



16th CRM Pre Briefing Meeting

19 November, 2024

State Program Management Unit, National Health Mission, UP

State Profile: At a Glance

Health Infrastructure	Number
District Hospital	108
Community Health Centres	972
Primary Health Centre	4502
Sub Health Centre	25761
Ayushman Arogya Mandir	22685
Special Hospitals	259





Financial Progress (2024-25)

S. No.	Particulars	Amount (Rs. In Cr.)	
		2023-24	2024-25
1	2	3	4
A-GOI Allocation & Release			
1	GOI Resource Envelope(Revised)	4250.42	4978.16
2	Release By GOI	4928.14	3562.95
3	% of Release	115.94%	71.57%
B- Fund Utilisation Status			
1	Opening Balance As on 1st April	2472.42	1306.59
2	Central Share Received	2858.59	2048.72
3	State Share Received	4338.67	2116.74
4	Bank Interest Received	33.54	5.81
5	Fund Available (1+2+3+4)	9703.21	5477.86
6	Bank interest Refunded	39.92	39.35
7	Net Fund available for expenditure	9663.29	5437.86
8	Expenditure F.Y. 2024-25 (PFMS)	8363.08	4386.58
9	% of utilization fund received in SNA	86.54%	80.67%
10	SNA Balance (including Rs. 550 Cr. to be refunded)	-	421.70



Status of Five Years NHM Fund Utilization

Rs In lakh

S. No.	Year	Opening	Central Share	State Share	Total Fund Available in SHS	Expenditure	% of Expenditure
1	2020-21	1,27,380.56	3,95,441.16	2,43,848.20	7,66,669.92	5,77,221.91	75.29
2	2021-22	1,89,448.01	1,41,909.53	2,67,997.50	5,99,355.04	5,10,363.07	85.15
3	2022-23	88,991.97	4,37,131.89	4,52,436.47	9,78,560.33	7,31,318.44	74.73
4	2023-24	2,47,241.89	2,85,859.08	4,33,866.52	9,66,967.49	8,36,308.49	86.54
5	2024-25 (14-11-2024)	1,30,659.00	2,04,872.00	2,11,674.00	5,47,205.00	4,38,657.86	80.16



Analysis of expenditure 2023-24 & 2024-25

Rs in Crore				
S.No	Month	Monthly Cumulative expenditure 2023-24	Monthly Cumulative expenditure 2024-25	Increase/decrease
1	April	5.04	55.88	50.84
2	May	504.00	590.22	86.22
3	june	1040.86	1115.81	74.95
4	july	1639.77	1698.76	58.99
5	Aug	2319.14	2509.83	190.69
6	Sep	2888.84	3083.12	194.28
7	Oct	3546.48	4112.48	566.00
8	Nov	4319.24		
9	Dec	4949.77		
10	Jan	5842.37		
11	Feb	6703.03		
12	March	8363.08		



Key Innovations / Achievements



MaNTrA App



- MaNTrA is an online MIS to capture real time data from Labour room
- Ensures quality of care and availability of Services around delivery
- Integrated with e-Kavach, ensures Postnatal Care to mother and immunization to child
- Integrated with Civil Registration System for newborn birth registration
- Centralized tool to monitor clinical data and ensure safe delivery.
- AADHAAR authentication functionality implemented for transparent & timely payment of Janani Suraksha Yojana



5593
Delivery
points

61.41 Lakhs
Deliveries
reported

15.86 Lakhs
Newborn
registration

11.36 Lakhs
AADHAR
authentication



PMSMA: USG e₹UPI voucher



- A digital solution to allow cashless payments that facilitates one time transaction.

- Vital initiative to address the prolonged waiting periods and non-availability of ultrasonography services, for pregnant women, at government health facilities.

- The vouchers offer pregnant women to redeem the service at any empanelled private USG center in state of their own choice and as per her convenience with in span of 30days.

- e₹UPI voucher is an easy, safe and secure method.

14,50,238
e₹UPI voucher
issued till 9th Nov 2024

6,81,141
e₹UPI voucher
Redeemed





Ayushman Arogya Mandir



Total 22685 AAMs Operationalized

(SHCs-17483, PHCs-2594,
UPHCs-704, UAAMs-890)



OPD

Total 27.29 Crores footfalls
since April, 2020



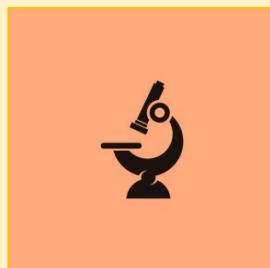
**eSanjeevani Tele
Consultation**

Total 3.41 Crores tele-Consultation
conducted since July, 2020



Yoga/ Wellness

4.91 crores beneficiaries
participated in 40.80
lakhs Wellness/ Yoga
sessions since April, 2020.



Diagnostics

11.20 crores
beneficiaries availed
Diagnostic Services since
April, 2020



Drugs

21.67 crores beneficiaries
availed Medicines since
April, 2020



AMS Portal

More than 83% CHOs
are punching attendance
at AMS application



E-Kavach an introduction

Comprehensive Primary Healthcare Application

1

One Time Population enumeration database with Family and Members

2

Workflow based system for FLWs

3

Single Source of Truth for Individuals Longitudinal Health Records

4

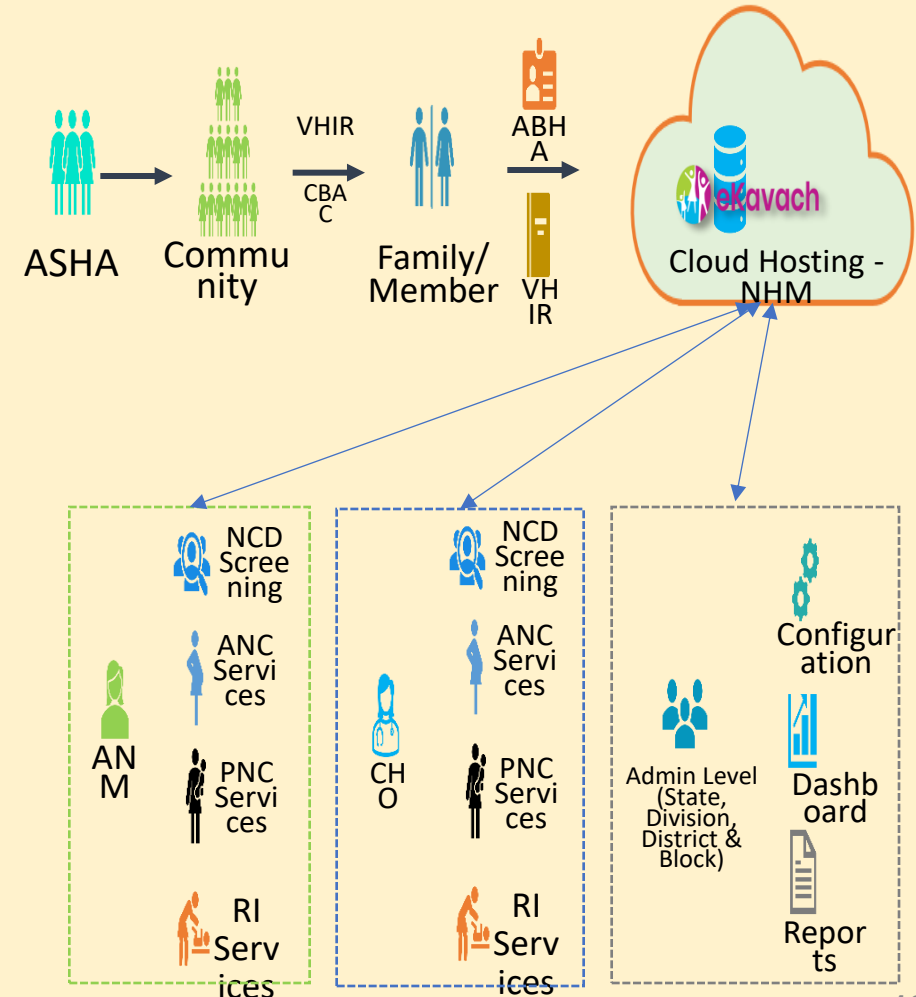
ABHA saturated enumeration for Health Record linkage

5

Due list to facilitate FLWs and track community level Assured services Delivery

6

Integration of digital health systems for Population Register & Interlinkages





eKavach Current Status



2394.72 Lacs

Total Estimated Population of UP

87%

Total Population Enumerated

67.70 Lacs

Total Estimated Pregnant Women

83%

Total Enumerated Pregnant Women

287.95 Lacs

Total Estimated children under 5 year

73%

Total Enumerated children under 5 years

881.74 Lacs

Total 30+ Age Estimated Members

94%

Total 30+ Age Enumerated Members

907.88 Lacs

Geotagged ABHA Generated

213.62 lacs

Electronic Health Records Generated

45.89%

Total 30+ enumerated members with ABHA saturation

364.41 Lacs

Total No. of CBAC Form Fill

100.92 Lacs

Total No of NCD Screening

39.93 Lacs

Symptomatic cases found in Community

17.83 Lacs

Cases Tested Against Above

7%

Cases Found Positive Against Cases Tested

21.89 Lacs

Total No. of RI Sessions Held

251.36 Lacs

Total No of Beneficiaries Vaccinated (PW, Children under 5 years)

