

Draft



District Family Planning Plan



BALASORE

2012-13

District Family Welfare Bureau
Zilla Swasthya Samiti



Foreword

Since the inception of NRHM considerable improvements have been made in enhancing access to health care services. There is significant improvement in maternal and child health indicators in the district. It has been realized that Family Planning, one of the important programme, contributes significantly in reducing maternal and child morbidity and mortality. District is focusing on the achievements on family planning performances. However to reduce the high unmet need (18.2%) as per DLHS –III, the district is focusing upon the fixed day static center approach along with other interventions. The present plan emphasized upon both the limiting and spacing method. The focus is in the context of strengthening the different delivery points in providing family planning services as per the state mandate.

The new issues like contraceptive logistic supply management (C-LMIS), Contraceptive Home Delivery by ASHA, capacity building and rational positioning of human resources, operationalization of Fixed Day Static (FDS) Centers, Promoting Post Partum & Post Abortion Contraception & Male Sterilization (NSV) are also dealt in this plan.

With reference to the current scenario the plan identifies the action points towards a policy on workforce management, with emphasis on organizational, motivational and capability building aspects. It recommends on how existing resources of manpower and materials can be optimally utilized and critical gaps identified and addressed. It looks at how the facilities at different levels can be structured and become functional in providing services in an efficient and effective manner.

It is hoped that this District Family Planning Plan, 2012-13 will fulfill the intended purpose. I am thankful to ADMO (FW) and his team, DPM & DMCHC (NRHM) for the support in developing the plan.

**Chief District Medical Officer
Balasore**

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Executive Summary:

The district located at 21 degree 03' to 21 degree 59' North Latitude & 86 degree 20' to 87 degree 29' East Longitude and bordered by Midnapore district of West Bengal is in its North, the Bay of Bengal is on the east and Bhadrak district on the South whereas Mayurbhanj and Kendujhar districts are on its western side having 275 nos. of SC, 65 PHC (N), 1PHC, 16 CHC, 1 DHH and other system of institutions. The unmet need for the family planning services as per DLHS-III total, spacing (6.4) and limiting (11.8).

Presently the district provides the family planning services in 16 of FDS sites. The camps contribute to 81% of the ELA in the last year 2011-12. Out of this lap.(48%) minilap (51%) male sterilization (1%). The number of empanelled surgeons for sterilization operation as on 1st April 2012 is Lap. (2) Mini-lap (22) NSV (2) CV (2). Out of the empanelled surgeons 10 no. are O&G specialists. Durga Nursing home is accredited to provide family planning services. During the year 2011-12 a total 70 nos. sterilization conducted by this institution.

The ratio of sterilization operation per surgeon remains at Lap (1147) mini-lap (104) NSV/CV (08) during 2011-12.

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

1. Non availability of Laparoscopic machine (1 in running condition)
2. Few number of empanelled laparoscopic surgeon.

The availability of equipment and instruments Laparoscope -1, mini-lap kit- 19 NSV kit-24 and IUCD kit-24

The priority of the district for the year 2012-13, is to make 6 more Fixed day Static Centers and empanel more numbers of surgeons for Mini-lap & laparoscopic sterilization operation. To promote IUCD & contraceptive 76 personnel (36 doctors & 40 staff nurses & ANM) will be trained in IUCD insertion and 30 other paramedic staffs will be trained on Contraceptive up date .

This year plan is emphasizing clearly to strengthen fixed day static centers for family planning with target to achieve more than 40% of ELA in Fixed Day sessions in all MCH Centers by the empanelled doctors through a proper plan & monitoring. There will be focused attention for sterilization operation (Mini-lap) in the 7 institutions having O&G specialists in position and to increase Post partum sterilization from 8% to 10% during this year. More over in this year there will be an attempt to motivate for NSV and popularizing IUCD as a method of spacing through our partner NGOs, ASHA, AWW etc.

Special attention will be given for wide publicity regarding FDS centers and sensitization of community. NYK volunteers, ASHA & AWWs along with the GKS members will be oriented in family planning methods. The focus will be on spacing methods, particularly IUCD. Emphasis will be given on IUCD during observation of population week and family planning week to be observed during July & Sept.2012.

The Quality Assurance Committee will have meeting once in quarterly basis. Total 4 nos of meetings to be held in a year i.e. in every quarter ending, meeting will be held on 3rd week of every month as per the govt. guideline. The QAC will check the quality of the trainings and the programmes implemented in the field through facility audit & exit interview by the QAC members.

The fund utilized during last year 11-12

Budget Code	Budget head	Approved budget	Cumulative expenditure	Balance amount	% of Expenditure
A3.1.1.2	Orientation workshop at District level for Block MO I/C, empanelled operating surgeons including that of accredited institutions	15,000	-	15,000	0%
A3.1.2	Quarterly Female Sterilisation Camps to address backlogs - one camp per qtr per district in the low performing zone	60,000	55,000	5,000	92%
A3.1.4	Compensation for Female sterilisation	7,429,000	7,096,495	332,505	96%
A3.1.5	Compensation for Male sterilisation	1,517,250	24,350	1,492,900	2%
A3.2.2.1	For Beneficiary (to be utilised to meet essential requirements on IUD services at institution level)	178,800	74,960	103,840	42%
A3.2.2.2	Incentive to ASHA for ensuring retention of IUD by plants for 1yr	44,800	-	44,800	0%
A3.2.3	Incentive to private accredited institutions for IUD insertion services	41,850	-	41,850	0%
	Total	9,286,700	7,250,805	2,035,895	78%

Chapter-01

Balasure is one of the costal district situated between 20⁰ .03' to 21⁰ .59 north latitude and 86⁰ .20' to 87⁰ .29' East latitude. It is bounded by Bay of Bengal in the East, Mayurbhanj & Keonjhar district on the West, Bhadrak in the south & Medinapur district (W.Bengal) on the North. river Subarnarekha & Budhabalaga have passed through the district from west to east & influences the life and livelihood of the people .Administratively the district is divided in to two subdivisions namely Sadar & Nilagiri. In terms of accessibility Oupada & Jaleswar are the most difficult two blocks of the district.

District at a glance

Sl. No	Information	No
1	Total Population	23,17,419 (2011 census)
2	Total literacy rate	80%(DLHS 3)
3	Total no of health institutions	DHH- 1, SDH- 1CHC -16, PHC- 1, PHC (N) -65, SC -275
4	Total private healthy institutes	11
5	Total no of villages	3222 (Revenue 2971)
6	No of GPs	289
7	No of blocks	12

Health indicators (RCH specific)

SI No	Name of the indicators	DLHS 3	DLHS 2
1	% of Girls married before 18 years	15%	23%
2	Any method of contraception use	65%	57%
3	Male sterilization method	0.3	0
4	Female sterilization	30.1	22.9
5	IUD	0.3	0.4
6	CC	1.7	2.8
7	Unmet need	18.2	19.2
7.1	Spacing method	6.4	5.7
7.2	Limiting method	11.8	13.5

Four Post-Partum Center are functioning in urban areas of the district with primary focus on MCH services. Decreasing growth rate of population in Balasure compared to the state between 1991, 2001& 2011 gives a relatively good picture of health status in the district.

