



Draft Format

District Family Planning Plan



District:
KALAHANDI

2012-13

District Family Welfare Bureau
Zilla Swasthya Samiti

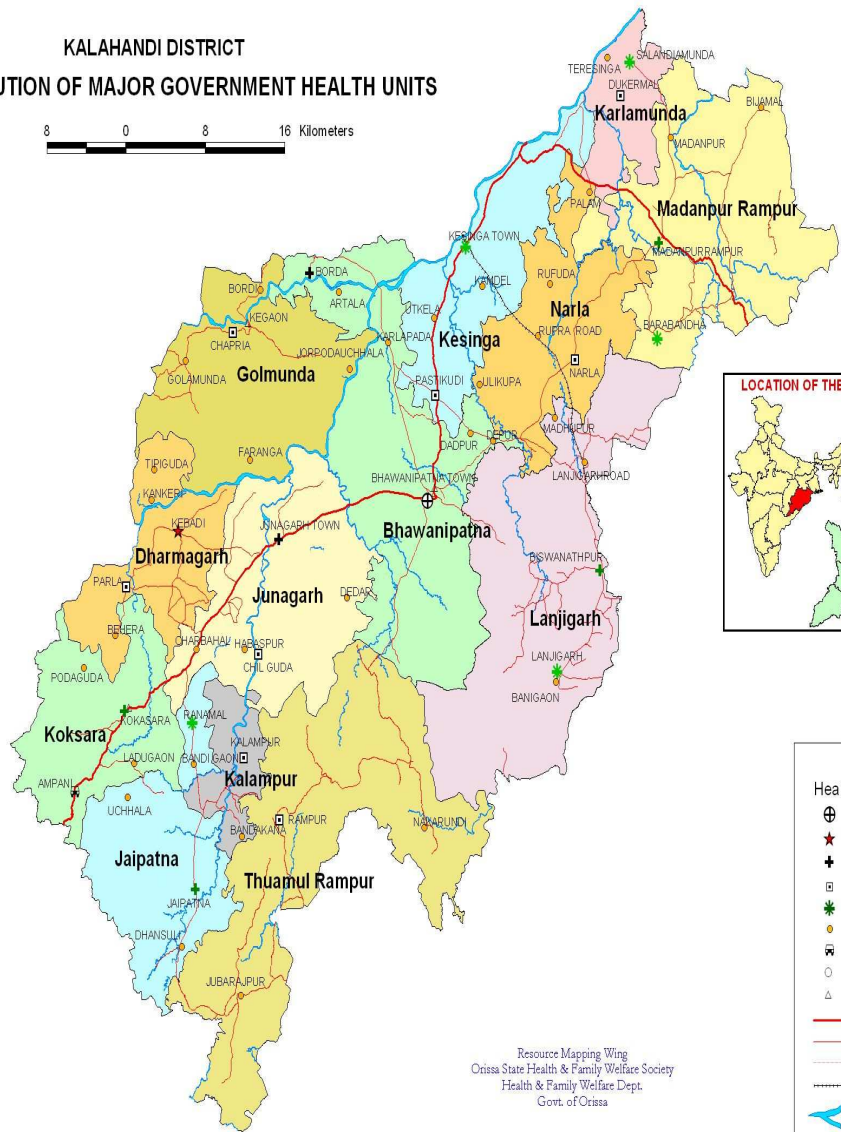


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**KALAHANDI DISTRICT
DISTRIBUTION OF MAJOR GOVERNMENT HEALTH UNITS**

8 0 8 16 Kilometers



LEGEND

Health Unit Category

- ⊕ District Headquarter Hospital
- ★ Sub Division Hospital
- + Community Health Centre
- Primary Health Centre
- ★ Area Hospital
- PHC(NEW)/ Single Doctor PHC
- ⊞ Mobile Health Unit
- Sub Centre
- △ Other Health Units

— National Highway

— Major Roads

— Other Roads

— Railway

— Rivers/ water bodies

Resource Mapping Wing
Orissa State Health & Family Welfare Society
Health & Family Welfare Dept.
Govt. of Orissa

Executive Summary:

Geographical Location:

The district located between 19 *degree 3'N and 21 degree 5'N latitude* and **82 degree 30E and 83 degree 74'E longitude** and It is bounded in the North by the District of Nawarangpur and Raipur (Chhatisgarh) and on the East by the District of Rayagada and Boudh. It extends over an area of 8,36,489 Sq.KMs. The District Headquarters is at Bhawanipatna town which stands almost to the Eastern border having **241** nos. of SC, **43** nos. of PHC, **16** nos. of CHCs, **one** DHH, **one** SDH and **two** other system of institutions. The unmet need for the family planning services as per DLHS-III total, spacing (**14.2**) and limiting (**20.7**).

Presently the district provides the family planning services in 3 of FDS sites and the camps contribute to 79 % of the ELA in the last year 2011-12 till (31.06.2012). Out of this lap. (Zero) minilap (89%) male sterilization (3%) and PP sterilization accounts for 26% .The number of empanelled surgeons for sterilization operation as on 1st April 2012 is Lap. (one) minilap (22) NSV (6), CV (8) .Out of the empanelled surgeons 6 no. are O&G specialists. The number of accredited institutions is Nil and their performances during the year 2011-12 is also Nil.

The ratio of sterilization operation per surgeon remains at Lap (0) minilap (236) NSV/CV (29) during 2011-12. Out of them the ratio for O&G specialists (6) the trained personnel for providing IUCD are MO (12) Staff Nurse (14) and ANM (14) and LHV (6).

The main constraints in achieving the ELA and progress in Family Planning programme are :

- ❖ MO I/C are not monitoring and evaluating the performances of individual field level staffs.
- ❖ Due to lack of supervision & Monitoring activities from State and District to the Block CHC/PHCs.
- ❖ After repeated instruction from the district authorities, some of the Empanelled Doctors are not conducting sterilization operation.
- ❖ The availability of equipment and instruments like Laparoscopic machine in L3 institutions.
- ❖ In accessible, Hard to reach areas and hill top areas of Lanjigarh, Th.Rampur and M.Rampur blocks
- ❖ Vacant posts of Field level functionaries like ANM & ASHAs.
- ❖ Regular holding of District QAC Meetings and its follow up.

The priorities of the district for the year 2012-13 are

- ❖ Strengthening Fixed Day Static Centre in all Level-2 MCH Centers
- ❖ One Laparoscopic machine to be purchased this year as one O & G Specialist have undergone laparoscopic training .
- ❖ Minilap kits to be supplied to each L3 & L 2 institution.
- ❖ Steps to be taken for sufficient medicines and related materials, investigation cost to be provided free of cost to all beneficiaries.
- ❖ Updatation of knowledge to service provider at least once in a year.

- ❖ Sympathetic attitude to surgeons when there is failure or death after sterilization
- ❖ Designating Counseling Centers, IEC / BCC, Ware house
- ❖ Steps may be taken for sufficient medicines and related materials, investigation cost to be provided free of cost to all beneficiaries.
- ❖ Fix day camps at DHH/SDH/PHC/CHC/PPC on Monday.
- ❖ Involvement of NGO/Accredited Hospital/Asha & AWW for OP & CC distribution.
- ❖ To popularize IUCD hooding should be at D HH & Different NAC area.
- ❖ Monitoring & evaluation team at district level.
- ❖ IUCD insertion at VHND session
- ❖ OP & CC to be distributed through GKS.
- ❖ Regular submission of stock position by Central Store Pharmacist.
- ❖ No Medicine or investigation should be done on payment.
- ❖ Supply of the FP materials to the blocks on basis on requirement or demand.
- ❖ Asha & AWW to be given responsibility for distribution of OP & CC under the close involvement of GKS..
- ❖ Post Partum Sterilization to be increased in all L3 MCH Centers.
- ❖ Wider publicity to popularize & acceptance of IUCD & NSV Sterilization through ASHA, Community Volunteers, Volunteers of PPP NGO who are managing PHC(N) & recently selected partners NGO for GKS capacity building through Nodal agency CARE INDIA, Odisha.
- ❖ Priority basis training to field level functionaries like-ANMs and LHVs for insertion of IUCD.
- ❖ Strengthening QAC for monitoring and supervision.
- ❖ Some trained doctor of Jaipatna, Koksara, Parla, Kalampur, and Th.Rampur are not performing Sterilization Operation independently. In this connection, necessary instruction may be issued from directorate to the district.
- ❖ Provision for transportation cost may be made particularly for tribal Blocks like-lanjigarh & Th.Rampur.
- ❖ Instruction has already been given to all Medical Officers to conduct sterilization Operation and IUD insertion in Parivar Kalyan Diwas (Monday) at FDS rather in Camp Mode
- ❖ More Surgeons to be trained in NSV technique
- ❖ IEC activities to be focused on male participation for promoting NSV
- ❖ Accreditation to Private institutions for strengthening FW activities is under process
- ❖ Sample checking should be done on FW methods by the State team especially IUD cases
- ❖ Capacity building /Orientation training to all District and Block level Officials those who are dealing Family Welfare Programme.
- ❖ IUD kit to be supplied to all staffs (SN/MPHS(F)/HW(F) trained in IUD insertion.