2,25,689

Users Adopted (ASHAs, ANMs, Sangini, CHOs)¹¹



eKavach Impact



Population Register with ABHA

- Common Due List across Applications
- Single source of truth for Population
- Assured Health services against Duelist

RCH services

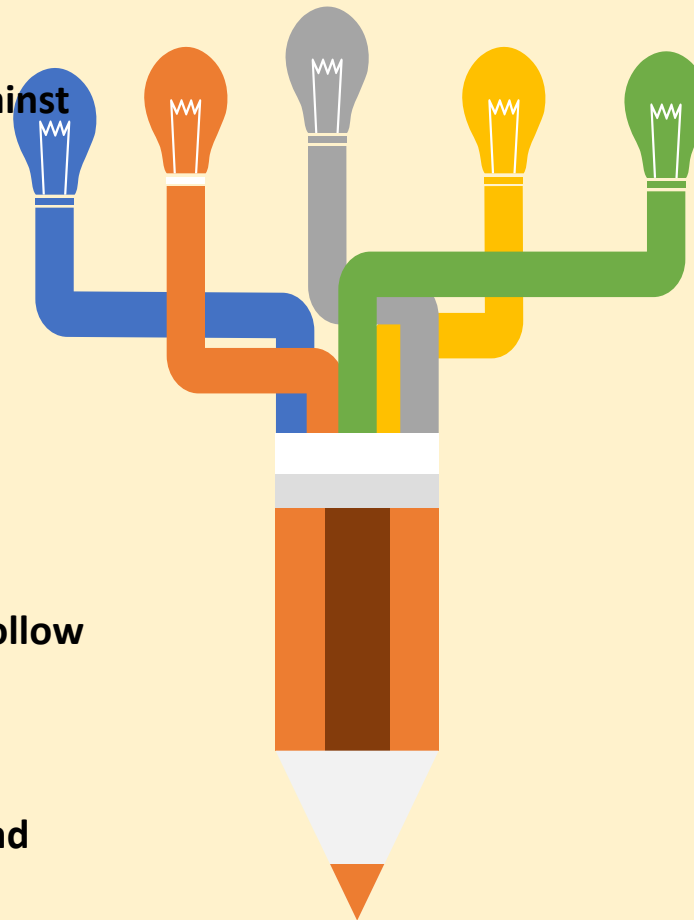
- Accurate Microplanning for Better monitoring of VHND services and supplies
- Duelist based services for follow up and Monitoring
- EDD based planning for transportation for PW
- Better HRP Management and planning

NCD

- Geography base line list of symptomatic individuals and Disease positive patients for treatment and follow up
- Early detection and management of diseases to reduce secondary and tertiary care load

Surveillance

- Plan and implement community surveillance
- Proactive information of +ve Cases to FLW for better Case Management
- Early outbreak Detection and prevention at community



Behavioral Training

- According to the report of Mera Hospital portal, the highest number of complaints were found in hospitals related to behaviour.
- The State has developed a module for Behavioural training of frontline workers working at Hospitals.
- Chief Medical Superintendents, KGMU, UPTSU, PSI-India, UNICEF provided support in preparing the module.
- 318 participants have been trained in 9 batches of TOT .
- Training has been started by 40 District hospitals.





Skilled Birth Attendant Training



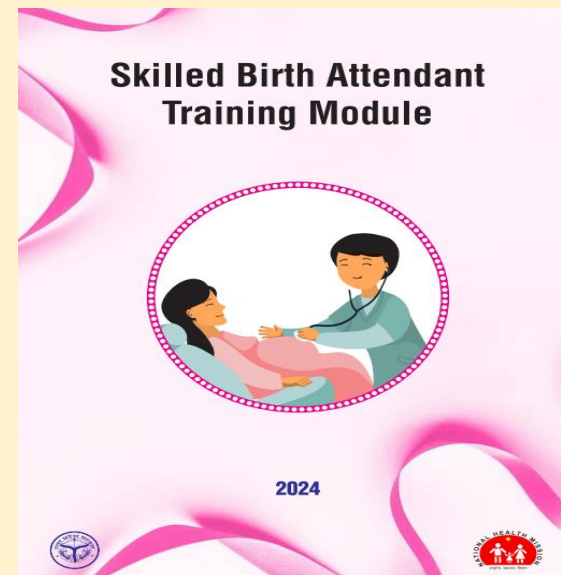
- 914 Specialists/Doctors/Nursing staff have been trained as a SBA master trainer
- 6908 SN/ANM have been trained from Nov-2022 to Oct. 2024
- Module has been revamped by SPMU NHM-UP with support from TSU, KGMU & other medical colleges and CMSs from various Hospitals.
- SBA training for Ayush – LMO to be initiated by Dec. 2024

DAKSH, DAKSHTA Training Status

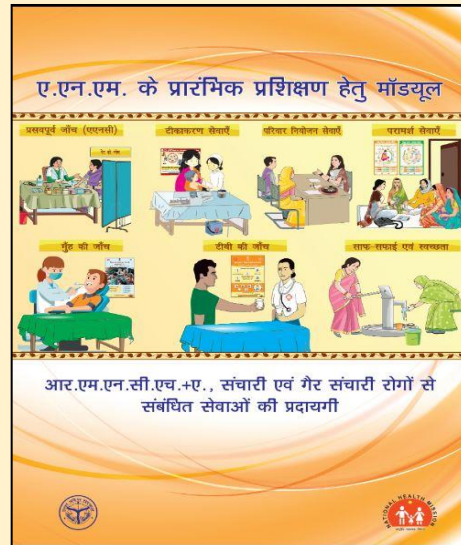
- 1344 SNs DAKSH Trained, 1096 SNs DAKSHTA trained,

Key highlights of the module:-

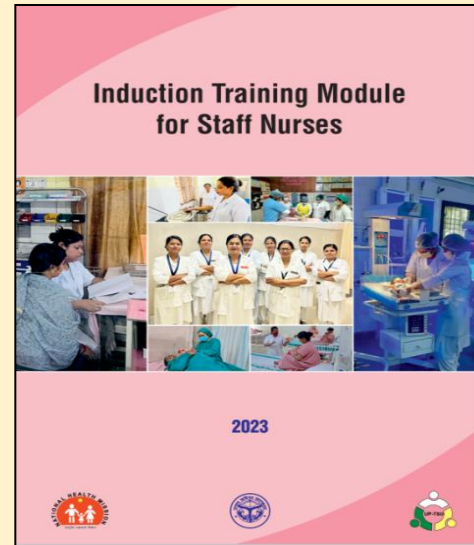
- e-Rupi voucher,
- MaNTrA integrated with CRS,
- Oral GTT
- Birth companion
- Fetal Doppler
- Detection of Birth Defects, etc.



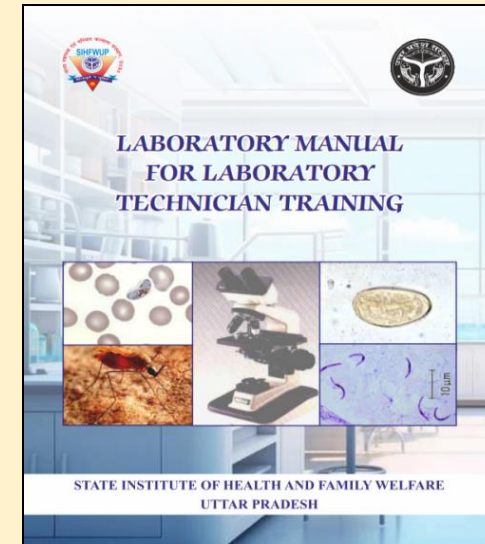
Modules developed for Induction/Foundation courses



12-day orientation training for ANMs



12-day orientation training for Staff Nurses



6-day Laboratory Technician Training

- ToT for ANM and Staff Nurses completed and district level training will start from Dec. 2024
- 1st batch of orientation training for LT completed at SIHFW.

Skills Lab, Mentoring & Training

Skills Lab

- 4 State of art Skill Labs at SIHFW, Lucknow, DCH- Noida, RHFWTC Varanasi and RHFWTC Jhansi has established and fully functional & equipped with skill stations from July, 2022.
- These skill labs are being utilized for enhancing capacity building of service provider to provide quality RMNCH+A services.
- SBA ToT, Staff Nurses ToT, Covid training, NBSU ToTs, DAKSH & DAKSHTA trainings are undergoing in these skills lab.
- 12 days Staff Nurse orientation is to be initiated in these Skills lab. ToT has been completed.