There are 28 delivery points in the districts. Out of which 27 is MCH centre 14- L2, 7- L3, 6- L1 and one SC other than MCH centre functioning as delivery points. A detailed list of delivery points given below:

Status of Health Institutions

Population	23,17,419
No of District Head Quarter Hospital	1
No. of Blocks	12
No of Sub-Divisional Hospital	1
No. of CHC	16
No. of PHC	1
Other hospital	2
PHC (New)	66
Sub-centre	275
No. of hospital bed available	541
No. of total medical institutions	86

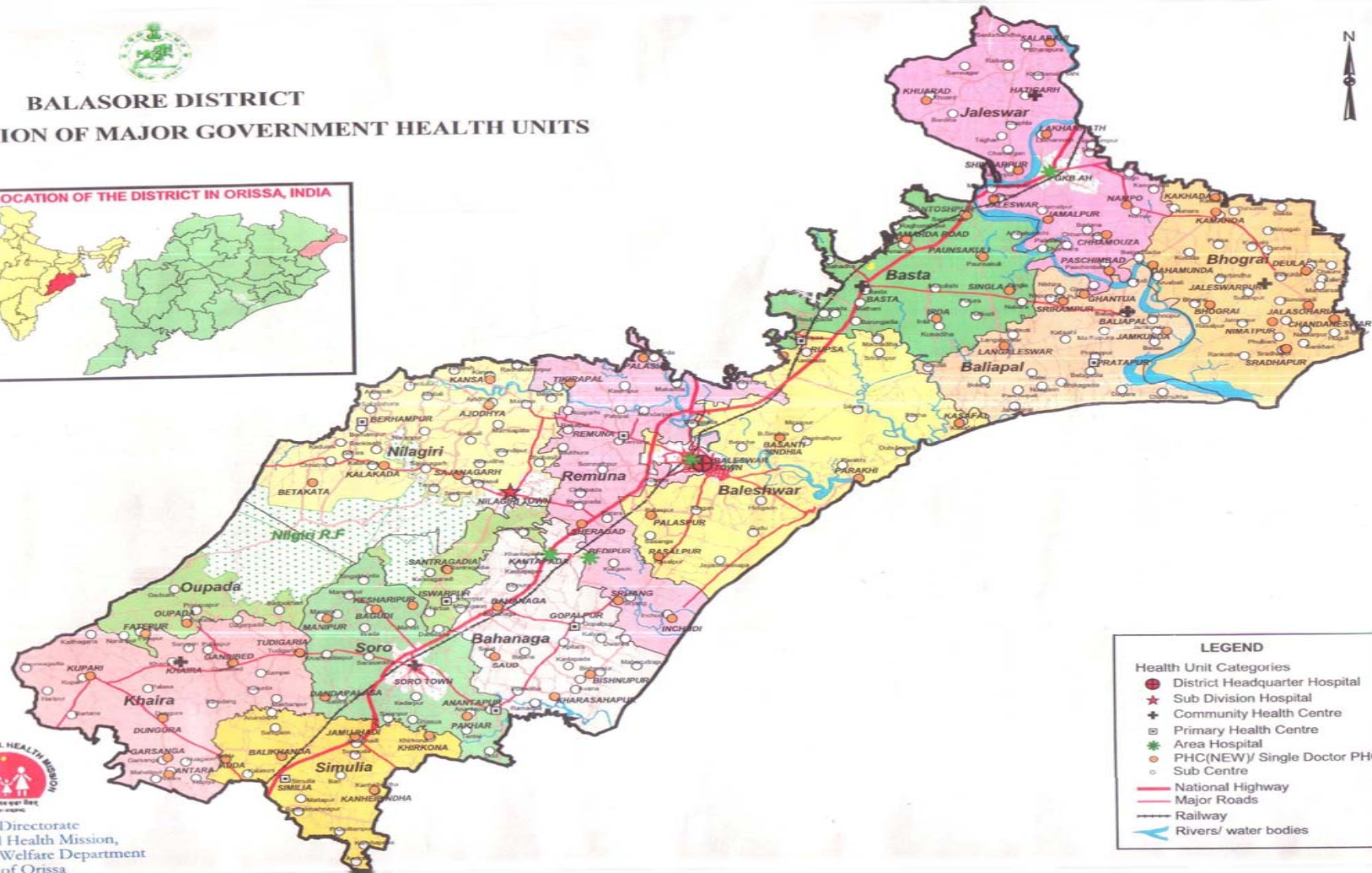
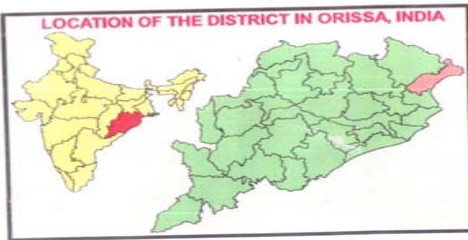
Delivery Point Status

Sl. No	Block	Name of the Delivery Point	Category	Status
1	Bahanaga	Gopalpur CHC	CHC	L2
2	Bahanaga	Khantapada CHC	CHC	L2
3	Balasore	DHH Balasore	DHH	L3
4	Balasore	Rupsa CHC	CHC	L2
5	Balasore	Kasafal - PHC N	PHC(N)	L1
6	Baliapal	Baliapal CHC	CHC	L3
7	Baliapal	Langaleswar - PHC N	PHC(N)	L2
8	Baliapal	Ratai SC	SC	L1
9	Basta	Basta CHC	CHC	L3
10	Basta	Punsukull PHC N	PHC(N)	L2
11	Basta	Santoshpur PHC N	PHC(N)	L2
12	Basta	Barungadia SC	SC	L1
13	Basta	Mukulsi SC	SC	L1
14	Bhogarai	Jaleswarpur CHC	CHC	L3
15	Jaleswar	GK Bhatta CHC	CHC	L3
16	Jaleswar	Hatigarh CHC	CHC	L2
17	Jaleswar	Paschimabad PHC N	PHC(N)	L1
18	Khaira	Khaira CHC	CHC	L2
19	Nilagiri	SDH Nilagiri	SDH	L3
20	Nilagiri	Berhampur CHC	CHC	L2
21	Oupada	Iswarpur CHC	CHC	L2
22	Remuna	Remuna CHC	CHC	L2
23	Simulia	Simulia CHC	CHC	L2
24	Soro	Soro CHC	CHC	L3
25	Soro	Anantapur PHC	PHC(N)	L2
26	Soro	Manipur PHC N	PHC(N)	L2
27	Soro	Mangalpur SC	SC	L1
28	Basta	Amarda Road SC	SC	



BALASORE DISTRICT

DISTRIBUTION OF MAJOR GOVERNMENT HEALTH UNITS




Mission Directorate
National Rural Health Mission,
Health & Family Welfare Department
Govt. of Orissa

VACANCY POSITION OF DOCTORS AND ALL OTHER STAFFS OF BALASORE DISTRICT

Sl No.	Category	Sanction Strength	In position	Vacancy
1	Doctors (MO)	184	141	43
2	Dental Surgeon	1	0	1
3	Staff Nurse	89	83	6
4	Nursing Sister	9	7	2
5	Matron	1	1	0
6	Asst. Matron	1	1	0
7	Pharmacist	95	90	5
8	Lab. Tech. (Senior)	4	3	1
9	Lab. Tech. (Junior)	16	15	1
10	Radiographer	7	7	0
11	Senior Clerk	18	18	0
12	Junior Clerk	25	23	2
13	EMT	1	0	1
14	POT	1	1	0
15	MRA	1	1	0
16	TSK	1	0	1
17	MPHS (Female)	47	44	3
18	MPHW (Female)	354	308	46
19	MPHS (Male)	70	69	1
20	MPHW (Male)	208	72	136
21	Opthal Asst.	6+3 cont.	9	0
22	Dental Tech.	1	1	0
23	V.S. Clerk	16	12	4
24	DPHCO	1	1	0
25	ADPHCO	1	0	1
26	PHEO	12	12	0
27	S.I. FW	1	1	0
28	S.A. FW	13	3	10
29	DPHN	1	1	0
30	V.S. (S.I.)	1	1	0
31	F.I.	1	0	1
32	Foreman	1	1	0
33	Mechanic	2	0	2
34	Driver	-	-	-
35	A. V. Cleaner	1	0	1
36	Ref. Mech.	1	1	0
37	Gr. IV	391	307	84
38	Steno	1	1	0
39	Junior LT Malaria	13	11+2	0

Contractual Staff provided by NRHM as on 16/07/2012 in Balasore.