It is planned to improve Service Delivery (Limiting & Spacing) by following activities

1. Service Environment (Equipments, accessories, building and other facilities)

2. Availability of manpower (empanelled surgeons, IUCD trained Personnel, Counselors etc.) Empanelled surgeons....25 IUCD trained Personnel.....46
3. Mechanism or modous of operandi for the same (FDS, camp etc, PP sterilization)
4. Likewise for spacing (PPIUCD, CBD, home delivery by ASHA OR any other means)
5. IEC activities for the same.
6. Public Private Partnership Initiatives (if district aims to expand spacing as well as limiting)

A. In brief regarding the QAC and monitoring plan to ensure quality and also quantitative aspect.

The Dist.QAC meeting will be held in quarterly basis. Discussion will be in strengthening the quality of the FW programme .All institution will be visited by the committee to verify the quality of the acceptors, medicines, OT arrangement & quality of the instruments used for Sterilization & IUD insertion. The DQAC will also verify the records of the FW programme activities. It has been instructed all MO I/C to function FDS centers in which all HWs, MPHS will be exclusively involved in doing FW activities on each Monday and to submit the fixed tour programme of all HWs & MPHS(M&F)and also Block level officers such as MO IC ,PHEO,BPO, The programme has been chalked out for District level officers (ADMO(FW/Imm)/(Med)/DPM/DMCH/SI) to visit CHCs for supervision and monitoring of achievements. The monthly meeting of the CHCs will be attended by one District level officers for the purpose. Accordingly the DOL/Vehicle provision should be kept in the PIP 12-13.

7. Fund Utilization (2011-12)

Components	Budget/ Fund utilization as per FMR				
	1st	2nd	3rd	4th	Total (%)
Qtr.wise					
Female Sterilisation Camp	0	0	0	0.60	0.60 (117%)
NSV Camp	0	0	0	1.05	1.05 (88%)
Compensation for Sterilization(Female)	1.15	13.74	21.92	15.35	52.16 (107%)
Compensation for Sterilization(male)	0	0	0	2.48	2.48 (25%)
Spacing method	0.14	0.18	0.09	0.10	0.51

					(30%)
Training	0	0	0.31	2.40	2.8 (68%)
Procurement	0	0	0	2.18	2.18 (99%)
Operational cost for Dist.FW Bureau	0	0	0.06	0.15	0.21 (70%)
Monitoring & other activities	0.18	0.41	0.48	0.47	1.54 (99%)

Total fund allocation for the year 2012-13 in Family planning .Total ELA for the year 12-13 has been allotted NSV-641 TO-5777 Total Sterilization is 6419and funds allocation is for NSV is Rs.961500.00 and for Tubectomy is Rs.5777000.00 Total fund allocation is Rs.6738500.00

The fund utilized during last year for NSV Rs.26400.00 and for Tubectomy Rs.5199000.00 Grand Total of Rs.5463000.00

Chapter-01

Kalahandi district is situated in the southwestern portion of Orissa. Geographically this district lies between 19° 8' N 20° 25' N latitudes and 82° 32' E and 83° 47' E longitudes with geographical area of 7920 sq Km.

The population of the Kalahandi district as per the 2011 census is 157305; the sex ratio is 1003 per one thousand male. It has 13 blocks, 273 Grampanchayats, 2236 Rev villages (including 137 uninhabited villages), 13 Tahsils, and 2 Subdivisions. It has 4 towns Bhawanipatna Municipality, Junagarh & Kesinga NAC and Dharamgarh. Out of 13 blocks two are Tribal blocks1-Biswanathpur 2.Thuamulrampur. The blocks like Thuamul Rampur,B.N.Pur,M.Rampur,Bhawaniptna are having most difficult and high focus areas.The District is aware to its infant & Child mortalities due to communicable diseases like malaria,ARI,dirrhoea etc. as experienced previous years.

Experiencing in last couple of years, It has been observed that, the community of Kalahandi District is adopting only female sterilization operation. Decrease in progress of the sterilization,IUD,CC & OP in comparison to 2009-2010 due to short supply of CC & OP .There are 27 empanelled doctors in this year to conduct Sterilization operation, trained Para medical staff like LHV & ANMs to insert Cu T. It has been instructed to function fixed day static Centres in all the health institutions regularly, so that ELA for the year 2011-12 can be achieved.

The Rogi Kalyan Samiti (RKS), Gaon Kalyan Samiti (GKS) members are to be sensitised and utilize their services to provide F.P. services like sterilization operation, Cu.T, cases, C.C. & OP distribution. Now all the transaction relating to family planning supplies are tracked & monitored through

the Central store the persons of central store have undergone orientation training of logistic supply, management, documentation and maintenance of records which gives good result.

This year plan is emphasizing to strengthen fixed day static centers for family planning with target to achieve 100% ELA in fixed day sessions in all L1,L2,L3 level .All empanelled doctors have been deployed to conduct the sterilization except Karlamunda,Jaipatna, Kalampur,Parla and Kaksara CHC. The M.O. I/C of these institutions have been instructed to fix regular camps and intimate to the district for deployment of operating surgeons. The micro-plan in this regard have been finalized This year priority have been given to motivate NSV cases and arrange such camps to achieve the NSV target. A focus being given to popularize IUCD as a spacing method. The institution wise ELA for IUCD camps have been chalked out & trained IUCD inserters are instructed to insert the IUCD in the routine activities by motivating the beneficiaries. There is provision for incentives ASHA to motivate beneficiaries to retain IUCD and an amount of rs.100/- is earmarked per case.

The IUCD training programme is planned in which HW(F) & LHV will be trained in 2 nd qr. Of 2011. It is proposed to conduct training programme on NSV,Minilap at Dist.Hqr and proposal have been given to the state to train two O & G specialist in Laparoscopy.

Special attention will be given for wide publicity regarding regular functioning of FDS. Centre and wider publicity regarding the same among , ASHA, AWW along with the RKS & GKS members. The focus will be on spacing methods particularly IUCD Emphasis will be given on IUCD during population week & Family planning week. The review will be done institution wise regularly in District monthly meetings.

The District level quality assurance committee will be held regularly and discussed about the achievements as well as various deficiencies & difficulties to carry out the F.P.activities. The empanelled doctors list will be updated in the QAC meeting regularly.

Background

The District Kalahandi is spread over an area of 7920 Sq. Kms. The population of the Kalahandi district as per the 2011 census is 157305; the sex ratio is 1003 per one thousand male. and child sex ratio is 947/1000 male. According to the census 2011, the literacy rate of male is 73.34 & female is 47.27.

Administratively the district is divided in to two subdivisions, namely Sadar Bhawanipatna & Dharamagarh. It has 13 blocks,273 Grampanchayats, 2236 Rev villages(includind 137un –inhabited villages),13 Tahsils, ,and 2 Subdivisions.It has 4 towns Bhawanipatna Municipality,Junagarh& Kesinga NAC and Dharamagarh. Out of 13 blocks two are Tribal blocks1-Biswanathpur 2.Thuamulrampur. The blocks like Thuamul Rampur,B.N.Pur,M.Rampur,Bhawaniptna are having most difficult and high focus areas.The District is aware to its infant & Child mortalities due to communicable diseases likre malaria,ARI,dirrhoea etc. as experienced previous years.

No.of district Hqr Hospital	1
No.of blocks	13
No.of subdivisional Hospital	1
No.of CHCs	16
No.of PHC (New)	43
Other Hospitals	2
No.of Mobile Health units	26
Total No.of subcentres	241

Out of 242 sub centres nearly 76 are in the most vulnerable and hard to reach area.