Creation of these labs, State training capacity has doubled for providing RMNCH+A related training



Technical support is being by UPTSU



U-WIN Portal

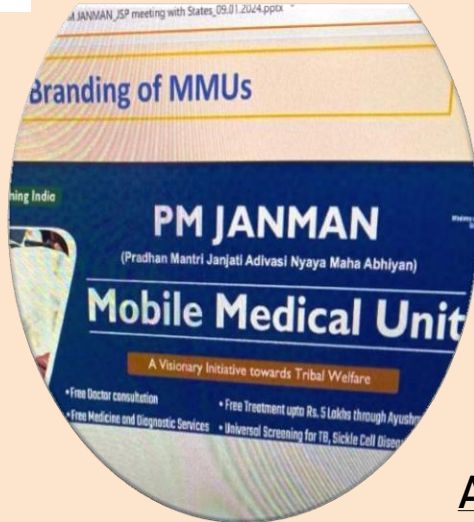
U-WIN Portal launched on 1st March 2024 in UP & sessions commenced from 13th March 2024 to facilitate efficient tracking and management of immunization activities.

- Till date total 19,22,599 sessions have been Held.
- Total 32,43,203 pregnant women have been vaccinated through Td vaccine.
- Total 1,14,19,246 children have been vaccinated aged up to 0-5 years on the portal.





Ambulance services



102 National

Ambulance Service

674 new ambulances flagged off by Honorable CM sir on 05.12.2023.

2270 ambulances operational and 9.18 crore beneficiaries availed services till date.



108 National

Ambulance Service

2200 ambulances operational & 3.36 crore beneficiaries availed services till date.



Advance life support

81 New Ambulances Flagged Off by Honl' CM sir on 05.12.2023. Presently 250 ambulances operational & 6.76 lakhs beneficiaries given Services till date.



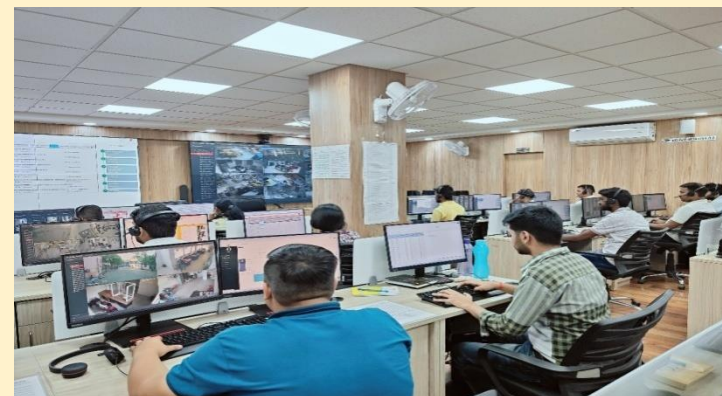
Mobile medical units

170 MMUs operational. 1.35 crore beneficiaries given OPD & 25.89 lakhs beneficiaries given Lab test services till date.

02 MMUs deployed in PVTG District Bijnor for providing healthcare to Buksa Tribals under PM-JANMAN.



Health Online Parameter Evaluation (HOPE)



Direct monitoring of 279 hospitals through 5511 CCTV from State Headquarter



Some more achievements

- **Dialysis facility in all 75 districts**
- **CT Scan Facility in all 74 district**
- **Across the State 460 Health Facilities are NQAS certified**
- **Solarization of 72 health units**
- **10,000 SHC's equipped with electricity facility in last one year**
- **352 CHC's designated as First Referral Unit (FRU)**
- **Provision of Private 'On Call' Anesthetist & Obs & Gyne for LSCS**
- **In FY 2023-24, State received the 5th installment from GOI**

- Under National Sickle Cell Anemia Elimination Mission screening & genetic card distribution to all 0-40 years targeted tribal population is being conducted in 7 identified high prevalence of the disease districts namely Bahraich, Ballia, Deoria, Lakhimpur Kheri, Kushi Nagar, Lalitpur & Sonbhadra.
- Achievement of Sickle cell is 125% against annual target of 5,01,240.
- So far 111900 genetic cards has been distributed till date.
- PM-Juga- Under Pradhan Mantri Janjatiya unnat Gram Abhiyan in the state program will cover 517 Villages in 47 Block under identified 26 district. Main activity of this abhiyan is deployment of MMU & distribution of Ayushman card to all uncovered eligible households.
- The PM Janman scheme is running in District Bijnor, where three blocks are conducting health screening, Ayushman card distribution, and sickle cell screening activities and have met their targets. There are also two MMUs deployed there for mobile health services.



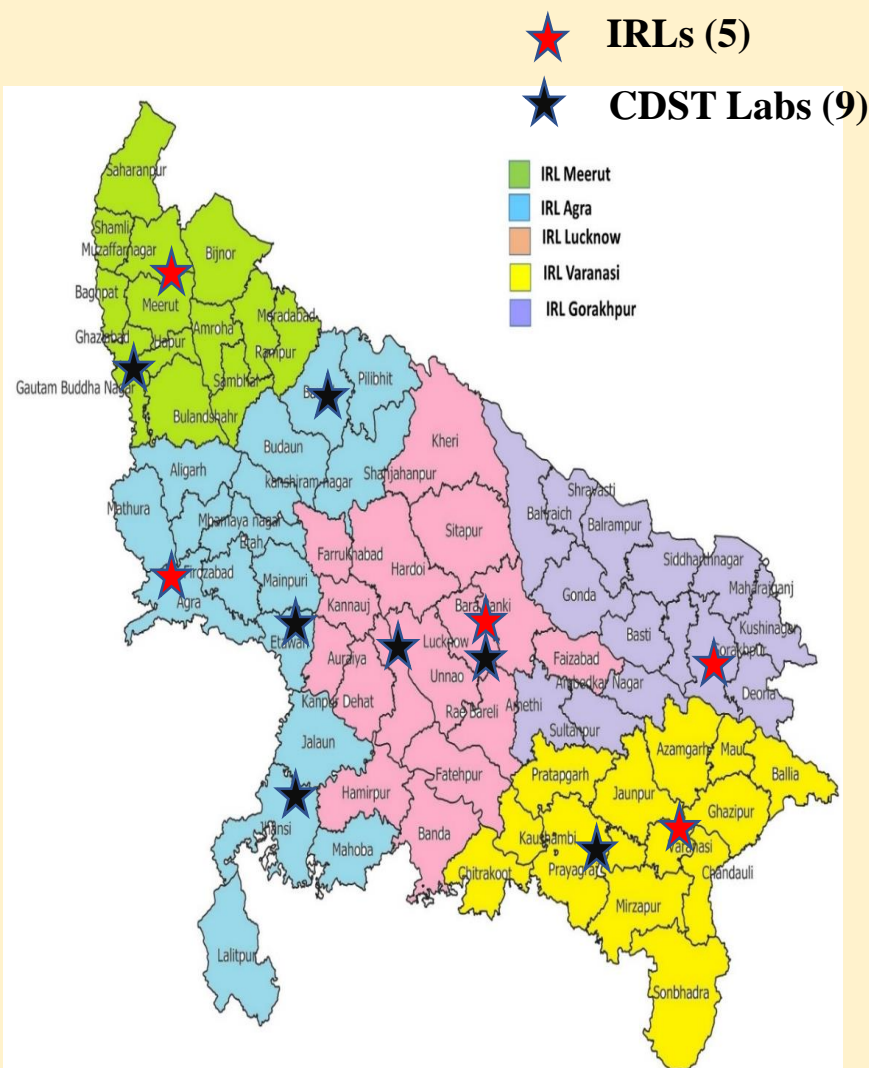
Programme Specific progress so far

- 1. National Tuberculosis Elimination Programme (NTEP)**
- 2. Human Resource**



National TB Elimination Programme

TB Diagnostic Network: Uttar Pradesh



Designated Microscopy Centres: 1856



CBNAAT sites: 169 (159-4 module; 3-8 module; 7-16 modules)



Truenat: Total-751: Duo: 459; Uno: 213 (28 and 185 from 15th FC); **Quattro: 79** (IOCL-61, CSR-5, private-4, DGME-9)

- Expansion of NAAT sites from **141 in 2017** to **920 NAAT till June 2024**
- **595/827 blocks (72%) saturated with NAAT**

NAAT

Culture DST

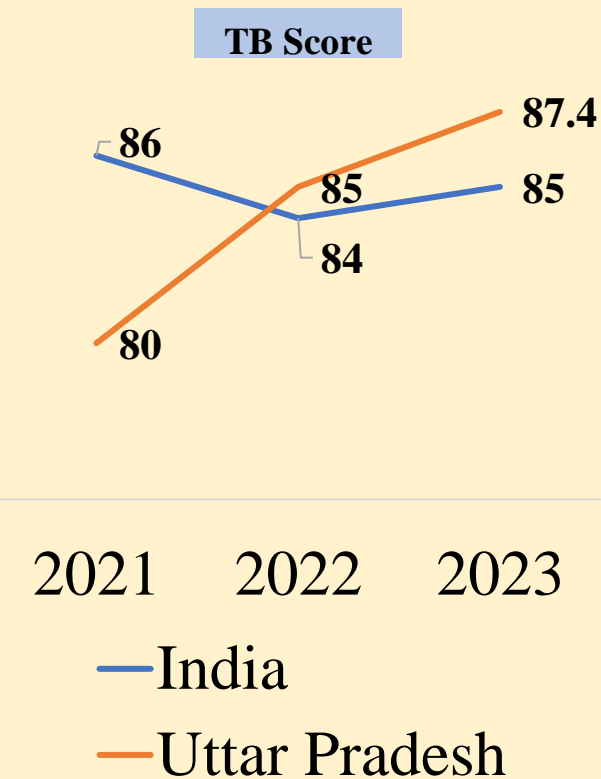
- Expansion of Culture and DST laboratories from **5 in 2017** to **14 in 2023**

- Adoption of WHO endorsed diagnostic technologies
- Deployment of additional HR and equipments as per need

Further expansion of laboratory capacity for DRTB diagnosis.