SI No.	Position	Sanctioned	In position	Vacancy
1	Contractual Doctor	3	0	3
2	Contractual RTI/STI Doctor	1	0	1
3	Unani Doctor	1	0	1
4	DHH, Pharmacist	1	0	1
5	Staff Nurse	84	69	15
6	Staff Nurse(SNCU-II)	12	12	0
7	Additional ANM	55	22	33
8	Laboratory Technician	3	3	0
9	AYUSH Doctor	78	76	2
10	MHU AYUSH Doctor	2	2	0
11	MHU Pharmacist	2	2	0
12	MHU Attendant	2	1	1
13	District Programme Manager	1	1	0
14	District Account Manager	1	1	0
15	District Maternal Child Health Coordinator	1	1	0
16	District VBD Consultant	1	1	0
17	District Health Information Officer	1	1	0
18	District ASHA Coordinator	1	1	0
19	District GKS Coordinator	1	1	0
20	Regional Vaccine Store Coordinator	1	0	1
21	District Vaccine & Logistic Manager	1	1	0
22	Assistant Engineer	1	0	1
23	Work Consultant	1	1	0
24	Junior Engineer	3	3	0
25	YASHODA Coordinator	1	0	1
26	Immunization (computer Asst)	1	1	0
27	Hospital Manager	1	1	0
28	Block Programme Organizer	12	12	0
29	Block Accountant cum Data Assistant	12	12	0
30	Area Hospital Accountant	3	3	0
31	Sub-Divisional Hospital Accountant	1	1	0
32	Sub-Divisional Hospital Programme Manager	1	1	0
33	DPMU Accountant	1	1	0
34	DHH Accountant	1	1	0
35	Office Assistant	1	1	0
36	DPMU Attendant	1	1	0
37	MIS cum Field Coordinator	12	12	0
38	DEO, SNCU	1	1	0
39	DEO, Central Store	1	1	0
40	Regional Vaccine Store Helper	4	4	0
41	YASHODAs	15	15	0

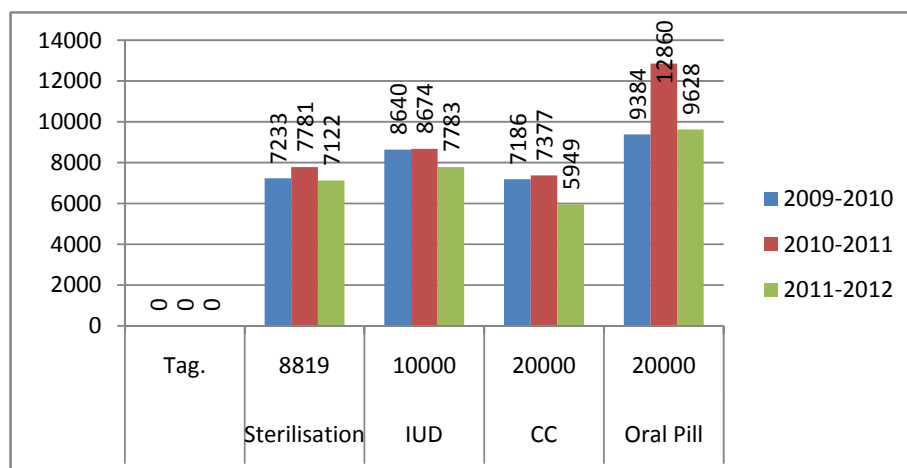
Janani Sishu Surakhya Karyakram has been implemented in 17 designated institutions of the districts since November 2011. Under this scheme 6 free services provided to the pregnant women. This programme covers DHH, 1-SDH, 15 CHCs including the Block CHCs. During the year 2011-12, 9 nos. of Biju Swasthya Sibira organized by the district in 8 different places covering 9 blocks of the districts.

Chapter- 02

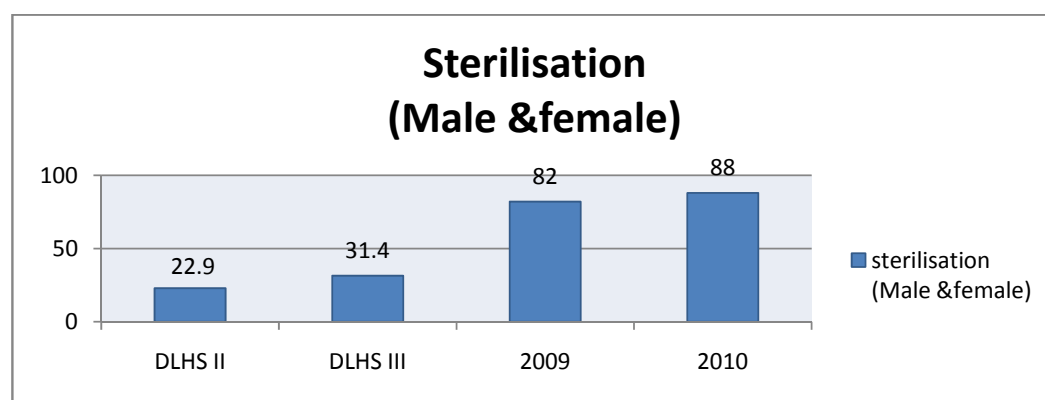
2. Situational Analysis :

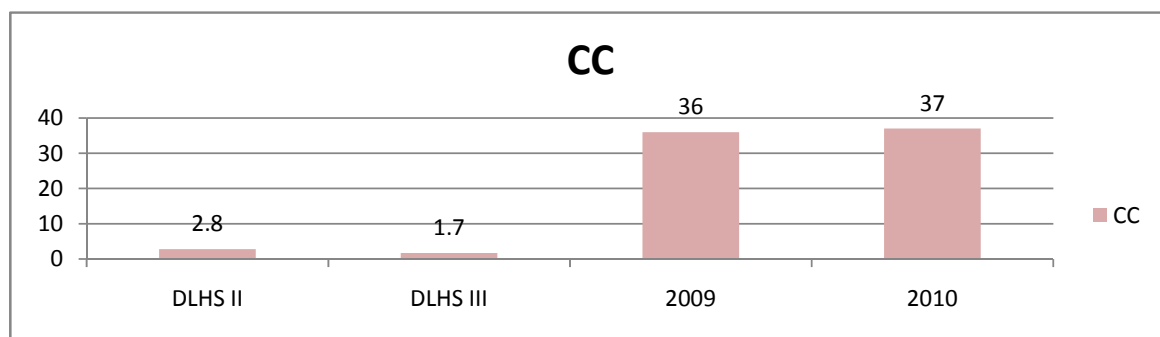
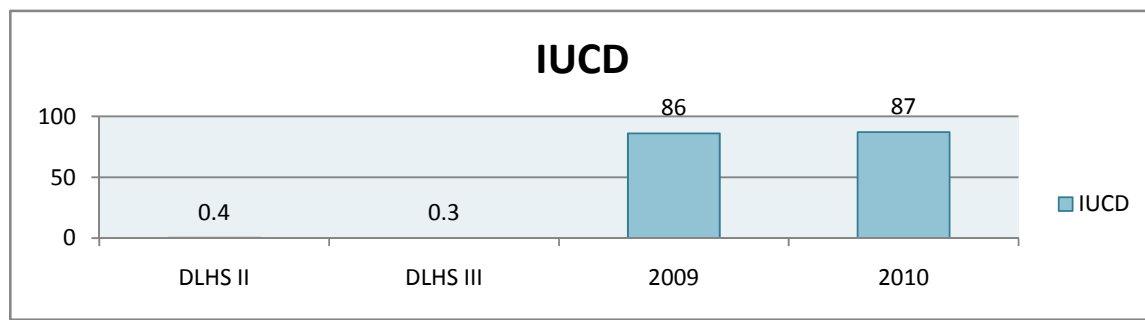
DLHS shows that there is an improving trend of various methods of contraception yet it is not encouraging as there is 18% of unmet need for any method of family planning. However there was an increase in acceptors ratio per 1000 population of different planning methods .

