Head</strong></td>
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</tr>
<tr>
<td>1</td>
<td>State ACSM Officer/IEC Officer</td>
<td>2</td>
<td>12</td>
<td>40,425</td>
<td>9.70</td>
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