Key NTEP Indicators: TB Score

NTEP Key Indicators Status U.P					
SN	Indicator	2021	2022	2023	2024 (Jan to Oct)
1	Presumptive TB Examination Rate (Tests done on microscopy/NAAT per lakh population/year)	495	801	1298	2094 (Jan-Oct)
2	Notification Achievement against annual target	76%	95%	114%	104%
3	Success Rate of Drug Sensitive TB patients	85%	86%	91%	92%
4	Drug Resistant TB treatment initiation	72%	77%	88%	91%
5	HIV testing of all TB patients	96%	98%	97%	99%
6	Valid Rif Resistance result available (NAAT) for microbiologically confirmed	76%	75%	87%	93%
7	Expenditure in NTEP (Against FY DHAP)	51%	28%	51%	21.43%
8	Nikshay Poshan Yojana (Beneficiaries paid once)	74%	74%	82%	80%
9	TB Preventive Treatment (< 5 years old)	44%	66%	91%	91%
10	TB Preventive Treatment (People Living with HIV)	86%	84%	92%	99%



1372 Gram Panchayats have been identified as TB Free in 2023 after verification of submitted claims.

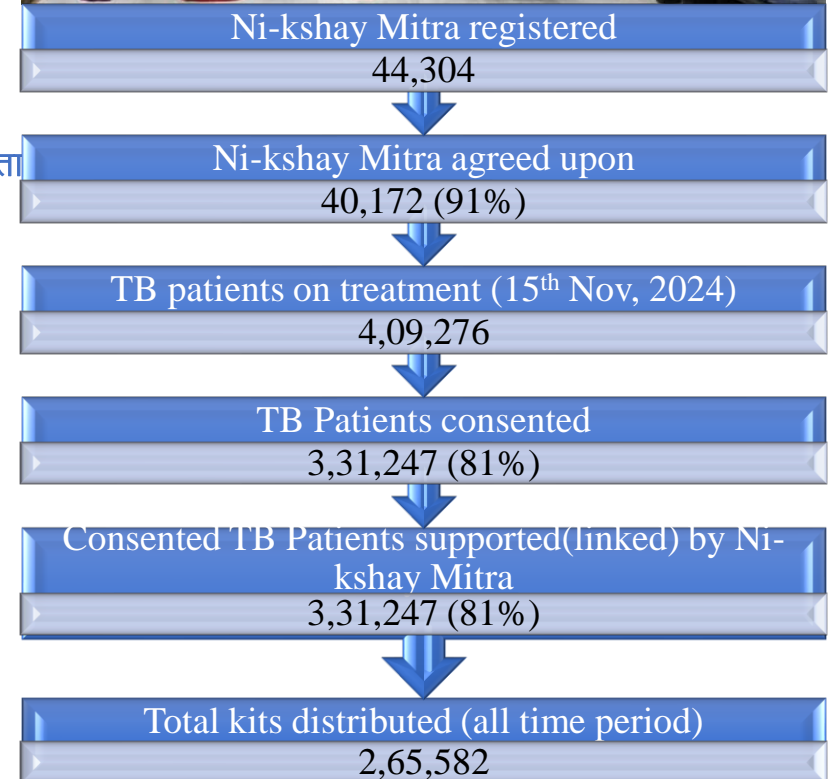
टी0बी0 रोगियों हेतु निक्षय पोषण योजना

Patients getting anti tubercular treatment on or after 1st April'18 are eligible for nutritional support @ Rs 500/- per month to be credited in their bank account through Direct Benefit Transfer (Rs. 1000/- per month 1st November 2024 onwards)

Year	Total Notified	Paid Beneficiary (Total)	₹ Paid Amount (Total) (In Cr)
2024 (As on 15 th Nov 2024)	597582	458815	116.5
2023	642269	533913	155.2
2022	536966	419660	124.0
2021	467167	352477	102.2
2020	375445	268198	75.6
2019	500447	326254	91.6
2018	416515	239079	70.6
Uttar Pradesh	3536391	2598396	735.7

टी0बी0 के मरीजों को सामुदायिक सहयोग

- माननीय राज्यपाल महोदया द्वारा शुभारम्भ
- टी0बी0 मरीजों को गोद लिया जाना—
 - Raj Bhawan (21 Patients adopted on 25th Aug'19)
 - TB Association
 - Red cross society
 - Educational institutions
 - Corporate houses
 - Social welfare organizations
- टी0बी0 मरीज को गोद लिये जाने से पूर्व उनकी सहमति एवं उनकी गोपनीयता सुनिश्चित करना।
- बाल टी0बी0 मरीजो को प्राथमिकता प्रदान करना।
- लाभ:—
 - Emotional support to the family,
 - Nutritional support,
 - Acts as a additional bridge between the system and the patient



Integration and decentralisation of TB services at Ayushman Arogya Mandir (AAM)



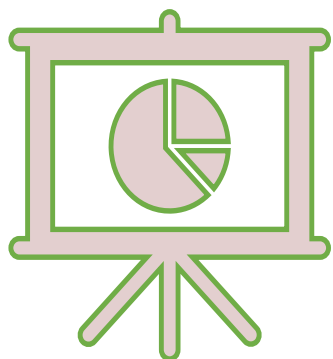
Integrated Nikshay Diwas

- Being observed at all Health Facilities for TB, Kala-azar, Filariasis, Leprosy on 15th of every month since 15 Dec 2022.
- Leveraging on digital platforms (**e-Kawach** and **Ni-kshay**) available for recording, reporting, monitoring of health service delivery and TB surveillance



Strengthening Sample Transportation system

- Sample transportation system from Ayushman Arogya Mandir (AAM) to TB Detection Centre (TDCs) through sample transporters



Outcomes in 2023

- **5.14 lakh presumptive TB** cases enrolled from AAMs and
- **27,510 cases** were diagnosed out of them.
- Decline in number of persons with TB lost during treatment follow up
- Improvement in the known HIV status, diabetes status, availability of bank account details and direct benefit transfer



Human Resource

- The **recruiting process** of approx. **10,000 vacancies** including Community Health Officer (CHO) Medical Officers (MBBS), Super Specialists/Specialists is under process.
- To reduce the shortage of Specialists, **Reverse Bidding** Model adopted and 207 Specialists have been selected so far.
- NHM, UP implemented **Group Term Life Insurance** for contractual employee, (approx. 1 Lakh) with the coverage of Rs. 30 lakh.
- The honoraria for MBBS MO has been increased from 60k to Rs. 1 Lakh/month to motivate and ensure sustainability.
- To speedup the recruitment of Medical Officer (BDS & Ayush), guideline issued to all District for initiate the recruitment of aforesaid positions at District level.



Progress on new Initiatives



Continuous Positive Airways Pressure (C-PAP)

Activity	Current Status
Continuous Positive Airways Pressure (C-PAP) introduced in SNCU's for respiratory support for neonates.	45 SNCUs are equipped with bubble CPAP. CPAP procurement for 73 facilities in process
CPAP training- 8 batches completed	191 participants from 33 facilities(Pediatrician, MO, Staff nurses) trained so far.

National Rabies Control Programme

Activity	Current Status
Budget of Rs. 435.54 lakhs for Anti Rabies Immunoglobulin under NRCP approved for the first time for procurement of Indent issued to UPMSCL for procurement.	Tender is in process at UPMSCL level.

Fetal Doppler & CTG Machines for Delivery points

Activity	Current Status
Handheld fetal Doppler facilitates intermittent monitoring of fetal heartbeats during Antenatal Checkup and in labour rooms during Delivery.	Tenders has been opened, Technical evaluation meeting has to be called
The Cardiac-toco-graph (CTG) machine provides real-time monitoring of fetal heart rate and uterine contractions and is thus helpful for uneventful labour.	Tenders has been opened, Technical evaluation meeting has to be called





Model Immunization Centres

Activity	Current Status
To establish Model Immunization Centers across all district level (One MIC at DH/DWH/DCH/State Medical colleges) and one MIC at , UPHC level	Guidelines issued and budget transferred to districts
Two UPHC MICs will be established in 13 major districts (Agra, Lucknow, G.B. Nagar, Ghaziabad, Varanasi, Kanpur Nagar, Prayagraj, Meerut, Bareilly, Moradabad, Aligarh, Gorakhpur, and Ayodhya).	Guidelines issued and budget transferred to districts
Additionally, one UPHC MIC will established in the remaining districts, except for Kanpur Dehat, Amethi, and Shravasti	Guidelines issued and budget transferred to districts



Construction work
under
PM-ABHIM Scheme



Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM)

- A total of Rs. 4892.00 Crore approved

Details of Units	Total Work	Release of Financial approvals	Work Started	Work Completed
Block Public Health Unit	515	478	458	203
District Integrated Public Health Lab	75	63	54	19
Critical Care Hospital Block	74	60	53	0
Construction of Building Less Sub Centre	1670	1670	1557	1216
Total	2334	2271	2122	1438



PM-ABHIM Scheme

- Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) Scheme was launched on October 25, 2021.
- Various construction works to strengthen health services are proposed with the help of the Central Government from the financial year 2021-22 to 2025-26.
- Approval of Rs 4892.53 crore has been received by the Government of India for the financial year 2021-22 to 2025-26.
- Presently an amount of Rs 1114.63 crore has been received against which Rs 1043.35 crore has been released, and 75.02% has been spent.
- The next installment has already been demanded from the Government of India on 17th October 2024.