Family Planning performance of Balasore in percentage



FW Activities	2009-2010			2010-2011			2011-2012		
	Tag.	Ach.	%	Tag.	Ach.	%	Tag.	Ach.	%
Sterilization	8819	7233	82	8819	7781	88	8819	7122	81
IUD	10000	8640	86	10000	8674	87	10000	7783	78
CC	20000	7186	36	20000	7377	37	20000	5949	30
Oral Pill	20000	9384	47	20000	12860	64	20000	9628	48





SERVICE DELIVERY

For the year 2011-12 there were presence of 11 no of FDS in the district. Other than FD institutions the service of F.W permanent methods was given in camp mode .The performance of the FDS centers is as follows

Block 2010-11	Target FOR THE YEAR 2010- 11	Achievement In FDS(2010-11) in Fixed days in number		Achievement in camps		Total achievement Of the block in No.		Overall performances vs. FDS center coverage (%)	
		Strzl	IUCD	Strzl	IUCD	Strzl	IUCD	Strzl	IUCD
Baliapal	800	583	786	0	0	583	786	100	100
Basta	700	507	863	0	0	507	863	100	100
Gopalpur	550	392	434	0	0	392	434	100	100
Jaleswarpur	1000	829	989	0	0	829	989	100	100
Remuna	650	640	759	0	0	640	759	100	100
Rupsa	600	611	657	0	0	611	657	100	100
Simulia	375	375	441	0	0	375	441	100	100
Soro	500	433	439	0	0	433	439	100	100
PPC Balasore	300	439	138	283	0	722	138	61	100
PPC Nilgiri	200	84	64	0	0	84	64	100	100
PPC Soro	200	133	214	0	0	133	214	100	100

SERVICE DELIVERY FP SERVICES –FDS AND ACHIEVEMENT IN FDS CENTERS 2011-12

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 (%)	
		Strzl	IUCD	Strzl	IUCD	Strzl	IUCD	Strzl	IUCD
Baliapal CHC	1	544	907	0	0	544	907	100	100
Basta CHC	1	637	994	0	0	637	994	100	100
Berhampur CHC	0	0	330	491	0	491	330	0	100
Gopalpur CHC	0	0	148	370	0	370	148	0	100
Hatigarh CHC	0	0	751	710	0	710	751	0	100
Iswarpur CHC	0	0	343	255	0	255	343	0	100
Jaleswarpur CHC	1	571	822	0	0	571	822	100	100
Khaira CHC	0	0	771	327	0	327	771	0	100
Remuna CHC	1	655	812	0	0	655	812	100	100
Rupsa CHC	0	0	782	637	0	637	782	0	100
Simulia CHC	1	381	308	0	0	381	308	100	100
Soro CHC	1	406	318	0	0	406	318	100	100
PPC Balasore	1	372	109	382	0	754	109	49	100
PPC Jaleswar	0	0	52	80	0	80	52	0	100
PPC Nilagiri	1	119	86	0	0	119	86	100	100
PPC Soro	1	115	205	0	0	115	205	100	100
DURGA N.HOME	1	70	0	0	0	70	0	100	0

Post Partum & Post abortion Contraception

Total number of postpartum sterilization done 2010-11 & 2011-12

2010-11 = 422

2011-12 = 528

During the year 2010-11 the coverage of sterilization in FDS is 95 % camp accounts for only 5% because in this year only one surgeon conducting Laparoscopic in camp mode. But in the year 2011-12 two surgeon conducting Laparoscopic in camp mode as result the coverage of sterilization increased to 45% in camp mode. Another reason is acceptance of Laparoscopic is increased in comparison to Minilap.

Service Environment

INSTITUTION WISE/DELIVERY POINT WISE AVAILABILITY OF CRITICAL EQUIPMENTS STATUS

Sl. No	Block	Name of the Delivery Point	Status	Name of the equipments(IUCD/NSV /Minilap kit/Lap.)	Units	Status(Functional /Non-functional)	Remarks
1	Bahanaga	Gopalpur CHC	L2	IUCD,Minilap	1,1	Functional	
2	Bahanaga	Khantapada CHC	L2	IUCD,Minilap	1,1	Functional	
3	Balasore	DHH Balasore	L3	IUCD,Minilap,Lap,NSV	1,2,1,1	Functional	Partial defunct
4	Balasore	Rupsa CHC	L2	IUCD,Minilap	1,1	Functional	
5	Balasore	Kasafal - PHC N	L1			N.F	
6	Baliapal	Baliapal CHC	L3	IUCD,Minilap	1,1	Functional	
7	Baliapal	Langaleswar - PHC N	L2			N.F	
8	Baliapal	Ratai SC	L1	IUCD	1,1	Functional	
9	Basta	Basta CHC	L3	IUCD,Minilap	1,1	Functional	
10	Basta	Punsukull PHC N	L2			N.F	
11	Basta	Santoshpur PHC N	L2			N.F	
12	Basta	Barungadia SC	L1			N.F	
13	Basta	Mukulsi SC	L1			N.F	
14	Bhogarai	Jaleswarpur CHC	L3	IUCD,Minilap	1,2	Functional	
15	Jaleswar	GK Bhatta CHC	L3	IUCD,Minilap	1,1	Functional	
16	Jaleswar	Hatigarh CHC	L2	IUCD,Minilap	1,1	Functional	
17	Jaleswar	Paschimabad PHC N	L1			N.F	
18	Khaira	Khaira CHC	L2	IUCD,Minilap	1,1	Functional	
19	Nilagiri	SDH Nilagiri	L3	IUCD,Minilap	1,2	Functional	
20	Nilagiri	Berhampur CHC	L2	IUCD,Minilap	1,1	Functional	
21	Oupada	Iswardpur CHC	L2	IUCD,Minilap	1,1	Functional	
22	Remuna	Remuna CHC	L2	IUCD,Minilap	1,1	Functional	
23	Simulia	Simulia CHC	L2	IUCD,Minilap	1,1	Functional	
24	Soro	Soro CHC	L3	IUCD,Minilap,Lap	1,2,1,1	Functional	Partial defunct
25	Soro	Anantapur PHC	L2			N.f	
26	Soro	Manipur PHC N	L2	IUCD	1,1	Functional	
27	Soro	Mangalpur SC	L1			N.F	
28	Basta	Amarda Road SC	L1			N.F	

Quality Assurance Process :

District Quality Assurance Committee meeting has been conducted twice in a year. During the year 2011-12 total two nos. of DAQC meeting conducted.

DQAC meetings held = 2

Insurance claims = 13 (Submitted to ICICI Lombard)

Logistics and Supply system

Contraceptive	Stock as on 31 st March 2012	Requirement per quarter	Quarter wise requirement			
			Qr 1	Qr 2	Qr 3	Qr 4
CC	225000	360000	135000	360000	360000	360000
OCP	66000	40000	-	14000	40000	40000
IUCD	6740	3000	-	-	2260	3000
Tubal Ring	350	2500	2150	2500	2500	2500
ECP	1000	500	-	-	500	500

Private Sector Partnership & Accredited Institutions and NGO Involvement

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

1. Durga Nurshing Home - Strl=70 IUCD=0
2. Parivar Seva Clinic - Strl=00 IUCD=0
3. Sriram Hospital (During last part the Institution had got the permission from DFW,BBSR for accreditation.

Human Resource Development

The table below reflects the performances of empanelled surgeons during the year 2011-12.

Sl No	Name Of the doctors	Qualification	Present Station	Category (L1/L2/L3)	Remarks
1	Dr Girija Sankar Das	M.D (O & G)	PPC ,Balasore		
2	Dr Ranjan Ku Baral	M.D (O & G)	Rupsa CHC	L2	
3	Dr M.Pattnaik	M.S (G.S)	DHH Balasore	L3	
4	Dr Ratnakar Das	M.D (Medicine)	Basta CHC	L3	
5	Dr. Santosh Ku. Prusti	M.B.B.S	Basta CHC	L3	
6	Dr Kumud Ranjan Parida.	M.B.B.S	Basta UG P.H.C	L3	Contractual
7	Dr Arun Ku Bhuyan.	M.B.B.S	Basta UG P.H.C	L3	
8	Dr Ramapati Panda.	M.D (O & G)	Soro CHC,	L3	Contractual
9	Dr D. Sarangi	M.D (O & G)	Soro CHC	L3	
10	Dr Benudhar Hui.	M.D (O & G)	Basta UG P.H.C	L3	
11	Dr P.K.Sahoo.	M.D (O & G)	Baliapal CHC	L3	
12	Dr Subodh Ku Bez.	M.S (G.S)	DHH,Balasore	L3	
13	Dr Annapurna Jena	M.D (O & G)	PPC Nilagiri		
14	Dr P.K.Pradhan	M.B.B.S	SDH Nilagiri	L3	
15	Dr Rabindra Ku Saku	M.B.B.S	Nimatpur PHC (N)		
16	Dr B.K.Das	M.D (Pediatric)	Jaleswarpur CHC	L3	
17	Dr Sapan Ku Das	M.B.B.S	ChaneswarPHC (N)	L1	
18	Dr Mihir Ku Mohapatra	M.B.B.S	Pakhar PHC (N)		
19	Dr Anup Ku Ghosh	M.D (O & G)	DHH Balasore	L3	
20	Dr G.Behera	M.D (O & G)	DHH,Balasore	L3	
21	Dr B.Nanda	ENT Specialist	DHH,Balasore	L3	(Contractual,)
LAPROSCOPY SURGEON					
1	Dr Anup Ku Ghose.	M.D (O & G)	DHH,Balasore	L3	