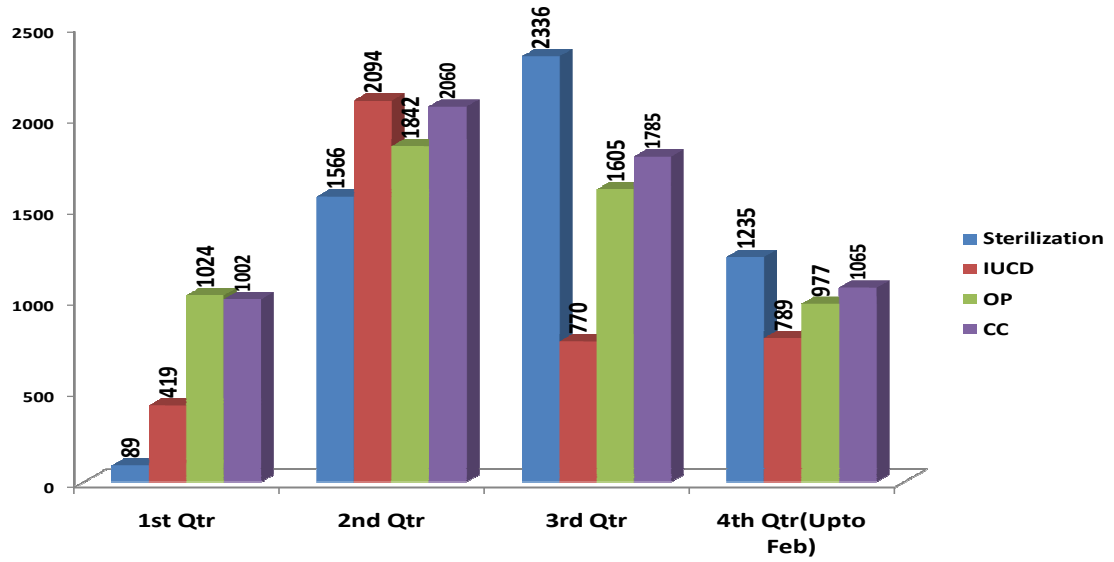
Chapter- 02

2. Situational Analysis :

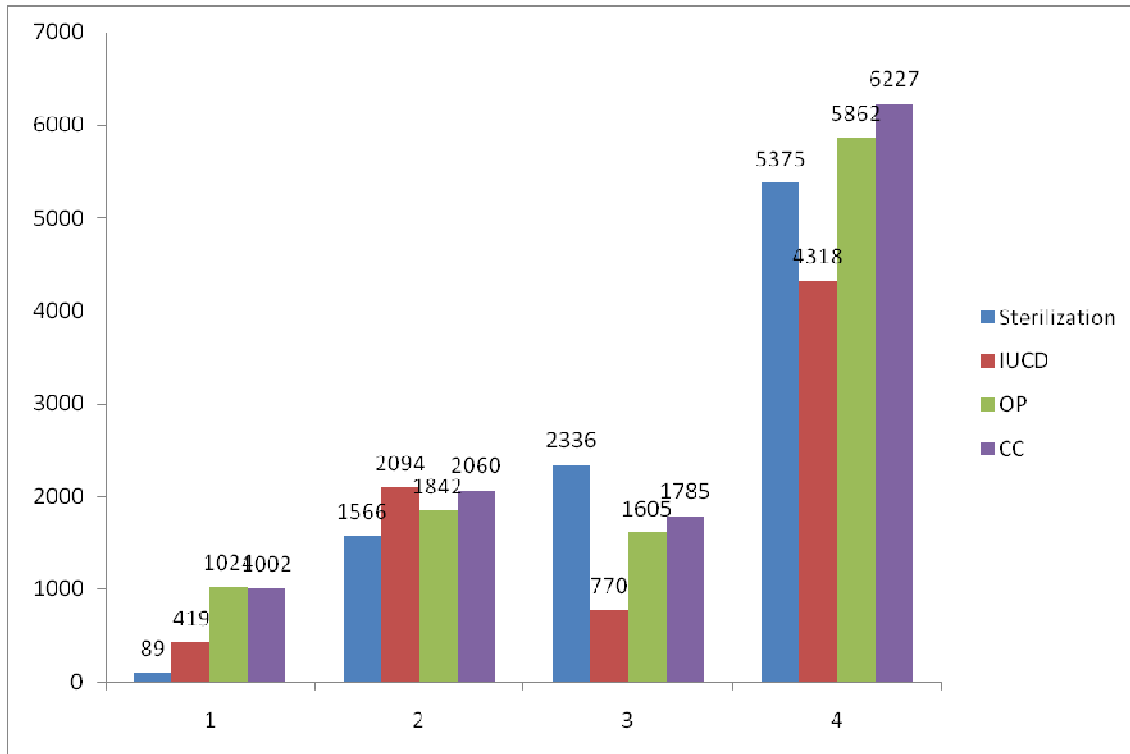
A comparative analysis of performances of Family planning programme with graphs as per HMIS 2009-10 and 2010-11 and comparison with the context of DLHS-III & DLHS-II or any study conducted by any districts /agencies/NGOs relating to the FP performances.

(Achievement against ELA-2011-12)
(IN NUMBERS & PERCENTAGE IN EACH QTR.)

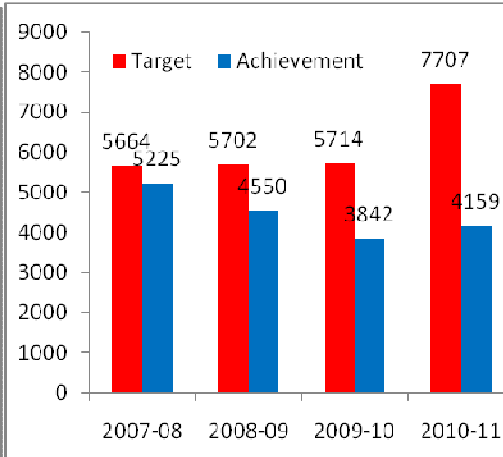
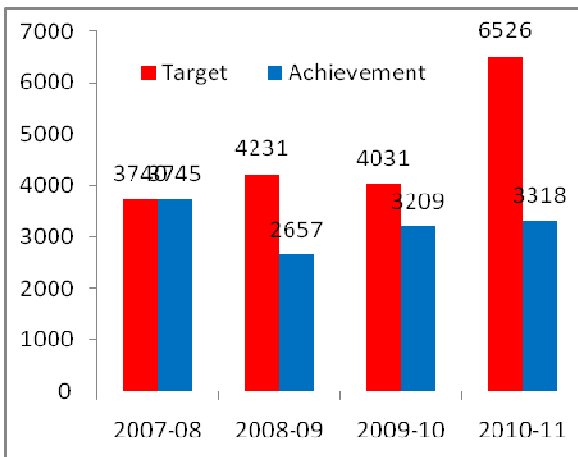
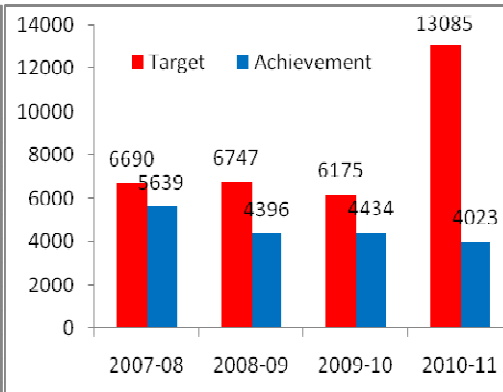
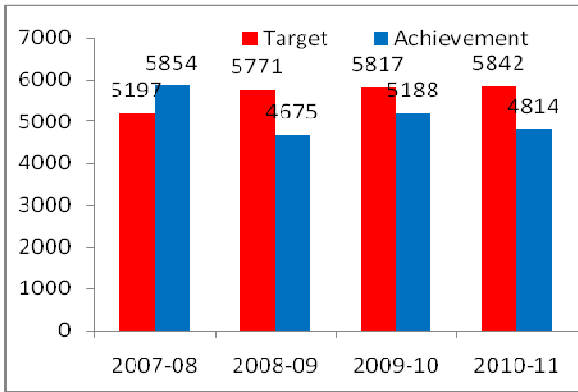
Components	ELA (2011-12)	1st Qtr	2nd Qtr)	3rd Qtr	4th Qtr	Achievement Total(11-12)
Sterilization	5849	89 (1.5%)	1566 (27%)	2336 (40%)	1385 (23%)	5375(92%)
IUCD	7061	419 (6%)	2094 (29%)	770 (17%)	1036 (14%)	4318 (61%)
OP	8339	1024 (12%)	1842 (22%)	1605 (19%)	1391 (16%)	5862 (70%)
CC	14152	1002 (7%)	2060 (15%)	1785 (21%)	1380 (10%)	6227 (44%)



3



(Quarter wise Achievement Status -2011-12 of Kalahandi district).



YEAR WISE FAMILY WELFARE ACHIEVMENT OF KALAHANDI DISTRICT

F.W. Activities	2007-2008			2008-2009			2009-2010			2010-2011		
	Target	Ach.	%	Target	Ach.	%	Target	Ach.	%	Target	Ach.	%
Sterilization	5197	5854	113%	5771	4675	81%	5817	5188	89%	5842	4814	82%
IUD	3740	3745	100%	4231	2657	63%	4031	3202	80%	6526	3318	51%
CC	6690	5639	84%	6747	4396	65%	6175	4434	72%	13085	4023	31%
Oral Pill	5664	3225	92%	5702	4550	80%	5714	3842	67%	7707	4159	54%

MCH Centers OF KALAHANDI DISTRICT.

Sl.No	Block	Name of the Institution	Category	Level
1	Bhawanipatna	Borda	CHC	II
2	Bhawanipatna	Bhawanipatna	DHH	III
3	Bhawanipatna	Deypur	PHC(N)	II
4	Bhawanipatna	Karlapada	PHC(N)	I
5	Bhawanipatna	Seinpur	SC	I
6	Bhawanipatna	Medinipur	SC	I
7	Bhawanipatna	Artal	PHC(N)	I
8	Bhawanipatna	Jugsaipatna	SC	I
9	Bhawanipatna	Kutrukhumar	SC	I
10	Dharmagarh	Tipiguda	PHC(N)	I
11	Dharmagarh	Parla	CHC	II
12	Dharmagarh	Dharmagarh	SDH	III
13	Golamunda	Chapuria	CHC	II
14	Golamunda	Farang	PHC(N)	I
15	Golamunda	Golamunda	PHC(N)	I
16	Jaipatna	Ranmal	OH	II
17	Jaipatna	Dhansuli	PHC(N)	I
18	Jaipatna	Rengalpalli	SC	I
19	Jaipatna	Jaipatna	CHC	II
20	Junagarh	Junagarh	CHC	III
21	Junagarh	Chiliguda	CHC	II
22	Junagarh	Dedar	PHC(N)	I
23	Junagarh	Charbahal	PHC(N)	I
24	Junagarh	Habaspur	PHC(N)	I
25	Kalampur	Kalampur	CHC	II
26	Karlamunda	Risida	OH	II
27	Karlamunda	Karlamunda	CHC	II
28	Kesinga	Kesinga	CHC	III
29	Kesinga	Pastikudi	CHC	II
30	Kesinga	Kandel	PHC(N)	I
31	Kesinga	Belkhandi	PHC(N)	I
32	Koksara	Ladugaon	PHC(N)	II
33	Koksara	Koksara	CHC	II
34	Lanjigarh	Lanjigarh	CHC	II
35	Lanjigarh	Lanjigarh Road	PHC(N)	I
36	Lanjigarh	Madhupur	PHC(N)	I
37	Lanjigarh	Bengaon	PHC(N)	I
38	Lanjigarh	Champadeipur	SC	I
39	Lanjigarh	Bijepur	SC	I