Year wise details of construction work under PM-ABHIM

Unit Description	Cost per unit (in lakh)	Year wise number of works					Total work	Complete work	%
		2021-22	2022-23	2023-24	2024-25	2025-26			
Block Public Health Unit	80.96 (including equipment)	00	91	105	115	204	515	203	40%
District Integrated Public Health Lab	125.00 (including equipment)	8	15	15	15	22	75	19	25%
50 Bed Critical Care Hospital Block (District Hospital)	2375.00 (including equipment)	2	4	4	4	8	22	00	0%
50 Bed Critical Care Hospital Block (Medical College)	2375.00 (including equipment)	2	4	4	4	8	22	00	0%
100 Bed Critical Care Hospital Block (District Hospital)	4450.00 (including equipment)	3	6	6	6	9	30	00	0%
Construction of buildingless sub-centres	31.71	835	835	&	&	&	1670	1216	73%
Total		850	955	134	144	251	2334	1438	62%

- To complete the work within the time period of the plan, the works approved in the FY 2024-26 have been started.
- Geo tagged photographs are being uploaded on the PMS portal of the GOI for review of construction works.



Construction Work of Buildingless Sub-centers



- In the rural areas of the state, for every 5000 population, buildings are being constructed for sub-centres operating in rented buildings. In these sub-centres, facilities like 14 types of tests, identification of non-communicable diseases, pre-natal tests and vaccination are being provided through ANMs and community health officers.

Number of tasks allocated	Financial approval issued	Amount Released	Expenditure	Work Start	Work Complete	Land problem/unavailable
1	2	3	4	5	6	7
1670	1670	48315.59	43698.72	1554	1216	116

Construction work of Block Public Health Unit (BPHU)

- Under the PM-ABHIM scheme, construction work of a Block Public Health Unit (BPHU) is to be done in 515 development blocks of the state. In which 73 types of medical check-up facilities will be ensured. Due to which, in future, in case of an epidemic like Covid-19, testing facility will be available in every development block only. Establishment of BPHU will also help in programs like TB eradication.

Number of tasks allocated	Financial approval issued	Amount Released	Expenditure	Work Start	Work Complete	Land problem/unavailable
1	2	3	4	5	6	7
515	472	22839.18	17702.85	458	203	18



Construction work of Integrated Public Health Lab (IPHL)



- Integrated Public Health Lab (IPHL) is being established in the district level hospitals of all the districts of the state, in which the facility of 118 types of medical tests will be available. There is a provision for free testing of samples collected from Primary Health Center and Community Health Center in IPHL.

Number of tasks allocated	Financial approval issued	Amount Released	Expenditure	Work Start	Work Complete	Land problem/unavailable
1	2	3	4	5	6	7
75	63	4772.10	2942.14	54	19	10

Construction work of Critical Care Block (CCB)

- Construction of 50/100 bed Critical Care Blocks (CCBs) is to be done in district level hospitals/medical colleges in 74 districts of the state. CCB will provide the facility of treatment of serious diseases to the people at the district level itself.

Number of tasks allocated	Financial approval issued	Amount Released	Expenditure	Work Start	Work Complete	Land problem/unavailable
1	2	3	4	5	6	7
74	60	27912.21	19619.59	53	0	12



Other Initiatives



- Under the scheme, 250 urban Ayushman Arogya Mandirs are approved in rented buildings in the financial year 2024-25.
- Provision for Program Management Unit (PMU) has been made for intensive review and quality monitoring of the scheme.
- Tender for selection of PMU has been published.
- Under the PM-ABHIM scheme, most of the construction work has been started in the last 1-1.5 years and is expected to meet the timeline.





PM-ABHIM - Financial Status (Rs. in Crore)								
FY		Central Share		State Share Status			Expenditure	Expenditure in (%)
	GOI RE	Cash Grant	Released to SHS/SNA	State Share Due	Released to SHS/SNA	Total Fund Received in SNA		
1	2	3	4	5	6	7=(4+6)	8	9
FY 2021-22	413.15	124.63	124.63	83.09	83.09	207.72	847.83	76.06%
FY 2022-23	613.80	162.55	162.55	108.37	108.37	270.92		
FY 2023-24	397.46	247.96	247.96	165.31	165.31	413.27		
FY 2024-25	534.60	133.65	133.65	89.1	89.1	222.75		
Grand Total	1959.01	668.79	668.79	445.87	445.87	1114.66	847.83	



Emergency Covid Response Package-II(ECRP-II)

18-11-2024

Physical Progress of activities sanctioned under ECRP-II (FY-2021-22 To 2024-25)

Sanctioned Activities	Approved units	Land available	Completed	Under process
S.1. COVID essential Diagnostics and Drugs				
S.1.1-Provision for RAT and RT-PCR Test	20196857		Antigen-34500000 RNA-13200000 RTPCR-9000000 VTM-38450000	
S.1.2-Lab Strengthening for RT-PCR (30 BSL-Labs)	30		30	
S.1.3- Essential drugs for COVID19 management	75		75	
S.2 Ramping up Health Infrastructure with focus on Pediatrics care units				
S.2.1-Establishing dedicated Pediatrics care units- 42 Bedded , 58 units construction and Procurement of Equipment's	34 at DH And 24 at MC	18 at DH And 22 at MC	18 at DH and 12 at MC	10 at MC
S.2.1-Establishing dedicated Pediatrics care units- 32 Bedded , 40 units construction and Procurement of Equipment's	40 at DH	23 at DH	23 at DH	0
S.2.2-Establishing Pediatrics CoEs at Medical Colleges/ State Hospital/ Central Government Hospitals-	8	8	2	6
S.2.3-Establishing additional Beds by provision of Prefab Units closer to the community- 20 Bedded unit at 812 CHCs, Construction and procurement of equipment's.	812	587	585	2

Physical Progress of activities sanctioned under ECRP-II (FY-2021-22 To 2024-25)

Sanctioned Activities	Approved units	Land available	Completed	Under process
S.2.3-Establishing additional Beds by provision of Prefab Units closer to the community- 6 Bedded unit at 2651 PHCs, Construction and procurement of equipment's.	2651	2015	1953	62
S.2.4-ICU beds Augmentation in public healthcare facilities including 20% pediatric ICU beds including 23 type equipment with each ICU Bed- 5051 Beds at MCs, 1248 Beds at DH and 592 Beds at CHCs	6891	-	2401	4490
S.2.5-Field Hospitals- 50 Bedded Hospitals at 82 Sites	82	72	43	29
S.2.6-Referral transport – Activity Completed	Done		Done	
S.2.7-Support for Liquid Medical Oxygen (LMO) plant (with MGPS) including site preparedness and installation cost- 45 in MCs and 22 in DH	45 MC & 22 DH	43 MC & 21 DH	14 in MC and 15 in DH	29 in MC and 06 in DH
S.4 IT Interventions - Hospital Management Information System and Tele- Consultations				
S.4.1-Hospital Management Information System (HMIS)- 139 DH, 844 CHC, 594 UPHCs and 3056 PHCS, 02 Mental hospital (Agra Bareilly)	4635		414	4221
S.4.1-Hospital Management Information System (HMIS)- 33 MCs	33		33	0
S.4.2-Strengthening the Telemedicine/ Tele-Consultation hubs – 75 District Hubs, 750 Spokes established and 10000 Spokes strengthened	75		75	0
5. Capacity Building and Training for ECRP II Components - Pediatric Covid 19 Management Training under Process	22		0	22

Construction work for Medical Health Department under ECRP-II (FY-2021-22 to 2024-25)

Construction Status under ECRP-II for Medical Health Department										Rs. In Lakh
S. No	Units type	Units Approved by GB on Date-29.03.2022	Land Available	Work Started	Work Completed	Work In Progress	Handed Over	Work Not started	Work in Dispute	Financial progress
1	06 Bedded	2651	2015	1985	1953	28	1396	31	2	18803.55
2	20 Bedded	812	587	587	585	1	543	0	1	18204.56
3	32 Bedded	40	23	23	23	0	21	0	0	2035.82
4	42 Bedded	34	18	18	18	0	17	0	0	1903.03
5	50 Bedded Field Hospital	82	72	69	43	26	4	1	0	17382.56
Grand Total		3618	2715	2685	2622	57	2228	32	3	58329.52