Present status on Training till 1st April 2012

2011-12	NSV	IUCD	Minilap	Lap.	Prog.guidelines	Contraceptive update
Trained Personnel	0	32	3	0	0	30

Monitoring and Evaluation

- Data analysis – Monthly Progress Report like First Hand Report, HMIS, Technique wise breakup etc has been regularly analyzed in the district by district level officials and any short falls are discussed in the monthly review meetings with the block level officials for further improvement.
- Field Visit – Regular field visit has been done for monitoring of family planning programme in the district by Chief District Medical Officer, District Nodal Officer for family planning (ADMO(FW), DPHCO, DPM(NRHM) ,DPHN,DMCH & S.I in the district. All wing officers and the officers of DPMU while visiting the PHC/CHC for other purposes will also monitor the family planning programmes.
- Review meetings – During last year two Quarterly Review meeting held on Immunization and family welfare activities.

Chapter-03

Plan for 2012 – 2013

Sl.No	Name of the Block	ELA			
		Sterilization	IUCD	CC	OP
1	Baliapal CHC	800	870	1640	1640
2	Basta UG PHC	700	800	1500	1500
3	Berhampur PHC	550	600	1100	1100
4	Gopalpur PHC	550	600	1100	1100
5	Hatigarh CHC-II	919	990	1800	1800
6	Iswarpur PHC	350	410	700	700
7	Jaleswarpur CHC	1000	1250	2400	2400
8	Khaira CHC	500	850	1600	1600
9	Remuna PHC	650	800	1500	1500
10	Rupsa CHC-II	600	970	1840	1840
11	Simulia CHC-II	375	570	1000	1000
12	Soro CHC	500	570	1020	1020
13	PPC Balasore	625	800	1500	1500
14	PPC Jaleswar	300	220	400	400
15	PPC Nilagiri	200	200	300	300
16	PPC Soro	200	200	300	300
17	Durga N. Home	51	100	100	100
18	PPPPSS Balasore	15	100	100	100
19	Sriram Hosp	15	100	100	100
Total		9000	12000	20000	20000

THE ELIGIBLE COUPLE FOR THE DISTRICT 11-12

Blocks	15-19yrs	20-24yrs	25-29yrs	30-34yrs	35-39yrs	40-44yrs	45-49yrs
Soro CHC	431	3875	7105	4091	3014	1722	1292
Basta CHC	596	5367	9840	5666	4175	2386	1789
Berhampur CHC	392	3530	6472	3726	2746	1569	1177
Gopalpur CHC	430	3871	7097	4086	3011	1720	1290
Hatigarh CHC	614	5527	10134	5835	4299	2457	1842
Iswarpur CHC	254	2285	4188	2412	1777	1015	762
Jaleswarpur CHC	960	8644	15847	9124	6723	3842	2881
Khaira CHC	565	5081	9315	5363	3952	2258	1694
Baliapal CHC	628	5652	10361	5966	4396	2512	1884
Remuna CHC	658	5926	10865	6255	4609	2634	1975
RupsaCHC	739	6650	12191	7019	5172	2955	2217
Simulia CHC	375	3376	6190	3564	2626	1501	1125
Balasore PPC	388	3493	6404	3687	2717	1553	1164
Jaleswar PPC	74	664	1217	701	516	295	221
Nilagiri PPC	51	460	843	486	358	204	153
Soro PPC	95	857	1570	904	666	381	286

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	7	1	1	
Plan 12-13	0	0	14	1	1	

OPERATIONALIZATION OF FDS CENTER is still a challenge to the district due to different reasons like shortage of staff, lack of awareness etc. This year steps have been taken to make them functionalized achievement expected to be increased by 50 %.

Priorities of Family Planning Program:-

1. Fix day camp at DHH/SDH/AH and CHC (Block) level. (DHH every week, SDH/AH at least fortnightly and CHC at least once a Month)

PARIVAR KALYAN DIWAS(

Sl.no	Name of the Health Institution	Day	Name of the Operating Surgeon	Name of the ANM /LHV (IUD Inserter)
1	Baliapal CHC	Every Monday	Dr.P.K.Sahu(O & G)	Malati Kamila (LHV) ,Basanti Patra(ANM)
2	Basta UG PHC	Every Monday	Dr. S.K. Prusty	Anita Das(ANM) , Sandhyarani Das(LHV)
3	Berhampur PHC	Every Monday	Dr. Anil Kumar Dey	Subasini Poi(ANM)
4	Gopalpur PHC	Every Monday	Dr.A.K Patra(O& G)	Kaushlya Das(LHV) , Anita Rani Mishra(ANM)
5	Hatigarh CHC-II	Alternative Monday	Dr. A.K. Bhuyan	J.K.Dasmohapatra.LHV
6	Iswarpur PHC	Alternative Monday	Dr. Bijan Ku. Panda	Binapani Pal LHV Sabitri Tripathy(S/N) Sanjukta Dwari(ANM)
7	Jaleswarpur CHC	Every Monday	Dr.Bijay Ku Das	Smt Parirani Mallick (LHV) Smt Deeptikana Mukharji H.W (F)
8	Khaira CHC	Alternative Monday	Dr. Ramapati Panda (Posted at Balikhand PHC (N)	Abanti Majhi(LHV) Suprava Ghadai (ANM)
9	Remuna PHC	Every Monday	Dr.R.K. Baral	Urmila Dei(LHV) , Minati Mohanty (ANM)
10	Rupsa CHC-II	Every Monday	Dr.S.N. Dagar	Smt Shantilata Jena (LHV) Smt Arati Panda H.W (F)
11	Simulia CHC-II	Every Monday	Dr.Umesh Ch.Panda(O&G)	Labanya Mohanty(LHV) Manorama Dash(ANM)
12	Soro CHC	Every Monday	Dr Mihir Ku Mohapatra	Swarnamanjari Mohanty(LHV) Sarojini Mohapatra(LHV)
13	PPC Balasore	Every Monday	Dr Girija Snkar Das	Monorama Samal
14	PPC Jaleswar	Every Monday	Dr A. K. Sahoo	Smt Minati Das
15	PPC Nilagiri	Every Monday	Dr Aurnapura Jena	Smt Saraswati Panda
16	PPC Soro	Every Monday	Dr D. Sarangi	Smt Sumati Sethy

ii. **IEC/IPC ACTIVITIES:**

1. Publicity van: Publicity van cover 12 blocks of the district to sensitize the people regarding family planning & small family norm.
2. Mobilization of ASHA, CBOs, GKS members and other NGOs and dissemination at the GP monthly meetings.
3. Hoardings and standby at each center citing the services availability day and type of service availability.
4. Sensitization meetings will conduct at village level which covers the Kalyani cub, Youth clubs and other CBOs.
5. Leaflet and posters distributed to sensitize the people regarding family planning methods.
6. IEC and IPC will conduct through counseling at all VHND sessions.

Action: DPHCO & DPM

i. **MONITORING :**

Monitoring plan has been developed for the district level officials as per their allotted blocks/ institutions. The concerned officials are to visit the CHC and facilities and share their report on their visits for corrective action.