40	Lanjigarh	Malipada	SC	I
41	Lanjigarh	Biswanathpur	CHC	II
42	M.Rampur	M.Rampur	CHC	III
43	M.Rampur	Madanpur	PHC(N)	II
44	M.Rampur	Damkarlakhunta	SC	I
45	M.Rampur	Mohangiri	PHC(N)	I
46	M.Rampur	Urladani	SC	I
47	M.Rampur	Barabandha	PHC(N)	I
48	Narla	Narla	CHC	II
49	Narla	Palam	PHC(N)	II
50	Narla	Rupra Road	PHC(N)	I
51	Narla	Sergarh	SC	I
52	Narla	Rupra	PHC(N)	I
53	TH.Rampur	Nakrundi	PHC(N)	I
54	TH.Rampur	TH.Rampur	CHC	II
55	TH.Rampur	Adri	PHC(N)	I
56	TH.Rampur	Dumerpadar	SC	I
	Bhawanipatna	Artal	SC	
	Golamunda	Bordi	PHC(N)	
	Golamunda	Uchhala	SC	
	Lanjigarh	Kadamguda	SC	
	Lanjigarh	Kamarda	SC	
	Lanjigarh	Lanjigarh Road	SC	
	Lanjigarh	Madhupur	SC	
		Sub-Total		

*The Above Highlighted institutions (29) are Delivery Points of Kalahandi district. Where seven (07) institutions are not MCH Centers.

- DLHS-II & DLHS-III comparison

Marriage & Fertility	DLHS III		DLHS II	
	Total	Rural	Total	Rural
Percentage of girl's marrying before completing 18 years	29.9	30.8	25.9	36.8
Percentage of Births of Order 3 and above	41.8	41.8	48.5	49.6
Percentage of women age 20-24 reporting birth of order 2 & above	51.7	50.3	-	-
Percentage of birth to women during age 15-19 out of total births	4.2	4.6	-	-
Family Planning				
Any Method (%)	28.9	28.6	44.5	34.8
Any modern method (%)	27.8	27.7	33.9	25.3
Female Sterilization (%)	19.8	19.5	25.7	21.6
Male Sterilization (%)	0.2	0.3	0.0	0.0

IUD (%)	0.4	0.4	0.4	0.0
Pill (%)	6.8	6.8	5.4	3.5
Condom (%)	0.6	0.6	2.4	0.3
Unmet need for Family Planning				
Total unmet need (%)	34.9	34.8	18.8	19.6
For Spacing (%)	14.2	14.3	5.6	5.8
For limiting (%)	20.7	20.5	13.2	13.8

- Block wise performances for the year 2010-11 & 2011-12

Sl No.	Name of the CHCs/PPCs	2010-2011		2011-2012	
		Sterilisation	IUD	Sterilisation	IUD
1	B.N.Pur	334	270	192	385
2	Borda	286	158	494	303
3	Karlamunda	266	98	207	80
4	M.Rampur	283	192	243	250
5	Narla	342	295	471	310
6	Pastikudi	501	307	520	508
7	Th.Rampur	181	217	307	222
8	Bhawanipatna	254	125	288	225
9	Junagarh	520	324	571	385
10	Chapuria	516	465	345	489
11	Jaipatna	196	340	305	450
12	Kalampur	166	66	244	155
13	Koksara	391	123	425	154
14	Parla	355	198	440	248
15	Dharamgarh	146	115	234	112
16	Junagarh	79	25	89	42

- Contraceptive use in past two years in the block per 1000 population (IUCD, CC, OP)

Service delivery FP services –FDS and achievement in FDS centers

Block/	No. of functional FDS centers (2011-12)	Achievement In FDS(2011-12) in Fixed days in number		Achievement in camps		Total achievement Of the block in No.		Overall performances vs. FDS center coverage (%)		Remark
		Strzl	IUCD	Strzl	IUCD	Strzl	IUCD	Strzl	IUCD	
B.N.Pur	1	0	248	192	137	192	385			
Borda	1	0	98	493	205	493	303			
Karlamunda	1	0	10	207	70	207	80			
M.Rampur	1	240	156	0	94	240	250	72%	73%	
Narla	1	0	313	468	0	468	313			
Pastikudi	1	0	41	519	506	519	547			
Th.Rampur	1	0	66	304	156	304	222			
Bhawanipatna	1	288	225	0	0	288	225	105%	74%	
Junagarh	1	0	0	571	385	571	385			
Chapuria	1	0	74	345	415	345	489			
Jaipatna	1	0	90	305	360	305	450			
Kalampur	1	0	73	244	82	244	155			
Koksara	1	0	0	427	154	427	154			
Parla	1	0	0	440	248	440	248			
Dharamgarh	1	239	112	0	0	239	112	184%	75%	
Junagarh	1	0	42	89	0	89	42			

Post Partum & Plost abortion Contraception

Total number of postpartum sterilization done 2010-11 =83

& 2011-12 =153

Service Environment

Mention institution wise/Delivery point wise availability of critical equipments status

Sl. No.	Name of the institutions/Delivery points	Category (L1,L2 ,L3)	Name of the equipment	Units	Status (Functional/ non-functional)	Remark/Steps taken (if any)
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1	Bhawanipatna DHH	L3	Laprosopic Machine Minilap kit IUD kit Steriliser	03	Non functional Functional Functional	
2	Borda CHC	L2	Minilap kit IUD kit Steriliser	2	Functional	
3	Kutrukhamar SC	L1	IUD kit			
4	Seinpur SC	L1	IUD kit	0		
5	SDH Dharmagarh	L3	Laprosopic Machine Minilap kit IUD kit Steriliser	3	Functional	
6	Parla CHC	L2	Minilap kit IUD kit Steriliser	2	Functional	
7	Chapuria CHC	L2	Minilap kit IUD kit Steriliser	2	Functional	
8	Faranga PHC N	L1	IUD kit	0		
9	Golamunda PHC N	L1	IUD kit	1	Functional	
10	Jaipatna CHC	L2	Minilap kit IUD kit Steriliser	2	Functional	
11	Junagarh CHC	L3	Minilap kit IUD kit Steriliser	2	Functional	
12	Kalampur BPHC	L2	Minilap kit IUD kit Steriliser	1	Functional	

13	Karlamunda CHC	L2	Minilap kit IUD kit Steriliser	1	Functional	
14	Kesinga CHC	L3	Laprosopic Machine Minilap kit IUD kit Steriliser	2	Functional	
15	Pastikudi CHC	L2	Minilap kit IUD kit Steriliser	2	Functional	
16	Koksara CHC	L2	Minilap kit IUD kit Steriliser	2	Functional	
17	Ladugaon PHC N	L2	IUD kit	1	Functional	
18	Biswanathpur CHC	L2	Minilap kit IUD kit Steriliser	1	Functional	
19	M.Rampur CHC	L3	Laprosopic Machine Minilap kit IUD kit Steriliser	2	Functional	
20	Narla CHC	L2	Minilap kit IUD kit Steriliser	1	Functional	
21	Rupra PHC N	L1	IUD kit	1	Functional	
22	Th. Rampur CHC	L2	Minilap kit IUD kit Steriliser	1	Functional	
23	Artal SC	L1	IUD kit	0		

24	Bordi PHC N	L1	IUD kit	0		
25	Uchhula SC1	L1	IUD kit	0		
26	Kadamguda Lanjigarh SC	L1	IUD kit	0		
27	Kamarda SC1	L1	IUD kit	0		
28	Lanjigarh Road SC	L1	IUD kit	0		
29	Madhupur SC	L1	IUD kit	0		
30	Nakrundi PHC N	L1	IUD kit	0		

Quality Assurance Process:

State about the DQAC meetings and important decisions along with Action Taken Report. Number of meetings held and important decisions taken and complied. Like insurance claims, empanelment of surgeons etc. During last year 2011-12 two meetings were conducted One is on 18.08.2011 and 2nd is on 13.02.2012.

Logistics and Supply system

Stock in hands as on 1st April 2012

Tubal Rings (0 pairs) IUCD (1634 pcs.) OP (19584 cycles) CC (19916 Pcs.)

Quarter	CC			OCP			IUCD		
	Requirement	Available	Remark	Requirement	Available	Remark	Requirement	Available	Remark
Qr 1	270072	19916		28686	19584		1986	1634	
Qr 2	270072	0		28686	0		1986	0	
Qr 3	270072	0		28686	0		1986	0	
Qr 4	270072	0		28686	0		1986	0	

Private Sector Partnership & Accredited Institutions and NGO Involvement

Mention presently number of accredited institutions for the Family planning services & their contribution in 2011-12.

- Accreditation process for the private Hospital namely” Life Worth Hospital- Bhawanipatna “, and “Uma Clinic-Kesinga “are under process.

Human Resource Development

Total number of empanelled surgeons at the district and their respective place of posting and achievement during 2011-12.