Key Performance Indicators showing Good Improvement



Key Performance Indicators



Program	Indicator no	Indicator statement	Target (2024-25)	Progress
Maternal health	1	% of PW registered for ANC	94%	105.34%
Maternal health	3	Pregnant Women who received 4 or more ANC check-ups	89%	100.01%
Maternal health	39	% of P.W. given 180 IFA tablets against registered for ANC	50%	101.18%
Child Health	25	Functional NBSUs against approval at CHC/FRU level	298 NBSU's	100%
RI	35	No. of vaccinators using U-WIN for vaccination	>95%	99.19%
RKSK	57	% of the selected Districts implementing Ayushman Bharat School Health & Wellness Program against the RoP approval.	100%	100%
NVHCP	83	% of Hepatitis B Patients benefited i.e number who received treatment against target.	100% (2000)	119.3% (2386)
Procurement	171	% of Equipment Covered under Comprehensive Maintenance Contract/ Annual Maintenance Contract/ BMMP	100%	100%
NMHP	108	% of districts covered DMH Units operationalized	75	100%



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Program	Indicator no	Indicator statement	Target (2024-25)	Progress
NOHP	130	% of PHFs providing dental care services upto CHC level against total PHF's upto CHC level (DH/SDH/CHC)	75 District hospitals	100% (75 District hospitals)
NUHM	134	No. of operational urban health facilities (UCHC & UPHC)	UCHC-13 UPHC-722	UCHC:100% Operational UPHC:97%
NUHM	135	No. of UPHCs converted to Ayushman Arogya Mandir	100% (722/722)	97% (701/722)
Blood services	147	% of District Hospitals having functional Blood Bank	100%	98.6% (74/75 DH)
Ayush	168	No. of Public Health Facility with co located Ayush OPD Services	1500	1500 (100%)

[Other Good performing indicator](#)



Issues related to ROP approvals



D.O. letters shared with Gol



S.N	Program	Subject	Related Issue	Date
1	NP-NCD	Advance Pulmonary failure & Lung Transplant Unit, KGMU	One time establishment cost of advance Pulmonary failure & Lung Transplant Unit, KGMU – Rs. 122.30 Cr	11.07.2024 (SPIP)
2	PM-ABHIM	12 Critical Care Blocks to 6 Districts	Reallocation of critical care blocks from 12 districts(with space constraint) to 6 other Districts	09.09.2024
3	MIS	104 Health Helpline	Approval sought of Rs. 756.00 Lakhs for 104 Health Helpline for FY 2024-26.	29.08.2024
4	IEC	IEC activities	Approval sought for IEC activities of Rs.9060.91 lakhs for FY 2024-25 and Rs.12653.48 lakhs for FY 2025-26.	11.07.2024 (SPIP)
5	XV-FC	Approval for F.Y. 2022 to 2025	Release of next Tranche for F.Y. 2022-23, 2023-24 & 2024-25 under XV-FC	04.07.2024
6	NUHM	80 New U-AAMs HR honoraria, PBI and TBI	Approval sought for Rs.1644.63 lakhs for 80 new U-AAMs for FY 2024-25 and Rs.3091.52 lakhs for 147 U- AAMs for FY 2025-26	22.05.2024
7	NVBDCP	Release of central share of Rs. 435.36 Lakhs	Rs. 435.36 Lakhs for 1817 petitioners (MPW) to ensure compliance of order dated 20.03.2024 of Hon'ble High Court.	05.07.2024
8	EMTS	Approval for 44 additional MMUs	Budget for 170 MMU received in place of 214. App. for remaining 44 MMU's, required for F.Y.2024-25 of Rs 2101.93 lakh & for F.Y. 2025-26 of Rs 2238.55 lakh.	11.07.2024 (SPIP)
9	Family Planning	ASHA incentive for Nayi Pahal Kit	Budget required for ASHA incentive for 12,56,836 Nayi Pahal Kit @ Rs 100 per Kit/ ASHA. No. of kits to be 12,56,836 instead of 718192. No additional funds required.	11.07.2024 (SPIP)

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b	Program	Subject	Related Issue	Date
10	Maternal Health	Budget for Abdomino Pelvic USG Level 1 Course	Budget required for training Rs.320.19 lakh. Approval received is Rs. 12.00 lakh. Remaining budget of Rs. 308.19 Lakhs for 2024-25 and Rs. 308.19 Lakhs for 2025-26 is required.	11.07.2024 (SPIP)
11	Maternal Health	Additional budget for snacks for PW on PMSMA day required	Additional Budget for snacks for PW on PMSMA day of Rs. 2520 .00 Lakhs for F.Y. 2024-25 and Rs. 3,420.00 lakhs for F.Y. 2025-26 is required.	11.07.2024 (SPIP)
12	Maternal Health	Honoraria of midwifery educators	Honoraria of midwifery educators not approved Rs. 54.50 lakh for F.Y. 2024-25 and Rs. 56.76 lakh for F.Y. 2025-26 is required.	11.07.2024 (SPIP)
13	Community Process	ASHA incentive	Increase in Routine & Recurring Incentive of ASHA's from Rs. 2000.00 to Rs. 3000.00 / Month	27-09-2023 08-02-2024
14	Construction	SSPG Varanasi	Construction of 500 Bed Multi Speciality Hospital, SSPG, Varanasi	30-09-2024 24-08-2024
15	NPCDCS	Digital Mammography Machine	Procurement of Digital Mammography Machine for 18 Divisional Hospitals (Rate difference of Manual /Digital machine)	11.07.2024 (SPIP)
16	Training	Behavioural Training of Hospital Staff	Activity approved but due to calculation error the budget availability is only 50% for conducting of this training	11.07.2024 (SPIP)



**Identified Key Performance Indicators
need to be relooked**



List of Indicators



SI No.	Indicator or No.	Indicator Statement	Indicator
1	1	ANC Coverage	Percentage of PW registered for ANC
2	8	Public Health facilities notified under SUMAN	Percentage of public health facilities notified under SUMAN against target
3	40	IFA coverage Anaemia Mukht Bharat	Percentage of children 6-59 months given 8-10 doses of IFA syrup every month.
4	17	Roll out of HBYC visits in all districts	Percentage of District Roll out HBYC visits against RoP approval with trained ASHAs
5	25	NBSU Functionality	Functional (including online reporting) Newborn Stabilization Units (NBSUs) against approval at CHC/FRU level.
6	27	ORS and Zinc Coverage	Under 5 Children received ORS and Zinc against Under 5 Children identified with Diarrhoea during the IDCF Campaign.
7	37	Bed Occupancy Rate at Nutrition Rehabilitation Centre (NRC)	Bed Occupancy Rate at Nutrition Rehabilitation Centers (NRCs)
8	21	Functional DEICs	Percentage of DEIC functional with infrastructure, Essential equipment and HR as per guidelines against ROP approval.



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SI No.	Indicator or No.	Indicator Statement	Indicator
9	24	Secondary/ Tertiary management of Conditions specified under RBSK	Number of beneficiaries received Secondary/ Tertiary management against ROP approval (For surgical intervention specified under RBSK)
10	31	Dropout % of children	Percentage drop out of children from Pentavalent 3 to MR 1
11	32	Dropout % of children	Percentage drop out of children from MR 1 to MR 2
12	51	Client load at AFHC	Average monthly Client load at AFHC/month in PE Districts at DH/SDH /CHC level to increase by 25% in 2022-23 and 50% in 2023-24 From the baseline data of 2021-22.
13	53	WIFS coverage	Percentage coverage of out- of-school (girls) under WIFS Program every month.
14	57	Ayushman Bharat School Health & Wellness Program implementation	Percentage of the selected Districts implementing Ayushman Bharat School Health & Wellness Program against the RoP approval.



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Sl No.	Indicator No.	Indicator Statement	Indicator
15	43	MO Training	Medical Officer trained in CAC against the RoP approval
16	49	Number of Nayi Pahel Kits (NPK) distributed per ASHA	Numerator: No of NPKs distributed Denominator: No. of ASHAs Source: MPV Quarterly Report Remark: This deliverable is applicable only to 13 MPV States and few other states.
17	50	Number of SAS Bahu Sammelan Conducted	No. of SBS Conducted Source: MPV Quarterly Report Remark: This deliverable is applicable only to 13 MPV States and few other states.
18	65	Service Delivery Coverage of Implementation of RCH application	Percentage of Service Delivery Coverage of entitled Child [0-1 Year] for Immunization services.
19	68	Weekly reporting-S form	% of reporting Units reported in S form
20	76	Districts with TB Free Status	No. of districts to achieve TB Free Status # Bronze # Silver # Gold#TB Free District/City
21	92	Malaria	%IRS population coverage in round 1
22	93	Reduction in API at District	%IRS population coverage in round 2
23	94	level	No. of Districts Certified as Malaria Free
24	99	Lymphatic Filariasis	Cumulative number of districts to achieve Disease Free Status- LF as per TAS 3 Clearance