Action: DMCHC, DPM & ADMO (FW)

PLAN FOR STERILIZATION CAMP:

It is planned to hold the camp one fixed day & week in each block and accordingly the deputation of operating surgeon would be there for Laparoscopic cases. This time it is planned to have more NSV camps and to increase the male participation in accepting limiting methods. This time it is planned to have 30 NSV acceptors in our district.

Action: ADMO (FW), SI, DPHCO, DMCH,DPM

OBSERVATION OF WORLD POPULATION FORTNIGHT -2012:

Observation of World Population Fortnight during July-2012 will be there throughout the district with special focused plan for underserved areas like Berhampur, Hatigarh, Baliapal etc.

Action: ADMO (FW), DPHCO, SI & DPM

STEPS TO PROMOTE PP&PA STERILIZATION & IUCD INSERTION

One batch of training on PPIUCD has been completed. Dr. Girija Sankar Das, O& G Specialist, DHH is the trainer to our district. In all the monthly meetings this message i.e. to motivate and conduct the PPIUCD has been disseminated. ASHA, ANMs are motivated to use the opportunity to increase the PPIUCD acceptors among the eligible women.

Action: ADMO (FW), DMCHC, MO I/C

i. Monthly review in the district level meeting (**New Incentive Scheme for ASHA**)

Action	Time	Officer/Responsible	Budget
Orientation at the district level	Monthly Meeting	DPM, DAC, DMCH	
Block level orientation and dissemination at the sector level	Block Monthly meeting	MOI/c & BPO, BEE	
Sector level dissemination to ASHA and ANM	ASHA sector meeting and Health Sector meeting	BPO, BEE, SA, LHV, MPHS(M) and PHC(N) AYUSH doctors	
Reporting & Payment of incentives		DAC	
Follow-up and monitoring		BPO	

B. Human Resource Development Plan(Training Plan)

From Inst.	IUCD	NSV	Minilap	Laparoscopic	Contraceptive update	Counseling
L1 & L2	76	0	6	0	30	0

Training Calendar for Family Planning Services -2012-13:

	Q1	Q2	Q3	Q4	Total target	Person responsible
IUCD	1	2	4	0	7	DMCH & DPHCO
PPIUCD	0	1	0	0	1	DMCH & DPHCO
NSV/CV	0	0	0	0	0	
Minilap	1	1	0	0	2	DMCH & DPHCO
Contraceptive update(doctors)	0	0	0	0	0	
Contraceptive update(paramedics)	0	1	0	0	1	DMCH & DPHCO

C.Service Environment Strengthening Plan

Level of Institute	IUCD Kits	Minilap Kits	Laparoscopy	Sterilizers	NSV	MVA & EVA	Process of Procurement
L1,L2,L3(28)	25	137	02	20	71	34,30	District

D. Quality assurance Plan

The Quality Assurance Committee will have meeting once in quarterly basis. Total 4 nos of meetings to be held in a year i.e. in every quarter ending, meeting will be held on 3rd week of every month. The QAC will check the quality of the trainings and the programmes implemented in the field through facility audit & exit interview by the QAC members. The focus areas are Minilap training MBBS doctors, Post partum and Post abortion counseling and services, Strategy for Promotion of NSV, Accreditation of private facilities under PPP scheme, Promotion of 380 A IUCD, Skill enhancement & updating knowledge (Contraceptive update) of the service provider,

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

Only three private nursing homes i.e Durga N.H, Sriram Hospital & Parivar Seva Sadan are accredited to provide the Family Planning services. It is proposed to expand the facility to another 5 institutions during this year by critical assessment by end of third quarter.

Action: SI, DMCHC, DPM & ADMO (FW)

F. ELCO Survey :

Eligible Couple serves the basis of the family planning programme and interventions. The last headcount and detail assessment of the eligible couples was done in 2005. Since then there was only annual updating. This year it is proposed to conduct the Eligible Couple survey during the first quarter by involving the ASHA & Health Worker (Male and Females) as directly surveyors and LHV, MPHS (M), AYUSH doctors, BEE, SA & MO as supervisors. The activity will be as :

- i. District Level Sensitization Workshop for MO i/c, BPO, BEE etc.
- ii. One day Block Level Orientation for HW (F), HW(M), MPHS (M),LHV, SA, AYUSH MOs .

Action: SI, DPHCO,DPM, DMCHC, ADMO (FW), MOI/C, BEE & BPO

Activity	Time Line	Person /Officer Responsible	Monitoring	Submission of Abstract /Final report
District Level orientation	Sept. 15	SI/SA	ADMO (FW), DPM	
EC registers distributed to ASHA & ANMs	Sept.25 th	DAC & MCHC	DPM	
Block Level Orientation in respective health Sector meetings (ASHA & ANM)	8 th Oct.12	SA/BEE/BPO and AYUSH doctor of PHC	DMCH, DAC	
Completion of f the survey	30 th Nov.12	Sector Supervisor/PHC(N) AYUSH doctor and LHV/MPHS(M)	DPM, DMCH, DAC	15 th Dec.12

G. Monitoring & Supervision plan

Monitoring of the family planning programmes is done in every monthly meeting. Regular analysis of the data is done at the monthly meeting.

- **Report Review** – Monthly Progress Report like First Hand Report, HMIS, Technique wise breakup etc has been regularly analyzed in the district by district level officials. and any short falls are discussed in the monthly review meetings with the block level officials for further improvement.
- **Field Visit** – Regular field visit has been done for monitoring of family planning programme in the district by Chief District Medical Officer, District Nodal Officer for family planning (ADMO(FW), PHCO, DPM(NRHM) & S.I in the district. All wing officers and the officers of DPMU while visiting the PHC/CHC for other purposes will also monitor the family planning programmes.
- **Review meetings** – In the monthly coordination and review meeting the achievements of family planning programmes had been discussed regularly.
- **QAC status :-** In regular intervals the Quality insurance meeting is conducted in the chairmanship of Chief District Medical Officers

MONITORABLE INDICATORS FOR FAMILY PLANNING 2012-13

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

		Baseline (1 st April 2012)	Q1 Target	Q2 Target	Q3 Target	Q4 Target	Annual
C	Family Planning						
C.1	<i>Service Delivery</i>						
C.1.1	% of total sterilization against ELA	81%	15%	21%	34%	30%	100%
C.1.2	post partum sterilization	528	200	200	200	200	800
C.1.3	male sterilizations	17	0	20	20	20	60
C.1.4	% of IUD insertions against planned	77%	15%	20%	25%	25%	85%
C.1.5	% IUD retained for 6 months	77%	15%	20%	25%	25%	85%
C.1.6	% Sterilization acceptors with 2 children	4996	1500	1500	1500	1500	6000
C.1.7	% Sterilization acceptors with 3 or more children	1915	300	300	300	300	1200
C.2	<i>Quality</i>						
C.2.1	complications following sterilization	181	25	25	25	25	100
C.3	<i>Outputs</i>						
C.3.1	doctors trained as minilap	15	0	3			3
C.3.2	doctors trained as NSV	09	0	1	1	1	03
C.3.3	doctors trained as laparoscopic sterilization	02	0	1	1	0	02
C.3.4	% ANM/LHV/SN/MO trained in IUD insertion	25%	0	25%	0	25%	50%
C.4	<i>HR productivity</i>						

C.4.1	Average no. of NSVs conducted by trained doctors	0	0	20	20	20	60
C.4.2	Average no. of minilap sterilizations conducted by minilap trained doctors	2268	667	667	667	667	
C.4.3	Average no. of laparoscopic sterilizations conducted by lap sterilization trained doctors	3909	977	977	977	9778	
C.4.4	Average no. of IUDs inserted by MO trained in IUD insertion						
C.4.5	Average no. of IUDs inserted by MO trained in IUD insertion	2929	1000	1000	1000	1000	4000
C.4.6	Average no. of IUDs inserted by SN	1856	600	800	800	800	3000
	Average no. of IUDs inserted by LHV	1253	200	200	300	300	1000
	Average no. of IUDs inserted by ANM	1745	500	500	500	500	2000
C.5	<i>Facility utilization</i>						
C.5.1	Average no. of sterilizations performed in FRUs	1996	200	600	600	600	2000
C.5.2	Average no. of sterilizations performed in 24x7 PHCs	5126	200	1800	1800	1700	5500