Sl. No	Name of the Surgeon	Presently posted	Category Of Institute (L1/L2/L)	No. of sterilization operation conducted during the 2010-11				Remark (if delivery points ,
				Vasectomy	NSV	Minilap	Laparoscopy	
1	Dr. Puspansu Sahu, MS O&G	MO I/C, PPC, Bh.patna	L3	0	0	311	0	
2	Dr. Labanya prava Mund O & G	O & G Splt. DHH Bh.ipatna	L3	0	0	55	0	
3	Dr.P.K.Behera MS (GS)	Spl.Gen Surgery Bh.ipatna	L3	0	0	0	0	
4	Dr.Jalandhar Meher MS (GS)	AHO Municipality Bh.ipatna	L3	0		83	0	
5	Dr.Rameswar Mohanty MS (GS)	Surg.Splt, DHH Bh.ipatna	L3	0	7	0	0	
6	Dr. B.K.Kampa MD Paed.	Paed Splt DHH Bh.ipatna	L3	0	0	89	0	
7	Dr.S.C. Rath MS GS	Epiedomylogist O/O CDMO	L3	0	0	0	0	
8	Dr. A.K. Negi, MS O&G	SDH, Dh.garh	L3	0	0	453		
9	Dr. S.N. Panigrahi, MS O&G	PPC, Dh.garh	L3	0	0	1430	0	
10	Dr.R.K.Gantayat MBBS	A/S SDH Dh.garh	L3	0	0	16	0	
11	Dr. M.K. Tripathy, MBBS	MO I/C, UGPHC, B.N.Pur	L2	0	3	39	0	
12	Dr. Mano Majhi, MBBS	MO I/C, CHC, Borda	L2	0	0	57	0	
13	Dr.A.K.Agrawal MBBS	MO I/C UPHC M.Rampur	L3	0	2	751	0	
14	Dr. Pabitr Mohan Mallik MS (GS)	MO CHC Narla	L2	0	1	142	0	

15	Dr. P.K. Sahu, MBBS	MO I/C, CHC, Narla	L2	0	0	232	0	
16	Dr. P.C.Sahu MBBS	MO I/C, CHC, Pastikudi	L2	0	0	344	0	
17	Dr. Hemangini Meher, MS O&G	MO, CHC, Pastikudi	L2	0	0	32	0	
18	Dr.Debananda Bhoi MS (GS)	MO CHC Kesinga	L3	0	0	146	0	
19	Dr.Kambhupani Naik MS O& G	MO CHC Kesinga	L3	0	39	199	0	
20	Dr.Biswajit Sahu MBBS	MO I/C Th.Rampur	L2	0	0	49	0	
21	Dr.Niharranjan Bhoi MS O&G	CHC Junagarh	L3	0	0	0	0	
22	Dr. M.M. Tripathy MD Paed	Paed Splt CHC Junagarh	L3	0	23	0	0	
23	Dr.Sanjaya Kumar Behera MBBS	A/S Junagarah	L3	0	0	0	0	
24	Dr.Bhagaban Panda MD Paed.	Paed Splt PPC Junagarh	L3	0	0	11	0	
25	Dr.satyasai Naik MBBS	MO Kesinga	L3	0	7	941	0	
26	Dr.P.K.Sukla MBBS	A/S PHC(N)	L2	0	0	0	0	
27	Dr. S.K. Naik, MBBS	MO I/C, CHC, Parla	L2	0	0	0	0	
28	Dr. Sibasis Swain MBBS	A/S SDH Dharamgarh	L3	0	0	0	0	
29	Dr.Babulal Agrawal MS	Uma clinic Kesinga (PVT)		0	0	0	0	
30	Dr.B.B.Panda MBBS	Dharamgarh Rtd.surgeon		0	0	0	0	
31	Dr.Binaya Kumar Mishra	MO CHC Th.Rampur	L2	0	25	0	0	
32	Dr.P.P.Naik MS O & G	Life worth Hospital,Bh.Patna		0	0	0	0	
33	Dr.B.N.Das	DHH Bhawanipatna	L3	0	0	18	0	

Present status on Training till 1st April 2012

2011-12	NSV	IUCD	Minilap	Lap.	Prog.guidelines	Contraceptive update
Trained Personnel	5	32	5	One team(O & Gspl, OT SN , OT attended)	0	38

Monitoring and Evaluation:

Please analyze present process of monitoring of family welfare programm

- a. Data Analysis:-The Family welfare data has been collected from the Block CHCs/PPCs and analyzing at District level by the ADMO (FW) and Statistical Investigator/DMCH, NRHM and giving feedback to the CHCs/PPCs. The FW data has been also finalized at Dist.HMIS validation meeting in each month.
- b. Field visit: - The field visit has been done by the DMCH-NRHM,ADMO (FW/Imm)/SI & CDMO to check /Verify the field activities i.e IUD insertion, CC /OP distribution.
- c. Review meeting:-The Family welfare activities have been review /monitoring in the monthly meeting every month under chairmanship of Chief District Medical Officer, Kalahandi.
- d. DQAC Meeting is also been conducted quarterly under chairmanship of CDMO.

1. **Chapter-03**

Plan for 2012 – 2013

(source as per the norms suggested by state)

Sl.No	Name of the Block	ELA				Remark
		Sterilization	IUCD	CC	OP	
1.	B.N.Pur	385	411	804	428	
2.	Borda	562	722	1412	833	
3.	Karlamunda	294	282	524	310	
4.	M.Rampur	377	349	675	405	
5.	Narla	491	540	1050	620	
6.	Pastikudi	500	589	1217	630	
7.	Th.Rampur	310	386	715	432	
8.	Bhawanipatna	298	310	630	332	
9.	Junagarh	583	730	1357	860	
10.	Chapuria	458	517	989	632	
11.	Jaipatna	507	555	1080	640	
12.	Kalampur	325	310	580	344	
13.	Koksara	493	550	1050	635	
14.	Parla	510	560	1190	630	
15.	Dharamgarh	154	155	160	112	
16.	Junagarh	172	175	207	131	

The eligible couple for the district (from EC survey report of last year)

Blocks	15-19yrs	20-24yrs	25-29yrs	30-34yrs	35-39yrs	40-44yrs	45-49yrs	Remark
B.N.Pur	1548	2498	2952	2487	2505	2602	2298	
Borda	2191	5272	639	6465	5848	4553	2886	
Karlamunda	511	1477	1907	2330	1734	1237	827	
M.Rampur	1245	2742	3502	3060	2628	1805	1423	

Narla	1787	3116	3907	3962	3390	2883	2267	
Pastikudi	58513	58523	56315	50143	30314	21104	4798	
Th.Rampur	1546	2498	2932	2287	2385	2342	1198	
Bhawanipatna	1681	2022	1718	1698	2446	2975	1685	
Junagarh	2653	5776	6317	6076	5057	3830	2282	
Chapuria	1788	3285	3180	3721	3410	8100	2611	
Jaipatna	1633	3307	4127	4162	3965	3081	1395	
Kalampur	1590	1835	1525	1600	1522	2305	1861	
Koksara	1956	3964	4273	3118	6306	2692	2114	
Parla	1995	4164	4172	4118	6336	2692	2114	
Dharamgarh	118	397	493	430	308	351	342	
Junagarh	383	497	603	564	493	462	379	

A. Service Delivery Plan**Facility & Community Level (Spacing & Limiting)**

Functional FDS						
Delivery Points MCH centers						
	SC	PHC	CHC	SDH	DHH	Remark
As on 01.04.12	0	0	1	1	1	
Plan 12-13	02	05	14	1	1	
DPS non-MCH(strategic Locations)						
	SC	PHC	CHC	SDH	DHH	Remark
As on 01.04.12	0	0	0	0	0	
Plan 12-13	6	1	0	0	0	

Plan out and state regarding the financial plan/proposal to activate the fixed day static centers to provide the limiting and spacing services.

B. Human Resource Development Plan(Training Plan)

Training Required for 2012-13						
Name of the Trainees	From Inst.	IUCD	NSV	Minilap	Laparoscopic	Contraceptive update
<u>Dr.R.K. Gantayat</u>	<u>Dh.garh, L3</u>	√	√			√
<u>Smt. S.Mishra</u>	<u>do</u>	√				
<u>Smt. K.Patra</u>	<u>do</u>	√				
<u>Smt. D. Mallick</u>	<u>do</u>	√				
<u>Smt. M. Mohanty</u>	<u>do</u>	√				
<u>Dr. D. Mishra</u>	<u>do</u>	√				
<u>Smt. M.Pani</u>	<u>do</u>	√				
<u>Dr. K.Sahu</u>	<u>do</u>	√				
<u>Smt. F.Kerketta</u>	<u>do</u>	√				
<u>Smt. S. Sahu</u>	<u>do</u>	√				