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Sl No.	Indicator No.	Indicator Statement	Indicator
25	101	Kala-azar	Number of blocks achieved Kala-azar elimination i.e. <1 case per 10000 population at block level
26	102		
27	104		Number of blocks sustained Kala-azar elimination
28	105		% Complete treatment of KA Cases and HIV/VL
29	60	Monitoring of salt & urine in the State/UT	% Complete treatment of PKDL Cases
30	61	Monitoring of salt & urine in the State/UT	Percentage of salt samples tested using Salt Testing Kits (Qualitative testing) by ASHA in identified District.
31	125	Improvement in sample testing in fluoride affected districts	Percentage of salt samples tested (Quantitative) in Lab (Volumetric method) for estimation of iodine content.
32	126	Medical management of diagnosed fluorosis cases including supplementation, surgery, and rehabilitation.	Percentage of water samples tested for Fluoride level against number of samples as per norms.
33	127	Hearing Aid	Percentage of patients provided medical management to diagnosed fluorosis cases out of the total diagnosed cases.
34	159	Adoption of SASHAKT & Training of AAM primary health care teams on expanded service packages	Number of people with hearing problems rehabilitated.
35	166	Functioning g of VHSNC (in rural areas)	<u>Numerator:</u> No of ABHA verified primary health care team members (ASHA, MPW, CHO, SN and MO) registered in SASHAKT portal <u>Denominator:</u> Total number of in position primary healthcare team members (ASHA, MPW, CHO, SN and MO) in State/UT
			Numerator: Number of VHSNCs that conducted at least 10 meetings in the year (against the norm of minimum one meeting every month) Denominator: Total VHSNCs formed

National Quality Assurance Standards (NQAS)

460 Public health facilities NQAS certified.

- DH - 63
- CHC - 54
- PHC- 22
- UPHC - 05
- AAM(SC)- 316



NQAS certification

Level of Health Facilities	Total No. of facilities	Target by Dec,2025 (50%)	NQAS Certified as on 14.11.2024		
			State certified	Nationally certified	Total certified
DH	118	59	34	63	97
CHC	971	486	46	54	100
PHC	3048	1524	2	22	24
UPHC	722	361	5	5	10
AAM-SCs	17478	8739	1542	316	1858
Total	22327	11169	1629	460	2089

Status of Quality Programme in the district

Status	Agra	Kushinagar
1. NQAS certification (state +National)	08	21
2. LaQshya (State/National)	01	03
3. MusQan (State/National)	01	01
4. NQAS Certification in Aspirational Block	0	02
5. District level sanctioned Vs Available HR	1	1
	<p>NQAS certified facilities in Agra-2</p> <p>1. DWH Agra</p> <p><u>Block Baroli Ahir</u></p> <p>2. AAM Digner</p> <p>LaQshya certified facilities in Agra-1</p> <p>1. DWH Agra</p>	<p>NQAS certified facilities in Kushinagar- 04</p> <p><u>Block- Vishnupura</u></p> <p>1. AAM Dandopur</p> <p>2. AAM Balkudia</p> <p><u>Block Padrauna</u></p> <p>3. UPHC- AAM Gaytrinagar</p> <p><u>Block Kasiya</u></p> <p>4. AAM Chakdeiya</p> <p>LaQshya certified facilities in Kushinagar-0</p>

Strengthening security system in health facilities through deployment of security guards.

Aim & Background

- To provide secure environment to health care providers and the patients and their attendants the state decided to deploy security guards in health facilities (All District level hospitals & FRU CHCs)
- In order to make the security system more robust and credible the state took a policy decision to deploy security through Uttar Pradesh Poorva Sainik Kalyan Nigam Limited (UPPSKNL).
- The State sent a new guidelines on 30.07.24 for deployment of security guards through UPPSKNL in all District level hospitals & FRU CHCs.

Current Status

1. Total Security guards deployed through UPPSKNL- 1180 and Gem Portal- 1683
2. Total Security guards deployed through UPPSKNL in district Kushinagar- 25
3. Total Security guards deployed through UPPSKNL in Agra- 20.

14th & 15th CRM Key Observation, Action Taken & Way forward by GoUP

S.No	Key Observation	Action Taken & Way forward
1	Initiate steps to reduce OOPE by ensuring availability of essential medicines, diagnostics and services	<ul style="list-style-type: none"> • CHOs and ANMs are providing primary health care at AAMs. • 84 Drugs and 14 Diagnosis services is being provided at AAM-SHC, • CHOs are conducting eSanjeevani (tele consultation) at SHC-AAM to reduce OOPE
2	Strengthen comprehensive primary care by operationalizing 12 packages of services at Health and Wellness Centre	<ul style="list-style-type: none"> • Training on various packages of services under primary care is already rolled out in the state. Training of CHOs, SN & MO on extended package is 70% and it will be completed in FY 24-25. • ToT for ANM & ASHA is completed at State Level and batches started at RHFWTC for further training. Total 10 batches has been completed and 253 block level trainers have been trained. • Presently 14,411 AAMs (67%) are providing 12 package services.

S.No.	Key Observation	Action Taken & Way forward
3	Strengthen child health services with a focus on the establishment of DEIC and NRC	At present 7 DEICs are functional and rest approved DEICs are in the process of establishment.
4	Operationalize comprehensive emergency care services for medical, surgical and trauma linked with a robust ambulance service and responsive call centre	<p>For emergency medical transport, call centers 102, ALS and 108 East Cluster have been established in Lucknow and for 108 West Cluster in Agra. As per the provisions contained in Government Order-1264 dated 14.06.2017, the officer/employee posted in emergency in each medical unit has been made the nodal for ambulance transport. Ambulance is assigned for emergency service by calling on toll free number 108/102 and for ALS service by calling on 108/0522-2466510.</p> <p>In referral Cases, after consultation with the doctor available at call center 108/0522-2466510, the patient is referred to the appropriate referral unit.</p>
5	Strengthen accountability processes for community action for health at VHSNC level	<ul style="list-style-type: none"> • There are 76768 VHSNCs constituted in the Stat. • For strengthening accountability 6 elected members excluding Pradhan of Gram Panchayat are the members of VHSNC. • VHSNC members are being trained in phase manner. • JAS has been constituted in all SHC-AAM and regular meeting are being held and members are also being orientated.

S.No.	Key Observation	Action Taken & Way forward
6	Initiate steps to address the human resource shortage in the state by prioritizing filling of regular vacant posts.	<ol style="list-style-type: none"> 1. As per the process established by the state, districts have initiated walk-in selections throughout the year to fill Medical Officer Vacancies (MO - MBBS, BDS, AYUSH). 2. The reverse bidding process has been initiated for the selection of specialists to fill vacant specialist positions at state level 3. To fill the gaps at district across different cadres, bulk hiring of CHOs, Staff Nurses, Pharmacists, and Lab Technicians has been initiated and some of them are completed as well by State. 4. The recruitment of Consultants and GM/DGMs at the state level has been initiated.
7	Initiate steps to implement Public Health Management Cadre	Not related to NHM
8	Take necessary steps to strengthen IDSP and other programmes for disease control	RRT has been made in all districts at district and block level; regular monitoring of outbreaks and disease cases from state and district continued, media alerts are verified and necessary action are taken, regularly.
9	COVID-19 Har Ghar Dastak campaign has not yet been initiated in either of the districts which needs to be taken into consideration.	

S. No.	15 th CRM Observation Points	Action Taken & Way forward
1	The planning division or any other assigned division needs to priorities identifying gaps against IPHS at public health facilities to achieve the target of 50% IPHS compliance by 2025-26.	<p>Under DHS Programme- HR (Specialists and EMO) gap analysis has been done and positions allocate to concerning District Hospitals, As per gap analysis HR recruitment is under process via State and Concerning District. Beside procurement of Equipment is also under process.</p> <p>ODK Tool–23842 (78%) facilities assessed against 30451, 668 (2.80%) facilities with IPHS Compliance against 23842.</p>
2	A systematic plan for infrastructure upgradation and sanctioning of HR in line with IPHS norms is to be prioritised.	Under DHS Programme- HR (Specialists and EMO) gap analysis has been done and positions allocate to concerning District Hospitals, As per gap analysis HR recruitment is under process via State and Concerning District. Beside procurement of Equipment is also under process.
3	The huge existing vacancies under programme management, specialists, GDMOs, staff nurses and other cadres need to be filled on priority.	<ol style="list-style-type: none"> 1. Districts are conducting walk-in selections for MO (MBBS, BDS, AYUSH) throughout the year to fill Medical Officer vacancies. 2. The reverse bidding process has been initiated for the selection of specialists to fill vacant specialist positions at state level. 3. Results for the appointment of over 17,000 vacancies for Staff Nurse, ANM, Lab Technician (LT), and Pharmacist have been declared, and the selected candidates are now onboard. 4. The recruitment process for over 7,000 CHOs is under process, applications have been invited. The process will be completed soon to fill the vacancies. 5. Rationalization of staff across different cadres is in progress. Based on this rationalization, the gaps will be identified, and recruitment will be carried out accordingly. 6. Recruitment for consultants, GM/DGM, Hospital Managers are under process through State.