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 September 2012	SI & DPHCO	CDMO & ADMO (FW)	Yes	
IUCD insertion & Services in another specific day (in all L2 & L1 centers and delivery points)		DPHCO, DPM & DMCH	CDMO & ADMO (FW)	Yes	
The performance in Fixed day sites (for all methods)analysis and presentation to the District Team(ADMO(FW),CDMO, DPM – 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 SA/SI of the block	CDMO & ADMO (FW)	Yes	
Camp scheduled after the quarter to address the backlog – organizing camp s and other details as per guideline		(DPHIEO, Dy .DPHIEO)	CDMO & ADMO (FW)	No	Due to shortage of Laparoscopic Machine & Surgeon.
IEC/BCC activities regarding the a. Fixed Day Static Centers b. Camps	Fixed Days After each quarter/Decisions	(DPHIO, Dy .DPHIEO) BPHIEO	CDMO & ADMO (FW)	Yes	
Monitoring visit to the Fixed Day Static Centers	Continuous	ADMO(FW) and assigned officials	CDMO & ADMO (FW)	Yes	

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	Every Month	DMCH & DAC	CDMO & ADMO (FW)	Yes	
Updation in CLMIS/ProMIS	Every Month	ICA	CDMO & ADMO (FW)	Yes	
Transportation of Family Planning Supplies Dist.to Block Block to Sector/SC	Every Month	DVLM BPHEO	CDMO & ADMO (FW)	Yes	
<u>MONITORING AND SUPPORTIVE SUPERVISION TEMPLATE FOR DISTRICTS QUALITY ASSURANCE PLAN</u>					
Periodic QAC meeting	Every Month	ADMO(FW) and assigned officials	CDMO & ADMO (FW)	Yes	
Facility audit/Exit Interview /verification of records	Every Month	DPHN, DPHCO, S.I, DPM, DMCH & DHIO	CDMO & ADMO (FW)	Yes	
Failures/Complications	Every Month	DPHCO & S.I	CDMO & ADMO (FW)	Yes	
Insurance Claims etc.	Every Month	DPHCO & S.I	CDMO & ADMO (FW)	Yes	
Any other	Every Month	DPHCO & S.I	CDMO & ADMO (FW)		



RESOURCE ALLOCATION

Family Planning Budget- 2012-13

PIP Code	BUDGET Head	Unit Of measure	Base line Current status	Rate/Rs/Unit	Q1	Q2	Q3	Q4	Total Target	Budget	REMARKS	Officer/Person Responsible
A3.1	Terminal/Limiting Methods											
A3.1.1	Dissemination of manuals on sterilisation standards & quality assurance of sterilisation services											
A3.1.2	Quarterly Female Sterilisation 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		DPHCO/DMCH
A3.1.3	NSV camp - one camp per qtr per district in 10 districts (Koraput, Rayagada, Malkangiri, Nabarangpur, Kalahandi, Nuapada, Bolangir, Sonapur, Mayurbhanj and Kandhamal)	Per camp per quarter		35,000	0	0	0	0	0	-		
A3.1.4	Compensation for Female sterilisation at public health institutions	Per Beneficiary		1,000	2092	2092	2092	2092	8368	83.68		SI/DMCH
A3.1.5	Compensation for Female sterilisation in accredited pvt. Health institutions.	Per Beneficiary		1,500	46	46	46	46	184	2.76	provision to be made as per Gol norm	SI/DMCH
A3.1.6	Compensation for Male sterilisation at public health	Per Beneficiary		1,500	231	231	231	231	924	13.86		SI/DMCH

	institutions											
A3.1.7	Compensation for Male sterilisation in accredited pvt. Health institutions.	Per Beneficiary		1,500	5	5	5	5	20	0.30	provision to be made as per Gol norm	SI/DMCH
	Total of Sterilisation									100.60		
A3.1.8	Accreditation of private providers for sterilisation services											
A3.1.8.1	Regional level orientation of accridated private providers on service protocols & reporting	Per inst.		2,000	0				0	-		
Sub-total A3.1 (excluding Sterilisation & NSV)										1.20		
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 utilised to meet essential requirments on IUD services at institution level)	Per beniciary		20	2694	2694	2694	2694	10776	2.16		DPHCO/DMCH
A3.2.3	Incentive to private accridated institutions for IUD insertion services	Per case		75	70	70	70	70	280	0.21		ADMO(FW)/DPM
A3.2.4	Social Marketing of contraceptives											
A3.2.4.1	Delivery of contraceptics by ASHA at door step in high focus district											
A3.2.4.1.1	Sensitisation workshop at district level	Per district									UNFPA support	
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					0		Budget under ASHA	

A3.2.4.1.4	Rest 12 districts (District sensitization & TOT etc.)										UNFPA support	
A3.2.4.1.4	Eligible copule survey											
A3.2.4.1.4.1	At District level (MO I/c, BPM, PHEO, SA, HQ LHV from block level, 2 staff from PPC, district level participants - CDMO, SI, DM RCH, DDM, ICA, DPHEO)	per participant		500	71				71	0.36	Training at Ganjam will be supported by UNFPA	DPM/DMCH/SI
A3.2.4.1.4.2	At Sub district level - Orientation to programme officer, supervisor & ASHA at existing meeting platforms										Met out of regular meeting cost	DPM/DMCH
A3.2.4.1.5	Distribution of contraceptics										Detail at A3.3	DVLM
Sub-total A3.2										2.72		
A3.3	POL for FP/Others - Trasportation of FW materials											DVLM
A3.3.1	State to district										Budget under Reg. Drug WH (NRHM Int.)	DVLM
A3.3.2	District to Block											DVLM
A3.3.3	Block to Sector (ASHA to be provided contraceptives at sector meeting)											DVLM
A3.4	Repair of laprascopes										State Eqp. Maint. Unit to look into	DPHCO
Sub-total A3.3 & A3.4										-		
A3.5	Other strategies/activities											
A3.5.1	Strengthening of Family Welfare Bureau for quality implemenatation of family planning programe											

A3.5.1.1	At State level											
A3.5.1.1.1	Manpower										Funded by UNFPA	
A3.5.1.1.2	Mobility cost for supportive supervision of State level programme officers including TST member visit	Per month		20,000						-	Budget under Prog. Mgt.	
A3.5.1.1.3	Operational cost	Per month		10,000						-		
A3.5.1.2	At District level											
A3.5.1.2.1	Manpower										RCH Coordinator will be given additional responsibility	
A3.5.1.2.2	Mobility cost for supportive supervision including QAC members			1,000							Budget under Prog. Mgt.	DPM
A3.5.1.2.3	Operational cost for Dist. FW Bureau for meeting exp., reporting, internet, telephone, postage etc.	Per district per month		2,500						-		DPM
A3.5.2	Operationalization of fixed day static services - Family welfare day Institutions ready for fixed day Laparoscopic services (L3 institutions in focus) : 45 prog. Institutions ready for Mini-lap services (Both L3 & L2 institutions are in focus but in the current year state is targeting all L3 & L2 institutions above PHC (N) level											

A3.5.2.1	Contingency for Fixed day static FP services (State is observing every Monday as Pariwar Kalyan Divas, providing limiting & spacing services across the state at delivery points. Another day as suitable to be decided by district authorities exclusively for IUCD.)											
A3.5.2.1.1	At L3 DP	Per inst. Per quarter		1,200	7	7	7	7	7	0.34	For facility readiness & mobility support for operating empaneled surgeons for FDS if the same institution is not having the surgeon as per FDS microplan , drop back facilities to post-operative serious cases in case of follow-up visits.	DPM/DMCH
A3.5.2.1.2	At L2 DP	Per inst. Per quarter		600	12	12	12	12	12	0.29		DPM/DMCH
A3.5.2.1.3	At Other DPs										Met out of RKS / Untied fund	DPM/DMCH