<u>Dr. A.K. Jena</u>	<u>Capuria</u>	✓		✓		✓
<u>Dr.s.panda</u>	<u>do</u>	✓				
<u>Dr.J.K.Mohanty</u>	<u>do</u>	✓				
<u>Smt. R.K.Aind</u>	<u>do</u>	✓				
<u>Miss. N. Bag</u>	<u>do</u>	✓				
<u>Sri N. Nag</u>	<u>do</u>					✓
<u>Sri. M.Mohapatra</u>	<u>do</u>					✓
<u>Sri S.Mund</u>	<u>Chapuri</u>					✓
<u>S.Chhatria</u>	<u>do</u>	✓				
<u>Dr. S. Naik</u>	<u>Parla</u>	✓				
<u>P.B.Babu</u>	<u>do</u>	✓				
<u>N.Mahakud</u>	<u>do</u>	✓				
<u>Sri. K.C.Majhi</u>	<u>Tipiguda</u>					✓
<u>Dr. T.Das</u>	<u>Kokasar</u>	✓				✓
<u>Dr. P.K.Sukla</u>	<u>Ladugaon</u>	✓				✓
<u>Dr. S. Barik</u>	<u>Kokasar</u>	✓				✓
<u>T.Hansada</u>	<u>do</u>	✓				✓
<u>LM Raout</u>	<u>do</u>					✓
<u>S.M.Pradhani</u>	<u>do</u>	✓				✓
<u>Dr. A. Kujur</u>	<u>Jaipatna</u>	✓				
<u>Dr. R.N.Singh</u>	<u>do</u>	✓				✓
<u>Smt. R.Jyoti</u>	<u>do</u>	✓				
<u>Smt. C.Patra</u>	<u>Rengalpali</u>	✓				
<u>Smt. M.Mishra</u>	<u>Jaipatna</u>	✓				
<u>Smt. P.Raut</u>	<u>do</u>	✓				
<u>Smt. P.Larka</u>	<u>Ranamal</u>	✓				
<u>Smt. K.Das</u>	<u>do</u>	✓				
<u>Dr. M.K.Parida</u>	<u>Kalampur</u>	✓		✓		

<u>Smt. A.K.Kar</u>	<u>do</u>	✓				
<u>Smt. K.Minz</u>	<u>do</u>					✓
<u>Smt. N.Padhi</u>	<u>do</u>	✓				
<u>Sri L. Naik</u>						✓
<u>Dr. A.K. Dash</u>	<u>Junagarh</u>	✓	✓	✓		
<u>Dr. D.Sahani</u>	<u>Charbahal</u>	✓				✓
<u>Smt. K. Minz</u>	<u>Junagarh</u>	✓				✓
<u>Smt. M.Nath</u>	<u>do</u>	✓				✓
<u>Smt. S.Raut</u>	<u>do</u>	✓				
<u>Sri H.K.Sagadia</u>	<u>do</u>					✓
<u>Sri S. Kaibarta</u>	<u>Chiliguda</u>					✓
<u>Sri S.K.Padhi</u>	<u>Charbahal</u>					✓
<u>Dr. M.Majhi</u>	<u>Borda</u>	✓				✓
<u>Dr. R.Mishra</u>	<u>do</u>	✓	✓	✓		
<u>Smt. S.Naik</u>	<u>do</u>	✓				
<u>Smt. K.Das</u>	<u>do</u>	✓				
<u>Smt. F.Kandula</u>	<u>Deypur</u>	✓				
<u>Sri. S.Biswakarma</u>	<u>do</u>					✓
<u>Smt. S. Dei</u>	<u>Medinipur</u>	✓				
<u>Smt. M. Naik</u>	<u>Artal</u>	✓				
<u>Smt. G.Lakra</u>	<u>Seinpur</u>	✓				
<u>Smt.M.Barik</u>	<u>Kutrukhamar</u>	✓				
<u>Sri L.Dh.majhi</u>	<u>Borda</u>					✓
<u>Sri Sri S.K.Negi</u>	<u>do</u>					✓
<u>Sri B.Bag</u>	<u>Borda</u>					✓
	<u>Borda</u>	✓				
<u>Dr. A.Minz</u>	<u>Kesinga</u>	✓				
<u>Dr. K.P.Naik</u>	<u>do</u>	✓				

<u>Dr. D.N.Bhol</u>	<u>do</u>	✓				
<u>Dr. S.S.Naik</u>	<u>do</u>	✓				
<u>Dr. S.Jena</u>	<u>do</u>	✓				
<u>Smt. S.Dei</u>	<u>do</u>	✓				
<u>Smt. S.Bara</u>	<u>do</u>	✓				
<u>Smt.S.S.Kulu</u>	<u>do</u>	✓				
<u>Smt. S.Padhihari</u>	<u>do</u>	✓				
<u>Smt. M.Mohanty</u>	<u>do</u>	✓				
<u>Smt. P.Senapati</u>	<u>do</u>	✓				
<u>Smt. S.Minz</u>	<u>do</u>	✓				
<u>Dr.P.C. Sahu</u>	<u>Pastikudi</u>	✓				
<u>Dr. A.Sahu</u>	<u>do</u>	✓				
<u>Sri D.Barik</u>	<u>do</u>					✓
<u>Smt. M.Dei</u>	<u>do</u>	✓				
<u>Smt. T. Majhi</u>	<u>do</u>	✓				
<u>Smt. L. Nag</u>	<u>Kesing</u>	✓				
<u>Dr. B.K. Mishra</u>	<u>Karlamunda</u>	✓				✓
<u>Sri K.C.Dash</u>	<u>do</u>					✓
<u>Smt. R.Nag</u>	<u>do</u>	✓				
<u>Sri H.S.Mishra</u>	<u>Risida</u>					✓
<u>Smt. J.Lenka</u>	<u>do</u>	✓				
<u>Smt. R.Sabar</u>	<u>Karlamunda</u>	✓				
<u>Dr. K.Sadangi</u>	<u>M.Rampur</u>	✓		✓		
<u>Smt. P.Gochhayat</u>	<u>do</u>	✓				
<u>Smt. I.Tirkey</u>	<u>do</u>	✓				
<u>Smt. A.Raut</u>	<u>do</u>	✓				
<u>Smt. G.Kumar</u>	<u>do</u>	✓				
<u>Smt. B.Rana</u>	<u>do</u>	✓				

<u>Sri R.C.Barik</u>	<u>do</u>					Y
<u>Dr. M.Mallick</u>	<u>Mohangiri</u>					Y
<u>Dr. P.K.Sahau</u>	<u>Narla</u>	Y				
<u>Dr. P.M.Mallick</u>	<u>do</u>					Y
<u>Dr. A.Sahu</u>	<u>Rupra</u>	Y				
<u>Sri M. Karuan</u>	<u>Narla</u>					Y
<u>Sri BK Bhoi</u>	<u>do</u>					Y
<u>Sri T. Bhoi</u>	<u>Rupra</u>					Y
<u>Dr. B.Buda</u>	<u>BN Pur</u>	Y				
<u>Dr. SS Sahu</u>	<u>do</u>	Y	Y	Y		
<u>Sri B.Durga</u>	<u>do</u>					Y
<u>Smt. B.Dei</u>	<u>do</u>	Y				
<u>Smt. S.Chaudhuri</u>	<u>do</u>	Y				
<u>Smt. P.Sahani</u>	<u>L.Road</u>	Y				
<u>Smt. S.Dash</u>	<u>do</u>	Y				
<u>Smt. R.Sunani</u>	<u>Madhupur</u>	Y				
<u>Smt. K.Dash</u>	<u>Bengaon</u>	Y				
<u>BP M. Naik</u>	<u>do</u>	Y				
<u>Dr. B.K.Mishra</u>	<u>Th.Rampur</u>	Y		Y		
<u>Dr. B.Sahu</u>	<u>do</u>	Y	Y			Y
<u>Smt. P.Naik</u>	<u>do</u>	Y				
<u>Smt. M.Hembram</u>	<u>do</u>	Y				
<u>Sri R.Sabar</u>	<u>do</u>					Y
<u>Sri S.Majhi</u>	<u>do</u>					Y
<u>Smt. R.Pradha</u>	<u>Nakrundi</u>	Y				Y
<u>Smt. M.Hembram</u>	<u>Dumerpani</u>	Y				
<u>Smt. M.Majhi</u>	<u>Adri</u>	Y				
<u>Smt. J.Naik</u>	<u>Thrampur</u>	Y				

Focus is to train personnel from Delivery points as a priority.

The list to be prepared by analyzing the gaps and allocation in PIP12-13.

Training Calendar for Family Planning Services -2012-13:

	Q1	Q2	Q3	Q4	Total target	Person responsible
IUCD		3	3	3	9	DPHCO/DMCH
PPIUCD						
NSV/CV		1			1	DPHCO/DMCH
Minilap			1	1	2	DPHCO/DMCH
Contraceptive update(doctors)				1	1	DPHCO/DMCH
Contraceptive update(paramedics)		1			1	DPHCO/DMCH
Programme Guideline orientation						
Logistics & Supply chain management/CLMIS/ProMIS						
Counseling						

C.Service Environment Strengthening Plan

Sl. No.	Level of Institute (MCH Centers & Strategic Institutions)	IUCD Kits	Minilap Kits	Laparos cope	Sterilizers	Any other	Process of Procurement	
							District	State
1	B.N.Pur	8	5	0	2	0	District	
2	Borda	19	8	0	4	0	District	
3	Karlamunda	6	3	0	3	0	District	
4	M.Rampur	6	5	0	3	0	District	
5	Narla	7	6	0	4	0	District	
6	Pastikudi	12	8	0	5	0	District	
7	Th.Rampur	9	5	0	4	0	District	
8	Bhawanipatna	3	5	1	3	0	District	
9	Junagarh	18	11	0	4	0	District	
10	Chapuria	14	10	0	5	0	District	
11	Jaipatna	10	9	0	4	0	District	
12	Kalampur	6	5	0	3	0	District	
13	Koksara	9	6	0	6	0	District	

14	Parla	11	8	0	6	0	District	
15	Dharamgarh	2	3	0	2	0	District	
16	Junagarh	2	4	0	2	0	District	

F. Quality assurance Plan (Mention the plans to strengthen the DQAC and its functionality.)

Last year there are only two meetings of QAC in the district. This year it was planned to have regular QAC meeting to update the empanelled doctors list for sterilization operation and perform the assigned duty of facility audit, exit interview, access quality relating to prudent clinical practices. It is also agreed to have the QAC meeting in every third Friday of the first month of the quarter. That is on 3rd Friday of June, September. December and March 2013. Also it can discuss as and when require. Also discussion will be in strengthening the quality of the FW programme .All institution will be visited by the committee to verify the quality of the acceptors, medicines,OT arrangement & quality of the instruments used for Sterilisation & IUD insertion. The DQAC will also verify the records of the FW programme activities.