S. No.	15 th CRM Observation Points	Action Taken & Way forward
4	There is a need to integrate the functionality of various programmes under DGHS and NHM with the technical aspects of implementation, and monitoring of these programmes may be the responsibility of DGHS.	Under M&E division, SS visit planned in every year with coordination with DG FW & DG MH. In CRM visit nominated persons from both directorates are involved. Data Audit visit held in previous years with the support from both directorate. For monitoring & review UP uses UP Health Dashboard & DHS Ranking.
5	Expand DNB courses and B.Sc. nursing courses.	Expanded DNB course in 2023-24 in total 20 different hospitals of 15 different districts, resulting accredited total 66 seats. In FY 2024-25 applied in total 21 applications. In that 6 new districts and 11 hospitals are newly added.
6	Need to establish SHSRC as an autonomous support under NHM.	<p>The Health department of Uttar Pradesh is supported by 3 DGs:- DG Health, DG family planning and DG training.</p> <p>Apart from this, there are many units/org. to provide technical support to Health department of GoUP :</p> <ul style="list-style-type: none"> ▪UP- TSU ▪PMU-ARC in NHM ▪More than 35 Health partners including WHO, Unicef, Jhpiego etc. <p>Therefore , a separate body as SHSRC is not needed in the State.</p>
7	Initiate induction training for all cadres and also the orientation of district supervisory staff on monitoring and mentoring parameters of various programmes.	<ul style="list-style-type: none"> • State has developed induction/orientation training modules for newly joined ANMs, Staff Nurses and Lab Technicians. • 1921 ANMs has been trained in 12 days orientation training in FY 2022-23 • ToT for Staff Nurses completed and district level 12 days orientation training will start from Dec. 2024 • 1st batch of orientation training for LT completed at SIHFW.

S. No.	15 th CRM Observation Points	Action Taken & Way forward
8	The State has already developed an assured career path for GDMOs and specialists. Similarly, recommendations of Gol to establish a Public Health Management Cadre with management and public health professionals are also to be introduced.	<ul style="list-style-type: none"> To strengthen public health management, the State has already introduced and implemented the reverse bidding module for the specialist cadre. To retain MOs (MBBS, BDS, AYUSH), the state has delegated the responsibility of conducting walk-in selections to the districts.
9	Need to expedite the implementation and utilisation of funds sanctioned under PMABHIM and XVFC with a time-bound action plan.	<p>PM-ABHIM Scheme</p> <ul style="list-style-type: none"> Approval of Rs 4892.53 crore has been received by the Government of India for the financial year 2021-22 to 2025-26. Presently an amount of Rs 1114.63 crore has been received against which an amount of Rs 1043.35 crore (93.60%) has been released, against which 75.02 % has been spent. The state has already demanded for 2nd installment of FY 2024-25 on 17th Oct 2024. To complete the work within the time period of the plan, the works approved in the FY 2024-26 have been started. Geo tagged photographs are being uploaded on the PMS portal of the GOI for review of construction works. Under the scheme, 250 urban Ayushman Arogya Mandir's are approved in rented buildings in the financial year 2024-25. Provision for Program Management Unit (PMU) has been made for intensive review and quality monitoring of the scheme. Tender for selection of PMU has been published. Under the PM-ABHIM scheme, most of the construction work has been started in the last 1-1.5 years and is expected to meet the timeline. <p><u>XVFC Scheme</u></p> <ul style="list-style-type: none"> State has received 1829.09 Crore for FY 2021-22 . State has fulfilled all conditionalities for the next tranche and has already sent a demand for installment on 26.10.2023. The next installment is still awaited from Gol.

S. No.	15 th CRM Observation Points	Action Taken & Way forward
10	Gaps regarding the availability of medicines and in-house diagnostics are to be filled on priority by strengthening supply chain management.	Procurement of drugs and reagents is done by UPMSCSL which further uploads the list of items on DVDMS portal. Health facilities from SC-AAM to District Hospitals raise their indent through the portal via passbook system as per their EDL and collect their indents from District Drug warehouses.
11	Need to integrate the functionality of CHOS and ANMs, which are presently working in their own vehicles.	<ul style="list-style-type: none"> • They all are registered on E-Kavach portal, training has been given for the same. The CHOs & ANM are getting PBI/TBI through E-Kavach for the 15 identified indicators. • CHOs are supervising the VHSND sessions. • CHOs are organizing AAA meeting at AAMs. • CHOs, ANM, ASHA & ASHA Sangini are conducting wellness activity together at AAMs. • Block MOICs are calling joint review meetings once in a month.
12	Various modules and packages of services under primary care are to be rolled out along with population-based screening by CHOs in a systemic and time-bound manner.	<ul style="list-style-type: none"> • Training on various packages of services under primary care is already rolled out in the state. Training of CHOs, SN & MO on extended package is 70% and it will be completed in FY 24-25. • ToT for ANM & ASHA is completed at State Level and batches started at RHFWTC for further training. Total 10 batches has been completed and 253 block level trainers have been trained. • Population enumeration has been completed on e-Kavach and CHOs are conducting NCD screening on e-Kavach, so far 104.54 Lakhs 30+ population has been screened for DM & Hypertension.
13	Leveraging the AYUSH services available in the state for a holistic treatment of patients.	AYUSH OPD conducted at collocated AYUSH facilities on daily basis, prescribing medicine and referring for higher diagnostic if required.

S. No.	15 th CRM Observation Points	Action Taken & Way forward
14	A single call centre number should be in place instead of the currently functional 3 toll-free numbers, i.e. 112, 102 and 108.	Presently, 102, 108 and 112 are Toll Free Number for ambulance services and call centers. As per the contract, the calls received for ambulance service on 112 is transferred to 108/102 as per the requirement.
15	Expand the team of quality assessors, ensure the formation of quality teams at all the facilities, particularly DH, and assess the gaps under NQAS to expedite the certification process.	<ul style="list-style-type: none"> - To expand the pool of assessors a TOT to train internal assessor in districts was organized on 17-18 October 2023 at the state level in which 55 participants were trained. - Further an internal assessor training was organized in 02 batches from 11-14 November 2024 in which 30 participants were trained. - Letter has been sent to all districts for formation of quality team at each facility with regular quarterly internal assessment and closure of gaps.
16	Expand the PMNDP programme to all the districts.	75 units in 74 districts of UP are functional under PMNDP
17	Screening by the RBSK team, capacity building of labour room staff for at-birth screening and functionality of DEICs are to be ensured on priority.	<ul style="list-style-type: none"> • All the existing RBSK Teams have been trained for screening for 4Ds • TOT birth defects screening for delivery point staff organized at state level followed by training of delivery staff (L2 and L3) at district level. <p>At present 7 DEICs are functional and rest approved DEICs are in the process of establishment.</p>

S. No.	15 th CRM Observation Points	Action Taken & Way forward
18	Quality of ANC, PNC, linking HRP with assured delivery care, capacity building of ANMs on abdominal examination, filling of MCP card, testing for hemoglobin and other quality parameters needs more focus.	<ul style="list-style-type: none"> • To ensure quality ANC training is being imparted to ANMs. ANM module is developed to train newly joined ANMs. • Under PMSMA ANC is done by either MBBS Doctor or specialist and HRP are diagnosed and counseling for delivery at FRUS is done. • Guideline regarding HRP has been sent to districts. • ANMs are instructed to put stamp of HRP on MCP card and to refer such cases to FRUs for further management. • Ambulance staff is directed to drop PW with HRP stamped on MCP card directly to the FRUs. • Hb and other investigations are done at VHSND. • Regarding HRP detection and management reviews with districts is done time to time. <p>Continuous follow up by the State regarding monthly and quarterly performance of District via letters and by conducting meetings (both virtual and physical).</p>

S. No.	15 th CRM Observation Points	Action Taken & Way forward
19	The state has a high prevalence rate for TB with low coverage, so there is a need to expand sputum microscopy centres and improve the TB detection rate.	<p>The TB Detection Centres (erstwhile Designated Microscopy Centres); are being expanded in UP</p> <ul style="list-style-type: none"> DMCs 2060 (2022) has increased to 2174 TDCs (Oct 2024) NAAT machines 656 (2022) has increased to 926, covering 72% Blocks (oct 2024), <u>increased by 41%</u> <p>This expansion has led to</p> <ul style="list-style-type: none"> Increased Presumptive TB Examination Rate: 801 (2022) to 2094 (oct 2024) per lac population per year, <u>increased by 161%</u> Notification increased from 5.22 lac (2022) to 5.63 lac (2024 Oct) or annualized 6.75 lac for 2024, <u>increased by 29%</u> <p>Efforts made:</p> <ul style="list-style-type: none"> sample transportation from AAMs to TDCs through a volunteer Sample Transporters increased from 0 (2022) to 2406 (2024 Oct) encouraging upfront NAAT for all presumptive by making efforts to saturate all blocks with a NAAT machine <p>Future efforts:</p> <ul style="list-style-type: none"> ensure 100% block saturation with NAAT machines by IOCL(CSR) and PM-ABHIM by 2025 local procurement of consumables CBNAAT cartridges 5 lac and MTB chips 10 lac in FY 24-25
20	IDSP reporting through Form P, L and S are sub-optimal and needs further improvement.	After successful linkage of UDSP data with IHIP, reporting is increasing gradually; Review and rectification of RUs going on.



Thanks