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 Counsellor (32 DHH + SCB MCH) @Rs.10,000/- + PI Rs.1500/- (max 20%)	Per month									Budget under HR	DPM/DMCH
A3.5.3.2	Sensitisation of service providers on PP sterilisation										UNFPA support	DPM/DMCH
A3.5.3.3	Sensitising ASHA & AWW to motivate the beneficiary										Orientation during Sector meeting	DPM/DMCH
A3.5.3.4	Orientation & training to Paramedics (SN, ANM & Yashoda Co-ordinators) on FP counselling & on PPS										UNFPA support	DMCH
A3.5.4	Trainings											
A3.5.4.1	Laparoscopic sterilisation training											
A3.5.4.1.1	TOT on Laproscopic sterilization at national Level (12) for O&G Spl. And SNs	3/Team		150,000								
A3.5.4.1.2	Laparoscopic sterilisation training for teams (three members : MO, SN, Attendant) :twelve working days at State/Regional Level	3/batch		55,735							Budget under Training	DMCH
A3.5.4.2	Minilap training											
A3.5.4.2.1	Minilap training for MO (Asst Surgeon of L3 & L2): twelve working days at District level	3/batch		41,625								

A3.5.4.3	NSV training												
A3.5.4.3.1	NSV training for MOs five working days. State level TOT	4/batch		60,000								-	
A3.5.4.3.2	NSV training for MOs five working days. District level	4/batch		34,800								-	
A3.5.4.3.3	NSV TOT training for surgery specialist or PG holder in surgery at National Level .	5/batch		200,000								-	
A3.5.4.4	IUD insertion training												
A3.5.4.4.1	Six days Dist level IUCD training for MO and SN	12/batch, person		76,210								-	
A3.5.4.4.2	Six days Block level IUCD training for ANM, LHV	10/batch		48,530								-	
A3.5.4.4.3	Three days Postpartum IUCD Training for O&G Spl and Staff Nurses of Respective Districts (5MOs+5SNs)	10/batch		50,000								-	
A3.5.4.4.4	Orientation training to PPIUCD and O&G Spl. At State Level (from DHH/MCH/Capital Hospital/ SIHFW and State Prog Manager) 1 day	20/batch		50,000								-	
A3.5.4.4.5	Training of SNs of DHH/MCH/Capital Hospital on FP counselling	30/batch											
A3.5.4.4.6	1 day State Level Orientation to ADMO (Fw) & O&G Spl. On IUCD 375-A	30/batch		60,000								-	
A3.5.4.4.7	1 day Orientation of trained persons on IUCD 375-A (total trained till date - 974 + nos expected to be trained by march, projected for 1350 trained	30/batch		30,000								-	

DMCH

	persons)												
A3.5.4.5	Contraceptive update training												
A3.5.4.5.1	One Day Contraceptive update & family planning guideline trg. for MOs (District)	30/batch		30,000								-	
A3.5.4.5.2	Contraceptive update Trg. To Paramedics (SN,LHV,HWF,HWM,HSM) per Dist. One batch at District level	30/batch		26,000								-	
A3.5.4.6	Other training / Orientation / Workshops											-	
A3.5.4.6.1	Orientation training of newly trained surgeons on standards & protocols of FP methods (State)	30/batch		60,000								-	
A3.5.4.6.2	Two days Orientation training of 33 FP Counsellors on FP counselling & FP methods (State)	30/batch		90,000								-	
A3.5.4.6.3	TOT on Contraceptive-Logistic MIS (State level)												
A3.5.4.6.4	Contraceptive-Logistic MIS training to Pharmacist, ANM (Block level) in six districts on logistics & supply chain management												
A3.5.4.6.5	Orientation of QAC members at state level (3 representatives from each district)	30/batch		60,000					0			-	
A3.5.5	Printing												

DMCH

A3.5.5.1	Printing of sterilization case cards	Per card		10					0		Budget under Advocacy for NRHM	DPM/DAM
A3.5.5.2	Printing of village wise EC register	Per register		40					0		Printed in 2011-12	
A3.5.5.3	Printing of resource material for FP Counselor	Per checklist							0		UNFPA support	
A3.5.5.4	Printing of green cards, sterilization & IUCD registers etc. at facilities.	Per card									Met from State budget	
A3.5.6	Procurement of equipment & instrument for operationalistion of FP services											
A3.5.6.1	NSV kit	Per kit		1,000					0		Budget under Procurement	
A3.5.6.2	Minilap kit	Per kit		2,000					0			
A3.5.6.3	IUCD kit	Per kit		2,000					0			
A3.5.6.4	Laprosocpe machine	Per mechine		630,000					0			
A3.5.7	Performance Based Awards											
A3.5.7.1	Best performing districts (3 districts)	Lump sum		150,000						-	Budget under HR	
A3.5.7.2	Best performing Surgeon (Female & Male sterilisation)	Lump sum		60,000						-		
A3.5.8	Monitoring											
A3.5.8.1	State Level											
A3.5.8.1.1	Bi annual review meeting at state level (participants: ADMO FW, DPM & MCH Co-ordinator)	Per meeting		60,000					0		Budget under M&E	
A3.5.8.1.2	Bi-annual QAC meeting (Integrated with general QAC meeting)	per meeting		5,000					0	-		
A3.5.8.1.3	Bi-annual review of the progress on ASHA contraceptives	Per meeting		60,000					0			

	programmes of 18 high focus district											
A3.5.8.2	Zonal level											
A3.5.8.2.1	Divisional quarterly Review meeting of ADMO and DPM	Per meeting		40,000					0		UNFPA support	
A3.5.8.3	District level											
A3.5.8.3.1	District level QAC meeting (Integrated with general QAC meeting)	Per district per quarter		1,000					0	-	Budget under M&E. Rest 6 district supported by UNFPA	ADMO(FW)/DPM
A3.5.8.3.2	Quarterly family planning review by District Authorities										Met out of Dist. Level monthly meeting (Inst. Strg.)	ADMO(FW)/DPM
A3.5.8.3.3	Bi-annual review meeting of district store personnel (SMO & Pharmacist)										UNFPA support	
A3.5.9	IEC/BCC											
A3.5.9.1	Production of AV resource materials, broadcasting & telecasting in mass media channels			600,000								DPHCO/DMCH
A3.5.9.2	Advetrisment of local dailies on FP			400,000								
A3.5.9.3	Sesitising Kalyani Club members/ Youth volunteers on FP issues (NSV)	Per block		1,000					0		Budget under IEC	
A3.5.9.4	Board for Designated Family Welfare Day at designated delivery points(Promotion of Fixed Day approach)			500								
A3.5.9.5	Wall painting - promotion of ASHA contraceptive in 18 high focus districts	4nos per block		6,000					0			

A3.5.9.6	Observation of World Population Fortnight											
A3.5.9.6.1	At State level											
A3.5.9.6.1.1	State level function	Per function		200,000					0			
A3.5.9.6.1.2	Monitoring			100,000					0			
A3.5.9.6.1.3	Best performing Surgeon (Female & Male sterilisation)			60,000					0			
A3.5.9.6.2	At District level											
A3.5.9.6.2.1	District level function	Per district		5,000					0			
A3.5.9.6.2.2	Documentation	Per district		5,000					0			
A3.5.9.3.3	At Block & sub-block level											
A3.5.9.6.3.1	Block level function	Per block		1,500					0			
A3.5.9.6.3.2	IEC Van	Per van for 2 block		15,000					0			
A3.5.9.6.3.3	Poster, leaflet, hoarding etc	Per block		10,000					0			
A3.5.9.6.3.4	Village contact drive	Per block		10,000					0			
A3.5.9.6.3.5	Documentation	Per block		1,000					0			
Sub-total A3.5									0.62			
A3.5.9.7	ASHA incentive for mobilising eligible couples opt for permanent method upto 2 children	Per case		1,000					0		Budget under ASHA	
A3.5.9.8	ASHA incentive for ensure spacing of 2 years after marriage	Per case		500					-		To be budgeted in next financial year PIP	
A3.5.9.9	ASHA incentive for ensure spacing of 3 years after birth of 1st child	Per case		500					-			
Total (excluding Sterilisation, NSV & IUD)									1.82			