Action: MCH Coordinator & ADMO (FW)/SI

G. Plan for promoting Public Private Partnership for Family Planning :

Though we have four Public Private Partnership Hospitals running by Different NGOs and these hospitals are also level -1 hospitals namely-PHC (N)-Barabandha, PHC (N)-Nakrundi, PHC (N)-Dhansuli and PHC (N)-Adri, we are planning this year that we will give all family planning related training to these health functionaries so that they will pay a vital role promoting awareness among the community which is already media dark areas and most difficult to reach areas.

H. ELCO Survey :

Eligible Couple survey is the basic of the family planning programme and interventions. The last headcount and detail assessment of the eligible couples was done every year, Since then there was only annual updation. This year also conducting the Eligible Couple survey from 1st April, 12 by involving the ASHA, AWWs and Health Worker (Male and Females).As this year Directorate of Family Planning Welfare is going to provide the Eligible Couple Register to all ASHAs and

after implementation of this register at field level, that will definitely give a more apprehensive approach towards family planning programme.

Action: DMCH, ADMO (FW), MOI/C, BEE & BPO.

I. Communication Activities:

Besides the regular IEC activities, the programmatic intervention based IEC is a dire need to expand family planning services at the present scenario.

1. Orientation of RKS and GKS members on advantages of family planning, the requirement for facility up gradation, fixed day static center approach and the quality aspects and role of RKS for betterment of patients and clients.
2. Sensitization of the NYK volunteers/ppp NGO volunteers/community youth leader/selected ASHAs/ regarding the fertility issues and programme intervention.
3. Display boards in front of the PPCs citing about the provisions for the family planning methods as an information kiosk.
4. Wide publicity through banner, poster, wall paintings about the FDS centers, provisions and incentives in family planning programmes.

J. Monitoring & Supervision :

1. Periodic monitoring and field visit by the district officials (CDMO, ADMO(FW), DPM, DMCH, SI, SA, DPHCO) and QAC members to access facility, exit interview and verification of records and registers.
2. Tracking the progress through facility based reporting and action towards non reporting of the units and non performing doctors which will be reflect in Their annual performance appraisal report.
3. Quarterly review of Family planning programmes and institutionalizing the QAC meeting in every quarter.
4. Orientation-cum-training to the data handlers on data interpretation and analysis linkages with other reporting formats. The SA, SI ,PHEO and LHV's may be encouraged to operate on computers.

5. Advance supervision plan for Fix day Static Center especially on every Monday are to be made like as every Wednesday programme for Routine Immunization.

MONITORABLE INDICATORS FOR FAMILY PLANNING 2012-13

(Against each indicator, Districts are to provide consolidated quarterly targets and trace month wise achievements)

		Baseline (1st April 2012)	Q1 Target	Q2 Target	Q3 Target	Q4 Target	Annual
C	Family Planning						
<i>C.1</i>	<i>Service Delivery</i>						
C.1.1	% of total sterilization against ELA	92%	15%	30%	30%	25%	100%
C.1.2	% post partum sterilization	3%	0%	5%	5%	5%	15%
C.1.3	% male sterilizations	3%	0%	5%	5%	5%	15%
C.1.4	% of IUD insertions against planned	61%	25%	25%	25%	25%	100%
C.1.5	% IUD retained for 6 months	3%	0%	5%	5%	5%	15%
C.1.6	% Sterilization acceptors with 2 children	10%	0%	10%	10%	10%	30%
C.1.7	% Sterilization acceptors with 3 or more children	32%	0%	15%	15%	20%	50%
C.2	Quality						
C.2.1	% of complications following sterilization	4%	0%	2%	2%	4%	8%
C.3	Outputs						
C.3.1	% doctors trained as minilap	70%	0%	15%	15%		30%
C.3.2	% doctors trained as NSV	20%	0%	20%	20%	40%	80%
C.3.3	% doctors trained as laparoscopic sterilization	15%	0%	15%	30%	45%	85%

C.3.4	% ANM/LHV/SN/MO trained in IUD insertion	52%		20%	15%	15%	50%
C.4	<i>HR productivity</i>						
C.4.1	Average no. of NSVs conducted by trained doctors	30	160	160	160	160	641
C.4.2	Average no. of minilap sterilizations conducted by minilap trained doctors	229	1444	1444	1444	1444	5777
C.4.3	Average no. of laparoscopic sterilizations conducted by lap sterilization trained doctors	0	0	0	0	0	0
C.4.4	Average no. of IUDs inserted by MO trained in IUD insertion	29	168	168	168	168	672
C.4.6	Average no. of IUDs inserted by SN	0	100	100	100	100	400
	Average no. of IUDs inserted by LHV/ ANM	200	1537	1537	1537	1537	6148
C.5	<i>Facility utilization</i>						
C.5.1	Average no. of sterilizations performed in FRUs	268	343	343	343	343	1372
C.5.2	Average no. of sterilizations performed in 24x7 PHCs	336	1261	1261	1261	1261	5047

MONITORING AND SUPPORTIVE SUPERVISION TEMPLATE FOR DISTRICTS ON FIXED DAY STASTIC CENTRES

Activities	Time Line	Responsible Person/Officer	Reviewing Officer	Achieved Yes/NO	If No Reasons and Corrective action
Sterilization operations conducted in Each assigned L2 & L3 institutions (Delivery points, non –MCH Center)	1st Qtr May 30th 2012	Respective MOI/C & PHEO	CDMO & ADMO(FW)	No	To be conducted by June'2012
IUCD insertion & Services in another specific day (in all L2 & L1 centers and delivery points)					
The performance in Fixed day sites (for all methods)analysis and presentation to the District Team(ADMO(FW),CDMO, DPM ,DMCH– at District Level In block level the concern SA/the person in charge of reporting (regular incumbent) to share with BPO & BEE and present before the MOI/c	Every Month Each fortnight	SI/SA and ICA to prepare and share with DHIO in each month and DHIO & SI collectively responsible for presenting it to CDMO, ADMO(FW) DPM,DMCH. SA/SI of the block	CDMO Respective MOI/C at Block level	yes	District officials to take corrective steps if any MOI/c to take corrective measure, BPO /BEE for proceedings & meetings.
Camp scheduled after the quarter to address the backlog – organizing camps and other details as per guideline		(DPHIEO, Dy .DPHIEO)	ADMO(FW)	yes	

IEC/BCC activities regarding the a. Fixed Day Static Centers b. Camps	Fixed Days After each quarter/Decisions	(DPHIO, Dy .DPHIEO) BPHIEO	ADMO(FW) MOI/c	yes	District officials to take corrective steps if any
Monitoring visit to the Fixed Day Static Centers	Continuous	ADMO(FW) and assigned officials		yes	CDMO & ADMO(FW) to review and rectify

Activities	Time Line	Responsible Person/Officer	Reviewing Officer	Achieved Yes/NO	If No Reasons and Corrective action
MONITORING AND SUPPORTIVE SUPERVISION TEMPLATE FOR DISTRICTS ON LOGISTICS & SUPPLY CHAIN					
Assessment of stock /Contraceptive Commodity Security for free supply & ASHA		Central store Pharmacist/SI	ADMO(F W)	yes	
Updation in CLMIS/ProMIS					
Transportation of Family Planning Supplies Dist.to Block Block to Sector/SC		Central store Pharmacist/SI PHEO/Pharmacist	ADMO(F W) Moi/c	yes	
MONITORING AND SUPPORTIVE SUPERVISION TEMPLATE FOR DISTRICTS QUALITY ASSURANCE PLAN					
Periodic QAC meeting	Quarterly once	ADMO(FW/Imm)	CDMO	yes	
Facility audit/Exit Interview /verification of	Quarterly once	ADMO(FW/Imm)	CDMO	yes	

records	to each institution				
Failures/Complications		Statistical Investigator	ADMO(FW)	yes	
Insurance Claims etc.		Statistical Investigator	ADMO(FW)	yes	
Any other					

RESOURCE ALLOCATION

Family Planning Budget- 2012-13

PIP Code	Budget head	Unit Of measure	Base line Current status	Rate/Rs/Unit	Target				Total Target	Budget	Officer/Person Responsible
					Q1	Q2	Q3	Q4			
A3.1	Terminal/Limiting Methods				Q1	Q2	Q3	Q4			
A3.1.1	Dissemination of manuals on sterilization standards & quality assurance of sterilization services										
A3.1.2	Quarterly Female Sterilization Camps to address backlogs - 2 camp per qtr per district in the low performing zone	Per camp per quarter		15,000	2	2	2	2	8	1.20	Statistical; Investigator
A3.1.3	NSV camp - one camp per qtr per district in 10 districts (Koraput, Rayagada, Malkanagiri, Nabarangpur, Kalahandi, Nuapada, Bolangir, Sonepur, Mayurbhnaj and Kandhamal)	Per camp per quarter		35,000	1	1	1	1	4	1.40	DPHCO/SA
A3.1.4	Compensation for Female sterilization	Per Beneficiar		1,000	1571	1571	1571	1571	6284	62.84	SI/SA

A3.1.5	Compensation for Male sterilization	y Per Beneficiar y		1,500	214	214	214	214	856	12.84	SI/SA
	Total of Sterilization									78.28	
	Budget for Sterilization (85% of Total Sterilizations Budget)										
A3.1.6	Accreditation of private providers for sterilization services										
A3.1.6.1	Regional level orientation of accredited private providers on service protocols & reporting	Per inst.		2,500							
Sub-total A3.1 (excluding Sterilization & NSV)											
A3.2	Spacing Methods										
A3.2.1	IUD Camps										
A3.2.2	IUD services at health facilities/ compensation										
A3.2.2.1	For Beneficiary (to be utilized to meet essential requirements on IUD services at institution level)	Per beneciary		20	1608	1608	1608	1608	6432	1.28	Respective MOI/C & PHEO
A3.2.2.2	Incentive to ASHA for ensuring retention of IUD by beneficiary for 1yr	Per case		150	80	80	80	80	320	0.48	Respective MOI/C & BPO
A3.2.3	Incentive to private accridated institutions for IUD insertion services	Per case		75		134	134	134	402	0.30	ADMO(FW) & DMCH
A3.2.4	Social Marketing of contraceptives										
A3.2.4.1	Delivery of contraceptics by ASHA at door step in 18 high focus district										
A3.2.4.1.1	Sensitisation workshop at district level	Per district									
A3.2.4.1.2	ToT for ASHA training										
A3.2.4.1.3	Training of ASHA on operational modalities (except Angul dist)	Per ASHA		275	416	416	416	415	1663	4.57	DMCH
A3.2.4.1.4	Eligible copule survey										
A3.2.4.1.4.1	At District level (MO I/c, BPO, PHEO, SA, HQ LHV from block level, 2 staff from PPC, district level participants - CDMO, SI, MCH, DHIO, ICA, DPHEO)	per participant		500		30	30		60	0.30	DPHCOSI

A3.2.4.1 .4.2	At Sub district level - Orientation to programme officer, supervisor & ASHA at existing meeting platforms											
A3.2.4.1 .5	Distribution of contraceptives											
Sub-total A3.2												
A3.3	POL for FP/Others - Transportation of FW materials											
A3.3.1	State to district											
A3.3.2	District to Block											
A3.3.3	Block to Sector (ASHA to be provided contraceptives at sector meeting)											
A3.4	Repair of laparoscopes											
Sub-total A3.3 & A3.4						-	-	-		-	-	
A3.5	Other strategies/activities											
A3.5.1	Strengthening of Family Welfare Bureau for quality implementation of family planning programme											
A3.5.1.1	At State level											
A3.5.1.2	At District level											
A3.5.1.2 .1	Manpower											
A3.5.1.2 .2	Mobility cost for supportive supervision including QAC members											
A3.5.1.2 .3	Operational cost for Dist. FW Bureau for meeting exp., reporting, internet, telephone, postage etc.	Per district per month									-	
A3.5.2	Operationalization of fixed day static services - Family welfare day											
A3.5.2.1	Contingency for Fixed day static FP services											
A3.5.2.1 .1	At L3 FRU	Per inst. Per quarter		1,200	5	5	5	5	20	0.24		DMCH/SI
A3.5.2.1 .2	At L2 24x7	Per inst. Per quarter		600	19	19	19	19	76	0.45		DMCH/SI

A3.5.2.1 .3	At Other DPs										
A3.5.3	Promote postpartum and post abortion family planning services including sterilization in facilities having high institutional deliveries										
A3.5.3.1	Remuneration of Family Planning Counselor (32 DHH + SCB MCH) @Rs.10,000/- + PI Rs.1500/- (max 20%)	Per month									
A3.5.3.2	Sensitization of service providers on PP sterilization										
A3.5.3.3	Sensitizing ASHA & AWW to motivate the beneficiary										
A3.5.3.4	Orientation to PPC SN & ANM on FP counseling & on PP										
A3.5.5	Trainings										
A3.5.5.1	Laparoscopic sterilization training										
A3.5.5.2	Minilap training										
A3.5.5.2 .1	Minilap training for MO (Asst Surgeon of L3 & L2): twelve working days at District level	3/batch		41625	1	1			2	0.83	DPHCO/DMCH
A3.5.5.3	NSV training										
A3.5.5.3 .1	NSV training for MOs five working days. State level TOT	5/batch									
A3.5.5.3 .2	NSV training for MOs five working days. District level	5/batch		34800		1			1	0.34	DPHCO/DMCH
A3.5.5.3 .3	NSV TOT training for surgery specialist or PG holder in surgery at National Level .	5/batch									
A3.5.5.4	IUD insertion training										
A3.5.5.4 .1	Six days Dist level IUCD training for MO and SN	12/batch, person		76210		1	1	1	3	2.28	DPHCO/DMCH
A3.5.5.4 .2	Six days Block level IUCD training for ANM, LHV	10/batch		48530		2	2	2	6	2.91	DPHCO/DMCH
A3.5.5.4 .4	Three days Postpartum IUCD Training for O&G Spl and Staff Nurses of Respective Districts (5MOs+5SNs)	10/batch		50000				1	1	0.50	DPHCO/DMCH
A3.5.5.4 .7	1 day district level Orientation to Block MO I/C & PHEO on IUCD 375-A	30/batch		30000				1	1	0.60	DPHCO/DMCH

A3.5.5.4 .8	1 day Orientation to ANM, SN on IUCD 375-A at Block Level of L2 & L1 Institution	30/batch									
A3.5.5.5	Contraceptive update training										
A3.5.5.5 .1	One Day Contraceptive update & family planning guideline trg. for MOs (District)	30/batch									
A3.5.5.5 .2	Contraceptive update Trg. To Paramedics (SN,LHV,HWF,HWM,HSM) per Dist. One batch at District level	30/batch	26000			1		1	0.26	DPHCO/DMCH	
A3.5.5.6	Other FP Training										
A3.5.5.6 .1	Orientation training of newly trained surgeons on standards & protocols of FP methods (State)	30/batch									
A3.5.5.6 .2	Orientation training of FP Counsellor on standards & protocols of FP methods (State)	30/batch									
A3.5.6	Printing										
A3.5.6.1	Printing of sterilization case cards	Per card									
A3.5.7	Procurement of equipment & instrument for operationalisation of FP services										
A3.5.7.1	NSV kit	Per kit	2500		11			11	0.27	DPM	
A3.5.7.2	Minilap kit	Per kit	6000		19			19	1.14	DPM	
A3.5.7.3	IUCD kit	Per kit	2000		35			35	0.70	DPM	
A3.5.7.4	Laproscope machine	Per machine									
A3.5.8	Performance Based Awards										
A3.5.8.1	Best performing districts (3 districts)/block	Lump sum	20000			1		1	0.20	ADMO(FW)/DPM	
A3.5.8.2	Best performing Surgeon (Female & Male sterilization)	Lump sum	30000			1		1	0.30	ADMO(FW)/DPM	
A3.5.9	Monitoring										
A3.5.9.5	District level QAC meeting (Integrated with general QAC meeting)	Per district per quarter	2000	1	1	1	1	4	0.08	SI/SA	
A3.5.9.6	Quarterly family planning review by District Authorities										
A3.5.10	IEC/BCC										
A3.5.10. 1	Production of AV resource materials, broadcasting & telecasting in mass media channels										

A3.5.10.2	Advertisement of local dailies on FP										
A3.5.10.3	Observation of World Population Fortnight										
A3.5.10.3.1	At State level										
A3.5.10.3.2	At District level										
A3.5.10.3.2.1	District level function	Per district	5,000			1		1	0.05	DPHCO	
A3.5.10.3.2.2	Documentation	Per district	5,000			1		1	0.05	DPHCO	
A3.5.10.3.3	At Block & sub-block level										
A3.5.10.3.3.1	Block level function	Per block	1,500								
A3.5.10.3.3.2	IEC Van	Per van for 2 block	15,000	1	1	2	3	7	1.05	PHEO/BPO	
A3.5.10.3.3.3	Poster, leaflet, hoarding etc	Per block	10,000			13		13	1.30	BPO/PHEO	
A3.5.10.3.3.4	Village contact drive	Per block	10,000			13		13	1.30	PHEO	
A3.5.10.3.3.5	Documentation	Per block	1,000			13		13	0.13	BPO/PHEO	
A3.5.10.4	Sensitizing Kalyani Club members/ NYKs Youth volunteers on FP issues	Per block	1,000			13		13	0.13	PHEO	
A3.5.10.5	Board for Designated FP Day at designated institution (Promotion of Fixed day approach)					-		-			
A3.5.11	Wall painting - promotion of ASHA contraceptive in 18 high focus districts	4nos per block									
Sub-total A3.5											
									100.32		